health, insurance, and other relevant fields. Of the appointed members, at least two members shall be specifically selected for their knowledge of consumer issues and concerns and the view and perspectives of the general public.

Unless renewed by appropriate action prior to its expiration, the Secretary's Advisory Committee on Genetics, Health, and Society charter will expire two years from the date of establishment.

Dated: October 17, 2002.

#### LaVerne Stringfield,

Director, NIH Office of Federal Advisory Committee Policy.

[FR Doc. 02–27030 Filed 10–22–02; 8:45 am] BILLING CODE 4140–01–M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# National Committee on Vital and Health Statistics: Meeting

Name: National Committee on Vital and Health Statistics (NCVHS), Subcommittee on Standards and Security.

Time and Date: October 22, 2002; 9 a.m.-5 p.m. October 23, 2002; 9 a.m.-1 p.m.

Place: Hubert H. Humphrey Building, Room 705A, 200 Independence Avenue SW., Washington, DC.

Status: Open.

Purpose: În the morning session on October 22, the Subcommittee on Standards and Security will review the current status of implementation of the Health Insurance Portability and Accountability Act (HIPAA) and will discuss best practices resulting from that implementation. In the afternoon the subcommittee will be briefed on drug terminologies from the Food and Drug Administration (FDA) and will discuss and prepare for the November full Committee meeting relating to the issues of ICD-10-CM and ICD-10-PCS. On October 23 the subcommittee will review a summary of the testimony from the expert panel in medical terminology heard at the August 28-29 subcommittee meeting. From the review and discussion the subcommittee intends to define the scope and the criteria for recommendations to the Department on the selection of Patient Record Medical Information (PMRI) terminologies under HIPAA.

Contact Person for More Information:
Substantive program information as well as summaries of meetings and a roster of Committee members may be obtained from Karen Trudel, Senior Technical Advisor, Security and Standards Group, Centers for Medicare and Medicaid Services, MD: C5–24–04, 7500 Security Boulevard, Baltimore, MD 21244–1850, telephone: 410–786–9937; or Marjorie S. Greenberg, Executive Secretary, NCVHS, National Center for Health Statics, Centers for Disease Control and Prevention, Room 1100, Presidential

Building, 6525 Belcrest Road, Hyattsville, Maryland 20782, telephone: (301) 458–4245. Information also is available on the NCVHS home page of the HHS website: http://www.ncvhs.hhs.gov/where an agenda for the meeting will be posted when available.

Dated: October 15, 2002.

#### James Scanlon,

Director, Division of Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 02–26882 Filed 10–22–02; 8:45 am]  ${\tt BILLING\ CODE\ 4551-05-M}$ 

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

### Board of Scientific Counselors Meeting, National Institute for Occupational Safety and Health: Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following committee meeting:

*Name:* Board of Scientific Counselors, National Institute for Occupational Safety and Health (BSC, NIOSH).

*Time and Date:* 9 a.m.—3 p.m., November 20, 2002.

*Place*: Washington Court Hotel on Capitol Hill, 525 New Jersey Avenue, NW., Washington, DC 20001, telephone 202/628–2100, fax 202/879–7938.

*Status:* Open to the public, limited only by the space available. The meeting room accommodates approximately 50 people.

Purpose: The Secretary, the Assistant Secretary for Health, and by delegation the Director, Centers for Disease Control and Prevention, are authorized under Sections 301 and 308 of the Public Health Service Act to conduct directly or by grants or contracts, research, experiments, and demonstrations relating to occupational safety and health and to mine health. The Board of Scientific Counselors shall provide guidance to the Director, National Institute for Occupational Safety and Health on research and preventions programs. Specifically, the Board shall provide guidance on the Institute's research activities related to developing and evaluating hypotheses, systematically documenting findings and disseminating results. The Board shall evaluate the degree to which the activities of the National Institute for Occupational Safety and Health: (1) conform to appropriate scientific standards, (2) address current, relevant needs, and (3) produce intended results.

Matters to be Discussed: Agenda items include a report from the Director of NIOSH; Response to the BSC Report on NIOSH Beryllium Research; Discussion of Public Health Infrastructure for Occupational Safety and Health; Update on Musculoskeletal

Research; Update on Approaches to Reducing Occupational Health Disparities; Closing Report.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Roger Rosa, Executive Secretary, BSC, NIOSH, CDC, 200 Independence Avenue, SW., Room 715H, Washington, DC 20201, telephone (202)205–7856, fax (202)260–4464.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: October 17, 2002.

#### John Burckhardt,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 02–26910 Filed 10–22–02; 8:45 am] **BILLING CODE 4163–13–P** 

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### **Centers for Medicare and Medicaid Services**

# Notice of Hearing: Reconsideration of Disapproval of Alaska State Plan Amendment 01–009

**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS.

**ACTION:** Notice of hearing.

**SUMMARY:** This notice announces an administrative hearing on October 24, 2002, at 10 a.m., Seattle Regional Office; 2201 Sixth Avenue; Room 1206; Seattle, Washington 98121, to reconsider our decision to disapprove Alaska State Plan Amendment (SPA) 01–009.

**CLOSING DATE:** Requests to participate in the hearing as a party must be received by the presiding officer by November 7, 2002.

### FOR FURTHER INFORMATION CONTACT:

Kathleen Scully-Hayes, Presiding Officer, Centers for Medicare & Medicaid Services, 2520 Lord Baltimore Drive, Suite L, Baltimore, Maryland 21244–2670, Telephone: (410) 786– 2055.

**SUPPLEMENTARY INFORMATION:** This notice announces an administrative hearing to reconsider our decision to disapprove Alaska State Plan Amendment (SPA) 01–009. Alaska submitted SPA 01–009 on December 27, 2001.

The issue is whether the State's proposed rates are in compliance with the provisions of section 1902(a)(30)(A) of the Social Security Act (the Act),

which requires that payments under the plan be "consistent with efficiency, economy and quality of care."

The proposed SPA would increase the Medicaid payment rate for inpatient and outpatient services at facilities paid as Indian Health Service (IHS) facilities (including tribal facilities operated under contracts or compacts pursuant to Public Law 93-638). The IHS sets Medicaid billing rates for inpatient and outpatient services furnished by Alaska IHS facilities, which are announced in the Federal Register. Alaska's proposed rates would substantially exceed the IHS published rates, and Alaska provided no analysis of why it would be consistent with efficiency, economy, and quality of care to pay rates higher than the rate authorized by IHS. Absent any such analysis, the CMS found that the proposed rates were not consistent with efficiency, economy, and quality of care as required under section 1902(a)(30)(A) of the Act. Therefore, based on the reasoning set forth above, and after consultation with the Secretary as required under 42 CFR 430.15(c)(2), CMS disapproved Alaska SPA 01-009.

Section 1116 of the Act and 42 CFR, part 430, establish Department procedures that provide an administrative hearing for reconsideration of a disapproval of a state plan or plan amendment. The CMS is required to publish a copy of the notice to a state Medicaid agency that informs the agency of the time and place of the hearing and the issues to be considered. If we subsequently notify the agency of additional issues that will be considered at the hearing, we will also publish that notice.

Any individual or group that wants to participate in the hearing as a party must petition the presiding officer within 15 days after publication of this notice, in accordance with the requirements contained at 42 CFR 430.76(b)(2). Any interested person or organization that wants to participate as amicus curiae must petition the presiding officer before the hearing begins in accordance with the requirements contained at 42 CFR 430.76(c). If the hearing is later rescheduled, the presiding officer will notify all participants.

The notice to Alaska announcing an administrative hearing to reconsider the disapproval of its SPA reads as follows:

Mr. Robert Labbe,

Director, Division of Medical Assistance,
Department of Health and Social Services,
P.O. Box 110601, Juneau, AK 99811–0601.
Dear Mr. Labbe: I am responding to your
request for reconsideration of the decision to
disapprove Alaska State Plan Amendment

(SPA) 01-009. Alaska submitted SPA 01-009 on December 27, 2001. This SPA would increase the Medicaid payment rate for inpatient and outpatient services at facilities paid as Indian Health Service (IHS) facilities (including tribal facilities operated under contracts or compacts pursuant to Public Law 93-638). The IHS sets Medicaid billing rates for inpatient and outpatient services furnished by Alaska IHS facilities, which are announced in the Federal Register. Alaska's proposed rates would substantially exceed the IHS published rates, and Alaska provided no analysis of why it would be consistent with efficiency, economy, and quality of care to pay rates higher than the rate authorized by IHS. Absent any such analysis, CMS found that the proposed rates were not consistent with efficiency, economy, and quality of care as required under section 1902(a)(30)(A) of the Act. Therefore, based on the reasoning set forth above, and after consultation with the Secretary as required under 42 CFR 430.15(c)(2), CMS disapproved Alaska SPA 01-009.

I am scheduling a hearing on your request for reconsideration to be held at 10:00 a.m., October 24, 2002, Seattle Regional Office; 2201 Sixth Avenue; Room 1206; Seattle, Washington 98121, to reconsider our decision to disapprove Alaska SPA 01–009.

If this date is not acceptable, we would be glad to set another date that is mutually agreeable to the parties. The hearing will be governed by the procedures prescribed at 42 CFR, part 430.

I am designating Ms. Kathleen Scully-Hayes as the presiding officer. If these arrangements present any problems, please contact the presiding officer. In order to facilitate any communication which may be necessary between the parties to the hearing, please notify the presiding officer to indicate acceptability of the hearing date that has been scheduled and provide names of the individuals who will represent the State at the hearing. The presiding officer may be reached at (410) 786–2055.

Sincerely,

Thomas A. Scully.

Authority: Section 1116 of the Social Security Act (42 U.S.C. 1316); 42 CFR 430.18)

(Catalog of Federal Domestic Assistance Program No. 13.714, Medicaid Assistance Program)

Dated: October 11, 2002.

#### Thomas A. Scully,

Administrator, Centers for Medicare & Medicaid Services.

[FR Doc. 02–26904 Filed 10–22–02; 8:45 am]

BILLING CODE 4120-03-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Centers for Medicare & Medicaid Services

Notice of Hearing: Reconsideration of Disapproval of Virginia State Plan Amendment 01–14

**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS. **ACTION:** Notice of hearing.

SUMMARY: This notice announces an administrative hearing to be held on December 11, 2002, 10 a.m., Suite 216, The Public Ledger Building, 150 S. Independence Mall West; Philadelphia, Pennsylvania 19106, to reconsider our decision to disapprove Virginia State Plan Amendment 01–14.

**CLOSING DATE:** Requests to participate in the hearing as a party must be received by the presiding officer by November 7, 2002.

### FOR FURTHER INFORMATION CONTACT:

Kathleen Scully-Hayes, Presiding Officer, CMS, 2520 Lord Baltimore Drive, Suite L, Baltimore, Maryland 21244–2670, Telephone: (410) 786– 2055.

SUPPLEMENTARY INFORMATION: This notice announces an administrative hearing to reconsider our decision to disapprove Virginia State Plan Amendment (SPA) 01–14. Virginia submitted SPA 01–14 on December 14, 2001. The amendment would revise the State's payment methodology to provide for supplemental payments for inpatient and outpatient services furnished by non-state government owned or operated facilities.

The issue is whether this SPA sets out a definite payment methodology for supplemental payments for inpatient and outpatient services furnished by non-state government owned or operated facilities in compliance with the requirements of the Centers for Medicare & Medicaid Services' (CMS) regulations at 42 CFR 430.10 and 447.252(b). First, the methodology set out in the proposed plan amendment is contingent on unexplained factors including size criteria and Medicaid participation criteria that are not described, and the hospital's acceptance of an intergovernmental transfer agreement that is not described. As a result, the proposed State plan amendment does not "comprehensively" describe the State Medicaid program, and does not contain

Medicaid program, and does not contain "all information necessary for CMS to determine whether the plan can be approved to serve as a basis for Federal financial participation" consistent with