Strategic Plan and to submit relevant collaboration proposals.

On February 8, 2006, the Corporation released its Strategic Plan for 2006—2010. The plan, which benefited from extensive public input, is a blueprint for increasing the effectiveness of the Corporation's programs and operations, and for defining the unique role that national service can play in building a culture of citizenship, service, and responsibility in America. A link to the full text of the Strategic Plan and related documents may be found under the "About Us" column at the following Web site: http://www.nationalservice.gov/.

Chief elements of the plan include:

- Revised Mission Statement. The Corporation's revised mission statement reads, "Improve lives, strengthen communities, and foster civic engagement through service and volunteering."
- Statement of Guiding Principles. The plan articulates 10 principles, including putting the needs of local communities first and strengthening the public-private partnerships that underpin all of our programs.
- Identification of Five Focus Areas. The plan identities four focus areas where the Corporation intends to make a significant difference in the next five years: (1) Mobilizing More Volunteers; (2) Ensuring a Brighter Future for All of America's Youth; (3) Engaging Students in Communities; (4) Harnessing Baby Boomers' Experience; and (5) Directing resources to address disaster relief and preparedness. Each focus area requires that the Corporation's programs and initiatives work together to achieve common objectives and measurable targets.
- Blueprint for Managerial Excellence. The plan outlines ways to create and foster shared values that strengthen service delivery and ensure workforce accountability.

If your organization is interested in working with the Corporation in achieving its goals, you are encouraged to submit a collaboration proposal that is tied to the Corporation's Strategic Plan, strategic goals, and related programs and initiatives.

Dated: July 24, 2007.

# David Eisner,

Chief Executive Officer.

[FR Doc. E7-14653 Filed 7-27-07; 8:45 am]

BILLING CODE 6050-\$\$-P

#### **DEPARTMENT OF DEFENSE**

## Office of the Secretary

# Expansion of a TRICARE Demonstration Project for the State of Alaska

**AGENCY:** Department of Defense. **ACTION:** Notice of expansion of a TRICARE demonstration project for the State of Alaska.

**SUMMARY:** This notice is to advise interested parties of an expansion of a Military Health System (MHS) demonstration project entitled TRICARE Provider Reimbursement Demonstration Project for the State of Alaska. The original demonstration notice was published on November 20, 2006 (71 FR 67112–67113) and described a demonstration project to increase reimbursement for individual providers in the State of Alaska. The demonstration project will now also include increased reimbursement for health care services by hospitals that have been designated as Critical Access Hospitals (CAH) in the State of Alaska. TRICARE, under the demonstration project, will reimburse CAHs in a similar manner as they are reimbursed under Medicare. The expansion of the demonstration project will test the effect of this change on CAH provider participation in TRICARE, beneficiary access to care, cost of health care services, military medical readiness, morale and welfare. In particular, the demonstration will test whether the increased costs of provider payments are offset in whole or part by savings in travel costs, lost duty time, and other factors. This demonstration will be conducted under statutory authority provided in 10 U.S.C. 1092.

**DATES:** Effective Date: The expansion of the demonstration will be effective July 1, 2007, and will continue for a period of 3 years from the date of the original demonstration.

ADDRESSES: TRICARE Management Activity (TMA), Medical Benefits and Reimbursement Systems (MB&RS), 16401 E. Centretech Parkway, Aurora, CO 80011.

**FOR FURTHER INFORMATION CONTACT:** For questions pertaining to the expansion of the demonstration/Critical Access Hospital portion of the demonstration, Ann N. Fazzini, 303.676.3803.

#### SUPPLEMENTARY INFORMATION:

# A. Background

For additional information on the TRICARE demonstration project for the State of Alaska, please see 71 FR 67112–67113. The demonstration notice

focused on increased payment rates for individual providers to determine the impact on access to care.

This expansion of the demonstration applies to Critical Access Hospitals (CAH) within the State of Alaska. Hospitals are authorized TRICARE institutional providers under 10 U.S.C. 1079(j)(2) and (4). Under 10 U.S.C. 1079(j)(2), the amount to be paid to hospitals, skilled nursing facilities (SNFs), and other institutional providers under TRICARE, shall, by regulation, "shall be determined to the extent practicable in accordance with the same reimbursement rules as apply to payments to providers of services of the same type under Medicare." Under 32 CFR 199.14(a)(1)(ii)(D)(1) through (9) it specifically lists those hospitals that are exempt from the DRG-based payment system. Critical access hospitals are not listed as excluded, thereby making them subject to the DRG-based payment system. Critical access hospitals are not listed as exempt, because at the time this regulatory provision was written, CAHs were not a recognized entity.

Legislation enacted as part of the Balanced Budget Act (BBA) of 1997 authorized states to establish State Medicare Rural Hospital Flexibility Programs, under which certain facilities participating in Medicare could become Critical Access Hospitals (CAHs). CAHs represent a separate provider type with their own Medicare conditions of participation as well as a separate payment method. Since that time, a number of hospitals have taken the necessary steps to be designated as CAHs. Since the statutory authority requires TRICARE to apply the same reimbursement rules as apply to payments to providers of services of the same type under Medicare to the extent practicable, TRICARE has the authority through the publication of a proposed and final rule to exempt critical access hospitals from the DRG-based payment system and adopt a method similar to Medicare principles for these hospitals. The purpose of the demonstration is to provide this exemption immediately to CAHs in the State of Alaska.

Currently under TRICARE, CAHs are subject to the TRICARE DRG-based payment system. Under the demonstration project, CAHs will be reimbursed under a manner similar to the Centers for Medicare and Medicaid Services (CMS) payment methodology of 101 percent of reasonable costs for inpatient care and outpatient care. CAHs in the State of Alaska are currently receiving reimbursement for billed charges for facility charges for outpatient care. Under the demonstration, the 101% of reasonable

costs will be calculated by multiplying the billed charge of each claim by the hospital's cost-to-charge ratio, and then adding 1% to that amount.

#### **B. Current Status of Access**

CAH providers in Alaska have notified the Department that they are considering no longer treating military beneficiaries due to low payment rates. The alternatives to local purchase of services for military officials are to transport patients to Seattle or another location for treatment, or to relocate scarce military medical assets to Alaska to provide services. The first is an expensive proposition that brings with it considerable lost duty time and other complications; the second approach is untenable in wartime, and as a practical matter medical practice in Alaska would not provide sufficient opportunity for military medical specialists to maintain their skills.

# C. Description of Expansion of Demonstration Project

Under this demonstration, DoD will also waive, for services provided in the State of Alaska, the provisions of 10 U.S.C. 1079(j)(2), as implemented by 32 CFR 199.14(a) that do not exempt CAH providers from the Medicare Diagnostic Related Group payment methodology for inpatient services. Instead, CAHs will be reimbursed under the Centers for Medicare and Medicaid Services (CMS) payment methodology of 101 percent of reasonable costs for inpatient care and outpatient care.

This action will directly increase overall reimbursement levels for CAH providers, and is expected to result in increased access to care for military beneficiaries; reduced travel to Seattle, accompanied by a reduction in lost duty days; and improved morale for military members and families as a result of increased access and reduced separation.

# D. Implementation

The expansion of the demonstration will be effective for inpatient admissions on and after July 1, 2007 and for outpatient services provided on and after July 1, 2007.

#### E. Evaluation

An independent evaluation of the demonstration will be conducted. The evaluation will be designed to use a combination of administrative and survey measures of health care access to provide analyses and comment on the effectiveness of the demonstration in meeting its goal of improving beneficiary access to healthcare by

maximizing the potential pool of healthcare providers in Alaska.

Dated: July 24, 2007.

#### L.M. Bynum,

Alternate OSD Federal Register Liaison Officer, DoD.

[FR Doc. E7–14681 Filed 7–27–07; 8:45 am] BILLING CODE 5001–06–P

#### **DEPARTMENT OF DEFENSE**

#### Office of the Secretary

# **Defense Science Board**

**AGENCY:** Department of Defense. **ACTION:** Notice of Advisory Committee Meetings.

SUMMARY: The Defense Science Board Task Force on Developmental Test and Evaluation will meet in closed session on August 22–23, 2007 and September 19–20, 2007 at Science Applications International Corporation (SAIC), 4001 N. Fairfax Drive, Arlington, VA. These meetings will examine Test & Evaluation roles and responsibilities, policy and practices, and recommend changes that may contribute to improved success in Initial Operational Test and Evaluation along with quicker delivery of improved capability and sustainability to Warfighters.

The mission of the Defense Science Board is to advise the Secretary of Defense and the Under Secretary of Defense for Acquisition, Technology & Logistics on scientific and technical matters as they affect the perceived needs of the Department of Defense. At these meetings, the Defense Science Board Task Force will assess: OSD organization roles and responsibilities for T&E oversight; changes required to establish statutory authority for OSD DT&E oversight, and recommend improvements in the DT&E process to discover sustainability problems earlier, and thus improve likelihood of operational sustainability in IOT&E.

The task force's findings and recommendations, pursuant to 41 CFR 102–3.140 through 102–3.165, will be presented and discussed by the membership of the Defense Science Board prior to being presented to the Government's decisionmaker.

Pursuant to 41 CFR 102–3.120 and 102–3.150, the Designated Federal Officer for the Defense Science Board will determine and announce in the **Federal Register** when the findings and recommendations of the May 31, 2007 meeting are deliberated by the Defense Science Board.

Interested persons may submit a written statement for consideration by

the Defense Science Board. Individuals submitting a written statement must submit their statement to the Designated Federal Official at the address detailed below, at any point, however, if a written statement is not received at least 10 calendar days prior to the meeting, which is the subject of this notice, then it may not be provided to or considered by the Defense Science Board. The Designated Federal Official will review all timely submissions with the Defense Science Board Chairperson, and ensure they are provided to members of the Defense Science Board before the meeting that is the subject of this notice.

FOR FURTHER INFORMATION CONTACT: MAJ Chad Lominac, USAF, Defense Science Board, 3140 Defense Pentagon, Room 3C553, Washington, DC 20301–3140, via e-mail at *charles.lominac@osd.mil*, or via phone at (703) 571–0081.

Dated: July 23, 2007.

#### L.M. Bynum,

OSD Federal Register, Liaison Officer, Department of Defense.

[FR Doc. 07–3700 Filed 7–27–07;  $8:45~\mathrm{am}$ ]

BILLING CODE 5001-06-M

#### **DEPARTMENT OF DEFENSE**

# Office of the Secretary

## **Defense Science Board**

**AGENCY:** Department of Defense. **ACTION:** Notice of Advisory Committee Meetings.

**SUMMARY:** The Defense Science Board Task Force on Defense Industrial Structure for Transformation will meet in closed session on August 14, 2007, at Science Applications International Corporation (SAIC), 4001 N. Fairfax Drive, Arlington, VA. This meeting will characterize the degree of changed needed in industry due to the changing nature of DoD and the industrial Base. It will also examine the effectiveness of existing mitigation measures and make recommendations to ensure future competition and innovation throughout all tiers of the defense industrial base. The briefing will contain proprietary material and ensuing discussions will be at the collateral secret level.

The mission of the Defense Science Board is to advise the Secretary of Defense and the Under Secretary of Defense for Acquisition, Technology & Logistics on scientific and technical matters as they affect the perceived needs of the Department of Defense. At the meeting, the Defense Science Board Task Force will: describe the defense industry required to cope with the international security environment in