DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Council for the Elimination of Tuberculosis (ACET) Meeting; Correction

Notice is hereby given of a change in the meeting of the Advisory Council for the Elimination of Tuberculosis (ACET): December 11, 2018, 8:30 a.m. to 4:30 p.m., EDT which was published in the **Federal Register** on November 2, 2018 Volume 83, Number 213, pages 55172.

The time for December 11, 2018, 8:30 a.m. to 4:30 p.m., EST should read as follows: 10:00 a.m. to 4:30 p.m., EST.

FOR FURTHER INFORMATION CONTACT:

Margie Scott-Cseh, Committee Management Specialist, CDC, 1600 Clifton Road NE, Mailstop: E–07, Atlanta, Georgia 30329, telephone (404) 639–8317; zkr7@cdc.gov.

The Chief Operating Officer, Centers for Disease Control and Prevention, 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.

Sherri Berger,

Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2019–01205 Filed 2–5–19; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Health Statistics (NCHS), ICD–10 Coordination and Maintenance (C&M) Committee Meeting

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS). **ACTION:** Notice of meeting.

SUMMARY: The CDC, National Center for Health Statistics (NCHS), Classifications and Public Health Data Standards Staff, announces the following meeting of the ICD–10 Coordination and Maintenance (C&M) Committee meeting. This meeting is open to the public, limited only by the space available. The meeting room accommodates approximately 240 people. We will be broadcasting the meeting live via Webcast at http:// www.cms.gov/live/. **DATES:** The meeting will be held on March 5, 2019, 9:00 a.m. to 5:00 p.m. EST and March 6, 2019, 9:00 a.m. to 5:00 p.m. EST.

ADDRESSES: Centers for Medicare and Medicaid Services (CMS) Auditorium, 7500 Security Boulevard, Baltimore, Maryland 21244.

FOR FURTHER INFORMATION CONTACT: Traci Ramirez, Program Specialist, CDC, 3311 Toledo Rd. Hyattsville, Maryland 20782 telephone (301) 458–4454; *TRamirez@cdc.gov.*

SUPPLEMENTARY INFORMATION:

Purpose: The ICD–10 Coordination and Maintenance (C&M) Committee is a public forum for the presentation of proposed modifications to the International Classification of Diseases, Tenth Revision, Clinical Modification and ICD–10 Procedure Coding System.

Matters To Be Considered: The tentative agenda includes discussions on ICD–10–CM and ICD–10–PCS topics listed below. Agenda items are subject to change as priorities dictate.

Please refer to the posted agenda for updates one month prior to the meeting.

ICD-10-PCS Topics

- Administration of caplacizumab
- Administration of fosfomycin (CONTEPO®)
- Administration of gilteritinib (XOSPATA®)
- Administration of imipenem, cilastatin, relbactam (fixed dose combination) (IMI/REL)
- Administration of imlifidase (Idefirix[™])
- Administration of iobenguane I 131 (AZEDRA®)
- Administration of ruxolitinib (Jakafi®) Administration of tagraxofusp; SL–401
- (ELZONRISTM) Administration of venetoclax (VENCLEXTA®)
- Brachytherapy Device (CivaSheet®)
- Cerebral Embolic Protection Device (CEPD) (TriGuard 3TM)
- Endovascular Arteriovenous Fistula (endoAVF) Creation with magnetic-Guided Radiofrequency Energy and Embolization
- Extracorporeal Membrane Oxygenation (ECMO) (intraoperative ECMO) injectable Implantable Allograft (FlōGraft®) (XWRAP®) (FlōGraft®Neogenesis)
- Insertion of Sustained Release Drug-Eluting Stent (ELUVIA™) multiplex diagnostic panel (T2 Bacteria Test Panel)
- Addenda and Key Updates

ICD–10–CM Topics

Babesiosis

Congenital Vascular Hematomas and Hemangiomas Corneal Dystrophy

- Juvenile Osteochondrosis of Tibia and Fibula
- Macular Hole Expansion

Neonatal Cerebral Infarction

Osteopenia of Hip

Sjogren Syndrome

Social Determinants of Health

Unspecified Use of Alcohol or Cocaine with Withdrawal

ICD-10-CM Addendum

Security Considerations: Due to increased security requirements, CMS has instituted stringent procedures for entrance into the building by nongovernment employees. Attendees will need to present valid government-issued picture identification, and sign-in at the security desk upon entering the building.

Attendees who wish to attend the March 5–6, 2019, ICD–10–CM C&M meeting must submit their name and organization by February 22, 2019, for inclusion on the visitor list. This visitor list will be maintained at the front desk of the CMS building and used by security to admit visitors to the meeting.

To request reasonable accommodation, please contact the CMS Reasonable Accommodation Program at Email

reasonableaccommodationprogram@cms.hhs.gov.

Participants who attended previous Coordination and Maintenance meetings will no longer be automatically added to the visitor list. You must request inclusion of your name prior to each meeting you wish attend.

Please register to attend the meeting on-line at: http://www.cms.hhs.gov/ apps/events/.

Please contact Mady Hue (410) 786– 4510 or *Marilu.hue@cms.hhs.gov* for questions about the registration process.

Note: CMS and NCHS no longer provide paper copies of handouts for the meeting. Electronic copies of all meeting materials will be posted on the CMS and NCHS websites prior to the meeting at http:// www.cms.hhs.gov/ICD9ProviderDiagnostic Codes/03_meetings.asp#TopOfPage and https://www.cdc.gov/nchs/icd/icd10cm_ maintenance.htm.

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Sherri Berger,

Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2019–01213 Filed 2–5–19; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended, and the Determination of the Chief Operating Officer, CDC, pursuant to Public Law 92-463. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP)-DD19–001, Research Approaches to Improve the Care and Outcomes of People Living with Spina Bifida Component C.

Dates: April 11, 2019

Times: 10:00 a.m.–6:30 p.m., EDT. *Place:* Teleconference.

Agenda: To review and evaluate grant applications.

For Further Information Contact: Jaya Raman Ph.D., Scientific Review Officer, CDC, 4770 Buford Highway, Mailstop F80, Atlanta, Georgia 30341, Telephone: (770) 488–6511, *kva5@cdc.gov.*

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Sherri Berger,

Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2019–01209 Filed 2–5–19; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Privacy Act of 1974; System of Records

AGENCY: Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS). **ACTION:** Notice of a Modified System of Records.

SUMMARY: The Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS), proposes to modify an existing system of records subject to the Privacy Act, System No. 09-70-0541, titled Medicaid Statistical Information System (MSIS). This system of records covers the national Medicaid dataset, consisting of standardized enrollment, eligibility, and paid claims data about Medicaid recipients which is used to administer Medicaid at the federal level, produce statistical reports, support Medicaid related research, and assist in the detection of fraud and abuse in the Medicare and Medicaid programs. CMS is changing the name of the system of records to Transformed-Medicaid Statistical Information System (T-MSIS) and making other modifications which are explained below.

DATES: In accordance with 5 United States Code (U.S.C.) 552a(e)(4) and (11), this notice is applicable February 6, 2019, subject to a 30-day period in which to comment on the routine uses. Submit any comments by March 8, 2019.

ADDRESSES: Written comments should be submitted by mail or email to: CMS Privacy Act Officer, Division of Security, Privacy Policy & Governance, Information Security & Privacy Group, Office of Information Technology, CMS, Location N1–14–56, 7500 Security Blvd., Baltimore, MD 21244–1870, or walter.stone@cms.hhs.gov.

FOR FURTHER INFORMATION CONTACT: General questions about the system of records may be submitted to Darlene Anderson, Health Insurance Specialist, Data and Systems Group, Center for Medicaid and CHIP Services (CMCS), CMS, Mail Stop S2–22–16, 7500 Security Blvd., Baltimore, MD 21244; telephone number (410) 786–9828; email address Darlene.Anderson@ cms.hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Program and IT System Changes Prompting this SORN Modification

The Transformed Medicaid Statistical Information System (T–MSIS) is replacing the Medicaid Statistical Information System (MSIS) as the information technology (IT) system that houses the national Medicaid dataset. It is a joint effort by the states and CMS to build an improved Medicaid dataset that addresses problems identified with Medicaid data in MSIS. T–MSIS provides improved program monitoring and oversight, technical assistance with states, policy implementation, and datadriven and high-quality Medicaid and CHIP programs that ensure better care, access to coverage, and improved health.

To improve Medicaid program oversight, CMS is requiring states to submit new files and data elements in T–MSIS which were not collected in MSIS, for the purpose of improving the quality of the data extracts the states submit to CMS on a quarterly or other periodic basis. Following consultation with a wide array of stakeholders, CMS established over 1,000 data elements for T-MSIS. This expands on the approximately 400 data elements collected in MSIS. T-MSIS builds on the original five MSIS files, consisting of eligibility files and four types of claims files (inpatient, long-term care, pharmacy, and other), by adding files for third-party liability, managed-care plans, and Medicaid providers, and by adding T-MSIS analytic files (TAF).

Currently, each state submits five extracts to CMS on a quarterly basis. These data are used by CMS to assist in federal reporting for the Medicaid and Children's Health Insurance Program (CHIP). Several reasons culminated in the CMS mission to improve the Medicaid dataset repository, including incomplete data, questionable results, multiple data collections from states, multiple federal data platforms and analytic difficulties in interpreting and presenting the results. In addition, timeliness issues have prompted CMS to re-evaluate its processes and move toward a streamlined delivery, along with an enhanced data repository. The new T–MSIS extract format is expected to further CMS goals for improved timeliness, reliability and robustness through monthly updates and an increase in the amount of data requested.

II. Modifications to SORN 09-70-0541

The following modifications have been made to SORN 09–70–0541 in order to reflect changes to the system of records resulting from the IT system change from MSIS to T–MSIS and to update the SORN generally:

• The SORN has been reformatted to conform to the revised template prescribed in OMB Circular A–108, issued December 23, 2016.