

Order 13132 regarding federalism, and has determined that it does not have "federalism implications." The Final Rule would not "have substantial direct effects on the States, or on the relationship between the national government and the States, or on the distribution of power and responsibilities among the various levels of government."

#### *Impact on Family Well-Being*

This Final Rule will not adversely affect the following elements of family well-being: family safety, family stability, marital commitment; parental rights in the education, nurture and supervision of their children; family functioning, disposable income or poverty; or the behavior and personal responsibility of youth, as determined under section 654(c) of the Treasury and General Government Appropriations Act of 1999.

#### *Impact of the New Rule*

This Final Rule revises § 100.2 to incorporate a new methodology for calculating the average cost of a health insurance policy. This new methodology will result in a more accurate reflection of the actual average cost of a health insurance policy as compared to the old methodology which resulted in a number that was too high.

#### *Paperwork Reduction Act of 1980*

This Final Rule has no information collection requirements.

#### **List of Subjects in 42 CFR Part 100**

Biologics, Compensation, Health insurance, Immunizations.

Dated: January 28, 2007.

**Elizabeth M. Duke,**  
*Administrator, HRSA.*

Approved: March 29, 2007.

**Michael O. Leavitt,**  
*Secretary.*

**Editorial Note:** This document was received at the Office of the Federal Register on June 29, 2007.

■ For the reasons stated above, HHS amends part 100 of 42 CFR as follows:

#### **PART 100—VACCINE INJURY COMPENSATION**

■ 1. The authority section for 42 CFR part 100 is revised to read as follows:

**Authority:** Secs. 312 and 313 of Pub. L. 99-660, 100 Stat. 3779-3782 (42 U.S.C. 300aa-1 note); sec. 2114(c) and (e) of the PHS Act (42 U.S.C. 300aa-14(c) and (e)); sec. 2115(a)(3)(B) of the PHS Act (42 U.S.C. 300aa-15(a)(3)(B)); sec. 904(b) of Pub. L. 105-34, 111 Stat. 873; sec. 1503 of Pub. L. 105-277, 112 Stat. 2681-741; and sec. 523(a) of Pub. L. 106-170, 113 Stat. 1927-1928.

■ 2. Section 100.2 is revised to read as follows:

#### **§ 100.2 Average cost of a health insurance policy.**

For purposes of determining the amount of compensation under the VICP, section 2115(a)(3)(B) of the PHS Act, 42 U.S.C. 300aa-15(a)(3)(B), provides that certain individuals are entitled to receive an amount reflecting lost earnings, less certain deductions. One of the deductions is the average cost of a health insurance policy, as determined by the Secretary. The Secretary has determined that the average cost of a health insurance policy is \$363.12 for 2006. This figure is calculated periodically (generally on an annual basis) using the most recent Medical Expenditure Panel Survey-Insurance Component (MEPS-IC) data available as the baseline for the average monthly cost of a health insurance policy. This baseline is adjusted by the annual percentage increase/decrease obtained from the most recent annual Kaiser Family Foundation and Health Research and Educational Trust (KFF/HRET) Employer Health Benefits survey or other authoritative source that may be more accurate or appropriate in the future. The revised amount will be effective upon its delivery by the Secretary to the United States Court of Federal Claims, and the amount will be published as a notice in the **Federal Register** periodically (generally on an annual basis).

[FR Doc. E7-13039 Filed 7-3-07; 8:45 am]

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#### **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

#### **Centers for Medicare & Medicaid Services**

#### **42 CFR Parts 412 and 413**

**[CMS-1529-N]**

**RIN 0938-A030**

#### **Medicare Program; Hospital Direct and Indirect Graduate Medical Education Policy Changes; Notice**

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

**ACTION:** Final rule; clarification.

**SUMMARY:** This notice clarifies the availability of certain physician salary proxy data for purposes of the hospital direct and indirect graduate medical education policy adopted in the "Medicare Program; Prospective Payment System for Long-Term Care

Hospitals RY 2008: Annual Payment Rate Updates, and Policy Changes; and Hospital Direct and Indirect Graduate Medical Education Policy Changes" final rule that appeared in the May 11, 2007 **Federal Register**.

**EFFECTIVE DATE:** This notice is effective on July 1, 2007.

**FOR FURTHER INFORMATION CONTACT:** Tzvi Heffer, (410) 786-4487 (General information). Miechal Lefkowitz, (410) 786-5316 (Graduate Medical Education payments). Renate Rockwell, (410) 786-4645 (Graduate Medical Education payments).

#### **SUPPLEMENTARY INFORMATION:**

#### **I. Background**

In FR Doc. 07-2206 (72 FR 26870), there was an erroneous statement of fact relating to the GME policy adopted in the final rule. In light of the error, this notice serves to clarify the availability of certain salary proxy data that can be used for purposes of the hospital direct and indirect graduate medical education policy adopted in the final rule.

#### **II. Provisions of the Notice**

In the final rule that appeared in the May 11, 2007 **Federal Register** (72 FR 26958), we responded erroneously to the following comment, "One commenter stated that CMS should use average compensation figures for dental faculty based on specialty and regional variation. The commenter stated that the commenter would be happy to work with CMS to develop compensation figures for dental programs." We responded, "The AMGA [American Medical Group Association] data does not apply to dental faculty, at this point we are unaware of a comparable data source for dental faculty salaries. We will work with the commenter to determine whether we can develop proxy salary amounts for supervisory dentists." After the final rule was issued, we were made aware that the AMGA data, in fact, do apply to dentists and podiatrists. Because AMGA data are available for the dental and podiatry specialties, the AMGA *2006 Medical Group Compensation and Financial Survey* data can be used as the salary proxy for both dentistry and podiatry in accordance with the policies adopted in the final rule. We will also correct our posting of 2006 AMGA salary data at the following Web site address to include the median salary data for both dentistry and podiatry: [http://www.cms.hhs.gov/AcuteInpatientPPS/Downloads/Specialty\\_Table\\_050107.pdf](http://www.cms.hhs.gov/AcuteInpatientPPS/Downloads/Specialty_Table_050107.pdf).

**Authority**

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program).

Dated: June 29, 2007.

**Leslie V. Norwalk,**

*Acting Administrator, Centers for Medicare & Medicaid Services.*

[FR Doc. 07–3260 Filed 6–29–07; 3:21 pm]

BILLING CODE 4120–01–P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Medicare & Medicaid Services****42 CFR Parts 412 and 413**

[CMS–1529–CN]

RIN 0938–AO30

**Medicare Program; Prospective Payment System for Long-Term Care Hospitals RY 2008: Annual Payment Rate Updates, and Policy Changes; Corrections**

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

**ACTION:** Correction of final rule.

**SUMMARY:** This document corrects technical errors in the “Medicare Program; Prospective Payment System for Long-Term Care Hospitals RY 2008: Annual Payment Rate Updates, and Policy Changes; and Hospital Direct and Indirect Graduate Medical Education Policy Changes; Final Rule” (hereinafter referred to as the RY 2008 LTCH PPS final rule) that appeared in the May 11, 2007 *Federal Register*. We are correcting the high cost outlier (HCO) fixed-loss amount that is effective for long-term care hospital (LTCH) prospective payment system (PPS) payments beginning on or after July 1, 2007 from \$22,954 to \$20,738. The incorrect fixed-loss amount was determined due to a typographical error in the computer programming. We are also correcting figures in Table 9 and Table 11 since the incorrect figures originally published originated from the same typographical error. We are making additional conforming changes to the preamble of the final rule which were necessary as a result of the correction of the fixed-loss amount and the figures in Tables 9 and 11.

**EFFECTIVE DATE:** July 1, 2007.

**FOR FURTHER INFORMATION CONTACT:** Tzvi Hefter, (410) 786–4487 (General information). Elizabeth Truong, (410) 786–6005 (Federal rate update, budget

neutrality, other adjustments, and calculation of the payment rates).

**SUPPLEMENTARY INFORMATION:****I. Background**

In FR Doc. 07–2206 (72 FR 26870), there were technical errors stemming from a typographical error in the computer programming of the payment simulation program that are identified and corrected in the Correction of Errors section below. The provisions in this correction notice are effective as if they had been included in the RY 2008 LTCH PPS final rule. Accordingly, the corrections are effective July 1, 2007.

**II. Summary of Errors**

In the RY 2008 LTCH PPS final rule, we incorrectly calculated the HCO fixed-loss amount. Specifically, we discovered that there was a typographical error in one of the numeric inputs used in the payment simulation program and this resulted in an understating of the nonlabor share of payments to LTCHs. Since the nonlabor related share is used in the calculation of the fixed-loss amount, this error caused the fixed-loss amount to be inaccurate. We corrected the typographical error in the payment simulation program and computed the payment using the same payment methodology that was discussed and used in the final rule. Consequently, the corrected final fixed-loss amount for RY 2008 is \$20,738. This document replaces all incorrect HCO fixed-loss amounts references in the RY 2008 LTCH PPS final rule with the corrected fixed-loss amount of \$20,738.

Furthermore, the payment simulation program was used in the analysis of payment changes for the impact section of the RY 2008 LTCH PPS final rule. Specifically, Tables 9 and 11 of the final rule address the projected impact of payment rate policy changes by comparing payments based on the policies that were in effect for RY 2007 to LTCH PPS payments based on policies to be in effect for RY 2008, including the RY 2008 HCO fixed-loss amount (72 FR 26870, 26977 through 26978, and 26985 through 26986). In this correction notice, we are providing the revised Tables 9 and 11 to reflect the changes resulting from correcting the typographical error in the payment simulation program. We note that it was necessary to revise only two columns in Table 11. Correcting the typographical error for the nonlabor share generally reduced the estimated impact on estimated payments per discharge from RY 2007 to RY 2008 due to finalized changes to the area wage adjustment (column 7). In addition, applying the

revised fixed-loss amount, which is \$2,216 lower than the incorrect fixed-loss amount applied in the RY 2008 LTCH PPS final rule, generally reduced the estimated impact on estimated payments per discharge from RY 2007 to RY 2008 (column 9). In addition, we are making conforming changes to the preamble of the final rule (as indicated in Section III. of this correction notice) that are necessary as a result of the correction of the fixed-loss amount and Tables 9 and 11.

**III. Correction of Errors**

In FR Doc. 07–2206 (72 FR 26870), make the following corrections:

1. On page 26898,
  - a. In the 2nd column, 1st full paragraph, lines 25 and 30, the figure “\$22,954” is corrected to read “\$20,738”.
  - b. In the 3rd column, 2nd full paragraph, lines 4 and 11, the figure “\$22,954” is corrected to read “\$20,738”.
2. On page 26899,
  - a. In the 1st column,
    - (1) In the 1st partial paragraph, (a) Line 26, the figure “3.8” is corrected to read “1.2”.
    - (b) Line 42, the figure “1.0” is corrected to read “0.5”.
    - (c) Lines 46 through 48, the sentence “We also project an estimated 2.5 percent decrease in estimated payments per discharge from RY 2007 to RY 2008 due” is corrected to read, “We also project an estimated 0.4 percent decrease in estimated payments per discharge from RY 2007 to RY 2008 primarily due”.
    - (2) In the 1st full paragraph, line 2, the figure “\$22,954” is corrected to read “\$20,738”.
    - b. In the 2nd column,
      - (1) In the 1st partial paragraph, line 14, the figure “10” is corrected to read “8”.
      - (2) In the 1st partial paragraph, line 31, the figure “10” is corrected to read “8.5”.
  3. On page 26900, in the 1st column, in the 3rd full paragraph, in the 2nd line from the bottom, the figure “\$22,954” is corrected to read “\$20,738”.
  4. On page 26977, in the 3rd column, in the 1st partial paragraph, lines 27 and 28, the phrase “approximately \$156 million (or about 3.8 percent).” is corrected to read, “approximately \$50 million (or about 1.2 percent). In addition, applying the case-mix adjustment (2.49 percent) to account for the increase in payments in FY 2005, the result is estimated to be an impact of approximately \$100 million.”
  5. On pages 26977 through 26978, Table 9: Estimated Impact of the