

DEPARTMENT OF THE TREASURY

Fiscal Service

Rate for Federal Debt Collection, Discount and Rate Evaluation

AGENCY: Bureau of the Fiscal Service, Treasury.

ACTION: Notice of rate to be used for Federal debt collection, and discount and rebate evaluation.

SUMMARY: The Secretary of the Treasury is responsible for computing and publishing the percentage rate that is to be used in assessing interest charges for outstanding debts owed to the Government (The Debt Collection Act of 1982, as amended (codified at 31 U.S.C. Section 3717)). This rate is also to be used by agencies as a comparison point in evaluating the cost-effectiveness of a cash discount. In addition, this rate is to be used in determining when agencies should pay purchase card invoices when the card issuer offers a rebate (5 CFR 1315.8). Notice is hereby given that the applicable rate for calendar year 2015 is 1.00 percent.

DATES: January 1, 2015 through December 31, 2015.

FOR FURTHER INFORMATION CONTACT: E-Commerce Division, Bureau of the Fiscal Service, Department of the Treasury, 401 14th Street SW., Washington, DC 20227 (Telephone: 202-874-9428).

SUPPLEMENTARY INFORMATION: The rate reflects the current value of funds to the Treasury for use in connection with Federal Cash Management systems and is based on investment rates set for purposes of Public Law 95-147, 91 Stat. 1227. Computed each year by averaging Treasury Tax and Loan (TT&L) investment rates for the 12-month period ending every September 30, rounded to the nearest whole percentage, for applicability effective

each January 1. Quarterly revisions will be made if the annual average, on a moving basis, changes by 2 percentage points. The rate for calendar year 2015 reflects the average investment rates for the 12-month period that ended September 30, 2014.

Dated: October 29, 2014.

John B. Hill,
Assistant Commissioner Payment Management and Chief Disbursing Officer.

[FR Doc. 2014-26171 Filed 11-3-14; 8:45 am]

BILLING CODE 4810-35-P

DEPARTMENT OF VETERANS AFFAIRS

Cost-Based and Inter-Agency Billing Rates for Medical Care or Services Provided by the Department of Veterans Affairs

AGENCY: Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: This document updates the Cost-Based and Inter-Agency billing rates for medical care or services provided by the U.S. Department of Veterans Affairs (VA).

DATES: *Effective Date:* The rates set forth in this notice are effective November 4, 2014 and until further notice.

FOR FURTHER INFORMATION CONTACT: Romona Greene, Chief Business Office (10NB), Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (202) 382-2521. (This is not a toll free number.)

SUPPLEMENTARY INFORMATION: VA's methodology for computing Cost-Based and Inter-Agency billing rates for medical care or services provided by VA is set forth in 38 CFR 17.102(h). Two sets of rates are obtained by applying this methodology, Cost-Based rates and Inter-Agency rates. Cost-Based rates

apply to medical care and services that are provided by VA:

- (a) In error or based on tentative eligibility;
- (b) In a medical emergency;
- (c) To pensioners of allied nations; or
- (d) For research purposes in circumstances under which VA medical care appropriation is to be reimbursed by VA research appropriation.

Inter-Agency rates apply to medical care and services that are provided by VA to beneficiaries of the Department of Defense (DoD) or other Federal agencies, when the care or services provided is not covered by an applicable sharing agreement. The Inter-Agency rates contained in this notice do not apply to sharing agreements between VA and DoD unless otherwise stated.

The calculations for the Cost-Based and Inter-Agency rates are the same with two exceptions. Inter-Agency rates are all inclusive and are not broken down into three components (Physician; Ancillary; and Nursing, Room and Board), and Inter-Agency rates do not include standard fringe benefit costs that cover government employee retirement, disability costs, and return on fixed assets. When VA pays for medical care or services from a non-VA source under circumstances in which the Cost-Based or Inter-Agency Rates would apply if the care or services had been provided by VA, the charge for such care or services will be the actual amount paid by VA for the care or services. Inpatient charges will be at the per diem rates shown for the type of bed section or discrete treatment unit providing the care.

The following table depicts the Cost Based and Inter-Agency Rates which are effective upon publication of this notice. These rates supersede those established by the **Federal Register** notice published on July 11, 2011 at 76 FR 40749.

	Cost-based rates	Inter-agency rates
A. Hospital Care per inpatient day		
General Medicine:		
All Inclusive Rate	\$3,313	\$3,142
Physician	397	
Ancillary	863	
Nursing Room and Board	2,053	
Neurology:		
All Inclusive Rate	3,152	2,993
Physician	461	
Ancillary	832	
Nursing Room and Board	1,859	
Rehabilitation Medicine:		
All Inclusive Rate	2,480	2,353
Physician	282	
Ancillary	758	
Nursing Room and Board	1,440	
Blind Rehabilitation:		

	Cost-based rates	Inter-agency rates
All Inclusive Rate	1,641	1,557
Physician	132	.....
Ancillary	815	.....
Nursing Room and Board	694	.....
Spinal Cord Injury:		
All Inclusive Rate	2,201	2,089
Physician	273	.....
Ancillary	554	.....
Nursing Room and Board	1,374	.....
Surgery:		
All Inclusive Rate	5,165	4,899
Physician	569	.....
Ancillary	1,567	.....
Nursing Room and Board	3,029	.....
General Psychiatry:		
All Inclusive Rate	1,611	1,527
Physician	152	.....
Ancillary	254	.....
Nursing Room and Board	1,205	.....
Substance Abuse (Alcohol and Drug Treatment):		
All Inclusive Rate	1,363	1,294
Physician	130	.....
Ancillary	315	.....
Nursing Room and Board	918	.....
Psychosocial Residential Rehabilitation Program:		
All Inclusive Rate	650	616
Physician	41	.....
Ancillary	68	.....
Nursing Room and Board	541	.....
Intermediate Medicine:		
All Inclusive Rate	2,249	2,135
Physician	111	.....
Ancillary	330	.....
Nursing Room and Board	1,808	.....
Polytrauma Inpatient:		
All Inclusive Rate	3,217	3,058
Physician	365	.....
Ancillary	983	.....
Nursing Room and Board	1,869	.....
B. Nursing Home Care, Per Day		
All Inclusive Rate	1,082	1,025
Physician	34	.....
Ancillary	146	.....
Nursing Room and Board	902	.....
C. Outpatient Medical Treatments		
Outpatient Visit (to include Ineligible Dental Care)	236	222
Physical Medicine & Rehabilitation Service Outpatient Visit	443	419
Outpatient Polytrauma/Traumatic Brain Injury	586	561

Dated: October 30, 2014.

By Direction of the Secretary.
William F. Russo,
*Acting Director, Office of Regulation Policy
 and Management, Office of the General
 Counsel, U.S. Department of Veterans Affairs.*

[FR Doc. 2014-26148 Filed 11-3-14; 8:45 am]

BILLING CODE 8320-01-P