ACTION: Notice of meeting.

SUMMARY: In accordance with section 10(a)(2) of the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC) announces the following meeting of the Advisory Committee on Immunization Practices (ACIP).

This meeting is open to the public, limited only by the space available. Time will be available for public comment. The public is welcome to submit written comments in advance of the meeting. Comments should be submitted in writing by email to the contact person listed below. The deadline for receipt is October 11, 2017. Written comments must include full name, address, organizational affiliation, email address of the speaker, topic being addressed and specific comments. Written comments must not exceed one single-spaced typed page with 1-inch margins containing all items above. Only those written comments received 10 business days in advance of the meeting will be included in the official record of the meeting. Public comments made in attendance must be no longer than 3 minutes and the person giving comments must attend the public comment session at the start time listed on the agenda. Time for public comments may start before the time indicated on the agenda. The meeting will be webcast live via the World Wide Web; for instructions and more information on ACIP please visit the ACIP Web site: http://www.cdc.gov/ vaccines/acip/index.html.

DATES: The meeting will be held on October 25, 2017, 8:00 a.m. to 6:00 p.m., EDT, and October 26, 2017 8:00 a.m. to 3:15 p.m. EDT.

ADDRESSES: 1600 Clifton Road NE., Atlanta, GA 30329, CDC, Tom Harkin Global Communications Center, Kent 'Oz' Nelson Auditorium.

FOR FURTHER INFORMATION CONTACT: Stephanie Thomas, ACIP Committee Management Specialist, CDC, NCIRD; email: ACIP@cdc.gov.

SUPPLEMENTARY INFORMATION:

Purpose: The committee is charged with advising the Director, CDC, on the use of immunizing agents. In addition, under 42 U.S.C. 1396s, the committee is mandated to establish and periodically review and, as appropriate, revise the list of vaccines for administration to vaccine-eligible children through the Vaccines for Children (VFC) program, along with schedules regarding dosing interval, dosage, and contraindications to administration of vaccines. Further, under provisions of the Affordable Care Act, section 2713 of the Public Health

Service Act, immunization recommendations of the ACIP that have been approved by the Director of the Centers for Disease Control and Prevention and appear on CDC immunization schedules must be covered by applicable health plans.

Matters to be Considered: The agenda will include discussions on adult immunization schedule, child/ adolescent immunization schedule, influenza vaccines, anthrax vaccine, Japanese encephalitis vaccines, hepatitis vaccines, herpes zoster vaccines, human papillomavirus vaccines, mumps vaccine, pneumococcal vaccines, respiratory syncytial virus vaccine and immunization safety update. A recommendation vote is scheduled for adult immunization schedule, child/ adolescent immunization schedule, hepatitis vaccines and herpes zoster vaccines. A Vaccines for Children vote is scheduled for hepatitis vaccines. Agenda items are subject to change as priorities dictate.

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.

Elaine L. Baker,

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

[FR Doc. 2017–19497 Filed 9–13–17; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Closed 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 meeting.

The meeting will be closed to the public in accordance with provisions set forth in Section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Pub. L. 92–463.

Name of Committee: Safety and Occupational Health Study Section (SOHSS), National Institute for Occupational Safety and Health (NIOSH).

Date: October 31-November 1, 2017. Time: 8:00 a.m.-5:00 p.m., CST. *Place:* The Wit Hotel, 201 North State Street, Chicago, Illinois 60601.

Agenda: The meeting will convene to address matters related to the conduct of Study Section business and for the study section to consider safety and occupational health-related grant applications.

For Further Information Contact: Price Connor, Ph.D., NIOSH Health Scientist, CDC 2400 Executive Parkway, Atlanta, Georgia 30345, (404) 498–2511, spc3@cdc.

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.

Elaine L. Baker,

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

[FR Doc. 2017–19500 Filed 9–13–17; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Closed 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 meeting.

The meeting will be closed to the public in accordance with provisions set forth in Section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92–463.

Name of Committee: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP)—PAR 13–129, NIOSH Member Conflict Special Emphasis Panel.

Date: October 25, 2017.

Time: 1:00 p.m.-5:00 p.m., EDT. Place: Teleconference.

Agenda: The meeting will include the initial review, discussion, and evaluation of applications received in response to PAR 13–129, NIOSH Member Conflict Special Emphasis Panel.

For FuRther Information Contact: Nina Turner, Ph.D. Scientific Review Officer, CDC, 1095 Willowdale Road, Morgantown, West Virginia 26506, (304) 285–5976, nxt2@ cdc.gov.

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.

Elaine L. Baker,

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

[FR Doc. 2017-19499 Filed 9-13-17; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-1700-N]

Medicare Program; Announcement of the Advisory Panel on Clinical **Diagnostic Laboratory Tests Meeting**

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

ACTION: Notice.

SUMMARY: This notice announces the next public meeting date for the Medicare Advisory Panel on Clinical Diagnostic Laboratory Tests (the Panel) on September 25, 2017. The purpose of the Panel is to advise the Secretary of the Department of Health and Human Services (DHHS) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on issues related to clinical diagnostic laboratory tests (CDLTs).

DATES: Meeting date: The meeting of the Panel is scheduled for September 25, 2017, from 9 a.m. to 4 p.m., eastern daylight time (E.D.T.).

Deadline for Submission of Presentations: All presenters must submit their presentations and comments electronically to our CLFS dedicated email mailbox, CDLTPanel@ cms.hhs.gov, by September 21, 2017 at 5 p.m. E.D.T.

FOR FURTHER INFORMATION CONTACT:

Glenn C. McGuirk, Designated Federal Official (DFO), email *CDLTPanel*@ cms.hhs.gov. Press inquiries are handled through the CMS Press Office at (202) 690-6145. For additional information on the Panel, please refer to the CMS Web site at https://www.cms.gov/ Regulations-and-Guidance/Guidance/ FACA/AdvisoryPanelonClinical DiagnosticLaboratoryTests.html.

SUPPLEMENTARY INFORMATION: The Panel will make recommendations to the Secretary and the Administrator regarding payment for CDLTS for which CMS received no applicable information to calculate Medicare payment rates. The Panel did not deliberate and provide recommendations regarding the payment for these CDLTs during the

Public Meeting Regarding New and Reconsidered Clinical Diagnostic Laboratory Test Codes for the Clinical Laboratory Fee Schedule for Calendar Year (CY) 2018 (2017 CLFS Public Meeting) and the Panel meeting on July 31 through August 1, 2017.

I. Background

The Advisory Panel on Clinical Diagnostic Laboratory Tests is authorized by section 1834A(f)(1) of the Social Security Act (the Act) (42 U.S.C. 1395m-1), as established by section 216(a) of the Protecting Access to Medicare Act of 2014 (PAMA) (Pub. L. 113–93, enacted on April 1, 2014). The Panel is subject to the Federal Advisory Committee Act (FACA), as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory panels.

Section 1834A(f)(1) of the Act directs the Secretary of the Department of Health and Human Services (the Secretary) to consult with an expert outside advisory panel established by the Secretary, composed of an appropriate selection of individuals with expertise in issues related to clinical diagnostic laboratory tests. Such individuals may include molecular pathologists, researchers, and individuals with expertise in laboratory science or health economics.

The Panel will provide input and recommendations to the Secretary and the Administrator of CMS, on the following:

• The establishment of payment rates under section 1834A of the Act for new clinical diagnostic laboratory tests, including whether to use crosswalking or gapfilling processes to determine payment for a specific new test;

 The factors used in determining coverage and payment processes for new clinical diagnostic laboratory tests; and

• Other aspects of the new payment system under section 1834A of the Act.

A notice announcing the establishment of the Panel and soliciting nominations for members was published in the October 27, 2014 Federal Register (79 FR 63919 through 63920). In the August 7, 2015 Federal Register (80 FR 47491), we announced membership appointments to the Panel along with the first public meeting date for the Panel, which was held on August 26, 2015. Subsequent meetings of the Panel were also announced in the Federal Register. The Secretary approved rechartering of the Panel on April 25, 2017. The new charter is effective through April 25, 2019 and may be found on the CMS Web site at https://www.cms.gov/Regulations-and-

Guidance/Guidance/FACA/ AdvisorvPanelonClinical DiagnosticLaboratoryTests.html. A notice announcing the rechartering of the Panel was published in the June 16, 2017 Federal Register (82 FR 27705).

The Panel charter provides that Panel meetings will be held up to 4 times annually and the Panel Chair will serve for a period of 3 years, which may be extended at the discretion of the Administrator or his or her duly appointed designee. Additionally, the Panel Chair facilitates the meeting and the Designated Federal Official (DFO) or DFO's designee must be present at all meetings.

Section 1834A of the Act requires revisions to the payment methodology for clinical diagnostic laboratory tests paid under the CLFS. We implemented the requirements of section 1834A of the Act in the CLFS final rule published in the June 23, 2016 Federal Register (81 FR 41036) entitled, "Medicare Program; Medicare Clinical Diagnostic Laboratory Tests Payment System." Under the CLFS final rule, reporting entities are required to report to CMS applicable information for their component applicable laboratories. The applicable information includes, for each CDLT furnished during a data collection period, the specific HCPCS code associated with the test, each private payor rate for which final payment has been made, and the associated volume of tests performed corresponding to each private payor rate. In general, the payment amount for a test on the CLFS furnished on or after January 1, 2018, will be equal to the weighted median of private payor rates determined for the test, based on the applicable information that is collected during a data collection period and reported to us during a data reporting period.

Under 42 CFR 414.507(g), payment for a clinical diagnostic laboratory test for which CMS receives no applicable information is based on the crosswalking or gapfilling methods described in § 414.508(b)(1) and (2). On August 4, 2017, CMS posted on the CLFS Web site a list of laboratory codes for which CMS received no applicable information to calculate Medicare payment rates based on the weighted median of private payor rates. During the 2017 CLFS Public Meeting and the Panel meeting on July 31 through August 1, 2017, CMS discussed these codes, however, the Panel did not deliberate and provide recommendations regarding the payment for these codes. During this meeting, the Panel will address any issues relating to this list of laboratory test codes, including making