

accomplished consistent with the purpose of the request;

(c) Refrain from using or disclosing the information for any purpose other than the stated purpose under which the information was disclosed; and

(d) Attest in writing that it understands the foregoing provisions, and is willing to abide by the foregoing provisions and any additional provisions that HCFA deems appropriate in the particular circumstances.

3. To another federal or state agency:

(a) To contribute to the accuracy of HCFA's proper payment of Medicare benefits, and/or

(b) To enable such agency to administer a federal health benefits program, or as necessary to enable such agency to fulfill a requirement of a federal statute or regulation that implements a health benefits program funded in whole or in part with federal funds.

4. To an individual or organization for research, evaluation, or epidemiological projects related to the prevention of disease or disability, or the restoration or maintenance of health, and for payment related projects.

5. To a member of congress or to a congressional staff member in response to an inquiry of the congressional office made at the written request of the constituent about whom the record is maintained.

6. To the Department of Justice (DOJ), court or adjudicatory body when:

(a) The agency or any component thereof, or

(b) Any employee of the agency in his or her official capacity, or

(c) Any employee of the agency in his or her individual capacity where the DOJ has agreed to represent the employee, or

(d) The United States Government is a party to litigation or has an interest in such litigation, and by careful review, HCFA determines that the records are both relevant and necessary to the litigation and that the use of such records by the DOJ, court or adjudicatory body is compatible with the purpose for which the agency collected the records.

7. To a HCFA contractor (including, but not necessarily limited to fiscal intermediaries and carriers) that assists in the administration of a HCFA-administered health benefits program, or to a grantee of a HCFA-administered grant program, when disclosure is deemed reasonably necessary by HCFA to prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct,

remedy, or otherwise combat fraud or abuse in such program.

8. To another federal agency or to an instrumentality of any governmental jurisdiction within or under the control of the United States (including any State or local governmental agency), that administers, or that has the authority to investigate potential fraud or abuse in, a health benefits program funded in whole or in part by federal funds, when disclosure is deemed reasonably necessary by HCFA to prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud or abuse in such programs.

POLICIES AND PRACTICES FOR STORING, RETRIEVING, ACCESSING, RETAINING, AND DISPOSING OF RECORDS IN THE SYSTEM:

STORAGE:

All records are stored on magnetic media.

RETRIEVABILITY:

The Medicare records are retrieved by health insurance claim (HIC) number of the beneficiary.

SAFEGUARDS:

HCFA has safeguards for authorized users and monitors such users to ensure against excessive or unauthorized use. Personnel having access to the system have been trained in the Privacy Act and systems security requirements. Employees who maintain records in the system are instructed not to release any data until the intended recipient agrees to implement appropriate administrative, technical, procedural, and physical safeguards sufficient to protect the confidentiality of the data and to prevent unauthorized access to the data.

In addition, HCFA has physical safeguards in place to reduce the exposure of computer equipment and thus achieve an optimum level of protection and security for the MEDPAR system. For computerized records, safeguards have been established in accordance with HHS standards and National Institute of Standards and Technology guidelines, *e.g.*, security codes will be used, limiting access to authorized personnel. System securities are established in accordance with HHS, Information Resource Management (IRM) Circular #10, Automated Information Systems Security Program; HCFA Automated Information Systems (AIS) Guide, Systems Securities Policies, and OMB Circular No. A-130 (revised), Appendix III.

RETENTION AND DISPOSAL:

HCFA and the repository of the National Archive and Records

Administration will retain identifiable MEDPAR data for a total period not to exceed 25 years.

SYSTEM MANAGER AND ADDRESS:

Director, Division of Enrollment, Utilization, and Data Development, Enterprise Databases Group, Office of Information Services, HCFA, Room N3-16-28, 7500 Security Boulevard, Baltimore, Maryland, 21244-1850. The telephone number is (410)-786-6759.

NOTIFICATION PROCEDURE:

For purpose of access, the subject individual should write to the system manager who will require the system name, HIC, address, age, sex, and for verification purposes, the subject individual's name (woman's maiden name, if applicable) and social security number (SSN). Furnishing the SSN is voluntary, but it may make searching for a record easier and prevent delay.

RECORD ACCESS PROCEDURE:

For purpose of access, use the same procedures outlined in Notification Procedures above. Requestors should also reasonably specify the record contents being sought. (These procedures are in accordance with Department regulation 45 CFR 5b.5(a)(2)).

CONTESTING RECORD PROCEDURES:

The subject individual should contact the system manager named above, and reasonably identify the record and specify the information to be contested. State the corrective action sought and the reasons for the correction with supporting justification. (These procedures are in accordance with Department regulation 45 CFR 5b.7).

RECORD SOURCE CATEGORIES:

HCFA's National Claims History system of records, enrollment data on Medicare beneficiaries, and SSI eligibility information from the Social Security Administration.

SYSTEMS EXEMPTED FROM CERTAIN PROVISIONS OF THE ACT:

None.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

Privacy Act of 1974; Report of Modified or Altered System

AGENCY: Department of Health and Human Services (HHS), Health Care Financing Administration (HCFA).

ACTION: Report of Altered Systems of Records.

SUMMARY: In accordance with the requirements of the Privacy Act of 1974, we are proposing to modify or alter designated HCFA systems of records specified in Appendix A. We are revising the language in global fraud and abuse routine uses number one and two to correspond with language used in other HCFA systems of records. We are also deleting global fraud and abuse routine use number three relating to "any entity that makes payments for or oversees the administration of health care services. * * *" Notice of these revised global routine uses was published in the **Federal Register**, Thursday, July 16, 1998 (63 FR 38414).

The primary purpose of revising the language in the two remaining global fraud and abuse routine uses is to shorten the language, make them easier to read, and provide clarity to HCFA intentions to disclose individual-specific information for the purposes of combating fraud and abuse to a HCFA contractor that assists in the administration of a HCFA-administered health benefits program, to a grantee of a HCFA-administered grant program, and to other federal agencies or to an instrumentality of any governmental jurisdiction, that administers, or that has the authority to investigate potential fraud or abuse in a health benefits program funded in whole or in part by federal funds.

The revised routine uses will be added to the systems listed in Appendix A at the earliest time that modification and republication of these systems can occur. The routine uses will be numbered in the next logical sequence for each system and will read as follows: (1) To a HCFA contractor (including, but not necessarily limited to fiscal intermediaries and carriers) that assists in the administration of a HCFA-administered health benefits program, or to a grantee of a HCFA-administered grant program, when disclosure is deemed reasonably necessary by HCFA to prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud or abuse in such program; and, (2) to another federal agency or to an instrumentality of any governmental jurisdiction within or under the control of the United States (including any state or local governmental agency), that administers, or that has the authority to investigate potential fraud or abuse in, a health benefits program funded in whole or in part by federal funds, when disclosure is deemed reasonably

necessary by HCFA to prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud or abuse in such program, subjected to certain conditions. We have provided background information about the altered system in the

SUPPLEMENTARY INFORMATION section below. Although the Privacy Act requires only that HCFA provide an opportunity for interested persons to comment on the proposed routine uses, HCFA invites comments on all portions of this notice. See **EFFECTIVE DATES** section for comment period.

EFFECTIVE DATES: HCFA filed a modified or altered system report with the Chair of the House Committee on Government Reform and Oversight, the Chair of the Senate Committee on Governmental Affairs, and the Administrator, Office of Information and Regulatory Affairs, Office of Management and Budget (OMB) on August 14, 2000. To ensure that all parties have adequate time in which to comment, the modified or altered system of records, including routine uses, will become effective 40 days from the publication of the notice, or from the date it was submitted to OMB and the Congress, whichever is later, unless HCFA receives comments that require alterations to this notice.

ADDRESSES: The public should address comments to: Director, Division of Data Liaison and Distribution (DDL), HCFA, Room N2-04-27, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. Comments received will be available for review at this location, by appointment, during regular business hours, Monday through Friday from 9 am.-3 pm., eastern time zone.

FOR FURTHER INFORMATION CONTACT: Howard Cohen, Division of Methods and Strategies, Program Integrity Group, Office of Financial Management, HCFA, Mailstop C3-02-16, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. The telephone number is 410-786-9537.

SUPPLEMENTARY INFORMATION: In 1998, HCFA informed the public of its intent to add three new routine uses to designated HCFA systems of records, under which HCFA may release information without the consent of the individual to whom such information pertains in order to prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud and abuse in programs HCFA administers.

Dated: August 10, 2000.

Nancy Ann Min DeParle,

Administrator, Health Care Financing Administration.

Appendix A

- 09-70-0005 "National Claims History (NCH)," HHS/HCFA/OIS;
- 09-70-0040 "Health Care Financing Administration Medicare Heart Transplant Data File," HHS/HCFA/OIS;
- 09-70-0501 "Carrier Medicare Claims Records," HHS/HCFA;
- 09-70-0503 "Intermediary Medicare Claims Records," HHS/HCFA;
- 09-70-0505 "Supplemental Medical Insurance (SMI) Accounting Collection and Enrollment System (SPACE)," HHS/HCFA;
- 09-70-0516 "Medicare Physician Supplier Master File (MPSM)," HHS/HCFA;
- 09-70-0518 "Medicare Clinic Physician Supplier Master File (MCPS)," HHS/HCFA;
- 09-70-0520 "End Stage Renal Disease (ESRD) Program Management and Medical Information System (PMMIS)," HHS/HCFA/OIS;
- 09-70-0524 "Intern and Resident Information System (IRIS)," HHS/HCFA/OFM;
- 09-70-0525 "Medicare Physician Identification and Eligibility System (MPIES)," HHS/HCFA/OFM;
- 09-70-0526 "Common Working File (CWF)," HHS/HCFA/OIS;
- 09-70-0527 "HCFA Utilization Review Investigatory Files (HURI)," HHS/HCFA;
- 09-70-0530 "Medicare Supplier Identification File (MSIF)," HHS/HCFA/OFM;
- 09-70-1511 "Physical Therapists In Independent Practice (Individuals) (PTIP)," HHS/HCFA/OCSQ;
- 09-70-2003 "Completion of State Medicaid Quality Control (MQC) Reviews," HHS/HCFA/MB;
- 09-70-2006 "Income and Eligibility Verification for Medicaid Eligibility Quality Control (MEQC) Reviews," HHS/HCFA/MB;
- 09-70-4001 "Group Health Plan (GHP) System," HHS/HCFA;
- 09-70-4003 "Medicare HMO/CMP Beneficiary Reconsideration System (MBRS)," HHS/HCFA;
- 09-70-6001 "Medicaid Statistical Information System (MSIS)," HHS/HCFA/OIS.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with the requirement for opportunity for public comment on