

Type of Respondents: Parties that enter into service contracts are ocean common carriers and agreements among ocean common carriers on the one hand, and shippers or shipper's associations on the other.

Number of Annual Respondents: The Commission estimates an annual respondent universe of 143.

Estimated Time Per Response: The time per response ranges from .5 to 16 person-hours for reporting and recordkeeping requirements contained in the rules, and .5 person-hours for completing Form FMC-83.

Total Annual Burden: The Commission estimates the total person-hour burden at 617,015 person-hours.

Title: 46 CFR Part 531—NVOCC Service Arrangements and Related Form FMC-78.

OMB Approval Number: 3072-0070 (Expires September 30, 2008).

Abstract: The Shipping Act of 1984, 46 U.S.C. 40103, authorizes the FMC to exempt by rule "any class of agreements between persons subject to the Act or any specified activity of those persons from any requirement of this Act if it finds that the exemption will not result in substantial reduction in competition or be detrimental to commerce. The Commission may attach conditions to any exemption and may, by order, revoke any exemption." 46 CFR Part 531 allows non-vessel-operating common carriers (NVOCCs) and shippers' associations with NVOCC members to act as shipper parties in NVOCC Service Arrangements (NSAs), and to be exempt from certain tariff publication requirements of the Shipping Act provided the carriage in question is done pursuant to an NSA filed with the Commission and the essential terms are published in the NVOCC's tariff.

Current Actions: There are no changes to this information collection, and it is being submitted for extension purposes only.

Type of Review: Extension.

Needs and Uses: The Commission uses filed NSAs and associated data for monitoring and investigatory purposes and, in its proceedings, to adjudicate related issues raised by private parties.

Frequency: The filing of NSAs is not assigned a specific time by the Commission; NSAs are filed as they may be entered into by private parties. When parties enter into an NSA, it must be filed with the Commission.

Type of Respondents: Parties that enter into NSAs are NVOCCs and shippers' associations with NVOCC members.

Number of Annual Respondents: The Commission estimates an annual respondent universe of 533.

Estimated Time Per Response: The time per response ranges from .5 to 8 person-hours for reporting and recordkeeping requirements contained in the rules, and 1 person-hour for completing Form FMC-78.

Total Annual Burden: The Commission estimates the total person-hour burden at 13,082 person-hours.

Karen V. Gregory,

Assistant Secretary.

[FR Doc. E8-17138 Filed 7-25-08; 8:45 am]

BILLING CODE 6730-01-P

GENERAL SERVICES ADMINISTRATION

Use of Voluntary Consensus Standards in Personal Property Management; Notice of GSA Bulletin FMR B-18

AGENCY: Office of Governmentwide Policy, General Services Administration (GSA).

ACTION: Notice of a bulletin.

SUMMARY: This notice announces GSA Federal Management Regulation (FMR) Bulletin B-18 which provides guidance to Federal agencies on the use of voluntary consensus standards in managing the personal property assets under their control. This bulletin is discretionary to executive agencies. GSA Bulletin FMR B-18 may be found at www.gsa.gov/fmrbulletin.

DATES: The bulletin announced in this notice is effective July 17, 2008.

FOR FURTHER INFORMATION CONTACT: For clarification of content, contact General Services Administration, Office of Governmentwide Policy, Office of Travel, Transportation and Asset Management, at (202) 501-1777. Please cite Bulletin FMR B-18.

SUPPLEMENTARY INFORMATION:

A. Background

Public Law 104-113, the "National Technology Transfer and Advancement Act of 1995," was enacted, in part, to encourage the use of voluntary consensus technical standards in lieu of government-unique standards by Federal agencies except when inconsistent with applicable law or otherwise impractical. The Office of Management and Budget (OMB) has issued OMB Circular A-119 to provide additional guidance. Subsequently, the National Property Management Association (NPMA) and the American Society for Testing and Materials (ASTM), now ASTM International, entered into an agreement to develop voluntary consensus standards for

property management activities. Voluntary consensus standards are a valuable tool for the personal property manager as they represent the collective wisdom of Federal and private sector experts covering topics not addressed in law or governmentwide regulations. This bulletin is discretionary to executive agencies.

This notice announces GSA Bulletin FMR B-18 which provides guidance to Federal agencies on the use of voluntary consensus standards in managing the personal property assets under their control.

B. Procedures

Bulletins regarding asset management are located on the Internet at www.gsa.gov/fmrbulletin as Federal Management Regulation (FMR) bulletins.

Dated: July 21, 2008.

Robert Holcombe,

Director, Personal Property Management Policy.

[FR Doc. E8-17184 Filed 7-25-08; 8:45 am]

BILLING CODE 6820-14-S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

Notice of Opportunity for a Hearing on Compliance of Texas State Plan Provisions Concerning Payments for Birthing Center Facility Services With Title XIX (Medicaid) of the Social Security Act

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

ACTION: Notice of Opportunity for a Hearing.

SUMMARY: This notice announces the opportunity for an administrative hearing to be held on September 26, 2008 at the CMS Dallas Regional Office, 1301 Young Street, Room 1196, Dallas, Texas 75202, to consider whether Texas State plan provisions concerning payments for birthing center facility services comply with the requirements of the Social Security Act as discussed in the July 28, 2008 letter sent to the State and published herein.

CLOSING DATE: Requests to participate in the hearing as a party must be received by the presiding officer by August 27, 2008.

FOR FURTHER INFORMATION CONTACT:

Benjamin R. Cohen, Presiding Officer, CMS, 2520 Lord Baltimore Drive, Suite L, Baltimore, Maryland 21244, Telephone: (410) 786-3169.

SUPPLEMENTARY INFORMATION: This notice announces the opportunity for an administrative hearing concerning the finding of the Administrator of the Centers for Medicare & Medicaid Services (CMS) that the approved State plan under title XIX (Medicaid) of the Social Security Act (the Act) is not in compliance with the provisions of section 1902(a) of the Act. In particular, CMS has found that the State plan provides for separate payment for "birthing center facility services." Birthing centers are not among the recognized provider types, nor are birthing center facility services a type of service within the scope of "medical assistance" under the framework for State Medicaid programs established in Federal law. Further, Federal financial participation is not available in expenditures for payments for birthing center facility services provided on or after September 1, 2008, subject to the opportunity for a hearing described below. This notice is being provided pursuant to the requirements of section 1904 of the Act, as implemented in part by Federal regulations at 42 CFR 430.35 and 42 CFR Part 430, Subpart D.

Birthing centers are not a recognized provider of services within the scope of "medical assistance" under section 1905(a) of the Act. In section 1905(a), Congress specified certain covered facility services, such as those provided by hospitals, clinics, or nursing facilities, but did not specify the services of birthing centers. Birthing centers are not any of those identified types of covered facilities (specifically, they do not meet the requirements to be considered "clinics"). Thus, payment to birthing centers is not payment for "medical assistance" consistent with section 1905(a), and such payment therefore is not contemplated by the references to medical assistance at section 1902(a)(10) of the Act.

Moreover, section 1902(a)(32) requires that State plans make payment directly to the provider of the service, unless there is an assignment or contractual arrangement under which the provider turns over fees to an employer or permits a facility to bill on his/her behalf. Neither of these circumstances apply under the Texas State plan, which accords birthing center facilities payment independent of the nurse midwife practitioners whose services are covered under section 1905(a)(17) of the Act. While the Act would permit higher payments to nurse midwives practicing at birthing centers in order to recognize the higher costs that may be incurred by such nurse midwives, there is no statutory authority to provide for

direct payment to birthing centers for facility services.

While CMS has approved State plan amendments to provide separate payment for birthing center facility services in the past, on further review of the above-referenced provisions, we do not believe that the statute allows for these payments. CMS has previously notified the State of this position through prior deferral action and disapproval of three Medicaid State plan amendments (SPAs 04-033(b), 06-004, and 07-011). The first two SPAs were disapproved on June 29, 2006, and the third on December 23, 2007. CMS has deferred claims for the Federal share totaling \$43,507 for three quarters starting with the period ending June 30, 2006.

The notice to Texas announcing the opportunity for an administrative hearing on the issue of the compliance of the specified State plan provisions reads as follows:

Via Certified Mail—Return Receipt Requested

Mr. Chris Traylor, Associate Commissioner for Medicaid and Children's Health Insurance Program, Texas Health and Human Services Commission, P.O. Box 13247, Austin, TX 78711

Dear Mr. Traylor: This letter provides notice of our finding that the approved State plan under title XIX (Medicaid) of the Social Security Act (the Act) is not in compliance with the provisions of section 1902(a) of the Act. In particular, the Centers for Medicare & Medicaid Services (CMS) has found that the State plan provides for separate payment for "birthing center facility services." Birthing centers are not among the recognized provider types, nor are birthing center facility services a type of service within the scope of "medical assistance" under the framework for State Medicaid programs established in Federal law. Further, Federal financial participation is not available in expenditures for payments for birthing center facility services provided on or after September 1, 2008, subject to the opportunity for a hearing described below. This notice is being provided pursuant to the requirements of section 1904 of the Act as implemented by Federal regulations at 42 CFR 430.35 and 42 CFR Part 430, Subpart D.

Birthing centers are not a recognized provider of services within the scope of "medical assistance" under section 1905(a) of the Act. In section 1905(a), Congress specified certain covered facility services, such as hospitals, clinics, or nursing facilities, but did not specify the services of birthing centers. Birthing centers are not any of those identified types of covered facilities (specifically, they do not meet the requirements to be considered "clinics"). Thus, payment to birthing centers is not payment for medical assistance consistent with section 1905(a), and such payment, therefore, is not contemplated by the references to medical assistance at section 1902(a)(10) of the Act.

Moreover, section 1902(a)(32) requires that State plans make payment directly to the provider of the service, unless there is an assignment or contractual arrangement under which the provider turns over fees to an employer or permits a facility to bill on his/her behalf. Neither of these circumstances apply under the Texas State plan, which accords birthing center facilities payment independent of the nurse midwife practitioner whose services are covered under section 1905(a)(17) of the Act. While the Act would permit higher payments to nurse midwives practicing at birthing centers in order to recognize the higher costs that may be incurred by such nurse midwives, there is no statutory authority to provide for direct payment to birthing centers for facility services.

While CMS has approved State plan amendments to provide separate payment for birthing center facility services in the past, on further review of the above-referenced provisions, we do not believe that the statute allows for these payments. CMS has previously notified the State of this position through a deferral action and disapproval of three Medicaid State plan amendments (SPAs 04-033(b), 06-004, and 07-011). The first two SPAs were disapproved on June 29, 2006, and the third on December 23, 2007. CMS has deferred claims for the Federal share totaling \$43,507 for three quarters starting with the period ending June 30, 2006.

For all of these reasons, and after consulting with the Secretary as required by 42 CFR 430.15(c)(2), I am taking compliance action on the State's birthing center facility payment.

If you are dissatisfied with this determination, you will have an opportunity for a hearing on [60 days after date of publication], in accordance with the procedure set forth in Federal regulations at 42 CFR Part 430, Subpart D. Your request for such a hearing may be sent to the designated hearing officer, Mr. Benjamin R. Cohen, Centers for Medicare & Medicaid Services, 2520 Lord Baltimore Drive, Suite L, Baltimore, Maryland 21244. If you have any questions or wish to discuss this determination further, please contact Mr. Bill Brooks, Associate Regional Administrator, Centers for Medicare & Medicaid Services, Region VI, Division of Medicaid and Children's Health, Department of Health and Human Services, 1301 Young Street, Room 827, Dallas, TX 75202.

Sincerely,
Kerry Weems,
Acting Administrator.

(Catalog of Federal Domestic Assistance program No. 13.714, Medicaid Assistance Program)

Dated: July 23, 2008.

Kerry Weems,
Acting Administrator, Centers for Medicare & Medicaid Services.

[FR Doc. E8-17273 Filed 7-25-08; 8:45 am]

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