

counted as one of the letters of reference.)

5. Additional information is required for the following categories of nominations:

a. Hospital representatives—In your statement regarding serving on the EMTALA TAG indicate—

(1) Your hospital's Medicare provider number;

(2) The type of hospital (public or private); and

(3) Whether or not your hospital has been cited for an EMTALA violation and, if so, the nature of the citation.

b. Practicing physicians—In your statement regarding serving on the EMTALA TAG indicate—

(1) Your board or specialty society and certification (if any) for your field of service;

(2) Your Unique Physician Identification Number (UPIN);

(3) Whether or not you have been cited for an EMTALA violation and, if so, the nature of the violation.

c. Representatives from the CMS regional office, State survey agency or Quality Improvement Organization—In your statement regarding serving on the EMTALA TAG indicate the extent of your experience with EMTALA investigations.

To ensure that a nomination is considered, we must receive all of the nomination information specified in section III of this notice by July 12, 2004.

**Authority:** Section 945 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA). (Catalog of Federal Domestic Assistance Program No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program.)

Dated: April 26, 2004.

**Mark B. McClellan,**

*Administrator, Centers for Medicare & Medicaid Services.*

[FR Doc. 04-11936 Filed 5-27-04; 8:45 am]

**BILLING CODE 4120-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

#### Notice of Grant Award to American Academy of Family Physicians for Phase One of an Open Source EHR Pilot Project Entitled "Making the Transition From Paper to Electronics in Office-Based Medical Practices"

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

**ACTION:** Notice of grant award.

**SUMMARY:** The Centers for Medicare & Medicaid Services has awarded a grant entitled "Open source EHR Pilot Project, Phase One: Making the Transition from Paper to Electronics in Office-Based Medical Practices" to the American Academy of Family Physicians (AAFP), 11400 Tomahawk Creek Parkway, Leawood, KS 66211-2672, in response to an unsolicited application. The AAFP proposes that it will provide a comprehensive, low-cost, standardized, secure, and open source electronic health record (EHR) to the health care community. As a national academy, the AAFP is inherently familiar with the resources required and the necessary questions to be asked in order to make this a viable project, particularly on a national scale. The total amount of the award is \$100,000 for the period June 1, 2004, through November 30, 2004. This project is an opportunity for CMS to further its objective of providing Medicare/Medicaid beneficiaries with information to make better choices. It will investigate the use of Open Source EHR as a tool for improving quality of care for selected patient populations, e.g., diabetes and asthma, through routine collection of quality indicator and performance data and the delivery of evidenced-based guidelines and plans of care at the time of EHR use. This project is consistent with CMS' goal to improve health care quality and consumer decision-making in health care. Funding of this unsolicited proposal will result in a desirable public benefit in that its aim is to provide improvements in quality and safety of care delivery.

#### FOR FURTHER INFORMATION CONTACT:

Albert G. Deal, Office of Research, Development, and Information, Centers for Medicare & Medicaid Services, C3-24-07, 7500 Security Boulevard, Baltimore, MD 21244-1850, (410) 786-6645, or Judy Norris, Grants Officer, Department of Health and Human Services, OOM/AGG/CMS, C2-21-15, 7500 Security Boulevard, Baltimore, MD 21244-1850, (410) 786-5130.

(Catalog of Federal Domestic Assistance Program No. 93.779, Centers for Medicare & Medicaid Services, Research, Demonstrations and Evaluations)

**Authority:** Section 1110 of the Social Security Act.

Dated: May 18, 2004.

**Mark B. McClellan,**

*Administrator, Centers for Medicare & Medicaid Services.*

[FR Doc. 04-12275 Filed 5-27-04; 8:45 am]

**BILLING CODE 4120-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[CMS-2195-N]

RIN 0938-ZA47

#### Medicaid Program; Demonstration To Improve the Direct Service Community Workforce

**ACTION:** Notice.

*Part 1. Overview Information.*

*Funding Opportunity Title:* Medicaid Program; Demonstration To Improve the Direct Service Community Workforce.

*Catalog of Federal Domestic Assistance (CFDA) No:* 93.779.

**DATES:** No new applications will be accepted.

*Part 2. Full Text of the Announcement.*

#### I. Funding Opportunity Description

This notice announces the award of approximately \$6 million in funding through our "Demonstration to Improve the Direct Service Community Workforce" initiative pursuant to the President's Executive Order 13217 "Community-Based Alternatives for Individuals with Disabilities" and authorized under section 1110 of the Social Security Act. The "Demonstration to Improve the Direct Service Community Workforce" grants are designed to assist States and others develop innovative programs that improve recruitment and retention of direct service workers. The House of Representatives Conference Report (HR Conf. Rpt No. 108-401, at 784 [2003]) that accompanied the Consolidated Appropriations Act, 2004 (Pub. L. 108-199) outlines the scope of this project.

These grants are a part of the President's New Freedom Initiative to eliminate barriers to equality and grant a "New Freedom" to children and adults of all ages who have a disability or long-term illness so that they may live and prosper in their communities. This notice also contains information about the manner in which we will continue the award process that originally started in fiscal year (FY) 2003. We will not accept any new applications for the "Demonstration to Improve the Direct Service Community Workforce" grants in FY 2004.

The purpose of this demonstration program is to develop and implement programs that will increase the pool of direct care service workers, who help support people with disabilities in the community, through recruitment and

retention strategies. Examples of potentially fundable demonstration programs might include, but are not limited to wage or time-off incentives, continuing education, outreach to underserved populations, cultural, or logistical barriers.

## II. Award Information

On March 20, 2003, we published a notice titled "Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB) and Solicitation of Applications" in the **Federal Register** (68 FR 13715). The full solicitation is available at <http://www.cms.hhs.gov/newfreedom/dswsolicitation.pdf>. Under this notice, we invited proposals from States and others, in partnership with their disability and aging communities, to create systems that will improve the recruitment and retention of direct service workers. Grant applications were due August 12, 2003.

The response of States and other eligible entities to this opportunity was extraordinary: we received over 100 applications for these grants. The response revealed a strong interest on the part of States and their citizens to address the need for a stable direct service community workforce. In October 2003, we announced the award of five grants totaling \$4,370,000. Each of these grants had a 36-month budget period.

Due to the extraordinary response we received from the "Demonstration to Improve the Direct Service Community Workforce" solicitation in FY 2003, we will not accept any new applications in FY 2004. Instead, we will continue to process the ranked applications submitted in FY 2003, beginning with the highest-ranked applications that were not funded in FY 2003. Each of the FY 2004 grants awarded in this notice has a 36-month budget period.

## III. Eligibility Information

### 1. Eligible Applicants

We have offered FY 2004 funding to those eligible applicants. Eligible applicants are those applicants who (1) submitted an application in FY 2003 and (2) received from us written notification indicating that their application received a score from the

review panel in a range that will permit us to make an award in FY 2004.

### 2. Cost Sharing or Matching

Matching funds of either in-kind or cash contributions totaling 5 percent of the project's total value are required.

## IV. Application and Submission Information

### 1. Address To Request Application Package

No new applications will be accepted. Only eligible applicants will be funded.

### 2. Content and Form of Application Submission

No new applications will be accepted.

### 3. Submission Dates and Times

No new applications will be accepted.

### 4. Funding Restrictions

Proposals that included a health insurance intervention were eligible for funding up to \$1,403,000 and proposals that targeted other interventions were eligible for funding up to \$680,500.

## V. Application Review Information

### 1. Criteria

Since we received far more applications in FY 2003 than we were able to fund, we are announcing our intention to continue the award process for eligible applicants (see definition of eligible applicants in the eligibility information section of this notice).

### 2. Review and Selection Process

We have used the review panel scores from FY 2003 to determine the ranking of applications and will attempt to provide funding for applications where funding was previously unavailable. We reserve the right to reallocate those funds to the next highest-ranked eligible applicant(s) if eligible applicants are subsequently determined not to have met all of the requirements as detailed in the award information section of this notice, the terms and conditions of grant awards, or otherwise fail to respond to us. We have determined that we will be able to fund, in FY 2004, five new "Demonstration to Improve the Direct Service Community Workforce" grants.

### 3. Anticipated Announcement and Award Dates

We anticipate that these grants will be officially awarded on or before

September 30, 2004. New grantees may expend grant funds over a 36-month period from the date of the award. New grantees are listed in "Chart—2004 Demonstration to Improve the Direct Service Community Workforce Grant Awards" in section VIII of this notice.

## VI. Award Administration Information

### 1. Award Notices

No new applications will be accepted. Eligible applicants will receive an official Notice of Grant Award (Form CMS 6-U6-PG) along with terms and conditions of the grant award.

### 2. Administrative and National Policy Requirements

Specific administrative and policy requirements of grantees, including the matching fund requirements, as detailed in the full solicitation, available section II of this notice, will continue to apply to all Eligible Applicants that receive awards in FY 2004.

### 3. Reporting

Specific reporting requirements of grantees, as detailed in section II of this notice, will continue to apply to all eligible applicants that receive awards in FY 2004.

## VII. Agency Contacts

Programmatic questions about the Demonstration to Improve the Direct Service Community Workforce grants may be directed to: Kate King, Centers for Medicare & Medicaid Services, Center for Medicaid and State Operations, DEHPG/DCSI, Mail Stop S2-14-26, 7500 Security Boulevard, Baltimore, MD 21244-1850, 410-786-1283 (voice), 410-786-9004 (fax), or by e-mail at [kking@cms.hhs.gov](mailto:kking@cms.hhs.gov).

Administrative questions about the Demonstration to Improve the Direct Service Community Workforce grants may be directed to: Nettie Faulkner, Centers for Medicare & Medicaid Services, Acquisition and Grants Group, AGG/DRCG, Mail Stop C2-21-15, 7500 Security Boulevard, Baltimore, MD 21244-1850, 410-786-6639 (voice), 410-786-9088 (fax), or by e-mail at [nfaulkner@cms.hhs.gov](mailto:nfaulkner@cms.hhs.gov).

## VIII. Other Information

### CHART—2004 DEMONSTRATION TO IMPROVE THE DIRECT SERVICE COMMUNITY WORKFORCE GRANT AWARDS

State or other entity	Grant amount
Arkansas Department of Human Services, Little Rock, Arkansas .....	\$680,000
Bridges, Inc., Gary, Indiana .....	1,403,000

CHART—2004 DEMONSTRATION TO IMPROVE THE DIRECT SERVICE COMMUNITY WORKFORCE GRANT AWARDS—  
Continued

State or other entity	Grant amount
Home Care Quality Authority, Olympia, Washington .....	1,403,000
Seven Counties Services, Inc., Louisville, Kentucky .....	680,000
Virginia Department of Medical Assistance Services, Richmond, Virginia .....	1,403,000

**IX. Collection of Information Requirements**

This notice informs applicants of the "Demonstration to Improve the Direct Service Community" that CMS has awarded 5 grants in FY 2003. Due to the extraordinary response received, CMS will not accept any new applications in FY 2004, but will continue to process the ranked applications submitted in FY 2003, beginning with the highest-ranked applications that were not funded in FY 2003.

This information collection requirement is subject to the PRA; however, it has already been approved under OMB control number 0938-0836 entitled "Real Choice Systems Grants; Nursing Facility Transition/Access Housing Grants; Community Personal Assistance Service and Supports Grants, National Technical Assistance and Learning Collaborative Grants to Support Systems Change for Community Living" with a current expiration date of 1/31/2007.

Dated: March 12, 2004.

**Dennis G. Smith,**

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

[FR Doc. 04-12172 Filed 5-27-04; 8:45 am]

BILLING CODE 4120-01-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Medicare & Medicaid Services**

[CMS-1266-N]

**Medicare Program; Public Meeting in Calendar Year 2004 for New Clinical Laboratory Tests Payment Determinations**

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

**ACTION:** Notice of meeting.

**SUMMARY:** This notice announces a public meeting to discuss payment determinations for specific new Physicians' Current Procedural Terminology (CPT) codes for clinical laboratory tests. The meeting provides a forum for interested individuals to make oral presentations and submit written

comments on the new codes that will be included in Medicare's Clinical Laboratory Fee Schedule for calendar year 2005 that will be effective on January 1, 2005. Discussion is directed toward technical issues relating to payment determinations for a specified list of new clinical laboratory codes. The development of the codes for clinical laboratory tests is largely performed by the CPT Editorial Panel and will not be discussed at the CMS meeting.

**DATES:** The public meeting is scheduled for Monday, July 26, 2004 from 10 a.m. to 4 p.m., e.s.t.

**ADDRESSES:** The meeting will be held at the Centers for Medicare & Medicaid Services (CMS) Auditorium located at 7500 Security Boulevard, Baltimore, Maryland 21244.

Registration: Registration Procedures: Beginning June 28, 2004 registration may be completed on-line at <http://www.cms.hhs.gov/paymentsystems>. The following information must be submitted when registering: name, company name, address, telephone number, and e-mail address. When registering, individuals who want to make a presentation must also specify for which new clinical laboratory test code(s) they will be presenting. A confirmation will be sent upon receipt of the registration. Registration Deadline: Individuals must register by July 22, 2004. If on-line registration is not used, individuals may register by phone at (410) 786-4601 or fax to the attention of Anita Greenberg at (410) 786-0169.

**FOR FURTHER INFORMATION CONTACT:** Anita Greenberg (410) 786-4601.

**SUPPLEMENTARY INFORMATION:**

**I. Background**

Section 531(b) of the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000 (BIPA), Pub. L. 106-554, mandated procedures that permit public consultation for payment determinations for new clinical laboratory tests under Part B of title XVIII of the Social Security Act (the Act) in a manner consistent with the procedures established for implementing coding modifications for

International Classification of Diseases. The procedures and public meeting announced in this notice for new clinical laboratory tests are in accordance with the procedures published to implement section 531(b) of BIPA in the **Federal Register** at 66 FR 58743 on November 23, 2001. Also, section 942(b) of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003, Pub. L. 108-173, amended section 1833(h)(8)(B)(iii) of the Act to require that we convene a public meeting to receive comments and recommendations (and data on which recommendations are based) for establishing payment amounts for new clinical laboratory tests. The public meeting is intended to provide expert input on the nature of new clinical laboratory tests and receive recommendations to either crosswalk or gap-fill for payment. Decisions regarding payment for the newly created Physicians' Current Procedural Terminology (CPT) codes will not be made at this meeting. A summary of the new codes and the payment recommendations that are presented during the public meeting will be posted on our Web site by September 10, 2004 and can be accessed at <http://www.cms.hhs.gov/paymentsystems>. The summary will also display our tentative payment determinations, and interested parties may submit written comments on the tentative payment determinations by September 24, 2004 to the address specified in the summary.

**II. Presentations**

This meeting is open to the public. The on-site check-in for visitors will be held from 9:30 a.m. to 10 a.m., followed by opening remarks. Registered presenters may discuss and recommend payment determinations for specific new CPT codes for the 2004 Clinical Laboratory Fee Schedule. A newly created CPT code can either represent a refinement or modification of existing test methods or a substantially new test method. The newly created CPT codes for the calendar year 2004 will be listed at the following Web site <http://www.cms.hhs.gov/paymentsystems> on or after June 28, 2004.

Oral presentations must be brief, and must be accompanied by three written