December 27, 2011. Write "Tobacco Reports: Paperwork Comment, FTC File No. P054507" on your comment. Your comment, including your name and your state, will be placed on the public record of this proceeding, including, to the extent practicable, on the public Commission Web site, at <a href="http://www.ftc.gov/os/publiccomments.shtm">http://www.ftc.gov/os/publiccomments.shtm</a>. As a matter of discretion, the Commission tries to remove individuals' home contact information from comments before placing them on the Commission Web site.

Because your comment will be made public, you are solely responsible for making sure that your comment does not include any sensitive personal information, such as anyone's Social Security number, date of birth, driver's license number or other state identification number or foreign country equivalent, passport number, financial account number, or credit or debit card number. You are also solely responsible for making sure that your comment does not include any sensitive health information, such as medical records or other individually identifiable health information. In addition, don't include any "[t]rade secret or any commercial or financial information which is obtained from any person and which is privileged or confidential \* \* \*, " as provided in Section 6(f) of the FTC Act, 15 U.S.C. 46(f), and FTC Rule 4.10(a)(2), 16 CFR 4.10(a)(2). In particular, don't include competitively sensitive information, such as costs, sales statistics, inventories, formulas, patterns, devices, manufacturing processes, or customer names.

If you want the Commission to give your comment confidential treatment, you must file it in paper form, with a request for confidential treatment, and you have to follow the procedure explained in FTC Rule 4.9(c), 16 CFR 4.9(c).<sup>5</sup> Your comment will be kept confidential only if the FTC General Counsel, in his or her sole discretion, grants your request in accordance with the law and the public interest.

Postal mail addressed to the Commission is subject to delay due to heightened security screening. As a result, we encourage you to submit your comments online, or to send them to the Commission by courier or overnight service. To make sure that the Commission considers your online comment, you must file it at https://ftcpublic.commentworks.com/ftc/

tobaccoreportspra2, by following the instructions on the web-based form. If this Notice appears at http://www.regulations.gov/#!home, you also may file a comment through that Web site.

If you file your comment on paper, write "Tobacco Reports: Paperwork Comment, FTC File No. P054507" on your comment and on the envelope, and mail or deliver it to the following address: Federal Trade Commission, Office of the Secretary, Room H–113 (Annex J), 600 Pennsylvania Avenue NW., Washington, DC 20580. If possible, submit your paper comment to the Commission by courier or overnight service.

Visit the Commission Web site at http://www.ftc.gov to read this Notice and the news release describing it. The FTC Act and other laws that the Commission administers permit the collection of public comments to consider and use in this proceeding as appropriate. The Commission will consider all timely and responsive public comments that it receives on or before December 27, 2011. You can find more information, including routine uses permitted by the Privacy Act, in the Commission's privacy policy, at http://www.ftc.gov/ftc/privacy.htm.

Comments on the information collection requirements subject to review under the PRA should additionally be submitted to OMB. If sent by U.S. mail, they should be addressed to Office of Information and Regulatory Affairs, Office of Management and Budget, Attention: Desk Officer for the Federal Trade Commission, New Executive Office Building, Docket Library, Room 10102, 725 17th Street, NW., Washington, DC 20503. Comments sent to OMB by U.S. postal mail, however, are subject to delays due to heightened security precautions. Thus, comments instead should be sent by facsimile to (202) 395-5167.

#### David C. Shonka,

Acting General Counsel.
[FR Doc. 2011–30344 Filed 11–23–11; 8:45 am]
BILLING CODE 6750–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Assistant Secretary for Planning and Evaluation; Medicare Program; Meeting of the Technical Advisory Panel on Medicare Trustee Reports

**AGENCY:** Assistant Secretary for Planning and Evaluation, HHS. **ACTION:** Notice of meeting.

**SUMMARY:** This notice announces public meetings of the Technical Advisory Panel on Medicare Trustee Reports (Panel). Notice of these meetings is given under the Federal Advisory Committee Act (5 U.S.C. App. 2, section 10(a)(1) and (a)(2)). The Panel will discuss the long range (75 year) projection methods and assumptions in projecting Medicare health expenditures and projecting National Health Expenditures and may make recommendations to the Medicare Trustees on how the Trustees might more accurately estimate health spending in the long run. The Panel's discussion is expected to be very technical in nature and will focus on the actuarial and economic assumptions and methods by which Trustees might more accurately project health spending. Although panelists are not limited in the topics they may discuss, the Panel is not expected to discuss or recommend changes in current or future Medicare provider payment rates or coverage policy.

**DATES:** *Meeting Date:* December 14, 2011, 9:15 a.m. to 5 p.m.

ADDRESSES: The meeting will be held at HHS headquarters at 200 Independence Ave., SW., Washington, DC, 20201, Room TBD.

Comments: The meeting will allocate time on the agenda to hear public comments at the end of the meeting. In lieu of oral comments, formal written comments may be submitted for the record to Donald T. Oellerich, OASPE, 200 Independence Ave., SW., 20201, Room 405F. Those submitting written comments should identify themselves and any relevant organizational affiliations.

### FOR FURTHER INFORMATION CONTACT:

Donald T Oellerich (202) 690–7409, Don.oellerich@hhs.gov. Note: Although the meeting is open to the public, procedures governing security procedures and the entrance to Federal buildings may change without notice. Those wishing to attend the meeting must call or email Dr. Oellerich by Monday December 12, 2011, so that their name may be put on a list of expected attendees and forwarded to the security officers at HHS Headquarters.

**SUPPLEMENTARY INFORMATION:** Topics of the Meeting: The Panel is specifically charged with discussing and possibly making recommendations to the Medicare Trustees on how the Trustees might more accurately project health spending in the United States. The discussion is expected to focus on highly technical aspects of estimation involving economics and actuarial science. Panelists are not restricted,

 $<sup>^5</sup>$  In particular, the written request for confidential treatment that accompanies the comment must include the factual and legal basis for the request, and must identify the specific portions of the comment to be withheld from the public record. See FTC Rule 4.9(c), 16 CFR 4.9(c).

however, in the topics that they choose to discuss.

Procedure and Agenda: This meeting is open to the public. The Panel will likely hear presentations by panel members and HHS staff regarding long range projection methods and assumptions. After any presentations, the Panel will deliberate openly on the topic. Interested persons may observe the deliberations, but the Panel will not hear public comments during this time. The Panel will also allow an open public session for any attendee to address issues specific to the topic.

Authority: 42 U.S.C. 217a; Section 222 of the Public Health Services Act, as amended. The panel is governed by provisions of Public Law 92–463, as amended (5 U.S.C. appendix 2), which sets forth standards for the formation and use of advisory committees

Dated: November 18, 2011.

#### Sherry Glied,

Assistant Secretary for Planning and Evaluation.

[FR Doc. 2011–30337 Filed 11–23–11; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Medicare & Medicaid Services

[CMS-1593-N]

Medicare Program; Renaming and Other Changes to the Advisory Panel on Hospital Outpatient Payment Charter (Formerly the Advisory Panel on Ambulatory Payment Classification Groups) and Request for Nominations

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

**ACTION:** Notice.

SUMMARY: This notice announces the name change of the Advisory Panel on Ambulatory Payment Classification Groups to the Advisory Panel on Hospital Outpatient Payment (HOP) (the Panel). In addition, it announces the renewal and amendments to the charter including changing the scope of the Panel to include supervision of outpatient hospital services, changing the Panel membership to include Critical Access Hospitals (CAH), and the solicitation of six nominations for individuals to serve on the Panel in 2012.

**DATES:** Submission of Nominations: We will consider nominations if they are received no later than 5 p.m. (e.s.t.), December 27, 2011.

**ADDRESSES:** Please email, mail or hand deliver nominations to the following

address: Centers for Medicare & Medicaid Services; Attn: Paula Smith, Advisory Panel on HOP; Center for Medicare, Hospital & Ambulatory Policy Group, Division of Outpatient Care; 7500 Security Boulevard, Mail Stop C4–05–17; Woodlawn, MD 21244–1850, Paula.Smith@cms.hhs.gov.

**FOR FURTHER INFORMATION CONTACT:** For questions or other information about the Panel, submit a written request to Paula Smith at the addresses provided above or call (410) 786–4709.

Advisory Committees' Information Lines: You may also refer to the CMS Federal Advisory Committee Hotlines at 1–(877) 449–5659 (toll-free) or (410) 786–9379 (local) for additional information.

Web site: For additional information on the Panel, the revised charter and updates to the Panel's activities, please access our Web site: http://www.cms.hhs.gov/FACA/05\_Advisory PanelonAmbulatoryPayment ClassificationGroups.asp#TopOfPage. (Note: There is an UNDERSCORE after FACA/05; there is no space.)

News Media: Representatives should contact the CMS Press Office at (202) 690–6145.

Copies of the Charter: Copies of the Charter are available on the Internet at: http://www.cms.gov/FACA/05\_Advisory PanelonAmbulatoryPayment ClassificationGroups.asp#TopOfPage. (Note: There is an UNDERSCORE after FACA/05; there is no space.)

## SUPPLEMENTARY INFORMATION:

## I. Background

The Secretary of the Department of Health and Human Services (the Secretary) is required by section 1833(t)(9)(A) of the Social Security Act (the Act) and section 222 of the Public Health Service Act (PHS Act) to consult with an expert outside advisory panel regarding the clinical integrity of the Ambulatory Payment Classification (APC) groups and relative payment weights. The Advisory Panel on Hospital Outpatient Payment (HOP) (the Panel, which was formerly known as the Advisory Panel on Ambulatory Payment Classification Groups) is governed by the provisions of the Federal Advisory Committee Act (FACA) (Pub. L. 92-463), as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory panels.

The Charter provides that the Panel shall meet up to 3 times annually. We consider the technical advice provided by the Panel as we prepare the proposed and final rules to update the outpatient prospective payment system (OPPS) for the next calendar year.

The Panel shall consist of a chair and up to 19 members (previously 15) who are full-time employees of hospitals, hospital systems, or other Medicare providers. For purposes of the Panel, consultants or independent contractors are not considered to be full-time employees in these organizations.

The current Panel consists of the following members: (The asterisk [\*] indicates the Panel member whose term will end on February 29, 2012.)

- E. L. Hambrick, M.D., J.D., Chair, a CMS Medical Officer.
- Ruth L. Bush, M.D., M.P.H.
- Kari S. Cornicelli, C.P.A., FHFMA.
- Dawn L. Francis, M.D., M.H.S.
- Kathleen Graham, R.N., M.S.H.A.\*
- David A. Halsey, M.D.
- Brian D. Kavanagh, M.D., M.P.H.
- Judith T. Kelly, B.S.H.A., RHIT, RHIA, CCS.
- Scott Manaker, M.D., Ph.D.
- John Marshall, CRA, RCC, CIRCC, RT(R), FAHRA.
- Randall A. Oyer, M.D.
- Jacqueline Phillips.
- Daniel J. Pothen, M.S., RHIA, CHPS, CPHIMS, CCS, CCS-P, CHC.
- Gregory J. Przbylski, M.D.
- Marianna V. Spanaki-Varela, M.D., Ph.D., M.B.A.

Panel members serve without compensation, according to an advance written agreement. For the meetings, we reimburse travel, meals, lodging, and related expenses in accordance with standard Government travel regulations. We have a special interest in attempting to ensure, while taking into account the nominee pool, that the Panel is diverse in all respects of the following: Geography, rural or urban practice, points of view, medical or technical specialty, type of hospital, hospital health system, or other Medicare provider.

Based upon either self-nominations or nominations submitted by providers or interested organizations, the Secretary, or her designee, appoints new members to the Panel from among those candidates determined to have the required expertise. New appointments are made in a manner that ensures a balanced membership under the FACA guidelines.

The Secretary signed the original charter establishing the Panel on November 21, 2000, and approved the renewal, renaming, and amendment of the Panel charter on November 15, 2011. The charter will terminate on November 15, 2013, unless renewed or amended by appropriate actions.

### II. Criteria for Nominees

The Panel must be fairly balanced in its membership in terms of the points of