

suiting for care by the PCM or in an urgent care setting.

b. Implementation

This demonstration will be effective 60 days from the date of this notice for a period of twenty-four (24) months.

c. Evaluation

The results of this Demonstration will allow a focused study of the impact of this process on: (1) The reduction of ER utilization and resulting costs, (2) assessment of the availability and accessibility of less expensive acute care services such as UCCs, (3) reduction of administrative processes, and (4) impact on Coast Guard active duty service members and their families. The evaluation/analysis of the demonstration would use Fiscal Year 2008 as the base line with follow-up data analysis conducted at each 6-month interval throughout the 24 month period to monitor of ER and TRICARE authorized UCC utilization workload and cost (claims data). Success of the demonstration would be determined by consistent shifts in health care utilization from ERs to a TRICARE authorized UCCs by 15–20%. A less than 5% shift in utilization from the ER to a TRICARE authorized UCCs would be considered insignificant.

Dated: March 1, 2011.

Morgan F. Park,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 2011–4863 Filed 3–3–11; 8:45 am]

BILLING CODE 5001–06–P

DEPARTMENT OF DEFENSE

Office of the Secretary

Notice of Two-Year Continuation of Disease Management Demonstration Project for TRICARE Standard Beneficiaries

AGENCY: Department of Defense.

ACTION: Notice of Two-Year Continuation of Disease Management Demonstration Project for TRICARE Standard Beneficiaries.

SUMMARY: This notice is to advise interested parties of the continuation of a Military Health System (MHS) demonstration project entitled “Disease Management Demonstration Project for TRICARE Standard Beneficiaries”. The original demonstration notice was published on June 13, 2007 (72 FR 32628–32629) and described a demonstration project to provide disease management (DM) services to TRICARE Standard beneficiaries in

addition to the TRICARE Prime beneficiaries who were already entitled to such services. TRICARE began the demonstration project in March 2007 for Standard beneficiaries and this demonstration project has enabled the MHS to provide uniform policies and practices on disease and chronic care management throughout the TRICARE network. Additionally, the demonstration has helped determine the effectiveness of DM programs in improving the health status of beneficiaries with targeted chronic diseases or conditions, and any associated cost savings. The TRICARE Management Activity (TMA) chose a phased approach to determine the efficacy and cost effectiveness of its disease management demonstration, beginning with beneficiaries identified with the disease states of asthma, heart failure, and diabetes. TMA now intends to continue the disease management services to TRICARE Standard beneficiaries until a permanent TRICARE disease management benefit (per the John Warner National Defense Authorization Act of 2007, section 734) is implemented. This continuation of the disease management demonstration project will be conducted under the authority provided in 10 U.S.C. 1092.

DATES: *Effective date:* The extension of the demonstration will be effective April 1, 2011 and will continue for a period of two years until March 31, 2013.

ADDRESSES: TRICARE Management Activity (TMA), 5111 Leesburg Pike, Suite 810, Falls Church, VA 22041–3206.

FOR FURTHER INFORMATION CONTACT:

Robin Marzullo, Disease Management Nurse Consultant, Population Health and Medical Management—TRICARE Management Activity, telephone (703) 681–6717 x 1214.

SUPPLEMENTARY INFORMATION:

A. Background

For additional information on the TRICARE demonstration project for disease management, please see 72 FR 32628–32629 and 74 FR 11089–11090. The original demonstration notice focused on explaining the differences between the disease management benefits available to TRICARE Standard and TRICARE Prime beneficiaries and the manner in which disease management services had been provided prior to the demonstration. The prior notice explained that for purposes of the demonstration, the Department of Defense (DoD) would waive, for these disease management services provided to Standard beneficiaries, the provisions

of 10 U.S.C. 1079(a)(13) and 32 CFR 199.4(g)(39) that expressly exclude clinical preventive services for TRICARE Standard beneficiaries. The prior notice also explained the enrollment process and cap on disease management costs.

B. Description of Extension of Demonstration Project

Under this demonstration, DoD has waived, for disease management services provided to TRICARE Standard beneficiaries, the provisions of 10 U.S.C. 1079(a)(13) and 32 CFR 199.4(g)(39) that expressly exclude clinical preventive services for TRICARE Standard beneficiaries in the current benefit. The Military Health System (MHS) has enrolled TRICARE Standard beneficiaries in its disease management programs. Disease management services provided to Standard beneficiaries have included, but have not been limited to: Clinical preventive examinations, patient education and counseling services, and periodic screening exams. MHS disease management program costs have been capped not to exceed the amount approved by the contracting officer. The disease management program costs are total costs of disease management services provided to both Prime and Standard beneficiaries. Only those beneficiaries identified by the TRICARE Management Activity (TMA) for disease management of asthma, heart failure, diabetes, COPD, depression, anxiety, and cancer, have been included in the current program. Beneficiaries identified by TMA are included in the disease management program unless they choose to opt out. This action directly reduces variation across the system and results in improved consistency and quality for beneficiaries with targeted chronic illness, regardless of TRICARE classification. Furthermore, including TRICARE Standard beneficiaries in current disease management efforts informs the MHS about total potential savings and return on investment (ROI) associated with disease management, a stated requirement of the John Warner National Defense Authorization Act for Fiscal Year 2007. Continuing to provide disease management services to all TRICARE beneficiaries will continue to maintain our overall quality of care throughout the MHS program. By educating patients about their disease and helping them manage their symptoms, many of the complications of these diseases can be avoided, possibly slowing the progression of their chronic disease, thus resulting in significant cost savings.

C. Implementation

The extension of the demonstration will be effective on April 1, 2011. The terms and conditions of the original demonstration as provided in the Notice published at 72 FR 32368–32369 will continue on that date.

D. Evaluation

An independent evaluation of the demonstration will continue to be conducted. The evaluation is designed to use a combination of administrative and survey measures of health care outcomes (clinical, utilization, financial, and humanistic measures) to provide analyses and comment on meeting its goal of providing uniform disease management policies and practices across the MHS.

Dated: March 1, 2011.

Morgan F. Park,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

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DEPARTMENT OF DEFENSE

Office of the Secretary

[Docket ID DOD–2011–OS–0028]

U.S. Court of Appeals for the Armed Forces Proposed Rules Changes

AGENCY: Department of Defense.

ACTION: Notice of Proposed Changes to the Rules of Practice and Procedure of the United States Court of Appeals for the Armed Forces.

SUMMARY: This notice announces the following proposed changes to Rules 9(e) and 41(b) of the Rules of Practice and Procedure, United States Court of Appeals for the Armed Forces.

DATES: Comments on the proposed change must be received within 30 days of the date of this notice.

ADDRESSES: You may submit comments, identified by docket number and/or Regulatory Information Number (RIN) and title by any of the following methods:

- *Federal eRulemaking Portal:* <http://www.regulations.gov>.
- *Mail:* Federal Docket Management System Office, 1160 Defense Pentagon, OSD Mailroom 3C843, Washington, DC 20301–1160.

Instructions: All submissions received must include the agency name and docket number for this **Federal Register** document. The general policy for comments and other submissions from members of the public is to make these submissions available for public

viewing on the Internet at <http://www.regulations.gov> as they are received without change, including personal identifiers or contact information.

FOR FURTHER INFORMATION CONTACT:

William A. DeCicco, Clerk of the Court, telephone (202) 761–1448.

Dated: March 1, 2011.

Morgan F. Park,

Alternate OSD Federal Liaison Officer, Department of Defense.

Rule 9(e)

Rule 9(e) currently reads:

(e) Hours. The Clerk's office shall be open for the filing of pleadings and other papers from 8 a.m. to 5 p.m. every day except Saturdays, Sundays, and legal holidays, or as otherwise ordered by the Court. *See* Rule 36(a). The Court is always open for filing of pleadings and other papers. A pleading or other paper may be filed outside of normal operating hours of the Clerk's office by delivery to the U.S. Marshal on duty in the front lobby of the courthouse. Pleadings will be deemed filed on the date and time delivered to the U.S. Marshal. The U.S. Marshal will notify the Clerk of the filing in accordance with procedures provided by the Clerk.

The proposed change to Rule 9(e) would read:

(e) Hours. The Clerk's office shall be open for the filing of pleadings and other papers from 8 a.m. to 5 p.m. every day except Saturdays, Sundays, and legal holidays, or as otherwise ordered by the Court. *See* Rule 36(a). The Court is always open for filing of pleadings and other papers. A pleading or other paper may be filed outside of normal operating hours of the Clerk's office by delivery to Court security personnel on duty in the front lobby of the courthouse. Pleadings will be deemed filed on the date and time delivered to Court security personnel. Court security personnel will notify the Clerk of the filing in accordance with procedures provided by the Clerk.

Comment: The proposed change modifies the term "U.S. Marshal" in three places to "Court security personnel." The reason for the change is that security for the Court is now provided by the Pentagon Force Protection Agency, and not the U.S. Marshals Service. The change will therefore more accurately describe the officers on duty.

Rule 41(b)

Rule 41(b) currently reads:

(a) The photographing, televising, recording, or broadcasting of any session of the Court or other activity

relating thereto is prohibited unless authorized by the Court.

(b) Any violation of this rule will be deemed a contempt of this Court and, after due notice and hearing, may be punished accordingly. *See* 18 U.S.C. 401.

The proposed change to Rule 41(b) would read:

(a) The photographing, televising, recording, or broadcasting of any session of the Court or other activity relating thereto is prohibited unless authorized by the Court.

(b) Any violation of this rule will be deemed a contempt of this Court and, after due notice and hearing, may be punished accordingly. *See* Article 48, UCMJ.

Comment: In the recent National Defense Authorization Act, Congress amended Article 48, Uniform Code of Military Justice, to give express contempt power to the United States Court of Appeals for the Armed Forces. The proposed change reflects this direct grant of authority to the Court.

[FR Doc. 2011–4927 Filed 3–3–11; 8:45 am]

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DEPARTMENT OF DEFENSE

Department of the Air Force

[Docket ID USAF–2011–0007]

Privacy Act of 1974; System of Records

AGENCY: Department of the Air Force, DoD.

ACTION: Notice To Add a System of Records.

SUMMARY: The Department of the Air Force proposes to add a system of records to its inventory of record systems subject to the Privacy Act of 1974 (5 U.S.C. 552a), as amended.

DATES: This proposed action will be effective without further notice on April 4, 2011 unless comments are received which result in a contrary determination.

ADDRESSES: You may submit comments, identified by docket number and/RIN number and title, by any of the following methods:

- * *Federal Rulemaking Portal:* <http://www.regulations.gov>. Follow the instructions for submitting comments.

- * *Mail:* Federal Docket Management System Office, 1160 Defense Pentagon, OSD Mailroom 3C843, Washington, DC 20301–1160.

Instructions: All submissions received must include the agency name and docket number or Regulatory