

Abraham Lincoln National Cemetery (20953 West Hoff Road, Elwood, IL 60421).

On Thursday, September 13, the Committee will convene an open session at the Jesse Brown VA Medical Center; 820 South Damen Avenue, Chicago, IL 60612, from 8:30 a.m. to 3:00 p.m. in the Prescription Conference Room JB 2446B (2nd Floor, Damen Building). The agenda will include overview briefings from the Jesse Brown VA Medical Center leadership on the facilities, programs, demographics, women Veterans programs, and other services available for Veterans in Chicago. In the afternoon, the Committee will reconvene a closed session, as it tours the Jesse Brown VA Medical Center.

In the morning of Friday, September 14, the Committee will convene an open session at the Jesse Brown VA Medical Center; 820 South Damen Avenue, Chicago, IL 60612, from 8:00 a.m. to 9:00 a.m. in the Prescription Conference Room JB 2446B (2nd Floor, Damen Building), as it conducts an out-briefing with leadership from the Jesse Brown VA Medical Center / Edward Hines Junior Hospital / Captain James A. Lovell Federal Health Care Center / Chicago Regional Benefits Office / Abraham Lincoln National Cemetery. The Committee will reconvene an open session in the Prescription Conference Room JB 2446B (2nd Floor, Damen Building), as it participates in a town hall meeting with the women Veterans and other stakeholders. The town hall meeting will begin at 9:30 a.m. and end promptly at 11:00 a.m.

With the exception of the town hall meeting, there will be no time for public comment during the meeting. Members of the public may submit written statements for the Committee's review to 00W@mail.va.gov, or by fax at (202) 273-7092. Any member of the public and media wishing to attend or seeking

additional information should contact Shannon L. Middleton at (202) 461-6193, or 00W@mail.va.gov.

Dated: August 23, 2018.

Jelessa M. Burney,
Federal Advisory Committee Management Officer.

[FR Doc. 2018-18626 Filed 8-27-18; 8:45 am]

BILLING CODE 8320-01-P

DEPARTMENT OF VETERANS AFFAIRS

Cost-Based and Inter-Agency Billing Rates for Medical Care or Services Provided by the Department of Veterans Affairs

AGENCY: Department of Veterans Affairs.
ACTION: Notice.

SUMMARY: This document updates the Cost-Based and Inter-Agency billing rates for medical care or services provided by the Department of Veterans Affairs (VA) furnished in certain circumstances.

DATES: The rates set forth herein are effective August 28, 2018 and until further notice.

FOR FURTHER INFORMATION CONTACT: Romona Greene, Office of Community Care, Revenue Operations, Payer Relations and Services, Rates and Charges (10D1C1), Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420, (202) 382-2521. (This is not a toll free number.)

SUPPLEMENTARY INFORMATION: VA's methodology for computing Cost-Based and Inter-Agency rates for medical care or services provided by VA is set forth in 38 CFR 17.102(h). Two sets of rates are obtained by applying this methodology, Cost-Based and Inter-Agency.

In accordance with 38 CFR 17.102(a), (b), (d), and (g) respectively, Cost-Based

rates apply to medical care and services that are provided by VA:

- In error or based on tentative eligibility,
- In a medical emergency,
- To pensioners of allied nations; and
- For research purposes in circumstances under which the medical care appropriation shall be reimbursed from the research appropriation.

In accordance with 38 CFR 17.102(c) and (f), Inter-Agency rates apply to medical care and services that are provided by VA to beneficiaries of the Department of Defense or other Federal agencies, when the care or services provided is not covered by an applicable sharing agreement, unless otherwise stated.

The calculations for the Cost-Based and Inter-Agency rates are the same with two exceptions. Inter-Agency rates are all-inclusive, are not broken down into three components (Physician; Ancillary; and Nursing, Room, and Board), and do not include standard fringe benefit costs that cover Government employee retirement, disability costs, and return on fixed assets. When VA pays for medical care or services from a non-VA source under circumstances in which the Cost-Based or Inter-Agency rates would apply if the care or services had been provided by VA, the charge for such care or services will be the actual amount paid by VA for the care or services. Inpatient charges will be at the per diem rates shown for the type of bed section or discrete treatment unit providing the care.

The following table depicts the Cost-Based and Inter-Agency rates that are effective upon publication of this notice and will remain in effect until the next **Federal Register** notice is published. These rates supersede those established by the **Federal Register** notice published on August, 29 2017, at 82 FR 41093.

	Cost-Based rates	Inter-Agency rates
A. Hospital Care per inpatient day:		
General Medicine:		
All Inclusive Rate	\$4,025	\$3,882
Physician	482	
Ancillary	1,049	
Nursing Room and Board	2,494	
Neurology:		
All Inclusive Rate	3,805	3,664
Physician	557	
Ancillary	1,005	
Nursing Room and Board	2,243	
Rehabilitation Medicine:		
All Inclusive Rate	2,749	2,641
Physician	312	
Ancillary	840	
Nursing Room and Board	1,597	

	Cost-Based rates	Inter-Agency rates
Blind Rehabilitation:		
All Inclusive Rate	1,843	1,770
Physician	148	
Ancillary	916	
Nursing Room and Board	779	
Spinal Cord Injury:		
All Inclusive Rate	2,431	2,338
Physician	301	
Ancillary	612	
Nursing Room and Board	1,518	
Surgery:		
All Inclusive Rate	6,832	6,590
Physician	753	
Ancillary	2,072	
Nursing Room and Board	4,007	
General Psychiatry:		
All Inclusive Rate	1,993	1,913
Physician	188	
Ancillary	314	
Nursing Room and Board	1,491	
Substance Abuse (Alcohol and Drug Treatment):		
All Inclusive Rate	1,963	1,884
Physician	187	
Ancillary	454	
Nursing Room and Board	1,322	
Psychosocial Residential Rehabilitation Program:		
All Inclusive Rate	768	740
Physician	48	
Ancillary	81	
Nursing Room and Board	639	
Intermediate Medicine:		
All Inclusive Rate	2,483	2,388
Physician	122	
Ancillary	364	
Nursing Room and Board	1,997	
Poly-trauma Inpatient:		
All Inclusive Rate	3,113	2,981
Physician	354	
Ancillary	951	
Nursing Room and Board	1,808	
B. Nursing Home Care, Per Day:		
All Inclusive Rate	1,268	1,218
Physician	39	
Ancillary	172	
Nursing Room and Board	1057	
C. Outpatient Medical Treatments:		
Outpatient Visit (to include Ineligible Emergency Dental Care)	362	350
Outpatient Physical Medicine & Rehabilitation Service Visit	223	213
Outpatient Poly-trauma/Traumatic Brain Injury	602	580

Note: Outpatient Prescriptions will be billed at Drug Cost plus Administrative Fee.

Signing Authority

The Secretary of Veterans Affairs approved this document and authorized the undersigned to sign and submit the document to the Office of the Federal

Register for publication electronically as an official document of the Department of Veterans Affairs. Robert L. Wilkie, Secretary, Department of Veterans Affairs, approved this document on August 22, 2018, for publication.

Dated: August 22, 2018.

Jeffrey M. Martin,

Impact Analyst, Office of Regulation Policy & Management, Office of the Secretary, Department of Veterans Affairs.

[FR Doc. 2018-18555 Filed 8-27-18; 8:45 am]

BILLING CODE 8320-01-P