Federal Register

8–22–06 Tuesday
Vol. 71 No. 162 Aug. 22, 2006

United States Government Printing Office
SUPERINTENDENT OF DOCUMENTS
Washington, DC 20402

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U.S. Government Printing Office
(ISSN 0097-6326)

Federal Register

8–22–06 Tuesday
Vol. 71 No. 162 Aug. 22, 2006

Pages 48793–49308

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WHO: Sponsored by the Office of the Federal Register.

WHAT: Free public briefings (approximately 3 hours) to present:

1. The regulatory process, with a focus on the Federal Register system and the public's role in the development of regulations.
2. The relationship between the Federal Register and Code of Federal Regulations.
3. The important elements of typical Federal Register documents.
4. An introduction to the finding aids of the FR/CFR system.

WHY: To provide the public with access to information necessary to research Federal agency regulations which directly affect them. There will be no discussion of specific agency regulations.

WHEN: Tuesday, September 12, 2006
9:00 a.m.–Noon

WHERE: Office of the Federal Register
Conference Room, Suite 700
800 North Capitol Street, NW.
Washington, DC 20002

RESERVATIONS: (202) 741–6008

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DEPARTMENT OF TRANSPORTATION

Federal Aviation Administration

14 CFR Part 39

[Docket No. FAA–2006–25641; Directorate Identifier 2006–NM–114–AD; Amendment 39–14730; AD 2006–17–09]

RIN 2120–AA64

Airworthiness Directives; Fokker Model F27 Mark 050 Airplanes

AGENCY: Federal Aviation Administration (FAA), Department of Transportation (DOT).

ACTION: Final rule; request for comments.

SUMMARY: The FAA is adopting a new airworthiness directive (AD) for all Fokker Model F27 Mark 050 airplanes. This AD requires doing an initial inspection of the leading edge sections of the elevators to detect loose leading edges and to ensure that there is no gap between the sections and the front spar, and corrective actions if necessary. This AD also requires determining the type of leading edge installed on the elevators. For certain airplanes, this AD requires repetitive inspections until the modification of the leading edge sections of the elevators and the application of sealant, which would end the repetitive inspections. This AD results from reports that the leading edges of the elevators were found loose, although the fasteners were still in place; in one case a stud was broken. In addition, the fastener attachment holes were elongated and worn out, and fretting damage was found on the elevator front spar and balance weights. Investigation revealed that vibration, induced by the propeller slipstream, was the cause of these discrepancies; the stud failure was due to improper installation of the fasteners. We are issuing this AD to prevent jamming, restricting, or binding of the elevators due to loose or missing fasteners, which could make the movement of the elevator difficult and decrease aerodynamic control of the airplane.

DATES: This AD becomes effective September 6, 2006.

The Director of the Federal Register approved the incorporation by reference of certain publications listed in the AD as of September 6, 2006.

We must receive comments on this AD by October 23, 2006.

ADDRESSES: Use one of the following addresses to submit comments on this AD.

- DOT Docket Web site: Go to *http://dms.dot.gov* and follow the instructions for sending your comments electronically.
- Government-wide rulemaking Web site: Go to *http://www.regulations.gov* and follow the instructions for sending your comments electronically.
- Mail: Docket Management Facility; U.S. Department of Transportation, 400 Seventh Street, SW., Nassif Building, Room PL–401, Washington, DC 20590.
- Fax: (202) 493–2251.
- Hand Delivery: Room PL–401 on the plaza level of the Nassif Building, 400 Seventh Street SW., Washington, DC, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays.

Contact Fokker Services B.V., P.O. Box 231, 2150 AE Nieuw-Vennep, the Netherlands, for service information identified in this AD.

FOR FURTHER INFORMATION CONTACT: Tom Rodriguez, Aerospace Engineer, International Branch, ANM–116, Transport Airplane Directorate, FAA, 1601 Lind Avenue, SW., Renton, Washington 98057–3356; telephone (425) 227–1137; fax (425) 227–1149.

SUPPLEMENTARY INFORMATION:

Discussion

The Civil Aviation Authority—The Netherlands (CAA–NL), which is the airworthiness authority for the Netherlands, notified us that an unsafe condition may exist on Fokker Model F27 Mark 050 airplanes. The CAA–NL advises that the leading edges of the elevators were found loose, although the fasteners were still in place; in one case a stud was broken. In addition, the fastener attachment holes were elongated and worn out, and fretting damage was found on the elevator front spar and balance weights. Investigation revealed that vibration, induced by the propeller slipstream, was the cause of these discrepancies; the stud failure was due to improper installation of the fasteners. Due to initial play in the attachment holes and at the lip of the free end of each leading edge section, some movement of the leading edge sections over the front spar can occur, causing the fretting of the front spar and elongation of the fastener attachment holes. These conditions, if not corrected, could result in jamming, restricting, or binding of the elevators due to loose or missing fasteners, which could make the movement of the elevator difficult and decrease aerodynamic control of the airplane.

Relevant Service Information

Fokker Services B.V. has issued Service Bulletins SBF50–55–012 and SBF50–55–013, both dated October 11, 2004.

Service Bulletin SBF50–55–012 describes procedures for inspecting the leading edge sections of the elevators to detect loose leading edges and to ensure that there is no gap between the sections and the front spar, and corrective actions if necessary. The corrective actions include, among other things, installing an additional washer under the nut if the nut reaches the end of the screw thread on the stud, or installing the stud deeper in the elevator front spar. The service bulletin also describes procedures for determining the type of leading edge installed on the elevators.

Service Bulletin SBF50–55–013 describes procedures for modifying the leading edge sections of the elevators and applying sealant, which would eliminate the need for the repetitive inspections. The modification includes, among other things, inspecting the gap between the nose of the leading edge and the horizontal stabilizer to assure it meets the minimum measurement. If the gap is too small, the service bulletin describes corrective actions to enlarge the gap.

Accomplishing the actions specified in Service Bulletins SBF50–55–012 and SBF50–55–013 is intended to adequately address the unsafe condition. The CAA–NL mandated the service information and issued Dutch airworthiness directive NL–2005–001, dated March 23, 2005, to ensure the continued airworthiness of these airplanes in the Netherlands.

Service Bulletin SBF50–55–013 refers to Fokker Component Service Bulletins

F3203–010–55–01 and F3203–011–55–02, both dated October 11, 2004, as additional sources of service information for modifying the leading edge sections of the elevators and applying sealant.

FAA's Determination and Requirements of this AD

This airplane model is manufactured in the Netherlands and is type certificated for operation in the United States under the provisions of section 21.29 of the Federal Aviation Regulations (14 CFR 21.29) and the applicable bilateral airworthiness agreement. As described in this bilateral airworthiness agreement, the CAA–NL has kept the FAA informed of the situation described above. We have examined the CAA–NL's findings, evaluated all pertinent information, and determined that we need to issue an AD for products of this type design that are certificated for operation in the United States.

Therefore, we are issuing this AD to prevent jamming, restricting, or binding of the elevator control surfaces due to loose or missing fasteners, which could make the movement of the elevator difficult and decrease aerodynamic control of the airplane. This AD requires accomplishing the actions specified in the service information described previously.

Clarification of Inspection Type

In this AD, the "inspection" required by the Dutch airworthiness directive is referred to as a "detailed inspection." We have included the definition for a detailed inspection in a note in the AD.

Costs of Compliance

None of the airplanes affected by this action are on the U.S. Register. All airplanes affected by this AD are currently operated by non-U.S. operators under foreign registry; therefore, they are not directly affected by this AD action. However, we consider this AD necessary to ensure that the unsafe condition is addressed if any affected airplane is imported and placed on the U.S. Register in the future.

If an affected airplane is imported and placed on the U.S. Register in the future, the following costs would apply:

The required inspection would take about 1 work hour per airplane, at an average labor rate of $80 per work hour. Based on these figures, the estimated cost of the inspection would be $80 per airplane, per inspection cycle.

The required modification and application of sealant would take about 7 work hours per airplane, at an average labor rate of $80 per work hour. The manufacturer states that it will supply required parts at no cost. Based on these figures, the estimated cost of the modification and sealant would be $560 per airplane.

FAA's Determination of the Effective Date

No airplane affected by this AD is currently on the U.S. Register. Therefore, providing notice and opportunity for public comment is unnecessary before this AD is issued, and this AD may be made effective in less than 30 days after it is published in the **Federal Register**.

Comments Invited

This AD is a final rule that involves requirements that affect flight safety and was not preceded by notice and an opportunity for public comment; however, we invite you to submit any relevant written data, views, or arguments regarding this AD. Send your comments to an address listed in the **ADDRESSES** section. Include "Docket No. FAA–2006–25641; Directorate Identifier 2006–NM–114–AD" at the beginning of your comments. We specifically invite comments on the overall regulatory, economic, environmental, and energy aspects of the AD that might suggest a need to modify it.

We will post all comments we receive, without change, to *http://dms.dot.gov*, including any personal information you provide. We will also post a report summarizing each substantive verbal contact with FAA personnel concerning this AD. Using the search function of that Web site, anyone can find and read the comments in any of our dockets, including the name of the individual who sent the comment (or signed the comment on behalf of an association, business, labor union, etc.). You may review the DOT's complete Privacy Act Statement in the **Federal Register** published on April 11, 2000 (65 FR 19477–78), or you may visit *http://dms.dot.gov*.

Examining the Docket

You may examine the AD docket on the Internet at *http://dms.dot.gov*, or in person at the Docket Management Facility office between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. The Docket Management Facility office (telephone (800) 647–5227) is located on the plaza level of the Nassif Building at the DOT street address stated in the **ADDRESSES** section. Comments will be available in the AD docket shortly after the Docket Management System receives them.

Authority for This Rulemaking

Title 49 of the United States Code specifies the FAA's authority to issue rules on aviation safety. Subtitle I, Section 106, describes the authority of the FAA Administrator. Subtitle VII, Aviation Programs, describes in more detail the scope of the Agency's authority.

We are issuing this rulemaking under the authority described in Subtitle VII, Part A, Subpart III, Section 44701, "General requirements." Under that section, Congress charges the FAA with promoting safe flight of civil aircraft in air commerce by prescribing regulations for practices, methods, and procedures the Administrator finds necessary for safety in air commerce. This regulation is within the scope of that authority because it addresses an unsafe condition that is likely to exist or develop on products identified in this rulemaking action.

Regulatory Findings

We have determined that this AD will not have federalism implications under Executive Order 13132. This AD will not have a substantial direct effect on the States, on the relationship between the national government and the States, or on the distribution of power and responsibilities among the various levels of government.

For the reasons discussed above, I certify that the regulation:

1. Is not a "significant regulatory action" under Executive Order 12866;

2. Is not a "significant rule" under the DOT Regulatory Policies and Procedures (44 FR 11034, February 26, 1979); and

3. Will not have a significant economic impact, positive or negative, on a substantial number of small entities under the criteria of the Regulatory Flexibility Act.

We prepared a regulatory evaluation of the estimated costs to comply with this AD and placed it in the AD docket. See the **ADDRESSES** section for a location to examine the regulatory evaluation.

List of Subjects in 14 CFR Part 39

Air transportation, Aircraft, Aviation safety, Incorporation by reference, Safety.

Adoption of the Amendment

■ Accordingly, under the authority delegated to me by the Administrator, the FAA amends 14 CFR part 39 as follows:

PART 39—AIRWORTHINESS DIRECTIVES

■ 1. The authority citation for part 39 continues to read as follows:

Authority: 49 U.S.C. 106(g), 40113, 44701.

§ 39.13 [Amended]

■ 2. The Federal Aviation Administration (FAA) amends § 39.13 by adding the following new airworthiness directive (AD):

2006–17–09 Fokker Services B.V.: Amendment 39–14730. Docket No. FAA–2006–25641; Directorate Identifier 2006–NM–114–AD.

Effective Date

(a) This AD becomes effective September 6, 2006.

Affected ADs

(b) None.

Applicability

(c) This AD applies to all Fokker Model F27 Mark 050 airplanes, certificated in any category.

Unsafe Condition

(d) This AD results from reports that the leading edges of the elevators were found loose, although the fasteners were still in place; in one case a stud was broken. In addition, the fastener attachment holes were elongated and worn out, and fretting damage was found on the elevator front spar and balance weights. Investigation revealed that vibration, induced by the propeller slipstream, was the cause of these discrepancies; the stud failure was due to improper installation of the fasteners. We are issuing this AD to prevent jamming, restricting, or binding of the elevators due to loose or missing fasteners, which could make the movement of the elevator difficult and decrease aerodynamic control of the airplane.

Compliance

(e) You are responsible for having the actions required by this AD performed within the compliance times specified, unless the actions have already been done.

Inspection/Corrective Actions

(f) For all airplanes: Within 6 months after the effective date of this AD, do the actions required by paragraphs (f)(1) and (f)(2) of this AD, in accordance with the Accomplishment Instructions of Fokker Service Bulletin SBF50–55–012, dated October 11, 2004.

(1) Do a detailed inspection of the leading edge sections of the elevators to detect loose leading edges and to ensure that there is no gap between the sections and the front spar, including all applicable corrective actions. All applicable corrective actions must be done before further flight.

(2) Determine the type of leading edges installed on the elevators: If the leading edges are single-type, no further action is required by this AD. If the leading edges are divided-type, repeat the inspection required by paragraph (f)(1) of this AD thereafter at intervals not to exceed 6 months, until the actions specified in paragraph (g) of this AD have been done.

Note 1: For the purposes of this AD, a detailed inspection is: "An intensive examination of a specific item, installation, or assembly to detect damage, failure, or irregularity. Available lighting is normally supplemented with a direct source of good lighting at an intensity deemed appropriate. Inspection aids such as mirror, magnifying lenses, etc., may be necessary. Surface cleaning and elaborate procedures may be required."

Modification

(g) For airplanes equipped with the "divided type" elevators: Within 24 months after the effective date of this AD, modify the leading edge sections of the elevators and apply sealant (including doing the inspection of the gap and all applicable corrective actions), in accordance with the Accomplishment Instructions of Fokker Service Bulletin SBF50–55–013, dated October 11, 2004. All applicable corrective actions must be done before further flight. Accomplishing the actions in this paragraph ends the repetitive inspections required by paragraph (f)(2) of this AD.

Note 2: Fokker Service Bulletin SBF50–55–013 refers to Fokker Component Service Bulletins F3203–010–55–01 and F3203–011–55–02, both dated October 11, 2004, as additional sources of service information for modifying the leading edge sections of the elevators and applying sealant.

Alternative Methods of Compliance (AMOCs)

(h)(1) The Manager, International Branch, ANM–116, Transport Airplane Directorate, FAA, has the authority to approve AMOCs for this AD, if requested in accordance with the procedures found in 14 CFR 39.19.

(2) Before using any AMOC approved in accordance with § 39.19 on any airplane to which the AMOC applies, notify the appropriate principal inspector in the FAA Flight Standards Certificate Holding District Office.

Related Information

(i) Dutch airworthiness directive NL–2005–001, dated March 23, 2005, also addresses the subject of this AD.

Material Incorporated by Reference

(j) You must use Fokker Service Bulletin SBF50–55–012, dated October 11, 2004; and Fokker Service Bulletin SBF50–55–013, dated October 11, 2004; as applicable; to perform the actions that are required by this AD, unless the AD specifies otherwise. The Director of the Federal Register approved the incorporation by reference of these documents in accordance with 5 U.S.C. 552(a) and 1 CFR part 51. Contact Fokker Services B.V., P.O. Box 231, 2150 AE Nieuw-Vennep, the Netherlands, for a copy of this service information. You may review copies at the Docket Management Facility, U.S. Department of Transportation, 400 Seventh Street, SW., Room PL–401, Nassif Building, Washington, DC; on the Internet at *http://dms.dot.gov*; or at the National Archives and Records Administration (NARA). For information on the availability of this material at the NARA, call (202) 741–6030, or go to *http://www.archives.gov/federal_register/code_of_federal_regulations/ibr_locations.html.*

Issued in Renton, Washington, on August 11, 2006.

Kalene C. Yanamura,

Acting Manager, Transport Airplane Directorate, Aircraft Certification Service.

[FR Doc. E6–13731 Filed 8–21–06; 8:45 am]

BILLING CODE 4910–13–P

DEPARTMENT OF THE TREASURY

Office of Foreign Assets Control

31 CFR Part 560

Iranian Transactions Regulations

AGENCY: Office of Foreign Assets Control, Treasury.

ACTION: Final rule; amendment.

SUMMARY: The Office of Foreign Assets Control of the U.S. Department of the Treasury is amending the Iranian Transactions Regulations, 31 CFR part 560, effective immediately, to add a new general license authorizing U.S. persons who are employees or contractors of six international organizations to perform transactions for the conduct of the official business of those organizations in or involving Iran.

DATES: *Effective date:* August 22, 2006.

FOR FURTHER INFORMATION CONTACT: Assistant Director of Compliance Outreach/Implementation, tel.: 202/622–2490, Assistant Director of Licensing, tel.: 202/622–2480, Assistant Director of Policy, tel.: 202/622–4855, or Chief Counsel, tel.: 202/622–2410, Office of Foreign Assets Control, Department of the Treasury, Washington, DC 20220.

SUPPLEMENTARY INFORMATION:

Electronic and Facsimile Availability

This document and additional information concerning OFAC are available from OFAC's Web site (*http://www.treas.gov/ofac*) or via facsimile through a 24-hour fax-on-demand service, tel.: 202/622–0077.

Background

The Iranian Transactions Regulations, 31 CFR part 560 (the "ITR"), implement a series of Executive orders with respect to Iran, beginning with Executive Order 12957, issued on March 15, 1995. In that order, the President declared a national emergency pursuant to IEEPA to deal with the unusual and extraordinary threat to the national security, foreign policy, and economy of the United States constituted by the actions and policies of the Government of Iran, including its support for international terrorism, its efforts to undermine the Middle East peace process and its efforts

to acquire weapons of mass destruction and the means to deliver them. To deal with this threat, Executive Order 12957 imposed prohibitions on certain transactions with respect to the development of Iranian petroleum resources. On May 6, 1995, the President issued Executive Order 12959 imposing comprehensive trade sanctions to further respond to this threat, and on August 19, 1997, the President issued Executive Order 13059 consolidating and clarifying the previous orders.

In light of the U.S. interest in promoting the hiring and retention of Americans by international organizations, the Treasury Department's Office of Foreign Assets Control ("OFAC") today is amending the ITR, effective immediately, to add a new general license authorizing U.S. persons who are employees or contractors of six international organizations to perform transactions for the conduct of the official business of these organizations in or involving Iran. Paragraph (a) of new ITR § 560.539 specifies that the performance of transactions for the conduct of the official business of the United Nations, the World Bank, the International Monetary Fund, the International Atomic Energy Agency, the International Labor Organization or the World Health Organization by U.S. persons who are employees or contractors thereof is authorized, except as provided in paragraph (b) of the new section.

Paragraph (a) of § 560.539 also provides examples of authorized transactions, such as: the provision of services involving Iran necessary for carrying out the official business; purchasing Iranian goods and services for use in carrying out the official business; leasing office space and securing related goods and services; funds transfers to or from the accounts of the international organizations specified in the license, provided that funds transfers to or from Iran are not routed through an account of an Iranian bank on the books of a U.S. financial institution; and the operation of accounts for the employees and contractors in Iran, provided that transactions conducted through the accounts are solely for the employee's or contractor's personal use and not for any commercial purposes in or involving Iran, and any funds transfers to or from an Iranian bank are routed through a third-country bank that is not a U.S. person.

Paragraph (b) of § 560.539 provides that this new general license does not authorize (1) The exportation from the United States to Iran of any goods or technology listed on the Commerce Control List in the Export Administration Regulations, 15 CFR part 774, supplement No. 1 (CCL); (2) the reexportation to Iran of any U.S.-origin goods or technology listed on the CCL; or (3) the exportation or reexportation to Iran of any services not necessary and ordinarily incident to the international organization's official business in Iran. Such transactions require separate authorization from OFAC.

Public Participation

Because the Regulations involve a foreign affairs function, the provisions of Executive Order 12866 and the Administrative Procedure Act (5 U.S.C. 553) (the "APA") requiring notice of proposed rulemaking, opportunity for public participation, and delay in effective date are inapplicable. Because no notice of proposed rulemaking is required for this rule, the Regulatory Flexibility Act (5 U.S.C. 601–612) does not apply.

Paperwork Reduction Act

As authorized in the APA, the Regulations are being issued without prior notice and public comment. The collections of information related to 31 part 560 are contained in 31 CFR part 501 (the "Reporting, Procedures and Penalties Regulations"). Pursuant to the Paperwork Reduction Act of 1995 (44 U.S.C. 3507), those collections of information have been approved by the Office of Management and Budget under control number 1505–0164. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection of information displays a valid control number.

List of Subjects in 31 CFR Part 560

Administrative practice and procedure, Banks, Banking, Brokers, Foreign Trade, Investments, Loans, Securities, Iran.

■ For the reasons set forth in the preamble, the Office of Foreign Assets Control amends 31 CFR part 560 as follows:

PART 560—IRANIAN TRANSACTIONS REGULATIONS

■ 1. The authority citation for part 560 continues to read as follows:

Authority: 3 U.S.C. 301; 18 U.S.C. 2339B, 2332d; 22 U.S.C. 2349aa–9; 31 U.S.C. 321(b); 50 U.S.C. 1601–1651, 1701–1706; Pub. L. 101–410, 104 Stat. 890 (28 U.S.C. 2461 note); Pub. L. 106–387, 114 Stat. 1549; E.O. 12613, 52 FR 41940, 3 CFR, 1987 Comp., p. 256; E.O. 12957, 60 FR 14615, 3 CFR, 1995 Comp., p. 332; E.O. 12959, 60 FR 24757, 3 CFR, 1995, Comp., 356; E.O. 13059, 62 FR 44531, 3 CFR, 1997 Comp., p. 217.

Subpart E—Licenses, Authorizations and Statements of Licensing Policy

■ 2. Add a new § 560.539 to Subpart E to read as follows:

§ 560.539 Official Activities of Certain International Organizations.

(a) *General License.* Except as provided in paragraph (b) of this section, the performance of transactions for the conduct of the official business of the United Nations, the World Bank, the International Monetary Fund, the International Atomic Energy Agency, the International Labor Organization or the World Health Organization in or involving Iran by U.S. persons who are employees or contractors thereof is hereby authorized. Authorized transactions include, but are not limited to:

(1) The provision of services involving Iran necessary for carrying out the official business;

(2) Purchasing Iranian-origin goods and services for use in carrying out the official business;

(3) Leasing office space and securing related goods and services;

(4) Funds transfers to or from accounts of the international organizations covered in this paragraph, provided that funds transfers to or from Iran are not routed through an account of an Iranian bank on the books of a U.S. financial institution; and

(5) The operation of accounts for employees and contractors located in Iran who are described in this paragraph. Transactions conducted through these accounts must be solely for the employee's or contractor's personal use and not for any commercial purposes in or involving Iran. Any funds transfers to or from an Iranian bank must be routed through a third-country bank that is not a U.S. person.

(b) *Limitations.* This section does not authorize:

(1) the exportation from the United States to Iran of any goods or technology listed on the Commerce Control List in the Export Administration Regulations, 15 CFR part 774, supplement No. 1 (CCL);

(2) the reexportation to Iran of any U.S.-origin goods or technology listed on the CCL; or

(3) the exportation or reexportation from the United States or by a U.S. person, wherever located, to Iran of any services not necessary and ordinarily incident to the official business in Iran.

Such transactions require separate authorization from OFAC.

Note to paragraph (b): The CCL includes items such as laptops, personal computers, cell phones, personal digital assistants and other wireless handheld devices/blackberries, and other similar items. The exportation of these items to Iran, even on a temporary basis, is prohibited, unless specifically authorized in a license issued pursuant to this part in a manner consistent with the Iran-Iraq Arms Nonproliferation Act of 1992 and other relevant law.

(c) *Other Requirements.* The general license set forth in this section shall not operate to relieve any persons authorized hereunder from compliance with any other U.S. legal requirements applicable to the transactions authorized pursuant to paragraph (a) of this section.

Dated: August 7, 2006.

Barbara C. Hammerle,

Acting Director, Office of Foreign Assets Control.

Approved: August 8, 2006.

Stuart A. Levey,

Under Secretary, Office of Terrorism and Financial Intelligence, Department of the Treasury.

[FR Doc. E6–13809 Filed 8–21–06; 8:45 am]

BILLING CODE 4811–37–P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

33 CFR Part 165

[CGD01–06–070]

RIN 1625–AA00

Safety Zone; Gloucester Schooner Festival Fireworks, Gloucester Harbor, Gloucester, MA

AGENCY: Coast Guard, DHS.

ACTION: Temporary final rule.

SUMMARY: The Coast Guard is establishing a temporary safety zone for the Gloucester Schooner Festival Fireworks display on September 2, 2006 with rain dates of September 3 or September 4, 2006 in Gloucester, MA, temporarily closing all waters of Gloucester Harbor within a four hundred (400) yard radius of the fireworks launch site located at Stage Fort Park at approximate position 42°36.313′ N, 070°40.533′ W. This zone is necessary to protect the maritime public from the potential hazards posed by a fireworks display. The safety zone temporarily prohibits entry into or movement within this portion of Gloucester Harbor during its closure period, unless authorized by the Captain of the Port, Boston or the COTP's designated representative.

DATES: This rule is effective from 8 p.m. EDT on September 2, 2006 until 10:30 p.m. EDT on September 2, 2006 with rain dates of September 3 or September 4, 2006.

ADDRESSES: Documents indicated in this preamble as being available in the docket are part of docket CGD01–06–070 and are available for inspection or copying at Sector Boston, 427 Commercial Street, Boston, MA, between 8 a.m. and 3 p.m., Monday through Friday, except Federal holidays.

FOR FURTHER INFORMATION CONTACT: Chief Petty Officer Paul English, Sector Boston, Waterways Management Division, at (617) 223–5456.

SUPPLEMENTARY INFORMATION:

Regulatory Information

We did not publish a notice of proposed rulemaking (NPRM) for this regulation. Under 5 U.S.C. 553(b)(B), the Coast Guard finds that good cause exists for not publishing an NPRM because there was insufficient time to conduct a notice and comment rulemaking before the event. Any delay encountered in this regulation's effective date would be contrary to the public interest since the safety zone is needed to prevent traffic from transiting a portion of Gloucester Harbor during the fireworks display and to provide for the safety of life on navigable waters.

For the same reasons, the Coast Guard finds, under 5 U.S.C. 553(d)(3), that good cause exists for making this rule effective less than 30 days after publication in the **Federal Register**. The zone should have a minimal negative impact on vessel transits in Gloucester Harbor because vessels will be excluded from the area for only two and one half hours, and vessels can still safely operate in other areas of Gloucester Harbor during the event.

Background and Purpose

The City of Gloucester is holding a fireworks display to celebrate the Gloucester Schooner Festival. This rule establishes a temporary safety zone on the waters of Gloucester Harbor within a four hundred (400) yard radius of the fireworks launch site located at Stage Fort Park at approximate position 42°36.313′ N, 070°40.533′ W. This safety zone is necessary to protect the life and property of the maritime public from the potential dangers posed by this event. It will protect the public by prohibiting entry into or movement within the proscribed portion of Gloucester Harbor during the fireworks display.

Marine traffic may transit safely outside of the zone during the effective period. The Captain of the Port does not anticipate any negative impact on vessel traffic due to this event. Public notifications will be made prior to and during the effective period via marine information broadcasts and Local Notice to Mariners.

Discussion of Rule

This rule is effective from 8 p.m. EDT until 10:30 p.m. EDT on September 2, 2006 with rain dates of September 3 and September 4, 2006. Marine traffic may transit safely outside of the safety zone in the majority of Gloucester Harbor during the event. Given the limited time-frame of the effective period of the zone, and the actual size of the zone compared to the amount of navigable water around it, the Captain of the Port anticipates minimal negative impact on vessel traffic due to this event. Public notifications will be made prior to and during the effective period via Local Notice to Mariners and marine information broadcasts.

Regulatory Evaluation

This rule is not a "significant regulatory action" under section 3(f) of Executive Order 12866, Regulatory Planning and Review, and does not require an assessment of potential costs and benefits under section 6(a)(3) of that Order. The Office of Management and Budget has not reviewed it under that Order.

We expect the economic impact of this rule to be so minimal that a full Regulatory evaluation is unnecessary. Although this rule will prevent traffic from transiting a portion of Gloucester Harbor during this event, the effect of this rule will not be significant for several reasons: Vessels will be excluded from the area of the safety zone for only two and one half hours; although vessels will not be able to transit the area in the vicinity of the zone, they will be able to safely operate in other areas of Gloucester Harbor during the effective period; and advance notifications will be made to the local maritime community by marine information broadcasts and Local Notice to Mariners.

Small Entities

Under the Regulatory Flexibility Act (5 U.S.C. 601–612), we have considered whether this rule would have a significant economic impact on a substantial number of small entities. The term "small entities" comprises small businesses, not-for-profit

organizations that are independently owned and operated and are not dominant in their fields, and governmental jurisdictions with populations of less than 50,000.

The Coast Guard certifies under 5 U.S.C. 605(b) that this rule will not have a significant economic impact on a substantial number of small entities. This rule will affect the following entities, some of which may be small entities: the owners or operators of vessels intending to transit or anchor in a portion of Gloucester Harbor from 8 p.m. EDT until 10:30 p.m. EDT on September 2, 2006, with rain dates of September 3 or September 4, 2006. This safety zone will not have a significant economic impact on a substantial number of small entities for the reason described under Regulatory Evaluation.

Assistance for Small Entities

Under subsection 213(a) of the Small Business Regulatory Enforcement Fairness Act of 1996 [Pub. L. 104–121], we want to assist small entities in understanding this rule so that they can better evaluate its effects on them and participate in the rulemaking process. If this rule will affect your small business, organization, or governmental jurisdiction and you have questions concerning its provisions or options for compliance, please call Chief Petty Officer Paul English, Sector Boston, Waterways Management Division, at (617) 223–5456.

Small businesses may send comments on the actions of Federal employees who enforce, or otherwise determine compliance with, Federal regulations to the Small Business and Agriculture Regulatory Enforcement Ombudsman and the Regional Small Business Regulatory Fairness Boards. The Ombudsman evaluates these actions annually and rates each agency's responsiveness to small business. If you wish to comment on actions by employees of the Coast Guard, call 1–888–REG–FAIR (1–888–734–3247).

Collection of Information

This rule calls for no new collection of information under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3520).

Federalism

A rule has implications for federalism under Executive Order 13132, Federalism, if it has a substantial direct effect on State or local governments and would either preempt State law or impose a substantial direct cost of compliance on them. We have analyzed this rule under that Order and have determined that it does not have implications for federalism.

Unfunded Mandates Reform Act

The Unfunded Mandates Reform Act of 1995 (2 U.S.C. 1531–1538) requires Federal agencies to assess the effects of their discretionary regulatory actions. In particular, the Act addresses actions that may result in the expenditure by a State, local, or tribal government, in the aggregate, or by the private sector of $100,000,000 or more in any one year. Though this rule will not result in such an expenditure, we do discuss the effects of this rule elsewhere in this preamble.

Taking of Private Property

This rule will not affect a taking of private property or otherwise have taking implications under Executive Order 12630, Governmental Actions and Interference with Constitutionally Protected Property Rights.

Civil Justice Reform

This rule meets applicable standards in sections 3(a) and 3(b)(2) of Executive Order 12988, Civil Justice Reform, to minimize litigation, eliminate ambiguity, and reduce burden.

Protection of Children

We have analyzed this rule under Executive Order 13045, Protection of Children from Environmental Health Risks and Safety Risks. This rule is not an economically significant rule and does not create an environmental risk to health or risk to safety that may disproportionately affect children.

Indian Tribal Governments

This rule does not have tribal implications under Executive Order 13175, Consultation and Coordination with Indian Tribal Governments, because it does not have a substantial direct effect on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.

Energy Effects

We have analyzed this rule under Executive Order 13211, Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use. We have determined that it is not a "significant energy action" under that order because it is not a "significant regulatory action" under Executive Order 12866 and is not likely to have a significant adverse effect on the supply, distribution, or use of energy. The Administrator of the Office of Information and Regulatory Affairs has not designated it as a significant energy action. Therefore, it does not require a Statement of Energy Effects under Executive Order 13211.

Technical Standards

The National Technology Transfer and Advancement Act (NTTAA) (15 U.S.C. 272 note) directs agencies to use voluntary consensus standards in their regulatory activities unless the agency provides Congress, through the Office of Management and Budget, with an explanation of why using these standards would be inconsistent with applicable law or otherwise impractical. Voluntary consensus standards are technical standards (e.g., specifications of materials, performance, design, or operation; test methods; sampling procedures; and related management systems practices) that are developed or adopted by voluntary consensus standards bodies.

This rule does not use technical standards. Therefore, we did not consider the use of voluntary consensus standards.

Environment

We have analyzed this rule under Commandant Instruction M16475.lD, which guides the Coast Guard in complying with the National Environmental Policy Act of 1969 (NEPA) (42 U.S.C. 4321–4370f), and have concluded that there are no factors in this case that would limit the use of a categorical exclusion under section 2.B.2 of the Instruction. Therefore, this rule is categorically excluded, under figure 2–1, paragraph (34)(g), of the Instruction, from further environmental documentation. A final "Environmental Analysis Check List" and a final "Categorical Exclusion Determination" will be available in the docket where indicated under **ADDRESSES**.

List of Subjects in 33 CFR Part 165

Harbors, Marine safety, Navigation (water), Reporting and recordkeeping requirements, Security measures, Waterways.

■ For the reasons discussed in the preamble, the Coast Guard amends 33 CFR part 165 as follows:

PART 165—REGULATED NAVIGATION AREAS AND LIMITED ACCESS AREAS

■ 1. The authority citation for part 165 continues to read as follows:

Authority: 33 U.S.C. 1226, 1231; 46 U.S.C. Chapter 701; 50 U.S.C. 191, 195; 33 CFR 1.05–1(g), 6.04–1, 6.04–6, and 160.5; Pub. L. 107–295, 116 Stat. 2064; Department of Homeland Security Delegation No. 0170.1.

■ 2. Add temporary § 165.T06–070 to read as follows:

§ 165.T–01–070 Safety Zone: Gloucester Schooner Festival Fireworks, Gloucester Harbor, Gloucester, MA.

(a) *Location.* The following area is a safety zone:

All waters of Gloucester Harbor, from surface to bottom, within a four hundred (400) yard radius of the fireworks launch site located at Stage Fort Park located at approximate position 42°36.313′ N., 070°40.533′ W.

(b) *Effective Date.* This rule is effective from 8 p.m. EDT on September 2, 2006 until 10:30 p.m. EDT on September 2, 2006, with rain dates of September 3 or September 4, 2006.

(c) *Definitions.* (1) As used in this section, *designated representative* means a Coast Guard Patrol Commander, including a Coast Guard coxswain, petty officer, or other officer operating a Coast Guard vessel and a Federal, State, and local officer designated by or assisting the Captain of the Port (COTP).

(2) *[Reserved]*

(d) *Regulations.* (1) In accordance with the general regulations in § 165.23 of this part, entry into or movement within this zone by any person or vessel is prohibited unless authorized by the Captain of the Port (COTP), Boston or the COTP's designated representative.

(2) The safety zone is closed to all vessel traffic, except as may be permitted by the COTP or the COTP's designated representative.

(3) Vessel operators desiring to enter or operate within the safety zone must contact the COTP or the COTP's designated representative to obtain permission to do so. Vessel operators given permission to enter or operate in the safety zone must comply with all directions given to them by the COTP or the COTP's designated representative.

Dated: August 9, 2006.

James L. McDonald,

Captain, U.S. Coast Guard, Captain of the Port, Boston, Massachusetts.

[FR Doc. E6–13894 Filed 8–21–06; 8:45 am]

BILLING CODE 4910–15–P

DEPARTMENT OF EDUCATION

34 CFR Parts 668, 674, 675, 676, 682, 685, 690, and 691

Student Assistance General Provisions; Federal Perkins Loan Program; Federal Work-Study Programs; Federal Supplemental Educational Opportunity Grant Program; Federal Family Education Loan Program; William D. Ford Federal Direct Loan Program; Federal Pell Grant Program; Academic Competitiveness Grant Program; and National Science and Mathematics Access to Retain Talent Grant Program

AGENCY: Office of Postsecondary Education, Department of Education.

ACTION: Interim final regulations; Corrections.

SUMMARY: On July 3, 2006, we published in the **Federal Register** (71 FR 37990) interim final regulations for the Academic Competitiveness Grant and National Science and Mathematics Access to Retain Talent Grant programs. The interim final regulations also amended the Student Assistance General Provisions, Federal Perkins Loan Program, Federal Work-Study Programs, Federal Supplemental Educational Opportunity Grant Program, Federal Family Education Loan Program, William D. Ford Federal Direct Loan Program, and Federal Pell Grant Program.

In the **DATES** section of that notice, we inadvertently left two regulations off the list of regulations that contain information collection requirements with which affected parties need not comply until we publish in the **Federal Register** the control numbers assigned to these information collection requirements by the Office of Management and Budget. This notice corrects the error as follows:

On page 37990, in the second column, under the **DATES** section, in the third sentence, insert "691.16, 691.82," immediately following "691.15,".

In addition, we inadvertently included an incorrect citation in the notice of interim final regulations. This notice corrects the error as follows:

On page 37993, in the third column, in the first sentence of the paragraph beginning "Reason:", replace "34 CFR 660.2" with "34 CFR 600.2".

FOR FURTHER INFORMATION CONTACT: Jacquelyn Butler, U.S. Department of Education, 1990 K Street, NW., room 8053, Washington, DC 20006–8544. Telephone: (202) 502–7890. Sophia McArdle, U.S. Department of Education, 1990 K Street, NW., room 8019, Washington, DC 20006–8544. Telephone: (202) 219–7078.

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(Catalog of Federal Domestic Assistance Numbers: 84.375 Academic Competitiveness Grants; 84.376 SMART Grants)

List of Subjects in 34 CFR Parts 668, 674, 675, 676, 682, 685, 690, and 691

Colleges and universities, Elementary and secondary education, Grant programs-education, Student aid.

Margaret Spellings,

Secretary of Education.

[FR Doc. E6–13901 Filed 8–21–06; 8:45 am]

BILLING CODE 4000–01–P

ENVIRONMENTAL PROTECTION AGENCY

40 CFR Part 300

[FRL–8211–8]

National Oil and Hazardous Substance Pollution Contingency Plan; National Priorities List Update

AGENCY: Environmental Protection Agency.

ACTION: Withdrawal of direct final deletion of the Brio Refining, Inc.

Superfund Site from the National Priorities List.

SUMMARY: On June 23, 2006, the United States Environmental Protection Agency (EPA) Region 6, published a direct final deletion (71 FR 36015) to delete the Brio Refining, Inc. Superfund Site (Site), located in Friendswood, Texas, from the National Priorities List (NPL). The EPA is withdrawing this final action due to an adverse comment received during the public comment period. After consideration of the comment received, if appropriate, EPA will publish a notice of deletion in the **Federal Register** based on the parallel notice of proposed deletion (71 FR 36015) dated June 23, 2006 and place a copy of the final deletion package, including a Responsiveness Summary in the Site repositories.

DATES: The direct final action published on June 23, 2006, at 71 FR 36015, is withdrawn as of August 22, 2006.

ADDRESSES: Comprehensive information on the Site, as well as the comment received during the comment period is available through the public docket contained at: U.S. EPA Region 6 Library, 7th Floor, 1445 Ross Avenue, Suite 1200, Dallas, Texas 75202–2733, (214) 665–6424, Monday through Friday 9 a.m. to 12 p.m. and 1 p.m. to 4 p.m.

FOR FURTHER INFORMATION CONTACT: John C. Meyer, Remedial Project Manager (RPM), U.S. EPA Region 6 (6SF–LP), 1445 Ross Avenue, Dallas, TX 75202–2733, (214) 665–6742 or 1–800–533–3508 (*meyer.john@epa.gov*).

SUPPLEMENTARY INFORMATION: Comprehensive information about the Site is available for viewing and copying at the Site information repositories located at: U.S. EPA Region 6 Library, 7th Floor, 1445 Ross Avenue, Suite 1200, Dallas, Texas 75202–2733, (214) 665–6424, Monday through Friday 9 a.m. to 12 p.m. and 1 p.m. to 4 p.m.; San Jacinto College, South Campus Library, 13735 Beamer Road, Houston, Texas, 77089, (281) 992–3416, Monday through Thursday 8 a.m. to 9 p.m.; Friday 8 a.m. to 3 p.m.; Saturday 10 a.m. to 1 p.m.; Texas Commission on Environmental Quality (TCEQ), Central File Room Customer Service Center, Building E, 12100 Park 35 Circle, Austin, Texas, 78753, (512) 239–2900, Monday through Friday 8 a.m. to 5 p.m.

List of Subjects in 40 CFR Part 300

Environmental protection, Air pollution control, Chemicals, Hazardous Waste, Hazardous substances, Intergovernmental relations, Penalties, Reporting and record keeping requirements, Superfund, Water Pollution control, and Water supply.

Dated: August 11, 2006.

Richard E. Greene,

Regional Administrator, Region 6.

[FR Doc. E6–13858 Filed 8–21–06; 8:45 am]

BILLING CODE 6560–50–P

DEPARTMENT OF HOMELAND SECURITY

48 CFR Parts 3001, 3002, 3003, 3006, 3011, 3016, 3017, 3022, 3023, 3024, 3027, 3028, 3031, 3035, 3042, 3052, and 3053.

RIN 1601–AA16

Revision of Department of Homeland Security Acquisition Regulation; Technical Amendments.

AGENCY: Department of Homeland Security.

ACTION: Final rule.

SUMMARY: This document makes amendments to the Department of Homeland Security Acquisition Regulation (HSAR) to delete any reference to the term "Organizational Elements", and to use instead, the term, "Components" in accordance with internal Department of Homeland Security (DHS) changes. These changes are technical amendments and make no substantive changes to the regulation.

DATES: This rule is effective on August 22, 2006.

FOR FURTHER INFORMATION CONTACT: Kathy Strouss, Office of the Chief Procurement Officer, Department of Homeland Security: (202) 447–5300.

SUPPLEMENTARY INFORMATION:

I. Background

The Department of Homeland Security recently updated the organizational structure nomenclatures by revising the term "Organizational Element" and replacing it with "Component". This is an internal Department organizational change not requiring public comment. This technical amendment addresses the change in nomenclature for the HSAR published as an Interim rule, (68 FR 67867), and the Final rule (71 FR 25759) by including the present terminology for the Department. In addition, there are a few other minor editorial corrections to the HSAR.

List of Subjects in 48 CFR Parts 3001, 3002, 3003, 3006, 3011, 3016, 3017, 3022, 3023, 3024, 3027, 3028, 3031, 3035, 3042, 3052, and 3053

Government procurement.

Dated: August 11, 2006.

Elaine C. Duke,

Chief Procurement Officer.

■ Accordingly, DHS amends 48 CFR 3001, 3002, 3003, 3006, 3011, 3016, 3017, 3022, 3023, 3024, 3027, 3028, 3031, 3035, 3042, 3052, and 3053 as follows:

■ 1. The authority citation for 48 CFR parts 3001, 3002, 3003, 3006, 3011, 3016, 3017, 3022, 3023, 3024, 3027, 3028, 3031, 3035, 3042, 3052, and 3053 continues to read as follows:

Authority: 41 U.S.C. 418b(a) and (b).

PART 3001—FEDERAL ACQUISITION REGULATION SYSTEM

■ 2. Amend § 3001.105–2 by revising paragraph (a) to read as follows:

3001.105–2 Arrangement of regulations.

(a) General. The HSAR, which encompasses both Department-wide and Component-unique guidance, conforms to the arrangement and numbering system prescribed by (FAR) 48 CFR 1.105–2. Guidance that is unique to a Component contains the organization's acronym or abbreviation directly following the title. The following acronyms apply:

Bureau of Customs and Border Protection (CBP);
Bureau of Immigration and Customs Enforcement (ICE);
DHS Office of Procurement Operations (OPO);
Federal Emergency and Management Agency (FEMA) (includes all elements of the Emergency Preparedness and Response Directorate);
Federal Law Enforcement Training Center (FLETC);
Transportation Security Administration (TSA);
U.S. Coast Guard (USCG); and
U.S. Secret Service (USSS).

3001.301 [Amended]

■ 3. Amend § 3001.301 as follows:

■ a. In paragraph (a)(1) in the third sentence by removing "Organizational Element (OE)" and adding "Component" in its place.

■ b. In paragraph (a)(2)(i) in the last sentence by removing "OE" and adding "Component" in its place.

3001.301–70 [Amended]

■ 4. Amend § 3001.301–70(b) introductory text in the first sentence by removing "OEs" and adding "Components" in its place.

3001.303 [Amended]

■ 5. Amend § 3001.303 as follows:

■ a. In paragraph (a)(5) in the first sentence by removing "Organizational

Element" and adding "Component" in its place.

■ b. In paragraph (a)(7) in the first sentence by removing "OE" and adding "Component" in its place.

3001.304 [Amended]

■ 6. Amend § 3001.304 by revising paragraph (a) to read as follows:

3001.304 Agency control and compliance procedures.

(a) The HSAR is under the direct oversight and control of the Homeland Security, Office of the Chief Procurement Officer (OCPO), which is responsible for evaluation, review, and issuance of all Department-wide acquisition regulations and guidance. Each HCA may supplement the HSAR with Component guidance. Supplementation should be kept to a minimum. Components proposing to issue regulatory supplements or use solicitation or contract clauses on a repetitive basis must obtain legal review by the Component's legal counsel and forward supplements to the CPO for concurrence prior to publication in the **Federal Register**.

* * * * *

3001.403 [Amended]

■ 7–8. Amend § 3001.403 by removing the words "(HSAR) 48 CFR 3001.7000(a)" and adding in their place the words "(HSAR) 48 CFR 3001.7000."

PART 3002—DEFINITIONS OF WORDS AND TERMS

3002.101 [Amended]

■ 9. Amend § 3002.101 by revising the definition for "Chief of the Contracting Office (COCO)", "Contracting activity", "Head of the Contracting Activity", and "Head of the Agency", removing "Organizational Element (OE)", and adding "Component" and "Legal Counsel", to read as follows:

3002.101 Definitions.

* * * * *

Chief of the Contracting Office (COCO) means the individual(s) responsible for managing the contracting office(s) within a Component.

* * * * *

Component means the following entities for purposes of this chapter:

(1) Bureau of Customs and Border Protection (CBP);

(2) Bureau of Immigration and Customs Enforcement (ICE);

(3) DHS Office of Procurement Operations (OPO);

(4) Federal Emergency Management Agency (FEMA) (Includes all elements of the Emergency Preparedness and Response Directorate);

(5) Federal Law Enforcement Training Center (FLETC);

(6) Transportation Security Administration (TSA); (TSA is exempt from the HSAR and HSAM according to the "Aviation and Transportation Security Act of 2001");

(7) U.S. Coast Guard (USCG); and

(8) U.S. Secret Service (USSS).

Contracting activity includes all the contracting offices within a Component and is the same as the term "procuring activity."

* * * * *

Head of the Agency means the Secretary of the Department of Homeland Security, or, by delegation, the Under Secretary of Management.

Head of the Contracting Activity (HCA) means the individual responsible for direct management of the entire acquisition function within a Component.

Legal counsel means the Department of Homeland Security Office of General Counsel or Component office providing legal services to the contracting organization.

* * * * *

3002.270 [Amended]

■ 10. Amend § 3002.270 by removing "OE Organizational Element.".

PART 3003—IMPROPER BUSINESS PRACTICES AND PERSONAL CONFLICTS OF INTEREST

3003.203 [Amended]

■ 11. Amend § 3003.203(b) in the second sentence by removing "OE" and adding "the Component" in its place.

PART 3006—COMPETITION REQUIREMENTS

3006.101–70 [Amended]

■ 12. In § 3006.101–70 amend the definition for "Competition advocate for the procuring activity" by removing "Organization Element (OE)" and adding "Component" in its place.

PART 3011—Describing Agency Needs

3011.602 [Amended]

■ 13. Amend § 3011.602(c) introductory text by removing "OEs" and adding "Components" in its place.

PART 3016—TYPES OF CONTRACTS

3016.505 [Amended]

■ 14. Amend § 3016.505 by removing "OE" and adding "Component" in its place in paragraphs (b)(5), (b)(5)(i), and (ii).

PART 3017—SPECIAL CONTRACTING METHODS

■ 15. Amend § 3017.402 by removing the words "(HSAR) 48 CFR 3001.7000(a)" and adding in their place the words "(HSAR) 48 CFR 3001.7000."

PART 3022—APPLICATION OF LABOR LAWS TO GOVERNMENT ACQUISITIONS

3022.101–70 [Amended]

■ 16. Amend § 3022.101–70 as follows:

■ a. In paragraph (a) in the first sentence by removing "Organizational Elements" and adding "Components" in its place.

■ b. In paragraph (b) in the first sentence by removing "OE" and adding "Component" in its place.

PART 3023—ENVIRONMENT, CONSERVATION, OCCUPATIONAL SAFETY, AND DRUG-FREE WORKPLACE

3023.501 [Amended]

■ 17. Amend § 3023.501(d) by removing "Organizational Element" and adding "Component" in its place.

3023.506 [Amended]

■ 18. Amend § 3023.506(e) by removing the words "(HSAR) 48 CFR 3001.7000(b)" and adding in their place the words "(HSAR) 48 CFR 3001.7000."

PART 3024—PROTECTION OF INDIVIDUAL PRIVACY

3024.203 [Amended]

■ 19. Amend § 3024.203(a) in the second sentence by removing "Organizational Element" and adding "Component" in its place.

PART 3027—Patents, Data and Copyrights

3027.205 [Amended]

■ 20. Amend § 3027.205(a) in the first sentence by removing "OE" and adding "Component" in its place.

PART 3028—BONDS AND INSURANCE

3028.106–6 [Amended]

■ 21. Amend § 3028.106–6(c) in the second sentence by removing "OE" and adding "Component" in its place.

PART 3031—CONTRACT COST PRINCIPLES AND PROCEDURES

3031.205–32 [Amended]

■ 22. Amend § 3031.205–32(a) by removing the words "(HSAR) 48 CFR 3032.205–32(b)" and adding in their place the words "(HSAR) 48 CFR 3031.205–32(b)."

PART 3035—RESEARCH AND DEVELOPMENT CONTRACTING

3035.003 [Amended]

■ 23. Amend § 3035.003(b) in the last sentence by removing "OEs" and adding "Components" in its place.

3035.017 [Amended]

■ 24. Amend § 3035.017(a) in the last sentence by removing "OEs" and adding "Components" in its place.

PART 3042—CONTRACT ADMINISTRATION AND AUDIT SERVICES

3042.1502 [Amended]

■ 25. Amend § 3042.1502(a) by removing "OEs" and adding "Components" in its place.

PART 3052—SOLICITATION PROVISIONS AND CONTRACT CLAUSES

3052.101 [Amended]

■ 26. Amend § 3052.101 as follows:

■ a. In paragraph (b)(2)(i)(A), in the second sentence, by removing "OEs" and adding "Components" in its place.

■ b. In paragraph (b)(2)(i)(B), in the first sentence, by removing "OE" and adding "Component" in its place.

3052.204–70 [Amended]

■ 27. Amend § 3052.204–70(d) in the last sentence by removing "Organizational elements" and adding "Components" in its place.

3052.204–71 [Amended]

■ 28. Amend § 3052.204–71, ALTERNATE I as follows:

■ a. In paragraph (i) in the first sentence by removing "OE" and adding "Component" in its place.

■ b. In paragraph (k) in the first sentence by removing "Organizational Element" and adding "Component" in its place.

PART 3053—FORMS

3053.101 [Amended]

■ 29. Amend § 3053.101 by removing "OEs" and adding "Components" in its place.

[FR Doc. 06–7035 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–10–P

DEPARTMENT OF THE INTERIOR

Fish and Wildlife Service

50 CFR Part 20

Migratory Bird Hunting

CFR Correction

In Title 50 of the Code of Federal Regulations, parts 18 to 199, revised as of October 1, 2005, on page 36, § 20.21 is corrected by reinstating paragraphs (j)(2) and (3) to read as follows:

§ 20.21 What hunting methods are illegal?

* * * * *

(j) * * *

(2) Each approved shot type must contain less than 1 percent residual lead (see § 20.134).

(3) This shot type restriction applies to the taking of ducks, geese (including brant), swans, coots (Fulica americana), and any other species that make up aggregate bag limits with these migratory game birds during concurrent seasons in areas described in § 20.108 as nontoxic shot zones.

[FR Doc. 06–55526 Filed 8–21–06; 8:45 am]

BILLING CODE 1505–01–D

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

50 CFR Part 229

[Docket No. 060330090–6212–02, I.D. 021506B]

RIN 0648–AU19

List of Fisheries for 2006

AGENCY: National Marine Fisheries Service (NMFS), National Oceanic and Atmospheric Administration (NOAA), Department of Commerce.

ACTION: Final rule.

SUMMARY: The National Marine Fisheries Service (NMFS) is publishing its final List of Fisheries (LOF) for 2006, as required by the Marine Mammal Protection Act (MMPA). The final LOF for 2006 reflects new information on interactions between commercial fisheries and marine mammals. NMFS must categorize each commercial fishery on the LOF into one of three categories under the MMPA based upon the level of serious injury and mortality of marine mammals that occurs incidental to each fishery. The categorization of a fishery in the LOF determines whether participants in that fishery are subject to certain provisions of the MMPA, such as registration, observer coverage, and take reduction plan requirements.

DATES: This final rule is effective September 21, 2006.

The California sardine purse seine fishery, the Chesapeake Bay inshore gillnet fishery, and the Mid-Atlantic menhaden purse seine fishery are considered to be Category II fisheries on September 21, 2006, and are required to comply with all requirements of Category II fisheries (i.e., complying with applicable registration requirements, complying with applicable take reduction plan requirements, and carrying observers, if requested) on that date.

ADDRESSES: See **SUPPLEMENTARY INFORMATION** for a listing of all Regional offices.

For collection-of-information requirements subject to the Paperwork Reduction Act, please contact the Office of Management and Budget, Attn: David Rostker, fax: 202–395–7285 or *David_Rostker@omb.eop.gov*.

FOR FURTHER INFORMATION CONTACT: Melissa Andersen, Office of Protected Resources, 301–713–2322; David Gouveia, Northeast Region, 978–281–9328; Vicki Cornish, Southeast Region, 727–824–5312; Christina Fahy, Southwest Region, 562–980–4023; Brent Norberg, Northwest Region, 206–526–6733; Bridget Mansfield, Alaska Region, 907–586–7642; Lisa Van Atta, Pacific Islands Region, 808–973–2937. Individuals who use a telecommunications device for the hearing impaired may call the Federal Information Relay Service at 1–800–877–8339 between 8 a.m. and 4 p.m. Eastern time, Monday through Friday, excluding Federal holidays.

SUPPLEMENTARY INFORMATION:

Availability of Published Materials

Information regarding the LOF and the Marine Mammal Authorization Program, including registration procedures and forms, current and past LOFs, observer requirements, and marine mammal injury/mortality reporting forms and submittal procedures, may be obtained at: *http://www.nmfs.noaa.gov/pr/interactions/mmap*, or from any NMFS Regional Office at the addresses listed below.

NMFS, Northeast Region, One Blackburn Drive, Gloucester, MA 01930–2298, Attn: Marcia Hobbs;

NMFS, Southeast Region, 263 13th Avenue South, St. Petersburg, FL 33701, Attn: Teletha Mincey;

NMFS, Southwest Region, 501 W. Ocean Blvd., Suite 4200, Long Beach, CA 90802–4213, Attn: Lyle Enriquez;

NMFS, Northwest Region, 7600 Sand Point Way NE, Seattle, WA 98115, Attn: Permits Office;

NMFS, Alaska Region, Protected Resources, P.O. Box 22668, 709 West 9th Street, Juneau, AK 99802; or

NMFS, Pacific Islands Region, Protected Resources, 1601 Kapiolani Boulevard, Suite 1100, Honolulu, HI, 96814–4700.

What is the List of Fisheries?

Section 118 of the MMPA requires NMFS to place all U.S. commercial fisheries into one of three categories based on the level of incidental serious injury and mortality of marine mammals occurring in each fishery (16 U.S.C. 1387(c)(1)). The categorization of a fishery in the LOF determines whether participants in that fishery may be required to comply with certain provisions of the MMPA, such as registration, observer coverage, and take reduction plan requirements. NMFS must reexamine the LOF annually, considering new information in the Stock Assessment Reports and other relevant sources and publish in the **Federal Register** any necessary changes to the LOF after notice and opportunity for public comment (16 U.S.C. 1387 (c)(1)(c)).

How Does NMFS Determine in which Category a Fishery is Placed?

The definitions for the fishery classification criteria can be found in the implementing regulations for section 118 of the MMPA (50 CFR 229.2). The criteria are also summarized here.

Fishery Classification Criteria

The fishery classification criteria consist of a two-tiered, stock-specific approach that first addresses the total impact of all fisheries on each marine mammal stock, and then addresses the impact of individual fisheries on each stock. This approach is based on consideration of the rate, in numbers of animals per year, of incidental mortalities and serious injuries of marine mammals due to commercial fishing operations relative to the potential biological removal (PBR) level for each marine mammal stock. The MMPA (16 U.S.C. 1362 (20)) defines the PBR level as the maximum number of animals, not including natural mortalities, that may be removed from a marine mammal stock while allowing that stock to reach or maintain its optimum sustainable population. This definition can also be found in the implementing regulations for section 118 of the MMPA (50 CFR 229.2).

Tier 1: If the total annual mortality and serious injury of a marine mammal stock, across all fisheries, is less than or equal to 10 percent of the PBR level of the stock, all fisheries interacting with the stock would be placed in Category III (unless those fisheries interact with other stock(s) in which total annual mortality and serious injury is greater than 10 percent of PBR). Otherwise, these fisheries are subject to the next tier (Tier 2) of analysis to determine their classification.

Tier 2, Category I: Annual mortality and serious injury of a stock in a given fishery is greater than or equal to 50 percent of the PBR level.

Tier 2, Category II: Annual mortality and serious injury of a stock in a given fishery is greater than 1 percent and less than 50 percent of the PBR level.

Tier 2, Category III: Annual mortality and serious injury of a stock in a given fishery is less than or equal to 1 percent of the PBR level.

While Tier 1 considers the cumulative fishery mortality and serious injury for a particular stock, Tier 2 considers fishery-specific mortality and serious injury for a particular stock. Additional details regarding how the categories were determined are provided in the preamble to the final rule implementing section 118 of the MMPA (60 FR 45086, August 30, 1995).

Since fisheries are categorized on a per-stock basis, a fishery may qualify as one Category for one marine mammal stock and another Category for a different marine mammal stock. A fishery is typically categorized on the LOF at its highest level of classification (e.g., a fishery qualifying for Category III for one marine mammal stock and for Category II for another marine mammal stock will be listed under Category II).

Other Criteria That May Be Considered

In the absence of reliable information indicating the frequency of incidental mortality and serious injury of marine mammals by a commercial fishery, NMFS will determine whether the incidental serious injury or mortality qualifies for Category II by evaluating other factors such as fishing techniques, gear used, methods used to deter marine mammals, target species, seasons and areas fished, qualitative data from logbooks or fisher reports, stranding data, and the species and distribution of marine mammals in the area, or at the discretion of the Assistant Administrator for Fisheries (50 CFR 229.2).

How Do I Find Out if a Specific Fishery is in Category I, II, or III?

This final rule includes two tables that list all U.S. commercial fisheries by LOF Category. Table 1 lists all of the fisheries in the Pacific Ocean (including Alaska). Table 2 lists all of the fisheries in the Atlantic Ocean, Gulf of Mexico, and Caribbean.

Am I Required to Register Under the MMPA?

Owners of vessels or gear engaging in a Category I or II fishery are required under the MMPA (16 U.S.C. 1387(c)(2)), as described in 50 CFR 229.4, to register with NMFS and obtain a marine mammal authorization from NMFS in order to lawfully incidentally take a marine mammal in a commercial fishery. Owners of vessels or gear engaged in a Category III fishery are not required to register with NMFS or obtain a marine mammal authorization.

How Do I Register?

Vessel or gear owners must register with the Marine Mammal Authorization Program (MMAP) by contacting the relevant NMFS Regional Office (see **ADDRESSES**) unless they participate in a fishery that has an integrated registration program (described below). Upon receipt of a completed registration, NMFS will issue vessel or gear owners an authorization certificate. The authorization certificate, or a copy, must be on board the vessel while it is operating in a Category I or II fishery, or for non-vessel fisheries, in the possession of the person in charge of the fishing operation (50 CFR 229.4(e)).

What is the Process for Registering in an Integrated Fishery?

For some fisheries, NMFS has integrated the MMPA registration process with existing state and Federal fishery license, registration, or permit systems. Participants in these fisheries are automatically registered under the MMPA and are not required to submit registration or renewal materials or pay the $25 registration fee. The following section indicates which fisheries are integrated fisheries and has a summary of the integration process for each Region. Vessel or gear owners who operate in an integrated fishery and have not received an authorization certificate by January 1 of each new year must contact their NMFS Regional Office (see **ADDRESSES**). Although efforts are made to limit the issuance of authorization certificates to only those vessel or gear owners that participate in Category I or II fisheries, not all state and Federal permit systems distinguish between fisheries as classified by the LOF. Therefore, some vessel or gear owners in Category III fisheries may receive authorization certificates even though they are not required for Category III fisheries. Individuals

fishing in Category I and II fisheries for which no state or Federal permit is required must register with NMFS by contacting their appropriate Regional Office (see **ADDRESSES**).

Which Fisheries Have Integrated Registration Programs?

The following fisheries have integrated registration programs under the MMPA:

1. All Alaska Category II fisheries;
2. All Washington and Oregon Category II fisheries;
3. Northeast Regional fisheries for which a state or Federal permit is required;
4. All Southeast Regional fisheries for which a Federal permit is required, as well as fisheries permitted by the states of North Carolina, South Carolina, Georgia, Florida, Alabama, Mississippi, Louisiana, and Texas; and
5. The Hawaii Swordfish, Tuna, Billfish, Mahi Mahi, Wahoo,Oceanic Sharks Longline/Set line Fishery.

How Do I Renew My Registration Under the MMPA?

Vessel or gear owners that participate in fisheries that have integrated registration programs (described above) are automatically renewed and should receive an authorization certificate by January 1 of each new year. Vessel or gear owners who participate in an integrated fishery and have not received authorization certificates by January 1 must contact the appropriate NMFS Regional Office (see **ADDRESSES**). Vessel or gear owners that participate in fisheries that do not have integrated registration programs and that have previously registered in a Category I or II fishery will received a renewal packet from the appropriate NMFS Regional Office at least 30 days prior to January 1 of each new year. It is the responsibility of the vessel or gear owner in these fisheries to complete their renewal form and return it to the appropriate NMFS Regional Office at least 30 days in advance of fishing. Individuals who have not received a renewal packet by January 1 or are registering for the first time must request a registration form from the appropriate Regional Office (see **ADDRESSES**).

Am I Required to Submit Reports When I Injure or Kill a Marine Mammal During the Course of Commercial Fishing Operations?

In accordance with the MMPA (16 U.S.C. 1387(e)) and 50 CFR 229.6, any vessel owner or operator, or gear owner or operator (in the case of non-vessel fisheries), participating in a Category I, II, or III fishery must report to NMFS all incidental injuries and mortalities of marine mammals that occur during commercial fishing operations. "Injury" is defined in 50 CFR 229.2 as a wound or other physical harm. In addition, any animal that ingests fishing gear or any animal that is released with fishing gear entangling, trailing, or perforating any part of the body is considered injured, regardless of the presence of any wound or other evidence of injury, and must be reported. Injury/mortality report forms and instructions for submitting forms to NMFS can be downloaded from: *http://www.nmfs.noaa.gov/pr/pdfs/interactions/mmap_reporting_form.pdf*. Reporting requirements and procedures can be found in 50 CFR 229.6.

Am I Required to Take an Observer Aboard My Vessel?

Fishers participating in a Category I or II fishery are required to accommodate an observer aboard vessel(s) upon request. Observer requirements can be found in 50 CFR 229.7.

Am I Required to Comply With Any Take Reduction Plan Regulations?

Fishers participating in a Category I or II fishery are required to comply with any applicable take reduction plans. Take reduction plan requirements can be found at 50 CFR 229.30–34.

Sources of Information Reviewed for the Proposed 2006 LOF

NMFS reviewed the marine mammal incidental serious injury and mortality information presented in the Stock Assessment Reports (SARs) for all observed fisheries to determine whether changes in fishery classification were warranted. NMFS' SARs are based on the best scientific information available at the time of preparation, including the level of serious injury and mortality of marine mammals that occurs incidental to commercial fisheries and the PBR levels of marine mammal stocks. The information contained in the SARs is reviewed by regional scientific review groups (SRGs) representing Alaska, the Pacific (including Hawaii), and the U.S. Atlantic, Gulf of Mexico, and Caribbean. The SRGs were created by the MMPA to review the science that informs the SARs, and to advise NMFS on population status and trends, stock structure, uncertainties in the science, research needs, and other issues.

NMFS also reviewed other sources of new information, including marine mammal stranding data, observer program data, fisher self-reports, and other information that may not be included in the SARs.

The LOF for 2006 was based, among other things, on information provided in the final SARs for 1996 (63 FR 60, January 2, 1998), the final SARs for 2001 (67 FR 10671, March 8, 2002), the final SARs for 2002 (68 FR 17920, April 14, 2003), the final SARs for 2003 (69 FR 54262, September 8, 2004), the final SARs for 2004 (70 FR 35397, June 20, 2005), and the final SARs for 2005 (71 FR 26340, May 4, 2006). All SARs are available at: *http://www.nmfs.noaa.gov/pr/sars/*.

Comments and Responses

NMFS received 5 comment letters on the proposed 2006 LOF (71 FR 20941, April 24, 2006) from environmental, commercial fishing, and Federal and state interests. Comments on issues outside the scope of the LOF are noted, but are not responded to in this final rule.

General Comments

Comment 1: One commenter commended NMFS on the addition of detailed descriptions of the basis of classification decisions for each fishery on the 2006 LOF.

Response: In this final rule, NMFS provides additional information on the basis for classification of each fishery as Category I or II. The 2006 LOF identifies which stock(s) is responsible for a fishery's Category I classification, and indicates whether a fishery is classified as Category II based on serious injury or mortality of a marine mammal stock(s) or classified by analogy with another fishery (based on the definition of a "Category II fishery" in 50 CFR 229.2).

Comment 2: One commenter stated that in cases where the distribution of a marine mammal species overlaps with fisheries using gear types known to interact with that species, the fishery should be categorized with the presumption that a likelihood of interactions exists. Also, the commenter stated it is inappropriate to assume that interactions do not occur based only on fisher self-reporting.

Response: NMFS considers many factors in classifying fisheries, as directed by the implementing regulations for section 118 of the MMPA (50 CFR 229.2). In the absence of reliable information indicating the frequency of mortality and serious injury of marine mammals by a commercial fishery, the Assistant Administrator determines whether the incidental serious injury or mortality is "occasional" by evaluating other factors such as fishing techniques, gear used, methods used to deter marine mammals, target species, seasons and areas fished, qualitative data from logbooks or fisher

reports, stranding data, and the species and distribution of marine mammals in the area, or at the discretion of the Assistant Administrator (50 CFR 229.2).

Comment 3: One commenter stated that a species should not be deleted from the list of species incidentally killed or injured for a particular fishery based on a lack of evidence of interactions within the last 5 years, as the risk of interactions continues to exist.

Response: The LOF is intended to inform the public of the current status of commercial fisheries with respect to marine mammal serious injuries and mortalities. It was never intended that the LOF serve as a comprehensive document detailing the history of a fishery in terms of marine mammal interactions. NMFS recognizes that fisheries change over time and species/stocks should not remain on the list of species/stocks killed/injured in a certain fishery if there are no longer data to support inclusion. If observer information for interactions over the past 5 years is insufficient, NMFS uses the best available information (including stranding reports and fisher self-reports) to determine when to delete species/stocks from the list of species or stocks incidentally killed/injured. Historical information on a fishery's interactions with a marine mammal stock is presented in the SARs. Therefore, this information should not be duplicated in the LOF.

Comment 4: One commenter reiterated a previous recommendation on the 2005 LOF, in which the commenter requested that NMFS describe the level of observer coverage for each fishery listed on the LOF. The commenter stated that without this information the reader cannot discern whether "no interactions were documented" means that no interactions actually occurred or observer coverage was inadequate to determine interaction levels. Also, such a description would allow readers to evaluate classifications based on "analogy". The comment used as an example the classification of the CA sardine purse seine fishery due to its similarity to the CA anchovy, mackerel, tuna purse seine fishery.

Response: Section 118(c) of the MMPA requires that NMFS include an explanation of changes to the LOF, the approximate number of vessels or persons actively involved in a fishery, and the marine mammal stocks interacting with a fishery in a particular LOF. The best available information on the level of observer coverage for each fishery and the spatial and temporal distribution of marine mammal interactions observed is presented in the SARs. NMFS refers readers to the SARs for the most current information on the level of observer coverage for each fishery. Copies of the SARs are available on the NMFS Office of Protected Resource's Web site at: *http://www.nmfs.noaa.gov/pr/sars/*. Additional information on observer coverage in commercial fisheries can be found on the National Observer Program's Web site: *http://www.st.nmfs.gov/st4/nop/*.

NMFS has not included detailed information on the level, or percentage, of observer coverage in the LOF because it is generally of limited use without also including information on the confidence associated with mortality/serious injury estimates generated from observer data. Information regarding the Coefficient of Variation (CV) for stock-specific mortality/serious injury estimates are instead reported in the SARs.

The example used in the comment is noteworthy because the "analogy" upon which classification of the CA sardine purse seine fishery was based does not require observer data as its basis. This fishery is similar in many characteristics to other purse seine fisheries in the general area, and these other fisheries are in Category II (based upon the best available information from observer data from 1990–1992). Category II is the default classification for new fisheries on the LOF when there is little or no information upon which to base classification; a Category II classification requires participants to register and carry observers if requested, so that baseline information regarding incidental mortality and serious injury levels in the fishery can be determined. Thus, Category II has been identified as the appropriate classification for those fisheries with insufficient or unreliable data to support classification.

General information on observer coverage in the LOF could be useful for the public. For that reason, NMFS will consider adding relevant information to future LOFs on recently observed fisheries, or fisheries the agency intends to observe in the near term, in such a way as to avoid misinterpretation of the information.

Comment 5: One commenter recommended NMFS review all cases where serious injury or mortality occurred, but where the involved fishery, the affected stock, or both, was unknown, to determine if potential misallocation of take could result in misclassification of the relevant fisheries. If misclassifications are possible, NMFS should develop alternatives for classifications that ensure the potential risks to marine mammals are evaluated in a precautionary manner.

Response: If a misclassification were to occur, it is more likely to err on the conservative side as to minimize potential risks to marine mammals. For example, evidence of a possible fishery take through records of stranded animals would alert NMFS to potential problems with fisheries in the area. NMFS would then evaluate spatial and temporal cues to discern overlap between stranding reports and fishing activity, as well as net or gear marks or any other evidence that might indicate fishery interaction. NMFS would use this information in determining which fisheries might be involved. Most often, NMFS has enough indication from fisheries in the area to gauge potential for certain gear to be a risk to marine mammals, and uses this information to classify fisheries by analogy to other fisheries with similar gear in Category II. NMFS may also place observers in these fisheries to gather data on fisheries for which there is not yet sufficient information to determine the level of serious injury and mortality in a given fishery and/or which stocks interact with the fishery. NMFS continues to collect additional information on marine mammal stock structure and distribution and potential fishery interactions, through research on stranded and free-swimming marine mammals to identify the potential fishery involved and improvements to observer programs.

Comment 6: One commenter supported observer coverage as the best way to monitor interactions between fisheries and marine mammals.

Response: NMFS will continue to observe Category I and II fisheries for monitoring marine mammal interactions. However, NMFS notes that self-reporting of injuries and mortalities of marine mammals by fishers is required by the MMPA. For this purpose, NMFS developed the MMAP Mortality/Injury Report Form, which is available at: *http://www.nmfs.noaa.gov/pr/pdfs/interactions/mmap_reporting_form.pdf*.

Comment 7: One commenter urged NMFS to prioritize resources for observer coverage and ensure that resources are allocated to observe fisheries that have the most interactions with marine mammals and interactions with the most imperiled species.

Response: As required by section 118(d)(4) of the MMPA, the highest priority for allocating observers among fisheries would be for those commercial fisheries that have incidental mortality or serious injury of marine mammals

from stocks listed as endangered or threatened under the Endangered Species Act (ESA). To the extent practicable, the next highest priority for allocation would be for those Category I and Category II commercial fisheries that have incidental mortality and serious injury of marine mammals from strategic stocks. NMFS also places observers in fisheries where a take reduction plan (TRP) is in place to monitor incidental interactions to assess progress toward reducing interactions, to monitor compliance with the TRP, and to provide information useful to further reduce serious injury and mortality. NMFS also has observer coverage in fisheries for other fishery management purposes. In these cases, the information gathered may also be helpful in determining mortality and serious injury levels for fisheries that would otherwise not be a high priority for observer coverage under the MMPA (e.g., the American Samoa longline fishery).

NMFS will continue to allocate its limited resources for observer coverage to meet MMPA requirements according to these priorities. NMFS will also try to make the best use of available resources by using existing research programs, programs operated by states or other authorities, or alternative programs where statistically reliable information can be obtained.

In addition, NMFS has begun work on a National Bycatch Report that will provide a comprehensive summary of regional and national bycatch estimates in United States commercial fisheries based on observer data and fisher reports. The first edition of this report will discuss impacts and bycatch for fish, marine mammals, sea turtles, and sea birds in a subset of selected U.S. commercial fisheries where data and estimation procedures are available to support the development of bycatch estimates. NMFS plans to release the first edition in 2008. Subsequent editions will expand upon the number of fisheries included.

Comments on Fisheries in the Pacific Ocean

Comment 8: The list of marine mammals that interact with fisheries in Alaska includes threatened and endangered species. One commenter believes NMFS should convene a Take Reduction Team consisting of the Alaska Bering Sea/ Aleutian Islands (BSAI) flatfish trawl, BSAI pollock trawl, BSAI Greenland turbot longline, BSAI Pacific cod longline, and Bering Sea sablefish pot fishery to examine the impacts of commercial fisheries on marine mammals, including direct bycatch as well as other impacts such as those to predator-prey relationships.

Response: Section 118(f) of the MMPA contains provisions for convening a Take Reduction Team, based on the need for developing and implementing a Take Reduction Plan (TRP) for individual strategic marine mammal stocks according to levels of serious injury and mortality to that stock as a direct result of incidental take. Ideally, a TRP for each strategic stock that interacts with a Category I or II fishery would be developed; however, when resources are limited, the MMPA provides a set of priorities in determining the need for convening such teams. NMFS resources for developing TRPs are allocated according to these priorities. The highest priorities specified in the MMPA are for species or stocks where PBR is exceeded, those with small population sizes, and those which are declining most rapidly. In the Alaska Region, there are no Category I fisheries and none of the strategic stocks that interact with Category II fisheries meet these highest priorities. Therefore, NMFS does not have plans at this time to develop a TRP for any marine mammal stocks in Alaska.

Comment 9: One commenter noted that most gillnet fisheries in Alaska have little or no observer coverage, and reliance on fishers to report serious injury and mortality in those fisheries is likely to result in underestimates of serious injury and mortality. Of particular concern are humpbacks, which are known to occur in areas in which these fisheries operate. Anecdotal and documented reports of whales being caught in gillnets occur. Additionally, a humpback entangled in Alaska fishing gear has been documented in Hawaii. These reports, together with the gear's risk of incidentally taking marine mammals being analogous to East coast fisheries, should cause NMFS to elevate gillnets and purse seine fisheries to higher categories to enable observer coverage in those fisheries and more properly evaluate their risk to a variety of cetaceans, including some endangered species.

Response: With the implementation of Section 118 of the 1994 Amendments to the MMPA (60 FR 45086, August 30, 1995), all U.S. commercial fisheries were evaluated and re-categorized under the revised two-tier scheme currently used for fishery categorization for the annual LOF. At that time, very little information was available on marine mammal-fishery interactions for most of the nearshore fisheries in Alaska, including gillnet and purse seine fisheries. Reports by fishermen indicated some level of interaction. However, NMFS considers this type of information to provide only a minimum estimate of interactions, and therefore considers it a less reliable indicator of the level of interaction than observer data. Due to the scarcity of reliable information, the Alaska set and drift gillnet fisheries were placed in Category II, based on analogy to gillnets in other regions of the U.S. known to incidentally entangle marine mammals, particularly cetaceans. The rationale in placing those fisheries in Category II was to preserve the ability to place observers in the fisheries to obtain more reliable estimates of the level of marine mammal serious injury and mortality, because NMFS may only place observers in Category III fisheries in voluntary programs or under compelling circumstances.

The NMFS/Alaska Regional Office's Marine Mammal Observer Program (AMMOP) places observers in each of the Category II nearshore, state-managed salmon fisheries for two-year periods. Due to limited resources, only one or two fisheries can be observed at any given time. Once a fishery is observed, data are analyzed to evaluate the serious injury and mortality levels and potential risk to marine mammals and appropriately classify the fishery on the LOF. That fishery will not be observed again until all the remaining unobserved Category II fisheries have been observed.

Since 1995, three Category II gillnet fisheries have been observed: the Cook Inlet set gillnet (1999–2000), Cook Inlet drift gillnet (1999–2000), and Kodiak set gillnet (2002, 2005) fisheries. Observer data collected in those fisheries have resulted in the retention of the Kodiak set gillnet and the Cook Inlet drift gillnet fisheries in Category II, and the re-categorization of the Cook Inlet set gillnet fishery to Category III. The Yakutat set gillnet fishery will be observed in 2007–2008.

The Alaska Regional Office maintains a record of marine mammals, including humpbacks, reported or observed entangled in fishing gear. This information is useful in monitoring the level of marine mammal-fishery interactions, but is not as statistically reliable as observer data. None of the currently available information indicates that reclassifying any of the Category II gillnet fisheries to Category I is warranted. The existing Category II fisheries are already eligible for observer coverage, and NMFS intends to place observer coverage in those fisheries as resources become available.

Comment 10: One commenter recommended NMFS undertake a more complete investigation of interactions with marine mammals in the Western

Pacific squid jig fishery and reclassify the fishery if warranted.

Response: There are no documented marine mammal serious injuries or mortalities incidental to the Western Pacific squid jig fishery, and the fishery currently has only 6 participants. NMFS will continue to consider information about this fishery's potential to interact with marine mammals, as available. Per the MMPA, NMFS will consider reclassification options for this fishery as future information warrants. Further justification for this fishery's classification as Category III is presented in the proposed rule for the 2006 LOF (71 FR 20941, April 24, 2006).

Comment 11: Two commenters supported the addition of the American Samoa longline fishery. However, both commenters suggested that the fishery be classified as Category II, instead of Category III, in order to ensure that sufficient funds and incentives exist to initiate an observer program to gather information on the level of interactions with marine mammals.

Response: Although this fishery is classified as Category III, an observer program for this fishery was initiated in April 2006 under the Magnuson-Stevens Fishery Conservation and Management Act. For more information, see 50 CFR part 665, which requires vessels participating in this fishery that are greater than 40 ft (12.2 m) in length to carry observers, if requested by NMFS. These regulations also establish a limited entry system for pelagic longline vessels fishing in waters of the U.S. exclusive economic zone (EEZ) around American Samoa. Observers have already completed several trips and, to date, there have been no observed marine mammal serious injuries or mortalities incidental to this fishery. NMFS anticipates that observer coverage will reach 20 percent of the qualifying vessels (i.e., those greater than 40 ft (12.2 m) in length) by January 2007. NMFS will reevaluate this fishery's classification as new information, including that gathered by the observer program, becomes available.

Comment 12: NMFS proposes to add three new Category III aquaculture fisheries in the Pacific Ocean. Two commenters suggested NMFS monitor aquaculture fisheries operations to characterize the rate and impact of interactions with marine mammals. Specifically, one commenter indicated a need for on-site observers for net pen fisheries due to past deliberate killings of marine mammals by net pen fishery operators, and for grow out pens due to the potential entanglement risks to cetaceans.

Response: NMFS plans to further evaluate aquaculture facilities operating in coastal and offshore areas, especially off California, to characterize the fisheries, including potential or known interactions with marine mammals. Based on the characterization of grow out pen fisheries, grow out pens occurring in deep water may pose a risk to cetaceans. Possible monitoring approaches for aquaculture fisheries include volunteer or mandatory reporting requirements by facilities to NMFS or the relevant state fishery management agency. NMFS will continue to investigate intentional killings of marine mammals in commercial fishery operations, as prohibited in implementing regulations for section 118 of the MMPA (50 CFR 229.3(f)).

Comments on Fisheries in the Atlantic Ocean, Gulf of Mexico, and Caribbean

Comment 13: Four commenters supported the proposed reclassification of the Chesapeake Bay inshore gillnet fishery and the Mid-Atlantic menhaden purse seine fishery.

Response: Reclassification of the Chesapeake Bay inshore gillnet fishery and the Mid-Atlantic menhaden purse seine fishery from Category III to Category II is warranted, based on information presented in the 2006 proposed LOF.

Comment 14: One commenter stated that the Atlantic Ocean, Caribbean, Gulf of Mexico large pelagics longline fishery came under limited access in 1999 and overall effort has diminished since 1996. The commenter suggested NMFS revise the estimated number of active participants in the to 94, the number of actively fishing vessels reported in 2005.

Response: NMFS has updated the number of participants in the fishery to 94.

Comment 15: One commenter commended NMFS for recognizing interactions in the Atlantic Ocean, Caribbean, Gulf of Mexico commercial passenger fishing vessel fishery and recommended NMFS begin an observer program in this fishing sector, as there are likely additional species of marine mammals incidentally killed or injured than those listed in the LOF.

Response: NMFS has initiated an at-sea data collection program aboard a limited number of commercial passenger fishing vessels as a pilot program. The results of this program will help NMFS to better determine the appropriate sampling design and resources required for increased coverage of this fishery.

Comment 16: One commenter suggested that NMFS subdivide the Atlantic Ocean, Caribbean, Gulf of Mexico large pelagics longline fishery into three regional fisheries in the LOF to reflect variations in geographic region, target species, vessel size, area-specific regulations, and fishing season. The commenter noted specifically that the Atlantic portion of the longline fishery should be divided into northern and southern components with a boundary line at the Florida/Georgia boundary. This division would be consistent with classifications of other fisheries in Alaska, the Pacific, and the Atlantic.

Response: NMFS acknowledges the information provided by the commenter on potential subdivisions of this fishery and notes that we addressed similar comments in the final LOF for 1996 (see Comment/Response 31 in 60 FR 249, December 28, 1995), the final LOF for 1997 (see Comment/Response 37 in 62 FR 33, January 2, 1997), the final LOF for 1999 (see Comment/Response 18 in 64 FR 9067, February 24, 1999), the final LOF for 2001 (see Comment/Response 16 in 66 FR 42784, August 15, 2001), and the final LOF for 2003 (see Comment/Response 29 in 68 FR 41732, July 15, 2003).

NMFS generally characterizes fisheries on the LOF consistent with the current management structure for the fishery. NMFS will, whenever possible, define fisheries the way they are defined in Federal, regional, or state fishery management programs. The pelagic longline fishery is managed by NMFS as one fishery encompassing all longline fishing effort targeting highly migratory species that may occur throughout the Atlantic Ocean, Caribbean, and Gulf of Mexico. The development of management measures to reduce serious injuries and mortalities of marine mammals in the longline fishery has focused primarily on those areas where interactions pose particular risk to marine mammals, without unduly affecting fishery operations in other areas.

Comment 17: One commenter recommended deleting the Western North Atlantic (WNA) stock of Atlantic spotted dolphins and the WNA stock of Pantropical spotted dolphins from the list of stocks that interact with the Atlantic Ocean, Caribbean, Gulf of Mexico large pelagics longline fishery. The draft 2005 SARs state no mortalities or serious injuries have been documented in this fishery, and incidental takes have not been documented by observers.

Response: The species list for this fishery should include only those

species that have been documented as injured or killed in the fishery for the period 1999–2003. NMFS will review observer data, bycatch reports, and other relevant data sources for this fishery and propose any warranted changes to the list of species incidentally injured/killed in the proposed LOF for 2007.

Comment 18: One commenter stated that NMFS uses speculative data to assign mortality, and the SARs use an unproven "pooling" method based on data from 1999–2003 to extrapolate estimated annual interactions in 2006 in the Atlantic Ocean, Caribbean, Gulf of Mexico large pelagics longline fishery. NMFS further applies a percentage to all extrapolated estimates based on observer comments, leading to a distortion of impacts and over-estimates of incidental take based on random and rare events.

Response: NMFS uses observer data to assign marine mammal mortality and serious injury to this fishery. The analytical methods used to extrapolate observed serious injuries and mortalities to annual estimates of mortality and serious injury are widely accepted and have been peer reviewed. The 2005 SAR uses 1999–2003 observer data because it is consistent with the NMFS guidelines for preparing marine mammal stock assessments. These guidelines are available at: *http://www.nmfs.noaa.gov/pr/pdfs/sars/gamms2005.pdf.*

Comment 19: One commenter disagreed with NMFS' proposal to remove the WNA stock of fin whales from the list of species killed/injured in the Mid-Atlantic gillnet fishery. A lack of documented observations should not be used to state that interactions do not occur. Also, given that fin whales occur in the same waters as this fishery and have been found entangled in gear of unknown origin, the gear could belong to any fixed-gear fishery.

Response: Observer coverage was placed in this fishery during the period 1999–2003. To date, NMFS does not have any confirmed, observer documented interactions between this stock and this fishery. Therefore, NMFS has removed the WNA stock of fin whales from the list of species killed/injured in the Mid-Atlantic gillnet fishery.

Comment 20: One commenter supported the reclassification of the Mid-Atlantic menhaden purse seine fishery and encouraged NMFS to implement an observer program for this fishery.

Response: NMFS has reclassified the Mid-Atlantic menhaden purse seine fishery as a Category II fishery, effective September 21, 2006. As a Category II fishery, NMFS may place observers in the fishery; however, initiation of observer coverage is dependent on resources. Also see response to comment 7.

Comment 21: One commenter recommended NMFS expedite investigations of Gulf of Mexico bottlenose dolphin stock structure and reevaluate which fisheries' classifications may be affected by the updated information.

Response: Bottlenose dolphin stock structure in the Gulf of Mexico needs to be further defined in order to re-evaluate classification of the blue crab trap/pot and menhaden purse seine fisheries, as well as other fisheries that may be interacting with bottlenose dolphins in this area. NMFS research in the Gulf of Mexico in 2005–2006, as well as future planned research in this area, will assist in furthering our understanding of bottlenose dolphin stock structure in the Gulf of Mexico so as to better evaluate impacts of these and other fisheries. NMFS will consider these research results in analysis for future LOFs.

Comment 22: One commenter suggested NMFS compare the distribution of fishing effort in the Southeast Atlantic inshore gillnet fishery with the distribution of marine mammals (especially bottlenose dolphins) in the region, and reclassify the fishery as Category II if overlap occurs to an appreciable degree.

Response: NMFS will continue to monitor fishing effort and evaluate bottlenose dolphin strandings for evidence of gillnet-related fishery interactions in and around inshore waters of the Southeast to determine the need for future reclassification of the fishery.

Comment 23: Three commenters recommended NMFS reclassify gillnet fisheries operating in the Southeast Atlantic, specifically the Southeast Atlantic gillnet fishery, as Category I because of their potential involvement in the January 2006 death of a North Atlantic right whale calf and to enable NMFS to fully assess their level of interaction with marine mammals.

Response: NMFS determined the January 2006 death of a right whale calf was the result of entanglement and injury to the whale by gillnet gear in the Southeast U.S. Restricted Area; however, NMFS has not determined which specific gillnet fishery was responsible for the interaction. There are two gillnet fisheries that traditionally operate in this Southeast Atlantic: the Southeast Atlantic gillnet fishery and the Southeastern U.S. Atlantic shark gillnet fishery. Both are currently classified as Category II fisheries. A fishery classified as Category I is one that is by itself responsible for the annual removal of 50 percent or more of any stock's potential biological removal level (50 CFR 229.2). Without definitive information regarding which fishery was involved, NMFS did not attribute the death of this right whale calf to either fishery. Therefore, elevation of the Southeast Atlantic gillnet fisheries to Category I is not warranted at this time. NMFS continues to classify these fisheries as a Category II, where they are subject to observer coverage.

Management measures were implemented following the January 2006 entanglement death of a right whale calf. NMFS issued a temporary rule effective February 15, 2006, through March 31, 2006 (71 FR 8223, February 16, 2006), restricting gillnet use in the area as required by the implementing regulations for the Atlantic Large Whale Take Reduction Plan (ALWTRP; 50 CFR 229.32(g)(1)). Specifically, the regulations state that if a serious injury or mortality of a right whale occurs in the Southeast U.S. Restricted Area during the North Atlantic right whale calving season (November 15 through March 31) as a result of an entanglement by gillnet gear, NMFS shall close that area to gillnet gear for the remainder of the time period (March 31). The regulations state NMFS shall also close that area to gillnet gear that same time period in each subsequent year, unless NMFS' Assistant Administrator revises the restricted period in accordance with 50 CFR 229.32(g)(2) or unless alternate measures are implemented.

Comment 24: Two commenters recommended that NMFS add North Atlantic right whales to the list of species killed/injured in the Southeast Atlantic gillnet fishery, as a result of the possibility this fishery was responsible for the January 2006 death of a right whale calf. In addition, one commenter recommended that humpback whales be added to the list of species killed/injured for all fixed gear fisheries in their range because most gear found on entangled whales cannot be attributed to a specific fishery.

Response: Right and humpback whales may become entangled in fixed gears. However, NMFS has not documented any marine mammal mortalities or serious injuries incidental to any other fixed gears that have not already been described in this annual LOF. Without reasonable information regarding which fishery is involved in entanglements of right and humpback whales, NMFS does not identify all fixed gear fisheries as being responsible

for injuries and/or mortalities. However, NMFS will continue to classify these fisheries as Category II by analogy.

Summary of Changes to the LOF for 2006

The following summarizes changes to the LOF in 2006 in fishery classification, fisheries listed on the LOF, the number of participants in a particular fishery, and the species and/or stocks that are incidentally killed or seriously injured in a particular fishery. The placement and definition of U.S. commercial fisheries for 2006 are identical to those provided in the LOF for 2005 with the following exceptions.

Commercial Fisheries in the Pacific Ocean

Fishery Classification

The "AK Bering Sea and Aleutian Islands Greenland turbot longline fishery" is reclassified from Category II to Category III.

The "CA sardine purse seine fishery" is elevated from Category III to Category II. The proposed 2006 LOF stated that this fishery was elevated in part by analogy "to other Category II purse seine fisheries (e.g., CA anchovy)." Specifically, the fishery is elevated in part by analogy with the CA anchovy, mackerel, tuna purse seine fishery and the CA squid purse seine fishery.

Addition of Fisheries to the LOF

The "American Samoa longline fishery" is added to the LOF as a Category III fishery.

The "Western Pacific squid jig fishery" is added to the LOF as a Category III fishery.

The "HI Kona crab loop net fishery" is added to the LOF as a Category III fishery.

The "HI offshore pen culture fishery" is added to the LOF as a Category III fishery.

The "CA marine shellfish aquaculture fishery" is added to the LOF as a Category III fishery.

The "CA white seabass enhancement net pen fishery" is added to the LOF as a Category III fishery.

Removal of Fisheries from the LOF

The "HI net unclassified fishery" is removed from the LOF.

The "AK miscellaneous finfish pair trawl" is removed from the LOF. This was a new fishery in Alaskan waters in 1996 and was classified as Category II pending additional information on interactions with marine mammals. It was classified as Category II by analogy with pair trawl fisheries in the North Atlantic, particularly the U.S. North Atlantic large pelagics pair trawl fishery, which demonstrated high levels of mortality and serious injury for some marine mammal species. NMFS did not propose to remove this fishery in the proposed LOF for 2006 (71 FR 78, April 24, 2006). NMFS has since learned that there have been no reported mortalities or serious injuries of marine mammals in this fishery since its addition to the LOF. In addition, the fishery is not currently in operation, with the exception of two currently inactive permits issued by the Alaska Department of Fish and Game. NMFS will reevaluate the removal of this fishery if new information on interactions with marine mammals is presented.

Fishery Name and Organizational Changes and Clarifications

The "HI tuna fishery" is renamed the "HI tuna handline fishery."

The "HI deep sea bottomfish fishery" is renamed the "HI Main Hawaiian Islands and Northwest Hawaiian Islands deep sea bottomfish fishery."

The "HI coral diving fishery" is renamed the "HI black coral diving fishery."

The "HI other fishery" is renamed the "HI charter vessel fishery."

Number of Vessels/Persons

The estimated number of participants in the "HI gillnet fishery" is updated to 35.

The estimated number of participants in the "HI opelu/akule net fishery" is updated to 12.

The estimated number of participants in the "HI purse seine fishery" is updated to 23.

The estimated number of participants in the "HI fish pond fishery" is updated to N/A. NMFS is retaining this fishery on the LOF as there may be participants in the near future.

The estimated number of participants in the "HI throw net, cast net fishery" is updated to 14.

The estimated number of participants in the "HI trolling, rod and reel fishery" is updated to 1,321.

The estimated number of participants in the "HI lobster trap fishery" is updated to 0. Fourteen permits are available if this fishery reopened.

The estimated number of participants in the "HI aku boat, pole and line fishery" is updated to 4.

The estimated number of participants in the "HI inshore handline fishery" is updated to 307.

The estimated number of participants in the "HI tuna handline fishery" (proposed name change from the "HI tuna fishery", see Fishery Name and Organizational Changes and Clarifications section) is updated to 298.

The estimated number of participants in the "HI main Hawaiian Islands and Northwest Hawaiian Islands deep sea bottomfish fishery" (proposed name change from the "HI deep sea bottomfish fishery", see Fishery Name and Organizational Changes and Clarifications section) is updated to 387.

The estimated number of participants in the "HI black coral diving fishery" (proposed name change from the "HI coral diving fishery", see Fishery Name and Organizational Changes and Clarifications section) is updated to 1.

The estimated number of participants in the "HI handpick fishery" is updated to 37.

The estimated number of participants in the "HI lobster diving fishery" is updated to 19.

The estimated number of participants in the "HI squiding, spear fishery" is updated to 91.

The estimated number of participants in the "AK BSAI Greenland turbot longline fishery" is updated to 12.

List of Species That are Incidentally Injured or Killed

California Squid Purse Seine Fishery

Common dolphins, stock unknown, are added to the list of marine mammal species and stocks incidentally injured or killed by the CA squid purse seine fishery.

HI Swordfish, Tuna, Billfish, Mahi Mahi, Wahoo, and Oceanic Sharks Longline/Set Line Fishery

The Hawaiian stocks of Blaineville's beaked whales and Pantropical spotted dolphins are added to the list of marine mammal species and stocks incidentally injured or killed by the HI swordfish, tuna, billfish, mahi mahi, wahoo, and oceanic sharks longline/set line fishery.

HI Inshore Handline Fishery

The Hawaiian stock of bottlenose dolphins is removed from the list of marine mammal species and stocks incidentally injured or killed by the HI inshore handline fishery.

HI Tuna Handline Fishery

The Hawaiian stocks of bottlenose dolphins and rough tooth dolphins are removed from the list of marine mammal species and stocks incidentally injured or killed by the Hawaii tuna handline fishery (proposed name change from "Hawaii tuna fishery", see Fishery Name and Organizational Changes and Clarifications section).

CA/OR Thresher Shark/Swordfish Drift Gillnet Fishery

Corrections are made to errors in the list of marine mammal species and

stocks incidentally injured or killed by the CA/OR thresher shark/swordfish drift gillnet fishery. Specifically, the CA/OR/WA Pacific coast stock of killer whales is changed to the Eastern North Pacific offshore stock, and the CA/OR/WA stock of long-beaked common dolphins is changed to the CA stock. Additionally, the Northern and Southern species of Pacific white-sided dolphins are combined to reflect how these species are currently characterized in the SARs.

WA, OR, CA Groundfish Trawl Fishery

Corrections are made to errors in the list of marine mammal species and stocks injured or killed incidental to the WA, OR, CA groundfish trawl fishery. Specifically, the Central North Pacific stock of Pacific white-sided dolphins is changed to the CA/OR/WA stock, and the Western stock of Steller sea lions is changed to the Eastern stock.

Alaska Fisheries

The 2004 LOF revised the Federally managed fisheries in Alaska into more discrete fisheries according to area, gear, and target species in order to more accurately reflect the fisheries as managed under Federal Fishery Management Plans. At that time, the marine mammal stocks associated with the newly delineated fisheries in the LOF were not revised accordingly. The following marine mammal stocks are added to the list of species and stocks incidently injured or killed in the following Federal fisheries.

AK Bering Sea, Aleutian Islands Flatfish Trawl Fishery

The Eastern North Pacific stock of Northern fur seals, the Bering Sea stocks of harbor porpoise and harbor seals, and the Alaska stocks of bearded seals, spotted seals, and walruses are added to the list of marine mammal species and stocks injured or killed incidental to the AK BSAI flatfish trawl fishery.

AK Bering Sea, Aleutian Islands Pollock Trawl Fishery

The Bering Sea stock of harbor seals and the Alaska stocks of Dall's porpoise, minke whales, ribbon seals, and spotted seals are added to the list of marine mammal species and stocks injured or killed incidental to the AK BSAI pollock trawl fishery.

AK Bering Sea, Aleutian Islands Pacific Cod Longline Fishery

The Alaska stock of ribbon seals and the Western U.S. stock of Steller sea lions are added to the list of marine mammal species and stocks injured or killed incidental to the AK BSAI Pacific cod longline fishery.

AK Gulf of Alaska Sablefish Longline Fishery

The Eastern U.S. stock of Steller sea lions and the North Pacific stock of sperm whales are added to the list of marine mammal species and stocks injured or killed incidental to the AK GOA sablefish longline fishery.

AK Bering Sea, Aleutian Islands Pacific Cod Trawl Fishery

The Western U.S. stock of Steller sea lions and the Bering Sea stock of harbor seals are added to the list of marine mammal species and stocks injured or killed incidental to the AK BSAI Pacific cod trawl fishery.

AK Gulf of Alaska Pacific Cod Trawl Fishery

The Western U.S. stock of Steller sea lions is added to the list of marine mammal species and stocks injured or killed incidental to the AK GOA Pacific cod trawl fishery.

AK Gulf of Alaska Pollock Trawl Fishery

The Western U.S. stock of Steller sea lions, the Northeast Pacific stock of fin whales, and the North Pacific stock of Northern elephant seals are added to the list of marine mammal species and stocks injured or killed incidental to the AK GOA pollock trawl fishery.

AK Gulf of Alaska Pacific Cod Pot Fishery

The GOA stock of harbor seals are added to the list of marine mammal species and stocks injured or killed incidental to the AK GOA Pacific cod pot fishery.

AK, WA, OR, CA Commercial Passenger Fishing Vessel Fishery

The Eastern and Western U.S. stocks of Steller sea lions and an unknown stock of killer whales are added to the list of marine mammal species and stocks injured or killed incidental to the AK, WA, OR, CA commercial passenger fishing vessel fishery.

AK Southeast Alaska Crab Pot Fishery

The Central North Pacific (Southeast AK) stock of humpback whales is added to the list of marine mammal species and stocks injured or killed incidental to the AK Southeast Alaska crab pot fishery.

AK Southeast Alaska Shrimp Pot Fishery

The Central North Pacific (Southeast AK) stock of humpback whales is added to the list of marine mammal species and stocks injured or killed incidental to the AK Southeast Alaska shrimp pot fishery.

AK Yakutat Salmon Set Gillnet Fishery

The Central North Pacific (Southeast AK) stock of humpback whales is added to the list of marine mammal species and stocks injured or killed incidental to the AK Yakutat salmon set gillnet fishery.

AK Kodiak Salmon Set Gillnet Fishery

The Western U.S. stock of Steller sea lions is added to the list of marine mammal species and stocks injured or killed incidental to the AK Kodiak salmon set gillnet fishery.

Alaska Bering Sea, Aleutian Islands Flatfish Trawl Fishery

The Eastern North Pacific transient stock of killer whales is removed from the list of marine mammals species and stocks injured or killed in the Alaska BSAI flatfish trawl fishery.

Alaska Bering Sea, Aleutian Islands Pollock Trawl Fishery

The Eastern North Pacific resident stock of killer whales is removed from the list of marine mammals species and stocks incidentally injured or killed in the Alaska BSAI pollock trawl fishery.

Commercial Fisheries in the Atlantic Ocean, Gulf of Mexico, and Caribbean

Fishery Classification

The "Chesapeake Bay inshore gillnet fishery" is elevated from Category III to Category II.

The "Mid-Atlantic menhaden purse seine fishery" is elevated from Category III to Category II.

Addition of Fisheries to the LOF

The "Southeast Atlantic inshore gillnet fishery" is added to the LOF as a Category III fishery.

Fishery Name and Organizational Changes and Clarifications

The list of target species associated with the "Southeast Atlantic gillnet fishery" is expanded to include the following target species: king mackerel, Spanish mackerel, whiting, bluefish, pompano, spot, croaker, little tunny, bonita, jack crevalle, and cobia. Atlantic sturgeon are listed as a species of concern under the ESA and are also managed under a fishery management plan. A moratorium on possession and harvest of this species currently exists throughout the U.S. East Coast. Additionally, fishing for shad in ocean waters is prohibited by Southeast coastal states and is therefore no longer

included as a target species of the Southeast Atlantic gillnet fishery.

Number of Vessels/Persons

The estimated number of participants in the "Atlantic Ocean, Caribbean, Gulf of Mexico large pelagics longline fishery" is updated to 94.

List of Species That are Incidentally Injured or Killed

Mid-Atlantic Gillnet Fishery

The Western North Atlantic stock of fin whales is removed from the list of marine mammal species and stocks incidentally injured or killed incidental to the Mid-Atlantic gillnet fishery.

Atlantic Ocean, Gulf of Mexico, Caribbean Commercial Passenger Fishing Vessel Fishery

Several bottlenose dolphin stocks are added to the list of marine mammal species and stocks incidentally injured or killed incidental to the Atlantic Ocean, Gulf of Mexico, Caribbean commercial passenger fishing vessel fishery. These bottlenose dolphin stocks include the Western North Atlantic coastal, Eastern Gulf of Mexico coastal, Northern Gulf of Mexico coastal, and Western Gulf of Mexico coastal.

Northeast Bottom Trawl Fishery

The Western North Atlantic offshore stock of bottlenose dolphins and the Western North Atlantic stock of striped dolphins are removed from the list of marine mammal species and stocks injured or killed incidental to the Northeast bottom trawl fishery.

List of Fisheries

The following two tables list U.S. commercial fisheries according to their assigned categories under section 118 of the MMPA. The estimated number of vessels/participants is expressed in terms of the number of active participants in the fishery, when possible. If this information is not available, the estimated number of vessels or persons licensed for a particular fishery is provided. If no recent information is available on the number of participants in a fishery, the number from the most recent LOF is used.

The tables also list the marine mammal species and stocks that are incidentally killed or injured in each fishery based on observer data, logbook data, stranding reports, and fisher reports. This list includes all species or stocks known to experience injury or mortality in a given fishery, but also includes species or stocks for which there are anecdotal records of interaction. Additionally, species identified by logbook entries may not be verified. Not all species or stocks identified are the reason for a fishery's placement in a given category. NMFS has designated those stocks that are responsible for a current fishery's classification by a "[1].

There are several fisheries classified in Category II that have no recently documented interactions with marine mammals, or interactions that did not result in a serious injury or mortality. Justifications for placement of these fisheries, which are greater than 1 percent of a stock's PBR level, are by analogy to other gear types that are known to cause mortality or serious injury of marine mammals, as discussed in the final LOF for 1996 (60 FR 67063, December 28, 1995), and according to factors listed in the definition of a "Category II fishery" in 50 CFR 229.2. NMFS has designated those fisheries originally listed by analogy in Tables 1 and 2 by a "[2]" after that fishery's name.

Table 1 lists commercial fisheries in the Pacific Ocean (including Alaska); Table 2 lists commercial fisheries in the Atlantic Ocean, Gulf of Mexico, and Caribbean.

TABLE 1.—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE PACIFIC OCEAN

Fishery Description	Estimated # of vessels/ persons	Marine mammal species and stocks incidentally killed/injured
Category I		
GILLNET FISHERIES:		
CA angel shark/halibut and other species set gillnet (> 3.5 in. mesh)	58	California sea lion, U.S. Harbor seal, CA Harbor porpoise, Central CA[1] Long-beaked common dolphin, CA Northern elephant seal, CA breeding Sea otter, CA Short-beaked common dolphin, CA/OR/WA

TABLE 1.—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE PACIFIC OCEAN—Continued

Fishery Description	Estimated # of vessels/ persons	Marine mammal species and stocks incidentally killed/injured
CA/OR thresher shark/swordfish drift gillnet (≥ 14 in. mesh)	85	Baird's beaked whale, CA/OR/WA Bottlenose dolphin, CA/OR/WA offshore California sea lion, U.S. Cuvier's beaked whale, CA/OR/WA Dall's porpoise, CA/OR/WA Fin whale, CA/OR/WA Gray whale, Eastern North Pacific Humpback whale, CA/OR/WA-Mexico Killer whale, Eastern North Pacific offshore Long-beaked common dolphin, CA Mesoplodont beaked whale, CA/OR/WA Northern elephant seal, CA breeding Northern fur seal, San Miguel Island Northern right-whale dolphin, CA/OR/WA Pacific white-sided dolphin, CA/OR/WA Pygmy sperm whale, CA/OR/WA Risso's dolphin, CA/OR/WA Short-beaked common dolphin, CA/OR/WA Short-finned pilot whale, CA/OR/WA[1] Sperm whale, CA/OR/WA Steller sea lion, Eastern U.S. Striped dolphin, CA/OR/WA
LONGLINE/SET LINE FISHERIES:		
HI swordfish, tuna, billfish, mahi mahi, wahoo, oceanic sharks longline/set line	140	Blainville's beaked whale, HI Bottlenose dolphin, HI False killer whale, HI[1] Humpback whale, Central North Pacific Pantropical spotted dolphin, HI Risso's dolphin, HI Short-finned pilot whale, HI Spinner dolphin, HI Sperm whale, HI
Category II		
GILLNET FISHERIES:		
AK Bristol Bay salmon drift gillnet[2]	1,903	Beluga whale, Bristol Bay Gray whale, Eastern North Pacific Harbor seal, Bering Sea Northern fur seal, Eastern Pacific Pacific white-sided dolphin, North Pacific Spotted seal, AK Steller sea lion, Western U.S.[1]
AK Bristol Bay salmon set gillnet[2]	1,014	Beluga whale, Bristol Bay Gray whale, Eastern North Pacific Harbor seal, Bering Sea Northern fur seal, Eastern Pacific Spotted seal, AK
AK Cook Inlet salmon drift gillnet	576	Beluga whale, Cook Inlet Dall's porpoise, AK Harbor porpoise, GOA[1] Harbor seal, GOA Steller sea lion, Western U.S.
AK Kodiak salmon set gillnet	188	Harbor porpoise, GOA[1] Harbor seal, GOA Sea otter, Southwest AK Steller sea lion, Western U.S.
AK Metlakatla/Annette Island salmon drift gillnet[2]	60	None documented

TABLE 1.—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE PACIFIC OCEAN—Continued

Fishery Description	Estimated # of vessels/ persons	Marine mammal species and stocks incidentally killed/injured
AK Peninsula/Aleutian Islands salmon drift gillnet[2]	164	Dall's porpoise, AK Harbor porpoise, GOA Harbor seal, GOA Northern fur seal, Eastern Pacific
AK Peninsula/Aleutian Islands salmon set gillnet[2]	116	Harbor porpoise, Bering Sea Steller sea lion, Western U.S.
AK Prince William Sound salmon drift gillnet	541	Dall's porpoise, AK Harbor porpoise, GOA[1] Harbor seal, GOA Northern fur seal, Eastern Pacific Pacific white-sided dolphin, North Pacific Steller sea lion, Western U.S.[1]
AK Southeast salmon drift gillnet	481	Dall's porpoise, AK Harbor porpoise, Southeast AK Harbor seal, Southeast AK Humpback whale, Central North Pacific[1] Pacific white-sided dolphin, North Pacific Steller sea lion, Eastern U.S.
AK Yakutat salmon set gillnet[2]	170	Gray whale, Eastern North Pacific Harbor seal, Southeast AK Humpback whale, Central North Pacific (Southeast AK)
CA yellowtail, barracuda, white seabass, and tuna drift gillnet fishery (mesh size > 3.5 inches and < 14 inches)[2]	24	California sea lion, U.S. Long-beaked common dolphin, CA Short-beaked common dolphin, CA/OR/WA
WA Puget Sound Region salmon drift gillnet (includes all inland waters south of US-Canada border and eastward of the Bonilla-Tatoosh line-Treaty Indian fishing is excluded)	210	Dall's porpoise, CA/OR/WA Harbor porpoise, inland WA[1] Harbor seal, WA inland
PURSE SEINE FISHERIES:		
AK Southeast salmon purse seine	416	Humpback whale, Central North Pacific[1]
CA anchovy, mackerel, tuna purse seine	110	Bottlenose dolphin, CA/OR/WA offshore1 California sea lion, U.S. Harbor seal, CA
CA sardine purse seine[2]	110	California sea lion, U.S.
CA squid purse seine	65	Common dolphin, unknown Short-finned pilot whale, CA/OR/WA[1]
TRAWL FISHERIES:		
AK Bering Sea, Aleutian Islands flatfish trawl	26	Bearded seal, AK Harbor porpoise, Bering Sea Harbor seal, Bering Sea Killer whale, AK resident[1] Northern fur seal, Eastern North Pacific Spotted seal, AK Steller sea lion, Western U.S.[1] Walrus, AK
AK Bering Sea, Aleutian Islands pollock trawl	120	Dall's porpoise, AK Harbor seal, AK Humpback whale, Central North Pacific[1] Humpback whale, Western North Pacific[1] Killer whale, Eastern North Pacific, GOA, Aleutian Islands, and Bering Sea transient[1] Minke whale, AK Ribbon seal, AK Spotted seal, AK Steller sea lion, Western U.S.[1]

TABLE 1.—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE PACIFIC OCEAN—Continued

Fishery Description	Estimated # of vessels/ persons	Marine mammal species and stocks incidentally killed/injured
LONGLINE/SET LINE FISHERIES:		
AK Bering Sea, Aleutian Islands Pacific cod longline	114	Killer whale, AK resident[1] Killer whale, Eastern North Pacific, GOA, Aleutian Islands, and Bering Sea transient[1] Ribbon seal, AK Steller sea lion, Western U.S.
CA pelagic longline[2]	6	California sea lion, U.S. Risso's dolphin, CA/OR/WA
OR swordfish floating longline[2]	0	None documented
OR blue shark floating longline[2]	1	None documented
POT, RING NET, AND TRAP FISHERIES:		
AK Bering Sea sablefish pot	6	Humpback whale, Central North Pacific[1] Humpback whale, Western North Pacific[1]
Category III		
GILLNET FISHERIES:		
AK Cook Inlet salmon set gillnet	745	Beluga whale, Cook Inlet Dall's porpoise, AK Harbor porpoise, GOA Harbor seal, GOA Steller sea lion, Western U.S.
AK Kuskokwim, Yukon, Norton Sound, Kotzebue salmon gillnet	1,922	Harbor porpoise, Bering Sea
AK miscellaneous finfish set gillnet	3	Steller sea lion, Western U.S.
AK Prince William Sound salmon set gillnet	30	Harbor seal, GOA Steller sea lion, Western U.S.
AK roe herring and food/bait herring gillnet	2,034	None documented
CA set and drift gillnet fisheries that use a stretched mesh size of 3.5 in or less	341	None documented
Hawaii gillnet	35	Bottlenose dolphin, HI Spinner dolphin, HI
WA Grays Harbor salmon drift gillnet (excluding treaty Tribal fishing)	24	Harbor seal, OR/WA coast
WA, OR herring, smelt, shad, sturgeon, bottom fish, mullet, perch, rockfish gillnet	913	None documented
WA, OR lower Columbia River (includes tributaries) drift gillnet	110	California sea lion, U.S.Harbor seal, OR/WA coast
WA Willapa Bay drift gillnet	82	Harbor seal, OR/WA coast Northern elephant seal, CA breeding
PURSE SEINE, BEACH SEINE, ROUND HAUL AND THROW NET FISHERIES:		
AK Metlakatla salmon purse seine	10	None documented
AK miscellaneous finfish beach seine	1	None documented
AK miscellaneous finfish purse seine	3	None documented
AK octopus/squid purse seine	2	None documented
AK roe herring and food/bait herring beach seine	8	None documented

TABLE 1.—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE PACIFIC OCEAN—Continued

Fishery Description	Estimated # of vessels/ persons	Marine mammal species and stocks incidentally killed/injured
AK roe herring and food/bait herring purse seine	624	None documented
AK salmon beach seine	34	None documented
AK salmon purse seine (except Southeast Alaska, which is in Category II)	953	Harbor seal, GOA
CA herring purse seine	100	California sea lion, U.S. Harbor seal, CA
HI Kona crab loop net	42	None documented
HI opelu/akule net	12	None documented
HI purse seine	23	None documented
HI throw net, cast net	14	None documented
WA (all species) beach seine or drag seine	235	None documented
WA, OR herring, smelt, squid purse seine or lampara	130	None documented
WA salmon purse seine	440	None documented
WA salmon reef net	53	None documented
DIP NET FISHERIES:		
CA squid dip net	115	None documented
WA, OR smelt, herring dip net	119	None documented
MARINE AQUACULTURE FISHERIES:		
CA marine shellfish aquaculture	unknown	None documented
CA salmon enhancement rearing pen	>1	None documented
CA white seabass enhancement net pens	13	California sea lion, U.S.
HI offshore pen culture	2	None documented
OR salmon ranch	1	None documented
WA, OR salmon net pens	14	California sea lion, U.S. Harbor seal, WA inland waters
TROLL FISHERIES:		
AK North Pacific halibut, AK bottom fish, WA, OR, CA albacore, groundfish, bottom fish, CA halibut non-salmonid troll fisheries	1,530 (330 AK)	None documented
AK salmon troll	2,335	Steller sea lion, Eastern U.S. Steller sea lion, Western U.S.
American Samoa tuna troll	< 50	None documented
CA/OR/WA salmon troll	4,300	None documented
Commonwealth of the Northern Mariana Islands tuna troll	50	None documented
Guam tuna troll	50	None documented
HI trolling, rod and reel	1,321	None documented
LONGLINE/SET LINE FISHERIES:		
AK Bering Sea, Aleutian Islands Greenland turbot longline	12	Killer whale, AK resident Killer whale, Eastern North Pacific, GOA, Aleutian Islands, and Bering Sea transient

TABLE 1.—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE PACIFIC OCEAN—Continued

Fishery Description	Estimated # of vessels/ persons	Marine mammal species and stocks incidentally killed/injured
AK Bering Sea, Aleutian Islands rockfish longline	17	None documented
AK Bering Sea, Aleutian Islands sablefish longline	63	None documented
AK Gulf of Alaska halibut longline	1,302	None documented
AK Gulf of Alaska Pacific cod longline	440	None documented
AK Gulf of Alaska rockfish longline	421	None documented
AK Gulf of Alaska sablefish longline	412	Sperm whale, North Pacific Steller sea lion, Eastern U.S.
AK halibut longline/set line (State and Federal waters)	3,079	Steller sea lion, Western U.S.
AK octopus/squid longline	7	None documented
AK state-managed waters groundfish longline/setline (including sablefish, rockfish, and miscellaneous finfish)	731	None documented
American Samoa longline	138	None documented
WA, OR, CA groundfish, bottomfish longline/set line	367	None documented
WA, OR North Pacific halibut longline/set line	350	None documented
TRAWL FISHERIES:		
AK Bering Sea, Aleutian Islands Atka mackerel trawl	8	Steller sea lion, Western U.S.
AK Bering Sea, Aleutian Islands Pacific cod trawl	87	Harbor seal, Bering Sea Steller sea lion, Western U.S.
AK Bering Sea, Aleutian Islands rockfish trawl	9	None documented
AK Gulf of Alaska flatfish trawl	52	None documented
AK Gulf of Alaska Pacific cod trawl	101	Steller sea lion, Western U.S.
AK Gulf of Alaska pollock trawl	83	Fin whale, Northeast Pacific Northern elephant seal, North Pacific Steller sea lion, Western U.S.
AK Gulf of Alaska rockfish trawl	45	None documented
AK food/bait herring trawl	3	None documented
AK miscellaneous finfish otter or beam trawl	6	None documented
AK shrimp otter trawl and beam trawl (statewide and Cook Inlet)	58	None documented
AK state-managed waters of Cook Inlet, Kachemak Bay, Prince William Sound, Southeast AK groundfish trawl	2	None documented
WA, OR, CA groundfish trawl	585	California sea lion, U.S. Dall's porpoise, CA/OR/WA Harbor seal, OR/WA coast Northern fur seal, Eastern Pacific Pacific white-sided dolphin, CA/OR/WA Steller sea lion, Eastern U.S.
WA, OR, CA shrimp trawl	300	None documented
POT, RING NET, AND TRAP FISHERIES:		
AK Aleutian Islands sablefish pot	8	None documented
AK Bering Sea, Aleutian Islands Pacific cod pot	76	None documented
AK Bering Sea, Aleutian Islands crab pot	329	None documented

TABLE 1.—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE PACIFIC OCEAN—Continued

Fishery Description	Estimated # of vessels/ persons	Marine mammal species and stocks incidentally killed/injured
AK Gulf of Alaska crab pot	unknown	None documented
AK Gulf of Alaska Pacific cod pot	154	Harbor seal, GOA
AK Southeast Alaska crab pot	unknown	Humpback whale, Central North Pacific (Southeast AK)
AK Southeast Alaska shrimp pot	unknown	Humpback whale, Central North Pacific (Southeast AK)
AK octopus/squid pot	72	None documented
AK snail pot	2	None documented
CA lobster, prawn, shrimp, rock crab, fish pot	608	Sea otter, CA
OR, CA hagfish pot or trap	25	None documented
WA, OR, CA crab pot	1,478	Gray whale, Eastern North Pacific
WA, OR, CA sablefish pot	176	None documented
WA, OR shrimp pot/trap	254	None documented
HI crab trap	22	None documented
HI fish trap	19	None documented
HI lobster trap	0	Hawaiian monk seal
HI shrimp trap	5	None documented
HANDLINE AND JIG FISHERIES:		
AK miscellaneous finfish handline and mechanical jig	100	None documented
AK North Pacific halibut handline and mechanical jig	93	None documented
AK octopus/squid handline	2	None documented
American Samoa bottomfish	<50	None documented
Commonwealth of the Northern Mariana Islands bottomfish	<50	None documented
Guam bottomfish	<50	None documented
HI aku boat, pole and line	4	None documented
HI Main Hawaiian Islands, Northwest Hawaiian Islands deep sea bottomfish	387	Hawaiian monk seal
HI inshore handline	307	None documented
HI tuna handline	298	Hawaiian monk seal
WA groundfish, bottomfish jig	679	None documented
Western Pacific squid jig	6	None documented
HARPOON FISHERIES:		
CA swordfish harpoon	30	None documented
POUND NET/WEIR FISHERIES:		
AK herring spawn on kelp pound net	452	None documented
AK Southeast herring roe/food/bait pound net	3	None documented
WA herring brush weir	1	None documented
BAIT PENS:		

TABLE 1.—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE PACIFIC OCEAN—Continued

Fishery Description	Estimated # of vessels/ persons	Marine mammal species and stocks incidentally killed/injured
WA/OR/CA bait pens	13	California sea lion, U.S.
DREDGE FISHERIES:		
Coastwide scallop dredge	108 (12 AK)	None documented
DIVE, HAND/MECHANICAL COLLECTION FISHERIES:		
AK abalone	1	None documented
AK clam	156	None documented
WA herring spawn on kelp	4	None documented
AK dungeness crab	3	None documented
AK herring spawn on kelp	363	None documented
AK urchin and other fish/shellfish	471	None documented
CA abalone	111	None documented
CA sea urchin	583	None documented
HI black coral diving	1	None documented
HI fish pond	N/A	None documented
HI handpick	37	None documented
HI lobster diving	19	None documented
HI squiding, spear	91	None documented
WA, CA kelp	4	None documented
WA/OR sea urchin, other clam, octopus, oyster, sea cucumber, scallop, ghost shrimp hand, dive, or mechanical collection	637	None documented
WA shellfish aquaculture	684	None documented
COMMERCIAL PASSENGER FISHING VESSEL (CHARTER BOAT) FISHERIES:		
AK, WA, OR, CA commercial passenger fishing vessel	>7,000 (1,107 AK)	Killer whale, stock unknown Steller sea lion, Eastern U.S. Steller sea lion, Western U.S.
HI charter vessel	114	None documented
LIVE FINFISH/SHELLFISH FISHERIES:		
CA finfish and shellfish live trap/hook-and-line	93	None documented

List of Abbreviations and Symbols Used in Table 1: AK - Alaska; CA - California; GOA - Gulf of Alaska; HI - Hawaii; OR - Oregon; WA - Washington; [1] - Fishery classified based on serious injuries and mortalities of this stock are greater than 1 percent, but less than 50 percent of the stock's PBR; [2] - Fishery classified by analogy.

TABLE 2—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE ATLANTIC OCEAN, GULF OF MEXICO, AND CARIBBEAN

Fishery Description	Estimated # of vessels/persons	Marine mammal species and stocks incidentally killed/injured
Category I		
GILLNET FISHERIES:		

TABLE 2—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE ATLANTIC OCEAN, GULF OF MEXICO, AND CARIBBEAN—Continued

Fishery Description	Estimated # of vessels/persons	Marine mammal species and stocks incidentally killed/injured
Mid-Atlantic gillnet	>655	Bottlenose dolphin, WNA coastal[1] Bottlenose dolphin, WNA offshore[1] Common dolphin, WNA Gray seal, WNA Harbor porpoise, GME/BF[1] Harbor seal, WNA Harp seal, WNA Humpback whale, Gulf of Maine[1] Long-finned pilot whale, WNA Minke whale, Canadian east coast[1] Short-finned pilot whale, WNA White-sided dolphin, WNA
Northeast sink gillnet	341	Bottlenose dolphin, WNA offshore Common dolphin, WNA Fin whale, WNA Gray seal, WNA Harbor porpoise, GME/BF[1] Harbor seal, WNA Harp seal, WNA Hooded seal, WNA Humpback whale, WNA[1] Minke whale, Canadian east coast[1] North Atlantic right whale, WNA[1] Risso's dolphin, WNA White-sided dolphin, WNA
LONGLINE FISHERIES:		
Atlantic Ocean, Caribbean, Gulf of Mexico large pelagics longline	94	Atlantic spotted dolphin, Northern GMX Atlantic spotted dolphin, WNA Bottlenose dolphin, GMX outer continental shelf Bottlenose dolphin, GMX, continental shelf edge and slope Bottlenose dolphin, WNA offshore Common dolphin, WNA Cuvier's beaked whale, WNA Long-finned pilot whale, WNA[1] Mesoplodon beaked whale, WNA Pantropical spotted dolphin, Northern GMX Pantropical spotted dolphin, WNA Pygmy sperm whale, WNA[1] Risso's dolphin, Northern GMX Risso's dolphin, WNA Short-finned pilot whale, Northern GMX Short-finned pilot whale, WNA[1]
TRAP/POT FISHERIES:		
Northeast/Mid-Atlantic American lobster trap/pot	13,000	Fin whale, WNA Harbor seal, WNA Humpback whale, WNA[1] Minke whale, Canadian east coast[1] North Atlantic right whale, WNA[1]
TRAWL FISHERIES:		
Mid-Atlantic mid-water trawl (including pair trawl)	620	Bottlenose dolphin, WNA offshore Common dolphin, WNA[1] Long-finned pilot whale, WNA[1] Risso's dolphin, WNA Short-finned pilot whale, WNA[1] White-sided dolphin, WNA[1]
Category II		
GILLNET FISHERIES:		
Chesapeake Bay inshore gillnet[2]	45	None documented

TABLE 2—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE ATLANTIC OCEAN, GULF OF MEXICO, AND CARIBBEAN—Continued

Fishery Description	Estimated # of vessels/persons	Marine mammal species and stocks incidentally killed/injured
Gulf of Mexico gillnet[2]	724	Bottlenose dolphin, Eastern GMX coastal Bottlenose dolphin, GMX bay, sound, and estuarine Bottlenose dolphin, Northern GMX coastal Bottlenose dolphin, Western GMX coastal
North Carolina inshore gillnet	94	Bottlenose dolphin, WNA coastal[1]
Northeast anchored float gillnet[2]	133	Harbor seal, WNA Humpback whale, WNA White-sided dolphin, WNA
Northeast drift gillnet2	unknown	None documented
Southeast Atlantic gillnet[2]	779	Bottlenose dolphin, WNA coastal
Southeastern U.S. Atlantic shark gillnet	6	Atlantic spotted dolphin, WNA Bottlenose dolphin, WNA coastal[1] North Atlantic right whale, WNA
TRAWL FISHERIES:		
Mid-Atlantic bottom trawl	>1,000	Common dolphin, WNA[1] Long-finned pilot whale, WNA[1] Short-finned pilot whale, WNA[1]
Northeast mid-water trawl (including pair trawl)	17	Harbor seal, WNA Long-finned pilot whale, WNA[1] Short-finned pilot whale, WNA[1] White-sided dolphin, WNA
Northeast bottom trawl	1,052	Common dolphin, WNA Harbor porpoise, GME/BF Harp seal, WNA[1] Long-finned pilot whale, WNA Short-finned pilot whale, WNA White-sided dolphin, WNA[1]
TRAP/POT FISHERIES:		
Atlantic blue crab trap/pot	>16,000	Bottlenose dolphin, WNA coastal[1] West Indian manatee, FL[1]
Atlantic mixed species trap/pot[2]	unknown	Fin whale, WNA Humpback whale, Gulf of Maine
PURSE SEINE FISHERIES:		
Gulf of Mexico menhaden purse seine	50	Bottlenose dolphin, Eastern GMX coastal Bottlenose dolphin, GMX bay, sound, estuarine Bottlenose dolphin, Northern GMX coastal[1] Bottlenose dolphin, Western GMX coastal
Mid-Atlantic menhaden purse seine[2]	22	Bottlenose dolphin, WNA coastal
HAUL/BEACH SEINE FISHERIES:		
Mid-Atlantic haul/beach seine	25	Bottlenose dolphin, WNA coastal[1] Harbor porpoise, GME/BF
North Carolina long haul seine	33	Bottlenose dolphin, WNA coastal[1]
STOP NET FISHERIES:		
North Carolina roe mullet stop net	13	Bottlenose dolphin, WNA coastal[1]
POUND NET FISHERIES:		
Virginia pound net	187	Bottlenose dolphin, WNA coastal[1]

TABLE 2—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE ATLANTIC OCEAN, GULF OF MEXICO, AND CARIBBEAN—Continued

Fishery Description	Estimated # of vessels/persons	Marine mammal species and stocks incidentally killed/injured
Category III		
GILLNET FISHERIES:		
Caribbean gillnet	>991	Dwarf sperm whale, WNA West Indian manatee, Antillean
Delaware River inshore gillnet	60	None documented
Long Island Sound inshore gillnet	20	None documented
Rhode Island, southern Massachusetts (to Monomoy Island), and New York Bight (Raritan and Lower New York Bays) inshore gillnet	32	None documented
Southeast Atlantic inshore gillnet	unknown	None documented
TRAWL FISHERIES:		
Atlantic shellfish bottom trawl	972	None documented
Gulf of Mexico butterfish trawl	2	Bottlenose dolphin, Northern GMX outer continental shelf Bottlenose dolphin, Northern GMX continental shelf edge and slope
Gulf of Mexico mixed species trawl	20	None documented
Southeastern U.S. Atlantic, Gulf of Mexico shrimp trawl	>18,000	Bottlenose dolphin, Eastern GMX coastal Bottlenose dolphin, Western GMX coastal Bottlenose dolphin, GMX bay, sound, estuarine West Indian Manatee, FL
MARINE AQUACULTURE FISHERIES:		
Finfish aquaculture	48	Harbor seal, WNA
Shellfish aquaculture	unknown	None documented
PURSE SEINE FISHERIES:		
Gulf of Maine Atlantic herring purse seine	30	Harbor porpoise, GME/BF Harbor seal, WNA Gray seal, WNA
Gulf of Maine menhaden purse seine	50	None documented
Florida west coast sardine purse seine	10	Bottlenose dolphin, Eastern GMX coastal
U.S. Atlantic tuna purse seine	5	Long-finned pilot whale, WNA Short-finned pilot whale, WNA
U.S. Mid-Atlantic hand seine	>250	None documented
LONGLINE/HOOK-AND-LINE FISHERIES:		
Northeast/Mid-Atlantic bottom longline/hook-and-line	46	None documented
Gulf of Maine, U.S. Mid-Atlantic tuna, shark swordfish hook-and-line/harpoon	26,223	Humpback whale, WNA
Southeastern U.S. Atlantic, Gulf of Mexico, and Caribbean snapper-grouper and other reef fish bottom longline/hook-and-line	>5,000	None documented
Southeastern U.S. Atlantic, Gulf of Mexico shark bottom longline/hook-and-line	<125	None documented
Southeastern U.S. Atlantic, Gulf of Mexico, and Caribbean pelagic hook-and-line/harpoon	1,446	None documented

TABLE 2—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE ATLANTIC OCEAN, GULF OF MEXICO, AND CARIBBEAN—Continued

Fishery Description	Estimated # of vessels/persons	Marine mammal species and stocks incidentally killed/injured
TRAP/POT FISHERIES		
Caribbean mixed species trap/pot	>501	None documented
Caribbean spiny lobster trap/pot	>197	None documented
Florida spiny lobster trap/pot	2,145	Bottlenose dolphin, Eastern GMX coastal
Gulf of Mexico blue crab trap/pot	4,113	Bottlenose dolphin, Western GMX coastal Bottlenose dolphin, Northern GMX coastal Bottlenose dolphin, Eastern GMX coastal Bottlenose dolphin, GMX Bay, Sound, & Estuarine West Indian manatee, FL
Gulf of Mexico mixed species trap/pot	unknown	None documented
Southeastern U.S. Atlantic, Gulf of Mexico golden crab trap/pot	10	None documented
Southeastern U.S. Atlantic, Gulf of Mexico stone crab trap/pot	4,453	None documented
U.S. Mid-Atlantic eel trap/pot	>700	None documented
STOP SEINE/WEIR/POUND NET FISHERIES:		
Gulf of Maine herring and Atlantic mackerel stop seine/weir	50	Gray seal, Northwest North Atlantic Harbor porpoise, GME/BF Harbor seal, WNA Minke whale, Canadian east coast White-sided dolphin, WNA
U.S. Mid-Atlantic crab stop seine/weir	2,600	None documented
U.S. Mid-Atlantic mixed species stop seine/weir/pound net (except the North Carolina roe mullet stop net)	751	None documented
DREDGE FISHERIES:		
Gulf of Maine mussel	>50	None documented
Gulf of Maine, U.S. Mid-Atlantic sea scallop dredge	233	None documented
U.S. Mid-Atlantic/Gulf of Mexico oyster	7,000	None documented
U.S. Mid-Atlantic offshore surf clam and quahog dredge	100	None documented
HAUL/BEACH SEINE FISHERIES:		
Caribbean haul/beach seine	15	West Indian manatee, Antillean
Gulf of Mexico haul/beach seine	unknown	None documented
Southeastern U.S. Atlantic, haul/beach seine	25	None documented
DIVE, HAND/MECHANICAL COLLECTION FISHERIES:		
Atlantic Ocean, Gulf of Mexico, Caribbean shellfish dive, hand/mechanical collection	20,000	None documented
Gulf of Maine urchin dive, hand/mechanical collection	>50	None documented
Gulf of Mexico, Southeast Atlantic, Mid-Atlantic, and Caribbean cast net	unknown	None documented
COMMERCIAL PASSENGER FISHING VESSEL (CHARTER BOAT) FISHERIES:		

TABLE 2—LIST OF FISHERIES COMMERCIAL FISHERIES IN THE ATLANTIC OCEAN, GULF OF MEXICO, AND CARIBBEAN—Continued

Fishery Description	Estimated # of vessels/persons	Marine mammal species and stocks incidentally killed/injured
Atlantic Ocean, Gulf of Mexico, Caribbean commercial passenger fishing vessel	4,000	Bottlenose dolphin, Eastern GMX coastal Bottlenose dolphin, Northern GMX coastal Bottlenose dolphin, Western GMX coastal Bottlenose dolphin, WNA coastal

List of Abbreviations and Symbols Used in Table 2: FL - Florida; GA - Georgia; GME/BF - Gulf of Maine/Bay of Fundy; GMX - Gulf of Mexico; NC - North Carolina; SC - South Carolina; TX - Texas; WNA - Western North Atlantic; [1] - Fishery classified based on serious injuries and mortalities of this stock are greater than 1 percent, but less than 50 percent of the stock's PBR; [2] - Fishery classified by analogy.

Classification

The Chief Counsel for Regulation of the Department of Commerce certified to the Chief Counsel for Advocacy of the Small Business Administration that this rule would not have a significant economic impact on a substantial number of small entities. For convenience, the factual basis leading to the certification is repeated below.

Under existing regulations, all fishers participating in Category I or II fisheries must register under the MMPA, obtain an Authorization Certificate, and pay a fee of $25 (with the exception of those in regions with a registration integrated with existing state and Federal permitting processes). Additionally, fishers may be subject to a take reduction plan and requested to carry an observer. The Authorization Certificate authorizes the taking of marine mammals incidental to commercial fishing operations. NMFS has estimated that approximately 41,730 fishing vessels, most of which are small entities, operate in Category I or II fisheries, and therefore, are required to register. However, registration has been integrated with existing state or Federal registration programs for the majority of these fisheries so that the majority of fishers do not need to register separately under the MMPA. Currently, approximately 600 fishers register directly with NMFS under the MMPA authorization program.

Though this rule would affect approximately 500 small entities, the $25 registration fee, with respect to anticipated revenues, is not considered a significant economic impact. If a vessel is requested to carry an observer, fishers will not incur any economic costs associated with carrying that observer. As a result of this certification, an initial regulatory flexibility analysis was not prepared. In the event that reclassification of a fishery to Category I or II results in a take reduction plan, economic analyses of the effects of that plan will be summarized in subsequent rulemaking actions.

This rule contains collection-of-information requirements subject to the Paperwork Reduction Act. The collection of information for the registration of fishers under the MMPA has been approved by the Office of Management and Budget (OMB) under OMB control number 0648–0293 (0.15 hours per report for new registrants and 0.09 hours per report for renewals). The requirement for reporting marine mammal injuries or mortalities has been approved by OMB under OMB control number 0648–0292 (0.15 hours per report). These estimates include the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding these reporting burden estimates or any other aspect of the collections of information, including suggestions for reducing burden, to NMFS and OMB (see **ADDRESSES** and **SUPPLEMENTARY INFORMATION**).

Notwithstanding any other provision of law, no person is required to respond to nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB control number.

This rule has been determined to be not significant for the purposes of Executive Order 12866.

An environmental assessment (EA) was prepared under the National Environmental Policy Act (NEPA) for regulations to implement section 118 of the MMPA (1995 EA). NMFS revised that EA relative to classifying U.S. commercial fisheries on the LOF in December 2005. Both the 1995 EA and the 2005 EA concluded that implementation of MMPA section 118 regulations would not have a significant impact on the human environment. This rule would not make any significant change in the management of reclassified fisheries, and therefore, this rule is not expected to change the analysis or conclusion of the 2005 EA. If NMFS takes a management action, for example, through the development of a Take Reduction Plan (TRP), NMFS will first prepare an environmental document, as required under NEPA, specific to that action.

This rule would not affect species listed as threatened or endangered under the Endangered Species Act (ESA) or their associated critical habitat. The impacts of numerous fisheries have been analyzed in various biological opinions, and this rule will not affect the conclusions of those opinions. The classification of fisheries on the LOF is not considered to be a management action that would adversely affect threatened or endangered species. If NMFS takes a management action, for example, through the development of a TRP, NMFS would conduct consultation under ESA section 7 for that action.

This rule would have no adverse impacts on marine mammals and may have a positive impact on marine mammals by improving knowledge of marine mammals and the fisheries interacting with marine mammals through information collected from observer programs, stranding and sighting data, or take reduction teams.

This rule would not affect the land or water uses or natural resources of the coastal zone, as specified under section 307 of the Coastal Zone Management Act.

Dated: August 15, 2006.

Samuel D. Rauch, III,

Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service.

[FR Doc. 06–7071 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–22–S

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

50 CFR Part 660

[Docket No. 051014263–6028–03; I.D. 120805A]

RIN 0648–AU00

Fisheries Off West Coast States; Pacific Coast Groundfish Fishery; Specifications and Management Measures

AGENCY: National Marine Fisheries Service (NMFS), National Oceanic and Atmospheric Administration (NOAA), Commerce.

ACTION: Temporary rule; extension.

SUMMARY: This action extends a temporary rule, now in effect, that establishes the 2006 optimum yield (OY) for darkblotched rockfish caught in the U.S. exclusive economic zone (EEZ) off the coasts of Washington, Oregon, and California. This action, which is authorized by the Pacific Coast Groundfish Fishery Management Plan (FMP) and the Magnuson-Stevens Fishery Conservation and Management Act (Magnuson-Stevens Act), is intended to protect darkblotched rockfish, an overfished groundfish species.

DATES: The expiration date of the temporary rule (interim darkblotched rockfish OY) published on February 17, 2006 (71 FR 8489), effective March 1, 2006, through August 27, 2006, is extended through December 31, 2006.

ADDRESSES: Copies of the Final Environmental Impact Statement for the harvest specifications and management measures for the 2005–2006 groundfish fisheries are available from Donald McIsaac, Executive Director, Pacific Fishery Management Council (Council), 7700 NE Ambassador Place, Portland, OR 97220, phone: 503–820–2280. Copies of the Record of Decision and final regulatory flexibility analysis for the 2005–2006 groundfish harvest specifications, and the Small Entity Compliance Guide for the 2006 groundfish harvest specifications are available from D. Robert Lohn, Administrator, Northwest Region (Regional Administrator), NMFS, 7600 Sand Point Way, NE, Seattle, WA 98115–0070.

FOR FURTHER INFORMATION CONTACT: Jamie Goen (Northwest Region, NMFS), phone: 206–526–6140; fax: 206–526–6736; and e-mail: *jamie.goen@noaa.gov*.

SUPPLEMENTARY INFORMATION:

Electronic Access

This **Federal Register** document is available on the Government Printing Office's website at: *www.gpoaccess.gov/fr/index.html*.

Background information and documents are available at the NMFS Northwest Region website at: *www.nwr.noaa.gov* and at the Pacific Council's website at: *www.pcouncil.org*.

Background

The Pacific Coast Groundfish FMP and its implementing regulations at title 50 in the Code of Federal Regulations, part 660, subpart G, regulate fishing for over 80 species of groundfish off the coasts of Washington, Oregon, and California. Groundfish specifications and management measures are developed by the Pacific Council, and are implemented by NMFS. The specifications and management measures for 2005–2006 were codified in the CFR (50 CFR part 660, subpart G). They were published in the **Federal Register** as a proposed rule on September 21, 2004 (69 FR 56550), and as a final rule on December 23, 2004 (69 FR 77012). The final rule was subsequently amended on March 18, 2005 (70 FR 13118); March 30, 2005 (70 FR 16145); April 19, 2005 (70 FR 20304); May 3, 2005 (70 FR 22808); May 4, 2005 (70 FR 23040); May 5, 2005 (70 FR 23804); May 16, 2005 (70 FR 25789); May 19, 2005 (70 FR 28852); July 5, 2005 (70 FR 38596); August 22, 2005 (70 FR 48897); August 31, 2005 (70 FR 51682); October 5, 2005 (70 FR 58066); October 20, 2005 (70 FR 61063); October 24, 2005 (70 FR 61393); November 1, 2005 (70 FR 65861); and December 5, 2005 (70 FR 72385). Longer-term changes to the 2006 specifications and management measures were published in the **Federal Register** as a proposed rule on December 19, 2005 (70 FR 75115) and as a final rule on February 17, 2006 (71 FR 8489). The final rule was subsequently amended on March 27, 2006 (71 FR 10545), April 11, 2006 (71 FR 18227), April 26, 2006 (71 FR 24601), May 11, 2006 (71 FR 27408), May 22, 2006 (71 FR 29257), June 1, 2006 (71 FR 31104), and July 3, 2006 (71 FR 37839).

Acceptable biological catches (ABCs) and OYs are established for each year. Management measures are established at the start of the biennial period, and are adjusted throughout the biennial management period, to keep harvest within the OYs. At the Pacific Council's October 31 - November 4, 2005, meeting in San Diego, CA, the Pacific Council, in consultation with Pacific Coast Treaty Indian Tribes and the States of Washington, Oregon, and California; recommended a reduction of the 2006 darkblotched rockfish OY to 200 mt for March through December 2006. The management measures for March through December 2006 were proposed on December 19, 2005 (70 FR 75115), and implemented via the final rule published on February 17, 2006 (71 FR 8489).

The 2006 darkblotched rockfish OY of 200 mt is an interim measure pursuant to section 305(c) of the Magnuson-Stevens Act, in effect while the rebuilding plan (now referred to as Amendment 16–4) is being developed and implemented. Under the provisions of section 305(c)(3) of the Magnuson-Stevens Act, interim measures shall remain in effect for not more than 180 days after the date of publication, and may be extended by publication in the **Federal Register** for an additional period of not more than 180 days, provided the public has had an opportunity to comment on the interim measures, and the Council is actively preparing a plan amendment to address rebuilding on a permanent basis. The public has been provided an opportunity to comment on the interim measures in the proposed rule (70 FR 75115, December 19, 2005), and the Council is actively working on an FMP amendment, Amendment 16–4, with the 2007–2008 specifications and management measures process. The proposed rule for Amendment 16–4 and the 2007–2008 specifications and management measures is expected to publish in September 2006 with a final rule expected to publish in November 2006, and become effective January 1, 2007. In addition, the Court's Order in *Natural Resources Defense Council (NRDC)* v. *NMFS*, 421 F.3d 872 (9th Cir. 2005) dated December 8, 2005, requires NMFS to implement a darkblotch rockfish quota for the entire 2006 fishing year pursuant to section 305(c). Because the Council is continuing work on Amendment 16–4 and this interim measure expires on August 27, 2006, NMFS is extending the darkblotched rockfish OY beyond the first 180–day period.

During the comment period on the proposed rule to implement changes to the 2006 Pacific Coast groundfish fishery specifications and management measures (70 FR 75115, December 19, 2005), NMFS received two comments on the interim measure for the darkblotched rockfish OY. Comment 2 and Comment 6, as published in the "Comments and Responses" section of the final rule (71 FR 8489, February 17, 2006), show the comments received and NMFS response to those comments.

These comments and responses are republished below.

Comment 2: One commenter supports the decrease in the darkblotched rockfish OY for 2006 from 294 mt to 200 mt. The commenter notes that the latest stock assessment shows that darkblotched rockfish is rebuilding more quickly than originally projected and, therefore, the OY could be set higher without demonstrably slowing the rebuilding progress. However, the commenter supports NMFS effort to rebuild quicker than required by law, as was done with lingcod, while minimizing impacts on local coastal communities, including fishermen and processors.

Another commenter believes that the rule proposes to set an OY that is higher than the lowest level possible and is thereby violating the Magnuson-Stevens Act, which requires overfished species to be rebuilt as quickly as possible. In the 2005–2006 Pacific Coast Groundfish Specifications and Management Measures Environmental Impact Statement (hereafter, 2005–2006 Specs EIS), NMFS projected total fishing mortality of less than 100 mt for darkblotched rockfish. The commenter believes that NMFS failed to consider the lowest possible fishing level for darkblotched rockfish because an OY at or below 100 mt was not adopted.

A third commenter suggested that all species should have their quotas cut by 50 percent this year and 10 percent each succeeding year.

Response: As stated in the proposed rule, this action to adjust the 2006 darkblotched rockfish OY from 294 mt to 200 mt is an interim measure to decrease the OY within the current rebuilding plan until a revised rebuilding plan is developed. Revising the rebuilding plan requires extensive analysis to consider the interaction of the rebuilding plans for all overfished species, to determine the needs of the fishing communities, and to allow substantial public participation. Allowable harvest levels for all overfished groundfish species for 2007 and beyond will be based on new rebuilding plans intended to meet the court's decision in *NRDC* v. *NMFS*, 421 F.3d 872 (9th Cir. 2005). The Pacific Council intends to review, re-analyze, and revise rebuilding plans via Amendment 16–4 to the FMP, which will be developed concurrently with the 2007–2008 groundfish harvest specifications and management measures. These revised rebuilding plans in Amendment 16–4 will determine the OYs selected for overfished groundfish species, including darkblotched rockfish, in 2007 and beyond.

At the Pacific Council's October 30 – November 4, 2005, meeting, in order to determine if interim action was appropriate, NMFS and the Pacific Council analyzed the effects of a range of 2006 darkblotched rockfish OYs, from 0–696 mt, on the time to rebuild the darkblotched stock. The Pacific Council's Groundfish Management Team estimated: with a darkblotched rockfish OY of zero, the stock would be rebuilt by July 2009; with an OY of 200 mt, the stock would be rebuilt by March 2010; and with the previously established OY of 294 mt, the stock would be rebuilt by July 2010. Since that meeting, NMFS analyzed the estimated gains in rebuilding time that could occur were the 2006 OY set at 100 mt, and found that a 100 mt OY could result in the stock being rebuilt by 3–6 months prior to the March 2010 date associated with a 200 mt OY. As discussed below, this small gain in rebuilding time would result in large economic losses to the fishing industry and coastal communities. Therefore, NMFS concurs with the Pacific Council's recommendation of a 200 mt OY for darkblotched rockfish in 2006 as an appropriately conservative interim OY intended to accommodate some targeting of the more healthy groundfish stocks that co-occur with darkblotched rockfish.

Populations of the overfished rockfish species are found along the entire length of the U.S. West Coast. Because of their varied biological characteristics, overfished rockfish are caught in a broad range of fisheries, tribal and non-tribal, commercial and recreational. NMFS, its partner state and tribal agencies, and the Pacific Council have focused their efforts to protect and rebuild overfished groundfish species on minimizing or eliminating directed harvest and minimizing incidental catch of overfished stocks. Overfished species are caught in all of the groundfish fisheries coastwide not because they are targeted, but because they co-occur with the more abundant stocks the fisheries do target. For example, yelloweye rockfish is often found at similar depths to and caught in common with Pacific halibut, an abundant flatfish targeted with hook-and-line gear in the recreational and commercial fisheries. Fisheries for target species must then be constrained in some way in order to rebuild the non-target overfished species, usually with: reductions in allowable landings levels of target species, reductions in allowable fishing area so as to minimize fishing in areas where overfished species commonly occur, reductions in allowable duration of fishing seasons, or alterations in fishing gear that either prevent overfished species from being caught by the gear or expel overfished species from the gear. All of these tools are used either individually or in combination for West Coast fisheries that either target groundfish directly, or take groundfish incidentally to their non-groundfish fishing operations. Therefore, when NMFS analyzes revenues earned or sacrificed in order to rebuild overfished species at slower or faster rates, the agency is looking at revenues from the more healthy target stocks, not from the overfished species themselves.

In setting the 2006 darkblotched rockfish OY, NMFS considered both the biological constraints of the stock in terms of its ability to rebuild by particular dates, and the economic impacts of rebuilding at different rates on coastal fishing communities. NMFS particularly considered the effect of reducing the 2006 darkblotched rockfish OY to 100 mt.

The majority of darkblotched rockfish landed are caught with limited entry bottom trawl gear (99.6 percent in 2004), incidentally to slope fisheries for groundfish. Because the groundfish fishery has been managed under rebuilding measures since 2000, NMFS reviewed the effect of a 100–mt darkblotched rockfish OY in 2006 both from the perspective of incremental changes to the fishery from current harvests and associated revenue, and from the perspective of cumulative changes that have been ongoing within the fishery from the past several years. In terms of inflation-adjusted dollars, since 2001, real ex-vessel revenues from bottom trawl vessels have been less than half of what they were in 1996. Many vessels, processors, shore-based infrastructure, and support businesses were built to service a fishery that generated revenues and landings that are larger than what the current fishery generates. This means that current annual revenues are less able to support the fixed costs of maintaining the structures built to support a more productive industry. Because revenues have declined substantially from this period of higher productivity, businesses are less able to withstand further declines in revenue. In other words, the effect upon fishers, processors, support businesses, and communities of reducing ex-vessel revenues is likely to be greater when the fishery annually generates $20 million compared to a reduction when the fishery annually generates $40 million.

NMFS analyzed the effects of a 100–mt 2006 darkblotched rockfish OY from

the base of management measures implemented in this rule, assuming available darkblotched rockfish incidental catch to be cut to that 100–mt level. Using ex-vessel prices from 2005, 100 mt of darkblotched rockfish translates into roughly $94,000 to $100,000 in ex-vessel revenue from landings of darkblotched rockfish itself. However, reducing the catch of species that co-occur with darkblotched rockfish to stay within a 100 mt OY in 2006 would mean a reduction in ex-vessel revenues from co-occurring slope species by several million dollars. Ex-vessel revenues should only be viewed as an indicator of economic impacts to the vessels, their crew, and owners. Taking into account the additional impact to processors, support businesses, and West Coast communities means an additional effect that is roughly 20–40 percent higher than the ex-vessel revenue impact.

For example, preliminary catch estimates from 2005 show that 100 mt of darkblotched rockfish had been caught incidentally to the slope trawl fishery by late August. Had the portion of the fishery that catches darkblotched rockfish closed upon attainment of 100 mt of darkblotched rockfish, the cost to the bottom trawl fleet would have been approximately $3.5 million in foregone ex-vessel revenue, or approximately 18 percent of total bottom trawl ex-vessel revenue in the area north of 40°10′ N. lat. in 2005. In comparison, approximately 100 mt of darkblotched rockfish had been caught by mid-June in 2004, and had the portion of the bottom trawl fishery that catches darkblotched rockfish been closed upon attainment of 100 mt of darkblotched rockfish, approximately $6.5 million in ex-vessel revenues would have been lost, or approximately 38 percent of total bottom trawl ex-vessel revenues in the area north of 40°10′ N. lat. for that year.

Limited entry bottom trawl regulations implemented in this final rule in place for 2006 are designed to distribute catch of target species more evenly throughout the year. In 2005, catch was distributed more heavily toward the early part of the year. Based on analysis applying regulations implemented by this rule to the fishery and incidental catch patterns, NMFS expects that the fishery will take 100 mt of darkblotched rockfish by August 2006. If the slope trawl fishery were closed in August 2006, the bottom trawl fleet would lose 25–36 percent of total bottom trawl ex-vessel revenues from the more abundant species that could be taken during the remaining months in the area north of 40°10′ N. lat. Based on total exvessel revenues in that area in the past several years, this is likely to mean a loss of $4.2 to $6.5 million just in ex-vessel revenues in that area.

If NMFS were to structure the 2006 season toward both maintaining a year round bottom trawl fishery and attaining the highest level of ex-vessel revenues without exceeding 100 mt of darkblotched rockfish, we estimate the cost to the fleet would be a loss of $3.2 to $6.0 million in ex-vessel revenues. This somewhat lower loss is in comparison to the $4.2 to $6.5 million loss that we expect would occur if the bottom trawl fishery were to close on attainment of 100 mt of darkblotched rockfish. Achieving a year-round bottom trawl fishery with a 100 mt darkblotched OY for 2006 would require inseason changes to regulations in May 2006. For purposes of analysis, NMFS assumed that the regulatory changes under these conditions would be designed to keep the November-December deepwater petrale sole fishery, to continue to allow harvest of thornyheads in waters deeper than where darkblotched rockfish occur, and to allow harvest of sablefish and Dover sole scheduled by management measures in this final rule during November-December in waters deeper than where darkblotched rockfish occur. These declines in landings of the more abundant stocks that co-occur with darkblotched rockfish and in associated ex-vessel revenue would most severely affect the vessels, processing plants, and ports with reliance upon and investment in the trawl slope groundfish fisheries north of 40°10′ N. lat. NMFS expects that the following ports would be most vulnerable to vessel bankruptcy and forfeitures and processing plant closures, if the darkblotched OY was set to 100 mt in 2006: Blaine, Bellingham, Neah Bay, and Westport, Washington; Astoria, Newport, Coos Bay, and Brookings, Oregon; and Eureka, and Crescent City, California. Within these ports, the bottom trawl fishery would be most affected. In 2005 the bottom trawl fishery in these ports generated approximately $18 million in ex-vessel revenue compared with a combined $32 million for bottom and midwater trawl and $46 million for all groundfish in these ports.

As stated above, NMFS and the Pacific Council intend to review and revise all of the rebuilding plans in advance of the 2007–2008 fishing period. For 2006, NMFS continues to support a darkblotched rockfish OY of 200 mt. The difference in rebuilding times between setting an OY for 2006 at 200 mt versus 100 mt, and maintaining darkblotched mortality at the corresponding spawner per recruit harvest rate each year until the stock is rebuilt, is less than half a year, while the estimated economic impacts from this reduction on the fishing industry and coastal communities is on the order of several millions of dollars lost each year until the stock is rebuilt. Therefore, NMFS does not support reducing the darkblotched OY below 200 mt in 2006.

NMFS also disagrees with the second commenter's statement that the agency is violating the Magnuson-Stevens Act. This interim reduction in the OY will prevent potential mortality that could occur if the current OY of 294 mt remains in place. This interim measure is consistent with section 305(c) of the Magnuson-Stevens Act in establishing interim measures until the revised long-term rebuilding plan is developed through the Council process and implemented by NMFS. This interim measure is not intended to be the long-term rebuilding OY; however, as explained above, this OY level provides for continued rebuilding through 2006.

Finally, the third commenter suggested that harvest levels for all species be cut by one-half in 2006 and by 10 percent for each subsequent year. The darkblotched rockfish OY for 2006 has been cut via this action by approximately one-third from the 2006 OY NMFS had implemented on January 1, 2005 (69 FR 77012, December 23, 2004). The proposed rule for this action did not consider revisions to 2006 harvest levels for species other than darkblotched rockfish. The Pacific Council and its collaborating agencies are developing harvest level and management measure recommendations for 2007–2008 via a public process during spring 2006. NMFS expects to propose a rule for public review and comment on the 2007–2008 harvest specifications and management measures and the new rebuilding plans for overfished species in early fall 2006.

Comment 6: NMFS did not consider an adequate range of alternatives to the 2006 darkblotched rockfish OY, violating NEPA.

Response: As stated in the proposed rule for this action (70 FR 75115, December 19, 2005), NMFS considered a variety of potential 2006 OYs, ranging from 0–696 mt. In addition, a 200–mt OY for darkblotched rockfish is within the range of alternatives analyzed in the 2005–2006 Specs EIS, the EIS for Amendment 16–2, within the parameters of the darkblotched rockfish stock assessment and rebuilding analysis adopted by the Council in 2005, and within the parameters of the rebuilding plan adopted under Amendment 16–2, which implemented

rebuilding plans for darkblotched rockfish and other overfished species. NMFS took into account the most recent darkblotched rockfish stock assessment and rebuilding analysis, the rebuilding plan, and the darkblotched OYs analyzed in the 2005–2006 Specs EIS. Therefore, NMFS did consider an adequate range of alternatives for darkblotched rockfish and did not violate NEPA. To reiterate what NMFS had stated in the proposed rule (70 FR 75115, December 19, 2005), the intent of the adjusted 2006 darkblotched OY (200 mt) is an interim measure while NMFS develops a revised rebuilding plan for darkblotched rockfish. The revised rebuilding plan and OYs for 2007–2008, which will be based on a new stock assessment for darkblotched rockfish completed in 2005, will be analyzed in an EIS being drafted in 2006.

Classification

The Assistant Administrator for Fisheries, NOAA (AA,) has determined that this extension is needed to maintain the lower darkblotched rockfish OY of 200 mt for the remainder of 2006, as an interim rebuilding measure for darkblotched rockfish, an overfished species. The interim 2006 darkblotched rockfish OY is in response to a district court order addressing the court of appeals ruling in *NRDC* v. *NMFS*, 421 F.3d 872 (9th Cir. 2005). NMFS is currently developing a revised rebuilding plan for darkblotched rockfish through Amendment 16–4 and the 2007–2008 groundfish specifications and management measures process. The proposed rule for Amendment 16–4 and the 2007–2008 specifications and management measures is expected to publish in September 2006 with a final rule expected to publish in November 2006, with an effective date of January 1, 2007. Accordingly, the AA is extending the expiration date of this temporary rule through December 31, 2006, after which the revised darkblotched rockfish rebuilding plan and corresponding OY will become effective for 2007 and beyond.

This action continues interim measures implemented March 1, 2006 (71 FR 8489, February 17, 2006), for 180 days beyond the current expiration date of August 27, 2006, or until December 31, 2006, whichever is sooner, because the conditions prompting the initial interim measures still remain. The public was provided with the opportunity to submit public comment on these measures in the rule published on February 17, 2006, and those comments and responses are repeated in the preamble to this action. Therefore, the AA finds that it would be impracticable and contrary to the public interest to delay the extension of these measures by providing additional opportunities for public comment, and finds good cause to waive additional public comments under 5 U.S.C. 553(b)(B).

For these same reasons, the AA finds good cause to waive the 30–day delayed effectiveness provision of the Administrative Procedures Act pursuant to 5 U.S.C. 553 (d)(3).

In accordance with Executive Order 13175, this temporary rule was developed after meaningful consultation and collaboration with the tribal representative on the Pacific Council and tribal officials from the tribes affected by this action. Under the Magnuson-Stevens Act at 16 U.S.C. 1852(b)(5), one of the voting members of the Pacific Council must be a representative of an Indian tribe with federally recognized fishing rights from the area of the Council's jurisdiction. The tribal representative on the Council made a motion to adopt the management measures in this final rule that would affect tribal fishery participants, which was passed by the Council.

This temporary rule has been determined to be not significant for purposes of Executive Order 12866.

List of Subjects in 50 CFR Part 660

Fisheries, Fishing, Indian fisheries.

Dated: August 16, 2006.

Samuel D. Rauch, III

Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service.

■ For the reasons set out in the preamble, 50 CFR part 660 is amended as follows:

PART 660—FISHERIES OFF WEST COAST STATES

■ 1. The authority citation for part 660 continues to read as follows:

Authority: 16 U.S.C. 1801 *et seq.*

■ 2. In part 660, subpart G, Table 2a and Table 2b are revised to read as follows:

BILLING CODE 3510–22–S

Table 2a. 2006, and Beyond, Specifications of Acceptable Biological Catch (ABC), Optimum Yields (OYs), Harvest Guidelines (HGs), and Limited Entry and Open Access Allocations, by management Area (weights in metric tons).

Species	ACCEPTABLE BIOLOGICAL CATCH (ABC)						OY (Total catch)	Commercial Harvest guidelines (Total Catch)	Allocations total catch			
	Vancouver a/	Columbia	Eureka	Monterey	Conception	Total ABC			Limited Entry		Open Access	
									Mt	%	Mt	%
ROUNDFISH												
Lingcod b/ north of 42° N. lat.	1,694		1,021			2,716	1,801	214.7	--	81.0	--	19.0
Lingcod south of 42° N. lat.							612					
Pacific Cod d/	3,200		c/			3,200	1,600	1,200	--	--	--	--
Pacific Whiting e/	518,294					518,294	269,069	232,069	--	--	--	--
Sablefish f/ north of 36°	8,175					8,175	7,363	6,522	5,909	90.6	613	9.4
Sablefish g/ south of 36°							271	271	--	--	--	--
Cabezon h/ south of 42°N. lat.	c/		108			108	69	--	--	--	--	--
FLATFISH												
Dover sole i/	8,589					8,589	7,564	7,504	--	--	--	--
English sole j/	2,000		1,100			3,100	3,100	-	-	-	-	-
Petrale sole k/	1,262	500	800	200		2,762	2,762	-	-	-	-	-
Arrowtooth flounder	5,800					5,800	5,800	-	-	-	-	-
Other flatfish m/	6,781					6,781	4,090	-	-	-	-	-

Species	ACCEPTABLE BIOLOGICAL CATCH (ABC)						OY (Total catch)	Commercial Harvest guidelines (Total Catch)	Allocations total catch			
	Vancouver	Columbia	Eureka	Monterey	Conception	Total ABC			Limited		Open	
									Mt	%	Mt	%
ROCKFISH:												
Pacific ocean perch		934				934	447	102.6	--	--	--	--
Shortbelly o/		13,900				13,900	13,900	13,888	--	--	--	--
Widow p/		3,059				3,059	289	285.6	--	97.0	--	3.0
Canary q/		270				270	47.1	22.7	--	87.7	--	12.3
Chilipepper r/		c/		2,700		2,700	2,000	1,964	1,094	55.7	870	44.3
Bocaccio s/		c/		549		549	308	75.2	--	52.7	--	44.3
Splitnose t/		c/		615		615	461	461	--	--	--	--
Yellowtail u/		3,681		c/		3,681	3,681	3655	3,352	91.7	303	8.3
Shortspine thornyhead v/ north of 34°27'		1,077				1,077	1,018	1,011	984	99.7	27	0.27
Longspine thornyhead w/ north of 36°		2,461			--	2,461	2,461	2,449	--	--	--	--
south of 36° x/		--			390	390	195	195	--	--	--	--
Cowcod y/		c/		19	--	19	2.1	0	--	--	--	-
		c/		--	5	5	2.1	0	--	--	--	--
Darkblotched z/		294				294	200	194.8	--	--	--	--
Yelloweye aa/		55				55	27	6.4	--	--	--	--
Black bb/ north of 46°16' N. lat.		540				540	540		-	-	--	--
Black bb/ south of 46°16' N. lat.		736				736	736					

Species	ACCEPTABLE BIOLOGICAL CATCH (ABC)						OY (Total catch)	Commercial Harvest guidelines (Total Catch)	Allocations total catch			
	Vancouver	Columbia	Eureka	Monterey	Conception	Total ABC			Limite		Open Access	
									Mt	%	Mt	%
Minor Rockfish north cc/	3,680			--		3,680	2,250	2,172	1,992	91.7	180	8.3
Minor Rockfish south dd/	--			3,412		3,412	1,968	1,525	849	55.7	676	44.3
Remaining Rockfish	1,612			854		--	--	--	--	--	--	--
bank ee/	c/			350		350	--	--	--	--	--	--
blackgill ff/	c/			75	268	343	--	--	--	--	--	--
bocaccio north	318					318	--	--	--	--	--	--
chilipepper north	32					32	--	--	--	--	--	--
redstripe	576			c/		576	--	--	--	--	--	--
sharpchin	307			45		352	--	--	--	--	--	--
silvergrey	38			c/		38	--	--	--	--	--	--
splitnose	242			c/		242	--	--	--	--	--	--
yellowmouth	99			c/		99	--	--	--	--	--	--
yellowtail south				116		116	--	--	--	--	--	--
Other rockfish gg/	2,068			2,558		--	--	--	--	--	--	--
SHARKS/SKATES/RATFISH/MORIDS/GRENADIERS												
OTHER FISH ee/	2,500	7,000	1,200	3,900		14,600	7,300	--	--	--	--	--

Table 2b. 2006, and Beyond, OYs for minor rockfish by depth sub-groups (weights in metric tons).

Species	Total Catch ABC	OY (Total Catch)			Harvest Guidelines (total catch)			
		Total Catch OY	Recreational Estimate	Commercial HG for minor rockfish and depth sub-groups	Limited Entry		Open Access	
					Mt	%	Mt	%
Minor Rockfish north cc/	3,680	2,250	78	2,172	1,992	91.7	180	8.3
Nearshore		122	68	54				
Shelf		968	10	958				
Slope		1,160	0	1,160				
Minor Rockfish south dd/	3,412	1,968	443	1,390	774	55.7	616	44.3
Nearshore ii/		615	383	97				
Shelf		714	60	654				
Slope		639	0	639				

a/ ABCs apply to the U.S. portion of the Vancouver area, except as noted under individual species.

b/ Lingcod was declared overfished on March 3, 1999. A coastwide stock assessment was prepared in 2003. Lingcod was believed to be at 25 percent of its unfished biomass coastwide in 2002, 31 percent in the north and 19 percent in the south. The ABC projection for 2006 is 2,716 mt and was calculated using an F_{MSY} proxy of F45%. The total catch OY of 2,414 mt (the sum of 1,891 mt in the north and 612 mt in the south) is based on the rebuilding plan with a 70 percent probability of rebuilding the stock to B_{MSY} by the year 2009 (T_{MAX}). The harvest control rule will be F=0.17 in the north and F=0.15 in the south. Out of the OY, it is estimated that 693 mt will be taken in the recreational fishery, 7.2 mt will be taken during research activity, and 2.8 mt will be taken in non-groundfish fisheries. Under the 2006 management measures, it is anticipated that 214.7 mt will be taken in the commercial fisheries (which is being set as a commercial HG), leaving a residual amount of 1,496.3 mt to be used as necessary during the fishing year. There is a recreational harvest guideline of 271 mt for the area north of 42° N. lat. and a recreational harvest guideline of 422 mt for the area south of 42° N. lat. The tribes do not have a specific allocation at this time, but are expected to take 25.1 mt of the commercial HG.

c/ "Other species", these are neither common nor important to the commercial and recreational fisheries in the areas footnoted. Accordingly, Pacific cod is included in the non-commercial HG of "other fish" and rockfish species are included in either "other rockfish" or "remaining rockfish" for the areas footnoted.

d/ Pacific Cod - The 3,200 mt ABC is based on historical landings data and is set at the same level as it was in 2004. The 1,600 mt OY is the ABC reduced by 50 percent as a precautionary adjustment. The OY is reduced by 400 mt for the tribal harvest guideline, resulting in a commercial harvest guideline of 1,200 mt.

e/ Pacific whiting - The most recent stock assessment was prepared in early 2006, and the whiting biomass was estimated to be between 31 percent and 38 percent of its unfished biomass. The U.S. ABC of 518,294 mt is based on the 2006 assessment results with the application of an Fmsy proxy harvest rate of 40%. The U.S. ABC is 73.88 percent of the coastwide ABC. The U.S. total catch OY is being set at 269,069 mt. The total catch OY is reduced by 35,000 mt for the tribal allocation, 200 mt for the amount estimated to be taken during research fishing, and 1,800 mt for the estimated catch in non-groundfish fisheries, resulting in a commercial OY of 232,069 mt. The commercial OY is allocated between the sectors with 42 percent (97,469 mt) going to the shore-based sector, 34 percent (78,903 mt) going to the catcher/processor sector, and 24 percent (55,696 mt) going to the mothership sector. Discards of whiting are estimated from the observer data and counted towards the OY inseason.

f/ Sablefish north of 36° N. lat. - A coastwide sablefish stock assessment was prepared in 2001 and updated for 2002. Following the 2002 stock assessment update, the sablefish biomass north of 34° 27' N. lat. was believed to be between 31 percent and 38 percent of its unfished biomass. The coastwide ABC of 8,175 mt is based on environmentally driven projections with the F_{MSY} proxy of F45%. The ABC for the management area north of 36° N. lat. is 7,885 mt (96.45 percent of the coastwide ABC). The coastwide OY of 7,634 mt (the sum of 7,363 mt in the north and 271 mt in the south) is based on the density-dependent model and the application of the 40-10 harvest policy. The total catch OY for the area north of 36° N. lat is 7,363 mt and is 96.45 percent of the coastwide OY. The OY is reduced by 10 percent (736 mt) for the tribal allocation. Out of the remaining OY, 86 mt will be taken during research activity, and 19 mt will be taken in non-groundfish fisheries, resulting in a commercial HG of 6,522 mt. The open access allocation is 9.4 percent (613 mt) of the commercial HG and the limited entry allocation is 90.6 percent (5,909 mt) of the commercial HG. The limited entry allocation is further divided with 58 percent (3,427 mt) allocated to the trawl fishery and 42 percent (2,482 mt) allocated to the fixed-gear fishery. To provide for bycatch in the at-sea whiting fishery, 15 mt of the limited entry trawl allocation will be set aside.

g/ Sablefish south of 36° N. lat. - The ABC of 290 mt is 3.55 percent of the ABC from the 2002 coastwide stock assessment update. The total catch OY of 271 mt is 3.55 percent of the OY from the 2002 coastwide stock assessment update. There are no limited entry or open access allocations in the Conception area at this time.

h/ Cabezon was first assessed in 2003 and was believed to be at 34.7 percent of its unfished biomass. The ABC of 108 mt is based on a harvest rate proxy of $F_{45\%}$. The OY of 69 mt is based on a constant harvest level for 2005 and 2006.

i/ Dover sole north of 34° 27' N. lat. was assessed in 2001 and was believed to be at 29 percent of its unfished biomass. The ABC of 8,589 mt is the 2006 projection from the 2001 assessment with an F_{MSY} proxy of F40%. Because the biomass is estimated to be in the precautionary zone, the 40-10 harvest rate policy was applied, resulting in a total catch OY of 7,564 mt. The OY is reduced by 60 mt for the amount estimated to be taken as research catch, resulting in a commercial HG of 7,504 mt.

j/ English sole - Research catch is estimated to be 9.7 mt.

k/ Petrale sole was believed to be at 42 percent of its unfished biomass following a 1999 stock assessment. For 2006, the ABC for the Vancouver-Columbia

area (1,262 mt) is based on a four year average projection from 2000-2003 with a F40% F_{MSY} proxy. The ABCs for the Eureka, Monterey, and Conception areas (1,500 mt) are based on historical landings data and continue at the same level as 2005. Management measures to constrain the harvest of overfished species have reduced the availability of these stocks to the fishery during the past several years. Because the harvest assumptions (from the most recent stock assessment in the Vancouver-Columbia area) used to forecast future harvest were likely overestimates, carrying the previously used ABCs and OYs forward into 2006 was considered to be conservative and based on the best available data. Research catch is estimated to be 2.9 mt and will be taken out of the OY.

l/ Arrowtooth flounder was last assessed in 1993 and was believed to be above 40 percent of its unfished biomass. Research catch is estimated to be 13.6 mt and will be taken out of the OY.

m/ Other flatfish are those species that do not have individual ABC/OYs and include butter sole, curlfin sole, flathead sole, Pacific sand dab, rex sole, rock sole, sand sole, and starry flounder. The ABC is based on historical catch levels. The ABC of 6,781 mt is based on the highest landings for sanddabs (1995) and rex sole (1982) for the 1981-2003 period and on the average landings from the 1994-1998 period for the remaining other flatfish species. The OY of 4,909 mt is based on the ABC with a 25 percent precautionary adjustment for sanddabs and rex sole and a 50 percent precautionary adjustment for the remaining species. Research catch is estimated to be 20.5 mt and will be taken out of the OY.

n/ POP was declared overfished on March 3, 1999. A stock assessment was prepared in 2003 and POP was determined to be at 25 percent of its unfished biomass. The ABC of 934 mt was projected from the 2003 stock assessment and is based on an F_{MSY} proxy of F50%. The OY of 447 mt is based on a 70 percent probability of rebuilding the stock to B_{MSY} by the year 2042 (T_{MAX}). The harvest control rule will be F=0.0257. Out of the OY it is anticipated that 4.6 mt will be taken during research activity and 102.6 mt in the commercial fishery (which is being set as a commercial HG), leaving a residual amount of 339.8 mt to be used as necessary during the fishing year.

o/ Shortbelly rockfish remains as an unexploited stock and is difficult to assess quantitatively. A 1989 stock assessment provided 2 alternative yield calculations of 13,900 mt and 47,000 mt. NMFS surveys have shown poor recruitment in most years since 1989, indicating low recent productivity and a naturally declining population in spite of low fishing pressure. The ABC and OY therefore are set at 13,900 mt, the low end of the range in the stock assessment. The available OY is reduced by 12 mt for the amount estimated to be taken as research catch, resulting in a commercial HG of 13,888 mt.

p/ The widow rockfish stock was declared overfished on January 11, 2001 (66 FR 2338). The most recent stock assessment was prepared for widow rockfish in 2003. The spawning stock biomass is believed to be at 22.4 percent of its unfished biomass in 2002. The ABC of 3,059 mt is based an F50% F_{MSY} proxy. The 289 mt OY is based on a 60 percent probability of rebuilding the stock to B_{MSY} by the year 2042 (T_{MAX}). The harvest control rule is F=0.0093. Out of the OY, it is anticipated that 1.0 mt will be taken during the research activity, 2.3 mt will be taken in the recreational fishery, 0.1 mt will be taken in non-groundfish fisheries, and 285.6 mt will be taken in the commercial fishery (which is being set as the commercial HG). Specific open access/limited entry allocations have been suspended during the rebuilding period as necessary to meet the overall rebuilding target while allowing harvest of healthy stocks. Tribal vessels are estimated to land about 40 mt of widow rockfish in 2006, but do not have a specific allocation at this time. The widow rockfish bycatch limit for the commercial Pacific whiting fisheries is 200 mt. This amount may be adjusted via inseason action.

q/ Canary rockfish was declared overfished on January 4, 2000 (65 FR 221). A stock assessment was completed in 2002 for canary rockfish and the stock was believed to be at 8 percent of its unfished biomass coastwide in 2001. The coastwide ABC of 279 mt is based on a F_{MSY} proxy of F50%. The coastwide OY of 47.1 mt is based on the rebuilding plan, which has a 60 percent probability of rebuilding the stock to B_{MSY} by the year 2076 (T_{MAX}) and a catch sharing arrangement that has 58 percent of the OY going to the commercial fisheries and 42 percent going to the recreational fisheries. The harvest control rule will be F=0.0220. Out of the OY, it is anticipated that 2.7 mt will be taken during the research activity, 17.8 mt will be taken in the recreational fishery, 2.1 mt will be taken in non-groundfish fisheries, and 22.7 mt will be taken in the commercial fishery (which is being set as the commercial HG), leaving a residual amount of 1.8 mt. The residual amount will be further divided with 0.9 mt being available as needed for the recreational and 0.9 mt being available as needed for the commercial fisheries. A recreational HG for the area north of 42° N. lat. will be 8.5 mt. For the area south of 42° N. lat., the recreational HG will be 9.3 mt. Specific open access/limited entry allocations have been suspended during the rebuilding period as necessary to meet the overall rebuilding target while allowing harvest of healthy stocks. Tribal vessels are estimated to land about 2.6 mt of canary rockfish under the commercial HG, but do not have a specific allocation at this time. The canary rockfish bycatch limit for the commercial Pacific whiting fisheries is 4.7 mt. This amount may be adjusted via inseason action.

r/ Chilipepper rockfish - the ABC (2,700 mt) for the Monterey-Conception area is based on a three year average projection from 1999-2001 with a F50% F_{MSY} proxy. Because the unfished biomass is believed to be above 40 percent, the default OY could be set equal to the ABC. However, the OY is set at 2,000 mt to discourage effort on chilipepper, which is taken with bocaccio. Management measures to constrain the harvest of overfished species have reduced the availability of these stocks to the fishery during the past several years. Because the harvest assumptions (from the most recent stock assessment) used to forecast future harvest were likely overestimates, carrying the previously used ABCs and OYs forward into 2006 was considered to be conservative and based on the best available data. The OY is reduced by 15 mt for the amount estimated to be taken in the recreational fishery and 21 mt for the amount estimated to be taken during research activity, resulting in a commercial HG of 1,964 mt. Open access is allocated 44.3 percent (870 mt) of the commercial HG and limited entry is allocated 55.7 percent (1,094 mt) of the commercial HG.

s/ Bocaccio was declared overfished on March 3, 1999. A new stock assessment and a new rebuilding analysis were prepared for bocaccio in 2003. The bocaccio stock was believed to be at 7.4 percent of its unfished biomass in 2002. The ABC of 549 mt is based on a F50% F_{MSY} proxy. The OY of 308 mt is based on the rebuilding analysis and has a 70 percent probability of rebuilding the stock to B_{MSY} by the year 2032 (T_{MAX}). The harvest control rule is F=0.0498. Out of the OY, it is anticipated that 0.6 mt will be taken during the research activity, 43.0 mt will be taken in the recreational fishery, 1.3 mt will be taken in non-groundfish fisheries, and 75.2 mt will be taken in the commercial fishery (which is being set as the commercial HG), leaving a residual amount of 187.9 mt to be used as necessary during the fishing year.

t/ Splitnose rockfish - The ABC is 615 mt in the southern area (Monterey-Conception). The 461 mt OY for the southern area reflects a 25 percent precautionary adjustment because of the less rigorous stock assessment for this stock. In the north, splitnose is included in the minor slope rockfish OY. Because the harvest assumptions (from the most recent stock assessment) used to forecast future harvest were likely overestimates, carrying the previously used ABCs and OYs forward into 2006 was considered to be conservative and based on the best available data.

u/ Yellowtail rockfish - A yellowtail rockfish stock assessment was prepared in 2003 for the Vancouver-Columbia-Eureka areas. Yellowtail rockfish was believed

to be at 46 percent of its unfished biomass in 2002. The ABC of 3,681 mt is based on the 2003 stock assessment with the F_{MSY} proxy of F50%. The OY of 3,681 mt was set equal to the ABC, because the stock is above the precautionary threshold. The OY is reduced by 15 mt for the amount estimated to be taken in the recreational fishery, 5 mt for the amount estimated to be taken during research activity, and 6 mt for the amount taken in non-groundfish fisheries, resulting in a commercial HG of 3,655 mt. The open access allocation (303 mt) is 8.3 percent of the commercial HG. The limited entry allocation (3,352 mt) is 91.7 percent the commercial HG. Tribal vessels are estimated to land about 506 mt of yellowtail rockfish in 2006, but do not have a specific allocation at this time.

v/ Shortspine thornyhead was last assessed in 2001 and the stock was believed to be between 25 and 50 percent of its unfished biomass. The ABC (1,077 mt) for the area north of Pt. Conception (34° 27' N. lat.) is based on a F50% F_{MSY} proxy. The OY of 1,018 mt is based on the 2001 survey with the application of the 40-10 harvest policy. The OY is reduced by 7 mt for the amount estimated to be taken during research activity, resulting in a commercial HG of 1,011 mt. Open access is allocated 0.27 percent (27 mt) of the commercial HG and limited entry is allocated 99.73 percent (984 mt) of the commercial HG. There is no ABC or OY for the southern Conception area. Tribal vessels are estimated to land about 6.6 mt of shortspine thornyhead in 2006, but do not have a specific allocation at this time.

w/ Longspine thornyhead north of 36° N. lat. is believed to be above 40 percent of its unfished biomass. The ABC (2,461 mt) in the north (Vancouver-Columbia-Eureka-Monterey) is based on a F50% F_{MSY} proxy. Because the harvest assumptions (from the most recent stock assessment) used to forecast future harvest were likely overestimates, carrying the previously used ABCs and OYs forward into 2006 was considered to be conservative and based on the best available data. The total catch OY (2,461 mt) is set equal to the ABC. The OY is reduced by 12 mt for the amount estimated to be taken during research activity, resulting in a commercial HG of 2,449 mt.

x/ Longspine thornyhead south of 36° - A separate ABC (390 mt) is established for the Conception area and is based on historical catch for the portion of the Conception area north of 34°27' N. lat. (Point Conception). To address uncertainty in the stock assessment due to limited information, the ABC was reduced by 50 percent to obtain the OY, 195 mt. There is no ABC or OY for the southern Conception Area.

y/ Cowcod in the Conception area was assessed in 1999 and was believed to be less than 10 percent of its unfished biomass. Cowcod was declared as overfished on January 4, 2000 (65 FR 221). The ABC in the Conception area (5 mt) is based on the 1999 stock assessment, while the ABC for the Monterey area (19 mt) is based on average landings from 1993-1997. The OY of 4.2 mt (2.1 mt in each area) is based on the rebuilding plan adopted under Amendment 16-3, which has a 60 percent probability of rebuilding the stock to B_{MSY} by the year 2099 (T_{MAX}). The harvest control rule is F=0.009. Cowcod retention will not be permitted in 2006. The OY will be used to accommodate discards of cowcod rockfish resulting from incidental take.

z/ Darkblotched rockfish was assessed in 2000 and a stock assessment update was prepared in 2003. Darkblotched rockfish was declared overfished on January 11, 2001 (66 FR 2338). Following the 2003 stock assessment update, the darkblotched rockfish stock was believed to be at 11 percent of its unfished biomass. A new darkblotched rockfish assessment was prepared for 2005. The 2005 darkblotched rockfish stock assessment found that darkblotched has been rebuilding at a faster rate than had been shown in the 2003 stock assessment. The ABC of 294 mt was projected from the 2003 assessment update and is based on an FMSY proxy of F50%. The 2006 OY will be 200 mt. This OY is 94 mt below the 294 mt OY originally in place for 2006, which was based on the rebuilding plan adopted

under Amendment 16-2 and a harvest control rule of F=0.032 [69 FR 77012.] Based on the results of the 2005 assessment, NMFS estimates that reducing the 2006 OY to 200 mt is projected to rebuild the darkblotched rockfish stock to B_{MSY} by March 2010, as compared to the July 2010 rebuilding date that was projected with a 294 mt OY. Out of the OY, it is anticipated that 5.2 mt will be taken during research activity, leaving 194.8 mt available to the commercial fishery.

aa/ Yelloweye rockfish was assessed in 2001 and updated for 2002. On January 11, 2002, yelloweye rockfish was declared overfished (67 FR 1555). In 2002 following the stock assessment update, yelloweye rockfish was believed to be at 24.1 percent of its unfished biomass coastwide. The 55 mt coastwide ABC is based on an F_{MSY} proxy of F50%. The OY of 27 mt, based on a revised rebuilding analysis (August 2002) and the rebuilding plan proposed under Amendment 16-3, have a 80 percent probability of rebuilding to B_{MSY} by the year 2071 (T_{MAX}) and a harvest control rule of F=0.0153. Out of the OY, it is anticipated that 10.4 mt will be taken in the recreational fishery (the HG for the area north of 40°10' N. lat. is 6.7 mt and the HG for the area south of 40°10' N. lat. is 3.7 mt), 1.0 mt will be taken during research activity, 0.8 mt will be taken in non-groundfish fisheries and 6.4 mt will be taken in the commercial fishery (which is being set as a commercial HG), leaving a residual amount of 8.4 mt to be used as necessary during the fishing year. Tribal vessels are estimated to land about 2.3 mt of yelloweye rockfish of the commercial HG in 2006, but do not have a specific allocation at this time.

bb/ Black rockfish was last assessed in 2003 for the Columbia and Eureka area and in 2000 for the Vancouver area. The ABC for the area north of 46°16' N. lat. is 540 mt and the ABC for the area south of 46°16' N. lat. is 736 mt. Because of an overlap in the assessed areas between Cape Falcon and the Columbia River, projections from the 2000 stock assessment were adjusted downward by 12 percent to account for the overlap. The ABCs were derived using an F_{MSY} proxy of F50%. The unfished biomass is believed to be above 40 percent. Therefore, the OYs were set equal to the ABCs, 540 mt for the area north of 46°16' N. lat. and 736 mt for the area south of 46°16' N. lat. A harvest guideline of 30,000 lb (13.6 mt) is set for the tribes. The black rockfish OY in the area south of 46°16' N. lat. is subdivided with separate HGs being set for the area north of 42° N. lat (427 mt/58 percent) and for the area south of 42° N. lat (309 mt/42 percent). For the 427 mt attributed to the area north of 42° N. lat. 290-360 mt is estimated to be taken in the recreational fishery, resulting in a commercial HG of 67-137 mt. A range is being provided because the recreational and commercial shares are not currently available. Of the 309 mt of black rockfish attributed to the area south of 42° N. lat., a HG of 185 mt (60 percent) will be applied to the area north of 40°10' N. lat. and a HG of 124 mt (40 percent) will be applied to the area south of 40°10' N. lat. For the area between 42° N. lat. and 40°10' N. lat., 74 mt is estimated to be taken in the recreational fishery, resulting in a commercial HG of 111 mt. For the area south of 40°10' N. lat., 101 mt is estimated to be taken in the recreational fishery, resulting in a commercial HG of 23 mt. Black rockfish was included in the minor rockfish north and other rockfish south categories until 2004.

cc/ Minor rockfish north includes the "remaining rockfish" and "other rockfish" categories in the Vancouver, Columbia, and Eureka areas combined. These species include "remaining rockfish", which generally includes species that have been assessed by less rigorous methods than stock assessments, and "other rockfish", which includes species that do not have quantifiable stock assessments. The ABC of 3,680 mt is the sum of the individual "remaining rockfish" ABCs plus the "other rockfish" ABCs. The remaining rockfish ABCs continue to be reduced by 25 percent (F=0.75M) as a precautionary adjustment. To obtain the total catch OY of 2,250 mt, the remaining rockfish ABCs were further reduced by 25 percent and other rockfish ABCs were reduced by 50 percent. This was a precautionary measure to address limited stock assessment information. The OY is reduced by 78 mt for the amount estimated to be taken in the recreational fishery, resulting in a 2,172 mt commercial HG. Open access is

allocated 8.3 percent (180 mt) of the commercial HG and limited entry is allocated 91.7 percent (1,992 mt) of the commercial HG. Tribal vessels are estimated to land about 28 mt of minor rockfish in 2006, but do not have a specific allocation at this time.

dd/ Minor rockfish south includes the "remaining rockfish" and "other rockfish" categories in the Monterey and Conception areas combined. These species include "remaining rockfish" which generally includes species that have been assessed by less rigorous methods than stock assessment, and "other rockfish" which includes species that do not have quantifiable stock assessments. The ABC of 3,412 mt is the sum of the individual "remaining rockfish" ABCs plus the "other rockfish" ABCs. The remaining rockfish ABCs continue to be reduced by 25 percent (F=0.75M) as a precautionary adjustment. To obtain a total catch OY of 1,968 mt, the remaining rockfish ABCs are further reduced by 25 percent, with the exception of blackgill rockfish, the other rockfish ABCs were reduced by 50 percent. This was a precautionary measure due to limited stock assessment information. The OY is reduced by 443 mt for the amount estimated to be taken in the recreational fishery, resulting in a 1,525 mt HG for the commercial fishery. Open access is allocated 44.3 percent (676 mt) of the commercial HG and limited entry is allocated 55.7 percent (849 mt) of the commercial HG.

ee/ Bank rockfish -- The ABC is 350 mt, which is based on a 2000 stock assessment for the Monterey and Conception areas. This stock contributes 263 mt towards the minor rockfish OY in the south.

ff/ Blackgill rockfish was believed to be at 51 percent of its unfished biomass in 1997. The ABC of 343 mt is the sum of the Conception area ABC of 268 mt, based on the 1998 stock assessment with an F_{MSY} proxy of F50%, and the Monterey area ABC of 75 mt. This stock contributes 306 mt towards minor rockfish south (268 mt for the Conception area ABC and 38 mt for the Monterey area). The OY for the Monterey area is the ABC reduced by 50 percent as a precautionary measure because of the lack of information.

gg/ "Other rockfish" includes rockfish species listed in 50 CFR 660.302 and California scorpionfish. The ABC is based on the 1996 review of commercial Sebastes landings and includes an estimate of recreational landings. These species have never been assessed quantitatively. The amount expected to be taken during research activity is reduced by 22.1 mt.

hh/ "Other fish" includes sharks, skates, rays, ratfish, morids, grenadiers, kelp greenling, and other groundfish species noted above in footnote c/. The amount expected to be taken during research activity is 55.7 mt.

ii/ Minor nearshore rockfish south - The total catch OY is 615 mt. Out of the OY it is anticipated that the recreational fishery will take 383 mt, and 97 mt will be taken by the commercial fishery (which is being set as a commercial HG), leaving a residual amount of 135 mt to be used as necessary during the fishing year.

[FR Doc. 06–7072 Filed 8–21–06; 8:45 am]
BILLING CODE 3510–22–C

Proposed Rules

Federal Register
Vol. 71, No. 162
Tuesday, August 22, 2006

This section of the FEDERAL REGISTER contains notices to the public of the proposed issuance of rules and regulations. The purpose of these notices is to give interested persons an opportunity to participate in the rule making prior to the adoption of the final rules.

DEPARTMENT OF TRANSPORTATION

Federal Aviation Administration

14 CFR Part 39

[Docket No. FAA–2006–25658; Directorate Identifier 2006–NM–054–AD]

RIN 2120–AA64

Airworthiness Directives; Airbus Model A318, A319, A320, and A321 Airplanes

AGENCY: Federal Aviation Administration (FAA), Department of Transportation (DOT).

ACTION: Notice of proposed rulemaking (NPRM).

SUMMARY: The FAA proposes to supersede an existing airworthiness directive (AD) that applies to certain Airbus Model A318, A319, A320, and A321 airplanes. The existing AD currently requires repetitive detailed inspections of the inboard flap trunnions for any wear marks and of the sliding panels for any cracking at the long edges; and corrective actions if necessary. This proposed AD would add airplanes to the applicability in the existing AD and change the inspection type. This proposed AD results from a determination that certain airplanes must be included in the applicability of the AD, and that the inspection type must be revised. We are proposing this AD to detect and correct wear of the inboard flap trunnions, which could lead to loss of flap surface control and consequently result in the flap detaching from the airplane. A detached flap could result in damage to the tail of the airplane.

DATES: We must receive comments on this proposed AD by September 21, 2006.

ADDRESSES: Use one of the following addresses to submit comments on this proposed AD.

- DOT Docket Web site: Go to *http://dms.dot.gov* and follow the instructions for sending your comments electronically.
- Government-wide rulemaking Web site: Go to *http://www.regulations.gov* and follow the instructions for sending your comments electronically.
- Mail: Docket Management Facility; U.S. Department of Transportation, 400 Seventh Street, SW., Nassif Building, Room PL–401, Washington, DC 20590.
- Fax: (202) 493–2251.
- Hand Delivery: Room PL–401 on the plaza level of the Nassif Building, 400 Seventh Street, SW., Washington, DC, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays.

Contact Airbus, 1 Rond Point Maurice Bellonte, 31707 Blagnac Cedex, France, for service information identified in this proposed AD.

FOR FURTHER INFORMATION CONTACT: Dan Rodina, Aerospace Engineer, International Branch, ANM–116, Transport Airplane Directorate, FAA, 1601 Lind Avenue, SW., Renton, Washington 98057–3356; telephone (425) 227–2125; fax (425) 227–1149.

SUPPLEMENTARY INFORMATION:

Comments Invited

We invite you to submit any relevant written data, views, or arguments regarding this proposed AD. Send your comments to an address listed in the **ADDRESSES** section. Include the docket number "Docket No. FAA–2006–25658; Directorate Identifier 2006–NM–054–AD" at the beginning of your comments. We specifically invite comments on the overall regulatory, economic, environmental, and energy aspects of the proposed AD. We will consider all comments received by the closing date and may amend the proposed AD in light of those comments.

We will post all comments we receive, without change, to *http://dms.dot.gov,* including any personal information you provide. We will also post a report summarizing each substantive verbal contact with FAA personnel concerning this proposed AD. Using the search function of that Web site, anyone can find and read the comments in any of our dockets, including the name of the individual who sent the comment (or signed the comment on behalf of an association, business, labor union, *etc.*). You may review the DOT's complete Privacy Act Statement in the **Federal Register** published on April 11, 2000 (65 FR 19477–78), or you may visit *http://dms.dot.gov.*

Examining the Docket

You may examine the AD docket on the Internet at *http://dms.dot.gov,* or in person at the Docket Management Facility office between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. The Docket Management Facility office (telephone (800) 647–5227) is located on the plaza level of the Nassif Building at the DOT street address stated in the **ADDRESSES** section. Comments will be available in the AD docket shortly after the Docket Management System receives them.

Discussion

On February 6, 2006, we issued AD 2006–04–06, amendment 39–14487 (71 FR 8439, February 17, 2006), for certain Airbus Model A318–100 series airplanes, Model A319–100 series airplanes, Model A320–111 airplanes, Model A320–200 series airplanes, and Model A321–100 series airplanes. That AD requires repetitive detailed inspections of the inboard flap trunnions for any wear marks and of the sliding panels for any cracking at the long edges; and corrective actions if necessary. That AD resulted from reports of wear damage to the inboard flap trunnions after incorporation of a terminating modification required by an earlier AD, which was superseded by AD 2006–04–06. We issued that AD to detect and correct wear of the inboard flap trunnions, which could lead to loss of flap surface control and consequently result in the flap detaching from the airplane. A detached flap could result in damage to the tail of the airplane.

Actions Since Existing AD Was Issued

Since we issued AD 2006–04–06, we determined that we inadvertently excluded Airbus Model A321–200 airplanes from the applicability of the existing AD. This proposed AD emulates the French airworthiness directive by listing Airbus Model A318, A319, A320, and A321 airplanes in lieu of including the dash numbers, as done in the existing AD.

In addition, in the existing AD we identified the inspection in paragraph (g) of the AD as a "detailed" inspection. Upon further review of the service bulletin, we have determined that the appropriate inspection type is "general visual." We have revised paragraph (i) and the inspection definition in Note 4 of this proposed AD accordingly.

We have changed paragraph (i) of the existing AD, paragraph (j) of this proposed AD, by adding the words "if damaged" to clarify that replacing the sliding panel is required at the specified time if that condition is found.

FAA's Determination and Requirements of the Proposed AD

These airplane models are manufactured in France and are type certificated for operation in the United States under the provisions of section 21.29 of the Federal Aviation Regulations (14 CFR 21.29) and the applicable bilateral airworthiness agreement. As described in this bilateral airworthiness agreement, the Direction Générale de l'Aviation Civile (DGAC) has kept the FAA informed of the situation described above. We have examined the DGAC's findings, evaluated all pertinent information, and determined that AD action is necessary for airplanes of this type design that are certificated for operation in the United States.

This proposed AD would supersede AD 2006–04–06 and would continue to require repetitive inspections of the inboard flap trunnions for any wear marks and of the sliding panels for any cracking at the long edges; and corrective actions if necessary. This proposed AD would also add airplanes to the applicability of the existing AD, and would change the inspection type from detailed to general visual.

Costs of Compliance

The following table provides the estimated costs for U.S. operators to comply with this proposed AD.

ESTIMATED COSTS

Action	Work hours	Average labor rate per hour	Parts	Cost per airplane	Number of U.S.-registered airplanes	Fleet cost
Modification in AD 2006–04–06.	14	$80	The manufacturer states that it will supply required parts to operators at no cost.	$1,120	755	$845,600
Detailed inspection in AD 2006–04–06.	2	80	None	$160, per inspection cycle	755	120,800
General visual inspection (new action).	1	80	None	$80, per inspection cycle	741	59,280

Authority for This Rulemaking

Title 49 of the United States Code specifies the FAA's authority to issue rules on aviation safety. Subtitle I, Section 106, describes the authority of the FAA Administrator. Subtitle VII, Aviation Programs, describes in more detail the scope of the Agency's authority.

We are issuing this rulemaking under the authority described in Subtitle VII, Part A, Subpart III, Section 44701, "General requirements." Under that section, Congress charges the FAA with promoting safe flight of civil aircraft in air commerce by prescribing regulations for practices, methods, and procedures the Administrator finds necessary for safety in air commerce. This regulation is within the scope of that authority because it addresses an unsafe condition that is likely to exist or develop on products identified in this rulemaking action.

Regulatory Findings

We have determined that this proposed AD would not have federalism implications under Executive Order 13132. This proposed AD would not have a substantial direct effect on the States, on the relationship between the national Government and the States, or on the distribution of power and responsibilities among the various levels of government.

For the reasons discussed above, I certify that the proposed regulation:

1. Is not a "significant regulatory action" under Executive Order 12866;

2. Is not a "significant rule" under the DOT Regulatory Policies and Procedures (44 FR 11034, February 26, 1979); and

3. Will not have a significant economic impact, positive or negative, on a substantial number of small entities under the criteria of the Regulatory Flexibility Act.

We prepared a regulatory evaluation of the estimated costs to comply with this proposed AD and placed it in the AD docket. See the **ADDRESSES** section for a location to examine the regulatory evaluation.

List of Subjects in 14 CFR Part 39

Air transportation, Aircraft, Aviation safety, Safety.

The Proposed Amendment

Accordingly, under the authority delegated to me by the Administrator, the FAA proposes to amend 14 CFR part 39 as follows:

PART 39—AIRWORTHINESS DIRECTIVES

1. The authority citation for part 39 continues to read as follows:

Authority: 49 U.S.C. 106(g), 40113, 44701.

§ 39.13 [Amended]

2. The Federal Aviation Administration (FAA) amends § 39.13 by removing amendment 39–14487 (71 FR 8439, February 17, 2006) and adding the following new airworthiness directive (AD):

Airbus: Docket No. FAA–2006–25658; Directorate Identifier 2006–NM–054–AD.

Comments Due Date

(a) The FAA must receive comments on this AD action by September 21, 2006.

Affected ADs

(b) This AD supersedes AD 2006–04–06.

Applicability

(c) This AD applies to Airbus Model A318, A319, A320, and A321 airplanes; certificated in any category; on which Airbus Modification 26495 has been incorporated in production.

Unsafe Condition

(d) This AD results from a determination that certain airplanes must be included in the applicability of the AD, and that the inspection type must be revised. We are issuing this AD to detect and correct wear of the inboard flap trunnions, which could lead to loss of flap surface control and consequently result in the flap detaching from the airplane. A detached flap could result in damage to the tail of the airplane.

Compliance

(e) You are responsible for having the actions required by this AD performed within the compliance times specified, unless the actions have already been done.

Restatement of Requirements of AD 2006–04–06

Modification

(f) For Model A319–111, –112, –113, –114, –115, –131, –132, and –133 airplanes; Model

A320–111 airplanes; Model A320–211, –212, –214, –231, 232, and –233 airplanes; and Model A321–111, –112, and –131 airplanes; except those on which Airbus Modification 26495 has been accomplished in production: Within 18 months after January 8, 2001 (the effective date of AD 2000–24–02, amendment 39–12009), modify the sliding panel driving mechanism of the flap drive trunnions, in accordance with Airbus Service Bulletin A320–27–1117, Revision 02, dated January 18, 2000.

Note 1: Accomplishment of the modification required by paragraph (f) of this AD before January 8, 2001, in accordance with Airbus Service Bulletin A320–27–1117, dated July 31, 1997; or Revision 01, dated June 25, 1999, is acceptable for compliance with that paragraph.

Detailed Inspections

(g) For Model A318–111 and –112 airplanes; Model A319–111, –112, –113, –114, –115, –131, –132, and –133 airplanes; Model A320–211, –212, –214, –231, –232, and –233 airplanes; and Model A321–111, –112, and –131 airplanes; on which Airbus Modification 26495 has been incorporated in production: At the latest of the times specified in paragraphs (g)(1), (g)(2), and (g)(3) of this AD, do a detailed inspection of the inboard flap trunnions for any wear marks and of the sliding panels for any cracking at the long edges, and do any corrective actions, as applicable, by accomplishing all of the applicable actions specified in the Accomplishment Instructions of Airbus Service Bulletin A320–57–1133, dated July 28, 2005; except as provided by paragraph (m) of this AD. Any corrective actions must be done at the compliance times specified in Figures 5 and 6, as applicable, of the service bulletin; except as provided by paragraphs (j), (k), and (l) of this AD. Repeat the inspection thereafter at intervals not to exceed 4,000 flight hours until the inspection required by paragraph (i) of this AD is done.

Note 2: For the purposes of this AD, a detailed inspection is: "An intensive examination of a specific item, installation, or assembly to detect damage, failure, or irregularity. Available lighting is normally supplemented with a direct source of good lighting at an intensity deemed appropriate. Inspection aids such as mirror, magnifying lenses, *etc.*, may be necessary. Surface cleaning and elaborate procedures may be required."

(1) Before accumulating 4,000 total flight hours on the inboard flap trunnion since new.

(2) Within 4,000 flight hours after accomplishing paragraph (f) of this AD.

(3) Within 600 flight hours after March 24, 2006 (the effective date of AD 2006–04–06).

New Requirements of This AD

Modification

(h) For Model A321–211 and –231 airplanes, except those on which Airbus Modification 26495 has been accomplished in production: Within 18 months after the effective date of this AD, modify the sliding panel driving mechanism of the flap drive trunnions, in accordance with Airbus Service Bulletin A320–27–1117, Revision 02, dated January 18, 2000.

Note 3: Accomplishment of the modification required by paragraph (h) of this AD before the effective date of this AD, in accordance with Airbus Service Bulletin A320–27–1117, dated July 31, 1997; or Revision 01, dated June 25, 1999, is acceptable for compliance with that paragraph.

General Visual Inspections

(i) For all airplanes: At the time specified in paragraph (i)(1) or (i)(2) of this AD, as applicable, do a general visual inspection of the inboard flap trunnions for any wear marks and of the sliding panels for any cracking at the long edges, and do all applicable corrective actions, by accomplishing all of the applicable actions specified in the Accomplishment Instructions of Airbus Service Bulletin A320–57–1133, dated July 28, 2005; except as provided by paragraph (m) of this AD. All corrective actions must be done at the compliance times specified in Figures 5 and 6, as applicable, of the service bulletin; except as provided by paragraphs (j), (k), and (l) of this AD. Repeat the inspection thereafter at intervals not to exceed 4,000 flight hours. Accomplishment of the general visual inspection required by this paragraph terminates the detailed inspection requirement of paragraph (g) of this AD.

Note 4: For the purposes of this AD, a general visual inspection is: "A visual examination of an interior or exterior area, installation, or assembly to detect obvious damage, failure, or irregularity. This level of inspection is made from within touching distance unless otherwise specified. A mirror may be necessary to ensure visual access to all surfaces in the inspection area. This level of inspection is made under normally available lighting conditions such as daylight, hangar lighting, flashlight, or droplight and may require removal or opening of access panels or doors. Stands, ladders, or platforms may be required to gain proximity to the area being checked."

(1) For airplanes on which the detailed inspection required by paragraph (g) of this AD has been done before the effective date of this AD: Inspect before accumulating 4,000 total flight hours on the inboard flap trunnion since new, or within 4,000 flight hours after accomplishing the most recent inspection required by paragraph (g) of this AD, whichever occurs later.

(2) For airplanes other than those identified in paragraph (i)(1) of this AD: Inspect at the latest of the times specified in paragraphs (i)(2)(i), (i)(2)(ii), and (i)(2)(iii) of this AD.

(i) Before accumulating 4,000 total flight hours on the inboard flap trunnion since new.

(ii) Within 4,000 flight hours after accomplishing paragraph (f) of this AD.

(iii) Within 600 flight hours after the effective date of this AD.

Compliance Times

(j) Where Airbus Service Bulletin A320–57–1133, dated July 28, 2005, specifies replacing the sliding panel at the next opportunity if damaged, replace it within 600 flight hours after the inspection required by paragraph (g) or (i) of this AD, as applicable.

(k) If any damage to the trunnion is found during any inspection required by paragraph (g) or (i) of this AD, do the corrective actions specified in the service bulletin before further flight.

Grace Period Assessment

(l) Where the service bulletin specifies contacting the manufacturer for a grace period assessment after replacing the trunnion or flap, contact the Manager, International Branch, ANM–116, Transport Airplane Directorate, FAA; or the European Aviation Safety Agency (EASA) (or its delegated agent) for the grace period assessment.

No Reporting Requirement

(m) Although Airbus Service Bulletin A320–57–1133, dated July 28, 2005, specifies to submit certain information to the manufacturer, this AD does not include that requirement.

Alternative Methods of Compliance (AMOCs)

(n)(1) The Manager, International Branch, ANM–116, has the authority to approve AMOCs for this AD, if requested in accordance with the procedures found in 14 CFR 39.19.

(2) Before using any AMOC approved in accordance with 14 CFR 39.19 on any airplane to which the AMOC applies, notify the appropriate principal inspector in the FAA Flight Standards Certificate Holding District Office.

Related Information

(o) French airworthiness directive F–2005–139, dated August 3, 2005, also addresses the subject of this AD.

Issued in Renton, Washington, on August 14, 2006.

Ali Bahrami,

Manager, Transport Airplane Directorate, Aircraft Certification Service.

[FR Doc. E6–13826 Filed 8–21–06; 8:45 am]

BILLING CODE 4910–13–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

21 CFR Parts 20, 25, 201, 202, 207, 225, 226, 500, 510, 511, 515, 516, 558, and 589

[Docket No. 2006N–0067]

RIN 0910–AF67

Index of Legally Marketed Unapproved New Animal Drugs for Minor Species

AGENCY: Food and Drug Administration, HHS.

ACTION: Proposed rule.

SUMMARY: The Minor Use and Minor Species Animal Health Act of 2004 (MUMS act) amended the Federal Food, Drug, and Cosmetic Act (the act) to authorize the U.S. Food and Drug Administration (FDA, the agency) to establish new regulatory procedures that provide incentives intended to make more drugs legally available to veterinarians and animal owners for the treatment of minor animal species and uncommon diseases in major animal species. At this time, FDA is issuing proposed regulations to implement section 572 of the act entitled "Index of Legally Marketed Unapproved New Animal Drugs for Minor Species." These regulations propose administrative procedures and criteria for index listing a new animal drug for use in a minor species. Such indexing provides a basis for legally marketing an unapproved new animal drug intended for use in a minor species.

DATES: Submit written or electronic comments on this document by November 20, 2006. Interested persons are requested to submit comments on the information collection provisions by September 21, 2006.

ADDRESSES: You may submit comments, identified by [Docket No. 2006N–0067 and/RIN number 0910–AF67], by any of the following methods:

Electronic Submissions

Submit electronic comments in the following ways:

- Federal eRulemaking Portal: *http://www.regulations.gov*. Follow the instructions for submitting comments.
- Agency Web site: *http://www.fda.gov/dockets/ecomments*. Follow the instructions for submitting comments on the agency Web site.

Written Submissions

Submit written submissions in the following ways:

- FAX: 301–827–6870.
- Mail/Hand delivery/Courier [For paper, disk, or CD–ROM submissions]: Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852.

To ensure more timely processing of comments, FDA is no longer accepting comments submitted to the agency by e-mail. FDA encourages you to continue to submit electronic comments by using the Federal eRulemaking Portal or the agency Web site, as described in the *Electronic Submissions* portion of this paragraph.

Instructions: All submissions received must include the agency name and Docket No(s). and Regulatory Information Number (RIN) for this rulemaking. All comments received may be posted without change to *http://www.fda.gov/ohrms/dockets/default.htm*, including any personal information provided. For detailed instructions on submitting comments and additional information on the rulemaking process, see the "Comments" heading of the **SUPPLEMENTARY INFORMATION** section of this document.

Docket: For access to the docket to read background documents or comments received, go to *http://www.fda.gov/ohrms/dockets/default.htm* and insert the docket number(s), found in brackets in the heading of this document, into the "Search" box and follow the prompts and/or go to the Division of Dockets Management, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852.

To ensure that comments on the information collection are received, OMB recommends that written comments be faxed to the Office of Information and Regulatory Affairs, OMB, Attn: FDA Desk Officer, FAX: 202–395–6974.

FOR FURTHER INFORMATION CONTACT: Andrew Beaulieu, Center for Veterinary Medicine (HFV–50), Food and Drug Administration, 7519 Standish Pl., Rockville, MD 20855, 240–276–9090, e-mail: *Andrew.Beaulieu@fda.hhs.gov*.

SUPPLEMENTARY INFORMATION:

I. Background

In enacting the MUMS act (Pub. L. 108–282), Congress sought to encourage the development of animal drugs that are currently unavailable to minor species (species other than cattle, horses, swine, chickens, turkeys, dogs, and cats) in the United States or to major species afflicted with uncommon diseases or conditions (minor use). Congress recognized that the markets for drugs intended to treat these species, diseases, or conditions, are so small that there are often insufficient economic incentives to motivate sponsors to develop data to support approvals. Further, Congress recognized that some minor species populations are too small or their management systems too diverse to make it practical to conduct traditional studies to demonstrate safety and effectiveness of animal drugs for such uses. As a result of these limitations, sponsors have generally not been willing or able to collect data to support legal marketing of drugs for these species, diseases, or conditions. Consequently, Congress enacted the MUMS act, which amended the Federal Food, Drug, and Cosmetic Act to provide incentives to develop new animal drugs for minor species and minor use, while still ensuring appropriate safeguards for animal and human health.

The major incentives of the MUMS act include the following:

(1) Designation, established by section 573 of the act (21 U.S.C. 360ccc–2), which provides for eligibility for grants and contracts to defray the costs of qualified safety and effectiveness testing expenses and manufacturing expenses incurred in the development of designated new animal drugs. Designation also provides for eligibility for a 7-year period of exclusive marketing rights to enable sponsors to recover costs of drug development without competition. FDA proposed regulations to implement the designation provision of the act on September 27, 2005 (70 FR 56394) (the designation proposed rule).

(2) Conditional approval, established by section 571 of the act (21 U.S.C. 360ccc), which provides for animal drug marketing after all safety and manufacturing components of a new animal drug approval have met the standards of section 512 of the act (21 U.S.C. 360b). For the effectiveness component, a reasonable expectation of effectiveness must be established, after which sponsors have up to 5 years to complete the demonstration of effectiveness by the standards of section 512 of the act and achieve a full approval. Regulations to implement the conditional approval provision will be proposed in the future.

(3) Indexing, established under section 572 of the act (21 U.S.C. 360ccc–1), which provides for the legal marketing of unapproved new animal drugs intended for use in a minor species through an integrated process of agency and expert panel review.

At this time, FDA is issuing proposed regulations to implement the indexing provisions of the MUMS act. These regulations propose procedures and criteria for index listing a new animal drug for use in a minor species. They describe a process whereby the agency makes a determination regarding the following: (1) The eligibility of a new animal drug, (2) the selection of a qualified expert panel, and (3) the findings of the qualified expert panel.

II. Proposed Regulations

A. Definitions (proposed § 516.115).

Most of the proposed definitions are straightforward. The proposed definition of "qualified expert panel" is drawn from the statutory definition, given in section 572(d)(3) of the act. The proposed definition of "transgenic animal" comes from the statutory

definition, given in section 571(j) of the act (21 U.S.C. 360ccc). The proposed definition of "intended use" is identical to one proposed with respect to the designation proposed rule of September 27, 2005 (70 FR 56394). The designation proposed rule also included definitions for the phrases "same intended use," "same drug," and "same dosage form" that would be applicable to all subparts of part 516, including the indexing regulations.

B. Permanent-resident U.S. agent for a foreign requestor (proposed § 516.119).

The proposed rule would require a foreign requestor or holder to name a permanent-resident U.S. agent so that the agency may ensure that notifications of decisions regarding indexing and all other communications with the requestor or holder are legally and effectively made.

C. Meetings (proposed § 516.121)

The act provides that any person intending to file a request for eligibility or a request for addition to the index may have an opportunity to meet with the agency to discuss the requirements for indexing a new animal drug.

D. Informal conferences regarding agency administrative actions (proposed § 516.123)

The act also provides that a requestor or holder be offered an informal conference in association with an agency decision to deny a request for a determination of eligibility to index, to deny a request for index listing or to remove an index listing. Proposed § 516.123 establishes the nature of and the procedures for requesting and conducting such conferences. FDA would give notice of the grounds for the initial decision and provide an opportunity to respond to that decision. As proposed, the conference's presiding officer would not have significantly participated in the initial decision, would prepare a written summary of the informal conference to share with the participants, and would issue a written report describing the basis for his or her findings. The proposed regulation also provides for an informal conference associated with a decision to terminate an investigational exemption for a new animal drug proposed for indexing or a decision not to affirm an expert panel because it does not meet the selection criteria of § 516.141. In the case of conferences associated with adverse agency decisions, the proposed regulation establishes that decisions to deny, remove, terminate, or not affirm will be made by the Director, Office of Minor Use and Minor Species Animal Drug Development (OMUMS) and a subsequent conference, if requested, will be conducted by the Director, Center for Veterinary Medicine or his designee, other than the Director, OMUMS. These procedures were adapted from the process for holding regulatory hearings before the agency under 21 CFR part 16.

E. Investigational use of new animal drugs to support indexing (proposed § 516.125).

As required by section 512(a)(1) of the act, a new animal drug may not be legally marketed unless it is the subject of an approved New Animal Drug Application (NADA), the subject of a conditionally approved NADA, or on FDA's list of legally marketed unapproved new animal drugs. The act contains two exemptions for drugs intended solely for investigational use by experts qualified by scientific training and experience to investigate the safety and effectiveness of drugs. The first, in section 512(j) of the act, applies to new animal drugs generally, including animal feeds bearing or containing new animal drugs. FDA's regulations implementing this investigational use exemption are at part 511 (21 CFR part 511). The second, in section 572(g) of the act, is parallel to the first exemption but is for the purposes of indexing and applies only to minor species new animal drugs, including animal feeds bearing or containing such new animal drugs. Note that the coverage of these exemptions overlaps and, therefore, in some circumstances an investigational use might qualify for an exemption under either section 512(j) of the act or section 572(g) of the act.

Proposed § 516.125 would implement section 572(g) of the act. It states that certain investigational uses, although they involve a minor species new animal drug, are nonetheless subject to part 511. Such uses include investigations to demonstrate safety with respect to individuals exposed to the new animal drug through its manufacture and use under section 572(c)(1)(F) of the act, to conduct an environmental assessment under section 572(c)(1)(E) of the act, or to obtain approval of a new animal drug application or abbreviated new animal drug application under section 512(b) of the act. These investigational uses would be required to be conducted under part 511 because, whether these types of studies are conducted to support indexing or approval, the agency would evaluate the study results using the same standards. Thus, the agency believes it should apply the same substantive and procedural requirements for these investigational uses for minor species new animal drugs as it does for new animal drugs generally.

For other types of investigational uses, proposed § 516.125 establishes separate exemption regulations, although they are very similar to part 511. The agency believes the regulations should be similar because of the similarity of the purpose and the language of the two investigational use exemptions in the act. Proposed § 516.125 states that, with certain modifications, part 511 applies to minor species new animal drugs or animal feeds bearing or containing such new animal drugs intended for investigational use for all other purposes in support of a drug index listing (such as to demonstrate target animal safety and effectiveness). Among the proposed modifications is the need to specifically identify that the investigational use is in support of index listing, which would be done when labeling the drugs involved and when notifying the agency of the claimed investigational exemption. Another modification is that FDA would provide notice and an opportunity for an informal conference before terminating an investigational use exemption. While part 511 provides for notice and an opportunity for a hearing under 21 CFR part 16 concerning whether the exemption should be terminated, the administrative process in the proposed regulations reflects the fact that section 572 of the act provides for an informal conference with respect to other agency decisions regarding indexing, such as removal of a new animal drug from the index. FDA does not believe it should have an administrative process for terminating an investigational use exemption relating to indexing that is different from the informal conference process for other decisions relating to indexing.

F. Content and format of a request for determination of eligibility for indexing (proposed § 516.129).

To be added to the index, a new animal drug must meet certain criteria. The act establishes what can be described as a two-part regulatory decision-making process for determining whether these criteria have been met. The first part in this regulatory process is FDA's determination of whether the new animal drug is eligible for indexing. This involves an evaluation of most of the indexing criteria, with the major exceptions being target animal safety and effectiveness. The second part

includes the agency's determination of the suitability of the qualified expert panel and a review of whether the new animal drug meets the statutory criteria regarding target animal safety and effectiveness.

The determination of eligibility for indexing is initiated by a request to the agency that must be accompanied by sufficient information to permit the agency to make an informed decision regarding the request. The information proposed by the agency to determine eligibility for indexing, described in proposed § 516.129(c), is based on the requirements of 572(c)(1) of the act. The categories of information are described below:

1. Food safety

The act allows the indexing of new animal drugs that are intended for use in food-producing animals only in limited circumstances. The new animal drug must be for use in an early, non-food life stage of a minor species; it must be intended for use only in a hatchery, tank, pond, or other similar contained man-made structure; and there must be sufficient information to demonstrate food safety in accordance with the standards of section 512(d) of the act (including, for an antimicrobial new animal drug, with respect to antimicrobial resistance).

When a new animal drug proposed for indexing is *not* intended for use in an early life stage of a food-producing minor species animal, the requestor must demonstrate that there is a reasonable certainty that the minor species or edible products from the minor species will not be consumed by humans or food-producing animals. For many minor species, this should be as straightforward as an affirmation that the species has never been traditionally consumed by humans and is not subject to being used in the feed of food-producing animals. A new animal drug intended for use in a wildlife species might be eligible for indexing if it could be demonstrated that there is a reasonable certainty that treated animals would not be subsequently harvested and consumed by humans or food-producing animals.

Under the proposed rule, FDA would rely on its existing regulations regarding the food safety standards of section 512(d) of the act, which are in part 514 (21 CFR part 514) at § 514.111, and be guided by relevant policies and guidance such as FDA's Guidance for Industry (GFI) #152.

2. Environmental assessments

Under the proposal, a request for eligibility would be required to contain either an environmental assessment or sufficient information to support a categorical exclusion from the requirement to prepare an environmental assessment. The proposal would rely on the process and the standards for environmental assessments that are already defined in part 25 (21 CFR part 25). It would also amend part 25 to have categorical exclusions relating to indexing that parallel those relating to new animal drug approvals.

3. Occupational and user safety

As with new animal drug approvals, indexing includes a provision for a demonstration of safety to individuals exposed to the new animal drug during the drug's manufacture and use. FDA intends to rely on the same user safety standards for both drug approval and drug indexing.

4. Chemistry, manufacturing, and control information

The required chemistry, manufacturing, and control information, and the agency's review of that information, are much different for indexing than they are for approval.

A request for a determination of eligibility for a new animal drug for indexing must include "information regarding" the components and composition of the involved drug (section 572(c)(1)(C) of the act) and must also include "a description" of the methods used in, and the facilities and controls used for, the manufacture, processing, and packing of the new animal drug (section 572(c)(1)(D) of the act) for the purpose of determining whether the requestor has an understanding of current Good Manufacturing Practices (cGMPs) and has established appropriate specifications for the manufacture and control of the new animal drug (section 572(c)(2)(C) of the act). In addition, before a new animal drug can be added to the index, the requestor must make a commitment that the indexed drug will be manufactured in compliance with cGMPs (section 572(d)(1)(F) of the act).

In contrast, an NADA must include a "full list" of the articles used as components of the drug and "a full statement" of the composition of the drug (section 512(b)(1)(B), (C) of the act) as well as "a full description" of the methods used in, and the facilities and controls used for, the manufacture, processing, and packing of the new animal drug (section 512(b)(1)(D) of the act). These statutory requirements, as implemented by regulation (21 CFR 514.1(b)(4), (5)), result in a highly detailed NADA submission which must contain sufficient information to permit FDA to determine the adequacy of the "full description" with respect to preserving the identity, strength, quality, and purity of the subject new animal drug (see section 512(d)(1)(C) of the act).

As previously stated, FDA believes that the submission of chemistry, manufacturing, and control information for a new animal drug proposed for indexing that would meet the relevant statutory standard would consist of a comprehensive summary of the manufacturing process that is sufficient to permit a determination that the requestor understands cGMPs and has established appropriate specifications in accordance with that understanding. FDA believes that the "full description" and underlying confirmatory information that are required in an NADA would not be necessary in a request for determination of eligibility for indexing.

5. Other Information

Proposed 21 CFR 516.129 also requires that a request for determination of eligibility contain the following: (1) Identification of the minor species or groups of minor species for which indexing is sought; (2) a statement of the intended use(s) in those species; (3) a statement of the conditions of use, such as dosage, route of administration, warnings, contraindications or other significant limitations associated with the intended use(s); (4) a brief discussion of the need for the drug for the intended use(s); and (5) an estimate of the anticipated annual distribution after indexing.

Additionally, the regulation provides that a single request for eligibility may involve only one drug (or combination of drugs) in one dosage form, may involve multiple intended uses or multiple minor species, may not involve a new animal drug that is contained in or a product of a transgenic animal, and may not involve the same drug in the same dosage form for the same intended use as a new animal drug that is already approved or conditionally approved.

G. Granting and denying requests for a determination of eligibility and notification thereof (proposed § 516.133, § 516.135, and § 516.137).

FDA will deny a request for determination of eligibility if a requestor fails to submit information required by section 572(c)(1) of the act, or the submitted information, evaluated together with other information available to the agency, is insufficient to support a decision to grant a request in

accordance with section 572(c)(2) of the act.

The new animal drug that is the subject of the request must be sufficiently characterized to enable the agency to determine whether the same drug in the same dosage form for the same intended use is already approved or conditionally approved. The proposed designation rule contains a definition of sameness regarding these three elements that would also apply to indexing (see proposed § 516.3 published in the **Federal Register** of September 27, 2005 (70 FR 56394)).

FDA believes that the estimate of the quantity of the indexed drug likely to be distributed on an annual basis following indexing is primarily required because of concern over extralabel use of indexed drugs, which is statutorily prohibited. The anticipated quantity to be distributed for the intended purpose(s) can serve as a baseline against which actual distribution can be measured. Significant differences between expected and actual distribution may indicate that an indexed drug is being used for other than its intended purposes. An estimation of the quantity of drug likely to be distributed may also inform decisions associated with the extent of environmental or user exposure following indexing.

As previously noted, a new animal drug which is contained in or is the product of a transgenic animal may not be indexed. A transgenic animal is defined, in section 571(j) of the act, as an animal whose genome contains a nucleotide sequence that has been intentionally modified in vitro, and the progeny of such an animal; provided that the term "transgenic animal" does not include an animal of which the nucleotide sequence of the genome has been modified solely by selective breeding.

Under the proposal, FDA cannot determine a drug to be eligible for indexing if the information submitted in support of the request evaluated together with other information available to the agency is insufficient to do the following: (1) Demonstrate food safety in an early, non-food life stage of a food-producing minor species animal or demonstrate that there is a reasonable certainty that treated animals will not be consumed by humans or food-producing animals, (2) determine that the requestor has established appropriate specifications for the manufacture and control of the new animal drug, (3) demonstrate that the requestor has an understanding of current good manufacturing practices, or (4) determine that the new animal drug is safe with respect to individuals exposed to the new animal drug during manufacture or use; or the request fails to include an adequate environmental assessment or sufficient information to support a categorical exclusion from the requirement to prepare an environmental assessment.

In addition, under the proposal a request for a determination of eligibility for indexing may be denied if it contains any untrue statement of a material fact or omits material information.

Within 90 days after the submission of a request for a determination of eligibility for a non food-producing animal, or 180 days for a request for an early, non-food life stage of a food-producing animal, FDA must grant or deny the request and notify the requestor of its decision in writing. If FDA denies the request, the agency will provide due notice and an opportunity for an informal conference regarding its decision. A decision of FDA to deny a request for determination of eligibility for indexing following an informal conference would constitute the final agency action subject to judicial review.

H. Qualified expert panels (proposed § 516.141).

Once a requestor has received a letter granting eligibility for indexing, as the first step in the process of requesting an index listing, it can propose a qualified expert panel. The panel, which operates external to FDA, plays a central role in the indexing process—evaluating target animal safety and effectiveness information and making a recommendation to FDA based on its evaluation. Section 572(d) of the act requires the agency to "define the criteria for selection of a qualified expert panel and the procedures for the operation of the panel." The same section states that the panel is not subject to the Federal Advisory Committee Act, also known as FACA. Section 516.141 of the proposed implementing regulations describes the process for selecting the qualified expert panel and describes how the panel operates. It does this by stating the responsibilities of each of the parties involved—the requestor, FDA, the panel members, and the panel leader.

Because of the diverse nature of the products that are subject to indexing and anticipated differences in the availability and accessibility of experts qualified to review different product classes, the proposed rule does not specify the day-to-day operations of a qualified expert panel other than to require that the activities of the panel be conducted in accordance with generally accepted professional and ethical business practices and that one member of the panel be identified to serve as the "leader" of the review process. The leader would serve as the principal spokesperson for the panel and be responsible for submitting the panel's final written report to the requestor and maintaining records of the final report. In addition, the agency plans to issue guidance documents regarding other aspects of the operation of expert panels and the preparation of written reports.

In developing the selection criteria for the qualified expert panel, FDA adapted some aspects of the agency's implementation of section 523 of the act (21 U.S.C. 360m). That provision deals with FDA accreditation of persons in the private sector to conduct the initial pre-market review for certain medical devices. FDA also considered its use of advisory committees that review information and make recommendations to FDA on various technical and scientific issues relating to product approval. In addition, FDA tried to minimize the burden on the potential members to help ensure that qualified individuals will be willing to participate while still establishing adequate controls to help ensure that FDA obtains objective, high quality evaluations and recommendations.

To maintain the integrity of the review process, one proposed selection criterion is that a qualified expert panel member must not have a conflict of interest or the appearance of a conflict of interest, unless FDA makes a determination to allow participation notwithstanding an otherwise disqualifying financial interest. The proposed rule describes the factors that are, and are not, relevant to determining whether there is a conflict of interest or the appearance of a conflict of interest and identifies the information needed from potential panel members to support this determination by the agency. Proposed § 516.141(e)(7) requires qualified expert panel members to immediately notify the requestor and FDA of any change in conflict of interest status. For purposes of this regulation, the agency believes that this generally requires a panelist to report changes in his conflict of interest status within 30 days.

In selecting members for the qualified expert panel, the person requesting the index listing would be required to ensure that the members have the requisite scientific training and experience to evaluate the target animal safety and effectiveness of the new animal drug at issue for the proposed intended use. The group of identified experts would also be required to

represent an adequate range of expertise to fully evaluate the product.

After identifying potential panel members, the requestor would be required to provide their names and addresses to FDA, along with sufficient information about each proposed member for FDA to determine whether the panel meets the selection criteria other than with respect to potential conflicts of interest. Each proposed panel member would provide information regarding potential conflicts of interest directly to the agency. If the agency determines that the qualified expert panel does not meet the selection criteria, it will provide information to the requestor so that a suitable panel can be proposed. For example, FDA may decline some candidates and request replacements or request that the panel include additional members to provide needed expertise. If the requestor disagrees with FDA's determination regarding the panel, under the proposal it may request review through an informal conference.

The work of the expert panel centers around its primary task, which is to prepare a written report that describes the panel's evaluation of all available target animal safety and effectiveness information relevant to the proposed use of the new animal drug and the panel's conclusions based on its evaluation. In preparing the written report, panel members would be required to review all relevant information provided by the requestor and should also consider any other relevant information otherwise known by panel members, including anecdotal information. Panel members would be required to participate in the preparation of the written report. Members could be paid a reasonable fee to serve on expert panels by the requestor.

I. Written report (proposed § 516.143).

The qualified expert panel's written report must meet the requirements of section 572(d)(2) of the act. Under proposed § 516.143, which would implement this provision, the report must describe the panel's evaluation of all available target animal safety and effectiveness information relevant to the proposed use of the new animal drug; provide citations of all literature reviewed and summaries of unpublished information considered; and state the panel's opinion regarding whether the benefits of using the new animal drug for the proposed use in a minor species outweigh its risks to the target animal, taking into account the harm being caused by the absence of an approved or conditionally approved new animal drug for the minor species in question. The purpose of these requirements is to provide sufficient information to permit the agency to assess the quality and quantity of the information relating to target animal safety and effectiveness of the new animal drug assessed by the panel. Therefore, the panel's evaluation should be such that FDA can understand the basis for the panel's conclusion regarding the drug's benefits and risks. If the expert panel concludes that the benefits of using the drug outweigh its risks, it would also be required to provide as part of the report either draft labeling, which includes all conditions of use deemed necessary by the expert panel to assure that the benefits of the drug will outweigh its risks, or narrative information on the basis of which such labeling can be drafted by the requestor. All panel members would be required to sign the report or otherwise approve it in writing.

J. Content and format of a request for addition to the index (proposed § 516.145).

As noted previously, the second part of the indexing regulatory process involves FDA's review of whether the new animal drug meets the statutory criteria regarding target animal safety and effectiveness information. FDA's review is based on the qualified expert panel's written report and recommendation. The agency's review begins with the requestor's submission asking for addition of the new animal drug to the index. This submission must contain the information required by section 572(d)(1) of the act. FDA's decision to grant or deny the request for indexing is governed by section 572(d)(4) of the act. Therefore, the request for addition to the index needs to contain sufficient information to permit FDA to grant the request. The sections of the proposed rule that implement these statutory provisions are sections 516.145 and 516.149, respectively.

K. Refusal to file and review a request for addition to the index (proposed § 516.147).

The agency proposes that if a request for indexing fails to contain information required by § 516.145, FDA will not file or review it and will so notify the requestor within 30 days of receiving the request.

L. Granting or denying a request for addition to the index and notification thereof (proposed § 516.149, § 516.151, and § 516.153).

FDA must deny a request for indexing if the same drug in the same dosage form for the same intended use is approved or conditionally approved. While this is also a basis for denying eligibility for indexing, it is possible that a new animal drug may be approved or conditionally approved between the time that a determination for eligibility is made and the request for indexing is submitted, thus preventing the indexing of a new animal drug previously determined to be eligible.

It is also possible that new scientific information may arise between the time of a determination of eligibility and submission of a request for indexing. Section 572(d)(4) of the act (by reference to section 572(a) of the act) and proposed § 516.151 require the agency in reviewing a request for index listing to evaluate any new information together with the information available at the time of a determination of eligibility to determine whether the new animal drug is still eligible for indexing.

If a request for indexing fails to contain, or appropriately reference, information required by the statute, as implemented by proposed § 516.145, the agency would be required to deny the request.

In general, FDA intends to rely heavily on the recommendations of the qualified expert panel regarding target animal safety and effectiveness, including the necessary conditions of use. However, the written report of a qualified expert panel may not be sufficiently clear or complete with respect to the basis for a panel recommendation to index a new animal drug to permit FDA to make an informed decision regarding whether it agrees with the recommendation. In this case, FDA would either deny the request for indexing or, under proposed § 516.145(c), require that the requestor submit the information provided to the panel. It is also possible that, in some cases, the written report of an expert panel may be sufficiently clear and complete for the agency to make a decision regarding the panel recommendations, but the agency may disagree in whole or in part with the recommendations. Such disagreement may be based on the written report itself or the report along with additional information available to the agency. In such a case, FDA would deny the request. If FDA denies a request for addition to the index, the requestor

could submit another request, which contains information to overcome the agency's grounds for denial.

One of the grounds for denying a request for addition to the index is that the qualified expert panel failed to meet one or more of the selection criteria. Proposed § 516.141 would require panel members to submit any new information regarding conflicts of interest to the agency so that FDA can determine whether a disqualifying conflict has arisen since the agency's initial review.

Under the proposal, and consistent with FDA's regulations governing new animal drug applications, FDA may also deny a request for addition to the index if it contains any untrue statement of a material fact or omits material information.

Within 180 days after the filing of a request for addition of a new animal drug to the index, FDA will grant or deny the request, and notify the person requesting indexing of FDA's decision in writing. If FDA denies the request for indexing of a new animal drug, the agency will provide due notice and an opportunity for an informal conference. A decision by FDA to deny a request to index a new animal drug following an informal conference will constitute final agency action subject to judicial review.

M. Publication of the index and content of an index listing (proposed § 516.157).

FDA proposes to meet the requirement of section 572(e)(2) of the act by maintaining and updating, at least annually, a publicly available list of indexed drugs. Each index listing would contain the following: (1) The name and address of the person who holds the index listing, (2) the name of the new animal drug and the intended use and conditions of use for which it is indexed, (3) product labeling, and (4) conditions and any limitations that the agency deems necessary regarding the use of the new animal drug.

N. Modifications to indexed drugs (proposed § 516.161).

As with approved new animal drugs, and as provided for by section 572(e)(3) of the act, there will almost certainly be a need to change the conditions under which a new animal drug is indexed or other aspects of an indexed drug at some point after indexing. The proposed regulations for making such changes are based on those governing new animal drug applications, although the proposed regulations are generally less burdensome than the regulatory requirements of the corresponding section of 21 CFR part 514.

Proposed § 516.161 provides for three classes of changes to indexed drugs.

The first class of changes involves the following: (1) The addition to labeling or prescription drug advertising of additional warning, contraindication, side effect, or cautionary information, (2) the deletion from labeling or prescription drug advertising of false, misleading, or unsupported indications for use or claims of effectiveness, or (3) changes in manufacturing methods or controls required to correct product or manufacturing defects that may result in serious adverse drug events. Changes of this nature should be made as soon as possible and a request for modification of an index listing containing information describing the need for the change should be concurrently submitted to the agency.

The second class of changes involves the following: (1) Addition of an intended use, (2) addition of a species, (3) addition or alteration of an active ingredient, (4) alteration of the concentration of an active ingredient, (5) alteration of the dose or dosage regimen, or (6) alteration of prescription or over-the-counter status. Changes of this nature can be made only after a request to make such a change has been granted by FDA. Each such change must go through the same review process as the original index listing. Therefore, the initial submission to FDA relating to such a change should be a request for a determination of eligibility for indexing that relates specifically to the proposed change. However, while the process for modifications to index listings of this kind follows the same process as a new index listing, much of the work to support the initial listing might also support the change to the listing and so would not have to be duplicated. Likewise, the panel that reviewed the original request for listing would likely be acceptable to review the proposed change as well. The agency notes, however, that the nature of the change or new information about, for example, the product's safety or effectiveness, may mean that previous work would no longer be adequate to support the change.

The third class of changes involves any change to the conditions established in labeling or otherwise described in the request for determination of eligibility or request for indexing at the time a new animal drug was indexed other than those noted above. Information describing such changes would be required to be submitted as part of the annual indexed drug experience report. These changes include changes to the formulation of the product or to the manufacturing methods or controls other than those to correct defects that may cause serious adverse drug events. Changes to the formulation or manufacturing process would be required to be reported at the same level of detail as the level of detail at which the formulation or manufacturing process were initially described in the request for determination of eligibility for indexing.

The proposed provisions under § 516.161 would apply only to modifications to the indexed drug. Regardless of which class of changes is requested, these provisions would not apply to changes that would cause an indexed drug to be a different drug (or different combination of drugs) or a different dosage form. In the case of such a submission, the agency would deny the request for modification and notify the holder that a new index listing is required for the new drug or dosage form. The designation proposed rule (September 27, 2005, 70 FR 56394) contains proposed definitions for "same drug" and "same dosage form." The holder could then initiate the new listing by submitting a request for eligibility for the new drug or dosage form.

O. Change in ownership of an index file (proposed § 516.163).

The agency proposes that, in order to meet the requirement of section 572(e)(1)(A) of the act, the owner of an index file supporting an index listing may transfer ownership of the file provided that the agency is appropriately notified of this. The agency would then update the index listing accordingly.

P. Records and reports (proposed § 516.165).

Section 572(i) of the act requires the maintenance of records and the submission of reports sufficient to permit a determination of whether an indexed drug should be removed from the index. The information FDA believes is necessary to make this determination is described in proposed § 516.165. This information would be similar in nature but less extensive than the information required with respect to approved new animal drugs. Most of the information required would be submitted annually, on, or within 60 days of, the anniversary date of the letter granting the request for indexing.

Under the proposed regulation, product or manufacturing defects that may result in serious adverse drug experiences must be reported to the appropriate FDA District Office or resident post within three working days of their discovery. Serious and unexpected adverse drug experiences must be reported to the Director,

OMUMS within 15 working days of the index holder first receiving the information.

Distribution of an indexed drug by a distributor would be permissible provided that the holder of the index listing submits a special report at the time of initial distribution by the distributor containing the information required under proposed § 516.165. This includes a signed statement from the distributor that the indexed drug will be distributed and promoted only in accordance with the index listing.

The agency proposes that all other required information be submitted annually. This includes the following: The quantity of the drug distributed (domestically and for export), holder and distributor current package labeling with a summary of any changes in labeling since the previous annual report, a summary of changes in the manufacturing process (at the level of detail that the manufacturing process was described in the request for determination of eligibility) not already reported under proposed § 516.161, any pertinent safety or effectiveness information not previously reported, and any adverse drug experience information not previously reported.

Q. Removal from the index (proposed § 516.167).

Proposed § 516.167 provides for removal of a new animal drug from the index, after due notice to the holder of the index listing and an opportunity for an informal conference.

The proposed grounds for removal, which track those in the act, include that the same drug in the same dosage form for the same intended use has been approved or conditionally approved.

In accordance with section 572(f)(1) of the act, if FDA determines, subsequent to the indexing of a new animal drug, that the qualified expert panel failed to meet its applicable requirements, FDA would remove the drug from the index.

In light of the purpose of the MUMS act to increase the availability of legally marketed new animal drugs to treat minor species, the agency proposes to only partially remove an index listing if it believes that doing so would satisfactorily resolve a safety or effectiveness issue otherwise warranting complete removal of the drug from the index. For example, if an index listing provides for the use of a new animal drug in several minor species and new information indicates that the benefits of using the drug in one of those minor species does not outweigh its risks to that species, the agency may remove only the use of the new animal drug in that minor species from the index listing.

In accordance with section 572(f)(2) of the act, the regulation proposes that FDA may immediately suspend a new animal drug from the index if it determines that there is a reasonable probability that the use of the drug would present a risk to the health of humans or other animals. The agency would subsequently offer the holder of the index listing an opportunity for an informal conference.

A decision by FDA to remove a new animal drug from the index following an informal conference would constitute final agency action subject to judicial review.

R. Confidentiality of data and information in an index file (proposed § 516.171).

This proposed regulation is based on § 514.11, which applies to new animal drug application files. It would apply to index files, which would encompass all data and information submitted to or incorporated by reference into the index file including requests for determination of eligibility for indexing, information supporting selection of expert panel members, requests for addition to the index, claimed investigational exemptions under proposed § 516.125, requests for modification to indexed drugs, reports submitted under proposed § 516.165, and master files.

III. Conforming Changes

FDA is proposing conforming changes to certain applicable sections of the Code of Federal Regulations (CFR) that would add a reference to new animal drugs that are index listed under section 572 of the act. The affected sections in title 21 of the CFR are:

§ 20.100 Applicability; cross-reference to other regulations.

§ 25.33 Animal drugs.

§ 201.105 Veterinary drugs.

§ 201.115 New drugs or new animal drugs.

§ 201.122 Drugs for processing, repacking, or manufacturing.

§ 202.1 Prescription-drug advertisements.

§ 207.21 Times for registration and drug listing.

§ 207.35 Notification of registrant; drug establishment registration number and drug listing number.

§ 225.1 Current good manufacturing practice.

§ 225.35 Use of work areas, equipment, and storage areas for other manufacturing and storage purpose.

§ 225.135 Work and storage areas.

§ 226.1 Current good manufacturing practice.

§ 500.25 Anthelmintic drugs for use in animals.

§ 500.26 Timed-release dosage form drugs.

§ 510.301 Records and reports concerning experience with animal feeds bearing or containing new animal drugs for which an approved medicated feed mill license application is in effect.

§ 510.305 Maintenance of copies of approved medicated feed mill licenses to manufacture animal feed bearing or containing new animal drugs.

§ 510.455 Requirements for free-choice medicated feeds.

§ 511.1 New animal drugs for investigational use exempt from section 512(a) of the act.

§ 515.10 Medicated feed mill license applications.

§ 515.21 Refusal to approve a medicated feed mill license application.

§ 558.3 Definitions and general considerations applicable to this part.

§ 558.5 Requirements for liquid medicated feed.

§ 558.6 Veterinary feed directive drugs.

§ 589.1000 Gentian violet.

In § 201.105, FDA is also proposing to remove a reference to certification requirements applicable to preparations of antibiotic drugs. FDA no longer certifies or recognizes certification of antibiotic drugs.

In addition, FDA is proposing to remove the last sentence in § 500.25(c) because it cites § 514.9 which no longer exists. Labeling revisions for animal feeds bearing or containing anthelmintic drugs are now subject to the same requirements under 21 CFR 500.25 as dosage form drugs. Medicated animal feeds covered by approved applications are subject to the provisions of § 514.8 (d) and (e). Medicated animal feeds covered by an index listing are subject to the provisions of 21 CFR 516.161(b)(1).

IV. Legal Authority

FDA's authority for issuing this proposed rule is provided by the MUMS act (21 U.S.C. 360ccc *et seq.*). When Congress passed the MUMS act, it directed FDA to publish implementing regulations (see 21 U.S.C. 360ccc note). In the context of the MUMS act, the statutory requirements of section 572 of the act, along with section 701(a) of the act (21 U.S.C. 371(a)) provide authority for this proposed rule. Section 701(a) authorizes the agency to issue regulations for the efficient enforcement of the act.

V. Analysis of Economic Impacts

FDA has examined the impacts of the proposed rule under Executive Order

12866, the Regulatory Flexibility Act (5 U.S.C. 601–612), and the Unfunded Mandates Reform Act (Public Law 104–4). Executive Order 12866 directs agencies to assess all costs and benefits of available regulatory alternatives and, when regulation is necessary, to select regulatory approaches that maximize net benefits (including potential economic, environmental, public health and safety, and other advantages; and distributive impacts and equity). The Regulatory Flexibility Act (5 U.S.C. 601–612) requires agencies to analyze regulatory options that would minimize any significant impact of a rule on small entities.

FDA tentatively finds that the proposed rule does not constitute an economically significant regulatory action as defined in 3(f)(1) of Executive Order 12866. We base this on the following analysis that estimates annual costs ranging from about $342,000 in the first year to about $735,000 in the 10th year. Similarly, the administrative costs are unlikely to have a significant economic impact on a substantial number of small entities.

Section 202(a) of the Unfunded Mandates Reform Act requires that agencies prepare a written statement, which includes an assessment of anticipated costs and benefits, before proposing "any rule that may result in an annual expenditure by State, local and tribal governments, in the aggregate, or by the private sector, of $100 million (adjusted annually for inflation) in any one year." The current threshold after adjustment for inflation is $115 million, using the most current (2003) implicit price deflator for the Gross Domestic Product. FDA does not expect this proposed rule to result in any 1-year expenditure that would meet or exceed this amount. As such, no further analysis of anticipated costs and benefits is required by the Unfunded Mandates Reform Act.

Summary

The proposed rule is expected to result in about 30 requestors, each averaging about 2 requests for a determination of eligibility for indexing of individual animal drugs annually, submitting a total of 60 requests annually. We estimate that requestors for 20 of these products will create and convene expert panels to review the safety and efficacy data. Further, the recommendations of these panels are expected to lead to the addition of 20 animal drug index listings each year.

Benefit

This rule intends to create administrative practices and procedures for index listing a new animal drug for use in a minor species, thereby providing the benefit of a legal basis for marketing an unapproved new animal drug intended for use in a minor species. The need for the rule arises from the existence of some minor species populations that are too small to support traditional drug approval studies. The countervailing risk of this rule is that sponsors of animal drugs that are marginally economically viable could use this system to avoid the traditional animal drug approval process. Under this proposed rule, however, the voluntary indexing of a new animal drug for use in a minor species would only be allowed when the same drug in the same dosage form for the same intended use is not already approved or conditionally approved, thereby reducing this risk.

Administrative Costs

This section will describe and estimate the annual administrative costs by proposed provision for both producers of currently unapproved drugs that would request an index listing and FDA. First, we address the efforts required by requestors concerned with index listing. The estimates of the number of requestors, frequencies of responses, and hours per procedure for each of the provisions of the proposed rule were determined by Center for Veterinary Medicine personnel.

We estimate that, on average, two foreign requestors of drug indexing would need to hire a permanent resident agent to represent them. We expect this to require about 1 hour of administrative time for a requestor's management employee in regulatory affairs. We estimate the loaded wage estimate at $42.29 per hour (including a 30 percent increase for benefits) for regulatory affairs personnel.[1] This provision would cost the two requestors a total of about $85. We expect that a resident agent would expend only about 6 hours of administrative effort per year per indexed drug. We estimate the wage rate of the resident agent at $100 to $150 per hour, and use the midpoint, $125, for our calculations. Total annual costs for resident agents are estimated at $1,500 (two agents times 6 hours times $125 per hour) in the first year. In the 10th year this is expected to rise to about $15,000 as two more resident agents each provide 6 more hours of administrative effort each additional year. Due to the uncertainty in the costs for resident agents, we request public comment and data on this issue.

Proposed § 516.121 provides for one or more meetings between requestors and FDA to discuss the requirements for indexing a new animal drug. We estimate that 30 requestors will each request, on average, 2 meetings annually, for a total of 60 meetings. Preparation and participation in these meetings is estimated at 4 hours each, for an annual total of 240 hours. Proposed § 516.123 concerns informal conferences regarding agency administrative actions. These would include conferences to discuss a request for determination of eligibility that has been denied, the removal of an expert panel member, a request for indexing that was denied or an indexed drug that was removed from the list. We estimate that about three requestors would request one conference with FDA annually for any of these reasons. We expect that each requestor would expend about 8 hours (24 hours total) to prepare for and attend each of these conferences. The combined efforts for preparation and participation in all conferences are estimated at 264 hours (240 plus 24). At the same loaded wage estimate of $42.29 per hour, this provision is expected to cost about $11,200 annually.

For proposed § 516.125, we estimate that two requestors would each annually submit three notices of claimed investigational exemptions for new animal drugs for index listing. We estimate that each submission would require about 20 hours for regulatory affairs personnel to prepare. At the loaded wage estimate of $42.29 per hour, the total of 120 hours would cost about $5,100.

We estimate that about 30 requestors would each average about 2 requests for determination of eligibility for indexing of individual animal drugs annually, totaling to 60 requests annually for proposed § 516.129. At the loaded wage estimate of $42.29 per hour, and our estimate of 12 hours of preparation for each request, this provision would require about 720 hours equal to about $30,400. Included in this estimate of 60 requests are any resubmitted requests that were previously denied.

Proposed § 516.141 would require the creation of a qualified expert panel to review all information, provided by any source, relevant to a determination of the target animal safety and effectiveness of the new animal drug. FDA would be required to approve the panel members before the panel formally convened. We estimate that requestors of 20 animal drugs, or about one-third of the 60 animal drugs that

[1] 2004 National Industry-Specific Occupational Employment and Wage Estimates, U.S. Department of Labor, Bureau of Labor Statistics (*http://www.bls.gov/oes/current/naics4_325400.htm*); compliance officer wage rate for pharmaceutical and medicine manufacturing (NAICS 325400).

annually are determined to be eligible for indexing, would create qualified expert panels to further study the safety and efficacy data. The creation of each panel by a requestor is estimated to take about 8 hours of effort by regulatory affairs personnel. At the same loaded wage estimate, these 160 hours would cost about $6,800 annually.

Proposed § 516.143 describes how the expert panel would prepare a written report for FDA with its findings concerning the new animal drug under consideration for index listing. The review of the relevant information and preparation of the report by each panel would take an estimated 80 hours. This equates to 1,600 hours for 20 panels. The proposed rule allows for fees to be paid to panel members for their time. We estimated the average wage rate for panel members at $100 to $150/hr, and use the midpoint ($125) in our calculations. At this wage, we estimate these activities to cost up to $200,000 annually for the total industry, or $10,000 per requestor for each animal drug under consideration. An additional 0.5 hours is estimated for recordkeeping of the final written report described in proposed § 516.143 by the panel leader. This would result in an additional $400 in costs annually. We request comment and data on the range of hourly wage rates for qualified panel members.

We estimate that the formal request for addition to the index, provided for in proposed § 516.145, would require about 12 hours to prepare. This would result in another 240 hours of effort (20 requests times 12 hours) for regulatory affairs personnel. We project the compliance cost of this effort at $10,200 annually.

We only expect to receive one request each for a modification to an indexed listed drug and a change in ownership of an index file annually (provided for in proposed §§ 516.161 and 516.163), and estimate the preparation of each to require 4 and 2 hours, respectively. In total, these compliance efforts would cost about $250 in the first year. Total modification requests and ownership change notifications are expected to increase by 1 each year so that 10 of each would be expected to be submitted in year 10. The cost of these provisions in year 10 is estimated at about $2,500.

This proposed rule would require, in § 516.165, that records and reports be created, submitted and retained by the holder of the indexed drug. These records include a 3-day indexed drug field alert report, a 15-day indexed drug field alert report and an annual indexed drug experience report. We expect that the vast majority of compliance efforts will be associated with the annual indexed drug experience report. Because the number of expected requests that are granted for addition to the index is 20 per year (on average, 20 requestors with 1 request granted each), the number of reports to be created, submitted and stored is also estimated at 20 per year. We estimate the reports for each index listing would require 8 hours annually, totally about 160 hours for all 20 listings. At the loaded wage estimate of $42.29 per hour, we estimate the first-year reporting costs at about $6,800. These annual costs will increase by an additional $6,800 each year as an additional 20 indexed drugs are added to the list. In year 10 we estimate the cost of this provision at about $67,700. Further, we expect that the maintenance of these records (recordkeeping) would require an additional hour of administrative time for each indexed drug listing. These additional 20 hours would cost about $850 at the same loaded wage estimate in the first year, and would also increase in succeeding years by an additional $850 as additional indexed drugs are added to the list. We estimate the cost of this provision in year 10 at about $8,500.

For those choosing to seek a MUMS index listing of an unapproved animal drug, total requestor compliance costs are expected to sum to about $273,000 in the first year. These costs would be borne by 30 requestors at an average cost per requestor of about $9,100 per indexed drug. Costs in succeeding years would be expected to increase slightly due to the annual reporting requirements for all indexed drugs resulting in year-10 costs of about $358,000.

Costs to Government

The Government would also incur costs for this proposed rule. We expect that about 60 percent of a full-time equivalent employee at a GS–14 salary would be needed to handle the administrative work of the indexing of MUMS drugs in the first year. This would include all administrative efforts from responding to requests for presubmission meetings to making changes to approved indexed drugs. We estimate Government costs (including a 30 percent adjustment for benefits) of this provision at about $69,000 in the first year. In year 10 we estimate that up to four full time equivalent employees (one GS–14 position, two GS–13 positions and one GS–11 position) would be needed to administer the program. Including a 30 percent adjustment for benefits, we estimate that the cost to Government in year 10 could increase to about $378,000.

Total costs for this proposed rule would be the sum of private administrative and Government costs. Total costs are estimated to increase from $342,000 in the first year up to $735,000 in the 10th year.

Regulatory Flexibility Analysis

1. Small Business Impacts

The Regulatory Flexibility Act requires agencies to prepare a regulatory flexibility analysis if a rule is expected to have a significant economic impact on a substantial number of small entities. Although we believe it is unlikely that significant economic impacts would occur, the following constitutes the initial regulatory flexibility analysis.

One requirement of the Regulatory Flexibility Act is a succinct statement of any objectives of the rule. As stated previously in this analysis, with this rule the agency intends to create an administrative system, provided for by statute, that would allow for the legal marketing of unapproved animal drugs for intended uses in minor species in the U.S. that would otherwise not be economically viable under current market conditions.

The Regulatory Flexibility Act also requires a description of the small entities that would be affected by the rule, and an estimate of the number of small entities to which the rule would apply. The Small Business Administration (SBA) defines the criteria for small businesses using the North American Industrial Classification System (NAICS). For pharmaceutical preparation manufacturers (NAICS number 325412), SBA defines small businesses as those with less than 750 employees. Census data shows that 723 companies with 901 establishments represent this category.[2] While about two-thirds of the establishments would be considered small using the SBA criteria, the agency acknowledges that many requests for MUMS index listing would likely be received from multi-establishment companies that exceed the 750-employee limit on small businesses. Nonetheless, the average cost for a requestor that has two meetings with us, requests a determination of eligibility for indexing, creates and convenes a qualified panel of experts resulting in a written report, requests an addition to the index and keeps all necessary records, would be about $12,600. This cost per request represents about 1.5 percent of the revenues of the smallest set of establishments (those with one to four employees), and less than 0.4

[2] 2002 Economic Census, U.S. Census Bureau, Manufacturing Industry Series, Pharmaceutical Preparation Manufacturing, Tables 3 and 4.

percent of revenues of all larger establishments. These costs would not represent a significant economic impact on these firms, especially in light of the fact that they incur these expenses in order to realize increased sales revenue from the indexing. The firms submitting requests for index listing are expected to already have the necessary administrative personnel with the skills required to prepare the requests and fulfill reporting requirements as identified above.

2. Analysis of Alternatives

The Regulatory Flexibility Act requires that the agency consider any alternatives to the proposed rule that would accomplish the objective while minimizing significant impacts of the rule. As stated previously, the agency believes that the proposed rule, due to the relatively small size of the costs, would not be likely to impose significant economic impacts on a substantial number of small businesses.

The statute that creates this system, Pub. L. 108–282, does not provide the agency a great deal of flexibility in the implementing regulations, such as in determining whether or not to use independent qualified expert panels to review the safety and efficacy data. We conclude that the proposed rule achieves the objective of increasing drug availability for minor species with minimal costs to industry while staying within the limits set by Pub. L. 108–282.

VI. Paperwork Reduction Act of 1995

This proposed rule contains information collection provisions that are subject to review by the Office of Management and Budget (OMB), under the Paperwork Reduction Act of 1995 (the PRA) (44 U.S.C. 3501–3520). A description of these provisions is given below with an estimate of the annual reporting and recordkeeping burden. Included in the estimate is the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing each collection of information.

FDA invites comments on these topics: (1) Whether the proposed collection of information is necessary for the proper performance of FDA's functions, including whether the information will have practical utility; (2) the accuracy of FDA's estimate of the burden of the proposed collection of information including the validity of the methodology and assumptions used; (3) ways to enhance the quality, utility and clarity of the information to be collected; (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques and other forms of information technology.

Title: Index of Legally Marketed Unapproved New Animal Drugs for Minor Species 21 CFR Part 516

Description: The Minor Use and Minor Species Animal Health Act of 2004 (MUMS act) amended the Federal Food, Drug, and Cosmetic Act (the act) to authorize FDA to establish new regulatory procedures intended to make more medications legally available to veterinarians and animal owners for the treatment of minor animal species (species other than cattle, horses, swine, chickens, turkeys, dogs, and cats), as well as uncommon diseases in major animal species.

The MUMS act created three new sections to the act (section 571, 572, and 573), and this proposed rule is intended to implement section 572 of the act, which provides for an index of legally marketed unapproved new animal drugs for minor species. Participation in any part of the MUMS program is optional so the associated paperwork only applies to those who choose to participate. The proposed rule specifies, among other things, the criteria and procedures for requesting eligibility for indexing and for requesting addition to the index as well as the annual reporting requirements for index holders.

Under the new subpart C of part 516, proposed § 516.119 provides requirements for naming a permanent-resident U.S. agent by foreign drug companies, and § 516.121 would provide for informational meetings with FDA. Section 516.123 provides proposed requirements for requesting informal conferences regarding agency administrative actions and proposed § 516.125 provides for investigational use of new animal drugs intended for indexing. Provisions for requesting a determination of eligibility for indexing can be found under proposed § 516.129 and provisions for subsequent requests for addition to the index can be found under proposed § 516.145. A description of the written report required in § 516.145 can be found under proposed § 516.143. Under proposed § 516.141 are provisions for drug companies to nominate a qualified expert panel as well as the panel's recordkeeping requirements. This section would also call for the submission of a written conflict of interest statement to FDA by each proposed panel member. Index holders would be able to modify their index listing under proposed § 516.161 or change drug ownership under proposed § 516.163. Requirements for records and reports are proposed under § 516.165.

Description of Respondents: Pharmaceutical companies that sponsor new animal drugs.

Thus, FDA estimates the burden for this collection of information as follows:

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN[1]

21 CFR Section	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Response	Total Hours
516.119	2	1	2	1	2
516.121	30	2	60	4	240
516.123	3	1	3	8	24
516.125	2	3	6	20	120
516.129	30	2	60	12	720
516.141	20	1	20	8	160
516.143	20	1	20	80	1,600
516.145	20	1	20	12	240

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN[1]—Continued

21 CFR Section	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Response	Total Hours
516.161	1	1	1	4	4
516.163	1	1	1	2	2
516.165	10	2	20	8	160
Total					3,272

[1]There is no capital or operating and maintenance costs associated with this collection of information.

TABLE 2.—ESTIMATED ANNUAL RECORDKEEPING BURDEN[1]

21 CFR Section	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Response	Total Hours
516.141	30	2	60	0.5	30
516.165	10	2	20	1	20
Total					50

[1]There is no capital or operating and maintenance costs associated with this collection of information.

The burden estimate for this reporting requirement was derived by our Office of Minor Use and Minor Species Animal Drug Development by extrapolating from relevant portions of the current Investigational New Animal Drug (INAD) and NADA reporting requirements for similar actions by a similar segment of the regulated industry and from previous interactions with the minor species community.

In compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3507(d)), the agency has submitted the information collection provisions of this proposed rule to OMB for review.

VII. Environmental Impact

We have carefully considered the potential environmental impacts of this rule and determined under 21 CFR 25.30(h) that this action is of a type that does not individually or cumulatively have a significant effect on the human environment. Therefore, neither an environmental assessment nor an environmental impact statement is required.

VIII. Federalism

We have analyzed this proposed rule in accordance with the principles in Executive Order 13132. We have determined that the proposed rule does not contain policies that have substantial direct effects on the States, on the relationship between the National Government and the States, or on the distribution of power and responsibilities among the various levels of government. Accordingly, we have tentatively concluded that the proposed rule does not contain policies that have federalism implications as defined in the Executive order and, consequently, a federalism summary impact statement has not been prepared.

IX. Comments

You may submit to the Division of Dockets Management (see **ADDRESSES**) written or electronic comments regarding this document. Please submit a single copy of electronic comments or two paper copies of any mailed comments, except that individuals may submit one paper copy. Identify your comments with the docket number found in brackets in the heading of this document. You may view received comments in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday.

List of Subjects

21 CFR Part 20

Confidential business information, Courts, Freedom of information, Government employees.

21 CFR Part 25

Environmental impact statements, Foreign relations, Reporting and recordkeeping requirements.

21 CFR Part 201

Drugs, Labeling, Reporting and recordkeeping requirements.

21 CFR Part 202

Advertising, Prescription drugs.

21 CFR Part 207

Drugs, Reporting and recordkeeping requirements.

21 CFR Part 225

Animal drugs, Animal feeds, Labeling, Packaging and containers, Reporting and recordkeeping requirements.

21 CFR Part 226

Animal drugs, Animal feeds, Labeling, Packaging and containers, Reporting and recordkeeping requirements.

21 CFR Part 500

Animal drugs, Animal feeds, Cancer, Labeling, Packaging and containers, Polychlorinated biphenyls (PCBs).

21 CFR Part 510

Administrative practice and procedure, Animal drugs, Labeling, Reporting and recordkeeping requirements.

21 CFR Part 511

Animal drugs, Medical research, Reporting and recordkeeping requirements.

21 CFR Part 515

Administrative practice and procedure, Animal drugs, Confidential business information, Reporting and recordkeeping requirements.

21 CFR Part 516

Administrative practice and procedure, Animal drugs, Confidential business information, Reporting and recordkeeping requirements.

21 CFR Part 558

Animal drugs, Animal feeds.

21 CFR Part 589

Animal feeds, Animal foods, Food additives.

Therefore, under the Federal Food, Drug, and Cosmetic Act and under authority delegated to the Commissioner of Food and Drugs, it is proposed that 21 CFR Chapter I be amended as follows:

PART 20—PUBLIC INFORMATION

1. The authority citation for 21 CFR part 20 continues to read as follows:

Authority: 5 U.S.C. 552; 18 U.S.C. 1905; 19 U.S.C. 2531–2582; 21 U.S.C. 321–393, 1401–1403; 42 U.S.C. 241, 242, 242a, 242l, 242n, 243, 262, 263, 263b–263n, 264, 265, 300u–300u–5, 300aa–1.

2. Amend § 20.100 by adding paragraph (c)(44) to read as follows:

§ 20.100 Applicability; cross-reference to other regulations.

* * * * *

(c) * * *

(44) Minor-species drug index listings, in § 516.171 of this chapter.

PART 25—ENVIRONMENTAL IMPACT CONSIDERATIONS

3. The authority citation for 21 CFR part 25 continues to read as follows:

Authority: 21 U.S.C. 321–393; 42 U.S.C. 262, 263b–264; 42 U.S.C. 4321, 4332; 40 CFR parts 1500–1508; E.O. 11514, 35 FR 4247, 3 CFR, 1971 Comp., p. 531–533 as amended by E.O. 11991, 42 FR 26967, 3 CFR, 1978 Comp., p. 123–124 and E.O. 12114, 44 FR 1957, 3 CFR, 1980 Comp., p. 356–360.

4. Amend § 25.33 by revising paragraphs (a) introductory text, (c), (d) introductory text, and (g) to read as follows:

§ 25.33 Animal drugs.

* * * * *

(a) Action on an NADA, abbreviated application, request for determination of eligibility for indexing, a supplement to such applications, or a modification of an index listing, if the action does not increase the use of the drug. Actions to which this categorical exclusion applies may include:

* * * * *

(c) Action on an NADA, abbreviated application, request for determination of eligibility for indexing, a supplement to such applications, or a modification of an index listing, for substances that occur naturally in the environment when the action does not alter significantly the concentration or distribution of the substance, its metabolites, or degradation products in the environment.

(d) Action on an NADA, abbreviated application, request for determination of eligibility for indexing, a supplement to such applications, or a modification of an index listing, for:

* * * * *

(g) Withdrawal of approval of an NADA or an abbreviated NADA or removal of a new animal drug from the index.

* * * * *

PART 201—LABELING

5. The authority citation for 21 CFR part 201 continues to read as follows:

Authority: 21 U.S.C. 321, 331, 351, 352, 353, 355, 358, 360, 360b, 360gg–360ss, 371, 374, 379e; 42 U.S.C. 216, 241, 262, 264.

6. Amend § 201.105 by revising paragraphs (c)(2) and (d)(1) to read as follows:

§ 201.105 Veterinary drugs.

* * * * *

(c) * * *

(2) If the article is subject to section 512 or 572 of the act, the labeling bearing such information is the labeling authorized by the approved new animal drug application or contained in the index listing: *Provided, however*, That the information required by paragraph (c)(1) of this section may be omitted from the dispensing package if, but only if, the article is a drug for which directions, hazards, warnings, and use information are commonly known to veterinarians licensed by law to administer the drug. Upon written request, stating reasonable grounds therefore, the Commissioner will offer an opinion on a proposal to omit such information from the dispensing package under this proviso.

(d) * * *

(1) Adequate information for such use, including indications, effects, dosages, routes, methods, and frequency and duration of administration, and any relevant warnings, hazards, contraindications, side effects, and precautions, and including information relevant to compliance with the new animal drug provisions of the act, under which veterinarians licensed by law to administer the drug can use the drug safely and for the purposes for which it is intended, including all conditions for which it is advertised or represented; and if the article is subject to section 512 or 572 of the act, the parts of the labeling providing such information are the same in language and emphasis as labeling approved, permitted, or indexed under the provisions of section 512 or 572, and any other parts of the labeling are consistent with and not contrary to such approved, permitted, or indexed labeling; and

* * * * *

7. Amend § 201.115 by revising paragraphs (a) and (b) to read as follows:

§ 201.115 New drugs or new animal drugs.

* * * * *

(a) To the extent to which such exemption is claimed in an approved application with respect to such drug under section 505 or 512 of the act or an index listing with respect to such drug under section 572 of the act; or

(b) If no application under section 505 of the act is approved with respect to such drug but it complies with section 505(i), 512, or 572 of the act and regulations thereunder.

* * * * *

8. Amend § 201.122 by revising paragraphs (a), (b), and (c) to read as follows:

§ 201.122 Drugs for processing, repacking, or manufacturing.

* * * * *

(a) An approved new drug application or new animal drug application or a new animal drug index listing covers the production and delivery of the drug substance to the application or index listing holder by persons named in the application or in the request for determination of eligibility for indexing, and, for a new drug substance, the export of it by such persons under § 314.410 of this chapter; or

(b) If no application is approved with respect to such new drug or new animal drug and it is not listed in the index, the label statement "Caution: For manufacturing, processing, or repacking" is immediately supplemented by the words "in the preparation of a new drug or new animal drug limited by Federal law to investigational use", and the delivery is made for use only in the manufacture of such new drug or new animal drug limited to investigational use as provided in part 312 or § 511.1 or § 516.125 of this chapter; or

(c) A new drug application or new animal drug application or a request for addition to the index covering the use of the drug substance in the production and marketing of a finished drug product has been submitted but not yet approved, disapproved, granted, or denied, the bulk drug is not exported, and the finished drug product is not further distributed after it is manufactured until after the new drug application or new animal drug application is approved or the request for addition to the index is granted.

PART 202—PRESCRIPTION DRUG ADVERTISING

9. The authority citation for 21 CFR part 202 continues to read as follows:

Authority: 21 U.S.C. 321, 331, 352, 355, 360b, 371.

10. Amend § 202.1 by revising paragraph (e)(4)(i)(*a*) to read as follows:

§ 202.1 Prescription-drug advertisements.

* * * * *

(e) * * *

(4) *Substance of information to be included in brief summary.* (i)(*a*) An advertisement for a prescription drug covered by a new-drug application approved pursuant to section 505 of the act after October 10, 1962, or a prescription drug covered by a new animal drug application approved pursuant to section 512 of the act after August 1, 1969, or any approved supplement thereto, or for a prescription drug listed in the index pursuant to section 572 of the act, or any granted modification thereto, shall not recommend or suggest any use that is not in the labeling accepted in such approved new-drug application or supplement, new animal drug application or supplement, or new animal drug index listing or modification. The advertisement shall present information from labeling required, approved, permitted, or granted in a new-drug or new animal drug application or new animal drug index listing relating to each specific side effect and contraindication in such labeling that relates to the uses of the advertised drug dosage form(s) or shall otherwise conform to the provisions of paragraph (e)(3)(iii) of this section.

* * * * *

PART 207—REGISTRATION OF PRODUCERS OF DRUGS AND LISTING OF DRUGS IN COMMERCIAL DISTRIBUTION

11. The authority citation for 21 CFR part 207 continues to read as follows:

Authority: 21 U.S.C. 321, 331, 351, 352, 355, 360, 360b, 371, 374, 381, 393; 42 U.S.C. 262, 264, 271.

12. Amend § 207.21 by revising the second sentence in paragraph (a) to read as follows:

§ 207.21 Times for registration and drug listing.

(a) * * * If the owner or operator of the establishment has not previously entered into such an operation, the owner or operator shall register within 5 days after submitting a new drug application, abbreviated new drug application, new animal drug application, abbreviated new animal drug application, request for addition to the index, medicated feed mill license application, or a biologics license application. * * *

* * * * *

13. Amend § 207.35 by revising paragraph (b)(3)(v) to read as follows:

§ 207.35 Notification of registrant; drug establishment registration number and drug listing number.

* * * * *

(b) * * *

(3) * * *

(v) The placing of the assigned NDC number on a label or in other labeling does not require the submission of a supplemental new drug application, supplemental new animal drug application, or a modification to an index listing.

* * * * *

PART 225—CURRENT GOOD MANUFACTURING PRACTICE FOR MEDICATED FEEDS

14. The authority citation for 21 CFR part 225 continues to read as follows:

Authority: 21 U.S.C. 351, 352, 360b, 371, 374.

15. Amend § 225.1 by revising paragraph (c) to read as follows:

§ 225.1 Current good manufacturing practice.

* * * * *

(c) In addition to the recordkeeping requirements in this part, Type B and Type C medicated feeds made from Type A articles or Type B feeds under approved NADAs or indexed listings and a medicated feed mill license are subject to the requirements of § 510.301 of this chapter.

16. Amend § 225.35 by revising paragraph (b) to read as follows:

§ 225.35 Use of work areas, equipment, and storage areas for other manufacturing and storage purpose.

* * * * *

(b) Work areas and equipment used for the manufacture or storage of medicated feeds or components thereof shall not be used for, and shall be physically separated from, work areas and equipment used for the manufacture of fertilizers, herbicides, insecticides, fungicides, rodenticides, and other pesticides unless such articles are approved drugs, indexed drugs, or approved food additives intended for use in the manufacture of medicated feed.

17. Revise § 225.135 to read as follows:

§ 225.135 Work and storage areas.

Work areas and equipment used for the production or storage of medicated feeds or components thereof shall not be used for, and shall be physically separated from, work areas and equipment used for the manufacture and storage of fertilizers, herbicides, insecticides, fungicides, rodenticides, and other pesticides unless such articles are approved or index listed for use in the manufacture of animal feed.

PART 226—CURRENT GOOD MANUFACTURING PRACTICE FOR TYPE A MEDICATED ARTICLES

18. The authority citation for 21 CFR part 226 continues to read as follows:

Authority: 21 U.S.C. 351, 352, 360b, 371, 374.

19. Amend § 226.1 by adding a second sentence to paragraph (b) to read as follows:

§ 226.1 Current good manufacturing practice.

* * * * *

(b) * * * Similarly, Type A medicated articles listed in the index are subject to the requirements of § 516.165 of this chapter.

PART 500—GENERAL

20. The authority citation for 21 CFR part 500 continues to read as follows:

Authority: 21 U.S.C. 321, 331, 342, 343, 348, 351, 352, 353, 360b, 371.

21. Amend § 500.25 by revising paragraph (c) to read as follows:

§ 500.25 Anthelmintic drugs for use in animals.

* * * * *

(c) For drugs covered by approved new animal drug applications, the labeling revisions required for compliance with this section may be placed into effect without prior approval, as provided for in § 514.8 (d) and (e) of this chapter. For drugs listed in the index, the labeling revisions required for compliance with this section may be placed into effect without prior approval, as provided for in § 516.161(b)(1) of this chapter.

* * * * *

22. Amend § 500.26 by revising paragraph (b) and the second sentence in paragraph (c) to read as follows:

§ 500.26 Timed-release dosage form drugs.

* * * * *

(b) Timed-release dosage form animal drugs that are introduced into interstate commerce are deemed to be adulterated within the meaning of section 501(a)(5) of the act and subject to regulatory action, unless such animal drug is the subject of an approved new animal drug application, or listed in the index, as required by paragraph (a) of this section.

(c) * * * A new animal drug application or index listing is required in any such case.

* * * * *

PART 510—NEW ANIMAL DRUGS

23. The authority citation for 21 CFR part 510 continues to read as follows:

Authority: 21 U.S.C. 321, 331, 351, 352, 353, 360b, 371, 379e.

24. Amend § 510.301 by revising the introductory text, paragraph (a)(2), and the second sentence in paragraph (b)(1) to read as follows:

§ 510.301 Records and reports concerning experience with animal feeds bearing or containing new animal drugs for which an approved medicated feed mill license application is in effect.

Records and reports of clinical and other experience with the new animal drug will be maintained and reported, appropriately identified with the new animal drug application(s) or index listing(s) to which they relate, to the Center for Veterinary Medicine in duplicate in accordance with the following:

(a) * * *

(2) Information concerning any bacteriological or any significant chemical, physical, or other change or deterioration in the drug, or any failure of one or more distributed batches of the drug to meet the specifications established for it in the new animal drug application or request for determination of eligibility for indexing.

(b) * * *

(1) * * * *Unexpected* as used in this paragraph refers to conditions or developments not previously submitted as part of the new animal drug application or in support of the index listing or not encountered during clinical trials of the drug, or conditions or developments occurring at a rate higher than shown by information previously submitted as part of the new animal drug application or in support of the index listing or at a rate higher than encountered during such clinical trials.

* * * * *

25. Amend § 510.305 by revising paragraph (b) to read as follows:

§ 510.305 Maintenance of copies of approved medicated feed mill licenses to manufacture animal feed bearing or containing new animal drugs.

* * * * *

(b) Approved or index listed labeling for each Type B and/or Type C feed being manufactured on the premises of the manufacturing establishment or the facility where the feed labels are generated.

26. Amend § 510.455 by revising paragraphs (b) and (c) to read as follows:

§ 510.455 Requirements for free-choice medicated feeds.

* * * * *

(b) *What is required for new animal drugs intended for use in free-choice feed*? Any new animal drug intended for use in free-choice feed must be approved for such use under section 512 of the Federal Food, Drug, and Cosmetic Act (the act) (21 U.S.C. 360(b)) or listed in the index under section 572 of the act (21 U.S.C. 360ccc–1). Such approvals under section 512 of the act must be:

(1) An original new animal drug application (NADA),

(2) A supplemental NADA, or

(3) An abbreviated NADA.

(c) *What are the approval requirements under section 512 of the act for new animal drugs intended for use in free-choice feed*? An approval under section 512 of the act for a Type A medicated article intended for use in free-choice feed must contain the following information:

(1) Data, or reference to data in a master file (MF), showing that the target animal consumes the new animal drug in the Type C free-choice feed in an amount that is safe and effective (consumption/effectiveness data); and

(2) Data, or reference to data in an MF, showing the relevant ranges of conditions under which the drug will be chemically and physically stable in the Type C free-choice feed under field conditions.

* * * * *

PART 511—NEW ANIMAL DRUGS FOR INVESTIGATIONAL USE

27. The authority citation for 21 CFR part 511 continues to read as follows:

Authority: 21 U.S.C. 321, 351, 352, 353, 360b, 371.

28. Amend § 511.1 by adding a paragraph (g) to read as follows:

§ 511.1 New animal drugs for investigational use exempt from section 512(a) of the act.

* * * * *

(g) *Index of legally marketed unapproved new animal drugs for minor species.* All provisions of part 511 apply to new animal drugs for investigational use in support of indexing, as described in section 572 of the act, subject to the provisions of § 516.125 of this chapter.

PART 515—MEDICATED FEED MILL LICENSE

29. The authority citation for 21 CFR part 515 continues to read as follows:

Authority: 21 U.S.C. 360b, 371.

30. Amend § 515.10 by revising paragraphs (b)(4) and (b)(7) to read as follows:

§ 515.10 Medicated feed mill license applications.

* * * * *

(b) * * *

(4) A certification that the animal feeds bearing or containing new animal drugs are manufactured and labeled in accordance with the applicable regulations published under section 512(i) of the act or in accordance with the index listing published under section 572(e)(2) of the act.

* * * * *

(7) A commitment that current approved or index listed Type B and/or Type C medicated feed labeling for each Type B and/or Type C medicated feed to be manufactured will be in the possession of the feed manufacturing facility prior to receiving the Type A medicated article containing such drug.

* * * * *

31. Amend § 515.21 by revising paragraph (a)(3) to read as follows:

§ 515.21 Refusal to approve a medicated feed mill license application.

(a) * * *

(3) The facility manufactures animal feeds bearing or containing new animal drugs in a manner that does not accord with the specifications for manufacture or labels animal feeds bearing or containing new animal drugs in a manner that does not accord with the conditions or indications of use that are published under section 512(i) or 572(e)(2) of the act.

* * * * *

PART 516—NEW ANIMAL DRUGS FOR MINOR USE AND MINOR SPECIES

32. Part 516 is amended by adding subpart C, consisting of §§ 516.111 to 516.171, to read as follows:

Subpart C—Index of Legally Marketed Unapproved New Animal Drugs for Minor Species

Sec.

Authority: 21 U.S.C. 360ccc–1, 371.

Subpart C—Index of Legally Marketed Unapproved New Animal Drugs for Minor Species

§ 516.111 Scope of this subpart.

This subpart implements section 572 of the act and provides standards and procedures to establish an index of legally marketed unapproved new animal drugs. This subpart applies only to minor species and not to minor use in major species. This index is only available for new animal drugs intended for use in a minor species for which there is a reasonable certainty that the animal or edible products from the animal will not be consumed by humans or food-producing animals and for new animal drugs intended for use only in a hatchery, tank, pond, or other similar contained man-made structure in an early, non-food life stage of a food-producing minor species, where safety for humans is demonstrated in accordance with the standard of section 512(d) of the act (including, for an antimicrobial new animal drug, with respect to antimicrobial resistance). The index shall not include a new animal drug that is contained in, or a product of, a transgenic animal. Among its topics, this subpart sets forth the standards and procedures for:

(a) Investigational exemptions for indexing purposes;

(b) Submissions to FDA of requests for determination of eligibility of a new animal drug for indexing;

(c) Establishment and operation of expert panels;

(d) Submissions to FDA of requests for addition of a new animal drug to the index;

(e) Modifications to index listings;

(f) Publication of the index; and

(g) Records and reports.

§ 516.115 Definitions.

(a) The following definitions of terms apply only in the context of subpart C of this part:

Director means the Director of the Office of Minor Use and Minor Species Animal Drug Development of the FDA Center for Veterinary Medicine.

Holder means the requestor of an index listing after the request is granted and the new animal drug is added to the index.

Index means FDA's list of legally marketed unapproved new animal drugs for minor species.

Intended use means the intended treatment, control or prevention of a disease or condition, or the intention to affect the structure or function of the body of animals within an identified species, subpopulation of a species, or collection of species.

Qualified expert panel means a panel that is composed of experts qualified by scientific training and experience to evaluate the target animal safety and effectiveness of a new animal drug under consideration for indexing.

Requestor means the person making a request for determination of eligibility for indexing or a request for addition to the index.

Transgenic animal means an animal whose genome contains a nucleotide sequence that has been intentionally modified in vitro, and the progeny of such an animal, provided that the term 'transgenic animal' does not include an animal of which the nucleotide sequence of the genome has been modified solely by selective breeding.

(b) The definitions of the following terms are given in § 514.3 of this chapter:

Adverse drug experience.
Product defect/manufacturing defect.
Serious adverse drug experience.
Unexpected adverse drug experience.

§ 516.117 Submission of correspondence under this subpart.

Unless directed otherwise by FDA, all correspondence relating to any aspect of the new animal drug indexing process described in this subpart must be addressed to the Director of the Office of Minor Use and Minor Species Animal Drug Development. The initial correspondence for a particular index listing should include the name and address of the authorized contact person. Notifications of changes in such person or changes of address of such person should be provided in a timely manner.

§ 516.119 Permanent-resident U.S. agent for foreign requestors and holders.

Every foreign requestor and holder shall name a permanent resident of the United States as their agent upon whom service of all processes, notices, orders, decisions, requirements, and other communications may be made on behalf of the requestor or holder. Notifications of changes in such agents or changes of address of agents should preferably be provided in advance, but not later than 60 days after the effective date of such changes. The permanent-resident U.S. agent may be an individual, firm, or domestic corporation and may represent any number of requestors or holders. The name and address of the permanent-resident U.S. agent shall be submitted to the Director of the Office of Minor Use and Minor Species Animal Drug Development and included in the index file.

§ 516.121 Meetings.

(a) A requestor or potential requestor is entitled to one or more meetings to discuss the requirements for indexing a new animal drug.

(b) Requests for such meetings should be in writing, be addressed to the Director, specify the participants attending on behalf of the requestor or potential requestor, and contain a proposed agenda for the meeting.

(c) Within 30 days of receiving a request for a meeting, FDA will attempt to schedule the meeting at a time agreeable to both FDA and the person making the request.

§ 516.123 Informal conferences regarding agency administrative actions.

(a) Should FDA make an initial decision denying a request for determination of eligibility for indexing, terminating an investigational exemption, determining that a qualified expert panel does not meet the selection criteria, denying a request for addition to the index, or removing a new animal drug from the index, FDA will give written notice that specifies the grounds for the initial decision and provides an opportunity for an informal conference for review of the decision.

(b) The written notice will include information for scheduling the informal conference and state that a written request for a conference must be made within 30 calendar days of the date FDA sends its notice.

(c) Within 30 days of receiving a request for an informal conference, FDA will attempt to schedule the meeting at

a time agreeable to both FDA and the person making the request.

(d) Such an informal conference will be conducted by a presiding officer who will be the Director of the Center for Veterinary Medicine or his or her designee, excluding the Director of the Office of Minor Use and Minor Species Animal Drug Development and other persons significantly involved in the initial decision.

(e) The person requesting an informal conference must provide a written response to FDA's initial decision at least 2 weeks prior to the date of the scheduled meeting. Generally, this written response would be attached to the request for an informal conference. At the option of the person requesting an informal conference, such written response to FDA's initial decision may act in lieu of a face-to-face meeting. In this case, the informal conference will consist of a review by the presiding officer of the submitted written response.

(f) The purpose of an informal conference is to discuss scientific and factual issues. It will involve a discussion of FDA's initial decision and any written response to that decision.

(g) Internal agency review of a decision must be based on the information in the administrative file. If the person requesting an informal conference presents new information not in the file, the matter will be returned to the appropriate lower level in the agency for reevaluation based on the new information.

(h) Informal conferences under this part are not subject to the separation of functions rules in § 10.55 of this chapter.

(i) The rules of evidence do not apply to informal conferences. No motions or objections relating to the admissibility of information and views will be made or considered, but any party to the conference may comment upon or rebut all such data, information and views.

(j) The presiding officer will prepare a written summary of the informal conference and share it with the parties to the conference.

(k) The presiding officer will prepare a written report regarding the subject of the informal conference that states and describes the basis for his or her findings.

(l) The administrative record of the informal conference will consist of:

(1) The notice providing an opportunity for an informal conference and the written response to the notice.

(2) All written information and views submitted to the presiding officer at the conference or, at the discretion of the presiding officer, thereafter.

(3) The written summary of the informal conference.

(4) The presiding officer's written report.

(5) All correspondence and memoranda of any and all meetings between the participants and the presiding officer.

(m) The administrative record of the informal conference is closed to the submission of information and views at the close of the conference, unless the presiding officer specifically permits additional time for further submission.

(n) The administrative record of the informal conference specified herein constitutes the exclusive record for decision.

§ 516.125 Investigational use of minor species new animal drugs to support indexing.

(a) The investigational use of a new animal drug or animal feed bearing or containing a new animal drug intended solely for investigational use in minor species shall meet the requirements of part 511 of this chapter if the investigational use is for the purpose of:

(1) Demonstrating human food safety under section 572(a)(1)(B) of the act;

(2) Demonstrating safety with respect to individuals exposed to the new animal drug through its manufacture and use under section 572(c)(1)(F) of the act;

(3) Conducting an environmental assessment under section 572(c)(1)(E) of the act; or

(4) Obtaining approval of a new animal drug application or abbreviated new animal drug application under section 512(b) of the act.

(b) Correspondence and information associated with investigations described in paragraph (a) of this section shall not be sent to the Director, OMUMS, but shall be submitted to FDA in accordance with the provisions of part 511 of this chapter.

(c) The investigational use of a new animal drug or animal feed bearing or containing a new animal drug intended solely for investigational use in minor species, other than for an investigational use described in paragraph (a) of this section, shall meet the requirements of this section. For such investigations, all provisions of part 511 of this chapter apply with the following modifications:

(1) Under § 511.1(a)(1) of this chapter, the label statement is as follows:

"*Caution.* Contains a new animal drug for investigational use only in laboratory animals or for tests in vitro in support of index listing. Not for use in humans."

(2) Under § 511.1(b)(1) of this chapter, the label statement is as follows:

"*Caution.* Contains a new animal drug for use only in investigational animals in clinical trials in support of index listing. Not for use in humans. Edible products of investigational animals are not to be used for food for humans or other animals unless authorization has been granted by the U.S. Food and Drug Administration or by the U.S. Department of Agriculture."

(3) Under § 511.1(b)(4) of this chapter, the notice is titled "Notice of Claimed Investigational Exemption for a New Animal Drug for Index Listing" and is submitted in duplicate to the Director.

(4) Under § 511.1(c)(3) of this chapter, if an investigator is determined to be ineligible to receive new animal drugs, each "Notice of Claimed Investigational Exemption for a New Animal Drug for Index Listing" and each request for indexing shall be examined with respect to the reliability of information submitted by the investigator.

(5) Under § 511.1(c)(4) and (d)(2) of this chapter, with respect to termination of exemptions, the sponsor of an investigation shall not be granted an opportunity for a regulatory hearing before FDA pursuant to part 16 of this chapter. Instead, the sponsor shall have an opportunity for an informal conference as described in § 516.123.

(6) Under § 511.1(c)(5) of this chapter, if the Commissioner of Food and Drugs determines, after the unreliable data submitted by the investigator are eliminated from consideration, that the data remaining are such that a request for addition to the index would have been denied, FDA will remove the new animal drug from the index in accordance with § 516.167.

(d) The investigational use of a new animal drug or animal feed bearing or containing a new animal drug subject to paragraph (c) of this section shall not be subject to the good laboratory practice requirements in part 58 of this chapter.

(e) Correspondence and information associated with investigations described in paragraph (c) of this section shall be sent to the Director of the Office of Minor Use and Minor Species in accordance with the provisions of this section.

§ 516.129 Content and format of a request for determination of eligibility for indexing.

(a) Each request for determination of eligibility:

(1) May involve only one drug (or one combination of drugs) in one dosage form;

(2) May not involve a new animal drug that is contained in or a product of a transgenic animal;

(3) May not involve the same drug in the same dosage form for the same intended use as a drug that is already

approved or conditionally approved; and

(4) Must be submitted separately.

(b) A request for determination of eligibility for indexing may involve multiple intended uses and/or multiple minor species. However, if a request for determination of eligibility for indexing that contains multiple intended uses and/or multiple minor species cannot be granted in any part, the entire request will be denied.

(c) A requestor must submit two copies of a dated request signed by the authorized contact person for determination of eligibility for indexing that contains the following:

(1) Identification of the minor species or groups of minor species for which the new animal drug is intended;

(2) Information regarding drug components and composition;

(3) A statement of the intended use(s) of the new animal drug in the identified minor species or groups of minor species;

(4) A statement of the proposed conditions of use associated with the stated intended use(s) of the new animal drug, including the proposed dosage, route of administration, contraindications, warnings, and any other significant limitations associated with the intended use(s) of the new animal drug;

(5) A brief discussion of the need for the new animal drug for the intended use(s);

(6) An estimate of the anticipated annual distribution of the new animal drug, in terms of the total quantity of active ingredient, after indexing;

(7) Information to establish that the new animal drug is intended for use:

(i) In a minor species for which there is a reasonable certainty that the animal or edible products from the animal will not be consumed by humans or food-producing animals; or

(ii) In a hatchery, tank, pond, or other similar contained man-made structure in (which includes on) an early, non-food life stage of a food-producing minor species, and information to demonstrate food safety in accordance with the standards of section 512(d) of the act and § 514.111 of this chapter (including, for an antimicrobial new animal drug, with respect to antimicrobial resistance);

(8) A description of the methods used in, and the facilities and controls used for, the manufacture, processing and packing of the new animal drug sufficient to demonstrate that the requestor has established appropriate specifications for the manufacture and control of the new animal drug and that the requestor has an understanding of current good manufacturing practices;

(9) Either a claim for categorical exclusion under § 25.30 or § 25.33 of this chapter or an environmental assessment under § 25.40 of this chapter;

(10) Information sufficient to support the conclusion that the new animal drug is safe under section 512(d) of the act with respect to individuals exposed to the new animal drug through its manufacture and use; and

(11) The name and address of the contact person or permanent-resident U.S. agent.

§ 516.131 Refuse to file a request for determination of eligibility for indexing.

(a) If a request for determination of eligibility for indexing contains all of the information required by § 516.129, FDA shall file it, and the filing date shall be the date FDA receives the request.

(b) If a request for a determination of eligibility lacks any of the information required by § 516.129, FDA will not file it, but will inform the requestor in writing within 30 days of receiving the request as to what information is lacking.

§ 516.133 Denying a request for determination of eligibility for indexing.

(a) FDA will deny a request for determination of eligibility for indexing if it determines upon the basis of the request evaluated together with any other information before it with respect to the new animal drug that:

(1) The same drug in the same dosage form for the same intended use is already approved or conditionally approved;

(2) There is insufficient information to demonstrate that the new animal drug is intended for use:

(i) In a minor species for which there is a reasonable certainty that the animal or edible products from the animal will not be consumed by humans or food-producing animals, or

(ii) In a hatchery, tank, pond, or other similar contained man-made structure in (which includes on) an early, non-food life stage of a food-producing minor species, and there is insufficient evidence to demonstrate safety for humans in accordance with the standard of section 512(d) of the act and § 514.111 of this chapter (including, for an antimicrobial new animal drug, with respect to antimicrobial resistance);

(3) The new animal drug is contained in or is a product of a transgenic animal;

(4) There is insufficient information to demonstrate that the requestor has established appropriate specifications for the manufacture and control of the new animal drug and that the requestor has an understanding of current good manufacturing practices;

(5) The requester fails to submit an adequate environmental assessment under § 25.40 of this chapter or fails to provide sufficient information to establish that the requested action is subject to categorical exclusion under § 25.30 or § 25.33 of this chapter;

(6) There is insufficient information to determine that the new animal drug is safe with respect to individuals exposed to the new animal drug through its manufacture or use; or

(7) The request for determination of eligibility for indexing fails to contain any other information required under the provisions of § 516.129.

(b) FDA may deny a request for determination of eligibility for indexing if it contains any untrue statement of a material fact or omits material information.

(c) When a request for determination of eligibility for indexing is denied, FDA will notify the requestor in accordance with § 516.137.

§ 516.135 Granting a request for determination of eligibility for indexing.

(a) FDA will grant the request for determination of eligibility for indexing if none of the reasons described in § 516.133 for denying such a request applies.

(b) When a request for determination of eligibility for indexing is granted, FDA will notify the requestor in accordance with § 516.137.

§ 516.137 Notification of decision regarding eligibility for indexing.

(a) Within 90 days after the filing of a request for a determination of eligibility for indexing based on § 516.129(c)(7)(i), or 180 days for a request based on § 516.129(c)(7)(ii), FDA shall grant or deny the request, and notify the requestor of FDA's decision in writing.

(b) If FDA denies the request, FDA shall provide due notice and an opportunity for an informal conference as described in § 516.123 regarding its decision. A decision of FDA to deny a request for determination of eligibility for indexing following an informal conference shall constitute final agency action subject to judicial review.

§ 516.141 Qualified expert panels.

(a) *Establishment of a qualified expert panel.* Establishing a qualified expert panel is the first step in the process of requesting the addition of a new animal drug to the index. A qualified expert panel may not be established until FDA

has determined that the new animal drug is eligible for indexing. The requestor must choose members for the qualified expert panel in accordance with selection criteria listed in paragraph (b) of this section and submit information about these proposed members to FDA. FDA must determine whether the proposed qualified expert panel meets the selection criteria prior to the panel beginning its work. Qualified expert panels operate external to FDA and are not subject to the Federal Advisory Committee Act, as amended, 5 U.S.C. App.

(b) *Criteria for the selection of a qualified expert panel.* (1) A qualified expert panel member must be an expert qualified by training and experience to evaluate the target animal safety and effectiveness of the new animal drug under consideration.

(2) A qualified expert panel member must certify that he or she has a working knowledge of section 572 of the act (the indexing provisions of the statute) and this subpart, and that he or she has also read and understood a clear written statement provided by the requestor stating his or her duties and responsibilities with respect to reviewing the new animal drug proposed for addition to the index.

(3) A qualified expert panel member may not be an FDA employee.

(4) A qualified expert panel must have at least three members.

(5) A qualified expert panel must have members with a range of expertise such that the panel, as a whole, is qualified by training and experience to evaluate the target animal safety and effectiveness of the new animal drug under consideration.

(6) Unless FDA makes a determination to allow participation notwithstanding an otherwise disqualifying financial interest, a qualified expert panel member must not have a conflict of interest or the appearance of a conflict of interest, as described in paragraph (g) of this section.

(c) *Requestor responsibilities.* (1) The requestor must:

(i) Choose members for the qualified expert panel in accordance with selection criteria listed in paragraph (b) of this section.

(ii) Provide each potential expert panel member a copy of section 572 of the act (the indexing provisions of the statute) and this subpart and obtain certification that he or she has a working knowledge of the information.

(iii) Provide each potential expert panel member a written statement describing the purpose and scope of his or her participation on the qualified expert panel and obtain certification that he or she has read and understood the information. The written statement should describe the duties and responsibilities of qualified expert panels and their members established by paragraphs (e) and (f) of this section, including the need to prepare a written report under § 516.143.

(iv) Obtain information from each potential expert panel member demonstrating that he or she is qualified by training and experience to evaluate the target animal safety and effectiveness of the new animal drug under consideration. This information can be obtained from a comprehensive curriculum vitae or similar document.

(v) Notify each potential expert panel member that he or she must submit information relating to potential conflict of interest directly to FDA in a timely manner, as required in paragraph (e)(6) of this section.

(2) The requestor must submit, in writing, the names and addresses of the proposed qualified expert panel members and sufficient information about each proposed member for FDA to determine whether the panel meets the selection criteria listed in paragraphs (b)(1) through (b)(5) of this section.

(3) After FDA has determined that the qualified expert panel meets the selection criteria, the requestor must provide to the panel all information known by the requestor that is relevant to a determination of the target animal safety and the effectiveness of the new animal drug at issue. In addition, the requestor must notify FDA of the name of the qualified expert panel leader.

(4) The requestor must immediately notify FDA if it believes a qualified expert panel member no longer meets the selection criteria listed in paragraph (b) of this section or is otherwise not in compliance with the requirements of this section.

(5) If a qualified expert panel member cannot complete the review for which he or she was selected, the requestor must either choose a replacement or justify the continued work of the panel in the absence of the lost panelist. In either case, the requestor must submit sufficient information for FDA to determine whether the proposed revised qualified expert panel meets the selection criteria listed in paragraphs (b)(1) through (b)(5) of this section.

(6) The requestor must keep copies of all information provided to, or received from, qualified expert panel members, including the written report, for 2 years after the completion of the report, or the product is added to the index, whichever occurs later, and make them available to a duly authorized employee of the agency at all reasonable times.

(d) *FDA responsibilities.* (1) FDA will determine whether the requestor's proposed qualified expert panel meets the selection criteria listed in paragraph (b) of this section. FDA will expeditiously inform the requestor, in writing, of its determination. If FDA determines that the qualified expert panel does not meet the selection criteria, FDA will provide due notice and an opportunity for an informal conference as described in § 516.123. A determination by FDA that a proposed qualified expert panel does not meet the selection criteria following an informal conference shall constitute final agency action subject to judicial review.

(2) If FDA determines that a qualified expert panel no longer meets the selection criteria listed in paragraph (b) of this section or that the panel or its members are not in compliance with the requirements of this section, the agency will expeditiously inform the requestor, in writing, of this determination and provide due notice and an opportunity for an informal conference as described in § 516.123. A determination by FDA, following an informal conference, that a qualified expert panel no longer meets the selection criteria listed in paragraph (b) of this section or that the panel or its members are not in compliance with the requirements of this section shall constitute final agency action subject to judicial review.

(e) *Responsibilities of a qualified expert panel member.* A qualified expert panel member must do the following:

(1) Continue to meet all selection criteria described in paragraph (b) of this section.

(2) Act in accordance with generally accepted professional and ethical business practices.

(3) Review all information relevant to a determination of the target animal safety and effectiveness of the new animal drug provided by the requestor. The panel should also consider all relevant information otherwise known by the panel members, including anecdotal information.

(4) Participate in the preparation of the written report of the findings of the qualified expert panel, described in § 516.143.

(5) Sign, or otherwise approve in writing, the written report. Such signature or other written approval will serve as certification that the written report meets the requirements of the written report in § 516.143.

(6) Provide the information relating to potential conflict of interest described in paragraph (g) of this section to FDA for its consideration. Such information

should be submitted directly to the Director when notified by the requestor.

(7) Immediately notify the requestor and FDA of any change in conflict of interest status.

(8) Certify at the time of submission of the written report that there has been no change in conflict of interest status, or identify and document to FDA any such change.

(f) *Additional responsibilities of a qualified expert panel leader.* (1) The qualified expert panel leader must ensure that the activities of the panel are performed efficiently and in accordance with generally accepted professional and ethical business practices.

(2) The qualified expert panel leader serves as the principal point of contact between representatives of the agency and the panel.

(3) The qualified expert panel leader is responsible for submitting the written report and all notes or minutes relating to panel deliberations to the requestor.

(4) The qualified expert panel leader must maintain a copy of the written report and all notes or minutes relating to panel deliberations that are submitted to the requestor for 2 years after the report is submitted. Such records must be made available to a duly authorized employee of the agency for inspection at all reasonable times.

(g) *Prevention of conflicts of interest.* (1) For the purposes of this subpart, FDA will consider a conflict of interest to be any financial or other interest that could impair a person's objectivity in serving on the qualified expert panel or could create an unfair competitive advantage for a person or organization.

(2) Factors relevant to whether there is a conflict of interest or the appearance of a conflict of interest include whether the qualified expert panel member, their spouse, their minor children, their general partners, or any organizations in which they serve as an officer, director, trustee, general partner or employee:

(i) Is currently receiving or seeking funding from the requestor through a contract or research grant (either directly or indirectly through another entity, such as a university).

(ii) Has any employment, contractual, or other financial arrangement with the requestor other than receiving a reasonable fee for serving as a member of the qualified expert panel.

(iii) Has any ownership or financial interest in any drug, drug manufacturer, or drug distributor which will benefit from either a favorable or unfavorable evaluation or opinion.

(iv) Has any ownership or financial interest in the new animal drug being reviewed by the qualified expert panel.

(v) Has participated in the design, manufacture, or distribution of any drug that will benefit from either a favorable or unfavorable opinion of the qualified expert panel.

(vi) Has provided within 1 year any consultative services regarding the new animal drug being reviewed by the qualified expert panel.

(vii) Has entered into an agreement in which fees charged or accepted are contingent upon the panel member making a favorable evaluation or opinion.

(viii) Receives payment for services related to preparing information the requestor presents to the qualified expert panel, other than for services related to the written report described in § 516.143.

(3) To permit FDA to make a decision regarding potential conflict of interest, a potential qualified expert panel member must submit to the Director of the Office of Minor Use and Minor Species the following information relating to themselves, their spouse, their minor children, their general partners, or any organizations in which they serve as an officer, director, trustee, general partner or employee, regarding the following issues to the extent that they are, in any way, relevant to the subject of the review of the qualified expert panel:

(i) Investments (for example, stocks, bonds, retirement plans, trusts, partnerships, sector funds, etc.), including for each the following: Name of the firm, type of investment, owner (self, spouse, etc.), number of shares / current value.

(ii) Employment (full or part time, current or under negotiation), including for each the following: Name of the firm, relationship (self, spouse, etc.), position in firm, date employment or negotiation began.

(iii) Consultant/advisor (current or under negotiation), including for each the following: Name of the firm, topic/issue, amount received, date initiated.

(iv) Contracts, grants, Cooperation Research and Development Agreement (CRADAs) (current or under negotiation), including for each the following: Type of agreement, product under study and indications, amount of remuneration (institution/self), time period, sponsor (government, firm, institution, individual), role of the person (site investigator, principal investigator, co-investigator, partner, no involvement, other), awardee.

(v) Patents/royalties/trademarks, including for each the following: Description, name of firm involved, income received.

(vi) Expert witness (last 12 months or under negotiation), including for each the following: For or against, name of firm, issue, amount received.

(vii) Speaking/writing (last 12 months or under negotiation), including for each the following: Firm, topic/issue, amount received (honorarium/travel), date.

(viii) Whether the potential qualified expert panel member, their spouse, their minor children, their general partners or any organizations in which they serve as an officer, director, trustee, general partner or employee, have had, at any time in the past, involvement of the kind noted in paragraph (g)(3)(i) through (g)(3)(vii) of this section with respect to the animal drug that is the subject of the qualified expert panel review.

(ix) Whether there are any other involvements (other kinds of relationships) that would give the appearance of a conflict of interest which have not been described in paragraph (g)(3)(i) through (g)(3)(viii) of this section.

(x) In all cases, a response of "no," "none," or "not applicable" is satisfactory when there is no relevant information to submit.

(xi) A certification statement signed by the potential qualified expert panel member to the effect that all information submitted is true and complete to the best of their knowledge, that they have read and understood their obligations as an expert panel member, and that they will notify FDA and the requestor of any change in their conflict of interest status.

(4) The fact that a qualified expert panel member receives a reasonable fee for services as a member of the qualified expert panel, provided that the fee is no more than commensurate with the value of the time that the member devotes to the review process, does not constitute a conflict of interest or the appearance of a conflict of interest.

§ 516.143 Written report.

The written report required in § 516.145(b)(3) shall:

(a) Be written in English by a qualified expert panel meeting the requirements of § 516.141;

(b) Describe the panel's evaluation of all available target animal safety and effectiveness information relevant to the proposed use of the new animal drug, including anecdotal information;

(c) For all information considered, including anecdotal information, include either a citation to published literature or a summary of the information;

(d) State the panel's opinion regarding whether the benefits of using the new animal drug for the proposed use in a minor species outweigh its risks to the target animal, taking into account the

harm being caused by the absence of an approved or conditionally-approved new animal drug for the minor species in question;

(e) Be signed, or otherwise approved in writing, by all panel members, in accordance with § 516.141; and

(f) If the panel unanimously concludes that the benefits of using the new animal drug for the proposed use in a minor species outweigh its risks to the target animal, taking into account the harm being caused by the absence of an approved or conditionally-approved new animal drug for the minor species in question, the written report shall:

(1) Provide draft labeling that includes all conditions of use and limitations of use of the new animal drug deemed necessary by the panel to assure that the benefits of use of the new animal drug outweigh the risks, or provide narrative information from which such labeling can be written by the requestor; and

(2) Include a recommendation regarding whether the new animal drug should be limited to use under the professional supervision of a licensed veterinarian.

§ 516.145 Content and format of a request for addition to the index.

(a) A requestor may request addition of a new animal drug to the index only after the new animal drug has been granted eligibility for indexing.

(b) A requestor shall submit two copies of a dated request signed by the authorized contact for addition of a new animal drug to the index that contains the following:

(1) A copy of FDA's determination of eligibility issued under § 516.137;

(2) A copy of FDA's written determination that the proposed qualified expert panel meets the selection criteria provided for in § 516.141(b);

(3) A written report that meets the requirements of § 516.143;

(4) A proposed index entry that contains the information described in § 516.157;

(5) Proposed labeling, including representative labeling proposed to be used for Type B and Type C medicated feeds if the drug is intended for use in the manufacture of medicated feeds;

(6) Anticipated annual distribution of the new animal drug, in terms of the total quantity of active ingredient, after indexing;

(7) A written commitment to manufacture the new animal drug and animal feeds bearing or containing such new animal drug according to current good manufacturing practices;

(8) A written commitment to label, distribute, and promote the new animal drug only in accordance with the index entry;

(9) The name and address of the contact person or permanent-resident U.S. agent; and

(10) A draft Freedom of Information summary which includes the following information:

(i) A general information section that contains the name and address of the requestor and a description of the drug, route of administration, indications, and recommended dosage.

(ii) A list of the names and affiliations of the members of the qualified expert panel, not including their addresses or other contact information.

(iii) A summary of the findings of the qualified expert panel concerning the target animal safety and effectiveness of the drug.

(iv) Citations of all publicly-available literature considered by the qualified expert panel.

(v) For an early life stage of a food-producing minor species animal, a human food safety summary.

(c) Upon specific request by FDA, the requestor shall submit the information described in § 516.141 that it submitted to the qualified expert panel. Any such information not in English should be accompanied by an English translation.

§ 516.147 Refuse to file a request for addition to the index.

(a) If a request for addition to the index contains all of the information required by § 516.145(b), FDA shall file it, and the filing date shall be the date FDA receives the request.

(b) If a request for addition to the index lacks any of the information required by § 516.145, FDA will not file it, but will inform the requestor in writing within 30 days of receiving the request as to what information is lacking.

§ 516.149 Denying a request for addition to the index.

(a) FDA will deny a request for addition to the index if it finds the following:

(1) The same drug in the same dosage form for the same intended use is already approved or conditionally approved;

(2) On the basis of new information, the new animal drug no longer meets the conditions for eligibility for indexing;

(3) The request for indexing fails to contain information required under the provisions of § 516.145;

(4) The qualified expert panel fails to meet any of the selection criteria listed in § 516.141(b);

(5) The written report of the qualified expert panel and other information available to FDA is insufficient to permit FDA to determine that the benefits of using the new animal drug for the proposed use in a minor species outweigh its risks to the target animal, taking into account the harm caused by the absence of an approved or conditionally-approved new animal drug for the minor species in question;

(6) On the basis of the report of the qualified expert panel and other information available to FDA, the benefits of using the new animal drug for the proposed use in a minor species do not outweigh its risks to the target animal, taking into account the harm caused by the absence of an approved or conditionally-approved new animal drug for the minor species in question; or

(7) The request contains any untrue statement of a material fact or omits material information.

(b) When a request for addition to the index is denied, FDA will notify the requestor in accordance with § 516.153.

§ 516.151 Granting a request for addition to the index.

(a) FDA will grant the request for addition of a new animal drug to the index if none of the reasons described in § 516.149 for denying such a request applies.

(b) When a request for addition of a new animal drug to the index is granted, FDA will notify the requestor in accordance with § 516.153.

§ 516.153 Notification of decision regarding index listing.

(a) Within 180 days after the filing of a request for addition of a new animal drug to the index, FDA shall grant or deny the request and notify the requestor of FDA's decision in writing.

(b) If FDA denies the request for addition of a new animal drug to the index, FDA shall provide due notice and an opportunity for an informal conference as described in § 516.123. A decision of FDA to deny a request to index a new animal drug following an informal conference shall constitute final agency action subject to judicial review.

§ 516.155 Labeling of indexed drugs.

(a) The labeling of an indexed drug that is found to be eligible for indexing under § 516.129(c)(7)(i) shall state, prominently and conspicuously: "*NOT APPROVED BY FDA.—Legally marketed as an FDA indexed product. Extra-label use is prohibited.*" "*This product is not to be used in animals intended for use as food for humans or other animals.*"

(b) The labeling of an indexed drug that was found to be eligible for

indexing for use in an early, non-food life stage of a food-producing minor species animal, under § 516.129(c)(7)(ii), shall state, prominently and conspicuously: "*NOT APPROVED BY FDA.—Legally marketed as an FDA indexed product. Extra-label use is prohibited.*"

(c) The labeling of an indexed drug shall contain such other information as may be prescribed in the index listing.

§ 516.157 Publication of the index and content of an index listing.

(a) FDA will make the list of indexed drugs available through the FDA Web site. A printed copy can be obtained by writing to the FDA Freedom of Information Staff or by visiting the FDA Freedom of Information Public Reading Room.

(b) The list will contain the following information for each indexed drug:

(1) The name and address of the person who holds the index listing;

(2) The name of the drug and the intended use and conditions of use for which it is indexed;

(3) Product labeling; and

(4) Conditions and any limitations that FDA deems necessary regarding use of the drug.

§ 516.161 Modifications to indexed drugs.

(a) After a drug is listed in the index, certain modifications to the index listing may be requested. Any modification of an index listing may not cause an indexed drug to be a different drug (or different combination of drugs) or a different dosage form. If such modification is requested, FDA will notify the holder that a new index listing is required for the new drug or dosage form.

(b) Modifications to the indexed drug will fall under one of three categories and must be submitted as follows:

(1) *Urgent changes.* (i) The following modifications to an indexed drug or its labeling should be made as soon as possible and a request to modify the indexed drug should be concurrently submitted:

(A) The addition to package labeling, promotional labeling, or prescription drug advertising of additional warning, contraindication, side effect, or cautionary information.

(B) The deletion from package labeling, promotional labeling, and drug advertising of false, misleading, or unsupported indications for use or claims for effectiveness.

(C) Changes in manufacturing methods or controls required to correct product or manufacturing defects that may result in serious adverse drug events.

(ii) The modifications described in paragraph (b)(1)(i) of this section must be submitted to the Director, Office of Minor Use and Minor Species Animal Drug Development in the form of a request for modification of an indexed drug, and must contain sufficient information to permit FDA to determine the need for the modification and whether the modification appropriately addresses the need.

(iii) FDA will take no action against an indexed drug or index holder solely because modifications of the kinds described in paragraph (b)(1)(i) of this section are placed into effect by the holder prior to receipt of a written notice granting the request if all the following conditions are met:

(A) A request to modify the indexed drug providing a full explanation of the basis for the modifications has been submitted, plainly marked on the mailing cover and on the request as follows: "Special indexing request—modifications being effected;"

(B) The holder specifically informs FDA of the date on which such modifications are to be effected and submits two printed copies of any revised labeling to be placed in use, and

(C) All promotional labeling and all drug advertising are promptly revised consistent with modifications made in the labeling on or within the indexed drug package.

(2) *Significant changes.* (i) The following modifications to an indexed drug or its labeling may be made only after a request has been submitted to and subsequently granted by FDA:

(A) Addition of an intended use.

(B) Addition of a species.

(C) Addition or alteration of an active ingredient.

(D) Alteration of the concentration of an active ingredient.

(E) Alteration of dose or dosage regimen.

(F) Alteration of prescription or over-the-counter status.

(ii) Each modification described in paragraph (b)(2)(i) of this section must go through the same review process as an original index listing and is subject to the same standards for review.

(iii) Each submission of a request for a modification described in paragraph (b)(2)(i) of this section should contain only one type of modification unless one modification is actually necessitated by another, such as a modification of dose necessitated by a modification of the concentration of an active ingredient. Submissions relating to addition of an intended use for an existing species or addition of a species should be submitted separately, but each such submission may include multiple additional intended uses and/or multiple additional species.

(3) *Minor changes.* All modifications other than those described in paragraphs (b)(1) and (b)(2) of this section including, but not limited to, formulation, labeling, and manufacturing methods and controls (at the same level of detail that these were described in the request for determination of eligibility for indexing) must be submitted as part of the annual indexed drug experience report or as otherwise required by § 516.165.

(c) When changes affect the index listing, it will be updated accordingly.

§ 516.163 Change in ownership of an index file.

(a) A holder may transfer ownership of a drug's index file to another person.

(1) The former owner shall submit in writing to FDA a statement that all rights in the index file have been transferred, giving the name and address of the new owner and the date of the transfer. The former owner shall also certify that a complete copy of the following, to the extent that they exist at the time of the transfer of ownership, has been provided to the new owner:

(i) The request for determination of eligibility;

(ii) The request for addition to the index;

(iii) Any modifications to the index listing;

(iv) Any records and reports under § 516.165; and

(v) All correspondence with FDA relevant to the indexed drug and its index listing.

(2) The new owner shall submit the following information in writing to FDA:

(i) The date that the change in ownership is effective;

(ii) A statement that the new owner has a complete copy of all documents listed in paragraph (a)(1) of this section to the extent that they exist at the time of the transfer of ownership;

(iii) A statement that the new owner understands and accepts the responsibilities of a holder of an indexed drug;

(iv) The name and address of a new primary contact person or permanent-resident U.S. agent; and

(v) A list of labeling changes associated with the change of ownership (e.g., a new trade name) as draft labeling, with complete final printed labeling to be submitted in the indexed drug annual report in accordance with §§ 516.161 and 516.165.

(b) Upon receiving the necessary information to support a change of ownership of a drug's index file, FDA

will update its publicly-available listing in accordance with § 516.157.

§ 516.165 Records and reports.

(a) *Scope and purpose.* (1) The recordkeeping and reporting requirements of this section apply to all holders of indexed drugs, including indexed drugs intended for use in medicated feeds.

(2) A holder is not required to report information under this section if the holder has reported the same information under § 514.80 of this chapter.

(3) The records and reports referred to in this section are in addition to those required by the current good manufacturing practice regulations in parts 211, 225, and 226 of this chapter.

(4) FDA will review the records and reports required in this section to determine, or facilitate a determination, whether there may be grounds for removing a drug from the index under section 572(f) of the act.

(b) *Recordkeeping requirements.* (1) Each holder of an indexed drug must establish and maintain complete files containing full records of all information pertinent to the safety or effectiveness of the indexed drug. Such records must include information from foreign and domestic sources.

(2) The holder must, upon request from any authorized FDA officer or employee, at all reasonable times, permit such officer or employee to have access to copy and to verify all such records.

(c) *Reporting requirements.* (1) *Three-day indexed drug field alert report.* The holder must inform the appropriate FDA District Office or local FDA resident post of any product or manufacturing defects that may result in serious adverse drug events within 3 working days of first becoming aware that such a defect may exist. The holder may initially provide this information by telephone or other electronic communication means, with prompt written follow up. The mailing cover must be plainly marked "3–Day Indexed Drug Field Alert Report."

(2) *Fifteen-day indexed drug alert report.* The holder must submit a report on each serious, unexpected adverse drug event, regardless of the source of the information. The holder must submit the report within 15 working days of first receiving the information. The mailing cover must be plainly marked "15-Day Indexed Drug Alert Report."

(3) *Annual indexed drug experience report.* The holder must submit this report every year on the anniversary date of the letter granting the request for addition of the new animal drug to the index, or within 60 days thereafter. The report must contain data and information for the full reporting period. Any previously submitted information contained in the report must be identified as such. The holder may ask FDA to change the date of submission and, after approval of such request, file such reports by the new filing date. The report must contain the following:

(i) The number of distributed units of each size, strength, or potency (e.g., 100,000 bottles of 100 5-milligram tablets; 50,000 10-milliliter vials of 5-percent solution) distributed during the reporting period. This information must be presented in two categories: quantities distributed domestically and quantities exported. This information must include any distributor-labeled product.

(ii) If the labeling has changed since the last report, include a summary of those changes and the holder's and distributor's current package labeling, including any package inserts. For large-size package labeling or large shipping cartons, submit a representative copy (e.g., a photocopy of pertinent areas of large feed bags). If the labeling has not changed since the last report, include a statement of such fact.

(iii) A summary of any changes made during the reporting period in the methods used in, and facilities and controls used for, manufacture, processing, and packing. This information must be presented in the same level of detail that it was presented in the request for determination of eligibility for indexing. Do not include changes that have already been submitted under § 516.161.

(iv) Nonclinical laboratory studies and clinical data not previously reported under this section.

(v) Adverse drug experiences not previously reported under this section.

(vi) Any other information pertinent to safety or effectiveness of the indexed drug not previously reported under this section.

(4) *Distributor's statement.* At the time of initial distribution of an indexed drug by a distributor, the holder must submit a report containing the following:

(i) The distributor's current product labeling. This must be identical to that in the index listing except for a different and suitable proprietary name (if used) and the name and address of the distributor. The name and address of the distributor must be preceded by an appropriate qualifying phrase such as "manufactured for" or "distributed by."

(ii) A signed statement by the distributor stating:

(A) The category of the distributor's operations (e.g., wholesale or retail);

(B) That the distributor will distribute the drug only under the indexed drug labeling;

(C) That the distributor will promote the indexed drug only for use under the conditions stated in the index listing; and

(D) If the indexed drug is a prescription new animal drug, that the distributor is regularly and lawfully engaged in the distribution or dispensing of prescription products.

(5) *Other reporting.* FDA may by order require that a holder submit information in addition to that required by this section or that the holder submit the same information but at different times or reporting periods.

§ 516.167 Removal from the index.

(a) After due notice to the holder of the index listing and an opportunity for an informal conference as described in § 516.123, FDA shall remove a new animal drug from the index if FDA finds that:

(1) The same drug in the same dosage form for the same intended use has been approved or conditionally approved;

(2) The expert panel failed to meet the requirements in § 516.141;

(3) On the basis of new information before FDA, evaluated together with the evidence available to FDA when the new animal drug was listed in the index, the benefits of using the new animal drug for the indexed use do not outweigh its risks to the target animal, taking into account the harm caused by the absence of an approved or conditionally-approved new animal drug for the minor species in question;

(4) Any of the conditions in § 516.133(a)(2), (5), or (6) are present;

(5) The manufacture of the new animal drug is not in accordance with current good manufacturing practices;

(6) The labeling, distribution, or promotion of the new animal drug is not in accordance with the index listing;

(7) The conditions and limitations of use associated with the index listing have not been followed; or

(8) Any information used to support the request for addition to the index contains any untrue statement of material fact.

(b) The agency may partially remove an indexing listing if, in the opinion of the agency, such partial removal would satisfactorily resolve a safety or effectiveness issue otherwise warranting removal of the listing under section 572(f)(1)(B) of the act.

(c) FDA may immediately suspend a new animal drug from the index if FDA determines that there is a reasonable

probability that the use of the drug would present a risk to the health of humans or other animals. The agency will subsequently provide due notice and an opportunity for an informal conference as described in § 516.123.

(d) A decision of FDA to remove a new animal drug from the index following an informal conference, if any, shall constitute final agency action subject to judicial review.

§ 516.171 Confidentiality of data and information in an index file.

(a) For purposes of this section, the index file includes all data and information submitted to or incorporated by reference into the index file, such as data and information related to investigational use exemptions under § 516.125, requests for determination of eligibility for indexing, requests for addition to the index, modifications to indexed drugs, changes in ownership, reports submitted under § 516.165, and master files. The availability for public disclosure of any record in the index file shall be handled in accordance with the provisions of this section.

(b) The existence of an index file will not be disclosed by FDA before an index listing has been made public by FDA, unless it has previously been publicly disclosed or acknowledged by the requestor.

(c) If the existence of an index file has not been publicly disclosed or acknowledged, no data or information in the index file are available for public disclosure.

(d) If the existence of an index file has been publicly disclosed or acknowledged before an index listing has been made public by FDA, no data or information contained in the file will be available for public disclosure before such index listing is made public, but the agency may, at its discretion, disclose a brief summary of such selected portions of the safety and effectiveness data as are appropriate for public consideration of a specific pending issue, e.g., at an open session of a Food and Drug Administration advisory committee or pursuant to an exchange of important regulatory information with a foreign government.

(e) After FDA sends a written notice to the requestor granting a request for addition to the index, the following data and information in the index file are available for public disclosure unless extraordinary circumstances are shown:

(1) All safety and effectiveness data and information previously disclosed to the public, as defined in § 20.81 of this chapter.

(2) A summary or summaries of the safety and effectiveness data and information submitted with or incorporated by reference in the index file. Such summaries do not constitute the full information described under section 572(c) and (d) of the act on which the safety or effectiveness of the drug may be determined. Such summaries will be based on the draft Freedom of Information summary submitted under § 516.145, which will be reviewed and, where appropriate, revised by FDA.

(3) A protocol for a test or study, unless it is shown to fall within the exemption established for trade secrets and confidential commercial information in § 20.61 of this chapter.

(4) Adverse reaction reports, product experience reports, consumer complaints, and other similar data and information, after deletion of the following:

(i) Names and any information that would identify the person using the product.

(ii) Names and any information that would identify any third party involved with the report, such as a veterinarian.

(5) A list of all active ingredients and any inactive ingredients previously disclosed to the public as defined in § 20.81 of this chapter.

(6) An assay method or other analytical method, unless it serves no regulatory or compliance purpose and is shown to fall within the exemption established in § 20.61 of this chapter.

(7) All correspondence and written summaries of oral discussions relating to the index file, in accordance with the provisions of part 20 of this chapter.

(f) The following data and information in an index file are not available for public disclosure unless they have been previously disclosed to the public as defined in § 20.81 of this chapter or they relate to a product or ingredient that has been abandoned and they no longer represent a trade secret or confidential commercial or financial information as defined in § 20.61 of this chapter:

(1) Manufacturing methods or processes, including quality control procedures.

(2) Production, sales, distribution, and similar data and information, except that any compilation of such data and information aggregated and prepared in a way that does not reveal data or information which is not available for public disclosure under this provision is available for public disclosure.

(3) Quantitative or semiquantitative formulas.

(g) Subject to the disclosure provisions of this section, the agency shall regard the contents of an index file as confidential information unless specifically notified in writing by the holder of the right to disclose, to reference, or otherwise utilize such information on behalf of another named person.

(h) For purposes of this regulation, safety and effectiveness data include all studies and tests of an animal drug on animals and all studies and tests on the animal drug for identity, stability, purity, potency, and bioavailability.

(i) Safety and effectiveness data and information that have not been previously disclosed to the public are available for public disclosure at the time any of the following events occurs unless extraordinary circumstances are shown:

(1) No work is being or will be undertaken to have the drug indexed in accordance with the request.

(2) A final determination is made that the drug cannot be indexed and all legal appeals have been exhausted.

(3) The drug has been removed from the index and all legal appeals have been exhausted.

(4) A final determination has been made that the animal drug is not a new animal drug.

PART 558—NEW ANIMAL DRUGS FOR USE IN ANIMAL FEEDS

33. The authority citation for 21 CFR part 558 continues to read as follows:

Authority: 21 U.S.C. 360b, 371.

34. Amend § 558.3 by revising the last sentence of paragraph (b)(2) and revising paragraphs (b)(5), (b)(6), and (b)(7) to read as follows:

§ 558.3 Definitions and general considerations applicable to this part.

* * * * *

(b) * * *

(2) * * * The manufacture of a Type A medicated article requires an application approved under § 514.105 of this chapter or an index listing granted under § 516.151 of this chapter.

* * * * *

(5) A Type B or Type C medicated feed manufactured from a drug component (bulk or "drum-run" (dried crude fermentation product)) requires an application approved under § 514.105 of this chapter or an index listing granted under § 516.151 of this chapter.

(6) A "veterinary feed directive (VFD) drug" is a new animal drug approved under section 512(b) or listed in the index under section 572 of the Federal Food, Drug, and Cosmetic Act (the act) for use in or on animal feed. Use of a VFD drug must be under the professional supervision of a licensed veterinarian.

(7) A "veterinary feed directive" is a written statement issued by a licensed veterinarian in the course of the veterinarian's professional practice that orders the use of a veterinary feed directive (VFD) drug in or on an animal feed. This written statement authorizes the client (the owner of the animal or animals or other caretaker) to obtain and use the VFD drug in or on an animal feed to treat the client's animals only in accordance with the directions for use approved or indexed by the Food and Drug Administration (FDA). A veterinarian may issue a VFD only if a valid veterinarian-client-patient relationship exists, as defined in § 530.3(i) of this chapter.

* * * * *

35. Amend § 558.5 by revising paragraphs (c) and (d) to read as follows:

§ 558.5 Requirements for liquid medicated feed.

* * * * *

(c) *What is required for new animal drugs intended for use in liquid feed*? Any new animal drug intended for use in liquid feed must be approved for such use under section 512 of the act or index listed under section 572 of the act. Such approvals under section 512 of the act must be:

(1) An original NADA,

(2) A supplemental NADA, or

(3) An abbreviated NADA.

(d) *What are the approval requirements under section 512 of the act for new animal drugs intended for use in liquid feed*? An approval under section 512 of the act for a new animal drug intended for use in liquid feed must contain the following information:

(1) Data, or a reference to data in a master file (MF), that shows the relevant ranges of conditions under which the drug will be chemically stable in liquid feed under field use conditions; and

(2) Data, or a reference to data in an MF, that shows that the drug is physically stable in liquid feed under field conditions; or

(3) Feed labeling with recirculation or agitation directions as follows:

(i) For liquid feeds stored in recirculating tank systems: Recirculate immediately prior to use for not less than 10 minutes, moving not less than 1 percent of the tank contents per minute from the bottom of the tank to the top. Recirculate daily as described even when not used.

(ii) For liquid feeds stored in mechanical, air, or other agitation-type tank systems: Agitate immediately prior to use for not less than 10 minutes, creating a turbulence at the bottom of the tank that is visible at the top. Agitate daily as described even when not used.

* * * * *

36. Amend § 558.6 by revising paragraphs (a)(4)(iv) and (a)(6) to read as follows:

§ 558.6 Veterinary feed directive drugs.

(a) * * *

(4) * * *

(iv) Approved or index listed indications for use.

* * * * *

(6) You must issue a VFD only for the approved or indexed conditions and indications for use of the VFD drug.

* * * * *

PART 589—SUBSTANCES PROHIBITED FROM USE IN ANIMAL FOOD OR FEED

37. The authority citation for 21 CFR part 589 continues to read as follows:

Authority: 21 U.S.C. 321, 342, 343, 348, 371.

38. Revise § 589.1000 to read as follows:

§ 589.1000 Gentian violet.

The Food and Drug Administration has determined that gentian violet has not been shown by adequate scientific data to be safe for use in animal feed. Use of gentian violet in animal feed causes the feed to be adulterated and in violation of the Federal Food, Drug, and Cosmetic Act (the act), in the absence of a regulation providing for its safe use as a food additive under section 409 of the act, unless it is subject to an effective notice of claimed investigational exemption for a food additive under § 570.17 of this chapter, or unless the substance is intended for use as a new animal drug and is subject to an approved application under section 512 of the act, or an index listing under section 572 of the act, or an effective notice of claimed investigational exemption for a new animal drug under part 511 of this chapter or § 516.125 of this chapter.

Dated: June 15, 2006.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. 06–7070 Filed 8–21–06; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF DEFENSE

Office of the Secretary

32 CFR Part 199

[DOD–2006–OS–0091]

RIN 0720–AB00

TRICARE; Reserve and Guard Family Member Benefits

ACTION: Proposed rule.

SUMMARY: This proposed rule would implement sections 704 and 705 of the Ronald W. Reagan National Defense Authorization Act for Fiscal Year 2005. These provisions would apply to eligible family members who become eligible for TRICARE as a result of their Reserve Component (RC) sponsor (including those with delayed effective date orders up to 90 days) being called or ordered to active duty for more than 30 days in support of a federal/contingency operation and choose to participate in TRICARE Standard or Extra, rather than enroll in TRICARE Prime. The first provision would provide the Secretary the authority to waive the annual TRICARE Standard (or Extra) deductible, which is set by law (10 U.S.C. 1079(b)) at $150 per individual and $300 per family ($50/$150 for families of members in pay grades E–4 and below). The second provision would provide the Secretary the authority to increase TRICARE payments up to 115 percent of the TRICARE maximum allowable charge, less the applicable patient cost-share if not previously waived under the first provision, for covered outpatient health services received from a provider that does not participate (accept assignment) with TRICARE. These provisions would help ensure timely access to health care and maintain clinically appropriate continuity of health care to family members of Reservists and Guardsmen activated in support of a federal/contingency operation; limit the out-of-pocket health care expenses for those family members; and remove potential barriers to health care access by Guard and Reserve families.

DATES: Written comments received at the address indicated below by October 23, 2006.

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

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

• Mail: Federal Docket Management System Office, 1160 Defense Pentagon, Washington, DC 20301–1160.

Instructions: All submissions received must include the agency name and docket number or Regulatory Information Number (RIN) 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://regulations.gov* as they are received without change, including any personal identifiers or contact information.

FOR FURTHER INFORMATION CONTACT: LT COL James Whitton, Strategic Initiatives Division, TRICARE Operations, TRICARE Management Activity, telephone (703) 681–0039.

SUPPLEMENTARY INFORMATION:

I. Introduction and Background

On November 5, 2001, the Department of Defense (DoD) published notice of a nationwide TRICARE Demonstration Project (66 FR 55928–55930). This demonstration was conducted under the authority of 10 U.S.C. 1092. In this demonstration project, DoD addressed unreasonable impediments to the continuity of health care encountered by certain family members of Reservists and National Guard called to active duty in support of a federal contingency operation for more than 30 days. On November 12, 2003, DoD published a notice (68 FR 64087) to extend through October 31, 2004, the demonstration project which was scheduled to end on November 1, 2003. On October 1, 2004, the DoD published another notice (69 FR 58895) extending the demonstration project, previously scheduled to end on October 31, 2004, to October 31, 2005. On October 12, 2005, DoD published a notice (70 FR 59320) to extend the demonstration project, previously scheduled to end on October 31, 2005, to October 31, 2007. The continued deployment of RC members in support of Operation Noble Eagle/Operation Enduring Freedom and Operation Iraqi Freedom warrants making permanent the Secretary's authority to exercise certain components of this demonstration project. Sections 704 and 705 of the Ronald W. Reagan National Defense Authorization Act for Fiscal Year 2005 provide DoD authority to make two components of the demonstration project permanent and amend section 1095d(a) and section 1079(h) of Title 10, United States Code, as appropriate. In accordance with these two statutory provisions, DoD proposes to implement this discretionary authority.

II. Permanent Benefits Offered to Reserve Component Families

A. *Waiver of deductible* (paragraph 199.4(f)(2)(i)(H)). Eligible family members of RC sponsors called or ordered to active duty for more than 30 days in support of a federal contingency operation, who choose to participate in TRICARE Standard, may not be responsible for paying the annual TRICARE Standard deductible. By law, the TRICARE Standard deductible for active duty family members is $150 per individual, $300 per family ($50/$150 for E–4s and below) each fiscal year. Exercise of the authority to waive this annual deductible would appropriately limit out-of-pocket expenses for many Reserve and Guard family members, in consideration of the fact that many may have already paid annual deductibles under their civilian health plan.

B. *Increased payment to providers* (paragraph 199.14(j)). Executive of the authority contained in this program would allow an increase in TRICARE payments up to 115 percent of the TRICARE maximum allowable charge, less the applicable patient cost share if not previously waived under the first provision, for outpatient care received from a provider that does not participate (acept assignment) under TRICARE. This would help Reserve and Guard family members be able to continue to see civilian providers with whom they would ahve established relations and would promote access and clinically appropriate continuity of care.

III. Regulatory Procedures

Executive Order 12866 requires certain regulatory assessments for any significant regulatory action that would result in an annual effect on the economy of $100 million or more. The Congressional Review Act establishes certain procedures for major rules, defined as those with similar major impacts. The Regulatory Flexibility Act (RFA) requires that each Federal agency prepare, and make available for public comment, a regulatory flexibility analysis when the agency issues a regulation that would have significant impact on a substantial number of small entities. This proposed rule would not have an annual effect on the economy of $100 million or more. An IGCE estimates the annual cost for both of these provisions at less than $30 million.

This rule, however, does address a novel policy issues relating to waiving the deductibles for one category of family member beneficiaries and not others, as well as allowing providers who treat this same group of beneficiaries to receive reimbursement at a higher rate than providers who treat similar beneficiaries. Thus this rule has been reviewed by the Office of Management and Budget under E.O. 12866.

This rule will not impose additional information collection requirements on the public under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3511).

We have examined the impact(s) of the proposed rule under Executive Order 13132 and it does not have policies that have federalism implications that would have substantial direct effects on the States, on the relationship between the national government and the States, or on the distribution of power and responsibilities among the various levels of government, therefore, consultation with State and local officials is not required.

List of Subjects in 32 CFR Part 199

Claims, Dental health, Health care, Health insurance, Individuals with disabilities, Military personnel.

Accordingly, 32 CFR part 199 is proposed to be amended as follows:

PART 199—[AMENDED]

1. The authority citation for part 199 continues to read as follows:

Authority: 5 U.S.C. 301; 10 U.S.C. chapter 55.

2. Section 199.4 is proposed to be amended by revising paragraph (f)(2)(i)(H) to read as follows:

§ 199.4 Basic program benefits.

* * * * *

(f) * * *

(2) * * *

(i) * * *

(H) The Director, TRICARE Management Activity, may waive the annual individual or family fiscal year deductible for dependents of a Reserve Component member who is called or ordered to active duty for a period of more than 30 days or a National Guard member who is called or ordered to full-time federal National Guard duty for a period of more than 30 days in support of a contingency operation (as defined in 10 U.S.C. 101(a)(13)). For purposes of this paragraph, a dependent is a lawful husband or wife of the member and a child as defined in paragraphs (b)(2)(ii)(A) through (F) and (b)(2)(ii)(H)(1), (2), and (4) of § 199.3.

* * * * *

3. Section 199.14 is proposed to be amended by adding paragraph (j)(1)(i)(E) to read as follows:

§ 199.14 Provider reimbursement methods.

* * * * *

(j) * * *

(1) * * *

(i) * * *

(E) *Special rule for certain TRICARE Standard Beneficiaries.* In the case of a dependent spouse or child, as defined in paragraphs (b)(2)(ii)(A) through (F) and (b)(2)(ii)(H)(1), (2), and (4) of § 199.3, of a Reserve component member serving on active duty pursuant to a call or order to active duty for a period of more than 30 days in support of a contingency operation under a provision of law referred to in section 101(a)(13)(B) of title 10, United States Code, the Director, TRICARE Management Activity, may authorize for non-participating providers the allowable charge to be the lower of the billed amount or 115% of the applicable balance billing limit under paragraph (j)(1)(i)(C) of this section, less the applicable beneficiary cost share.

* * * * *

August 15, 2006.

L.M. Bynum,

OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. E6–13720 Filed 8–21–06; 8:45 am]

BILLING CODE 5001–06–P

DEPARTMENT OF EDUCATION

34 CFR Part 280

Magnet Schools Assistance Program

AGENCY: Office of Innovation and Improvement, Department of Education.

ACTION: Notice of proposed rulemaking.

SUMMARY: The Secretary proposes to amend the regulations governing the Magnet Schools Assistance Program (MSAP) in 34 CFR part 280. These proposed amendments would allow the MSAP to use an approach similar to that in 34 CFR 75.200 for establishing selection criteria in grant competitions. Under this approach the MSAP would have the flexibility to use selection criteria from its program regulations, from the menu of general selection criteria in the Education Department General Administrative Regulations (EDGAR) in 34 CFR 75.210, based on statutory provisions in accordance with 34 CFR 75.209, or from any combination of these.

DATES: We must receive your comments on or before September 21, 2006.

ADDRESSES: Address all comments about these proposed regulations to Steven L. Brockhouse, U.S. Department of Education, 400 Maryland Avenue, SW., room 4W229, Washington, DC 20202–5970. If you prefer to send your comments through the Internet, you may address them to us at the U.S. Government Web site: *http://www.regulations.gov.*

Or you may send your Internet comments to us at the following address: *steve.brockhouse@ed.gov.*

You must include the term "MSAP NPRM" in the subject line of your electronic message.

FOR FURTHER INFORMATION CONTACT: Steven L. Brockhouse. Telephone: (202) 260–2476 or via Internet: *steve.brockhouse@ed.gov.*

If you use a telecommunications device for the deaf (TDD), you may call the Federal Relay Service (FRS) at 1–800–877–8339.

Individuals with disabilities may obtain this document in an alternative format (*e.g.*, Braille, large print, audiotape, or computer diskette) on request to the contact person listed under **FOR FURTHER INFORMATION CONTACT.**

SUPPLEMENTARY INFORMATION:

Invitation To Comment

We invite you to submit comments regarding these proposed regulations. To ensure that your comments have maximum effect in developing the final regulations, we urge you to identify clearly the specific section or sections of the proposed regulations that each of your comments addresses and to arrange your comments in the same order as the proposed regulations.

We invite you to assist us in complying with the specific requirements of Executive Order 12866 and its overall requirement of reducing regulatory burden that might result from these proposed regulations. Please let us know of any further opportunities we should take to reduce potential costs or increase potential benefits while preserving the effective and efficient administration of the program.

During and after the comment period, you may inspect all public comments about these proposed regulations in room 4W229, 400 Maryland Avenue, SW., Washington, DC, between the hours of 8:30 a.m. and 4:00 p.m., Eastern time, Monday through Friday of each week except Federal holidays.

Assistance to Individuals With Disabilities in Reviewing the Rulemaking Record

On request, we will supply an appropriate aid to an individual with a disability who needs assistance to review the comments or other documents in the public rulemaking record for these proposed regulations. If you want to schedule an appointment for this type of aid, please contact the person listed under **FOR FURTHER INFORMATION CONTACT.**

Background

On March 6, 1997, the Secretary published final regulations (62 FR 10398) amending the provisions of EDGAR governing discretionary grant programs administered directly by us. These amendments established an approach by which the Secretary could use different types of selection criteria when evaluating a grant application. Specifically, § 75.200 was amended to permit the Secretary to use selection criteria based on statutory provisions in accordance with 34 CFR 75.209, selection criteria in program-specific regulations, selection criteria established under 34 CFR 75.210, or any combination of these. Section 75.210 provides a menu of selection criteria. For a competition, the Secretary selects from the menu one or more criteria that best enable us to identify the highest-quality applications consistent with the program purpose, statutory requirements, and any priorities established. Within each criterion, the Secretary may further define the criterion by selecting one or more specific factors.

At the time that these final regulations were published, we also amended, through notice and comment rulemaking, the regulations for a number of Department programs that contained program-specific selection criteria, so that these programs could use the criteria in 34 CFR 75.210, criteria based on statutory provisions, or the criteria in their program regulations for grant competitions. The MSAP regulations were not amended at that time.

This notice of proposed rulemaking would conform the MSAP regulations to those of the majority of other discretionary grant programs in the Department. We believe that by expanding the range of selection criteria that could be used in a specific grant competition, we will be able to administer the MSAP more effectively to best meet the program's statutory purposes and requirements and to better ensure that MSAP projects are effectively integrated with State and local reform activities.

We intend that the MSAP will use the selection criteria in 34 CFR 75.210 in conjunction with criteria based on the statute and in the program-specific

regulations, not instead of them. In selecting a set of criteria and factors for a particular competition from among the selection criteria in the MSAP regulations and 34 CFR 75.210, or in establishing selection criteria based on statutory provisions governing the MSAP as described in 34 CFR 75.209, the Secretary would not solicit formal public comment but could draw on input from grantees and program beneficiaries; feedback from previous peer reviewers and program evaluators; discussions among Department employees, grantees, and program beneficiaries; and meetings, conferences, visits to grantees, and other forms of outreach and exchange with the relevant communities. We believe applicants would find that criteria selected in this manner for specific competitions would provide them with adequate guidance about review standards, and also with flexibility to design and propose the projects that they believe best serve their needs.

The Secretary is particularly interested in comments from potential grant applicants and intended program beneficiaries on this proposed approach. Do applicants or program beneficiaries support this approach? Are there any costs associated with shifting from using selection criteria tailored to individual programs to using a flexible menu of general selection criteria? If yes, what are those costs and does the benefit of the added flexibility of the proposed approach justify the costs? Would these proposed amendments have other effects?

Significant Proposed Regulations

We discuss substantive issues under the sections of the proposed regulations to which they pertain. Generally, we do not address proposed regulatory provisions that are technical or otherwise minor in effect.

Section 280.30 How does the Secretary Evaluate an Application?

Current Regulations: The current regulatory provisions in § 280.30 describe the way in which applications are evaluated by using the selection criteria in § 280.31 and the priorities described in § 280.32.

Proposed Regulations: Proposed § 280.30 would give the Secretary the flexibility to use selection criteria from § 280.31, from the approved menu of general selection criteria in 34 CFR 75.210 or from selection criteria based on statutory provisions governing the MSAP, established in accordance with 34 CFR 75.209. The Secretary also could use any combination of selection criteria from these sources. We would announce the selection criteria and the weighting factor for each criterion in the **Federal Register** notice announcing a grant competition for the MSAP.

Reasons: The Secretary believes that this change is necessary in order to provide the MSAP the same flexibility that is afforded many of the Department's discretionary grant programs in tailoring the selection criteria to be used to evaluate applications in a manner that helps to achieve results consistent with a program's statutory purpose. Additionally, this approach enables us to take into consideration current program needs, new research findings that relate to magnet schools, or other appropriate information in order to facilitate the selection of applications that show the greatest promise of effectively meeting the statutory purposes of the MSAP. Without this change, the MSAP would be limited to using only the selection criteria and factors in current § 280.31, whether or not their use continues to work well in the selection of new projects that are likely to be effective in achieving results.

An alternative approach would have been to propose specific changes to the selection criteria for the MSAP in § 280.31. We consider this approach less desirable because it would require new rulemaking every time that a change is made in the selection criteria, however modest that change might be. Such an approach would, of necessity, be time consuming and as a practical matter would restrict rather than enhance flexibility in considering input from sources such as school districts that are implementing magnet school programs, researchers, evaluators, policymakers, and others.

Section 280.31 What Selection Criteria does the Secretary Use?

Current Regulations: The current regulations assign specific, mandatory point values to the selection criteria.

Proposed Regulations: The proposed regulations would remove these mandatory point values from the selection criteria.

Reasons: Removing the mandatory point values provides the Secretary flexibility to select specific point values from year to year to address program requirements and is consistent with the Department's approach for other discretionary grant programs that use selection criteria from 34 CFR 75.210 and selection criteria based on the statute, as set forth in 34 CFR 75.209, as well as selection criteria from program regulations.

Executive Order 12866

1. Potential Costs and Benefits

Under Executive Order 12866, we have assessed the potential costs and benefits of this regulatory action.

The potential costs associated with the proposed regulations are those resulting from statutory requirements and those we have determined to be necessary for administering this program effectively and efficiently.

In assessing the potential costs and benefits—both quantitative and qualitative—of this regulatory action, we have determined that the benefits would justify the costs.

We have also determined that this regulatory action would not unduly interfere with State, local, and tribal governments in the exercise of their governmental functions.

Summary of Potential Costs and Benefits

These proposed regulations affect only local educational agencies (LEAs) that are applying for assistance under the MSAP. The proposed regulations create flexibility for us to use selection criteria other than those in § 280.31 for a MSAP grant competition. We believe that any criterion from 34 CFR 75.209 or 34 CFR 75.210 that would be used in a future grant competition would not impose a financial burden that LEAs would not otherwise incur in the development and submission of a grant application under the MSAP and, under some circumstances, could reduce the financial burden of preparing a MSAP grant application by a modest amount if, for example, the use of this flexibility resulted in fewer criteria or factors to be addressed in a grant application.

2. Clarity of the Regulations

Executive Order 12866 and the Presidential memorandum on "Plain Language in Government Writing" require each agency to write regulations that are easy to understand.

The Secretary invites comments on how to make these proposed regulations easier to understand, including answers to questions such as the following:

- Are the requirements in the proposed regulations clearly stated?
- Do the proposed regulations contain technical terms or other wording that interferes with their clarity?
- Does the format of the proposed regulations (grouping and order of sections, use of headings, paragraphing, etc.) aid or reduce their clarity?
- Would the proposed regulations be easier to understand if we divided them into more (but shorter) sections? (A "section" is preceded by the symbol

"§ " and a numbered heading; for example, § 280.30 How does the Secretary evaluate an application?

• Could the description of the proposed regulations in the **SUPPLEMENTARY INFORMATION** section of this preamble be more helpful in making the proposed regulations easier to understand? If so, how?

• What else could we do to make the proposed regulations easier to understand?

Send any comments that concern how the Department could make these proposed regulations easier to understand to the person listed in the **ADDRESSES** section of the preamble.

Regulatory Flexibility Act Certification

The Secretary certifies that these proposed regulations would not have a significant economic impact on a substantial number of small entities.

Small entities affected by these proposed regulations are small LEAs applying for Federal funds under this program. The changes will not have a significant economic impact on these LEAs in terms of the cost of applying for a MSAP grant.

Paperwork Reduction Act of 1995

These proposed regulations do not contain any information collection requirements.

Intergovernmental Review

This program is subject to Executive Order 12372 and the regulations in 34 CFR part 79. One of the objectives of the Executive order is to foster an intergovernmental partnership and a strengthened federalism. The Executive order relies on processes developed by State and local governments for coordination and review of proposed Federal financial assistance.

This document provides early notification of our specific plans and actions for this program.

Electronic Access to This Document

You may view this document, as well as all other Department of Education documents published in the **Federal Register**, in text or Adobe Portable Document Format (PDF) on the Internet at the following site: *http://www.ed.gov/news/fedregister.*

To use PDF you must have Adobe Acrobat Reader, which is available free at this site. If you have questions about using PDF, call the U.S. Government Printing Office (GPO), toll free, at 1–888–293–6498; or in the Washington, DC, area at (202) 512–1530.

You may also view this document in text or PDF at the following site: *http://www.ed.gov/programs/magnet/applicant.html.*

Note: The official version of this document is the document published in the **Federal Register**. Free Internet access to the official edition of the **Federal Register** and the Code of Federal Regulations is available on GPO Access at: *http://www.gpoaccess.gov/nara/index.html.*

(Catalog of Federal Domestic Assistance Number 84.165A Magnet Schools Assistance Program.)

List of Subjects in 34 CFR Part 280

Civil rights, Desegregation, Education, Elementary and secondary education, Grant programs-education, Magnet schools, Reporting and recordkeeping requirements.

Dated: August 16, 2006.

Morgan S. Brown,

Assistant Deputy Secretary, for Innovation and Improvement.

For the reasons discussed in the preamble, the Assistant Deputy Secretary for Innovation and Improvement proposes to amend part 280 of title 34 of the Code of Federal Regulations as follows:

PART 280—MAGNET SCHOOLS ASSISTANCE PROGRAM

1. The authority citation for part 280 continues to read as follows:

Authority: 20 U.S.C. 7231–7231j, unless otherwise noted.

2. Section 280.30 is revised to read as follows:

§ 280.30 How does the Secretary evaluate an application?

(a) The Secretary evaluates an application under the procedures in 34 CFR part 75 and this part.

(b) To evaluate an application for a new grant the Secretary may use—

(1) Selection criteria established under 34 CFR 75.209;

(2) Selection criteria in § 280.31;

(3) Selection criteria established under 34 CFR 75.210; or

(4) Any combination of criteria from paragraphs (b)(1), (b)(2), and (b)(3) of this section.

(c) The Secretary indicates in the application notice published in the **Federal Register** the specific criteria that the Secretary will use and how points for the selection criteria will be distributed.

(d) The Secretary evaluates an application submitted under this part on the basis of criteria described in paragraph (c) of this section and the priority factors in § 280.32.

(e) The Secretary awards up to 100 points for the extent to which an application meets the criteria described in paragraph (c) of this section.

(f) The Secretary then awards up to 30 additional points based upon the priority factors in § 280.32.

(Authority: 20 U.S.C. 7231–7231j)

§ 280.31 [Amended]

3. Section 280.31 is amended:

A. In the introductory text, by removing the word "uses" and adding, in its place, the words "may use".

B. In paragraph (a) introductory text, by removing the parenthetical "(25 points)".

C. In paragraph (b) introductory text, by removing the parenthetical "(10 points)".

D. In paragraph (c) introductory text, by removing the parenthetical "(35 points)".

E. In paragraph (d) introductory text, by removing the parenthetical "(5 points)".

F. In paragraph (e) introductory text, by removing the parenthetical "(15 points)".

G. In paragraph (f) introductory text, by removing the parenthetical "(10 points)".

[FR Doc. E6–13795 Filed 8–21–06; 8:45 am]
BILLING CODE 4000–01–P

POSTAL SERVICE

39 CFR Part 111

New Polywrap Standards for Automation-Rate Flat-Size Mail

AGENCY: Postal Service.™

ACTION: Proposed rule.

SUMMARY: The Postal Service proposes to require mailers to use polywrap film meeting one set of specifications when using polywrap on automation-rate flat-size mailpieces.

DATES: We must receive your comments on or before September 21, 2006.

ADDRESSES: Mail or deliver written comments to the Manager, Mailing Standards, U.S. Postal Service, 475 L'Enfant Plaza SW., Room 3436, Washington DC 20260–3436. You may inspect and photocopy all written comments at USPS Headquarters Library, 475 L'Enfant Plaza SW., 11th Floor N, Washington DC between 9 a.m. and 4 p.m., Monday through Friday.

FOR FURTHER INFORMATION CONTACT: Bill Chatfield, 202–268–7278.

SUPPLEMENTARY INFORMATION: Efficient processing of automation-rate flat-size mailpieces enables the Postal Service to process the substantial volume of polywrapped pieces on our equipment without causing jams, multiple feeds, and missorted mail. Automated flat

sorting machines (AFSM 100) process the majority of our flat-size mail. We have moved many of our upgraded flat sorting machines (UFSM 1000) out of facilities where we use AFSM 100s. To improve our ability to process polywrapped pieces on our primary flat-mail processing equipment, we propose that all polywrap films used on automation-rate flat-size mail meet our revised standards. The new standards would eliminate the current difference in polywrap specifications for mail designed for processing on the AFSM 100 and the UFSM 1000.

Background

In 2001, we ran extensive tests of flat-size mailpieces on our AFSM 100 machines. As a result, we added a specification for "blocking"—the chemical bonding of films to themselves—to our polywrap specifications to help prevent polywrapped pieces from sticking together during processing. But this simple change did not result in a noticeable improvement in the performance of polywrapped mailpieces.

Therefore, we initiated a test program to more accurately define the polywrap characteristics best suited to automated processing of flat-size mail. We performed complete testing on over 100 types of polywrap submitted by polywrap manufacturers. We then selected 46 films (polyethylene, polypropylene, and shrinkwrap) to test on the AFSM 100. We processed 500-piece test decks and collected extensive data to evaluate performance. Again, blocking was the physical attribute that most influenced processing compatibility.

As a result of the testing, we propose revised characteristics for polywrap materials used on automation-rate flat-size mailpieces. We would remove two characteristics, tensile strength and density, because they were irrelevant to performance. We also would remove the "USPS AFSM 100 Approved Polywrap" endorsement requirement. We would change the testing protocol to measure the minimum film-to-metal coefficient of friction to bring consistency to this characteristic across all polywrap manufacturers. We would broaden the film-to-film coefficient of friction, which should help mailers in bundling mailpieces by minimizing the instability of bundles as they exit their stacking equipment. While we would not change the blocking specification, we propose to change the method to measure blocking to more closely match the environment that mailpieces undergo during normal transportation and storage.

Polywrap Certification Program

Currently, manufacturers requesting approval of their polywrap materials for automation-rate flat-size mail provide us with a certificate stating that their material complies with the polywrap specifications for AFSM 100 mailpieces. After manufacturers provide this certificate, we include the manufacturer's material in the list of approved polywrap for flat-size mailpieces mailed at automation discount rates.

New Test Procedures

To ensure that all manufacturers use the same criteria in meeting the new specifications, we have developed specification USPS–T–3204, "Test Procedures for Automatable Polywrap." Manufacturers may obtain the new test procedures at *http://ribbs.usps.gov* (click on "Polywrap Manufacturers" in the left frame) or by contacting USPS Engineering at: Engineering, Flat Mail Technology, U.S. Postal Service, 8403 Lee Hwy, Merrifield VA 22082–8101.

The specification describes exact test procedures and acceptable values for polywrap film characteristics. Should the manufacturer not have the facilities or experience to conduct each of the test procedures in USPS–T–3204, the specification also provides a list of testing laboratories that have experience in conducting these tests.

Recertification

Consistent with our current process, manufacturers would provide an updated certificate of conformance on their letterhead to USPS Mailing Standards after verifying that each polywrap film meets the new characteristics. The certificate of conformance must state the values for each of the six characteristics.

Implementation

We encourage manufacturers to certify their polywrap under the new specifications as soon as possible. We also encourage mailers to use polywrap meeting the new specifications on their mailpieces as soon as practical. Beginning February 4, 2007, all polywrap films used on automation-rate flat-size mailpieces would have to meet the new standards.

Although we are exempt from the notice and comment requirements of the Administrative Procedure Act [5 U.S.C. of 553(b),(c)] regarding proposed rulemaking by 39 U.S.C. 410(a), we invite public comments on the following proposed revisions to *Mailing Standards of the United States Postal Service*, Domestic Mail Manual (DMM), incorporated by reference in the *Code of Federal Regulations*. See 39 CFR 111.1.

List of Subjects in 39 CFR Part 111:

Administrative practice and procedure, Postal Service.

Accordingly, 39 CFR part 111 is proposed to be amended as follows:

PART 111—[AMENDED]

1. The authority citation for 39 CFR Part 111 continues to read as follows:

Authority: 5 U.S.C. 552(a); 39 U.S.C. 101, 401, 403, 404, 3001–3011, 3201–3219, 3403–3406, 3621, 3626, 5001.

2. Amend the following sections of *Mailing Standards of the United States Postal Service*, Domestic Mail Manual (DMM), as explained below:

300 Discount Flats

301 Physical Standards

* * * * *

3.0 Physical Standards for Automation Flats

* * * * *

3.5 Polywrap Coverings

3.5.1 Polywrap Films

[Revise 3.5.1 by changing the introduction and removing items a and b to eliminate the distinction between polywrap used on pieces qualifying for AFSM 100 and UFSM 1000, as follows:]

Polywrapped flat-size mailpieces claimed at automation rates must meet the standards in 3.5. Film approved for use under 3.5.4 and 3.5.5 must meet the specifications in Exhibit 3.5.1. If mailers affix the address label to the outside of the polywrap, the film does not have to meet the haze property.

Exhibit 3.5.1 Polywrap Specifications

[Revise Exhibit 3.5.1 by changing the introduction, eliminating the distinction between AFSM 100 and UFSM 1000 pieces, removing current properties 4 and 5 and renumbering properties 6 through 8 as properties 4 through 6, changing the specification and testing methods for coefficients of friction, revising the comments for "blocking," and specifying testing methods according to USPS specification T–3204, as follows:]

Effective February 4, 2007, mailers who polywrap automation-rate flats must use polywrap that meets all of the properties in this exhibit.

Property	Requirement	Test methods in USPS T–3204	Comment
1. Kinetic Coefficient of Friction, MD.			
a. Film on Stainless Steel with No. 8 (Mirror) Finish.	<0.45	USPS–T–3204 Section 4.5.2.	
b. Film on Film	0.20 to 0.55	USPS–T–3204 Section 4.5.1.	
* * * * * * *			
6. Blocking	<15 g	USPS–T–3204 Section 4.5.6	To be conducted at 140 degrees Fahrenheit.
* * * * * * *			

[Delete 3.5.4 to remove the requirement for markings on polywrap.]

[Renumber current 3.5.5 as new 3.5.4 and revise the title and text to require polywrap meeting new standards as of February 4, 2007, as follows:]

3.5.4 Polywrap on Mailpieces

Effective February 4, 2007, mailers claiming automation flat rates for polywrapped pieces must use polywrap that meets the new specifications in 3.5.1 and is on the new USPS list of approved materials. Only products listed on the USPS "RIBBS" Web site (*http://ribbs.usps.gov*) may be used on automation-rate flats.

[Add new 3.5.5 to specify the certification process for polywrap manufacturers, as follows:]

3.5.5 Polywrap Certification Process for Manufacturers

To ensure that all polywrap manufacturers use the same criteria in meeting the new specifications, the Postal Service developed specification USPS–T–3204, "Test Procedures for Automatable Polywrap." This specification describes exact test procedures and acceptable values for polywrap film characteristics. Should the polywrap manufacturer not have the facilities or experience to conduct each of the test procedures in USPS–T–3204, the specification includes a list of independent testing laboratories that have experience in conducting these tests. Customers may obtain the new test procedures by contacting USPS Engineering (see 608.8.1 for address). Effective February 4, 2007, manufacturers must submit a letter, on their letterhead, for each polywrap film indicating compliance with each of the specifications in 3.5.1 and the value for each specification, to USPS Mailing Standards (see 608.8.1 for address). Manufacturers are encouraged to submit the certificate of conformance prior to February 4, 2007. Upon receipt of the certificate of conformance, USPS will list the polywrap film on *http://ribbs.usps.gov*. Manufacturers should follow this process before submitting the letter certifying compliance with the specifications:

a. Test each film according to procedures listed in USPS–T–3204, "Test Procedures for Automatable Polywrap Film."

b. Test each film gauge and surface treatment separately.

* * * * *

We will publish an appropriate amendment to 39 CFR Part 111 if our proposal is adopted.

Neva R. Watson,

Attorney, Legislative.

[FR Doc. E6–13802 Filed 8–21–06; 8:45 am]

BILLING CODE 7710–12–P

ENVIRONMENTAL PROTECTION AGENCY

40 CFR Part 52

[EPA–R06–OAR–2005–TX–0027; FRL–8212–3]

Approval and Promulgation of Air Quality Implementation Plans; Texas; Revisions to Chapter 117, Emission Inventories, Transportation Conformity Budgets, and 5% Increment of Progress Plan for the Dallas/Fort Worth 8-Hour Ozone Nonattainment Area

AGENCY: Environmental Protection Agency (EPA).

ACTION: Proposed rule.

SUMMARY: The EPA is proposing to approve revisions to the State Implementation Plan (SIP) submitted by the state of Texas for the Dallas/Fort Worth (DFW) nonattainment area as meeting 1-hour ozone serious area requirements. EPA is proposing to approve the 5% Increment of Progress (IOP) emission reduction plan, the 2002 base year inventory, and a 2007 motor vehicle emission budget for the DFW 8-hour ozone nonattainment area. EPA is also proposing to approve a Federal consent decree concerning the Alcoa Rockdale plant in Milam County; energy efficiency measures implemented within the DFW 8-hour ozone nonattainment area; and revisions to 30 TAC, Chapter 117, Control of Air Pollution From Nitrogen Compounds, concerning stationary reciprocating internal combustion engines operating within the DFW 8-hour ozone nonattainment area. These revisions will allow the State of Texas to fulfill remaining obligations under the 1-hour ozone standard in the DFW nonattainment area. These actions are being taken in accordance with section 110 and part D of the Clean Air Act (the Act) and EPA's regulations. The intended effect of this action is to approve revisions submitted which satisfy outstanding 1-hour ozone obligations for the DFW area and result in emission reductions within 3 years of the DFW area's nonattainment designation under the 8-hour ozone standard.

DATES: Comments must be received on or September 21, 2006.

ADDRESSES: Submit your comments, identified by Docket No. EPA–R06–OAR–2005–TX–0027, by one of the following methods:

Federal eRulemaking Portal: http://www.regulations.gov. Follow the on-line instructions for submitting comments.

U.S. EPA Region 6 "Contact Us" Web site: http://epa.gov/region6/r6coment.htm. Please click on "6PD" (Multimedia) and select "Air" before submitting comments.

E-mail: Mr Thomas Diggs at *diggs.thomas@epa.gov*. Please also send a copy by e-mail to the person listed in the **FOR FURTHER INFORMATION CONTACT** section below.

Fax: Mr. Thomas Diggs, Chief, Air Planning Section (6PD–L), at fax number 214–665–7263.

Mail: Mr. Thomas Diggs, Chief, Air Planning Section (6PD–L), Environmental Protection Agency, 1445 Ross Avenue, Suite 1200, Dallas, Texas 75202–2733.

Hand or Courier Delivery: Mr. Thomas Diggs, Chief, Air Planning Section (6PD–L), Environmental Protection

Agency, 1445 Ross Avenue, Suite 1200, Dallas, Texas 75202–2733. Such deliveries are accepted only between the hours of 8 a.m. and 4 p.m. weekdays except for legal holidays. Special arrangements should be made for deliveries of boxed information.

Instructions: Direct your comments to Docket ID No. EPA–R06–OAR–2005–TX–0027. EPA's policy is that all comments received will be included in the public docket without change and may be made available online at *http://www.regulations.gov*, including any personal information provided, unless the comment includes information claimed to be Confidential Business Information (CBI) or other information the disclosure of which is restricted by statute. Do not submit information through *http://www.regulations.gov* or e-mail that you consider to be CBI or otherwise protected from disclosure. The *http://www.regulations.gov* Web site is an "anonymous access" system, which means EPA will not know your identity or contact information unless you provide it in the body of your comment. If you send an e-mail comment directly to EPA without going through *http://www.regulations.gov*, your e-mail address will be automatically captured and included as part of the comment that is placed in the public docket and made available on the Internet. If you submit an electronic comment, EPA recommends that you include your name and other contact information in the body of your comment and with any disk or CD–ROM you submit. If EPA cannot read your comment due to technical difficulties and cannot contact you for clarification, EPA may not be able to consider your comment. Electronic files should avoid the use of special characters, any form of encryption, and be free of any defects or viruses.

Docket: All documents in the docket are listed in the *http://www.regulations.gov* index. Although listed in the index, some information is not publicly available, *e.g.*, CBI or other information whose disclosure is restricted by statute. Certain other material, such as copyrighted material, will be publicly available only in hard copy. Publicly available docket materials are available either electronically in *http://www.regulations.gov* or in hard copy at the Air Planning Section (6PD–L), Environmental Protection Agency, 1445 Ross Avenue, Suite 700, Dallas, Texas 75202–2733. The file will be made available by appointment for public inspection in the Region 6 FOIA Review Room between the hours of 8:30 a.m. and 4:30 p.m. weekdays except for legal holidays. Contact the person listed in the **FOR FURTHER INFORMATION CONTACT** paragraph below to make an appointment. If possible, please make the appointment at least two working days in advance of your visit. There will be a 15 cents per page fee for making photocopies of documents. On the day of the visit, please check in at the EPA Region 6 reception area at 1445 Ross Avenue, Suite 700, Dallas, Texas.

The State submittal is also available for public inspection at the State Air Agency listed below during official business hours by appointment:

Texas Commission on Environmental Quality, Office of Air Quality, 12124 Park 35 Circle, Austin, Texas 78753.

FOR FURTHER INFORMATION CONTACT: Inquiries regarding Chapter 117 should be directed to Alan Shar, Air Planning Section (6PD–L), Environmental Protection Agency, Region 6, 1445 Ross Avenue, Suite 700, Dallas, Texas 75202–2733, telephone (214) 665–6691; fax number 214–665–7263; e-mail address *shar.alan@epa.gov*. Inquiries on all other aspects of this rulemaking should be directed to Carrie Paige, Air Planning Section (6PD–L), Environmental Protection Agency, Region 6, 1445 Ross Avenue, Suite 700, Dallas, Texas 75202–2733, telephone (214) 665–6521; fax number 214–665–7263; e-mail address *paige.carrie@epa.gov*.

SUPPLEMENTARY INFORMATION: Throughout this document, wherever "we," "us," or "our" is used, we mean the EPA.

Outline

I. What Actions Are We Proposing?

Today we are proposing to approve revisions to the SIP submitted by the state of Texas for the DFW nonattainment area as meeting 1-hour ozone serious area requirements. We are proposing to approve the 5% IOP plan for the nine counties that comprise the DFW 8-hour ozone nonattainment area. As an integral part of the 5% IOP plan, we are also proposing to approve the 2002 base year emissions inventory (EI) and the 2007 motor vehicle emissions budget (MVEB). Before approving the 5% IOP plan, we must approve all of the control measures relied upon in the 5% IOP plan. The majority of the control measures have already been approved in other **Federal Register** documents. We are proposing to approve three control measures which support the 5% IOP plan in today's action: A Federal consent decree concerning an Alcoa plant in Rockdale, Milam County; energy efficiency measures implemented within the DFW 8-hour ozone nonattainment area; and revisions to 30 TAC, Chapter 117, Control of Air Pollution From Nitrogen Compounds, concerning stationary reciprocating internal combustion engines operating within the DFW 8-hour ozone nonattainment area. We previously proposed to approve that Reasonably Available Control Technology (RACT) is in place for all major sources of volatile organic compounds (VOCs) in the DFW 1-hour ozone nonattainment area (66 FR 4756). Although we are not reopening the comment period on RACT, we intend to finalize our proposed approval at the same time we finalize this proposal. We are proposing to approve these revisions under section 110 and part D of the Act and EPA's regulations.

II. What Is the Background for These Actions?

The EPA published the 8-hour ozone designations and the first phase governing implementation of the 8-hour ozone standard (phase I rule) in the **Federal Register** (FR) on April 30, 2004 (69 FR 23858 and 69 FR 23951, respectively). The DFW area was designated as nonattainment for the 8-hour ozone standard and comprises nine counties: Collin, Dallas, Denton, and Tarrant counties (these four constitute the 1-hour ozone nonattainment area, hereinafter referred to as the four core counties), and Ellis, Johnson, Kaufman, Parker and Rockwall counties. At the time of designation however, the four core counties remained in nonattainment for the 1-hour standard and had two outstanding 1-hour ozone obligations: (1) The area

did not have an approved 1-hour ozone attainment demonstration; and (2) the area did not have approved RACT requirements for major sources of VOC emissions (VOC RACT).

The phase I rule revoked the 1-hour ozone standard (see 69 FR 23951). The phase I rule further provided three options for areas that had not met the 1-hour ozone attainment demonstration requirement: (1) Submit a 1-hour attainment demonstration no later than 1 year after designation; (2) Submit a Reasonable Further Progress (RFP) plan for the 8-hour National Ambient Air Quality Standards (NAAQS), no later than 1 year following designations for the 8-hour NAAQS, providing a 5% increment of emissions reduction from the area's 2002 EI; or (3) Submit an early 8-hour ozone attainment demonstration SIP that ensures that the first segment of RFP is achieved early (See 40 CFR 51.905(a)(ii)). Texas selected option 2, to submit the RFP plan providing a 5% increment of emissions reduction from the area's 2002 EI. This increment of emissions reduction is called the 5% IOP plan. Revisions in this rulemaking enable the DFW area to meet the 5% IOP, which fulfills the 1-hour ozone attainment demonstration obligation.

The phase I rule also provides that 1-hour ozone nonattainment areas are required to adopt and implement "applicable requirements" according to the area's classification under the 1-hour ozone standard for anti-backsliding purposes (see 40 CFR 51.905(a)(i)). On May 26, 2005, we determined that an area's 1-hour designation and classification as of June 15, 2004 would dictate what 1-hour obligations remain as "applicable requirements" under the phase I rule (70 FR 30592). The DFW 1-hour nonattainment area was still classified as serious on June 15, 2004, so the 1-hour ozone standard requirements applicable to the four core counties are those that apply to nonattainment areas classified as serious. The only outstanding "applicable requirement" for the four core counties is the VOC RACT. We noted above that we proposed to approve RACT for all major sources of VOCs in the 1-hour DFW nonattainment area on November 18, 2001 (66 FR 4756) and received no comments. Although we are not reopening the comment period on VOC RACT, we intend to finalize that proposed approval in the same rulemaking that we finalize this proposal.

The DFW area has satisfied all other serious area applicable requirements under the 1-hour ozone standard. See the area's Clean Fuels Fleet Program (February 7, 2001 at 66 FR 9203); the area's post 1996 Rate of Progress (ROP) plan and associated MVEBs (March 28, 2005 at 70 FR 15592); and the area's 15% ROP plan and associated MVEBs (April 12, 2005 at 70 FR 18993). For a complete list, see the Texas SIP map at *http://www.epa.gov/earth1r6/6pd/air/sip/sip.htm.*

III. What Is Ozone?

Ozone is a gas composed of three oxygen atoms. At ground level, it is created by a chemical reaction between nitrogen oxides (NO_X) and VOCs in the presence of sunlight. Ozone and NO_X are two of six common pollutants, also known as criteria pollutants, for which EPA has set NAAQS. Motor vehicle exhaust and industrial emissions, gasoline vapors, and chemical solvents as well as natural sources emit NO_X and VOCs, help to form ozone. Sunlight and hot weather cause ground-level ozone to form in harmful concentrations in the air. As a result, ozone is known as a summertime air pollutant. Many urban areas tend to have high levels of ground-level ozone, but rural areas are also subject to increased ozone levels because wind carries ozone and its precursors hundreds of miles from their sources.

Repeated exposure to ozone pollution may cause permanent lung damage. Even at very low levels, ground-level ozone triggers a variety of health problems including aggravated asthma, reduced lung capacity, and increased susceptibility to respiratory illnesses like pneumonia and bronchitis. It can also have detrimental effects on plants and ecosystems.

IV. What Are the 5% Increment of Progress Plan Requirements?

EPA issued a guidance memorandum on August 18, 2004 [1] that outlines the criteria for 5% IOP plans. In brief summary, the guidance states that the reductions should be based on a 2002 EI, does not allow credit from Federal measures or measures in the SIP as of 2002, provides that the reductions occur by 2007, and allows use of NO_X, VOCs, or some combination of both pollutants, to meet the 5% reduction. The steps involved in determining the emissions needed to meet the 5% reduction are the establishment of the 2002 baseline EI, calculation of the 5% reduction, and projection of the 2007 EI. We will present the 2002 and 2007 inventories, with a discussion of measures that will contribute to emission reductions in the area, and conclude by demonstrating the 5% reduction.

A. 2002 Emissions Inventory

The Clean Air Act Amendments of 1990 has the requirement that EIs be prepared for ozone nonattainment areas. Because ozone is photochemically produced in the atmosphere when VOCs are mixed with NO_X in the presence of sunlight, ozone EIs focus on these precursor pollutants. The EI identifies the source types present in an area, the amount of each pollutant emitted, and the types of processes and control devices employed at each plant or source category. The Act requires the inventories to be actual emissions. The 2002 EI will provide a baseline emission level for calculating reduction targets and the control strategies for achieving the required emission reductions. The inventory of emissions of VOC and NO_X is summarized from the estimates developed for four general categories of emissions sources: Point, area, onroad mobile, and nonroad mobile.

1. Point Sources

Major point sources for inventory reporting in nonattainment areas are defined as industrial, commercial, or institutional sources that emit actual levels of criteria pollutants at or above 10 tons per year (tpy) of VOC, 25 tpy of NO_X, or 100 tpy of other criteria pollutants.

The Texas Commission on Environmental Quality (TCEQ) collects data from sources identified as having triggered the levels of emissions indicated above. Data submitted is quality assured and entered into the State of Texas Air Reporting System. For more details, refer to the Technical Support Document (TSD).

A list of emissions by facility for all nine counties in the DFW nonattainment area is provided in Attachment 2 of the TSD. The State separately accounts for NO_X emissions from the Alcoa facility, as it lies outside the DFW nonattainment area. The 5% guidance allows a nonattainment area to include VOC sources within 100 kilometers (km) and NO_X sources within 200 km of the nonattainment area in calculations of IOP reductions. The Alcoa facility is 120 miles from DFW, thus only the NO_X emissions are allowed. The NO_X emissions for the entire facility are added to the DFW area's EI, as required by the guidance; these emissions are 23.17 tons per day (tpd). The 2002 point source inventory for NO_X is 79.31 tpd and 28.31 tpd for VOCs; with Alcoa's emissions, the point source inventory for NO_X is adjusted to 102.48 tpd.

[1] "Guidance on 5% Increment of Progress" (40 CFR 51.905(a)(1)(ii)), August 18, 2004; from Lydia Wegman, Director, OAQPS, to EPA Regional Air Directors.

2. Area Sources

Area sources have emissions below the point source reporting levels and are too numerous and/or too small to identify individually. Area sources include commercial, small-scale industrial, and residential categories that use materials or processes that generate emissions. Area sources are categorized by hydrocarbon evaporative emissions or fuel combustion emissions; examples include printing operations, house paints, gasoline service station underground tank filling and vehicle refueling, outdoor burning, structural fires, and wildfires.

Emissions for area sources are estimated as county-wide totals. These emissions, with some exceptions, may be calculated by an established, EPA approved, emission factor. Actual activity data is used when available, *e.g.*, gallons of gasoline sold in a county, number of wildfire acres burned, etc. When activity data is unavailable, surrogates such as county population and employment data by industry type are used. The methodology is provided in Appendix A of the submittal. A detailed listing of emissions by area source type for all nine counties in the DFW area is provided in Attachment 3 of the TSD. The State separately accounts for VOC emissions from the gas can rule (see paragraph B(3) below—portable fuel containers) within a 100 km radius outside the DFW area. The 2002 area source inventory, adjusted to include 4.52 tpd VOC emissions from the gas can rule, is 38.03 tpd of NO_X and 208.92 tpd for VOCs.

3. Onroad Mobile Sources

Onroad mobile sources are automobiles, trucks, motorcycles, and other motor vehicles traveling on roadways. Combustion related emissions are estimated for vehicle engine exhaust, and evaporative hydrocarbon emissions are estimated for the fuel tank and other evaporative leak sources on the vehicle. The 2002 onroad mobile source EI was prepared by the North Central Texas Council of Governments (NCTCOG) and used the newest EPA onroad emission factor model, MOBILE6.2. Emission factors were applied to vehicle activity using the Texas Mobile Source Emission Software. Vehicle activity was generated using the DFW Regional Travel Model. Emissions were summarized in 24 one-hour periods and for a daily total for all counties identified in the analysis. Additional details are included in the TSD. The 2002 onroad mobile source inventory for NO_X is 345.44 tpd and 156.34 tpd for VOCs.

4. Nonroad Mobile Sources

Nonroad mobile sources are aircraft, railroad locomotives, recreational vehicles and boats, and a broad range of equipment, from 600-horsepower engines in the construction equipment class to one-horsepower string trimmers in the lawn and garden class. The EPA NONROAD model is used to calculate emissions for all nonroad mobile sources except aircraft, locomotives, and commercial marine vessels. This model generates emissions for equipment in the following classes: Agricultural, Commercial, Construction, Industrial/Oilfield, Lawn and Garden, Logging, and Railway Maintenance.

Emissions from commercial and military aircraft are calculated using the Federal Aviation Administration's Emissions and Dispersion Modeling System model, which uses actual recorded landing/takeoff (LTO) data and aircraft types to generate emissions. Smaller aircraft emissions are calculated using EPA emission factors and applicable LTO data. Emissions from ground support equipment at commercial airports are based on a recent survey in the DFW area.

Locomotive emissions are based on fuel use and track mileage and individual railroad lines were surveyed for actual data. The 2002 nonroad mobile source inventory is 136.24 tpd for NO_X and 70.08 tpd for VOCs. See the TSD for more detailed information.

Although EPA's 5% guidance allows states to use EPA's draft 2002 National Emissions Inventory (NEI) for the 2002 baseline inventory, the TCEQ submitted their own 2002 EI for point, area, onroad mobile, and nonroad mobile sources for all nine counties in the DFW nonattainment area. The inventory is the peak ozone season daily average of actual emissions for each source and includes more accurate activity data than that available in EPA's NEI. The TCEQ's inventory of ozone precursors for all nine counties in the DFW nonattainment area is shown in Table 1; the point and area emissions are unadjusted for emissions outside the nonattainment area. This unadjusted EI is comprised of actual emissions within the nonattainment area, as required by the Act, which will provide the baseline emission level for calculating reduction targets and the control strategies for achieving the required emission reductions. We are proposing to approve the 2002 baseline EI.

TABLE 1.—2002 ANTHROPOGENIC EMISSIONS FOR THE DFW 9-COUNTY NONATTAINMENT AREA

Major source category	2002 VOC emissions (tpd)	2002 NO_X emissions (tpd)
Point	28.31	79.31
Area	204.42	38.03
Onroad Mobile	156.34	345.44
Nonroad Mobile	70.08	136.24
Total	459.15	599.02

B. 2007 Emissions Projections

The future year or 2007 inventory reflects growth and controls from measures already in the SIP or expected to occur due to Federal measures; these emissions are presented in Table 2, in contrast with the 2002 emission inventories.

Texas developed the 2007 point source EI by multiplying the 2002 baseline EI by growth factors that represent industrial expansion through 2007. This includes all of the NO_X and VOC controls already in place, per State rules that require reductions between 2002 and 2007. The 2007 point source inventory is projected to be 83.52 tpd NO_X and 30.42 tpd VOC. A detailed discussion of the future point source inventory is provided in the TSD.

The 2007 EI for area sources was projected using EPA's Economic Growth Analysis System (EGAS) growth factors, which contain individual growth factors for each category and forecasting year. This is the EPA standard and accepted method for developing future year EIs. The projected 2007 area source inventory is 39.64 tpd NO_X and 215.91 tpd VOC.

The MOBILE6.2 model was used to estimate onroad emission factors for 2007. This model incorporates local information on fleet mix and activity data, and Federal, State and local measures that will be implemented by 2007. The projected 2007 onroad mobile inventory is 206.72 tpd NO_X and 104.14 tpd VOC.

The 2007 EI for nonroad mobile sources was developed using the NONROAD model. Projected LTO data was used to develop the 2007 aircraft and ground support EIs, and railroad activity for 2007 was estimated using previous year surveys and data from local railroad lines. The projected 2007 nonroad mobile source inventory is 120.83 tpd NO_X and 54.58 tpd VOC.

TABLE 2.—2002 AND 2007 VOC AND NO_X EMISSIONS BY COUNTY AND MAJOR CATEGORY (IN TPD)

Major source category	2002 VOC emissions	2007 VOC emissions	2002 NO_X emissions	2007 NO_X emissions
Point	28.31	30.42	79.31	83.52
Area	204.42	215.91	38.03	39.64
Onroad Mobile	156.34	104.14	345.44	206.72
Nonroad Mobile	70.08	54.58	136.24	120.83
Total	459.15	405.05	599.02	450.71

1. What Are the Motor Vehicle Emissions Budgets?

The motor vehicle emission budget (MVEB) establishes a ceiling for emissions from onroad mobile sources. The onroad EI in the SIP sets the MVEB, which is used to meet the EPA's transportation conformity requirements, found at 40 CFR part 51, subpart T and part 93, subpart A. EPA's conformity rules require that transportation plans and related projects result in emissions that do not exceed the MVEB established in the SIP.

The MVEBs for DFW were established by subtracting onroad emission reductions from the onroad mobile source EI for 2007. The Texas Emission Reduction Plan (TERP) is a NO_X emission reduction strategy which can be applied toward the 5% IOP. The TERP assumes reductions of 22.2 tpd by 2007 and allocates 33.1% of the reductions to onroad mobile and 66.9% to nonroad mobile. The TCEQ has conservatively estimated TERP to provide onroad mobile NO_X reductions of 5.4 tpd for the DFW area by June 15, 2007. The TERP applies specifically to NO_X reductions and information on VOCs is not available. The MVEBs for DFW were found adequate for use in transportation conformity on June 01, 2005 (70 FR 31441). Table 3 documents the MVEBs that have been established by this SIP revision. EPA is proposing to approve these MVEBs and, upon final approval, all future transportation improvement programs, projects and plans for the DFW area will need to show conformity to the budgets in this plan; previous budgets approved or found adequate are not applicable.

TABLE 3.—2007 DFW MOTOR VEHICLE EMISSIONS BUDGETS

Criteria used to establish the 2007 MVEB	VOC (tpd)	NO_X (tpd)
2007 onroad mobile source inventory, unadjusted	104.14	206.72
TERP credits (allocation for onroad mobile)	0	−5.4
2007 MVEB	104.14	201.32

2. What NO_X Control Measures Did the State Submit?

a. Texas Emissions Reduction Plan (TERP)

The TERP, discussed briefly above, was established by the Texas Legislature with the enactment of Senate Bill 5 (SB5). The concept of this economic incentive program was approved into the Texas SIP on November 14, 2001 (66 FR 57159). State rules that govern TCEQ's administration of the TERP were approved into the SIP August 19, 2005 (70 FR 48647).

The TERP primarily addresses diesel emission reductions, while a small percentage of the program is allocated to energy efficiency. The TERP analyses for this program are found in the SIP narrative and a TCEQ Interoffice Memorandum dated August 16, 2004. Projected credits are based on cost per ton of previous projects. Considering diesel emission reduction projects recently funded and the approach established for allocating future TERP funds, we agree that TERP funding should be sufficient to achieve NO_X reductions of 22.2 tpd in the DFW area by 2007. Additional detail is provided in the TSD.

b. Energy Efficiency

The Texas Legislature enhanced the use of Energy Efficiency/Renewable Energy (EE/RE) programs for meeting TERP goals by requiring TCEQ to promote the use of energy efficiency as a way of meeting the NAAQS and to develop a method for calculating emissions reductions from energy efficiency. To achieve energy savings in new construction, SB 5 mandated statewide adoption of the International Residential Code (IRC) and the International Energy Conservation Code (IECC) for residential, commercial and industrial buildings, through new building code requirements (Texas Health and Safety Code, Chapter 388—Texas Building Energy Performance Standards), which are enforced by local jurisdictions. The emissions reductions relied upon in this 5% IOP plan occurred in 2003 because of the energy savings achieved by power plants and newly-constructed residential buildings.

These NO_X reductions have already been achieved. To calculate the SIP credit for these NO_X reductions, a method was developed by the Energy Systems Laboratory (ESL) of Texas A&M University, with assistance from EPA's Office of Atmospheric Programs, the TCEQ, and the Electric Reliability Council of Texas (ERCOT). We are proposing to find that the methodology for quantifying the completed emissions reductions for credit in the SIP is reasonable. See the TSD for additional information. The energy savings achieved provided NO_X reductions at each power plant within the ERCOT region (the ERCOT serves about 85% of Texas, including the DFW nonattainment area) and reductions of natural gas within each county, statewide. The NO_X reductions were due to EE measures in new construction for single and multi-family residences. The reductions in natural gas were due to the elimination of pilot lights in furnaces.

The TCEQ did not project 2007 NO_X reductions from EE measures in the DFW nonattainment area. Rather, the State, using the above-described methodology, quantified the EE reductions that have already occurred by using several spreadsheet programs that conservatively calculated energy savings from the electricity and natural gas reductions for residential, commercial and industrial buildings.

The measures were completed and the reductions occurred by 2003. These reductions have not been relied upon in another RFP/ROP plan for Texas and will not receive credit in another SIP. Therefore, the reductions are surplus. These measures have been implemented in residential construction, which has a lifetime beyond the term for which this credit is granted (2007) and are therefore permanent.

As indicated above, the NO_X reductions have been achieved and were calculated to be 0.72 tpd in the DFW area. The total amount of NO_X reductions calculated for the RFP, as shown in Table 8 below, is 27.59 tpd. The SIP credit for the emissions already achieved (0.72 tpd) is 2.6% of this total and therefore meets the 3% limit. Additional details are provided in the TSD.

EPA's approval of these SIP credits will not interfere with any applicable requirement concerning attainment or any other applicable requirement of the Act and the credits meet and comply with section 110(l) of the Act. We are proposing to approve the NO_X emissions reductions achieved by the EE measures as credit in the SIP for 0.72 tpd because they contribute to attainment of the 8-hour ozone NAAQS, are permanent and surplus, and are relied upon in the 5% IOP plan. We propose to approve these NO_X emission reductions of 0.72 tpd under sections 110 and part D of the Act.

c. Alcoa—Milam County

On April 9, 2003, a Federal Consent Decree was signed with Alcoa that required the company to reduce NO_X emissions from 3 boilers located at its facility in Milam County. These boilers are fired by locally mined lignite coal and provide power for the aluminum smelting operations. The facility is located nearly 120 miles outside of the DFW nonattainment area, which is within the 200 km radius for NO_X emissions, but beyond the 100 km radius for VOCs. Texas chose to include emission reductions for just one of the boilers. Although Texas submitted NO_X reductions of 3.9 tpd, we calculate 2.8 tpd reduction in NO_X emissions that would be creditable toward the 5% IOP plan. Today we are proposing to approve the submission of the Federal consent decree concerning the Alcoa Rockdale, Milam County facility, as described in the SIP Narrative by the TCEQ, into the Texas SIP as a part of the 5% IOP plan for the purposes of establishing the quantifying methodology, the implementation, and making SIP-enforceable Alcoa's choice, as defined in the consent decree, to shut down one of the three boilers and replace one of the two remaining boilers with a circulating fluidized bed (CFB) boiler by June 15, 2007 as described in the SIP Narrative by the TCEQ, to ultimately achieve SIP credit for NO_X emissions reductions of 2.8 tpd.

To receive credit for reductions, the total NO_X emissions must be added to the inventory for the base year. Texas therefore added 23.17 tpd of NO_X emissions to the 2002 inventory for Alcoa and took credit for NO_X reductions of 3.9 tpd, but did not take credit for VOC reductions. These NO_X reductions are also required to be permanent, enforceable, quantifiable and surplus.

The terms of the Federal consent decree are legally enforceable by EPA. Texas issued Permit No. 48437 to Alcoa that incorporates the terms of the consent decree, so the reductions are also enforceable by TCEQ. The consent decree and State Permit contain emission limits upon which to quantify the emission reductions. Texas included NO_X emission reductions of 3.9 tpd by June 15, 2007.

The terms of the consent decree are also permanent. The consent decree remains in place until either the existing boilers achieve and maintain certain emission limitations for 24 months, the replacement boilers achieve and maintain certain emission limitations for 24 months, or the existing boilers have been permanently shut down. Additionally, the consent decree terminates only after all of the requirements of the consent decree, including those mentioned above, are incorporated into the Title V operating permit for the Rockdale facility.

The NO_X reductions are surplus to the State's Regional Ozone plan, relied upon in all of the Texas ozone nonattainment areas but for the El Paso area, and which required a 50% reduction to utility NO_X emissions in the selected East and Central Texas counties, a 30% NO_X emission reduction to non-utility grandfathered sources in the selected East and Central Texas counties, NO_X emissions reductions at Alcoa, Milam County and Eastman Chemical Company near Longview, Texas through Agreed Orders, and NO_X emissions reductions through a state-wide water heater rule. EPA approved the Regional Ozone SIP on October 26, 2000, at 65 FR 64148. Some of the NO_X reductions obtained through compliance with the Federal consent decree are not considered surplus and are not creditable. Alcoa however, agreed in the Federal consent decree to go beyond all applicable Federal requirements. At the time of the occurring violations addressed in the Federal consent decree, Alcoa as a lignite-burning facility would have been limited to 0.6 lbs/million Btu. A review of the Agreed Order approved by EPA as part of the Regional SIP allowed the facility 0.8 lbs/million Btu by 2002. The difference between 0.8 and 0.6 lbs/million Btu would not be creditable. Using a conservative assumption that Alcoa operated at 0.8 lbs/million Btu in 2002 and recognizing that Alcoa must reduce the operating rate to 0.1 lbs/million Btu, we calculated that 71% of the reductions reported by Texas would be available for credit (71% of 3.9 tpd). Therefore, EPA proposes to approve 2.8 tpd as creditable toward the 5% IOP. Calculations and additional detail are provided in the TSD.

Approving the Alcoa Federal consent decree into the DFW SIP for establishing and making enforceable a 2.8 tpd reduction in NO_X emissions by shutting down one of the three boilers and replacing one of the two remaining boilers with a CFB boiler before June 15, 2007, improves the DFW SIP as it requires the affected source to reduce its NO_X emissions beyond the level of compliance otherwise required by law and to incorporate those requirements into a Title V operating permit. We are proposing to approve these revisions to the Texas SIP because they will contribute to attainment of the 8-hour ozone NAAQS, because they meet the EPA rules and are consistent with EPA guidance, and were one of the control measures relied upon in the 5% IOP plan. As such, EPA's approval of this revision will not interfere with any applicable requirement concerning attainment or any other applicable requirement of the Act and it meets and complies with section 110(l) of the Act. We propose to approve these rules under section 110 and part D of the Act.

d. Stationary Reciprocating Internal Combustion Engines

On May 13, 2005 the TCEQ Chairman submitted to us rule revisions to 30 TAC, Chapter 117, Control of Air Pollution From Nitrogen Compounds, concerning stationary reciprocating internal combustion (IC) engines operating within the DFW eight-hour ozone nonattainment area (the Chapter 117 SIP submittal). The Chapter 117 SIP submittal primarily addresses NO_X emissions from IC engines with a horsepower rating greater than or equal to 300 hp in the nine Texas Counties of Collin, Dallas, Denton, Ellis, Johnson, Kaufman, Parker, Rockwall, and Tarrant. The affected engines under the Chapter 117 SIP submittal are lean burn, rich burn, and dual-fuel (gas and liquid)

fired lean burn engines. The rule revisions include more stringent NO_X emissions limitations on lean burn and dual-fuel fired lean burn IC engines operating in Collin, Dallas, Denton, and Tarrant Counties and apply the limitations to those engines in Ellis, Johnson, Kaufman, Parker, and Rockwall Counties. They also impose new NO_X emissions limitations on gas-fired rich burn IC engines in all nine counties of the DFW 8-hour ozone nonattainment area. See attachment 5 of the TSD for more information. The Chapter 117 SIP submittal should result in NO_X reductions of 1.87 tpd by 2007 for the DFW eight-hour ozone nonattainment area. Today, we are proposing to approve the Chapter 117 SIP submittal as part of the 5% 1OP plan.

The current Texas SIP contains no Federally-approved requirements for controlling NO_X emissions from gas-fired rich burn, and gas-fired lean burn IC engines operating within Ellis, Johnson, Kaufman, Parker, and Rockwall counties. By approving the Chapter 117 SIP submittal, we will be improving the Texas SIP for enforcement and ozone attainment purposes. As such, EPA's approval of this revision will not interfere with any applicable requirement concerning attainment or any other applicable requirement of the Act and it meets and complies with section 110(l) of the Act.

On September 1, 2000 (65 FR 53172), EPA approved NO_X emission specifications for IC engines as a part of the ozone control measures for the DFW one-hour ozone nonattainment area that included the four core counties—Collin, Dallas, Denton, and Tarrant. Table 4 contains a summary of the 65 FR 53172 rulemaking for IC engines operating in the four core counties.

TABLE 4.—AFFECTED SOURCES, NO_X EMISSION SPECIFICATIONS, AND ADDITIONAL INFORMATION

Source	NO_X emission specifications	Additional information
Internal Combustion Engines	3.0 gram/hp-hr	Natural gas, lean burn, stationary, capacity ≥300 hp in DFW. Also a 3.0 gram/hp-hr limit for CO.

On March 16, 2001 (66 FR 15195), EPA approved NO_X emission specifications for IC engines as part of the ozone control measures for the DFW one-hour ozone nonattainment area that included the four core counties; Table 5 is a summary of the 66 FR 15195 rulemaking for IC engines operating in the four core counties.

TABLE 5.—AFFECTED SOURCES, NO_X EMISSION SPECIFICATION, AND ADDITIONAL INFORMATION

Source	NO_X emission specifications	Additional information
Internal Combustion Engines	2.0 gram/hp-hr	Gas-fired, dual-fuel lean burn (Collin, Dallas, Denton and Tarrant Counties), capacity ≥ 300 hp, also 3.0 gram/hp-hr for CO.

The area in Tables 4 and 5 refers to the four core counties. Table 6 contains a summary of NO_X control requirements for IC engines operating in the DFW eight-hour ozone nonattainment area under the Chapter 117 submittal being proposed for approval today.

TABLE 6.—AFFECTED SOURCES, NO_X EMISSION SPECIFICATIONS, AND ADDITIONAL INFORMATION

Source	NO_X limit	Additional information
Internal Combustion Engines	2.0 gram/hp-hr	Gas-fired lean burn (Collin, Dallas, Denton, Ellis, Johnson, Kaufman, Parker, Rockwall, and Tarrant Counties), capacity ≥ 300 hp, also 3.0 gram/hp-hr for CO.
Internal Combustion Engines	2.0 gram/hp-hr	Gas-fired rich burn in operation before January 2000 (Collin, Dallas, Denton, Ellis, Johnson, Kaufman, Parker, Rockwall and Tarrant Counties), capacity ≥ 300 hp, also 3.0 gram/hp-hr for CO.
Internal Combustion Engines	0.5 gram/hp-hr	Gas-fired rich burn in operation after January 2000 (Collin, Dallas, Denton, Ellis, Johnson, Kaufman, Parker, Rockwall and Tarrant Counties), capacity ≥ 300 hp, also 3.0 gram/hp-hr for CO.

As stated earlier, the Chapter 117 SIP submittal should result in NO_X reductions of 1.87 tpd, and should assist in bringing the DFW area into attainment with the 8-hour ozone NAAQS.

The Chapter 117 SIP submittal requires the affected sources to reduce their NO_X emissions. We are proposing to approve these revisions to the Texas SIP because they will contribute toward attainment of the 8-hour ozone NAAQS and were one of the control measures relied upon in the DFW 5% 1OP Plan. This revision adds requirements for NO_X emission limitations for rich burn IC engines in all nine counties. Additionally, the revisions impose a more stringent NO_X emission limitation on lean burn and dual fired lean burn IC engines in the four core counties and extend the limitations to those engines in the five adjacent counties. We are proposing to approve these rules under section 110 and part D of the Act.

3. What VOC Control Measures Did the State Submit?

a. Statewide Portable Fuel Container Rule

The TCEQ adopted regulations for portable fuel containers sold in Texas and EPA approved the rule, published February 10, 2005 (70 FR 7041). This will lower VOC emissions from portable fuel containers by an estimated 2.79 tpd within the nine-county nonattainment area and 0.63 tpd for counties outside

of, but within a 100 km radius, of the nine-county area. As discussed earlier, the 5% guidance allows a nonattainment area to include VOC sources within 100 km of the nonattainment area in calculations of IOP reductions. There are 34 counties outside of the DFW 9-county area, that fall within 100 km of the nonattainment area. The VOC emissions from portable fuel containers within these 34 counties are added to the DFW area's EI, as required by the guidance; these emissions are 4.52 tpd. The 2002 baseline EI for VOCs is 459.15 tpd; with the portable fuel container emissions, the 2002 EI for VOCs is adjusted to 463.67 tpd. The total VOC emission reductions for 2007 are projected to be 3.42 tpd. Additional detail is provided in 70 FR 7041 and the TSD for this action.

b. Surface Coating Operations

Various rules for surface coating operations have been in effect for the four core counties in DFW, to meet 1-hour ozone nonattainment requirements. The State adopted a rule extending the requirements for surface coatings to the five newly designated 8-hour nonattainment counties. In a separate action, we approved Texas' SIP revision to extend the requirements for surface coatings to the five newly designated nonattainment counties, published January 19, 2006 (71 FR 3009). This will result in additional VOC reductions of 0.3 tpd for the area. Additional details are provided in 71 FR 3009 and the TSD for this action.

c. Stage I Vapor Recovery

Rules are in effect for Stage I vapor recovery during gasoline unloading operations in the four core counties, with an exemption for operations with a throughput equal to or less than 10,000 gallons per month (gpm). The State adopted a rule revision to extend these requirements, with the 10,000 gpm exemption, to the five newly designated nonattainment counties. In a separate action, we approved Texas' SIP revision to extend Stage I requirements to the five newly designated nonattainment counties, published January 19, 2006 (71 FR 3009). This measure will result in VOC reductions of 2.09 tpd. Additional details are provided in 71 FR 3009 and the TSD for this action.

C. Calculation of the 5% Reduction

EPA's 5% guidance allows the reduction to be made with all VOC emission reductions, all NO_X reductions, or a combination of VOC and NO_X reductions that equal 5%. Texas chose to meet the 5% requirement by applying on a combination of VOC and NO_X reductions, as shown in Tables 7 and 8.

TABLE 7.—SOURCES OF NO_X AND VOC REDUCTIONS FOR THE DFW AREA

Source of reductions	NO_X (tpd)	VOC (tpd)
Eligible existing measures:		
TERP	22.2	.....
Portable fuel containers (in DFW 9 county area)	.....	2.79
Portable fuel containers (within 100 km radius)	.....	0.63
Surface coating (expand to 5 new counties)	.....	0.3
Lower Stage I exemption to 10,000 gpm (expand to 5 new counties)	.....	2.09
Subtotal	22.2	5.81
Proposed measures:		
Alcoa (w/in 200 km radius)	2.8	.....
Energy Efficiency	0.72	.....
Stationary reciprocating IC engines (in 9 county area)	1.87	.....
Subtotal	5.39	.....
Total identified reductions (add subtotals)	27.59	5.81

The reductions submitted for new VOC and NO_X measures are acceptable, with the exception of the amounts for Alcoa. As discussed above, we reduced the Alcoa NO_X credit from 3.9 tpd to 2.8 tpd.

TABLE 8.—CALCULATION OF THE ADJUSTED 2002 EMISSIONS INVENTORY

Variables to calculate the adjusted EI	VOC (tpd)	NO_X (tpd)
2002 baseline inventory	459.15	599.02
Alcoa (within 200 km radius)	.....	+23.20
Portable fuel containers (within 100 km radius)	+4.52	
Adjusted 2002 baseline EI	463.67	622.22

The 2002 baseline inventory is adjusted by adding the NO_X emissions from Alcoa and VOC emissions from the portable fuel container rule. The adjusted baseline EI is the basis for performing the 5% reduction calculations. As shown in Table 8, the adjusted baseline inventory for VOC is 463.67 tpd and 622.22 tpd for NO_X. The VOC control strategy reductions provide 5.81 tpd, which is 1.25% of the adjusted 2002 baseline for VOCs. The NO_X reductions provide 27.59 tpd, which is 4.43% of the adjusted 2002 baseline for NO_X. Per the 5% guidance, the sum of the percentage of the VOC reductions planned and the percentage of the NO_X reductions planned must equal 5%. In this case, the sum of 1.25% + 4.43% = 5.68%, which meets the requirement and has a small surplus of 0.68%. Table 9 shows the 2007 target emission levels.

TABLE 9.—CALCULATION OF 2007 EMISSION LEVELS, ADJUSTED TO MEET THE 5% TARGET

Variables to calculate the adjusted EI	VOC (tpd)	NO_X (tpd)
2007 inventory	405.05	450.71
Reductions proposed to meet 5%	−5.81	−27.59
Adjusted 2007 emission levels	399.24	423.12

Per EPA's 5% guidance, states should ensure that the projected 2007 EI is at least 5% less than the 2002 EI. When 5% is subtracted from each of the adjusted 2002 inventories, the emissions for VOCs are 440.49 tpd and emissions for NO_X are 591.11 tpd. The 2007 target emission levels are lower (shown in Table 10) and therefore meet the 5% guidance. This SIP revision demonstrates that the target level will be met and Texas has met the 5% increment of emission reduction.

TABLE 10.—DFW EMISSION REDUCTIONS, FROM 2002 TO 2007

Pollutant	Adjusted 2002 EI	Adjusted 2002 EI, minus 5%	Adjusted 2007 EI
VOC (tpd)	463.67	440.49	399.24
NO_X (tpd)	622.22	591.11	423.12

Our analyses of the measures submitted and the calculation of reductions indicate that the State has satisfied the requirements of the 5% Increment of Progress Plan.

V. Proposed Action

We are proposing to approve revisions to the SIP submitted by the State of Texas for the DFW nonattainment area as meeting 1-hour ozone serious area requirements. We are proposing to approve the 5% IOP plan, the revisions to the 2002 base year emissions inventory, the 2007 motor vehicle emissions budget, a Federal consent decree concerning an Alcoa plant in Rockdale, Milam County, energy efficiency measures, and revisions to 30 TAC, Chapter 117, Control of Air Pollution From Nitrogen Compounds, concerning stationary reciprocating IC engines operating within the DFW 8-hour ozone nonattainment area and incorporate these revisions into the Texas SIP. Although we are not reopening the comment period on RACT, we intend to finalize our proposed approval that RACT is in place for all major sources of VOCs in the DFW area in the final rulemaking for this proposal. We have evaluated these revisions and determined that they are consistent with the requirements of the Act and EPA's regulations, guidance and policy. These revisions fulfill the outstanding attainment demonstration obligation for the 1-hour ozone standard in the DFW nonattainment area and the outstanding obligation to adopt and implement all applicable requirements under the 1-hour ozone standard. We propose to approve these rules under section 110 and part D of the Act and EPA's regulations.

EPA is soliciting public comments on the issues discussed in this proposed rulemaking. These comments will be considered before EPA takes final action. Interested parties may participate in the Federal rulemaking procedure by submitting written comments to the EPA Regional Office listed in the **ADDRESSES** section of this proposed rulemaking, or by submitting comments electronically, by mail, or through hand delivery/courier following the directions provided in the **ADDRESSES** section of this action.

VI. Statutory and Executive Order Reviews

Under Executive Order 12866 (58 FR 51735, October 4, 1993), this proposed action is not a "significant regulatory action" and therefore is not subject to review by the Office of Management and Budget. For this reason, this action is also not subject to Executive Order 13211, "Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use" (66 FR 28355, May 22, 2001). This proposed action merely proposes to approve state law as meeting Federal requirements and imposes no additional requirements beyond those imposed by State law. Accordingly, the Administrator certifies that this proposed rule will not have a significant economic impact on a substantial number of small entities under the Regulatory Flexibility Act (5 U.S.C. 601 *et seq.*). Because this rule proposes to approve pre-existing requirements under State law and does not impose any additional enforceable duty beyond that required by State law, it does not contain any unfunded mandate or significantly or uniquely affect small governments, as described in the Unfunded Mandates Reform Act of 1995 (Pub. L. 104–4).

This proposed rule also does not have tribal implications because it will not have a substantial direct effect on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes, as specified by Executive Order 13175 (65 FR 67249, November 9, 2000). This action also does not have Federalism implications because it does not have substantial direct effects on the States, on the relationship between the national government and the States, or on the distribution of power and responsibilities among the various levels of government, as specified in Executive Order 13132 (64 FR 43255, August 10, 1999). This action merely proposes to approve a State rule implementing a Federal standard, and does not alter the relationship or the distribution of power and responsibilities established in the Clean Air Act. This proposed rule also is not subject to Executive Order 13045 "Protection of Children from Environmental Health Risks and Safety Risks" (62 FR 19885, April 23, 1997), because it is not economically significant.

In reviewing SIP submissions, EPA's role is to approve State choices, provided that they meet the criteria of the Clean Air Act. In this context, in the absence of a prior existing requirement for the State to use voluntary consensus standards (VCS), EPA has no authority to disapprove a SIP submission for failure to use VCS. It would thus be inconsistent with applicable law for EPA, when it reviews a SIP submission,

to use VCS in place of a SIP submission that otherwise satisfies the provisions of the Clean Air Act. Thus, the requirements of section 12(d) of the National Technology Transfer and Advancement Act of 1995 (15 U.S.C. 272 note) do not apply. This proposed rule does not impose an information collection burden under the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*).

List of Subjects in 40 CFR Part 52

Environmental protection, Air pollution control, Nitrogen dioxide, Ozone, Volatile Organic Compounds, Intergovernmental relations, Reporting and record keeping requirements.

Authority: 42 U.S.C. 7401 *et seq.*

Dated: August 10, 2006.

Richard E. Greene,

Regional Administrator, Region 6.

[FR Doc. E6–13866 Filed 8–21–06; 8:45 am]

BILLING CODE 6560–50–P

ENVIRONMENTAL PROTECTION AGENCY

40 CFR Part 55

[EPA–R10–OAR–2006–0377; FRL–8212–2]

Outer Continental Shelf Air Regulations Consistency Update for Alaska

AGENCY: Environmental Protection Agency (EPA).

ACTION: Proposed rule-consistency update.

SUMMARY: EPA is proposing to update a portion of the Outer Continental Shelf ("OCS") Air Regulations. Requirements applying to OCS sources located within 25 miles of States' seaward boundaries must be updated periodically to remain consistent with the requirements of the corresponding onshore area ("COA"), as mandated by section 328(a)(1) of the Clean Air Act ("the Act"). The portion of the OCS air regulations that is being updated pertains to the requirements for OCS sources in the State of Alaska. The intended effect of approving the OCS requirements for the State of Alaska is to regulate emissions from OCS sources in accordance with the requirements onshore. The change to the existing requirements discussed below is proposed to be incorporated by reference into the Code of Federal Regulations and is listed in the appendix to the OCS air regulations.

DATES: Written comments must be received on or before September 21, 2006.

ADDRESSES: Submit your comments, identified by Docket ID Number EPA–R10–OAR–2006–0377, by one of the following methods:

A. Federal eRulemaking Portal: *http://www.regulations.gov:* Follow the on-line instructions for submitting comments;

B. E-mail: *greaves.natasha@epa.gov*;

C. Mail: Natasha Greaves, Federal and Delegated Air Programs Unit, U.S. Environmental Protection Agency, Region 10, 1200 Sixth Avenue, Mail Stop: AWT–107, Seattle, WA 98101;

D. Hand Delivery: U.S. Environmental Protection Agency Region 10, Attn: Natasha Greaves (AWT–107), 1200 Sixth Avenue, Seattle, Washington 98101, 9th Floor. Such deliveries are only accepted during normal hours of operation, and special arrangements should be made for deliveries of boxed information.

Instructions: Direct your comments to Docket ID No. EPA–R10–OAR–2006–0377. EPA's policy is that all comments received will be included in the public docket without change and may be made available online at *http://www.regulations.gov*, including any personal information provided, unless the comment includes information claimed to be Confidential Business Information ("CBI") or other information whose disclosure is restricted by statute. Do not submit information that you consider to be CBI or otherwise protected through *www.regulations.gov* or e-mail. The *http://www.regulations.gov* Web site is an "anonymous access" system, which means EPA will not know your identity or contact information unless you provide it in the body of your comment. If you send an e-mail comment directly to EPA without going through *http://www.regulations.gov* your e-mail address will be automatically captured and included as part of the comment that is placed in the public docket and made available on the Internet. If you submit an electronic comment, EPA recommends that you include your name and other contact information in the body of your comment and with any disk or CD–ROM you submit. If EPA cannot read your comment due to technical difficulties and cannot contact you for clarification, EPA may not be able to consider your comment. Electronic files should avoid the use of special characters, any form of encryption, and be free of any defects or viruses.

Docket: All documents in the electronic docket are listed in the *http://www.regulations.gov* index. Although listed in the index, some information is not publicly available, *e.g.*, CBI or other information whose disclosure is restricted by statute. Certain other material, such as copyrighted material, is not placed on the Internet and will be publicly available only in hard copy form. Publicly available docket materials are available either electronically in *http://www.regulations.gov* or in hard copy during normal business hours at the Office of Air, Waste and Toxics, U.S. Environmental Protection Agency, Region 10, 1200 Sixth Avenue, Seattle, Washington 98101.

FOR FURTHER INFORMATION CONTACT: Natasha Greaves, Federal and Delegated Air Programs Unit, Office of Air, Waste, and Toxics, U.S. Environmental Protection Agency, Region 10, 1200 Sixth Avenue, Mail Stop: AWT–107, Seattle, WA 98101; telephone number: (206) 553–7079; e-mail address: *greaves.natasha@epa.gov*.

SUPPLEMENTARY INFORMATION:

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I. Background Information

Why Is EPA Taking This Action?

On September 4, 1992, EPA promulgated 40 CFR part 55,[1] which established requirements to control air pollution from OCS sources in order to attain and maintain Federal and State ambient air quality standards and to comply with the provisions of part C of title I of the Act. Part 55 applies to all OCS sources offshore of the States except those located in the Gulf of Mexico west of 87.5 degrees longitude. Section 328 of the Act requires that for such sources located within 25 miles of

[1] The reader may refer to the Notice of Proposed Rulemaking, December 5, 1991 (56 FR 63774), and the preamble to the final rule promulgated September 4, 1992 (57 FR 40792) for further background and information on the OCS regulations.

a State's seaward boundary, the requirements shall be the same as would be applicable if the sources were located in the COA. Because the OCS requirements are based on onshore requirements, and onshore requirements may change, section 328(a)(1) requires that EPA update the OCS requirements as necessary to maintain consistency with onshore requirements.

Pursuant to § 55.12 of the OCS rule, consistency reviews will occur (1) at least annually; (2) upon receipt of a Notice of Intent under § 55.4; or (3) when a State or local agency submits a rule to EPA to be considered for incorporation by reference in part 55. This proposed action is being taken in response to the submittal of a Notice of Intent on March 22, 2006 by Shell Offshore, Inc. of Houston, Texas. Public comments received in writing within 30 days of publication of this proposed rule will be considered by EPA before publishing a final rule.

Section 328(a) of the Act requires that EPA establish requirements to control air pollution from OCS sources located within 25 miles of States' seaward boundaries that are the same as onshore requirements. To comply with this statutory mandate, EPA must incorporate applicable onshore rules into part 55 as they exist onshore. This limits EPA's flexibility in deciding which requirements will be incorporated into part 55 and prevents EPA from making substantive changes to the requirements it incorporates. As a result, EPA may be incorporating rules into part 55 that do not conform to all of EPA's State implementation plan ("SIP") guidance or certain requirements of the Act.

Consistency updates may result in the inclusion of State or local rules or regulations into part 55, even though the same rules may ultimately be disapproved for inclusion as part of the SIP. Inclusion in the OCS rule does not imply that a rule meets the requirements of the Act for SIP approval, nor does it imply that the rule will be approved by EPA for inclusion in the SIP.

II. EPA's Evaluation

What Criteria Were Used To Evaluate Rules Submitted To Update 40 CFR Part 55?

In updating 40 CFR part 55, EPA reviewed the rules submitted for inclusion in part 55 to ensure that they are rationally related to the attainment or maintenance of federal or state ambient air quality standards or part C of title I of the Act, that they are not designed expressly to prevent exploration and development of the OCS and that they are applicable to OCS sources. 40 CFR 55.1. EPA has also evaluated the rules to ensure they are not arbitrary or capricious. 40 CFR 55.12 (e). In addition, EPA has excluded administrative or procedural rules,[2] and requirements that regulate toxics which are not related to the attainment and maintenance of federal and state ambient air quality standards.

III. Administrative Requirements

A. Executive Order 12866: Regulatory Planning and Review

Under Executive Order 12866 (58 FR 51735 (October 4, 1993)), the Agency must determine whether the regulatory action is "significant" and therefore subject to Office of Management and Budget ("OMB") review and the requirements of the Executive Order. The Order defines "significant regulatory action" as one that is likely to result in a rule that may:

(1) Have an annual effect on the economy of $100 million or more or adversely affect in a material way the economy, a sector of the economy, productivity, competition, jobs, the environment, public health or safety, or State, local, or tribal governments or communities;

(2) create a serious inconsistency or otherwise interfere with an action taken or planned by another agency;

(3) materially alter the budgetary impact of entitlements, grants, user fees, or loan programs or the rights and obligations of recipients thereof; or

(4) raise novel legal or policy issues arising out of legal mandates, the President's priorities, or the principles set forth in the Executive Order.

This action is not a "significant regulatory action" under the terms of Executive Order 12866 and is therefore not subject to OMB Review. This rule implements requirements specifically and explicitly set forth by the Congress in section 328 of the Clean Air Act, without the exercise of any policy discretion by EPA. These OCS rules already apply in the COA, and EPA has no evidence to suggest that these OCS rules have created an adverse material effect. As required by section 328 of the Clean Air Act, this action simply updates the existing OCS requirements to make them consistent with rules in the COA.

[2] Each COA which has been delegated the authority to implement and enforce part 55, will use its administrative and procedural rules as onshore. However, in those instances where EPA has not delegated authority to implement and enforce part 55, as in Alaska, EPA will use its own administrative and procedural requirements to implement the substantive requirements. See 40 CFR 55.14 (c)(4).

B. Paperwork Reduction Act

The OMB has approved the information collection requirements contained in 40 CFR part 55, and by extension this update to the rules, under the provisions of the *Paperwork Reduction Act*, 44 U.S.C. 3501 *et seq.* and has assigned OMB control number 2060–0249. Notice of OMB's approval of EPA Information Collection Request ("ICR") No. 1601.06 was published in the **Federal Register** on March 1, 2006 (71 FR 10499–10500). The approval expires January 31, 2009.

As EPA previously indicated (70 FR 65897–65898 (November 1, 2005)), the annual public reporting and recordkeeping burden for collection of information under 40 CFR part 55 is estimated to average 549 hours per response. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control numbers for EPA's regulations in 40 CFR are listed in 40 CFR part 9 and are identified on the form and/or instrument, if applicable.

C. Regulatory Flexibility Act

The Regulatory Flexibility Act ("RFA") generally requires an agency to conduct a regulatory flexibility analysis of any rule subject to notice and comment rulemaking requirements unless the agency certifies that the rule will not have a significant economic impact on a substantial number of small entities. Small entities include small businesses, small not-for-profit enterprises, and small governmental jurisdictions.

This rule will not have a significant economic impact on a substantial number of small entities. This rule implements requirements specifically and explicitly set forth by the Congress

in section 328 of the Clean Air Act, without the exercise of any policy discretion by EPA. These OCS rules already apply in the COA, and EPA has no evidence to suggest that these OCS rules have had a significant economic impact on a substantial number of small entities. As required by section 328 of the Clean Air Act, this action simply updates the existing OCS requirements to make them consistent with rules in the COA. Therefore, I certify that this action will not have a significant economic impact on a substantial number of small entities.

D. Unfunded Mandates Reform Act

Title II of the Unfunded Mandates Reform Act of 1995 ("UMRA"), Pub. L. 104–4, establishes requirements for Federal agencies to assess the effects of their regulatory actions on State, local, and tribal governments and the private sector. Under section 202 of the UMRA, EPA generally must prepare written statement, including a cost-benefit analysis, for proposed and final rules with "Federal mandates" that may result in expenditures to State, local, and tribal governments, in the aggregate, or to the private sector, of $100 million of more in any one year.

Before promulgating an EPA rule for which a written statement is needed, section 205 of the UMRA generally requires EPA to identify and consider a reasonable number of regulatory alternatives and adopt the least costly, most cost-effective or least burdensome alternative that achieves the objectives of the rule. The provisions of section 205 do not apply when they are inconsistent with applicable law. Moreover, section 205 allows EPA to adopt an alternative other than the least costly, most cost-effective or least burdensome alternative if the Administrator publishes with the final rule an explanation why that alternative was not adopted.

Before EPA establishes any regulatory requirements that may significantly or uniquely affect small governments, including tribal governments, it must have developed under section 203 of the UMRA a small government agency plan. The plan must provide for notifying potentially affected small governments, enabling officials of affected small governments to have meaningful and timely input in the development of EPA regulatory proposals with significant Federal intergovernmental mandates, and informing, educating, and advising small governments on compliance with the regulatory requirements.

Today's proposed rule contains no Federal mandates (under the regulatory provisions of Title II of the UMRA) for state, local, or tribal governments or the private sector that may result in expenditures of $100 million or more for state, local, or tribal governments, in the aggregate, or to the private sector in any one year. This rule implements requirements specifically and explicitly set forth by the Congress in section 328 of the Clean Air Act without the exercise of any policy discretion by EPA. These OCS rules already apply in the COA, and EPA has no evidence to suggest that these OCS rules have created an adverse material effect. As required by section 328 of the Clean Air Act, this action simply updates the existing OCS requirements to make them consistent with rules in the COA.

E. Executive Order 13132: Federalism

Executive Orders 13132, entitled "Federalism" (4 FR 43255 (August 10, 1999)), requires EPA to develop an accountable process to ensure "meaningful and timely input by state and local officials in the development of regulatory policies that have federalism implications." "Policies that have federalism implications" is defined in the Executive Order to include regulations that have "substantial direct effects on the states, on the relationship between the national government and the states, or on the distribution of power and responsibilities among the various levels of government."

This proposed rule does not have federalism implications. It will not have substantial direct effects on the states, on the relationship between the national government and the states, or on the distribution of power and responsibilities among the various levels of government, as specified in Executive Order 13132. This rule implements requirements specifically and explicitly set forth by the Congress in section 328 of the Clean Air Act, without the exercise of any policy discretion by EPA. As required by section 328 of the Clean Air Act, this rule simply updates the existing OCS rules to make them consistent with current COA requirements. This rule does not amend the existing provisions within 40 CFR part 55 enabling delegation of OCS regulations to a COA, and this rule does not require the COA to implement the OCS rules. Thus, Executive Order 13132 does not apply to this rule.

In the spirit of Executive Order 13132, and consistent with EPA policy to promote communications between EPA and state and local governments, EPA specifically solicits comments on this proposed rule from State and local officials.

F. Executive Order 13175: Coordination With Indian Tribal Governments

Executive Order 13175, entitled "Consultation and Coordination with Indian Tribal Governments" (65 FR 67249 (November 9, 2000)), requires EPA to develop an accountable process to ensure "meaningful and timely input by tribal officials in the development of regulatory policies that have tribal implications." This rule does not have a substantial direct effect on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes or on the distribution of power and responsibilities between the Federal Government and Indian tribes and thus does not have "tribal implications," within the meaning of Executive Order 13175. This rule implements requirements specifically and explicitly set forth by the Congress in section 328 of the Clean Air Act, without the exercise of any policy discretion by EPA. As required by section 328 of the Clean Air Act, this rule simply updates the existing OCS rules to make them consistent with current COA requirements. In addition, this rule does not impose substantial direct compliance costs on tribal governments, nor preempt tribal law. Consultation with Indian tribes is therefore not required under Executive Order 13175. Nonetheless, in the spirit of Executive Order 13175 and consistent with EPA policy to promote communications between EPA and tribes, EPA specifically solicits comments on this proposed rule from tribal officials

G. Executive Order 13045: Protection of Children From Environmental Health Risks and Safety Risks

Executive Order 13045: "Protection of Children from Environmental Health Risks and Safety Risks" (62 FR 19885 (April 23, 1997)), applies to any rule that: (1) Is determined to be "economically significant" as defined under Executive Order 12866, and (2) concerns an environmental health or safety risk that EPA has reason to believe may have a disproportionate effect on children. If the regulatory action meets both criteria, the Agency must evaluate the environmental health or safety effects of the planned rule on children, and explain why the planned regulation is preferable to other potentially effective and reasonably feasible alternatives considered by the Agency.

This proposed rule is not subject to Executive Order 13045 because it is not economically significant as defined in Executive Order 12866. In addition, the

Agency does not have reason to believe the environmental health or safety risks addressed by this action present a disproportional risk to children.

H. Executive Order 13211: Actions That Significantly Affect Energy Supply, Distribution, or Use

This proposed rule is not subject to Executive Order 13211, "Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use" (66 FR 28355 (May 22, 2001)) because it is not a significant regulatory action under Executive Order 12866.

I. National Technology Transfer and Advancement Act

Section 12(d) of the National Technology Transfer and Advancement Act of 1995 ("NTTAA"), Public Law 104–113, 12(d) (15 U.S.C. 272 note) directs EPA to use voluntary consensus standards in its regulatory activities unless to do so would be inconsistent with applicable laws or otherwise impractical. Voluntary consensus standards are technical standards (*e.g.*, materials specifications, test methods, sampling procedures, and business practices) that are developed or adopted by voluntary consensus standards bodies. The NTTAA directs EPA to provide Congress, through OMB, explanations when the Agency decided not to use available and applicable voluntary consensus standards.

As discussed above, this rule implements requirements specifically and explicitly set forth by the Congress in section 328 of the Clean Air Act, without the exercise of any policy discretion by EPA. As required by section 328 of the Clean Air Act, this rule simply updates the existing OCS rules to make them consistent with current COA requirements. In the absence of a prior existing requirement for the state to use voluntary consensus standards and in light of the fact that EPA is required to make the OCS rules consistent with current COA requirements, it would be inconsistent with applicable law for EPA to use voluntary consensus standards in this action. Therefore, EPA is not considering the use of any voluntary consensus standards. EPA welcomes comments on this aspect of the proposed rulemaking and, specifically, invites the public to identify potentially-applicable voluntary consensus standards and to explain why such standards should be used in this regulation.

List of Subjects in 40 CFR Part 55

Environmental protection, Administrative practice and procedures, Air pollution control, Continental shelf, Hydrocarbons, Incorporation by reference, Intergovernmental relations, Nitrogen dioxide, Nitrogen oxides, Ozone, Particulate matter, Permits, Reporting and recordkeeping requirements, Sulfur oxides.

Dated: August 14, 2006.

Ronald A. Kreizenbeck,

Acting Regional Administrator, Region 10.

Title 40, chapter I of the Code of Federal Regulations, is proposed to be amended as follows:

PART 55—[AMENDED]

1. The authority citation for part 55 continues to read as follows:

Authority: Section 328 of the Act (42 U.S.C. 7401, *et seq.*) as amended by Public Law 101–549.

2. Section 55.14 is amended by revising paragraph (e)(2)(i)(A) to read as follows:

§ 55.14 Requirements that apply to OCS sources located within 25 miles of States' seaward boundaries, by State.

* * * * *

(e) * * *

(2) * * *

(i) * * *

(A) State of Alaska Requirements Applicable to OCS Sources, December 3, 2005.

* * * * *

3. Appendix A to CFR part 55 is amended by revising paragraph (a)(1) under the heading "Alaska" to read as follows:

Appendix A to Part 55—Listing of State and Local Requirements Incorporated by Reference Into Part 55, by State

* * * * *

Alaska

(a) * * *

(1) The following State of Alaska requirements are applicable to OCS Sources, December 3, 2005, Alaska Administrative Code—Department of Environmental Conservation. The following sections of Title 18, Chapter 50:

Article 1. Ambient Air Quality Management

18 AAC 50.005. Purpose and Applicability of Chapter (effective 1/18/97)

18 AAC 50.010. Ambient Air Quality Standards (effective 1/18/97)

18 AAC 50.015. Air Quality Designations, Classification, and Control Regions (effective 1/18/97) except (d)(2)

Table 1. Air Quality Classifications

18 AAC 50.020. Baseline Dates and Maximum Allowable Increases (effective 1/18/97)

Table 2. Baseline Dates

Table 3. Maximum Allowable Increases

18 AAC 50.025. Visibility and Other Special Protection Areas (effective 1/18/97)

18 AAC 50.030. State Air Quality Control Plan (effective 1/18/97)

18 AAC 50.035. Documents, Procedures, and Methods Adopted by Reference (effective 1/18/97)

18 AAC 50.040. Federal Standards Adopted by Reference (effective 1/18/97) except (b), (c) (d), and (g)

18 AAC 50.045. Prohibitions (effective 1/18/97)

18 AAC 50.050. Incinerator Emissions Standards (effective 1/18/97)

Table 4. Particulate Matter Standards for Incinerators

18 AAC 50.055. Industrial Processes and Fuel-Burning Equipment (effective 1/18/97) except (a)(3) through (a)(9), (b)(4) through (b)(6), (e) and (f)

18 AAC 50.065. Open Burning (effective 1/18/97) except (g) and (h)

18 AAC 50.075. Wood-Fired Heating Device Visible Emission Standards (effective 1/18/97)

18 AAC 50.080. Ice Fog Standards (effective 1/18/97)

18 AAC 50.085. Volatile Liquid Storage Tank Emission Standards (effective 1/18/97)

18 AAC 50.090. Volatile Liquid Loading Racks and Delivery Tank Emission Standards (effective 1/18/97)

18 AAC 50.100 Nonroad Engines (effective 10/1/04)

18 AAC 50.110. Air Pollution Prohibited (effective 5/26/72)

Article 2. Program Administration

18 AAC 50.200. Information Requests (effective 1/18/97)

18 AAC 50.201. Ambient Air Quality Investigation (effective 1/18/97)

18 AAC 50.205. Certification (effective 1/18/97)

18 AAC 50.215. Ambient Air Quality Analysis Methods (effective 1/18/97)

Table 5. Significant Impact Levels (SILs)

18 AAC 50.220. Enforceable Test Methods (effective 1/18/97)

18 AAC 50.225. Owner-Requested Limits (effective 1/18/97)

18 AAC 50.230. Preapproved Emission Limits (effective 1/18/97)

18 AAC 50.235. Unavoidable Emergencies and Malfunctions (effective 1/18/97)

18 AAC 50.240. Excess Emissions (effective 1/18/97)

18 AAC 50.245. Air Episodes and Advisories (effective 1/18/97)

Table 6. Concentrations Triggering an Air Episode

Article 3. Major Stationary Source Permits

18 AAC 50.301. Permit Continuity (effective 10/1/04)

18 AAC 50.302. Construction Permits (effective 10/01/04)

18 AAC 50.306. Prevention of Significant Deterioration (PSD) Permits (effective 10/01/04) except (e)

18 AAC 50.311. Nonattainment Area Major Stationary Source Permits (effective 10/01/04)
18 AAC 50.316. Preconstruction Review for Construction or Reconstruction of a Major Source of Hazardous Air Pollutants (effective 10/01/04) except (c)
18 AAC 50.326. Title V Operating Permits (effective 10/01/04) except (j)(1), (k)(3), (k)(5), and (k)(6)
18 AAC 50.345. Construction and Operating Permits: Standard Permit Conditions (effective 1/18/97)
18 AAC 50.346. Construction and Operating Permits: Other Permit Conditions (effective 10/01/04)

Table 7. Emission Unit or Activity, Standard Permit Condition

Article 4. User Fees

18 AAC 50.400. Permit Administration Fees (effective 1/18/97) except (a), (b), (c)(1), (c)(3), (c)(6), (i)(2), (i)(3), (m)(3) and (m)(4)
18 AAC 50.403. Negotiated Service Agreements (effective 1/29/05) except (8) and (9)
18 AAC 50.405. Transition Process for Permit Fees (effective 1/29/05)
18 AAC 50.410. Emission Fees (effective 1/18/97)
18 AAC 50.499. Definition for User Fee Requirements (effective 1/29/05)

Article 5. Minor Permits

18 AAC 50.502. Minor Permits for Air Quality Protection (effective 10/1/04) except (b)(1), (b)(2), (b)(3) and (b)(5)
18 AAC 50.508. Minor Permits Requested by the Owner or Operator (effective 10/1/04)
18 AAC 50.509. Construction of a Pollution Control Project without a Permit (effective 10/1/04)
18 AAC 50.540. Minor Permit: Application (effective 10/1/04)
18 AAC 50.542. Minor Permit: Review and Issuance (effective 10/1/04) except (b)(1), (b)(2), (b)(5), and (d)
18 AAC 50.544. Minor Permits: Content (effective 10/1/04)
18 AAC 50.546. Minor Permits: Revisions (effective 10/1/04)
18 AAC 50.560. General Minor Permits (effective 10/1/04) except (b)

Article 9. General Provisions

18 AAC 50.990. Definitions (effective 1/18/97)

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[FR Doc. E6–13860 Filed 8–21–06; 8:45 am]
BILLING CODE 6560–50–P

DEPARTMENT OF THE INTERIOR

Fish and Wildlife Service

50 CFR Part 17

RIN 1018–AU76

Endangered and Threatened Wildlife and Plants; Designation of Critical Habitat for *Catesbaea melanocarpa*

AGENCY: Fish and Wildlife Service, Interior.

ACTION: Proposed rule.

SUMMARY: We, the U.S. Fish and Wildlife Service (Service), propose to designate critical habitat for the endangered plant *Catesbaea melanocarpa* (no common name) under the Endangered Species Act of 1973, as amended (Act). In total, approximately 50 acres (ac) (20.2 hectares (ha)) fall within the boundaries of the proposed critical habitat designation for *C. melanocarpa* in one unit located in Christiansted, St. Croix, U.S. Virgin Islands. If made final, this proposal may result in additional requirements under section 7 of the Act for Federal agencies. No additional requirements are expected for non-Federal actions. The Service seeks comments on all aspects of this proposal from the public.

DATES: We will accept comments from all interested parties until October 23, 2006. We must receive requests for public hearings, in writing, at the address shown in the **ADDRESSES** section by October 6, 2006.

ADDRESSES: If you wish to comment, you may submit your comments and materials concerning this proposal by any one of several methods:

1. You may submit written comments and information by mail or hand-delivery to Edwin E. Muñiz, Field Supervisor, U.S. Fish and Wildlife Service, Caribbean Fish and Wildlife Office, Road 301 Km. 5.1, P.O. Box 491, Boquerón, Puerto Rico 00622.

2. You may send comments by electronic mail (e-mail) to *marelisa_rivera@fws.gov*. Please see the Public Comments Solicited section below for file format and other information about electronic filing.

3. You may fax your comments to 787–851–7440.

4. You may submit comments via the Federal E-Rulemaking Portal at *http://www.regulations.gov*.

Comments and materials received, as well as supporting documentation used in the preparation of this proposed rule, will be available for public inspection, by appointment, during normal business hours at the Caribbean Fish and Wildlife Office, Road 301 Km. 5.1, Boquerón, Puerto Rico (telephone 787–851–7297).

FOR FURTHER INFORMATION CONTACT: Marelisa Rivera, Caribbean Fish and Wildlife Office (see **ADDRESSES**), telephone 787–851–7297 ext. 231; facsimile 787–851–7440.

SUPPLEMENTARY INFORMATION:

Public Comments Solicited

We intend that any final action resulting from this proposal will be as accurate and as effective as possible. Therefore, comments or suggestions from the public, other concerned governmental agencies, the scientific community, industry, or any other interested party concerning this proposed rule are hereby solicited. Comments particularly are sought concerning:

(1) The reasons any habitat should or should not be determined to be critical habitat as provided by section 4 of the Act (16 U.S.C. 1531 *et seq.*), including whether the benefit of designation will outweigh any threats to the species due to designation;

(2) Specific information on the amount and distribution of *Catesbaea melanocarpa* habitat, including areas occupied by *C. melanocarpa* at the time of listing and containing features essential to the conservation of the species, and areas not occupied at the listing that are essential to the conservation of the species and why;

(3) Land use designations and current or planned activities in the subject areas and their possible impacts on proposed critical habitat;

(4) We have not included lands containing features essential to the conservation of *C. melanocarpa* within the Gu´nica and Susúa Commonwealth Forests in Puerto Rico in this proposed designation because we believe that the Commonwealth Forests provide conservation management and protection for these features such that the specific areas do not meet the definition of critical habitat. We are seeking specific comments related to:

(a) Whether our determination to not include these specific areas in critical habitat is appropriate, and

(b) if our determination is not appropriate, then how should we define the specific areas essential to conservation of this plant.

(5) Any foreseeable economic, national security, or other potential impacts resulting from the proposed designation and, in particular, any impacts on small entities;

(6) Whether our approach to designating critical habitat could be improved or modified in any way to

provide for greater public participation and understanding, or to assist us in accommodating public concerns and comments;

If you wish to comment, you may submit your comments and materials concerning this proposal by any one of several methods (see **ADDRESSES** section). Please submit electronic comments to *marelisa_rivera@fws.gov* in ASCII file format and avoid the use of special characters or any form of encryption. Please also include "Attn: *Catesbaea melanocarpa*" in your e-mail subject header and your name and return address in the body of your message. If you do not receive a confirmation from the system that we have received your message, contact us directly by calling our Caribbean Fish and Wildlife Office at phone number 787–851–7297.

Our practice is to make comments, including names and home addresses of respondents, available for public review during regular business hours. We will not consider anonymous comments, and we will make all comments available for public inspection in their entirety. Comments and materials received will be available for public inspection, by appointment, during normal business hours at the Caribbean Fish and Wildlife Office (see **ADDRESSES**).

Role of Critical Habitat in Actual Practice of Administering and Implementing the Act

Attention to and protection of habitat is paramount to successful conservation actions. The role that designation of critical habitat plays in protecting habitat of listed species, however, is often misunderstood. As discussed in more detail below in the discussion of exclusions under section 4(b)(2) of the Act, there are significant limitations on the regulatory effect of designation under section 7(a)(2) of the Act. In brief, (1) Designation provides additional protection to habitat only where there is a Federal nexus; (2) the protection is relevant only when, in the absence of designation, destruction or adverse modification of the critical habitat would take place (in other words, other statutory or regulatory protections, policies, or other factors relevant to agency decision-making would not prevent the destruction or adverse modification); and (3) designation of critical habitat triggers the prohibition of destruction or adverse modification of that habitat, but it does not require specific actions to restore or improve habitat.

Currently, only 475 species or 36 percent of the 1,310 listed species in the U.S. under the jurisdiction of the Service, have designated critical habitat. We address the habitat needs of all 1,310 listed species through conservation mechanisms such as listing, section 7 consultations, the section 4 recovery planning process, the section 9 protective prohibitions of unauthorized take, section 6 funding to the States, the section 10 incidental take permit process, and cooperative, non-regulatory efforts with private landowners. The Service believes that these measures may make the difference between extinction and survival for many species.

In considering exclusions of areas proposed for designation, we evaluated the benefits of designation in light of *Gifford Pinchot Task Force* v. *U.S. Fish and Wildlife Service*, 378 F. 3d 1059 (9th Cir 2004) (hereinafter *Gifford Pinchot*). In that case, the Ninth Circuit invalidated the Service's regulation defining "destruction or adverse modification of critical habitat." In response, on December 9, 2004, the Director issued guidance to be considered in making section 7 adverse modification determinations. This proposed critical habitat designation does not use the invalidated regulation in our consideration of the benefits of including areas in this final designation. The Service will carefully manage future consultations that analyze impacts to designated critical habitat, particularly those that appear to be resulting in an adverse modification determination. Such consultations will be reviewed by the Regional Office prior to finalizing to ensure that an adequate analysis has been conducted that is informed by the Director's guidance.

On the other hand, to the extent that designation of critical habitat provides protection, that protection can come at significant social and economic cost. In addition, the mere administrative process of designation of critical habitat is expensive, time-consuming, and controversial. The current statutory framework of critical habitat, combined with past judicial interpretations of the statute, make critical habitat the subject of excessive litigation. As a result, critical habitat designations are driven by litigation and courts rather than biology, and made at a time and under a time frame that limits our ability to obtain and evaluate the scientific and other information required to make the designation most meaningful.

In light of these circumstances, the Service believes that additional agency discretion would allow our focus to return to those actions that provide the greatest benefit to the species most in need of protection.

Procedural and Resource Difficulties in Designating Critical Habitat

We have been inundated with lawsuits for our failure to designate critical habitat, and we face a growing number of lawsuits challenging critical habitat determinations once they are made. These lawsuits have subjected the Service to an ever-increasing series of court orders and court-approved settlement agreements, compliance with which now consumes nearly the entire listing program budget. This leaves the Service with little ability to prioritize its activities to direct scarce listing resources to the listing program actions with the most biologically urgent species conservation needs.

The consequence of the critical habitat litigation activity is that limited listing funds are used to defend active lawsuits, to respond to Notices of Intent (NOIs) to sue relative to critical habitat, and to comply with the growing number of adverse court orders. As a result, listing petition responses, the Service's own proposals to list critically imperiled species, and final listing determinations on existing proposals are all significantly delayed.

The accelerated schedules of court-ordered designations have left the Service with limited ability to provide for public participation or to ensure a defect-free rulemaking process before making decisions on listing and critical habitat proposals, due to the risks associated with noncompliance with judicially imposed deadlines. This in turn fosters a second round of litigation in which those who fear adverse impacts from critical habitat designations challenge those designations. The cycle of litigation appears endless and is very expensive, thus diverting resources from conservation actions that may provide relatively more benefit to imperiled species.

The costs resulting from the designation include legal costs, the cost of preparation and publication of the designation, the analysis of the economic effects and the cost of requesting and responding to public comment, and in some cases the costs of compliance with the National Environmental Policy Act (NEPA; 42 U.S.C. 4321 *et seq.*). These costs, which are not required for many other conservation actions, directly reduce the funds available for direct and tangible conservation actions.

Background

We intend to discuss topics directly relevant to the designation of critical habitat in this proposed rule. For more

information on *C. melanocarpa*, including characteristics and life history, refer to the final listing rule published in the **Federal Register** on March 17, 1999 (64 FR 13116) and the final recovery plan (July 15, 2005).

C. melanocarpa is a perennial spiny shrub of the Madder family (Rubiaceae). Most members of this family are found in the tropics. The genus *Catesbaea* consists of 10 or more other species of spiny shrubs and is generally confined to the Antilles, but some may extend into the Bahamas and the Florida Keys (Breckon and Kolterman 1993, p. 1). *C. melanocarpa* is found in both dry and moist forest life zones in the Caribbean on the island of Puerto Rico (PR) and in the U.S. Virgin Islands (USVI). The dry forest life zone in PR and USVI occupies about 165,030 ha (407,798 acres) or 18 percent of PR and USVI. The moist forest life zone occupies 548,220 ha (1,354,681 acres) or 58 percent of PR and USVI.

Life History

C. melanocarpa is a branching shrub that may reach approximately 9.8 feet (ft) (3.0 meters (m)) in height. Spines are from 0.39 to 0.78 inches (in) (1.00 to 2.00 centimeters (cm)) long. Leaves are small, from 0.19 to 1.0 in (5.00 to 25.00 millimeters (mm)) long, and 0.07 to 0.58 in (2.00 to 15.00 mm) wide, often opposite. The flowers are white, solitary or paired, and almost lacking a stalk in the axils (angle formed by a leaf or branch with the stem) (Proctor 1991, p. 44).

Biological and ecological information on *C. melanocarpa* is scarce. In July 1992, Breckon and Kolterman (1993, p. 2) measured stem height and basal diameter for the 24 individuals known from St. Croix. Stem height ranged from 0.36 to 9.91 ft (0.11 to 3.02 m) and averaged 2.59 ft (0.79 m). Basal stem diameter ranged from 0.16 to 2.20 in (0.40 to 5.60 cm). In December 1992, reproduction was checked, and while no flowers were observed, many adults (greater than 1.64 ft (0.50 m) in height) were in fruit (Breckon and Kolterman 1993, p. 2). In St. Croix, we observed the species with fruit in early March 2006.

Only a few seed germination and propagation experiments have been conducted on *C. melanocarpa* (Breckon and Kolterman 1993, p. 2). In August 1988, seeds and plants were collected from the St. Croix location. Most of the transplanted seedlings have survived, and two have produced flowers and fruits. Of 57 seeds collected in December 1990, 92 percent germinated, but only five of the seedlings survived. In 1993, two fruits were collected. Ten seeds were obtained from these two fruits, but none germinated. Two plants previously germinated from St. Croix seeds were donated to the Guánica Commonwealth Forest. These plants died before being planted. Fairchild Tropical Garden in Miami, Florida, collected seeds in 1994 or 1995 and had good germination and survival results (O'Reilly 2004).

Distribution and Abundance

The historical and current range of this species includes Halfpenny Bay in St. Croix, USVI; Guánica and Susúa Commonwealth Forests and Peñones de Melones, PR; and Barbuda, Antigua, and Guadeloupe islands. Prior to 1995, *C. melanocarpa* was only known from Guánica, PR; St. Croix in the USVI; and Barbuda, Antigua, and Guadeloupe (Liogier and Martorell 1982, p. 172; Proctor 1991, p. 44; Breckon and Kolterman 1993, p. 1). Little was known about the status of this plant on the islands of Antigua, Barbuda, and Guadeloupe. One specimen, apparently originating from the Susúa Commonwealth Forest in Sabana Grande and Yauco, PR, was collected in 1974 and is located in the herbarium of the University of Puerto Rico in San Juan, PR. Because of the poor condition of the specimen, it was not possible to confirm its identification as *C. melanocarpa* (Breckon and Kolterman 1993, p. 1).

In St. Croix, USVI, *C. melanocarpa* was first collected in 1881 by the Danish collector Baron H.F.A. von Eggers (Proctor 1991, p. 43). The species was re-discovered in Halfpenny Bay by Rudy G. O'Reilly, Jr., who found a small population (approximately seven individuals) in a dry coastal plain located about 2.5 miles (4 km) south of Christiansted in August 1988 (Breckon and Kolterman 1993, pp. 1–2). Voucher specimens of these plants were collected by G.R. Proctor on September, 1988 (Proctor 1991, p. 43). The voucher describes the plants growing in pasture, shaded by *Cassia poplyphylla* (retama prieta) and other tall shrubs in the subtropical dry forest life zone. This population was estimated to consist of 24 individuals in July 1992 (Breckon and Kolterman 1993, p. 2). In October 2002, one hundred individuals were estimated to occur at this same location (Lombard 2002).

In Guánica, PR, *C. melanocarpa* was first collected by the German collector Paul Sintenis in 1886 (Proctor 1991, p. 43). Based on information in the Natural Heritage Program of the Puerto Rico Department of Natural and Environmental Resources (DNER), two historical collections are reported from Guánica: one in Cerro Montalva, west to Providencias Saltflats; and another at Punta Meseta, close to the Guánica Lighthouse within the Guánica Commonwealth Forest. Service biologists visited the last location on March 7, 2006 with personnel from the DNER and did not observe the species in the area. In 2001, *C. melanocarpa* was rediscovered at the Guánica Commonwealth Forest (Trejo-Torres 2001, p. 62; Axelrod 2004; Trejo-Torres 2006) in the subtropical dry forest life zone. Service biologists visited the site in March 2006, and confirmed the presence of the species in a slope facing northwest of the Fuerte Trail. Approximately 12 individuals were found within the deciduous forest type. However, this does not represent a population estimate for this species at the Guánica Commonwealth Forest. This forest contains habitat that is difficult to traverse. It is composed of dry shrub—scrub vegetation that is essentially a dense, thorny thicket of vegetation. Comprehensive surveys of the entire forest have not been conducted to determine all the locations of *C. melanocarpa*. Surveys thus far have been limited due to habitat constraints and resources to existing trails within the forests and have not been specifically designed yet to systematically look for *C. melanocarpa*. Axelrod (2004) anticipates, though, that this plant will be found in more locations in Guánica Commonwealth Forest and other places as more inventories are conducted.

Within the subtropical moist forest life zone, the species has only been reported from the Susúa Commonwealth Forest. *C. melanocarpa* has been reported in Susúa twice in thirty years: in 1974 by Woodbury (Breckon and Kolterman 1993, p. 1) and in 2003 (Trejo-Torres 2003, 2006). The occurrence of *C. melanocarpa* in Susúa Commonwealth Forest was confirmed in 2003 when Trejo-Torres found the species in flower at the forest (Trejo-Torres 2003, 2006). Trejo-Torres submitted the collection voucher and the photography of the individual to the Service. Similar to the Guánica Commonwealth Forest, we do not have a comprehensive population estimate for the Susúa Commonwealth Forest because systematic surveys of all suitable habitat have not been conducted. This forest also is composed of dense vegetation, making it difficult to traverse.

At the time of listing in 1999, *C. melanocarpa* was known from one individual located on the Peñones de Melones in Cabo Rojo, PR (about 16 miles (mi) or 25 kilometers (km) from Guánica); about 24 individuals located

on one privately owned farm in Halfpenny Bay near Christiansted in St. Croix, USVI; and an undetermined number of individuals on Barbuda, Antigua, and Guadeloupe (64 FR 13116, March 17, 1999; Puerto Rico Planning Board 1995, p. 29; Proctor 1991, p. 44; Breckon and Kolterman 1993, p. 1; USFWS 2005, p. 3). At the time of listing, Susúa Commonwealth Forest was recognized as part of the historical distribution of the species; however, the occurrence within the forest could not be confirmed since the collection material deposited at the herbarium in San Juan was in poor condition.

Currently, we have observed that the species, within U.S. jurisdiction (PR and USVI), occupies three discrete localities: (1) Approximately 100 individuals at a privately owned farm in Halfpenny Bay (Lombard 2002); (2) approximately 12 individuals located at the Fuerte Trail in Guánica Commonwealth Forest, Guánica, Guayanilla, and Yauco, PR (Axelrod 2004; Trejo-Torres 2001, p. 62), and (3) one individual located at the Susúa Commonwealth Forest, Sabana Grande and Yauco, PR (Trejo-Torres 2006).

The site in Peñones de Melones, where the species was reported in 1995, has experienced periodic land clearing activities and road construction based on our observations in 2002 and 2006 (Foote 2002; Axelrod 2004; Axelrod 2006). Several survey efforts have been conducted in the area by the Service and others; however, to date, no individuals of *C. melanocarpa* have been located (Foote 2002; Axelrod 2004; Axelrod 2006; Oikos Environmental Services 2005, p. 27).

Habitat Description

C. melanocarpa has been found to occur only in the subtropical dry and subtropical moist forest life zones. Based on our field observations, the currently occupied sites for this plant all fall into these forest life zones, and have similar habitat characteristics. The subtropical dry forest is considered the driest life zone in PR and the USVI, receiving a mean annual rainfall ranging from 24 to 40 in (60 to 100 cm). Ewel and Whitmore (1973, pp. 10–20) described the vegetation in this zone as deciduous on most soils with most tree species dropping leaves during the dry season. The vegetation usually consists of a nearly continuous single-layered canopy with little ground cover. The leaves of dry forest species are often succulent or coriaceous (leathery), and species with spines and thorns are common. The vegetation in these areas is more xerophilous (drought resistant), and cacti are more abundant. Some common tree or shrub species of subtropical dry forest include: *Prosopis juliflora* (mesquite or bayahonda), *Bursera simaruba* (almácigo), *Cephalocereus royenii* (sebucán), *Bucida buceras* (úcar), and *Guaiacum officinalis* (guayacán). Tree heights usually do not exceed 49.2 ft (15 m), and crowns are typically broad, spreading, and flattened. Successional vegetation includes grasses, and the accumulated organic debris serves as fuel for human-induced fires (Ewel and Whitmore 1973, pp. 10–29). Extensive areas of this life zone in Puerto Rico lie over limestone. Within the subtropical dry forest life zone, the species currently occurs in Guánica Commonwealth Forest in PR and Halfpenny Bay in St. Croix, USVI.

In Halfpenny Bay, the currently known population consists of about 100 individuals located in a dry, coastal plain with soils belonging to the Glynn-Hogensborg Unit (NRCS 1998, pp. 63–64). The vegetation as observed by the Service in 2006 is composed of patches of dry woody vegetation (trees and shrubs), surrounded by grasses and *C. melanocarpa* is found under the canopy of these forested patches. The habitat characteristics of the site coincide with previous habitat descriptions for the species (Liogier and Martorell 1982, p. 172; USFWS 2005, p. 6). The average annual precipitation in the area ranges from 30.0 to 54.7 in (762.0 to 1389.0 mm) (NRCS 1998, pp. 63–64).

The currently known population in the Guánica Commonwealth Forest consists of approximately 12 individuals located on a slope northwest of the Fuerte Trail. In 2006, we observed that the vegetation within this locality is characterized by dry forest with semi-closed canopy on limestone soils and the species is found under the canopy. The Guánica Commonwealth Forest is located in southwestern PR in the municipalities of Guánica, Guayanilla, and Yauco. The forest was designated as a forest reserve in 1919 and a United Nations Biosphere Reserve in 1981. It is managed by the DNER. The Guánica Forest supports a variety of vegetation types, including cactus scrub, littoral forest, deciduous forest, and semi-evergreen forest (Silander *et al.* 1986, pp. 60–66). The forest is underlain by limestone sedimentary rocks of Tertiary Period origin, and soils are shallow, well-drained, and alkaline (Silander *et al.* 1986, p. 51). Outcrops cover much of the area. Mean annual precipitation in the Guánica area is approximately 31 in (790 mm). *C. melanocarpa* is found in the deciduous forest. In this forest type, trees often reach 33 ft (10 m). Some associated tree and shrub species in this vegetation type are *Bucida buceras* (úcar), *Bursera simaruba* (almácigo), *Coccoloba microstachya* (uvillo), *C. krugii*, and *Reynosia uncinata* (chicharrón) (Silander *et al.* 1986, p. 69).

C. melanocarpa is currently known from Susúa Commonwealth Forest, which is within the subtropical moist life zone of Puerto Rico. The subtropical moist forest is delineated by a mean annual rainfall ranging from 39 to 86 in (100 to 220 cm) (Ewel and Whitmore 1973, pp. 20–29). Vegetation associations within this life zone are characterized by trees up to 65.6 ft (20 m) tall with rounded crowns. Many of the woody species are deciduous during the dry season and epiphytes are common. Some common tree or shrub species of subtropical moist forest include: *Roystonea borinquena* (palma real), *Tabebuia heterophylla* (roble blanco), *Nectandra* spp. (laurel), *Erythrina poeppigiana* (bucayo gigante), *Inga vera* (guaba), *Inga laurina* (guamá), and *Didymopanax morototoni* (yagrumo macho) (Ewel and Whitmore 1973, pp. 20–29). The Susúa Commonwealth Forest represents not only the influence of a climatic transition zone (dry to moist), but also a combination of volcanic and serpentine soils. Two vegetation associations (dry slope forest and gallery forest) have been delineated in the subtropical moist life zone (DNR 1976, p. 224). *C. melanocarpa* is found within the dry slope forest type. The climatic conditions and serpentine-derived soils contribute to more xeric conditions and a forest structure and species composition very similar to the Guánica Commonwealth Forest. In 2001, Trejo-Torres (2003, 2006) rediscovered the species in the Susúa Commonwealth Forest. One individual in flower was located in the forest. The individual was found on a rocky ravine west of Quebrada los Peces, at the southwestern corner of the public forest. The habitat is described as low forest on serpentine soil.

In Peñones de Melones, Cabo Rojo, PR, *C. melanocarpa* was discovered by Dr. F. Axelrod of the University of Puerto Rico in February 1995 (PRPB 1995, p. 29). The collection voucher deposited in the University of Puerto Rico in San Juan describes the location in Boquerón Ward, Cabo Rojo, PR, at the upper west slopes of Peñones de Melones from 164 to 295 ft (50 to 90 m) above sea level. The voucher described the habitat as dry forget on limestone, and the collection was made from a 7 ft (2 m) shrub with green globose (spherical) fruit. The Peñones de Melones area consists of several chains of limestone hills and drainages

(ravines) surrounded by mangrove forests, mud flats, saltwater and freshwater lagoons, wooded lands, extensive pastures, and residential projects. The elevation ranges from 3.3 to 347.7 ft (1 to 106 m) above sea level. The limestone hill soils belong to San Germán Series (San Germán Stony Clay Loam or SmE) described as shallow and very shallow, strongly sloping and steep, well-drained, cobbly and stony soils on the limestone hills and mountains (Soil Conservation Survey 1965, pp. 114–115). Average annual precipitation in Cabo Rojo is approximately 34 in (874 mm) (USFWS 2004).

Several vegetation surveys have been conducted in the Peñones de Melones area in the last 20 years. Dr. Axelrod reported 84 vascular plant species at the site in 1995 (PRPB 1995, pp. 25–29). In 2005, Dr. H.E. Quintero conducted a flora and fauna study at the site and found that vegetation types are not uniform and there were patches of distinct forests, woodlands, shrub lands, and grasslands (Oikos Environmental Services 2005, p. 10). In August 2002, Service biologists visited the Peñones de Melones area with Dr. Axelrod to identify the site where the species was discovered in 1995. The main part of the drainage, where *C. melanocarpa* was previously observed, showed signs of disturbance from periodic land clearing and road construction. They observed in August 2002 that the area had not been disturbed for several years and showed excessive growth of *Acacia* sp. in disturbed areas exposed to more sunlight. They noted that the area was covered with secondary vegetation with such species as *Acacia farnesiana* (aroma) and *Prosopis juliflora* (mesquite). Although the species was not found, Service biologists concluded that *C. melanocarpa* may be present, but the conditions of the habitat were not suitable to appropriately locate and identify the species (Foote 2002).

In 2004, Dr. Axelrod provided comments to the Service regarding the occurrence of the species in the Peñones de Melones area. He reported that, since his report of the species on the north side of Punta Melones, he found it once again in 2002 in a ravine on the south side of Punta Melones. He reported that, when he returned to the site in 2004, the ravine on the south had been entirely bulldozed. In March 2006, Service biologists visited these two sites on three occasions. The drainage area facing north of the Peñones de Melones (area reported by Axelrod in 1995) was searched for the species, as well as the hills, the slopes, and drainages facing south of the hills. The original site, the drainage area facing north, demonstrates vegetation characteristics consistent with previous land clearing activities. The area consists of dense woodland dominated by mesquite trees. The ravine and hillsides located to the south of Peñones de Melones have also been cleared by bulldozing activities and consist of dense woodlands dominated by mesquite trees in the lower area and a solid stand of fire bush (*Croton lucidus*) on the hillsides. Based on Service observations, the secondary dry forest vegetation that supported habitat for *C. melanocarpa* has been eliminated.

Summary of Threats

C. melanocarpa is threatened by small population sizes characterized by the limited number of individuals and distribution, habitat destruction or modification for residential and tourist development, fire, and catastrophic natural events such as hurricanes (USFWS 2005, p. 8). Periodic land-clearing activities have been documented by the Service and others in the Peñones de Melones area in Cabo Rojo (Foote 2002; Axelrod 2004; 2006). The Halfpenny Bay site is a privately owned agricultural tract that is subject to intense but periodic grazing. Based on information gathered during our site visit, most of the site was burned by a human-induced fire in 1997 (Hamada 2006). This population is subject to impacts from cattle grazing activities as well as pressure for a golf course development (USFWS 2005, p. 8). The limited number of individuals and restricted distribution make the species vulnerable to catastrophic events, such as hurricane damage and human-induced fires.

Previous Federal Actions

For more information on previous Federal actions concerning *C. melanocarpa*, refer to the final listing rule (64 FR 13116, March 17, 1999). We listed *C. melanocarpa* as endangered under the Act on March 17, 1999 (64 FR 13116) and approved a final recovery plan for this plant on July 15, 2005 (USFWS 2005). In the 1999 final listing rule, we determined designation of critical habitat was not prudent. On September 17, 2004, the Center for Biological Diversity filed a lawsuit against the Department of the Interior and the Service [*Center for Biological Diversity* v. *Norton* (CV–00293-JDB) (D.D.C.)], challenging the failure to designate critical habitat for *C. melanocarpa*. In a settlement agreement dated June 3, 2005, the Service agreed to reevaluate the prudency of critical habitat for this species and, if prudent, submit a proposed designation of critical habitat to the **Federal Register** by August 15, 2006, and a final designation by August 15, 2007.

Critical Habitat

Critical habitat is defined in section 3 of the Act as: (i) The specific areas within the geographical area occupied by a species, at the time it is listed in accordance with the Act, on which are found those physical or biological features (I) Essential to the conservation of the species and (II) that may require special management considerations or protection; and (ii) specific areas outside the geographical area occupied by a species at the time it is listed, upon a determination that such areas are essential for the conservation of the species. Conservation, as defined under section 3 of the Act, means to use and the use of all methods and procedures that are necessary to bring any endangered species or threatened species to the point at which the measures provided under the Act are no longer necessary.

Critical habitat receives protection under section 7 of the Act through the prohibition against destruction or adverse modification of critical habitat with regard to actions carried out, funded, or authorized by a Federal agency. Section 7 requires consultation on Federal actions that are likely to result in the destruction or adverse modification of critical habitat. The designation of critical habitat does not affect land ownership or establish a refuge, wilderness, reserve, preserve, or other conservation area. Such designation does not allow government or public access to private lands.

To be included in a critical habitat designation, the habitat within the area occupied by the species at the time it was listed must first have features that are essential to the conservation of the species. Critical habitat designations identify, to the extent known using the best scientific data available, habitat areas that provide essential life cycle needs of the species (areas on which are found the primary constituent elements (PCEs), as defined at 50 CFR 424.12(b)).

Habitat occupied at the time of listing may be included in critical habitat only if the essential features thereon may require special management or protection. Thus, we do not include areas where existing management is sufficient to conserve the species. [As discussed below, such areas may also be excluded from critical habitat.] Furthermore, when the best available scientific data do not demonstrate that the conservation needs of the species require additional areas, we will not designate critical habitat in areas

outside the geographical area occupied by the species at the time of listing. However, an area that was not known to be occupied at the time of listing but is currently occupied by the species will likely be essential to the conservation of the species and, therefore, typically included in the critical habitat designation.

The Service's Policy on Information Standards Under the Endangered Species Act, published in the **Federal Register** on July 1, 1994 (59 FR 34271), and Section 515 of the Treasury and General Government Appropriations Act for Fiscal Year 2001 (P.L. 106–554; H.R. 5658) and the associated Information Quality Guidelines issued by the Service, provide criteria, establish procedures, and provide guidance to ensure that decisions made by the Service represent the best scientific data available. They require Service biologists to the extent consistent with the Act and with the use of the best scientific data available, to use primary and original sources of information as the basis for recommendations to designate critical habitat. When determining which areas are critical habitat, a primary source of information is generally the listing package for the species. Additional information sources include the recovery plan for the species, articles in peer-reviewed journals, conservation plans developed by States and counties, scientific status surveys and studies, biological assessments, or other unpublished materials and expert opinion or personal knowledge. All information is used in accordance with the provisions of Section 515 of the Treasury and General Government Appropriations Act for Fiscal Year 2001 (Pub. L. 106–554; H.R. 5658) and the associated Information Quality Guidelines issued by the Service.

Section 4 of the Act requires that we designate critical habitat on the basis of the best scientific data available. Habitat is often dynamic, and species may move from one area to another over time. Furthermore, we recognize that designation of critical habitat may not include all of the habitat areas that may eventually be determined to be necessary for the recovery of the species. For these reasons, critical habitat designations do not signal that habitat outside the designation is unimportant or may not be required for recovery.

Areas that support populations, but are outside the critical habitat designation, will continue to be subject to conservation actions implemented under section 7(a)(1) of the Act and to the regulatory protections afforded by the section 7(a)(2) jeopardy standard, as determined on the basis of the best available information at the time of the action. Federally funded or permitted projects affecting listed species outside their designated critical habitat areas may still result in jeopardy findings in some cases. Similarly, critical habitat designations made on the basis of the best available information at the time of designation will not control the direction and substance of future recovery plans, habitat conservation plans, or other species conservation planning efforts if new information available to these planning efforts calls for a different outcome.

Prudency Determination

Section 4(a)(3) of the Act and its implementing regulations (50 CFR 424.12) require that, to the maximum extent prudent and determinable, we designate critical habitat at the time a species is listed as endangered or threatened. Our regulations at 50 CFR 424.12(a)(1) state that the designation of critical habitat is not prudent when one or both of the following situations exist: (1) The species is threatened by taking or other activity and the identification of critical habitat can be expected to increase the degree of threat to the species; or (2) such designation of critical habitat would not be beneficial to the species. In our March 17, 1999, final rule (64 FR 13116), we determined that designating critical habitat was not prudent for *C. melanocarpa* because it would result in no known benefit to the species and could further pose a threat to the species through publication of site-specific localities.

We are already working with Federal and State agencies, private individuals, and organizations in carrying out conservation activities for *C. melanocarpa*, conducting surveys for additional occurrences, and assessing habitat conditions. However, critical habitat designation may be beneficial by providing additional information to individuals, local and State governments, and other entities engaged in long-range planning, because areas with features essential to the conservation of the species are clearly delineated and, to the extent currently feasible, the primary constituent elements of the habitat essential for conservation of the species are specifically identified. Furthermore, although the low numbers of this plant make it unlikely that its populations could withstand even moderate collecting pressure or vandalism, we do not have specific evidence of taking, collection, vandalism, trade, or unauthorized human disturbance and thus, we cannot say that designation would increase the likelihood of take.

Accordingly, we withdraw our previous determination that the designation of critical habitat will not benefit *C. melanocarpa* and will increase the degree of threat to the species. We determine that the designation of critical habitat is prudent for this species. At this time, we have sufficient information necessary to identify specific areas that meet the definition of critical habitat and are, therefore, proposing critical habitat for *C. melanocarpa*.

Methods

As required by section 4(b) of the Act, we use the best scientific data available in determining areas that were occupied at the time of listing that contain the features that are essential to the conservation of *C. melanocarpa* and other areas that are essential to the conservation of this species. We reviewed the approach to conservation of the species undertaken by local, State, and Federal agencies operating within the species' range since its listing, as well as the actions necessary for this plant's conservation as identified in the final recovery plan (USFWS 2005). We reviewed available information that pertains to the habitat requirements of this species. This information included: data from our files that we used for listing the species; peer-reviewed scientific publications; biological field surveys and reports; resource agencies' and universities' unpublished status reports; information and GIS maps (forest boundaries, topography, drainages, roads) from the Puerto Rico Planning Board and Puerto Rico Department of Natural and Environmental Resources; soil maps and manuals from Natural Resources Conservation Service (former Soil Conservation Service); U.S. Geological Survey topographic maps (scale 1:20,000); recent aerial photography; unpublished data and observations collected by Service biologists during recent field surveys; forest management plans from local agencies; the *C. melanocarpa* recovery plan; information received from and discussions with local (PR and USVI) botanists and researchers working with the species and its habitat; and herbarium collections. We also made several recent visits to all currently known localities (Halfpenny Bay, Peñones de Melones, Guánica Commonwealth Forest, and Susúa Commonwealth Forest) to gather abundance and distribution data and conduct habitat observations. Information from all sources was utilized to determine the species' range

and habitat features needed to support life history functions essential to the conservation of the species.

Fewer than 115 individuals are known to occur in three discrete localities throughout PR and the USVI, and no additional sightings for the species have been reported in other areas. The locality where the majority of the individuals occur (about 100 plants) is a relatively small (50 ac, or 20 ha) privately owned cattle grazing parcel under current threat of development pressure in St. Croix. The two other localities are publicly owned and support the only known individuals of *C. melanocarpa* in PR. In the three areas, *C. melanocarpa* is associated with dry woody vegetation occupying the understory strata. The conservation of *C. melanocarpa* depends upon the protection of existing populations and the maintenance of ecological functions within these sites, including vegetation and soils characteristics essential to the conservation of the species. Therefore, we considered, but are not proposing any areas outside the geographical area presently occupied by the species.

Primary Constituent Elements (PCEs)

In accordance with section 3(5)(A)(i) of the Act and regulations at 50 CFR 424.12, we are required to base critical habitat determinations on the best scientific data available and to consider within areas occupied by the species at the time of listing those physical and biological features that are essential to the conservation of the species (PCEs), and that may require special management considerations or protection. These include, but are not limited to, space for individual and population growth and for normal behavior; food, water, air, light, minerals, or other nutritional or physiological requirements; cover or shelter; sites for reproduction, germination, or seed dispersal; and habitats that are protected from disturbance or are representative of the historic geographical and ecological distributions of a species.

The specific PCEs required for *C. melanocarpa* are derived from the biological needs of the species, and include those habitat components needed for growth and development, flower production, pollination, seed set and fruit production, and genetic exchange. Although at present time the information on the species' biological and ecological needs is limited (USFWS 2005, p. 7), habitat characteristics supporting all three currently known localities are known. Additionally, individuals in all three localities have been documented in fruit or flower. The presence of sexual reproduction indicates that the species has the potential to produce viable populations, with the assistance of appropriate conservation strategies.

C. melanocarpa is currently known from both the subtropical dry forest and subtropical moist forest life zones of PR and the USVI. Except for one locality, the historical and current range of the species is within dry forest life zone. The Susúa Commonwealth Forest is the only locality that is not dry forest; however, based on our observations because of its serpentine soils, the vegetation structure and species composition are similar to dry forest habitat (Breckon and García 2001; Silander *et al.* 1986, p. 243). In all three localities, the species is under the canopy of trees and shrubs, and all localities in PR are forested hills associated with either limestone or serpentine soils. The locality in St. Croix, based on Service observations, is a coastal plain with patches or thickets of trees and shrubs characteristic of dry forest habitat.

Within the subtropical dry and moist forest life zones, *C. melanocarpa* has been reported from four discrete sites within the U.S. Caribbean: Halfpenny Bay, Peñones de Melones, the Guánica Commonwealth Forest, and the Susúa Commonwealth Forest. However, the species presently occupies only Halfpenny Bay in St. Croix, USVI, the Guánica Commonwealth Forest, PR, and the Susúa Commonwealth Forest, PR.

Vegetation at the Halfpenny Bay site comprised of dry thicket scrub vegetation, dominated by grasses with patches of trees and shrubs (USFWS 2005, pp. 6–7). Based on Service observations during a site visit conducted on March 1 and 2, 2006, *C. melanocarpa* is an understory species, currently growing below trees and shrubs characteristic of dry forest habitat. Associated flora include introduced grass species, *Caesalpinia coriaria* (dividive), *Tamarindus indica* (tamarind), *Castela erecta* (goat-bush), *Acacia turtuosa* (acacia), *Cassia poplyphylla* (retama prieta), *Leucaena leucocephala* (tan-tan), *Randia aculeata* (box-briar or tintillo), and *Cordia alba* (white manjack). Soils in the Halfpenny Bay site have been described as belonging to the Glynn-Hogensborg unit, which consists of very deep, well drained, nearly level to moderately steep soils (NRCS 1998, pp. 63–64).

We observed the vegetation within the Guánica Commonwealth Forest locality in 2006 as dry forest with semi-closed canopy on limestone soils. The species is found under the canopy. In this forest type, trees often reach 33 ft (10 m). Some associated dry forest vegetation in this locality include uvillo (*Coccoloba microstachya*), *C. diversifolia* (uvilla), *Thouinia portoricensis* (quebracho), *Guettarda elliptica* (cucubano liso), alhelí, *Croton lucidus, Savia sessiliflora* (amansa guapo), *Pithecellobium unguis-cati* (uña de gato), *Guaiacum sanctum* (guayacán), *Leucaena leucocephala* (zarcilla), among other common species (Trejo-Torres 2001, pp. 59–63).

Susúa Commonwealth Forest is located in southwestern Puerto Rico in the municipalities of Yauco and Sabana Grande. The Susúa Forest lies between the humid Central Cordillera and the dry coastal plains typical of the south coast. The forest represents not only the influence of a climatic transition zone (dry to moist), but also a combination of volcanic and serpentine soils (Department of Natural Resources 1976, p. 24). The majority of the forest (90 percent) is underlain by serpentine outcrop. The rest of the forest (10 percent) has nine other soil types that belong to the Caguabo-Múcaro association (Silander *et al.* 1986, p. 224–226; Soil Conservation Survey 1975, p. 9). These soils are described as slightly leached, loamy and clay, sticky and plastic soils underlain by hard or weathered rock at a depth of less than 30 inches (Soil Conservation Survey 1975, p. 9). Serpentine-derived soils create stressful conditions for the establishment and growth of plants, and their associated floras are characterized by high diversity and endemism (Cedeño-Maldonado and Breckon 1996, p. 348). Two vegetation associations (dry slope forest and gallery forest) have been delineated in the subtropical moist life zone (Department of Natural Resources 1976, p. 224). The trees are slender, open-crowned, and usually less than 39.4 ft (12m) tall. The forest floor is open because the excessively drained soil supports little herbaceous growth (Ewel and Whitmore 1973, p. 25). *C. melanocarpa* is found in the dry slope forest type. The climatic conditions and serpentine-derived soils contribute to more xeric conditions and a forest structure and species composition similar to the Guánica Commonwealth Forest based on observations by the Service and others (Silander *et al.* 1986, pp. 239–245; Breckon and García 2001).

Primary Constituent Elements for C. melanocarpa

In accordance with our regulations, we are required to identify the known physical and biological features (PCEs) essential to the conservation of *C. melanocarpa*. All proposed critical habitat for *C. melanocarpa* is occupied, within the species' current and historic

geographic range, and contains sufficient PCEs to support at least one life history function.

Based on our current knowledge of the species and the requirements of the habitat to sustain the essential life history functions of the species, as discussed above, we have determined that *C. melanocarpa*'s PCEs are:

(1) Single-layered canopy forest with little ground cover and open forest floor that supports patches of dry vegetation with grasses, and

(2) Well to excessively drained, limestone and serpentine-derived soils (including soils of the San Germán, Nipe, and Rosario series and Glynn and Hogensborg series).

Open forest floor, canopy, and little ground cover are important requirements for an understory species like *C. melanocarpa*. Canopy provides shade and open forest floor reduces competition by herbaceous species. Limestone and serpentine derived soils that are well to excessively drained provide essential nutrients to this plant and sustain the dry conditions needed by the species. The proposed critical habitat in this rule has been determined to contain sufficient PCEs to support at least one life history function of *C. melanocarpa*.

Criteria Used To Identify Critical Habitat

As required by section 4(b)(1)(A) of the Act, we use the best scientific and commercial data available in determining areas that contain the features that are essential to the conservation of *C. melanocarpa*. We began our analysis by considering the historic distribution of the species and sites occupied by the species at the time of listing. The 1999 listing rule (64 FR 13116) identified two localities within U.S. jurisdiction as then occupied by the species: A 50-ac (20-ha) privately owned parcel in Halfpenny Bay in St. Croix, USVI; and a 330-ac (132-ha) property in Peñones de Melones in Cabo Rojo, PR. Both localities are found within the subtropical dry forest life zone and support habitat for the species. The final listing rule identified two historic collections: one in Guánica, PR, in 1886, and one in Susúa Commonwealth Forest, PR, in 1974. The Guánica Commonwealth Forest is within the subtropical dry forest life zone, and Susúa Commonwealth Forest is considered within the moist forest life zone. However, the Susúa Commonwealth Forest supports slopes with dry forest vegetation due to the climatic conditions and soil type. Both forests are similar in forest structure and species composition. Although both forests support habitat for *C. melanocarpa*, the presence of the species within these two forests was not corroborated at the time of listing. The rule noted that the Susúa specimen could not be confirmed as *C. melanocarpa* because of its poor condition (64 FR13116, March 17, 1999; Breckon and Kolterman 1993, p. 1).

We reviewed the approved final recovery plan to identify new records of occupancy of the species, biological information, and habitat characteristics (USFWS 2005, pp. 3–8). The plan identifies both downlisting and delisting criteria and emphasizes the importance of protecting existing populations within the range of this plant to prevent its extinction, decrease the threat to the species associated with catastrophic events, and to obtain sexual (seeds) and asexual (cuttings) propagation material to establish a propagation program for the species. The plan includes information provided by a peer reviewer during the comment period showing a recent collection of *C. melanocarpa* located at the Guánica Commonwealth Forest. This forest is located within the previously known distribution of the species and supports a historic collection of *C. melanocarpa*. A voucher of this collection is located in the herbarium of the University of Puerto Rico (UPR 2006).

We also reviewed other information (such as sighting records from herbariums, DNER maps, and office files) and scientific literature and reports to identify additional information available on species range and biological needs. The Service contacted all researchers that have reported the species in recent years and visited all reported sites to confirm sightings. Herbarium records for Guánica and Peñones de Melones describe the species growing in low forest or the understory of dry forest vegetation in limestone soils. The herbarium voucher for the species in Susúa describes the species growing in low forest on serpentine soils (Trejo-Torres 2003). Vegetation characteristics, climatic conditions, and soil type coincide with the previously described habitat for the species. We confirmed sightings in St. Croix and Guánica Commonwealth Forest. Although additional forested areas within the dry forest life zone and the moist forest life zone are present in PR and USVI, no additional sightings for the species have been reported in these other areas.

An area was considered for designation where it supported a population or occurrence and either (1) Possesses sufficient PCEs to support at least on life history function and was occupied at the time of listing or (2) is currently occupied. Information gathered by the Service and data collected during field visits resulted in this proposal regarding only three discrete areas in the U.S. Caribbean.

The Halfpenny Bay area was occupied at the time of listing and continues to be occupied currently. This area contains features that are essential to the conservation of *C. melanocarpa* that may require special management or protection. Another area that was occupied at the time of listing, located in Peñones de Melones in Cabo Rojo, PR, is not currently occupied by the species and has lost PCEs due to periodic land clearing activities with heavy machinery; it is not being proposed as critical habitat for the species due to lack of PCEs and lack of conservation value for the species.

The Guánica and Susúa Commonwealth forests have historical records of the species, and are currently occupied. Both areas are currently occupied by the species based on recent reports (Trejo-Torres 2001, p. 62; Trejo-Torres 2003; 2006) and site visits conducted by the Service in 2006.

These three areas (Halfpenny Bay and both Commonwealth forests) represent all known occurrences of this species in the wild within U.S. jurisdiction (currently known to be fewer than 115 individuals). Protecting individuals in the three localities is vital to maintain genetic representation of all known localities in the U.S. Caribbean. We have determined that it is essential to prevent extinction of this plant, by protecting and secure existing populations, establishing a propagation program, augmenting existing populations with propagated individuals, and establishing new self-sustainable populations in protected areas (USFWS 2005). We believe all three currently occupied areas presently contain essential habitat features for the species.

We reviewed existing management and conservation plans and management for *C. melanocarpa* to determine if any areas identified above as containing features essential to the conservation of the species did not meet the definition of critical habitat according to section 3(5)(A) of the Act. On the basis of this review, we believe that essential features within both Commonwealth Forests are adequately protected under the management of Puerto Rico DNER and the master plan for the Forests and do not require special management or protection. While these areas, which collectively total 14,575 ac (5,898 ha) contain the habitat features that are essential to the

conservation of the subspecies, they are not being included in this proposal (see Application of section 3(5)(A) of the Act section) because they do not meet the definition of critical habitat under section 3(5)(A) of the Act.

When determining proposed critical habitat boundaries, we made every effort to avoid including within the boundaries of the map contained in this proposed rule areas already developed such as buildings, paved areas, and other structures in areas where the PCEs for *C. melanocarpa* are not present. The scale of the maps prepared under the parameters for publication within the Code of Federal Regulations may not reflect the exclusion of such developed areas. Any such structures and the land under them inadvertently left inside critical habitat boundaries shown on the maps of this proposed rule have been excluded by text in the proposed rule and are not proposed for designation as critical habitat. Therefore, Federal actions limited to these areas would not trigger section 7 consultation, unless they affect the species or primary constituent elements in adjacent critical habitat. To the extent feasible, we will continue, with the assistance of other State, Federal, and private researchers, to conduct surveys, research, and conservation actions on the species and its habitat in areas designated and not designated as critical habitat. We anticipate that the boundaries of the mapped units may be refined based on additional information received during the public comment period. If additional information becomes available on the species' biology, distribution, and threats, we will evaluate the need to revise critical habitat, or refine the boundaries of critical habitat as appropriate. Sites that are occupied by this plant that are not being designated for critical habitat will continue to receive protection under the Act's section 7 jeopardy standard where a Federal nexus may occur (see "Critical Habitat" section).

We are proposing to designate critical habitat on lands in need of special management or protection and on those that we have determined to be currently occupied by the species or occupied at the time of listing and which contain sufficient PCEs to support life history functions essential for the conservation of the species.

Special Management Considerations or Protections

When designating critical habitat, we assess whether the areas determined to be occupied at the time of listing contain the PCEs that may require special management considerations or protection. As discussed in detail here and in the unit descriptions below, we find that all of the PCEs in Halfpenny Bay may require special management considerations or protection due to threats to the species or its habitat. Such management considerations and protections include: fencing off forest patches to exclude cattle, developing fire-breaks adjacent to existing roads and farm boundaries during dry season, establishing conservation agreements with landowners to protect individuals within the property, collecting seeds and cuttings to establish a propagation program, and establishing additional patches of forest vegetation to plant additional individuals to augment existing populations within the site

Proposed Critical Habitat Designation

We are proposing Halfpenny Bay in Christiansted, St. Croix, USVI as critical habitat for *C. melanocarpa*. This critical habitat unit described below constitutes our best assessment at this time of areas we determined to be occupied at the time of listing, containing the primary constituent elements, and which may require special management. All of the areas identified in this rule as occupied, including those in the Commonwealth Forests managed by DNER that do not meet the definition of critical habitat (see Application of Section 3(5)(A) of the Act section), are necessary to conserve the species. Appropriate management and protection will support reproduction, recruitment, adaptation to catastrophic events and genetic diversity (Primack 2000, pp. 124–133; Falk et al. 1996, pp. 113–119) as identified using the best available data.

Table 1 provides the approximate area (acres, hectares) and land ownership of lands determined to meet the definition of critical habitat and proposed.

TABLE 1.—LANDS DETERMINED TO MEET THE DEFINITION OF CRITICAL HABITAT FOR *C. Melanocarpa*, LAND OWNERSHIP, APPROXIMATE AREA (ACRES, HECTARES)

Critical habitat unit, location	Land ownership	Definitional area acres (hectares)
Halfpenny Bay St. Croix, USVI	Private	50 (20.23)
Total		50 (20.23)

Below we provide a brief description and rationale for the proposed unit of critical habitat for *C. melanocarpa*.

Halfpenny Bay, St. Croix

The Halfpenny Bay critical habitat unit consists of an approximately 50-ac (20.23-ha) area on a privately owned agricultural tract located in a dry coastal plain about 2.48 miles (4 km) south of Christiansted, St. Croix, USVI. The area is delimited by Road 62 to the north, South Shore Road to the west, the local road to Halfpenny Bay to the east, and by the 10-meter (m) (33 ft) topographic contour line to the south. This unit encompasses the habitat features essential to the conservation of *C. melanocarpa* and does not contain manmade structures, such as existing private homes or barns. The species is located within dry thickets of scrub vegetation in this unit, which is dominated by grasses with patches of trees and shrubs. The unit contains PCEs 1 and 2 and is important to conserving the genetic diversity of this plant. Since this is the locality with the highest number of individuals (100 plants), we believe that it should be considered the core population to maintain genetic representation of this plant in the U.S. Caribbean. Propagation material, both sexual and asexual, should be collected from this population to augment the number of individuals in existing populations and establish new sustainable populations in protected areas in PR and the USVI.

At the time of the 1999 listing, the population was estimated at 24 individuals, but in 2002 the population was estimated at 100 individuals by a Service biologist (Lombard 2002). The presence of the species at this site was confirmed by the Service in March 2006. This population is the only one known in the U.S. Virgin Islands, has the highest number of individuals, and it has been documented in reproductive condition (with fruit and flowers). The site is currently threatened by periodic but intense grazing, human-induced fires, and potential of development for a tourist project (USFWS 2005, p. 8),

and may require special management considerations or protection as discussed in the "Special Management Considerations or Protections" section above.

Effects of Critical Habitat Designation

Section 7 Consultation

Section 7 of the Act requires Federal agencies, including the Service, to ensure that actions they fund, authorize, or carry out are not likely to destroy or adversely modify critical habitat. In our regulations at 50 CFR 402.02, we define destruction or adverse modification as "a direct or indirect alteration that appreciably diminishes the value of critical habitat for both the survival and recovery of a listed species. Such alterations include, but are not limited to, alterations adversely modifying any of those physical or biological features that were the basis for determining the habitat to be critical." However, recent decisions by the 5th and 9th Circuit Court of Appeals have invalidated this definition (see *Gifford Pinchot Task Force* v. *U.S. Fish and Wildlife Service*, 378 F. 3d 1059 (9th Cir 2004) and *Sierra Club* v. *U.S. Fish and Wildlife Service et al.*, 245 F.3d 434, 442F (5th Cir 2001)). Pursuant to current national policy and the statutory provisions of the Act, destruction or adverse modification is determined on the basis of whether, with implementation of the proposed Federal action, the affected critical habitat would remain functional (or retain the current ability for the primary constituent elements to be functionally established) to serve the intended conservation role for the species.

Section 7(a) of the Act requires Federal agencies, including the Service, to evaluate their actions with respect to any species that is proposed or listed as endangered or threatened and with respect to its critical habitat, if any is proposed or designated. Regulations implementing this interagency cooperation provision of the Act are codified at 50 CFR part 402.

Section 7(a)(4) of the Act requires Federal agencies to confer with us on any action that is likely to jeopardize the continued existence of a proposed species or result in destruction or adverse modification of proposed critical habitat. This is a procedural requirement only. However, once a proposed species becomes listed, or proposed critical habitat is designated as final, the full prohibitions of section 7(a)(2) apply to any Federal action. The primary utility of the conference procedures is to maximize the opportunity for a Federal agency to adequately consider proposed species and critical habitat and avoid potential delays in implementing their proposed action because of the section 7(a)(2) compliance process, should those species be listed or the critical habitat designated.

Under conference procedures, the Service may provide advisory conservation recommendations to assist the agency in eliminating conflicts that may be caused by the proposed action. The Service may conduct either informal or formal conferences. Informal conferences are typically used if the proposed action is not likely to have any adverse effects to the proposed species or proposed critical habitat. Formal conferences are typically used when the Federal agency or the Service believes the proposed action is likely to cause adverse effects to proposed species or critical habitat, inclusive of those that may cause jeopardy or adverse modification.

The results of an informal conference are typically transmitted in a conference report, while the results of a formal conference are typically transmitted in a conference opinion. Conference opinions on proposed critical habitat are typically prepared according to 50 CFR 402.14, as if the proposed critical habitat were designated. We may adopt the conference opinion as the biological opinion when the critical habitat is designated, if no substantial new information or changes in the action alter the content of the opinion (see 50 CFR 402.10(d)). As noted above, any conservation recommendations in a conference report or opinion are strictly advisory.

If a species is listed or critical habitat is designated, section 7(a)(2) of the Act requires Federal agencies to ensure that activities they authorize, fund, or carry out are not likely to jeopardize the continued existence of such a species or to destroy or adversely modify its critical habitat. If a Federal action may affect a listed species or its critical habitat, the responsible Federal agency (action agency) must enter into consultation with us. As a result of this consultation, compliance with the requirements of section 7(a)(2) will be documented through the Service's issuance of: (1) A concurrence letter for Federal actions that may affect, but are not likely to adversely affect, listed species or critical habitat; or (2) a biological opinion for Federal actions that may affect, but are likely to adversely affect, listed species or critical habitat.

When we issue a biological opinion concluding that a project is likely to result in jeopardy to a listed species or the destruction or adverse modification of critical habitat, we also provide reasonable and prudent alternatives to the project, if any are identifiable. "Reasonable and prudent alternatives" are defined at 50 CFR 402.02 as alternative actions identified during consultation that can be implemented in a manner consistent with the intended purpose of the action, that are consistent with the scope of the Federal agency's legal authority and jurisdiction, that are economically and technologically feasible, and that the Director believes would avoid jeopardy to the listed species or destruction or adverse modification of critical habitat. Reasonable and prudent alternatives can vary from slight project modifications to extensive redesign or relocation of the project. Costs associated with implementing a reasonable and prudent alternative are similarly variable.

Regulations at 50 CFR 402.16 require Federal agencies to reinitiate consultation on previously reviewed actions in instances where a new species is listed or critical habitat is subsequently designated that may be affected and the Federal agency has retained discretionary involvement or control over the action or such discretionary involvement or control is authorized by law. Consequently, some Federal agencies may request reinitiation of consultation with us on actions for which formal consultation has been completed, if those actions may affect subsequently listed species or designated critical habitat or adversely modify or destroy proposed critical habitat.

Federal activities that may affect *C. melanocarpa* or its designated critical habitat will require section 7 consultation under the Act. Activities on State, Tribal, local or private lands requiring a Federal permit (such as a permit from the Corps under section 404 of the Clean Water Act or a permit under section 10(a)(1)(B) of the Act from the Service) or involving some other Federal action (such as funding from the Federal Highway Administration, Federal Aviation Administration, or the Federal Emergency Management Agency) will also be subject to the section 7 consultation process. Federal actions not affecting listed species or critical habitat, and actions on State, Tribal, local or private lands that are not federally funded, authorized, or permitted, do not require section 7 consultations.

Application of the Jeopardy and Adverse Modification Standards for Actions Involving Effects to C. melanocarpa and Its Critical Habitat

Jeopardy Standard

Prior to and following designation of critical habitat, the Service has applied an analytical framework for *C. melanocarpa* jeopardy analyses that relies on the importance of core area populations to the survival and recovery of *C. melanocarpa*. The section 7(a)(2) analysis is focused not only on these populations but also on the habitat conditions necessary to support them.

The jeopardy analysis usually expresses the survival and recovery needs of *C. melanocarpa* in a qualitative fashion without making distinctions between what is necessary for survival and what is necessary for recovery. Generally, if a proposed Federal action is incompatible with the viability of the affected core area population(s), inclusive of associated habitat conditions, a jeopardy finding is warranted because of the relationship of each core area population to the survival and recovery of the species as a whole.

Adverse Modification Standard

The analytical framework described in the Director's December 9, 2004, memorandum is used to complete section 7(a)(2) analyses for Federal actions affecting *C. melanocarpa* critical habitat. The key factor related to the adverse modification determination is whether, with implementation of the proposed Federal action, the affected critical habitat would remain functional (or retain the current ability for the PCEs to be functionally established) to serve the intended conservation role for the species. Generally, the conservation role of *C. melanocarpa* critical habitat units is to support viable core area populations.

Section 4(b)(8) of the Act requires us to briefly evaluate and describe in any proposed or final regulation that designates critical habitat those activities involving a Federal action that may destroy or adversely modify such habitat, or that may be affected by such designation. Activities that may destroy or adversely modify critical habitat may also jeopardize the continued existence of the species.

Activities that may destroy or adversely modify critical habitat are those that alter the PCEs to an extent that the conservation value of critical habitat for *C. melanocarpa* is appreciably reduced. Activities that, when carried out, funded, or authorized by a Federal agency, may affect critical habitat and therefore result in consultation for *C. melanocarpa* include, but are not limited to:

(1) Actions that would reduce or degrade dry thicket scrub areas dominated by patches of trees and shrubs in the Halfpenny Bay area. Such activities could include vegetation clearing, intensive and extensive cattle grazing activities, and fire. Dry forest species in the Caribbean are not fire-resistant species.

(2) Earth movement activities using heavy machinery within critical habitat that may result in changes in quantity and quality of soils within designated critical habitat.

We consider the proposed critical habitat to contain features essential to the conservation of *C. melanocarpa* and to be in the geographic range of the species. The Halfpenny Bay area was occupied by the species at the time of listing (64 FR 13116, March 17, 1999; Proctor 1991, pp. 43–44; Breckon and Kolterman 1993, p. 1). Federal agencies already consult with us on activities in areas currently occupied by *C. melanocarpa*, or if the species may be affected by the action, to ensure that their actions do not jeopardize the continued existence of *C. melanocarpa*.

Application of Section 3(5)(A) of the Act

Section 3(5)(A) of the Act defines critical habitat as the specific areas within the geographic area occupied by the species at the time of listing on which are found those physical and biological features (i) Essential to the conservation of the species and (ii) that may require special management considerations or protection. Therefore, areas within the geographical area occupied by the species at the time of listing that do not contain the features essential for the conservation of the species are not, by definition, critical habitat. Similarly, areas within the geographic area occupied by the species at the time of listing that do not require special management or protection also are not, by definition, critical habitat.

There are multiple ways to provide management for species habitat. Statutory and regulatory frameworks that exist at a local level can provide such protection and management, as can lack of pressure for change, such as areas too remote for anthropogenic disturbance. Finally, State, local, or private management plans as well as management under Federal agencies jurisdictions can provide protection and management to avoid the need for designation of critical habitat. When we consider a plan to determine its adequacy in protecting habitat, we consider whether the plan, as a whole will provide the same level of protection that designation of critical habitat would provide. The plan need not lead to exactly the same result as a designation in every individual application, as long as the protection it provides is equivalent, overall. In making this determination, we examine whether the plan provides management, protection, or enhancement of the PCEs that is at least equivalent to that provided by a critical habitat designation, and whether there is a reasonable expectation that the management, protection, or enhancement actions will continue into the foreseeable future. Each review is particular to the species and the plan, and some plans may be adequate for some species and inadequate for others.

We consider a current plan to provide adequate management or protection if it meets three criteria: (1) The plan is complete and provides the same or better level of protection from adverse modification or destruction than that provided through a consultation under section 7 of the Act; (2) there is a reasonable expectation that the conservation management strategies and actions will be implemented based on past practices, written guidance, or regulations; and (3) the plan provides conservation strategies and measures consistent with currently accepted principles of conservation biology.

Guánica and Susúa Commonwealth Forests: Commonwealth of Puerto Rico

We have determined that the lands containing the features essential to the conservation of *C. melanocarpa* within the Guánica and Susúa Commonwealth forests do not meet the definition of critical habitat under section 3(5)(A) of the Act as those features do not require special management or protections. As such, they are not being included in this proposal. Both forests are public lands owned by the Commonwealth of Puerto Rico and managed by the DNER.

The DNER developed a master plan for the Commonwealth forests of Puerto Rico in 1976. The master plan identified soil and land types, climate, wildlife, vegetation, land use, recreation opportunities, and future research needs for all Commonweath forests, including Guánica and Susúa forests. The master plan also identified management recommendations to address identified issues for each forest unit.

In Guánica, the master plan identified special management considerations in accordance with the uniqueness of the forest, proposed to manage the forest and associated vegetation types for non-consumptive use by the public, and reserved and managed the entire unit as

a wildlife sanctuary (DNR 1976, pp. 56–58). Because of the forest condition, it was designated as a United Biosphere Reserve in 1981 by the United Nations Educational, Scientific and Cultural Organization (UNESCO).

For Susúa, the master plan also identified special management considerations, including locating representative areas of all plant communities and rare and endangered species and limiting public use on these areas; not issuing new permits for transmission lines; and delineating all unique areas and preserving them in their natural condition (DNR 1976, pp. 230–232).

Both forests are currently managed as wildlife sanctuaries, protecting wildlife and plants in perpetuity and allowing only non-consumptive use by the public in designated areas and trails. Active management includes developing and maintaining fire breaks, conducting prescribed burning adjacent to roads to reduce fuel load, removing exotic plant species along roads, and promoting scientific data collection, and conducting outreach and education activities within adjacent communities. Forest management also provides opportunities for scientific research and the use of existing trails for passive recreation and education. The Guánica Forest also provides for beach use. These current management activities have not been identified as threats for *C. melanocarpa*.

The Guánica and Susúa Commonwealth forests and adjacent lands are designated as Critical Wildlife Areas (CWA) by the Commonwealth of Puerto Rico (DNER 2005, pp. 211 and 221). The CWA designation constitutes a special recognition by the Commonwealth with the purpose of providing information to Commonwealth and Federal agencies about the conservation needs of these areas and assisting permitting agencies in precluding negative impacts as a result of permit approvals or endorsements (DNER 2005, pp. 2–3).

Since 1984, the Service and DNER have a signed cooperative agreement pursuant to section 6(c) of the Act, establishing a partnership agreement for the purpose of implementing an endangered and threatened fish, wildlife and plants species conservation program in the Commonwealth of Puerto Rico. Both parties agree that programs of the Commonwealth of Puerto Rico are designed to assist resident endangered and threatened species; it is their mutual desire to work in harmony for the common purpose of planning, developing and conducting programs to protect, manage and enhance the populations of all resident endangered and threatened fish, wildlife and plants within the Commonwealth of Puerto Rico.

The DNER approved laws and regulations to protect threatened and endangered species within lands under their jurisdiction. In 1999, the Commonwealth of Puerto Rico approved Law Number 241, Wildlife Law of the Commonwealth of Puerto Rico (Ley de Vida Silvestre del Estado Libre Asociado de Puerto Rico—Ley Núm. 241 del 15 Ago. 1999). The purpose of this law is to protect, conserve, and enhance native and migratory wildlife species; declare all wildlife species within its jurisdiction as the property of Puerto Rico; regulate permits; regulate hunting activities; and regulate exotic species. In 2004, the DNER approved Commonwealth of Puerto Rico's Regulation Number 6766, which regulates the management of threatened and endangered species in Puerto Rico (Reglamento para Regir el Manejo de las Especies Vulnerables y en Peligro de Extinción en el Estado Libre Asociado de Puerto Rico—Núm. 6766 del 11 de Feb 2004). *C. melanocarpa* has been included in the list of protected species. Article 2.06 of this regulation prohibits collecting, cutting, and removing (among other activities) listed plant individuals within the jurisdiction of PR.

Threats identified for *C. melanocarpa* on the Guánica and Susúa Commonwealth forests are human-induced fires during dry season and cutting of vegetation for trail and powerline maintenance. The DNER has regulatory mechanisms to protect individuals of *C. melanocarpa* from these threats within the forest boundaries, and forest managers are aware of the occupied localities within the forests. We believe that management guidelines for both forests, current local laws and regulations and the close coordination and excellent working partnership with DNER will adequately address identified threats to *C. melanocarpa*, features essential to its conservation, and its habitat on DNER lands. Therefore, we do not believe that special management or protection is required for *C. melanocarpa* and its primary constituent elements.

Recent, more extensive surveys conducted in Guánica Commonwealth Forest have expanded the known range of other federally listed species such, as bariaco (*Trichilia triacantha*) and palo de rosa (*Ottoschulzia rhodoxylon*), and other State-protected species all previously known for only a few individuals within the forest. These surveys were conducted in areas not previously accessed and are a result of a graduate student's thesis work that has not been published yet. As stated earlier in this rule, past collections exist for Guánica Commonwealth Forest. We believe additional occurrences of *C. melanocarpa* will be found in both forests. For example, when Trejo-Torres went to Guánica in 2001, specifically to search for and identify the species, he accomplished confirmation on an individual. When Service biologists returned to Gu´nica Commonwealth Forest with this species' expert in 2006 to specifically search for this plant, they found 12 additional individuals in the vicinity.

We believe that extensive surveys in the Susúa Commonwealth Forest would also result in additional sightings of the species. It has been the Service's experience that, if extensive surveys are conducted additional individuals or populations may be found. For example, the endemic plant *Calliandra locoensis* was discovered in the Susúa Forest in 1991 (García and Kolterman 1992, pp. 57–60), and only one population was known at the time (Breckon and Kolterman 1994, p. CL–1). Recent additional survey efforts have resulted in three additional localities and about 1,000 individuals (González 1998, pp. 41–42; Breckon and Kolterman 2000). Protection of such areas as the Commonwealth forests conveys stability of forest development, since most forest land in Puerto Rico was destroyed for agriculture. Forest reserves like Guánica, protected since 1919, provide the necessary structure to support the conservation of the species.

Thus on the basis that Susúa and the Guánica Commonwealth Forests are being adequately managed as wildlife sanctuaries by DNER, where they are protecting wildlife and plants in perpetuity and allowing only non-consumptive use by the public in designated areas and trails, we have determined that features essential to the conservation of *C. melanocarpa* on lands within these forests do not require special management considerations or protection. As such, these lands do not meet the definition of critical habitat for *C. melanocarpa as defined in section 3(5)(A) of the Act and are* not included in the proposal.

Conservation Partnerships on Non-Federal Lands

Most federally listed species in the United States will not recover without the cooperation of non-Federal landowners. More than 60 percent of the United States is privately owned (National Wilderness Institute 1995) and at least 80 percent of endangered or

threatened species occur either partially or solely on private lands (Crouse *et al.* 2002). Stein *et al.* (1995) found that only about 12 percent of listed species were found almost exclusively on Federal lands (90 to 100 percent of their known occurrences restricted to Federal lands) and that 50 percent of federally listed species are not known to occur on Federal lands at all.

Given the distribution of listed species with respect to land ownership, conservation of listed species in many parts of the United States is dependent upon working partnerships with a wide variety of entities and the voluntary cooperation of many non-Federal landowners (Wilcove and Chen 1998; Crouse *et al.* 2002; James 2002). Building partnerships and promoting voluntary cooperation of landowners is essential to understanding the status of species on non-Federal lands and is necessary to implement recovery actions such as reintroducing listed species, habitat restoration, and habitat protection.

Many non-Federal landowners derive satisfaction from contributing to endangered species recovery. The Service promotes these private-sector efforts through the Four Cs philosophy—conservation through communication, consultation, and cooperation. This philosophy is evident in Service programs such as Habitat Conservation Plans (HCPs), Safe Harbors, Candidate Conservation Agreements, Candidate Conservation Agreements with Assurances, and conservation challenge cost-share. Many private landowners, however, are wary of the possible consequences of encouraging endangered species to their property, and there is mounting evidence that some regulatory actions by the Federal government, while well-intentioned and required by law, can (under certain circumstances) have unintended negative consequences for the conservation of species on private lands (Wilcove *et al.* 1996; Bean 2002; Conner and Mathews 2002; James 2002; Koch 2002; Brook *et al.* 2003). Many landowners fear a decline in their property value due to real or perceived restrictions on land-use options where threatened or endangered species are found. Consequently, harboring endangered species is viewed by many landowners as a liability, resulting in anti-conservation incentives because maintaining habitats that harbor endangered species represents a risk to future economic opportunities (Main *et al.* 1999; Brook *et al.* 2003).

The purpose of designating critical habitat is to contribute to the conservation of threatened and endangered species and the ecosystems upon which they depend. The outcome of the designation, triggering regulatory requirements for actions funded, authorized, or carried out by Federal agencies under section 7 of the Act, can sometimes be counterproductive to its intended purpose. According to some researchers, the designation of critical habitat on private lands significantly reduces the likelihood that landowners will support and carry out conservation actions (Main *et al.* 1999; Bean 2002; Brook *et al.* 2003). The magnitude of this negative outcome is greatly amplified in situations where active management measures (such as reintroduction, fire management, control of invasive species) are necessary for species conservation (Bean 2002).

Cooperative conservation is the foundation of the Service's actions to protect species, and the Service has many tools by which it can encourage and implement partnerships for conservation. These tools include conservation grants, funding for Partners for Fish and Wildlife Program, the Coastal Program, and cooperative-conservation challenge cost-share grants. Our Private Stewardship Grant Program and Landowner Incentive Program provide assistance to private landowners in their voluntary efforts to protect threatened, imperiled, and endangered species, including the development and implementation of Habitat Conservation Plans.

Conservation agreements with non-Federal landowners (such as HCPs, contractual conservation agreements, easements, and stakeholder-negotiated State regulations) enhance species conservation by extending species protections beyond those available through section 7 consultations. In the past decade, we have encouraged non-Federal landowners to enter into conservation agreements, based on a view that we can achieve greater species conservation on non-Federal land through such partnerships than we can through other methods (61 FR 63854; December 2, 1996).

Economic Analysis

An analysis of the economic impacts of proposing critical habitat for *C. melanocarpa* is being prepared. We will announce the availability of the draft economic analysis as soon as it is completed, at which time we will seek public review and comment. At that time, copies of the draft economic analysis will be available for downloading from the Internet at *http://www.southeast.fws.gov* or by contacting the Caribbean Fish and Wildlife Office directly (see **ADDRESSES**).

Peer Review

In accordance with our joint policy published in the **Federal Register** on July 1, 1994 (59 FR 34270), and based on our implementation of the Office of Management and Budget's Final Information Quality Bulletin for Peer Review, dated December 16, 2004, we will seek the expert opinions of at least five appropriate and independent peer reviewers regarding the science in this proposed rule. The purpose of such review is to ensure that our critical habitat designation is based on scientifically sound data, assumptions, and analyses. We will send copies of this proposed rule to these peer reviewers immediately following publication in the **Federal Register**. We will invite these peer reviewers to comment during the public comment period on the specific assumptions and conclusions regarding the proposed designation of critical habitat.

We will consider all comments and information received during the comment period on this proposed rule during preparation of a final rulemaking. Accordingly, the final decision may differ from this proposal.

Public Hearings

The Act provides for one or more public hearings on this proposal, if requested. Requests for public hearings must be made in writing within 45 days of publication of this proposal in the **Federal Register**. We intend to schedule a public hearing on this proposal, if any are requested, once the draft economic analysis is available so that we can receive public comment on the draft economic analysis and proposed rule simultaneously. However, we can schedule a public hearing prior to that time, if specifically requested. We will announce the date, time, and place of the hearing in the **Federal Register** and local newspapers at least 15 days prior to the first hearing.

Clarity of the Rule

Executive Order 12866 requires each agency to write regulations and notices that are easy to understand. We invite your comments on how to make this proposed rule easier to understand, including answers to questions such as the following: (1) Are the requirements in the proposed rule clearly stated? (2) Does the proposed rule contain technical jargon that interferes with the clarity? (3) Does the format of the proposed rule (grouping and order of the sections, use of headings, paragraphing, and so forth) aid or

reduce its clarity? (4) Is the description of the notice in the **SUPPLEMENTARY INFORMATION** section of the preamble helpful in understanding the proposed rule? (5) What else could we do to make this proposed rule easier to understand?

Send a copy of any comments on how we could make this proposed rule easier to understand to: Office of Regulatory Affairs, Department of the Interior, Room 7229, 1849 C Street, NW., Washington, DC 20240. You may e-mail your comments to this address: *Exsec@ios.doi.gov*.

Required Determinations

Regulatory Planning and Review

In accordance with Executive Order 12866, this document is a significant rule in that it may raise novel legal and policy issues, but it is not anticipated to have an annual effect on the economy of $100 million or more or affect the economy in a material way. Due to the timeline for publication in the **Federal Register**, the Office of Management and Budget (OMB) has not formally reviewed this rule. We are preparing a draft economic analysis of this proposed action, which will be available for public comment, to determine the economic consequences of designating the specific area as critical habitat. This economic analysis also will be used to determine compliance with Executive Order 12866, Regulatory Flexibility Act, Small Business Regulatory Enforcement Fairness Act, and Executive Order 12630.

Within these areas, the types of Federal actions or authorized activities that we have identified as potential concerns are listed above in the "Adverse Modification Standard" section. The availability of the draft economic analysis will be announced in the **Federal Register** and in local newspapers so that it is available for public review and comments. When it is completed, the draft economic analysis can be obtained from the internet Web site at *http://www.southeast.fws.gov* or by contacting the Caribbean Fish and ' Wildlife Office directly (see **ADDRESSES**).

Further, Executive Order 12866 directs Federal Agencies promulgating regulations to evaluate regulatory alternatives (Office of Management and Budget, Circular A–4, September 17, 2003). Pursuant to Circular A–4, once it has been determined that the Federal regulatory action is appropriate, the agency will need to consider alternative regulatory approaches. Since the determination of critical habitat is a statutory requirement pursuant to the Act, we must then evaluate alternative regulatory approaches, where feasible, when promulgating a designation of critical habitat.

In developing our designations of critical habitat, we consider economic impacts, impacts to national security, and other relevant impacts pursuant to section 4(b)(2) of the Act. Based on the discretion allowable under this provision, we may exclude any particular area from the designation of critical habitat providing that the benefits of such exclusion outweigh the benefits of specifying the area as critical habitat and that such exclusion would not result in the extinction of the species. As such, we believe that the evaluation of the inclusion or exclusion of particular areas, or combination thereof, in a designation constitutes our regulatory alternative analysis.

Regulatory Flexibility Act (5 U.S.C. 601 et seq.)

Under the Regulatory Flexibility Act (5 U.S.C. 601 *et seq.*, as amended by the Small Business Regulatory Enforcement Fairness Act (SBREFA) of 1996), whenever an agency is required to publish a notice of rulemaking for any proposed or final rule, it must prepare and make available for public comment a regulatory flexibility analysis that describes the effects of the rule on small entities (small businesses, small organizations, and small government jurisdictions). However, no regulatory flexibility analysis is required if the head of the agency certifies the rule will not have a significant economic impact on a substantial number of small entities. The SBREFA amended the Regulatory Flexibility Act (RFA) to require Federal agencies to provide a statement of the factual basis for certifying that the rule will not have a significant economic impact on a substantial number of small entities.

At this time, the Service lacks the available economic information necessary to provide an adequate factual basis for the required RFA finding. Therefore, the RFA finding is deferred until completion of the draft economic analysis prepared in accordance with section 4(b)(2) of the Act and Executive Order 12866. This draft economic analysis will provide the required factual basis for the RFA finding. Upon completion of the draft economic analysis, the Service will publish a notice of availability of the draft economic analysis of the proposed designation and reopen the public comment period for the proposed designation. The Service will include with the notice of availability, as appropriate, an initial regulatory flexibility analysis or a certification that the rule will not have a significant economic impact on a substantial number of small entities accompanied by the factual basis for that determination. The Service has concluded that deferring the RFA finding until completion of the draft economic analysis is necessary to meet the purposes and requirements of the RFA. Deferring the RFA finding in this manner will ensure that the Service makes a sufficiently informed determination based on adequate economic information and provides the necessary opportunity for public comment.

Executive Order 13211

On May 18, 2001, the President issued an Executive Order (E.O. 13211) on regulations that significantly affect energy supply, distribution, and use. Executive Order 13211 requires agencies to prepare Statements of Energy Effects when undertaking certain actions. This proposed rule to designate critical habitat for *C. melanocarpa* is a significant regulatory action under Executive Order 12866 as it may raise novel legal and policy issues. However, it is not expected to significantly affect energy supplies, distribution, or use. Therefore, this action is not a significant energy action and no Statement of Energy Effects is required. We will further evaluate this in our draft economic analysis and revise this assessment if appropriate.

Unfunded Mandates Reform Act (2 U.S.C. 1501 et seq.)

In accordance with the Unfunded Mandates Reform Act (2 U.S.C. 1501), the Service makes the following findings:

(a) This rule will not produce a Federal mandate. In general, a Federal mandate is a provision in legislation, statute, or regulation that would impose an enforceable duty upon State, local, Tribal governments, or the private sector and includes both "Federal intergovernmental mandates" and "Federal private sector mandates." These terms are defined in 2 U.S.C. 658(5)–(7). "Federal intergovernmental mandate" includes a regulation that "would impose an enforceable duty upon State, local, or tribal governments" with two exceptions. It excludes "a condition of Federal assistance." It also excludes "a duty arising from participation in a voluntary Federal program," unless the regulation "relates to a then-existing Federal program under which $500,000,000 or more is provided annually to State, local, and tribal governments under entitlement authority," if the provision would "increase the stringency of conditions of

assistance" or "place caps upon, or otherwise decrease, the Federal Government's responsibility to provide funding," and the State, local, or Tribal governments "lack authority" to adjust accordingly. At the time of enactment, these entitlement programs were: Medicaid; AFDC work programs; Child Nutrition; Food Stamps; Social Services Block Grants; Vocational Rehabilitation State Grants; Foster Care, Adoption Assistance, and Independent Living; Family Support Welfare Services; and Child Support Enforcement. "Federal private sector mandate" includes a regulation that "would impose an enforceable duty upon the private sector, except (i) A condition of Federal assistance or (ii) a duty arising from participation in a voluntary Federal program."

The designation of critical habitat does not impose a legally binding duty on non-Federal government entities or private parties. Under the Act, the only regulatory effect is that Federal agencies must ensure that their actions do not destroy or adversely modify critical habitat under section 7. While non-Federal entities that receive Federal funding, assistance, or permits, or that otherwise require approval or authorization from a Federal agency for an action, may be indirectly impacted by the designation of critical habitat, the legally binding duty to avoid destruction or adverse modification of critical habitat rests squarely on the Federal agency. Furthermore, to the extent that non-Federal entities are indirectly impacted because they receive Federal assistance or participate in a voluntary Federal aid program, the Unfunded Mandates Reform Act would not apply, nor would critical habitat shift the costs of the large entitlement programs listed above on to State governments.

(b) We do not believe that this rule will significantly or uniquely affect small governments because the publicly owned units are owned by the Commonwealth of Puerto Rico, which does not fit the definition of "small governmental jurisdiction." As such, a Small Government Agency Plan is not required. We will, however, further evaluate this issue as we conduct our economic analysis and revise this assessment if appropriate.

Federalism

In accordance with Executive Order 13132, the rule does not have significant Federalism effects. A Federalism assessment is not required. In keeping with DOI and Department of Commerce policy, we requested information from, and coordinated development of, this proposed critical habitat designation with appropriate State resource agencies in Puerto Rico and the U.S. Virgin Islands. The designation of critical habitat in areas currently occupied by *C. melanocarpa* imposes no additional restrictions to those currently in place and, therefore, has little incremental impact on State and local governments and their activities. The designation may have some benefit to these governments in that the areas that contain the features essential to the conservation of the species are more clearly defined, and the primary constituent elements of the habitat necessary to the conservation of the species are specifically identified. While making this definition and identification does not alter where and what federally sponsored activities may occur, it may assist these local governments in long-range planning (rather than waiting for case-by-case section 7 consultations to occur).

Civil Justice Reform

In accordance with Executive Order 12988, the Office of the Solicitor has determined that the rule does not unduly burden the judicial system and meets the requirements of sections 3(a) and 3(b)(2) of the Order. We propose designating critical habitat in accordance with the provisions of the Act. This proposed rule uses standard property descriptions and identifies the primary constituent elements within the designated area to assist the public in understanding the habitat needs of *C. melanocarpa*.

Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.)

This rule does not contain any new collections of information that require approval by OMB under the Paperwork Reduction Act. This rule will not impose recordkeeping or reporting requirements on State or local governments, individuals, businesses, or organizations. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

National Environmental Policy Act

It is our position that, outside the Tenth Circuit, we do not need to prepare environmental analyses as defined by the NEPA in connection with designating critical habitat under the Endangered Species Act of 1973, as amended. We published a notice outlining our reasons for this determination in the **Federal Register** on October 25, 1983 (48 FR 49244). This assertion was upheld in the courts of the Ninth Circuit (*Douglas County* v. *Babbitt*, 48 F.3d 1495 (9th Cir. Ore. 1995), cert. denied 116 S. Ct. 698 (1996)).

Government-to-Government Relationship With Tribes

In accordance with the President's memorandum of April 29, 1994, "Government-to-Government Relations with Native American Tribal Governments" (59 FR 22951), Executive Order 13175, and the Department of Interior's manual at 512 DM 2, we readily acknowledge our responsibility to communicate meaningfully with recognized Federal Tribes on a government-to-government basis. We have determined that there are no Tribal lands occupied at the time of listing containing the features essential for the conservation of *C. melanocarpa* and no Tribal lands that are unoccupied areas that are essential for the conservation of *C. melanocarpa*. Therefore, critical habitat for *C. melanocarpa* has not been proposed for designation on Tribal lands.

References Cited

A complete list of all references cited in this rulemaking is available upon request from the Field Supervisor, Caribbean Fish and Wildlife Office (see **ADDRESSES**).

Author(s)

The primary authors of this package are the staff of Caribbean Fish and Wildlife Office (see **FOR FURTHER INFORMATION CONTACT** section).

List of Subjects in 50 CFR Part 17

Endangered and threatened species, Exports, Imports, Reporting and recordkeeping requirements, Transportation.

Proposed Regulation Promulgation

Accordingly, we propose to amend part 17, subchapter B of chapter I, title 50 of the Code of Federal Regulations, as set forth below:

PART 17—[AMENDED]

1. The authority citation for part 17 continues to read as follows:

Authority: 16 U.S.C. 1361–1407; 16 U.S.C. 1531–1544; 16 U.S.C. 4201–4245; Pub. L. 99–625, 100 Stat. 3500; unless otherwise noted.

2. In § 17.12(h), revise the entry for "*Catesbaea melanocarpa*" under "FLOWERING PLANTS" to read as follows:

§ 17.12 Endangered and threatened plants.

* * * * *

(h) * * *

Species		Historic range	Family	Status	When listed	Critical habitat	Special rules
Scientific name	Common name						
*	*	*	*	*	*		*
FLOWERING PLANTS							
*	*	*	*	*	*		*
Catesbaea melanocarpa	None	U.S.A. (PR, VI), Antigua, Barbuda, Guadalupe.	Rubiaceae	E	657	17.96(a)	NA
*	*	*	*	*	*		*

3. In § 17.96, amend paragraph (a) by adding an entry for *Catesbaea melanocarpa* in alphabetical order under Family Rubiaceae to read as follows:

§ 17.96 Critical habitat—plants.

(a) * * *

Family Rubiaceae: *Catesbaea melanocarpa* (no common name)

(1) Critical habitat is depicted on the map below for Halfpenny Bay, St. Croix, U.S. Virgin Islands.

(2) The primary constituent elements (PCEs) of critical habitat for *C. melanocarpa* are the habitat components that provide:

(i) Single-layered canopy forest with little ground cover and open forest floor that supports patches of dry vegetation with grasses, and

(ii) Well to excessively drained, limestone and serpentine-derived soils (including soils of the San Germán, Nipe, and Rosario series and Glynn and Hogensborg series).

(3) Critical habitat does not include manmade structures (such as buildings, aqueducts, airports, roads, and other paved areas) and the land on which they are located existing on the effective date of this rule and not containing one or more of the primary constituent elements.

(4) *Critical habitat map.* Data layers were created by overlaying habitats that contain at least two of the PCEs, as defined in paragraph (2) of this section, on U.S. Geological Survey (USGS) topographic maps (UTM 20, NAD 27).

(5) Halfpenny Bay, St. Croix, U.S. Virgin Islands.

(i) *General description:* The Halfpenny Bay unit consists of approximately 50-ac (20.23-ha) on privately owned property located about 2.48 mi (4 km) south of Christiansted, St. Croix, U.S. Virgin Islands. The area is delimited by Road 62 to the north, South Shore Road to the west, the local road to Halfpenny Bay to the east, and by the 33-ft (10-m) topography contour line to the south. This unit encompasses the habitat features essential to the conservation of *C. melanocarpa* within Estate Halfpenny, Christiansted, St. Croix, and does not contain any manmade structures.

(ii) *Coordinates:* From Christiansted USGS 1:24,000 quadrangle map, St. Croix land bounded by the following UTM 20 NAD 27 coordinates (E,N): 319053.46, 1959358.06; 319363.69, 1959455.15; 319476.85, 1959132.82; 319505.42, 1959046.53; 319551.84, 1958916.00; 319534.20, 1958929.38; 319519.91, 1958929.38; 319498.48, 1958938.91; 319484.19, 1958946.05; 319458.00, 1958943.67; 319434.19, 1958934.15; 319405.61, 1958927.00; 319372.28, 1958924.62; 319372.28, 1958915.10; 319391.33, 1958905.57; 319412.76, 1958900.81; 319446.09, 1958893.67; 319462.76, 1958893.67; 319484.19, 1958884.14; 319500.86, 1958874.62; 319534.20, 1958850.80; 319548.49, 1958831.75; 319558.01, 1958812.70; 319558.01, 1958793.65; 319534.20, 1958774.60; 319512.77, 1958767.46; 319477.05, 1958753.17; 319438.95, 1958750.79; 319407.99, 1958750.79; 319391.33, 1958753.17; 319381.80, 1958746.03; 319355.61, 1958748.41; 319332.84, 1958757.39; 319322.93, 1958759.64; 319311.66, 1958776.76; 319308.51, 1958787.58; 319310.36, 1958805.56; 319306.26, 1958826.78; 319291.31, 1958843.66; 319271.56, 1958860.13; 319253.53, 1958870.94; 319231.78, 1958879.38; 319220.24, 1958896.22; 319208.81, 1958913.94; 319199.67, 1958924.80; 319172.23, 1958965.37; 319153.20, 1958993.68; 319141.29, 1959019.87; 319124.63, 1959053.21; 319115.10, 1959077.02; 319105.58, 1959103.22; 319250.83, 1959146.08; 319203.21, 1959269.90; 319059.77, 1959230.54; 319057.97, 1959244.96; 319058.87, 1959263.88; 319066.98, 1959282.81; 319064.72, 1959303.09; 319059.77, 1959323.82; 319055.57, 1959353.25; 319053.46, 1959358.06.

(iii) *Note:* Map of Halfpenny Bay follows:

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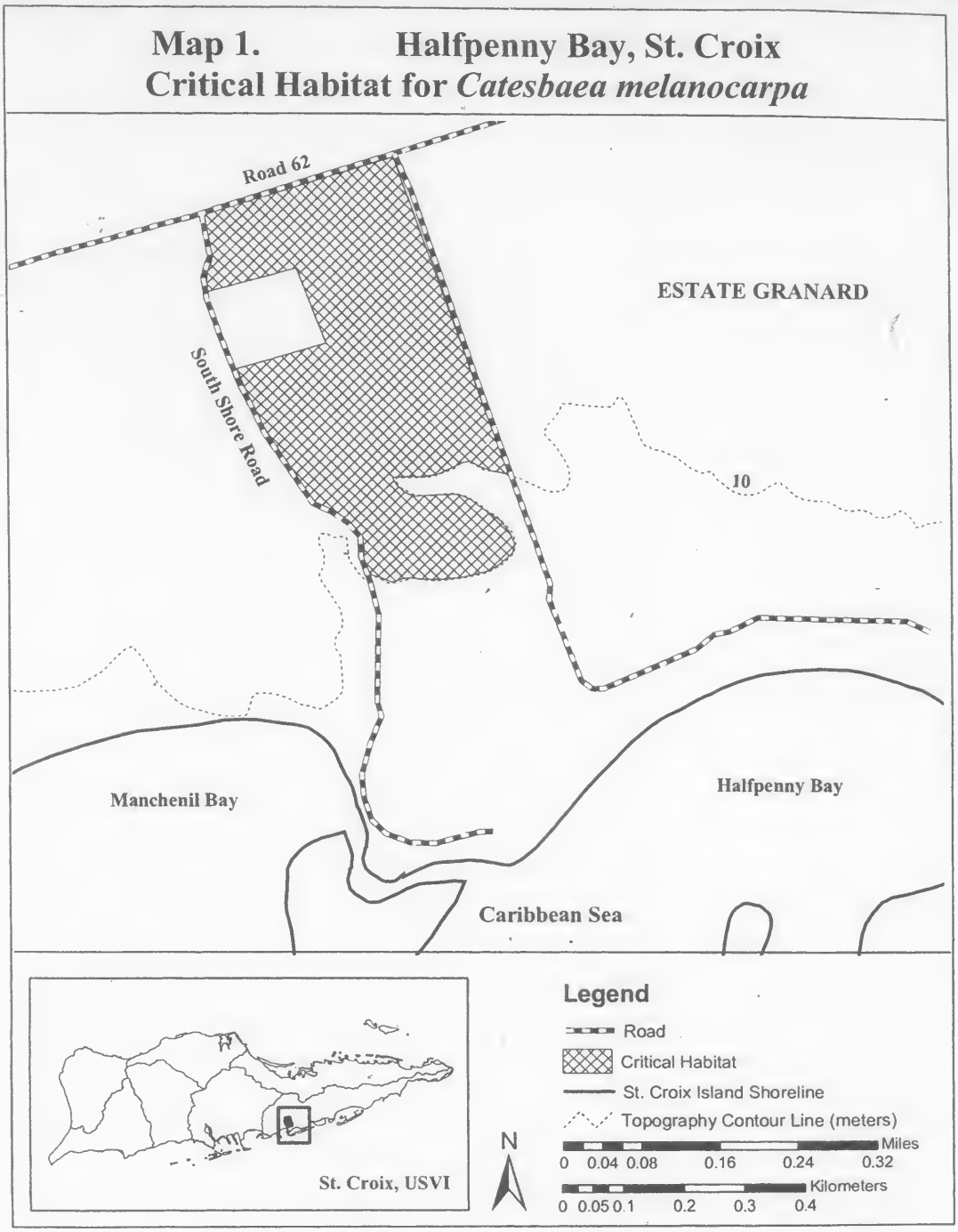

* * * * *

Dated: August 15, 2006.

David M. Verhey,

Acting Assistant Secretary for Fish and Wildlife and Parks.

[FR Doc. 06–7029 Filed 8–21–06; 8:45 am]

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DEPARTMENT OF THE INTERIOR

Fish and Wildlife Service

50 CFR Part 17

Endangered and Threatened Wildlife and Plants; 90-Day Findings for Petitions To Delist the Island Night Lizard

AGENCY: Fish and Wildlife Service, Interior.

ACTION: Notice of two 90-day petition findings and initiation of a status review for the 12-month finding.

SUMMARY: We, the U.S. Fish and Wildlife Service (Service), announce 90-day findings for two petitions to remove the island night lizard (*Xantusia riversiana*) from the Federal List of Endangered and Threatened Wildlife and Plants pursuant to the Endangered Species Act (Act). We find that one of the petitions presents substantial scientific or commercial information indicating that delisting may be warranted, and we are therefore initiating a status review. We are requesting submission of any new information on the island night lizard since its original listing as a threatened species in 1977. Following this status review, we will issue a 12-month finding on the petition to delist.

DATES: The findings announced in this document were made on August 22, 2006. To be considered in the 12-month finding on the delisting petition, comments and information should be submitted to us by October 23, 2006.

ADDRESSES: Submit comments, information, and questions to the Field Supervisor, Attention: Island Night Lizard Comments, U.S. Fish and Wildlife Service, Carlsbad Fish and Wildlife Office, 6010 Hidden Valley Road, Carlsbad, California 92009 (fax: 760–431–9618).

FOR FURTHER INFORMATION CONTACT: Jim Bartel, Field Supervisor, at the above address (telephone: 760–431–9440).

SUPPLEMENTARY INFORMATION:

Background

Section 4(b)(3)(A) of the Act (16 U.S.C. 1531 *et seq.*) requires that we make a finding on whether a petition to list, delist, or reclassify a species presents substantial information to indicate the petitioned action may be warranted. To the maximum extent practicable, we must make the finding within 90 days of receiving the petition, and must promptly publish the finding in the **Federal Register**. If we find substantial information exists to support the petitioned action, we are required to promptly commence a status review of the species (50 CFR 424.14). "Substantial information" is defined in 50 CFR 424.14(b) as "that amount of information that would lead a reasonable person to believe that the measure proposed in the petition may be warranted." Petitioners need not prove that the petitioned action is warranted to support a "substantial" finding; instead, the key consideration in evaluating a petition for substantiality involves demonstration of the reliability and adequacy of the information supporting the action advocated by the petition.

The factors for listing, delisting, or reclassifying a species are described at 50 CFR 424.11. We may delist a species only if the best scientific and commercial data available substantiate that it is neither endangered nor threatened. Delisting may be warranted as a result of: (1) Extinction, (2) recovery, and/or (3) a determination that the original data used for classification of the species as endangered or threatened were in error.

On July 7, 2005, we initiated a 5-year review of the island night lizard as required under section 4(c)(2)(A) of the Act. Pursuant to the terms of a settlement agreement in *California State Grange, et al.* v. *Norton*, No: 2:05–cv–00560–MCE–PAN (E.D. California), we will be completing that review by September 30, 2006. A status review is required for both the 5-year review and the 12-month finding. These reviews may utilize similar information and analyses. At the conclusion of these reviews, we will issue the 12-month finding on the petition, as provided in section 4(b)(3)(B) of the Act, and make the requisite recommendation under section 4(c)(2)(B) of the Act based on the results of the 5-year review.

Threats Identified at the Time of Listing

The island night lizard occurs on San Clemente, San Nicolas, and Santa Barbara Islands (Bezy *et al.* 1980) and one small islet (Sutil Island) immediately adjacent to Santa Barbara Island (Fellers and Drost 1991). We listed the island night lizard as threatened on August 11, 1977, along with six other species of animals and plants that occur on the Channel Islands off the coast of southern California (42 FR 40682). We determined that the habitat used by the island night lizard was being modified by the browsing effect of feral goats (*Capra hircus*) and the rooting of feral pigs (*Sus scrofa*) (June 1, 1976, 41 FR 22073; 42 FR 40682). We stated that the habitats on Santa Barbara and San Nicolas Islands were already reduced and any future reduction would seriously imperil the island night lizard populations (41 FR 22073; 42 FR 40682). Island night lizard depredation by feral housecats (*Felis cattus*) on San Clemente Island and by alligator lizards (*Elgaria multicarinata webbii*) on San Nicolas Island were also identified as possible threats to the continued existence of the island night lizard (41 FR 22073; 42 FR 40682). In 1984, we published the Recovery Plan for the Endangered and Threatened Species of the California Channel Islands (Recovery Plan), which included the island night lizard (USFWS 1984). Critical habitat has not been designated for the island night lizard.

Summary of the Petitions

In making these findings regarding the island night lizard delisting petitions, we rely on information provided by the petitioners and evaluate that information in accordance with 50 CFR 424.14(b). The content of these findings summarize information included in the petitions, as well as information available to us at the time we reviewed the petitions. Our review for the purposes of a 90-day finding under section 4(b)(3)(A) of the Act and § 424.14(b) of our regulations is limited to a determination of whether the information in the petitions meets the "substantial scientific information" threshold. We do not conduct additional research at this point, nor do we subject the petitions to rigorous critical review. Rather, as the Act and regulations contemplate, at the 90-day finding, the key consideration in evaluating the petitions involves demonstration of the reliability and adequacy of the information supporting the action advanced by the petitions.

In determining whether a petition presents substantial information that the petitioned action may be warranted, in accordance with regulation (§ 424.14(b)(2)), we consider whether the petition:

(1) Clearly indicates the petitioned action and gives the scientific and common name of the species involved;

(2) Contains detailed narrative justification for the petitioned action based on available information, past and present numbers and distribution of the species involved, and any threats faced by the species;

(3) Provides information regarding the status of the species over all or a significant portion of its range;

(4) Includes appropriate supporting documentation in the form of bibliographic references, reprints of pertinent publications, copies of reports or letters from authorities, and maps.

Additionally, section 4(a)(1) of the Act requires that we determine whether a species is endangered or threatened based on one or more of the five following factors:

A. The present or threatened destruction, modification, or curtailment of its habitat or range;

B. Overutilization for commercial, recreational, scientific, or educational purposes;

C. Disease or predation;

D. The inadequacy of existing regulatory mechanisms; or

E. Other natural or manmade factors affecting its continued existence.

In determining whether a petition presents substantial information regarding threats faced by the species, we evaluate whether the petition provides any information relevant to those factors.

The first petition we received requesting that we remove the island night lizard from the List of Endangered and Threatened Wildlife and Plants (List) was from the National Wilderness Institute and was dated February 3, 1997. The petition maintains that the island night lizard has no significant identifiable threats, appears to have had a stable population since being listed, and should be delisted on the basis of data error. The petition restates information from the listing rule (42 FR 40682) and the Recovery Plan and does not provide any new information or documentation that would support delisting. The petition also notes that we identified the island night lizard in budget justifications as early as 1993 as a potential candidate for delisting. We acknowledged receipt of the petition in a letter to the National Wilderness Institute dated June 29, 1998, and indicated that due to low priority assigned to delisting activities in our Fiscal Year 1997 Listing Priority Guidance, we were not then able to act on the petition.

The first petition does not provide any information on or describe the past and present numbers and distribution, or status, of the species over all or a significant portion of its range. However, the petition does present claims regarding the first factor (the present or threatened destruction, modification, or curtailment of its habitat or range). The petition asserts that the island night lizard is not threatened by habitat modification by feral animals. To support this assertion, the first petition refers to the Recovery Plan (USFWS 1984). It states that the Recovery Plan presumed that the habitat modification resulting from feral species herbivory was the primary contributor to the decline of indigenous species such as the island night lizard, and notes that the Recovery Plan did not provide any data demonstrating a decline.

To support its view that habitat on San Clemente Island was not altered by grazing animals, the petition cites from the Recovery Plan in reference to San Clemente Island habitat: "* * * with habitat structure as the predominant influence on present distribution, it is possible to deduce the change from past habitat modification on the island. The optimum habitat, maritime desert scrub, *Lycium* phase, is largely the result of soil and climate conditions along the west coast of the island and probably has not been altered to the detriment of the lizards by grazing mammals." However, the petition does not acknowledge the continuing text of this section of the Recovery Plan, which, for example, notes that there is no information on the status of island night lizards prior to ranching activities and the introduction of feral animals on San Clemente Island. The Recovery Plan also suggests that important changes to habitat structure occurred in upland areas on the southern half of San Clemente Island where grazing and soil erosion have replaced shrub and herbaceous vegetation with grassland, cholla cactus, and bare ground. The Recovery Plan further notes that rocky areas exposed by the loss of original vegetation are a deteriorated habitat for the island night lizard, and chaparral shrub vegetation is not sufficiently dense to provide full shelter for the island night lizard. The Recovery Plan concludes that the most extensive deterioration of island night lizard habitat occurred with the vegetation changes on rocky upland areas of the southern half of San Clemente Island.

The information presented in the first petition asserting that feral species herbivory did not alter island night lizard habitat does not accurately portray the discussion in the Recovery Plan and is out of context. We therefore conclude that the petition does not provide substantial information regarding the first factor (the present or threatened destruction, modification, or curtailment of its habitat or range). The petition did not provide any information concerning the second factor (overutilization for commercial, sporting, recreational, scientific, or educational purposes), the third factor (disease or predation); the fourth factor (inadequacy of existing regulatory mechanisms), or the fifth factor (other natural or manmade factors affecting their continued existence). We, therefore, conclude that the first petition does not provide substantial information or appropriate supporting documentation supporting its claim that feral species herbivory on San Clemente Island did not contribute to the decline of the island night lizard, and that the island night lizard was listed in error. The first petition does not provide any information on island night lizard habitat on San Nicolas Island or on Santa Barbara Island, nor does it address any other factors considered in a 90-day petition finding.

We received a second petition dated March 22, 2004, from the U.S. Navy, requesting that we delist the island night lizard on San Clemente Island and San Nicolas Island, California, as distinct population segments pursuant to section 4(b)(3) of the Act. The second petition provides a comprehensive summary of the species' status and population abundance information that has been collected since the island night lizard was listed. The petition also provides information on threats to the species. The information on species status, population abundance, and threats provided in the petition is accompanied by supporting documentation in the form of bibliographic references, many of which are included as appendices.

The following assertions of the second petition, along with the associated documentation, constitute substantial information warranting further analysis in a 12-month finding: (1) The primary threat, habitat destruction by feral ungulates on San Clemente Island, has been removed; (2) increases in the numbers of island night lizards on San Clemente Island are likely attributable to the removal of the feral ungulates and minimization of the potential impacts of military training operations; (3) there are minimal impacts from military activities on island night lizard on San Nicolas Island; (4) the effect of feral cat predation on island night lizard is either reduced (San Clemente Island) or minimal (San Nicolas Island); (5) the establishment of a sympatric relationship between island night lizard and alligator lizard suggests that the latter does not threaten the continued existence of the island night lizard; (6) continued monitoring has demonstrated that island night lizard populations on San Clemente Island and San Nicolas Island are stable and viable; (7) the island night lizard monitoring data for both San Clemente and San Nicolas Islands do not demonstrate that non-native vegetation adversely impacts the island night lizard populations; (8) since 1977, the only substantial change in plant communities on San Clemente Island has been habitat recovery as a result of the eradication of feral grazing

animals; (9) the military administrative nature of the islands, the sensitivity towards natural resources, and the conservation goals outlined in San Clemente Island Integrated Natural Resources Management Plan (US Navy 2002) provide assurances that new introductions of non-native animals are unlikely to occur; and (10) investigations suggest that fires do not have detrimental effects to the species unless they result in long term modification of vegetation.

The second petition has thus presented information regarding the first factor (the present or threatened destruction, modification, or curtailment of its habitat or range), third factor (disease or predation), and the fifth factor (other natural or manmade factors affecting their continued existence) under section 4(a)(1) of the Act that we evaluate in determining whether substantial information indicates the petitioned action may be warranted. Regarding the first factor, the first petition claims that habitat was not altered by feral species herbivory but does not provide substantial information or appropriate supporting documentation. In contrast, the second petition provides documentation in the form of bibliographic references that cite biological studies on the species and Department of the Navy management plans for San Clemente and San Nicolas islands, some of which are included as appendices to the petition.

The second petition does not suggest the delisting of the island night lizard population on Santa Barbara Island. The second petition states that even though rabbits (*Oryctolagus cuniculus*) were eradicated on the island in 1981, the National Park Service informed the U.S. Navy that the lizard habitat has not improved as expected, and recent survey data from Santa Barbara Island have not been adequately analyzed.

Distinct Population Segments

Under the Act, a species is defined as including any subspecies and any distinct population segment (DPS) of a vertebrate species [16 U.S.C. 1532(16)]. To implement the measures prescribed by the Act and its Congressional guidance, we and the National Marine Fisheries Service (National Oceanic and Atmospheric Administration—Fisheries), developed a joint policy that addresses the recognition of DPSs of vertebrate species for potential listing and delisting actions (February 7, 1996, 61 FR 4722). The DPS policy specifies that we are to use two elements to assess whether a population segment under consideration for listing may be recognized as a DPS: (1) The population segment's discreteness from the remainder of the species to which it belongs; and (2) the significance of the population segment to the species to which it belongs. If we determine that a population segment meets the discreteness and significance standards and therefore qualifies as a DPS, then the level of threat to that population segment is evaluated based on the five listing factors established by the Act to determine whether listing or delisting the DPS is warranted.

The island night lizard is currently listed as a threatened species throughout its range, and we have not conducted an analysis to determine if the DPS policy is applicable to this species. The second petition asserts that the San Nicolas, San Clemente, and Santa Barbara Islands all qualify as DPSs. The second petition asserts that the three island night lizard populations are discrete from each other because (1) they are separated physically as islands of the Pacific Ocean, between which the lizards are not able to travel, and (2) they are separated administratively by ownership. The U.S. Navy administers San Clemente and San Nicolas Islands, and the National Park Service administers Santa Barbara Island.

The second petition also states that the three populations on the islands meet the significance element of the DPS policy based on two points. First, because the island night lizard is found on only three of the six California Channel Islands, the loss of one population segment may be considered a gap in the range of the species. Secondly, the second petition asserts that phenotypic differences, such as variation in scalation, body size, and clutch size, occur between the different island night lizard populations.

The Service has not analyzed the island night lizard to determine whether the separate populations constitute DPSs under our policy. The second petition has raised this issue and it is relevant to the status review and subsequent determination on the petition. Our 12-month finding will consider whether any of the island night lizard populations constitute a DPS.

Findings

We have reviewed both of the delisting petitions and their supporting documents as well as other information in our files. The first petition presents no information on the past and present numbers and distribution, or status of the species over all or a significant portion of its range, and limited information relevant to threats to the species. The limited information it presents in support of its view that island night lizard habitat on San Clemente Island was not altered by grazing animals misrepresents discussions in the Recovery Plan and is out of context, and was not accompanied by any other supporting documentation. Accordingly, we find that the first petition does not present substantial information indicating that delisting the island night lizard may be warranted.

For the reasons discussed above, we find that the second petition does present substantial information indicating that delisting the San Clemente and San Nicolas Islands populations may be warranted. Questions remain as to whether the island night lizard populations would qualify as distinct population segments. We believe it is appropriate to consider the information provided in the second petition, any other new information about this species, and the threats it may face in a status review, including information presented as to whether the island night lizard populations qualify as distinct population segments. We will issue a 12-month finding in accordance with section 4(b)(3)(B) of the Act as to whether delisting is warranted.

Public Information Solicited

We are requesting information on the island night lizard throughout its range for the 12-month finding. We also will use that information for the ongoing 5-year review (70 FR 39327, July 7, 2005). When we make a finding that substantial information exists to indicate that listing or delisting a species may be warranted, we are required to promptly commence a review of the status of the species. To ensure that the status review is complete and based on the best available scientific and commercial information, we are soliciting information on the island night lizard throughout its range. This includes information regarding historical and current distribution, biology, ecology, ongoing conservation measures for the species and its habitat, and threats to the species and its habitat.

Additionally, we request any information regarding application of our policy regarding the recognition of distinct vertebrate population segments under the Act (61 FR 4722) to this particular situation. As stated in the policy, a population segment of a vertebrate species may be considered discrete if it satisfies either one of the following two conditions: (1) It is markedly separated from other populations of the same taxon as a consequence of physical, physiological, ecological, or behavioral factors

(quantitative measures of genetic or morphological discontinuity may provide evidence of this separation); or (2) it is delimited by international governmental boundaries within which significant differences in control of exploitation, management of habitat, conservation status, or regulatory mechanisms exist. The Service also considers available scientific evidence of a discrete population segment's significance to the taxon to which it belongs. This consideration may include, but is not limited to, the following: (1) Persistence of the discrete population segment in an ecological setting unusual or unique for the taxon, (2) evidence that loss of the discrete population segment would result in a significant gap in the range of a taxon, (3) evidence that the discrete population segment represents the only surviving natural occurrence of a taxon that may be more abundant elsewhere as an introduced population outside its historic range, or (4) evidence that the discrete population segment differs markedly from other populations of the species in its genetic characteristics. We request any additional information, comments, and suggestions from the public, State and Federal agencies, Tribes, the scientific community, industry or environmental entities, or any other interested parties concerning the status of the island night lizard, and whether the island night lizard populations constitute distinct population segments.

If you wish to provide information or comments relevant to the 12-month finding or 5-year review, you may submit your information, comments, and materials to the Field Supervisor, Carlsbad Fish and Wildlife Office (see **ADDRESSES**). Our practice is to make comments, including names and home addresses of respondents, available for public review during regular business hours. Respondents may request that we withhold their identity, as allowable by law. If you wish to withhold your name or address, you must state this request prominently at the beginning of your comment. However, we will not consider anonymous comments. To the extent consistent with applicable law, we will make all submissions from organizations or businesses, and from individuals identifying themselves as representatives or officials of organizations or businesses, available for public inspection in their entirety. Comments and materials received will be available for public inspection, by appointment, during normal business hours at the above address.

A complete list of all references cited in this finding is available, upon request, from the Carlsbad Fish and Wildlife Office (see **ADDRESSES**).

Author

The primary author of this document is Sandy Vissman (see **ADDRESSES**).

Authority

The authority for this action is the Endangered Species Act of 1973, as amended (16 U.S.C. 1531 *et seq.*).

Dated: July 11, 2006.

Benito A. Perez,

Acting Director, Fish and Wildlife Service.

[FR Doc. E6–13877 Filed 8–21–06; 8:45 am]

BILLING CODE 4310–55–P

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

50 CFR Part 648

[Docket No. 060808213–6213–01; I.D. 073106C]

RIN 0648–AU56

Magnuson-Stevens Act Provisions; Fisheries of the Northeastern United States; Northeast Multispecies Fishery; 2006 Georges Bank Fixed Gear Sector Operations Plan and Agreement and Allocation of Georges Bank Cod Total Allowable Catch

AGENCY: National Marine Fisheries Service (NMFS), National Oceanic and Atmospheric Administration (NOAA), Commerce.

ACTION: Proposed rule; request for comments.

SUMMARY: Framework Adjustment (FW) 42 to the Northeast (NE) Multispecies Fishery Management Plan (FMP) and FW 3 to the Monkfish FMP propose creation of the Georges Bank (GB) Cod Fixed Gear Sector (Fixed Gear Sector). If approved in FW 42/FW 3, the Fixed Gear Sector would be eligible for an annual allocation of up to 20 percent of the annual GB cod total allowable catch (TAC). Therefore, in accordance with the FMP, and pursuant to the anticipated approval of FW 42/FW 3, a representative of the Fixed Gear Sector submitted an Operations Plan, Sector Agreement (Contract), and Environmental Assessment (EA), and requested an allocation of GB cod to the Fixed Gear Sector for fishing year 2006 (FY 2006).

The Administrator, Northeast Region, NMFS (Regional Administrator), has determined that documents submitted by the Fixed Gear Sector comply with the procedural regulations regarding an annual Operations Plan and Sector Contract. This noticedocument provides interested parties an opportunity to comment on the proposed Sector Operations Plan and EA (prior to approval or disapproval of FW 42, which would authorize the formation of the Fixed Gear Sector), and prior to final approval or disapproval of the Sector Operations Plan and allocation of GB cod TAC to the Fixed Gear Sector for FY 2006. Comments regarding the formation of the Fixed Gear Sector (as opposed to the FY 2006 Operations Plan and Sector Contract, which are the subject of this proposed rule) should be submitted as described in the proposed rule for FW 42.

DATES: Written comments must be received on or before September 21, 2006.

ADDRESSES: Written comments should be sent to Patricia A. Kurkul, Regional Administrator, NMFS, Northeast Regional Office, 1 Blackburn Drive, Gloucester, MA 01930. Mark the outside of the envelope "Comments on GB Fixed Gear Sector Operations Plan." Comments may also be sent via fax to (978) 281–9135, or submitted via e-mail to: *fixedgearsector@NOAA.gov*, or the Federal e-Rulemaking Portal: *http://www.regulations.gov*.

Copies of the Sector Agreement and the EA are available from the NE Regional Office at the mailing address specified above.

FOR FURTHER INFORMATION CONTACT: Thomas Warren, Fishery Policy Analyst, phone (978) 281–9347, fax (978) 281–9135, e-mail *Thomas.Warren@NOAA.gov*.

SUPPLEMENTARY INFORMATION: The Regional Administrator has made a preliminary determination that the Fixed Gear Sector Contract and Operations Plan is consistent with the goals of the FMP and other applicable law and is in compliance with the regulations governing the development and operation of a sector as specified under 50 CFR 648.87. The final rule implementing Amendment 13 (69 FR 22906, April 27, 2004) specified a process for the formation of sectors within the NE multispecies fishery and the allocation of TAC for specific groundfish species (or days-at-sea (DAS)), implemented restrictions that apply to all sectors, and authorized the first sector of the FMP (GB Cod Hook Sector).

If FW 42/FW 3 are approved as proposed, the Fixed Gear Sector would be an approved sector, and the regulations that would apply to the Fixed Gear Sector specify that: (1) Aall

vessels with a valid limited access NE multispecies DAS permit are eligible to participate in the Sector, provided they have documented landings of GB cod through valid dealer reports submitted to NMFS of GB cod during FY 1996 through 2001 (regardless of gear fished); (2) membership in the Sector is voluntary, and each member would be required to remain in the Sector for the entire fishing year and could not fish outside the NE multispecies DAS program during the fishing year, unless certain conditions are met; (3) vessels fishing in the Sector (participating vessels) would be confined to fishing in the GB Cod Hook Sector Area, which is that portion of the GB cod stock area north of 39°00′ N. lat. and east of 71°40′ W. long; and (4) participating vessels would be required to comply with all pertinent Federal fishing regulations, unless specifically exempted by a Letter of Authorization, and the provisions of an approved Operations Plan. This current regulations that apply to all sectors would also apply to the Fixed Gear Sector.

Although FW 42/FW 3 would establish the Fixed Gear Sector, in order for GB cod to be allocated to the Fixed Gear Sector and the Fixed Gear Sector authorized to fish, the Fixed Gear Sector must submit an Operations Plan and Sector Contract to the Regional Administrator annually for approval. The Operations Plan and Sector Contract must contain certain elements, including a contract signed by all Sector participants and a plan containing the management rules that the Sector participants agree to abide by in order to avoid exceeding the allocated TAC. An additional analysis of the impacts of the Sector's proposed operations may be required in order to comply with the National Environmental Policy Act. Further, the public must be provided an opportunity to comment on the proposed Operations Plan and Sector Contract. The regulations require that, upon completion of the public comment period, the Regional Administrator will make a determination regarding approval of the Sector Contract and Operations Plan. If approved by the Regional Administrator, participating vessels would be authorized to fish under the terms of the Operations Plan and Sector Contract.

In anticipation of approval of the Fixed Gear Sector in FW 42/FW 3, the Fixed Gear Sector submitted an initial version of the Operations Plan, Sector Contract, and EA to NMFS on February 1, 2006. On June 13, 2006, the Fixed Gear Sector submitted a revised version, after making modifications to the Operations Plan and EA, and submitted a final version on June 28, 2006.

The Sector Agreement would be overseen by a Board of Directors and a Sector Manager. The Sector Agreement specifies, in accordance with Amendment 13, that the Sector's GB cod TAC would be based upon the number of Sector members and their historic landings of GB cod. The GB cod TAC is a "hard" TAC, meaning that, once the TAC is reached, Sector vessels could not fish under a DAS, possess or land GB cod or other regulated species managed under the FMP (regulated species), or use gear capable of catching groundfish (unless fishing under charter/party or recreational regulations).

As of June 28, 2006, two prospective Fixed Gear Sector members had signed the 2006 Sector Contract. The GB cod TAC calculation is based upon the historic cod landings of the participating Fixed Gear Sector vessels, using all gear. The allocation percentage is calculated by dividing the sum of total landings of GB cod by Sector members for FY 1996 through 2001, by the sum of the total accumulated landings of GB cod harvested by all NE multispecies vessels for the same time period (2,240,110 lb (1,016.1 mt)/ 113,278,842 lb (51,382.4 mt)). The resulting number is 1.98 percent. Based upon these two prospective Sector members, the Sector TAC of GB cod would be 121 mt (1.98 percent of the fishery-wide GB cod target TAC of 6,132 mt). The fishery-wide GB cod target TAC of 6,132 mt is less than the GB cod target TAC specified for 2006 (7,458 mt) because the 7,458 mt includes Canadian catch. That is, the fishery-wide GB cod target TAC of 6,132 mt was calculated by subtracting the GB cod TAC specified for Canada under the U.S./Canada Resource Sharing Understanding for FY 2006 (1,326 mt), from the overall GB cod target TAC of 7,458 mt specified by the New England Fishery Management Council (Council) for FY 2006 (71 FR 25095, April 28, 2006). If prospective members of the Sector change their minds about participating in the Fixed Gear Sector after the publication of this notice and prior to a final decision by the Regional Administrator, it is possible that the total number of participants in the Sector and the TAC for the Sector may be reduced from the numbers above.

The Fixed Gear Sector Agreement contains procedures for the enforcement of the Sector rules, a schedule of penalties, and provides the authority to the Fixed Gear Sector Manager to issue stop fishing orders to members of the Fixed Gear Sector. Participating vessels would be required to land fish only in designated landing ports and would be required to provide the Sector Manager with a copy of the Vessel Trip Report (VTR) within 48 hrhours of offloading. Dealers purchasing fish from participating vessels would be required to provide the Fixed Gear Sector Manager with a copy of the dealer report on a weekly basis. On a monthly basis, the Fixed Gear Sector Manager would transmit to NMFS a copy of the VTRs and the aggregate catch information from these reports. After 90 percent of the Fixed Gear Sector's allocation has been harvested, the Fixed Gear Sector Manager would be required to provide NMFS with aggregate reports on a weekly basis. A total of 1/12 of the Fixed Gear Sector's GB cod TAC, minus a reserve, would be allocated to each month of the fishing year. GB cod quota that is not landed during a given month would be rolled over into the following month. Once the aggregate monthly quota of GB cod is reached, for the remainder of the month, participating vessels could not fish under a NE multispecies DAS, possess or land GB cod or other regulated species, or use gear capable of catching regulated NE multispecies. Once the annual TAC of GB cod is reached, Fixed Gear Sector members could not fish under a NE multispecies DAS, possess or land GB cod or other regulated species, or use gear capable of catching regulated NE multispecies for the rest of the fishing year. The harvest rules would not preclude vessels from fishing under the charter/party or recreational regulations, provided the vessel fishes under the applicable charter/party and recreational rules on separate trips. For each fishing trip, participating vessels would be required to fish under the NE multispecies DAS program to account for any incidental groundfish species that they may catch while fishing for GB cod. In addition, participating vessels would be required to call the Sector Manager prior to leaving port. There would be no trip limit for GB cod for participating vessels. All legal-sized cod caught would be retained and landed and counted against the Fixed Gear Sector's aggregate allocation. Participating vessels would not be allowed to fish with or have on board gear other than jigs, non-automated demersal longline, handgear, or sink gillnets, and participating Fixed Gear Sector vessels fishing with hook gear would be exempt from the GB Seasonal Closure Area during May.

The Operations Plan submitted by the Fixed Gear Sector proposes that Sector members be allowed to fish in a geographic area that extends farther

south (south to 35° 00′ N. Lat.) and west (to the coast) than does the area specified in the FW 42 proposed rule, which states that the Fixed Gear Sector would fish only in the GB Cod Hook Sector Area, which is substantially smaller, and does not include the areas to the south or west of GB. In FW 42, the Council proposed that the Fixed Gear Sector be required to fish in the GB Cod Hook Sector Area, and included such a requirement in the proposed regulations, because the GB Cod Hook Sector, which has very similar goals is subject to this requirement (i.e., targeting GB cod). FW 42, which proposes to create the GB Cod Fixed Gear Sector, did not describe or define a geographic area associated with the Fixed Gear Sector. For both Amendment 13 and FW 42 (proposed), the justification for defining the geographic area in the regulations, in contrast to defining the area only in the Operations Plan, is that the area where a sector fishes is one of the fundamental attributes that defines a sector. Because the Fixed Gear Sector Operations Plan proposes a geographic area that is different from that proposed in FW 42, NMFS is particularly interested in receiving public comments on this subject.

The EA prepared for the Fixed Gear Sector operations concludes that the biological impacts of the Fixed Gear Sector will be positive because the hard TAC for GB cod will ensure that the Fixed Gear Sector members will not be contributing to overfishing of GB cod, and the use of fixed gear will preclude the use of other gear that may have greater negative bycatch and habitat impacts. Implementation of the Fixed Gear Sector would have a positive impact on essential fish habitat (EFH) and bycatch by allowing a maximum number of hook or gillnet vessels to remain active in the fishery, rather than converting to (or leasing DAS to) other gear types that have greater impacts on EFH. DAS will provide two means of restricting both the landings and effort of the Fixed Gear Sector. Monthly quota targets would spread out the catch throughout the fishing year and prevent the harvest of the cod TAC in an intensive manner. The prohibition on discarding would reduce regulatory discarding, and the elimination of the daily trip limit would allows vessel to operate more efficiently. The analysis of economic impacts of the Fixed Gear Sector concludes that Fixed Gear Sector members would enable member businesses to remain economically viable by realizing higher economic returns, if the Fixed Gear Sector were implemented. The EAEnvironmental Assessment (EA) asserts that fishing in accordance with the Sector Agreement rules enables more adaptable and efficient harvesting of GB cod with fixed gear than would be possible if the vessels were fishing in accordance with the common pool (non-Sector) rules. The social benefits of the Fixed Gear Sector would accrue to Fixed Gear Sector members, as well as the Chatham/Harwichport, MA, community, which is highly dependent upon groundfish revenues. The EA concludes that the self-governing nature of the Fixed Gear Sector and the development of rules by the Fixed Gear Sector enables stewardship of the cod resource by Fixed Gear Sector members. The cumulative impacts of the Fixed Gear Sector are expected to be positive due to a positive biological impact, neutral impact on habitat, and a positive social and economic impact. In contrast, the cumulative impact of the no action alternative is estimated to be neutral, with negative social and economic impacts on the fixed gear fishery.

Should the Regional Administrator approve the Sector Agreement as proposed, a Letter of Authorization would be issued to each member of the Fixed Gear Sector exempting them, conditional upon their compliance with the Sector Agreement, from the GB cod possession restrictions and the requirements of the GOM trip limit exemption program, as specified in § 648.86(b).

Regulations under the Magnuson-Stevens Fishery Conservation and Management Act (Magnuson-Stevens Act) require publication of this notification to provide interested parties the opportunity to comment on proposed TAC allocations and plans of operation of sectors.

Classification

At this time, NMFS has not made a final determination that the measures this proposed rule would implement are consistent with the national standards of the Magnuson-Stevens Act and other applicable laws. NMFS, in making the final determination, will take into account the data, views, and comments received during the comment period.

This proposed rule has been determined to be not significant for the purposes of Executive Order (E.O.) 12866.

This proposed rule does not contain policies with federalism or "takings" implications as those terms are defined in E.O. 13132 and E.O. 12630, respectively.

An Initial Regulatory Flexibility Analysis (IRFA) was prepared, which has been modified by NMFS for this action, as required by section 603 of the Regulatory Flexibility Act (RFA). Below is a summary of the IRFA, which describes the economic impact this proposed rule, if adopted, would have on small entities. A description of the action, why it is being considered, and the legal basis for this action are contained in the preamble to this proposed rule and in the Executive Summary and section 3.0 of the EA prepared for this action. The Proposed Alternative would approve the Operations Plan for the 2006 fishing year and allocate a GB cod TAC of 121 mt to the Fixed Gear Sector. Once the GB cod TAC is reached, participating vessel would not be allowed to fish under a DAS, possess or land GB cod, or other regulated species managed under the FMP, or use gear capable of catching groundfish (unless fishing under recreational or charter/party regulations). Vessels intending to fish in the Fixed Gear Sector this fishing year may not fish for NE multispecies under a groundfish DAS this fishing year until the Sector Operations Plan is approved, and Fixed Gear Sector vessels may use either hook gear or gillnet gear only. Under the proposed Operations Plan, members using hook gear would be exempt from the May GB Seasonal Closure.

The Small Business Administration (SBA) size standard for small commercial fishing entities is $4 million in gross sales, and the size standard for small party/charter operators is $6.5 million. Available data for fishing year 2004 gross sales show that the maximum gross sales for any single commercial fishing vessel was $1.8 million, and the maximum gross sales for any affected party/charter vessel was $1.0 million. While an entity may own multiple vessels, available data make it difficult to determine which vessels may be controlled by a single entity. For this reason, each vessel is treated as a single entity for purposes of size determination and impact assessment. This means that all commercial and party/charter fishing entities would fall under the SBA size standard for small entities and, therefore, there is no differential impact between large and small entities.

Economic Impacts of the Proposed Action

The fixed gear fishermen and the Chatham/Harwichport communities are dependaent upon GB cod and other groundfish. The Amendment 13 restrictions that reduced the GB cod trip limit had a disproportionate affect on the Chatham fixed gear fishermen.

According to Amendment 13, Chatham's overall community dependence on multispecies as a percentage of total fisheries revenues from federally permitted vessels averaged about 71 percent. Allocation of cod TAC to a sector and the development of alternative fishing restrictions would mitigate the impacts of Amendment 13. Specifically, the proposed Operations Plan enables Fixed Gear Sector members to fish under a set of rules crafted by Sector members in order to adapt to current economic and fishing conditions. This rule would enable Fixed Gear Sector members to remain economically viable by maximizing revenues and minimizing expenses in the short term, and help to maintain associated shoreside job opportunities.

Because of the time elapsed between the beginning of the fishing year on May 1, 2006, and the anticipated effective date of FW 42, as well as the fact that Sector members are not allowed to fish during the fishing year prior to the approval of the Sector Operations Plan, many prospective members were forced to choose between fishing during the summer and foregoing participation in the Fixed Gear Sector for FY 2006, or to abstain from fishing in order to preserve eligibility to participate in the Fixed Gear Sector. Because June, July, and August are traditionally the most profitable months of the fishing year, many fishermen could not afford to not fish, despite the economic benefits the Sector has to offer. Many fishermen make 50 percent or more of their annual income in those 3 months alone. Therefore, the number of vessels participating in the Fixed Gear Sector in FY 2006 is significantly lower than anticipated.

Economic Impacts of Alternative to the Proposed Action

Under the No Action alternative, all Sector members would remain in the common pool of vessels and fish under all the rules implemented by Amendment 13 and subsequent Framework Adjustments, and there would be no allocation of GB cod to the Fixed Gear Sector. Because cod usually represents a high proportion of total fishing income for gillnet and hookgear vessels, revenues for such vessel owners are very sensitive to changes in cod trip limits. Under the scenario of reduced DAS anticipated under FW 42 and a restrictive daily trip limit that would be in place under the no action alternative, it is likely that Fixed Gear Sector vessels would experience revenue losses. It is more likely under the No Action alternative that disruption to the Chatham/Harwichport communities would occur.

Description of the Projected Reporting, Recordkeeping, and Other Compliance Requirements of the Proposed Rule

This proposed rule contains no collection-of-information requirement subject to the Paperwork Reduction Act (PRA).

Authority: 16 U.S.C. 1801 *et seq.*

Dated: August 16, 2006.

Samuel D. Rauch, III,

Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service.

[FR Doc. E6–13867 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–22–S

Notices

Federal Register
Vol. 71, No. 162
Tuesday, August 22, 2006

This section of the FEDERAL REGISTER contains documents other than rules or proposed rules that are applicable to the public. Notices of hearings and investigations, committee meetings, agency decisions and rulings, delegations of authority, filing of petitions and applications and agency statements of organization and functions are examples of documents appearing in this section.

DEPARTMENT OF AGRICULTURE

Submission for OMB Review; Comment Request

August 17, 2006.

The Department of Agriculture has submitted the following information collection requirement(s) to OMB for review and clearance under the Paperwork Reduction Act of 1995, Public Law 104–13. Comments regarding (a) whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) the accuracy of the agency's estimate of burden including the validity of the methodology and assumptions used; (c) ways to enhance the quality, utility and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology should be addressed to: Desk Officer for Agriculture, Office of Information and Regulatory Affairs, Office of Management and Budget (OMB), *OIRA_Submission@OMB.EOP.GOV* or fax (202) 395–5806 and to Departmental Clearance Office, USDA, OCIO, Mail Stop 7602, Washington, DC 20250–7602. Comments regarding these information collections are best assured of having their full effect if received within 30 days of this notification. Copies of the submission(s) may be obtained by calling (202) 720–8681.

An agency may not conduct or sponsor a collection of information unless the collection of information displays a currently valid OMB control number and the agency informs potential persons who are to respond to the collection of information that such persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

Rural Housing Service

Title: Section 515 Multi-Family Housing Preservation and Revitalization Restructuring Demonstration Program (MPR) for Fiscal Year 2006.

OMB Control Number: 0575–0190.

Summary of Collection: The Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act, 2006 (P.L. 109–97) provided funding for, and authorizes the Rural Housing Service (RHS) to conduct a demonstration program for the preservation and revitalization of the Section 515 multi-family housing portfolio. The Multi-Family Housing Preservation and Revitalization Restructuring Demonstration Program will utilize numerous authorities to provide the financial assistance necessary to revitalize rental properties and preserve them for affordable housing.

Need and Use of the Information: RHS will use the collected information to evaluate the strengths and weaknesses to which the proposal concept possesses or lacks to select the most feasible proposals that will enhances the Agency's chances in accomplishing the demonstration objective. The information will be utilized to sustain and modify RHS' current policies pertaining to revitalization and preservation of affordable rental housing in rural areas.

Description of Respondents: Individuals or households; not-for-profit institutions; State, Local, or Tribal Government.

Number of Respondents: 3,600.

Frequency of Responses: Recordkeeping; Reporting: Annually.

Total Burden Hours: 4,670.

Charlene Parker,

Departmental Information Collection Clearance Officer.

[FR Doc. E6–13874 Filed 8–21–06; 8:45 am]

BILLING CODE 3410–XT–P

DEPARTMENT OF AGRICULTURE

Food Safety and Inspection Service

[Docket No. FSIS–2006–0023]

Codex Alimentarius Commission: Meeting of the Codex Committee on Nutrition and Foods for Special Dietary Uses

AGENCY: Office of the Under Secretary for Food Safety, USDA.

ACTION: Notice of public meeting and request for comments.

SUMMARY: The Office of the Under Secretary for Food Safety, U.S. Department of Agriculture (USDA) and the Food and Drug Administration (FDA), U.S. Department of Health and Human Services are sponsoring a public meeting on September 12, 2006. The objective of the public meeting is to provide information and receive public comments on agenda items and draft United States positions that will be discussed at the 28th Session of the Codex Committee on Nutrition and Foods for Special Dietary Uses (CCNFSDU) of the Codex Alimentarius Commission (Codex), which will be held in Chiang Mai, Thailand on October 30–November 3, 2006. The Under Secretary for Food Safety and FDA recognize the importance of providing interested parties with the opportunity to obtain background information on the 28th Session of the CCNFSDU and to address items on the agenda.

DATES: The public meeting is scheduled for Tuesday, September 12, 2006 from 1 p.m. to 4 p.m.

ADDRESSES: The public meeting will be held in the Auditorium (1A003), Food and Drug Administration, Harvey Wiley Federal Building, 5100 Paint Branch Parkway, College Park, MD. Parking is adjacent to this building and will be available at no charge to individuals who pre-register by the date below (See Pre-Registration). In addition, the College Park metro station is across the street. Codex documents related to the 28th Session of the CCNFSDU will be accessible via the World Wide Web at the following address: *http://www.codexalimentarius.net/current.asp.*

The Food Safety and Inspection Service (FSIS) invites interested persons to submit comments on this notice.

Comments may be submitted by any of the following methods:

- Federal eRulemaking Portal: This Web site provides the ability to type short comments directly into the comment field on this Web page or attach a file for lengthier comments. Go to *http://www.regulations.gov* and, in the "Search for Open Regulations" box, select "Food Safety and Inspection Service" from the agency drop-down menu, then click on "Submit." In the Docket ID column, select the FDMS Docket Number FSIS–2006–0023 to submit or view public comments and to view supporting and related materials available electronically.
- Mail, including floppy disks or CD-ROM's, and hand- or courier-delivered items: Send to FSIS Docket Room, Docket Clerk, USDA, FSIS, 300 12th Street, SW., Room 102, Cotton Annex Building, Washington, DC 20250.

Electronic mail: *fsis.regulationscomments@fsis.usda.gov.*

All submissions received must include the Agency name and docket number FSIS–2006–0023.

- All comments submitted in response to this notice, as well as research and background information used by FSIS in developing this document, will be posted to the *regulations.gov* Web site. The background information and comments will be available for public inspection in the FSIS Docket Room at the address listed above between 8:30 a.m. and 4:30 p.m., Monday through Friday.
- In addition to submitting comments by mail to the above address, the U.S. Delegate to the CCNFSDU, Dr. Barbara Schneeman of the Food and Drug Administration, invites U.S. interested parties to submit their comments electronically to the following e-mail address: *CCNFSDU@cfsan.fda.gov.*

Pre-Registration: To gain admittance to this meeting, individuals must present a photo ID for identification and also are required to pre-register. In addition, no cameras or videotaping equipment will be permitted in the meeting room. To pre-register, please send the following information to this e-mail address—*nancy.crane@fda.hhs.gov* by September 5, 2006:

—Your name
—Organization
—Mailing address
—Phone number
—E-mail address

FOR FURTHER INFORMATION ABOUT THE 28TH SESSION OF THE CCNFSDU CONTACT: Nancy Crane, Assistant to the U.S. Delegate to the CCNFSDU, Office of Nutritional Products, Labeling and Dietary Supplements, Center for Food Safety and Applied Nutrition, FDA, 5100 Paint Branch Parkway (HFS–800), College Park, MD 20740; Phone: (301) 436–1450; Fax: (301) 436–2636. E-mail: *nancy.crane@fda.hhs.gov.*

FOR FURTHER INFORMATION ABOUT THE PUBLIC MEETING CONTACT: Ellen Matten, International Issues Analyst, U.S. Codex Office, USDA, FSIS, Room 4861, South Building, 1400 Independence Avenue, SW., Washington, DC 20250; Phone: (202) 205–7760; Fax: (202) 720–3157.

SUPPLEMENTARY INFORMATION:

Background

The Codex Alimentarius Commission (Codex) was established in 1963 by two United Nations organizations, the Food and Agriculture Organization and the World Health Organization. Codex is the major international organization for encouraging fair international trade in food and protecting the health and economic interests of consumers. Through adoption of food standards, codes of practice, and other guidelines developed by its committees, and by promoting their adoption and implementation by governments, Codex seeks to protect the health of consumers and ensure fair practices in trade.

The Codex Committee on Nutrition and Foods for Special Dietary Uses (CCNFSDU) was established to study specific nutritional problems assigned to it by Codex and advise Codex on general nutritional issues; to draft general provisions, as appropriate, concerning the nutritional aspects of all foods; to develop standards, guidelines or related texts for foods for special dietary uses, in cooperation with other committees when necessary; and to consider, amend if necessary, and endorse provisions on nutritional aspects proposed for inclusion in Codex Standards, guidelines and related texts. The CCNFSDU is hosted by the Federal Republic of Germany.

Issues To Be Discussed at the Public Meeting

The following items on the Agenda for the 28th Session of the CCNFSDU will be discussed during the public meeting:

- Matters referred to the Committee from other Codex bodies.
- Guidelines for Use of Nutrition Claims: Draft Table of Conditions for Nutrient Contents: (Part B, containing provisions on Dietary Fibre).
- Draft Revised Standard for Infant Formula and Formulas for Special Medical Purposes Intended for Infants;

—Section A: Draft Revised Standard for Infant Formula
—Section B: Formulas for Special Medical Purposes Intended for Infants
—Proposals of the Working Group for the Section on Food Additives (for Sections A and B).

- Draft Revised Standard for Gluten-Free Foods.
- Proposed Draft Revision of the Advisory List of Nutrient Compounds for Use in Foods for Special Dietary Uses Intended for the Use by Infants and Young Children.
- Proposed Draft Recommendations on the Scientific Basis of Health Claims.
- Discussion Paper on the Proposals for Additional or Revised Nutrient Reference Values for Labelling Purposes.
- Discussion Paper on the Application of Risk Analysis to the Work of the CCNFSDU.

Each issue listed will be fully described in documents distributed, or to be distributed, by the German Secretariat prior to the CCNFSDU. Members of the public may access copies of these documents via the World Wide Web at the following address: *http://www.codexalimentarius.net/current.asp.*

Public Meeting

At the September 12 public meeting, draft U.S. positions on these agenda items will be described, discussed, and attendees will have the opportunity to pose questions and offer comments. Written comments may be offered at the meeting or sent to the U.S. Delegate for the 28th Session of the CCNFSDU, Dr. Barbara Schneeman at *CCNFSDU@cfsan.fda.gov.* Written comments should state that they relate to activities of the 28th Session of the CCNFSDU.

Additional Public Notification

Public awareness of all segments of rulemaking and policy development is important. Consequently, in an effort to ensure that minorities, women, and persons with disabilities are aware of this notice, FSIS will announce it on-line through the FSIS Web Page located at *http://www.fsis.usda.gov/regulations/2006_Notices_Index/.* FSIS will also make copies of this **Federal Register** publication available through the FSIS Constituent Update, which is used to provide information regarding FSIS policies, procedures, regulations, **Federal Register** notices, FSIS public meetings, recalls and other types of information that could affect or would be of interest to constituents and stakeholders. The update is communicated via Listserv, a free electronic mail subscription service for industry, trade and farm groups, consumer interest groups, allied health professional and other individuals who

have asked to be included. The update is available on the FSIS Web page. Through the Listserv and web page, FSIS is able to provide information to a much broader and more diverse audience. In addition, FSIS offers an e-mail subscription service which provides automatic and customized access to selected food safety news and information. This service is available at *http://www.fsis.usda.gov/news_and_events/e-mail_subscription/*. Options range from recalls to export information to regulations, directives and notices. Customers can add or delete subscriptions themselves and have the option to password protect their account.

Done at Washington, DC on August 17, 2006.

F. Edward Scarbrough,

U.S. Manager for Codex Alimentarius.

[FR Doc. E6–13851 Filed 8–21–06; 8:45 am]

BILLING CODE 3410–DM–P

DEPARTMENT OF AGRICULTURE

Natural Resources Conservation Service

Environmental Assessment; Rehabilitation of Floodwater Retarding Structure 35A, Upper Salt Creek Watershed, Lancaster County Nebraska

AGENCY: Natural Resources Conservation Service, USDA.

ACTION: Notice of Availability, Finding of No Significant Impact.

SUMMARY: The Natural Resources Conservation Service (NRCS) has prepared an Environmental Assessment in compliance with the National Environmental Policy Act (NEPA), as amended. Pursuant to the implementing regulations for NEPA (40 CFR parts 1500–1508); the USDA Departmental Policy for the NEPA (7 CFR part 1b); the Natural Resources Conservation Service Regulations (7 CFR part 650); and the Natural Resources Conservation Service policy (General Manual Title 190, Part 410); the Natural Resources Conservation Service gives notice that an environmental impact statement is not being prepared for the rehabilitation of floodwater retarding Structure 35A in Upper Salt Creek Watershed, Lancaster County Nebraska. The Environmental Assessment was developed in coordination with the sponsoring local organization (Lower Platte South Natural Resources District) for a Federally assisted action to address flood control prevention in the Upper Salt Creek Watershed and the status of floodwater retarding dam Structure 35A. Upon consideration of the affected environment, alternatives, environmental consequences, and comments and coordination with concerned public and agencies, the State Conservationist for NRCS, Nebraska found that based on the significance and context and intensity that the proposed action is not a major Federal action significantly affecting the quality of the human environment. Thus, a Finding of No Significant Impact (FONSI) was made.

FOR FURTHER INFORMATION, CONTACT: Stephen K. Chick, State Conservationist, U.S. Department of Agriculture, Natural Resources Conservation Service, Federal Building, Room 152, 100 Centennial Mall North, Lincoln, Nebraska 68508–3866; telephone (402) 437–5300.

SUPPLEMENTARY INFORMATION: The sponsoring local organization concurs with this determination and agrees with carrying forward the proposed project. Structure 35A no longer meets the NRCS safety and performance standards for a High Hazard Class structure. The proposed action is to rehabilitate Structure 35A to current NRCS High Hazard Class requirements and extend its life for 100 years. The following actions are proposed: the existing principal spillway would be removed and replaced, the auxiliary spillway would be widened, the top of dam would be raised, and foundation drains re-established.

Information regarding this finding may be obtained at the contact information listed above. No administrative action on implementation of the proposed funding action will be taken until 30 days after the date of this publication in the **Federal Register**.

Signed in Lincoln, Nebraska on August 8, 2006.

Stephen K. Chick,

State Conservationist.

[FR Doc. E6–13875 Filed 8–21–06; 8:45 am]

BILLING CODE 3410–16–P

DEPARTMENT OF COMMERCE

Foreign–Trade Zones Board

(Docket 32–2006)

Foreign–Trade Zone 32—Miami, Florida, Application for Expansion

An application has been submitted to the Foreign–Trade Zones (FTZ) Board (the Board) by the Greater Miami Foreign–Trade Zone, Incorporated, grantee of FTZ 32, requesting authority to expand its zone to include a site in Medley, Florida, within the Miami Customs port of entry. The application was submitted pursuant to the provisions of the Foreign–Trade Zones Act, as amended (19 U.S.C. 81a–81u), and the regulations of the Board (15 CFR part 400). It was formally filed on August 10, 2006.

FTZ 32 was approved on September 6, 1977 (Board Order 123, 42 FR 46568, 9/16/77), expanded on March 3, 1982 (Board Order 184, 47 FR 10612, 3/11/82), and expanded on March 20, 1990 (Board Order 466, 55 FR 11631, 3/29/90). The zone project currently consists of the following sites: *Site 1* (72 acres, 750,000 sq. ft.)—warehousing and exhibition center located at NW 25th Street and 107th Avenue, Miami; *Site 2* (205 acres)—within the Beacon Centre development located north of NW 12th Street and east of 87th Avenue, Miami; and, *Temporary Site* (1 acre) within a 49–acre warehouse facility located at 12500 N.W. 112th Avenue, Medley (expires 9/1/2008).

The applicant is now requesting authority to expand the general–purpose zone to include the entire multi–user, food–service warehouse facility located at 12500 N.W. 112th Avenue in Medley (*Proposed Site 3*, 49 acres). The site is owned by Sysco Food Service of South Florida, Inc. The proposed site will also include the temporary site. The applicant is also requesting that 1 acre (50,000 sq. ft.) at Site 1 be restored to zone status. (A minor modification was approved in June 2006 (A(27f)-29–2006) removing 1 acre (50,000 sq. ft.) from Site 1 to establish the temporary site.) No specific manufacturing requests are being made at this time. Such requests would be made to the Board on a case–by-case basis.

In accordance with the Board's regulations, a member of the FTZ staff has been designated examiner to investigate the application and report to the Board.

Public comment is invited from the interested parties. Submissions (original and 3 copies) shall be addressed to the Board's Executive Secretary at the address below. The closing period for their receipt is October 23, 2006. Rebuttal comments in response to material submitted during the foregoing period may be submitted during the subsequent 15-day period (to November 6, 2006).

A copy of the application and accompanying exhibits will be available for public inspection at each of the following locations: U.S. Department of Commerce, Export Assistance Center, 5835 Blue Lagoon Drive, Suite 203, Miami, FL 33126; and, Office of the Executive Secretary, Foreign–Trade

Zones Board, Room 1115, U.S. Department of Commerce, 1401 Constitution Avenue, NW, Washington, DC 20230.

Dated: August 10, 2006.

Andrew McGilvray,

Acting Executive Secretary.

[FR Doc. E6–13869 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

Foreign–Trade Zones Board

(Docket 33–2006)

Foreign–Trade Zone 52 - Suffolk County, New York, Request for Manufacturing Authority, (Cosmetic Kits)

An application has been submitted to the Foreign–Trade Zones Board (the Board) by the Town of Islip (New York), operator of Foreign–Trade Zone (FTZ) 52, requesting authority on behalf of TKD Industries, Inc. (TKD) for the manufacture of cosmetic kits under FTZ procedures within FTZ 52 in Ronkonkoma, New York. The application was submitted pursuant to the provisions of the Foreign–Trade Zones Act, as amended (19 U.S.C. 81a–81u), and the regulations of the Board (15 CFR part 400). It was formally filed on August 10, 2006.

TKD operates a manufacturing facility (85 employees) within proposed FTZ 52 for the production of cosmetic kits. The finished products (classifiable as perfumes and toilet waters, lip makeup, eye makeup, manicure, powder, make–up treatments, shampoo, and hair–care products) would enter the United States duty free. Imported inputs are projected to comprise 34 percent of the value of finished products produced under FTZ procedures.

The company indicates that the foreign inputs that may be admitted under FTZ procedures are the following: pre–shave/after–shave; deodorants/antiperspirants; bath products; plastic boxes; plastic bottles; plastic caps; plastic displays; dust covers; glass containers; applicators; and re–usable boxes. Duty rates on the proposed imported components currently range from 2.5 to 7.0 percent *ad valorem*.

This application requests authority for TKD to conduct the activity under FTZ procedures, which would allow the company to choose the duty rate that applies to finished products for the foreign components noted above. TKD also anticipates realizing certain logistical savings. The application indicates that FTZ–related savings would help improve the facility's international competitiveness.

In accordance with the Board's regulations, a member of the FTZ Staff has been designated examiner to investigate the application and report to the Board.

Public comment is invited from interested parties. Submissions (original and 3 copies) shall be addressed to the Board's Executive Secretary at the address listed below. The closing period for their receipt is October 23, 2006. Rebuttal comments in response to material submitted during the forgoing period may be submitted during the subsequent 15-day period (to November 6, 2006).

A copy of the application and accompanying exhibits will be available for public inspection at each of the following locations: the New York U.S. Export Assistance Center, 20 Exchange Place, 40th Floor, New York, NY 10005; and, Office of the Executive Secretary, Foreign–Trade Zones Board, Room 1115, U.S. Department of Commerce, 1401 Constitution Avenue, NW, Washington, DC 20230.

Dated: August 10, 2006.

Andrew McGilvray,

Acting Executive Secretary.

[FR Doc. E6–13870 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

Foreign–Trade Zones Board

T–2–2006

Foreign–Trade Zone 52 - Suffolk County, New York, Temporary/Interim Manufacturing Authority, TKD Industries, Inc., (Cosmetic Kitting), Notice of Approval

On June 20, 2006, the Acting Executive Secretary of the Foreign–Trade Zones Board filed an application submitted by the Town of Islip (New York), operator of Foreign–Trade Zone (FTZ) 52, requesting temporary/interim manufacturing (T/IM) authority within FTZ 52, at the facility of TKD Industries, Inc., located in Ronkonkoma, New York.

The application was processed in accordance with T/IM procedures, as authorized by FTZ Board Order 1347, including notice in the **Federal Register** inviting public comment (71 FR 36517, 6/27/06). The FTZ staff examiner reviewed the application and determined that it meets the criteria for approval under T/IM procedures. Pursuant to the authority delegated to the FTZ Board Executive Secretary in Board Order 1347, the application was approved, effective July 31, 2006, until July 31, 2008, subject to the FTZ Act and the Board's regulations, including Section 400.28.

Dated: August 10, 2006.

Andrew McGilvray,

Acting Executive Secretary.

[FR Doc. E6–13872 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

Foreign–Trade Zones Board

Order No. 1471

Termination of Foreign–Trade Subzone 35A, (Ford Motor Company), Lansdale, Pennsylvania

Pursuant to the authority granted in the Foreign–Trade Zones Act of June 18, 1934, as amended (19 U.S.C. 81a–81u), and the Foreign–Trade Zones Board Regulations (15 CFR Part 400), the Foreign–Trade Zones Board has adopted the following order:

Whereas, on May 26, 1983 the Foreign–Trade Zones Board issued a grant of authority to the Philadelphia Regional Port Authority (the Port), authorizing the establishment of Foreign–Trade Subzone 35A at the Ford Motor Company facility, Lansdale, Pennsylvania (Board Order 210, 48 FR 24959, 6/3/83);

Whereas, the Port advised the Board on February 16, 2006 (FTZ Docket 6–2006), that zone procedures were no longer needed at the facility and requested voluntary termination of Subzone 35A;

Whereas, the request has been reviewed by the FTZ Staff and Customs and Border Protection officials, and approval has been recommended;

Now, therefore, the Foreign–Trade Zones Board terminates the subzone status of Subzone 35A, effective this date.

Signed at Washington, DC, this 3rd day of August 2006.

David M. Spooner,

Assistant Secretary of Commerce for Import Administration, Alternate Chairman, Foreign–Trade Zones Board.

Attest:

Andrew McGilvray,

Acting Executive Secretary.

[FR Doc. E6–13871 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

International Trade Administration

(A–570–851)

Certain Preserved Mushrooms from the People's Republic of China: Notice of Partial Rescission of Antidumping Duty Administrative Review

AGENCY: Import Administration, International Trade Administration, Department of Commerce.

EFFECTIVE DATE: August 22, 2006.

FOR FURTHER INFORMATION CONTACT: Brian Smith or Terre Keaton, AD/CVD Operations, Import Administration, International Trade Administration, U.S. Department of Commerce, 14th Street and Constitution Avenue, N.W., Washington, D.C. 20230; telephone: (202) 482–1766 or (202) 482–1280, respectively.

SUPPLEMENTARY INFORMATION:

Background

On February 1, 2006, the Department of Commerce ("the Department") published in the **Federal Register** a notice of "Opportunity to Request Administrative Review" of the antidumping duty order on certain preserved mushrooms from the People's Republic of China ("PRC") covering the period February 1, 2005, through January 31, 2006. *See Antidumping or Countervailing Duty Order, Finding, or Suspended Investigation; Opportunity to Request Administrative Review*, 71 FR 5239 (February 1, 2006). On February 27, 2006, Raoping CXF Foods ("Raoping CXF") requested an administrative review of its sales. On February 28, 2006, the petitioner[1] requested an administrative review of the antidumping duty order for, among others, Blue Field (Sichuan) Food Industrial Co., Ltd. ("Blue Field"), Raoping Yucun Canned Foods Factory ("Raoping Yucun"), and Shandong Jiufa Edible Fungus Co., Ltd. ("Jiufa").[2] On April 5, 2006, the Department published a notice of initiation of an administrative review of the antidumping duty order on certain preserved mushrooms from the PRC with respect to these companies. *See Initiation of Antidumping and Countervailing Duty Administrative Reviews and Deferral of Administrative Reviews*, 71 FR 17077, 17079 (April 5, 2006) ("Initiation Notice").

On April 26, 2006, Raoping CXF withdrew its request for review. In addition, in response to the Department's April 6, 2006, quantity and value questionnaire, Blue Field, Jiufa, and Raoping Yucun each stated that it had no exports, sales or entries of subject merchandise to the United States during the period of review ("POR").[3]

On July 12, 2006, the Department placed on the record a list of manufacturers/exporters of the subject merchandise for which the Department initiated administrative reviews, and for which U.S. Customs and Border Protection ("CBP") suspended liquidation of subject entries during the POR. *See* the July 12, 2006, memorandum from Brian Smith to the file entitled, "2005–2006 Administrative Review of Certain Preserved Mushrooms from the PRC: CBP List of Exporters" ("July 12, 2006, Memorandum").

On August 2, 2006, the Department stated that the information contained in the July 12, 2006, Memorandum corroborated Blue Field's, Jiufa's, and Raoping Yucun's no–shipment claims for the POR, and that it intended to rescind the administrative review with respect to these companies. *See* the August 2, 2006, memorandum from Brian Smith to the file entitled, "Intent to Rescind in Part the Antidumping Duty Administrative Review on Certain Preserved Mushrooms from the PRC" ("August 2, 2006, Memorandum"). The Department also provided parties in this review until August 9, 2006, to submit comments on the August 2, 2006, Memorandum. On August 9, 2006, Jiufa stated that it did not oppose the Department's intention of rescinding this review with respect to Jiufa. No other parties submitted comments on the August 2, 2006, Memorandum.

Partial Rescission of Review

Section 351.213(d)(1) of the Department's regulations stipulates that the Secretary will rescind an administrative review, in whole or in part, if a party that requested a review withdraws the request within 90 days of the date of publication of notice of initiation of the requested review, unless the Secretary decides that it is reasonable to extend this time limit. In this case, Raoping CXF withdrew its request for review before the 90-day deadline. Because Raoping CXF was the only party to request the administrative review of itself, we are rescinding, in part, this review of the antidumping duty order on certain preserved mushrooms from the PRC with respect to Raoping CXF.

Section 351.213(d)(3) of the Department's regulations states that the Secretary may rescind an administrative review, in whole or in part, with respect to a particular exporter or producer, if the Secretary concludes that, during the period covered by the review, there were no entries, exports, or sales of the subject merchandise. Therefore, we are also rescinding this review with respect to Blue Field, Jiufa, and Raoping Yucun because the record evidence indicates that these companies did not export subject merchandise to the United States during the POR.

This review will continue with respect to the other companies listed in the *Initiation Notice*.

Assessment

The Department will instruct CBP to assess antidumping duties on all appropriate entries. Antidumping duties for the rescinded companies, where applicable, shall be assessed at a rate equal to the cash deposit of estimated antidumping duties required at the time of entry, or withdrawal from warehouse, for consumption, in accordance with 19 CFR 351.212(c)(1)(i). The Department will issue appropriate assessment instructions directly to CBP within 15 days of publication of this notice.

This notice is published in accordance with sections 751 and 777(i)(1) of the Tariff Act of 1930, as amended, and 19 CFR 351.213(d)(4).

Dated: August 17, 2006.

Gary Taverman,

Acting Deputy Assistant Secretary for Import Administration.

[FR Doc. E6–13876 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–DS–S

[1] The petitioner is the Coalition for Fair Preserved Mushroom Trade which includes the following companies: L.K. Bowman, Inc., Monterey Mushrooms, Inc., Mushroom Canning Company, and Sunny Dell Foods, Inc.

[2] The petitioner also requested a review for the following companies: China National Cereals, Oils & Foodstuffs Import & Export Corporation, China Processed Food Import & Export Company, COFCO (Zhangzhou) Food Industrial Co., Ltd., Gerber Food (Yunnan) Co., Ltd., Green Fresh Foods (Zhangzhou) Co., Ltd., Guangxi Eastwing Trading Co., Ltd., Guangxi Hengxian Pro-Light Foods, Inc., Guangxi Yulin Oriental Food Co., Ltd., Primera Harvest (Xiangfan) Co., Ltd., and Xiamen Jiahua Import & Export Trading Co., Ltd.

[3] *See* Blue Field's April 27, 2006, letter at page 1; Raoping Yucun's April 26, 2006, letter at page 1; and Jiufa's April 18, 2006, letter at page 1.

DEPARTMENT OF COMMERCE

International Trade Administration

A–423–808

Stainless Steel Plate in Coils from Belgium: Notice of Rescission of Antidumping Duty Administrative Review

AGENCY: Import Administration, International Trade Administration, U.S. Department of Commerce.

SUMMARY: On July 3, 2006, in response to a timely request from Ugine & ALZ Belgium (respondent), the Department of Commerce (the Department) initiated an administrative review of the antidumping duty order on stainless steel plate in coils (SSPC) from Belgium. *See Initiation of Antidumping and Countervailing Duty Administrative Reviews*, 71 FR 37892 (July 3, 2006) (*Initiation Notice*). This administrative review covered the period May 1, 2005 through April 30, 2006. We are now rescinding this review as a result of respondent's withdrawal of its request for an administrative review of this order.

EFFECTIVE DATE: August 22, 2006.

FOR FURTHER INFORMATION CONTACT: Toni Page or Elfi Blum, AD/CVD Operations, Office 6, Import Administration, International Trade Administration, U.S. Department of Commerce, 14th Street and Constitution Avenue, NW, Room 7866, Washington, DC 20230; telephone: (202) 482–1398 and (202) 482–0197, respectively.

SUPPLEMENTARY INFORMATION:

Background

On May 1, 2006, the Department published a notice of "Opportunity to Request Administrative Review" of the antidumping duty order for the period of May 1, 2005 through April 30, 2006. *See Antidumping or Countervailing Duty Order, Finding, or Suspended Investigation: Opportunity to Request Administrative Review*, 71 FR 25565 (May 1, 2006). On May 31, 2006, respondent requested a review of the antidumping duty order on SSPC from Belgium. Respondent was the only party to request an administrative review. In response to this request, on July 3, 2006, the Department initiated an antidumping duty administrative review on SSPC from Belgium. *See Initiation Notice.*

On August 8, 2006, pursuant to section 351.213(d)(1) of the Department's regulations, respondent withdrew its request for an administrative review of the antidumping duty order on SSPC from Belgium. No other party requested an administrative review of this antidumping duty order.

Rescission of the Administrative Review

Pursuant to section 351.213(d)(1) of the Department's regulations, the Secretary will rescind an administrative review, in whole or in part, if a party that requested the review withdraws the request within 90 days of the date of publication of notice of initiation of the requested review. The initiation notice for this review was published on July 3, 2006. We received respondent's withdrawal request on August 8, 2006, within 90 days after publication of the initiation notice. Since respondent withdrew its request for review of the antidumping duty order in a timely manner, and since it was the only party that requested a review, the Department is rescinding this administrative review.

Assessment

The Department will instruct U.S. Customs and Border Protection (CBP) to assess antidumping duties on all appropriate entries. For the company for which this review is rescinded, antidumping duties shall be assessed at rates equal to the cash deposit of estimated antidumping duties required at the time of entry, or withdrawal from warehouse, for consumption, in accordance with 19 CFR 351.212(c)(1)(I). The Department will issue appropriate assessment instructions to CBP within 15 days of publication of this notice.

Notification to Importers

This notice serves as a final reminder to importers of their responsibility under 19 CFR 351.402(f) to file a certificate regarding the reimbursement of antidumping duties prior to liquidation of the relevant entries during this review period. Failure to comply with this requirement could result in the Secretary's presumption that reimbursement of antidumping duties occurred and subsequent assessment of double antidumping duties.

This notice also serves as a reminder to parties subject to administrative protective order (APO) of their responsibility concerning the disposition of proprietary information disclosed under APO in accordance with section 351.305(a)(3) of the Department's regulation. Timely written notification of the return or destruction of APO materials or conversion to judicial protective order is hereby requested. Failure to comply with the regulations and terms of an APO is a sanctionable violation.

This notice is issued and published in accordance with section 777(i) of the Act and section 351.213(d)(4) of the Department's regulations.

Dated: August 16, 2006.

Gary Taverman,

Acting Deputy Assistant Secretaryfor Import Administration.

[FR Doc. E6–13868 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

International Trade Administration

The Manufacturing Council: Recruitment Notice for the Manufacturing Council

AGENCY: International Trade Administration, U.S. Department of Commerce.

ACTION: Notice.

SUMMARY: Notice is hereby given that the Department of Commerce is individuals to help advise and assist the Department on manufacturing policies by applying to be members of the Manufacturing Council. The mission of the Manufacturing Council, a Secretarial Board at the Department of Commerce, is to ensure regular communication between Government and the manufacturing sector. The Council advises the Secretary of Commerce on government policies and programs that affect U.S. manufacturing and provides a forum for proposing solutions to industry-related problems. For information about the Council, please visit the Manufacturing Council Web site at: *http://www.manufacturing.gov/council.htm.*

The Department of Commerce is seeking applicants who are active manufacturing executives (Chairman, President or CEO level) who are leaders within their local manufacturing communities and industries. To the extent possible, the Department would like to ensure a balanced membership of U.S. manufacturing industry sectors, geographic locations, and businesses sizes. Potential candidates must be U.S. citizens.

DATES: September 1, 2006 through September 15, 2006.

Interested Applicants: Interested application should send a resume and cover letter to: The Manufacturing Council Executive Secretariat, U.S. Department of Commerce, 1401 Constitution Avenue, NW., Room 4043, Washington, DC 20230.

Dated: August 15, 2006.

Sam Giller,

The Manufacturing Council.

[FR Doc. E6–13797 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–DR–P

DEPARTMENT OF COMMERCE

International Trade Administration.

Notice of an Opportunity To Apply for Membership on the U.S. Travel and Tourism Advisory Board

SUMMARY: The Department of Commerce is currently seeking applications for membership on the U.S. Travel and Tourism Advisory Board (Board). The purpose of the Board is to advise the Secretary of Commerce on matters relating to the travel and tourism industry.

SUPPLEMENTARY INFORMATION: The Office of Advisory Committees is accepting applications for Board members. Members shall serve until the Board's charter expires on September 21, 2007. Members will be selected based on our judgement of the candidates' proven experience in promoting, developing, and implementing advertising and marketing programs for travel-related or tourism-related industries; or the candidates' proven abilities to manage tourism-related or other service-related organizations. Each Board member shall serve as the representative of a tourism-related "U.S. entity." However, for the purposes of eligibility, a U.S. entity shall be defined as a firm incorporated in the United States (or an unincorporated firm with its principal place of business in the United States) that is controlled by U.S. citizens or by another U.S. entity. An entity is not a U.S. entity if 50 percent plus one share of its stock (if a corporation, or a similar ownership interest of an unincorporated entity) is controlled, directly or indirectly, by non-U.S. citizens or non-U.S. entities. Priority may be given to chief executive officers or a similarly-situated officer of a tourism-related entity. Priority may also be given to individuals with international tourism marketing experience.

Officers or employees of state and regional tourism marketing entities are also eligible for consideration for Board membership. A state and regional tourism marketing entity, may include, but is not limited to, state government tourism office, state and/or local government supported tourism marketing entities, or multi-state tourism marketing entities. Again, priority may be given to chief executive officers or a similarly-situated officer.

Secondary selection criteria will ensure that the board has a balanced representation of the tourism-related industry in terms of point of view, demographics, geography and company size. The Board members will be selected on the basis of their experience and knowledge of the tourism industry. Members will serve at the discretion of the Secretary of Commerce.

Board members shall serve in a representative capacity presenting the views and interests of the particular tourism-related sector in which they operate. Board members are not special government employees, and will receive no compensation for their participation in Board activities. Members participating in Board meetings and events will be responsible for their travel, living and other personal expenses. Meetings will be held regularly, usually in Washington, DC. The first Board meeting has not yet been determined.

To be considered for membership, please provide the following: 1. Name and title of the individual requesting consideration. 2. A letter of recommendation containing a brief statement of why the applicant should be considered for membership on the Board. This recommendation should also include the applicant's tourism-related experience. 3. The applicant's personal resume. 4. An affirmative statement that the applicant is not required to register as a foreign agent under the Foreign Agents Registration Act of 1938, as amended. 5. If a state or regional tourism marketing entity, the functions and responsibilities of the entity. 6. The company's size and ownership, product or service line and major markets in which the company operates.

ADDRESSES: Please submit application information to J. Marc Chittum, Office of Advisory Committees, U.S. Travel and Tourism Advisory Board Executive Secretariat, U.S. Department of Commerce, Room 4043, 1401 Constitution Avenue, NW., Washington, DC 20230.

Deadline: All applications must be received by the Office of Advisory Committees by close of business on September 22, 2006.

FOR FURTHER INFORMATION CONTACT: J. Marc Chittum, (202) 482–4501.

Dated: August 16, 2006.

J. Marc Chittum,

Executive Secretary, U.S. Travel & Tourism Advisory Board.

[FR Doc. E6–13855 Filed 8–21–06; 8:45 am]

BILLING CODE 3510–DR–P

DEPARTMENT OF ENERGY

Office of Energy Efficiency and Renewable Energy

[Docket No. EERE–BT–2006–WAV–0139]

Energy Conservation Program for Consumer Products: Publication of the Petition for Waiver and Granting of the Application for Interim Waiver of Whirlpool Corporation From the DOE Residential Automatic and Semi-Automatic Clothes Washer Test Procedures

AGENCY: Office of Energy Efficiency and Renewable Energy, Department of Energy.

ACTION: Notice of Petition for Waiver, granting of application for interim waiver, and request for comments.

SUMMARY: Today's notice publishes a Petition for Waiver from Whirlpool Corporation. This Petition for Waiver (hereafter "Whirlpool Petition") requests the Department to modify the clothes washer test procedure for the Whirlpool High Impeller line of clothes washers with basket volumes greater than 3.8 cubic feet and less than 3.9 cubic feet. The Department of Energy (hereafter "Department" or "DOE") is soliciting comments, data and information with respect to the Whirlpool Petition.

Today's notice also grants an Interim Waiver to Whirlpool from the existing DOE automatic and semi-automatic clothes washer test procedure for the company's High Impeller line of clothes washers with basket volumes greater than 3.8 cubic feet and less than 3.9 cubic feet.

DATES: The Department will accept comments, data and information regarding this Petition for Waiver until, but no later September 21, 2006.

ADDRESSES: Please submit comments, identified by docket number EERE–BT–2006–WAV–0139, by any of the following methods:

- *Mail:* Ms. Brenda Edwards-Jones, U.S. Department of Energy, Building Technologies Program, Mailstop EE–2J, Forrestal Building, 1000 Independence Avenue, SW., Washington, DC 20585–0121. Telephone: (202) 586–2945. Please submit one signed original paper copy.
- *Hand Delivery/Courier:* Ms. Brenda Edwards-Jones, U.S. Department of Energy, Building Technologies Program, Room 1J–018, Forrestal Building, 1000 Independence Avenue, SW., Washington, DC 20585.
- *E-mail: bryan.berringer@ee.doe.gov.* Include either the docket number EERE–

BT–2006–WAV–0139 and/or "Whirlpool Petition" in the subject line of the message.

• *Federal eRulemaking Portal: http://www.regulations.gov.* Follow the instructions for submitting comments.

Instructions: All submissions received must include the agency name and docket number for this proceeding. Submit electronic comments in WordPerfect, Microsoft Word, PDF, or text (ASCII) file format and avoid the use of special characters or any form of encryption. Wherever possible, include the electronic signature of the author. Absent an electronic signature, comments submitted electronically must be followed and authenticated by submitting the signed original paper document. The Department does not accept telefacsimiles (faxes). Any person submitting written comments must also send a copy of such comments to the petitioner. (10 Code of Federal Regulations (CFR) 430.27(d)) The name and address of the petitioner of today's notice is: Heather O. West, Director, Government Relations, Whirlpool Corporation, 1200 G Street NW., Suite 828, Washington, DC 20005–3820.

According to 10 CFR 1004.11, any person submitting information that he or she believes to be confidential and exempt by law from public disclosure should submit two copies: one copy of the document including all the information believed to be confidential, and one copy of the document with the information believed to be confidential deleted. The Department will make its own determination about the confidential status of the information and treat it according to its determination.

Docket: For access to the docket to read the background documents relevant to this matter, go to the U.S. Department of Energy, Forrestal Building, Room 1J–018 (Resource Room of the Building Technologies Program), 1000 Independence Avenue, SW., Washington, DC, (202) 586–2945, between 9 a.m. and 4 p.m., Monday through Friday, except Federal holidays. Available documents include the following items: this notice; public comments received; the Petition for Waiver and Application for Interim Waiver; prior Department rulemakings regarding residential clothes washer; prior Petitions for Waiver; and prior Decisions and Orders. Please call Ms. Brenda Edwards-Jones at the above telephone number for additional information regarding visiting the Resource Room. Please note: The Department's Freedom of Information Reading Room (formerly Room 1E–190 at the Forrestal Building) is no longer housing rulemaking materials.

FOR FURTHER INFORMATION CONTACT: Bryan Berringer, U.S. Department of Energy, Office of Energy Efficiency and Renewable Energy, Building Technologies Program, Mail Stop EE–2J, Forrestal Building, 1000 Independence Avenue, SW., Washington, DC 20585–0121, (202) 586–0371; e-mail: *bryan.berringer@ee.doe.gov;* or Francine B. Pinto, U.S. Department of Energy, Office of General Counsel, Mail Stop GC–72, Forrestal Building, 1000 Independence Avenue, SW., Washington, DC 20585–0121, (202) 586–9507; e-mail: *Francine.Pinto@hq.doe.gov.*

SUPPLEMENTARY INFORMATION:

I. Background and Authority

Title III of the Energy Policy and Conservation Act (EPCA) sets forth a variety of provisions concerning energy efficiency. Part B of Title III (42 U.S.C. 6291–6309) provides for the "Energy Conservation Program for Consumer Products other than Automobiles." Today's notice involves residential products under Part B that provide definitions, test procedures, labeling provisions, energy conservation standards, and the authority to require information and reports from manufacturers. With respect to test procedures, Part B generally authorizes the Secretary of Energy to prescribe test procedures that are reasonably designed to produce results which reflect energy efficiency, energy use and estimated operating costs, and that are not unduly burdensome to conduct. (42 U.S.C. 6293(b)(3))

The test procedures for residential products appear at 10 CFR Part 430, Subpart B, Appendix J1. EPCA provides that the Secretary of Energy may amend test procedures for consumer products if the Secretary determines that amended test procedures would more accurately reflect energy efficiency, energy use and estimated operating costs, and are not unduly burdensome to conduct. (42 U.S.C. 6293(b)(3))

The Department's regulations contain provisions allowing a person to seek a waiver from the test procedure requirements for covered consumer products. These provisions are set forth in 10 CFR 430.27.

The waiver provisions allow the Assistant Secretary for Energy Efficiency and Renewable Energy (hereafter "Assistant Secretary") to temporarily waive test procedures for a particular basic model when a petitioner shows that the basic model contains one or more design characteristics that prevent testing according to the prescribed test procedures, or when the prescribed test procedures may evaluate the basic model in a manner so unrepresentative of its true energy consumption as to provide materially inaccurate comparative data. (10 CFR 430.27 (a)(1)) The Assistant Secretary may grant the waiver subject to conditions, including adherence to alternate test procedures. Petitioners are to include in their petition any alternate test procedures known to evaluate the basic model in a manner representative of its energy consumption. (10 CFR 430.27(b)(1)(iii)) Waivers generally remain in effect until final test procedure amendments become effective, thereby resolving the problem that is the subject of the waiver.

The waiver process also allows the Assistant Secretary to grant an Interim Waiver from test procedure requirements to manufacturers that have petitioned the Department for a waiver of such prescribed test procedures. (10 CFR 430.27(a)(2)) An Interim Waiver remains in effect for a period of 180 days or until the Department issues its determination on the Petition for Waiver, whichever is sooner, and may be extended for an additional 180 days, if necessary. (10 CFR 430.27(h))

II. Application for Interim Waiver and Petition for Waiver

On November 21, 2005, Whirlpool filed an Application for Interim Waiver and a Petition for Waiver from the Department of Energy's test procedures applicable to its residential automatic and semi-automatic clothes washers. In particular, Whirlpool requested a waiver to test its High Impeller clothes washers on the basis of the residential test procedures contained in 10 CFR Part 430, Subpart B, Appendix J1, with the following values appended to Table 5.1:

Container volume		Minimum load		Maximum load		Average load	
(ft3)	(liter)	(lb)	(kg)	(lb)	(kg)	(lb)	(kg)
3.8–3.9	107.6–110.4	3.00	1.36	15.8	7.17	9.4	4.26

Whirlpool's petition seeks a waiver from the Department's test procedure because a test load is used within the procedure, and the mass of this test load is based on the basket volume of the test specimen, which is currently not defined for the size units cited in their waiver application. At the time this test procedure was written, the relation between basket volume and test load mass was defined for basket volumes between 0 and 3.8 cubic feet. Current market trends have lead Whirlpool to design a series of clothes washers that contain a basket volume greater than 3.8 cubic feet, but less than 3.9 cubic feet.

Table 5.1 of Appendix J1 defines the test load sizes used during the procedure as linear functions of the basket volume. Whirlpool has submitted a proposed modification to this table which extends the table one incremental unit to define a load for clothes washers with a basket volume between 3.8 cubic feet and 3.9 cubic feet. The minimum, maximum, and average load factors proposed by Whirlpool in this request are merely extrapolations of the linear relationships between the load factors and the basket volume, by one incremental unit.

The Department agrees that the current test procedure does not define a load level for clothes washers with a basket volume greater than 3.8 cubic feet. The Department further agrees that since the load levels are currently defined in a linear manner for basket volumes between 0.8 cubic feet and 3.8 cubic feet that extrapolating these linear functions to a basket volume of 3.9 cubic feet is fair and logical. Thus, it appears likely that the Petition for Waiver will be granted.

Based on the statements above, the Department of Energy is granting an Interim Waiver to Whirlpool for its High Impeller line of clothes washers, pursuant to 10 CFR of § 430.27(g).

Pursuant to 10 CFR Part 430.27(b)(1)(iv), the Department is hereby publishing the "Petition for Waiver." The Petition contains no confidential company information. Whirlpool will send a copy of the Petition for Waiver and a copy of the Application for Interim Waiver to all known manufacturers of domestically marketed units of the same product type.

III. Alternate Test Procedure

Manufacturers face restrictions with respect to making representations about the energy consumption and energy consumption costs of products covered by EPCA. (42 U.S.C. 6293(c)) Consistent representations are important for manufacturers to make claims about the energy efficiency of their products. For example, they are necessary to determine compliance with state and local energy codes and regulatory requirements, and can provide valuable consumer purchasing information. To provide a test procedure from which manufacturers can make valid representations, the Department is considering setting an alternate test procedure for Whirlpool in the subsequent Decision and Order based on the appended values to Table 5.1 of Appendix J1. Furthermore, if DOE specifies an alternate test procedure for Whirlpool, DOE may consider applying the alternate test procedure to similar waivers for residential clothes washers.

IV. Summary and Request for Comments

Today's notice announces a Whirlpool Petition for Waiver and grants Whirlpool an Interim Waiver from the test procedures applicable to Whirlpool's High Impeller line of clothes washers with basket volumes greater than 3.8 cubic feet and less than 3.9 cubic feet. The Department is publishing the Whirlpool Petition for Waiver in its entirety. The Petition contains no confidential information. Furthermore, today's notice includes an alternate test procedure that the Department is considering including in the subsequent Decision and Order. This alternate test procedure includes a proposed modification to Table 5.1 of Appendix J1 adding one incremental unit to define a load for clothes washers with a basket volume between 3.8 cubic feet and 3.9 cubic feet.

- The Department is interested in receiving comments, data and information on all aspects of this notice. The Department is particularly interested in receiving comments and views of interested parties concerning the proposed alternate test procedure under consideration for the upcoming Decision and Order for the Whirlpool Petition.

Issued in Washington, DC, on August 14, 2006.

Alexander A. Karsner,

Assistant Secretary, Energy Efficiency and Renewable Energy.

Whirlpool

Administrative Center—2000 M63—Mail Drop 3005—Benton Harbor, MI 49022

November 21, 2005.

Douglas Faulker,
Acting Assistant Secretary,
Energy Efficiency and Renewable Energy,
U.S. Department of Energy, EE–2J,
1000 Independence Ave., SW,
Washington, DC 20585–0121.

RE: Waiver of Test Procedure for 10CFR430, Subpart B, Appendix J1.

Dear Assistant Secretary Faulkner:

Whirlpool Corporation requests a waiver of the test procedure for a basket volume greater than 3.8 cubic feet. Currently, the test procedure provides allowable load levels for basket volumes less than 3.8 cubic feet. Whirlpool (and most likely other manufacturers as well) is designing clothes washers with larger basket volumes. Whirlpool Corporation requests that, for the models specified below, it be allowed to use the corresponding load levels shown in the table below. These load levels were obtained by extrapolating from the existing volumes and load levels in Table 5.1 of Appendix J1.

Model No.	Description	Basket volume (=>)	Basket volume (<)	AVG load (lbs)	Min load (lbs)	Max load (lbs)
27082600 PC 580 KEN D = Test Sell Model.	High Impeller White	3.8	3.9	9.4	3.0	15.8
27086600 PC 580 KEN D	High Impeller Graphite	3.8	3.9	9.4	3.0	15.8
27087600 PC 580 KEN D	High Impeller Pacific Blue	3.8	3.9	9.4	3.0	15.8

Please contact me at 202–434–8990 with your opinion on this waiver request. Thank you for your assistance.

Sincerely,

CC: Bryan Berringer—DOE
Mike McCabe—DOE
Ron Lewis—DOE
David Rodgers—DOE

Heather O. West, Director, Government Relations, 1200 G Street, NW., Suite 828, Washington, DC 20005–3820, Phone: (202) 434–8990, Fax: (202) 434–8991.

[FR Doc. E6–13853 Filed 8–21–06; 8:45 am]
BILLING CODE 6450–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. RP06–470–000]

CenterPoint Energy-Mississippi River Transmission Corporation; Notice of Proposed Changes in FERC Gas Tariff

August 15, 2006.

Take notice that on August 10, 2006, CenterPoint Energy-Mississippi River Transmission Corporation (MRT) tendered for filing as part of its FERC Gas Tariff, Third Revised Volume No. 1, the following tariff sheets, to become effective October 1, 2006:

Fifty-Seventh Revised Sheet No. 5
Fifty-Seventh Revised Sheet No. 6
Fifth-Fourth Revised Sheet No. 7

MRT states that the purpose of the filing is to revise the Annual Charge Adjustment rate effective October 1, 2006.

Any person desiring to intervene or to protest this filing must file in accordance with Rules 211 and 214 of the Commission's Rules of Practice and Procedure (18 CFR 385.211 and 385.214). Protests will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Any person wishing to become a party must file a notice of intervention or motion to intervene, as appropriate. Such notices, motions, or protests must be filed in accordance with the provisions of Section 154.210 of the Commission's regulations (18 CFR 154.210). Anyone filing an intervention or protest must serve a copy of that document on the Applicant. Anyone filing an intervention or protest on or before the intervention or protest date need not serve motions to intervene or protests on persons other than the Applicant.

The Commission encourages electronic submission of protests and interventions in lieu of paper using the "eFiling" link at *http://www.ferc.gov*. Persons unable to file electronically should submit an original and 14 copies of the protest or intervention to the Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426.

This filing is accessible on-line at *http://www.ferc.gov*, using the "eLibrary" link and is available for review in the Commission's Public Reference Room in Washington, DC. There is an "eSubscription" link on the Web site that enables subscribers to receive e-mail notification when a document is added to a subscribed docket(s). For assistance with any FERC Online service, please e-mail *FERCOnlineSupport@ferc.gov*, or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659. .

Magalie R. Salas,

Secretary.

[FR Doc. E6–13819 Filed 8–21–06; 8:45 am]
BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. RP05–426–003]

Destin Pipeline Company, L.L.C.; Notice of Tariff Filing

August 16, 2006.

Take notice that on August 14, 2006, Destin Pipeline Company, L.L.C. (Destin) tendered for filing as part of its FERC Gas Tariff, Original Volume No. 1, Third Revised Sheet No. 136.01, to be effective September 1, 2006.

Destin states that purpose of its filing is to comply with the Commission's Letter Order issued June 2, 2006, in Docket No. RP05–426–002.

Destin states that copies of this filing are being served on all parties to the proceedings in Docket No. RP05–426–000, affected shippers, and applicable state regulatory agencies.

Any person desiring to protest this filing must file in accordance with Rule 211 of the Commission's Rules of Practice and Procedure (18 CFR 385.211). Protests to this filing will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Such protests must be filed in accordance with the provisions of Section 154.210 of the Commission's regulations (18 CFR 154.210). Anyone filing a protest must serve a copy of that document on all the parties to the proceeding.

The Commission encourages electronic submission of protests in lieu of paper using the "eFiling" link at *http://www.ferc.gov*. Persons unable to file electronically should submit an original and 14 copies of the protest to the Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426.

This filing is accessible on-line at *http://www.ferc.gov*, using the "eLibrary" link and is available for review in the Commission's Public Reference Room in Washington, DC. There is an "eSubscription" link on the Web site that enables subscribers to receive e-mail notification when a document is added to a subscribed docket(s). For assistance with any FERC Online service, please e-mail *FERCOnlineSupport@ferc.gov*, or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659.

Magalie R. Salas,

Secretary.

[FR Doc. E6–13887 Filed 8–21–06; 8:45 am]
BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. RP06–475–000]

Dominion South Pipeline Company, LP; Notice of Report of Overrun Charge/Penalty Revenue Distribution

August 16, 2006.

Take notice that on August 11, 2006, Dominion South Pipeline Company, LP (Dominion South) filed its annual report of overrun charge/penalty revenue distributions.

Any person desiring to intervene or to protest this filing must file in accordance with Rules 211 and 214 of the Commission's Rules of Practice and Procedure (18 CFR 385.211 and 385.214). Protests will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Any person wishing to become a party must file a notice of intervention or motion to intervene, as appropriate. Such notices, motions, or protests must be filed in on or before the date as indicated below. Anyone filing an intervention or protest must serve a copy of that document on the Applicant. Anyone filing an intervention or protest on or before the intervention or protest date need not serve motions to intervene or protests on persons other than the Applicant.

The Commission encourages electronic submission of protests and interventions in lieu of paper using the "eFiling" link at *http://www.ferc.gov*. Persons unable to file electronically should submit an original and 14 copies of the protest or intervention to the Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426.

This filing is accessible on-line at *http://www.ferc.gov*, using the "eLibrary" link and is available for review in the Commission's Public Reference Room in Washington, DC. There is an "eSubscription" link on the Web site that enables subscribers to receive E-mail notification when a document is added to a subscribed docket(s). For assistance with any FERC Online service, please E-mail *FERCOnlineSupport@ferc.gov*, or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659.

Intervention and Protest Date: 5 p.m. Eastern Time August 23, 2006.

Magalie R. Salas,

Secretary.

[FR Doc. E6–13889 Filed 8–21–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. RP05–164–007]

Equitrans, L.P.; Notice of Compliance Filing

August 15, 2006.

Take notice that on August 3, 2006, Equitrans, L.P. (Equitrans) tendered for filing as part of its FERC Gas Tariff, Original Volume No. 1, 2nd First Revised Sheet No. 504, with an effective date of June 1, 2006.

Equitrans states that the filing is being made to correct the filing that it made on June 30, 2006.

Any person desiring to protest this filing must file in accordance with Rule 211 of the Commission's Rules of Practice and Procedure (18 CFR 385.211). Protests to this filing will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Such protests must be filed in accordance with the provisions of Section 154.210 of the Commission's regulations (18 CFR 154.210). Anyone filing a protest must serve a copy of that document on all the parties to the proceeding.

The Commission encourages electronic submission of protests in lieu of paper using the "eFiling" link at *http://www.ferc.gov*. Persons unable to file electronically should submit an original and 14 copies of the protest to the Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426.

This filing is accessible on-line at *http://www.ferc.gov*, using the "eLibrary" link and is available for review in the Commission's Public Reference Room in Washington, DC. There is an "eSubscription" link on the Web site that enables subscribers to receive e-mail notification when a document is added to a subscribed docket(s). For assistance with any FERC Online service, please e-mail *FERCOnlineSupport@ferc.gov*, or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659.

Magalie R. Salas,

Secretary.

[FR Doc. E6–13820 Filed 8–21–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. RP00–157–016]

Kern River Gas Transmission Company; Notice of Negotiated Rate

August 16, 2006.

Take notice that on August 14, 2006, Kern River Gas Transmission Company (Kern River) tendered for filing as part of its FERC Gas Tariff, Second Revised Volume No. 1, the following tariff sheets, to be effective August 17, 2006:

Tenth Revised Sheet No. 495
Fifth Revised Sheet No. 496

Kern River states that the purpose of this filing is to reflect an amendment to the negotiated rate transaction between Kern River and Eagle Mountain City currently referenced in Kern River's tariff, in accordance with the Commission's Policy Statement on alternatives to Traditional Cost of Service Ratemaking for Natural Gas Pipelines.

Kern River states that it has served a copy of this filing upon its customers and interested state regulatory commissions.

Any person desiring to intervene or to protest this filing must file in accordance with Rules 211 and 214 of the Commission's Rules of Practice and Procedure (18 CFR 385.211 and 385.214). Protests will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Any person wishing to become a party must file a notice of intervention or motion to intervene, as appropriate. Such notices, motions, or protests must be filed in accordance with the provisions of Section 154.210 of the Commission's regulations (18 CFR 154.210). Anyone filing an intervention or protest must serve a copy of that document on the Applicant. Anyone filing an intervention or protest on or before the intervention or protest date need not serve motions to intervene or protests on persons other than the Applicant.

The Commission encourages electronic submission of protests and interventions in lieu of paper using the "eFiling" link at *http://www.ferc.gov*. Persons unable to file electronically should submit an original and 14 copies of the protest or intervention to the Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426.

This filing is accessible on-line at *http://www.ferc.gov*, using the "eLibrary" link and is available for review in the Commission's Public Reference Room in Washington, DC. There is an "eSubscription" link on the Web site that enables subscribers to receive e-mail notification when a document is added to a subscribed docket(s). For assistance with any FERC Online service, please e-mail *FERCOnlineSupport@ferc.gov*, or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659.

Magalie R. Salas,

Secretary.

[FR Doc. E6–13886 Filed 8–21–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. RP06–469–000]

Northwest Pipeline Corporation; Notice of Proposed Changes in FERC Gas Tariff

August 15, 2006.

Take notice that on August 9, 2006, Northwest Pipeline Corporation (Northwest) tendered for filing as part of its FERC Gas Tariff, Third Revised Volume No. 1, the following tariff sheets, to become effective September 9, 2006.

Sixth Revised Sheet No. 274
Second Revised Sheet No. 274–A
Eighth Revised Sheet No. 275

First Revised Sheet No. 275–A
Fifth Revised Sheet No. 277
Third Revised Sheet No. 278–A
Fourth Revised Sheet No. 278–C

Northwest states that the purpose of this filing is to revise its tariff to establish a right of first refusal exemption for interim contracts covering capacity already committed under pre-arranged future transactions.

Any person desiring to intervene or to protest this filing must file in accordance with Rules 211 and 214 of the Commission's Rules of Practice and Procedure (18 CFR 385.211 and 385.214). Protests will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Any person wishing to become a party must file a notice of intervention or motion to intervene, as appropriate. Such notices, motions, or protests must be filed in accordance with the provisions of Section 154.210 of the Commission's regulations (18 CFR 154.210). Anyone filing an intervention or protest must serve a copy of that document on the Applicant. Anyone filing an intervention or protest on or before the intervention or protest date need not serve motions to intervene or protests on persons other than the Applicant.

The Commission encourages electronic submission of protests and interventions in lieu of paper using the "eFiling" link at *http://www.ferc.gov*. Persons unable to file electronically should submit an original and 14 copies of the protest or intervention to the Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426.

This filing is accessible on-line at *http://www.ferc.gov*, using the "eLibrary" link and is available for review in the Commission's Public Reference Room in Washington, DC. There is an "eSubscription" link on the Web site that enables subscribers to receive e-mail notification when a document is added to a subscribed docket(s). For assistance with any FERC Online service, please e-mail *FERCOnlineSupport@ferc.gov*, or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659.

Magalie R. Salas,

Secretary.

[FR Doc. E6–13821 Filed 8–21–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. RP06–477–000]

Questar Pipeline Company; Notice of Tariff Filing

August 16, 2006.

Take notice that on August 14, 2006, Questar Pipeline Company (Questar), tendered for filing as part of its FERC Gas Tariff, First Revised Volume No. 1, the following tariff sheets, to become effective September 13, 2006:

Sixth Revised Sheet No. 42.
Eighth Revised Sheet No. 46B.
Twelfth Revised Sheet No. 59.
Second Revised Sheet No. 59A .
Eleventh Revised Sheet No. 75.
Eleventh Revised Sheet No. 99A.

Questar states that it proposes to address three categories of miscellaneous cleanup items to its tariff regarding references to the North American Energy Standards Board (NAESB) standards: (1) Removal of NAESB "principles" (listed as x.1.x) or "contracts" standards (listed as 6.x.x) that are not required by the Commission's regulations to be referenced in the tariff; (2) correction of typographical errors and other inadvertent omissions and (3) miscellaneous corrections to make tariff language consistent with NAESB standards and correct formatting inconsistencies.

Questar states that copies of this filing were served upon Questar's customers, the Public Service Commission of Utah and the Public Service Commission of Wyoming.

Any person desiring to intervene or to protest this filing must file in accordance with Rules 211 and 214 of the Commission's Rules of Practice and Procedure (18 CFR 385.211 and 385.214). Protests will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Any person wishing to become a party must file a notice of intervention or motion to intervene, as appropriate. Such notices, motions, or protests must be filed in accordance with the provisions of Section 154.210 of the Commission's regulations (18 CFR 154.210). Anyone filing an intervention or protest must serve a copy of that document on the Applicant. Anyone filing an intervention or protest on or before the intervention or protest date need not serve motions to intervene or protests on persons other than the Applicant.

The Commission encourages electronic submission of protests and interventions in lieu of paper using the "eFiling" link at *http://www.ferc.gov*. Persons unable to file electronically should submit an original and 14 copies of the protest or intervention to the Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426.

This filing is accessible on-line at *http://www.ferc.gov*, using the "eLibrary" link and is available for review in the Commission's Public Reference Room in Washington, D.C. There is an "eSubscription" link on the Web site that enables subscribers to receive e-mail notification when a document is added to a subscribed docket(s). For assistance with any FERC Online service, please e-mail *FERCOnlineSupport@ferc.gov*, or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659.

Magalie R. Salas,

Secretary.

[FR Doc. E6–13885 Filed 8–21–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. RP06–473–000]

Trailblazer Pipeline Company; Notice of Revenue Crediting Report

August 16, 2006.

Take notice that on August 11, 2006, Trailblazer Pipeline Company (Trailblazer) tendered for filing its Penalty Revenue Report. Trailblazer states the purpose of this filing is to inform the Commission that Trailblazer collected no penalty revenues in the quarter ended June 30, 2006.

Any person desiring to intervene or to protest this filing must file in accordance with Rules 211 and 214 of the Commission's Rules of Practice and Procedure (18 CFR 385.211 and 385.214). Protests will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Any person wishing to become a party must file a notice of intervention or motion to intervene, as appropriate. Such notices, motions, or protests must be filed in accordance with the provisions of Section 154.210 of the Commission's regulations (18 CFR 154.210). Anyone filing an intervention or protest must serve a copy of that document on the Applicant. Anyone filing an intervention or protest on or

before the intervention or protest date need not serve motions to intervene or protests on persons other than the Applicant.

The Commission encourages electronic submission of protests and interventions in lieu of paper using the "eFiling" link at *http://www.ferc.gov.* Persons unable to file electronically should submit an original and 14 copies of the protest or intervention to the Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426.

This filing is accessible on-line at *http://www.ferc.gov*, using the "eLibrary" link and is available for review in the Commission's Public Reference Room in Washington, DC. There is an "eSubscription" link on the Web site that enables subscribers to receive e-mail notification when a document is added to a subscribed docket(s). For assistance with any FERC Online service, please e-mail *FERCOnlineSupport@ferc.gov*, or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659.

Intervention and Protest Date: 5 p.m. Eastern Time August 23, 2006.

Magalie R. Salas,

Secretary.

[FR Doc. E6–13888 Filed 8–21–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. CP04–400–001]

Golden Pass Pipeline L.P.; Notice of Availability of the Environmental Assessment for the Proposed Optimized Pipeline Project

August 15, 2006.

The staff of the Federal Energy Regulatory Commission (FERC or Commission) has prepared an Environmental Assessment (EA) on the natural gas pipeline facilities proposed for the Optimized Pipeline Project (OP Project) in Jefferson and Orange Counties, Texas, in the above-referenced docket. The OP Project is an amendment to the Golden Pass Liquefied Natural Gas (LNG) Terminal and Pipeline Project proposed in Docket Nos. CP04–386–000 and CP04–400–000 and approved in an order issued by the Commission on July 6, 2005 (Order). The OP Project amends only certain pipeline facilities approved in Docket No. CP04–400–000. The OP project includes the Optimized Design Variation and the Optimized Route Variation.

The EA was prepared to satisfy the requirements of the National Environmental Policy Act (NEPA). The staff concludes that approval of the proposed project with appropriate mitigating measures as recommended, would not constitute a major federal action significantly affecting the quality of the human environment. The EA also evaluates alternatives to the proposal.

The EA addresses the potential environmental effects of the construction and operation of the following amended natural gas pipeline facilities:

- The Optimized Design Variation would replace the two 36-inch-diameter pipelines (Mainline and Loop) approved in the Order with a single 42-inch-diameter pipeline from the pipeline origin at milepost (MP) 0.0 at the Golden Pass LNG Terminal to the American Electric Power Texoma Pipeline interconnection at MP 42.8; and
- The Optimized Route Variation would incorporate a route change between MP 14.1 and MP 34.9 that would reduce the pipeline length between these two points from 20.8 miles to 11.9 miles; and
- The relocation of the interconnections to Kinder Morgan (KM) Tejas Pipeline, KM Texas Pipeline, and Centana Gas Pipeline due to construction of the amended facilities.

The purpose of the proposed facilities would be the same as that authorized in the Order: to provide an additional source of firm, long-term, and competitively priced natural gas to the Texas intrastate and interstate natural gas markets.

The EA has been placed in the public files of the FERC. A limited number of copies of the EA are available for distribution and public inspection at: Federal Energy Regulatory Commission, Public Reference Room, 888 First Street, NE., Room 2A, Washington, DC 20426, (202) 502–8371.

Copies of the EA have been mailed to Federal, State and local agencies, public interest groups, interested individuals, newspapers, and parties to this proceeding.

Any person wishing to comment on the EA may do so. To ensure consideration prior to a Commission decision on the proposal, it is important that we receive your comments before the date specified below. Please carefully follow these instructions to ensure that your comments are received in time and properly recorded:

- Send an original and two copies of your comments to: Secretary, Federal Energy Regulatory Commission, 888 First St., NE., Room 1A, Washington, DC 20426;
- Reference: Docket No. CP04–400–001;
- Label one copy of the comments for the attention of Gas Branch 2, PJ11.2; and
- Mail your comments so that they will be received in Washington, DC on or before September 14, 2006.

Please note that we are continuing to experience delays in mail deliveries from the U.S. Postal Service. As a result, we will include all comments that we receive within a reasonable time frame in our environmental analysis of this project. However, the Commission strongly encourages electronic filing of any comments or interventions or protests to this proceeding. See 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site at *http://www.ferc.gov* under the "e-Filing" link and the link to the User's Guide. Before you can file comments you will need to create a free account which can be created by clicking on "Sign-up."

Comments will be considered by the Commission but will not serve to make the commentor a party to the proceeding. Any person seeking to become a party to the proceeding must file a motion to intervene pursuant to Rule 214 of the Commission's Rules of Practice and Procedures (18 CFR 385.214).[1] Only intervenors have the right to seek rehearing of the Commission's decision.

Affected landowners and parties with environmental concerns may be granted intervenor status upon showing good cause by stating that they have a clear and direct interest in this proceeding which would not be adequately represented by any other parties. You do not need intervenor status to have your comments considered.

Additional information about the project is available from the Commission's Office of External Affairs, at 1–866–208–FERC or on the FERC Internet Web site (*http://www.ferc.gov*) using the eLibrary link. Click on the eLibrary link, click on "General Search" and enter the docket number excluding the last three digits in the Docket Number field. Be sure you have selected an appropriate date range. For assistance, please contact FERC Online Support at *FercOnlineSupport@ferc.gov* or toll free at 1–866–208–3676, or for TTY, contact (202) 502–8659. The eLibrary link also provides access to the texts of formal documents issued by the

[1] Interventions may also be filed electronically via the Internet in lieu of paper. See the previous discussion on filing comments electronically.

Commission, such as orders, notices, and rulemakings.

In addition, the Commission now offers a free service called eSubscription which allows you to keep track of all formal issuances and submittals in specific dockets. This can reduce the amount of time you spend researching proceedings by automatically providing you with notification of these filings, document summaries and direct links to the documents. Go to *http://www.ferc.gov/esubscribenow.htm.*

Magalie R. Salas,

Secretary.

[FR Doc. E6–13822 Filed 8–21–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. PF06–30–000]

Rockies Express Pipeline, LLC; Notice of Intent to Prepare an Environmental Impact Statement for the Proposed Rockies Express Pipeline Project, Eastern Phase Request for Comments on Environmental Issues and Notice of Public Scoping Meetings

August 16, 2006.

The staff of the Federal Energy Regulatory Commission (FERC or Commission) will prepare an environmental impact statement (EIS) that will address the environmental impacts of the proposed Rockies Express Pipeline Project, Eastern Phase (the Project), which involves the construction and operation of facilities by Rockies Express Pipeline, LLC (Rockies Express) in Missouri, Illinois, Indiana, and Ohio. These facilities would consist of 622 miles of 42-inch-diameter natural gas pipeline; five new compressor stations; and approximately 41 mainline valves and 20 interconnects. This EIS will be used by the Commission in its decision-making process to determine whether the Project is in the public convenience and necessity.

This notice explains the scoping process that will be used to gather input from the public and interested agencies on the Project. Your input will help determine which issues/impacts need to be evaluated in the EIS. Please note that the scoping period will close on September 29, 2006.

Comments may be submitted in written form or verbally. In lieu of or in addition to sending in written comments, you are invited to attend the public scoping meetings that are scheduled in the Project area. Nine scoping meetings are scheduled for September 11 through 15, 2006, and are listed below. Further details on how to submit written comments and additional details on the public scoping meetings are provided in the Public Participation section of this notice.

Please note that written comments carry the same weight as comments made orally by participants at the scoping meetings, so if you are unable to attend one of the Commission-sponsored public scoping meetings, we highly encourage you to submit written comments to the Secretary of the Commission.

Date and time	Location(s)
Monday, September 11, 2006 7 p.m.–10 p.m.	Mexico, Missouri, Presser Hall, 900 South Jefferson Street, Mexico, Missouri 65265, 573–581–2765.
	Greensburg, Indiana, Greensburg High School Auditorium, 1000 E. Central Avenue, Greensburg, Indiana 47240, 812–663–7211.
Tuesday, September 12, 2006 7 p.m.–10 p.m.	Springfield, Illinois, Illinois Building, Illinois State Fairgrounds, 801 E. Sangamon Avenue, Springfield, Illinois 62702, 217–782–1698.
	Greenwood, Indiana, Greenwood Middle School, 532 South Madison Avenue, Greenwood, Indiana 46142, 317–889–4040.
Wed., September 13, 2006 7 p.m.–10 p.m.	Pittsfield, Illinois, Pike County Farm Bureau, 1301 E. Washington Street, Pittsfield, Illinois 62363, 217–285–2233.
	Trenton, Ohio, Edgwood High School Auditorium, 5005 Oxford State Road, Trenton, Ohio 45067, 513–867–7425.
Thursday, September 14, 2006 7 p.m.–10 p.m.	Rockville, Indiana, Clark's Hall Reception Area, 2155 East U.S. Highway 36, Rockville, Indiana 47872, 765–569–5794.
	Ashville, Ohio, Teays Valley High School Auditorium, 3887 St. Route 752, Ashville, Ohio 43103, 740–983–3131.
Friday, September 15, 2006 7 p.m.–10 p.m.	Zanesville, Ohio, Zanesville High School Auditorium, 1701 Blue Avenue, Zanesville, Ohio 43701, 740–588–4022.

The Rockies Express Project, Eastern Phase, is currently in the preliminary stages of design, and at this time a formal application has not been filed with the Commission. For this proposal, the Commission is initiating the National Environmental Policy Act (NEPA) review prior to receiving the application. This allows interested stakeholders to become involved early in project planning and to identify and resolve issues before an application is filed with the FERC. A docket number (PF06–30–000) has been established to locate in the public record information filed by Rockies Express and related documents issued by the Commission.[1] Once a formal application is filed with the FERC, a new docket number will be established.

With this notice, we are asking other Federal, state, and local agencies with jurisdiction and/or special expertise with respect to environmental issues in the project area to formally cooperate with us in the preparation of the EIS. These agencies may choose to participate once they have evaluated the proposal relative to their responsibilities. Agencies that would like to request cooperating status should follow the instructions for filing comments described later in this notice. We encourage government representatives to notify their constituents of this planned project and encourage them to comment on their areas of concern.

[1] To view information in the docket, follow the instructions for using the eLibrary link at the end of this notice.

This notice is being sent to landowners within 0.5 mile of the proposed compressor station sites; landowners affected along the pipeline route under consideration; Federal, state, and local government agencies; elected officials; environmental and public interest groups; Native American tribes; local libraries and newspapers; and other interested parties.

Some affected landowners may be contacted by a Rockies Express representative about the acquisition of an easement to construct, operate, and maintain the proposed project facilities. If so, Rockies Express and the affected landowners should seek to negotiate a mutually acceptable agreement. In the event that the Project is certified by the Commission, that approval conveys the right of eminent domain for securing easements for the facilities. Therefore, if easement negotiations fail to produce an agreement, Rockies Express could initiate condemnation proceedings in accordance with state law.

A fact sheet prepared by the FERC entitled "An Interstate Natural Gas Facility on My Land? What Do I Need To Know?" addresses a number of typically asked questions, including the use of eminent domain and how to participate in the Commission's proceedings. It is available for viewing on the FERC Internet Web site (*http://www.ferc.gov*).

Summary of the Proposed Project

Rockies Express' long-term plan is to construct three separately certificated pipelines that together would result in the installation of approximately 1,323 miles of 42-inch-diameter, high-pressure natural gas pipeline linking producing areas in the Rocky Mountain region to the upper Midwest and Eastern United States. This pipeline system would originate near the Cheyenne Hub, in Weld County, Colorado, and would terminate in Monroe County, Ohio. Rockies Express intends to pursue this system plan in three discrete phases (Western, Central, and Eastern). The FERC is now considering the facilities included in the Eastern phase. Rockies Express currently envisions that the Eastern Phase would include:

- Approximately 622 miles of 42-inch-diameter gas pipeline between Audrain County, Missouri, and Monroe County, Ohio.
- Five new compressor stations, including:

—Mexico Compressor Station located in Audrain County, Missouri,
—Blue Mound Compressor Station located in Christian County, Illinois,
—Bainbridge Compressor Station in Putnam County, Indiana,
—Lebanon Compressor Station located in Butler County, Ohio, and
—Chandlersville Compressor Station in Muskingum County, Ohio.

- Approximately 20 new interconnects/meter stations with existing interstate pipelines, located in:

—Moultrie County, Illinois (NGPL and Illinois Power).
—Douglas County, Illinois (Trunkline).
—Edgar County, Illinois (Midwestern).
—Putnam County, Indiana (PEPL).
—Morgan County, Indiana (CGCU).
—Johnson County, Indiana (Indiana Gas).
—Shelby County, Indiana (ANR).
—Warren County, Ohio (Columbia Gas, Dominion, TETCO, Texas Gas, VECTREN, CG&E).
—Pickaway County, Ohio (Columbia Gas of Ohio).
—Fairfield County, Ohio (Columbia Gas).
—Muskingum County, Ohio (Tennessee Gas).
—Monroe County, Ohio (Dominion Transmission, Dominion East Ohio Gas); and

- Approximately 41 mainline valves.

A map depicting the general location of the Project facilities for the Eastern Phase is shown in the figure in Appendix 1.[2]

The entire project, when completed would carry between 1.5 and 2.0 billion cubic feet of gas per day. Rockies Express is requesting approval such that the facilities are completed and placed into service by December 2008, except for the two most eastern compressor stations that would be in-service by June 2009. Rockies Express proposes to begin construction in March 2008.

Land Requirements for Construction

It is estimated that the construction of the Project facilities would disturb about 5,100 acres of land. Following construction, about 4,000 acres of the total would be retained for the operation of the pipeline and the aboveground facilities (compressor/meter stations). Rockies Express proposes to use a 125-foot-wide construction right-of-way with occasional increases in width for additional workspace at waterbody, wetland, road, and railroad crossings. Extra workspaces may also be required in areas with site-specific constraints, such as side-slope construction. Other temporary land requirements would include land for pipe storage and equipment yards. Following construction, all temporary workspace (including all temporary construction rights-of-way, extra workspaces, and pipe storage and contractor yards) would be restored and allowed to revert to its former use. Operation of the pipeline facilities would require a nominal 50-foot-wide permanent right-of-way.

The EIS Process

NEPA requires the Commission to take into account the environmental impacts that could result from an action whenever it considers the issuance of a Certificate of Public Convenience and Necessity under Section 7 of the Natural Gas Act. NEPA also requires us to identify and address concerns the public would have about proposals. This process is referred to as "scoping." The main goal of the scoping process is to focus the analysis in the EIS on important environmental issues and reasonable alternatives. By this Notice of Intent, the Commission staff requests agency and public comments on the scope of the issues to be addressed in the EIS. All comments received are considered during the preparation of the EIS.

We[3] have already started to meet with Rockies Express, agencies, and other interested stakeholders to discuss the Project and identify issues/impacts and concerns. Between June 19 and 29, 2006, representatives of FERC staff participated in 18 public open houses sponsored by Rockies Express in the Project area to explain the NEPA environmental review process to interested stakeholders and take comments about the Project.

Our independent analysis of the issues will be included in the draft EIS. The draft EIS will be published and mailed to Federal, state, and local agencies, elected officials, public interest groups, Native American tribes, affected landowners, interested individuals, local libraries, newspapers, and the Commission's official service list for this proceeding. A comment period will be allotted for review of the draft EIS. We will consider all timely comments on the draft EIS and revise the document, as necessary, before issuing a final EIS.

Currently Identified Environmental Issues

In the EIS we will discuss impacts that could occur as a result of the construction and operation of the

[2] The appendices referenced in this notice are not being printed in the **Federal Register**. Copies are available from the Commission's Public Reference and Files Maintenance Branch, at (202) 502–8371. For instructions on connecting to eLibrary, refer to the Public Participation section of this notice.

[3] "We," "us," and "our" refer to the environmental staff of FERC's Office of Energy Projects.

proposed project and will also evaluate possible alternatives to the proposed project or portions of the project, and make recommendations on how to lessen or avoid impacts on affected resources. We have identified several potential issues that we think deserve attention based on a preliminary review of the proposed facilities and the information provided by Rockies Express. This preliminary list of potential issues may be changed based on your comments and our analysis.

- Geology and Soils

—Impact on agricultural lands and irrigation systems.
—Impact of construction on prime farmland soils.
—Blasting and disposal of excess rock associated with construction.
—Evaluation of noxious weed control measures.
—Impacts of construction on coal mining operations.

- Water Resources:

—Impact of pipeline construction on groundwater, aquifer and water supply wells.
—Impact of construction on wetlands and waterbodies, including the proposed horizontal directional drill of the Mississippi River.
—Assessment of the use and release of hydrostatic test water.

- Fish, Wildlife, and Vegetation:

—Development of revegetation plans.
—Impacts on the Big Walnut Nature Preserve in central Indiana.

- Endangered and Threatened Species:

—Effect on Federally listed species.

- Cultural Resources:

—Impact on known and undiscovered cultural resources.
—Native American tribal concerns.

- Land Use, Recreation and Special Interest Areas, and Visual Resources:

—Permanent land use alteration associated with pipeline easement.
—Impact on residences, including proximity of facilities to existing structures in highly developed residential and commercial areas.
—Potential land use conflicts with planned and future development.
—Restrictions on future use of pipeline right-of-way.

- Socioeconomics:

—Benefits to local communities.
—Use of local labor, equipment, and supplies.

- Air Quality and Noise:

—Effects on local air quality and ambient noise from construction and operation of the proposed facilities, particularly associated with the proposed compressor stations.

- Reliability and Safety:

—Assessment of hazards associated with the transportation of natural gas.
—Assessment of security associated with operation of natural gas facilities.

Public Participation

You are encouraged to become involved in this process and provide your specific comments or concerns about Rockies Express' proposal. Your comments should focus on the potential environmental effects, reasonable alternatives, and measures to avoid or lessen environmental impact. The more specific your comments, the more useful they will be. To expedite the receipt and consideration of your comments, electronic submission of comments is strongly encouraged. See Title 18 CFR 385.2001(a)(1)(iii) and the instructions on the FERC Internet Web site (*http://www.ferc.gov/*) under the eFiling link and the link to the User's Guide. Before you can submit comments you will need to create a free account by clicking on "Sign-up" under "New User." You will be asked to select the type of submission you are making. This type of submission is considered a "Comment on Filing." Comments submitted electronically must be submitted by September 29, 2006.

If you wish to mail comments, please mail your comments so that they will be received in Washington, DC on or before September 29, 2006 and carefully follow these instructions:

- Send an original and two copies of your letter to: Magalie R. Salas, Secretary, Federal Energy Regulatory Commission, 888 First St., NE., Room 1A, Washington, DC 20426.
- Label one copy of your comments for the attention of Gas Branch 1.
- Reference Docket No. PF06–30–000 on the original and both copies.
- Mail your comments so that they will be received in Washington, DC on or before September 29, 2006.

The public scoping meetings identified in the table above are designed to provide state and local agencies, interested groups, affected landowners, and the general public with another opportunity to offer your comments on the Project. Interested groups and individuals are encouraged to attend the meetings and to present comments on the environmental issues they believe should be addressed in the EIS. A transcript of each meeting will be made so that your comments will be accurately recorded.

Once Rockies Express formally files its application with the Commission, you may want to become an official party to the proceeding known as an "intervenor." Intervenors play a more formal role in the process and are able to file briefs, appear at hearings, and be heard by the courts if they choose to appeal the Commission's final ruling. An intervenor formally participates in a Commission proceeding by filing a request to intervene. Instructions for becoming an intervenor are included in the User's Guide under the "e-filing" link on the Commission's Web site. Please note that you may not request intervenor status at this time. You must wait until a formal application is filed with the Commission. You do not need intervener status to have your environmental comments considered.

Environmental Mailing List

An effort is being made to send this notice to all individuals, organizations, and government entities interested in and/or potentially affected by the proposed project. This includes all landowners who are potential right-of-way grantors, whose property may be used temporarily for project purposes, or who own homes within distances defined in the Commission's regulations of certain aboveground facilities.

If you received this notice, you are currently on the environmental mailing list for this Project and will continue to receive Project updates, Notices, including the draft and final EISs. If you wish to remain on our mailing list, or would like your contact information corrected, please return the Mailing List Retention Form included as Appendix 2. If you provide written comments to the Secretary following the procedures described above, you will automatically be kept on the mailing list, in lieu of returning the form (appendix 2). If you do not return this form, we will remove your name from our mailing list.

To reduce printing and mailing costs, the draft and final EISs will be issued in both CD-ROM and hard copy formats. The FERC strongly encourages the use of CD–ROM format in its publication of large documents. If you wish to receive a paper copy of the draft EIS instead of a CD–ROM, you must indicate that choice on the return postcard (Appendix 2).

Additional Information

Additional information about the Project is available from the Commission's Office of External Affairs, at 1–866–208–FERC or on the FERC Internet Web site (*http://www.ferc.gov/*) using the eLibrary link. Click on the eLibrary link, click on "General Search" and enter the project docket number excluding the last three digits (*i.e.*, PF06–30) in the Docket Number field. Be sure you have selected an

appropriate date range. For assistance, please contact FERC Online Support at *FERCOnlineSupport@ferc.gov* or toll free at 1–866–208–3676, or TTY, contact (202) 502–8659. The eLibrary link also provides access to the texts of formal documents issued by the Commission, such as orders, notices, and rulemakings.

In addition, the Commission now offers a free service called eSubscription that allows you to keep track of all formal issuances and submittals in specific dockets. This can reduce the amount of time you spend researching proceedings by automatically providing you with notification of these filings, document summaries, and direct links to the documents. Go to *http://www.ferc.gov/esubscribenow.htm.*

All public meetings will be posted on the Commission's calendar located at *http://www.ferc.gov/EventCalendar/EventsList.aspx* along with other related information.

Finally, Rockies Express has established an Internet Web site for this project at *http://www.rexpipeline.com.* The Web site includes a description of the project, maps of the proposed pipeline route, and answers to frequently asked questions. You can also request additional information or provide comments directly to Rockies Express at 1–866–566–0066 or *mailto:info@rexpipeline.com.*

Magalie R. Salas,

Secretary.

[FR Doc. E6–13890 Filed 8–21–06; 8:45 am]

BILLING CODE 6717–01–P

ENVIRONMENTAL PROTECTION AGENCY

[FRL–8212–1]

Agency Information Collection Activities: OMB Responses

AGENCY: Environmental Protection Agency (EPA).

ACTION: Notice.

SUMMARY: This document announces the Office of Management and Budget's (OMB) response to Agency Clearance requests, in compliance with the Paperwork Reduction Act (44 U.S.C. 3501 *et seq.*). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control numbers for EPA's regulations are listed in 40 CFR part 9 and 48 CFR chapter 15.

FOR FURTHER INFORMATION CONTACT: Susan Auby (202) 566–1672, or e-mail at *auby.susan@epa.gov* and please refer to the appropriate EPA Information Collection Request (ICR) Number.

SUPPLEMENTARY INFORMATION:

OMB Responses to Agency Clearance Requests

OMB Approvals

EPA ICR No. 1633.14; Acid Rain Program Under Title IV of the CAA Amendments of 1990 (Renewal); in 40 CFR parts 72, 73 subparts C–G, and parts 74–78; was approved 07/27/2006; OMB Number 2060–0258; expires 07/31/2009.

Short Term Extensions

EPA ICR No. 1569.05; Approval of State Coastal Nonpoint Pollution Control Programs (CZARA Section 6217); OMB Number 2040–0153; on 07/31/2006 OMB extended the expiration date to 10/31/2006.

Dated: August 9, 2006.

Sara Hisel-McCoy,

Acting Director, Collection Strategies Division.

[FR Doc. E6–13865 Filed 8–21–06; 8:45 am]

BILLING CODE 6560–50–P

ENVIRONMENTAL PROTECTION AGENCY

[IN167–1; FRL–8210–7]

Approval of the Clean Air Act Section 112(l) Delegation of National Emission Standards for Hazardous Air Pollutants for Secondary Lead Smelting; Indiana

AGENCY: Environmental Protection Agency (EPA).

ACTION: Notice.

SUMMARY: This document announces that EPA has approved a request from the Indiana Department of Environmental Management (IDEM) for delegation of authority to implement and enforce National Emission Standards for Hazardous Air Pollutants (NESHAP) for Secondary Lead Smelting, through a state rule which adjusts the maximum achievable control technology (MACT) standard for secondary lead smelting. Pursuant to the Clean Air Act (CAA) and the NESHAP provisions, states may seek approval of state rules which make pre-approved adjustments to a MACT standard if the state rule is unambiguously no less stringent than the Federal rule. IDEM requested approval to adjust the NESHAP for secondary lead smelting, so that the standard will be as stringent as the State rule which currently applies to secondary lead smelters in Indiana. EPA reviewed this request and found that it satisfies the requirements for approval under the Federal provision which allows for delegation of an adjusted NESHAP; "Approval of State requirements that adjust a section 112 rule." Therefore, upon the signature of this action, EPA delegates to IDEM the authority to implement and enforce the NESHAP for Secondary Lead Smelting, through IDEM's rule for Secondary Lead Smelters.

ADDRESSES: The documents relevant to this action are available for public inspection during normal business hours at the following address: Environmental Protection Agency, Region 5, Air and Radiation Division, 77 West Jackson Boulevard, Chicago, Illinois 60604. This facility is open from 8:30 a.m. to 4:30 p.m., Monday through Friday, excluding Federal holidays. We recommend that you telephone Danny Marcus at (312) 353–8781 before visiting the Region 5 office.

FOR FURTHER INFORMATION CONTACT: Danny Marcus, Environmental Engineer, Air Permits Section, Air Programs Branch (AR–18J), Environmental Protection Agency, Region 5, 77 West Jackson Boulevard, Chicago, Illinois 60604, (312) 353–8781, *marcus.danny@epa.gov.*

SUPPLEMENTARY INFORMATION: This supplementary information section is arranged as follows:

I. What Action is EPA Taking?

Pursuant to section 112(l) of the CAA and 40 CFR 63.92, EPA has approved IDEM's request that EPA delegate the authority to implement and enforce 40

CFR part 63, subpart X, NESHAP for secondary lead smelting, through Indiana rule 326 IAC 20–13, which adjusts the Federal secondary lead smelting MACT. This approval makes the Indiana rule, which is unambiguously no less stringent than the Federal MACT, Federally enforceable in Indiana and equivalent to the State rule that currently applies to secondary lead smelters in Indiana. EPA has also approved the delegation of the applicable Category I authorities for this MACT standard as set forth at 40 CFR 63.91(g).

II. Under What Authority is EPA Approving this Delegation?

Pursuant to CAA section 112(l), a state may develop and submit to EPA for approval a program for the partial or complete delegation of section 112 rules. EPA may approve state rules or programs which either: (1) Implement and enforce section 112 rules as promulgated by EPA ("straight delegation"); (2) implement and enforce state rules which adjust section 112 rules; (3) implement and enforce state rules which substitute for section 112 rules. The Federal regulations governing EPA's approval of state rules or programs under section 112(l) are located at 40 CFR part 63, subpart E.

Currently, IDEM has an EPA-approved program for the straight delegation of MACT standards. EPA approved IDEM's program of delegation for part 70 sources on November 14, 1995 (60 FR 57118). EPA approved IDEM's expansion of its program of delegation to non-part 70 sources on July 8, 1997 (62 FR 36460). Pursuant to the approved straight delegation program, EPA has approved the straight delegation of numerous MACT standards to IDEM (see 62 FR 36460 (7/8/1997), 65 FR 17264 (3/31/2000), 69 FR 22508 (4/26/2004), and 71 FR 2225 (1/13/2006)).

By letter dated July 3, 2003, IDEM requested approval of delegation of authority to implement and enforce 40 CFR part 63, subpart X, the secondary lead smelting MACT, through a state rule which adjusts the MACT standard. IDEM sought to adjust the MACT standard rather than seeking straight delegation because IDEM's current rule for secondary lead smelters is more stringent than the MACT standard. Pursuant to CAA section 112(d)(7), a MACT standard cannot be applied to diminish or replace the requirements of a more stringent emission limitation.

The criteria for EPA's approval of state rules which adjust section 112 rules are set forth at 40 CFR 63.92. In general, adjustments to section 112 MACT standards must be unambiguously no less stringent than the Federal rule and be limited to certain pre-approved matters. More specifically, Section 63.92(b)requires that the state demonstrate the following: (1) The state program meets the criteria of section 63.91, which provides for the straight delegation of section 112 rules; (2) the public has had adequate notice and opportunity to submit written comment on the state requirements which adjust the section 112 rule; (3) the adjustment to the section 112 rule results in requirements that are unequivocally no less stringent than the Federal rule with respect to: (a) Applicability; (b) level of control for each affected source and emission point; (c) compliance and enforcement measures; (d) dates of compliance. Further, Section 63.92(b)(3) only allows certain pre-approved adjustments, including the following: (1) Lowering a required emission rate; (2) adding a design, work practice, operational standard; (3) increasing a required control efficiency; (4) increasing the frequency of required reporting, testing, sampling or monitoring.

If the above criteria are met, EPA will approve the delegation of a MACT standard through a state rule which adjusts the standard. Because EPA has previously noticed and provided opportunity for comment on the adjustment procedure, including the list of allowable adjustments, no further notice or opportunity for comment is required. See 58 FR 62262 (November 26, 1993). The delegation is effective upon the signature of this **Federal Register** document. See 65 FR 55837 (September 14, 2000).

III. How Does 326 IAC 20–13 Meet the Requirements of 40 CFR 63.92?

IDEM's secondary lead smelter rule incorporates by reference the majority of the provisions of the Federal secondary lead smelter NESHAP. However, IDEM's rule adjusts certain provisions of the Federal secondary lead smelter NESHAP in order to make the rule equivalent to the state rule that currently applies to secondary lead smelters. As shown below, IDEM has demonstrated that its adjustments are limited to certain pre-approved matters and are unequivocally no less stringent than the Federal MACT provisions. The adjustments meet the criteria set forth in 40 CFR 63.92(b) for state rules which adjust a MACT standard.

A. The Secondary Lead Smelting NESHAP

The secondary lead smelting MACT, which IDEM seeks to adjust, was proposed in the **Federal Register** on June 9, 1994 (59 FR 29750) and promulgated on June 23, 1995 (60 FR 32587). EPA amended the MACT standard after industry groups petitioned EPA for reconsideration pursuant to CAA section 307(d)(7)(B). The amended standard was promulgated as a direct final rule on June 13, 1997 (62 FR 32209).

In general, the NESHAP for secondary lead smelting establishes emission limits for lead, as a surrogate for all metallic Hazardous Air Pollutants (HAPs), from smelting furnaces, refining kettles, dryers, and fugitive dust sources at secondary lead smelters. Among other things, the rule establishes emission limits for process emission sources, process fugitive emission sources, and for fugitive dust sources from any enclosure or building ventilation system.

B. How does the State program meet the requirements of 40 CFR 63.91?

40 CFR 63.92(b) provides that a state which seeks delegation of the authority to implement and enforce a Section 112 rule through a state rule which adjusts the Federal rule must first meet the criteria of 40 CFR 63.91(d). 40 CFR 63.91(d) sets forth the "up-front" approval requirements for the "straight" delegation of Federal MACT standards as promulgated. Once approved, a state need only reference the earlier approval of the criteria. Based on prior program submittals and approvals for IDEM's Title V air permit and Section 112 delegation programs, IDEM has met the requirements specified in 40 CFR 63.91(d).

C. How does the State demonstrate that the public has had adequate notice and opportunity to submit written comments on the State requirements?

40 CFR 63.92(b)(1) requires that a state seeking delegation under this section demonstrate that the public has had adequate notice and opportunity to comment on the state requirements. Title 13 of the Indiana Code (IC) contains statutory requirements for the environmental rulemaking process. IC 13–14–9 specifies requirements for providing opportunities for public comment during this process. Opportunities for comment were made available through three published notices for comment and two public hearings. In its request for delegation, IDEM provided its response to comments related to the two public hearings held for IDEM's secondary lead smelting rule. Therefore, IDEM has met the requirements of 40 CFR 63.92(b)(1).

D. How does the State demonstrate that the adjustments pertain to certain pre-approved matters and are unequivocally no less stringent than the Federal rule?

40 CFR 63.92(b)(2) requires that each state adjustment to a Federal Section 112 rule be unequivocally no less stringent than the Federal rule with respect to: Applicability; level of control for each affected source and emission point; compliance and enforcement measures; and compliance dates. Further, 40 CFR 63.92(b)(3) identifies those limited areas in which Federal Section 112 rules can be adjusted. Those limited adjustments include: lowering a required emission rate; adding a design, work practice, operational standard, emission rate or other such requirement; increasing the frequency of required reporting, testing, sampling or monitoring.

IDEM incorporated by reference the provisions of 40 CFR Part 63, Subpart X, as promulgated, except for certain limited provisions which are allowable adjustments under 40 CFR 63.92(b)(3). As described below, IDEM has demonstrated that those provisions that were adjusted meet the criteria of 63.92(b)(2) and (3).

1. How are the State adjustments which lower emission rates unequivocally no less stringent than the MACT standard?

40 CFR 63.92(b)(3)(i) provides that state rules which lower an emission rate may be part of an approved state rule. Under 40 CFR Part 63, Subpart X, the following emission limits apply to secondary lead smelting facilities: (a) Process sources—2.0 milligrams per dry standard cubic meter (mg/dscm), (b) process fugitive sources—2.0 mg/dscm, (c) fugitive dust sources from any enclosure or building ventilation system—2.0 mg/dscm. See 40 CFR 63.543–63.545. Under IDEM's secondary lead smelting rule, the following emission limits apply: (a) Process sources—1.0 mg/dscm, (b) process fugitive sources—0.5 mg/dscm, (c) stacks venting fugitive dust sources—0.5 mg/dscm. The limits set forth in IDEM's secondary lead smelting rule are unequivocally no less stringent than the emission limits in the Federal rule. Those provisions of IDEM's rule that adjust the Federal rule emission limits include: 326 IAC 20–13–2, 326 IAC 20–13–3, and 326 IAC 20–13–4.

2. How are the State adjustments which add a design, work practice, operational standard, emission rate or other such requirement unequivocally no less stringent than the MACT standard?

40 CFR 63.92(b)(3)(ii) provides that state rules which add a design, work practice, operational standard, or emission rate may be part of an approved state rule. Under 40 CFR Part 63, Subpart X, baghouses and bag leak detection systems must be installed and operated to control process fugitive sources. The Federal MACT does not require the use of High Efficiency Particulate Air (HEPA) filters, which, with capture efficiencies of 99.97%, are more efficient than conventional baghouses. However, under the Federal MACT, if a HEPA filter is used the source is not required to use a bag leak detection system. In contrast, IDEM's secondary lead smelter rule requires all new secondary lead smelters to have HEPA filters on process fugitive and stacks venting fugitive dust sources. Further, for existing sources, IDEM's rule requires facilities currently using HEPA filters to continue to use them.

The design and work practice requirements set forth in IDEM's secondary lead smelting rule are unequivocally no less stringent than the requirements in the Federal rule. Those provisions of IDEM's rule that adjust the Federal rule regarding emission controls (40 CFR 63.548(e)) are: 326 IAC 20–13–4, 326 IAC 20–13–5, 326 IAC 20–13–7, and 326 IAC 20–13–8.

3. How are the State adjustments which increase the frequency of required reporting, testing, sampling or monitoring unequivocally no less stringent than the MACT standard?

40 CFR 63.92(b)(3)(iv) provides that state rules which increase the frequency of required reporting, testing, sampling or monitoring may be part of an approved state rule.

For process sources, the Federal NESHAP requires all secondary lead smelters to perform a stack test annually (no later than 12 calendar months following the previous compliance test). If the stack test demonstrates a source emitted lead compounds at 1.0 mg/dscm or less during the time of the stack test (the Federal NESHAP limit is 2.0 mg/dscm), the owner or operator of a secondary lead smelter is allowed up to 24 calendar months from the previous test to conduct the next stack test for lead compounds. IDEM's rule for process sources also requires a stack test every 12 months following the previous compliance test unless the prior stack test demonstrated lead compound emissions under 0.5 mg/dscm, (IDEM's rule has an emission limit of 1.0 mg/dscm) in which case a stack test is required within 24 months of the previous test.

Regarding process fugitive sources, the Federal NESHAP requires performance of a stack test annually unless the prior stack test demonstrated a concentration of lead compounds less than 1.0 mg/dscm, in which case a stack test is required within 24 months (the Federal NESHAP limit is 2.0 mg/dscm). In contrast, IDEM's rule requires a stack test within 24 months of the previous stack test to demonstrate compliance with the 0.5 mg/dscm emission limit. If a stack test demonstrates a higher concentration, the facility will not be in compliance with IDEM's limit and will be subject to enforcement activity. IDEM's rule is equivalent to the Federal NESHAP because a facility which meets IDEM's emission limit of 0.5 mg/dscm would, under the NESHAP or under IDEM's rule, only be required to stack test once every 24 months.

For fugitive dust sources, no stack testing is required by the Federal NESHAP (the Federal NESHAP limit is 2.0 mg/dscm). However, IDEM's rule requires a one-time stack test to demonstrate compliance with the 0.5 mg/dscm emission limit for fugitive dust stacks.

The testing requirements set forth in IDEM's secondary lead smelting rule are unequivocally no less stringent than the requirements in the Federal rule. Those provisions of IDEM's rule that adjust the Federal rule regarding the frequency of compliance testing are set forth at 326 IAC 20–13–6. The Federal provisions that are adjusted are as follows: 40 CFR 63.543(h), 40 CFR 63.543(i), 40 CFR 63.544(e), 40 CFR 63.544(f), and 40 CFR 63.548(e).

IDEM's secondary smelter rule also contains provisions which increase the monitoring requirements of the Federal rule. With regard to the monitoring of the air pressure within the total enclosures at the facility, the Federal rule requires a continuous monitoring system (CMS) to demonstrate that the inside of the enclosures are maintained at a negative pressure relative to the ambient air pressure. See 40 CFR 63.547(e). IDEM's rule correspondingly requires a CMS, but also requires that the CMS be equipped with a continuous recording device and an alarm. The alarm notifies the facility whenever the pressure difference between the inside and outside of a total enclosure is not within specifications. Further, where the Federal NESHAP does not specify what action to take when the recording device is not within specifications,

IDEM's rule requires the facility to initiate corrective action within 30 minutes of the activated alarm.

In addition, IDEM's rule requires the owner of a secondary lead smelter to install and maintain an ambient air quality monitoring network for lead. Unless an owner of a secondary lead smelter received approval prior to the effective date of IDEM's rule, an owner must submit a proposed ambient monitoring and quality assurance plan within 90 days after the effective date of IDEM's rule. Reporting is required on a quarterly basis, within 45 days after the end of the quarter in which the data is collected. The report must include ambient air quality monitoring network data, and if a National Ambient Air Quality Standards (NAAQS) violation is triggered, identification of the cause of the violation and corrective actions taken to address the violation are required.

The monitoring requirements set forth in IDEM's secondary lead smelting rule are unequivocally no less stringent than the requirements in the Federal rule. The provisions of IDEM's rule that pertain to monitoring are set forth at 326 IAC 20–13–7.

IV. What Is the Effect of This Delegation?

On August 3, 2006, EPA approved IDEM's request to delegate the authority to implement and enforce 40 CFR part 63, subpart X, through 326 IAC 20–13, which adjusts the secondary lead smelting MACT. EPA also approved the delegation of the applicable Category I authorities as set forth at 40 CFR 63.91(g).

All notifications, reports and other correspondence required under 40 CFR, part 63, subpart X, as adjusted by 326 IAC 20–13, should be sent to the State of Indiana, rather than to the EPA, Region 5, in Chicago. Affected sources should send this information to: Indiana Department of Environmental Management, Office of Air Management, 100 North Senate Avenue, P.O. Box 6015, Indianapolis, Indiana 46206–6015.

Pursuant to Section 112(l)(7) of the CAA, nothing in this delegation prohibits EPA from enforcing any applicable emission standard or requirement. The secondary lead smelter MACT, 40 CFR part 63, subpart X, as adjusted by 326 IAC 20–13 is Federally enforceable.

Dated: August 3, 2006.

Jo-Lynn Traub,

Acting Regional Administrator, Region 5.

[FR Doc. E6–13861 Filed 8–21–06; 8:45 am]

BILLING CODE 6560–50–P

ENVIRONMENTAL PROTECTION AGENCY

[FRL–8212–4]

Science Advisory Board Staff Office; Request for Nominations for the Science Advisory Board Asbestos Expert Panel

AGENCY: Environmental Protection Agency (EPA).

ACTION: Notice.

SUMMARY: The EPA Science Advisory Board (SAB) Staff Office announces the formation of a SAB Asbestos Expert Panel and is soliciting nominations for members of the Panel.

DATES: Nominations should be submitted by September 12, 2006 per the instructions below.

FOR FURTHER INFORMATION CONTACT: Members of the public who wish to obtain further information regarding this announcement may contact Ms. Vivian Turner, Designated Federal Officer, by telephone: (202) 343–9697 or E-mail at: *turner.vivian@epa.gov*. The SAB Mailing address is: U.S. EPA Science Advisory Board (1400F), U.S. Environmental Protection Agency, 1200 Pennsylvania Ave, NW., Washington, DC, 20460. General information about the SAB as well as any updates concerning this request for nominations may be found on the SAB Web site at: *http://www.epa.gov/sab*.

SUPPLEMENTARY INFORMATION: Asbestos consists of six different fibrous silicate minerals that occur naturally in the environment. In 1986, EPA published an assessment of potential health effects from environmental exposure to asbestos entitled Airborne Asbestos Health Assessment Update (EPA 600/8–84–003F 1986). Data now exist that indicate mineral type and the particle dimension of asbestos fibers may influence the potential risk of lung cancer and mesothelioma. EPA is updating the asbestos health effects assessment on the basis of new information. In particular, EPA's Office of Solid Waste and Emergency Response (OSWER) has developed an approach for the quantification of cancer risk which accounts for different potencies associated with the mineral type and fiber dimensions. OSWER has requested that the Science Advisory Board (SAB) provide technical advice on the proposed methodology to estimate potential cancer risk from inhalation exposure to asbestos.

The SAB is a chartered Federal Advisory Committee, established by 42 U.S.C. 4365, to provide independent scientific and technical advice, consultation, and recommendations to the EPA Administrator on the technical bases for EPA policies and actions. The SAB is forming an expert panel, to provide technical advice to EPA through the chartered SAB regarding the Agency's ongoing work in updating the risk assessment of asbestos. The SAB Asbestos Panel will comply with the provisions of the Federal Advisory Committee Act (FACA) and all appropriate SAB procedural policies.

Request for Nominations: The SAB Staff Office is requesting nominations for nationally and internationally recognized non-EPA scientists with demonstrated clinical, research and applied scientific experience and expertise with respect to human health effects of asbestos and related minerals in the following areas: Clinical and pulmonary medicine, epidemiology, occupational and public health, pathology, inhalation toxicology; biology, mineralogy; environmental fate and transport, environmental sampling and detection methods, biostatistics, statistical modeling and risk assessment.

Process and Deadline for Submitting Nominations: Any interested person or organization may nominate individuals qualified in the areas of expertise described above to serve on the SAB Asbestos Expert Panel. Nominations may be submitted in electronic format through the Form for Nominating Individuals to Panels of the EPA Science Advisory Board which can be accessed through a link on the blue navigational bar on the SAB Web site at: *http://www.epa.gov/sab*. Please follow the instructions for submitting nominations carefully, and include all of the information requested on that form. The nominating form requests contact information of the person making the nomination; contact information for the nominee; the disciplinary and specific areas of expertise of the nominee; the nominee's curriculum vita; and a biographical sketch of the nominee indicating current position, educational background, research activities, and recent service on other national advisory committees or national professional organizations. Anyone unable to submit nominations using the electronic form, or who may have questions concerning the nomination process or any other aspect of this notice may contact Ms. Vivian Turner, DFO, at the contact information. Nominations should be submitted in time to arrive no later than September 12, 2006.

The process for forming an SAB panel is described in the Overview of the Panel Formation Process at the Environmental Protection Agency,

Science Advisory Board (EPA–SAB–EC–COM–02–010), on the SAB Web site at: *http://www.epa.gov/sab/pdf/ec02010.pdf*. The SAB Staff Office will acknowledge receipt of nominations and inform nominees of the panel for which they have been nominated. From the nominees identified by respondents to this **Federal Register** notice (termed the "Widecast"), the SAB Staff Office will develop a smaller subset (known as the "Short List") for more detailed consideration. The Short List will be posted on the SAB Web site at: *http://www.epa.gov/sab,* and will include the nominee's name and biographical sketch. Public comments on the Short List will be accepted for 21 calendar days. During this comment period, the public will be requested to provide information, analysis or other documentation on nominees that the SAB Staff Office should consider in evaluating candidates for the Panels.

For the SAB, a balanced panel is characterized by inclusion of nominees who possess the necessary domains of knowledge, the relevant scientific perspectives (which, among other factors, can be influenced by work history and affiliation), and the collective breadth of experience to adequately address the charge. Public responses to the Short List will be considered in the selection of the panel members, along with information provided by nominees and information independently gathered by SAB Staff (*e.g.*, financial disclosure information and computer searches to evaluate a nominees prior involvement with the topic under review). Specific criteria to be used in evaluating Short List nominees include: (a) Scientific and/or technical expertise, knowledge, and experience (primary factors); (b) absence of financial conflicts of interest; (c) scientific credibility and impartiality; (d) availability and willingness to serve; and (e) ability to work constructively and effectively on committees.

Short List nominees will be required to fill-out the "Confidential Financial Disclosure Form for Special Government Employees Serving on Federal Advisory Committees at the U.S. Environmental Protection Agency" (EPA Form 3110–48). This confidential form allows Government officials to determine whether there is a statutory conflict between that person's public responsibilities (which includes membership on an EPA Federal advisory committee) and private interests and activities, or the appearance of a lack of impartiality, as defined by Federal regulation. The form may be viewed and downloaded from the following URL address: *http://www.epa.gov/sab/pdf/epaform3110-48.pdf*.

Dated: August 16, 2006.

Anthony F. Maciorowski,

Associate Director for Science, EPA Science Advisory Board Staff Office.

[FR Doc. E6–13864 Filed 8–21–06; 8:45 am]

BILLING CODE 6560–50–P

ENVIRONMENTAL PROTECTION AGENCY

[FRL–8211–9]

Notice of Public Hearing and Extension of Public Comment Period for the Proposed Reissuance of General NPDES Permits (GPs) for Aquaculture Facilities in Idaho Subject to Wasteload Allocations Under Selected Total Maximum Daily Loads (Permit Number IDG–13–0000), Cold Water Aquaculture Facilities in Idaho (Not Subject to Wasteload Allocations) (Permit Number IDG–13–1000), and Fish Processors Associated With Aquaculture Facilities in Idaho (Permit Number IDG–13–2000)

AGENCY: Environmental Protection Agency.

ACTION: Announcement of public hearing and extension of public comment period on three draft general NPDES permits for Idaho aquaculture facilities and associated fish processors.

SUMMARY: On June 19, 2006, EPA Region 10 proposed to reissue three general permits to cover aquaculture facilities and associated fish processors in Idaho. 71 FR 35269. On July 25, 2006, in response to requests from the regulated community, EPA extended the end of the public comment period from August 3 to August 18, 2006. 71 FR 42091. In response to further requests from the regulated community, EPA is scheduling a public hearing to receive oral comments on September 26, 2006; a short question and answer period will precede the formal hearing. EPA is also extending the public comment period to September 29, 2006.

DATES: A public hearing to receive oral comments on the permits will be held on Tuesday, September 26, 2006, at 7 p.m. at the KMTV Community Room, 1100 Blue Lakes Blvd. North, Twin Falls, Idaho. The end of the public comment period is now extended to September 29, 2006. Comments must be received or postmarked by that date.

Public Comment: Interested persons may submit oral comments at the September 26, 2006, public hearing or may submit written comments on the draft permits to the attention of Sharon Wilson at the address below. All comments should include the name, address, and telephone number of the commenter and a concise statement of comment and the relevant facts upon which it is based. Comments of either support or concern which are directed at specific, cited permit requirements are appreciated.

After the expiration date of the Public Notice on September 29, 2006; the Director, Office of Water and Watersheds, EPA Region 10, will make a final determination with respect to issuance of the general permits. The proposed requirements contained in the draft general permits will become final upon issuance if no significant comments are received during the public comment period.

ADDRESSES: Comments on the proposed General Permits should be sent to Sharon Wilson, Office of Water and Watersheds; USEPA Region 10; 1200 Sixth Avenue, OWW–130; Seattle, Washington 98101 or by e-mail to *wilson.sharon@epa.gov*.

FOR FURTHER INFORMATION, CONTACT: Carla Fromm, 208–378–5755, *fromm.carla@epa.gov* or Sharon Wilson, 206–553–0325, *wilson.sharon@epa.gov* Copies of the draft general permit and fact sheet may be downloaded from the EPA Region 10 Web site at *http://yosemite.epa.gov/R10/WATER.NSF/NPDES+Permits/General+NPDES+Permits#Aquaculture*. They are also available upon request from Audrey Washington at (206) 553–0523, or e-mailed to *washington.audrey@epa.gov*. For information on physical locations in Idaho and Seattle where the documents may be viewed, see the June 19, 2006, notice at 71 FR 35269.

Dated: August 15, 2006.

Michael F. Gearheard,

Director, Office of Water & Watersheds, Region 10, U.S. Environmental Protection Agency.

[FR Doc. E6–13862 Filed 8–21–06; 8:45 am]

BILLING CODE 6560–50–P

FEDERAL RESERVE SYSTEM

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Board of Governors of the Federal Reserve System ("Board")

ACTION: Notice of information collection to be submitted to OMB for review and approval under the Paperwork Reduction Act of 1995.

SUMMARY: In accordance with the requirements of the Paperwork Reduction Act of 1995 (44 U.S.C. chapter 35), the Board, the Federal Deposit Insurance Corporation (FDIC), and the Office of the Comptroller of the Currency (OCC) (collectively, the "agencies") may not conduct or sponsor, and the respondent is not required to respond to, an information collection unless it displays a currently valid Office of Management and Budget (OMB) control number.

On June 5, 2006, the Board, under the auspices of the Federal Financial Institutions Examination Council (FFIEC) and on behalf of the agencies, published a notice in the Federal Register (71 FR 32347) requesting public comment for 60 days on the revision of the Report of Assets and Liabilities of U.S. Branches and Agencies of Foreign Banks (FFIEC 002), which is a currently approved information collection. The comment period for this notice expired on August 4, 2006. After receiving one supportive comment letter, the FFIEC and the agencies have made no modifications to the proposal, but are providing transition guidance. The Board hereby gives notice that it plans to submit to OMB on behalf of the agencies a request for approval of the FFIEC 002.

DATES: Comments must be submitted on or before September 21, 2006.

ADDRESSES: Interested parties are invited to submit written comments to the agency listed below. All comments, which should refer to the OMB control number, will be shared among the agencies. You may submit comments, identified by FFIEC 002 (7100–0032), by any of the following methods:

- Agency Web Site: http://www.federalreserve.gov. Follow the instructions for submitting comments on the http://www.federalreserve.gov/generalinfo/foia/ProposedRegs.cfm.
- Federal eRulemaking Portal: http://www.regulations.gov. Follow the instructions for submitting comments.
- E–mail: regs.comments@federalreserve.gov. Include the OMB control number in the subject line of the message.
- FAX: 202–452–3819 or 202–452–3102.
- Mail: Jennifer J. Johnson, Secretary, Board of Governors of the Federal Reserve System, 20th Street and Constitution Avenue, N.W., Washington, DC 20551.

All public comments are available from the Board's web site at www.federalreserve.gov/generalinfo/foia/ProposedRegs.cfm as submitted, unless modified for technical reasons. Accordingly, your comments will not be edited to remove any identifying or contact information. Public comments may also be viewed electronically or in paper in Room MP–500 of the Board's Martin Building (20th and C Streets, N.W.) between 9:00 a.m. and 5:00 p.m. on weekdays.

Additionally, commenters should send a copy of their comments to the Desk Officer for the agencies by mail to U.S. Office of Management and Budget, 725 17th Street N.W., #10235, Washington, DC 20503 or by fax to 202–395–6974.

FOR FURTHER INFORMATION CONTACT: Additional information or a copy of the collection may be requested from Michelle Long, Federal Reserve Board Clearance Officer, 202–452–3829, Division of Research and Statistics, Board of Governors of the Federal Reserve System, 20th and C Streets, N.W., Washington, DC 20551. Telecommunications Device for the Deaf (TDD) users may call 202–263–4869, Board of Governors of the Federal Reserve System, 20th and C Streets, N.W., Washington, DC 20551.

Proposal to request approval from OMB of the revision of the following currently approved collection of information:

Report Title: Report of Assets and Liabilities of U.S. Branches and Agencies of Foreign Banks
Form Number: FFIEC 002
OMB Number: 7100–0032
Frequency of Response: Quarterly
Affected Public: U.S. branches and agencies of foreign banks
Estimated Number of Respondents: 275
Estimated Average Time per Response: 22.75 hours
Estimated Total Annual Burden: 25,025 hours
General Description of Report: This information collection is mandatory: 12 U.S.C. 3105(b)(2), 1817(a)(1) and (3), and 3102(b). Except for select sensitive items, this information collection is not given confidential treatment [5 U.S.C. 552(b)(8)].

Abstract: On a quarterly basis, all U.S. branches and agencies of foreign banks (U.S. branches) are required to file detailed schedules of assets and liabilities in the form of a condition report and a variety of supporting schedules. This information is used to fulfill the supervisory and regulatory requirements of the International Banking Act of 1978. The data are also used to augment the bank credit, loan, and deposit information needed for monetary policy and other public policy purposes. The Federal Reserve System collects and processes this report on behalf of all three agencies.

Current Actions: In response to the June 5, 2006, notice published in the Federal Register (71 FR 32347), the agencies received one comment letter from a federal agency describing its use of the data to prepare economic account information and estimates of international transactions. The revisions to the FFIEC 002 have been approved by the FFIEC as originally proposed, but with the addition of transition guidance, and are summarized below. The agencies will implement the changes as of the September 30, 2006, reporting date.

Schedule O – Other Data for Deposit Insurance Assessments

1. Memorandum items 1.a.(1) through 1.b.(2) will be redefined to exclude retirement deposit accounts, which will be reported in four new items 1.c.(1) through 1.d.(2). The deposit insurance limit for retirement deposit accounts increased from $100,000 to $250,000 effective April 1, 2006. For further details, see the Federal Register notice pertaining to the Consolidated Reports of Condition and Income (Call Report) published on May 8, 2006 (71 FR 26809).

For purposes of reporting in the revised Schedule O Memorandum items, FDIC–insured branches should determine whether they have retirement deposit accounts eligible for the $250,000 insurance coverage. Such branches may provide reasonable estimates for the information to be reported in the revised Schedule O Memorandum items in their FFIEC 002 for September 30, 2006. If a branch's existing deposit records and systems for these retirement deposit accounts provide insufficient information to allow the branch to make a reasonable estimate, the branch may treat all of these deposit accounts as eligible for the $100,000 insurance coverage in the September 30 FFIEC 002.

For the FFIEC 002 for December 31, 2006, branches would be expected to have made appropriate systems changes to enable them to report reasonably accurate data on all types of retirement deposit accounts eligible for the $250,000 insurance coverage. Therefore, branches would no longer be permitted to elect to treat all retirement deposit accounts as eligible for the $100,000 insurance coverage in the revised Schedule O Memorandum items in their December 31 FFIEC 002. Thereafter, FDIC–insured branches' deposit records and systems should enable them to report information on all retirement deposit accounts in these Schedule O

Memorandum items in accordance with the applicable instructions.

In addition, the agencies are providing guidance concerning the reporting of brokered certificates of deposit issued in $1,000 amounts under a master certificate of deposit in the revised Schedule O items and in Schedule E of the FFIEC 002. For these so–called "retail brokered deposits," multiple purchases by individual depositors from an individual FDIC–insured branch normally do not exceed the applicable deposit insurance limit (either $100,000 or $250,000), but under current deposit insurance rules the deposit broker is not required to provide information routinely on these purchasers and their account ownership capacity to the insured branch issuing the deposits. For purposes of revised Schedule O, Memorandum item 1, multiple accounts of the same depositor should not be aggregated. Therefore, in the absence of information on account ownership capacity for retail brokered certificates of deposit in $1,000 amounts, which are rebuttably presumed to be fully insured deposits, branches issuing these brokered deposits should include them in Schedule O, Memorandum item 1, as "Deposit accounts of $100,000 or less." Furthermore, these brokered certificates of deposit in $1,000 amounts should not be included in Schedule E, Memorandum item 1.a, "Time deposits of 100,000 or more," or Memorandum item 1.c, "Time certificates of deposit of $100,000 or more with remaining maturity of more than 12 months."

2. The caption for Memorandum item 1 will be footnoted to state that the specific dollar amounts used as the basis for reporting the number and amount of deposit accounts in . Memorandum items 1.a through 1.d reflect the deposit insurance limits in effect on the report date. This footnote will ensure that the dollar amount cited in the caption changes automatically as a function of the deposit insurance limit in effect on the report date. The instructions for this Memorandum item will be similarly clarified. For further details, see the Call Report Federal Register notices published on November 8, 2002, and March 4, 2003 (67 FR 68229 and 68 FR 10310, respectively).

3. Memorandum items 2.a and 2.b will be replaced and redefined as Memorandum item 2, "Estimated amount of uninsured deposits in the branch (excluding IBF)," and will be completed only by FDIC–insured branches with $1 billion or more in total claims on nonrelated parties. For further details, see the Call Report Federal Register notices published on October 18, 2001, February 28, 2002, August 23, 2005, and February 17, 2006 (66 FR 52973, 67 FR 9355, 70 FR 49363, and 71 FR 8649, respectively).

Request for Comment

Comments are invited on:

a. Whether the information collection is necessary for the proper performance of the agencies' functions, including whether the information has practical utility;

b. The accuracy of the agencies' estimates of the burden of the information collection, including the validity of the methodology and assumptions used;

c. Ways to enhance the quality, utility, and clarity of the information to be collected;

d. Ways to minimize the burden of the information collection on respondents, including through the use of automated collection techniques or other forms of information technology; and

e. Estimates of capital or start up costs and costs of operation, maintenance, and purchase of services to provide information.

Comments submitted in response to this notice will be shared among the agencies. All comments will become a matter of public record. Written comments should address the accuracy of the burden estimates and ways to minimize burden including the use of automated collection techniques or other forms of information technology as well as other relevant aspects of the information collection request.

Board of Governors of the Federal Reserve System, August 16, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E6–13833 Filed 8–21–06; 8:45 am]

BILLING CODE 6210–01–S

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices, Acquisition of Shares of Bank or Bank Holding Companies; Correction

This notice corrects a notice (FR Doc. E6-12011) published on page 42642 of the issue for Thursday, July 27, 2006.

Under the Federal Reserve Bank of Richmond heading, the entry for Richrd Jarrell, Freda Jarrell, Carol Jarrell, Robert Jarrell, and Robin Jarrell, all of Whitesville, West Virginia, is revised to read as follows:

A. Federal Reserve Bank of Richmond (A. Linwood Gill, III, Vice President) 701 East Byrd Street, Richmond, Virginia 23261-4528:

1. Richard Jarrell, Freda Jarrell, Carol Jarrell, Robert Jarrell, and Robin Jarrell, all of Whitesville, West Virginia; as a group acting in concert to retain voting shares of Big Coal River Bancorp, Inc., Whitesville, West Virginia, and thereby indirectly retain voting shares of Whitesville State Bank, Whitesville, West Virginia.

Comments on this application must be received by September 1, 2006.

Board of Governors of the Federal Reserve System, August 17, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E6–13892 Filed 8–21–06; 8:45 am]

BILLING CODE 6210–01–S

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices, Acquisition of Shares of Bank or Bank Holding Companies; Correction

This notice corrects a notice (FR Doc. E6-12874) published on page 45049 of the issue for Tuesday, August 8, 2006.

Under the Federal Reserve Bank of Richmond heading, the entry for Robert Milam, Jr., Robert Milam, Melissa Milam, Jada Milam, Kevin Milam, Lloyd Jarrell; and other members of the Milam family, Whitesville, West Virginia, is revised to read as follows:

A. Federal Reserve Bank of Richmond (A. Linwood Gill, III, Vice President) 701 East Byrd Street, Richmond, Virginia 23261-4528:

1. Robert Milam, Jr., to individually retain voting shares of, and Robert Milam, Jr.; Robert Milam; Melissa Milam; Jada Milam; Kevin Milam; Lloyd Jarrell; and other members of the Milam family, Whitesville, West Virginia, as a group acting in concert, to retain voting shares of Big Coal River Bancorp, Inc., Whitesville, West Virginia, and thereby indirectly retain voting shares of Whitesville State Bank, Whitesville, West Virginia.

Comments on this application must be received by September 1, 2006.

Board of Governors of the Federal Reserve System, August 17, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E6–13893 Filed 8–22–06; 8:45 am]

BILLING CODE 6210–01–S

FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR Part

225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The application also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States. Additional information on all bank holding companies may be obtained from the National Information Center website at *www.ffiec.gov/nic/*.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than September 15, 2006.

A. Federal Reserve Bank of Chicago (Patrick M. Wilder, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690-1414:

1. Lincoln Bancorp, Plainfield, Indiana; to become a bank holding company upon the conversion of Lincoln Bank, Plainfield, Indiana, from a federal savings bank to a state–chartered commercial bank.

B. Federal Reserve Bank of Dallas (W. Arthur Tribble, Vice President) 2200 North Pearl Street, Dallas, Texas 75201-2272:

2. Industry Bancshares, Inc., Industry, Texas, and Industry Holdings, Inc., Wilmington, Delaware; to acquire 100 percent of the voting shares of Community Bancorporation, Inc., Bellville, Texas, and thereby indirectly acquire Bellville Holdings, Inc., Wilmington, Delaware, and First National Bank of Bellville, Bellville, Texas.

Board of Governors of the Federal Reserve System, August 17, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E6–13832 Filed 8–21–06; 8:45 am]

BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Clinical Laboratory Improvement Advisory Committee

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (P.L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following committee meeting.

Name: Clinical Laboratory Improvement Advisory Committee (CLIAC).

Times and Dates: 8:30 a.m.–5 p.m., September 20, 2006. 8:30 a.m.–3 p.m., September 21, 2006.

Place: Sheraton Midtown Atlanta Hotel at Colony Square, 188 14th Street, NE., Atlanta, Georgia 30361, Telephone: (404) 892–6000.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 100 people.

Purpose: This Committee is charged with providing scientific and technical advice and guidance to the Secretary of Health and Human Services, the Assistant Secretary for Health, and the Director, CDC, regarding the need for, and the nature of, revisions to the standards under which clinical laboratories are regulated; the impact on medical and laboratory practice of proposed revisions to the standards; and the modification of the standards to accommodate technological advances.

Matters To Be Discussed: The agenda will include updates from the CDC, the Centers for Medicare & Medicaid Services, and the Food and Drug Administration; and presentations and discussion concerning the future of health laboratory practice including future directions in laboratory technology, interfaces between the laboratory and clinicians, and the future of the laboratory workforce. Agenda items are subject to change as priorities dictate.

Providing Oral or Written Comments: It is the policy of CLIAC to accept written public comments and provide a brief period for oral public comments whenever possible. *Oral Comments:* In general, each individual or group requesting to make an oral presentation will be limited to a total time of five minutes (unless otherwise indicated). Speakers must also submit their comments in writing for inclusion in the meeting's Summary Report. To assure adequate time is scheduled for public comments, individuals or groups planning to make an oral presentation should, when possible, notify the contact person below at least one week prior to the meeting date. *Written Comments:* For individuals or groups unable to attend the meeting, CLIAC accepts written comments until the date of the meeting (unless otherwise stated). However, the comments should be received at least one week prior to the meeting date so that the comments may be made available to the Committee for their consideration and public distribution. Written comments, one hard copy with original signature, should be provided to the contact person below. Written comments will be included in the meeting's Summary Report.

Contact Person for Additional Information: Devery Howerton, Acting Chief, Laboratory Practice Standards Branch, Division Public Health Partnerships—Laboratory Systems, National Center for Health Marketing, Coordinating Center for Health Information and Service, CDC, 1600 Clifton Road, NE., Mailstop G–23, Atlanta, Georgia 30333; telephone (404) 718–1016; fax (404) 718–1080; or via e-mail at *DHowerton@cdc.gov*.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** Notices pertaining to announcements of meetings and other committee management activities, for CDC and the Agency for Toxic Substances and Disease Registry.

Dated: August 15, 2006.

Alvin Hall,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E6–13828 Filed 8–21–06; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Orthopaedic and Rehabilitation Devices Panel of the Medical Devices Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). At least one portion of the meeting will be closed to the public.

Name of Committee: Orthopaedic and Rehabilitation Devices Panel of the Medical Devices Advisory Committee.

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on September 19, 2006, from 8 a.m. to 5:30 p.m.

Location: Hilton Washington DC North/Gaithersburg, Salons C, D and E, 620 Perry Parkway, Gaithersburg, MD.

Contact Person: Ronald P. Jean, Center for Devices and Radiological Health (HFZ–410), Food and Drug Administration, 9200 Corporate Blvd., Rockville, MD 20850, 301–594–2036, ext. 181, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 3014512521. Please call the Information Line for up-to-date information on this meeting.

Agenda: The committee will discuss, make recommendations and vote on a premarket approval application for a cervical disc prosthesis intended to treat skeletally mature patients with degenerative disc disease at one level from C3–C7. Background information for the topics, including the agenda and questions for the committee, will be available to the public 1 business day before the meeting on the Internet at *http://www.fda.gov/cdrh/panel* (click on Upcoming CDRH Advisory Panel/ Committee Meetings).

Procedure: On September 19, 2006, from 8:30 a.m. to 5:30 p.m., the meeting will be open to the public. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person on or before September 5, 2006. Oral presentations from the public will be scheduled for 30 minutes at the beginning of the committee deliberations and for 30 minutes near the end of the deliberations. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation on or before September 5, 2006.

Closed Committee Deliberations: On September 19, 2006, from 8 a.m. to 8:30 a.m., the meeting will be closed to permit FDA to present to the committee trade secret and/or confidential commercial information (5 U.S.C. 552b(c)(4)) relating to pending issues and applications.

Persons attending FDA's advisory committee meetings are advised that the agency is not responsible for providing access to electrical outlets.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact Shirley Meeks, Conference Management Staff, at 301–827–7292, least 7 days in advance of the meeting.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: August 14, 2006.

Randall W. Lutter,

Associate Commissioner for Policy and Planning.

[FR Doc. E6–13823 Filed 8–21–06; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Veterinary Medicine Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). The meeting will be open to the public.

Name of Committee: Veterinary Medicine Advisory Committee.

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on September 25, 2006, from 8:30 a.m. to 5 p.m.

Location: DoubleTree Hotel, Plaza Rooms II–III, 1750 Rockville Pike, Rockville, MD.

Contact Person: Aleta Sindelar, Food and Drug Administration, 7519 Standish Pl., Rockville, MD 20855, 240–276–9004, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 3014512548. Please call the Information Line for up-to-date information on this meeting.

Agenda: The committee will discuss and make recommendations on the microbial food safety of an antimicrobial drug application currently under review for use in food-producing animals in accordance with the Center for Veterinary Medicine's guidance for industry #152.

The background material for this meeting will be posted on the Internet no later than 1 business day before the meeting at *http://www.fda.gov/cvm/default.html*.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person on or before September 13, 2006. Oral presentations from the public will be scheduled between approximately 1 p.m. and 2 p.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation on or before September 13, 2006.

Persons attending FDA's advisory committee meetings are advised that the agency is not responsible for providing access to electrical outlets.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact Aleta Sindelar at least 7 days in advance of the meeting.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: August 16, 2006.

Randall W. Lutter,

Associate Commissioner for Policy and Planning.

[FR Doc. E6–13818 Filed 8–21–06; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget (OMB), in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to

OMB for review, call the HRSA Reports Clearance Office on (301) 443–1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: Outcome Study of National Health Service Corps (NHSC) Chiropractor and Pharmacist Loan Repayment Demonstration Project—New

In 2002, Congress authorized a demonstration project to provide for the participation of chiropractors and pharmacists in the NHSC Loan Repayment Program. This study provides for an evaluation of the demonstration project to determine (1) The manner in which the demonstration project has affected access to primary care services, patient satisfaction, quality of care, and health care services provided for traditionally underserved populations, (2) how the participation of chiropractors and pharmacists in the Loan Repayment Program might affect the designation of health professional shortage areas, and (3) whether adding chiropractors and pharmacists as permanent members of the NHSC would be feasible and would enhance the effectiveness of the NHSC.

The burden estimate is as follows:

Respondents	Number of respondents	Number of responses/ respondent	Average burden per response (in hours)	Total burden (in hours)
Clinic Users	2,000	1	.25	500
Chiropractors & Pharmacists	60	1	.50	30
NHSC Site Administrative Personnel	30	1	.50	15
Total	2,090			545

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: John Kraemer, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: August 15, 2006.

Cheryl R. Dammons,

Director, Division of Policy Review and Coordination.

[FR Doc. E6–13847 Filed 8–21–06; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

[USCG–2006–25560]

Head and Gut Fleet; Alternate Standards for Fish Processing Vessels

AGENCY: Coast Guard, DHS.

ACTION: Notice of availability.

SUMMARY: The Coast Guard announces the availability of a policy letter detailing the Coast Guard's determination that "head and gut fleet" vessels constitute fish processing vessels for regulatory purposes. For vessels that, because of their age, cannot comply with certain regulatory requirements, an exemption from those requirements will be granted if the vessel owner proposes an acceptable alternative that provides a level of safety that is equivalent to the current regulations.

FOR FURTHER INFORMATION CONTACT: If you have questions on this notice, contact Mr. Michael Rosecrans, Chief, Fishing Vessel Safety Division, Commandant (G-PCV–3), telephone 202–372–1245, or by e-mail at *MRosecrans@comdt.uscg.mil.* If you have questions on viewing or submitting material to the docket, call Ms. Renee V. Wright, Program Manager, Docket Operations, telephone 202–493–0402.

SUPPLEMENTARY INFORMATION:

Background and Purpose

In the process of investigating the loss of the fishing vessels GALAXY and ARCTIC ROSE, the Coast Guard became aware of a class of approximately 65 vessels known as the "head and gut fleet." This fleet involves two basic vessel types, freezer trawlers and freezer longliners. These vessels operate in the Gulf of Alaska and the Bering Sea/ Aleutian Island fisheries. They catch fish and perform a number of operations, including freezing and packaging the catch for later distribution to a number of foreign and domestic markets.

Some of the operations conducted on board exceed the operations permitted for fishing vessels. Title 46 U.S. Code 2101(11b) defines a "fish processing vessel" as "a vessel that commercially prepares fish or fish products other than by gutting, decapitating, gilling, skinning, shucking, icing, freezing or brine chilling."

The Coast Guard has determined that the operations conducted on board this fleet of vessels qualify the vessels as fish processing vessels. Coast Guard regulations in 46 CFR 28.710 require a fishing processing vessel to be classed by the American Bureau of Shipping or a similarly qualified organization, and under 46 CFR 42.03–5, a fish processing vessel of a certain size must also obtain a Load Line Certificate.

Due to the age of the majority of the vessels in this fleet, they are ineligible to enter class with the American Bureau of Shipping or a similarly qualified organization. As a result, the Coast Guard has developed a policy to address safety concerns by permitting exemptions from the aforementioned regulations, as authorized by 46 CFR 28.60, provided the owner of a vessel proposes alternatives to the required regulations that provide a level of safety that is equivalent to the current regulations.

This decision is documented in G-PCV Policy Letter 06–03. It may be viewed on-line at *http://www.uscg.mil/hq/g-m/moc/docs.htm.*

Dated: August 17, 2006.

Howard L. Hime,

Acting Director of National and International Standards, Assistant Commandant for Prevention.

[FR Doc. E6–13902 Filed 8–21–06; 8:45 am]

BILLING CODE 4910–15–P

DEPARTMENT OF HOMELAND SECURITY

Transportation Security Administration

[Docket No. TSA–2003–14702]

TSA Enforcement Docket Transfer and Change of Address

AGENCY: Transportation Security Administration, DHS.

ACTION: Notice.

SUMMARY: The Transportation Security Administration (TSA) is transferring the TSA Civil Enforcement Docket from TSA's Headquarters in Arlington, Virginia, to the Docketing Center, Office of Administrative Law Judges, United States Coast Guard (USCG ALJ Docketing Center) in Baltimore, Maryland. Accordingly, this document provides the new address for the TSA Civil Enforcement Docket at the USCG ALJ Docketing Center. This transfer and new address are effective August 22, 2006.

DATES: Effective August 22, 2006.

FOR FURTHER INFORMATION CONTACT: Christine Rosenquist, Enforcement Division Paralegal, Office of the Chief Counsel, TSA–2, Transportation Security Administration, 601 South 12th Street, Arlington, VA 22202–4220; Telephone: (571) 227–3582; Facsimile: (571) 227–1380; E-mail: *christine.rosenquist@dhs.gov*.

SUPPLEMENTARY INFORMATION:

Availability of Document

You can get an electronic copy using the Internet by:

(1) Searching the Department of Transportation's electronic Docket Management System (DMS) Web page (*http://dms.dot.gov/search*);

(2) Accessing the Government Printing Office's Web page at *http://www.gpoaccess.gov/fr/index.html;* or

(3) Visiting TSA's Security Regulations Web page at *http://www.tsa.gov* and accessing the link for "Research Center" at the top of the page.

In addition, copies are available by writing or calling the individual in the **FOR FURTHER INFORMATION CONTACT** section. Make sure to identify the docket number of this action.

Background

The TSA Civil Enforcement Docket contains the official TSA civil enforcement case materials for those enforcement actions in which an alleged violator of the Transportation Security Regulations (TSR) has requested a hearing. The TSA Civil Enforcement Docket has been maintained at TSA Headquarters in Arlington, Virginia. See 68 FR 58281 (Oct. 9, 2003).

TSA is transferring the TSA Civil Enforcement Docket from its headquarters in Arlington, Virginia, to the USCG ALJ Docketing Center in Baltimore, Maryland, effective on the date of publication of this document. The purpose of this transfer is to consolidate the functions of the TSA Civil Enforcement Docket with other aspects of the TSA civil enforcement case management, which are currently administered by the USCG Office of Administrative Law Judges under a reimbursable agreement with TSA. Under this agreement, the USCG Office of Administrative Law Judges presides over all TSA civil enforcement actions in which an alleged violator of the TSR has requested a hearing. The transfer of the TSA Civil Enforcement Docket to the USCG ALJ Docketing Center ensures that official TSA civil enforcement case materials in which a hearing has been requested will be maintained by the USCG, which administers other aspects of the TSA civil enforcement case management.

Address Change

Presently, the unrevised TSA Civil Enforcement Docket address in Arlington, Virginia, which this document changes, is contained in the following sections of 49 CFR part 1503:

- § 1503.5(b)(2)—Persons filing a formal complaint;
- § 1503.5(k)—Locations where official TSA records relating to the disposition of formal complaints are maintained;
- § 1503.5(k)(2)(C)(ii)—Location of formal complaint docket files or documents for persons with permission to review;
- § 1503.16(f)—Persons requesting a hearing in a TSA case;
- § 1503.209(b)—Persons filing an answer in a TSA case;
- § 1503.210(a)—Persons tendering documents for filing in a TSA case;
- § 1503.230(b)(2)(C)(ii)—Location of formal complaint docket files or documents for persons with permission to review; and
- § 1503.233(a)—Persons filing a notice of appeal of an initial decision.

Effective August 22, 2006, persons who desire to submit documents to the TSA Civil Enforcement Docket should address submissions to the following address instead of the address provided in 49 CFR part 1503: ALJ Docketing Center, U.S. Coast Guard, 40 S. Gay Street, Room 412, Baltimore, Maryland 21202–4022, ATTN: Enforcement Docket Clerk.

TSA will change this address in part 1503 when a final rule is published making further administrative and technical changes to TSA's regulations in 49 CFR parts 1500–1699 and will provide this new address in enforcement documents it sends to respondents. The USCG ALJ Docketing Center also will notify respondents in TSA civil enforcement actions in which an alleged violator of the TSR has requested a hearing of this transfer and the new address. Prior to TSA's revisions to the relevant sections of 49 CFR part 1503, any materials sent to the address listed in 49 CFR part 1503 will be forwarded to the Coast Guard docket address listed above.

Issued in Arlington, Virginia, on August 16, 2006.

Francine J. Kerner,

Chief Counsel.

[FR Doc. E6–13815 Filed 8–21–06; 8:45 am]

BILLING CODE 9110–05–P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR–5037–N–54]

Notice of Submission of Proposed Information Collection to OMB; Mortgagee's Certification and Application for Interest Reduction Payments

AGENCY: Office of the Chief Information Officer, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

The information is used by HUD to verify and disburse interest reduction payments to HUD approved mortgages servicing non-insured multifamily mortgages.

DATES: *Comments Due Date:* September 21, 2006.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB approval Number (2502–0445) and should be sent to: HUD Desk Officer, Office of Management and Budget, New Executive Office Building, Washington, DC 20503; fax: 202–395–6974.

FOR FURTHER INFORMATION CONTACT: Lillian Deitzer, Reports Management Officer, QDAM, Department of Housing and Urban Development, 451 Seventh

Street, SW., Washington, DC 20410; e-mail *Lillian_L_Deitzer@HUD.gov* or telephone (202) 708–2374. This is not a toll-free number. Copies of available documents submitted to OMB may be obtained from Ms. Deitzer or from HUD's Web site at *http://hlannwp031.hud.gov/po/i/icbts/collectionsearch.cfm*

SUPPLEMENTARY INFORMATION: This notice informs the public that the Department of Housing and Urban Development has submitted to OMB a request for approval of the information collection described below. This notice is soliciting comments from members of the public and affecting agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond; including through the use of appropriate automated collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

This notice also lists the following information:

Title of Proposal: Mortgagee's Certification and Application for Interest Reduction Payments.

OMB Approval Number: 2502–0445.

Form Numbers: HUD–3111.

Description of the Need for the Information and Its Proposed Use: The information is used by HUD to verify and disburse interest reduction payments to HUD approved mortgages servicing non-insured multifamily mortgages.

Frequency of Submission: Monthly.

	Number of respondents	Annual responses	×	Hours per response	=	Burden hours
Reporting Burden:	110	12		0.33		436

Total Estimated Burden Hours: 436.

Status: Extension of a currently approved collection.

Authority: Section 3507 of the Paperwork Reduction Act of 1995, 44 U.S.C. 35, as amended.

Dated: August 16, 2006.

Lillian L. Deitzer,

Department Paperwork Reduction Act Officer, Office of the Chief Information Officer.

[FR Doc. E6–13897 Filed 8–21–06; 8:45 am]

BILLING CODE 4210–67–P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No FR–5044–N–14]

Notice of Proposed Information Collection for Public Comment: Public Housing Agency Plans

AGENCY: Office of the Assistant Secretary for Public and Indian Housing, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below will be submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

PHAs are required to submit annual and 5-Year PHA Plans to HUD for tenant based assistance and operating subsidies. These Plans advise HUD, residents, and members of the public of the PHA's mission for serving low-income and very lowincome families, and the PHA's operations, programs, services, and strategies for addressing those needs.

DATES: *Comments Due Date:* October 23, 2006.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB Control number (25770226) and should be sent to: HUD Desk Officer, Office of Management and Budget, New Executive Office Building, Washington, DC 20503; facsimile: 202–395–6974.

FOR FURTHER INFORMATION CONTACT: Lillian Deitzer, Reports Management Officer, QDAM, Department of Housing and Urban Development, 451 Seventh Street, SW., Washington, DC 20410; e-mail Lillian Deitzer at *Lillian L. Deitzer@HUD.GOV* or by telephone at (202) 708–2374. (This is not a toll-free number). Copies of available documents submitted to OMB may be obtained from Ms. Deitzer or from HUD's Web site at *http://www5.hud.gov:63001/po/i/cbts/collectionsearch.cfm.*

SUPPLEMENTARY INFORMATION: This notice informs the public that the Department of Housing and Urban Development has submitted to OMB a request for approval of the Information collection described below. As required by the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35 as amended), this notice is soliciting comments from members of the public and affected agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) enhance the quality, utility, and clarity of the information to be collected; and (4) minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

The notice also lists the following information:

Title of Proposal: Public Housing Agency (PHA) Annual and 5-Year Plan.

OMB Control Number: 2577–0226.

Description of the Need for the Information and Proposed Use: Public Housing Agencies (PHAs) submit an annual plan for each fiscal year for which the PHA received tenant-based assistance and public housing operating subsidy. This plan provides a framework for local accountability and to the extent possible, an easily identifiable source by which public housing residents, participants in the housing choice voucher program, and other members of the public may locate housing and services. The PHA plan is a web-based application (allowing PHAs to retrieve the applicable templates) that allows PHAs to provide their plans to HUD via the Internet. The system allows HUD to track plans every year with limited reporting and any changes from the previous submission.

This Notice collection proposes to significantly streamline the Five-Year PHA Plan and Annual Plan process by limiting annual plan submissions to only four elements, as required by statute, and any element that is challenged. This revision further streamlines the PHA Annual Plan

process by allowing PHAs to certify when no changes have occurred to these documents since its last submission. These changes are proposed to take effect for all PHAs with fiscal years beginning April 1, 2007.

The new streamlined Plan template (HUD–50075) will be used by all PHAs, including small PHAs, high performance PHAs, standard performance PHAs, poor performance PHAs, and Section 8 only PHAs. The new streamlined Plan template eliminates the use of the HUD–50075–SF and HUD–50075–SA since all PHAs will use the revised HUD–50075. The new Five-Year and Annual Plan template is reduced from a 42-page document to a 10-page document.

The new Plan template streamlines the process for PHAs, having only to indicate whether or not a component is being updated and submit for field office review only those plan content documents required by law and/or regulation (capital improvements, demolition and disposition, deconcentration, civil rights, and challenged elements). Using the revised Plan template (HUD–50075) for annual plans, PHAs will simply indicate by checking yes or no whether or not a component in their last approved Plan is being updated with the current Five-Year or Annual Plan submission cycle. If no change has been made, significant or otherwise, to a PHA's (1) Capital Fund Program Annual Statement, (2) Demolition and Disposition Statement, or (3) Deconcentration Policy, since the submission of its last approved plan, a PHA may simply certify that there has been no change to one or more of these documents and avoid resubmission in the current cycle. Five-Year plans will continue to include all elements required under the regulations (24 CFR 903.7).

The newly revised Five-Year and Annual Plan template, as proposed, eliminates unnecessary submission requirements, helping to reduce the administrative burden on PHAs, as well as associated costs.

Agency Form Number: HUD–50075, HUD–50075–SA, HUD–50075–SF.

Members of the Affected Public: State or local government.

Estimation of the total number of hours needed to prepare the information collection including number of respondents:

PHA type—Plan type and frequency of plan	Standard performers 5–year plan every 5 years (HUD–50075)	High performers 5–year plan every 5 years (HUD–	Troubled (poor) performers 5–year plan every 5 years (HUD–	Small PHAs 5–year plan every 5 years (HUD–50075)	Section 8 only PHAs 5–year plan every 5 years (HUD–50075)	All PHAs w/ cap fund annual plan for 4 years (HUD–50075)	All PHAs w/o cap fund annual plan for 4 years (HUD–50075)
PHA Identification Page	0.1	0.1	0.1	0.1	0.1	0.1	0.1
PHA PLAN COMPONENTS:							
1. Housing Needs	4	2	0	4	2	0	0
2. Financial Resources	2	2	2	2	1	0	0
3. Deconcentration and Policies on Eligibility, Selection, and Admissions (including Site-based waiting lists)	2	2	2	2	2	0	0
4. Rent Determination Policies	1	1	1	1	1	0	
5. Operations & Management	1	0	1	0	1	0	0
6. Grievance Procedures	1	0	1	0	.5	0	0
7. Capital Improvements Needs	16	16	16	8	0	11	0
8. Demolition and Disposition	1	1	1	1	0	0	
9. Designation of Housing	1	0	1	0	0	0	0
10. Conversions of Public Housing	1	0	1	0	0	0	0
11. All Homeownership Programs including Section 8(y)	1	1	0	1	1	0	0
12. Community Service and Self-Sufficiency	2	0	2	2	2	0	0
13. Safety and Crime Prevention	0.5	0	0.5	0.5	0	0	0
14. Pets	1	0	0	0	0	0	0
15. Civil Rights Certification	0.5	0.5	0.5	0.5	0.5	0.5	0.5
16. Audit	0.5	0	0.5	0	.05	0	0
17. Asset Management	2	0	2	0	0	0	0
18. Additional Other Information: Progress meeting 5–Year goals; Resident membership of Board; RAB recommendations and PHA response; PHA statement of consistency with Consolidated Plan; PHA criteria for substantial deviations and significant amendments; List of supporting documents	4	4	4	4	2	2	2

PHA type—Plan type and frequency of plan	Standard performers 5–year plan every 5 years (HUD–50075)	High performers 5–year plan every 5 years (HUD–	Troubled (poor) performers 5–year plan every 5 years (HUD–	Small PHAs 5–year plan every 5 years (HUD–50075)	Section 8 only PHAs 5–year plan every 5 years (HUD–50075)	All PHAs w/ cap fund annual plan for 4 years (HUD–50075)	All PHAs w/o cap fund annual plan for 4 years (HUD–50075)
Use of Project-based vouchers	0.5	0.5	0.5	0.5	0.5	0	0
Budget/MOA/plan to improve (Troubled PHAs only)	0	0	2	0	0	0	0
Compliance Certifications	.05	.05	.05	.05	.05	.05	.05
BURDEN HOURS Per Response	42.15	30.15	38.15	26.65	13.7	13.65	2.65
Number of Respondents This Plan Type	369	353	271	2116	925	3109	925
Total Burden Hours All Respondents This Plan Type [1]	[1] 15,553	[1] 10,643	[1] 10,339	[1] 56,391	[2] 12,672	[2] 42,438	[2] 2,451
Total burden over five years	15,553	10,643	10,339	56,391	12,672	169,752	9,804

[1] yr
[2] yr x 4 yr

Total Burden Hours Over Five Years for all PHAs 285,154

Average Annual Burden for PHAs Each Year 57,031

Annual Burden Per PHA 14.13

Status of the Proposed Information Collection: Reinstatement of previously approved collection.

Authority: Section 3506 of the Paperwork Reduction Act of 1995, 44 U.S.C. chapter 35, as amended.

Dated: August 16, 2006.

Mary Schulhof,

Senior Program Analyst.

[FR Doc. E6–13899 Filed 8–21–06; 8:45 am]

BILLING CODE 4210–67–P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR–5037–N–55]

Notice of Submission of Proposed Information Collection to OMB; Annual Progress Report (APR) for Supportive Housing Program (SHP), Shelter Plus Care Program (S+C), and Section 8 Moderate Rehabilitation to Single Room Occupancy Dwellings (SRO) Program

AGENCY: Office of the Chief Information Officer, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

The Annual Progress Report (APR) tracks competitive homeless assistance program progress and is used to provide grant recipients and HUD with information necessary to assess program and grantee performance.

DATES: *Comments Due Date:* September 21, 2006.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB approval Number (2506–0145) and should be sent to: HUD Desk Officer, Office of Management and Budget, New Executive Office Building, Washington, DC 20503; fax: 202–395–6974.

FOR FURTHER INFORMATION CONTACT: Lillian Deitzer, Reports Management Officer, QDAM, Department of Housing and Urban Development, 451 Seventh Street, SW., Washington, DC 20410; e-mail *Lillian_L_Deitzer@HUD.gov* or telephone (202) 708–2374. This is not a toll-free number. Copies of available documents submitted to OMB may be obtained from Ms. Deitzer or from HUD's Web site at *http://hlannwp031.hud.gov/po/i/icbts/collectionsearch.cfm*

SUPPLEMENTARY INFORMATION: This notice informs the public that the Department of Housing and Urban Development has submitted to OMB a request for approval of the information collection described below. This notice is soliciting comments from members of the public and affecting agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond; including through the use of appropriate automated collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

This notice also lists the following information:

Title of Proposal: Annual Progress Report (APR) for Supportive Housing Program (SHP), Shelter Plus Care Program (S+C), and Section 8 Moderate Rehabilitation for Single Room Occupancy Dwellings (SRO) Program.

OMB Approval Number: 2506–0145.

Form Numbers: HUD–40118.

Description of the Need for the Information and Its Proposed Use: The Annual Progress Report (APR) tracks competitive homeless assistance program progress and is used to provide grant recipients and HUD with information necessary to assess program and grantee performance.

Frequency of Submission: Annually.

	Number of respondents	Annual responses	×	Hours per response	=	Burden hours
Reporting Burden:	6,000	1		33		198,000

Total Estimated Burden Hours: 198,000.

Status: Revision of a currently approved collection.

Authority: Section 3507 of the Paperwork Reduction Act of 1995, 44 U.S.C. 35, as amended.

Dated: August 16, 2006.

Lillian L. Deitzer,

Department Paperwork Reduction Act Officer, Office of the Chief Information Officer.

[FR Doc. E6–13903 Filed 8–21–06; 8:45 am]

BILLING CODE 4210–27–P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR–5037–N–56]

Notice of Submission of Proposed Information Collection to OMB; Application for the Community Development Block Grant Program for Indian Tribes and Alaska Native Villages (ICDBG)

AGENCY: Office of the Chief Information Officer, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

Application for funding of Indian and Alaska Native Community Development Block Grants for the development of decent housing, environment, and economic opportunities for low and moderate-income persons.

DATES: *Comments Due Date:* September 21, 2006.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB approval Number (2577–0191) and should be sent to: HUD Desk Officer, Office of Management and Budget, New Executive Office Building, Washington, DC 20503; fax: 202–395–6974.

FOR FURTHER INFORMATION CONTACT: Lillian Deitzer, Reports Management Officer, QDAM, Department of Housing and Urban Development, 451 Seventh Street, SW., Washington, DC 20410; e-mail *Lillian_L_Deitzer@HUD.gov* or telephone (202) 708–2374. This is not a toll-free number. Copies of available documents submitted to OMB may be obtained from Ms. Deitzer or from HUD's Web site at *http://hlannwp031.hud.gov/po/i/icbts/collectionsearch.cfm.*

SUPPLEMENTARY INFORMATION: This notice informs the public that the Department of Housing and Urban Development has submitted to OMB a request for approval of the information collection described below. This notice is soliciting comments from members of the public and affecting agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond; including through the use of appropriate automated collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

This notice also lists the following information:

Title Of Proposal: Application for the Community Development Block Grant Program for Indian Tribes and Alaska Native Villages (ICDBG).

OMB Approval Number: 2577–0191.

Form Numbers: Standard Form 424 & HUD Grant forms 2880, 2993, 4123, and 4125.

Description of the Need for the Information and Its Proposed Use: Application for funding of Indian and Alaska Native Community Development Block Grants for the development of decent housing, environment, and economic opportunities for low and moderate-income persons.

Frequency of Submission: On occasion, Monthly Quarterly, Annually.

	Number of respondents	Annual responses	x	Hours per response	=	Burden hours
Reporting Burden:	225	5		8.29		9,325

Total Estimated Burden Hours: 9,325.

Status: Extension of a currently approved collection.

Authority: Section 3507 of the Paperwork Reduction Act of 1995, 44 U.S.C. 35, as amended.

Dated: August 16, 2006.

Lillian L. Deitzer,

Department Paperwork Reduction Act Officer, Office of the Chief Information Officer.

[FR Doc. E6–13904 Filed 8–21–06; 8:45 am]

BILLING CODE 4210–67–P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR–5037–N–57]

Notice of Submission of Proposed Information Collection to OMB; Public Housing Reform;Change in Admission and Occupancy Requirements

AGENCY: Office of the Chief Information Officer, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

Public Housing Agencies will provide information required by statute for verification of earned income by minors, welfare rent reduction, over-income for small PHAs and the Community Services and Economic Self-Sufficiency Program as part of the admission and occupancy requirements authorized by the Quality Housing and Work Responsibility Act of 1998.

DATES: *Comments Due Date:* September 21, 2006.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB approval Number (2577–0230) and should be sent to: HUD Desk Officer, Office of Management and Budget, New Executive Office Building, Washington, DC 20503; fax: 202–395–6974.

FOR FURTHER INFORMATION CONTACT: Lillian Deitzer, Reports Management Officer, QDAM, Department of Housing

and Urban Development, 451 Seventh Street, SW., Washington, DC 20410; e-mail *Lillian_L_Deitzer@HUD.gov* or telephone (202) 708–2374. This is not a toll-free number. Copies of available documents submitted to OMB may be obtained from Ms. Deitzer or from HUD's Web site at *http://hlannwp031.hud.gov/po/i/icbts/collectionsearch.cfm.*

SUPPLEMENTARY INFORMATION: This notice informs the public that the Department of Housing and Urban Development has submitted to OMB a request for approval of the information collection described below. This notice is soliciting comments from members of the public and affecting agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond; including through the use of appropriate automated collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

This notice also lists the following information:

Title of Proposal: Public Housing Reform; Change in Admission and Occupancy Requirements.

OMB Approval Number: 2577–0230.

Form Numbers: None.

Description of the Need for the Information and Its Proposed Use: Public Housing Agencies will provide information required by statute for verification of earned income by minor, welfare rent reduction, over-income for small PHAs and the Community Services and Economic Self Sufficiency Program as part of the admission and occupancy requirements authorized by the Quality Housing and Work Responsibility Act of 1998.

Frequency of Submission: On occasion, Other Per applicant.

	Number of respondents	Annual responses	x	Hours per response	=	Burden Hours
Reporting Burden	4,200	1		18.21		76,520

Total Estimated Burden Hours: 76,520

Status: Extension of a currently approved collection.

Authority: Section 3507 of the Paperwork Reduction Act of 1995, 44 U.S.C. 35, as amended.

Dated: August 16, 2006.

Lillian L. Deitzer,

Department Paperwork Reduction Act Officer, Office of the Chief Information Officer.

[FR Doc. E6–13905 Filed 8–21–06; 8:45 am]

BILLING CODE 4210–67–P

DEPARTMENT OF THE INTERIOR

Fish and Wildlife Service

Receipt of Applications for Permit

AGENCY: Fish and Wildlife Service, Interior.

ACTION: Notice of receipt of applications for permit.

SUMMARY: The public is invited to comment on the following applications to conduct certain activities with endangered species and/or marine mammals.

DATES: Written data, comments or requests must be received by September 21, 2006.

ADDRESSES: Documents and other information submitted with these applications are available for review, subject to the requirements of the Privacy Act and Freedom of Information Act, by any party who submits a written request for a copy of such documents within 30 days of the date of publication of this notice to: U.S. Fish and Wildlife Service, Division of Management Authority, 4401 North Fairfax Drive, Room 700, Arlington, Virginia 22203; fax 703/358–2281.

FOR FURTHER INFORMATION CONTACT: Division of Management Authority, telephone 703/358–2104.

SUPPLEMENTARY INFORMATION:

Endangered Species

The public is invited to comment on the following applications for a permit to conduct certain activities with endangered species. This notice is provided pursuant to Section 10(c) of the Endangered Species Act of 1973, as amended (16 U.S.C. 1531 *et seq.*). Written data, comments, or requests for copies of these complete applications should be submitted to the Director (address above).

Applicant: Dallas Zoo and Dallas Aquarium, Dallas, TX, PRT–126146.

The applicant requests a permit to import two captive-born mandrills (*Mandrillus sphinx*) from the Toronto Zoo, Toronto, Canada, for the purpose of enhancement of the survival of the species.

Applicant: John L. Kling, Enid, MS, PRT–128497.

The applicant requests a permit to import the sport-hunted trophy of one male bontebok (*Damaliscus pygargus pygargus*) culled from a captive herd maintained under the management program of the Republic of South Africa, for the purpose of enhancement of the survival of the species.

Applicant: Joe T. Ellis, Omaha, IL, PRT–MA–126559–0.

The applicant requests a permit to import the sport-hunted trophy of one male bontebok (*Damaliscus pygargus pygargus*) culled from a captive herd maintained under the management program of the Republic of South Africa, for the purpose of enhancement of the survival of the species.

Applicant: Feld Entertainment, Inc, Vienna, VA, PRT–122178.

The applicant request a permit to re-export and return 3.3 captive born Bengal tigers (*Panthera tigris*) that were imported during 2004 from Spain for conservation education purposes. The tigers are returning to Spain for conservation education.

Marine Mammals

The public is invited to comment on the following applications for a permit to conduct certain activities with marine mammals. The applications were submitted to satisfy requirements of the Marine Mammal Protection Act of 1972, as amended (16 U.S.C. 1361 *et seq.*), and the regulations governing marine mammals (50 CFR Part 18). Written data, comments, or requests for copies of the complete applications or requests for a public hearing on these applications should be submitted to the Director (address above). Anyone requesting a hearing should give specific reasons why a hearing would be appropriate. The holding of such a

hearing is at the discretion of the Director.

Applicant: Warren A. Sackman, Sands Point, NY, PRT–125872.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Viscount Melville Sound polar bear population in Canada for personal, noncommercial use.

Applicant: MaryAnn Sackman, Sands Point, NY, PRT–125869.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Viscount Melville Sound polar bear population in Canada for personal, noncommercial use.

Applicant: John H. Babin, Media, PA, PRT–127255.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Lancaster Sound polar bear population in Canada for personal, noncommercial use.

Applicant: Paul Hostetler, Nokomis, FL, PRT–127336.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Lancaster Sound polar bear population in Canada for personal, noncommercial use.

Applicant: Kerry Clary, Gasburg, VA, PRT–127272.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Lancaster Sound polar bear population in Canada for personal, noncommercial use.

Applicant: Douglas Jayo, Boise, ID, PRT–127274.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Lancaster Sound polar bear population in Canada for personal, noncommercial use.

Applicant: Don Sitton, Orange, TX, PRT–77632.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Lancaster Sound polar bear population in Canada for personal, noncommercial use.

Applicant: Gary F. Silc, Ronwood, MI, PRT–127693.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Lancaster Sound polar bear population in Canada for personal, noncommercial use.

Applicant: Kent Fagen, Labose, LA, PRT–127905.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Lancaster Sound polar bear population in Canada for personal, noncommercial use.

Applicant: John Kirkland, Pacific Palisades, CA, PRT–128206.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Northern Beaufort Sea polar bear population in Canada for personal, noncommercial use.

Applicant: Jerry G. Scolari, Reno, NV, PRT–128377.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Lancaster Sound polar bear population in Canada for personal, noncommercial use.

Applicant: Donald J. Giottonini, Stockton, CA, PRT–128617.

The applicant requests a permit to import a polar bear (*Ursus maritimus*) sport hunted from the Northern Beaufort Sea polar bear population in Canada for personal, noncommercial use.

Dated: July 28, 2006.

Michael L. Carpenter,

Senior Permit Biologist, Branch of Permits, Division of Management Authority.

[FR Doc. E6–13813 Filed 8–21–06; 8:45 am]

BILLING CODE 4310–55–P

DEPARTMENT OF THE INTERIOR

Fish and Wildlife Service

Issuance of Permits

AGENCY: Fish and Wildlife Service, Interior.

ACTION: Notice of issuance of permits for marine mammals.

SUMMARY: The following permits were issued.

ADDRESSES: Documents and other information submitted with these applications are available for review, subject to the requirements of the Privacy Act and Freedom of Information Act, by any party who submits a written request for a copy of such documents to: U.S. Fish and Wildlife Service, Division of Management Authority, 4401 North Fairfax Drive, Room 700, Arlington, Virginia 22203; fax 703/358–2281.

FOR FURTHER INFORMATION CONTACT: Division of Management Authority, telephone 703/358–2104.

SUPPLEMENTARY INFORMATION: Notice is hereby given that on the dates below, as authorized by the provisions of the Marine Mammal Protection Act of 1972, as amended (16 U.S.C. 1361 *et seq.*), the Fish and Wildlife Service issued the requested permits subject to certain conditions set forth therein.

MARINE MAMMALS

Permit number	Applicant	Receipt of application *Federal Register* notice	Permit issuance date
119904	The Alaska Zoo	71 FR 12214; March 9, 2006	July 17, 2006.
122061	Fred A. Pierce	71 FR 31198; June 1, 2006	July 18, 2006.
122434	Evan S. Evanovich	71 FR 3119; June 1, 2006	July 26, 2006.
122690	Kenneth A. Hubbard	71 FR 31197; June 1, 2006	July 11, 2006.
124823	Frank J. Blaha	71 FR 31197; June 1, 2006	July 18, 2006.
125919	Fred A. Pierce	71 FR 31198; June 1, 2006	July 20, 2006.

Dated: July 28, 2006.

Michael L. Carpenter,

Senior Permit Biologist, Branch of Permits, Division of Management Authority.

[FR Doc. E6–13814 Filed 8–21–06; 8:45 am]

BILLING CODE 4310–55–P

DEPARTMENT OF THE INTERIOR

Fish and Wildlife Service

Receipt of Application for Incidental Take Permit for One Single-Family Residence in Escambia County, Florida

AGENCY: Fish and Wildlife Service, Interior.

ACTION: Notice.

SUMMARY: We, the Fish and Wildlife Service, announce the availability of an application, environmental assessment (EA), and Habitat Conservation Plan (HCP) for the taking Perdido Key beach mice (*Peromyscus polionotus trissyllepsis*) incidental to construction, and occupancy of a single-family residence on Perdido Key in Escambia County, Florida (Project). Mr. Norton Bond (Applicant) requests an incidental take permit (ITP) for a 30-year period

pursuant to section 10(a)(1)(B) of the Endangered Species Act of 1973 (Act), as amended.

DATES: Written comments on the ITP application and HCP should be sent to the Service's Regional Office (see **ADDRESSES**) and should be received on or before October 23, 2006.

ADDRESSES: Persons wishing to review the application, EA, and HCP may obtain a copy by writing the Service's Southeast Regional Office, Atlanta, Georgia. Please reference permit number TE–126078–0 in such requests. Documents will also be available for public inspection by appointment during normal business hours at the Regional Office, 1875 Century Boulevard, Suite 200, Atlanta, Georgia 30345 (Attn: Endangered Species Permits); or Field Supervisor, Fish and Wildlife Service, 1601 Balboa Avenue, Panama City, Florida 32405.

FOR FURTHER INFORMATION CONTACT: Mr. Aaron Valenta, Regional HCP Coordinator (see **ADDRESSES** above), telephone: 404/679–4144; or Ms. Sandra Sneckenberger, Field Office Project Manager, at the Panama City Field Office (see **ADDRESSES**), or at 850/769–0552, ext. 239.

SUPPLEMENTARY INFORMATION: We announce the availability of an ITP application, HCP, and EA. The EA is an assessment of the likely environmental impacts associated with this Project. Copies of these documents may be obtained by making a request, in writing, to the Regional Office (see **ADDRESSES**). This notice is provided under section 10 of the Act (16 U.S.C. 1531 *et seq.*) and National Environmental Policy Act regulations at 40 CFR 1506.6. The Applicant's HCP describes the mitigation and minimization measures proposed to address the effects of the Project to the Perdido Key beach mouse.

We specifically request information, views, and opinions from the public via this notice on the Federal action, including the identification of any other aspects of the human environment not already identified in the EA. Further, we specifically solicit information regarding the adequacy of the HCP as measured against our ITP issuance criteria found in 50 CFR parts 13 and 17.

If you wish to comment, you may submit comments by any one of several methods. Please reference permit number TE–126078–0 in such comments. You may mail comments to the Service's Regional Office (see **ADDRESSES**). You may also comment via the internet to *aaron_valenta@fws.gov*. Please include your name and return address in your internet message. If you do not receive a confirmation from us that we have received your internet message, contact us directly at either telephone number listed below (see **FOR FURTHER INFORMATION CONTACT**).

Finally, you may hand-deliver comments to either Service office listed below (see **ADDRESSES**). Our practice is to make comments, including names and home addresses of respondents, available for public review during regular business hours. Individual respondents may request that we withhold their home address from the administrative record. We will honor such requests to the extent allowable by law. There may also be other circumstances in which we would withhold from the administrative record a respondent's identity, as allowable by law. If you wish us to withhold your name and address, you must state this prominently at the beginning of your comments. We will not, however, consider anonymous comments. We will make all submissions from organizations or businesses, and from individuals identifying themselves as representatives or officials of organizations or businesses, available for public inspection in their entirety.

The area encompassed under the ITP includes a 1.05-acre parcel along the beachfront of the Gulf of Mexico. The project is located on the western portion of Perdido Key, a 16.9-mile barrier island. Perdido Key constitutes the entire historic range of the Perdido Key beach mouse.

The Perdido Key beach mouse was listed as an endangered species under the Act on June 6, 1985 (50 FR 23872). The Perdido Key beach mouse is also listed as an endangered species by the State of Florida. Critical habitat was designated for the Perdido Key beach mouse at the time of listing (50 FR 23872). On December 15, 2005, we published a proposed revision of critical habitat for the Perdido Key beach mouse and Choctawhatchee beach mouse, and a proposed critical habitat designation for the St. Andrew beach mouse (70 FR 74426).

The Perdido Key beach mouse is one of eight species of the old field mouse that occupy coastal rather than inland areas and are referred to as beach mice. It is one of five subspecies of beach mice endemic to the gulf coast of Alabama and northwestern Florida. Two other extant subspecies of beach mouse and one extinct subspecies are known from the Atlantic coast of Florida. As do other beach mouse subspecies, Perdido Key beach mice spend their entire lives within the coastal beach and dune ecosystem.

Beach mouse habitat consists of a mix of interconnected habitats, including primary, secondary, and scrub dunes including interdunal areas. Beach mice are nocturnal and dig burrows within the dune system where vegetation provides cover. They forage for food throughout the dune system, feeding primarily on seeds and fruits of dune plants, including bluestem (*Schizachyrium maritimum*), sea oats (*Uniola paniculata*), and evening primrose (*Oenothera humifusa*). Insects are also an important part of their diet.

Beach mice along the gulf coasts of Florida and Alabama generally live about 9 months and become mature between 25 and 35 days. Beach mice are monogamous, pairing for life. Gestation averages 24 days and the average litter size is three to four pups. Peak breeding season for beach mice is in autumn and winter, declining in spring, and falling to low levels in summer. In essence, mature female beach mice can produce a litter every month and live about 8 months.

Several subspecies of beach mice have been listed as endangered species, primarily because of the fragmentation, adverse alteration, and loss of habitat due to coastal development. The threat of development-related habitat loss continues to increase. Other contributing factors include low population numbers, habitat loss from a variety of reasons (including hurricanes), predation or competition by animals related to human development (cats and house mice), and the existing strength or lack of regulations regarding coastal development.

The EA considers the environmental consequences of two alternatives and the proposed action. The proposed action alternative is issuance of the ITP and implementation of the HCP as submitted by the Applicants. The HCP will provide for: (1) Minimizing the footprint of the development; (2) restoring, preserving, and maintaining onsite beach mouse habitat at the project site; (3) incorporating requirements in the operation of the residence that provide for the conservation of the beach mouse; (4) monitoring the status of the beach mouse at the project site post-construction; (5) donating funds initially and on an annual basis to Perdido Key beach mouse conservation efforts; (6) including conservation measures to protect nesting sea turtles and non-breeding piping plover; and (7) funding the mitigation measures.

We will evaluate the HCP and comments submitted thereon to determine whether the application meets the requirements of section 10(a)

of the Act. If it is determined that those requirements are met, the ITP will be issued for the incidental take of the Perdido Key beach mouse. We will also evaluate whether issuance of the section 10(a)(1)(B) ITP complies with section 7 of the Endangered Species Act by conducting an intra-Service section 7 consultation. The results of this consultation, in combination with the above findings, will be used in the final analysis to determine whether or not to issue the ITP.

Dated: August 8, 2006.

Cynthia K. Dohner,

Acting Regional Director, Southeast Region.

[FR Doc. E6–13827 Filed 8–21–06; 8:45 am]

BILLING CODE 4310–55–P

DEPARTMENT OF THE INTERIOR

Bureau of Land Management

[CO–03–840–1610–241A]

Canyons of the Ancients National Monument Advisory Committee Meeting

AGENCY: Bureau of Land Management, Interior.

ACTION: Notice of meeting.

SUMMARY: In accordance with the Federal Land Policy and Management Act (FLPMA) and the Federal Advisory Committee Act of 1972 (FACA), the U.S. Department of the Interior, Bureau of Land Management (BLM) Canyons of the Ancients National Monument (Monument) Advisory Committee (Committee), will meet as directed below.

DATES: Meetings will be held September 28–29, 2006 and October 10, 2006 at the Anasazi Heritage Center in Dolores, Colorado. Meetings will begin at 9 a.m. each day. Two public comment periods are planned for each day and will begin at approximately 10:30 a.m. and 3 p.m. The meeting will adjourn at approximately 3:30 p.m. each day.

FOR FURTHER INFORMATION CONTACT: LouAnn Jacobson, Monument Manager or Heather Musclow, Monument Planner, Anasazi Heritage Center, 27501 Hwy 184, Dolores, Colorado 81323; Telephone (970) 882–5600.

SUPPLEMENTARY INFORMATION: The eleven member committee provides counsel and advice to the Secretary of the Interior, through the BLM, concerning development and implementation of a management plan developed in accordance with FLMPA, for public lands within the Monument. At each meeting, topics we plan to discuss include the planning schedule, planning issues and management concerns, and other issues as appropriate.

The meetings are open to the public and include a time set aside for public comment. Interested persons may make oral statements at the meeting or submit written statements at any meeting. Per-person time limits for oral statements may be set to allow all interested persons an opportunity to speak.

Summary minutes of all Committee meetings will be maintained at the Anasazi Heritage Center in Dolores, Colorado. They are available for public inspection and reproduction during regular business hours within thirty (30) days of the meeting. In addition, minutes and other information concerning the Committee can be obtained from the Monument planning Web site at: *http://www.blm.gov/rmp/canm* which will be updated following each Committee meeting.

Dated: August 15, 2006.

LouAnn Jacobson,

Monument Manager, Canyons of the Ancients National Monument.

[FR Doc. E6–13830 Filed 8–21–06; 8:45 am]

BILLING CODE 4310–JB–P

DEPARTMENT OF THE INTERIOR

Bureau of Land Management

[CA–310–0777–XX]

Notice of Public Meeting: Northeast California Resource Advisory Council

AGENCY: Bureau of Land Management, Interior.

ACTION: Notice of public meeting.

SUMMARY: In accordance with the Federal Land Policy and Management Act of 1976 (FLPMA), and the Federal Advisory Committee Act of 1972 (FACA), the U.S. Department of the Interior, Bureau of Land Management (BLM) Northeast California Resource Advisory Council will meet as indicated below.

DATES: The meeting will be held Thursday and Friday, Sept. 21 and 22, 2006, in the Conference Room of the Bureau of Land Management Surprise Field Office, 602 Cressler St., Cedarville, Calif. On Sept. 21, the members will convene at 10 a.m. and depart on a field trip to public lands managed by the Surprise Field Office. On Sept. 22, the meeting begins at 8 a.m. Members of the public are welcome to attend the tour and meeting. Field tour participants must provide their own transportation and lunch. Time for public comment is reserved for 11 a.m. on Friday, Sept. 22.

FOR FURTHER INFORMATION CONTACT: Tim Burke, BLM Alturas Field Office Manager, (530) 233–4666; or BLM Public Affairs Officer Joseph J. Fontana, (530) 252–5332.

SUPPLEMENTARY INFORMATION: The 15-member council advises the Secretary of the Interior, through the BLM, on a variety of planning and management issues associated with public land management in Northeast California and the northwest corner of Nevada. At this meeting, agenda topics will include a report on public comments and responses to draft resource management plans for the Alturas, Eagle Lake and Surprise field offices. Members will also discuss a status report on development of a management plan and environmental impact statement for sagebrush-steppe ecosystems, an update on a rail banking proposal for the abandoned Modoc Rail Line, information on a proposal to develop a wildlife water source in a wilderness area and formation of a Recreation Resource Advisory Council in California. All meetings are open to the public. Members of the public may present written comments to the council. Each formal council meeting will have time allocated for public comments. Depending on the number of persons wishing to speak, and the time available, the time for individual comments may be limited. Members of the public are welcome on field tours, but they must provide their own transportation and lunch. Individuals who plan to attend and need special assistance, such as sign language interpretation and other reasonable accommodations, should contact the BLM as provided above.

Dated: August 11, 2006.

Joseph J. Fontana,

Public Affairs Officer.

[FR Doc. E6–13817 Filed 8–21–06; 8:45 am]

BILLING CODE 4310–40–P

INTERNATIONAL TRADE COMMISSION

[Investigation Nos. 731–TA–540 and 541 (Second Review)]

Certain Welded Stainless Steel Pipe From Korea and Taiwan

Determination

On the basis of the record [1] developed in the subject five-year reviews, the United States International Trade Commission (Commission) determines,

[1] The record is defined in sec. 207.2(f) of the Commission's Rules of Practice and Procedure (19 CFR 207.2(f)).

pursuant to section 751(c) of the Tariff Act of 1930 (19 U.S.C. 1675(c)) (the Act), that revocation of the antidumping duty orders on welded ASTM A–312 stainless steel pipe from Korea and Taiwan would be likely to lead to continuation or recurrence of material injury to an industry in the United States within a reasonably foreseeable time.

Background

The Commission instituted these reviews on September 1, 2005 (70 FR 52124) and determined on December 5, 2005, that it would conduct full reviews (70 FR 73452, December 12, 2005). Notice of the scheduling of the Commission's reviews and of a public hearing to be held in connection therewith was given by posting copies of the notice in the Office of the Secretary, U.S. International Trade Commission, Washington, DC, and by publishing the notice in the **Federal Register** on February 16, 2006 (71 FR 8311). The hearing was held in Washington, DC, on June 20, 2006, and all persons who requested the opportunity were permitted to appear in person or by counsel.

The Commission transmitted its determination in these reviews to the Secretary of Commerce on August 16, 2006. The views of the Commission are contained in USITC Publication 3877 (August 2006), entitled *Certain Welded Stainless Steel Pipe from Korea and Taiwan:* Investigation Nos. 731–TA–540 and 541 (*Second Review*).

Issued: August 16, 2006.

By order of the Commission.

Marilyn R. Abbott,

Secretary to the Commission.

[FR Doc. E6–13873 Filed 8–21–06; 8:45 am]

BILLING CODE 7020–02–P

INTERNATIONAL TRADE COMMISSION

Government in the Sunshine Act Meeting Notice

[USITC SE–06–051]

AGENCY HOLDING THE MEETING: United States International Trade Commission.

TIME AND DATE: September 1, 2006 at 9:30 a.m.

PLACE: Room 101, 500 E Street SW., Washington, DC 20436; Telephone: (202) 205–2000.

STATUS: Open to the public.

MATTERS TO BE CONSIDERED:

1. Agenda for future meetings: none.
2. Minutes.
3. Ratification List.
4. Inv. No. 701–TA–442 and 443 and 731–TA–1095–1097 (Final) (Certain Lined Paper School Supplies from China, India, and Indonesia)—briefing and vote. (The Commission is currently scheduled to transmit its determination and Commissioners' opinions to the Secretary of Commerce on or before September 21, 2006).
5. Inv. Nos. 731–TA–703 and 705 (Second Review) (Furfuryl Alcohol from China and Thailand)—briefing and vote. (The Commission is currently scheduled to transmit its determination and Commissioners' opinions to the Secretary of Commerce on or before September 13, 2006).
6. Outstanding action jackets: none.

In accordance with Commission policy, subject matter listed above, not disposed of at the scheduled meeting, may be carried over to the agenda of the following meeting.

Issued: August 17, 2006.

By order of the Commission.

Marilyn R. Abbott,

Secretary to the Commission.

[FR Doc. 06–7092 Filed 8–18–06; 11:24 am]

BILLING CODE 7020–02–P

DEPARTMENT OF JUSTICE

Bureau of Alcohol, Tobacco, Firearms and Explosives

[OMB Number 1140–0043]

Agency Information Collection Activities: Proposed Collection; Comments Requested

AGENCY: Bureau of Alcohol, Tobacco, Firearms and Explosives, DOJ.

ACTION: 60-Day Notice of Information Collection Under Review: National Tracing Center Trace Request and Obliterated Serial Number Trace Request.

The Department of Justice (DOJ), Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF), has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The proposed information collection is published to obtain comments from the public and affected agencies. Comments are encouraged and will be accepted for "sixty days" until October 23, 2006. This process is conducted in accordance with 5 CFR 1320.10.

If you have comments especially on the estimated public burden or associated response time, suggestions, or need a copy of the proposed information collection instrument with instructions or additional information, please contact Ben Hayes, ATF National Tracing Center, 244 Needy Road, Martinsburg, WV 25401.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address one or more of the following four points:

—Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

—Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

—Enhance the quality, utility, and clarity of the information to be collected; and

—Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

Overview of this information collection:

(1) *Type of Information Collection:* Extension of a currently approved collection.

(2) *Title of the Form/Collection:* National Tracing Center Trace Request and Obliterated Serial Number Trace Request.

(3) *Agency form number, if any, and the applicable component of the Department of Justice sponsoring the collection:* Form Number: ATF F 3312.1 and ATF F 3312.2. Bureau of Alcohol, Tobacco, Firearms and Explosives.

(4) *Affected public who will be asked or required to respond, as well as a brief abstract: Primary:* Federal Government. *Other:* State, local, or tribal government. The forms are used by the Federal, State, Local, and International law enforcement community to request that ATF trace firearms used, or suspected to have been used, in crimes.

(5) *An estimate of the total number of respondents and the amount of time estimated for an average respondent to respond:* It is estimated that 112,123 respondents will complete each form within 6 minutes.

(6) *An estimate of the total public burden (in hours) associated with the collection:* There are an estimated 22,425 annual total burden hours associated with this collection.

If additional information is required contact: Lynn Bryant, Department Clearance Officer, Policy and Planning Staff, Justice Management Division, Department of Justice, Patrick Henry Building, Suite 1600, 601 D Street, NW., Washington, DC 20530.

Dated: August 17, 2006.

Lynn Bryant,

Department Clearance Officer, Department of Justice.

[FR Doc. E6–13907 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–FY–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

[OMB Number 1117–0033]

Agency Information Collection Activities: Proposed collection; Comments Requested:

AGENCY: Drug Enforcement Administration, DOJ.

ACTION: 60-Day Notice of Information Collection Under Review: Report of Mail Order Transaction.

The Department of Justice (DOJ), Drug Enforcement Administration (DEA), has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The proposed information collection is published to obtain comments from the public and affected agencies. Comments are encouraged and will be accepted for "sixty days" until October 23, 2006. This process is conducted in accordance with 5 CFR 1320.10.

If you have comments, especially on the estimated public burden or associated response time, suggestions, or need a copy of the proposed information collection instrument with instructions or additional information, please contact Mark W. Caverly, Chief, Liaison and Policy Section, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address one or more of the following four points:

—Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

—Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

—Enhance the quality, utility, and clarity of the information to be collected; and

—Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

Overview of this information collection:

(1) T*ype of Information Collection:* Extension of a currently approved collection.

(2) *Title of the Form/Collection:* Report of Mail Order Transaction.

(3) *Agency form number, if any, and the applicable component of the Department of Justice sponsoring the collection: Form Number:* none. Office of Diversion Control, Drug Enforcement Administration, Department of Justice.

(4) *Affected public who will be asked or required to respond, as well as a brief abstract: Primary:* Business or other for-profit. *Other:* None.

Abstract: The Comprehensive Methamphetamine Control Act of 1996 (Pub. L. 104–237) (MCA) amended the Controlled Substances Act to require that each regulated person who engages in a transaction with a non-regulated person which involves ephedrine, pseudoephedrine, or phenylpropanolamine (including drug products containing these chemicals) and uses or attempts to use the Postal Service or any private or commercial carrier shall, on a monthly basis, submit a report of each such transaction conducted during the previous month to the Attorney General.

(5) *An estimate of the total number of respondents and the amount of time estimated for an average respondent to respond:* It is estimated that there are twenty-four (24) total respondents for this information collection. Fourteen (14) responded on paper at 1 hour for each response and ten (10) responded at 15 minutes per form, for an annual burden of 168 hours for paper forms and 30 hours for electronic forms.

(6) *An estimate of the total public burden (in hours) associated with the collection:* It is estimated that there are 198 annual burden hours associated with this collection.

If additional information is required contact: Lynn Bryant, Department Clearance Officer, United States Department of Justice, Justice Management Division, Policy and Planning Staff, Patrick Henry Building, Suite 1600, 601 D Street, NW., Washington, DC 20530.

Dated: August 17, 2006.

Lynn Bryant,

Department Clearance Officer, Department of Justice.

[FR Doc. E6–13906 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

[OMB Number 1117–0029]

Agency Information Collection Activities: Proposed Collection; Comments Requested

AGENCY: Drug Enforcement Administration, DOJ.

ACTION: 60-Day Notice of Information Collection Under Review: Annual Reporting Requirement for Manufacturers of Listed Chemicals.

The Department of Justice (DOJ), Drug Enforcement Administration (DEA), has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The proposed information collection is published to obtain comments from the public and affected agencies. Comments are encouraged and will be accepted for "sixty days" until October 23, 2006. This process is conducted in accordance with 5 CFR 1320.10.

If you have comments, especially on the estimated public burden or associated response time, suggestions, or need a copy of the proposed information collection instrument with instructions or additional information, please contact Mark W. Caverly, Chief, Liaison and Policy Section, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address one or more of the following four points:

—Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

—Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

—Enhance the quality, utility, and clarity of the information to be collected; and
—Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

Overview of This Information Collection:

(1) *Type of Information Collection:* Extension of a currently approved collection.

(2) *Title of the Form/Collection:* Annual Reporting Requirement for Manufacturers of Listed Chemicals.

(3) *Agency form number, if any and the applicable component of the Department sponsoring the collection: Form number:* none. Office of Diversion Control, Drug Enforcement Administration, U.S. Department of Justice.

(4) *Affected public who will be asked or required to respond, as well as a brief abstract: Primary:* Business or other for-profit. *Other:* None. *Abstract:* This information collection permits the Drug Enforcement Administration to monitor the volume and availability of domestically manufactured listed chemicals. These listed chemicals may be subject to diversion for the illicit production of controlled substances. This information collection is required by law.

(5) *An estimate of the total number of respondents and the amount of time estimated for an average respondent to respond:* It is estimated that there are one hundred (100) total respondents for this information collection. One hundred (100) persons respond annually at 4 hours per response.

(6) *An estimate of the total public burden (in hours) associated with the collection:* It is estimated that there are 400 annual burden hours associated with this collection.

If additional information is required contact: Lynn Bryant, Department Clearance Officer, United States Department of Justice, Justice Management Division, Policy and Planning Staff, Patrick Henry Building, Suite 1600, 601 D Street, NW., Washington, DC 20530.

Dated: August 17, 2006.

Lynn Bryant,

Department Clearance Officer, U.S. Department of Justice.

[FR Doc. E6–13908 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Manufacturer of Controlled Substances; Notice of Application

Pursuant to § 1301.33(a) of Title 21 of the Code of Federal Regulations (CFR), this is notice that on May 8, 2006, Aldrich Chemical Company Inc., DBA Isotec, 3858 Benner Road, Miamisburg, OH 45342–4304, made application by renewal, to the Drug Enforcement Administration (DEA) to be registered as a bulk manufacturer of the basic classes of controlled substances listed in Schedule I and II:

Drug	Schedule
Cathinone (1235)	I
Methcathinone (1237)	I
N-Ethylamphetamine (1475)	I
N,N-Dimethylamphetamine (1480)	I
Aminorex (1585)	I
Gamma hydroxybutyric acid (2010).	I
Methaqualone (2565)	I
Ibogaine (7260)	I
Lysergic acid dethylamide (7315)	I
Tetrahydrocannabinols (7370)	I
Mescaline (7381)	I
2,5-Dimethoxyamphetamine (7396).	I
3,4-Methylenedioxyamphetamine (7400).	I
3,4-Methylenedioxy-N-ethylamphetamine (7404).	I
3,4-Methylenedioxy-methamphetamine (7405).	I
4-Methoxyamphetamine (7411)	I
Psilocybin (7437)	I
Psilocyn (7438)	I
N-Ethyl-1-phenylcyclohexylamine (7455).	I
Dihydromorphine (9145)	I
Normorphine (9313)	I
Acetylmethadol (9601)	I
Alphacetylmethadol Except Levo-Alphacetylmethadol (9603).	I
Normethadone (9635)	I
Norpipanone (9636)	I
3-Methylfentanyl (9813)	I
Amphetamine (1100)	II
Methamphetamine (1105)	II
Methylphenidate (1724)	II
Amobarbital (2125)	II
Pentobarbital (2270)	II
Secobarbital (2315)	II
1-Phenylcyclohexylamine (7460)	II
Phencyclidine (7471)	II
Phenylacetone (8501)	II
1-Piperidinocyclohexanecarbonitrile (8603).	II
Cocaine (9041)	II
Codeine (9050)	II
Dihydrocodeine (9120)	II
Oxycodone (9143)	II
Hydromorphone (9150)	II
Benzoylecgonine (9180)	II
Ethylmorphine (9190)	II
Hydrocodone (9193)	II
Isomethadone (9226)	II
Meperidine (9230)	II
Meperidine intermediate-A (9232)	II
Merperidine intermediate-B (9233)	II
Methadone (9250)	II
Methadone intermediate (9254)	II
Dextropropoxyphene, bulk, (non-dosage forms) (9273).	II
Morphine (9300)	II
Normorphine (9313)	II
Thebaine (9333)	II
Levo-alphacetylmethadol (9648)	II
Oxymorphone (9652)	II
Fentanyl (9801)	II

The company plans to manufacture small quantities of the listed controlled substances to produce isotope labeled standards for drug testing and analysis.

Any other such applicant and any person who is presently registered with DEA to manufacture such a substance may file comments or objections to the issuance of the proposed registration pursuant to 21 CFR 1301.33(a).

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA Federal Register Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA Federal Register Representative/ODL, 2401 Jefferson-Davis Highway, Alexandria, VA 22301; and must be filed no later than October 23, 2006.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13849 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Manufacturer of Controlled Substances; Notice of Application

Pursuant to § 1301.33(a) of Title 21 of the Code of Federal Regulations (CFR), this is notice that on April 25, 2006, American Radiolabeled Chemicals, Inc., 101 Arc Drive, St. Louis, Missouri 63146, made application by renewal, and by correspondence dated June 2, 2006, to the Drug Enforcement Administration (DEA) for registration as a bulk manufacturer of the basic classes of controlled substances listed in Schedules I and II:

Drug	Schedule
Gamma hydroxybutyric acid (2010).	I
Ibogaine (7260)	I
Lysergic acid diethylamide (7315)	I
Tetrahydrocannabinols (7370)	I
Dimethyltryptamine (7435)	I
Dihydromorphine (9145)	I
Amphetamine (1100)	II
Methamphetamine (1105)	II
Amobarbital (2125)	II
Phencyclidine (7471)	II
Phenylacetone (8501)	II
Cocaine (9041)	II
Codeine (9050)	II
Dihydrocodeine(9120)	II
Oxycodone (9143)	II
Hydromorphone (9150)	II
Ecgonine (9180)	II
Hydrocodone (9193)	II
Meperidine (9230)	II
Metazocine (9240)	II
Morphine (9300)	II
Thebaine (9333)	II
Oxymorphone (9652)	II
Fentanyl (9801)	II

The company plans to manufacture small quantities of the listed controlled substances as radiolabeled compounds for biochemical research.

Any other such applicant and any person who is presently registered with DEA to manufacture such a substance may file comments or objections to the issuance of the proposed registration pursuant to 21 CFR 1301.33(a).

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA Federal Register Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA Federal Register Representative/ ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than October 23, 2006.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13840 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Importer of Controlled Substances; Notice of Application

Pursuant to 21 U.S.C. 958(i), the Attorney General shall, prior to issuing a registration under this Section to a bulk manufacturer of a controlled substance in Schedule I or II and prior to issuing a registration under 21 U.S.C. 952(a)(2) authorizing the importation of such a substance, provide manufacturers holding registrations for the bulk manufacture of the substance an opportunity for a hearing.

Therefore, in accordance with 21 CFR 1301.34(a), this is notice that on March 31, 2006, Applied Science Labs, Division of Alltech Associates Inc., 2701 Carolean Industrial Drive, State College, Pennsylvania 16801, made application by renewal to the Drug Enforcement Administration (DEA) to be registered as an importer of the basic classes of controlled substances listed in Schedule I and II:

Drug	Schedule
Heroin (9200)	I
Cocaine (9041)	II
Codeine (9050)	II
Meperidine (9230)	II
Methadone (9250)	II
Morphine (9300)	II

The company plans to import these controlled substances for the manufacture of reference standards.

Any manufacturer who is presently, or is applying to be, registered with DEA to manufacture such basic classes of controlled substances may file comments or objections to the issuance of the proposed registration and may, at the same time, file a written request for a hearing on such application pursuant to 21 CFR 1301.43 and in such form as prescribed by 21 CFR 1316.47.

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention; DEA Federal Register Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA Federal Register Representative/ ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than September 21, 2006.

This procedure is to be conducted simultaneously with, and independent of, the procedures described in 21 CFR 1301.34(b), (c), (d), (e) and (f). As noted in a previous notice published in the **Federal Register** on September 23, 1975, (40 FR 43745–46), all applicants for registration to import a basic class of any controlled substances in Schedule I or II are and will continue to be required to demonstrate to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, that the requirements for such registration pursuant to 21 U.S.C. 958(a), 21 U.S.C. 823(a), and 21 CFR 1301.34(b), (c), (d), (e) and (f) are satisfied.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13843 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Manufacturer of Controlled Substances; Notice of Application

Pursuant to § 1301.33(a) of Title 21 of the Code of Federal Regulations (CFR), this is notice that on June 6, 2006, Cambrex North Brunswick, Inc., Technology Centre of New Jersey, 661 Highway One, North Brunswick, NJ 08902, made application by renewal to the Drug Enforcement Administration (DEA) to be registered as a bulk manufacturer of the basic classes of controlled substances listed in Schedule I and II:

Drug	Schedule
N-Ethylamphetamine (1475)	I
Tetrahydrocannabinols (7370)	I
2,5–Dimethoxyamphetamine (7396).	I
3,4–Methylenedioxyamphetamine (7400).	I
4–Methoxyamphetamine (7411)	I
Amphetamine (1100)	II
Methamphetamine (1105)	II
Methylphenidate (1724)	II
Pentobarbital (2270)	II
Phenylacetone (8501)	II
Hydromorphone (9150)	II
Hydrocodone (9193)	II
Methadone (9250)	II
Methadone Intermediate (9254)	II
Morphine (9300)	II
Sufentanil (9740)	II
Fentanyl (9801)	II

The company plans to manufacture the listed controlled substances in bulk for distribution to its customers.

Any other such applicant and any person who is presently registered with DEA to manufacture such a substance may file comments or objections to the issuance of the proposed registration pursuant to 21 CFR 1301.33(a).

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA Federal Register Representative/ ODL;

or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA Federal Register Representative/ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than October 23, 2006.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13844 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Importer of Controlled Substances; Notice of Application

Pursuant to 21 U.S.C. 958(i), the Attorney General shall, prior to issuing a registration under this Section to a bulk manufacturer of a controlled substance in Schedule I or II and prior to issuing a registration under 21 U.S.C. 952(a)(2) authorizing the importation of such a substance, provide manufacturers holding registrations for the bulk manufacture of the substance an opportunity for a hearing.

Therefore, in accordance with 21 CFR 1301.34(a), this is notice that on June 6, 2006, Cambrex North Brunswick, Inc., Technology Centre of New Jersey, 661 Highway One, North Brunswick, New Jersey 08902, made application by renewal to the Drug Enforcement Administration (DEA) to be registered as an importer of Phenylacetone (8501), a basic class of controlled substance listed in Schedule II.

The company plans to import the listed controlled substance to manufacture amphetamine.

Any manufacturer who is presently, or is applying to be, registered with DEA to manufacture such basic classes of controlled substances may file comments or objections to the issuance of the proposed registration and may, at the same time, file a written request for a hearing on such application pursuant to 21 CFR 1301.43 and in such form as prescribed by 21 CFR 1316.47.

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA Federal Register Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA Federal Register Representative/ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than September 21, 2006.

This procedure is to be conducted simultaneously with, and independent of, the procedures described in 21 CFR 1301.34(b), (c), (d), (e) and (f). As noted in a previous notice published in the **Federal Register** on September 23, 1975, (40 FR 43745–46), all applicants for registration to import a basic class of any controlled substances in Schedule I or II are and will continue to be required to demonstrate to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, that the requirements for such registration pursuant to 21 U.S.C. 958(a), 21 U.S.C. 823(a), and 21 CFR 1301.34(b), (c), (d), (e) and (f) are satisfied.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13845 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Manufacturer of Controlled Substances; Notice of Application

Pursuant to § 1301.33(a) of Title 21 of the Code of Federal Regulations (CFR), this is notice that on May 15, 2006, Chemic Laboratories, Inc., 480 Neponset Street, Building 7C, Canton, Massachusetts 02021, made application by renewal to the Drug Enforcement Administration (DEA) to be registered as a bulk manufacturer of Cocaine (9041), a basic class of controlled substance listed in Schedule II.

The company plans to manufacture small quantities of a cocaine derivative for distribution to its customers for the purpose of research.

Any other such applicant and any person who is presently registered with DEA to manufacture such a substance may file comments or objections to the issuance of the proposed registration pursuant to 21 CFR 1301.33(a).

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA **Federal Register** Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA **Federal Register** Representative/ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than October 23, 2006.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13850 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Importer of Controlled Substances; Notice of Application

Pursuant to 21 U.S.C. 958(i), the Attorney General shall, prior to issuing a registration under this Section to a bulk manufacturer of a controlled substance in Schedule I or II and prior to issuing a regulation under 21 U.S.C. 952(a)(2)(B) authorizing the importation of such a substance, provide manufacturers holding registrations for the bulk manufacture of the substance an opportunity for a hearing.

Therefore, in accordance with 21 CFR 1301.34(a), this is notice that on June 21, 2006, Clinical Trial Services (US), 2661 Audubon Road, Audubon, Pennsylvania 19403, made application by renewal to the Drug Enforcement Administration (DEA) to be registered as an importer of the basic classes of controlled substances listed in Schedule II:

Drug	Schedule
Oxycodone (9143)	II
Fentanyl (9801)	II

The company plans to import small quantities of the listed controlled substance in dosage form to conduct clinical trials.

Any manufacturer who is presently, or is applying to be, registered with DEA to manufacture such basic classes of controlled substances may file comments or objections to the issuance of the proposed registration and may, at the same time, file a written request for a hearing on such application pursuant to 21 CFR 1301.43 and in such form as prescribed by 21 CFR 1316.47.

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA Federal Register Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention:

DEA Federal Register Representative/ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than September 21, 2006.

This procedure is to be conducted simultaneously with and independent of the procedures described in 21 CFR 1301.34(b), (c), (d), (e) and (f). As noted in a previous notice published in the **Federal Register** on September 23, 1975, (40 FR 43745–46), all applicants for registration to import a basic class of any controlled substance listed in Schedule I or II are, and will continue to be required to demonstrate to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, that the requirements for such registration pursuant to 21 U.S.C. 958(a), 21 U.S.C. 823(a), and 21 CFR 1301.34(b), (c), (d), (e) and (f) are satisfied.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13846 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Manufacturer of Controlled Substances; Notice of Application

Pursuant to § 1301.33(a) of Title 21 of the Code of Federal Regulations (CFR), this is notice that on November 2, 2005, Noramco Inc., Division of Ortho-McNeil, Inc., 500 Old Swedes Landing Road, Wilmington, Delaware 19801, made application by renewal, and by letter, to the Drug Enforcement Administration (DEA) for registration as a bulk manufacturer of the basic classes of controlled substances listed in Schedule I and II:

Drug	Schedule
Morphine-N-Oxide (9307)	I
Codeine-N-Oxide (9053)	I
Dihydromorphine (9145)	II
Amphetamine (1100)	II
Methylphenidate (1724)	II
Codeine (9050)	II
Dihydrocodeine (9120)	II
Oxycodone (9143)	II
Hydrocodone (9193)	II
Morphine (9300)	II
Thebaine (9333)	II
Oxymorphone (9652)	II

The company plans to bulk manufacture the above listed controlled substances for sale and distribution to manufacturers for product development and formulation.

Any other such applicant and any person who is presently registered with DEA to manufacture such a substance may file comments or objections to the issuance of the proposed registration pursuant to 21 CFR 1301.33(a).

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA Federal Register Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA Federal Register Representative/ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than October 23, 2006.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13838 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Importer of Controlled Substances; Notice of Application

Pursuant to 21 U.S.C. 958(i), the Attorney General shall, prior to issuing a registration under this Section to a bulk manufacturer of a controlled substance in Schedule I or II and prior to issuing a regulation under 21 U.S.C. 952(a) authorizing the importation of such a substance, provide manufacturers holding registrations for the bulk manufacture of the substance an opportunity for a hearing.

Therefore, in accordance with 21 CFR 1301.34(a), this is notice that on April 5, 2006, Research Triangle Institute, Kenneth H. Davis Jr., Hermann Building East Institute Drive, P.O. Box 12194, Research Triangle Park, North Carolina 27709, made application by renewal to the Drug Enforcement Administration (DEA) to be registered as an importer of Cocaine (9041), a basic class of controlled substance listed in Schedule II.

The company plans to import small quantities of the listed controlled substances for the National Institute of Drug Abuse and other clients.

Any manufacturer who is presently, or is applying to be, registered with DEA to manufacture such basic classes of controlled substances may file comments or objections to the issuance of the proposed registration and may, at the same time, file a written request for a hearing on such application pursuant to 21 CFR 1301.43 and in such form as prescribed by 21 CFR 1316.47.

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA Federal Register Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA Federal Register Representative/ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than September 21, 2006.

This procedure is to be conducted simultaneously with and independent of the procedures described in 21 CFR 1301.34(b), (c), (d), (e) and (f). As noted in a previous notice published in the **Federal Register** on September 23, 1975, (40 FR 43745–46), all applicants for registration to import a basic class of any controlled substance listed in Schedule I or II are, and will continue to be required to demonstrate to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, that the requirements for such registration pursuant to 21 U.S.C. 958(a), 21 U.S.C. 823(a), and 21 CFR 1301.34(b), (c), (d), (e) and (f) are satisfied.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13839 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Manufacturer of Controlled Substances; Notice of Application

Pursuant to § 1301.33(a) of Title 21 of the Code of Federal Regulations (CFR), this is notice that on March 21, 2006, Research Triangle Institute, Kenneth H. Davis Jr., Hermann Building, P.O. Box 12194, East Institute Drive, Research Triangle, North Carolina 27709, made application by renewal to the Drug Enforcement Administration (DEA) for registration as a bulk manufacturer of the basic classes of controlled substances listed in Schedule I and II:

Drug	Schedule
Marihuana (7360)	I
Cocaine (9041)	II

The Institute will manufacture small quantities of cocaine and marihuana derivatives for use by their customers in analytical kits, reagents, and reference standards as directed by NIDA.

Any other such applicant and any person who is presently registered with DEA to manufacture such a substance may file comments or objections to the issuance of the proposed registration pursuant to 21 CFR 1301.33(a).

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA Federal Register Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA Federal Register Representative/ ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than October 23, 2006.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13841 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Importer of Controlled Substances; Notice of Application

Pursuant to 21 U.S.C. 958(i), the Attorney General shall, prior to issuing a registration under this Section to a bulk manufacturer of a controlled substance in Schedule I or II and prior to issuing a regulation under 21 U.S.C. 952(a)(2)(B) authorizing the importation of such a substance, provide manufacturers holding registrations for the bulk manufacture of the substance an opportunity for a hearing.

Therefore, in accordance with 21 CFR 1301.34(a), this is notice that on May 12, 2006, Wildlife Laboratories, Inc., 1401 Duff Drive, Suite 400, Fort Collins, Colorado 80524, made application to the Drug Enforcement Administration (DEA) by renewal to be registered as an importer of Etorphine Hydrochloride (9059), a basic class of controlled substance listed in Schedule II.

The company plans to import the listed controlled substance for sale to its customers.

Any manufacturer who is presently, or is applying to be, registered with DEA to manufacture such basic classes of controlled substances may file comments or objections to the issuance of the proposed registration and may, at the same time, file a written request for a hearing on such application pursuant to 21 CFR 1301.43 and in such form as prescribed by 21 CFR 1316.47.

Any such written comments or objections being sent via regular mail should be addressed, in quintuplicate, to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Attention: DEA Federal Register Representative/ODL; or any being sent via express mail should be sent to DEA Headquarters, Attention: DEA Federal Register Representative/ ODL, 2401 Jefferson-Davis Highway, Alexandria, Virginia 22301; and must be filed no later than September 21, 2006.

This procedure is to be conducted simultaneously with and independent of the procedures described in 21 CFR 1301.34(b), (c), (d), (e) and (f). As noted in a previous notice published in the **Federal Register** on September 23, 1975, (40 FR 43745–46), all applicants for registration to import a basic class of any controlled substance listed in Schedule I or II are, and will continue to be required to demonstrate to the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, that the requirements for such registration pursuant to 21 U.S.C. 958(a), 21 U.S.C. 823(a), and 21 CFR 1301.34(b), (c), (d), (e) and (f) are satisfied.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13842 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Manufacturer of Controlled Substances; Notice of Registration

By Notice dated April 17, 2006, and published in the **Federal Register** on April 21, 2006, (71 FR 20729), Guilford Pharmaceuticals, Inc., 6611 Tributary Street, Baltimore, MD 21224, made application by renewal to the Drug Enforcement Administration (DEA) to be registered as a bulk manufacturer of Cocaine (9041), a basic class of controlled substance listed in Schedule II.

The company plans to manufacture a cocaine derivative to be used in clinical research studies.

No comments or objections have been received. DEA has considered the factors in 21 U.S.C. 823(a) and determined that the registration of Guilford Pharmaceuticals, Inc. to manufacture the listed basic classes of controlled substances is consistent with the public interest at this time. DEA has investigated Guilford Pharmaceuticals, Inc. to ensure that the company's registration is consistent with the public interest. The investigation has included inspection and testing of the company's physical security systems, verification of the company's compliance with State and local laws, and a review of the company's background and history. Therefore, pursuant to 21 U.S.C. 823, and in accordance with 21 CFR 1301.33, the above named company is granted registration as a bulk manufacturer of the basic classes of controlled substances listed.

Dated: August 15, 2006.

Joseph T. Rannazzisi,

Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration.

[FR Doc. E6–13848 Filed 8–21–06; 8:45 am]

BILLING CODE 4410–09–P

DEPARTMENT OF JUSTICE

Foreign Claims Settlement Commission

Meeting Notice No. 7–06

The Foreign Claims Settlement Commission, pursuant to its regulations (45 CFR part 504) and the Government in the Sunshine Act (5 U.S.C. 552b), hereby gives notice in regard to the scheduling of meetings for the transaction of Commission business and other matters specified, as follows:

DATE AND TIME: Thursday, August 31, 2006, at 10 a.m.

SUBJECT MATTER: Issuance of Proposed Decisions and Amended Final Decisions in claims against Albania.

STATUS: Open.

All meetings are held at the Foreign claims Settlement Commission, 600 E Street, NW., Washington, DC. Requests for information, or advance notices of intention to observe an open meeting, may be directed to: Administrative Officer, Foreign Claims Settlement Commission, 600 E Street, NW., Room 6002, Washington, DC 20579. Telephone: (202) 616–6988.

Dated at Washington, DC.

Mauricio J. Tamargo,

Chairman.

[FR Doc. 06–7103 Filed 8–18–06; 1:36 pm]

BILLING CODE 4410–01–P

DEPARTMENT OF LABOR

Office of the Secretary

Submission for OMB Review: Comment Request

August 15, 2006.

The Department of Labor (DOL) has submitted the following public information collection request (ICR) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104–13, 44 U.S.C. chapter 35). A copy of this ICR, with applicable supporting documentation, may be obtained from RegInfo.gov at *http://www.reginfo.gov/public/do/PRAMain* or by contacting Darrin King on 202–693–4129 (this is not a toll-free number) / e-mail: *king.darrin@dol.gov*.

Comments should be sent to Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for the Employee Benefits Security Administration (EBSA), Office of Management and Budget, Room 10235, Washington, DC 20503, Telephone: 202–395–7316 / Fax: 202–395–6974 (these are not toll-free numbers), within 30 days from the date of this publication in the **Federal Register.**

The OMB is particularly interested in comments which:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Enhance the quality, utility, and clarity of the information to be collected; and
- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

Agency: Employee Benefits Security Administration.

Type of Review: Extension of currently approved collection.

Title: Prohibited Transaction Class Exemptions for Multiemployer Plans & Multiemployer Apprenticeship Plans, PTE 76–1, PTE 77–10, PTE 78–6.

OMB Number: 1210–0058.

Frequency: On occasion.

Type of Response: Recordkeeping.

Affected Public: Business or other for-profit.

Number of Respondents: 4,565.

Number of Annual Responses: 4,565.

Estimated Annual Time Per Respondent: 15 minutes.

Total Burden Hours: 1,142.

Total Annualized capital/startup costs: $0.

Total Annual Costs (operating/maintaining systems or purchasing services): $0.

Description: This ICR covers information collections contained in three related prohibited transaction class exemptions: PTE 76–1, PTE 77–10, and PTE 78–6. All three of these exemptions cover transactions that were recognized by the Department as being well-established, reasonable and customary transactions in which collectively bargained multiple employer plans (principally, multiemployer plans, but also including other collectively bargained multiple employer plans) frequently engage in order to carry out their purposes.

PTE 76–1 provides relief, under specified conditions, for three types of transactions: (1) Part A of PTE 76–1 permits collectively bargained multiple employer plans to take several types of actions regarding delinquent or uncollectible employer contributions; (2) Part B of PTE 76–1 permits collectively bargained multiple employer plans, under specified conditions, to make construction loans to participating employers; and (3) Part C of PTE 76–1 permits collectively bargained multiple employer plans to share office space and administrative services, and the costs associated with such office space and services, with parties in interest. PTE 77–10 complements Part C of PTE 76–1 by including, with respect to collectively bargained multiple employer plans' sharing office space and administrative services with parties in interest, relief from the prohibitions of subsection 406(b)(2) of ERISA, under specific conditions. PTE 78–6 provides an exemption to collectively bargained multiple employer apprenticeship plans for the purchase or leasing of personal property from a contributing employer (or its wholly owned subsidiary) and for the leasing of real property (other than office space within the contemplation of section 408(b)(2) of ERISA) from a contributing employer (or its wholly owned subsidiary) or an employee organization any of whose members' work results in contributions being made to the plan.

Each of these three PTEs requires, as part of its conditions, either written agreements, recordkeeping, or both.

Ira L. Mills,

Departmental Clearance Officer.

[FR Doc. E6–13800 Filed 8–21–06; 8:45 am]

BILLING CODE 4510–29–P

DEPARTMENT OF LABOR

Federal Advisory Committee Act

AGENCY: U.S. Department of Labor.

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, the purpose of this notice is to announce that a Federal Advisory Committee, known as the "Advisory Committee on Job Corps" (hereinafter "the Committee") is being established.

ADDRESSES: U.S. Department of Labor, Office of Job Corps, 200 Constitution Ave., NW., Washington, DC 20210, Attn: Esther R. Johnson, National Director, 200 Constitution Ave., NW., Rm. N4663, Washington, DC 20210.

FOR FURTHER INFORMATION CONTACT: Esther R. Johnson, National Director, U.S. Department of Labor, Office of Job Corps, 200 Constitution Ave., NW., Rm. N4663, Washington, DC 20210. Telephone (202) 693–3000, E-mail *johnson.esther@dol.gov*.

SUPPLEMENTARY INFORMATION: The Secretary of the U.S. Department of Labor has determined that the establishment of the Committee is necessary and in the public interest in connection with the performance of duties imposed upon the U.S. Department of Labor by law. The Committee Management Secretariat, General Services Administration, concurs with the establishment of the Committee. The purpose of the Committee is to advance Job Corps' new vision for student achievement aimed at 21st century high-growth employment. The Committee will evaluate Job Corps program characteristics, including its purpose, goals, and effectiveness, efficiency, and performance measures in order to address the critical issues facing the provision of job training and education to the youth population that it serves, particularly as related to creating a pipeline of young workers for a demand-driven workforce. The Committee will make recommendations to the U.S. Department of Labor by April 30, 2008.

Dated: August 16, 2006.

Esther R. Johnson,

U.S. Department of Labor, National Director, Office of Job Corps.

[FR Doc. E6–13799 Filed 8–21–06; 8:45 am]

BILLING CODE 4510–23–P

MARINE MAMMAL COMMISSION

Sunshine Act Notice

TIME AND DATE: The Marine Mammal Commission and its Committee of Scientific Advisors on Marine Mammals will meet on Tuesday, 12 September, and Wednesday, 13 September, 2006, from 8:30 a.m. to 6 p.m. The meetings are open to the public.

PLACE: National Conservation Training Center, 698 Conservation Way, Shepherdstown, WV 25443; telephone: 304–876–1600; Web site: *http://training.fws.gov/.*

ACCESSIBILITY AND PARTICIPATION: All portions of the meeting will be open to public observation. Because the meeting is being held at a Federal facility, public attendees will be subject to a security check. To facilitate this, individuals planning to attend the meeting should submit their names to the contact person listed below by 5 September 2006. Otherwise, attendees may be briefly delayed at the facility entrance.

Public participation in meeting discussions will be allowed as time permits and as determined to be desirable by the Chairman. Individuals may also file written statements on the agenda topics for consideration by the Commission and its Committee of Scientific Advisors. Such statements should be sent the contract person indicated below by 5 September 2006.

MATTERS TO BE CONSIDERED: The Commission and Committee will meet to review and discuss, among other things, the Commissions' responsibilities and criteria for identifying priority issues and priority marine mammal species, the Commission's role in international issues and participation in international forums, the criteria and processes for reviewing applications for permits to take marine mammals, the composition and best use of the Committee of Scientific Advisors and the staff, and other issues that may arise. The agenda for the meeting is subject to change but will be posted and, as necessary, updated on the Commission's Web site at *http://www.mmc.gov.*

CONTACT PERSON FOR MORE INFORMATION: Suzanne Montgomery, Special Assistant to the Executive Director, Marine Mammal Commission, 4340 East-West Highway, Room 905, Bethesda, MD 20814; telephone: 301–504–0087; e-mail *smontgomery@mmc.gov.*

Dated: August 18, 2006.

Timothy J. Ragen,

Acting Executive Director.

[FR Doc. 06–7116 Filed 8–18–06; 2:32 pm]

BILLING CODE 6820–31–M

NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

[Notice (06–057)]

NASA Advisory Council; Science Committee; Earth Science Subcommittee; Meeting

AGENCY: National Aeronautics and Space Administration.

ACTION: Notice of meeting.

SUMMARY: The National Aeronautics and Space Administration (NASA) announces a meeting of the Earth Science Subcommittee of the NASA Advisory Council (NAC). This Subcommittee reports to the Science Committee of the NAC. The Meeting will be held for the purpose of soliciting from the scientific community and other persons scientific and technical information relevant to program planning.

DATES: Wednesday, September 27, 2006, 8:30 a.m. to 5:30 p.m., and Thursday, September 28, 8:30 a.m. to 5:30 p.m. Eastern Daylight Time.

ADDRESSES: Inn and Conference Center, University of Maryland, 3501 University Boulevard East, Adelphi, Maryland 20783.

FOR FURTHER INFORMATION CONTACT: Ms. Marian Norris, Science Mission Directorate, NASA Headquarters, Washington, DC 20546, (202) 358–4452, fax (202) 358–4118, or *mnorris@nasa.gov.*

SUPPLEMENTARY INFORMATION: The agenda for the meeting includes the following topics:

—Input to NASA Science Plan
—Response and Comments on ESMD Lunar Science Themes and Objectives
—Planning for Spring 2007 Lunar Science Workshop
—Earth Science Division Overview and Program Status

The meeting will be open to the public up to the seating capacity of the rooms. Findings and recommendations developed by the Subcommittee during its meeting will be submitted to the Science Committee of the NAC.

It is imperative that the meeting be held on these dates to accommodate the scheduling priorities of the key participants. Attendees will be requested to sign a visitor's register.

Michael F. O'Brien,

Assistant Administrator, Office of External Relations, National Aeronautics and Space Administration.

[FR Doc. E6–13791 Filed 8–21–06; 8:45 am]

BILLING CODE 7510–13–P

NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

[Notice (06–058)]

NASA Advisory Council; Science Committee; Heliophysics Subcommittee; Meeting

AGENCY: National Aeronautics and Space Administration.

ACTION: Notice of meeting.

SUMMARY: The National Aeronautics and Space Administration (NASA) announces a meeting of the Heliophysics Subcommittee of the NASA Advisory Council (NAC). This Subcommittee reports to the Science Committee of the NAC. The Meeting will be held for the purpose of soliciting from the scientific community and other persons scientific and technical information relevant to program planning.

DATES: Wednesday, September 13, 2006, 8:30 a.m. to 5:30 p.m., Thursday, September 14, 8:30 a.m. to 5:30 p.m., and Friday, September 15, 2006, 8:30 a.m. to noon, Eastern Daylight Time.

ADDRESSES: L'Enfant Plaza Hotel, 480 L'Enfant Plaza, SW., Washington, DC 20024.

FOR FURTHER INFORMATION CONTACT: Ms. Marian Norris, Science Mission Directorate, NASA Headquarters, Washington, DC 20546, (202) 358–4452, fax (202) 358–4118, or *mnorris@nasa.gov.*

SUPPLEMENTARY INFORMATION: The agenda for the meeting includes the following topics:

—Input to NASA Science Plan
—Response and Comments on ESMD Lunar Science Themes and Objectives
—Planning for Spring 2007 Lunar Science Workshop
—Heliophysics Division Overview and Program Status

The meeting will be open to the public up to the seating capacity of the rooms. Findings and recommendations developed by the Subcommittee during its meeting will be submitted to the Science Committee of the NAC.

It is imperative that the meeting be held on these dates to accommodate the

scheduling priorities of the key participants. Attendees will be requested to sign a visitor's register.

Michael F. O'Brien,

Assistant Administrator, Office of External Relations, National Aeronautics and Space Administration.

[FR Doc. E6–13792 Filed 8–21–06; 8:45 am]

BILLING CODE 7510–13–P

NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

[Notice (06–059)]

NASA Advisory Council; Science Committee; Planetary Science Subcommittee; Meeting

AGENCY: National Aeronautics and Space Administration.

ACTION: Notice of meeting.

SUMMARY: The National Aeronautics and Space Administration (NASA) announces a meeting of the Planetary Science Subcommittee of the NASA Advisory Council (NAC). This Subcommittee reports to the Science Committee of the NAC. The Meeting will be held for the purpose of soliciting from the scientific community and other persons scientific and technical information relevant to program planning.

DATES: Monday, September 25, 8:30 a.m. to 5:30 p.m., and Tuesday, September 26, 2006, 8:30 a.m. to 12:30 p.m., Eastern Daylight Time.

ADDRESSES: Southwest Research Institute, Department of Space Studies, Suite 400, Main Conference Room, Exeter Building, 1050 Walnut Street, Boulder, CO 80302.

FOR FURTHER INFORMATION CONTACT: Ms. Marian Norris, Science Mission Directorate, NASA Headquarters, Washington, DC 20546, (202) 358–4452, fax (202) 358–4118, or *mnorris@nasa.gov*.

SUPPLEMENTARY INFORMATION: The agenda for the meeting includes the following topics:

—Input to NASA Science Plan
—Response and Comments on ESMD Lunar Science Themes and Objectives
—Planning for Spring 2007 Lunar Science Workshop
—Planetary Science Division Overview and Program Status

The meeting will be open to the public up to the seating capacity of the rooms. Sixty minutes will be set aside for verbal comment by members of the general public, not to exceed three minutes per speaker, at 8:30 a.m. on September 26, 2006. Those wishing to speak must sign up at the meeting registration desk by 5 p.m. on September 25, 2006. Members of the public are also welcome to file a written statement at the time of the meeting. Statements may also be submitted in advance of the meeting via e-mail or fax to Ms. Norris. Statements collected in advance will be forwarded to the Subcommittee. To facilitate consideration of the comments provided, statements should be kept to two pages.

Findings and recommendations developed by the Subcommittee during its meeting will be submitted to the Science Committee of the NAC.

It is imperative that the meeting be held on these dates to accommodate the scheduling priorities of the key participants. Attendees will be requested to sign a visitor's register.

Michael F. O'Brien,

Assistant Administrator, Office of External Relations, National Aeronautics and Space Administration.

[FR Doc. E6–13793 Filed 8–21–06; 8:45 am]

BILLING CODE 7510–13–P

NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

[Notice 06–056]

NASA Advisory Council; Science Committee; Astrophysics Subcommittee; Meeting

AGENCY: National Aeronautics and Space Administration.

ACTION: Notice of meeting.

SUMMARY: The National Aeronautics and Space Administration (NASA) announces a meeting of the Astrophysics Subcommittee of the NASA Advisory Council (NAC). This Subcommittee reports to the Science Committee of the NAC. The Meeting will be held for the purpose of soliciting from the scientific community and other persons scientific and technical information relevant to program planning.

DATES: Thursday, September 14, 8:30 a.m. to 5:30 p.m., and Friday, September 15, 2006, 8:30 a.m. to 5:30 p.m., Eastern Daylight Time.

ADDRESSES: L'Enfant Plaza Hotel, 480 L'Enfant Plaza, SW., Washington, DC 20024.

FOR FURTHER INFORMATION CONTACT: Ms. Marian Norris, Science Mission Directorate, NASA Headquarters, Washington, DC 20546, (202) 358–4452, fax (202) 358–4118, or *mnorris@nasa.gov*.

SUPPLEMENTARY INFORMATION: The agenda for the meeting includes the following topics:

—Input to NASA Science Plan.
—Response and Comments on ESMD Lunar Science Themes and Objectives.
—Planning for Spring 2007 Lunar Science Workshop.
—Astrophysics Division Overview and Program Status.

The meeting will be open to the public up to the seating capacity of the rooms. Thirty minutes will be set aside for verbal comment by members of the general public, not to exceed three minutes per speaker, at 8:30 a.m. on September 15, 2006. Those wishing to speak must sign up at the meeting registration desk by 5 p.m. on September 14, 2006. Members of the public are also welcome to file a written statement at the time of the meeting. Statements may also be submitted in advance of the meeting via E-mail or fax to Ms. Norris. Statements collected in advance will be forwarded to the Subcommittee. To facilitate consideration of the comments provided, statements should be kept to two pages.

Findings and recommendations developed by the Subcommittee during its meeting will be submitted to the Science Committee of the NAC.

It is imperative that the meeting be held on these dates to accommodate the scheduling priorities of the key participants. Attendees will be requested to sign a visitor's register.

Michael F. O'Brien,

Assistant Administrator, Office of External Relations, National Aeronautics and Space Administration.

[FR Doc. E6–13804 Filed 8–21–06; 8:45 am]

BILLING CODE 7510–13–P

NUCLEAR REGULATORY COMMISSION

[Docket No. 50–483]

Union Electric Company; Notice of Withdrawal of Application for Amendment to Facility Operating License

The U.S. Nuclear Regulatory Commission (the Commission/NRC) has granted the request of Union Electric Company (the licensee) to withdraw its application dated July 19, 2006, for the proposed exigent amendment to Facility Operating License No. NPF–30 for the Callaway Plant, Unit 1, located in Callaway County, Missouri.

By letter dated July 19, 2006, Union Electric Company (the licensee)

submitted an exigent license amendment request to remove the containment condensate monitoring system and atmosphere gaseous radioactivity monitor from Technical Specification (TS) 3.4.15, "RCS [reactor coolant system] Leakage Detection Instrumentation." The licensee stated that it was uncertain that the containment cooler condensate system could detect an RCS leak rate of 1 gallon per minute in 1 hour, which is the requirement for the instrumentation listed in TS 3.4.15 to be considered operable, and the condensate monitoring system was declared inoperable on July 10, 2006. With the containment atmosphere gaseous radioactivity monitor already declared inoperable and the condensate monitoring system now being inoperable, TS 3.4.15 required the licensee to shut down the Callaway Plant within 30 days of July 10, 2006, if the condensate monitoring could not be made operable. The exigent amendment request was to prevent a plant shutdown. The licensee also stated that the previous application dated August 26, 2005, as supplemented by letters dated December 16, 2005, and June 29, 2006, to revise TS 3.4.15 were superceded by the letter dated July 19, 2006.

The Commission had previously issued a Notice of Consideration of Issuance of Amendment published in the **Federal Register** on July 25, 2006 (71 FR 42134). However, by letter dated August 7, 2006, the licensee withdrew its exigent license amendment request dated July 19, 2006, and re-instated the previous application dated August 26, 2005, and the supplemental letters. The licensee declared the containment condensate monitoring system operable on August 3, 2006, and TS 3.4.15 no longer required a plant shutdown.

For further details with respect to this action, see the application for amendment dated July 19, 2006, and the licensee's letter dated August 7, 2006, which withdrew the application for license amendment. Documents may be examined, and/or copied for a fee, at the NRC's Public Document Room, located at One White Flint North, 11555 Rockville Pike (first floor), Rockville, Maryland. Publicly available records will be accessible electronically from the Agencywide Documents Access and Management Systems (ADAMS) Public Electronic Reading Room on the internet at the NRC Web site, *http://www.nrc.gov/NRC/ADAMS/index/html*. If you do not have access to ADAMS or if there are problems in accessing the documents located in ADAMS, contact the NRC Public Document Room (PDR) Reference staff at 1–800–397–4209, 301–415–4737 or by e-mail to *pdr@nrc.gov*.

Dated at Rockville, Maryland, this 15th day of August 2006.

For the Nuclear Regulatory Commission.

Jack N. Donohew,

Senior Project Manager, Plant Licensing Branch IV, Division of Operating Reactor Licensing, Office of Nuclear Reactor Regulation.

[FR Doc. E6–13836 Filed 8–21–06; 8:45 am]

BILLING CODE 7590–01–P

NUCLEAR REGULATORY COMMISSION

[Docket No. 04000341]

Notice of Availability of Environmental Assessment and Finding of No Significant Impact for License Amendment to Source Materials License No. Stc-133 Authorizing the Use of Site-Specific Derived Concentration Guideline Levels for Unrestricted Release of the Defense Logistics Agency, Defense Nuclear Supply Center Depot in Binghamton, NY

AGENCY: Nuclear Regulatory Commission.

ACTION: Issuance of Environmental Assessment and Finding of No Significant Impact for License Amendment.

FOR FURTHER INFORMATION CONTACT: Dennis Lawyer, Health Physicist, Commercial and R&D Branch, Division of Nuclear Materials Safety, Region 1, 475 Allendale Road, King of Prussia, Pennsylvania; telephone 610–337–5366; fax number 610–337–5393; or by e-mail: *drl1@nrc.gov*.

SUPPLEMENTARY INFORMATION:

I. Introduction

The U.S. Nuclear Regulatory Commission (NRC) is considering the issuance of a license amendment to Source Materials License No. STC–133. This license is held by Defense Logistics Agency (DLA or the Licensee) at multiple sites. The site at issue is its Defense National Stockpile Center located at Hoyt Avenue in Binghamton, New York (the Facility). Issuance of the amendment would authorize release of the Facility for unrestricted use using site specific Derived Concentration Guideline Levels (DCGLs). The use of the site specific DCGLs requires an exemption to the definition of weighting factors in 10 CFR 20.1003. The Licensee requested this action in a letter dated October 19, 2005. The NRC has prepared an Environmental Assessment (EA) in support of this proposed action in accordance with the requirements of Title 10, *Code of Federal Regulations* (CFR), Part 51 (10 CFR Part 51). Based on the EA, the NRC has concluded that a Finding of No Significant Impact (FONSI) is appropriate with respect to the proposed action. The amendment will be issued to the Licensee following the publication of this FONSI and EA in the **Federal Register**.

II. Environmental Assessment

Identification of Proposed Action

The proposed action would approve the Licensee's October 19, 2005, license amendment request for site-specific DCGL unrestricted use release criteria at DNSC Binghamton through issuance of an exemption to the definition of weighting factors in 10 CFR 20.1003. License No. STC–133 was issued on July 23, 1983, pursuant to 10 CFR Part 40, and has been amended periodically since that time. This license authorized the Licensee to use unsealed source material for purposes of storage, sampling, repackaging, and transfer.

Based on the Licensee's historical knowledge of the site and the conditions of the Facility, the Licensee determined that only routine decontamination activities, in accordance with its NRC-approved, operating radiation safety procedures, were required. The Licensee was not required to submit a decommissioning plan to the NRC because worker cleanup activities and procedures are consistent with those approved for routine operations. The Licensee will conduct surveys of the Facility and provide information to the NRC to demonstrate that the Facility meets the criteria in Subpart E of 10 CFR Part 20 for unrestricted release by using the approved DCGL.

Need for the Proposed Action

The Licensee has ceased conducting licensed activities at the Facility, and seeks the approval of site-specific DCGLs through issuance of an exemption to the definition of weighting factors in 10 CFR 20.1003. The licensee needs these site specific DCGL values to release the Facility for unrestricted use. NRC is fulfilling its responsibilities under the Atomic Energy Act to make a timely decision on a proposed license amendment that ensures protection of public health and safety and the environment.

Environmental Impacts of the Proposed Action

The historical review of licensed activities conducted at the Facility shows that such activities involved use

of the following radionuclides with half-lives greater than 120 days: Natural uranium and thorium mixtures.

The Licensee is electing to demonstrate compliance with the radiological criteria for unrestricted release as specified in 10 CFR 20.1402 by developing DCGLs for its Facility. The Licensee conducted site-specific dose modeling using input parameters specific to the Facility and a conservative assumption that all residual radioactivity is in equilibrium. Federal Guidance Report Number 13 was used to modify the dose conversion factors because it is based on an improved, more realistic dosimetry model. The selected critical age group is adults as the expected future use of this facility will be industrial. Based on the type of building railroad distribution and truck access, there is no compelling evidence to indicate that the building will be used for other than industrial activities. The NRC has reviewed the Licensee's methodology and proposed DCGLs and concluded that the proposed DCGLs are acceptable for use as release criteria at the Facility. Federal Guidance Report Number 13, as an updated dosimetry model, uses different weighting factors than is published in 10 CFR Part 20. The weighting factors are used to determine effective dose equivalent and total dose equivalent. Therefore, an exemption to the definition of weighting factors in 10 CFR 20.1003 is required to use Federal Guidance Report Number 13. The use of Federal Guidance Report Number 13 for dose modeling and weighting factors is acceptable for this Facility.

Based on its review, the staff has determined that the affected environment and any environmental impacts associated and concluded that the proposed action will not have a significant effect on the quality of the human environment.

Environmental Impacts of the Alternatives to the Proposed Action

Due to the largely administrative nature of the proposed action, its environmental impacts are small. Therefore, the only alternative the staff considered is the no-action alternative, under which the staff would leave things as they are by simply denying the amendment request. Additionally, denying the amendment request would result in no change in current environmental impacts. The environmental impacts of the proposed action and the no-action alternative are therefore similar, and the no-action alternative is accordingly not further considered.

Conclusion

The NRC staff has concluded that the proposed action is consistent with the NRC's unrestricted release criteria specified in 10 CFR 20.1402. Because the proposed action will not significantly impact the quality of the human environment, the NRC staff concludes that the proposed action is the preferred alternative.

Agencies and Persons Consulted

NRC provided a draft of this Environmental Assessment to the State of New York's Department of Environmental Conservation for review on June 21, 2006. On July 27, 2006, the State of New York responded by electronic mail. The State agreed with the conclusions of the EA and otherwise had no comments.

The NRC staff has determined that the proposed action is of a procedural nature, and will not affect listed species or critical habitat. Therefore, no further consultation is required under Section 7 of the Endangered Species Act. The NRC staff has also determined that the proposed action is not the type of activity that has the potential to cause effects on historic properties. Therefore, no further consultation is required under Section 106 of the National Historic Preservation Act.

III. Finding of No Significant Impact

The NRC staff has prepared this EA in support of the proposed action. On the basis of this EA, the NRC finds that there are no significant environmental impacts from the proposed action, and that preparation of an environmental impact statement is not warranted. Accordingly, the NRC has determined that a Finding of No Significant Impact is appropriate.

IV. Further Information

Documents related to this action, including the application for license amendment and supporting documentation, are available electronically at the NRC's Electronic Reading Room at *http://www.nrc.gov/reading-rm/adams.html*. From this site, you can access the NRC's Agencywide Document Access and Management System (ADAMS), which provides text and image files of NRC's public documents. The documents related to this action are listed below, along with their ADAMS accession numbers.

1. NUREG–1757, "Consolidated NMSS Decommissioning Guidance;"

2. Title 10 Code of Federal Regulations, Part 20, Subpart E, "Radiological Criteria for License Termination;"

3. Title 10, Code of Federal Regulations, Part 51, "Environmental Protection Regulations for Domestic Licensing and Related Regulatory Functions;"

4. Letter dated October 19, 2005, "Amendment to Source Materials License" [Adams Accession No. ML053060017]

5. Letter dated December 29, 2005, "Amendment to Source Material License STC–133—Request to use Commodity Specific DCGLs at Binghamton and Somerville Depots" [ML060040304]

6. Letter dated February 7, 2006, "Amendment to Source Material License STC–133—Request to Use Commodity Specific DCGLs at Binghamton and Somerville Depots" [ML060410319]

7. Letter dated April 26, 2006, "Defense Logistics Agency, Request for Additional Information Concerning Application for Amendment to License" [ML061220479]

8. "Radiological Historical Site Assessment Report, Defense National Stockpile Center, Somerville Depot, Hillsborough, NJ" dated January 2006 [ML060730422]

9. "Radiological Historical Site Assessment Report, Defense National Stockpile Center, Binghamton Depot, Binghamton, NY" dated February 2006 [ML060730408]

If you do not have access to ADAMS, or if there are problems in accessing the documents located in ADAMS, contact the NRC Public Document Room (PDR) Reference staff at 1–800–397–4209, 301–415–4737, or by e-mail to *pdr@nrc.gov*. These documents may also be viewed electronically on the public computers located at the NRC's PDR, O 1 F21, One White Flint North, 11555 Rockville Pike, Rockville, MD 20852. The PDR reproduction contractor will copy documents for a fee.

Dated at Region 1, 475 Allendale Road, King of Prussia this 15th day of August 2006.

For the Nuclear Regulatory Commission.

James P. Dwyer,

Chief, Commercial and R&D Branch, Division of Nuclear Materials Safety, Region 1.

[FR Doc. E6–13834 Filed 8–21–06; 8:45 am]

BILLING CODE 7590–01–P

NUCLEAR REGULATORY COMMISSION

[Docket No. 030–05379]

Notice of Availability of Environmental Assessment and Finding of No Significant Impact for License Amendment to Byproduct Materials License No. 29–10211–01, for Termination of the License and Unrestricted Release of the Fisher Scientific Company's Facilities in Fair Lawn, NJ and Somerville, NJ

AGENCY: Nuclear Regulatory Commission.

ACTION: Issuance of Environmental Assessment and Finding of No Significant Impact for License Amendment.

FOR FURTHER INFORMATION CONTACT: Steve Hammann, Health Physicist, Commercial and R&D Branch, Division of Nuclear Materials Safety, Region I, 475 Allendale Road, King of Prussia, Pennsylvania; telephone (610) 337–5399; fax number (610) 337–5269; or by e-mail: *sth2@nrc.gov*.

SUPPLEMENTARY INFORMATION:

I. Introduction

The U.S. Nuclear Regulatory Commission (NRC) is considering the issuance of a license amendment to Byproduct Materials License No. 29–10211–01. This license is held by Fisher Scientific Company (the Licensee), for its facilities located at 1 Reagent Lane in Fair Lawn, New Jersey and 755 State Highway 202 in Somerville, New Jersey (the Facilities). Issuance of the amendment would authorize release of the Facilities for unrestricted use and termination of the NRC license. The Licensee requested this action in a letter dated December 5, 2005. The NRC has prepared an Environmental Assessment (EA) in support of this proposed action in accordance with the requirements of Title 10, Code of Federal Regulations (CFR), Part 51 (10 CFR Part 51). Based on the EA, the NRC has concluded that a Finding of No Significant Impact (FONSI) is appropriate with respect to the proposed action. The NRC plans to take the proposed action following the publication of this FONSI and EA in the **Federal Register**.

II. Environmental Assessment

Identification of Proposed Action

The proposed action would approve the Licensee's December 5, 2005, license amendment request, resulting in release of the Facilities for unrestricted use and the termination of its NRC materials license. License No. 29–10211–01 was issued on August 4, 1964, pursuant to 10 CFR Part 30, and has been amended periodically since that time. This license authorized the Licensee to use sealed and unsealed byproduct material for purposes of conducting research and development, instrument calibration, and sample analysis activities on laboratory bench tops and in hoods.

The Facilities occupy a total of 133,800 square feet (80,800 square feet in Fair Lawn, New Jersey and 53,000 square feet in Somerville, New Jersey) and both consist of office space, laboratories, and storage space. The Fair Lawn, New Jersey location is in an industrial zone and the Somerville, New Jersey location is in a mixed residential/commercial area.

In 2005, the Licensee ceased licensed activities and initiated a survey and decontamination of the Facilities. Based on the Licensee's historical knowledge of the site and the conditions of the Facilities, the Licensee determined that only routine decontamination activities, in accordance with their NRC-approved, operating radiation safety procedures, were required. The Licensee was not required to submit a decommissioning plan to the NRC because worker cleanup activities and procedures are consistent with those approved for routine operations. The Licensee conducted surveys of the Facilities and provided information to the NRC to demonstrate that it meets the criteria in Subpart E of 10 CFR Part 20 for unrestricted release and for license termination.

Need for the Proposed Action

The Licensee has ceased conducting licensed activities at the Facilities, and seeks the unrestricted use of its Facilities and the termination of its NRC materials license. Termination of its license would end the Licensee's obligation to pay annual license fees to the NRC.

Environmental Impacts of the Proposed Action

The historical review of licensed activities conducted at the Facilities show that such activities involved use of the following radionuclides with half-lives greater than 120 days: hydrogen-3, carbon-14, nickel-63, and cesium-137. Prior to performing the final status survey, the Licensee conducted decontamination activities, as necessary, in the areas of the Facilities affected by these radionuclides.

The Licensee conducted a final status survey on June 19, 2006. The final status survey report was submitted in support of the Licensee's amendment request dated December 5, 2005. The Licensee elected to demonstrate compliance with the radiological criteria for unrestricted release as specified in 10 CFR 20.1402 by using the screening approach described in NUREG–1757, "Consolidated NMSS Decommissioning Guidance," Volume 2. The Licensee used the radionuclide-specific derived concentration guideline levels (DCGLs), developed there by the NRC, which comply with the dose criterion in 10 CFR 20.1402. These DCGLs define the maximum amount of residual radioactivity on building surfaces, equipment, and materials, and in soils, that will satisfy the NRC requirements in Subpart E of 10 CFR Part 20 for unrestricted release. The Licensee's final status survey results were below these DCGLs and are in compliance with the As Low As Reasonably Achievable (ALARA) requirement of 10 CFR 20.1402. The NRC thus finds that the Licensee's final status survey results are acceptable.

Based on its review, the staff has determined that the affected environment and any environmental impacts associated with the proposed action are bounded by the impacts evaluated by the "Generic Environmental Impact Statement in Support of Rulemaking on Radiological Criteria for License Termination of NRC-Licensed Nuclear Facilities" (NUREG–1496) Volumes 1–3 (ML042310492, ML042320379, and ML042330385). The staff finds there were no significant environmental impacts from the use of radioactive material at the Facilities. The NRC staff reviewed the docket file records and the final status survey report to identify any non-radiological hazards that may have impacted the environment surrounding the Facilities. No such hazards or impacts to the environment were identified. The NRC has identified no other radiological or non-radiological activities in the areas surrounding the Facilities that could result in cumulative environmental impacts.

The NRC staff finds that the proposed release of the Facilities for unrestricted use and the termination of the NRC materials license is in compliance with 10 CFR 20.1402. Based on its review, the staff considered the impact of the residual radioactivity at the Facilities and concluded that the proposed action will not have a significant effect on the quality of the human environment.

Environmental Impacts of the Alternatives to the Proposed Action

Due to the largely administrative nature of the proposed action, its environmental impacts are small. Therefore, the only alternative the staff considered is the no-action alternative,

under which the staff would leave things as they are by simply denying the amendment request. This no-action alternative is not feasible because it conflicts with 10 CFR 30.36(d), requiring that decommissioning of byproduct material facilities be completed and approved by the NRC after licensed activities cease. The NRC's analysis of the Licensee's final status survey data confirmed that the Facilities meet the requirements of 10 CFR 20.1402 for unrestricted release and for license termination. Additionally, denying the amendment request would result in no change in current environmental impacts. The environmental impacts of the proposed action and the no-action alternative are therefore similar, and the no-action alternative is accordingly not further considered.

Conclusion

The NRC staff has concluded that the proposed action is consistent with the NRC's unrestricted release criteria specified in 10 CFR 20.1402. Because the proposed action will not significantly impact the quality of the human environment, the NRC staff concludes that the proposed action is the preferred alternative.

Agencies and Persons Consulted

NRC provided a draft of this Environmental Assessment to the New Jersey Bureau of Environmental Radiation for review on July 13, 2006. On July 20, 2006, New Jersey Bureau of Environmental Radiation responded by letter. The State agreed with the conclusions of the EA, and otherwise had no comments.

The NRC staff has determined that the proposed action is of a procedural nature, and will not affect listed species or critical habitat. Therefore, no further consultation is required under Section 7 of the Endangered Species Act. The NRC staff has also determined that the proposed action is not the type of activity that has the potential to cause effects on historic properties. Therefore, no further consultation is required under Section 106 of the National Historic Preservation Act.

III. Finding of No Significant Impact

The NRC staff has prepared this EA in support of the proposed action. On the basis of this EA, the NRC finds that there are no significant environmental impacts from the proposed action, and that preparation of an environmental impact statement is not warranted. Accordingly, the NRC has determined that a Finding of No Significant Impact is appropriate.

IV. Further Information

Documents related to this action, including the application for license amendment and supporting documentation, are available electronically at the NRC's Electronic Reading Room at *http://www.nrc.gov/reading-rm/adams.html*. From this site, you can access the NRC's Agencywide Document Access and Management System (ADAMS), which provides text and image files of NRC's public documents. The documents related to this action are listed below, along with their ADAMS accession numbers.

1. Amendment request dated December 5, 2005 (ML053500284);

2. Request for Additional Information dated January 5, 2006 (ML060090118);

3. Response dated January 25, 2006 (ML060340478);

4. Final Status Survey Report dated March 9, 2006 (ML060800678);

5. Request For Additional Information dated April 12, 2006 (ML061070606);

6. Final Status Survey Report dated June 15, 2006 (ML061740168);

7. NUREG–1757, "Consolidated NMSS Decommissioning Guidance";

8. Title 10 Code of Federal Regulations, Part 20, Subpart E, "Radiological Criteria for License Termination";

9. Title 10, Code of Federal Regulations, Part 51, "Environmental Protection Regulations for Domestic Licensing and Related Regulatory Functions";

10. NUREG–1496, "Generic Environmental Impact Statement in Support of Rulemaking on Radiological Criteria for License Termination of NRC-Licensed Nuclear Facilities".

If you do not have access to ADAMS, or if there are problems in accessing the documents located in ADAMS, contact the NRC Public Document Room (PDR) Reference staff at 1–800–397–4209, 301–415–4737, or by e-mail to *pdr@nrc.gov*. These documents may also be viewed electronically on the public computers located at the NRC's PDR, O 1 F21, One White Flint North, 11555 Rockville Pike, Rockville, MD 20852. The PDR reproduction contractor will copy documents for a fee.

Dated at 475 Allendale Road, King of Prussia, Pennsylvania this 15th day of August 2006.

For the Nuclear Regulatory Commission.

James P. Dwyer,

Chief, Commercial and R&D Branch, Division of Nuclear Materials Safety, Region I.

[FR Doc. E6–13837 Filed 8–21–06; 8:45 am]

BILLING CODE 7590–01–P

NUCLEAR REGULATORY COMMISSION

[Docket No. 030–01183]

Notice of Availability of Environmental Assessment and Finding of No Significant Impact for License Amendment to Byproduct Materials License No. 52–01986–04, for the Unrestricted Release of a Tree at the University of Puerto Rico's El Verde Research Station, Puerto Rico

AGENCY: Nuclear Regulatory Commission.

ACTION: Issuance of Environmental Assessment and Finding of No Significant Impact for License Amendment.

FOR FURTHER INFORMATION CONTACT: Betsy Ullrich, Senior Health Physicist, Commercial and R&D Branch, Division of Nuclear Materials Safety, Region 1, 475 Allendale Road, King of Prussia, Pennsylvania 19406; telephone (610)–337–5040; fax number (610)–337–5269; or by e-mail: *exu@nrc.gov*.

SUPPLEMENTARY INFORMATION:

I. Introduction

The U.S. Nuclear Regulatory Commission (NRC) is considering the issuance of a license amendment to Byproduct Materials License No. 52–01896–04. This license is held by the University of Puerto Rico, College of Natural Sciences (the Licensee), for its University of Puerto Rico Rio Pedras Campus in San Juan, Puerto Rico and a tree at the El Verde Research Station, located in the Luquillo Forest of the Caribbean National Forest. Issuance of the amendment would authorize release of the tree at the El Verde Research Station from any further license requirements. The Licensee requested this action in a letter dated November 16, 2005. The NRC has prepared an Environmental Assessment (EA) in support of this proposed action in accordance with the requirements of Title 10, Code of Federal Regulations (CFR), Part 51 (10 CFR Part 51). Based on the EA, the NRC has concluded that a Finding of No Significant Impact (FONSI) is appropriate with respect to the proposed action. The NRC plans to take the proposed action following the publication of this FONSI and EA in the **Federal Register**.

II. Environmental Assessment

Identification of Proposed Action

The proposed action would approve the Licensee's November 16, 2005, license amendment request and would release the tree at the El Verde Research

Station from further license requirements. License No. 52–01986–04 was issued on March 18, 1969, pursuant to 10 CFR Part 30, and has been amended periodically since that time. Amendment 13 of this license, issued June 21, 2001, authorized the Licensee to possess the tree at the El Verde Research Station that was previously authorized under License No. 52–19434–02. License No. 52–19434–02 was issued March 9, 1982, and terminated on June 21, 2001. The tree had been injected with 460 microcuries of cesium–137 (Cs-137) in 1968 during a study that was sponsored by the U. S. Atomic Energy Commission and performed by the Puerto Rico Nuclear Center at the University of Puerto Rico. The U. S. Department of Energy (DOE) decommissioned the El Verde Research Station early in the 1980's and transferred responsibility for it, including the tree, to the University of Puerto Rico.

The tree is situated in Study Area 4 of the El Verde Research Station in the Luquillo Forest. The tree is located in a remote area that is accessible only by a trail which includes steep climbs and a cable suspension bridge. The affected area extends about 5 meters from the tree, and includes surface soil and the root system in addition to the tree itself.

The Licensee has provided oversight of the tree since 1982 with assistance from the DOE. In the 1990's, DOE performed additional surveys and remediation activities in the area of the tree. Based on the Licensee's historical knowledge of the site and the conditions of the tree and its affected area, the Licensee determined that no additional decommissioning activities were required. The Licensee provided information to the NRC to demonstrate that it meets the criteria in Subpart E of 10 CFR Part 20 for unrestricted release of the tree.

Need for the Proposed Action

The Licensee seeks to remove the tree from further license requirements. Release of the tree would relieve the Licensee of requirements for maintaining fences and postings of the area for the purposes of radiation protection.

Environmental Impacts of the Proposed Action

The historical review of licensed activities conducted on the tree shows that such activities involved injection into the tree of 460 microcuries of Cs–137 in 1968. Prior to performing the final status survey, the DOE conducted decontamination activities, as necessary, in the areas of the tree affected by Cs–137, on behalf of the Licensee.

The DOE conducted various surveys of the tree and its affected areas in the 1980's and 1990's. The survey reports were attached to the Licensee's amendment request dated November 16, 2005. The Licensee elected to demonstrate compliance with the radiological criteria for unrestricted release as specified in 10 CFR 20.1402 by providing the site-specific dose modeling performed by the DOE, using input parameters specific to the tree based on the results of DOE surveys. The Licensee thus determined the maximum amount of residual radioactivity on materials and soils that will satisfy the NRC requirements in Subpart E of 10 CFR Part 20 for unrestricted release.

The NRC performed independent calculations to determine if the residual material in the tree and its affected environment would meet Subpart E of 10 CFR Part 20 for unrestricted release. Based on its review, the staff has determined that the affected environment and any environmental impacts associated with the proposed action are bounded by the impacts evaluated by the "Generic Environmental Impact Statement in Support of Rulemaking on Radiological Criteria for License Termination of NRC-Licensed Nuclear Facilities" (NUREG–1496) Volumes 1–3 (ML042310492, ML042320379, and ML042330385). The staff finds there were no significant environmental impacts from the use of radioactive material in the tree. The NRC staff reviewed the docket file records and the survey reports to identify any non-radiological hazards that may have impacted the environment surrounding the tree. No such hazards or impacts to the environment were identified. The NRC has identified no other radiological or non-radiological activities in the area that could result in cumulative environmental impacts.

The NRC staff finds that the proposed release of the tree for unrestricted use is in compliance with 10 CFR 20.1402. Based on its review, the staff considered the impact of the residual radioactivity at the tree and concluded that the proposed action will not have a significant effect on the quality of the human environment.

Environmental Impacts of the Alternatives to the Proposed Action

Due to the largely administrative nature of the proposed action, its environmental impacts are small. Therefore, the only alternative the staff considered is the no-action alternative, under which the staff would leave things as they are by simply denying the amendment request. This no-action alternative is not feasible because it conflicts with 10 CFR 30.36(d), requiring that decommissioning of byproduct material facilities be completed and approved by the NRC after licensed activities cease. The NRC's analysis of the Licensee's survey data confirmed that the tree and its affected area meet the requirements of 10 CFR 20.1402 for unrestricted release. Additionally, denying the amendment request would result in no change in current environmental impacts. The environmental impacts of the proposed action and the no-action alternative are therefore similar, and the no-action alternative is accordingly not further considered.

Conclusion

The NRC staff has concluded that the proposed action is consistent with the NRC's unrestricted release criteria specified in 10 CFR 20.1402. Because the proposed action will not significantly impact the quality of the human environment, the NRC staff concludes that the proposed action is the preferred alternative.

Agencies and Persons Consulted

NRC provided a draft of this Environmental Assessment to the Commonwealth of Puerto Rico, Puerto Rico Health Department, Radiological Health Division, for review on June 21, 2006. On July 31, 2006, the Commonwealth of Puerto Rico responded by electronic mail. The Commonwealth agreed with the conclusions of the EA, and otherwise had no comments.

The NRC staff has determined that the proposed action is of a procedural nature, and will not affect listed species or critical habitat. Therefore, no further consultation is required under Section 7 of the Endangered Species Act. The NRC staff has also determined that the proposed action is not the type of activity that has the potential to cause effects on historic properties. Therefore, no further consultation is required under Section 106 of the National Historic Preservation Act.

III. Finding of No Significant Impact

The NRC staff has prepared this EA in support of the proposed action. On the basis of this EA, the NRC finds that there are no significant environmental impacts from the proposed action, and that preparation of an environmental impact statement is not warranted. Accordingly, the NRC has determined

that a Finding of No Significant Impact is appropriate.

IV. Further Information

Documents related to this action, including the application for license amendment and supporting documentation, are available electronically at the NRC's Electronic Reading Room at *http://www.nrc.gov/reading-rm/adams.html*. From this site, you can access the NRC's Agencywide Document Access and Management System (ADAMS), which provides text and image files of NRC's public documents. The documents related to this action are listed below, along with their ADAMS accession numbers.

(1) University or Puerto Rico, Amendment request dated November 16, 2005, with supporting documents [ML053550475].

(2) Department of Energy, letter dated August 16, 1993 [ML060470455].

(3) Department of Energy, letter dated March 19, 1993 [ML060470461].

(4) NUREG–1757, "Consolidated NMSS Decommissioning Guidance;"

(5) Title 10 Code of Federal Regulations, Part 20, Subpart E, "Radiological Criteria for License Termination;"

(6) Title 10, Code of Federal Regulations, Part 51, "Environmental Protection Regulations for Domestic Licensing and Related Regulatory Functions;"

(7). NUREG–1496, "Generic Environmental Impact Statement in Support of Rulemaking on Radiological Criteria for License Termination of NRC-Licensed Nuclear Facilities"

If you do not have access to ADAMS, or if there are problems in accessing the documents located in ADAMS, contact the NRC Public Document Room (PDR) Reference staff at 1–800–397–4209, 301–415–4737, or by e-mail to *pdr@nrc.gov*. These documents may also be viewed electronically on the public computers located at the NRC's PDR, O 1 F21, One White Flint North, 11555 Rockville Pike, Rockville, MD 20852. The PDR reproduction contractor will copy documents for a fee.

Dated at King of Prussia this 15th day of August 2006.

For the Nuclear Regulatory Commission.

James P. Dwyer,

Chief, Commercial and R&D Branch, Division of Nuclear Materials Safety, Region 1.

[FR Doc. E6–13835 Filed 8–21–06; 8:45 am]

BILLING CODE 7590–01–P

NUCLEAR REGULATORY COMMISSION

Sunshine Federal Register Notice

AGENCY HOLDING THE MEETINGS: Nuclear Regulatory Commission

DATES: Weeks of August 21, 28; September 4, 11, 18, 25, 2006.

PLACE: Commissioners' Conference Room, 11555 Rockville Pike, Rockville, Maryland.

STATUS: Public and Closed.

Matters to be Considered:

Week of August 21, 2006

There are no meetings scheduled for the Week of August 21, 2006.

Week of August 28, 2006—Tentative

There are no meetings scheduled for the Week of August 28, 2006.

Week of September 4, 2006—Tentative

Wednesday, September 6, 2006

1:50 p.m.
Affirmation Session (Public) (Tentative), a. Pa'ina Hawaii, LLC, LBP–06–4, 63 NRC 99 (2006) and LBP–06–63, NRC 409 (2006). (Tentative).

Week of September 11, 2006—Tentative

Monday, September 11, 2006

9:30 a.m.
Discussion of Security Issues (Closed—Ex. 1).
1:30 p.m.
Discussion of Security Issues (Closed—Ex. 1 & 3).

Tuesday, September 12, 2006

9:30 a.m.
Meeting with Organization of Agreement States (OAS) and Conference of Radiation Control Program Directors (CRCPD), (Public Meeting) (Contact: Shawn Smith, 301–415–2620).
This meeting will be webcast live at the Web address—*www.nrc.gov*
1 p.m.
Discussion of Security Issues (Closed—Ex. 1).

Week of September 18, 2006—Tentative

There are no meetings scheduled for the Week of September 18, 2006.

Week of September 25, 2006—Tentative

There are no meetings scheduled for the Week of September 25, 2006.

* The schedule for Commission meetings is subject to change on short notice. To verify the status of meetings call (recording)—(301) 415–1292. Contact person for more information: Michelle Schroll, (301) 415–1662.

The NRC Commission Meeting Schedule can be found on the Internet at: *www.nrc.gov/what-we-do/policy-making/schedule.html*

ADDITIONAL INFORMATION:

Affirmation of (1) Pacific Gas & Elec. Co. (Diablo Canyon ISFSI), Docket No. 72–26–ISFSI "Motion by San Luis Obispo Mothers for Peace, Sierra Club, and Peg Pinard for Declaratory and Injunctive Relief with respect to Diablo Canyon ISFSI" and (2) AmerGen Energy Company, LLC (License Renewal for Oyster Creek Nuclear Generating Station) Docket No. 50–0219, Legal challenges to LBP–06–07 and LBP–06–11, tentatively scheduled on Thursday, August 17, 2006, was postponed and will be rescheduled.

The NRC provides reasonable accommodation to individuals with disabilities where appropriate. If you need a reasonable accommodation to participate in these public meetings, or need this meeting notice or the transcript or other information from the public meetings in another format (e.g., braille, large print), please notify the NRC's Disability Program Coordinator. Deborah Chan, at 301–415–7041, TDD: 301–415–2100, or by e-mail at *DLC@nrc.gov*. Determinations on requests for reasonable accommodation will be made on a case-by-case basis.

This notice is distributed by mail to several hundred subscribers; if you no longer wish to receive it, or would like to be added to the distribution, please contact the Office of the Secretary, Washington, DC 20555 (301–415–1969). In addition, distribution of this meeting notice over the Internet system is available. If you are interested in receiving this Commission meeting schedule electronically, please send an electronic message to *dkw.@nrc.gov*.

Dated: August 17, 2006.

R. Michelle Schroll,

Office of the Secretary.

[FR Doc. 06–7089 Filed 8–18–06; 10:11 am]

BILLING CODE 7590–01–M

SECURITIES AND EXCHANGE COMMISSION

Sunshine Act Meeting

Notice is hereby given, pursuant to the provisions of the Government in the Sunshine Act, Public Law 94–409, that the Securities and Exchange Commission will hold the following meeting during the week of August 21, 2006:

A Closed Meeting will be held on Thursday, August 24, 2006 at 2 p.m.

Commissioners, Counsels to the Commissioners, the Secretary to the Commission, and recording secretaries will attend the Closed Meeting. Certain staff members who have an interest in the matters may also be present.

The General Counsel of the Commission, or his designee, has certified that, in his opinion, one or more of the exemptions set forth in 5 U.S.C. 552b(c)(3), (5), (7), (9)(B), (10) and 17 CFR 200.402(a) (3), (5), (7), (9)(ii), and (10) permit consideration of the scheduled matters at the Closed Meeting.

Commissioner Campos, as duty officer, voted to consider the items listed for the closed meeting in closed session.

The subject matters of the Closed Meeting scheduled for Thursday, August 24, 2006 will be:

Formal orders of investigation;
Institution and settlement of injunctive actions;
Institution and settlement of administrative proceedings of an enforcement nature; and
Adjudicatory matters.

At times, changes in Commission priorities require alterations in the scheduling of meeting items.

For further information and to ascertain what, if any, matters have been added, deleted or postponed, please contact: The Office of the Secretary at (202) 551–5400.

Dated: August 17, 2006.

Nancy M. Morris,

Secretary.

[FR Doc. 06–7091 Filed 8–18–06; 11:05 am]

BILLING CODE 8010–01–P

SECURITIES AND EXCHANGE COMMISSION

[Release No. 34–54319; File No. SR–NASD–2006–060]

Self-Regulatory Organizations: National Association of Securities Dealers, Inc.; Notice of Filing of Proposed Rule Change To Require Members To File Regulatory Notices With NASD Electronically

August 15, 2006.

Pursuant to Section 19(b)(1) of the Securities Exchange Act of 1934 ("Act" or "Exchange Act")[1] and Rule 19b–4 under the Act,[2] notice is given that on May 16, 2006, the National Association of Securities Dealers, Inc. ("NASD") filed with the Securities and Exchange Commission ("Commission") the proposed rule change as described in Items I, II, and III below. These items have been prepared by NASD. The Commission is publishing this notice to solicit comments on the proposed rule change from interested persons.

I. Self-Regulatory Organization's Statement of the Terms of Substance of the Proposed Rule Change

NASD proposes to adopt NASD Rule 3170 to provide NASD with the authority to require member firms to file or submit electronically with NASD any regulatory notice or other document that member firms are required to file with (or otherwise submit to) NASD. NASD may specify the electronic format to be used. The proposed rule change does not specify the particular regulatory notices or documents that NASD will require members to file electronically. Instead, NASD's proposed rule change would give NASD authority to require members to file or submit electronically with NASD any specified regulatory notice or document. NASD plans to require members to file certain specified notices with NASD via an electronic, Internet-based receiving and processing system ("System"), using templates developed by NASD for each notice. The System will be available to members on NASD's Internet Web site.

Below is the text of the proposed rule change. Proposed new language is in italic.

* * * * *

3170. Mandatory Electronic Filing Requirements

Each member shall be required to file with NASD, or otherwise submit to NASD, in such electronic format as NASD may require, all regulatory notices or other documents required to be filed or otherwise submitted to NASD, as specified by NASD.

* * * * *

II. Self-Regulatory Organization's Statement Concerning the Proposed Rule Change

In its filing with the Commission, NASD included statements concerning the purpose of and basis for the proposed rule change and discussed any comments it received on the proposed rule change. The text of these statements may be examined at the places specified in Item IV below. NASD has prepared summaries, set forth in sections A, B, and C below, of the most significant aspects of the statements.

A. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

1. Purpose

The purpose of the proposed rule change is to provide NASD with the authority to require member firms to file or submit electronically with NASD any regulatory notice or other document that member firms are required to file with (or otherwise submit to) NASD. NASD may specify the electronic format to be used. The proposed rule change does not specify the particular regulatory notices or documents that NASD will require members to file electronically. Instead, NASD's proposed rule change would give NASD authority to require members to file or submit electronically with NASD any specified regulatory notice or document.

Upon approval of the rule change, NASD will issue a Notice to Members and other member communications, as appropriate, to advise its members which regulatory notices or documents members will be required to file or submit electronically to NASD and the date on which electronic filing or submission of these notices or documents will be required. These communications will also advise members that as of the specified date, electronic filing or submission of the specified regulatory notices or documents will be mandatory, and that NASD will no longer accept facsimile or other non-electronic transmissions of these notices or documents.

NASD notes that, upon approval of the proposed rule change, NASD, as a member's designated examining authority, examining authority, or regulatory authority that examines the firm as to financial responsibility ("DEA"), plans to require members to file certain notices that must be filed with NASD under the following Exchange Act Rules electronically:[3]

- Rule 15c3–1(e)—Withdrawals of equity capital
- Rule 15c3–3(i)—Special Reserve Bank Account
- Rule 17a–4(f)(2)(i); Rule 17a–4(f)(3)(vii)—Electronic storage media
- Rule 17a–5(f)(4)—Replacement of accountant
- Rule 17a–11(b)—Net capital deficiency
- Rule 17a–11(c)(1)—Aggregate indebtedness is in excess of 1200 percent of net capital

[1] 15 U.S.C. 78s(b)(1).

[2] 17 CFR 240.19b–4.

[3] NASD has requested relief from the Commission with respect to these Exchange Act rules. Electronic filing of notices with NASD does not affect requirements in those rules to file notices with the Commission or other securities regulatory agencies.

• Rule 17a–11(c)(2)—Net capital is less than 5 percent of aggregate debit items

• Rule 17a–11(c)(3)—Net capital is less than 120 percent of required minimum dollar amount

• Rule 17a–11(d)—Failure to make and keep current books and records

• Rule 17a–11(e)—Material inadequacy in accounting systems, internal controls, or practices and procedures

NASD members will be required to file these specified notices with NASD via an electronic, Internet-based receiving and processing system ("System"), using templates developed by NASD for each notice. The System will be available to members on NASD's Internet Web site.

2. Statutory Basis

NASD believes that the proposed amendment to NYSE Rule 418 is consistent with Section 6(b) of the Act[4] in general, and furthers the objectives of Section 6(b)(5) of the Act[5] in particular, in that it is designed to promote just and equitable principles of trade, to foster cooperation and coordination with persons engaged in facilitating transactions in securities, and to remove impediments and perfect the mechanism of a free and open market and to protect investors and the public interest. NASD believes that the electronic filing of notices is cost-saving and efficient and that it will enhance the speed and efficiency of processing the filings and reduce administrative costs.

B. Self-Regulatory Organization's Statement on Burden on Competition

NASD does not believe that the proposed rule change will impose any inappropriate burden on competition.

C. Self-Regulatory Organization's Statement on Comments on the Proposed Rule Change Received From Members, Participants, or Others

Written comments were neither solicited nor received.

III. Date of Effectiveness of the Proposed Rule Change and Timing for Commission Action

Pursuant to Section 19(b)(2) of the Act,[6] within 35 days of the date of publication of this notice in the **Federal Register** or within such longer period (i) as the Commission may designate up to 90 days of such date if it finds such longer period to be appropriate and publishes its reasons for so finding or (ii) as to which the Exchange consents, the Commission will:

(A) By order approve such proposed rule change, or

(B) Institute proceedings to determine whether the proposed rule change should be disapproved.

IV. Solicitation of Comments

Interested persons are invited to submit written data, views, and arguments concerning the proposed rule change, including whether the proposed rule change is consistent with the Act. Comments may be submitted by any of the following methods:

Electronic Comments

• Use the Commission's Internet comment form (*http://www.sec.gov/rules/sro.shtml*); or

• Send e-mail to *rule-comments@sec.gov*. Please include File Number SR–NASD–2006–060 on the subject line.

Paper Comments

• Send paper comments in triplicate to Nancy M. Morris, Secretary, Securities and Exchange Commission, 100 F Street, NE., Washington, DC 20549–1090.

All submissions should refer to File Number SR–NASD–2006–060. To help the Commission process and review your comments more efficiently, please use only one method. The Commission will post all comments on the Commission's Internet Web site (*http://www.sec.gov/rules/sro/shtml*). Copies of the submission, all subsequent amendments, all written statements with respect to the proposed rule change that are filed with the Commission, and all written communications relating to the proposed rule change between the Commission and any person, other than those that may be withheld from the public in accordance with the provisions of 5 U.S.C. 552, will be available for inspection and copying in the Commission's Public Reference Section, 100 F Street, Washington, DC 20549. Copies of the filings will also be available for inspection and copying at the principal office of the NASD. All comments received will be posted without change; the Commission does not edit personal identifying information from submissions. You should submit only information that you wish to make available publicly. All submissions should refer to File number SR–NASD–2006–060 and should be submitted on or before September 12, 2006.

For the Commission, by the Division of Market Regulation, pursuant to delegated authority.[7]

Nancy M. Morris,

Secretary.

[FR Doc. E6–13812 Filed 8–21–06; 8:45 am]

BILLING CODE 8010–01–P

[4] 15 U.S.C. 78f(b).

[5] 15 U.S.C. 78f(b)(5).

[6] 15 U.S.C. 78f(b)(2).

[7] 17 CFR 200.30–3(a)(12).

SECURITIES AND EXCHANGE COMMISSION

[Release No. 34–54318; File No. SR–NASD–2006–098]

Self-Regulatory Organizations; National Association of Securities Dealers, Inc.; Notice of Filing and Immediate Effectiveness of Proposed Rule Change To Make Certain Technical, Non-Substantive Changes to its Trade Reporting Rules

August 15, 2006.

Pursuant to Section 19(b)(1) of the Securities Exchange Act of 1934 ("Act")[1] and Rule 19b–4 thereunder,[2] notice is hereby given that on August 10, 2006, the National Association of Securities Dealers, Inc. ("NASD") filed with the Securities and Exchange Commission ("Commission") the proposed rule change as described in Items I, II, and III below, which Items have been prepared by NASD. NASD has designated the proposed rule change as constituting a "non-controversial" rule change pursuant to Section 19(b)(3)(A) of the Act[3] and Rule 19b–4(f)(6) thereunder,[4] which renders the proposal effective upon filing with the Commission. The Commission is publishing this notice to solicit comments on the proposed rule change from interested persons.

I. Self-Regulatory Organization's Statement of the Terms of Substance of the Proposed Rule Change

NASD is proposing to make technical, non-substantive changes to certain NASD rules previously approved by the Commission in SR–NASD–2006–055 that were amended by SR–NASD–2005–087, which became effective August 1, 2006.[5] Below is the text of the proposed rule change.[6] Proposed new language is

[1] 15 U.S.C. 78s(b)(1).

[2] 17 CFR 240.19b–4.

[3] 15 U.S.C. 78s(b)(3)(A).

[4] 17 CFR 240.19b–4(f)(6).

[5] NASD filed SR–NASD–2005–087 on July 11, 2005 and Amendment No. 1 on June 15, 2006. The Commission approved SR–NASD–2005–087, as amended, on June 30, 2006. *See* Securities Exchange Act Release No. 54084 (June 30, 2006), 71 FR 38935 (July 10, 2006).

[6] The proposed changes indicated below are based on the rule text approved by the Commission

Continued

in italics; proposed deletions are in [brackets].

* * * * *

4000. THE [NASDAQ STOCK MARKET] *TRADE REPORTING FACILITY*

* * * * *

[4600. NASDAQ MARKET MAKER REQUIREMENTS]

* * * * *

4630. Reporting Transactions in *Designated* [Nasdaq National Market] Securities

* * * * *

4632. Transaction Reporting

(a) through (d) No Change.

(e) Transactions Not To Be Reported for Publication Purposes

The following types of transactions shall not be reported *to the Trade Reporting Facility* for publication purposes:

(1) through (6) No Change.

(f) through (g) No Change.

* * * * *

4640 Series. Deleted in its entirety

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4000A. NASD ALTERNATIVE DISPLAY FACILITY

* * * * *

4600A. TRADING IN NASDAQ SECURITIES

* * * * *

4632A. Transactions Reported by Members

(a) through (j) No Change.

(k) Transactions Not To Be Reported to NASD for Publication Purposes.

The following types of transactions effected by NASD members shall not be reported to TRACS for publication purposes:

(1) through (4) No Change.

(5) purchases or sales of securities effected upon the exercise of an option pursuant to the terms thereof or the exercise of any other right to acquire securities at a pre-established consideration unrelated to the current market[.]; *and*

(6) transactions reported on or through an exchange.

(l) No Change.

* * * * *

6000. NASD SYSTEMS AND PROGRAMS

* * * * *

6100. *CLEARING AND COMPARISON RULES* [TRADE REPORTING SERVICE]

* * * * *

6130. Trade Report Input

(a) through (f) No Change.

(g) Reporting Certain Transactions for Purposes of Regulatory Transaction Fee Assessment

The following types of transactions that are assessed a regulatory transaction fee in accordance with Section 3 of Schedule A to the NASD By-Laws must be reported to the [Nasdaq Market Center]*System* as prescribed below. Transactions must be submitted to the [Nasdaq Market Center]*System* by 6:30 p.m. Eastern Time (or the end of the [Nasdaq Market Center]*System* reporting session that is in effect at that time).

(1) Odd-Lot Transactions

Transactions for less than a normal unit of trading shall be reported to the [Nasdaq Market Center]*System* with a modifier of .RO to designate the transaction as submitted for purposes of the regulatory transaction fee under Section 3 of Schedule A to the NASD By-Laws. Transactions may be entered as clearing or non-clearing.

(2) Away From the Market Sales

Transactions where the buyer and seller have agreed to trade at a price substantially unrelated to the current market for the security, and consideration is given, shall be reported to the [Nasdaq Market Center]*System* with a modifier of .RA to designate the transaction as submitted for purposes of the regulatory transaction fee under Section 3 of Schedule A to the NASD By-Laws. Transactions may be entered as clearing or non-clearing.

(3) Exercises of OTC Options

Transactions effected pursuant to the exercise of an OTC option shall be reported to the [Nasdaq Market Center]*System* with a modifier of .RX to designate the transaction as submitted for purposes of the regulatory transaction fee under Section 3 of Schedule A to the NASD By-Laws. Transactions may be entered as clearing or non-clearing.

* * * * *

II. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

In its filing with the Commission, NASD included statements concerning the purpose of, and basis for, the proposed rule change and discussed any comments it received on the proposed rule change. The text of these statements may be examined at the places specified in Item IV below. NASD has prepared summaries, set forth in Sections A, B, and C below, of the most significant aspects of such statements.

A. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

1. Purpose

On June 30, 2006, the Commission approved SR–NASD–2005–087.[7] Among other things, SR–NASD–2005–087 proposed (1) amendments to the NASD Delegation Plan, NASD By-Laws, and NASD rules to reflect a proposed phased implementation strategy for the operation of the Nasdaq Exchange as a national securities exchange with respect to Nasdaq-listed securities during a transitional period; and (2) rules for reporting transactions effected otherwise than on an exchange to the new Trade Reporting Facility. SR–NASD–2005–087 became effective on August 1, 2006.

On June 12, 2006, the Commission approved SR–NASD–2006–055 which requires members to report all transactions that must be reported to NASD and that are subject to a regulatory transaction fee pursuant to Section 3 of Schedule A to the NASD By-Laws to the Nasdaq Market Center and/or the Trade Reporting and Comparison Service; provided, however, that certain identified transactions shall not be reported for publication purposes.[8] SR–NASD–2006–055 will become effective on a date to be announced in a future *Notice to Members*, which is anticipated to be December 1, 2006.

These two rule filings amended several of the same NASD rules. Because of the timing of the approval and implementation dates of these two filings, NASD is filing this proposed rule change to make technical, non-substantive changes to those NASD rules previously approved by the Commission but not yet effective in SR–NASD–2006–055 that were subsequently amended by the approval and implementation of SR–NASD–2005–087, which became effective on August 1, 2006.

Specifically, the underlying rule text for NASD Rules 4632, 4632A, and 6130

as part of SR–NASD–2006–055 on June 12, 2006, which, but for this subsequent filing (which became necessary due to the intervening approval and implementation of SR–NASD–2005–087), would become effective on December 1, 2006.

[7] *See* Securities Exchange Act Release No. 54084 (June 30, 2006), 71 FR 38935 (July 10, 2006).

[8] *See* Securities Exchange Act Release No. 53977 (June 12, 2006), 71 FR 34976 (June 16, 2006) (approving SR–NASD–2006–055).

contained in SR–NASD–2006–055 was subsequently amended by SR–NASD–2005–087.[9] In addition, in light of the changes implemented as part of SR–NASD–2005–087, the transactions that are subject to a regulatory transaction fee pursuant to Section 3 of Schedule A to NASD By-Laws will no longer be reported to the Nasdaq Market Center as originally proposed in NASD Rule 6120(g), but to another NASD facility, either the Trade Reporting Facility or the OTC Reporting Facility, as defined in NASD Rule 6110. As a result, NASD is proposing changes to the rule text approved pursuant to SR–NASD–2006–055 to conform it to the recently approved rule changes as part of SR–NASD–2005–087. In addition, SR–NASD–2006–055 proposed amendments to NASD Rule 4642, which was subsequently deleted in SR–NASD–2005–087, and therefore these rule changes are no longer necessary.

NASD has filed the proposed rule change for immediate effectiveness. The implementation date will be the implementation date of SR–NASD–2006–055, which is anticipated to be December 1, 2006.

2. Statutory Basis

NASD believes that the proposed rule change is consistent with the provisions of Section 15A(b)(6) of the Act,[10] which requires, among other things, that NASD rules must be designed to prevent fraudulent and manipulative acts and practices, to promote just and equitable principles of trade, and, in general, to protect investors and the public interest. NASD believes that the proposed rule change will enhance the integrity of the market by increasing the consistency and clarity of its rules.

B. Self-Regulatory Organization's Statement on Burden on Competition

NASD does not believe that the proposed rule change will impose any burden on competition that is not necessary or appropriate in furtherance of the purposes of the Act.

C. Self-Regulatory Organization's Statement on Comments on the Proposed Rule Change Received From Members, Participants or Others

Written comments were neither solicited nor received.

[9] The amendments to Section 3 of Schedule A to NASD By-Laws and NASD Rules 6420, 6620, and 6130A were unaffected by SR–NASD–2005–087. Accordingly, these amendments will become effective in accordance with SR–NASD–2006–055 and the corresponding *Notice to Members* that will announce the effective date of the amendments, which is anticipated to be December 1, 2006.

[10] 15 U.S.C. 78*o*–3(b)(6).

III. Date of Effectiveness of the Proposed Rule Change and Timing for Commission Action

Because the foregoing proposed rule change does not: (1) Significantly affect the protection of investors or the public interest; (2) impose any significant burden on competition; and (3) become operative for 30 days from the date on which it was filed, or such shorter time as the Commission may designate if consistent with the protection of investors and the public interest, provided that the Exchange has given the Commission written notice of its intent to file the proposed rule change at least five business days prior to the filing date of the proposal.[11]

At any time within 60 days of the filing of the proposed rule change, the Commission may summarily abrogate such rule change if it appears to the Commission that such action is necessary or appropriate in the public interest, for the protection of investors, or otherwise in furtherance of the purposes of the Act.

IV. Solicitation of Comments

Interested persons are invited to submit written data, views, and arguments concerning the foregoing, including whether the proposed rule change is consistent with the Act. Comments may be submitted by any of the following methods:

Electronic Comments

- Use the Commission's Internet comment form (*http://www.sec.gov/rules/sro.shtml*); or
- Send an E-mail to *rule-comments@sec.gov*. Please include File Number SR–NASD–2006–098 on the subject line.

Paper Comments

- Send paper comments in triplicate to Nancy M. Morris, Secretary, Securities and Exchange Commission, 100 F Street, NE., Washington, DC 20549–1090.

All submissions should refer to File Number SR–NASD–2006–098. This file number should be included on the subject line if E-mail is used. To help the Commission process and review your comments more efficiently, please use only one method. The Commission will post all comments on the Commission's Internet Web site (*http://www.sec.gov/rules/sro.shtml*). Copies of the submission, all subsequent amendments, all written statements with respect to the proposed rule change that are filed with the Commission, and all written communications relating to the proposed rule change between the Commission and any person, other than those that may be withheld from the public in accordance with the provisions of 5 U.S.C. 552, will be available for inspection and copying in the Commission's Public Reference Room. Copies of such filing also will be available for inspection and copying at the principal office of the NASD. All comments received will be posted without change; the Commission does not edit personal identifying information from submissions. You should submit only information that you wish to make available publicly. All submissions should refer to File Number SR–NASD–2006–098 and should be submitted on or before September 12, 2006.

[11] As required under Rule 19b–4(f)(6)(iii), NASD provided the Commission with notice of its intent to file the proposed rule change at least five business days prior to the date of filing of the proposal.

For the Commission, by the Division of Market Regulation, pursuant to delegated authority.[12]

Nancy M. Morris,

Secretary.

[FR Doc. E6–13816 Filed 8–21–06; 8:45 am]

BILLING CODE 8010–01–P

[12] 17 CFR 200.30–3(a)(12).

SECURITIES AND EXCHANGE COMMISSION

[Release No. 34–54320; File No. SR–NYSE–2005–18]

Self-Regulatory Organizations; New York Stock Exchange, Inc.; Order Approving Proposed Rule Change and Amendments No. 1 and 2 Thereto Regarding NYSE Rule 619 To Clarify That Failure To Appear or Produce Documents in Arbitration May Be Deemed Conduct Inconsistent With Just and Equitable Principles of Trade

August 15, 2006.

I. Introduction

On February 17, 2005, the New York Stock Exchange, Inc. ("NYSE" or the "Exchange") filed with the Securities and Exchange Commission ("SEC" or "Commission"), pursuant to Section 19(b)(1) of the Securities Exchange Act of 1934 ("Act")[1] and Rule 19b–4 thereunder,[2] a proposed rule change to amend Rule 619 to clarify that it may be deemed conduct or proceeding inconsistent with just and equitable principles of trade for purposes of NYSE Rule 476(a)(6) for a member, member

[1] 15 U.S.C. 78s(b)(1).

[2] 17 CFR 240.19b–4.

organization, allied member, approved person, registered or non-registered employee of a member or member organization or person otherwise subject to the jurisdiction of the Exchange (each, a "responsible party") to fail to appear or fail to produce any document in its possession or control as directed pursuant to applicable provisions of the NYSE Arbitration Rules. On July 27, 2005, the Exchange filed Amendment No. 1 to the proposed rule change.[3] On February 15, 2006, the Exchange filed Amendment No. 2 to the proposed rule change.[4] The proposed rule change was published for comment in the **Federal Register** on April 11, 2006.[5] The Commission received five comment letters on the proposal.[6] This order approves the proposed rule change as amended.

II. Description of the Proposal

NYSE Rule 476 allows disciplinary sanctions to be imposed upon a responsible party who is adjudged guilty of certain enumerated offenses, including "conduct or proceeding inconsistent with just and equitable principles of trade." The proposal would amend Rule 619 to clarify that it may be deemed conduct or proceeding inconsistent with just and equitable principles of trade for purposes of NYSE Rule 476(a)(6) for a responsible party to fail to appear or fail to produce any document in its possession or control as directed pursuant to provisions of the NYSE Arbitration Rules.

The Exchange is aware of allegations that member organizations have not fulfilled their discovery obligations as prescribed by NYSE Arbitration Rules. The NYSE believes that the express authority for the NYSE to bring a disciplinary action under NYSE Rule 476(a)(6) will improve the efficacy of the arbitration process by facilitating the Exchange's ability to ensure more fully and forcefully the cooperation of a responsible party who is a party to an arbitration proceeding. By explicitly providing that the failure to appear or to produce documents in one's possession or control may be deemed conduct or proceeding inconsistent with just and equitable principles of trade, the NYSE believes that the proposed amendment would provide the Exchange with a clear mechanism to pursue disciplinary action pursuant to NYSE Rule 476 in response to such conduct.

III. Summary of Comments

The Commission received five comment letters on the proposal.[7] Commenters generally supported the proposal.[8] As discussed below, however, some raised concerns with certain aspects of it.

Proposed Rule 619(h) states in relevant part that "[i]t may be deemed conduct or proceeding inconsistent with just and equitable principles of trade for purposes of Rule 476(a)(6) [for a responsible party] to fail to appear or to produce any document in their possession or control *as directed pursuant to provisions of the NYSE Arbitration Rules.*" (Emphasis added.) One commenter stated that the emphasized language could be misconstrued to require the prior direction or an order of an arbitration panel before the NYSE could charge the party with a violation of Rule 476.[9] The commenter also suggested that the proposed rule be amended to clarify that it does not affect an arbitrator's current authority under Rules 604 (dismissal of proceedings) and 621 (enforcement of rulings).[10]

Two commenters believed that the proposed rule does not adequately address what the commenters' view are ongoing problems with arbitrator conflicts of interest.[11] One of these commenters stated that a securities arbitrator may be reluctant to impose sanctions on a party for fear that the party may not select the arbitrator to serve on future NYSE arbitration panels.[12]

IV. Discussion and Commission Findings

After careful review, the Commission finds that the proposed rule change, as amended, is consistent with the Act and, in particular, with Section 6(b)(5) of the Act, which requires, among other things, that the NYSE's rules be designed to prevent fraudulent and manipulative acts and practices, to promote just and equitable principles of trade, and, in general, to protect investors and the public interest.[13] The Commission also finds that the proposal is consistent with Section 6(b)(6)[14] of the Act, which requires, among other things, that the rules of an exchange provide that members and persons associated with its members be appropriately disciplined for violating the Act, the rules or regulations under the Act, or the rules of the exchange.

In particular, the Commission believes that by expressly authorizing the NYSE to bring an action against a member under Rule 476 for failing to appear or to produce any document in its possession or control in an arbitration proceeding, the proposal will enable NYSE to appropriately discipline such members. Moreover, the Commission believes the proposed rule could reduce discovery abuses by alerting parties to the importance of complying with NYSE Rule 619.

One commenter stated that the proposal could be misconstrued to require an order of an arbitration panel before NYSE could charge a party with violating Rule 476.[15] NYSE staff confirms that the proposed rule does not require an arbitration panel to issue an order before the NYSE could bring an action under Rule 476. Indeed, the proposal does not require any action from the arbitration panel before the NYSE may bring such an action. Moreover, the proposal authorizes the NYSE to bring an action under Rule 476 against a party during an arbitration proceeding if the NYSE believes such action is warranted.[16]

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[3] In Amendment No. 1, which replaced the original filing, the Exchange clarified that Rule 619 also applies to a "person otherwise subject to the jurisdiction of the Exchange."

[4] Amendment No. 2, which replaced the first amended rule filing, conformed the proposed rule to reflect the list of persons subject to disciplinary action under NYSE Rule 476.

[5] *See* Exchange Act Release No. 53599 (Apr. 4, 2006), 71 FR 18401 (Apr. 11, 2006).

[6] *See* E-mail from David Plimpton, Plimpton & Esposito, to *rule-comments@sec.gov*, dated April 27, 2006 ("Plimpton"); letter from Robert S. Banks, Jr., Public Investors Arbitration Bar Association, dated April 25, 2006 ("PIABA"); E-mail from A. Daniel Woska, A. Daniel Woska & Associates, P.C., to *rule-comments@sec.gov*, dated April 23, 2006 ("Woska"); E-mail from Les Greenberg, Law Offices of Les Greenberg, to *rule-comments@sec.gov*, dated April 20, 2006 ("Greenberg"); letter from Steven B. Caruso, Maddox Hargett Caruso, P.C., dated April 11, 2006 ("Caruso").

[7] *See id.*

[8] For example, one commenter supported the proposed rule because, in the commenter's view, members that violate discovery rules do not regard their conduct as serious unless sanctions are imposed. PIABA. *See also* Woska.

[9] *See* Caruso.

[10] *Id.* Two commenters stated that arbitrators need to better enforce existing procedures, particularly Rule 604(b), which allows an arbitrator to impose sanctions against a party that willfully and intentionally fails to comply with an arbitrator's order if lesser sanctions have proven ineffective. Greenberg and PIABA.

[11] *See* Greenberg (stating that monetary sanctions on attorneys might be a more effective deterrent) and Plimpton (questioning whether NYSE arbitrators are independent enough to take action to curb discovery abuse).

[12] *See* Greenberg. To address concerns about arbitrator reluctance to sanction a party, the commenter suggested that the proposal require arbitrators to refer all contested discovery orders to NYSE.

[13] 15 U.S.C. 78f(b)(5).

[14] 15 U.S.C. 78f(b)(6).

[15] Caruso.

[16] Telephone conversation between Karen Kupersmith, Director of Arbitration, NYSE, and Richard Strasser, Attorney Fellow, SEC (Aug. 1, 2006). The commenter also suggested that the proposed rule be amended to clarify that it does not affect the power of an arbitrator to impose sanctions under Rules 604 (dismissal of proceedings) and 621

Some commenters raised broader concerns about arbitrator conflicts of interest and the need for arbitrators to better enforce existing arbitration procedures.[17] The Commission believes these comments are beyond the scope of the current proposal.

VI. Conclusion

It is therefore ordered, pursuant to Section 19(b)(2) of the Act[18] that the proposed rule change (SR–NYSE–2005–18), as amended, be, and hereby is, approved.

For the Commission, by the Division of Market Regulation, pursuant to delegated authority.[19]

Nancy M. Morris,

Secretary.

[FR Doc. E6–13811 Filed 8–21–06; 8:45 am]

BILLING CODE 8010–01–P

SMALL BUSINESS ADMINISTRATION

[Disaster Declaration # 10567 and # 10568]

Texas Disaster # TX–00195

AGENCY: U.S. Small Business Administration.

ACTION: Notice.

SUMMARY: This is a Notice of the Presidential declaration of a major disaster for the State of Texas (FEMA—1658—DR), dated 08/15/2006.

Incident: Flooding.

Incident Period: 07/31/2006 and continuing.

Effective Date: 08/15/2006.

Physical Loan Application Deadline Date: 10/16/2006.

Economic Injury (Eidl) Loan Application Deadline Date: 05/15/2007.

ADDRESSES: Submit completed loan applications to :

U.S. Small Business Administration, National Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, TX 76155.

FOR FURTHER INFORMATION CONTACT: A. Escobar, Office of Disaster Assistance, U.S. Small Business Administration, 409 3rd Street, SW., Suite 6050, Washington, DC 20416.

SUPPLEMENTARY INFORMATION: Notice is hereby given that as a result of the President's major disaster declaration on 08/15/2006, applications for disaster loans may be filed at the address listed above or other locally announced locations.

The following areas have been determined to be adversely affected by the disaster:

Primary Counties (Physical Damage and Economic Injury Loans): El Paso

Contiguous Counties (Economic Injury Loans Only): Texas Hudspeth, New Mexico, Dona Ana Otero

The Interest Rates are:

	Percent
For Physical Damage:	
Homeowners with credit available elsewhere	6.250
Homeowners without credit available elsewhere	3.125
Businesses with credit available elsewhere	7.934
Other (including non-profit organizations) with credit available elsewhere	5.000
Businesses and non-profit organizations without credit available elsewhere	4.000
For Economic Injury:	
Businesses & small agricultural cooperatives without credit available elsewhere	4.000

The number assigned to this disaster for physical damage is 10567 6 and for economic injury is 10568 0.

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

Herbert L. Mitchell,

Associate Administrator, for Disaster Assistance.

[FR Doc. E6–13852 Filed 8–21–06; 8:45 am]

BILLING CODE 8025–01–P

SOCIAL SECURITY ADMINISTRATION

Privacy Act of 1974 as Amended; Computer Matching Program (SSA/Department of the Treasury, Internal Revenue Service (IRS))—Match 1310

AGENCY: Social Security Administration (SSA).

ACTION: Notice of a new computer matching program, which is expected to begin October 1, 2006.

SUMMARY: In accordance with the provisions of the Privacy Act, as amended, this notice announces a computer matching program that SSA plans to conduct with the IRS.

DATES: SSA will file a report of the subject matching program with the Committee on Homeland Security and Governmental Affairs of the Senate, the Committee on Government Reform of the House of Representatives, and the Office of Information and Regulatory Affairs, Office of Management and Budget (OMB). The matching program will be effective as indicated below.

ADDRESSES: Interested parties may comment on this notice by either telefaxing to (410) 965–8582 or by writing to the Associate Commissioner, Office of Income Security Programs, 252 Altmeyer Building, 6401 Security Boulevard, Baltimore, MD 21235–6401. All comments received will be available for public inspection at this address.

FOR FURTHER INFORMATION CONTACT: The Associate Commissioner for Income Security Programs as shown above.

SUPPLEMENTARY INFORMATION:

A. General

The Computer Matching and Privacy Protection Act of 1988 (Pub. L. 100–503), amended the Privacy Act (5 U.S.C. 552a) by describing the manner in which computer matching involving Federal agencies could be performed and adding certain protections for individuals applying for, and receiving, Federal benefits. Section 7201 of the Omnibus Budget Reconciliation Act of 1990 (Pub. L. 101–508) further amended the Privacy Act regarding protections for such individuals. The Privacy Act, as amended, regulates the use of computer matching by Federal agencies when records in a system of records are matched with other Federal, State, or local government records.

It requires Federal agencies involved in computer matching programs to:

(1) Negotiate written agreements with the other agency or agencies participating in the matching programs;

(2) Obtain the Data Integrity Boards' approval of the match agreements;

(3) Publish notice of the computer matching program in the **Federal Register**;

(4) Furnish detailed reports about matching programs to Congress and OMB;

(5) Notify applicants and beneficiaries that their records are subject to matching; and

(6) Verify match findings before reducing, suspending, terminating, or denying an individual's benefits or payments.

B. SSA Computer Matches Subject to the Privacy Act

We have taken action to ensure that all of SSA's computer matching programs comply with the requirements of the Privacy Act, as amended.

(enforcement of rulings). In the telephone call referenced above, NYSE staff stated that nothing in the proposal is intended to affect arbitrators' current authority under existing NYSE arbitration rules.

[17] *See, e.g.*, Greenberg and Plimpton.

[18] 15 U.S.C. 78s(b)(2).

[19] 17 CFR 200.30–3(a)(12).

Dated: August 4, 2006.

Martin H. Gerry,

Deputy Commissioner for Disability and Income Security Programs.

Notice of Computer Matching Program, Social Security Administration (SSA) with Internal Revenue Service (IRS)

A. PARTICIPATING AGENCIES

SSA and IRS

B. PURPOSE OF THE MATCHING PROGRAM

The purpose of this matching program is to establish the correct amount of Medicare Part B premium subsidy adjustment under section 1839(i) of the Medicare Prescription Drug, Improvement and Modernization Act of 2003 (MMA). Pursuant to section 1839(i) of the MMA (42 U.S.C. 1395r), SSA shall determine whether a Medicare Part B enrollee would pay a larger percentage of the Part B premium than an individual with income below the applicable threshold.

C. AUTHORITY FOR CONDUCTING THE MATCHING PROGRAM

Section 6103(l)(20) of the Internal Revenue Code (26 U.S.C. 6103(1)(20)) authorizes the IRS to disclose return information with respect to Modified Adjusted Gross Income (MAGI) to SSA for the purpose of adjusting the usual Part B premium subsidy for Medicare beneficiaries with MAGI above the applicable threshold. Section 1839(i) of the MMA requires the Commissioner of SSA to determine the amount of an individual's Part B premium if the MAGI is above the applicable threshold for an individual or a married couple as established in section 1839(i)(2)(A) of the Act.

D. CATEGORIES OF RECORDS AND INDIVIDUALS COVERED BY THE MATCHING PROGRAM

SSA will provide the IRS with identifying information with respect to enrollees for Medicare Part B from the Master Beneficiary Record system of records, SSA/ORSIS 60–0090, originally published at 60 FR 2144 (January 6, 1995) and as revised at 71 FR 1826 (January 11, 2006). MAGI data provided by the IRS will be maintained in the Medicare Database system of records, SSA/ORSIS 60–0321, published at 69 FR 77816 (December 28, 2004), which is currently being revised to include the Medicare Part B income related monthly adjustment amount. IRS will extract return information with respect to MAGI from the Return Transaction File, which is a part of the Individual Returns, Adjustments and Miscellaneous Documents File, Treasury/IRS 22.034, as published at 66 FR 63794 (December 10, 2001).

E. INCLUSIVE DATES OF THE MATCHING PROGRAM

The matching program will become effective no sooner than 40 days after notice of the matching program is sent to Congress and OMB, or 30 days after publication of this notice in the **Federal Register**, whichever date is later. The matching program will continue for 18 months from the effective date and may be extended for an additional 12 months thereafter, if certain conditions are met.

[FR Doc. E6–13863 Filed 8–21–06; 8:45 am]

BILLING CODE 4191–02–P

DEPARTMENT OF STATE

[Public Notice 5518]

60-Day Notice of Proposed Information Collection: DSP–122, Supplemental Registration for the Diversity Immigrant Visa Program, OMB No. 1405–0098, DSP–122

ACTION: Notice of request for public comments.

SUMMARY: The Department of State is seeking Office of Management and Budget (OMB) approval for the information collection described below. The purpose of this notice is to allow 60 days for public comment in the **Federal Register** preceding submission to OMB. We are conducting this process in accordance with the Paperwork Reduction Act of 1995.

- *Title of Information Collection:* Supplemental Registration for the Diversity Immigrant Visa Program.
- *OMB Control Number:* 1405–0098.
- *Type of Request:* Extension of a Currently Approved Collection.
- *Originating Office:* Bureau of Consular Affairs, Office of Visa Services.
- *Form Number:* DSP–122.
- *Respondents:* Diversity visa applicants.
- *Estimated Number of Respondents:* 60,000.
- *Estimated Number of Responses:* 60,000.
- *Average Hours per Response:* 30 minutes.
- *Total Estimated Burden:* 30,000.
- *Frequency:* Once per application.
- *Obligation to Respond:* Required to obtain benefit.

DATES: The Department will accept comments from the public up to 60 days from August 22, 2006.

ADDRESSES: You may submit comments by any of the following methods:

- *E-mail: VisaRegs@state.gov* (the subject line of the e-mail must be DSP–122)
- *Mail (paper, disk, or CD–ROM submissions):* Chief, Legislation and Regulation Division, Visa Services—DSP–122 Reauthorization, 2401 E Street, NW., Washington, DC 20520–30106.
- *Fax:* (202) 663–3898.

You must include the DS form number (if applicable); information collection title, and OMB control number in any correspondence.

FOR FURTHER INFORMATION CONTACT: Direct requests for additional information regarding the collection listed in this notice, including requests for copies of the proposed information collection and supporting documents, to Andrea Lage of the Office of Visa Services, U.S. Department of State, 2401 E Street, NW., L–603, Washington, DC 20520, who may be reached at (202) 663–1221 or *lageab@state.gov*.

SUPPLEMENTARY INFORMATION: We are soliciting public comments to permit the Department to:

- Evaluate whether the proposed information collection is necessary for the proper performance of our functions.
- Evaluate the accuracy of our estimate of the burden of the proposed collection, including the validity of the methodology and assumptions used.
- Enhance the quality, utility, and clarity of the information to be collected.
- Minimize the reporting burden on those who are to respond, including the use of automated collection techniques or other forms of technology.

Abstract of proposed collection: The Kentucky Consular Center (KCC) will register selected diversity visa lottery entries and then send the applicant an Instruction Package for Immigrant Visa Applicants, which consists of DS–122 (Supplemental Registration for the Diversity Immigrant Visa Program) and DS–230 (Application for Immigrant Visa and Alien Registration Part I and II). In order for an applicant to be considered documentarily qualified for a visa, the applicant must complete and return both of the above-mentioned forms to KCC. Upon receipt of these forms KCC will transmit the Immigrant Visa Appointment Package and schedule an appointment for the applicant.

Methodology: Applicants must return the completed form to the KCC via mail.

Dated: August 7, 2006.

Stephen A. Edson,

Deputy Assistant Secretary, Bureau of Consular Affairs, Department of State.

[FR Doc. E6–13883 Filed 8–21–06; 8:45 am]

BILLING CODE 4710–06–P

DEPARTMENT OF STATE

[Public Notice: 5522]

Bureau of Western Hemisphere Affairs; Notice of New Information Collection Under Emergency Review: Human Rights Violators List; Form DS–5090e, OMB Control Number 1405–xxxx

AGENCY: Bureau of Western Hemisphere Affairs, Department of State.

ACTION: Notice of request for Emergency OMB approval.

SUMMARY: The Department of State has submitted the following new information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the emergency review procedures of the Paperwork Reduction Act of 1995.

Type of Request: Emergency Review.

Originating Office: Bureau of Western Hemisphere Affairs, Office of Cuban Affairs (WHA/CCA)

Title of Information Collection: Human Rights Violators List.

Frequency: On occasion.

Form Number: DS–5090e.

Respondents: Victims of human rights violations.

Estimated Number of Respondents: 7,300.

Average Hours per Response: 15 minutes per response.

Total Estimated Burden: 1,825 hours.

The proposed information collection is published to obtain comments from the public and affected agencies. Emergency review and approval of this collection has been requested from OMB by August 18, 2006. If granted, the emergency approval is only valid for 180 days. During this 180-day period, we will publish a separate **Federal Register** Notice announcing the initiation of an extensive 60-day agency review and public comment period on this collection. We will submit the collection to OMB and seek an extension of this emergency approval.

Comments should be directed to Katherine Astrich, State Department Desk Officer, Office of Information and Regulatory Affairs, Office of Management and Budget (OMB), Washington, DC 20530, who may be reached on 202–395–4718.

For Additional Information: Requests for additional information, regarding the collection listed in this notice should be directed to Tim Zuniga-Brown, Office of Cuban Affairs, U.S. Department of State, Washington, DC 20520, who may be reached on 202–647–7481.

Abstract of Proposed Collection

The President has asked the interagency community to use the temporary transfer of power from Fidel Castro to his brother Raul Castro in August 2006 as an historic moment to work to encourage a democratic transition in Cuba. In keeping with the recommendations of the Commission for Assistance to a Free Cuba report, the State Department will seek information from the public about human rights abuses committed by Cuban authorities, including the military and members of the security forces. The information is sought in accordance with, inter alia, 22 U.S.C. 2656 and 2304(a)(1). The principal purpose for collecting the information is to prepare and maintain a database of human rights abusers in Cuba. The Department may use this information in connection with its responsibilities for the protection and promotion of human rights and for the conduct of foreign affairs, as well as for other appropriate purposes as a routine part of the Department's activities.

Methodology: WHA/CCA will collect this information via electronic submission.

Dated: August 16, 2006.

Caleb McCarry,

Cuban Transition Coordinator, Bureau of Western Hemisphere Affairs, Department of State.

[FR Doc. E6–13960 Filed 8–21–06; 8:45 am]

BILLING CODE 4710–29–P

DEPARTMENT OF STATE

[Public Notice 5520]

Culturally Significant Objects Imported for Exhibition Determinations: "Embroidering Identities: A Century of Palestinian Clothing"

SUMMARY: Notice is hereby given of the following determinations: Pursuant to the authority vested in me by the Act of October 19, 1965 (79 Stat. 985; 22 U.S.C. 2459), Executive Order 12047 of March 27, 1978, the Foreign Affairs Reform and Restructuring Act of 1998 (112 Stat. 2681, *et seq.*; 22 U.S.C. 6501 note, *et seq.*), Delegation of Authority No. 234 of October 1, 1999, Delegation of Authority No. 236 of October 19, 1999, as amended, and Delegation of Authority No. 257 of April 15, 2003 [68 FR 19875], I hereby determine that the objects to be included in the exhibition "Embroidering Identities: A Century of Palestinian Clothing," imported from abroad for temporary exhibition within the United States, are of cultural significance. The objects are imported pursuant to a loan agreement with the foreign owner. I also determine that the exhibition or display of the exhibit objects at the Oriental Institute Museum of the University of Chicago, Chicago, Illinois, from on or about November 4, 2006, until on or about March 25, 2007, and at possible additional venues yet to be determined, is in the national interest. Public Notice of these Determinations is ordered to be published in the **Federal Register**.

FOR FURTHER INFORMATION CONTACT: For further information, including a list of the exhibit objects, contact Paul Manning, Attorney-Adviser, Office of the Legal Adviser, U.S. Department of State (telephone: 202/453–8050). The address is U.S. Department of State, SA–44, 301 4th Street, SW., Room 700, Washington, DC 20547–0001.

Dated: August 16, 2006.

C. Miller Crouch,

Principal Deputy Assistant Secretary for Educational and Cultural Affairs, Department of State.

[FR Doc. E6–13891 Filed 8–21–06; 8:45 am]

BILLING CODE 4710–05–P

DEPARTMENT OF STATE

[Public Notice 5519]

Culturally Significant Objects Imported for Exhibition Determinations: "Picasso and American Art"

SUMMARY: Notice is hereby given of the following determinations: Pursuant to the authority vested in me by the Act of October 19, 1965 (79 Stat. 985; 22 U.S.C. 2459), Executive Order 12047 of March 27, 1978, the Foreign Affairs Reform and Restructuring Act of 1998 (112 Stat. 2681, *et seq.*; 22 U.S.C. 6501 note, *et seq.*), Delegation of Authority No. 234 of October 1, 1999, Delegation of Authority No. 236 of October 19, 1999, as amended, and Delegation of Authority No. 257 of April 15, 2003 [68 FR 19875], I hereby determine that the objects to be included in the exhibition "Picasso and American Art," imported from abroad for temporary exhibition within the United States, are of cultural significance. The objects are imported pursuant to loan agreements with the foreign owners or custodians. I also determine that the exhibition or display of the exhibit objects at the Whitney Museum of American Art, New York, New York, from on or about September 28, 2006, until on or about January 28, 2007, at the San Francisco Museum of Modern Art, San Francisco, California, from on or about February 25, 2007, until on or about May 28, 2007, and at the Walker Art Center, Minneapolis, Minnesota, from on or about June 17, 2007, until on or about September 9, 2007, and at possible additional venues yet to be determined, is in the national

interest. Public Notice of these Determinations is ordered to be published in the **Federal Register**.

FOR FURTHER INFORMATION CONTACT: For further information, including a list of the exhibit objects, contact Julianne Simpson, Attorney-Adviser, Office of the Legal Adviser, U.S. Department of State (telephone: 202/453–8049). The address is U.S. Department of State, SA–44, 301 4th Street, SW., Room 700, Washington, DC 20547–0001.

Dated: August 15, 2006.

C. Miller Crouch,

Principal Deputy Assistant Secretary for Educational and Cultural Affairs, Department of State.

[FR Doc. E6–13881 Filed 8–21–06; 8:45 am]

BILLING CODE 4710–05–P

DEPARTMENT OF STATE

[Public Notice 5508]

Defense Trade Advisory Group; Notice of Open Meeting

AGENCY: Department of State.

ACTION: Notice.

SUMMARY: The Defense Trade Advisory Group (DTAG) will meet in open session from 9 a.m. to 12 noon on Thursday, September 21, 2006, in the Dean Acheson Auditorium at the U.S. Department of State, Harry S. Truman Building, Washington, DC. Entry and registration will begin at 8:15. Please use the building entrance located at 23rd Street, NW., Washington, DC, between C & D streets. The membership of this advisory committee consists of private sector defense trade specialists, appointed by the Assistant Secretary of State for Political-Military Affairs, who advise the Department on policies, regulations, and technical issues affecting defense trade. The purpose of the meeting will be to discuss current defense trade issues and topics for further study. The next DTAG Plenary meeting is scheduled for March 8, 2007 from 9 a.m. to 12 p.m. in the East Auditorium at the U.S. Department of State, Harry S. Truman Building, Washington, DC.

Although public seating will be limited due to the size of the conference room, members of the public may attend this open session as seating capacity allows, and will be permitted to participate in the discussion in accordance with the Chairman's instructions. Members of the public may, if they wish, submit a brief statement to the committee in writing.

As access to the Department of State facilities is controlled, persons wishing to attend the meeting must notify the DTAG Executive Secretariat by COB Thursday, September 14, 2006. If notified after this date, the DTAG Secretariat cannot guarantee that the Department's Bureau of Diplomatic Security can complete the necessary processing required to attend the September 21 plenary.

Each non-member observer or DTAG member needing building access that wishes to attend this plenary session should provide: his/her name; company or organizational affiliation; phone number; date of birth; and identifying data such as driver's license number, U.S. Government ID, or U.S. Military ID, to the DTAG Secretariat contact person, Nicholas Memos, via e-mail at *MemosNI@state.gov*. DTAG members planning to attend the plenary session should notify the DTAG Secretariat contact person, Nicholas Memos, at the e-mail provided above. A RSVP list will be provided to Diplomatic Security and the Reception Desk at the 23rd Street Entrance. Attendees must present a driver's license with photo, a passport, a U.S. Government ID, or other valid photo ID for entry.

FOR FURTHER INFORMATION CONTACT: Nicholas Memos, PM/DDTC, SA–1, 12th Floor, Directorate of Defense Trade Controls, Bureau of Political-Military Affairs, U.S. Department of State, Washington, DC 20522–0112; telephone (202) 663–2804; fax (202) 261–8199; or e-mail *MemosNI@state.gov*.

Dated: August 16, 2006.

Robert W. Maggi,

Executive Secretary, Defense Trade Advisory Group, Department of State.

[FR Doc. E6–13882 Filed 8–21–06; 8:45 am]

BILLING CODE 4710–25–P

DEPARTMENT OF STATE

[Public Notice 5521]

U.S. Advisory Commission on Public Diplomacy; Notice of Meeting

The U.S. Advisory Commission on Public Diplomacy will hold a meeting on September 15, 2006, in Room 840 at the U.S. Department of State at 301 4th St., SW., Washington, DC 20547. The meeting will be held from 9 to 10 a.m. The Commissioners will discuss public diplomacy issues and progress made in evaluating public diplomacy programs.

The Commission was reauthorized pursuant to Public Law 109–108. (H.R. 2862, Science, State, Justice, Commerce, and Related agencies Appropriations Act, 2006). The U.S. Advisory Commission on Public Diplomacy is a bipartisan Presidentially appointed panel created by Congress in 1948 to provide oversight of U.S. Government activities intended to understand, inform and influence foreign publics. The Commission reports its findings and recommendations to the President, the Congress and the Secretary of State and the American people. Current Commission members include Barbara M. Barrett of Arizona, who is the Chairman; Harold Pachios of Maine; Ambassador Penne Percy Korth of Washington, DC; Ambassador Elizabeth Bagley of Washington, DC; Charles "Tre" Evers of Florida; Jay T. Snyder of New York; and Maria Sophia Aguirre of Washington, DC.

Seating is limited. To attend the meeting and for more information, please contact Carl Chan at (202) 203–7883, or (202) 203–7880.

Dated: August 14, 2006.

Carl Chan,

Interim Executive Director, ACPD, Department of State.

[FR Doc. E6–13884 Filed 8–21–06; 8:45 am]

BILLING CODE 4710–11–P

DEPARTMENT OF TRANSPORTATION

Office of the Secretary

Aviation Proceedings, Agreements Filed the Week Ending August 4, 2006

The following Agreements were filed with the Department of Transportation under the Sections 412 and 414 of the Federal Aviation Act, as amended (49 U.S.C. 1382 and 1384) and procedures governing proceedings to enforce these provisions. Answers may be filed within 21 days after the filing of the application.

Docket Number: OST–2006–25543.

Date Filed: August 2, 2006.

Parties: Members of the International Air Transport Association.

Subject: Composite Passenger Tariff Coordinating Conference Composite Expedited Resolution 024d (Memo 1327)

Intended Effective Date: September 1, 2006.

Renee V. Wright,

Program Manager Docket Operations, Federal Register Liaison .

[FR Doc. E6–13878 Filed 8–21–06; 8:45 am]

BILLING CODE 4910–P

DEPARTMENT OF TRANSPORTATION

Office of the Secretary

Notice of Applications for Certificates of Public Convenience and Necessity and Foreign Air Carrier Permits Filed Under Subpart B (formerly Subpart Q) During the Week Ending August 4, 2006

The following Applications for Certificates of Public Convenience and Necessity and Foreign Air Carrier Permits were filed under Subpart B (formerly Subpart Q) of the Department of Transportation's Procedural Regulations (See 14 CFR 301.201 *et. seq.*). The due date for Answers, Conforming Applications, or Motions To Modify Scope are set forth below for each application. Following the Answer period DOT may process the application by expedited procedures. Such procedures may consist of the adoption of a show-cause order, a tentative order, or in appropriate cases a final order without further proceedings.

Docket Number: OST–1996–1371.
Date Filed: August 1, 2006.
Due Date for Answers, Conforming Applications, or Motion To Modify Scope: August 22, 2006.
Description: Application of Delta Air Lines, Inc. requesting renewal of its certificate authority to engage in scheduled foreign air transportation of persons, property and mail between the terminal point Atlanta, GA, and the coterminal points Madrid, Barcelona, Malaga and Palma de Mallorca, Spain which are foreign points named on segment 5 of Delta's certificate for Route 178.

Docket Number: OST–2001–9855.
Date Filed: August 1, 2006.
Due Date for Answers, Conforming Applications, or Motion To Modify Scope: August 22, 2006.
Description: Application of Delta Air Lines, Inc. requesting renewal of its certificate authority to provide foreign air transportation of persons, property and mail between the United States and Athens, Greece, which is a foreign point named on segments 3 and 9 of Delta's certificate for Route 616.

Docket Number: OST–2004–19617.
Date Filed: August 3, 2006.
Due Date for Answers, Conforming Applications, or Motion To Modify Scope: August 24, 2006.
Description: Application of EOS Airlines, Inc. requesting that its certificate for public convenience and necessity be amended by adding an additional route "between the United States via intermediate points, on the one hand, and Switzerland and beyond, on the other hand" and that it be designated to serve the United States-Switzerland market under the bilateral.

Docket Number: OST–2006–25562.
Date Filed: August 3, 2006.
Due Date for Answers, Conforming Applications, or Motion To Modify Scope: August 24, 2006.
Description: Application of Jordan International Air Cargo requesting an exemption and a foreign air carrier permit authorizing it to provide the following service: (1) Charter foreign air transportation of persons, property and mail between any point or points in Jordan and any point or points in the United States; and between any point or points in the United States and any point or points in third country or countries, provided that such service constitutes part of a continuous operation, with or without a change of aircraft, that includes air service to Jordan for the purpose of carrying local traffic between Jordan and the United States; and (2) other charters between third countries and the United States.

Renee V. Wright,
Program Manager, Docket Operations, Federal Register Liaison.

[FR Doc. E6–13880 Filed 8–21–06; 8:45 am]
BILLING CODE 4910–9X–P

DEPARTMENT OF TRANSPORTATION

Federal Motor Carrier Safety Administration

[Docket No. FMCSA–2006–25586]

Agency Information Collection Activities; Request for Comment; Renewal of an Information Collection: Financial Responsibility for Motor Carriers of Passengers and Motor Carriers of Property

AGENCY: Federal Motor Carrier Safety Administration (FMCSA), DOT.

ACTION: Notice and request for comments.

SUMMARY: The FMCSA invites comments on its plan to request the Office of Management and Budget's (OMB) approval to renew an existing information collection. This information collection renewal will be used to assure that motor carriers of property and passengers maintain appropriate levels of financial responsibility to operate on public highways. This notice is required by the Paperwork Reduction Act of 1995.

DATES: Comments must be submitted on or before October 23, 2006.

ADDRESSES: All comments should reference Docket No. FMCSA–2006–25586. You may mail or hand deliver comments to the U.S. Department of Transportation, Dockets Management Facility, Room PL–401, 400 Seventh Street, SW., Washington, DC 20590; telefax comments to 202/493–2251; or submit electronically at *http://dms.dot.gov*. You may examine and copy all comments received at the above address between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. If you desire your comment to be acknowledged, you must include a self-addressed stamped envelope or postcard or, if you submit your comments electronically, you may print the acknowledgment.

FOR FURTHER INFORMATION CONTACT: Ms. Stephanie Haller, Commercial Enforcement, phone (202) 385–2362; FAX (202) 385–2422; or e-mail *stephanie.haller@fmcsa.dot.gov*; Federal Motor Carrier Safety Administration, DOT, 400 Seventh Street, SW., Washington, DC 20590. Office hours are from 8 a.m. to 4:30 p.m., Monday through Friday, except Federal Holidays.

SUPPLEMENTARY INFORMATION:

Title: Financial Responsibility for Motor Carriers of Passengers and Motor Carriers of Property.

OMB Control No: 2126–0008.

Background: The Secretary of Transportation is responsible for implementing regulations which establish minimal levels of financial responsibility for: (1) For-hire motor carriers of property to cover public liability, property damage, and environmental restoration, and (2) for-hire motor carriers of passengers to cover public liability and property damage. The Endorsement for Motor Carrier Policies of Insurance for Public Liability (Forms MCS–90/90B) and the Motor Carrier Public Liability Surety Bond (Forms MCS–82/82B) contain the minimum amount of information necessary to document that a motor carrier of property or passengers has obtained, and has in effect, the minimum levels of financial responsibility as set forth in applicable regulations (motor carriers of property—49 CFR 387.9; and motor carrier of passengers—49 CFR 387.33). FMCSA and the public can verify that a motor carrier of property or passengers has obtained, and has in effect, the required minimum levels of financial responsibility, by use of the information embraced within these documents.

Respondents: Insurance and surety companies of motor carriers of property (Forms MCS–90 and MCS–82) and motor carriers of passengers (Forms MCS–90B and MCS–82B).

Frequency: Upon creation, change, or replacement of an insurance policy or surety bond.

Estimated Average Burden per Response: The FMCSA estimates it takes two minutes to complete the Endorsement for Motor Carrier Policies of Insurances for Public Liability or the Motor Carrier Public Liability Surety Bond; one minute to file the Motor Carrier Public Liability Surety Bond; and one minute to place either document on board the vehicle (foreign-domiciled motor carriers only). These endorsements are maintained at the motor carrier's principal place of business (49 CFR 387.7 (iii) (d)).

Estimated Total Annual Burden Hours: 4,529 hours (4,528.84 rounded to nearest hour) [151.44 hours for motor carriers of passengers + 4,377.40 hours for motor carriers of property = 4,528.84].

Public Comments Invited: You are asked to comment on any aspect of this information collection, including: (1) Whether the proposed collection is necessary for the FMCSA's performance; (2) the accuracy of the estimated burden; (3) ways for the FMCSA to enhance the quality, usefulness, and clarity of the collected information; and (4) ways that the burden could be minimized without reducing the quality of the collected information. The agency will summarize and/or include your comments in the request for OMB's clearance of this information collection.

Issued on August 15, 2006.

John H. Hill,

Administrator.

[FR Doc. E6–13794 Filed 8–21–06; 8:45 am]

BILLING CODE 4910–EX–P

DEPARTMENT OF TRANSPORTATION

Federal Railroad Administration

Proposed Agency Information Collection Activities; Comment Request

AGENCY: Federal Railroad Administration, DOT.

ACTION: Notice and Request For Comments.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*), this notice announces that the Information Collection Request (ICR) abstracted below has been forwarded to the Office of Management and Budget (OMB) for review and comment. The ICR describes the nature of the information collection and its expected burden. The **Federal Register** notice with a 60-day comment period soliciting comments on the following collection of information was published on June 16, 2006 (71 FR 34990).

DATES: Comments must be submitted on or before September 21, 2006.

FOR FURTHER INFORMATION CONTACT: Mr. Robert Brogan, Office of Planning and Evaluation Division, RRS–21, Federal Railroad Administration, 1120 Vermont Ave., NW., Mail Stop 17, Washington, DC 20590 (telephone: (202) 493–6292), or Gina Christodoulou, Office of Support Systems, RAD–20, Federal Railroad Administration, 1120 Vermont Ave., NW., Mail Stop 35, Washington, DC 20590 (telephone: (202) 493–6139). (These telephone numbers are not toll-free.)

SUPPLEMENTARY INFORMATION: The Paperwork Reduction Act of 1995 (PRA), Public Law 104–13, section 2, 109 Stat. 163 (1995) (codified as revised at 44 U.S.C. 3501–3520), and its implementing regulations, 5 CFR Part 1320, require Federal agencies to issue two notices seeking public comment on information collection activities before OMB may approve paperwork packages. 44 U.S.C. 3506, 3507; 5 CFR 1320.5, 1320.8(d)(1), 1320.12. On June 16, 2006, FRA published a 60-day notice in the **Federal Register** soliciting comment on ICRs that the agency was seeking OMB approval. 71 FR 34990. FRA received one comment in response to this notice.

The comment submitted came from the Association of American Railroads (AAR). AAR opposes OMB renewal of this information collection because FRA has not yet fully accommodated its request concerning electronic recordkeeping for the Hours of Duty Records required in this collection. Specifically, AAR remarks:

> * * * FRA's hours of service regulations illegally discriminate against electronic records. FRA's regulations only permit paper records because 49 CFR section 228.9 requires that HOS [Hours of Service] records be "signed" by the employee whose time on duty is being recorded (or by the ranking crew member, in the case of train crews). A railroad has to apply for a waiver to keep HOS records electronically.

AAR argues that "FRA has chosen the use of the waiver program to impose requirements that do not apply for paper records." Further, AAR states:

> FRA has required railroads to, *inter alia,*
> • Develop computer programs capable of measuring and analyzing records to determine compliance with HOS requirements, focusing on issues such as time spent "deadheading" (nonworking travel not including commuting), "commingled" service (service not subject to HOS restrictions), and employee reports of excess service;
> • Establish quality-assurance programs consisting of regular and remedial training as determined by FRA and utilizing materials reviewed by FRA; and
> • Make electronic records accessible to FRA through various field locations.

AAR observes that "there are no comparable requirements for paper records." AAR goes on to note that "the Government Paperwork Elimination Act (GPEA) required OMB to develop procedures for the acceptance of electronic records" and that "by Oct. 21, 2003, OMB was to ensure that agencies provide an option for the maintenance of records electronically and, where practicable, the use of electronic signatures." AAR believes that FRA's "hours of service regulations violate the GPEA's mandate to facilitate electronic records."

FRA and its representatives have a long relationship with AAR. There have been many contacts and discussions between FRA and AAR officials regarding the Hours of Service Regulations and electronic recordkeeping. FRA has been working for some time with the AAR on this issue. FRA has meet with AAR representatives, and has indicated its intention to act on AAR's request regarding electronic recordkeeping. FRA has a team now working on a proposed rule to enable electronic recordkeeping (which would eliminate the need for waivers), so AAR's belief that FRA is unresponsive and that no progress has been made is not correct. By its nature, the process of regulatory development and enactment is a slow one. Moreover, FRA has communicated to AAR that top agency officials and specialists are available to work on any issues under current waivers while a proposed rule is being developed.

In its comments, AAR admits that electronic recordkeeping option has been and is available through agency waivers. FRA clearly then has no bias against electronic records. In fact, FRA has long encouraged the use of electronic recordkeeping, wherever feasible, to reduce burden on respondents. However, because the work of "covered employees" directly impacts rail safety and because "fatigue" resulting from excessive work hours is a direct threat to public safety and the safety of train crews and other railroad workers, FRA must ensure that the Federal hours of service (HOS) laws are strictly adhered to in order to meet its primary safety mission and its statutory obligation for HOS oversight. Although FRA permitted railroads to do away with various costly and cumbersome paper records, AAR complains that FRA imposes additional

requirements for electronic records, overlooking the fact that the eliminated paper records provided FRA with much information that it needs to fulfill its statutory HOS oversight.

The Interstate Commerce Commission (ICC), in 1921, mandated hours of duty record keeping with specific data fields that facilitated its statutory oversight obligations. The format and instructions presented in the ICC order have continued to be used by railroads until the beginning of electronic hours of duty programs in the mid 1990's. However, in 1969, the U.S. Congress amended the HOS to create a second duty tour category that was neither On Duty Time nor Off Duty Time. FRA refers to that category as Limbo Time. The existing record keeping requirements, much of which was carried over from the ICC Order, were not changed as a result of the statutory amendment primarily because the "other" existing record keeping requirements, i.e., Delay Report, of the ICC Order provided the necessary information to determine Limbo Time. Railroads utilizing the Electronic waiver process are not required to maintain the Delay Report segment of the original ICC Order. Instead, the programs include an additional data field, titled "Relieved Time," to identify the beginning of the Limbo Time. The former Off Duty field used prior to the HOS amendment has been changed to Released Time, i.e., the end of Limbo Time and the beginning of a Statutory Off Duty period. Without these fields or the Delay Report, neither FRA nor the railroads can accurately determine Total Time On Duty nor when the employees rest period begins.

Monitoring Indicators is an electronic oversight not feasible in paper records. These indicators point to excess service and/or obvious reporting flaws that liable the railroad through the penalty schedule contained in the HOS and the Code of Federal Regulations Part 228. If reporting flaws remain unchecked by the railroad, FRA is left with a record that does not facilitate its oversight and employee safety concerns for statutory compliance.

Training requirements contained in the Electronic waivers necessitate that railroads train their employees and supervisors in the applications of the HOS. The purpose of the FRA review is to make certain that the training materials properly describe and explain to employees the proper entry of data needed to determine compliance with the law. Without an accurate record with data based on the HOS, FRA can not meet its oversight obligations.

Finally, regarding AAR's allusion to the requirements of the Government Paperwork Elimination Act (GPEA), FRA is fully compliant. GPEA itself stipulates that "executive agencies provide for the option of electronic maintenance, submission, or disclosure of information as a substitute for paper and for the use and acceptance of electronic signatures, when practicable." Because there is no Federal Government, OMB, or Transportation Department standard for electronic recordkeeping and electronic signatures, FRA set up the Electronic waiver process so that it can closely scrutinize individual railroad requests for electronic recordkeeping relating to the Hours of Duty Records. In section 1703 of GPEA relating to the use and acceptance of electronic signatures by executive agencies, the law specifically states that the procedures developed by executive agencies "shall ensure that electronic signatures are as reliable as is appropriate for the purpose in question and keep intact the information submitted." Until a proposed rule for electronic recordkeeping is completed, FRA's Electronic waiver process attempts to do exactly that by setting requirements for the integrity, reliability, accessibility, and security of railroad HOS electronic recordkeeping systems. At the same time, FRA's waiver system has been set up to be fully enforceable legally and thus is completely in compliance with Section 1707 of GPEA. This section states:

> Electronic records submitted or maintained in accordance with the procedures developed under this title, or electronic signatures or other forms of electronic authentication used in accordance with such procedures, shall not be denied legal effect, validity, or enforceability because records are in electronic form.

In sum, it is in everyone's best interest—the American public's, the railroads' and their employees, AAR's, and FRA's—that this collection of information be renewed by OMB. Although FRA has not issued an electronic rulemaking as quickly as the AAR would like, the agency is working on it and is taking the time necessary to do it right.

Before OMB decides whether to approve this proposed collection of information, it must provide 30 days for public comment. 44 U.S.C. 3507(b); 5 CFR 1320.12(d). Federal law requires OMB to approve or disapprove paperwork packages between 30 and 60 days after the 30-day notice is published. 44 U.S.C. 3507 (b)–(c); 5 CFR 1320.12(d); *see also* 60 FR 44978, 44983, Aug. 29, 1995. OMB believes that the 30-day notice informs the regulated community to file relevant comments and affords the agency adequate time to digest public comments before it renders a decision. 60 FR 44983, Aug. 29, 1995. Therefore, respondents should submit their respective comments to OMB within 30 days of publication to best ensure having their full effect. 5 CFR 1320.12(c); *see also* 60 FR 44983, Aug. 29, 1995.

The summary below describes the nature of the information collection request (ICR) and the expected burden. The revised request is being submitted for clearance by OMB as required by the PRA.

Title: Hours of Service Regulations.

OMB Control Number: 2130–0005.

Type of Request: Extension of a currently approved collection.

Affected Public: Businesses.

Form(s): N/A.

Abstract: The collection of information is due to the railroad Hours of Service Regulations set forth in 49 CFR part 228 which require railroads to collect the Hours of Duty for covered employees, and records of train movements. Railroads whose employees have exceeded maximum duty limitations must report the circumstances. Also, a railroad that has developed plans for construction or reconstruction of sleeping quarters (Subpart C of 49 CFR part 228) must obtain approval of the Federal Railroad Administration (FRA) by filing a petition conforming to the requirements of Sections 228.101, 228.103, and 228.105.

Annual Estimated Burden Hours: 3,294,676.

Addressee: Send comments regarding these information collections to the Office of Information and Regulatory Affairs, Office of Management and Budget, 725 Seventeenth Street, NW., Washington, DC, 20503; Attention: FRA Desk Officer.

Comments are invited on the following: Whether the proposed collections of information are necessary for the proper performance of the functions of FRA, including whether the information will have practical utility; the accuracy of FRA's estimates of the burden of the proposed information collections; ways to enhance the quality, utility, and clarity of the information to be collected; and ways to minimize the burden of the collections of information on respondents, including the use of automated collection techniques or other forms of information technology.

A comment to OMB is best assured of having its full effect if OMB receives it within 30 days of publication of this notice in the **Federal Register**.

Authority: 44 U.S.C. §§ 3501–3520.

Issued in Washington, DC on August 16, 2006.

D.J. Stadtler,

Director, Office of Budget, Federal Railroad Administration.

[FR Doc. E6–13900 Filed 8–21–06; 8:45 am]

BILLING CODE 4910–06–P

DEPARTMENT OF TRANSPORTATION

Federal Transit Administration

Environmental Impact Statement; East Link Project, WA

AGENCY: Federal Transit Administration (FTA), Department of Transportation (DOT).

ACTION: Notice of Intent to prepare an Environmental Impact Statement (EIS).

SUMMARY: The Federal Transit Administration and the Central Puget Sound Regional Transit Authority (Sound Transit) intend to prepare an Environmental Impact Statement (EIS) in accordance with the National Environmental Policy Act (NEPA) for Sound Transit's proposed 11 to 19-mile extension of the Central Link Light rail transit project from Seattle to the cities of Mercer Island, Bellevue, and Redmond, within King County, Washington. The EIS will also be prepared in accordance with the provisions of the recently enacted Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA–LU), and with Washington's State Environmental Policy Act (SEPA). The purpose of this Notice of Intent is to alert interested parties regarding the plan to prepare the EIS, to provide information on the nature of the proposed transit project, to invite participation in the EIS process, including comments on the scope of the EIS proposed in this notice, and to announce that public scoping meetings will be conducted. The EIS will address the no action alternative and reasonable alternatives that meet the project purpose and need.

DATES: Written comments on the scope of alternatives and impacts to be considered in the EIS must be received no later than October 2, 2006, and must be sent to Sound Transit at the address indicated below.

ADDRESSES: Written comments on the scope of alternatives, impacts to be evaluated, and the preliminary purpose and need statement should be sent to James Irish, Link Environmental Manager, Sound Transit, 401 S. Jackson Street, Seattle, WA 98104 or by e-mail to *eastlinkscoping comments@soundtransit.org.*

Four public scoping meetings and a governmental agency scoping meeting will be held in September 2006 at the dates and locations provided below. Oral and written comments may be given at the scoping meetings. All public meeting locations are accessible to persons with disabilities who may also request this information be prepared and supplied in alternate formats by calling Brooke Belman, (206) 398–5238 at least 48-hours in advance of the meeting for Sound Transit to make necessary arrangement. Persons who are deaf or hard of hearing may call (888) 713–6030 TTY.

Public Scoping Meetings

September 13, 2006, 4:30 to 7:30 p.m., Meydenbauer Center, 11100 NE 6th Street, Bellevue, WA 98004.

September 14, 2006, 4:30 to 7:30 p.m., Old Redmond School House Community Center, 16600 NE 80th Street, Redmond, WA 98073.

September 20, 2006, 4:30 to 7:30 p.m., Union Station, Sound Transit Board Room, 401 S. Jackson Street, Seattle, WA 98104.

September 21, 2006, 4:30 to 7:30 p.m., Community Center at Mercer View, Clarke Room, 8236 SE 24th Street, Mercer Island, WA 98040.

Agency Scoping Meeting

September 12, 2006, 1 p.m. to 3 p.m., Bellevue City Hall, 450 110th Avenue NE, Bellevue, WA 98004.

FOR FURTHER INFORMATION CONTACT: John Witmer, Federal Transit Administration, 915 2nd Avenue, Suite 3142, Seattle, WA 98174, Telephone: (206) 220–7964.

SUPPLEMENTARY INFORMATION:

Description of Study Area

The proposed extension of light rail transit in Seattle to the Eastside centers of Bellevue and Redmond via Interstate 90 (I–90) in King County, Washington, begins at the International District Station in downtown Seattle and goes east along I–90 across Mercer Island to Bellevue, north through downtown Bellevue, to the Redmond employment center of Overlake, and on to downtown Redmond.

In May 2004, the Federal Highway Administration (FHWA), the Washington State Department of Transportation (WSDOT), and Sound Transit published the I–90 Two-Way Transit and HOV Operations Final EIS which identified Alternative R–8A as the preferred alternative. Briefly stated, Alternative R–8A would provide one additional High Occupancy Vehicle (HOV) lane in each direction on the outer roadways between I–5 and Bellevue Way by restriping and, where feasible, widening the outer roadways within existing right-of-way while maintaining the existing two-lane reversible HOV operations on the center roadway. Between Rainier Avenue and Bellevue Way, this lane will be for the exclusive use of HOV traffic. R8-A also includes two new HOV direct access exit ramps and modifies existing HOV ramps. In August 2004 the Sound Transit Board executed an amendment to the 1976 Memorandum Agreement with the cities of Seattle, Mercer Island and Bellevue; the Municipality of Metropolitan Seattle; King County; and the Washington State Highway Commission pertaining to the design and construction of I–90 implementing Alternative R–8A, which identifies the ultimate configuration for I–90 with high capacity transit (HCT) in the center roadway. "HCT" was defined in the Final EIS and 2004 amendment as "* * *a transit system operating in dedicated right-of-way such as light rail, monorail or a substantially equivalent system." On September 28, 2004, FHWA issued a Record of Decision on the project that concurs with WSDOT and Sound Transit in the designation of Alternative R8–A as the selected alternative for the I–90 Two-Way Transit and HOV Operations Project in Bellevue, Mercer Island and Seattle, King County, Washington. One reason Alternative R8–A was selected was that it would accommodate the ultimate configuration of I–90 with High Capacity Transit in the center lanes. On July 13, 2006, the Sound Transit Board identified light rail transit as the preferred technology for high capacity transit in the corridor from Seattle to Bellevue and Redmond via I–90 and Mercer Island. A report describing the project's planning history leading to this decision, East Corridor High Capacity Transit Mode Analysis History (July 2006), is available upon request, at area libraries, and on the Sound Transit Web site.

Preliminary Purpose of and Need for the Proposed Project

The East Link project is needed because of projected population and business growth and increased demand for transit service connecting Seattle, Bellevue and Redmond. Regional urban center density plans assume high capacity transit investments to overcome dramatically increased congestion on I–90 between Seattle and Bellevue, operating deficiencies in transit service reliability and speed, and limited transit capacity and connectivity between major employment centers.

The purpose of the East Link Project is to expand the Sound Transit Central Link light rail system from Seattle to Bellevue and Redmond via I–90 and

Mercer Island, to provide a reliable and efficient alternative for moving people throughout the region. Supporting project objectives include improving speed and reliability and expanding capacity for people traveling on the region's increasingly congested roadways while preserving the environment; increasing mobility and accessibility to and from the region's highest concentrations of employment and housing; supporting VISION 2020 and Destination 2030 regional transportation plan objectives to encourage directing growth into high-density urban and manufacturing centers by providing high-capacity transit connection between these centers and with other regional destinations; fulfilling Sound Transit's legislative mandate to meet public transportation and mobility needs for high-capacity infrastructure in the central Puget Sound region; continuing to implement the goals and objectives identified in Sound Transit's Long-Range Plan; implementing the high-capacity transit element of the I–90 Two Way Transit and HOV Operations Project Final EIS, FHWA's Record of Decision, and the August 2004 Amendment to the 1976 Memorandum Agreement between King County; the cities of Bellevue, Seattle, and Mercer Island; the Washington State Transportation Commission; and Sound Transit to provide high capacity transit in the center lanes of I–90 between Bellevue and Seattle as quickly as possible; and more fully develop a regional transit system that would integrate with the Central Link light-rail line, providing direct connections among the largest urban centers in King County, including Bellevue, Overlake, Redmond, downtown Seattle, Capitol Hill, and the University District.

FTA and Sound Transit seek public and agency comment on this preliminary purpose and need for this proposed action. The full text of the preliminary purpose and need statement is included in the environmental scoping information report available by contacting Sound Transit as described below.

Alternatives

The EIS will address the no action alternative and reasonable alternatives that meet the project purpose and need. The project corridor has been divided into 5 segments. Proposed route alternatives within each segment are described below.

Segment A: Seattle to South Bellevue

Segment A consists of one route alternative from the existing Central Link light rail Chinatown/International District Station on to I–90 via the D2 roadway, a high occupancy vehicle (HOV) ramp between downtown Seattle and Rainier Avenue. The route would be in the center lanes of I–90 across Lake Washington and Mercer Island.

Segment B: South Bellevue to Downtown Bellevue

Three Segment B alternatives leave I–90 at Bellevue Way SE. and follow Bellevue Way SE. north. One route continues along Bellevue Way SE. north all the way to downtown Bellevue. Another route alternative diverges from Bellevue Way SE. following 112th Avenue SE. to downtown Bellevue, and a third option turns east from 112th Avenue SE. to SE. 8th Street and then follows I–405 north to downtown Bellevue. Two Segment B alternatives would continue east from Bellevue Way on the north side of I–90, one heading north in the vicinity of Lake Washington Boulevard/118th Avenue SE. and one heading north in the vicinity of the BNSF railroad. At SE. 8th Street, either alternative could continue north near I–405 or turn west on SE. 8th Street and then head north on 112th Avenue to downtown Bellevue.

Segment C: Downtown Bellevue

Route alternatives in downtown Bellevue approach from the south, pass near the Bellevue Transit Center, and turn east toward Overlake and Redmond. The Segment B route that follows Bellevue Way SE. all the way downtown would continue along Bellevue Way NE. and turn east toward the center of downtown and the Bellevue Transit Center in the vicinity of NE. 6th Street. Other routes approaching downtown along 112th Avenue SE. or by I–405 and 118th Avenue SE. would follow 108th Avenue NE., 110th Avenue NE., or 112th Avenue NE. Routes would turn east and cross I–405 near NE. 6th or NE. 7th Streets or continue through downtown, turning east and crossing I–405 at NE. 12th Street.

Segment D: Downtown Bellevue to Overlake Transit Center

Segment D alternatives begin at NE. 6th, NE. 7th, or NE. 12th Streets and head east through the Bel-Red corridor toward the Overlake area of Redmond. There are several route options beginning from Segment C at NE. 12th Street. Alternatives follow Bel-Red Road, SR 520, or along a new corridor aligned with NE. 16th Avenue Street. In the eastern half of Segment D, route alternatives may also follow 136th Place NE. and NE. 20th Street. Alternatives then turn north along 151st Place NE, 152nd Avenue NE., or SR 520 and follow SR 520 to Overlake Transit Center.

Segment E: Overlake Transit Center to Redmond

All route options in Segment E follow SR 520 diverging to serve downtown Redmond. Three alternatives utilize the BNSF railroad corridor through downtown Redmond, accessing it from West Lake Sammamish Parkway and Redmond Way, Leary Way, or near the SR 202 and SR 520 interchange. A fourth route option veers east from SR520 toward NE. 72nd Street to Bear Creek Parkway, crossing Redmond Way to the Bear Creek Park and Ride via Avondale Road NE. Two of the BNSF corridor alternatives continue to the east along the corridor past the Redmond Town Center ending near NE. 70th Street and 176th Avenue NE. The route from the SR 202 interchange heads west along the BNSF corridor and then turns north at 161st Avenue NE. to the Redmond Park and Ride at NE. 83rd Street.

Potential project termini include Bellevue near Overlake Hospital and Redmond at either the Overlake Transit Center or downtown Redmond, depending upon project cost and available funding.

The EIS Process and Role of Participating Agencies and the Public

The purpose of the EIS process is to explore, in a public setting, potentially significant effects of implementing the proposed action and alternatives on the physical, human, and natural environment. Areas of investigation include, but are not limited to, transportation, land use, development potential, land acquisition and displacements, historic resources, visual and aesthetic qualities, air quality, noise and vibration, energy use, safety and security, and ecosystems, including threatened and endangered species. These effects will be evaluated for both the construction period and the long-term period of operation. Cumulative impacts will also be evaluated. Measures to avoid, minimize, or mitigate significant adverse impacts will be identified.

Regulations implementing NEPA, as well as provisions of the recently enacted Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA–LU), call for public involvement in the EIS process. Section 6002 of SAFETEA–LU requires that this agency: (1) Extend an invitation to other Federal and non-Federal agencies and Indian tribes that may have an interest in the proposed

project to become "participating agencies," (2) provide an opportunity for involvement by participating agencies and the public in helping to define the purpose and need for a proposed project, as well as the range of alternatives for consideration in the impact statement, and (3) establish a plan for coordinating public and agency participation in and comment on the environmental review process.

This notice of intent constitutes an invitation to other Federal and non-Federal agencies and Indian tribes that may have an interest in the proposed project to become a participating agency in the environmental review process. It is also an invitation for public and agency involvement. A public and agency involvement Coordination Plan will be created. The program will include a project Web site; outreach to local jurisdictions and community and civic groups through a variety of methods; a public scoping process to define the issues of concern among all parties interested in the project; a public hearing on release of the draft environmental impact statement; and development and distribution of project fact sheets.

In accordance with 23 CFR 771.105(a) and 771.133, FTA will comply with all Federal environmental laws, regulations, and executive orders applicable to the proposed project during the environmental review process to the maximum extent practicable. These requirements include, but are not limited to, the regulations of the Council on Environmental Quality and FTA implementing NEPA (40 CFR parts 1500–1508, and 23 CFR Part 771), the project-level air quality conformity regulation of the U.S. Environmental Protection Agency (EPA) (40 CFR part 93), the Section 404(b)(1) guidelines of EPA (40 CFR part 230), the regulation implementing Section 106 of the National Historic Preservation Act (36 CFR Part 800), the regulation implementing section 7 of the Endangered Species Act (50 CFR part 402), Section 4(f) of the DOT Act (23 CFR 771.135), and Executive Orders 12898 on environmental justice, 11988 on floodplain management, and 11990 on wetlands.

Scoping

The FTA and Sound Transit invite comments from interested individuals, organizations, and Federal, state, regional and local agencies for a period of 30 days after publication of this notice. Comments should focus on defining the alternatives within the corridor to be evaluated in the EIS; identifying any significant environmental issues related to the alternatives; and the preliminary purpose and need statement as noted here. Additional reasonable alternatives suggested during the scoping process, including those involving other transit modes or route alignments, will be considered. An Environmental Scoping Information Report describing the project, the proposed preliminary alternatives and station locations, the impact areas to be evaluated, and the preliminary EIS schedule has been prepared. The Environmental Scoping Information Report also includes the preliminary purpose and need statement, which is summarized in this notice, as well as a summary of the project's planning history.

You may request a copy of the Environmental Scoping Information Report by contacting Brooke Belman, Sound Transit, 401 S. Jackson Street, Seattle, WA 98104–2826, Telephone: (206) 398–5238, or E-mail: belmanb@soundtransit.org. A copy of the report is also available at Sound Transit's Web site at http://www.soundtransit.org. A more detailed report on the project's planning history, including public and agency outreach efforts, East Corridor High Capacity Transit Mode Analysis History (July 2006) is also available upon request, at local libraries, and on the Sound Transit Web site.

Comments: Written comments may be submitted to James Irish, Sound Transit Link Environmental Manager, at the address given above by October 2, 2006. Written comments may be made at the public scoping meetings. In addition, a stenographer will be available at the public scoping meetings to record oral comments. The dates and addresses of the scoping meetings are given in the **DATES** and **ADDRESSES** sections above.

Issued on: August 15, 2006.

R. F. Krochalis,

Regional Administrator, Region X, Federal Transit Administration.

[FR Doc. E6–13896 Filed 8–21–06; 8:45 am]

BILLING CODE 4910–57–P

DEPARTMENT OF TRANSPORTATION

Surface Transportation Board

[STB Finance Docket No. 34890; STB Finance Docket No. 34922]

PYCO Industries, Inc.—Feeder Line Application—Lines of South Plains Switching, Ltd. Co.; Keokuk Junction Railway Co.—Feeder Line Application—Lines of South Plains Switching, Ltd. Co.

AGENCY: Surface Transportation Board, DOT.

ACTION: Acceptance of feeder line application and setting of procedural schedule.

SUMMARY: The Board accepts the application of PYCO Industries, Inc. (PYCO) to purchase the entirety of the rail lines of South Plains Switching, Ltd. Co. (SAW) in Lubbock, TX, as complete under 49 U.S.C. 10907 and 49 CFR 1151. The Board also sets a procedural schedule, including the date for the filing of competing feeder line applications to purchase the entirety of SAW's rail lines.

DATES: Competing feeder line applications are due September 6, 2006.

ADDRESSES: Send an original and 10 copies of any competing application, conforming to the information requirements at 49 CFR 1151.3(a), to: Surface Transportation Board, 1925 K Street, NW., Washington, DC 20423–0001. In addition, one copy of any competing application must be served on: PYCO's representative, Charles H. Montange, 426 NW. 162nd Street, Seattle, WA 98177; KJRY's representative, William A. Mullins, Baker & Miller PLLC, 2401 Pennsylvania Avenue, NW., Suite 300, Washington, DC 20037; and SAW's representative, Thomas F. McFarland, 208 South LaSalle Street, Suite 1890, Chicago, IL 60604–1112.

FOR FURTHER INFORMATION CONTACT: Eric S. Davis, (202) 565–1608. [Assistance for the hearing impaired is available through the Federal Information Relay Service (FIRS) at 1–800–877–8339.]

SUPPLEMENTARY INFORMATION: Additional information is contained in the Board's decision. To purchase a copy of the full decision, write to, e-mail, or call: ASAP Document Solutions, 9332 Annapolis Rd., Suite 103, Lanham, MD 20607; e-mail: *asapdc@verizon.net*; telephone: (202) 306–4004. [Assistance for the hearing impaired is available through FIRS at 1–800–877–8339.]

Board decisions and notices are available on our Web site at *http://www.stb.dot.gov.*

Decided: August 16, 2006.

By the Board, David M. Konschnik, Director, Office of Proceedings.

Vernon A. Williams,

Secretary.

[FR Doc. E6–13898 Filed 8–21–06; 8:45 am]

BILLING CODE 4915–01–P

DEPARTMENT OF TRANSPORTATION

Surface Transportation Board

[STB Finance Docket No. 34872]

Dakota, Minnesota & Eastern Railroad Corporation and Cedar American Rail Holdings, Inc.—Intra-Corporate Family Transaction Exemption—Wyoming Dakota Railroad Properties, Inc.

Dakota, Minnesota & Eastern Railroad Corporation (DM&E) and its subsidiary, Cedar American Rail Holdings, Inc, (CARH), have jointly filed a verified notice of exemption under 49 CFR 1180.2(d)(3) for a transaction within a corporate family. In a concurrently filed verified notice of exemption in STB Finance Docket No. 34871, Wyoming Dakota Railroad Properties, Inc. (WDR), a newly created subsidiary of CAHR, seeks authority to acquire DM&E's Board issued authority to construct and operate [1] some 280 miles of rail line. The instant notice of exemption will allow DM&E and CARH to continue in control of WDR once the new entity acquires DM&E's construction authority and becomes a rail carrier.[2]

The parties had intended to consummate the transaction on June 20, 2006, the date the authority sought in STB Finance Docket No. 34871 was to became effective. However, in a decision served on June 19, 2006, the effective date of the two exemptions was stayed so that the Board could consider issues raised by various parties filing petitions to revoke/reject the exemption sought in STB Finance Docket No. 34871. The Board, among other things, lifted the stay and denied the petitions to reject/revoke the other exemption in a decision served on August 14, 2006, and effective on August 24, 2006. As a result of that decision, the exemption will become effective on August 24, 2006. The transaction sought in this exemption will be consummated when the transaction sought in STB Finance Docket No. 34871 is consummated.

The purpose of the substitution and continuance in control transactions is to create options to facilitate financing of the construction project and to insulate DM&E's shareholders from the risk associated with that project.

This is a transaction within a corporate family of the type exempted from prior review and approval under 49 CFR 1180.2(d)(3). The parties state that the transaction will not result in adverse changes in service levels, significant operational changes, or any change in the competitive balance with carriers outside the corporate family.

As a condition to use of this exemption, any employees adversely affected by the transaction will be protected by the conditions set forth in *New York Dock Ry.—Control—Brooklyn Eastern Dist.*, 360 I.C.C. 60 (1979).

If the notice contains false or misleading information, the exemption is void *ab initio*. Petitions to revoke the exemption under 49 U.S.C. 10502(d) may be filed at any time. The filing of a petition to revoke will not automatically stay the transaction.

An original and 10 copies of all pleadings, referring to STB Finance Docket No. 34872, must be filed with the Surface Transportation Board, 1925 K Street, NW., Washington, DC 20423–0001. In addition, one copy of each pleading must be served on William C. Sippel, Fletcher & Sippel LLC, 29 North Wacker Drive, Suite 920, Chicago, IL 60606–2832.

Board decisions and notices are available on our Web site at *http://www.stb.dot.gov*.

Decided: August 15, 2006.

By the Board, David M. Konschnik, Director, Office of Proceedings.

Vernon A. Williams,

Secretary.

[FR Doc. E6–13753 Filed 8–21–06; 8:45 am]

BILLING CODE 4915–01–P

DEPARTMENT OF TRANSPORTATION

Surface Transportation Board

[STB Finance Docket No. 34871]

Wyoming Dakota Railroad Properties, Inc.—Acquisition and Operation Exemption—Dakota, Minnesota & Eastern Railroad Corporation

Wyoming Dakota Railroad Properties, Inc. (WDR), a noncarrier, has filed a verified notice of exemption under 49 CFR 1150.31 and 49 CFR 1150.35 to acquire the authority granted to Dakota, Minnesota & Eastern Railroad Corporation (DM&E) to construct and operate some 280 miles of rail line.[1] Specifically, the lines authorized for construction and operation include: (1) A 262.03-mile rail line extending from a point near Wasta, SD, to connect with 11 coal mines located south of Gillette, WY, in the Powder River Basin; (2) a 13.31-mile rail line in the Mankato, MN area; and (3) a 2.94-mile rail line near Owatonna, MN.[2]

WDR is a newly created subsidiary of Cedar American Rail Holdings, Inc. (CARH), a subsidiary of DM&E.[3] WDR explains that utilizing a separate company from DM&E to build and operate the new rail lines will enhance financing options for the project and create options to limit the risk to DM&E's shareholders. The subsidiary further explains that substituting it for DM&E will not alter the nature, effect, or implementation of the construction project as previously considered and approved by the Board. Moreover, WDRPI claims that it will comply with all environmental conditions and other legal requirements pertaining to the construction.

Pursuant to 49 CFR 1150.35(a), a noncarrier must comply with the notice requirements of 49 CFR 1150.32(e). The Board granted WDR's petition for waiver of these requirements in a decision served on August 14, 2006, and effective on August 24, 2006. In that same decision, the Board denied petitions for revocation of this exemption and lifted a June 19, 2006 housekeeping stay of the effectiveness of the instant exemption and the exemption sought in STB Finance Docket No. 34872. Although the instant exemption will thus be effective on August 24, 2006, WDR expects to commence construction of the subject rail line upon finalization of financing arrangements, and to commence operations on the line during 2009.

[1] *See Dakota, MN & Eastern R.—Construction—Powder River Basin*, 3 S.T.B. 847 (1998), 6 S.T.B. 8 (2002), and *Dakota, Minnesota & Eastern Railroad Corporation Construction into the Powder River Basin*, STB Finance Docket No. 33407 (STB served Feb. 15, 2006).

[2] CAHR currently controls a rail carrier, Iowa, Chicago & Eastern Railroad Corporation.

[1] *See Dakota, MN & Eastern R.—Construction—Powder River Basin*, 3 S.T.B. 847 (1998), 6 S.T.B. 8 (2002), and *Dakota, Minnesota & Eastern Railroad Corporation Construction into the Powder River Basin*, STB Finance Docket No. 33407 (STB served Feb. 15, 2006).

[2] WDR notes that once constructed, it or another rail carrier in the DM&E corporate family will operate the new lines. It states that in the latter circumstance, the operator will seek separate and appropriate Board authority prior to the commencement of rail service. WDR explains that, should WDR operate on the newly constructed lines, it and DM&E expect to exchange trains and change crews at Middle West Staging and Marshaling Yard at Wall, SD. The Mankato line and Owatonna line would likely be operated by DM&E pursuant to a separate lease or trackage rights arrangement with WDR.

[3] Concurrently, CAHR and DM&E have jointly filed a verified notice of exemption pursuant to 49 CFR 1180.2(d)(3) in STB Finance Docket No. 34872 to continue in control of WDR once WDR becomes a rail carrier. CAHR currently controls a Class II rail carrier, Iowa, Chicago & Eastern Railroad Corporation.

If the verified notice contains false or misleading information, the exemption is void *ab initio*. Petitions to revoke the exemption under 49 U.S.C. 10502(d) may be filed at any time. The filing of a petition to revoke will not automatically stay the transaction.

An original and 10 copies of all pleadings, referring to STB Finance Docket No. 34871, must be filed with the Surface Transportation Board, 1925 K Street NW., Washington, DC 20423–0001. In addition, one copy of each pleading must be served on William C. Sippel, Fletcher & Sippel LLC, 29 North Wacker Drive, Suite 920, Chicago, IL 60606–2832.

Board decisions and notices are available on our Web site at *http://www.stb.dot.gov*.

Decided: August 15, 2006.

By the Board, David M. Konschnik, Director, Office of Proceedings.

Vernon A. Williams,

Secretary.

[FR Doc. E6–13774 Filed 8–21–06; 8:45 am]

BILLING CODE 4915–01–P

DEPARTMENT OF THE TREASURY

Office of Foreign Assets Control

Additional Designation of Individuals Pursuant to Executive Order 13338

AGENCY: Office of Foreign Assets Control, Treasury.

ACTION: Notice.

SUMMARY: The Treasury Department's Office of Foreign Assets Control ("OFAC") is publishing the names of two newly designated individuals whose property and interests in property are blocked pursuant to Executive Order 13338 of May 11, 2004, "Blocking Property of Certain Persons and Prohibiting the Export of Certain Goods to Syria."

DATES: The designation by the Secretary of the Treasury of the two individuals identified in this notice pursuant to Executive Order 13338 is effective on August 15, 2006.

FOR FURTHER INFORMATION CONTACT: Assistant Director, Compliance Outreach & Implementation, Office of Foreign Assets Control, Department of the Treasury, Washington, DC 20220, tel.: 202/622–2490.

SUPPLEMENTARY INFORMATION:

Electronic and Facsimile Availability

This document and additional information concerning OFAC are available from OFAC's Web site (*http://www.treas.gov/ofac*) or via facsimile through a 24-hour fax-on-demand service, tel.: 202/622–0077.

Background

On May 11, 2004, the President issued Executive Order 13338 (the "Order") pursuant to the International Emergency Economic Powers Act, 50 U.S.C. 1701 *et seq.*, the National Emergencies Act, 50 U.S.C. 1601 *et seq.*, the Syria Accountability and Lebanese Sovereignty Restoration Act of 2003, Public Law 108–175, and section 301 of title 3, United States Code. In the Order, the President declared a national emergency to address the threat posed by the actions of the Government of Syria in supporting terrorism, continuing its occupation of Lebanon, pursuing weapons of mass destruction and missile programs, and undermining the United States and international efforts with respect to the stabilization and reconstruction of Iraq.

Section 3 of the Order blocks, with certain exceptions, all property and interests in property of the following persons, that are in the United States, that hereafter come within the United States, or that are or hereafter come within the possession or control of United States persons: Persons who are determined by the Secretary of the Treasury, in consultation with the Secretary of State, (1) to be or to have been directing or otherwise significantly contributing to the Government of Syria's provision of safe haven to or other support for any person whose property or interests in property are blocked under the United States law for terrorism-related reasons; (2) to be or to have been directing or otherwise significantly contributing to the Government of Syria's military or security presence in Lebanon; (3) to be or to have been directing or otherwise significantly contributing to the Government of Syria's pursuit of the development and production of chemical, biological, or nuclear weapons and medium- and long-range surface-to-surface missiles; (4) to be or to have been directing or otherwise significantly contributing to any steps taken by the Government of Syria to undermine the United States and international efforts with respect to the stabilization and reconstruction of Iraq; or (5) to be owned or controlled by, or acting or purporting to act for or on behalf of, directly or indirectly, any person whose property or interests in property are blocked pursuant to the Order.

On August 15, 2006, the Secretary of the Treasury, in consultation with the Secretary of State, designated, pursuant to one or more of the criteria set forth in the Order, two individuals whose property and interests in property are blocked pursuant to Executive Order 13338.

The list of additional designees is as follows:

1. Ikhtiyar, Hisham (a.k.a. Al Ikhteyar, Hisham; a.k.a. Al Ikhtiyar, Hisham; a.k.a. Al-Ikhtiyar, Hisham; a.k.a. Al-Ikhtiyar, Hisham Ahmad; a.k.a. Bakhtiar, Hisham; a.k.a. Bakhtiyar, Hisham; a.k.a. Ichtijar, Hisham; a.k.a. Ikhteyar, Hisham), Maliki, Damascus, Syria; DOB 1941; Major General; Director, Syria Ba'ath Party Regional Command National Security Bureau

2. Jami Jami (a.k.a. Jama' Jama'; a.k.a. Jamea, Jamea Kamil; a.k.a. Jam'i Jam'i); DOB 16 Jun 1954; POB Jablah, Zama, Syria; Brigadier General

Dated: August 15, 2006.

Barbara C. Hammerle,

Acting Director, Office of Foreign Assets Control.

[FR Doc. E6–13810 Filed 8–21–06; 8:45 am]

BILLING CODE 4811–37–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0176]

Proposed Information Collection Activity: Proposed Collection; Comment Request

AGENCY: Veterans Benefits Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: The Veterans Benefits Administration (VBA), Department of Veterans Affairs (VA) is announcing an opportunity for public comment on the proposed collection of information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of a currently approved collection, and allow 60 days for public comment in response to the notice. This notice solicits comments on the information needed to monitor claimants' training progress towards their rehabilitation goals.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before October 23, 2006.

ADDRESSES: Submit written comments on the collection of information to Nancy J. Kessinger, Veterans Benefits Administration (20M35), Department of

Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420. Please refer to "OMB Control No. 2900–0176" in any correspondence.

FOR FURTHER INFORMATION CONTACT: Nancy J. Kessinger at (202) 273–7079 or FAX (202) 275–5947.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995 (Pub. L. 104–13; 44 U.S.C. 3501—3521), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VBA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VBA's functions, including whether the information will have practical utility; (2) the accuracy of VBA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Title: Monthly Record of Training and Wages, VA Form 28–1905c.

OMB Control Number: 2900–0176.

Type of Review: Extension of a currently approved collection.

Abstract: On-job trainers use VA Form 20–1905c to maintain accurate records on a trainee's progress toward their rehabilitation goals as well as recording the trainee's on-job training monthly wages. Trainers report these wages on the form at the beginning of the program and at any time the trainee's wage rate changes. Following a trainee's completion of a vocational rehabilitation program, the form is submitted to the trainee's case manager to monitor the trainee's training and to ensure that the trainee is progressing and learning the skills necessary to carry out the duties of his or her occupational goal.

Affected Public: Individuals or households, business or other for-profit, not-for-profit institutions, farms, and state, local or tribal government.

Estimated Annual Burden: 3,000 hours.

Estimated Average Burden Per Respondent: 15 minutes.

Frequency of Response: Three times a year.

Estimated Number of Respondents: 4,800.

Dated: August 14, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Records Management Service.

[FR Doc. E6–13912 Filed 8–21–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0572]

Proposed Information Collection Activity: Proposed Collection; Comment Request

AGENCY: Veterans Benefits Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: The Veterans Benefits Administration (VBA), Department of Veterans Affairs (VA) is announcing an opportunity for public comment on the proposed collection of information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of a currently approved collection, and allow 60 days for public comment in response to the notice. This notice solicits comments on information needed to determine the monetary allowance for children of a Vietnam and Korea service veteran born with spina bifida or birth defects.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before October 23, 2006.

ADDRESSES: Submit written comments on the collection of information to Nancy J. Kessinger, Veterans Benefits Administration (20M35), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420. Please refer to "OMB Control No. 2900–0572" in any correspondence.

FOR FURTHER INFORMATION CONTACT: Nancy J. Kessinger at (202) 273–7079 or FAX (202) 275–5947.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995 (Pub. L. 104–13; 44 U.S.C. 3501–3521), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VBA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VBA's functions, including whether the information will have practical utility; (2) the accuracy of VBA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Title: Application for Benefits for Certain Children with Disabilities Born of Vietnam, VA Form 21–0304.

OMB Control Number: 2900–0572.

Type of Review: Extension of a currently approved collection.

Abstract: VA Form 21–0304 is used to gather the necessary information to determine a claimant's eligibility for a monetary allowance and appropriate level of payment. Under title 38 U.S.C. 1815, Children of Women Vietnam Veterans Born with Certain Birth Defects, authorizes payment of monetary benefits to, or on behalf of, certain children of female veterans who served in Republic of Vietnam. To be eligible, the child must be the biological child; conceived after the date the veteran first served in Vietnam during the period February 28, 1961 to May 7, 1975; and have certain birth defects resulting in permanent physical or mental disability.

Under title 38 U.S.C. 1805, Spina Bifida Benefits Eligibility, authorizes payment to a spina bifida child-claimant of parent(s) who performed active military, naval, or air service during the Vietnam era during the period January 9, 1962 to May 7, 1975. The child must be the natural child of a Vietnam veteran, regardless of age or marital status, who was conceived after the date on which the veteran first entered the Republic of Vietnam during the Vietnam era. Spina Bifida benefits are payable for all types of spina bifida except spina bifida occulta. The law does not allow payment of both benefits at the same time. If entitlement exists under both laws, benefits will be paid under 38 U.S.C. 1815.

Affected Public: Individuals or households.

Estimated Annual Burden: 72 hours.

Estimated Average Burden Per Respondent: 10 minutes.

Frequency of Response: On occasion.

Estimated Number of Respondents: 430.

Dated: August 14, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Records Management Service.

[FR Doc. E6–13913 Filed 8–21–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0524]

Proposed Information Collection Activity: Proposed Collection; Comment Request

AGENCY: Office of Policy, Planning and Preparedness, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: The Office of Policy, Planning and Preparedness (OPP&P), Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of a currently approved collection of information, and allow 60 days for public comment in response to the notice. This notice solicits comments on information needed to determine an applicant's qualification and suitability as a VA police officer.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before October 23, 2006.

ADDRESSES: Submit written comments on the collection of information to Christopher Price, Office of Policy, Planning and Preparedness (07A), Department of Veterans Affairs, 4300 West 7th Street, Little Rock, AR 72205 or e-mail *Christopher.Price@va.gov*. Please refer to "OMB Control No. 2900–0524" in any correspondence.

FOR FURTHER INFORMATION CONTACT: Christopher Price at (501) 257–4160.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995 (Pub. L. 104–13; 44 U.S.C. 3501–3521), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, the Office of Policy, Planning and Preparedness invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VA's functions, including whether the information will have practical utility; (2) the accuracy of VA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Title: VA Police Officer Pre-Employment Screening Checklist.

OMB Control Number: 2900–0524.

Type of Review: Extension of a currently approved collection.

Abstract: VA personnel use the form to document pre-employment history and conduct background checks on applicants seeking employment as VA police officers. VA will use the data collected to determine the applicant's qualification and suitability to be hire as a VA police officer.

Affected Public: State, Local, or Tribal Government.

Estimated Total Annual Burden: 250 hours.

Estimated Average Burden Per Respondent: 10 minutes.

Frequency of Response: One-time.

Estimated Number of Respondents: 1,500.

Dated: August 10, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Records Management Service.

[FR Doc. E6–13914 Filed 8–21–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0554]

Agency Information Collection Activities Under OMB Review

AGENCY: Veterans Health Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–21), this notice announces that the Veterans Health Administration (VHA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and includes the actual data collection instrument.

DATES: Comments must be submitted on or before September 21, 2006.

For Further Information or a Copy of the Submission Contact: Denise McLamb, Records Management Service (005G2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 565–8374, Fax (202) 565–7045 or e-mail: *denise.mclamb@mail.va.gov*. Please refer to "OMB Control No. 2900–0554."

Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395–7316. Please refer to "OMB Control No. 2900–0554" in any correspondence.

SUPPLEMENTARY INFORMATION: *Titles:*

a. Homeless Providers Grant and Per Diem Program, Capital Grant Application, VA Form 10–0361–CG.

b. Homeless Providers Grant and Per Diem Program, Life Safety Code Application, VA Form 10–0361–LSC.

c. Homeless Providers Grant and Per Diem Program, Per Diem Only Application, VA Form 10–0361–PDO.

d. Homeless Providers Grant and Per Diem Program, Special Needs Application, VA Form 10–0361–SN.

e. Compliance Reports for Per Diem and Special Needs Grants. No form needed. May be reported to VA in standard business narrative.

f. Homeless Providers Grant and Per Diem Program, Technical Assistance Application, VA Form 10–0361–TA.

g. Compliance Reports for Technical Assistance Grants. No form needed. May be reported to VA in standard business narrative.

OMB Control Number: 2900–0554.

Type of Review: Extension of a currently approved collection.

Abstract: VA Form 10–0361 series, Homeless Providers Grant and Per Diem Program, will be used to evaluate applicants eligibility to receive a grant and/or per diem payments which provide supportive housing and services to assist homeless veterans transition to independent living. VA will use the data to apply specific criteria to rate and evaluate each application; and to obtain information necessary to ensure that Federal funds are awarded to applicants who are financially stable and who will conduct the program for which a grant and/or per diem award was made.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information

unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on April 20, 2006 at pages 20438–20439.

Affected Public: Not-for-Profit Institutions, State, Local or Tribal Government.

Estimated Annual Burden: 14,340 hours.

a. Homeless Providers Grant and Per Diem Program, Capital Grant Application, VA Form 10–0361–CG—3,500 hours.

b. Homeless Providers Grant and Per Diem Program, Life Safety Code Application, VA Form 10–0361–LSC—2,000 hours.

c. Homeless Providers Grant and Per Diem Program, Per Diem Only Application, VA Form 10–0361–PDO—3,000 hours.

d. Homeless Providers Grant and Per Diem Program, Special Needs Application, VA Form 10–0361–SN—4,000 hours.

e. Compliance Reports for Per Diem and Special Needs Grants—1,500 hours.

f. Homeless Providers Grant and Per Diem Program, Technical Assistance Application, VA Form 10–0361–TA—250 hours.

g. Compliance Reports for Technical Assistance Grants—90 hours.

Estimated Average Burden Per Respondent:

a. Homeless Providers Grant and Per Diem Program, Capital Grant Application, VA Form 10–0361–CG—35 hours.

b. Homeless Providers Grant and Per Diem Program, Life Safety Code Application, VA Form 10–0361–LSC—10 hours.

c. Homeless Providers Grant and Per Diem Program, Per Diem Only Application, VA Form 10–0361–PDO—20 hours.

d. Homeless Providers Grant and Per Diem Program, Special Needs Application, VA Form 10–0361–SN—20 hours.

e. Compliance Reports for Per Diem and Special Needs Grants—5 hours.

f. Homeless Providers Grant and Per Diem Program, Technical Assistance Application, VA Form 10–0361–TA—10 hours.

g. Compliance Reports for Technical Assistance Grants—2.25 hours.

Frequency of Response: On occasion.

Estimated Number of Respondents: 1,015.

a. Homeless Providers Grant and Per Diem Program, Capital Grant Application, VA Form 10–0361–CG—100.

b. Homeless Providers Grant and Per Diem Program, Life Safety Code Application, VA Form 10–0361–LSC—200.

c. Homeless Providers Grant and Per Diem Program, Per Diem Only Application, VA Form 10–0361–PDO—150.

d. Homeless Providers Grant and Per Diem Program, Special Needs Application, VA Form 10–0361–SN—200.

e. Compliance Reports for Per Diem and Special Needs Grants—300.

f. Homeless Providers Grant and Per Diem Program, Technical Assistance Application, VA Form 10–0361–TA—25.

g. Compliance Reports for Technical Assistance Grants—40.

Dated: August 10, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Records Management Service.

[FR Doc. E6–13915 Filed 8–21–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0160]

Agency Information Collection Activities Under OMB Review

AGENCY: Veterans Health Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–21), this notice announces that the Veterans Health Administration (VHA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

DATES: Comments must be submitted on or before September 21, 2006.

For Further Information or a Copy of the Submission Contact: Denise McLamb, Information Management Service (005G2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 565–8374, Fax (202) 565–7045 or e-mail to: *denise.mclamb@mail.va.gov*. Please refer to "OMB Control No. 2900–0160."

Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503, (202) 395–7316. Please refer to "OMB Control No. 2900–0160" in any correspondence.

SUPPLEMENTARY INFORMATION: *Titles:*

a. State Home Inspection Staffing Profile, VA Form 10–3567.

b. State Home Report and Statement of Federal Aid Claimed, VA Form 10–5588.

c. State Home Program Application for Veteran Care—Medical Certification, VA Form 10–10SH.

d. Department of Veterans Affairs Certification Regarding Drug-Free Workplace Requirements for Grantees Other Than Individuals, VA Form 10–0143.

e. Statement of Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, VA Form 10–0143a.

f. Certification Regarding Lobbying, VA Form 10–0144.

g. Statement of Assurance of Compliance with Equal Opportunity Laws, VA Form 10–0144a.

h. Title 38, CFR Parts 51 and 52, State Home Programs.

OMB Control Number: 2900–0160.

Type of Review: Extension of a currently approved collection.

Abstract: VA pays per diem to State homes providing nursing home and adult day health care services to eligible veterans. Facilities providing nursing home and adult day health care services must furnish an application for recognition based on certification; appeal information, application and justification for payment; records and reports which facility management must maintain regarding activities of residents or participants; information relating to whether the facility meets standards concerning residents' rights and responsibilities prior to admission or enrollment, during admission or enrollment, and upon discharge; the records and reports which facilities management and health care professionals must maintain regarding residents or participants and employees; documents pertaining to the management of the facilities; food menu planning; pharmaceutical records; and life safety documentation. This information is necessary to ensure that VA per diem payments are limited to facilities providing high quality care to veterans.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection

of information was published on May 10, 2006, at pages 27319–27320.

Affected Public: State, Local or Tribal Government, Individuals or households, and Not for profit institutions.

Estimated Total Annual Burden:

a. State Home Inspection Staffing Profile, VA Form 10–3567—90 hours.

b. State Home Report and Statement of Federal Aid Claimed, VA Form 10–5588—1,080 hours.

c. State Home Program Application for Veteran Care—Medical Certification, VA Form 10–10SH—10,566 hours.

d. Department of Veterans Affairs Certification Regarding Drug-Free Workplace Requirements for Grantees Other Than Individuals, VA Form 10–0143—15 hours.

e. Statement of Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, VA Form 10–1043a—15 hours.

f. Certification Regarding Lobbying, VA Form 10–0144—15 hours.

g. Statement of Assurance of Compliance with Equal Opportunity Laws, VA Form 10–0144a—15 hours.

h. Title 38, CFR Parts 51 and 52, State Home Programs—3,739 hours.

Estimated Average Burden Per Respondent:

a. State Home Inspection Staffing Profile, VA Form 10–3567—30 minutes.

b. State Home Report and Statement of Federal Aid Claimed, VA Form 10–5588—30 minutes.

c. State Home Program Application for Veteran Care—Medical Certification, VA Form 10–10SH—30 minutes.

d. Department of Veterans Affairs Certification Regarding Drug-Free Workplace Requirements for Grantees Other Than Individuals, VA Form 10–0143—5 minutes.

e. Statement of Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, VA Form 10–1043a—5 minutes.

f. Certification Regarding Lobbying, VA Form 10–0144—5 minutes.

g. Statement of Assurance of Compliance with Equal Opportunity Laws, VA Form 10–0144a—5 minutes.

h. Title 38, CFR Parts 51 and 52, State Home Programs—7 minutes.

Frequency of Response: One-time.

Estimated Number of Respondents:

a. State Home Inspection Staffing Profile, VA Form 10–3567—180.

b. State Home Report and Statement of Federal Aid Claimed, VA Form 10–5588—180.

c. State Home Program Application for Veteran Care—Medical Certification, VA Form 10–10SH—21,132.

d. Department of Veterans Affairs Certification Regarding Drug-Free Workplace Requirements for Grantees Other Than Individuals, VA Form 10–0143—180.

e. Statement of Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, VA Form 10–1043a—180.

f. Certification Regarding Lobbying, VA Form 10–0144—180.

g. Statement of Assurance of Compliance with Equal Opportunity Laws, VA Form 10–0144a—180.

h. Title 38, CFR Parts 51 and 52, State Home Programs—22,926.

Estimated Total Annual Responses:

a. State Home Inspection Staffing Profile, VA Form 10–3567—180.

b. State Home Report and State of Federal Aid Claimed, VA Form 10–5588—2,160.

c. State Home Program Application for Veteran Care—Medical Certification, VA Form 10–10SH—21,132.

d. Department of Veterans Affairs Certification Regarding Drug-Free Workplace Requirements for Grantees Other Than Individuals, VA Form 10–0143—180.

e. Statement of Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, VA Form 10–1043a—180.

f. Certification Regarding Lobbying, VA Form 10–0144—180.

g. Statement of Assurance of Compliance with Equal Opportunity Laws, VA Form 10–0144a—180.

h. Title 38, CFR Parts 51 and 52, State Home Programs—23,466.

Dated: August 8, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Records Management Service.

[FR Doc. E6–13918 Filed 8–21–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0113]

Agency Information Collection Activities Under OMB Review

AGENCY: Veterans Benefits Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–21), this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and includes the actual data collection instrument.

DATES: Comments must be submitted on or before September 21, 2006.

For Further Information or a Copy of the Submission Contact: Denise McLamb, Information Management Service (005G2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 565–8374 or Fax (202) 565–7045 or e-mail: *denise.mclamb@mail.va.gov*. Please refer to "OMB Control No. 2900–0113." Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503, (202) 395–7316. Please refer to "OMB Control No. 2900–0564" in any correspondence.

SUPPLEMENTARY INFORMATION:

Title: Application for Fee or Roster Personnel Designation, VA Form 26–6681.

OMB Control Number: 2900–0113.

Type of Review: Revision of a currently approved collection.

Abstract: Applicants complete VA Form 26–6681 to apply for a position as a designate fee appraiser or compliance inspector. VA will use the data collected to determine the applicant's experience in the real estate valuation field.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on March 28, 2006, at page 15516–15517.

Affected Public: Individuals or households.

Estimated Annual Burden: 2,067 hours.

Estimated Average Burden Per Respondent: 30 minutes.

Frequency of Response: One-time.

Estimated Number of Respondents: 6,200.

Dated: August 7, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Information Management Service.

[FR Doc. E6–13920 Filed 8–21–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0042]

Agency Information Collection Activities Under OMB Review

AGENCY: Board of Veterans' Appeal, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–21.), this notice announces that the Board of Veterans' Appeal (BVA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

DATES: Comments must be submitted on or before September 21, 2006.

FOR FURTHER INFORMATION CONTACT: Denise McLamb, Records Management Service (005G2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 565–8374, Fax (202) 565–7045 or e-mail: *denise.mclamb@mail.va.gov*. Please refer to "OMB Control No. 2900–0042."

Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503, (202) 395–7316. Please refer to "OMB Control No. 2900–0042" in any correspondence.

SUPPLEMENTARY INFORMATION: *Title:* Statement of Accredited Representative in Appealed Case, VA Form 646.

OMB Control Number: 2900–0042.

Type of Review: Extension of a currently approved collection.

Abstract: A recognized organization, attorney, agent, or other authorized person representing VA claimants before the Board of Veterans' Appeals complete VA Form 646 to provide identifying data describing the basis for their claimant's disagreement with the denial of VA benefits. VA uses the data collected to identify the issues in dispute and to prepare a decision responsive to the claimant's disagreement.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on April 6, 2006, at pages 17563–17564.

Affected Public: Not for profit institutions.

Estimated Total Annual Burden: 30,462 hours.

Estimated Average Burden Per Respondent: 60 minutes.

Frequency of Response: On occasion.

Estimated Number of Respondents: 30,462.

Dated: August 7, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Records Management Service.

[FR Doc. E6–13923 Filed 8–21–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

Medicare-Equivalent Remittance Advice; Use by the Department of Veterans Affairs

AGENCY: Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: The Department of Veterans Affairs (VA) is making a change in its procedures for seeking reimbursement from third-party insurers for certain medical care and services provided to Medicare-eligible veterans for nonservice-connected disabilities, to add a Medicare-equivalent remittance advice (MRA) as an attachment to each bill for such care and services provided by VA, with the exception of those services noted in the **SUPPLEMENTARY INFORMATION** section below.

FOR FURTHER INFORMATION CONTACT: Barbara C. Mayerick, VHA Chief Business Office (161), Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Ave., NW., Washington, DC 20420, Telephone: (202) 254–0337. (This is not a toll free number.)

DATES: *Effective:* August 22, 2006.

SUPPLEMENTARY INFORMATION: Section 1729, Title 38, United States Code, is VA's authority to seek reimbursement from third-party insurers, including Medigap and other Medicare supplemental insurers, for the cost of medical care or services furnished to veterans for nonservice-connected disabilities as described below. Section 17.101 of title 38 of the Code of Federal Regulations sets forth VA's methodology for "reasonable charges" for medical care or services provided or furnished by VA to a veteran for nonservice-connected disabilities:

—For a nonservice-connected disability for which the veteran is entitled to care (or the payment of expenses of care) under a health plan contract;

—For a nonservice-connected disability incurred incident to the veteran's employment and covered under a workers' compensation law or plan that provides reimbursement or indemnification for such care and services; or

—For a nonservice-connected disability incurred as a result of a motor vehicle accident in a State that requires automobile accident insurance in a State that requires automobile reparations insurance.

VA has entered into an interagency agreement (IA) with the Centers for Medicare and Medicaid Services (CMS) which allows VA to work with the CMS fiscal intermediary and carrier, currently TrailBlazer Health Enterprises (TrailBlazer), in processing VA claims on a no-pay basis and produce Medicare-equivalent Remittance Advice (MRA) notices for the cost of medical care furnished to Medicare-eligible veterans for nonservice-connected treatment. The MRA reflects the payment that Medicare would have made, along with the deductible and coinsurance amounts applicable, for an equivalent service rendered by a Medicare provider. VA's bills are processed according to Medicare's coverage and payment policies, as well as claims processing guidelines and timeframes. Supplemental insurers will use this information to reimburse the VA coinsurance and deductible amounts they would have paid had the claims been payable by Medicare.

VA attaches the MRA provided by TrailBlazer to VA's secondary claim and both are submitted to the Medigap or other Medicare supplemental insurer either via the standard 837 transaction or via a print/mail function at the clearinghouse.

The attachment of the MRA to VA's bills submitted to Medigap or other Medicare supplemental insurers will improve VA's collection from these insurers. The MRA will correct the practice of overstating VA's outstanding accounts receivable by recording the expected supplemental payment rather than 100 percent of VA's billed charges. The submission of the MRA with a claim to Medigap or other Medicare supplemental insurers is expected to reduce the number of denials VA receives from supplemental insurers, since it will be obvious from the bill and the MRA that VA intends to collect only the supplemental payment.

Effective August 22, 2006, with the exception of the following services, all VA Medical Centers will submit an

MRA along with bills to Medigap or other Medicare supplemental insurers:

√	Claim type	Reason for exclusion
1	Purchased Services (fee-basis, contracted out)	Centers for Medicare and Medicaid (CMS) and VA policy differences.
2	Mammography Services	CMS and VA policy differences.
3	Institutional (Part A) Adjustments	Updates in process: Expected to be included October 2006.
4	Skilled Nursing Facilities (SNF)	Not currently covered by CMS/VA Interagency Agreement.
5	Ambulance	CMS and VA policy differences.
6	Rehab Services	Not currently covered by CMS/VA Interagency Agreement.
7	Professional (Part B) Durable Medical Equipment (DME) and Prosthetics & Orthotics (P&O).	Not currently covered by CMS/VA Interagency Agreement.
8	Hospice/Respite Care	Not currently covered by CMS/VA Interagency Agreement.
9	Home Health Care (HHC)	Not currently covered by CMS/VA Interagency Agreement.
10	Maintenance/Routine Dialysis	Not currently covered by CMS/VA Interagency Agreement.
11	Patients with Medicare Health Maintenance Organization (HMO) Policies.	Not currently covered by CMS/VA Interagency Agreement.
12	Independent Laboratories	Not currently covered by CMS/VA Interagency Agreement.
13	Ambulatory Surgical Centers	Not currently covered by CMS/VA Interagency Agreement.

VA continues to work with CMS to add these claim types to our program; in the interim, we expect that all Medicare supplemental insurers will continue to process these claims for payment under their previous methodology and based on the provisions of 38 U.S.C. 1729.

Authority: 38 U.S.C. 1729.

Approved: August 10, 2006.

Gordon H. Mansfield,

Deputy Secretary of Veterans Affairs.

[FR Doc. E6–13801 Filed 8–21–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

Advisory Committee on CARES Business Plan Studies; Notice of Meeting

The Department of Veterans Affairs (VA) gives notice under the Public Law 92–463 (Federal Advisory Committee Act) that the Advisory Committee on CARES Business Plan Studies will meet on Friday, September 8, 2006, from 9 a.m. until 3 p.m., in the Dining Room of the Nursing Home Care Unit, Building 90, VA Palo Alto Health Care System, 4951 Arroyo Road, Livermore, CA. The meeting is open to the public.

The purpose of the Committee is to provide advice to the Secretary of Veterans Affairs on proposed business plans at those VA facility sites identified in May 2004 as requiring further study by the Capital Asset Realignment for Enhanced Services (CARES) Decision document.

The objectives of the Local Advisory Panel meeting are to communicate the Secretary's decision on the specific options to be evaluated and the timeframe for the completion of the study. Additional presentations will focus on the VA-selected contractor's methodology and tools to evaluate the remaining options. The agenda will also accommodate public commentary on implementation issues associated with each option.

Interested persons may attend and present oral or written statements to the Committee. For additional information regarding the meeting, please contact Mr. Jay Halpern, Designated Federal Officer, (00CARES), 810 Vermont Avenue, NW., Washington, DC 20024, by phone at (202) 273–5994, or by e-mail at *jay.halpern@hq.med.va.gov.*

Dated: August 11, 2006.

By Direction of the Secretary.

E. Philip Riggin,

Committee Management Officer.

[FR Doc. 06–7075 Filed 8–21–06; 8:45 am]

BILLING CODE 8320–01–M

Federal Register

Tuesday,
August 22, 2006

Part II

Department of Health and Human Services

Centers for Medicare & Medicaid Services

42 CFR Parts 405, 410, et al.
Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2007 and Other Changes to Payment Under Part B; Proposed Rule

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

42 CFR Parts 405, 410, 411, 414, 415, and 424

[CMS–1321–P]

RIN 0938–AO24

Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2007 and Other Changes to Payment Under Part B

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

ACTION: Proposed rule.

SUMMARY: This proposed rule would address certain provisions of the Deficit Reduction Act of 2005, as well as make other proposed changes to Medicare Part B payment policy.

We are proposing these changes to ensure that our payment systems are updated to reflect changes in medical practice and the relative value of services. This proposed rule also discusses geographic practice cost indices (GPCI) changes; requests for additions to the list of telehealth services; payment for covered outpatient drugs and biologicals; payment for renal dialysis services; policies related to private contracts and opt-out; policies related to bone mass measurement services, independent diagnostic testing facilities, the physician self-referral prohibition; laboratory billing for the technical component (TC) of physician pathology services; the clinical laboratory fee schedule; certification of advanced practice nurses; health information technology, and the health care information transparency initiative.

DATES: *Comment Date:* Comments will be considered if we receive them at one of the addresses provided below, no later than 5 p.m. on October 10, 2006.

ADDRESSES: In commenting, please refer to file code CMS–1321–P. Because of staff and resource limitations, we cannot accept comments by facsimile (fax) transmission.

You may submit comments in one of three ways (no duplicates, please):

1. *Electronically.* You may submit electronic comments on specific issues in this regulation to *http://www.cms.hhs.gov/eRulemaking.* Click on the link "Submit electronic comments on CMS regulations with an open comment period." (Attachments should be in Microsoft Word, WordPerfect, or Excel; however, we prefer Microsoft Word.)

2. *By mail.* You may mail written comments (one original and two copies) to the following address only: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS–1321–P, P.O. Box 8015, Baltimore, MD 21244–8015.

Please allow sufficient time for mailed comments to be received before the close of the comment period.

3. *By express or overnight mail.* You may send written comments (one original and two copies) to the following address only: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS–1321–P, Mail Stop C4–26–05, 7500 Security Boulevard, Baltimore, MD 21244–1850.

4. *By hand or courier.* If you prefer, you may deliver (by hand or courier) your written comments (one original and two copies) before the close of the comment period to one of the following addresses. If you intend to deliver your comments to the Baltimore address, please call telephone number (410) 786–7197 in advance to schedule your arrival with one of our staff members.

Room 445–G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201; or 7500 Security Boulevard, Baltimore, MD 21244–1850.

(Because access to the interior of the HHH Building is not readily available to persons without Federal Government identification, commenters are encouraged to leave their comments in the CMS drop slots located in the main lobby of the building. A stamp-in clock is available for persons wishing to retain a proof of filing by stamping in and retaining an extra copy of the comments being filed.)

Comments mailed to the addresses indicated as appropriate for hand or courier delivery may be delayed and received after the comment period.

Submission of comments on paperwork requirements. You may submit comments on this document's paperwork requirements by mailing your comments to the addresses provided at the end of the "Collection of Information Requirements" section in this document.

For information on viewing public comments, see the beginning of the **SUPPLEMENTARY INFORMATION** section.

FOR FURTHER INFORMATION CONTACT: Pam West, (410) 786–2302 (for issues related to practice expense).

Stephanie Monroe, (410) 786–6864 (for issues related to the geographic practice cost index).

Craig Dobyski, (410) 786–4584 (for issues related to list of telehealth services).

Roberta Epps, (410) 786–4503 (for issues related to diagnostic imaging services).

Bill Larson, (410) 786–4639 (for issues related to coverage of bone mass measurement and addition of ultrasound screening for abdominal aortic aneurysm to the "Welcome to Medicare" benefit).

Dorothy Shannon, (410) 786–3396 (for issues related to the outpatient therapy cap).

Catherine Jansto, (410) 786–7762 (for issues related to payment for covered outpatient drugs and biologicals).

Henry Richter, (410) 786–4562 (for issues related to payments for end-stage renal disease facilities).

Fred Grabau, (410) 786–0206 (for issues related to private contracts and opt-out provision).

Lisa Ohrin, (410) 786–4565 (for issues related to physician self-referral prohibitions).

David Walczak (410) 786–4475 (for issues related to reassignment provisions).

August Nemec (410) 786–0612 (for issues related to independent diagnostic testing facilities).

Anita Greenberg, (410) 786–4601 (for issues related to the clinical laboratory fee schedule).

James Menas (410) 786–4507 (for issues related to payment for physician pathology services).

Diane Milstead, (410) 786–3355 or Gaysha Brooks (410) 786–9649 (for all other issues).

SUPPLEMENTARY INFORMATION:

Submitting Comments: We welcome comments from the public on all issues set forth in this rule to assist us in fully considering issues and developing policies. You can assist us by referencing the file code CMS–1321–P and the specific "issue identifier" that precedes the section on which you choose to comment.

Inspection of Public Comments: All comments received before the close of the comment period are available for viewing by the public, including any personally identifiable or confidential business information that is included in a comment. We post all comments received before the close of the comment period on the following Web site as soon as possible after they have been received: *http://www.cms.hhs.gov/eRulemaking.* Click on the link "Electronic Comments on CMS Regulations" on that Web site to view public comments.

Comments received timely will also be available for public inspection as

they are received, generally beginning approximately 3 weeks after publication of a document, at the headquarters of the Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore, Maryland 21244, Monday through Friday of each week from 8:30 a.m. to 4 p.m. To schedule an appointment to view public comments, phone 1–800–743–3951.

Information on the physician fee schedule can be found on the CMS homepage. You can access this data by using the following directions:

1. Go to the following Web site: *http://www.cms.hhs.gov/PhysicianFeeSched/.*
2. Select "PFS Federal Regulation Notices."

To assist readers in referencing sections contained in this preamble, we are providing the following table of contents. Some of the issues discussed in this preamble affect the payment policies, but do not require changes to the regulations in the *Code of Federal Regulations.* Information on the regulation's impact appears throughout the preamble and is not exclusively in section VI.

Table of Contents

In addition, because of the many organizations and terms to which we refer by acronym in this proposed final rule, we are listing these acronyms and their corresponding terms in alphabetical order below:

AADA American Academy of Dermatology Association
AAH American Association of Homecare
AAP Average acquisition price
ACC American College of Cardiology
ACG American College of Gastroenterology
ACHPN Advanced Certified Hospice and Palliative Nurse
ACOG American College of Obstetrics and Gynecology
ACR American College of Radiology
ADA American Dietetic Association
AFROC Association of Freestanding Radiation Oncology Centers
AGA American Gastroenterological Association
AHRQ Agency for Healthcare Research and Quality
AMA American Medical Association
AMP Average manufacturer price
ASA American Society of Anesthesiologists
ASGE American Society of Gastrointestinal Endoscopy
ASP Average sales price
ASTRO American Society for Therapeutic Radiation Oncology
ATA American Telemedicine Association
AUA American Urological Association
AWP Average wholesale price
BBA Balanced Budget Act of 1997
BBRA Balanced Budget Refinement Act of 1999
BES (Bureau of the Census) Business Expenditure Survey
BIPA Medicare, Medicaid, and SCHIP Benefits Improvement Protection Act of 2000
BLS Bureau of Labor Statistics
BMD Bone mineral density
BMI Body mass index
BMM Bone mass measurement
BNF Budget neutrality factor
BP Best price
BSA Body surface area
CAH Critical access hospital
CAP College of American Pathologists
CBSA Core-Based Statistical Area
CCI Correct Coding Initiative
CF Conversion factor
CFR Code of Federal Regulations
CMA California Medical Association
CMS Centers for Medicare & Medicaid Services
CNS Clinical nurse specialist
CPEP Clinical Practice Expert Panel
CPI Consumer Price Index
CPO Care Plan Oversight
CPT (Physicians') Current Procedural Terminology (4th Edition, 2002, copyrighted by the American Medical Association)
CRNA Certified Registered Nurse Anesthetist
CT Computed tomography
CTA Computed tomographic angiography
CY Calendar year
DHS Designated health services
DME Durable medical equipment
DMERC Durable Medical Equipment Regional Carrier
DRA Deficit Reduction Act
DSMT Diabetes outpatient self-management training services
DXA Dual energy x-ray absorptiometry
E&M Evaluation and management
EPO Erythopoeitin
ESRD End stage renal disease
FAX Facsimile
FI Fiscal intermediary
FR Federal Register
GAF Geographic adjustment factor
GAO General Accounting Office
GDP Gross domestic product
GPO Group purchasing organization

GPCI Geographic practice cost index
HCPAC Health Care Professional Advisory Committee
HCPCS Healthcare Common Procedure Coding System
HCRIS Healthcare Cost Report Information System
HSA Health Savings Account
HHA Home health agency
HHS (Department of) Health and Human Services
HIT Health information technology
HOCM High osmolar contrast media
HPSA Health Professional Shortage Area
HRSA Health Resources Services Administration (HHS)
HUD (Department of) Housing and Urban Development
IDTF Independent diagnostic testing facility
IPF Inpatient psychiatric facility
IPPS Inpatient prospective payment system
IRF Inpatient rehabilitation facility
ISO Insurance Services Office
IVIG Intravenous immune globulin
JCAAI Joint Council of Allergy, Asthma, and Immunology
JUA Joint underwriting association
LCD Local coverage determination
LTCH Long-term care hospital
LOCM Low osmolar contrast media
LOINC® Logical Observation Identifiers Names and Codes
MA Medicare Advantage
MCAC Medicare Coverage Advisory Committee
MCG Medical College of Georgia
MedPAC Medicare Payment Advisory Commission
MEI Medicare Economic Index
MMA Medicare Prescription Drug, Improvement, and Modernization Act of 2003
MNT Medical nutrition therapy
MRA Magnetic resonance angiography
MRI Magnetic resonance imaging
MSA Metropolitan statistical area
NCD National coverage determination
NCQDIS National Coalition of Quality Diagnostic Imaging Services
NDC National drug code
NECMA New England County Metropolitan Area
NECTA New England City and Town Area
NP Nurse practitioner
NPP Nonphysician practitioners
NPWP Nonphysician Work Pool
OBRA Omnibus Budget Reconciliation Act
OIG Office of Inspector General
OMB Office of Management and Budget
OPD Outpatient Department
OPPS Outpatient prospective payment system
OSCAR Online Survey and Certification and Reporting
PA Physician assistant
PBM Pharmacy benefit managers
PC Professional component
PE Practice Expense
PEAC Practice Expense Advisory Committee
PERC Practice Expense Review Committee
PET Positron emission tomography
PFS Physician Fee Schedule
PLI Professional liability insurance
PPI Producer price index
PPO Preferred provider organization
PPS Prospective payment system
PRA Paperwork Reduction Act
PT Physical therapy
QCT Quantitative computerized tomography
RFA Regulatory Flexibility Act
RIA Regulatory impact analysis
RN Registered nurse
RUC (AMA's Specialty Society) Relative (Value) Update Committee
RVU Relative value unit
SXA Single energy x-ray absorptiometry
SPA Single photon absorptiometry
SGR Sustainable growth rate
SMS (AMA's) Socioeconomic Monitoring System
SNF Skilled Nursing Facility
SNM Society for Nuclear Medicine
TA Technology Assessment
TC Technical Component
UAF Update adjustment factor
UPIN Unique Physician Identification Number
WAC Wholesale acquisition cost
WAMP Widely available market price

I. Background

[If you choose to comment on issues in this section, please include the caption "BACKGROUND" at the beginning of your comments.]

Since January 1, 1992, Medicare has paid for physicians' services under section 1848 of the Social Security Act (the Act), "Payment for Physicians' Services." The Act requires that payments under the physician fee schedule (PFS) be based on national uniform relative value units (RVUs) based on the resources used in furnishing a service. Section 1848(c) of the Act requires that national RVUs be established for physician work, practice expense (PE), and malpractice expense. Before the establishment of the resource-based relative value system, Medicare payment for physicians' services was based on reasonable charges.

A. Development of the Relative Value System

1. Work RVUs

The concepts and methodology underlying the PFS were enacted as part of the Omnibus Budget Reconciliation Act (OBRA) of 1989, Pub. L. 101–239, and OBRA 1990, (Pub. L. 101–508). The final rule, published November 25, 1991 (56 FR 59502), set forth the fee schedule for payment for physicians' services beginning January 1, 1992. Initially, only the physician work RVUs were resource-based, and the PE and malpractice RVUs were based on average allowable charges.

The physician work RVUs established for the implementation of the fee schedule in January 1992 were developed with extensive input from the physician community. A research team at the Harvard School of Public Health developed the original physician work RVUs for most codes in a cooperative agreement with the Department of Health and Human Services (HHS). In constructing the code-specific vignettes for the original physician work RVUs, Harvard worked with panels of experts, both inside and outside the Federal government, and obtained input from numerous physician specialty groups.

Section 1848(b)(2)(A) of the Act specifies that the RVUs for radiology services are based on relative value scale we adopted under section 1834(b)(1)(A) of the Act, (the American College of Radiology (ACR) relative value scale), which we integrated into the overall PFS. Section 1848(b)(2)(B) of the Act specifies that the RVUs for anesthesia services are based on RVUs from a uniform relative value guide. We established a separate conversion factor (CF) for anesthesia services, and we continue to utilize time units as a factor in determining payment for these services. As a result, there is a separate payment methodology for anesthesia services.

We establish physician work RVUs for new and revised codes based on recommendations received from the American Medical Association's (AMA) Specialty Society Relative Value Update Committee (RUC).

2. Practice Expense Relative Value Units (PE RVUs)

Section 121 of the Social Security Act Amendments of 1994 (Pub. L. 103–432), enacted on October 31, 1994, amended section 1848(c)(2)(C)(ii) of the Act and required us to develop resource-based PE RVUs for each physician's service beginning in 1998. We were to consider general categories of expenses (such as office rent and wages of personnel, but excluding malpractice expenses) comprising practice expenses.

Section 4505(a) of the Balanced Budget Act of 1997 (BBA) (Pub. L. 105–33), amended section 1848(c)(2)(C)(ii) of the Act to delay implementation of the resource-based PE RVU system until January 1, 1999. In addition, section 4505(b) of the BBA provided for a 4-year transition period from charge-based PE RVUs to resource-based RVUs.

We established the resource-based PE RVUs for each physician's service in a final rule, published November 2, 1998 (63 FR 58814), effective for services furnished in 1999. Based on the requirement to transition to a resource-based system for PE over a 4-year period, resource-based PE RVUs did not become fully effective until 2002.

This resource-based system was based on two significant sources of actual PE data: The Clinical Practice Expert Panel (CPEP) data and the AMA's Socioeconomic Monitoring System (SMS) data. The CPEP data were collected from panels of physicians, practice administrators, and nonphysicians (for example, registered nurses) nominated by physician specialty societies and other groups. The CPEP panels identified the direct inputs required for each physician's service in both the office setting and out-of-office setting. The AMA's SMS data provided aggregate specialty-specific information on hours worked and practice expenses.

Separate PE RVUs are established for procedures that can be performed in both a nonfacility setting, such as a physician's office, and a facility setting, such as a hospital outpatient department. The difference between the facility and nonfacility RVUs reflects the fact that a facility receives separate payment from Medicare for its costs of providing the service, apart from payment under the PFS. The nonfacility RVUs reflect all of the direct and indirect practice expenses of providing a particular service.

Section 212 of the Balanced Budget Refinement Act of 1999 (BBRA) (Pub. L. 106–113) directed the Secretary of Health and Human Services (the Secretary) to establish a process under which we accept and use, to the maximum extent practicable and consistent with sound data practices, data collected or developed by entities and organizations to supplement the data we normally collect in determining the PE component. On May 3, 2000, we published the interim final rule (65 FR 25664) that set forth the criteria for the submission of these supplemental PE survey data. The criteria were modified in response to comments received, and published in the **Federal Register** (65 FR 65376) as part of a November 1, 2000 final rule. The PFS final rules published in 2001 and 2003, respectively, (66 FR 55246 and 68 FR 63196) extended the period during which we would accept these supplemental data.

3. Resource-Based Malpractice RVUs

Section 4505(f) of the BBA amended section 1848(c) of the Act to require us to implement resource-based malpractice RVUs for services furnished on or after 2000. The resource-based malpractice RVUs were implemented in the PFS final rule published November 2, 1999 (64 FR 59380). The malpractice RVUs were based on malpractice insurance premium data collected from commercial and physician-owned insurers from all the States, the District of Columbia, and Puerto Rico.

4. Refinements to the RVUs

Section 1848(c)(2)(B)(i) of the Act requires that we review all RVUs no less often than every 5 years. The first 5-year review of the physician work RVUs went into effect in 1997, published on November 22, 1996 (61 FR 59489). The second 5-year review went into effect in 2002, published on November 1, 2001 (66 FR 55246). The next scheduled 5-year review is scheduled to go into effect in 2007.

In 1999, the AMA's RUC established the Practice Expense Advisory Committee (PEAC) for the purpose of refining the direct PE inputs. Through March of 2004, the PEAC provided recommendations to CMS for over 7,600 codes (all but a few hundred of the codes currently listed in the AMA's Current Procedural Terminology (CPT) codes).

In the November 15, 2004, PFS final rule (69 FR 66236), we implemented the first 5-year review of the malpractice RVUs (69 FR 66263).

5. Adjustments to RVUS Are Budget Neutral

Section 1848(c)(2)(B)(ii)(II) of the Act provides that adjustments in RVUs for a year may not cause total PFS payments to differ by more than $20 million from what they would have been if the adjustments were not made. In accordance with section 1848(c)(2)(B)(ii)(II) of the Act, if adjustments to RVUs cause expenditures to change by more than $20 million, we make adjustments to ensure that expenditures do not increase or decrease by more than $20 million.

B. Components of the Fee Schedule Payment Amounts

To calculate the payment for every physician service, the components of the fee schedule (physician work, PE, and malpractice RVUs) are adjusted by a geographic practice cost index (GPCI). The GPCIs reflect the relative costs of physician work, PEs, and malpractice insurance in an area compared to the national average costs for each component.

Payments are converted to dollar amounts through the application of a CF, which is calculated by the Office of the Actuary and is updated annually for inflation.

The general formula for calculating the Medicare fee schedule amount for a given service and fee schedule area can be expressed as:

Payment = [(RVU work × GPCI work) + (RVU PE × GPCI PE) + (RVU malpractice × GPCI malpractice)] × CF.

(**Note:** As discussed in the June 29, 2006 proposed notice for the Five-Year Review of Work Relative Value Units Under the Physician Fee Schedule and Proposed Changes to the Practice Expense Methodology (71 FR 37170), we have proposed to establish a separate budget neutrality adjustor that would be applied in the calculation of the work RVUs. Application of this budget neutrality adjustor would enable us to meet the budget neutrality provisions of section 1848(c)(2)(B)(ii) of the Act.)

C. Most Recent Changes to the Fee Schedule

The final rule with comment period that appeared in the **Federal Register** on November 21, 2005 (70 FR 70116) addressed Medicare Part B payment policy, including the physician fee schedule, that is applicable for calendar year (CY) 2006; and finalized certain provisions of the interim final rule to implement the Competitive Acquisition Program (CAP) for Part B Drugs.

It also revised Medicare Part B payment and related policies regarding: Physician work, practice expense and malpractice RVUs; Medicare telehealth services; multiple diagnostic imaging procedures; covered outpatient drugs and biologicals; supplemental payments to Federally Qualified Health Centers (FQHCs); renal dialysis services; coverage for glaucoma screening services; National Coverage Determination (NCD) timeframes; and physician referrals for nuclear medicine services and supplies to health care entities with which physicians have financial relationships.

In addition, the rule finalized the interim RVUs for CY 2005 and issued interim RVUs for new and revised procedure codes for CY 2006. The rule also updated the codes subject to the physician self-referral prohibition and discussed payment policies relating to teaching anesthesia services, therapy caps, private contracts and opt-out, and chiropractic and oncology demonstrations.

In accordance with section 1848(d)(1)(E)(i) of the Act, we also announced that the PFS update for CY 2006 would be −4.4 percent; the initial estimate for the sustainable growth rate for CY 2006 would be 1.7; and the CF for CY 2006 would be $36.1770. However, subsequent to publication of the CY 2005 PFS final rule with comment period, section 5104 of the Deficit Reduction Act (DRA) of 2005 (Pub. L. 109–171, February 8, 2006), was enacted which amended section 1848(d)

of the statute to provide for a 0 percent update effective January 1, 2006.

We also note that the Five-Year Review of Work Relative Value Units Under the Physician Fee Schedule and Proposed Changes to the Practice Expense Methodology proposed notice appeared in the **Federal Register** on June 29, 2006 (71 FR 37170). In that notice, we proposed revisions to work RVUs affecting payment for physicians' services. The revisions reflect changes in medical practice, coding changes, and new data on relative value components that affect the relative amount of physician work required to perform each service, as required by the statute. We also proposed revisions to our methodology for calculating PE RVUs, including changes based on supplemental survey data for PE. This revised methodology would be used to establish payment for services beginning January 1, 2007.

As indicated in the June 29, 2006 proposed notice, we will respond to the comments received on that notice as part of the final Medicare PFS rule for CY 2007 scheduled for publication this fall. If adopted, the RVU revisions would be fully implemented for services furnished to Medicare beneficiaries on or after January 1, 2007. The PE revisions would be phased-in over a four-year period; although, as we gain experience with the new methodology, we will reexamine this policy beginning next year and propose necessary revisions through future rulemaking.

II. Provisions of the Proposed Rule

[If you choose to comment on issues in this section, please include the caption "PROVISIONS" at the beginning of your comments.]

A. Resource-Based Practice Expense (PE) RVU Proposals for CY 2007

Major changes to the PE methodology for 2007, as well as a detailed discussion of the current PE methodology, are discussed in the June 29, 2006 proposed notice (71 FR 37170 through 37430).

This proposed rule contains proposals for direct PE including clinical labor, medical supplies and medical equipment.

1. RUC Recommendations for Direct PE Inputs and Other PE Input Issues

The following discussions are proposals concerning direct PE inputs.

(a) RUC Recommendations

The AMA's Relative Value Update Committee (RUC) established a new committee, the Practice Expense Review Committee (PERC), to assist the RUC in recommending direct PE inputs (clinical staff, supplies, and equipment) for new and existing CPT codes.

The PERC reviewed the PE inputs for over 2000 existing codes, some of which were unresolved PE issues from the CY 2006 PFS final rule with comment period, at their meetings held in September 2005, February 2006 and April 2006. (A list of these reviewed codes can be found in Addendum C of this proposed rule.)

We have reviewed the PERC-submitted recommendations and propose to adopt all of them. We have worked with the AMA staff to make corrections for any typographical errors and to ensure that previously PEAC-accepted standards are incorporated in the recommendations.

The complete PERC recommendations and the revised PE database can be found on our Web site. (See the **SUPPLEMENTARY INFORMATION** section of this proposed rule for directions on accessing our Web site.)

(b) Standard Supplies and Equipment for 90-Day Global Codes

We are proposing to revise the CPEP supply and equipment inputs for those 90-day global procedures for which the RUC has only refined the clinical labor inputs. We are proposing to apply the standard supply and equipment inputs for the facility setting for 90-day global services to these remaining unrefined 90-day global procedure codes. As recommended by the RUC, for supplies, we propose to include one minimum supply visit package for each post-operative visit assigned to each code and a post-surgical incision care kit (suture, staples, or both) where appropriate, along with additional items recommended by the RUC for certain procedures. For equipment, we are proposing to include an exam table and light. However, there are several issues on which we need input before we finalize the recommended standards. For example, for many of the 90-day codes in question, the current supply input data contain supplies in far larger quantities than are contained in either the visit package or incision care kit. For other codes, the current data includes items that are not contained in the package or kit. In other cases, the recommendations from the RUC contain additional items in quantities that appear excessive. We plan to work with all the concerned specialties to ensure that the finalized inputs do represent the typical supplies needed to perform each procedure.

Because the application of the 90-day global standard supplies and equipment would result in the deletion of some original CPEP inputs, we are requesting that all the medical specialties examine the direct PE inputs on our Web site and let us know whether there are additional items from the original CPEP data that are a necessary part of the post-operative care and if the PE inputs listed are correct. (See the **SUPPLEMENTARY INFORMATION** section of this proposed rule for directions on accessing our Web site.)

2. Payment for Splint and Cast Supplies

In the PFS final rules published November 1999 (64 FR 59380) and November 2000 (65 FR 65376), we removed splint and cast supplies from the PE database for the CPT codes for fracture management and cast/strapping application procedures. Because splint and cast supplies could be separately billed using Healthcare Common Procedure Coding System (HCPCS) codes (Q4001–Q4051) that were established for payment of these supplies under section 1861(s)(5) of the Act, we did not want to make duplicate payment under the PFS for these items.

In the CY 2006 PFS proposed rule (70 FR 70116), we proposed to reinstate payment for all splints and cast supplies through the PE component of the PFS because we believed we may have unintentionally prohibited remuneration for these supplies when they are not used for reduction of a fracture or dislocation (covered under section 1861(s)(5) of the Act), but rather are provided (and covered) as "incident to" a physician service under section 1861(s)(2)(A) of the Act. This proposal was not finalized; however, in our final rule we asked the medical specialties and the PERC to determine the typical supplies for splints and casts necessary for each of the fracture management codes and the cast/strapping application codes because we wanted to make certain that the supply inputs were correct before we proceeded with rulemaking for the CY 2007 PFS. At its February 2006 meeting, the PERC reviewed and approved the supply inputs submitted by the AAOS for each CPT code for fracture management and cast/strapping application and these were forwarded to us as PERC recommendations. During this interim period we also reassessed the options for payment of materials for splints and casts.

We believe that the majority of the splint and cast supplies that are currently paid through the Q-codes are furnished in relationship to cast/strapping procedures for the management of fractures and dislocations. However, we did not intend for the medically necessary

splint and cast supplies used for other reasons (for example, serial casting, wound care, or protection) not to be paid. Because it may be difficult for the contractors to identify the purpose for the cast/strapping application procedure on a claim form, we believe that contractors may have been paying for the splint and cast supply Q-codes when the service is performed for other purposes than treatment of fractures and dislocations.

Since these splint and cast supplies can be covered under both sections 1861(s)(5) and 1861(s)(2)(A) of the Act, we are proposing to include payment for both statutory benefits using the separate HCPCS Q-codes. This would allow for payment for these medically necessary supplies whether based on sections 1861(s)(5) or 1861(s)(2)(A) of the Act, while ensuring that no duplicate payments are made. Physicians would continue to bill the HCPCS Q-codes, in addition to the cast/strapping application procedure codes, to be paid for these materials.

The following supplies would continue to be paid separately using the HCPCS Q-codes and would not be included in the PE database upon adoption of this proposal:

- Fiberglass roll.
- Cast padding.
- Cast shoe.
- Stockingnet/stockinette.
- Plaster bandage.
- Denver splint.
- Dome paste bandage.
- Cast sole.
- Elastoplast roll.
- Fiberglass splint.
- Ace wrap.
- Kerlix.
- Webril.
- Malleable arch bars and elastics.

The splint and cast supplies would not be included in the PEs for the following CPT codes:

- 24500 through 24685
- 25500 through 25695
- 26600 through 26785
- 27500 through 27566
- 27750 through 27848
- 28400 through 28675
- 29000 through 29750.

We are requesting input, specifically from medical specialties and contractors on this proposal.

3. Medical Nutrition Therapy Services

In 2000, the Health Care Professional Advisory Committee (HCPAC) recommended that we assign work RVUs to three new medical nutrition therapy (MNT) CPT codes—97802 *Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes* at 0.45 RVUs, 97803 *Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes* at 0.37 RVUs, and 97804 *Medical nutrition therapy; group (two or more individuals), each 30 minutes* at 0.25 RVUs. However, during rulemaking for the CY 2001 PFS final rule, we indicated that MNT was not covered because there was yet no statutory benefit category that would allow medical nutritionists to bill these services. We also did not accept the HCPAC recommendations for work RVUs for these MNT services because the codes were designed for use only by nonphysicians. The following year, section 105(c) of the Medicare, Medicaid, and SCHIP Benefits Improvement Protection Act of 2000 (BIPA) provided for the coverage of MNT services when furnished by registered dietitians or nutritional professionals at 85 percent of the amount that a physician would be paid for the same services. As a result, we established values for these MNT services for the 2002 PFS. In keeping with our earlier decision, we did not assign the HCPAC-recommended work values. However, the associated work value for each code was utilized in the conversion of work to clinical labor time for MNTs as part of the PE component. At that time we received several comments, including one from the American Dietetic Association (ADA), urging us to adopt the work values recommended by the HCPAC.

More recently, the ADA has requested us to reconsider our decision not to accept the HCPAC recommended work RVUs. The ADA contends that the payment rate established by section 105(c) of BIPA, 85 percent of the PFS amount that would be paid for the same service if furnished by a physician, is based on the premise that work values are inherent to these MNT services. The ADA believes that without work RVUs, the payment for these services does not reflect 85 percent of what a physician would be paid for performing the same service. Because these MNT codes were created specifically for MNT professionals, the ADA compared the work associated with their services to physician E/M services of CPT 99203 and 99213, which have respective work RVUs of 1.34 and 0.67.

After reviewing the issues and relevant arguments raised by the ADA, we are persuaded that it would be appropriate to include work RVUs for the MNT services. Consequently, we are proposing to establish work RVUs for each code at the level previously recommended by the HCPAC, as follows:

- CPT 97802 = 0.45 RVUs.
- CPT 97803 = 0.37 RVUs.
- CPT 97804 = 0.25.

Because we propose to add the work RVUs to these services, the MNT clinical labor time in the direct input database would be removed with the adoption of this proposal. Additionally, two HCPCS codes, G0270 *MNT subs tx for change dx* and G0271 *Group MNT 2 or more 30 mins* were created to track MNT services following the second referral in the same year. These HCPCS codes correspond to CPT codes 97803 and 97804, respectively. Therefore, we would also propose to add the same work RVUs to these HCPCS codes and to delete the clinical labor inputs from the PE database upon adoption of this policy. We encourage specialty societies and other professional groups to comment on this proposal.

4. Surgical Pathology Codes

We heard from the College of American Pathologists (CAP) regarding the equipment times assigned to CPT codes 88304 and 88305 in the basic surgical pathology family of codes. While all six codes in this family have been refined by the PEAC, this refinement occurred at 4 separate PEAC meetings. CPT codes 88304 and 88305 were refined at the first PEAC meeting in April 1999 before time standards were established for the equipment at subsequent PEAC meetings when the other four CPT codes 88300, 88302, 88307, and 88309 were reviewed. Using our proposed bottom-up PE methodology to value these codes, the lack of the equipment time standards for CPT codes 88304 and 88305 create a rank-order anomaly in this family. Consequently, CAP, after reviewing and applying current standards for the equipment times, submitted suggested revised equipment times to us. We are proposing to accept these times and the proposed times will be reflected in the PE database on our Web site (See the **SUPPLEMENTARY INFORMATION** section of this proposed notice for directions on accessing our Web site.)

5. Other PE Issues

In the CY 2006 PFS final rule with comment period (70 FR 70116), we explained that we were not implementing the PERC or other proposed PE changes for CY 2006 due to issues with the PE methodology. In this proposed rule, we are proposing that the PERC and other PE changes originally proposed for CY 2006 would be implemented and effective with the CY 2007 PFS. The following

subsections, (a) through (j), summarize the PE proposals from the CY 2006 PFS final rule with comment period that we are including in this proposed rule. Additionally, we are including several other items which concern inputs for PE that are discussed below in subsections (k) through (n).

(a) PE Recommendations on CPEP Inputs for CY 2006

We are proposing to use a clinical labor time of 167 minutes for the service period for CPT code 36522, Extracorporeal Photopheresis; maintain the nonfacility setting PE RVUs for CPT code 78350, single photon bone densitometry; and remove the PE inputs for the nonfacility setting for CPT codes 76975, GI endoscopic ultrasound, and 15852, Dressing change not for burn. (70 FR 70136 through 70137)

(b) Supply Items for CPT Code 95015 (Which Is Used for Intradermal Allergy Tests With Drugs, Biologicals, or Venoms)

We are proposing to implement the allergy and immunology specialty's recommendation to change the test substance in CPT code 95015 to venom, at $10.70 (from single antigen, at $5.18) and the quantity to 0.3 ml (from 0.1 ml). (See 70 FR 70138.)

(c) Flow Cytometry Services

Based on information from the society representing independent laboratories, we are proposing to implement the following direct PE inputs:

- Clinical Labor—We are proposing to change the staff type in the service (intra) period in both CPT codes 88184 and 88185 to cytotechnologist, at $0.45 per minute (currently lab technician, at $0.33 per minute).
- Supplies—We are proposing to change the antibody cost for both CPT codes 88184 and 88185 to $8.50 (from $3.544).
- Equipment—We are proposing to add the following equipment to CPT code 88184:
  - + Computer.
  - + Printer.
  - + Slide strainer.
  - + Biohazard hood.
  - + Wash assistant.
  - + FAC loader.
  - + We are proposing to add a computer and printer to the equipment for CPT code 88185 (70 FR 70138).

(d) Low Osmolar Contrast Media (LOCM) and High Osmolar Contrast Media (HOCM)

Because separate payment is available for both types of contrast media, we are proposing to delete LOCM and HOCM from the PE database with the CY 2007 PFS rule. (See 70 FR 70138).

(e) Imaging Rooms

We are proposing to implement the updates for the contents and prices of 5 "rooms" used in imaging procedures including—

- Basic radiology room;
- Radiographic-fluoroscopic room;
- Mammography room;
- Computed tomography (CT) room; and
- Magnetic resonance imaging (MRI) room (See 70 FR 70139).

(f) Equipment Pricing for Select Services and Procedures

We are proposing to accept the following equipment pricing information provided by various specialty societies for select services and procedures as discussed in the CY 2006 PFS final rule with comment period. (See 70 FR 70139):

- Equipment pricing for certain radiology services received from the ACR as presented in Table 15 of the CY 2006 PFS proposed rule.
- Equipment pricing on the ultrasound color doppler transducers and vaginal probe received from the American College of Obstetrics and Gynecology (ACOG).
- For CPT 36522, extracorporeal photopheresis, equipment pricing information specific to this procedure.
- Pricing of EMG botox machine used in CPT code 92265 as presented by the American Academy of Ophthalmology.

(g) Supply Item for In Situ Hybridization Codes (CPT Codes 88365, 88367, and 88368)

We are proposing to implement the Society for Clinical Pathologists' request to change the probe quantity for CPT code 88367 *In situ hybridization, auto* to 1.5, equal to that of the other two codes in the family.

(h) Supply Item for Percutaneous Vertebroplasty Procedures (CPT codes 22520 and 22525)

Based on documentation provided by the Society for Interventional Radiology, we are proposing to implement a new price of $696.00 for the vertebroplasty kit, to replace a temporary price of $660.50 that was a placeholder price from the CY 2006 PFS final rule with comment period. (See 70 FR 70139.)

(i) Clinical Labor for G-Codes Related to Home Health and Hospice Physician Supervision, Certification and Recertification

We are proposing to apply the refinements made to the PE inputs to CPT codes 99375 and 99378 for home health and hospice supervision to 4 G-codes that are related to home health and hospice physician supervision, certification and recertification, G0179, GO180, GO181, and GO182. These G-codes are incorrectly valued for clinical labor. These G-codes are cross-walked from CPT codes 99375 and 99378, which underwent PEAC refinement in January 2003 for the CY 2004 PFS. However, at that time we inadvertently did not apply the new refinements to these specific G-codes. (See 70 FR 70139 through 70140.)

(j) Programmers for Implantable Neurostimulators and Intrathecal Drug Infusion Pumps

Although we had initially proposed, in the CY 2006 PFS proposed rule, to remove two programmers from the PE database (EQ208 for medication pump from two codes (CPT 62367 and 62368) and EQ209 for the neurostimulator from 8 codes (CPT 95970–97979)), based on comments received as discussed in the CY 2006 PFS final rule with comment period (see 70 FR 70140), we determined that we will retain these programmers in the database. In addition, we added "with printer" to the description of EQ208 based on comments received. We are proposing to implement these decisions for CY 2007.

(k) Cardiac Monitoring Services

We are requesting more specific PE information related to remote cardiac monitoring services because these services do not fit the direct PE model used for typical physician services. These services are overwhelmingly performed by specialized independent diagnostic testing facilities (IDTFs) that are paid under the PFS, but due to the characteristics of cardiac monitoring services, frequently maintain more extensive operating hours than the typical physician office. Specifically, we are looking for data to indicate the typical number and type of transmissions or other encounters per day between the beneficiary and the IDTF for each of the remote monitoring services. We would also like to know the number and type of clinical staff, as well as the corresponding time, that are necessary to ensure appropriate services are available for each patient. Additionally, we are interested in identifying any other direct PE inputs for typical supplies and equipment relating to these services, and any data that would reflect indirect PEs, such as overhead and non-clinical payroll expenses. We believe that the following codes represent atypical PE scenarios

and would like to receive PE information regarding these services:

- Cardiac event monitoring (CPT codes 93271, 93012 and 93270).
- Pacemaker monitoring (CPT codes 93733 and 93736).
- Holter monitoring (CPT codes 93232, 93226, 93231 and 93225).
- INR monitoring (HCPCS codes G0248 and G0249).

(l) Clarification With Respect to Non-Facility PE RVUs

In the CY 2006 PFS final rule with comment (70 FR 70335) we provided a clarification in Addendum A concerning use of "NA" in the PE RVU columns for Addendum B. Commenters requested that further clarification be made concerning the payment amount for procedures performed in the non-facility setting if there is an "NA" in the non-facility PE RVU column. Our policy is that if the Medicare carrier pays for the service in the non-facility setting, the service will be paid at the facility PE RVU rate. In this proposed rule, we are proposing revisions to Addendum A to include this clarification.

(m) Supply for CPT Code 50384, Removal (via Snare/Capture) of Internally Dwelling Ureteral Stent Via Percutaneous Approach, Including Radiological Supervision and Interpretation

Upon review of the RUC-recommended direct PE inputs for CPT 50384, a new procedure for CPT 2006, we identified the inappropriate inclusion of a ureteral stent that we are proposing to delete for CY 2007. We believe that the addition of the ureteral stent, valued by the specialty at $162, to CPT code 50384, which is the procedure for the removal of a stent, was an inadvertent error by the specialty during the April 2005 RUC meeting.

(n) Supply and Equipment Items Needing Specialty Input

We have identified certain supply and equipment items for which we were unable to verify the pricing information (see Table 1: Supply Items Needing Specialty Input for Pricing and Table 2: Equipment Items Needing Specialty Input for Pricing). During the CY 2006 rulemaking process, we listed both supply and equipment items for which pricing documentation was needed from the medical specialty societies and, for many of these items, we received sufficient documentation in the form of catalog listings, vendor Web sites, invoices, and manufacturer quotes. We have accepted the documented prices for many of these items and these prices are reflected in the PE RVUs in Addendum B of this proposed rule. The items listed below in Tables 1 and 2 represent the outstanding items from CY 2006 and new items added from the current RUC recommendations. We are requesting that commenters provide pricing information on items in these tables along with acceptable documentation, as noted in the footnote to each table, to support recommended prices. For supplies or equipment that have previously appeared on this list, and for which we received no or inadequate documentation, we are proposing to delete these items unless we receive adequate information to support current pricing by the conclusion of the comment period for this proposed rule.

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Table 1: Supply Items Needing Specialty Input for Pricing

Code	2005/6 Description	Unit	Unit Price	Primary associated specialties	Associated *CPT code(s)	Prior Item Status on Table	Commenter response and CMS action	2007 Item Status refer to note(s)
SK105	blood pressure recording form, average	Item	0.31	Cardiology	93784, 93786, 93788	YES	Specialty to submit asap, per comment.	B, C
SJ072	Brush, disposable applicator	Item		Dermatology	17360	YES	Specialty to submit asap, per comment.	B
SD217	Diaphragm fitting set	Item	75.00	Ob-gyn	57170	YES	Documentation received: set is reusable. Propose deletion.	D
SD054	Electrode, EEG, tin cup (12 pack uou)	Item		Neurology	95812-13, 95816, 95819, 95822, 95950, 95954, 95956	YES	Submitted price of $18 for 12 pack Accepted price of $18 for 12 pack (uou)	A
SC088	Fistula set, dialysis, 17g	Item		Dermatology	36522	YES	Specialty to submit asap, per comment.	B
SL193	Glycolic acid, 20 - 50%	ml		Dermatology	17360	YES	Specialty to submit asap, per comment.	B
SF044	Micro air burr	Item		Podiatry, Orthopedics	28740, 28750, 28755, 28760	YES	No comments received.	B, C
SJ076	Nose pads	Item		Optometry	92370	YES	Documentation received. Accept price of $.79 per pair	A
SD140	pressure bag	item	8.925	Cardiology	93501, 93508, 93510, 93526	YES	No documentation Received.	B, C

Code	2005/6 Description	Unit	Unit Price	Primary associated specialties	Associated *CPT code(s)	Prior Item Status on Table	Commenter response and CMS action	2007 Item Status refer to note(s)
SL119	Sealant spray	oz		Radiation Oncology	77333	YES	Inadequate documentation received. Need price per ounce.	B
SL200	Sodium bicarbonate spray, 8 oz	Item		Dermatology	17360	YES	Specialty to submit asap, per comment.	B
SA091	Tray, scoop, fast track system	tray	750.00	ENT	31730	YES	Documentation received-with tray contents. Accept price of $750.00.	A
SD213	tubing, sterile, non-vented (fluid administration)	item	1.99	Cardiology	93501, 93508, 93510, 93526	YES	Specialty to submit asap, per comment.	B, C

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Note: Acceptable documentation includes--Detailed description (including system components), source, and current pricing information, such as copies of catalog pages, hard copy from specific web pages, invoices, and quotes (letter format okay) from manufacturer, vendors or distributors. Unacceptable documentation includes--phone numbers and addresses of manufacturer, vendors or distributors, website links without pricing information, etc.

A. Submitted price or rationale accepted. Appropriate changes made to database.

B. 2005/2006 price retained, on an interim basis. Forward acceptable documentation promptly as applicable.

C. No/Insufficient documentation. Retained price in database, on an interim basis. Price is proposed to be removed from database if acceptable documentation is not received during comment period. Forward documentation promptly.

D. Deleted, item is reusable.

Table 2: Equipment Items Needing Specialty Input for Pricing and Proposed Deletions

Code	2005/6 Description	2005/6 Price	Primary specialties associated with item	*CPT code(s) associated with item	Prior Status on Table	Commenter response and CMS Action	2007 Item Status refer to note(s)
EQ269	Ambulatory blood pressure monitor	3,000	Cardiology	93784, 93786, 93788	Yes	No comments received.	B, C
EQ100	dialysis access flow monitor	10,000	Nephrology	90940	Yes	Manufacturer/ Vendor documentation received. Price accepted at $17,925	A
EQ008	ECG signal averaging system	8,250	Cardiology, IM	93278	Yes	No comments received.	B, C

Code	2005/6 Description	2005/6 Price	Primary specialties associated with item	*CPT code(s) associated with item	Prior Status on Table	Commenter response and CMS Action	2007 Item Status refer to note(s)
ER029	film alternator (motorized film viewbox)	27,500	Radiology	329 codes	Yes	Manufacturer/Vendor documentation received. Price accepted at $30,900	A
EQ131	Hyperbaric chamber	125,000	FP, IM, EM	99183	Yes	Manufacturer/ Vendor documentation received. Price accepted at $128,000.	A
ER036	hyperthermia system, ultrasound, intracavitary	250,000	Radiation oncology	77620	Yes	Manufacturer/ Vendor documentation received. Price accepted at $282,575	A
	Light assembly, photopheresis		Dermatology	36522	Yes	No comments received.	B, C
ER045	orthovoltage radiotherapy system	140,000	Radiation oncology	77401	Yes	Vendor/ distributor documentation received. Price accepted at $251,450	A
ER008	OSHA ventilated hood	5,000	Radiation oncology	77334	Yes	No comments received.	B, C
	plasma pheresis machine w/UV light source	37,900	radiology, dermatology	36481, G0341	Yes	No comments received.	B, C
ER070	Portal imaging system (w/PC work station and software)	377,319	Radiation oncology	77421	No	Documentation Requested	B
EQ271	Radiuscope	1,595	ophthalmology, optometry	92310 – 92317	Yes	Manufacturer/ Vendor documentation received. Price accepted at $1,595	A
EQ221	review master	23,500	pulmonary disease, neurology	95805, 95807-11, 95816, 95822, 95955-56	Yes	Documentation received from ACCP & AAN. Price accepted at $5,000	A

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Note: Acceptable documentation includes--Detailed description (including system components), source, and current pricing information, such as copies of catalog pages, hard copy from specific web pages, invoices, and quotes (letter format okay) from manufacturer, vendors or distributors. Unacceptable documentation includes--phone numbers and addresses of manufacturer, vendors or distributors, website links without pricing information, etc.

A. Submitted price or rationale accepted. Appropriate changes made to database.

B. 2005/2006 price retained, on an interim basis. Forward acceptable documentation promptly as applicable.

C. No/Insufficient documentation. Retained price in database, on an interim basis. Price is proposed to be removed from database if acceptable documentation is not received during comment period. Forward documentation promptly.

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B. Geographic Practice Cost Indices (GPCI)

[If you choose to comment on issues in this section, please include the caption "GPCI" at the beginning of your comments.]

Section 1848(e)(1)(A) of the Act requires us to develop separate GPCIs to measure resource cost differences among localities compared to the national average for each of the three fee schedule components. While requiring that the PE and malpractice GPCIs reflect the full relative cost differences, section 1848(e)(1)(A)(iii) of the Act requires that the physician work GPCIs reflect only one-quarter of the relative cost differences compared to the national average.

Section 1848(e)(1)(C) of the Act requires us, in consultation with appropriate physician representatives, to review the GPCIs at least every 3 years and allows us to make adjustments based on our review. This section of the Act also requires us to phase-in the adjustment over 2 years, implementing only one-half of any adjustment in the first year if more than 1 year has elapsed since the last GPCI revision. The GPCIs were first implemented in 1992. The first review and revision was implemented in 1995 and the last GPCI revision was implemented in 2005. The next update is scheduled to be implemented in January 2008.

We do not anticipate proposing significant changes to the GPCIs in response to changes in the source data. There have been no new Census data to affect the work GPCI, the PE GPCI will reflect any changes in the Department of Housing and Urban Development (HUD) rental data, and the malpractice GPCI (based on malpractice RVUs) will reflect the national claims-based premium data for 2004 and 2005. Details of the methodology, data sources, and adjustments to the GPCIs will be made available for public comment in the CY 2008 PFS proposed rule.

In addition, section 412 of the MMA amended section 1848(e)(1) of the Act to establish a floor of 1.0 for the work GPCI for any locality where the GPCI would otherwise fall below 1.0 for purposes of payment for services furnished on or after January 1, 2004 and before January 1, 2007. Beginning on January 1, 2007, the 1.00 floor will be removed and the work GPCI will revert to the fully implemented value. The values for the work GPCI and subsequent changes to the Geographic Adjustment Factor (GAF) published in this proposed rule reflect the removal of the 1.0 floor. For many payment localities this change had no impact on the GAF; however, the GAFs for a number of payment localities were reduced due to this change. The impact of this change on the GAFs for those payment localities is shown below in Table 3.

The proposed GPCIs for 2007 are shown in Addendum D and the proposed GAFs for 2007 are shown in Addendum E. The GPCIs shown in Addendum D are fully implemented and reflect 2007 budget neutrality scaling coefficients provided by the Office of the Actuary.

TABLE 3.—PAYMENT LOCALITIES WITH NEGATIVE PERCENT CHANGE IN GAF [1] BETWEEN 2006 AND 2007 DUE TO REMOVAL OF THE 1.000 WORK FLOOR

Locality name	2006 GAF	2007 GAF	Percent change
Fort Worth, TX	0.998	0.996	−0.17
Rest of Michigan	0.986	0.984	−0.20
Rest of New York	0.952	0.950	−0.21
Rest of Maryland	0.982	0.978	−0.36
Metropolitan St. Louis, MO	0.978	0.974	−0.41
Rest of Pennsylvania	0.950	0.946	−0.44
Ohio	0.970	0.966	−0.44
Austin, TX	1.020	1.015	−0.47
New Hampshire	1.010	1.005	−0.50
Minnesota	0.980	0.975	−0.53
Galveston, TX	0.991	0.986	−0.54
Metropolitan Kansas City, MO	0.987	0.981	−0.56
Fort Lauderdale, FL	1.022	1.016	−0.59
Arizona	0.999	0.993	−0.65
Wisconsin	0.956	0.950	−0.65
Colorado	0.998	0.991	−0.67
East St. Louis, IL	1.003	0.996	−0.68
New Orleans, LA	0.984	0.977	−0.73
Rest of Washington	0.984	0.976	−0.77
Indiana	0.937	0.930	−0.79
Beaumont, TX	0.951	0.942	−0.96
Alabama	0.923	0.914	−0.99
Virginia	0.958	0.948	−1.06
Southern Maine	0.992	0.981	−1.09
Rest of Georgia	0.943	0.932	−1.14
Tennessee	0.933	0.921	−1.27
Utah	0.960	0.948	−1.30
South Carolina	0.930	0.917	−1.41
Rest of Illinois	0.952	0.938	−1.43
Rest of Florida	0.982	0.968	−1.45
West Virginia	0.942	0.928	−1.47
North Carolina	0.951	0.936	−1.55
New Mexico	0.947	0.932	−1.57
Kansas*	0.934	0.919	−1.60
Rest of Louisiana	0.936	0.919	−1.78
Kentucky	0.932	0.915	−1.80
Kansas*	0.936	0.919	−1.81
Rest of Oregon	0.946	0.929	−1.81

TABLE 3.—PAYMENT LOCALITIES WITH NEGATIVE PERCENT CHANGE IN GAF [1] BETWEEN 2006 AND 2007 DUE TO REMOVAL OF THE 1.000 WORK FLOOR—Continued

Locality name	2006 GAF	2007 GAF	Percent change
Vermont	0.968	0.950	−1.82
Virgin Islands	1.007	0.989	−1.83
Rest of Texas	0.947	0.929	−1.87
Idaho	0.922	0.904	−1.91
Iowa	0.927	0.909	−1.97
Rest of Maine	0.936	0.916	−2.14
Oklahoma	0.913	0.893	−2.14
Mississippi	0.919	0.898	−2.31
Arkansas	0.905	0.884	−2.34
Puerto Rico	0.905	0.883	−2.44
Nebraska	0.925	0.902	−2.44
Wyoming	0.934	0.910	−2.55
Montana	0.928	0.902	−2.83
Rest of Missouri *	0.910	0.883	−2.97
North Dakota	0.924	0.895	−3.16
South Dakota	0.922	0.891	−3.35

[1] Calculation for the GAF: (.52466*work gpci) + (.03865*mp gpci) + (.52466*pe gpci).

In the CY 2005 PFS proposed rule, published August 15, 2004, we discussed the issue of changes to the GPCI payment localities (69 FR 47504). In that proposed rule, we noted that we look for the support of a State medical society as the impetus for changes to existing payment localities. Because the GPCIs for each locality are calculated using the average of the county-specific data from all of the counties in the locality, removing high cost counties from a locality will result in lower GPCIs for the remaining counties. Therefore, because of this redistributive impact, we have refrained, in the past, from making changes to payment localities unless the State medical association provides evidence that any proposed change has statewide support.

We would be interested in receiving suggestions on alternative ways that we could administratively reconfigure payment localities that could be developed and proposed in future rulemaking. In addition, MEDPAC and the GAO have both expressed interest in studying the physician payment localities. CMS intends to work with both groups to study our current methodology and develop alternative options.

C. Medicare Telehealth Services

[If you choose to comment on issues in this section, please include the caption "TELEHEALTH" at the beginning of your comments.]

1. Requests for Adding Services to the List of Medicare Telehealth Services

Section 1834(m)(4)(F) of the Act defines telehealth services as professional consultations, office visits, and office psychiatry services (identified as of July 1, 2000 by CPT codes 99241 through 99275, 99201 through 99215, 90804 through 90809, and 90862) and any additional service specified by the Secretary. In addition, the statute requires us to establish a process for adding services to or deleting services from the list of telehealth services on an annual basis.

In the December 31, 2002 **Federal Register** (67 FR 79988), we established a process for adding services to or deleting services from the list of Medicare telehealth services. This process provides the public an ongoing opportunity to submit requests for adding services. We assign any request to make additions to the list of Medicare telehealth services to one of the following categories:

- *Category #1:* Services that are similar to office and other outpatient visits, consultation, and office psychiatry services. In reviewing these requests, we look for similarities between the proposed and existing telehealth services for the roles of, and interactions among, the beneficiary, the physician (or other practitioner) at the distant site and, if necessary, the telepresenter. We also look for similarities in the telecommunications system used to deliver the proposed service, for example, the use of interactive audio and video equipment.
- *Category #2:* Services that are not similar to the current list of telehealth services. Our review of these requests includes an assessment of whether the use of a telecommunications system to deliver the service produces similar diagnostic findings or therapeutic interventions as compared with the face-to-face "hands on" delivery of the same service. Requestors should submit evidence showing that the use of a telecommunications system does not affect the diagnosis or treatment plan as compared to a face-to-face delivery of the requested service.

Since establishing the process, we have added the following to the list of Medicare telehealth services: psychiatric diagnostic interview examination; ESRD services with two to three visits per month and four or more visits per month (although we require at least one visit a month by a physician, CNS, NP, or PA to examine the vascular access site); and individual medical nutritional therapy.

Requests to add services to the list of Medicare telehealth services must be submitted and received no later than December 31 of each CY to be considered for the next proposed rule. For example, requests submitted before the end of CY 2005 are considered for the CY 2007 proposed rule. For more information on submitting a request for an addition to the list of Medicare telehealth services, visit our Web site at *www.cms.hhs.gov/telehealth.*

2. Submitted Requests for Addition to the List of Telehealth Services

We received the following requests for additional approved services in CY 2005: (1) Nursing facility care; (2) speech language pathology; (3) audiology; and (4) physical therapy services. The following is a discussion of the requests submitted in CY 2005.

Nursing Facility Care

The American Telemedicine Association (ATA) and an individual practitioner submitted a request to add the following services: Initial nursing facility care (as represented by HCPCS

codes 99304 through 99306); subsequent nursing facility care (HCPCS codes 99307 through 99310); nursing facility discharge services (HCPCS codes 99315 and 99316); and other nursing facility services as described by HCPCS code 99318. The requestors explained that the primary purpose of using telehealth in the Skilled Nursing Facility (SNF) setting is to provide urgent consultation when the patient has a sudden change in his or her condition, and to provide increased availability to primary and specialty care on days when the physician is not present in the SNF or when traveling is a hardship. The requestors believe that the current list of Medicare telehealth services is not appropriate because the list does not include codes that are specifically intended for nursing facility residents.

CMS Review

Nursing Facility Care

Section 1834(m)(C)(ii) of the Act defines a telehealth originating site as a physician's or practitioner's office; or a hospital, critical access hospital (CAH), rural health clinic, or FQHC. SNFs are not defined in the statute as originating sites.

However, section 418 of the MMA required the Health Resources Services Administration (HRSA), a component of HHS, in consultation with CMS, to conduct an evaluation of demonstration projects under which SNFs, as defined in section 1819(a) of the Act, are treated as originating sites for Medicare telehealth services. The MMA also required the Secretary to submit a report to the Congress that includes recommendations on "mechanisms to ensure that permitting a SNF to serve as an originating site for the use of telehealth services or any other service delivered via a telecommunications system does not serve as a substitute for in-person visits furnished by a physician, or for in-person visits furnished by a physician assistant (PA), nurse practitioner (NP), or clinical nurse specialist (CNS), as is otherwise required by the Secretary" and provides the authority to include SNFs as a Medicare telehealth originating site, if the Secretary concludes in the report that it is advisable to do so and that mechanisms could be established to ensure that the use of a telecommunications system does not serve as a substitute for the required in-person physician or practitioner SNF visits. This report is currently under review in DHHS.

Given that SNFs are not defined in the statute as a telehealth originating site and the report to the Congress, as discussed above, is currently being reviewed within DHHS, we cannot consider approving nursing facility care for telehealth at this time. We will review and consider the recommendations of the report to the Congress once it is issued. If it is determined that SNFs should be added as an originating site, this change will be considered in future rulemaking.

Speech Language Pathology, Audiology and Physical Therapy

The ATA and an individual practitioner submitted a request to add various speech therapy, audiology and physical therapy services to the list of Medicare telehealth services. The requestors also asked us to add physical therapists, speech language pathologists and audiologists to the list of approved telehealth practitioners.

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Physical therapists, speech language pathologists and audiologists are not permitted under current law to provide and receive payment for Medicare telehealth services at the distant site. The statute permits only a physician, as defined by section 1861(r) of the Act or a practitioner as described in section 1842(b)(18)(C) of the Act (CNS, NP, PA, nurse midwife, clinical psychologist, clinical social worker, registered dietitian or other nutrition professional), to furnish Medicare telehealth services. Since speech language pathologists, audiologists and physical therapists are not permitted under current law to provide and receive payment for Medicare telehealth services at the distant site, we cannot fully consider the request to add speech therapy, audiology services and physical therapy to the list of Medicare telehealth services. We are exploring this issue as part of a report to the Congress (required by section 223(d) of BIPA) on additional sites and settings, geographic areas, and types of non-physician practitioners that could be reimbursed for the provision of telehealth services.

D. Miscellaneous Coding Issues

[If you choose to comment on issues in this section, please include the caption "Miscellaneous Coding Issues" at the beginning of your comments.]

The following sections address specific coding issues related to payment for services under the PFS.

1. Global Period for Remote Afterloading High Intensity Brachytherapy Procedures

CPT Code 77783, Remote afterloading high intensity brachytherapy; 9–12 source positions or catheters, resides in a family of codes with varying numbers of source positions. All of the codes in the family, CPT codes 77781–77784 are currently designated as 90-day global services. CPT codes 77781–77784 are used to treat many clinical conditions, but primarily patients with prostate cancer, breast cancer and sarcoma. Patients with any of these conditions usually receive several treatments (2–10) over a two to ten day period of time. Due to the increasing variability in treatment regimens, it is difficult to assign RVUs for a "typical" patient based on a global period of 90 days.

Therefore, we are proposing that this family of codes (CPT codes 77781, 77782, 77783 and 77784) be assigned a global period of "XXX", which will permit separate payment each time the services are provided and allow payment to be based on the actual service(s) provided. We will request that the RUC revalue the work RVUs and the PE inputs for these services if a change in the global period is finalized. However we are proposing, on an interim basis, to revise the work RVUs and PE inputs to reflect the removal of the postoperative visit, CPT code 99212, that is currently assigned to these services. The proposed interim work RVUs for these services would be as follows:

- 77781 = 1.21
- 77782 = 2.04
- 77783 = 3.27
- 77784 = 5.15

We are also proposing to delete the registered nurse (RN) time in the post-service period as well as the patient gowns for the post-service visit. We would also note that, to the extent that these services are performed as staged procedures, providers may make use of applicable modifiers.

2. Assignment of RVUs to CPT Codes for Proton Beam Treatment Delivery Services

We have received a request to assign PE inputs for the non-facility setting to Proton Beam treatment delivery services represented by CPT codes 77520 through 77525.

These services are currently carrier-priced; therefore, payment in the facility or non-facility setting is established by each carrier. To the extent that physicians and suppliers wish to have national RVUs assigned for these services, there is an established process utilizing the AMA–RUC to recommend work RVUs, as well as the direct PE inputs used to compute the PE RVUs, to CMS. We would strongly encourage the physicians and suppliers to use this established process, and would also be

interested in receiving comments on this issue.

E. Deficit Reduction Act (DRA) Related Proposals

[If you choose to comment on issues in this section, please include the caption "DRA PROPOSALS" at the beginning of your comments.]

The DRA of 2005 (Pub. L. 109–171), was enacted February 8, 2006 and included provisions that affect the Medicare program. The following section addresses the specific DRA provisions that are being addressed in this proposed rule.

1. Section 5102—Proposed Adjustments for Payments to Imaging Services

Section 5102 of the DRA includes two provisions that affect payment of imaging services under the Medicare physician fee schedule. The first provision addresses payment for certain multiple imaging procedures for CY 2007 and application of budget neutrality while the second provision addresses limiting the payment amount under PFS to the outpatient department (OPD) payment amount for the technical component (TC) of certain imaging services.

(a) Payment for Multiple Imaging Procedures for 2007

In general, Medicare prices diagnostic imaging procedures in the following three ways:

- The professional component (PC) represents the physician's interpretation (PC-only services are billed with the 26 modifier).
- The TC represents PE and includes clinical staff, supplies, and equipment (TC-only services are billed with the TC modifier).
- The global service represents both PC and TC.

As discussed in the CY 2006 PFS final rule with comment period (70 FR 70261), in the CY 2006 PFS proposed rule (70 FR 45764 through 46064), we had proposed to reduce payment for the TC of selected diagnostic imaging procedures belonging to one of eleven imaging families when the procedures are performed on contiguous body areas by 50 percent for CY 2006. However, in the final rule with comment period, we stated that we would phase-in the 50 percent reduction over two years, beginning with a 25 percent reduction in 2006. We also sought additional data and comments on the appropriateness of 50 percent as the final level of reduction. The reduction applies to the TC and the technical portion of the global service, but does not apply to the PC of the service. Currently, we make full payment for the highest priced procedure and reduce payment for each additional procedure by 25 percent, when more than one procedure from the same imaging family is performed during the same session on the same day.

As described in the CY 2006 PFS final rule with comment period, at the time, the statute required us to make changes such as this in a budget neutral manner, meaning that the estimated savings generated by the application of the multiple imaging procedure payment reduction were used to increase payment for other physician fee schedule services. We increased the CY 2006 PE RVUs by 0.3 percent to offset the estimated savings generated by the multiple imaging payment reduction policy.

Subsequent to the publication of the CY 2006 PFS final rule with comment period, section 5102(a) of the DRA (Multiple Procedure Payment Reduction for Imaging Exempted From Budget Neutrality), required that "effective for fee schedules established beginning with 2007, reduced expenditures attributable to the multiple procedure payment reduction for imaging under the final rule published by the Secretary in the **Federal Register** on November 21, 2005 (42 CFR 405, *et al.*) insofar as it relates to the physician fee schedules for 2006 and 2007" are exempted from the budget neutrality provision. As a result, we are proposing to remove the 0.3 percent increase to the CY 2006 PE RVUs from the CY 2007 PE RVUs in accordance with the statute.

In addition, in response to our request for data on the appropriateness of the 50 percent reduction in the CY 2006 PFS final rule with comment period (70 FR 70261), the ACR provided information for 25 code combinations supporting a reduction of between 21 and 44 percent. Given the expected interaction between the multiple procedure imaging policy and the further imaging payment reductions mandated by section 5102(b) of the DRA described below, along with the new information we have received from the ACR on the multiple imaging procedure policy as it applies to common combinations of imaging services, we believe it would be prudent to maintain the multiple imaging payment reduction at its current 25 percent level while we continue to examine the appropriate payment levels. Therefore, we are proposing to continue the multiple imaging payment reduction for 2007 at the 25 percent level. We would proceed through future rulemaking in the event we determine that revisions to the policy are warranted.

(b) Reduction in TC for Imaging Services Under the PFS to OPD Payment Amount

Section 5102(b)(1) of the DRA amended section 1848 of the Act and requires that, with respect to imaging services, if—

"(i) The technical component (including the technical component portion of a global fee) of the service established for a year under the fee schedule * * *, without application of the geographic adjustment factor * * *, exceeds,

(ii) The Medicare OPD fee schedule amount established under the prospective payment system for hospital outpatient department services * * * for such service for such year, determined without regard to geographic adjustment * * *, the Secretary shall substitute the amount described in clause (ii), adjusted by the geographic adjustment factor [under the PFS] * * *, for the fee schedule amount for such technical component for such year."

As required by the statute, for imaging services (described below) furnished on or after January 1, 2007, we will cap the PFS payment amount for the year (prior to geographic adjustment) by the CY 2007 outpatient prospective payment system (OPPS) payment amount (prior to geographic adjustment). We will then apply the PFS geographic adjustment to the capped payment amount.

Section 5102(b)(2) of the DRA exempts the estimated savings from this provision from the PFS budget neutrality requirement. Section 5102(b)(1) of the DRA defines imaging services as "* * * imaging and computer-assisted imaging services, including X-ray, ultrasound (including echocardiography), nuclear medicine (including positron emission tomography), magnetic resonance imaging, computed tomography, and fluoroscopy, but excluding diagnostic and screening mammography."

In order to apply section 5102(b) of the DRA, we needed to determine the CPT and alpha-numeric HCPCS codes that fall within the scope of "imaging services" defined by the DRA provision. In general, we believe that imaging services provide visual information regarding areas of the body that are not normally visible, thereby assisting in the diagnosis or treatment of illness or injury. We began by considering the CPT 7XXXX series codes for radiology services and then adding in other CPT codes and alpha-numeric HCPCS codes that describe imaging services. We then excluded nuclear medicine services that were either non-imaging diagnostic or treatment services. We also excluded all

codes for unlisted procedures, since we would not know in advance of any specific clinical scenario whether or not the unlisted procedure was an imaging service. We excluded all mammography services, consistent with the statute. We excluded radiation oncology services that were not imaging or computer-assisted imaging services. We also excluded all HCPCS codes for imaging services that are not separately paid under the OPPS since there would be no corresponding OPPS payment to serve as a TC cap. We excluded any service where the CPT code describes a procedure for which fluoroscopy, ultrasound, or another imaging modality is either included in the code whether or not it is used or is employed peripherally in the performance of the main procedure, for example, 31622 for bronchoscopy with or without fluoroscopic guidance and 43242 for upper gastrointestinal endoscopy with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s). In these cases, we are unable to clearly distinguish imaging from non-imaging services because, for example, a specific procedure may or may not utilize an imaging modality, or the use of an imaging technology cannot be segregated from the performance of the main procedure. Note that we included carrier priced services since these services are within the statutory definition of imaging services and are also within the statutory definition of PFS services (that is, carrier-priced TCs of PET scans).

Our proposed list of codes that identify imaging services defined by the DRA OPPS cap provision can be found in Addendum F to this proposed rule. Note that this is the list of imaging services for which we propose to make the comparison between the PFS TC payment amount and the OPPS payment amount used to establish OPD payment. Payment for an individual service on this list would only be capped if the PFS TC payment amount exceeds the OPPS payment amount.

To the extent changes are made to codes for services already on the list, we propose to update the list through program instructions to our contractors. To the extent that the same imaging service is coded differently under the PFS and the OPPS, we propose to crosswalk the code under the PFS to the appropriate code under the OPPS that could be reported for the same service provided in the hospital outpatient setting. Our proposed list of crosswalks is below:

MFS code	Descriptor	OPPS code	Desc
74185	Mri angio, abdom w or w/o dye	C8900	MRA w/cont, abd.
76093	Magnetic image, breast	C8905	MRI w/o fol w/cont, brst, un.
76094	Magnetic image, both breasts	C8908	MRI w/o fol w/cont, breast.
71555	Mri angio chest w or w/o dye	C8909	MRA w/cont, chest.
73725	Mr ang lwr ext w or w/o dye	C8912	MRA w/cont, lwr ext.
72198	Mr angio pelvis w/o & w/dye	C8918	MRA w/cont, pelvis.

(c) Interaction of the Multiple Imaging Payment Reduction and the OPPS Cap

For CY 2007 imaging services potentially subject to both the multiple imaging reduction and the OPPS cap, we propose to first apply the multiple imaging payment reduction and then apply the OPPS cap to the reduced amount as illustrated in the following example.

HCPCS	Pre-OPPS cap MPFS rate	25% Multiple imaging reduction	OPPS cap rate	Final MPFS payment
7XXX1	$341.89	$256.42	$316.55	$256.42
7XXX2	552.86	414.65	391.83	391.83

We considered first applying the OPPS cap and then applying the multiple procedure reduction. However, as indicated in the CY 2006 OPPS final rule, we received public comments suggesting that the OPPS payment rates may implicitly include at least some multiple imaging discount. While we continue to examine this issue, we believe the most appropriate policy is to apply the multiple imaging payment reduction prior to the application of the OPPS cap.

2. Section 5107—Revisions to Payments for Therapy Services

Section 1833(g) of the Act applies an annual per beneficiary combined cap beginning January 1, 1999, on outpatient physical therapy and speech-language pathology services and a similar separate cap on outpatient occupational therapy services. These caps apply to expenses incurred for the respective therapy services under Medicare Part B, with the exception of outpatient hospital services. The caps were in effect from January 1, through December 31, 1999, from September 1, 2003 through December 7, 2003, and beginning January 1, 2006. In 2000 through 2002, and from December 8, 2003 through December 31, 2005, the Congress placed moratoria on implementation of the caps. Section 1833(g)(2) of the Act provides that, for 1999 through 2001, the caps were $1500, and for years after 2001, the caps are equal to the preceding year's cap increased by the percentage increase in the Medicare Economic Index (MEI) (except that if an increase for a year is not a multiple of $10, it is rounded to the nearest multiple of $10).

We implemented the separate statutory limits of $1740 for outpatient physical therapy and speech-language pathology services and $1740 for occupational therapy on January 1, 2006. The DRA of 2005 was enacted on February 8, 2006. Section 5107(a) of the DRA required the Secretary to develop an exceptions process for the therapy caps effective January 1, 2006. The exceptions process applies only to expenses incurred in 2006. Details of the exceptions process were published in a manual change on February 13, 2006 (CR4364). The change request

consists of three transmittals with current numbers of—

- Transmittal 855, CR 4364, Pub. L. 100–04;
- Transmittal 47, CR 4365, Pub. L. 100–02; and
- Transmittal 140, CR 4364, Pub. L. 100–08.

The transmittals are available on our Web site at *http://www.cms.hhs.gov/Transmittals/*.

In accordance with the statute, the therapy caps will remain in effect, but without the exceptions process, with respect to expenses incurred beginning on January 1, 2007. The dollar amount of the therapy caps in 2007 will be the 2006 rate ($1740) increased by the percentage increase in the MEI. As noted above, under current law, the exceptions process will not apply to therapy services incurred after December 31, 2006, but the therapy caps will remain inapplicable to therapy services provided in the outpatient hospital setting as provided in section 1833(g) of the Act.

Section 5107(b) of the DRA requires the Secretary to implement, by July 1, 2006, edits for clinically illogical combinations of procedure codes and other edits in order to limit inappropriate payment for therapy services. In January 2006, we implemented Correct Coding Initiative (CCI) edits for the therapy providers that bill to the fiscal intermediaries, thus, addressing the section 5107 of the DRA requirement with respect to edits for clinically illogical combinations of procedure codes. Adoption of these code edits ensures that these providers of outpatient Part B therapy services, including SNFs, comprehensive outpatient rehabilitation facilities, certain outpatient physical therapy and speech-language therapy providers (rehabilitation agencies) and home health agencies (HHAs) (where beneficiary is not under a Part A plan of care) meet the same CCI edit requirements as those that have been in place for physicians, private practice therapists, and OPPS hospitals. We are considering the implementation of other edits in the future to further address concerns about inappropriate payment for therapy services.

3. Section 5112-Proposed Addition of Ultrasound Screening for Abdominal Aortic Aneurysm (AAA)

Section 5112 of the DRA of 2005 amended section 1861 of the Act to provide for coverage under Part B of ultrasound screening for AAAs, effective for services furnished on or after January 1, 2007, subject to certain eligibility and other limitations. This screening test will be available even if the qualifying patient does not present signs or symptoms of disease or illness.

To conform the regulations to the statutory requirements of section 5112 of the DRA, we are proposing to include an exception in § 411.15(a)(1) to permit coverage for ultrasound screening for AAAs that meet the conditions for coverage that we are proposing to specify under new § 410.19(b) (Conditions for coverage of an ultrasound screening for abdominal aortic aneurysms). We are also adding a new § 411.15(k)(12).

As provided in the DRA, this new coverage allows payment for a one-time only screening examination. We are proposing to add new § 410.19(b) to provide for the coverage of the screening examinations for AAAs as specified in section 5112 of the DRA. We are also proposing to add new § 410.19(c) (Limitation on coverage of ultrasound screening for abdominal aortic aneurysms.) to provide the limitation on coverage for an individual who is not an eligible beneficiary as defined in proposed new § 410.19(a).

We are proposing definitions set forth in new § 410.19(a) of this proposed rule that would be included to implement the statutory provisions and to help the reader in understanding the provisions of this regulation. The proposed definitions include the following terms:

- Eligible beneficiary.
- Ultrasound screening for abdominal aortic aneurysms.

Specifically, section 5112(a)(1) of the DRA amended section 1861 of the Act to provide that coverage of ultrasound screening for AAAs will be available for an individual—(i) who receives a referral for such an ultrasound screening as a result of an initial preventive physical examination (as defined in section 1861(ww)(1) of the Act); (ii) who has not been previously furnished such an ultrasound screening under this title; and (iii) who has a family history of AAA or manifests risk factors included in a beneficiary category recommended for screening by the United States Preventive Services Task Force regarding AAAs.

Section 5112(a)(2) of the DRA also adds a definition of the term "ultrasound screening for an Abdominal Aortic Aneurysm" to mean, "(1) a procedure using sound waves (or other procedures using alternative technologies, of commensurate accuracy and cost, that the Secretary may specify) provided for the early detection of abdominal aortic aneurysm; and (2) includes a physician's interpretation of the results of the procedure."

In developing the proposed rule based on this provision, we reviewed the 2005 United States Preventive Services Task Force (USPSTF) recommendations and related material on ultrasound screening for AAAs. This includes—

- A recommendation for a one-time ultrasound screening for men aged 65 to 75 who have smoked at least 100 cigarettes in their lifetime;
- No recommendation for or against ultrasound screening for AAAs for men who have not smoked at least 100 cigarettes in their lifetime; and
- A recommendation against routine screening for AAAs in women.

Based on the statutory language and the USPSTF recommendations outlined above, we are proposing to define the term "eligible beneficiary" for coverage of ultrasound screening examinations for AAA to mean an individual who—

- Has received a referral for an ultrasound screening as a result of an initial preventive physical examination (as defined in section 1861(ww)(1) of the Act);
- Has not been previously furnished such a covered ultrasound screening examination under the Medicare program; and
- Is included in at least one of the following risk categories:
  + Has a family history of an AAA; or
  + Is a man age 65 to 75 years who smoked at least 100 cigarettes in his lifetime; or
  + Is an individual who manifests other risk factors that are described in a benefit category recommended by the USPSTF regarding an AAA that has been determined by the Secretary through the NCD process.

To facilitate our consideration of possible expansions of coverage in the future for identifying (1) other risk factors in a benefit category recommended for screening for the early detection of AAAs by the USPSTF, and (2) alternative screening technologies to ultrasound screening for AAAs of commensurate accuracy and cost, we are proposing to add language to our regulations that would allow us to make determinations through the NCD process. The NCD process would allow the Secretary to expand coverage more quickly following an assessment of those subjects than is possible under the standard rulemaking process. We intend to use the NCD process, which includes an opportunity for public comments, for evaluating the medical and scientific issues relating to the coverage of alternative screening technologies and the identification of other risk factors for AAAs recommended by the USPSTF that may be brought to our attention in the future. Use of an NCD to establish

a change in the scope of benefits is authorized by section 1871(a)(2) of the Act. An aggrieved party can challenge an NCD under the procedures established by section 1869(f) of the Act. These proposed coverage provisions would be set forth in proposed new § 410.19 (a)(1)(i) and § 410.19(a)(2)(iii)(C).

Section 5112(b) of DRA also amended section 1861(ww)(2) of the Act (the initial preventive physical examination benefit) by adding the new ultrasound screening benefit to the list of preventive services for which physicians and other qualified nonphysician practitioners must provide "education, counseling and referral" to new beneficiaries who take advantage of the initial preventive physical examination benefit within the first 6 months after the effective date of their first Part B coverage period. Therefore, we are also proposing to amend § 410.16(a)(7) of the regulations so that it reflects the additional responsibilities that physicians and qualified nonphysician practitioners will have under the initial preventive physical examination benefit with respect to the new ultrasound screening benefit.

Beginning January 1, 2007, we are proposing to pay for ultrasound screening for AAAs through the use of a new HCPCS code GXXX1, *Ultrasound, B-scan and/or real time with image documentation; for abdominal aortic aneurysm (AAA) screening.* We are proposing that payment for this service be made at the same level as CPT code 76775 *Ultrasound, retroperitoneal (e.g., renal, aorta, nodes), B-scan and/or real time with image documentation; limited.* CPT code 76775 is used to bill for the service when it is provided as a diagnostic test, and we believe the service associated with the proposed HCPCS code reflects equivalent resources and work intensity to those contained in CPT code 76775.

In addition, since the DRA provides that the Medicare Part B deductible will not apply with respect to ultrasound screening for abdominal aortic aneurysm (as defined in section 1861(bbb) of the Act), we are proposing to revise § 410.160 to include an exception from the Medicare Part B deductible for the ultrasound screening for abdominal aortic aneurysm as described in proposed § 410.19. (Conditions for coverage of an ultrasound screening for abdominal aortic aneurysms.)

4. Section 5113—Proposed Non-Application of the Part B Deductible for Colorectal Cancer Screening Tests

Current Medicare policy requires that, with limited exceptions, incurred expenses for covered part B services are subject to, and count toward meeting the Part B annual deductible. Section 5113 of the DRA amended section 1833(b) of the Act to provide for an exception to the application of the Part B deductible with respect to colorectal cancer screening tests. Beginning January 1, 2007, colorectal cancer screening services, as described in section 1861(pp)(1) of the Act, are no longer subject to the Part B deductible. The conditions for and limitations on coverage for colorectal cancer screening tests under Medicare part B are described in § 410.37.

To conform our regulations to this statutory change, we are proposing to revise § 410.160 to include an exception from the Part B annual deductible for the colorectal cancer screening services described in § 410.37.

5. Section 5114—Proposed Addition of Diabetes Outpatient Self-Management Training Services (DSMT) and Medical Nutrition Therapy (MNT) for the FQHC Program

Section 5114 of the DRA amended section 1861(aa)(3) of the Act to add DSMT and MNT services to the list of Medicare covered and reimbursed services under the Medicare FQHC benefit, effective for services provided on or after January 1, 2006. Although this statutory change has already been implemented in administrative instructions, we are proposing to conform the regulations to the new statutory requirement.

FQHCs certified as DSMT and MNT providers have been allowed to bundle the cost of those services into their FQHC payment rates. But before the enactment of the DRA, the provision of these services would not generate a separate FQHC visit payment. Effective for services furnished on or after January 1, 2006, FQHCs that are certified providers of DSMT and MNT services can receive per visit payments for covered services furnished by registered dietitians or nutrition professionals. In other words, if all relevant program requirements are met, these services are included under the Medicare FQHC benefit as billable visits.

In order to conform the regulations, we are proposing to amend § 405.2446(b) to expand the scope of FQHC services to include certified providers of DSMT and MNT services by adding a new paragraph (10). We are also proposing to revise § 405.2463 by—

- Revising paragraph (a) to expand the definition of an FQHC visit to include certified providers of DSMT and MNT services under new sub-paragraph (a)(1)(ii)(B). We would also revise the definition of an RHC visit in new subparagraph (a)(1)(i) to include a face-to-face encounter between a patient and a clinical psychologist or clinical social worker to conform to statutory language at section 1861(aa)(1)(B) of the Act. We are also proposing to redesignate and revise paragraphs (b) and (c) as new paragraphs (a)(2) and (a)(3), respectively.
- We are proposing to incorporate paragraph (a)(2) into (a)(1), and to redesignate and revise current paragraph (a)(3) as new paragraph (b). We would also clarify that it is generally permissible for both FQHCs and Rural Health Clinics to furnish, when necessary, most types of medical and other health visits on the same day to the same patient. We are also proposing to amend this paragraph to permit a separate additional FQHC visit for DSMT and MNT services (which may occur on the same date of service when the beneficiary receives care from their FQHC physician or non-physician practitioner) when reasonable and necessary, consistent with the Congressional mandate under section 5114 of the DRA to provide coverage and adequate access to these services in the FQHC setting.
- We are proposing to redesignate and revise current paragraph (a)(4) as new paragraph (c).

F. Proposed Payment for Covered Outpatient Drugs and Biologicals (ASP Issues)

[If you choose to comment on issues in this section, please include the caption "ASP Issues" at the beginning of your comments.]

Medicare Part B covers a limited number of prescription drugs and biologicals. For the purposes of this proposed rule, the term "drugs" will hereafter refer to both drugs and biologicals. Medicare Part B covered drugs not paid on a cost or prospective payment basis generally fall into the following three categories:

- Drugs furnished incident to a physician's service.
- DME drugs.
- Drugs specifically covered by statute (certain immunosuppressive drugs, for example).

Beginning in CY 2005, the vast majority of Medicare Part B drugs not paid on a cost or prospective payment basis are paid under the ASP

methodology. The ASP methodology is based on data submitted to us quarterly by manufacturers. In addition to the payment for the drug, Medicare currently pays a furnishing fee for blood clotting factors, a dispensing fee for inhalation drugs, and a supplying fee to pharmacies for certain Part B drugs.

In January 2006, the drug coverage available to Medicare beneficiaries expanded with the implementation of Medicare Part D. The Medicare Part D program does not change Medicare Part B drug coverage.

This section of the preamble discusses proposed changes and issues related to the determination of the payment amounts for covered Part B drugs and furnishing blood clotting factor. This section also discusses proposed changes to how manufacturers calculate and report ASP data to us.

1. ASP Issues

Section 303(c) of the MMA amended Title XVIII of the Act by adding new section 1847A. This new section revised the payment methodology for the vast majority of drugs and biologicals not paid on a cost or prospective payment basis furnished on or after January 1, 2005. The ASP reporting requirements are set forth in section 1927(b) of the Act. Manufacturers must submit ASP data for each 11-digit National Drug Code (NDC) to us quarterly. The manufacturers' submissions are due to us not later than 30 days after the last day of each calendar quarter. The methodology for developing Medicare drug payment allowances based on the manufacturers' submitted ASP data is specified in the regulations in part 414, subpart K. We update the Part B drug payment amounts quarterly based on the data we receive.

In this section of the preamble, we discuss our intent to issue a final rule to implement the provisions in the MMA related to the calculation and submission of manufacturers' ASP data, and seek further comments on specific issues related to price concessions and certain fees.

On April 6, 2004, we published the Manufacturer's Submission of Average Sales Price Data for Medicare Part B Drugs and Biologicals (ASP) interim final rule with comment period (IFC) (69 FR 17935) to implement the ASP calculation and reporting requirements. Manufacturers were required to submit their initial quarterly ASP data to us shortly thereafter, beginning April 30, 2004. We received comments from drug manufacturers, pharmacies, physicians, national associations of the pharmaceutical industry, national associations of physicians, and consultants. These comments addressed a variety of aspects of calculating and reporting ASPs. On September 16, 2004, we published the Manufacturer's Submission of Average Sales Price Data for Medicare Part B Drugs and Biologicals (ASP) final rule (69 FR 55763) addressing only the comments pertaining to the methodology for estimating lagged price concessions. We have also addressed ASP calculation and reporting requirements in other proposed and final rules and information collection notices, including rulemaking to implement the Competitive Acquisition Program for Part B Drugs and Biologicals (CAP). (See 70 FR 39069, 70 FR 45842, 70 FR 70215, and 70 FR 70477.) In addition, we posted official agency guidance, including responses to frequently asked questions, on our Web site to implement the ASP provisions in accordance with section 1847A(c)(5)(C) of the Act.

We intend to publish a final rule addressing comments on the April 6, 2004 IFC in the near future. We may publish the final rule as part of this rulemaking, or we may publish a separate final rule, in either case after the close of the comment period for this proposed rule. Because the comments received during the comment period in response to the April 6, 2004 IFC were made during the initial months of manufacturers' experience with calculating and reporting ASPs and prior to publication of payment amounts based on the ASP methodology, we believe there is good reason to provide the public with the opportunity for additional comments based on what is now more than a year and a half of experience with the ASP reporting requirements. Therefore, we seek comments on the ASP reporting provisions in the April 6, 2004 IFC. In particular, we seek comments on the issues discussed in the sections below.

We note that we received many comments in response to the April 6, 2004 interim final rule on the use and potential impacts of the ASP payment methodology. As noted above, we are reopening the comment period on the issue of ASP reporting. Thus, comments about the use or appropriateness of the ASP payment methodology are outside the scope of this rulemaking and the ASP reporting rule (CMS–1380–IFC). Therefore, comments about the appropriateness and use of 106 percent of ASP as the basis for the Medicare Part B drug payment rates will be outside the scope of the comments considered for the final ASP reporting rule we are preparing to publish.

a. Fees Not Considered Price Concessions

Section 1847A(c)(5)(A) of the Act states that the ASP is to be calculated by the manufacturer on a quarterly basis. As a part of that calculation, manufacturers are to take into account price concessions such as—

- Volume discounts;
- Prompt pay discounts;
- Cash discounts;
- Free goods that are contingent on any purchase requirement;
- Chargebacks; and
- Rebates (other than rebates under the Medicaid drug rebate programs).

If the data on these price concessions are lagged, then the manufacturer is required to estimate costs attributable to these price concessions using the required ratio methodology as specified in 42 CFR part 414, subpart J, § 414.804(a)(3).

Among the comments from drug manufacturers and national associations representing wholesalers and distributors, we received requests for clarification and detailed guidance on the treatment of administrative fees, service fees and fees paid to pharmacy benefit managers (PBMs) in the ASP calculation. We posted guidance on our Web site (*http://questions.cms.hhs.gov/cgi-bin/cmshhs.cfg/php/enduser/std_adp.php?p_faqid=3323&p_created=1095344721&p_sid=Ghuscgci&p_accessibility=0&p_lva=&p_sp=cF9zcmNoPTEmcF9zb3J0X2J5PSZwX2dyaWRzb3J0PSZwX3Jvd19jbnQ9MzEmcF9wcm9kcz04LDU2LDYwNCZwX2NhdHM9JnBfcHY9My42MDQmcF9jdj0mcF9zZWFyY2hfdHlwZT1hbnN3ZXJzLnNlYXJjaF9ubCZwX3BhZ2U9MQ**&p_li=&p_topview=1*) to clarify that in the absence of specific guidance in the Social Security Act or Federal regulations, the manufacturer may make reasonable assumptions in its calculations of ASP, consistent with the general requirements and intent of the Social Security Act, Federal regulations, and its customary business practices. These assumptions should be submitted along with the ASP data. In December 2004, we posted further guidance on our website addressing service fees and administrative fees paid to buyers (*http://questions.cms.hhs.gov/cgi-bin/cmshhs.cfg/php/enduser/std_adp.php?p_faqid=3318&p_created=1095343992&p_sid=a2qUcgci&p_accessibility=0&p_lva=&p_sp=cF9zcmNoPTEmcF9zb3J0X2J5PSZwX2dyaWRzb3J0PSZwX3Jvd19jbnQ9MzEmcF9wcm9kcz04LDU2LDYwNCZwX2NhdHM9*

*JnBfcHY9My42MDQmcF9jdj0 mcF9zZWFyY2hfdH lwZT1hbnN3ZXJzLnNlYXJ jaF9ubCZwX3BhZ2U9MQ**&p_li=&p _topview=1* and *http:// questions.cms.hhs.gov/cgi-bin/ cmshhs.cfg/php/enduser/std_adp. php?p_faqid=4136&p _created=1109786814&p_sid=bxw-cgci &p_accessibility=0&p_lva=& p_sp=cF9zcmNoPTE mcF9zb3J0X2J5PSZwX2 dyaWRzb3J0PSZwX3Jvd19jbn Q9MzEmcF9wcm9kcz04LDU2LDY wNCZwX2NhdHM9JnBfcHY9 My42MDQmcF9jdj0mcF9zZWFyY2hfd HlwZT1hbnN3ZXJzLnNlYXJjaF9 ubCZwX3BhZ2U9MQ**&p _li=&p_topview=1).*

On July 6, 2005, we restated our guidance on service fees in the preamble of the Competitive Acquisition of Outpatient Drugs and Biologicals Under Part B (CAP) interim final rule with comment (70 FR 39069). Subsequently, we have received requests for clarification on how fees paid to entities such as group purchasing organizations (GPOs) or PBMs must be treated for purposes of the ASP calculation.

We propose to further clarify in the final ASP reporting rule that, beginning with the ASP reporting for sales during the first calendar quarter of 2007, bona fide service fees that are paid by a manufacturer to an entity, whether or not the entity takes title to the drug, are not considered price concessions under § 414.804(a)(2) insofar as, and to the extent that, they satisfy the definition of a bona fide service fee that we are proposing at § 414.802. In § 414.802, we propose to define bona fide service fees as fees paid by a manufacturer to an entity that represent fair market value for a bona fide, itemized service actually performed on behalf of the manufacturer that the manufacturer would otherwise perform (or contract for) in the absence of the service arrangement, and that are not passed on, in whole or in part, to a client or customer of an entity, whether or not the entity takes title to the drug. Our current guidance, which provides that bona fide service fees means expenses that would have generally been paid for by the manufacturer at the same rate had these services been performed by other entities, would continue unless we provide an alternative approach as discussed below. Further, we propose to clarify in the final ASP reporting rule that fees, including service fees, administrative fees and other fees, paid to GPOs or PBMs are not considered price concessions under § 414.804(a)(2) insofar as, and to the extent that, they satisfy the definition of a bona fide service fee that we have proposed at § 414.802.

In comments on the April 6, 2004 IFC, groups representing wholesalers, distributors and specialty pharmacies provided some insight into the types of activities that are performed in the distribution of drugs. These commenters suggested that costs for handling, storage, inventory reporting, shipping, receiving, patient education, disease management and data should be borne by manufacturers and be excluded from the ASP calculation as bona fide services. However, these commenters did not provide detailed information about whether and how one would determine the extent to which these activities are bona fide services actually performed on behalf of the manufacturer or otherwise.

Because the scope of appropriate services may vary across categories of drugs, we are considering providing guidance on the types of services that may qualify as bona fide services for purposes of the ASP calculation. We are also considering providing further guidance on or revising the approach or methodology manufacturers must use to determine the fair market value of bona fide services performed on their behalf and whether the service fee paid was passed on in whole or in part. In either case, we may implement our policy through rulemaking or through program instruction or other guidance (consistent with our authority under section 1847A(c)(5)(C) of the Act).

We seek comments on the specific types of services entities perform on behalf of manufacturers that a manufacturer would otherwise perform (or contract for) and the necessity of those services in the efficient distribution of drugs. We also seek comments on activities that should not be considered bona fide services performed on behalf of manufacturers. To better understand which services may be considered bona fide services performed on behalf of the manufacturer that the manufacturer would otherwise perform (or contract for), we seek to understand the bona fide services that may be appropriate for all or specific types of products, as well as the specific services that may be applicable to unique products or circumstances. We also seek to understand the costs and relative costs of services performed on behalf of manufacturers.

To exclude a bona fide service fee from the ASP calculation, a manufacturer must determine whether the fee paid to an entity represents fair market value for a bona fide service actually performed on behalf of the manufacturer that the manufacturer would otherwise perform (or contract for), and that the fee is not passed on, in whole or in part, to a client or customer of the entity. Our current guidance provides that bona fide service fees means expenses that would have generally been paid for by the manufacturer at the same rate had these services been performed by other entities. We seek comments on appropriate additional guidance or alternative methods for determining fair market value for purposes of identifying bona fide service fees that are excluded from the calculation of ASP, as well as comments on whether, and the extent to which, fees tied to performance of a service, fixed fee, revenue generated by product sales, or other basis may represent fair market prices for purposes of identifying bona fide service fees that are excluded from the calculation of ASP. In addition, we seek comments on the appropriate methods for determining whether a fee is passed on in whole or in part. We also seek comments on how Medicare's guidance on the treatment of service fees for ASP calculation purposes may differ with the treatment of service fees for financial accounting or other purposes, and any implications that this may have for manufacturers.

b. Estimation Methodology for Lagged Exempted Sales

Section 1847A(c)(2) of the Act requires manufacturers to exclude from the calculation of ASP those sales that are exempt from the Medicaid best price (BP) calculation (for example, Federal sales, sales to State pharmacy assistance programs, sales to a prescription drug plan for use under Medicare Part D). In the comments on the April 6, 2004 IFC, commenters requested more guidance on the method manufacturers should use to exclude exempted sales that are known on a lagged basis. Manufacturers identify exempted sales based on direct sales and through chargeback and rebate data that may not be sufficiently available at the time the ASP is calculated. In the absence of specific guidance on how to account for lagged exempted sales (that is, exempted sales identified through chargeback or rebate processes), manufacturers have relied upon assumptions in accordance with their customary business practices to develop their approach for excluding these sales from the ASP calculation. In our work with manufacturers that submit ASP data, we understand that some manufacturers have used a ratio methodology for estimating exempted sales known on a lagged basis which is similar to the ratio methodology manufacturers must use to estimate

price concessions known on a lagged basis.

To establish a uniform approach, in § 414.804(a)(4), we propose to require, in the final ASP reporting rule, that all manufacturers use a 12-month (or less, if applicable) rolling average ratio methodology to estimate exempted sales known on a lagged basis (through chargebacks or rebates) in order to more accurately exclude these sales from the ASP calculation. Specifically, for exempted sales known on a lagged basis, the manufacturer sums the lagged exempted sales for the most recent 12-month period available (or the number of months the NDC has been sold for NDCs with less than 12 months of sales, except for redesignated NDCs as described in section d below). The manufacturer then calculates a percentage using this summed amount as the numerator and the sales (the number of units after non-lagged exempted sales have been subtracted from total sales) for the same period (12 months or less, if applicable) as the denominator. The result is a rolling average percentage estimate for lagged exempted sales that is applied to the sales (the number of units after non-lagged exempted sales have been subtracted from total sales) for the quarter being reported. The product that results from multiplying the rolling average percentage estimate of lagged exempted sales and sales (the number of units after non-lagged exempted sales have been subtracted from total sales) determines the number of lagged exempted sales (in units) to be excluded from the denominator of the ASP calculation. Manufacturers must make a corresponding adjustment to the numerator of the ASP calculation to ensure that the total in dollars for the reporting quarter does not include revenue related to lagged exempted sales excluded from the denominator using the proposed estimation methodology. Further, manufacturers must remove the dollar value of lagged exempted sales from their estimates of lagged price concessions by subtracting the dollar value of estimated lagged exempted sales from the denominator as specified in § 414.804(a)(3)(i).

Our proposed methodology for excluding lagged exempted sales is similar to the methodology manufacturers are required to use to estimate price concessions known on a lagged basis, and was recommended by manufacturers. We believe requiring similar methods to estimate both lagged exempted sales and lagged price concessions is reasonable and reduces potential errors in the manufacturers' ASP calculations, while ensuring that exempted sales are appropriately removed from the ASP calculation. In addition, using an estimation methodology to remove lagged exempted sales reduces the likelihood of quarter to quarter variations in the ASP.

We seek comments on the proposed methodology for excluding exempted sales known on a lagged basis from the ASP calculation and estimate of lagged price concessions. We also solicit suggestions on appropriate alternative methodologies that may be less complex.

c. Nominal Sales

Section 1847A(c)(2)(B) of the Act requires manufacturers to exclude from the ASP calculation sales that are merely nominal in amount, as applied for purposes of section 1927(c)(1)(C)(ii)(III) of the Act, except as the Secretary may otherwise provide. Effective January 1, 2007, the DRA (Pub. L. 109–171) modifies section 1927(c)(1)(C)(ii)(III) of the Act. Limitations on nominal sales have been added in new section 1927(c)(1)(D) of the Act. The DRA also modified the average manufacturer price (AMP) calculation and frequency of AMP reporting. Therefore, we are proposing to clarify the method manufacturers must follow, beginning in 2007, to identify nominal sales for ASP reporting purposes and to exclude nominal sales from the calculation of the ASP. We also are seeking comments on whether we should establish an alternative definition of nominal sales for ASP purposes.

In the preamble to the ASP reporting interim final rule, we stated sales to an entity that are nominal in amount are defined in the Medicaid drug rebate agreement (see sample agreement at *http://www.cms.hhs.gov/MedicaidDrugRebateProgram/downloads/rebateagreement.pdf*). That is, for ASP purposes, a nominal sale is a sale at a price less than 10 percent of the AMP in the same quarter for which the AMP is computed. Effective January 1, 2007, the DRA revises the AMP calculation (to omit customary prompt pay discounts extended to wholesalers), added a monthly AMP reporting requirement, and established limitations on nominal sales (only sales to certain entities may qualify as nominal sales). Section 1927(c)(1)(D) of the Act limits the nominal sales exclusion to nominal sales made to the following entities:

- 340B covered entities as described in section 340B(a)(4) of the Public Health Services Act (PHS Act).
- Intermediate care facilities for the mentally retarded (ICFs/MR).
- State-owned or operated nursing facilities.
- Any other facility or entity that the Secretary determines is a safety net provider to which sales of such drugs at a nominal price would be appropriate based on the factors described in section 1927(c)(1)(D)(ii) of the Act.

Because section 1847A(c)(2)(B) of the Act requires manufacturers to exclude from the ASP calculation sales that are merely nominal in amount, as applied for purposes of section 1927(c)(1)(C)(ii)(III) of the Act, except as the Secretary may otherwise provide, the DRA changes will have implications for ASP reporting beginning January 1, 2007 (unless we provide an alternative policy for determining nominal sales as permitted under section 1847A(c)(2)(B) of the Act). One implication is that the limitations set forth in section 1927(c)(1)(D) of the Act will continue the exclusion of nominal sales to certain entities while requiring that sales to entities not identified under section 1927(c)(1)(D) of the Act are included in the ASP calculation, even if such sales are at very low prices. Another implication is the AMP calculation will exclude customary prompt pay discounts extended to wholesalers, yet prompt pay discounts will continue to be a type of price concession that manufacturers must include in their ASP calculations. The change in treatment of customary prompt pay discounts extended to wholesalers in the AMP calculation may result in a higher number of sales that are at less than 10 percent of the AMP than in past ASP reporting periods (notwithstanding the new limitation on what is considered a nominal sale under section 1927(c)(1)(D) of the Act). Still another implication is that the frequency of AMP reporting will include monthly reporting; thus, for ASP purposes, there is further need to clarify how nominal sales are to be identified in 2007. Separate Medicaid rulemaking will address the DRA provisions related to AMP reporting.

We believe the DRA modifications to section 1927 of the Act noted above will have minimal effect on reported ASPs. We would expect that the exclusion of customary prompt pay discounts extended to wholesalers from AMP would lead to a modest increase in AMP, and as a result a modest increase in the number of sales that would qualify as nominal under the current ASP reporting regulations. At the same time, we anticipate that the limitation on nominal sales in section 1927(c)(1)(D) of the Act will result in a modest reduction in the number of sales that qualify as nominal sales for

purposes of ASP reporting because we believe that the entities outlined in section 1927(c)(1)(D) of the Act generally represent the types of entities to which manufacturers may offer sales at a nominal amount. Consequently, we would expect these two countervailing changes would have a minimal overall impact on nominal sales that would be excluded from the ASP calculation. For 2007 and beyond, we propose to revise § 414.804(a)(4) to clarify that manufacturers must continue to use the Medicaid threshold (less than 10 percent of AMP) to determine nominal sales that are excluded (subject to the limitations in section 1927(c)(1)(D) of the Act) from the ASP calculation. Further, we propose that, in identifying nominal sales, manufacturers must use the AMP for the calendar quarter that is the same calendar quarter for the ASP reporting period. For these reasons, we are proposing to continue the current methodology for identifying and excluding nominal sales (that is, sales that are exempt from the Medicaid best price calculation under section 1927(c)(1)(C)(ii)(III) of the Act) from the manufacturer's calculation of the ASP. We believe this approach helps maintain continuity in the ASP calculation and minimizes manufacturers' reporting burden, as Medicare continues to follow the Medicaid approach for identifying nominal sales and manufacturers can use a single method for identifying nominal sales for both ASP and AMP purposes.

We seek comments on our proposal to continue use of the AMP as the basis for identifying nominal sales excluded from the ASP calculation and on whether an alternative threshold for identifying nominal sales for ASP calculation purposes is necessary or desirable to ensure the accuracy of the ASP payment methodology. Specifically, we seek comments on whether sales at less than 10 percent of the ASP (instead of the AMP) should be used to identify nominal sales for ASP purposes (with the new requirement in section 1927(c)(1)(D) of the Act allowing only sales to certain entities to be considered nominal sales still being applicable). We also seek comments on our belief that the new limitations on nominal sales and change to the AMP calculation will have minimal impact on reported ASPs.

Subsequent to the April 6, 2004 IFC, we received requests for clarification on a technical aspect related to the identification of nominal sales. Specifically, some manufacturers have asked whether nominal sales are identified by performing a series of calculations once or whether the manufacturer repeats the series of calculations until no remaining ASP eligible sales are below the nominal threshold. Consistent with current Medicaid reporting, for 2005 and 2006, manufacturers must identify nominal sales by performing the following steps once:

- The manufacturer calculates the AMP for the reporting quarter to identify the dollar amount that represents 10 percent of the AMP for that reporting period.
- The manufacturer then identifies sales below this amount and excludes these sales from the ASP calculation.
- Beginning in 2007, the limitations in section 1927(c)(1)(D) of the Act must also be met to exclude the sale.

d. Other Price Concession Issues

In our ongoing work with manufacturers that submit ASP data, some manufacturers have posed questions or raised concerns about how the estimate of lagged price concessions is done prior to having 12 months of data for a NDC and, when a product is redesignated with a new NDC, whether price concessions from the prior NDC must be included in calculating the ASP for the new NDC. Manufacturers and other stakeholders have also asked us about how Medicare's ASP guidance concerning price concessions is to be applied when drugs are sold under bundling arrangements.

In response, we are proposing clarifications and seeking comment on these issues.

(1) Price Concessions for NDCs With Less Than 12 Months of Sales

To address situations when a NDC with price concessions known on a lagged basis has not been sold for a full 12 months, we propose to revise § 414.804(a)(3) to specify that the period used to estimate lagged price concessions is the total number of months the NDC has been sold. We propose to require that manufacturers use less than 12 months of data in the estimation methodology for lagged price concessions for NDCs with less than 12 months of sales (except when the manufacturer has redesignated the product's NDC, as discussed below). Manufacturers may include the current ASP reporting quarter in the most recent 12 month period (or less for NDCs with less than 12 months of sales) so long as the manufacturer follows this approach in calculating the ASP for all of its reported NDCs. Using less than 12 months in the estimation methodology for lagged price concessions is consistent with our proposal for estimating lagged excluded sales described in section b. above.

(2) Redesignated NDCs

From time to time, a manufacturer may change the NDC assigned to a specific product and package size while continuing or offering price concessions that span across sales of the product under its prior and redesignated NDCs. For example, an NDC may be changed to reflect a change in the labeler code while lagged price concessions in place under the prior NDC remain in effect and carry over to the redesignated NDC. Another example would be a manufacturer that modifies its package design or other non-drug feature of the NDC and assigns a new NDC to reflect the revised packaging.

We propose to clarify in the final ASP reporting rule that, when an NDC is changed (except when a product is repackaged or relabeled by a different manufacturer or relabeler or is privately labeled) and lagged price concessions offered for the prior NDC remain in effect, the manufacturer must use 12 months (or the total number of months of sales of the prior and redesignated NDCs if the total number of months of sales is less than 12 months) of sales and price concession data from the prior and redesignated NDCs to estimate lagged price concessions applicable to the redesignated NDC. In establishing this methodology, we are relying on our authority under section 1847A(c)(5)(A) of the Act.

We seek comments on our proposed refinements to the estimation of lagged price concessions for NDCs with less than 12 months of sales and when a manufacturer redesignates the NDC assigned to a product. We also solicit suggestions for potentially clarifying these policies further.

(3) Bundled Price Concessions

We have heard a few concerns about how Medicare's ASP guidance concerning price concessions is to be applied when drugs are sold under bundling arrangements (for example, when a purchaser's price for one or more drugs is contingent upon the purchase of other drugs or items). We would like to better understand how bundling affects sales of Part B drugs and the ASP calculation, and any concerns stakeholders may have on this issue. Therefore, we are soliciting comments on a number of these issues. We note that we expect manufacturers of drugs reimbursed by Medicare Part B to comply with all applicable laws, regulations, and legal decisions including, but not limited to the Stark law, other relevant anti-kickback laws,

antitrust laws, and laws governing fair trade practices. Our discussion of this issue in this proposed rule should not be construed as an endorsement or authorization of any pricing practices that contravene any laws, legal decisions, or regulations.

Thus far, we have not provided specific guidance in the ASP context on the issue of apportioning price concessions across drugs that are sold under bundling arrangements. In the absence of specific guidance, the manufacturer may make reasonable assumptions in its calculations of ASP, consistent with the general requirements and the intent of the Social Security Act, Federal regulations, and its customary business practices. Manufacturers must include assumptions in their ASP submissions. We are now considering providing guidance, through rulemaking or through program instruction or other guidance (consistent with our authority under section 1847A(c)(5)(C) of the Act) on the methodology manufacturers must use for apportioning price concessions across Part B drugs sold under bundling arrangements for purposes of the calculation of ASP. As we consider this issue, our goal is to ensure that the ASP is an accurate reflection of market prices for Part B drugs and that the treatment of bundled price concessions in the ASP calculation does not create inappropriate financial incentives.

We are soliciting comments on a number of issues, including how frequently Part B drugs are sold under bundling arrangements, the different structures of bundling arrangements that may exist (for example, the number of products included in a bundling arrangement; whether the price concessions are contingent on the purchase of only one product, the purchase of multiple products, or the inclusion of one or more products on a formulary; and the timing of the price concessions), and the extent to which sales of Part B drugs are bundled with sales of non-Part B drugs or non-drug products. We also seek comment on what effect bundling arrangements may have on the ASP calculation, on beneficiary access to high quality, appropriate care (including access to drugs that may not have clinical alternatives), and on costs to the Medicare program and beneficiaries. In addition, we seek comments on whether additional guidance on apportioning bundled price concessions for purposes of the calculation of ASP is needed and potential methodologies that Medicare could consider requiring. Furthermore, we seek comment on how variation in the structure of bundling arrangements may affect the impact of potential apportionment methodologies on the ASP calculation.

2. Clotting Factor Furnishing Fee

Section 303(e)(1) of the MMA added section 1842(o)(5) of the Act which requires the Secretary, beginning in CY 2005, to pay a furnishing fee, in an amount the Secretary determines to be appropriate, to hemophilia treatment centers and homecare companies for the items and services associated with the furnishing of blood clotting factor. Section 1842(o)(5)(C) of the Act specifies that the furnishing fee for clotting factor for years after CY 2006 and subsequent years will be equal to the fee for the previous year increased by the percentage increase in the consumer price index (CPI) for medical care for the 12 month period ending with June of the previous year. In the GY 2006 PFS final rule, we announced that, based on the percentage increase in the CPI of 4.2 percent for the 12-month period ending June 2005, the furnishing fee is $0.146 per unit clotting factor for CY 2006.

The CPI data for the 12-month period ending in June 2006 is not yet available. In the FY 2007 PFS final rule, we will include the actual figure for the percent change in the CPI for medical care for the 12-month period ending June 2006, and the updated furnishing fee for CY 2007 calculated based on that figure.

3. Widely Available Market Prices (WAMP) and AMP Threshold

Section 1847A(d)(1) of the Act states that "the Inspector General of HHS shall conduct studies, which may include surveys to determine the widely available market prices (WAMP) of drugs and biologicals to which this section applies, as the Inspector General, in consultation with the Secretary, determines to be appropriate." Section 1847A(d)(2) of the Act states that, "Based upon such studies and other data for drugs and biologicals, the Inspector General shall compare the ASP under this section for drugs and biologicals with—

- The widely available market price (WAMP) for these drugs and biologicals (if any); and
- The average manufacturer price (AMP) (as determined under section 1927(k)(1) of the Act for such drugs and biologicals."

Section 1847A(d)(3)(A) of the Act states that, "The Secretary may disregard the ASP for a drug or biological that exceeds the WAMP or the AMP for such drug or biological by the applicable threshold percentage (as defined in subparagraph (B))." The applicable threshold is specified as 5 percent for CY 2005. For CY 2006 and subsequent years, section 1847A(d)(3)(B) of the Act establishes that the applicable threshold is "the percentage applied under this subparagraph subject to such adjustment as the Secretary may specify for the WAMP or the AMP, or both." In CY 2006, we specified an applicable threshold percentage of 5 percent for both the WAMP and AMP. We based this decision on the limited data available to support a change in the current threshold percentage.

For CY 2007, we propose to specify an applicable threshold percentage of 5 percent for the WAMP and the AMP. At present, the OIG is continuing its comparison of both the WAMP and the AMP. Since, at this time we do not have data that suggest another level is more appropriate, we believe that continuing the 5 percent applicable threshold percentage for both the WAMP and AMP is appropriate.

There are a number of operational issues associated with Medicare's authority to substitute a lower payment amount for a drug if the OIG finds and informs the Secretary, at such times as the Secretary may specify, that the ASP exceeds the WAMP or AMP by more than the established threshold (currently 5 percent). We would welcome public comment on operational issues such as the timing and frequency of the ASP, AMP, and WAMP comparisons and effective date and duration of the rate substitution.

4. Payment for Drugs Furnished During CY 2006 and Subsequent Years in Connection With the Furnishing of Renal Dialysis Services if Separately Billed by Renal Dialysis Facilities

In the November 21, 2005 PFS final rule (70 FR 70116), we stated that payment for a drug furnished during CY 2006 in connection with renal dialysis services and separately billed by freestanding renal dialysis facilities and hospital-based facilities would be based on section 1847A of the Act. We intended this to mean CY 2006 and subsequent years. Therefore, in this proposed rule, we are not proposing a policy change, but rather, we are clarifying that this policy will apply to CY 2006 and subsequent years until otherwise specified.

G. Proposed Provisions Related To Payment for Renal Dialysis Services Furnished by End-Stage Renal Disease (ESRD) Facilities

[If you choose to comment on issues in this section, please include the

caption "ESRD PROVISIONS" at the beginning of your comments.]

Since August 1, 1983, payment for dialysis services furnished by ESRD facilities has been based on a composite rate payment system that provides a fixed, prospectively determined amount per dialysis treatment, adjusted for geographic differences in area wage levels. In accordance with section 1881(b)(7) of the Act, separate composite rates have been established for hospital-based and independent ESRD facilities. The composite rate is designed to cover a package of goods and services needed to furnish dialysis treatments that include certain routinely provided drugs, laboratory tests, supplies, and equipment. Unless specifically included in the composite rate, other injectable drugs and laboratory tests medically necessary for the care of the dialysis patient are separately billable. The base composite rates per treatment, effective on August 1, 1983, were $123 for independent ESRD facilities and $127 for hospital-based ESRD facilities. The Congress has enacted a number of adjustments to the composite rate since that time. The current 2006 base composite rates are $130.40 for independent ESRD facilities and $134.53 for hospital-based ESRD facilities.

Section 623 of the MMA amended section 1881 of the Act to require changes to the composite rate payment methodology, as well as to the pricing methodology for separately billable drugs and biologicals furnished by ESRD facilities.

Section 1881(b)(12) of the Act, as added by MMA, required the establishment of a basic case-mix adjusted prospective payment system (PPS) that would include the services comprising the composite rate and an add-on to the composite rate component for the difference between current payments for separately billed drugs and the revised drug pricing specified in the statute. In addition, section 1881(b)(12) of the Act required that the composite rate be adjusted for a limited number of patient characteristics (case-mix) and section 1881(b)(12)(D) of the Act gave the Secretary discretion to revise the wage indices and the urban and rural definitions used to develop them. Finally, section 1881(b)(12)(E) of the Act imposed a budget neutrality requirement, so that aggregate payments under the basic case-mix adjusted composite payment system for 2005 would equal the aggregate payments that would have been made for the same period if section 1881(b)(12) of the Act did not apply.

Before January 1, 2005, payment to both independent and hospital-based facilities for the anti-anemia drug, Erythropoietin (EPO) was established pursuant to section 1881(b)(11) of the Act at $10.00 per 1,000 units. For independent ESRD facilities, payment for all other separately billable drugs and biologicals was based on the lower of actual charges or 95 percent of the average wholesale price (AWP). Hospital-based ESRD facilities were paid based on the reasonable cost methodology for separately billed drugs and biologicals (other than EPO) furnished to dialysis patients. Changes to the payment methodology for separately billed ESRD drugs and biologicals that were established by the MMA and were effective January 1, 2005 are described in sections G.1. and G.2. below. These changes affected payments in both CYs 2005 and 2006.

1. CY 2005 Revisions

On November 15, 2004, we published the CY 2005 PFS final rule with comment period (69 FR 66319 through 66334), that revised payments to ESRD facilities based on changes enacted by the MMA. The November 15, 2004 final rule with comment period implemented section 1881(b) of the Act, as amended by section 623 of the MMA. Changes effective January 1, 2005, included implementation of a case-mix adjusted payment system that incorporates services that comprise the composite rate; an update of 1.6 percent to the composite rate component of the payment system; and a drug add-on of 8.7 percent to the composite rate for the difference between current payments for separately billable drugs and payments based on the revised drug pricing for 2005 which used acquisition costs. The final rule also implemented case-mix adjustments to the composite rate for a limited number of patient characteristics (age, low body mass index (BMI), and body surface area (BSA)), effective April 1, 2005.

In addition, to implement section 1881(b)(13) of the Act, we revised payments for drugs billed separately by independent ESRD facilities, paying for the top 10 ESRD drugs based on acquisition costs (as determined by the OIG) and for other separately billed drugs at the average sales price +6 percent (hereafter referred to as ASP+6 percent). Hospital-based ESRD facilities continued to receive cost-based payments for all separately billable drugs and biologicals except for EPO which was paid based on average acquisition costs.

2. CY 2006 Revisions

In the November 21, 2005 **Federal Register** (70 FR 70161), we published the CY 2006 PFS final rule with comment period (70 FR 70161) implementing additional revisions to payments to ESRD facilities under section 623 of the MMA. For CY 2006, we further revised the drug payment methodology applicable to drugs furnished by ESRD facilities. All separately billed drugs and biologicals furnished by both hospital-based and independent ESRD facilities are now paid based on ASP+6 percent.

We recalculated the 2005 drug add-on adjustment to reflect the difference in payments between the pre-MMA AWP pricing and the revised pricing based on ASP+6 percent. The recalculation did not affect the actual add-on adjustment applied to payments in 2005, but provided an estimate of what the adjustment would have been had the 2006 payment methodology been in effect in 2005. The drug add-on adjustment was then updated to reflect the expected growth in expenditures for separately billable drugs in CY 2006.

As of January 1, 2006, we also implemented a revised geographic adjustment authorized by section 1881(b)(12) of the Act. As part of that change, we—

- Revised the labor market areas to incorporate the new CBSA designations established by the Office of Management and Budget (OMB);
- Eliminated the wage index ceiling and reduced the floor to .8500; and
- Revised the labor portion of the composite rate to which the geographic adjustment is applied.

We also provided a 4-year transition from the previous wage-adjusted composite rates to the current wage-adjusted rates. For CY 2006, only 25 percent of the payment is based on the revised geographic adjustments, and the remaining 75 percent of payment is based on the old Metropolitan Statistical Area-based (MSA-based) payments.

In addition, section 5106 of the DRA (Pub. L. 109–171), provided for a 1.6 percent update to the composite rate component of the basic case-mix adjusted payment system, effective January 1, 2006. As a result, the current base composite rate is $130.40 for independent ESRD facilities and $134.53 for hospital-based facilities. The drug add-on adjustment (including the growth update) for 2006 is 14.5 percent.

3. Provisions of the Proposed Rule

For CY 2007, we are proposing the following provisions which are described in more detail below:

• A method to annually calculate the growth update to the drug add-on adjustment required by section 1881(b)(12) of the Act, as well as an estimated growth update adjustment to the add-on amount of 0.6 percent for CY 2007.

• An update to the wage index adjustments to reflect the latest hospital wage data, including a budget neutrality adjustment of 1.053069 to the wage index for CY 2007.

4. Proposed Growth Update to the Drug Add-On Adjustment to the Composite Rates

Section 623(d) of the MMA added section 1881(b)(12)(B)(ii) of the Act which required the establishment of an add-on to the composite rate to account for changes in the drug payment methodology stemming from enactment of the MMA. Section 1881(b)(12)(C) of the Act provides that the drug add-on must reflect the difference in aggregate payments between the revised drug payment methodology for separately billable ESRD drugs (acquisition costs in CY 2005; ASP+6 percent in CY 2006) and the AWP payment methodology in effect in CY 2004.

In addition, section 1881(b)(12)(F) of the Act requires that, beginning in CY 2006, we establish an annual update to the drug add-on to reflect estimated growth in expenditures for separately billable drugs and biologicals furnished by ESRD facilities. This growth update applies only to the drug add-on portion of the case-mix adjusted payment system.

The CY 2006 drug add-on adjustment to the composite rate is 14.5 percent. The drug add-on adjustment for CY 2006 incorporates an inflation adjustment of 1.4 percent. This computation is explained in detail in the CY 2006 PFS final rule with comment period (70 FR 70162). We note that the drug add-on adjustment of 14.7 percent that was published in November 21, 2005 PFS final rule with comment period did not account for the 1.6 percent update to the composite rate portion of the basic case-mix adjustment payment system that was subsequently enacted by the DRA, effective January 1, 2006. Since we compute the drug add-on adjustment as a percentage of the weighted average base composite rate, the drug add-on percentage was decreased to account for the higher composite payment rate resulting in a 14.5 percent add-on adjustment for CY 2006. This adjustment was necessary to ensure that the total drug add-on dollars remained constant.

a. Estimating Growth in Expenditures for Drugs and Biologicals for CY 2007

In developing the growth update to the drug add-on for CY 2006 we conducted a trend analysis of prior years' ESRD drug expenditure data (2001 through 2004). All 4 years of data used for the trend analysis reflected expenditures associated with payment for separately billed drugs and biologicals under the AWP methodology. We could, therefore, develop growth estimates for CY 2006 using comparable historical expenditure data. To extend the trend analysis for CY 2007, we would need to include drug expenditure data from CY 2005. However, in CY 2005, section 1881(b)(13)(A)(ii) of the Act required that we use a different drug payment methodology, based on average acquisition costs, rather than the AWP methodology used in prior years. Therefore, ESRD drug expenditure data for CY 2005 are not comparable to expenditure data for CY 2001 through CY 2004 for trend analysis purposes. This data issue will extend to subsequent years' data as well, as we are now paying for separately billable drugs using ASP+6 percent. Because we do not have comparable data on which to base continuing trend analysis, we believe it is necessary to re-evaluate our methodology for updating the drug add-on adjustment.

In order to address the issue of data comparability described above, we considered using available drug proxy measures to predict growth in ESRD drug expenditures for CY 2007. We note that section 1881(b)(12)(F) of the Act specifies that the drug update must reflect "the estimated growth in expenditures for drugs and biologicals that are separately billable * * *." By referring to "expenditures", we believe the statute contemplates that the update would account for both increases in drug prices as well as increases in utilization of those drugs.

One available proxy measure that reflects both price and utilization is the national health expenditure projection for prescription drugs that is developed by CMS. However, because of uncertainties regarding the impact of the Medicare Part D prescription drug program on expenditures, we are concerned that the current estimates for CY 2007 will likely change, as actual Part D expenditure data become available. Therefore, we do not believe this measure would be an appropriate proxy measure for this purpose.

Another widely recognized proxy measure is the producer price index (PPI) for prescription drugs. The PPI is a good measure of drug pricing growth, but does not capture the growth in per patient drug utilization that must also be part of an accurate estimate of growth in ESRD drug expenditures. However, if the PPI is used in conjunction with an estimate of per patient growth in drug utilization, we believe this measure would provide a simple and accurate approach to updating the drug add-on that could be readily used in subsequent years. Moreover, using the PPI would significantly reduce any data bias that is inherent in using historical drug expenditure data that do not reflect current drug payment methodologies. As discussed in detail below, we are proposing to estimate growth in per patient utilization of drugs by using historical data from 2004 and 2005.

Another approach to estimating the growth in ESRD drug expenditures is to continue using historical trend analysis by making adjustments to the available data to permit year to year comparisons. This would be accomplished by making an adjustment to the CY 2005 data based on average acquisition price (AAP) using the weighted average difference between AWP prices and AAP prices. We would use trend analysis to project the growth in drug expenditures for CY 2007.

While we believe this approach is reasonably accurate for developing the CY 2007 growth estimates, since only one year of data would require adjustment, we are concerned about applying this methodology to future updates. Future year updates would require multiple year to year adjustments in prices. Moreover, historical AWP data does not provide an accurate measure of price changes for EPO under the revised drug payment methodology, since EPO pricing was held constant during that historical period.

In addition, our estimate of the weighted average difference between AAP prices and AWP prices (and ASP versus AWP prices in CY 2006) was based on a projection of price levels. It is likely that the weighted average difference would change based on actual pricing data for each of those years. To be consistent with the statute, we expect to update the established adjustment to reflect estimated growth in drug expenditures, but we do not anticipate re-computing the drug add-on adjustment annually. Adjusting our assumptions to estimate projected growth without changing the underlying assumptions in the add-on adjustment would create inconsistencies between the two elements. Therefore, we are proposing to discontinue use of older historical drug spending data to

estimate the growth update to the drug add-on adjustment. We will reconsider our methodology when we have sufficient historical data reflecting the revised drug payment methodology using ASP pricing.

For the reasons discussed above, we are proposing to develop an estimate of the growth in expenditures for ESRD drugs and biologicals using the PPI for prescription drugs as a measure of price increases in conjunction with two years of historical data from 2004 and 2005 as a basis for estimating utilization growth at the per patient level. We believe that this approach will best reflect the estimated growth in expenditures for ESRD drugs and biologicals.

b. Estimating Growth in Per Patient Drug Utilization

To isolate and project the growth in per patient utilization of ESRD drugs for CY 2007, we need to remove the enrollment and price growth components from historical drug expenditure data and consider the residual utilization growth. We propose to use total drug expenditure data from CYs 2004 and 2005 to estimate per patient utilization growth for CY 2007.

We first needed to estimate total drug expenditures. For this proposed rule, we used the final CY 2004 ESRD claims data and the latest available CY 2005 ESRD facility claims, updated through December 31, 2005, that is, claims with dates of service from January 1 through December 31, 2005, that were received, processed, paid, and passed to the National Claims History File as of December 31, 2005. For the final rule, we will use more updated CY 2005 claims with dates of service for the same time period. This updated CY 2005 data file will include claims that are received, processed, paid, and passed to the National Claims History File as of June 30, 2006.

While the December 2005 update of CY 2005 claims used in this proposed rule is the most recently available claims data, we recognize that it is not a fully complete year as claims with dates of service towards the end of the year have not all been processed. To more accurately estimate the update to the drug add-on, we need aggregate drug expenditures. Based on an analysis of the 2004 claims data, we inflated the CY 2005 drug expenditures to estimate the June 30, 2006 update of the 2005 claims file. We used the relationship between the December 2004 and the June 2005 versions of 2004 claims to estimate the more complete 2005 claims that will be available in June 2006. We applied that ratio to the 2005 claims data from the December 2005 claims file. We did this for drug expenditures in aggregate, for each of top ten separately billable drugs, and within each for independent and hospital-based ESRD facilities. All components were then combined to estimate aggregate CY 2005 ESRD drug expenditures. The net adjustment to the CY 2005 claims data was an increase of 13 percent to the 2005 expenditure data. This adjustment allows us to more accurately compare the 2004 and 2005 data, to estimate utilization growth.

The next step is to remove the enrollment and price growth components from that total. As discussed earlier in this section, in developing the per patient utilization growth for this proposed rule, we limited our analysis to the latest 2 years of available ESRD drug data, that is, 2004 and 2005. We believe that per patient utilization growth between these years would be a better proxy for future growth, as it best represents current utilization trends. Furthermore, because of the implementation of the new EPO utilization monitoring policy that took effect on April 1, 2006 (Medicare Claims Processing Manual, Chapter 8, section 60–4ff, p. 51–53), we believe that per patient utilization of ESRD drugs will remain relatively stable or decline slightly in future years. We note that EPO accounts for nearly 70 percent of ESRD drug expenditures.

To calculate the per patient utilization growth, we removed the enrollment component by using the growth in enrollment data between 2004 and 2005. This was approximately 3 percent. To remove the price effect we used a two-step process. First we calculated a weighted average between EPO and non-EPO price growth factors to account for the growth in pre-MMA pricing between 2004 and 2005. Since EPO was priced at $10 per thousand units prior to the enactment of the MMA, there is no growth for EPO. For the non-EPO drugs, we used the PPI as a proxy for the growth between the 2 years to maintain consistency with the established methodology for calculating the drug add-on adjustment which used the PPI to estimate the price growth in separately billable drugs (November 15, 2004, CY 2005 PFS final rule with comment period, 69 FR 66321). Next, we incorporated the estimated negative 13 percent weighted price difference between 2005 AWP and 2005 AAP pricing as was published in the CY 2005 PFS final rule with comment period (69 FR 66319 through 66334). This two-step process to account for the price effect from 2004 to 2005 led to an overall 12 percent reduction in price between 2004 and 2005.

After removing the enrollment and price effects from the expenditure data, we believe the residual growth would reflect the per patient utilization growth. To do this, we divided the product of the enrollment growth of 3 percent (1.03) and the price reduction of 12 percent (1.00 − .12 = .88) into the total drug expenditure decrease between 2004 and 2005 of 9 percent (1.00 − .09 = .91). The result is a utilization factor equal to 1.00 (.91/(1.03 * .88) = 1.00).

As we observed no growth in per patient utilization of drugs between 2004 and 2005, we are, therefore, projecting no growth in per patient utilization for CY 2007.

1. Applying the Proposed Growth Update to the Drug Add-on Adjustment

In CY 2006, we estimated the growth update by trending drug expenditures forward based on four years of AWP payment data (CY 2001 through CY 2004). We then applied the estimated growth update percentage to the total amount of drug add-on dollars established for CY 2005 to come up with a dollar amount for the CY 2006 growth update. In addition, we projected the growth in dialysis treatments for CY 2006 based on the projected growth in ESRD enrollment. We divided the projected total dialysis treatments for CY 2006 into the projected dollar amount of the CY 2006 growth to develop the per treatment growth update amount. This growth update amount, combined with the CY 2005 per treatment drug add-on amount, resulted in an average drug add-on amount per treatment of $18.88 (or a 14.5 percent adjustment to the composite rate) for CY 2006.

Beginning in CY 2007, we are proposing to annually update the per treatment drug add-on amount of $18.88 established in CY 2006 and convert the update to an adjustment factor as stipulated in section 1881(b)(12)(F) of the Act. As explained above, we believe this approach is more accurate than recalculating the per treatment add-on adjustment each year using an estimate of growth in treatments. We note that we had received comments that our projections of treatment growth used to calculate the CY 2006 adjustment may have been overstated, however, we believe that the use of enrollment data was and remains the best measure available to predict treatment growth. By proposing to apply the update to the CY 2006 per treatment add-on amount, this estimation component is eliminated for CY 2007 and future years.

2. Proposed Update to the Drug Add-On Adjustment

As discussed above, we estimate no growth in per patient utilization of ESRD drugs for CY 2007. Using the projected CY 2007 PPI for prescription drugs of 4.9 percent, we are projecting that the combined growth in per patient utilization and pricing for CY 2007 would result in an update equal to the PPI or 4.9 percent (1.0*1.049 = 1.049). This update factor would be applied to the CY 2006 average per treatment drug add-on amount of $18.88 (reflecting a 14.5 percent adjustment in CY 2006), resulting in a proposed weighted average increase to the composite rate of $.93 for CY 2007 or a 0.6 percent increase in the CY 2006 drug add-on percentage. Thus, the total proposed drug add-on adjustment to the composite rate for CY 2007, including the growth update, would be 15.2 percent (1.145*1.006 = 1.152).

In addition, we are proposing to continue to use this method to estimate the growth update to the drug add-on component of the case-mix adjusted payment system until we have at least three years worth of ASP-based historical drug expenditure data that could be used to conduct a trend analysis to estimate the growth in drug expenditures. Given the time lag in the availability of ASP drug expenditure data, we expect that the earliest we could consider using trend analysis to update the drug add-on adjustment would be 2010. We propose to reevaluate our methodology for estimating the growth update at that time.

c. OIG Report on New Drug Codes

Section 623(c)(1) of the MMA mandated that the OIG conduct two studies to determine the difference between the Medicare payment amount for separately billable ESRD drugs and the facilities" acquisition costs for these drugs, as well as estimating the growth rate of expenditures for these drugs. The initial study, "Medicare Reimbursement for Existing End Stage Renal Disease Drugs" (OEI–03–04–00120) was completed in May 2004, and reported on existing ESRD drugs. This report was used to set the CY 2005 reimbursement rates for ESRD drugs billed by independent dialysis facilities (69 FR 66322). The second study ("Medicare Reimbursement for New ESRD Drugs" (OEI–03–06–00200)) focused on new drugs. New drugs for the purpose of this study were defined as an ESRD drug that did not have a BILLING CODE prior to January 1, 2004.

One drug, darbepoetin alfa (Aranesp) accounted for the majority of all payments for new drugs. Therefore, this was the only new ESRD drug studied. The OIG report found that use of this drug was limited to a small number of facilities (only 157 facilities reported using this drug with concentrated use in approximately 55 of these facilities). Because of the recent changes we made to the drug payment methodology and the lack of comparable historical data, the OIG report made no estimate of an expenditure growth rate for this drug.

Darbepoetin alfa (Aranesp) is currently paid as a separately billable drug at ASP+6 percent. Because of the recent (CY 2006) implementation of the ASP+6 percent drug reimbursement methodology, the small number of facilities using this drug for ESRD patients, and the lack of historical data for trending purposes, we have no data to indicate that any difference in payment methods for Aranesp (between 2004 and 2006) would affect our calculation of the drug add-on or of the growth update. Moreover, since Aranesp was approved in 2001 for use in ESRD patients, we believe that expenditures for Aranesp were reflected in the historical data used to establish the 2005 drug add-on under a generic drug code. Therefore, we are proposing to make no additional changes to the drug add-on adjustment for CY 2007.

5. Proposed Update to the Geographic Adjustments to the Composite Rates

Section 1881(b)(12)(D) of the Act, as amended by section 623(d) of the MMA, gave the Secretary the authority to revise the wage indexes previously applied to the ESRD composite rates. The wage indexes are calculated for each urban and rural area. The purpose of the wage index is to adjust the composite rates for differing wage levels covering the areas in which ESRD facilities are located.

a. Updates to CBSA Definitions

In the CY 2006 PFS final rule with comment period (70 FR 70167), we announced our adoption of the OMB's CBSA-based geographic area designations to develop revised urban/rural definitions and corresponding wage index values for purposes of calculating ESRD composite rates. OMB's CBSA-based geographic area designations were described in Bulletin 03–04 originally issued June 6, 2003. On February 22, 2005 and December 5, 2005, OMB released Bulletins 05–02 and 06–01, respectively. Those bulletins contained updates to the metropolitan and micropolitan statistical area designations initially announced in Bulletin 03–04. OMB's revisions had no effect on the classification of counties which comprise the urban and rural areas used to develop the ESRD wage index values. However, Bulletins 05–02 and 06–01 changed the titles of several of the MSAs and Metropolitan Divisions used in connection with the ESRD urban wage index. Table 5 below, which contains the proposed wage index values for the ESRD urban areas, includes all of the changes announced by OMB in the February 22, 2005 and December 5, 2005 bulletins.

b. Updated Wage Index Values

In the CY 2006 PFS final rule with comment period, we stated that we intended to update the wage index values annually (70 FR 70167). Current ESRD wage index values for CY 2006 were developed from FY 2002 wage and employment data obtained from the Medicare hospital cost reports. The values are calculated without regard to geographic reclassifications authorized under sections 1886(d)(8) and (d)(10) of the Act and utilize pre-floor hospital data that is unadjusted for occupational mix.

The methodology for calculating the CY 2006 wage index values was described in the CY 2006 PFS final rule with comment period (70 FR 70168). We propose to use the same methodology for CY 2007, with the exception that FY 2003 hospital data will be used to develop the CY 2007 ESRD wage index values. For a detailed description of the development of the proposed CY 2007 ESRD wage index values based on FY 2003 hospital data, see the FY 2007 IPPS proposed rule entitled, "Proposed Changes to the Hospital Inpatient Prospective Payment Systems and Fiscal Year 2007 Rates," (April 25, 2006, 71 FR 24080). Section III F. (Computation of the Proposed FY 2007 Unadjusted Wage Index) of the preamble to that proposed rule describes the cost report schedules, line items, data elements, adjustments, and wage index computations. The wage index data affecting ESRD composite rates for each urban and rural locale may also be accessed on the CMS website at: *http://www.cms.hhs.gov/AcuteInpatientPPS/WIFN/list.asp*.

The wage data are located in the section entitled, "FY 2007 Proposed Rule Occupational Mix Adjusted and Unadjusted Average Hourly Wage and Pre-reclassified Wage Index by CBSA".

(1) Wage Index Values for Areas With No Hospital Data

In CY 2006, while adopting the CBSA designations, we identified a small number of ESRD facilities in both urban and rural geographic areas where there

is no hospital wage data on which to base the calculations of the CY 2006 ESRD wage index values. Our CY 2005 policy and CY 2006 proposal for each area are discussed separately below.

The first situation was rural Massachusetts. Because there were no reasonable proxies for rural data within Massachusetts, we used the prior year's acute care hospital wage index value for rural Massachusetts. For CY 2007, we propose to continue to use this value and request public input on an alternative methodology.

Since there may be additional rural areas in the future similarly impacted by a lack of hospital wage data on which to derive a hospital wage index, we are considering alternative methodologies for imputing a rural wage index for areas in States where no hospital wage data are available. We believe that an evaluation of alternative methodologies for imputing a rural wage index in these areas should adhere to four basic policy criteria. First, an alternative methodology should retain our current longstanding policy to use pre-floor, pre-reclassified hospital wage data to compute wage index values for post acute care facilities, including ESRD facilities. Second, any methodology to impute a rural wage index should use rural wage data to derive the rural wage index value. Third, any methodology to impute a rural wage index should be easy to evaluate. Fourth, any methodology to impute a rural wage index would be able to update wage data from year-to-year.

We arrived at one alternative that meets all of the above policy criteria. Under this alternative, we would impute a rural wage index value by using a simple average CBSA-based rural wage index value at the Census Division level. Census Divisions are defined by the U.S. Census Bureau and may be found at (*www.census.gov/geo/www/us_regdiv.pdf*). As stated above, for CY 2007, hospital wage data are not available to compute a rural wage index for ESRD facilities in rural Massachusetts, and this alternative methodology could be applied in this case. Massachusetts is located in Census Division I (New England). The States in this Census Division, and their respective rural wage index values (using hospital cost report wage data for FY 2003) include—

- Connecticut (1.1753);
- Maine (0.8410);
- New Hampshire (1.0800);
- Vermont (0.9944)
- Rhode Island (all five counties classified as urban); and
- Massachusetts.

Under this alternative methodology, the States in Census Division I for which rural wage index values are available, as shown above, would be used; this would result in a simple average rural wage index value of 1.0227 (1.0770 after applying budget neutrality factor (BNF)). Although this methodology would result in a rural Massachusetts wage index that is currently greater than the value under the current proposed policy (1.0216, 1.0758 after applying BNF), we believe this methodology may be able to accurately reflect future increases or decreases of wage data for the States within the applicable Census Division.

Rural Puerto Rico is similar to rural Massachusetts in that there are ESRD facilities where there are no acute care hospitals and, therefore, no hospital data. However, the situation for facilities in rural Puerto Rico is different in that the floor would be applied to rural Puerto Rico ESRD facilities. All areas in Puerto Rico that have an index are eligible for the floor because they have wage-index values that are below .8000. For CY 2007, we propose to apply the floor to rural Puerto Rico.

The third situation involves an urban area in Hinesville, GA (CBSA 25980). For CY 2006, we used a wage index value based on wage index values in all of the other urban areas within the same State to serve as a reasonable proxy for the urban areas without hospital wage index data. Specifically, we used the average wage index value for all urban areas within the State of Georgia as the urban wage index for purposes of calculating the value for Hinesville for CY 2006. For CY 2007, we are proposing to continue using this method for Hinesville, GA (CBSA 25980).

We solicit comments on maintaining our current policy for establishing wage index values for rural and urban areas without hospitals, the alternative approach outlined above in developing wage index values for rural areas without hospitals for CY 2007 and subsequent years, and other methods that meet the policy criteria for imputing wage index values. We will also continue to evaluate existing hospital wage data and, possibly, wage data from other sources, such as the Bureau of Labor Statistics, to determine if other methodologies of imputing a wage index value where hospital wage data are not available may be feasible.

(2) Second Year of the Transition

In the CY 2006 PFS final rule with comment period, we indicated that we would apply a 4-year transition period to mitigate the impact on composite rates resulting from our adoption of CBSA-based geographic designations (70 FR 70169). Beginning January 1, 2006, during each year of the transition, an ESRD facility's wage-adjusted composite rate (that is, without regard to any case-mix adjustments) will be a blend of its old MSA-based wage-adjusted payment rate and its new CBSA-based wage adjusted payment rate for the transition year involved. For each transition year, the share of the blended wage-adjusted base payment rate that is derived from the MSA-based and CBSA-based wage index values is shown in Table 4 below. In CY 2006, the first year of the transition, we implemented a 75/25 blend. CY 2007 is the second year of the 4-year transition period. Consistent with the transition blends announced in the November 21, 2005 PFS final rule with comment period (70 FR 70170), we are proposing a 50/50 blend between an ESRD facility's MSA-based composite rate, and its CY 2007 CBSA-based rate reflecting its revised wage index values.

In CY 2006, we also eliminated the wage index cap of 1.30, and stated that we would implement a gradual reduction in the wage index floor of .90. Prior to January 1, 2006, the wage indexes were restricted to values no less than .90 and no greater than 1.30, meaning that payments to facilities in areas where labor costs fell below 90 percent of the national average, or exceeded 130 percent of that average, were not adjusted beyond the 90 percent or 130 percent level. Although we stated that the ESRD wage index values should not be constrained by the application of floors and ceilings, we also expressed concern that the immediate elimination of the floor could adversely affect ESRD beneficiary access to care. Therefore, we reduced the floor to .85 in CY 2006.

For CY 2007, we are proposing to reduce the wage index floor to .80. As we stated in the CY 2006 PFS final rule with comment period, we intend to reassess the continuing need for a wage index floor in CY 2008 and CY 2009 (CY 2006 PFS final rule with comment period, November 21, 2005, 70 FR 70169 through 70170). The proposed wage index floors, caps, and blended shares of the composite rates applicable to all ESRD facilities during CYs 2007 through 2009 are shown in Table 4 below. They are identical to the values shown in Table 20 of the CY 2006 PFS final rule with comment period (70 FR 70170) for the applicable years.

TABLE 4.—WAGE INDEX TRANSITION BLEND

CY payment	Floor	Ceiling	Old MSA (percent)	New CBSA (percent)
2007	.80*	None	50	50
2008	Reassess	None	25	75
2009	Reassess	None	0	100

*Each wage index floor is multiplied by a budget neutrality adjustment factor. For CY 2007 the budget neutrality adjustment is 1.053069 resulting in an actual wage index floor of 0.8425.

An example of how the wage-adjusted composite rates would be blended during CY 2007 and the two subsequent transition years follows.

Example: An ESRD facility has a wage-adjusted composite rate (without regard to any case-mix adjustments) of $135.00 per treatment in CY 2006. Using CBSA-based geographic area designations, the facility's CY 2007 wage-adjusted composite rate, reflecting its wage index value as shown in Table 5 below, would be $145.00. During the remaining 3 years of the four-year transition period to the new CBSA-based wage index values, this facility's blended rate through 2009 would be calculated as follows:

CY 2007 $.50 \times \$135.00 + .50 \times \$145.00 = \$140.00$

CY 2008 $.25 \times \$135.00 + .75 \times \$145.00 = \$142.50$

CY 2009 $0 \times \$135.00 + 1.0 \times \$145.00 = \$145.00$

We note that this hypothetical example assumes that the calculated wage-adjusted composite rate of $145.00 for CY 2007 does not change in CYs 2008 and 2009. In actuality, the wage adjusted composite rate would change because of annual revisions to the wage index. However, the example serves only to demonstrate the effect on the composite rate of the CBSA-based wage index values which will be phased-in during the remaining 3 years of the transition period.

c. Budget Neutrality Adjustment

Section 1881(b)(12)(E)(i) of the Act, as added by section 623(d) of the MMA, requires that any revisions to the ESRD composite rate payment system as a result of the MMA provision (including the geographic adjustment) be made in a budget neutral manner. This means that aggregate payments to ESRD facilities in CY 2007 should be the same as aggregate payments that would have been made if we had not made any changes to the geographic adjusters. We note that this budget neutrality adjustment only addresses the impact of changes in the geographic adjustments. A separate budget neutrality adjustment was developed for the case-mix adjustments, currently in effect. Since we are not proposing any changes to the case-mix measures for CY 2007, the current case-mix budget neutrality will remain in effect for CY 2007. For CY 2007, we again propose to apply a BNF directly to the ESRD wage index values, as we did in CY 2006. As we explained in the CY 2006 PFS final rule with comment period (70 FR 70170 through 70171), we believe this is the simplest approach because it allows us to maintain our base composite rates during the transition from the current wage adjustments to the revised wage adjustments described earlier in this section. Because the ESRD wage index is only applied to the labor-related portion of the composite rate, we computed the BNF adjustment based on that proportion (53.711 percent).

In order to compute the proposed CY 2007 wage index BNF, we used the wage index values in Tables 5 and 6 below, 2005 outpatient claims (paid and processed as of December 31, 2005), and geographic location information for each facility which may be found through Dialysis Facility Compare. Dialysis Facility Compare can be found by going to the following Web site: *http://www.cms.hhs.gov/DialysisFacilityCompare/*.

Using treatment counts from the 2005 claims and facility-specific CY 2006 composite rates, we computed the estimated total dollar amount each ESRD provider would have received in CY 2006 (the first year of the 4-year transition). The total of these payments became the target amount of expenditures for all ESRD facilities for CY 2007. Next, we computed the estimated dollar amount that would have been paid to the same ESRD facilities using the proposed ESRD wage index for CY 2007 (the second year of the 4-year transition). The total of these payments became the second year new amount of wage-adjusted composite rate expenditures for all ESRD facilities.

After comparing these two dollar amounts (target amount divided by second year new amount), we calculated an adjustment factor that, when multiplied by the applicable CY 2007 ESRD wage index shown in Tables 5 and 6 below, will result in payments to each facility that will remain within the target amount of composite rate expenditures when totaled for all ESRD facilities. The proposed budget neutrality adjustment factor for the CY 2007 wage index is 1.053069.

To ensure budget neutrality we also must apply the BNF to the wage index floor of 0.8000 which results in a proposed adjusted wage index floor of 0.8425 for CY 2007.

d. ESRD Wage Index Tables

The following two tables show the proposed CY 2007 ESRD wage index, including the BNF adjustment, for urban areas (Table 5) and rural areas (Table 6).

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Table 5: Proposed CY 2007 Wage Index For Urban Areas Based On CBSA Labor Market Areas

CBSA Code	Urban Area (Constituent Counties)	Wage Index
10180	Abilene, TX Callahan County, TX Jones County, TX Taylor County, TX	0.8439
10380	Aguadilla-Isabela-San Sebastián, PR Aguada Municipio, PR Aguadilla Municipio, PR Añasco Municipio, PR Isabela Municipio, PR Lares Municipio, PR Moca Municipio, PR Rincón Municipio, PR San Sebastián Municipio, PR	0.8425
10420	Akron, OH Portage County, OH Summit County, OH	0.9097
10500	Albany, GA Baker County, GA Dougherty County, GA Lee County, GA Terrell County, GA Worth County, GA	0.9438
10580	Albany-Schenectady-Troy, NY Albany County, NY Rensselaer County, NY Saratoga County, NY Schenectady County, NY Schoharie County, NY	0.9199
10740	Albuquerque, NM Bernalillo County, NM Sandoval County, NM Torrance County, NM Valencia County, NM	0.9977

CBSA Code	Urban Area (Constituent Counties)	Wage Index
10780	Alexandria, LA Grant Parish, LA Rapides Parish, LA	0.8446
10900	Allentown-Bethlehem-Easton, PA-NJ Warren County, NJ Carbon County, PA Lehigh County, PA Northampton County, PA	1.0436
11020	Altoona, PA Blair County, PA	0.9190
11100	Amarillo, TX Armstrong County, TX Carson County, TX Potter County, TX Randall County, TX	0.9664
11180	Ames, IA Story County, IA	1.0296
11260	Anchorage, AK Anchorage Municipality, AK Matanuska-Susitna Borough, AK	1.2684
11300	Anderson, IN Madison County, IN	0.9256
11340	Anderson, SC Anderson County, SC	0.9434
11460	Ann Arbor, MI Washtenaw County, MI	1.1413
11500	Anniston-Oxford, AL Calhoun County, AL	0.8425
11540	Appleton, WI Calumet County, WI Outagamie County, WI	0.9975

CBSA Code	Urban Area (Constituent Counties)	Wage Index
11700	Asheville, NC Buncombe County, NC Haywood County, NC Henderson County, NC Madison County, NC	0.9576
12020	Athens-Clarke County, GA Clarke County, GA Madison County, GA Oconee County, GA Oglethorpe County, GA	1.0380
12060	Atlanta-Sandy Springs-Marietta, GA Barrow County, GA Bartow County, GA Butts County, GA Carroll County, GA Cherokee County, GA Clayton County, GA Cobb County, GA Coweta County, GA Dawson County, GA DeKalb County, GA Douglas County, GA Fayette County, GA Forsyth County, GA Fulton County, GA Gwinnett County, GA Haralson County, GA Heard County, GA Henry County, GA Jasper County, GA Lamar County, GA Meriwether County, GA Newton County, GA Paulding County, GA Pickens County, GA Pike County, GA Rockdale County, GA Spalding County, GA Walton County, GA	1.0291
12100	Atlantic City, NJ Atlantic County, NJ	1.2375
12220	Auburn-Opelika, AL Lee County, AL	0.8540

CBSA Code	Urban Area (Constituent Counties)	Wage Index
12260	Augusta-Richmond County, GA-SC Burke County, GA Columbia County, GA McDuffie County, GA Richmond County, GA Aiken County, SC Edgefield County, SC	1.0192
12420	Austin-Round Rock, TX Bastrop County, TX Caldwell County, TX Hays County, TX Travis County, TX Williamson County, TX	0.9857
12540	Bakersfield, CA Kern County, CA	1.1168
12580	Baltimore-Towson, MD Anne Arundel County, MD Baltimore County, MD Carroll County, MD Harford County, MD Howard County, MD Queen Anne's County, MD Baltimore City, MD	1.0642
12620	Bangor, ME Penobscot County, ME	1.0235
12700	Barnstable Town, MA Barnstable County, MA	1.3228
12940	Baton Rouge, LA Ascension Parish, LA East Baton Rouge Parish, LA East Feliciana Parish, LA Iberville Parish, LA Livingston Parish, LA Pointe Coupee Parish, LA St. Helena Parish, LA West Baton Rouge Parish, LA West Feliciana Parish, LA	0.8529
12980	Battle Creek, MI Calhoun County, MI	1.0263

CBSA Code	Urban Area (Constituent Counties)	Wage Index
13020	Bay City, MI Bay County, MI	0.9763
13140	Beaumont-Port Arthur, TX Hardin County, TX Jefferson County, TX Orange County, TX	0.9067
13380	Bellingham, WA Whatcom County, WA	1.1714
13460	Bend, OR Deschutes County, OR	1.1333
13644	Bethesda-Gaithersburg-Frederick, MD Frederick County, MD Montgomery County, MD	1.1503
13740	Billings, MT Carbon County, MT Yellowstone County, MT	0.9191
13780	Binghamton, NY Broome County, NY Tioga County, NY	0.9265
13820	Birmingham-Hoover, AL Bibb County, AL Blount County, AL Chilton County, AL Jefferson County, AL St. Clair County, AL Shelby County, AL Walker County, AL	0.9392
13900	Bismarck, ND Burleigh County, ND Morton County, ND	0.8425
13980	Blacksburg-Christiansburg-Radford, VA Giles County, VA Montgomery County, VA Pulaski County, VA Radford City, VA	0.8664

CBSA Code	Urban Area (Constituent Counties)	Wage Index
14020	Bloomington, IN Greene County, IN Monroe County, IN Owen County, IN	0.9002
14060	Bloomington-Normal, IL McLean County, IL	0.9435
14260	Boise City-Nampa, ID Ada County, ID Boise County, ID Canyon County, ID Gem County, ID Owyhee County, ID	0.9917
14484	Boston-Quincy, MA Norfolk County, MA Plymouth County, MA Suffolk County, MA	1.2314
14500	Boulder, CO Boulder County, CO	1.0918
14540	Bowling Green, KY Edmonson County, KY Warren County, KY	0.8595
14740	Bremerton-Silverdale, WA Kitsap County, WA	1.1512
14860	Bridgeport-Stamford-Norwalk, CT Fairfield County, CT	1.3354
15180	Brownsville-Harlingen, TX Cameron County, TX	0.9947
15260	Brunswick, GA Brantley County, GA Glynn County, GA McIntosh County, GA	1.0633
15380	Buffalo-Niagara Falls, NY Erie County, NY Niagara County, NY	0.9986
15500	Burlington, NC Alamance County, NC	0.9150

CBSA Code	Urban Area (Constituent Counties)	Wage Index
15540	Burlington-South Burlington, VT Chittenden County, VT Franklin County, VT Grand Isle County, VT	0.9995
15764	Cambridge-Newton-Framingham, MA Middlesex County, MA	1.1497
15804	Camden, NJ Burlington County, NJ Camden County, NJ Gloucester County, NJ	1.0964
15940	Canton-Massillon, OH Carroll County, OH Stark County, OH	0.9527
15980	Cape Coral-Fort Myers, FL Lee County, FL	0.9856
16180	Carson City, NV Carson City, NV	1.0576
16220	Casper, WY Natrona County, WY	0.9647
16300	Cedar Rapids, IA Benton County, IA Jones County, IA Linn County, IA	0.9375
16580	Champaign-Urbana, IL Champaign County, IL Ford County, IL Piatt County, IL	1.0174
16620	Charleston, WV Boone County, WV Clay County, WV Kanawha County, WV Lincoln County, WV Putnam County, WV	0.9012

CBSA Code	Urban Area (Constituent Counties)	Wage Index
16700	Charleston-North Charleston, SC Berkeley County, SC Charleston County, SC Dorchester County, SC	0.9642
16740	Charlotte-Gastonia-Concord, NC-SC Anson County, NC Cabarrus County, NC Gaston County, NC Mecklenburg County, NC Union County, NC York County, SC	1.0072
16820	Charlottesville, VA Albemarle County, VA Fluvanna County, VA Greene County, VA Nelson County, VA Charlottesville City, VA	1.0681
16860	Chattanooga, TN-GA Catoosa County, GA Dade County, GA Walker County, GA Hamilton County, TN Marion County, TN Sequatchie County, TN	0.9439
16940	Cheyenne, WY Laramie County, WY	0.9558
16974	Chicago-Naperville-Joliet, IL Cook County, IL DeKalb County, IL DuPage County, IL Grundy County, IL Kane County, IL Kendall County, IL McHenry County, IL Will County, IL	1.1315
17020	Chico, CA Butte County, CA	1.1661

CBSA Code	Urban Area (Constituent Counties)	Wage Index
17140	Cincinnati-Middletown, OH-KY-IN Dearborn County, IN Franklin County, IN Ohio County, IN Boone County, KY Bracken County, KY Campbell County, KY Gallatin County, KY Grant County, KY Kenton County, KY Pendleton County, KY Brown County, OH Butler County, OH Clermont County, OH Hamilton County, OH Warren County, OH	1.0127
17300	Clarksville, TN-KY Christian County, KY Trigg County, KY Montgomery County, TN Stewart County, TN	0.8899
17420	Cleveland, TN Bradley County, TN Polk County, TN	0.8555
17460	Cleveland-Elyria-Mentor, OH Cuyahoga County, OH Geauga County, OH Lake County, OH Lorain County, OH Medina County, OH	0.9883
17660	Cocur d'Alene, ID Kootenai County, ID	0.9857
17780	College Station-Bryan, TX Brazos County, TX Burleson County, TX Robertson County, TX	0.9542
17820	Colorado Springs, CO El Paso County, CO Teller County, CO	1.0234
17860	Columbia, MO Boone County, MO Howard County, MO	0.9011

CBSA Code	Urban Area (Constituent Counties)	Wage Index
17900	Columbia, SC Calhoun County, SC Fairfield County, SC Kershaw County, SC Lexington County, SC Richland County, SC Saluda County, SC	0.8454
17980	Columbus, GA-AL Russell County, AL Chattahoochee County, GA Harris County, GA Marion County, GA Muscogee County, GA	0.8692
18020	Columbus, IN Bartholomew County, IN	0.9829
18140	Columbus, OH Delaware County, OH Fairfield County, OH Franklin County, OH Licking County, OH Madison County, OH Morrow County, OH Pickaway County, OH Union County, OH	1.0659
18580	Corpus Christi, TX Aransas County, TX Nueces County, TX San Patricio County, TX	0.9034
18700	Corvallis, OR Benton County, OR	1.2180
19060	Cumberland, MD-WV Allegany County, MD Mineral County, WV	0.9329
19124	Dallas-Plano-Irving, TX Collin County, TX Dallas County, TX Delta County, TX Denton County, TX Ellis County, TX Hunt County, TX Kaufman County, TX Rockwall County, TX	1.0629

CBSA Code	Urban Area (Constituent Counties)	Wage Index
19140	Dalton, GA Murray County, GA Whitfield County, GA	0.9542
19180	Danville, IL Vermilion County, IL	0.9776
19260	Danville, VA Pittsylvania County, VA Danville City, VA	0.8915
19340	Davenport-Moline-Rock Island, IA-IL Henry County, IL Mercer County, IL Rock Island County, IL Scott County, IA	0.9011
19380	Dayton, OH Greene County, OH Miami County, OH Montgomery County, OH Preble County, OH	0.9533
19460	Decatur, AL Lawrence County, AL Morgan County, AL	0.8656
19500	Decatur, IL Macon County, IL	0.8621
19660	Deltona-Daytona Beach-Ormond Beach, FL Volusia County, FL	0.9772
19740	Denver-Aurora, CO Adams County, CO Arapahoe County, CO Broomfield County, CO Clear Creek County, CO Denver County, CO Douglas County, CO Elbert County, CO Gilpin County, CO Jefferson County, CO Park County, CO	1.1528

CBSA Code	Urban Area (Constituent Counties)	Wage Index
19780	Des Moines-West Des Moines, IA Dallas County, IA Guthrie County, IA Madison County, IA Polk County, IA Warren County, IA	0.9621
19804	Detroit-Livonia-Dearborn, MI Wayne County, MI	1.0766
20020	Dothan, AL Geneva County, AL Henry County, AL Houston County, AL	0.8425
20100	Dover, DE Kent County, DE	1.0389
20220	Dubuque, IA Dubuque County, IA	0.9636
20260	Duluth, MN-WI Carlton County, MN St. Louis County, MN Douglas County, WI	1.0604
20500	Durham, NC Chatham County, NC Durham County, NC Orange County, NC Person County, NC	1.0365
20740	Eau Claire, WI Chippewa County, WI Eau Claire County, WI	1.0159
20764	Edison, NJ Middlesex County, NJ Monmouth County, NJ Ocean County, NJ Somerset County, NJ	1.1802
20940	El Centro, CA Imperial County, CA	0.9575
21060	Elizabethtown, KY Hardin County, KY Larue County, KY	0.9175
21140	Elkhart-Goshen, IN Elkhart County, IN	0.9943

CBSA Code	Urban Area (Constituent Counties)	Wage Index
21300	Elmira, NY Chemung County, NY	0.8649
21340	El Paso, TX El Paso County, TX	0.9550
21500	Erie, PA Erie County, PA	0.9166
21604	Essex County, MA Essex County, MA	1.0991
21660	Eugene-Springfield, OR Lane County, OR	1.1474
21780	Evansville, IN-KY Gibson County, IN Posey County, IN Vanderburgh County, IN Warrick County, IN Henderson County, KY Webster County, KY	0.9299
21820	Fairbanks, AK Fairbanks North Star Borough, AK	1.1667
21940	Fajardo, PR Ceiba Municipio, PR Fajardo Municipio, PR Luquillo Municipio, PR	0.8425
22020	Fargo, ND-MN Cass County, ND Clay County, MN	0.8704
22140	Farmington, NM San Juan County, NM	0.9061
22180	Fayetteville, NC Cumberland County, NC Hoke County, NC	0.9437
22220	Fayetteville-Springdale-Rogers, AR-MO Benton County, AR Madison County, AR Washington County, AR McDonald County, MO	0.9226

CBSA Code	Urban Area (Constituent Counties)	Wage Index
22380	Flagstaff, AZ Coconino County, AZ	1.2238
22420	Flint, MI Genesee County, MI	1.1571
22500	Florence, SC Darlington County, SC Florence County, SC	0.8868
22520	Florence-Muscle Shoals, AL Colbert County, AL Lauderdale County, AL	0.8425
22540	Fond du Lac, WI Fond du Lac County, WI	1.0616
22660	Fort Collins-Loveland, CO Larimer County, CO	1.0068
22744	Fort Lauderdale-Pompano Beach-Deerfield Beach, FL Broward County, FL	1.0690
22900	Fort Smith, AR-OK Crawford County, AR Franklin County, AR Sebastian County, AR Le Flore County, OK Sequoyah County, OK	0.8425
23020	Fort Walton Beach-Crestview-Destin, FL Okaloosa County, FL	0.9117
23060	Fort Wayne, IN Allen County, IN Wells County, IN Whitley County, IN	1.0008
23104	Fort Worth-Arlington, TX Johnson County, TX Parker County, TX Tarrant County, TX Wise County, TX	1.0096
23420	Fresno, CA Fresno County, CA	1.1547

CBSA Code	Urban Area (Constituent Counties)	Wage Index
23460	Gadsden, AL Etowah County, AL	0.8509
23540	Gainesville, FL Alachua County, FL Gilchrist County, FL	0.9806
23580	Gainesville, GA Hall County, GA	0.9450
23844	Gary, IN Jasper County, IN Lake County, IN Newton County, IN Porter County, IN	0.9774
24020	Glens Falls, NY Warren County, NY Washington County, NY	0.8782
24140	Goldsboro, NC Wayne County, NC	0.9675
24220	Grand Forks, ND-MN Polk County, MN Grand Forks County, ND	0.8425
24300	Grand Junction, CO Mesa County, CO	1.0199
24340	Grand Rapids-Wyoming, MI Barry County, MI Ionia County, MI Kent County, MI Newaygo County, MI	0.9973
24500	Great Falls, MT Cascade County, MT	0.9070
24540	Greeley, CO Weld County, CO	1.0129
24580	Green Bay, WI Brown County, WI Kewaunee County, WI Oconto County, WI	1.0324

CBSA Code	Urban Area (Constituent Counties)	Wage Index
24660	Greensboro-High Point, NC Guilford County, NC Randolph County, NC Rockingham County, NC	0.9199
24780	Greenville, NC Greene County, NC Pitt County, NC	0.9950
24860	Greenville, SC Greenville County, SC Laurens County, SC Pickens County, SC	1.0250
25020	Guayama, PR Arroyo Municipio, PR Guayama Municipio, PR Patillas Municipio, PR	0.8425
25060	Gulfport-Biloxi, MS Hancock County, MS Harrison County, MS Stone County, MS	0.9405
25180	Hagerstown-Martinsburg, MD-WV Washington County, MD Berkeley County, WV Morgan County, WV	0.9534
25260	Hanford-Corcoran, CA Kings County, CA	1.0680
25420	Harrisburg-Carlisle, PA Cumberland County, PA Dauphin County, PA Perry County, PA	0.9919
25500	Harrisonburg, VA Rockingham County, VA Harrisonburg City, VA	0.9572

CBSA Code	Urban Area (Constituent Counties)	Wage Index
25540	Hartford-West Hartford-East Hartford, CT Hartford County, CT Litchfield County, CT Middlesex County, CT Tolland County, CT	1.1495
25620	Hattiesburg, MS Forrest County, MS Lamar County, MS Perry County, MS	0.8425
25860	Hickory-Lenoir-Morganton, NC Alexander County, NC Burke County, NC Caldwell County, NC Catawba County, NC	0.9500
25980	Hinesville-Fort Stewart, GA Liberty County, GA Long County, GA	0.9649
26100	Holland-Grand Haven, MI Ottawa County, MI	0.9694
26180	Honolulu, HI Honolulu County, HI	1.1654
26300	Hot Springs, AR Garland County, AR	0.9264
26380	Houma-Bayou Cane-Thibodaux, LA Lafourche Parish, LA Terrebonne Parish, LA	0.8428
26420	Houston-Sugar Land-Baytown, TX Austin County, TX Brazoria County, TX Chambers County, TX Fort Bend County, TX Galveston County, TX Harris County, TX Liberty County, TX Montgomery County, TX San Jacinto County, TX Waller County, TX	1.0558

CBSA Code	Urban Area (Constituent Counties)	Wage Index
26580	Huntington-Ashland, WV-KY-OH Boyd County, KY Greenup County, KY Lawrence County, OH Cabell County, WV Wayne County, WV	0.9491
26620	Huntsville, AL Limestone County, AL Madison County, AL	0.9531
26820	Idaho Falls, ID Bonneville County, ID Jefferson County, ID	0.9587
26900	Indianapolis-Carmel, IN Boone County, IN Brown County, IN Hamilton County, IN Hancock County, IN Hendricks County, IN Johnson County. IN Marion County. IN Morgan County. IN Putnam County, IN Shelby County, IN	1.0284
26980	Iowa City, IA Johnson County, IA Washington County, IA	1.0247
27060	Ithaca, NY Tompkins County, NY	1.0353
27100	Jackson, MI Jackson County, MI	1.0085
27140	Jackson, MS Copiah County, MS Hinds County, MS Madison County, MS Rankin County, MS Simpson County, MS	0.8726
27180	Jackson, TN Chester County, TN Madison County, TN	0.9340

CBSA Code	Urban Area (Constituent Counties)	Wage Index
27260	Jacksonville, FL Baker County, FL Clay County, FL Duval County, FL Nassau County, FL St. Johns County, FL	0.9522
27340	Jacksonville, NC Onslow County, NC	0.8683
27500	Janesville, WI Rock County, WI	1.0185
27620	Jefferson City, MO Callaway County, MO Cole County, MO Moniteau County, MO Osage County, MO	0.8790
27740	Johnson City, TN Carter County, TN Unicoi County, TN Washington County, TN	0.8485
27780	Johnstown, PA Cambria County, PA	0.9093
27860	Jonesboro, AR Craighead County, AR Poinsett County, AR	0.8425
27900	Joplin, MO Jasper County, MO Newton County, MO	0.9077
28020	Kalamazoo-Portage, MI Kalamazoo County, MI Van Buren County, MI	1.1292
28100	Kankakee-Bradley, IL Kankakee County, IL	1.0520
28140	Kansas City, MO-KS Franklin County, KS Johnson County, KS Leavenworth County, KS Linn County, KS Miami County, KS Wyandotte County, KS Bates County, MO Caldwell County, MO Cass County, MO	1.0019

CBSA Code	Urban Area (Constituent Counties)	Wage Index
	Clay County, MO Clinton County, MO Jackson County, MO Lafayette County, MO Platte County, MO Ray County, MO	
28420	Kennewick-Richland-Pasco, WA Benton County, WA Franklin County, WA	1.0911
28660	Killeen-Temple-Fort Hood, TX Bell County, TX Coryell County, TX Lampasas County, TX	0.9581
28700	Kingsport-Bristol-Bristol, TN-VA Hawkins County, TN Sullivan County, TN Bristol City, VA Scott County, VA Washington County, VA	0.8425
28740	Kingston, NY Ulster County, NY	0.9881
28940	Knoxville, TN Anderson County, TN Blount County, TN Knox County, TN Loudon County, TN Union County, TN	0.8702
29020	Kokomo, IN Howard County, IN Tipton County, IN	0.9962
29100	La Crosse, WI-MN Houston County, MN La Crosse County, WI	0.9943
29140	Lafayette, IN Benton County, IN Carroll County, IN Tippecanoe County, IN	0.9448

CBSA Code	Urban Area (Constituent Counties)	Wage Index
29180	Lafayette, LA Lafayette Parish, LA St. Martin Parish, LA	0.8733
29340	Lake Charles, LA Calcasieu Parish, LA Cameron Parish, LA	0.8425
29404	Lake County-Kenosha County, IL-WI Lake County, IL Kenosha County, WI	1.0958
29460	Lakeland, FL Polk County, FL	0.9367
29540	Lancaster, PA Lancaster County, PA	1.0156
29620	Lansing-East Lansing, MI Clinton County, MI Eaton County, MI Ingham County, MI	1.0638
29700	Laredo, TX Webb County, TX	0.8425
29740	Las Cruces, NM Dona Ana County, NM	0.9783
29820	Las Vegas-Paradise, NV Clark County, NV	1.2058
29940	Lawrence, KS Douglas County, KS	0.8796
30020	Lawton, OK Comanche County, OK	0.8509
30140	Lebanon, PA Lebanon County, PA	0.9156
30300	Lewiston, ID-WA Nez Perce County, ID Asotin County, WA	1.0395
30340	Lewiston-Auburn, ME Androscoggin County, ME	0.9633

CBSA Code	Urban Area (Constituent Counties)	Wage Index
30460	Lexington-Fayette, KY Bourbon County, KY Clark County, KY Fayette County, KY Jessamine County, KY Scott County, KY Woodford County, KY	0.9679
30620	Lima, OH Allen County, OH	0.9539
30700	Lincoln, NE Lancaster County, NE Seward County, NE	1.0647
30780	Little Rock-North Little Rock, AR Faulkner County, AR Grant County, AR Lonoke County, AR Perry County, AR Pulaski County, AR Saline County, AR	0.9379
30860	Logan, UT-ID Franklin County, ID Cache County, UT	0.9518
30980	Longview, TX Gregg County, TX Rusk County, TX Upshur County, TX	0.9270
31020	Longview, WA Cowlitz County, WA	1.0561
31084	Los Angeles-Long Beach-Glendale, CA Los Angeles County, CA	1.2376

CBSA Code	Urban Area (Constituent Counties)	Wage Index
31140	Louisville-Jefferson County, KY-IN Clark County, IN Floyd County, IN Harrison County, IN Washington County, IN Bullitt County, KY Henry County, KY Jefferson County, KY Meade County, KY Nelson County, KY Oldham County, KY Shelby County, KY Spencer County, KY Trimble County, KY	0.9620
31180	Lubbock, TX Crosby County, TX Lubbock County, TX	0.9086
31340	Lynchburg, VA Amherst County, VA Appomattox County, VA Bedford County, VA Campbell County, VA Bedford City, VA Lynchburg City, VA	0.9172
31420	Macon, GA Bibb County, GA Crawford County, GA Jones County, GA Monroe County, GA Twiggs County, GA	1.0023
31460	Madera, CA Madera County, CA	0.8603
31540	Madison, WI Columbia County, WI Dane County, WI Iowa County, WI	1.1306
31700	Manchester-Nashua, NH Hillsborough County, NH Merrimack County, NH	1.0806
31900	Mansfield, OH Richland County, OH	0.9780

CBSA Code	Urban Area (Constituent Counties)	Wage Index
32420	Mayagüez, PR Hormigueros Municipio, PR Mayagüez Municipio, PR	0.8425
32580	McAllen-Edinburg-Mission, TX Hidalgo County, TX	0.9254
32780	Medford, OR Jackson County, OR	1.1412
32820	Memphis, TN-MS-AR Crittenden County, AR DeSoto County, MS Marshall County, MS Tate County, MS Tunica County, MS Fayette County, TN Shelby County, TN Tipton County, TN	0.9858
32900	Merced, CA Merced County, CA	1.2021
33124	Miami-Miami Beach-Kendall, FL Miami-Dade County, FL	1.0352
33140	Michigan City-La Porte, IN LaPorte County, IN	0.9576
33260	Midland, TX Midland County, TX	1.0323
33340	Milwaukee-Waukesha-West Allis, WI Milwaukee County, WI Ozaukee County, WI Washington County, WI Waukesha County, WI	1.0779

CBSA Code	Urban Area (Constituent Counties)	Wage Index
33460	Minneapolis-St. Paul-Bloomington, MN-WI Anoka County, MN Carver County, MN Chisago County, MN Dakota County, MN Hennepin County, MN Isanti County, MN Ramsey County, MN Scott County, MN Sherburne County, MN Washington County, MN Wright County, MN Pierce County, WI St. Croix County, WI	1.1547
33540	Missoula, MT Missoula County, MT	0.9419
33660	Mobile, AL Mobile County, AL	0.8425
33700	Modesto, CA Stanislaus County, CA	1.2205
33740	Monroe, LA Ouachita Parish, LA Union Parish, LA	0.8436
33780	Monroe, MI Monroe County, MI	1.0241
33860	Montgomery, AL Autauga County, AL Elmore County, AL Lowndes County, AL Montgomery County, AL	0.8449
34060	Morgantown, WV Monongalia County, WV Preston County, WV	0.8886
34100	Morristown, TN Grainger County, TN Hamblen County, TN Jefferson County, TN	0.8425
34580	Mount Vernon-Anacortes, WA Skagit County, WA	1.1095

CBSA Code	Urban Area (Constituent Counties)	Wage Index
34620	Muncie, IN Delaware County, IN	0.8739
34740	Muskegon-Norton Shores, MI Muskegon County, MI	1.0485
34820	Myrtle Beach-Conway-North Myrtle Beach, SC Horry County, SC	0.9292
34900	Napa, CA Napa County, CA	1.4212
34940	Naples-Marco Island, FL Collier County, FL	1.0488
34980	Nashville-Davidson--Murfreesboro, TN Cannon County, TN Cheatham County, TN Davidson County, TN Dickson County, TN Hickman County, TN Macon County, TN Robertson County, TN Rutherford County, TN Smith County, TN Sumner County, TN Trousdale County, TN Williamson County, TN Wilson County, TN	1.0385
35004	Nassau-Suffolk, NY Nassau County, NY Suffolk County, NY	1.3354
35084	Newark-Union, NJ-PA Essex County, NJ Hunterdon County, NJ Morris County, NJ Sussex County, NJ Union County, NJ Pike County, PA	1.2521
35300	New Haven-Milford, CT New Haven County, CT	1.2609

CBSA Code	Urban Area (Constituent Counties)	Wage Index
35380	New Orleans-Metairie-Kenner, LA Jefferson Parish, LA Orleans Parish, LA Plaquemines Parish, LA St. Bernard Parish, LA St. Charles Parish, LA St. John the Baptist Parish, LA St. Tammany Parish, LA	0.9328
35644	New York-White Plains-Wayne, NY-NJ Bergen County, NJ Hudson County, NJ Passaic County, NJ Bronx County, NY Kings County, NY New York County, NY Putnam County, NY Queens County, NY Richmond County, NY Rockland County, NY Westchester County, NY	1.3909
35660	Niles-Benton Harbor, MI Berrien County, MI	0.9405
35980	Norwich-New London, CT New London County, CT	1.2587
36084	Oakland-Fremont-Hayward, CA Alameda County, CA Contra Costa County, CA	1.6238
36100	Ocala, FL Marion County, FL	0.9354
36140	Ocean City, NJ Cape May County, NJ	1.1047
36220	Odessa, TX Ector County, TX	1.0656
36260	Ogden-Clearfield, UT Davis County, UT Morgan County, UT Weber County, UT	0.9489

CBSA Code	Urban Area (Constituent Counties)	Wage Index
36420	Oklahoma City, OK Canadian County, OK Cleveland County, OK Grady County, OK Lincoln County, OK Logan County, OK McClain County, OK Oklahoma County, OK	0.9323
36500	Olympia, WA Thurston County, WA	1.1689
36540	Omaha-Council Bluffs, NE-IA Harrison County, IA Mills County, IA Pottawattamie County, IA Cass County, NE Douglas County, NE Sarpy County, NE Saunders County, NE Washington County, NE	0.9969
36740	Orlando-Kissimmee, FL Lake County, FL Orange County, FL Osceola County, FL Seminole County, FL	0.9922
36780	Oshkosh-Neenah, WI Winnebago County, WI	0.9827
36980	Owensboro, KY Daviess County, KY Hancock County, KY McLean County, KY	0.9228
37100	Oxnard-Thousand Oaks-Ventura, CA Ventura County, CA	1.2206
37340	Palm Bay-Melbourne-Titusville, FL Brevard County, FL	0.9949
37460	Panama City-Lynn Haven, FL Bay County, FL	0.8516

CBSA Code	Urban Area (Constituent Counties)	Wage Index
37620	Parkersburg-Marietta-Vienna, WV-OH Washington County, OH Pleasants County, WV Wirt County, WV Wood County, WV	0.8425
37700	Pascagoula, MS George County, MS Jackson County, MS	0.8667
37860	Pensacola-Ferry Pass-Brent, FL Escambia County, FL Santa Rosa County, FL	0.8439
37900	Peoria, IL Marshall County, IL Peoria County, IL Stark County, IL Tazewell County, IL Woodford County, IL	0.9476
37964	Philadelphia, PA Bucks County, PA Chester County, PA Delaware County, PA Montgomery County, PA Philadelphia County, PA	1.1603
38060	Phoenix-Mesa-Scottsdale, AZ Maricopa County, AZ Pinal County, AZ	1.0852
38220	Pine Bluff, AR Cleveland County, AR Jefferson County, AR Lincoln County, AR	0.8844
38300	Pittsburgh, PA Allegheny County, PA Armstrong County, PA Beaver County, PA Butler County, PA Fayette County, PA Washington County, PA Westmoreland County, PA	0.9146
38340	Pittsfield, MA Berkshire County, MA	1.0830

CBSA Code	Urban Area (Constituent Counties)	Wage Index
38540	Pocatello, ID Bannock County, ID Power County, ID	0.9917
38660	Ponce, PR Juana Díaz Municipio, PR Ponce Municipio, PR Villalba Municipio, PR	0.8425
38860	Portland-South Portland-Biddeford, ME Cumberland County, ME Sagadahoc County, ME York County, ME	1.0453
38900	Portland-Vancouver-Beaverton, OR-WA Clackamas County, OR Columbia County, OR Multnomah County, OR Washington County, OR Yamhill County, OR Clark County, WA Skamania County, WA	1.2043
38940	Port St. Lucie-Fort Pierce, FL Martin County, FL St. Lucie County, FL	1.0374
39100	Poughkeepsie-Newburgh-Middletown, NY Dutchess County, NY Orange County, NY	1.1492
39140	Prescott, AZ Yavapai County, AZ	1.0376
39300	Providence-New Bedford-Fall River, RI-MA Bristol County, MA Bristol County, RI Kent County, RI Newport County, RI Providence County, RI Washington County, RI	1.1377
39340	Provo-Orem, UT Juab County, UT Utah County, UT	1.0061
39380	Pueblo, CO Pueblo County, CO	0.9006

CBSA Code	Urban Area (Constituent Counties)	Wage Index
39460	Punta Gorda, FL Charlotte County, FL	0.9921
39540	Racine, WI Racine County, WI	0.9680
39580	Raleigh-Cary, NC Franklin County, NC Johnston County, NC Wake County, NC	1.0403
39660	Rapid City, SD Meade County, SD Pennington County, SD	1.0900
39740	Reading, PA Berks County, PA	1.0151
39820	Redding, CA Shasta County, CA	1.3923
39900	Reno-Sparks, NV Storey County, NV Washoe County, NV	1.2620
40060	Richmond, VA Amelia County, VA Caroline County, VA Charles City County, VA Chesterfield County, VA Cumberland County, VA Dinwiddie County, VA Goochland County, VA Hanover County, VA Henrico County, VA King and Queen County, VA King William County, VA Louisa County, VA New Kent County, VA Powhatan County, VA Prince George County, VA Sussex County, VA Colonial Heights City, VA Hopewell City, VA Petersburg City, VA Richmond City, VA	0.9681
40140	Riverside-San Bernardino-Ontario, CA Riverside County, CA San Bernardino County, CA	1.1514

CBSA Code	Urban Area (Constituent Counties)	Wage Index
40220	Roanoke, VA Botetourt County, VA Craig County, VA Franklin County, VA Roanoke County, VA Roanoke City, VA Salem City, VA	0.9122
40340	Rochester, MN Dodge County, MN Olmsted County, MN Wabasha County, MN	1.1858
40380	Rochester, NY Livingston County, NY Monroe County, NY Ontario County, NY Orleans County, NY Wayne County, NY	0.9483
40420	Rockford, IL Boone County, IL Winnebago County, IL	1.0538
40484	Rockingham County-Strafford County, NH Rockingham County, NH Strafford County, NH	1.0717
40580	Rocky Mount, NC Edgecombe County, NC Nash County, NC	0.9340
40660	Rome, GA Floyd County, GA	0.9810
40900	Sacramento--Arden-Arcade--Roseville, CA El Dorado County, CA Placer County, CA Sacramento County, CA Yolo County, CA	1.4083
40980	Saginaw-Saginaw Township North, MI Saginaw County, MI	0.9361

CBSA Code	Urban Area (Constituent Counties)	Wage Index
41060	St. Cloud, MN Benton County, MN Stearns County, MN	1.0931
41100	St. George, UT Washington County, UT	0.9774
41140	St. Joseph, MO-KS Doniphan County, KS Andrew County, MO Buchanan County, MO DeKalb County, MO	1.0674
41180	St. Louis, MO-IL Bond County, IL Calhoun County, IL Clinton County, IL Jersey County, IL Macoupin County, IL Madison County, IL Monroe County, IL St. Clair County, IL Crawford County, MO Franklin County, MO Jefferson County, MO Lincoln County, MO St. Charles County, MO St. Louis County, MO Warren County, MO Washington County, MO St. Louis City, MO	0.9491
41420	Salem, OR Marion County, OR Polk County, OR	1.1012
41500	Salinas, CA Monterey County, CA	1.5226
41540	Salisbury, MD Somerset County, MD Wicomico County, MD	0.9445
41620	Salt Lake City, UT Salt Lake County, UT Summit County, UT Tooele County, UT	0.9918

CBSA Code	Urban Area (Constituent Counties)	Wage Index
41660	San Angelo, TX Irion County, TX Tom Green County, TX	0.8822
41700	San Antonio, TX Atascosa County, TX Bandera County, TX Bexar County, TX Comal County, TX Guadalupe County, TX Kendall County, TX Medina County, TX Wilson County, TX	0.9330
41740	San Diego-Carlsbad-San Marcos, CA San Diego County, CA	1.1978
41780	Sandusky, OH Erie County, OH	0.9814
41884	San Francisco-San Mateo-Redwood City, CA Marin County, CA San Francisco County, CA San Mateo County, CA	1.5871
41900	San Germán-Cabo Rojo, PR Cabo Rojo Municipio, PR Lajas Municipio, PR Sabana Grande Municipio, PR San Germán Municipio, PR	0.8425
41940	San Jose-Sunnyvale-Santa Clara, CA San Benito County, CA Santa Clara County, CA	1.6105
41980	San Juan-Caguas-Guaynabo, PR Aguas Buenas Municipio, PR Aibonito Municipio, PR Arecibo Municipio, PR Barceloneta Municipio, PR Barranquitas Municipio, PR Bayamón Municipio, PR Caguas Municipio, PR Camuy Municipio, PR Canóvanas Municipio, PR Carolina Municipio, PR Cataño Municipio, PR Cayey Municipio, PR	0.8425

CBSA Code	Urban Area (Constituent Counties)	Wage Index
	Ciales Municipio, PR Cidra Municipio, PR Comerío Municipio, PR Corozal Municipio, PR Dorado Municipio, PR Florida Municipio, PR Guaynabo Municipio, PR Gurabo Municipio, PR Hatillo Municipio, PR Humacao Municipio, PR Juncos Municipio, PR Las Piedras Municipio, PR Loíza Municipio, PR Manatí Municipio, PR Maunabo Municipio, PR Morovis Municipio, PR Naguabo Municipio, PR Naranjito Municipio, PR Orocovis Municipio, PR Quebradillas Municipio, PR Río Grande Municipio, PR San Juan Municipio, PR San Lorenzo Municipio, PR Toa Alta Municipio, PR Toa Baja Municipio, PR Trujillo Alto Municipio, PR Vega Alta Municipio, PR Vega Baja Municipio, PR Yabucoa Municipio, PR	
42020	San Luis Obispo-Paso Robles, CA San Luis Obispo County, CA	1.2236
42044	Santa Ana-Anaheim-Irvine, CA Orange County, CA	1.1893
42060	Santa Barbara-Santa Maria, CA Santa Barbara County, CA	1.1663
42100	Santa Cruz-Watsonville, CA Santa Cruz County, CA	1.6355
42140	Santa Fe, NM Santa Fe County, NM	1.1418
42220	Santa Rosa-Petaluma, CA Sonoma County, CA	1.5258
42260	Sarasota-Bradenton-Venice, FL Manatee County, FL Sarasota County, FL	1.0410

CBSA Code	Urban Area (Constituent Counties)	Wage Index
42340	Savannah, GA Bryan County, GA Chatham County, GA Effingham County, GA	0.9569
42540	Scranton--Wilkes-Barre, PA Lackawanna County, PA Luzerne County, PA Wyoming County, PA	0.8973
42644	Seattle-Bellevue-Everett, WA	1.2062
42680	Sebastian-Vero Beach, FL Indian River County, FL	1.0099
43100	Sheboygan, WI Sheboygan County, WI	0.9522
43300	Sherman-Denison, TX Grayson County, TX	0.8969
43340	Shreveport-Bossier City, LA Bossier Parish, LA Caddo Parish, LA De Soto Parish, LA	0.9352
43580	Sioux City, IA-NE-SD Woodbury County, IA Dakota County, NE Dixon County, NE Union County, SD	0.9706
43620	Sioux Falls, SD Lincoln County, SD McCook County, SD Minnehaha County, SD Turner County, SD	1.0096
43780	South Bend-Mishawaka, IN-MI St. Joseph County, IN Cass County, MI	1.0204
43900	Spartanburg, SC Spartanburg County, SC	0.9678
44060	Spokane, WA Spokane County, WA	1.1020

CBSA Code	Urban Area (Constituent Counties)	Wage Index
44100	Springfield, IL Menard County, IL Sangamon County, IL	0.9378
44140	Springfield, MA Franklin County, MA Hampden County, MA Hampshire County, MA	1.0615
44180	Springfield, MO Christian County, MO Dallas County, MO Greene County, MO Polk County, MO Webster County, MO	0.8934
44220	Springfield, OH Clark County, OH	0.8911
44300	State College, PA Centre County, PA	0.9266
44700	Stockton, CA San Joaquin County, CA	1.2070
44940	Sumter, SC Sumter County, SC	0.8528
45060	Syracuse, NY Madison County, NY Onondaga County, NY Oswego County, NY	1.0224
45104	Tacoma, WA Pierce County, WA	1.1382
45220	Tallahassee, FL Gadsden County, FL Jefferson County, FL Leon County, FL Wakulla County, FL	0.9792
45300	Tampa-St. Petersburg-Clearwater, FL Hernando County, FL Hillsborough County, FL Pasco County, FL Pinellas County, FL	0.9646

CBSA Code	Urban Area (Constituent Counties)	Wage Index
45460	Terre Haute, IN Clay County, IN Sullivan County, IN Vermillion County, IN Vigo County, IN	0.9121
45500	Texarkana, TX-Texarkana, AR Miller County, AR Bowie County, TX	0.8549
45780	Toledo, OH Fulton County, OH Lucas County, OH Ottawa County, OH Wood County, OH	1.0108
45820	Topeka, KS Jackson County, KS Jefferson County, KS Osage County, KS Shawnee County, KS Wabaunsee County, KS	0.9210
45940	Trenton-Ewing, NJ Mercer County, NJ	1.1454
46060	Tucson, AZ Pima County, AZ	0.9708
46140	Tulsa, OK Creek County, OK Okmulgee County, OK Osage County, OK Pawnee County, OK Rogers County, OK Tulsa County, OK Wagoner County, OK	0.8534
46220	Tuscaloosa, AL Greene County, AL Hale County, AL Tuscaloosa County, AL	0.9100
46340	Tyler, TX Smith County, TX	0.9295
46540	Utica-Rome, NY Herkimer County, NY Oneida County, NY	0.8848

CBSA Code	Urban Area (Constituent Counties)	Wage Index
46660	Valdosta, GA Brooks County, GA Echols County, GA Lanier County, GA Lowndes County, GA	0.8787
46700	Vallejo-Fairfield, CA Solano County, CA	1.5969
47020	Victoria, TX Calhoun County, TX Goliad County, TX Victoria County, TX	0.9030
47220	Vineland-Millville-Bridgeton, NJ Cumberland County, NJ	1.0372
47260	Virginia Beach-Norfolk-Newport News, VA-NC Currituck County, NC Gloucester County, VA Isle of Wight County, VA James City County, VA Mathews County, VA Surry County, VA York County, VA Chesapeake City, VA Hampton City, VA Newport News City, VA Norfolk City, VA Poquoson City, VA Portsmouth City, VA Suffolk City, VA Virginia Beach City, VA Williamsburg City, VA	0.9272
47300	Visalia-Porterville, CA Tulare County, CA	1.0516
47380	Waco, TX McLennan County, TX	0.9107
47580	Warner Robins, GA Houston County, GA	0.8839
47644	Warren-Troy-Farmington Hills, MI Lapeer County, MI Livingston County, MI Macomb County, MI Oakland County, MI St. Clair County, MI	1.0663

CBSA Code	Urban Area (Constituent Counties)	Wage Index
47894	Washington-Arlington-Alexandria, DC-VA-MD-WV District of Columbia, DC Calvert County, MD Charles County, MD Prince George's County, MD Arlington County, VA Clarke County, VA Fairfax County, VA Fauquier County, VA Loudoun County, VA Prince William County, VA Spotsylvania County, VA Stafford County, VA Warren County, VA Alexandria City, VA Fairfax City, VA Falls Church City, VA Fredericksburg City, VA Manassas City, VA Manassas Park City, VA Jefferson County, WV	1.1662
47940	Waterloo-Cedar Falls, IA Black Hawk County, IA Bremer County, IA Grundy County, IA	0.8869
48140	Wausau, WI Marathon County, WI	1.0257
48260	Weirton-Steubenville, WV-OH Jefferson County, OH Brooke County, WV Hancock County, WV	0.8507
48300	Wenatchee, WA Chelan County, WA Douglas County, WA	1.0915
48424	West Palm Beach-Boca Raton-Boynton Beach, FL Palm Beach County, FL	1.0169
48540	Wheeling, WV-OH Belmont County, OH Marshall County, WV Ohio County, WV	0.8425

CBSA Code	Urban Area (Constituent Counties)	Wage Index
48620	Wichita, KS Butler County, KS Harvey County, KS Sedgwick County, KS Sumner County, KS	0.9561
48660	Wichita Falls, TX Archer County, TX Clay County, TX Wichita County, TX	0.8768
48700	Williamsport, PA Lycoming County, PA	0.8557
48864	Wilmington, DE-MD-NJ New Castle County, DE Cecil County, MD Salem County, NJ	1.1271
48900	Wilmington, NC Brunswick County, NC New Hanover County, NC Pender County, NC	1.0376
49020	Winchester, VA-WV Frederick County, VA Winchester City, VA Hampshire County, WV	1.0645
49180	Winston-Salem, NC Davie County, NC Forsyth County, NC Stokes County, NC Yadkin County, NC	0.9786
49340	Worcester, MA Worcester County, MA	1.1311
49420	Yakima, WA Yakima County, WA	1.0389

CBSA Code	Urban Area (Constituent Counties)	Wage Index
49500	Yauco, PR Guánica Municipio, PR Guayanilla Municipio, PR Peñuelas Municipio, PR Yauco Municipio, PR	0.8425
49620	York-Hanover, PA York County, PA	0.9914
49660	Youngstown-Warren-Boardman, OH-PA Mahoning County, OH Trumbull County, OH Mercer County, PA	0.9285
49700	Yuba City, CA Sutter County, CA Yuba County, CA	1.1319
49740	Yuma, AZ Yuma County, AZ	0.9609

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TABLE 6.—PROPOSED CY 2007 ESRD WAGE INDEX FOR RURAL AREAS BASED ON CBSA LABOR MARKET AREAS

CBSA code	Nonurban area	Wage index
1	Alabama	0.8425
2	Alaska	1.1247
3	Arizona	0.9398
4	Arkansas	0.8425
5	California	1.1902
6	Colorado	0.9838
7	Connecticut	1.2377
8	Delaware	1.0239
10	Florida	0.9051
11	Georgia	0.8425
12	Hawaii	1.1022
13	Idaho	0.8566
14	Illinois	0.8769
15	Indiana	0.8927
16	Iowa	0.9159
17	Kansas	0.8425
18	Kentucky	0.8425
19	Louisiana	0.8425
20	Maine	0.8856
21	Maryland	0.9417
22	Massachusetts	1.0758
23	Michigan	0.9532
24	Minnesota	0.9653
25	Mississippi	0.8425
26	Missouri	0.8425
27	Montana	0.9062
28	Nebraska	0.9154
29	Nevada	0.9435
30	New Hampshire	1.1373
31	[1] New Jersey	
32	New Mexico	0.8790
33	New York	0.8688
34	North Carolina	0.9055
35	North Dakota	0.8425
36	Ohio	0.9134
37	Oklahoma	0.8425
38	Oregon	1.0288
39	Pennsylvania	0.8774
41	[1] Rhode Island	
42	South Carolina	0.8425
43	South Dakota	0.9038
44	Tennessee	0.8425
45	Texas	0.8425
46	Utah	0.8587
47	Vermont	1.0472
48	Virgin Islands	0.8425
49	Virginia	0.8425
50	Washington	1.0827
51	West Virginia	0.8425
52	Wisconsin	0.9970
53	Wyoming	0.9805

[1] All counties in the States of New Jersey and Rhode Island are urban.

H. Private Contracts and Opt-Out Provision—Practitioner Definition

[If you choose to comment on issues in this section, please include the caption "PRIVATE CONTRACTS AND OPT-OUT" at the beginning of your comments.]

Section 4507 of the BBA of 1997 amended section 1802 of the Act to permit certain physicians and practitioners to opt-out of Medicare if certain conditions were met, and to provide through private contracts services that would otherwise be covered by Medicare. Before enactment of BIPA (Pub.L. 106–554), section 1802(b)(5)(C) of the Act, which refers to the definition of "practitioner" at section 1842(b)(18)(C) of the Act, did not include registered dietitians or nutrition professionals among the practitioners who may choose to opt-out of Medicare. Section 105(d) of BIPA amended the definition of practitioner located at section 1842(b)(18)(c) of the Act to include registered dietitians or nutrition professionals. Because section 1802(b)(5)(C) of the Act references section 1842(b)(18)(c) of the Act in order to define the term practitioner for purposes of opting out of Medicare, current law permits registered dietitians or nutrition professionals to opt-out of Medicare. Because the definition of practitioner located in the current regulations at § 405.400 does not include registered dietitians or nutrition professionals, we are proposing to amend that section so that it is consistent with section 1802(b)(5)(C) of the Act.

I. Proposed Changes to Reassignment and Physician Self-Referral Rules Relating to Diagnostic Tests

[If you choose to comment on issues in this section, please include the caption "REASSIGNMENT AND PHYSICIAN SELF-REFERRAL" at the beginning of your comments.]

Historically, Medicare rules have prohibited the markup of the TC of certain diagnostic tests that are performed by outside suppliers and billed to Medicare by a different individual or entity. In addition, Medicare rules restrict who may bill Medicare for the PC (hereafter, also referred to as the "interpretation") of diagnostic tests. Recent changes to our rules on reassignment of the right to receive Medicare payment may have led to some confusion as to whether the anti-markup and purchased interpretation requirements apply to certain situations where a reassignment has occurred pursuant to a contractual arrangement.

Likewise, we are concerned about the existence of certain arrangements that are not within the intended purpose of our physician self-referral rules, which allow physician group practices to bill for services furnished by a contractor physician in a "centralized building." We are concerned that allowing physician group practices or other suppliers to purchase or otherwise contract for the provision of diagnostic tests and then to realize a profit when billing Medicare may lead to patient and program abuse in the form of overutilization of services and result in higher costs to the Medicare program.

Therefore, we are proposing to amend our reassignment regulations to clarify how the purchased test and purchased test interpretation rules apply in the case of a reassignment made under the contractual arrangement exception set forth at § 424.80(d)(2). Specifically, in our reassignment regulations, we propose to incorporate provisions similar to those that currently appear in § 414.50 of our regulations on purchased tests, and we are considering incorporating provisions on purchased test interpretations that currently appear in our manual instructions. In addition, we are proposing to change the definition of "centralized building" at § 411.351 of the physician self-referral regulations to place certain restrictions on what types of space ownership or leasing arrangements will qualify for purposes of the physician self-referral in-office ancillary services exception and physician services exception.

Our proposals regarding the reassignment regulations are based on existing requirements for purchased tests and purchased test interpretations. Section 1842(n) of the Act contains certain limitations on billing for the TC of diagnostic tests described in section 1861(s)(3) of the Act (other than clinical diagnostic laboratory tests paid under section 1833(a)(2)(D) of the Act, which are subject to the special rules set forth in section 1833(h)(5)(A) of the Act). Section 1842(n)(1)(A) of the Act provides that if the test was not performed by the billing physician and also was not performed or supervised by a physician with whom the billing physician shares a practice, Medicare payment is the lower of the costs (net of any discount) charged by the performing supplier to the billing physician, or the performing supplier's reasonable charge (or other applicable limit). This is commonly known as the anti-markup provision. Section 1842(n)(2) of the Act further provides that a physician may not bill a beneficiary any amount other than the amount specified in section 1842(n)(1)(A) of the Act and any applicable deductible and coinsurance. Under section 1842(n)(3) of the Act, if a physician knowingly, willfully, and repeatedly bills a Medicare beneficiary for more than the amount allowed under section 1842(n)(2) of the Act, he or she is subject to civil monetary penalties and assessments, and exclusion from Medicare and Medicaid for up to 5 years. Our regulations implementing section 1842(n) of the Act appear at § 414.50 and § 402.1(c)(15).

In addition, our Claims Processing Manual (Pub. 100–4) outlines certain conditions regarding who can submit a claim for purchased diagnostic test intepretations. As set forth in Chapter 1, Section 30.2.9.1 of the Claims Processing Manual, the following requirements must be satisfied in order to submit a claim for a purchased diagnostic test interpretation:

- The test must be ordered by a physician or medical group that is independent of the person or entity performing the TC of the test, and also must be independent of the physician or medical group performing the interpretations.
- The physician or medical group performing the interpretations does not see the patient.
- The purchaser (or employee, partner, or owner of the purchaser) performs the TC of the test, and the interpreting physician must be enrolled in the Medicare program.

Section 1842(b)(6) of the Act generally prohibits Medicare payment to anyone other than the Medicare beneficiary or the physician or other person who performed the service for the beneficiary. However, section 1842(b)(6) of the Act, also provides exceptions, known as the reassignment exceptions, to this general rule. These exceptions allow us to make payment to an individual or an entity other than the beneficiary or the physician or other person who performed the service for the beneficiary. For example, the reassignment exceptions allow us to make payment to an employer of a physician, such as a group practice or a hospital, to which the physician employee has reassigned his or her right to payment.

Prior to the MMA, a physician or other individual supplier could reassign his or her right to bill and receive payment under a contractual arrangement, rather than an employee-employer relationship, only if the services being paid for were performed on the premises of the contracting hospital, critical access hospital, clinic, or other facility. Section 952 of the MMA, however, amended section 1842(b)(6)(A)(ii) of the Act to extend the reassignment exception to contractual arrangements regardless of whether the services are performed on the premises of the billing entity. Section 952 of the MMA permits us to recognize this type of reassignment to the extent that the contractual arrangement between the physician or other individual supplier and the billing entity (excluding a billing agent, which cannot receive reassigned benefits) meets program integrity and other safeguards as the Secretary may determine to be appropriate. A motivating factor behind the passage of section 952 of the MMA appears to have been the desire by the Congress to permit us to allow hospital emergency department staffing companies that employ physicians on a contract basis to bill Medicare (if the staffing companies enroll in Medicare).

Our proposed implementation of section 952 of the MMA appeared in the Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005 proposed rule, 69 FR 47488, 47524 through 47525 (August 5, 2004). We proposed program safeguards, whereby the parties to the contractual arrangement would have joint and several liability for any Medicare overpayments, and the physician or other individual supplier would have unrestricted access to billings submitted on his or her behalf by the entity receiving reassigned payments. In that proposed rule, we stated our awareness that the changes to the reassignment rules authorized by section 952 of the MMA may create new fraud and abuse vulnerabilities, which may not become apparent until the program has

experience with new contractual arrangements. We solicited comments on these potential program vulnerabilities and on possible additional safeguards to protect against such vulnerabilities.

Comments submitted in response to the CY 2005 PFS proposed rule expressed concern over the recent growth of "pod" or "condo" laboratories (hereinafter "pod labs"). In a typical pod lab arrangement involving pathology services, an entity leases space in a medical building and then subdivides the space into separate areas or cubicles, which are equipped with microscopes and a minimal amount of other laboratory equipment. The entity subleases each space to a physician group practice, even though the space may be located many miles away from any medical office of the group practice and is often located in a different state. The entity hires a histologist who performs the TC of the pathology service, by preparing a microscopic slide of each specimen for review by a pathologist. The entity also makes arrangements with a pathologist, who performs the PC of the pathology service and who also supervises the pod lab.

In one type of arrangement, the pathologist and histologist perform their services for the different group practices by moving from cubicle to cubicle. Each group practice pays the pathologist a fee for every slide reviewed and pays the entity a management fee, which covers the rental of the pod lab and the histologist's salary. The group practice then bills Medicare for the entire pathology service, typically at a markup from what the group practice paid the pathologist for the professional service and the entity for its services. In another common arrangement, the histologist performs the TC of the pathology service for the entity and the entity bills Medicare for that service, while the group practice bills for the interpretation that was performed by its independent contractor pathologist, who has reassigned to the group practice his or her right to receive Medicare payment.

The commenters stated that pod lab arrangements are subject to fraud, waste and abuse, including, but not limited to the following:

- Generation of medically unnecessary biopsies.
- Kickbacks.
- Fee-splitting.
- Referrals that would otherwise be prohibited under the physician self-referral statute.

The commenters provided several suggestions. One commenter suggested that we prohibit a physician from reassigning benefits to another physician if the physicians do not practice in substantially the same medical specialty. Some commenters also stated that our regulations need to state more clearly that all requirements of the purchased diagnostic test rules and purchased test interpretation rules need to be met.

In the CY 2005 PFS final rule, we responded that we shared the commenters concerns, although we declined to incorporate the suggested revisions at that time. We said that we would be paying close attention to this issue, and that we might initiate future rulemaking to address arrangements that are fraudulent or abusive. (See 69 FR 66316, November 15, 2004.) In that final rule, we amended our reassignment regulation at § 424.80(a) to state that nothing in § 424.80 alters an individual's or entity's obligations under other Medicare statutes or rules, including, but not limited to, the physician self-referral law (section 1877 of the Act), the anti-kickback statute (section 1128B(b)(1) of the Act), the regulations regarding purchased diagnostic tests, and the regulations regarding services and supplies provided incident to a physician's service.

At about the same time as we published our proposed rule for implementing section 952 of the MMA, we published an IFC concerning exceptions to the physician self-referral law in section 1877 of the Act (69 FR 16054). Section 1877 of the Act prohibits a physician from making referrals for DHS, as defined in section 1877(h)(6) of the Act, payable by Medicare to an entity with which he or she (or an immediate family member) has a financial relationship (ownership or compensation), and it prohibits the entity from billing Medicare, another payor, or the beneficiary for those referred services, unless an exception applies. The statute establishes a number of specific exceptions to these prohibitions and grants the Secretary the authority to create regulatory exceptions for financial relationships that pose no risk of fraud or abuse.

One significant exception is at § 411.355(a) for the provision of "physician services" as defined in § 410.20(a). Under this exception, professional physician services that are DHS must be furnished personally by another physician who is a member of the referring physician's group practice, or by a physician in the same group practice as the referring physician, or by someone under the supervision of one of these physicians. A "member" of a group practice is a physician owner, a physician employee, a locum tenens physician, or an on-call physician while the physician is providing on-call services for members of the group practice. "Physician in the group practice" means a member of the group practice, as well as an independent contractor physician during the time the independent contractor is furnishing patient care services for the group practice to the group practice's patients in the group practice's facilities. (See § 411.351.)

Another significant exception, at § 411.355(b), is for the provision of in-office ancillary services. This exception allows group practice physicians to refer patients for DHS to other members of their group or to nonphysician staff, provided that certain supervision, location, and billing requirements are satisfied. Specifically, the DHS must be furnished personally by the referring physician, a member of the group practice, or an individual who is supervised by the referring physician or by a physician in the group practice. In addition, the DHS must be furnished in—(1) the "same building" where group physicians perform a certain amount of physician services (as set forth in § 411.355(b)(2)), including physician services unrelated to the provision of DHS; or (2) in a "centralized building." We define "centralized building," in pertinent part, as all or part of building that is owned or leased on a full-time basis 24 hours per day, 7 days per week. In the "Phase II" physician self-referral IFC, we reaffirmed our earlier position, set forth in the "Phase I" final rule with comment period that, a group practice may have more than one centralized building (69 FR at 16075).

In response to the Phase II IFC, several commenters strongly criticized the centralized building prong of the in-office ancillary services exception. They requested that the rule be changed to require full-time use of the facility and the addition of a commercially reasonable test. According to the commenters, the Phase II IFC encourages numerous abusive arrangements that are designed solely to permit medical groups to bill in circumvention of the prohibition in section 1877 of the Act. Commenters objected to medical groups establishing satellite DHS facilities, sometimes in different States, specifically to capture ancillary income. Several commenters identified pod labs that rent space to urology groups as among the types of abusive arrangements that are proliferating. Several other commenters requested clarification that the in-office ancillary services exception did not

override our policies on reassignment and purchased diagnostic tests. According to the comments, some of the arrangements do not satisfy the rules regarding purchased diagnostic tests. On the other hand, a professional association complained that the requirement that the centralized building be occupied exclusively by the medical group is too restrictive.

As noted above, we stated, in response to the comments on the proposed rule implementing section 952 of the MMA, that we might address suspect arrangements in a future rulemaking. After additional consideration, including consideration of the comments we received in response to the Phase II IFC, we are now proposing to amend our regulations on reassignment and physician self-referral in this proposed rule.

We are proposing to amend § 424.80 of our regulations to clarify that any reassignment pursuant to the contractual arrangement exception is subject to program integrity safeguards that relate to the right to payment for diagnostic tests. First, we would amend § 424.80 of our regulations to provide that if the TC of a diagnostic test (other than clinical diagnostic laboratory tests paid under section 1833(a)(2)(D) of the Act, which are subject to the special rules set forth in section 1833(h)(5)(A) of the Act) is billed by a physician or medical group (the "billing entity") under a reassignment involving a contractual arrangement with a physician or other supplier who performs the service, the amount billed to Medicare by the billing entity, less the applicable deductibles and coinsurance, may not exceed the lowest of the following amounts:

- The physician or other supplier's net charge to the billing physician or medical group.
- The billing physician's or medical group's actual charge.
- The fee schedule amount for the service that would be allowed if the physician or other supplier billed directly.

Second, we would also require that, in order to bill for the TC, the billing entity would be required to perform the interpretation. Third, we are considering further amendments to § 424.80(d) that would impose certain conditions on when a physician or medical group can bill for a reassigned PC of a diagnostic test. We are considering the following conditions:

- The test must be ordered by a physician that is financially independent of the person or entity performing the test and also of the physician or medical group performing the interpretation.
- The physician or medical group performing the interpretation does not see the patient.
- The physician or medical group billing for the interpretation must have performed the TC of the test.

We believe that we are comfortably within our authority to place the proposed restrictions on reassignments made before a contractual arrangement, in order to guard against patient and program abuse, and we also believe that we would be within our authority to adopt the conditions on billing for a reassigned PC before a contractual arrangement that we continue to consider.

We note that there is no right to effect a reassignment under section 1842(b)(6) of the Act (rather, this section allows, but does not require us to make payment to someone other than the beneficiary or the physician or other person who performed the service), and that section 952 of the MMA permits us to recognize reassignments under the contractual arrangement exception only to the extent that the arrangement meets program integrity and other safeguards as the Secretary may determine to be appropriate. Moreover, we believe that our current rules on purchased diagnostic tests generally should be applicable to both situations in which the billing entity is purchasing the test without a formal reassignment as well as situations in which the physician performing the test has reassigned his or her right to Medicare payment to the billing physician or medical group.

Although we welcome comments on all aspects of our proposals, we are particularly interested in soliciting comments on the amendments we have proposed, as well as those we are still considering involving reassigned interpretations, to § 424.80(d). In particular, we are soliciting comments as to whether diagnostic tests in the DHS category of radiology and certain other imaging services should be excepted from any those provisions; whether the proposal in whole or in part should apply only to pathology services; whether any of these provisions should apply to services performed on the premises of the billing entity and if so, how to define the premises appropriately. We are also soliciting suggested regulatory text for the proposal under consideration involving purchased test interpretations, as well as any other comments regarding the appropriate scope of the provisions under consideration.

In addition, we are soliciting comments on whether an anti-markup provision should apply to the reassignment of the PC of diagnostic tests performed under a contractual arrangement, and if so, how to determine the correct amount that should be billed to the Medicare program.

In addition to our proposed changes to the reassignment rules, we are proposing to change the definition of "centralized building" in § 411.351 for purposes of our physician self-referral regulations. We are persuaded by the commenters who responded to the Phase II IFC that our present definition may encourage the unnecessary ordering of ancillary services. Section 1877(b)(1) of the Act, in conjunction with section 1877(h)(4)(vi) of the Act, states that the Secretary may define by regulation what constitutes a "group practice" for purposes of the physician services exception. Similarly, section 1877(b)(2) of the Act authorizes the Secretary to determine additional terms and conditions relating to the supervision and location requirements of the in-office ancillary services exception as may be necessary to prevent a risk of program or patient abuse. Accordingly, we propose to modify the definition of "centralized building" to include a minimum square footage requirement of 350 square feet. Our modified definition would be relevant to both the physician services exception and the in-office ancillary services exception. That is because, under § 411.351, a "physician in the group practice" includes an independent contractor physician during the time he or she is providing services to the group's patients in the group's facilities. Thus, to the extent that an independent contractor physician would qualify as a "physician in the group" on the basis of furnishing services to a group's patients in a centralized building, the space owned or leased by the group would need to comply with the proposed modification to the definition of "centralized building" in order for the group to rely on the physician services exception or the in-office ancillary services exception when billing Medicare for services furnished by the independent contractor physician.

Although we believe that the arrangements we seek to address through our proposed change to the definition of "centralized building" primarily involves independent contractor physicians, the proposed definition would also apply to services performed by physicians who are employees of a group practice.

The proposed minimum square footage requirement would not apply to

space owned or rented in a building in which no more than three group practices own or lease space in the "same building," as defined in § 411.351 (that is, in a building with the same street address) and share the same "physician in the group practice" (as defined in § 411.351). The purpose of the square foot minimum and the exception is to prevent abusive arrangements such as pod labs, while not disqualifying legitimate, stand-alone physician offices that are unusually small. The following examples are intended to illustrate how the proposed exception might apply:

+ Example 1—A space of 200 square feet located in a building in which only two other group practices lease space could qualify as a centralized building, irrespective of whether all three group practices contract with the same individual as a "physician in the group practice."

+ Example 2—A space of 200 square feet is located in a building in which seven other group practices lease space. Dr. Jones has a contractual relationship with three group practices as a "physician in the group practice." Dr. Smith also has a contractual relationship with three group practices. No physician has a contractual relationship as a "physician in the group practice" with four or more group practices that are located in that building. The space could qualify as a "centralized building."

We would also require the space to contain, on a permanent basis, the necessary equipment to perform substantially all of the DHS that are performed in this space, in order to meet the definition of a "centralized building." That is, we wish to prevent the situation in which an entity would routinely move equipment as needed from one group's space to another group's space (for example, from cubicle to cubicle). We believe these situations are abusive and contrary to the purpose of concept of the "centralized building" concept, but we recognize that there may be an occasional need to bring specialized equipment into the space on a temporary basis.

We believe that the proposed clarification to our reassignment rules, in tandem with our proposed changes to the definition of "centralized building" for purposes of our physician self-referral rules would prevent abusive arrangements while preserving legitimate small physician offices. In particular, we anticipate that restrictions on marking up the TC of diagnostic tests as well as the limits we are considering for who can bill for the PC of diagnostic tests, combined with square footage limits and requirements of having necessary equipment on site would make it not financially feasible for pod labs to exist.

With respect to our proposed change to the definition of "centralized building," we seek comments on whether there should be a minimum square foot requirement, and if so, whether the minimum should be 350 square feet or an amount more or less than that. In addition, we seek comments regarding whether there should be an exception to any minimum square foot requirement, and if so, the circumstances under which an exception should apply.

With respect to our proposal that the "centralized building" permanently contain the necessary equipment to perform substantially all of the DHS that is furnished in the "centralized building," we seek comments on whether this test should be imposed, and whether at least 90 percent or some other minimum percentage or measurement is appropriate. We are also considering whether to require that, for space to qualify as a "centralized building," the group practice must employ, in that space, a nonphysician employee or independent contractor who will perform services exclusively for the group for at least 35 hours per week. We seek comments on whether we should have this requirement or similar requirement, or whether this requirement would be unduly burdensome on a small group practice, and whether this requirement would be likely to reduce the number of existing pod labs and to discourage the development of new pod labs. Finally, we seek comments on whether a group practice should be allowed to maintain a "centralized building" in a State different from the State(s) in which it has an office that meets the criteria of § 411.355(b)(2)(i), and if so, whether space that is located in a different State must be within a certain number of miles from an office of the group practice that meets the criteria of § 411.355(b)(2)(i), in order to qualify as a "centralized building."

J. Supplier Access to Claims Billed on Reassignment

Section 1833(e) of the Act provides that, "no payment shall be made to any provider of services or other person under this part unless there has been furnished such information as may be necessary in order to determine the amounts due such provider or other person under this part for the period with respect to which the amounts are being paid or for any prior period." Section 1842(b)(6) of the Act generally provides that payment may not be made to anyone other than the beneficiary or the physician or other person who provided the service. There are certain exceptions to this prohibition whereby payment may be made to others. These are commonly referred to as the reassignment exceptions and are found at section 1842(b)(6)(A) of the Act.

Taking these two statutory provisions together, we are permitted, but not required, to make payment to someone other than the beneficiary, or the physician or other person who furnished the service, but only if we have determined that Medicare has received all necessary information to determine the amounts due the provider. Where Medicare makes payment to an entity rather than to the physician or other person who furnished the service, there is a heightened concern that payment may not be correct. By allowing physicians and other individual suppliers who reassign benefits to an entity such as a group practice to have access to the billing information concerning the services they allegedly furnish, we believe we will reduce the risk of inappropriate billing.

Moreover, as noted in section I.2. of this proposed rule, section 952 of the MMA amended section 1842(b)(6)(A)(ii) of the Act to allow a physician or other person who was in a contractual arrangement rather than in an employee-employer relationship to reassign his or her right to bill and receive payment, irrespective of whether the services were performed on the premises of the entity. Section 952 of the MMA permits reassignment to the extent that the contractual arrangement between the physician or other individual supplier and the billing entity meets program integrity and other safeguards that the Secretary may determine to be appropriate.

In the FY 2005 Physician Fee Schedule proposed rule, published August 5, 2005 (69 FR 47488, 47524 through 47525), we stated our awareness that changes in the reassignment rules based on section 952 of the MMA may create new fraud and abuse vulnerabilities, which may not become apparent until the program has experience with new contractual arrangements. We proposed program safeguards, whereby the parties to the contractual arrangement would have joint and several liability for any Medicare overpayments, and the physician or other individual supplier would have unrestricted access to billings submitted on their behalf by the entity receiving reassigned payments. In response to the August 5, 2005 proposed

rule, we received a comment that questioned the need for the two program integrity safeguards (joint and several liability and unrestricted access to billing records) as a requirement for a reassignment of claims involving a contractual arrangement. The commenter believed that it was premature for CMS to implement these program safeguards, that CMS already imposes joint and several liability through Medicare participation agreements and the signing of the enrollment form for billing reassigned claims (the CMS–855–R form), and questioned why the program safeguards applied only to independent contractors and not to employees. (69 FR 66316 through 66317 (November 15, 2004).)

In response to the commenter, we stated that those program integrity safeguards were necessary to monitor the billings of entities with which we have had billing problems (for example, billing for services never furnished and upcoding resulting in Medicare overpayments) in the past, and that the reason the safeguards applied to independent contractors and not to employees, was that the billing problems identified thus far involved certain entities (which, for the most part, contracted with, rather than employed, emergency room (ER) physicians). We also stated that we would study whether the same program integrity safeguards applicable to independent contractors should also apply to employees.

Prior to January 1, 2005, the effective date of the program integrity safeguards for the contractual arrangement reassignment exception, we received public inquiries asking why employees do not have unrestricted access to billing records. Since the January 1, 2005 effective date of the program integrity safeguards, we have received an inquiry from an ER physician employee of a medium-sized ER physician staffing company, who was denied access to billing records for services that he claims to have furnished, and who had his employment terminated. We also note that the MMA Conference Report, in its discussion of section 952 of the MMA, states that the Conference Committee supports appropriate program integrity efforts for any entities billing the Medicare program, including entities with independent contractors as well as employees. Having reconsidered the issue, we find no valid reason why an employee should not have access to records on billings for services furnished by that employee. Therefore, we are proposing to change the title of § 424.80(d) and amend § 424.80(d)(2) of our regulations to state that the supplier who reassigns his or her right to bill and receive Medicare payment to an entity has unrestricted access to claims information submitted by that entity for services supposedly furnished by the individual supplier, irrespective of whether the supplier is an employee or independent contractor of the entity. If adopted, our proposal would also mean that if an entity receiving the reassigned benefits were to refuse to provide the billing information to the employee supplier requesting the information, the entity's right to receive reassigned benefits may be revoked under 42 CFR 424.82(c)(3) (which is currently the case with respect to an entity's refusal to provide billing information to an independent contractor supplier).

K. Coverage of Bone Mass Measurement (BMM) Tests

[If you choose to comment on issues in this section, please include the caption "BONE MASS MEASUREMENT TESTS" at the beginning of your comments.]

In an IFC entitled "Medicare Coverage of and Payment for Bone Mass Measurements" published in the **Federal Register** on June 24, 1998 (63 FR 34320), we implemented section 4106 of the BBA by establishing a new regulatory section, 42 CFR 410.31 (Bone Mass Measurement: Conditions for Coverage and Frequency Standards). Section 4106 of the BBA statutorily defined BMM and individuals that are qualified to receive a BMM. The June 24, 1998 IFC, under the "reasonable and necessary" provisions of 1862(a)(1)(A) of the Act, also established conditions for coverage of the tests that must be ordered by physicians or nonphysician practitioners. Lastly, as directed by section 4106 of the BBA, we established frequency standards governing the time period when qualified individuals would be eligible to receive covered BMMs.

1. Provisions of the June 24, 1998 IFC

As stated earlier in this section, the June 24, 1998 IFC implemented section 4106 of the BBA by establishing conditions for coverage and frequency standards for BMMs to ensure that they are paid for uniformly throughout the Medicare program and that they are reasonable and necessary for Medicare beneficiaries who are eligible to receive these measurements. This section summarizes the provisions discussed in the June 24, 1998 IFC.

a. Coverage Conditions and Frequency Standards

We established conditions for coverage and frequency standards for medically necessary BMMs for five categories of Medicare beneficiaries in § 410.31.

In § 410.31(a), we defined "bone mass measurement" based on the statutory definition in section 4106 of the BBA. In accordance with the "reasonable and necessary" provisions of section 1862(a)(1)(A) of the Act, we established the conditions for coverage of BMMs in § 410.31(b) of the regulations. Consistent with § 410.32 (Diagnostic x-ray tests, diagnostic laboratory tests, and diagnostic tests: Conditions), we provided that coverage be available for the BMM only if it is ordered by the physician or a qualified nonphysician practitioner (as defined in § 410.32(a)) treating the beneficiary following an evaluation of the beneficiary's need for the test, including a determination as to the medically appropriate procedure to be used for the beneficiary. We believed that BMMs were not demonstrably reasonable and necessary unless (among other things) they are ordered by the physician treating the beneficiary following a careful evaluation of the beneficiary's medical need, and they are employed to manage the beneficiary's care.

To ensure that the BMM is performed as accurately and consistently in accordance with appropriate quality assurance guidelines as possible, we required that it be performed under the appropriate supervision of a physician as defined in § 410.32(b)(3). To ensure that the BMM is medically appropriate for the five categories specified in the law, we provided that it be reasonable and necessary for diagnosing, treating, or monitoring the condition of the beneficiary who meets the coverage requirements specified in § 410.31(d).

Furthermore, in § 410.31(c), we set forth limitations on the frequency for covering a BMM. Generally, we cover a BMM for a beneficiary if at least 23 months have passed since the month the last BMM was performed. However, we allow for coverage of follow-up BMMs performed more frequently than once every 23 months when medically necessary. We listed the following examples of situations where more frequent BMMs procedures may be medically necessary to include:

- Monitoring beneficiaries on long-term glucocorticoid (steroid) therapy of more than 3 months.
- Allowing for a confirmatory baseline bone mass measurement (either central or peripheral) to permit

monitoring of beneficiaries in the future if the initial test was performed with a technique that is different from the proposed monitoring method.

b. Beneficiaries Who May Be Covered

In § 410.31(d), we amended our regulations to conform to the statutory requirement that the following categories of beneficiaries may receive Medicare coverage for a medically necessary BMM:

- A woman who has been determined by the physician or a qualified nonphysician practitioner treating her to be estrogen-deficient and at clinical risk for osteoporosis, based on her medical history and other findings.
- An individual with vertebral abnormalities as demonstrated by an x-ray to be indicative of osteoporosis, osteopenia, or vertebral fracture.
- An individual receiving (or expecting to receive) glucocorticoid (steroid) therapy equivalent to 7.5 mg of prednisone, or greater, per day, for more than 3 months.
- An individual with primary hyperparathyroidism.
- An individual being monitored to assess the response to or efficacy of an FDA-approved osteoporosis drug therapy.

c. Waiver of Liability

Section 410.31(e) provides that Medicare payment would be denied for a BMM in accordance with section 1862(a)(1)(A) of the Act if the regulatory standards are not satisfied. Existing regulations concerning limitation on liability are set forth in §§ 411.400 through 411.406 and are applicable to denial of BMMs under § 410.31.

d. Payments for BMMs

Medicare payments for covered BMMs are paid for under the PFS (42 CFR part 414) as required by statute. In the June 24, 1998 IFC, we revised the definition of "physician services" in § 414.2 to include bone mass measurements. When BMM procedures are furnished to hospital inpatients and outpatients, the TCs of these procedures are payable under existing payment methods for hospital services. These methods include payments under the prospective payment system, on a reasonable cost basis, or under a special provision for determining payment rates for hospital outpatient radiology services.

In the June 24, 1998 IFC, we revised § 414.50(a), regarding physician billing for purchased diagnostic tests, to clarify that the section does not apply to payment for BMMs.

e. Conforming Changes

In the June 24, 1998 IFC, to allow for appropriate placement in the CFR of the BMM coverage requirements, we redesignated § 410.31 (Prescription drugs used in immunosuppressive therapy) as § 410.30.

2. Additional Scientific Evidence

In 2004, the Surgeon General issued a report, Bone Health and Osteoporosis (U.S. Department of Health and Human Services, Bone Health and Osteoporosis: A Report of the Surgeon General. Rockville, MD: U.S. Department of Health and Human Services, Office of the Surgeon General, 2004). This report provides scientific evidence related to the prevention, assessment, diagnosis, and treatment of bone disease. The report states that identification of those at risk of bone disease and fracture is important so that appropriate interventions can be implemented. However, as the report states, "Assessing the risk of bone disease and fracture remains a challenge. Not all of the risk factors have been identified, and the relative importance of those that are known remains unclear."

As bone strength is not measured directly, bone mineral density (BMD) remains the single best predictor of fracture risk, with the most widely accepted method for measuring BMD being the dual energy x-ray absorptiometry (DXA) for a bone density study at the axial skeleton (for example, hips and spine). As there are many sources of variability in the measurement of BMD, a quality control system related to both the methodology and reporting of test results is important to ensure the validity of DXA analysis.

In addition to DXA of the axial skeleton, bone mass can also be measured using other techniques. These other techniques include DXA bone density study for the appendicular skeleton (for example, radius, wrist, heel); quantitative computerized tomography (QCT), bone mineral density study for the axial skeleton or appendicular skeleton; radiographic absorptiometry (photodensitometry, radiogrammetry); single-photon absorptiometry (SPA); single energy x-ray absorptiometry (SXA) for the appendicular skeleton; and ultrasound bone mineral density study for the appendicular skeleton. With regard to these techniques (except for SPA which was not discussed), the 2004 Surgeon General report states, "While these methods do assess bone density and may provide an indication of fracture risk, it is important to note that the WHO [World Health Organization] recommendations and other guidelines for using BMD and interpreting BMD results for diagnosis are based on DXA measurements of the hip or spine." The report further states, "Incorporating these techniques for bone assessment into future clinical trials and observational studies will help in better understanding their appropriate use as a means of predicting the risk of bone disease and fracture."

3. Proposed Changes to the June 24, 1998 IFC

We received 18 public comments on the June 24, 1998 IFC. The majority of the comments had specific recommendations for changes to the IFC. In addition to responding to comments that we may receive on our proposed revisions to § 410.31, it is our intent to address all these previous comments in the CY 2007 PFS final rule.

Based on the comments received on the IFC, the Surgeon General's report, and other evidence, we are proposing changes to § 410.31. We encourage comments on these proposals.

a. Proposed "BMM" Definition (§ 410.31(a))

We are proposing to revise the definition of "bone mass measurement" at § 410.31(a)(2) to remove coverage for the use of SPA, which uses isotope sources to measure BMD. Many medical experts indicate that SPA has largely been replaced by the newer techniques of DXA, which are believed to be superior in accuracy and precision. Medicare claims data in recent years continue to show a steady decline in the use of the SPA procedure by the beneficiary population. Further, there is a lack of evidence to support continued use of SPA, an older procedure where the metrics have not been correlated with fracture rate.

We are proposing to revise the definition of a "bone mass measurement" to read, "Is performed with either a bone densitometer (other than a single-photon or dual-photon absorptiometry) or with a bone sonometer system that has been cleared for marketing for this use by the FDA under 21 CFR part 807, or approved for marketing by the FDA for this use under 21 CFR part 814."

We are specifically requesting comments on this proposal regarding the evidence of benefit for SPA, particularly in comparison with other alternatives.

b. Conditions for Coverage (§ 410.31(b))

We are proposing to revise the conditions for coverage for BMMs in

§ 410.31(b) by requiring that for a medically necessary BMM to be covered for an individual being monitored to assess the response to or efficacy of an FDA-approved osteoporosis drug therapy (§ 410.31(d)(5)) the individual would be required to meet the present conditions for coverage under § 410.31(b), and the monitoring would have to be performed by the use of an dual energy x-ray absorptiometry system (axial system).

We recognize that in the June 24, 1998 IFC, we allowed the physician or qualified nonphysician practitioner treating the beneficiary more flexibility in ordering those diagnostic measurements, but we are proposing to limit that flexibility with respect to the type of BMM that is used for monitoring individuals receiving osteoporosis drug therapy and other purposes (as discussed later in this section) because of new evidence and other information received since publication of the June 24, 1998 IFC that supports the need for requiring the use of the DXA measurement (axial skeleton) in those circumstances. In addition to the 2004 Surgeon General's Report that recognized the superiority of the DXA (axial skeleton) for measuring bone mass over time, the International Society for Clinical Densitometry currently recommends that if an individual has a low bone mass using a peripheral measurement (appendicular skeleton) he or she should have a DXA (axial skeleton) performed for monitoring or confirmatory diagnostic purposes.

Therefore, we are also proposing to revise § 410.31(b) by adding a requirement that in the case of any individual who qualifies for a bone mass measurement as provided for in § 410.31(d) and who receives a confirmatory baseline BMM to permit monitoring in the future, Medicare may cover a medically necessary BMM for that individual, if the present conditions for coverage under § 410.31(b) are met, and the BMM is performed by a dual energy x-ray absorptiometry system (axial skeleton) (if the initial measurement was not performed by this system).

As indicated previously, the most widely accepted method for measuring bone mineral density (BMD) is the use of DXA (Surgeons General's Report 2004) at axial skeletal sites. DXA (axial skeleton) measures BMD at the hip and spine (sites likely to fracture in patients who have osteoporosis). DXA is precise, safe, and low in radiation exposure, and permits more accurate and reliable monitoring of individuals over time. DXA of the femoral neck is the best validated test to predict hip fracture and is comparable to forearm measurements for predicting fractures at other sites (Evidence Report/Technology Assessment No 28, Agency for Healthcare Research and Quality (AHRQ), January 2001).

c. Bone Mass Measurement: Standards on Frequency of Coverage (§ 410.31(c))

To conform the examples of a BMM exception to the standards on frequency of coverage in § 410.31(c)(2) to the regulation change we are proposing in § 410.31(b)(3), we are proposing to revise the confirmatory baseline test example in § 410.31(c)(2)(ii) to read, "Allowing for a confirmatory baseline measurement to permit monitoring of beneficiaries in the future if the requirements of paragraph (b)(3) of this section are met."

d. Bone Mass Measurement: Beneficiaries Who May Be Covered (§ 410.31(d))

The Congress has recognized that individuals receiving long-term glucocorticoid steroid therapy are qualified individuals for purposes of section 1861(rr)(1) of the Act. Therapy to prevent bone loss in most patients beginning long-term therapy has been recommended at a prednisone equivalent of ≥ 5 mg/day for at least 3 months (McIlwain, 2003). Based on our review of the current evidence, we are proposing to reduce the dosage equivalent in § 410.31(d)(3) from an average of 7.5 mg/day of prednisone for at least 3 months to an average of 5.0 mg/day of prednisone for the same period.

e. Use of the NCD Process (§ 410.31(f))

To facilitate future consideration of coverage of additional BMM systems for purposes of proposed paragraphs § 410.31(b)(2) and (b)(3), which would limit coverage of BMMs for monitoring individuals receiving osteoporosis drug therapy and for performing confirmatory baseline measurements, we are proposing to allow CMS, through the NCD process, to identify additional BMM systems for those purposes. By using the NCD process, we could conduct a timely assessment of FDA-approved BMMs. Use of an NCD to add coverage of effective BMM systems for these purposes is authorized by the reasonable and necessary provision of sections 1862(a)(1)(A) and 1871(a)(2) of the Act.

In summary, in view of the 18 comments and our review of the post-1998 medical literature, we have decided to propose several revisions to § 410.31 relative to the definition of the term "Bone Mass Measurement" (§ 410.31(a)(2)), the conditions for coverage (§ 410.31(b)), the examples of exceptions to the standards on frequency of coverage (§ 410.31(c)(2)), the category of individuals receiving (or expecting to receive) glucocorticoid (steroid) therapy (§ 410.31(d)(3)), and the addition of a new subparagraph (§ 410.31(f)) on use of the NCD process.

L. Independent Diagnostic Testing Facility (IDTF) Issues

[If you choose to comment on issues in this section, please include the caption "IDTF ISSUES" at the beginning of your comments.]

1. Proposed IDTF Changes in the Physician Fee Schedule Proposed Rule

During the course of a national review in 2003–2004, the Office of Inspector General (OIG) found a potential $71 million in improper payments made to IDTFs (Review of Claims Billed by Independent Diagnostic Testing Facilities for Services Provided to Medicare Beneficiaries During Calendar Year 2001 (A–03–03–00002)). The OIG found that erroneous payments were made as the result of poor or missing documentation or the lack of medical necessity. Moreover, in recent years, CMS and its contractors have determined that a number of IDTFs in California and other States are perpetrating schemes to defraud the Medicare program.

Since 2000, the number of IDTFs in California has increased by 40 percent, which is a far greater percentage increase than the Medicare population in that State. The number of IDTFs billing Medicare in California alone increased more than 400 percent from 2000 to 2005. The increased use of IDTF services has not lowered the use of diagnostic testing within other settings. The increased rates of utilization within IDTFs is likely to be unrealistic due to an increase in the need of diagnostic testing within California's Medicare population. Also, these IDTFs are growing at a rate faster than CMS can survey these facilities. The actual growth of IDTFs is not a problem, however, the results of the OIG audit make it clear that we need to closely monitor IDTFs and establish standards to ensure quality care for Medicare beneficiaries. To address the erroneous payments identified by the OIG above, we are proposing to establish IDTF supplier standards similar to those we adopted for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Suppliers on October 11, 2000 (see 42 CFR 424.57).

We are proposing that each IDTF be required to be in compliance with the

proposed fourteen suppler standards discussed in section L.2. below in order to obtain or retain enrollment in the Medicare program. Accordingly, at proposed § 410.33(h), we are proposing that if an IDTF fails to meet one or more of the proposed standards at the time of enrollment or at the time of re-enrollment, then its enrollment application would be denied. Also, if at any time we determine that an enrolled IDTF no longer meets the proposed supplier standards, its billing privileges would be revoked.

We believe that these supplier standards are needed to ensure that minimum quality standards are met to protect beneficiaries as well as the Medicare Trust Fund. These standards are merely good business practices which will help to ensure that suppliers are providing a quality care to Medicare beneficiaries. Examples of the kind of standards are a primary business phone number and address. Another example is a posting of standards for review by patients and the public.

We are proposing to adopt, for IDTFs, a number of standards we adopted for DMEPOS suppliers, including supplier standard number 6 which requires a supplier to maintain a comprehensive liability insurance policy of $300,000 or 20 percent of its average annual Medicare billings, whichever amount is greater, that covers both the place of business and all customers and employees of the IDTF.

Furthermore, we are proposing in the new performance standard number 7 that an IDTF agrees not to directly solicit patients. This provision does not preclude the IDTF from public advertisement or marketing its services to physicians and other suppliers, however it does prohibit recruitment of beneficiaries through direct solicitation.

Additionally, the IDTF would be required to grant CMS, or its designated fee-for-service contractors, including our agents, to have access to the IDTF physical location, all equipment, and beneficiary medical records during normal business hours. For portable equipment, an IDTF would be required to maintain a catalog of portable equipment and be able to produce the cataloged equipment within two business days. If the IDTF denies this access, the IDTF's Medicare enrollment would be immediately revoked.

To ensure that equipment used by an IDTF is maintained and operates properly, we are seeking public comment regarding IDTF supplier standard number 11, which would require that an IDTF must have its testing equipment calibrated per equipment instructions or in compliance with applicable industry standards. Specifically, we are seeking public comment regarding the organizations or entities that may currently establish testing specifications for diagnostics equipment. Further, if these organizations or entities do not exist, we invite public comment regarding establishment of a supplier standard that relies on the manufacturer's maintenance and calibration standards.

While we understand that these proposed additional standards could lead certain IDTFs to withdraw from the Medicare program rather than comply with the new standards, we believe that legitimate businesses would not oppose these changes. Moreover, we emphasize that services provided by an IDTF are also readily available to beneficiaries through other avenues such as physicians' offices, outpatient laboratories, outpatient radiology facilities, and outpatient clinics. We believe that the implementation of these proposed standards would improve the quality of services provided to Medicare beneficiaries by IDTFs without any associated access concerns.

2. Proposed Performance Standards for IDTFs

The IDTF would be required to meet the following standards as of January 1, 2007 and any newly or reenrolling IDTF would be required to certify in its enrollment application that it meets and would continue to meet the standards. At § 410.33, we are proposing to revise the regulation to specify that the IDTF would be required to—

- Operate its business in compliance with all applicable Federal, State, and local licensure and regulatory requirements with regard to the health and safety of patients;
- Provide complete and accurate information on its enrollment application as stated in the "Requirements for Providers and Suppliers to Establish and Maintain Enrollment final rule" (April 21, 2006 (42 FR 20754)). Any change in enrollment information would be required to be reported to the designated fee-for-service contractor on the Medicare enrollment application within 30 calendar days;
- Maintain a physical facility on an appropriate site. For the purposes of this proposed standard, a post office box or commercial mailbox would not be considered a physical facility. The physical facility would be required to contain space for equipment appropriate to the services designated on the enrollment application, facilities for hand washing, adequate patient privacy accommodations, and the storage of both business records and current medical records;
- Have all applicable testing equipment available at the physical site, excluding portable equipment. A catalog of portable equipment, including equipment serial numbers, would be maintained at the physical site. In addition, portable equipment would be made available for inspection within two business days of our inspection request. The IDTF would be required to maintain a current inventory of the equipment (including serial/registration numbers), provide this information to the designated fee-for-service contractor and notify the contractor of any changes in equipment;
- Maintain a primary business phone under the name of the business. The business phone would be located at the designated site of the business. The telephone number or toll free numbers would be available in a local directory and through directory assistance;
- Have a comprehensive liability insurance policy of at least $300,000 or 20 percent of its average annual Medicare billings, whichever amount is greater, that covers both the place of business and all customers and employees of the IDTF. The insurance policy would be carried by a non-relative owned company. The policy would be required to list the serial numbers of any and all equipment used by the IDTF;
- Agree not to directly solicit patients, which includes, but is not limited to, a prohibition on telephone, computer, or in-person contracts. The IDTF would accept only those patients referred for diagnostic testing by an attending physician, who is furnishing a consultation or treating a beneficiary for a specific medical problem and who uses the results in the management of the beneficiary's specific medical problem. Nonphysician practictioners may order tests as set forth in § 410.32(a)(3);
- Answer beneficiaries' questions and respond to their complaints. Documentation of those contacts would be maintained at the physical site;
- Openly post these standards for review by patients and the public;
- Disclose to the government, any person having ownership, financial or control interest, or any other legal interest in the supplier at the time of enrollment or within 30 days of a change;
- Have its testing equipment calibrated per equipment instructions and in compliance with applicable national standards;

- Have technical staff on duty with the appropriate credentials to perform tests. The IDTF would be required to produce the applicable Federal or State licenses and/or certifications of the individuals performing these services;
- Have proper medical record storage and be able to retrieve medical records upon request from CMS or its designated fee-for-service contractor within 2 business days; and
- Permit CMS, including its agents or its designated fee-for-service contractors, to conduct unannounced, on-site inspections to confirm the IDTF's compliance with these proposed standards. The IDTF would be required to provide access, during regular business hours, to CMS and beneficiaries, as well as maintain a visible sign posting the normal business hours of the IDTF.

3. Supervision

To ensure quality care is provided to Medicare beneficiaries, we are proposing to revise § 410.33(b)(1) to read that physicians will be limited to providing supervision to "no more than three (3) IDTF sites."

4. Place of Service

In addition to proposing the establishment of specific supplier standards for IDTFs, at proposed § 410.33(i), we are proposing to define the "point of the actual delivery of service" as the correct "Place of Service" for the claim form in the case of diagnostic testing performed outside the IDTF's physical location. For example, when an IDTF performs a diagnostic test at a beneficiary's residence, we believe that it is reasonable to establish the beneficiary's residence as the "Place of Service." Previously, there has been no set procedure, so therefore, we believe that the information is gathered at the collection point from the beneficiary, and this is the point service. While most diagnostic tests are performed in an office setting, we are seeking public comment regarding the types of services that can be safely and appropriately used in a residential setting.

M. Independent Laboratory Billing for the TC of Physician Pathology Services to Hospital Patients

[If you choose to comment on issues in this section, please include the caption "INDEPENDENT LAB BILLING" at the beginning of your comments.]

The TC of physician pathology services refers to the preparation of the slide involving tissue or cells that a pathologist will interpret. (In contrast, the pathologist's interpretation of the slide is the PC service. If this service is furnished by the hospital pathologist for a hospital patient, it is separately billable. If the independent laboratory's pathologist furnishes the PC service, it is usually billed with the TC service as a combined service.)

In the "Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2000" final rule published in the **Federal Register** on November 2, 1999 (64 FR 59380 and 59408 through 59409), we stated that we would implement a policy to pay only the hospital for the TC of physician pathology services furnished to hospital patients. Before that proposal, any independent laboratory could bill the carrier under the PFS for the TC of physician pathology services for hospital patients. As pointed out in the November 2, 1999 final rule, this policy has contributed to the Medicare program paying twice for the TC service, first through the inpatient prospective payment rate to the hospital where the patient is an inpatient and again to the independent laboratory that bills the carrier, instead of the hospital, for the TC service.

Therefore, in that final rule at § 415.130, we provided that, for services furnished on or after January 11, 2001, the carriers would no longer pay claims to the independent laboratory under the physician fee schedule for the TC of physician pathology services for hospital patients.

Ordinarily, the provisions in the final PFS are implemented in the following year. However, in this case, the change to § 415.130 was delayed one year (until January 1, 2001), at the request of the industry, to allow independent laboratories and hospitals sufficient time to negotiate arrangements. Moreover, our full implementation of § 415.130 was further delayed through CY 2006.

We continue to believe, however, that hospital prospective payment amounts already compensate hospitals for the TC of physician pathology tests and that additional payment under the PFS is inappropriate. Therefore, we are proposing to amend § 415.130 to provide that, for services furnished after December 31, 2006, an independent laboratory may not bill the carrier for physician pathology services furnished to a hospital inpatient or outpatient. Under proposed § 415.130(d), we would pay under the PFS for the TC of a physician pathology service furnished by an independent laboratory for services provided to an inpatient or outpatient of a "covered hospital" on or before December 31, 2006. A "covered hospital" is defined in § 415.130(a)(1).

N. Public Consultation for Medicare Payment for New Outpatient Clinical Diagnostic Laboratory Tests

[If you choose to comment on issues in this section, please include the caption "CLINICAL DIAGNOSTIC LAB TESTS" at the beginning of your comments.]

Section 1833(h) of the Act requires the Secretary to establish fee schedules for clinical laboratory tests under Medicare Part B. In this section of the preamble, we are proposing to implement section 942(b) of the MMA which specifies annual procedures for consulting the public on how to establish payment for new clinical laboratory test codes to be included in the annual update of the clinical laboratory fee schedule.

1. BIPA (Pub. L. 106–554)

Section 531(b) of BIPA mandated that we establish, no later than 1 year after the date of enactment, procedures that permit public consultation for payment determinations for new clinical diagnostic laboratory tests under Medicare Part B in a manner consistent with the procedures established for implementing ICD–9–CM coding modifications. In the November 23, 2001 **Federal Register** (66 FR 58743), we specified the procedures to implement section 531(b) of BIPA.

These procedures were most recently used to determine the payments for new 2006 clinical laboratory fee schedule codes. First, we convened a public meeting to solicit expert input on the nature of the new tests before rate determinations were made. We have held these meetings each year since 2002 to receive this expert input on the next year's codes. Our most recent meeting was announced in the **Federal Register** on May 27, 2005 (70 FR 30734) and occurred on July 18, 2005. In that meeting, we requested that presenters address the new test codes, each test's purpose, method, cost, and a recommendation for one of two methods (crosswalking or gapfilling) for determining payment for the new clinical laboratory codes. Crosswalking and gapfilling are discussed below in section N.2.d.

Following the public meeting, we posted, on our Website, a summary of the new codes and the payment recommendations that were presented during the public meeting. The summary also displayed our tentative payment determinations and indicated a comment period for interested parties to submit written comments. After reviewing the comments received, we issued Medicare Transmittal 750, 2006 Annual Update for Clinical Laboratory

Fee Schedule, which provided all instructions and final rate determinations for the 2006 clinical laboratory fee schedule including the new codes and fees, on November 18, 2005.

2. Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) (Pub. L. 108–173)

Further legislation affecting public consultation for new clinical laboratory tests was enacted at section 942(b) of the MMA (Pub. L. 108–173), which added section 1833(h)(8) to the Act. Section 1833(h)(8)(A) of the Act requires the Secretary to establish by regulation procedures for determining the basis for and amount of payment for a clinical diagnostic laboratory test that is assigned a new or substantially revised Healthcare Common Procedure Coding System (HCPCS) code on or after January 1, 2005. We refer to these tests as "new tests."

Section 1833(h)(8)(B) of the Act provides that determinations of payment amounts for new tests shall be made only after the Secretary—

- Makes available to the public (through an Internet Web site and other appropriate mechanisms) a list that includes codes for which establishment of a payment amount is being considered for the next calendar year;
- On the same day the list of codes is made available, publishes a **Federal Register** notice of a meeting to receive public comments and recommendations (and data on which recommendations are based) on the appropriate basis for establishing payment amounts for the list of codes made available to the public;
- Not less than 30 days after publication of the notice in the **Federal Register**, convenes a meeting that includes representatives of CMS officials involved in determining payment amounts, to receive public comments and recommendations (and data on which the recommendations are based); and
- Taking into account the comments and recommendations (and accompanying data) received at the public meeting, develops and makes available to the public (through an Internet Web site and other appropriate mechanisms)—

+ A list of proposed determinations with respect to the appropriate basis for establishing a payment amount for each code, together with an explanation of the reasons for each determination, the data on which the determinations are based, and a request for public written comments on the proposed determination; and

+ A list of final determinations of the payment amounts for tests, together with the rationale for each determination, the data on which the determinations are based, and responses to comments and suggestions from the public.

We believe that our current process for providing for public consultation on the establishment of payment amounts for new clinical laboratory tests is consistent with the requirements of section 1833(h)(8)(B) of the Act. We currently make available to the public through a posting on the CMS Web site a list of new laboratory test codes for the next calendar year. We publish a **Federal Register** notice of a meeting to receive public comments and recommendations and convene the meeting with appropriate CMS officials in attendance. We take into account the input received at the public meeting and we make available to the public on the CMS Web site a list of the proposed determinations and seek comment. We then make available to the public our final determinations in the instructions that we provide to our claims processing contractors to implement the Medicare Part B clinical laboratory fee schedule each year.

The most significant change required by section 1886(h)(8)(A) of the Act with respect to our procedures for public consultation is that we codify this process in regulations. Therefore, in this proposed rule, we are proposing to codify our current process for public consultation for new clinical diagnostic laboratory tests paid under the Medicare Part B clinical laboratory fee schedule at proposed new Subpart F—Payment for New Clinical Diagnostic Laboratory Tests (§ 414.402 through § 414.406).

a. Proposed Basis and Scope (§ 414.400)

This proposed new subpart would implement provisions of section 1833(h)(8) of the Act—procedures for determining the basis for, and amount of, payment for a new clinical diagnostic laboratory test with respect to which a new or substantially revised Healthcare Common Procedure Coding System code is assigned on or after January 1, 2005.

b. Proposed Definition (§ 414.402)

As specified in section 942(b) of the MMA, we propose to define the term "Substantially Revised Healthcare Common Procedure Coding System Code" to mean a code for which there has been a substantive change to the definition of the test or procedure to which the code applies (such as a new analyte or a new methodology for measuring an existing analyte specific test).

c. Proposed Procedures for Public Consultation for Payment for a New Clinical Diagnostic Laboratory Test (§ 414.406)

For a clinical laboratory test that is assigned a new or substantially revised code on or after January 1, 2005, we would establish a local fee schedule amount only after the following:

- We make available to the public (through an Internet Web site and other appropriate mechanisms) a list that includes codes for which establishment of a payment amount is being considered for the next calendar year.
- We publish a **Federal Register** notice of a meeting to receive public comments and recommendations (and data on which recommendations are based) on the appropriate basis, as specified in proposed new § 414.408, for establishing payment amounts for the list of codes made available to the public.
- Not less than 30 days after publication of the notice in the **Federal Register**, we convene a meeting, that includes representatives of CMS officials involved in determining payment amounts, to receive public comments and recommendations (and data on which the recommendations are based).
- Taking into account the comments and recommendations (and accompanying data) received at the public meeting, we develop and make available to the public (through an Internet Web site and other appropriate mechanisms)—

+ A list of proposed determinations with respect to the appropriate basis for establishing a payment amount for each code, together with an explanation of the reasons for each determination, the data on which the determinations are based, and a request for public written comments on the proposed determination within a specified time period; and

+ A list of final determinations of the payment amounts for tests, together with the rationale for each determination, the data on which the determinations are based, and responses to comments and suggestions from the public.

d. Proposed Payment for a New Clinical Diagnostic Laboratory Test—Crosswalking and Gapfilling (§ 414.408)

We are proposing to add a new § 414.408 to indicate when, in establishing the payment amount for a new clinical laboratory test, one of two payment methods can be utilized. The

first payment method, called "crosswalking," is used if a new test is determined to be comparable to an existing test, multiple existing test codes, or a portion of an existing test code. We propose that a new test code would be assigned the related existing local fee schedule amounts and national limitation amount.

In new § 414.408, we propose to use the second method, called "gapfilling," when no comparable, existing test is available. Currently when using this method, manual instructions are provided to each Medicare carrier to determine a payment amount for its geographic area(s) for use in the first year, and the carrier-specific amounts are used to establish a national limitation amount for following years. Consistent with our current process, the sources of information carriers examine in determining gapfill amounts, if available, include—

- Charges for the test and routine discounts to charges;
- Resources required to perform the test;
- Payment amounts determined by other payers; and
- Charges, payment amounts, and resources required for other tests that may be comparable or otherwise relevant.

Currently, our manual instructions allow carriers to consider other sources of information as appropriate, including clinical studies and information provided by clinicians practicing in the area, manufacturers, or other interested parties. Carriers are also instructed to establish carrier specific amounts on or before March 31 of the year and to revise their carrier specific amount, if necessary, on or before September 1 of the year. In this manner, a carrier may revise its carrier specific amount based on additional information, but there is also a specific time frame to perform this revision so that we have adequate time to receive and use the carrier specific amounts for the calculation of the next year's clinical laboratory fee schedule.

Currently for new gapfilled laboratory tests, the payment amount beginning in the second year is based on the lower of the carrier specific amount determined in the first year or the national limitation amount. In accordance with section 1833(h) of the Act, the national limitation amount is set at the median of the carrier-specific amounts.

In light of new MMA provisions, however, we are proposing, in new § 414.408, to prospectively eliminate payment of new gapfilled tests at a carrier specific amount after the first year. Section 1833(h)(8)(A) of the Act gives the Secretary authority to establish procedures for determining the payment amount for laboratory tests for which new or substantially revised HCPCS codes were established on or after January 1, 2005. Under this authority, we propose, in new § 414.408(b), to pay for a new gapfilled laboratory test under our existing methodology for the first year (the carrier would establish a gapfill amount.) Beginning in the second year, the test would be paid at the national limitation amount. This would result in consistent payment in geographic areas for a new test using the median of the carrier gapfill amounts.

3. Other Laboratory Issues

This section discusses other laboratory issues related to quality and glucose monitoring in SNFs.

a. Quality

In addition to providing payments, Medicare's clinical laboratory fee schedule for both new and existing tests should foster the provision of quality care and the prevention of avoidable health care costs. We are exploring the development of measures related to the quality and efficiency of care, including those involving clinical laboratory fee schedule services. Physicians' decisions are central to the health care their patients receive and are informed by appropriate clinical laboratory testing. We want to work with physicians, providers and the clinical laboratory community to identify ways to promote utilization decisions that clearly increase the quality of care while avoiding unnecessary costs for beneficiaries and the Medicare program.

As part of its strategies to improve quality of care, CMS could require those who perform laboratory tests to submit laboratory values using common vocabulary standards, such as those found in the Logical Observation Identifiers Names and Codes (LOINC®) database.

The LOINC® database currently contains about 41,000 observational terms, of which nearly 31,000 are observational terms related to laboratory testing. The laboratory subset of the LOINC® database provides universal names and codes for identifying the results of clinical laboratory tests and it facilitates the exchange and pooling of clinical laboratory results for clinical care, outcomes management and research. Note that LOINC® describes the test result, but does not provide it. It is, therefore, only one possible component of a comprehensive system of collecting clinical laboratory fee test results. Each LOINC® record corresponds to a single test result or panel. The following are some examples of LOINC records:

LOINC code LOINC name (component: property: timing: specimen: scale)

2951–2 SODIUM:SCNC:PT:SER/PLAS:QN
2955–2 SODIUM:SCNC:PT:UR:QN
2956–1 SODIUM:SRAT:24H:UR:QN
2164–2 CREATININE RENAL CLEARANCE:VRAT:24H:UR:QN
1514–9 GLUCOSE^2H POST 100 G GLUCOSE PO:MCNC:PT:SER/PLAS:QN
3665–7 GENTAMICIN^TROUGH:MCNC:PT:SER/PLAS:QN
17863–2 CALCIUM.IONIZED:MCNC:PT:SER/PLAS:QN
2863–9 ALBUMIN:MCNC:PT:SNV:QN:ELECTROPHORESIS

The parts of the LOINC® name refer to different aspects of the test result. The component is the analyte (for example, sodium). The property is the characteristic of the analyte that is measured, evaluated or observed (for example SCNC = substance concentration). Timing indicates whether the measurement is an observation at a moment of time, or an observation integrated over an extended duration of time (for example, PT = point in time). The specimen is the type of sample (for example, SER/PLAS = serum or plasma). The scale is the type of scale (for example QN = quantitative). For further detail, please see the LOINC® Web site at *http://www.loinc.org*.

On September 23, 2005 (70 FR 55900–56025), we published the proposed rule "HIPAA Administrative Simplification: Standards for Electronic Health Care Claims Attachments." This rule proposed standards for electronically requesting and supplying particular types of additional health care information in the form of an electronic attachment to support submitted health care claims data. The proposed rule specified a standard attachment form for reporting laboratory results (among other standards) and proposed adoption of LOINC® as the standard code set for reporting such results.

While the laboratory claims attachment standard and use of LOINC® could provide a means for reporting test result data, we recognize that there are significant operational and other challenges that would need to be addressed before Medicare could begin to collect laboratory values in a comprehensive fashion using common vocabulary standards and that these challenges need to be met in partnership with the clinical laboratory community. We look forward to working

collaboratively with the clinical laboratory community on these issues.

b. Blood Glucose Monitoring in SNFs

In response to inquiries regarding our policy on blood glucose monitoring in SNFs, we are taking this opportunity to restate our long-standing policy on coverage of blood glucose monitoring services and to propose to codify physician certification requirements for blood glucose monitoring in SNFs.

Generally, section 1862(a)(1)(A) of the Act requires that a service be reasonable and necessary for diagnosis and treatment in order to be eligible for coverage by Medicare. Our regulations at § 410.32(a) already require that, for any diagnostic test, including a clinical diagnostic laboratory test, to be considered reasonable and necessary, it must be both ordered by the physician and the ordering physician must use the result in the management of the beneficiary's specific medical problem. Tests not ordered by the physician who is treating the beneficiary are not reasonable and necessary.

In the context of blood glucose monitoring, we most recently stated this policy in Transmittal AB–00–108, "Glucose Monitoring", which is available on our Web site at *http://www.cms.hhs.gov/transmittals/downloads/ab00108.pdf.* This interpretation of § 410.32 is also the basis for our policy in Chapter 7 of the Medicare Claims Processing Manual ("Skilled Nursing Facility Part B Billing" available on our Web site at *http://www.cms.hhs.gov/manuals/downloads/clm104c07.pdf.*)

In addition, section 1835(a)(2)(B) of the Act provides that, in the case of certain "medical and other health services" (including clinical diagnostic laboratory services), payment may be made for Part B services that are furnished by a provider of services only if a physician certifies—and recertifies where those services are furnished over a period of time, with such frequency, and accompanied by such supporting material, as may be provided by regulation—that those services were medically necessary. The regulations currently implementing this provision at § 424.24 do not specifically address the issue of blood glucose monitoring in SNFs. Therefore, we are proposing to amend § 424.24 to provide that, for each blood glucose test furnished to a resident of a SNF, the physician must certify that the test is medically necessary. We are also proposing to amend § 424.24 to clarify that a physician's standing order is not sufficient to order routine blood glucose monitoring.

c. Other Lab Issues—Proposed Clinical Diagnostic Laboratory Date of Service (DOS) for Stored Specimens

We are proposing to add a new § 414.410 to address concerns that have been raised regarding the date of service of a clinical diagnostic laboratory test that use a stored (or "archived") specimen. In the final rule of coverage and administrative policies for clinical diagnostic laboratory services that we published on November 23, 2001 (66 FR 58792), we adopted a policy under which the date of service for clinical diagnostic laboratory services generally is the date the specimen is collected. For laboratory tests that use an archived specimen, however, the date of service is the date the specimen was obtained from the storage. In 2002, we issued Program Memorandum AB–02–134 which permitted contractors discretion in making determinations regarding the length of time a specimen must be stored to be considered archived. In response to comments requesting that we issue a national standard to clarify when a stored specimen can be considered "archived," in the Procedures for Maintaining Code Lists in the Negotiated National Coverage Determinations for Clinical Diagnostic Laboratory Services final notice, published in the **Federal Register** on February 25, 2005 (70 FR 9355), we defined an "archived" specimen as a specimen that is stored for more than 30 calendar days before testing. The date of service for these archived specimens is the date the specimen was obtained from storage. Specimens stored 30 days or less have a date of service of the date the specimen was collected. The February 25, 2005 final notice also clarified that the date of service for tests when the collection spanned more than two calendar days is the date the collection ended. Instructions that implemented these policies were added to Chapter 16, section 40.8 of the Medicare Claims Processing Manual (Pub. 100–04) with the issuance of Transmittal 800 (CR 4156), on December 30, 2005.

Recently, we have received correspondence that expressed concern that our policies have created some unintended consequences, especially in situations in which a specimen is taken in a hospital setting, but then later used for a test after the patient has left the hospital. Under the current manual instructions, if the specimen used for a test ordered subsequent to the beneficiary's discharge is obtained less than 31 calendar days following the date the specimen was collected, the date of service of the test is the date of collection. The date of service of a test may affect payment because, if the date of service falls during an inpatient stay or on a day on which the beneficiary had an outpatient procedure, payment for the laboratory test usually is bundled with the hospital service. To address these concerns, we are proposing to change our current policy so that the date of service would be the date the specimen is obtained from storage, even if the specimen is obtained less than 31 days from the date it was collected, without violating the unbundling rules as long as the following conditions are met:

- The test is ordered by the patient's physician at least 14 days following the date of the patient's discharge from the hospital.
- The test could not reasonably have been ordered while the patient was hospitalized.
- The procedure performed while the beneficiary is a patient of the hospital is for purposes other than collection of the specimen needed for the test.
- The test is reasonable and medically necessary.

These conditions are consistent with the guidance in Chapter 16, sec 40.3 of the Claims Processing Manual, which states that "When the hospital obtains laboratory tests for outpatients under arrangements with clinical laboratories or other hospital laboratories, only the hospital can bill for the arranged services."

In addition, Chapter 3 of the Program Integrity Manual contains instructions for additional documentation if further development of laboratory claims for pre-or postpay are required. Although we believe these changes will help to maintain beneficiary access to care, we are concerned about the potential for these policy changes creating inappropriate incentives in the development of technology and the implications for the unbundling of services. We solicit comment on the proposed changes and these concerns.

O. Proposal to Establish Criteria for National Certifying Bodies That Certify Advanced Practice Nurses

[If you choose to comment on issues in this section, please include the caption "Criteria for National Certifying Bodies-Advanced Practice Nurses" at the beginning of your comments.]

Federal regulatory qualifications for nurse practitioners (NPs) at 42 CFR 410.75 require that an individual be certified as an NP by a recognized national certifying body that has established standards for NPs. Similarly, Federal regulatory qualifications for clinical nurse specialists (CNSs) at 42

CFR 410.76 require that an individual be certified as a CNS by a national certifying body that has established standards for CNSs and that is approved by the Secretary.

Currently, there is not a list of recognized or approved national certifying bodies for NPs and CNSs in regulations. However, Chapter 15, section 200 of the Benefit Policy Manual, Pub. 100–02 contains a list of national certifying bodies that are recognized by Medicare as being appropriate for certification of NPs. Although the manual provision regarding CNS services at Chapter 15, section 210 of the Benefit Policy Manual lists only the American Nurses Credentialing Center as an approved national certifying body for CNSs, we indicated that the list of recognized certifying bodies in the manual provision for NP services would also apply for CNSs in the "Revisions to Payment Policies Under the CY 2003 Physician Fee Schedule and Inclusion of Registered Nurses in the Personnel Provision of the Critical Access Hospital Emergency Services Requirement for Frontier Areas and Remote Locations; Payment Policies final rule (December 31, 2002, 67 FR 79987). The national certifying bodies that are listed under the manual instruction at section 200, and that currently apply for both NPs and CNSs (collectively, advanced practice nurses) are as follows:

- American Academy of Nurse Practitioners;
- American Nurses Credentialing Center;
- National Certification Corporation for Obstetric, Gynecologic and Neonatal Nursing Specialties;
- National Certification Board of Pediatric Nurse Practitioners and Nurses;
- Oncology Nurses Certification Corporation;
- Critical Care Certification Corporation.

In the December 31, 2002 final rule, in response to a public comment, we stated, "it is not the agency's intention to be overly restrictive in our program requirements and consequently prevent qualified CNSs who specialize in areas of medicine other than those certified by the American Nurses Credentialing Center (ANCC) from participating under the CNS benefit and from rendering care to patients in need of specialized services. Furthermore, the intent of the revision to the certification requirement for CNSs is to recognize all appropriate national certifying bodies for CNSs as the program does for NPs." Accordingly, in an effort to recognize all appropriate national certifying bodies for CNSs and NPs, we added, at that time, the Oncology Nurses Certification Corporation (ONCC) and the Critical Care Certification Corporation (CCCC) to the list of recognized national certifying bodies for advanced practice nurses.

The National Board on Certification of Hospice and Palliative Care Nurses (NBCHPN) has requested that we now follow the same course of action as we did for the ONCC and the CCCC by adding its name to the list of recognized national certifying bodies. That is, NBCHPN believes that it is an appropriate national certifying body based on its certification experience, principles, services, and the certification exam that it administers to advanced practice nurses who specialize in palliative care for hospice patients.

The NBCHPN stated in information it sent to the agency that its organization is a well-established certification body with more than 12-years history of certification and that it has been certifying advanced practice hospice and palliative nurses since 2003 in partnership with the ANCC. Starting in 2005, the NBCHPN became sole proprietor of the Advanced Certified Hospice and Palliative Nurse (ACHPN) examination. Master's level nurse practitioners and clinical nurse specialists sit for this ACHPN examination that is based on a role delineation study for the advanced practice level of hospice and palliative nursing. Additionally, the NBCHPN stated that it has met the requirements of the American Board of Nursing Specialties and is an active member of the Board of Specialties, as is the ANCC. The Executive Director of the NBCHPN stated that she believes that the absence of the NBCHPN from the current list of recognized national certifying bodies presents a barrier for advanced practice nurses in the hospice palliative care specialty because they are denied enrollment on the basis that they do not meet the certification qualification requirement. The Web site for the NBCHPN can be found at *www.nbchpn.com.*

We are soliciting public comments on whether it would be appropriate to include the NBCHPN under the list of recognized and approved national certifying bodies for NPs and CNSs under manual instructions for both NPs and CNSs. We are also soliciting public comments on criteria or standards that we could use to determine whether an organization is an appropriate national certifying body for advanced practice nurses. CMS realizes that the agency may receive other requests in the future from organizations that wish to be to be added to the list of recognized or approved national certifying bodies. In anticipation of those requests, the agency is interested in developing certification standards that would facilitate the process for making these decisions.

P. Chiropractic Services Demonstration

[If you choose to comment on issues in this section, please include the caption "Chiropractic Services Demonstration" at the beginning of your comments.]

In the FY 2006 PFS final rule (November 21, 2005), we included a discussion of the 2-year demonstration authorized by section 651 of the MMA to evaluate the feasibility and advisability of covering chiropractic services under Medicare. These services extend beyond the current coverage for manipulation to care for neuromusculoskeletal conditions typical among eligible beneficiaries, and cover diagnostic and other services that a chiropractor is legally authorized to perform by the State or jurisdiction in which the treatment is provided. The demonstration is being conducted in four sites, two rural and two urban. The demonstration must be budget neutral as the statute requires the Secretary to ensure that the aggregate payment made under the Medicare program does not exceed the amount which would be paid in the absence of the demonstration.

Ensuring budget neutrality requires that the Secretary develop a strategy for recouping funds should the demonstration result in costs higher than those that would occur in the absence of the demonstration. As we stated in the FY 2006 PFS, we would make adjustments in the national chiropractor fee schedule to recover the costs of the demonstration in excess of the amount estimated to yield budget neutrality. We will assess budget neutrality by determining the change in costs based on a pre/post comparison of costs and the rate of change for specific diagnoses that are treated by chiropractors and physicians in the demonstration sites and control sites. We will not limit our analysis to reviewing only chiropractor claims, because the costs of the expanded chiropractor services may have an impact on other Medicare costs.

Any needed reduction would be made in the 2010 and 2011 physician fee schedules as it will take approximately 2 years to complete the claims analysis. If we determine that the adjustment for budget neutrality is greater than 2 percent of spending for the chiropractor fee schedule codes (comprised of the 3

currently covered CPT codes 98940, 98941, and 98942), we would implement the adjustment over a 2-year period. However, if the adjustment is less than 2 percent of spending under the chiropractor fee schedule codes, we would implement the adjustment over a 1-year period. We will include the detailed analysis of budget neutrality and the proposed offset during the 2009 rulemaking process. PT services performed by chiropractors under the demonstration are subject to the PT therapy cap. These services are included under the cap because chiropractors are subject to the same rules as medical doctors for therapy services under the demonstration.

Q. Promoting Effective Use of Health Information Technology (HIT)

(If you choose to comment on issues in this section, please include the caption "Promoting Effective Use of HIT" at the beginning of your comment.)

We recognize the potential for health information technology (HIT) to facilitate improvements in the quality and efficiency of health care services. One recent RAND study found that broad adoption of electronic health records could save more than $81 billion annually and, at the same time, improve quality of care.[1] The largest potential savings that the study identified was in the hospital setting because of shorter hospital stays promoted by better coordinated care; less nursing time spent on administrative tasks; better use of medications in hospitals; and better utilization of drugs, laboratory services, and radiology services in hospital outpatient settings. The study also identified potential quality gains through enhanced patient safety, decision support tools for evidence-based medicine, and reminder mechanisms for screening and preventive care. Despite these large potential benefits, the study found that only about 20 to 25 percent of hospitals have adopted HIT systems.

It is important to note the caveats to the RAND study. The projected savings are across the health care sector, and any Federal savings would be a reduced percentage. In addition, there are significant assumptions made in the RAND study. National savings are projected in some cases based on one or two small studies. Also, the study assumes patient compliance, in the form of participation in disease management programs and following medical advice. For these reasons, extreme caution should be used in interpreting these results.

In summary, there are mixed signals about the potential of HIT to reduce costs. Some studies have indicated that HIT adoption does not necessarily lead to lower costs and improved quality. In addition, some industry experts have stated that factors such as an aging population, medical advances, and increasing provider expenses would make any projected savings impossible.

In his 2004 State of the Union Address, the President announced a plan to ensure that most Americans have electronic health records within 10 years.[2] One part of this plan involves developing voluntary standards and promoting the adoption of interoperable HIT systems that use these standards. The 2007 Budget states that "The Administration supports the adoption of health information technology (IT) as a normal cost of doing business to ensure patients receive high quality care."

Over the past several years, we have undertaken several activities to promote the adoption and effective use of HIT in coordination with other Federal agencies and with the Office of the National Coordinator for Health Information Technology. One of those activities is promotion of data standards for clinical information, as well as for claims and administrative data.

As noted above, the Administration supports the adoption of HIT as a normal cost of doing business. The adoption and use of HIT may contribute to improved processes and outcomes of care, including shortened illnesses and the avoidance of adverse drug reactions.

R. Health Care Information Transparency Initiative

(If you choose to comment on issues in this section, please include the caption "Health Care Information Transparency Initiative" at the beginning of your comment.)

The United States (U.S.) faces a dilemma in health care. Although the rate of increase in health care spending slowed last year, costs are still growing at an unsustainable rate. The U.S. spends $1.9 trillion on health care, or 16 percent of the gross domestic product (GDP). By 2015, projections are that health care will consume 20 percent of GDP. As indicated in the 2006 Annual Report of the Boards of Trustees, the Medicare program alone consumes 3.2 percent of the GDP and by 2040, it will consume 8.0 percent of the GDP.

Part of the reason health care costs are rising so quickly is that most consumers of health care—the patients—are frequently not aware of the actual cost of their care. Health insurance shields them from the full cost of services, and they have only limited information about the quality and costs of their care. Consequently, consumers do not have the incentive or means to carefully shop for providers offering the best value. Thus, providers of care are not subject to the competitive pressures that exist in other markets for offering quality services at the best possible price. Reducing the rate of increase in health care prices and avoiding health services of little value could help to stem the growth in health care spending, and potentially reduce the number of individuals who are unable to afford health insurance. Part of the President's health care agenda is to expand Health Savings Accounts (HSAs), which would provide consumers with greater financial incentives to compare providers in terms of price and quality, and choose those that offer the best value.

In order to exercise those choices, consumers must have accessible and useful information on the price and quality of health care items and services. Typically, health care providers do not publicly quote or publish their prices. Moreover, list prices, or charges, generally differ from the actual prices negotiated and paid by different health plans. Thus, even if consumers were financially motivated to shop for the best price, it would be very difficult at the current time for them to access usable information.

For these reasons, DHHS is launching a major health care information transparency initiative in 2006. This effort builds on steps taken by CMS to make quality and price information available. For example, Medicare has provided unprecedented information about drug prices in the Medicare drug benefit, and is now adding to these efforts in other areas. Medicare payment information for common elective procedures and other common admissions for all hospitals by county has been posted on our Web site at: *http://www.cms.hhs.gov/HealthCareConInit/01Overview.asp#TopOfP*.

We will post geographically-based Medicare payment information for common elective procedures for ambulatory surgery centers this summer and for common hospital outpatient and physician services this fall.

[1] RAND News Release: Rand Study Says Computerizing Medical Records Could Save $81 Billion Annually and Improve the Quality of Medical Care, September 14, 2005, available at *http://rand.org/news/press.05/09.14.html*.

[2] Transforming Health Care: The President's Health Information Technology Plan, available at: *http://www.whitehouse.gov/infocus/technology/economic_policy200404/chap3.html*.

In addition, a number of tools providing usable healthcare information are already available to Medicare beneficiaries. Supported by the public-private quality alliances, consumers can access "Compare" Web sites through *www.medicare.gov* where they can evaluate important aspects of their health care options for care at a hospital, nursing home, home health agency, and dialysis facility, as well as compare their costs and coverage when choosing a prescription drug plan.

We are developing a project with the goals of providing more comprehensive information on quality and costs, including more complete measures of health outcomes, satisfaction, and volume of services that matter to consumers, and more comprehensive measures of costs for entire episodes of care, not just payments for particular services and admissions. We intend for the project to combine public and private health care data to measure cost and quality of care information at the physician and hospital levels. Quality, cost, pricing, and patient information will be reported to consumers and purchasers of health care in a meaningful and transparent way.

III. Collection of Information Requirements

Under the Paperwork Reduction Act of 1995, we are required to provide 60-day notice in the **Federal Register** and solicit public comment before a collection of information requirement is submitted to the Office of Management and Budget (OMB) for review and approval. In order to fairly evaluate whether an information collection should be approved by OMB, section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 requires that we solicit comment on the following issues:

- The need for the information collection and its usefulness in carrying out the proper functions of our agency.
- The accuracy of our estimate of the information collection burden.
- The quality, utility, and clarity of the information to be collected.
- Recommendations to minimize the information collection burden on the affected public, including automated collection techniques.

We are soliciting public comment on each of these issues for the following sections of this document that contain information collection requirements:

Section 410.33 Independent Diagnostic Testing Facility

Section 410.33(e)(1) imposes a recordkeeping requirement on multi-state entities. Specifically, an independent diagnostic testing facility (IDTF) that operates across State boundaries must maintain documentation that its supervising physicians and technicians are licensed and certified in each of the States in which it operates. The burden associated with this requirement is the time and effort it takes the IDTF to collect and maintain the aforementioned information.

While subject to the PRA, we believe this information collection requirement is exempt as defined in 5 CFR 1320.3(b)(2), because the time, effort, and financial resources necessary to comply with the requirement would be incurred by persons in the normal course of their activities (for example, in compiling and maintaining business records) and is considered to be usual and customary.

Section 410.33(g) discusses the application certification standards that an IDTF must meet. An IDTF must complete an enrollment application and certify the information contained in the application. The certification is part of an application that is subject to the PRA. The burden associated with this requirement is the time and effort necessary to complete the application. This requirement is currently approved in OMB No. 0938–0685, with a current expiration date of April 30, 2009.

If you comment on these information collection and recordkeeping requirements, please mail copies directly to the following:

Centers for Medicare & Medicaid Services, Office of Strategic Operations and Regulatory Affairs, Regulations Development Group, Attn: William N. Parham, III, [CMS–1321–P], Room C4–26–05, 7500 Security Boulevard, Baltimore, MD 21244–1850; and

Office of Information and Regulatory Affairs, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503, Attn: Carolyn Lovett, CMS Desk Officer, [CMS–1321–P], carolyn_lovett@omb.eop.gov. Fax (202) 395–6974.

IV. Response to Comments

Because of the large number of public comments we normally receive on **Federal Register** documents, we are not able to acknowledge or respond to them individually. We will consider all comments we receive by the date and time specified in the **DATES** section of this preamble, and, when we proceed with a subsequent document, we will respond to the comments in the preamble to that document.

V. Regulatory Impact Analysis

[If you choose to comment on issues in this section, please include the caption "IMPACT" at the beginning of your comments.]

We have examined the impact of this rule as required by Executive Order 12866 (September 1993, Regulatory Planning and Review), the Regulatory Flexibility Act (RFA) (September 19, 1980 Pub. L. 96–354), section 1102(b) of the Social Security Act, the Unfunded Mandates Reform Act of 1995 (Pub. L. 104–4), and Executive Order 13132.

Executive Order 12866 (as amended by Executive Order 13258, which merely reassigns responsibilities of duties) directs agencies to assess all costs and benefits of available regulatory alternatives and, when regulation is necessary, to select regulatory approaches that maximize net benefits (including potential economic, environmental, public health and safety effects, distributive impacts, and equity). A regulatory impact analysis must be prepared for proposed rules with economically significant effects (that is, a proposed rule that would have an annual effect on the economy of $100 million or more in any one year, or would adversely affect in a material way the economy, a sector of the economy, productivity, competition, jobs, the environment, public health or safety, or State, local, or tribal governments or communities). As indicated in more detail below, we estimate that the PFS provisions included in this proposed rule will redistribute more than $100 million in one year. We are considering this proposed rule to be economically significant because its provisions are estimated to result in an increase, decrease or aggregate redistribution of Medicare spending that will exceed $100 million. Therefore, this proposed rule is a major rule and we have prepared a regulatory impact analysis.

The RFA requires that we analyze regulatory options for small businesses and other entities. We prepare a regulatory flexibility analysis unless we certify that a rule would not have a significant economic impact on a substantial number of small entities. The analysis must include a justification concerning the reason action is being taken, the kinds and number of small entities the rule affects, and an explanation of any meaningful options that achieve the objectives with less significant adverse economic impact on the small entities.

Section 1102(b) of the Act requires us to prepare a regulatory impact analysis for any proposed rule that may have a significant impact on the operations of

a substantial number of small rural hospitals. This analysis must conform to the provisions of section 603 of the RFA. For purposes of section 1102(b) of the Act, we define a small rural hospital as a hospital that is located outside a Metropolitan Statistical Area and has fewer than 100 beds. We have determined that this proposed rule would have minimal impact on small hospitals located in rural areas. Of the 222 hospital-based ESRD facilities located in rural areas, only 40 are affiliated with hospitals with fewer than 100 beds.

For purposes of the RFA, physicians, nonphysician practitioners, and suppliers are considered small businesses if they generate revenues of $6 million or less. Approximately 95 percent of physicians are considered to be small entities. There are about 980,000 physicians, other practitioners and medical suppliers that receive Medicare payment under the PFS.

For purposes of the RFA, approximately 80 percent of clinical diagnostic laboratories are considered small businesses according to the Small Business Administration's size standards.

In addition, most ESRD facilities are considered small entities, either based on nonprofit status or by having revenues of $29 million or less in any year. We consider a substantial number of entities to be affected if the proposed rule is estimated to impact more than 5 percent of the total number of small entities. Based on our analysis of the 927 nonprofit ESRD facilities considered small entities in accordance with the above definitions, we estimate that the combined impact of the proposed changes to payment for renal dialysis services included in this proposed rule would have a 0.9 percent increase in overall payments relative to current overall payments.

IDTFs are suppliers under the Medicare program. For purposes of the RFA, suppliers with annual sales of $6 million or less are considered to be small entities. (Individuals and States are not included in the definition of a small entity.) We believe that our proposed standards for IDTFs will help bar fraudulent suppliers from participating in the Medicare program and provide an added level of protection to Medicare beneficiaries. Therefore, we expect to have an impact on an unknown number of persons and entities who will effectively be prevented from practicing their aberrant billing activities. The vast majority of suppliers would not be significantly affected by this proposed rule. The reduction in program overpayments and the added level of protection to beneficiaries that we expect to achieve as a result of this proposed rule justifies the relatively small burden this proposed rule would impose on all small entities.

The analysis and discussion provided in this section, as well as elsewhere in this proposed rule, complies with the RFA requirements.

Section 202 of the Unfunded Mandates Reform Act of 1995 also requires that agencies assess anticipated costs and benefits before issuing any rule that may result in expenditures in any year by State, local, or tribal governments, in the aggregate, or by the private sector, of $120 million. Medicare beneficiaries are considered to be part of the private sector for this purpose.

We have examined this proposed rule in accordance with Executive Order 13132 and have determined that this regulation would not have any significant impact on the rights, roles, or responsibilities of State, local, or tribal governments. A discussion concerning the impact of this rule on beneficiaries is found later in this section.

We have prepared the following analysis, which, together with the information provided in the rest of this preamble, meets all assessment requirements. The analysis explains the rationale for and purposes of this proposed rule; details the costs and benefits of the rule; analyzes alternatives; and presents the measures we propose to use to minimize the burden on small entities. As indicated elsewhere in this proposed rule, we propose to change our methodology for calculating resource-based PE RVUs and make a variety of other changes to our regulations, payments, or payment policies to ensure that our payment systems reflect changes in medical practice and the relative value of services. We provide information for each of the policy changes in the relevant sections of this proposed rule. We are unaware of any relevant Federal rules that duplicate, overlap or conflict with this proposed rule. The relevant sections of this proposed rule contain a description of significant alternatives if applicable.

A. Resource Based PE RVU Proposals for CY 2007 and Section 5102 of the DRA-Proposed Adjustments for Payments for Imaging Services

As required by section 5102(a) of the DRA and described earlier in section II.E.1. of this proposed rule, we are removing, from the PE RVUs under the PFS the 0.3 percent increase made to the PE RVUs in the CY 2006 PFS final rule with comment period to ensure the budget neutrality of the impact of the multiple imaging policy adopted for CY 2006. Section 5102(a) of the DRA exempts the CY 2006 and 2007 impact of the multiple imaging policy from budget neutrality. Because we are proposing to maintain the current 25 percent payment reduction for multiple imaging procedures in CY 2007, there is no additional impact resulting from our proposals for CY 2007. Section 5102 of the DRA also exempts the estimated savings from the application of the OPPS-based payment limitation on PFS imaging services from the PFS budget neutrality requirement. We estimate that the combined impact of the budget neutrality exemptions in section 5102 of the DRA would reduce PFS expenditures by approximately 1.3 percent in CY 2007.

Table 7 below shows the specialty-level impact of section 5102 of the DRA and our most recent estimate (−5.1 percent) of the CY 2007 Medicare PFS update. For reference purposes, we have also included the specialty-level impacts using the methodology from the separate June 29, 2006 proposed notice (71 FR 37170), which solicited comments on proposed changes to the PE methodology as well as changes to work RVUs for certain services based on the agency's completion of a five-year review of work RVUs. The CY 2007 impact of the PE input changes described in section II.A. of this proposed rule that were not included in the June 29, 2006 proposed notice are minimal at the specialty level. Additionally, the impacts in this proposed rule reflect the use of updated physician time data from the AMA–RUC.

Our estimates of changes in Medicare revenues for PFS services compare payment rates for CY 2006 with proposed payment rates for CY 2007 using CY 2005 Medicare utilization for all years. We are using CY 2005 Medicare claims processed and paid through March 30, 2005, that we estimate are 98 percent complete. To the extent that there are year-to-year changes in the volume and mix of services provided by physicians, the actual impact on total Medicare revenues will be different than those shown here. The payment impacts reflect averages for each specialty based on Medicare utilization. The payment impact for an individual physician would be different from the average, based on the mix of services the physician provides. The average change in total revenues would be less than the impact displayed here because physicians furnish services to both Medicare and non-Medicare patients

and specialties may receive substantial Medicare revenues for services that are not paid under the PFS. For instance, independent laboratories receive approximately 80 percent of their Medicare revenues from clinical laboratory services that are not paid under the PFS.

Table 7 shows only the payment impact on PFS services. The following is an explanation of the information represented in Table 7:

- Specialty—The physician specialty or type of practitioner/supplier.
- Allowed Charges—Allowed charges are the Medicare Fee Schedule amounts for covered services and include copayments and deductibles (which are the financial responsibility of the beneficiary.) These amounts have been summed across all services provided by physicians, practitioners, or suppliers with a specialty to arrive at the total allowed charges for the specialty.
- Impact of Work and PE RVU Changes using the June 29, 2006 proposed notice methodology—For references purposes, the combined CY 2007 percentage increase or decrease in allowed charges attributed to changes in the work and PE RVUs described in and republished from the June 29, 2006 proposed notice methodology.
- Impact of section 5102 of the DRA—The CY 2007 percentage decrease in allowed charges attributed to section 5102 of the DRA.
- Combined impact of the June 29, 2006 proposed notice methodology and section 5102 of the DRA.
- CY 2007 Update—The percentage decrease in allowed charges attributed to the most recent estimate of the CY 2007 PFS conversion factor update (−5.1 percent).
- Combined impact with CY 2007 update—The CY 2007 percentage decrease in allowed charges attributed to the June 29, 2006 proposed notice methodology, section 5102 of the DRA, and the CY 2007 update.

TABLE 7: Combined CY 2007 Total Allowed Charge Impact for the Five-Year Review of Work RVUs and Practice Expense Changes, DRA 5102, and the CY 2007 Update

Specialty	Allowed Charges (mil)	Impact of Work and PE RVU Changes using June 29 proposed Notice Methodology	Impact of DRA 5102	Combined Impact June 29 Proposed Notice Methodology and DRA 5102	CY[1] 2007 Update	Combined Impact With CY 2007 Update
Total	$ 74,749	0%	-1%	-1%	-5%	-6%
ALLERGY/IMMUNOLOGY	$ 167	3%	0%	3%	-5%	-3%
ANESTHESIOLOGY	$ 1,710	-7%	0%	-7%	-5%	-12%
CARDIAC SURGERY	$ 389	2%	0%	2%	-5%	-3%
CARDIOLOGY	$ 7,462	-1%	-1%	-2%	-5%	-7%
COLON AND RECTAL SURGERY	$ 120	0%	0%	0%	-5%	-5%
CRITICAL CARE	$ 171	4%	0%	4%	-5%	-1%
DERMATOLOGY	$ 2,145	-2%	0%	-2%	-5%	-7%
EMERGENCY MEDICINE	$ 1,989	7%	0%	7%	-5%	2%
ENDOCRINOLOGY	$ 319	6%	-1%	5%	-5%	0%
FAMILY PRACTICE	$ 4,809	5%	0%	5%	-5%	0%
GASTROENTEROLOGY	$ 1,734	0%	0%	0%	-5%	-5%
GENERAL PRACTICE	$ 1,016	3%	-1%	2%	-5%	-3%
GENERAL SURGERY	$ 2,321	0%	-1%	-1%	-5%	-6%
GERIATRICS	$ 132	2%	0%	2%	-5%	-3%
HAND SURGERY	$ 76	-2%	0%	-2%	-5%	-7%
HEMATOLOGY/ONCOLOGY	$ 1,761	3%	0%	2%	-5%	-3%
INFECTIOUS DISEASE	$ 450	9%	0%	9%	-5%	3%

Specialty	Allowed Charges (mil)	Impact of Work and PE RVU Changes using June 29 proposed Notice Methodology	Impact of DRA 5102	Combined Impact June 29 Proposed Notice Methodology and DRA 5102	CY[1] 2007 Update	Combined Impact With CY 2007 Update
INTERNAL MEDICINE	$ 9,510	5%	0%	5%	-5%	0%
INTERVENTIONAL RADIOLOGY	$ 233	-6%	-3%	-9%	-5%	-14%
NEPHROLOGY	$ 1,585	-1%	0%	-1%	-5%	-6%
NEUROLOGY	$ 1,331	2%	-1%	1%	-5%	-4%
NEUROSURGERY	$ 571	-2%	-1%	-2%	-5%	-7%
NUCLEAR MEDICINE	$ 86	-7%	-2%	-9%	-5%	-14%
OBSTETRICS/GYNECOLOGY	$ 623	1%	0%	1%	-5%	-4%
OPHTHALMOLOGY	$ 4,786	-3%	0%	-3%	-5%	-8%
ORTHOPEDIC SURGERY	$ 3,265	-2%	-1%	-3%	-5%	-8%
OTOLARNGOLOGY	$ 892	0%	0%	0%	-5%	-5%
PATHOLOGY	$ 934	-5%	0%	-5%	-5%	-10%
PEDIATRICS	$ 73	2%	0%	1%	-5%	-4%
PHYSICAL MEDICINE	$ 785	2%	0%	2%	-5%	-4%
PLASTIC SURGERY	$ 279	-1%	0%	-1%	-5%	-6%
PSYCHIATRY	$ 1,128	-2%	0%	-2%	-5%	-7%
PULMONARY DISEASE	$ 1,580	6%	0%	5%	-5%	0%
RADIATION ONCOLOGY	$ 1,448	-1%	0%	-1%	-5%	-7%
RADIOLOGY	$ 5,365	-5%	-6%	-11%	-5%	-16%
RHEUMATOLOGY	$ 469	2%	-1%	2%	-5%	-4%
THORACIC SURGERY	$ 442	1%	-1%	1%	-5%	-5%
UROLOGY	$ 1,949	1%	-1%	0%	-5%	-5%
VASCULAR SURGERY	$ 606	-1%	-6%	-6%	-5%	-11%
AUDIOLOGIST	$ 31	-1%	0%	-1%	-5%	-6%
CHIROPRACTOR	$ 774	-8%	0%	-8%	-5%	-13%
CLINICAL PSYCHOLOGIST	$ 554	-9%	0%	-9%	-5%	-14%
CLINICAL SOCIAL WORKER	$ 362	-9%	0%	-9%	-5%	-14%
NURSE ANESTHETIST	$ 651	-8%	0%	-8%	-5%	-13%
NURSE PRACTITIONER	$ 710	0%	0%	0%	-5%	-5%
OPTOMETRY	$ 838	-3%	0%	-3%	-5%	-8%
ORAL/MAXILLOFACIAL SURG	$ 37	-1%	0%	-1%	-5%	-6%
PHYS/OCC THERAPY	$ 1,593	-4%	0%	-4%	-5%	-9%
PHYSICIANS ASSISTANT	$ 537	1%	0%	1%	-5%	-4%
PODIATRY	$ 1,541	-1%	0%	-1%	-5%	-7%
DIAGNOSTIC TESTING FACILITY	$ 1,214	-2%	-17%	-19%	-5%	-25%
INDEPENDENT LABORATORY	$ 665	4%	0%	4%	-5%	-2%
PORTABLE X-RAY SUPPLIER	$ 87	1%	0%	1%	-5%	-4%

[1] It is our standard policy to use the latest historical data available for compensation, prices, and economy-wide multifactor productivity when determining the Medicare Economic Index (MEI) used for the fee schedule update. The CY07 update will be no different. Beginning in April 2006, the BLS' Employment Cost Indexes (ECI) and economy-wide multifactor productivity (MFP) estimates will use the North American Industrial Classification System (NAICS), instead of the Standard Industrial Codes (SIC), which will no longer exist. Additional information on this issue can be found in the fact sheet which is posted with this proposed rule (CMS -1321-P) on our website at http://www.cms.hhs.gov/PhysicianFeeSched/PFSFRN/list.asp#TopOfPage

Table 8 below shows the impact on total payments for selected high-volume procedures of all of the changes previously discussed. We selected these procedures because they are the most commonly provided by a broad

spectrum of physician specialties. There are separate columns that show the change in the facility rates and the nonfacility rates. For an explanation of facility and nonfacility PE refer to Addendum A of this proposed rule. If we change any of the proposed provisions following the consideration of public comments, these figures may change.

Table 8: Impact of Proposed Rule on and Estimated Physician Update on 2007 Payment For Selected Procedures

CPT/ HCPCS	MOD	Description	Facility			Non-facility		
			Old	New	Percent Change	Old	New	Percent Change
11721		Debride nail, 6 or more	31.08	28.77	-7%	39.79	38.84	-2%
17000		Destroy benign/premlg lesion	44.34	43.52	-2%	60.64	61.14	1%
27130		Total hip arthroplasty	1399.55	1202.66	-14%	1399.55	NA	NA
27244		Treat thigh fracture	1137.68	1103.04	-3%	1137.68	NA	NA
27447		Total knee arthroplasty	1511.35	1385.00	-8%	1511.35	NA	NA
33533		CABG, arterial, single	1933.53	2078.04	7%	1933.53	NA	NA
35301		Rechanneling of artery	1128.97	1086.49	-4%	1128.97	NA	NA
43239		Upper GI endoscopy, biopsy	162.20	157.17	-3%	334.26	319.37	-4%
66821		After cataract laser surgery	230.80	251.03	9%	248.61	267.58	8%
66984		Cataract surg w/iol, 1 stage	683.67	643.41	-6%	683.67	NA	NA
67210		Treatment of retinal lesion	574.15	559.97	-2%	600.30	582.99	-3%
71010		Chest x-ray	28.04	NA	NA	28.04	25.89	-8%
71010	26	Chest x-ray	9.47	8.99	-5%	9.47	8.99	-5%
76091		Mammogram, both breasts	97.40	NA	NA	97.40	97.10	0%
76091	26	Mammogram, both breasts	45.10	42.80	-5%	45.10	42.80	-5%
76092		Mammogram, screening	85.65	NA	NA	85.65	80.92	-6%
76092	26	Mammogram, screening	36.38	34.53	-5%	36.38	34.53	-5%
77427		Radiation tx management, x5	172.05	163.64	-5%	172.05	163.64	-5%
78465	26	Heart image (3d), multiple	76.93	74.81	-3%	76.93	74.81	-3%

CPT/ HCPCS	MOD	Description	Facility			Non-facility		
			Old	New	Percent Change	Old	New	Percent Change
88305	26	Tissue exam by pathologist	42.07	38.84	-8%	42.07	38.84	-8%
90801		Psy dx interview	143.63	133.43	-7%	152.73	147.81	-3%
90862		Medication management	48.89	46.03	-6%	51.92	51.43	-1%
90935		Hemodialysis, one evaluation	73.14	68.33	-7%	73.14	NA	NA
92012		Eye exam established pat	37.14	34.89	-6%	65.18	61.14	-6%
92014		Eye exam & treatment	60.64	56.82	-6%	96.26	90.63	-6%
92980		Insert intracoronary stent	830.71	807.77	-3%	830.71	NA	NA
93000		Electrocardiogram, complete	26.91	24.10	-10%	26.91	24.10	-10%
93010		Electrocardiogram report	9.10	8.63	-5%	9.10	8.63	-5%
93015		Cardiovascular stress test	108.01	102.14	-5%	108.01	102.14	-5%
93307	26	Echo exam of heart	49.27	47.83	-3%	49.27	47.83	-3%
93510	26	Left heart catheterization	257.70	246.00	-5%	257.70	246.00	-5%
98941		Chiropractic manipulation	31.45	29.85	-5%	36.38	34.17	-6%
99203		Office/outpatient visit, new	72.38	68.33	-6%	97.02	91.71	-5%
99213		Office/outpatient visit, est	35.62	43.16	21%	52.68	59.70	13%
99214		Office/outpatient visit, est	59.12	67.97	15%	82.62	90.63	10%
99222		Initial hospital care	112.93	121.92	8%	112.93	NA	NA
99223		Initial hospital care	157.27	178.03	13%	157.27	NA	NA
99231		Subsequent hospital care	34.11	36.68	8%	34.11	NA	NA
99232		Subsequent hospital care	55.71	65.46	17%	55.71	NA	NA
99233		Subsequent hospital care	79.21	93.51	18%	79.21	NA	NA
99236		Observ/hosp same date	223.22	210.03	-6%	223.22	NA	NA
99239		Hospital discharge day	96.64	96.75	0%	96.64	NA	NA
99243		Office consultation	93.99	95.31	1%	122.79	123.00	0%
99244		Office consultation	138.70	148.89	7%	173.19	180.90	4%
99253		Initial inpatient consult	98.91	111.13	12%	98.91	NA	NA
99254		Initial inpatient consult	142.12	160.04	13%	142.12	NA	NA
99283		Emergency dept visit	62.15	62.22	0%	62.15	NA	NA
99284		Emergency dept visit	97.02	114.01	18%	97.02	NA	NA
99291		Critical care, first hour	207.68	213.99	3%	256.95	259.31	1%
99292		Critical care, addl 30 min	104.22	107.53	3%	114.07	116.53	2%
99348		Home visit, est patient	72.01	NA	NA	72.01	67.61	-6%
99350		Home visit, est patient	164.48	NA	NA	164.48	153.57	-7%
G0008		Admin influenza virus vac	18.57	NA	NA	18.57	19.06	3%
G0317		ESRD related svs 4+mo 20+yrs	308.11	286.64	-7%	308.11	286.64	-7%
G0344		Office/outpatient visit, new	72.38	68.69	-5%	97.02	92.07	-5%
G0366		Electrocardiogram, complete	26.91	24.10	-10%	26.91	24.10	-10%
G0367		Electrocardiogram, tracing	17.81	NA	NA	17.81	15.46	-13%
G0368		Electrocardiogram report	9.10	8.63	-5%	9.10	8.63	-5%

B. Geographic Practice Cost Indices (GPCI)—Payment Localities

As discussed in section II.B. of the preamble to this proposed rule, we are proposing new GPCIs for 2007. In the November 15, 2004 PFS final rule, we published 2005 and 2006 GPCI and GAF values reflecting the 2 year phase-in of updated GPCI data. In 2007, the proposed GPCI and GAF values will reflect new budget neutrality scalers (developed by the Office of the Actuary) and the removal of the 1.000 MMA floor from the physician work GPCI. The negative impact of these changes on a number of payment localities is shown in 4 of section II.B. in this proposed rule.

C. Global Period for Remote Afterloading High Intensity Brachytherapy Procedures

As discussed in section II.D.1. of this proposed rule, we are proposing changes to the global period for these

services. We do not anticipate this proposed change will have a significant impact on Medicare expenditures.

D. DRA 5112—Proposed Addition of the Ultrasound Screening for Abdominal Aortic Aneurysm to Welcome to Medicare Benefit

As discussed earlier in section II.E.3. of this preamble, section 5112 of the DRA authorizes coverage of an ultrasound screening for abdominal aortic aneurysms effective January 1, 2007, subject to certain eligibility and other limitations. We estimate that this new benefit would result in an increase in Medicare expenditures to physicians and other practitioners and suppliers of ultrasound services and related follow-up tests and treatment that may be required as a result of the coverage of these screening examinations. However, this is not expected to have a significant cost impact on the Medicare program.

E. DRA 5113—Proposed Colorectal Screening Exemption From Part B Deductible

As discussed earlier in section II.E.4. of this preamble, beginning January 1, 2007, colorectal cancer screening services as described in section 1861(pp)(1) of the Act are no longer subject to the Part B deductible. While waiver of this deductible will be beneficial to Medicare beneficiaries, we do not anticipate that this change will have a significant cost impact on the Medicare program.

F. Section 5114—Proposed Addition of Diabetes Outpatient Self-Management Training Services (DSMT) and Medical Nutrition Therapy (MNT) for the FQHC Program

As discussed earlier in section E.4. of this preamble, section 5114 of the DRA amended section 1861(aa)(3) the Act to add DSMT and MNT to the list of Medicare covered and reimbursed services under the Medicare FQHC benefit, effective for services provided on or after January 1, 2006. Although this statutory change has already been implemented in administrative instructions, we are proposing to conform the regulations to meet the new statutory requirement. FQHCs certified as DSMT and MNT providers have been allowed to bundle the cost of those services into their FQHC payment rates. But before the enactment of the DRA, the provision of these services would not generate a separate FQHC visit payment. Effective for services furnished on or after January 1, 2006, FQHCs that are certified providers of DSMT and MNT services can receive per visit payments for covered services furnished by registered dietitians or nutrition professionals. In light of the fact there are a limited number of qualified centers for DSMT and MNT services, the increase in Medicare expenditures should be negligible.

G. Proposed Payment for Covered Outpatient Drugs and Biologicals (ASP Issues)

The proposed changes discussed in section II.F. of this proposed rule, with respect to payment for covered outpatient drugs and biologicals, are estimated to have no impact on Medicare expenditures. However, we believe the changes will assist in clarifying existing policy with respect to ASP payment.

H. Proposed Provisions Related to Payment for Renal Dialysis Services Furnished by End State Renal Disease (ESRD) Facilities

The ESRD related provisions in this proposed rule are discussed in section II.G. of this preamble. In order to understand the impact of the proposed changes affecting payments to different categories of ESRD facilities, it is necessary to compare estimated payments under the current year (current 2006 payments) to estimated payments under the proposed revisions to the composite rate payment system as discussed in II.G. of this proposed rule (proposed 2007 payments). To estimate the impact among various classes of ESRD facilities, it is imperative that the estimates of current payments and proposed payments contain similar inputs. Therefore, we simulated payments only for those ESRD facilities that we are able to calculate both current 2006 payments and proposed 2007 payments.

Due to data limitations, we are unable to estimate current and proposed payments for 226 facilities that bill for ESRD dialysis treatments. ESRD providers were grouped into the categories based on characteristics provided in the Online Survey and Certification and Reporting (OSCAR) file and the most recent cost report data from the Healthcare Cost Report Information System (HCRIS). We also used the December 2005 update of CY 2005 National Claims History file as a basis for Medicare dialysis treatments and separately billable drugs and biologicals. While the December 2005 update of the 2005 claims file is not complete, we wanted to use the most recent data available, and plan to use an updated version of the 2005 claims file for the final rule.

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Table 9: Impact of CY 2007 Proposed Changes in Payments to Hospital Based and Independent ESRD Facilities [Percent change in composite rate payments to ESRD facilities (both program and beneficiaries)]

1	2	3	4	5
	Number Of facilities	Number of Dialysis Treatments (in millions)	Effect of Proposed Changes in Wage Index 1/	Overall Effect 2/
All	4,360	30.4	0.0	0.6
Independent	3,756	27.0	-0.1	0.6
Hospital Based	604	3.4	0.4	1.1
By Facility Size:				
Less than 5000 treatments	1,705	5.0	-0.3	0.3
5000 to 9999 treatments	1,768	12.8	0.0	0.6
Greater than 9999 treatments	887	12.6	0.1	0.7
By Type of Ownership				
Profit	3,433	24.5	-0.1	0.5
Nonprofit	927	5.9	0.3	0.9
By Geographic Location:				
Rural	1,205	6.3	-0.6	0.0
Urban	3,155	24.1	0.1	0.7
By Region:				
New England	143	1.1	1.3	1.8
Middle Atlantic	539	4.0	0.7	1.3
East North Central	675	4.7	-0.5	0.1
West North Central	335	1.6	-0.4	0.3
South Atlantic	977	6.9	0.0	0.6
East South Central	348	2.2	-1.1	-0.5
West South Central	594	4.2	-0.7	-0.1
Mountain	230	1.4	0.2	0.8
Pacific	492	3.8	1.1	1.7
Puerto Rico	27	0.4	-1.7	-1.1

1/ This column shows the effect of proposed wage changes to ESRD providers. Composite rate payments computed using the current wage index are compared to composite rate payments using the CY 2007 wage index changes.

2/ This column shows the percent change between CY 2007 and CY 2006 composite rate payments to ESRD facilities. The CY 2007 payments include the CY 2007 wage adjusted composite rate, and the 15.2 percent drug add-on times treatments. The CY 2006 payments to ESRD facilities include the CY 2006 wage adjusted composite rate and the 14.5 percent drug add-on times treatments.

Table 9 above shows the impact of this year's proposed changes to CY 2007 payments to hospital-based and independent ESRD facilities. The first column of Table 9 identifies the type of ESRD provider, the second column

indicates the number of ESRD facilities for each type, and the third column indicates the number of dialysis treatments.

The fourth column shows the effect of CY 2007 proposed changes to the ESRD wage index as it affects the composite rate payments to ESRD facilities. The fourth column compares aggregate ESRD wage adjusted composite rate payments in the second year of the transition (CY 2007) to aggregate ESRD wage adjusted composite rate payments in first year of the transition (CY 2006). In the second year of the transition (CY 2007), ESRD facilities receive 50 percent of the CBSA wage adjusted composite rate and 50 percent of the MSA adjusted composite rate. In the first year of the transition, ESRD facilities receive 25 percent of the CBSA wage adjusted composite rate and 75 percent of the MSA adjusted composite rate. The overall effect to all ESRD providers in aggregate is zero because the proposed CY 2007 ESRD wage index has been multiplied by a budget neutrality factor to comply with the statutory requirement that any wage index revisions be done in a manner that results in the same aggregate amount of expenditures as would have been made without any changes in the wage index. The decreases shown among census regions is primarily due to reducing the wage index floor, as there were areas in these areas with wage index values below the proposed floor.

The fifth column shows the overall effect of the proposed changes in composite rate payments to ESRD providers. The overall effect is measured as the difference between CY 2007 proposed payment with all changes as proposed in this rule and CY 2006 current payment. This amount is computed by multiplying the wage adjusted composite rate with the drug add-on for each provider times dialysis treatments from 2005 claims. The CY 2007 proposed payment is transition year two wage adjusted composite rate for each provider (with the proposed 15.2 percent drug add-on) times dialysis treatments from 2005 claims. The CY 2006 current payment is transition year one wage adjusted composite rate for each provider (with the current 14.5 percent drug add on) times dialysis treatments from 2005 claims.

The overall impact to ESRD providers in aggregate is 0.6 percent. This increase corresponds to the proposed 0.6 percent increase to the drug add-on. The variation seen in column 5 is due to variation in change in the wage index (column 4). All provider types receive the same 0.6 percent increase to the drug add on.

I. Private Contracts and Opt-Out Provision

The changes discussed in this proposed rule, with respect to private contracts and the opt-out provision, are currently estimated to have no significant impact on Medicare expenditures.

J. Proposals Related to Physician Self Referral Prohibitions

As discussed in section II.I of this proposed rule, we would clarify in regulations at § 424.80(d) under the contractual arrangement reassignment exception that, if a physician or other individual supplier reassigns his or her right to bill for the TC of a diagnostic test, the entity to which the reassignment is made may not be paid more than the physician or other individual supplier would have been paid for the TC. In addition, in order to bill for the TC of the diagnostic test, the entity to which the reassignment is made must perform the PC. We also propose that, in order to bill for the PC of a diagnostic test following a reassignment, the billing entity must meet current requirements in our manual instructions.

In addition, as discussed in section II.I., we also propose to revise §§ 424.80(b) and (d) to provide that a physician or other individual supplier who reassigns his or her right to benefits has a right to review the bills for his or her services, irrespective of whether the individual is an employee or an independent contractor of the entity to which the reassignment is made.

We also propose the following changes to the physician self-referral provisions:

- A "centralized building" for purposes of the physician services exception and the in-office ancillary services exception at §§ 411.355(a) and (b), respectively, would have to measure at least 350 square feet and include permanent placement of the equipment used in the provision of substantially all of the designated health services. We believe that these changes would have little effect on Medicare expenditures.

K. Supplier Access to Claims Billed on Reassignment

The reassignment provisions discussed in section II.J.2. of this preamble are currently estimated to have no significant impact on Medicare expenditures.

L. Proposed Coverage of Bone Mass Measurement

As discussed in section II.K. of this preamble, we have decided to propose several revisions to § 410.31 relative to the definition of the term "Bone Mass Measurement" (§ 410.31(a)(2)), the conditions for coverage (§ 410.31(b)), the examples of exceptions to the standards on frequency of coverage (§ 410.31(c)(2)), and the category of individuals receiving glucocorticoid (steroid) therapy (§ 410.31(d)(3)). We are also proposing the addition of a new paragraph (f) that would allow CMS, through the NCD process, to identify additional BMM systems for monitoring individuals receiving osteoporosis drug therapy and for performing confirmatory baseline measurements. We do not expect that this addition would have a significant cost impact on the Medicare program in the next several years.

Based on the projected impact of the first three changes that would place greater reliance on the use of the more expensive DXA (axial skeleton) devices, we estimate that this revised benefit would result in an increase in Medicare payments for providers who use the DXA (axial skeleton) devices and a somewhat smaller decrease in payments to providers who use QCT (axial skeleton) and peripheral devices. However, we do not expect that these changes would have a significant cost impact on the Medicare program due to the fact that at present a very small percentage of our total Medicare payments for bone mass measurements are being made to providers who use QCT or peripheral devices. In addition, we estimate that lowering the eligibility standard for coverage of individuals on steroid therapy from 7.5 mg/day to 5.0 mg/day of prednisone (the fourth change) would result in an increase in Medicare payment for testing of additional patients, but this modest lowering of the steroid standard is not expected to have a significant cost impact on the program.

M. Proposed IDTF Changes

The costs associated with these proposed changes would be as follows:

1. Liability Insurance Requirement (§ 424.57(c)(10))

We estimate that only 10 percent of IDTFs do not already have liability insurance that meets this requirement. Based on Medicare data as of June 2005, 10 percent of the total number of IDTFs is approximately 559 suppliers. Using the previously highest estimate received ($1,800 annually), results in an approximate additional liability insurance cost of $1 million annually (559 times $1,800) to the IDTF industry due to this proposed rule.

2. Primary Business Telephone Listed Under the Name of the Business Locally or Toll-free for Beneficiaries Proposed Requirement (§ 424.57(c)(9))

We estimate that only 1 percent of IDTFs do not already meet this requirement. Based on Medicare data as of June 2005, we determined that 1 percent of IDTFs is approximately 56 suppliers. Therefore, 56 times the approximate $600 annual cost of telephone service results in an additional cost of $33,600 annually. Total Cost = $1 Million + $33,600 = approximately $1.04 million annually.

N. Independent Lab Billing for TC Component of Physician Pathology Services for Hospital Patients

The most current information on the number of affected hospitals and the impact on laboratories and hospitals comes from a report issued by the General Accounting Office (GAO) in September 2003.

The GAO estimated that approximately 95 percent of the total of all Medicare hospitals on the prospective payment system, as well as CAHs sent the TC of physician pathology services to independent laboratories and the independent laboratories billed the carrier under the PFS.

The GAO estimated that the median number of services sent by each hospital to outside independent laboratories was small, approximately 81 services. The GAO was unable to identify the number of laboratories billing for the TC service because a single laboratory may submit claims under multiple provider numbers. In general, the impact on the individual hospital is small; however, we do not know the impact on the individual independent laboratory

If the independent laboratories had not received payments from the carriers for these TC services for hospital patients, the GAO estimates that Medicare spending would have been $42 million less in 2001 and beneficiary cost sharing obligations for inpatient and outpatient services would have been reduced by $2 million.

Based on what they learned from the hospital industry, the GAO thought that Medicare beneficiaries' access to pathology services would not likely be affected if independent laboratories could not longer bill the carrier for these services. Hospital representatives indicated that they would likely continue to use independent laboratories to provide TC pathology services.

In is unclear if the hospitals contracting with independent laboratories would pay the laboratories at the same rates that the laboratories received by billing the Medicare carriers under the physician fee schedule.

O. Public Consultation for Medicare Payment for New Outpatient Clinical Diagnostic Laboratory Tests

This codification of our process for public consultation for new clinical diagnostic laboratory tests paid under the Medicare Part B clinical laboratory fee schedule, if adopted, would not increase or decrease payment amounts for existing clinical diagnostic laboratory tests because it would not alter our current methodology for calculating payment amounts for existing clinical diagnostic laboratory tests. For new tests, this proposal would primarily codify an existing process for the determination of payment amounts. Because any new laboratory tests to be gapfilled are unknown to us at the current time, we do not have any data to estimate the impact of our proposal to pay for new gapfilled lab tests at the median of the local carrier amounts for all carriers rather than the lower of that amount and the local carrier amount.

P. Alternatives Considered

This proposed rule contains a range of policies, including some proposals related to specific MMA provisions. The preamble provides descriptions of the statutory provisions that are addressed, identifies those policies when discretion has been exercised, presents rationale for our decisions and, where relevant, alternatives that were considered.

Q. Impact on Beneficiaries

There are a number of changes made in this proposed rule that would have an effect on beneficiaries. In general, we believe these proposed changes, particularly the DRA provisions that provide for an exception to the application of the Part B deductible with respect to colorectal cancer screening tests and coverage of an ultrasound screening for the early detection of AAAs, as part of the Initial Preventive Physical Examination benefit (referred to as the Welcome to Medicare benefit) would improve beneficiary access to services that are currently covered or expand the Medicare benefit package to include new services. As explained in more detail below, the regulatory provisions may affect beneficiary liability in some cases. Any changes in aggregate beneficiary liability from a particular provision would be a function of the coinsurance (20 percent if applicable for the particular provision after the beneficiary has met the deductible) and the effect of the aggregate cost (savings) of the provision on the calculation of the Medicare Part B premium rate (generally 25 percent of the provision's cost or savings).

To illustrate this point, as shown in Table 8, the 2006 national payment amount in the nonfacility setting for CPT code 99203 (Office/outpatient visit, new), is $97.02 which means that currently a beneficiary is responsible for 20 percent of this amount, or $19.40. Based on the June 29, 2006 proposed notice (71 FR 37170) and this proposed rule, the 2007 national payment amount in the nonfacility setting for CPT code 99203, as shown in Table 8, is $91.71 which means that, in 2007, the beneficiary coinsurance for this service would be $18.34.

Very few of the changes we are proposing impact overall payments and, therefore, would affect Medicare beneficiaries' coinsurance liability. Proposals discussed above that do affect overall spending, such as DRA 5102 imaging provisions, would similarly impact beneficiaries' coinsurance.

R. Accounting Statement

As required by OMB Circular A–4 (available at *http://www.whitehouse.gov/omb/circulars/a004/a–4.pdf*), in Table 10 below, we have prepared an accounting statement showing the classification of the expenditures associated with the provisions of this proposed rule. This table includes the impact of the proposed changes in this rule on providers and suppliers.

Expenditures are classified as transfers to Medicare providers/or suppliers (that is, ESRD facilities and physicians, other practitioners, clinical laboratories and medical suppliers that receive payment under the physician fee schedule or Medicare Part B). Based on the proposals contained in this proposed rule, there would be an estimated decrease in expenditures from CY 2006 to 2007. This is a result of the CY 2007 increased payment to ESRD facilities the reduction to the payments for imaging services under the PFS required by section 5102 of the DRA and the −5.1 percent Medicare PFS conversion factor update required by the statutory update formula.

TABLE 10.—ACCOUNTING STATEMENT: CLASSIFICATION OF ESTIMATED EXPENDITURES, FROM CY 2006 TO THE CY 2007 (IN MILLIONS)

Category	Transfers
Annualized Monetized Transfers.	Estimated decrease in expenditures of $3,600

TABLE 10.—ACCOUNTING STATEMENT: CLASSIFICATION OF ESTIMATED EXPENDITURES, FROM CY 2006 TO THE CY 2007 (IN MILLIONS)—Continued

Category	Transfers
From Whom To Whom?	Federal Government To ESRD Medicare Providers; physicians, other practitioners and suppliers who receive payment under the Medicare Physician Fee Schedule; and Medicare Suppliers billing for Part B drugs.

In accordance with the provisions of Executive Order 12866, this final rule was reviewed by the Office of Management and Budget.

List of Subjects

42 CFR Part 405

Administrative practice and procedure, Health facilities, Health professions, Kidney diseases, Medical devices, Medicare, Reporting and recordkeeping requirements, Rural areas, X-rays.

42 CFR Part 410

Health facilities, Health professions, Kidney diseases, Laboratories, Medicare, Reporting and recordkeeping requirements, Rural areas, X-rays.

42 CFR Part 411

Kidney diseases, Medicare, Physician Referral, Reporting and recordkeeping requirements.

42 CFR Part 414

Administrative practice and procedure, Health facilities, Health professions, Kidney diseases, Medicare, Reporting and recordkeeping.

42 CFR Part 415

Health facilities, Health professions, Medicare, Reporting and recordkeeping requirements.

42 CFR Part 424

Emergency medical services, Health facilities, Health professions, Medicare, Reporting and recordkeeping requirements.

For the reasons set forth in the preamble, the Centers for Medicare & Medicaid Services proposes to amend 42 CFR chapter IV as set forth below:

PART 405—FEDERAL HEALTH INSURANCE FOR THE AGED AND DISABLED

1. The authority citation for part 405 continues to read as follows:

Authority: Secs. 1102, 1861, 1862(a), 1871, 1874, 1881, and 1886(k) of the Social Security Act (42 U.S.C. 1302, 1395x, 1395y(a), 1395hh, 1395kk, 1395rr, and 1395ww(k)), and sec. 353 of the Public Health Service Act (42 U.S.C. 263a).

Subpart D—Private Contracts

2. Section 405.400 is amended by revising the definition of "Practitioner" to read as follows:

§ 405.400 Definitions.

* * * * *

Practitioner means a physician assistant, nurse practitioner, clinical nurse specialist, certified registered nurse anesthetist, certified nurse midwife, clinical psychologist, clinical social worker, registered dietitian or nutrition professional, who is currently legally authorized to practice in that capacity by each State in which he or she furnishes services to patients or clients.

* * * * *

Subpart X—Rural Health Clinic and Federally Qualified Health Center Services Payment for Rural Health Clinic and Federally Qualified Health Center Services

3. Section 405.2446 is amended by adding paragraph (b)(10) to read as follows:

§ 405.2446 Scope of services.

* * * * *

(b) * * *

(10) Medical nutrition therapy services as specified in part 410, subpart G of this chapter, and diabetes outpatient self-management training services as specified in part 410, subpart H of this chapter.

* * * * *

4. Section 405.2463 is revised to read as follows:

§ 405.2463 What constitutes a visit.

(a) *Visit*—(1) *General.* (i) For RHCs, a visit is a face-to-face encounter between a clinic or center patient and a physician, physician assistant, nurse practitioner, nurse midwife, visiting nurse, clinical psychologist, or clinical social worker.

(ii) For FQHCs, a visit means—

(A) A face-to-face encounter, as described in paragraph (a)(1)(i) of this section; or

(B) A face-to-face encounter between a patient and a qualified provider of medical nutrition therapy services as defined in part 410, subpart G of this chapter; or a qualified provider of outpatient diabetes self-management training services as defined in part 410, subpart H of this chapter.

(2) *Medical visit.* For purposes of this section, a medical visit is a face-to-face encounter between a clinic or center patient and a physician, physician assistant, nurse practitioner, nurse midwife, or a visiting nurse; and for FQHCs only, a medical visit also includes a separately billable medical nutrition therapy visit or a diabetes outpatient self-management training visit.

(3) *Other health visit.* For purposes of this section, a other health visit is a face-to-face encounter between a clinic or center patient and a clinical psychologist, clinical social worker, or other health professional for mental health services.

(b) *Encounters.* Encounters with more than one health professional and multiple encounters with the same health professional that take place on the same day and at a single location constitute a single visit, except when one of the following conditions exist:

(1) After the first encounter, the patient suffers illness or injury requiring additional diagnosis or treatment.

(2) The patient has a medical visit and other health visit(s), as defined in paragraph (a) of this section.

(c) *Payment.* Medicare pays for more than one visit per day when the conditions in paragraph (b) of this section are met or a separate visit under paragraph (a)(1)(ii)(B) of this section is made.

PART 410—SUPPLEMENTARY MEDICAL INSURANCE (SMI) BENEFITS

5. The authority citation for part 410 continues to read as follows:

Authority: Secs. 1102, 1834, and 1871 of the Social Security Act (42 U.S.C. 1302, 1395m, and 1395hh).

Subpart B—Medical and Other Health Services

6. Section 410.16 is amended in paragraph (a) by revising paragraph (7) of the definition of "Initial preventive physical examination" to read as follows:

§ 410.16 Initial preventive physical examination: Conditions for and limitations on coverage.

(a) * * *

* * * * *

Initial preventive physical examination * * *

* * * * *

(7) Education, counseling, and referral, including a written plan such as a checklist provided to the beneficiary for obtaining the appropriate screening and other preventive services that are covered as separate Medicare Part B benefits as described in section 1861(s)(10), section 1861(jj), section 1861(nn), section 1861(oo), section 1861(pp), section 1861(qq)(1), section 1861(rr), section 1861(uu), section 1861(vv), section 1861(xx)(1), section 1861(yy), and section 1861(bbb) of the Act.

* * * * *

7. A new § 410.19 is added to read as follows:

§ 410.19 Ultrasound screening for abdominal aortic aneurysms: Condition for and limitation on coverage.

(a) *Definitions:* As used in this section, the following definitions apply:

Eligible beneficiary means an individual who—

(1) Has received a referral for an ultrasound screening for an abdominal aortic aneurysm as a result of an initial preventive physical examination (as defined in section 1861(ww)(1) of the Act);

(2) Has not been previously furnished an ultrasound screening for an abdominal aortic aneurysm under the Medicare program; and

(3) Is included in at least one of the following risk categories:

(i) Has a family history of an abdominal aortic aneurysm.

(ii) Is a man age 65 to 75 who has smoked at least 100 cigarettes in his lifetime.

(iii) Is an individual who manifests other risk factors in a beneficiary category recommended for screening by the United States Preventive Services Task Force regarding abdominal aortic aneurysms, as specified by the Secretary through a national coverage determination process.

Ultrasound screening for abdominal aortic aneurysms means the following services furnished to an asymptomatic individual for the early detection of an abdominal aortic aneurysm:

(1) A procedure using soundwaves (or other procedures using alternative technologies of commensurate accuracy and cost, as specified by the Secretary through a national coverage determination process) provided for the early detection of abdominal aortic aneurysms.

(2) Includes a physician's interpretation of the results of the procedure.

(b) *Conditions for coverage of an ultrasound screening for abdominal aortic aneurysms.* Medicare Part B pays for one ultrasound screening for an abdominal aortic aneurysm provided to eligible beneficiaries, as described in this section, after a referral from a physician or a qualified nonphysician practitioner as defined in § 410.16(a).

(c) *Limitation on coverage of ultrasound screening for abdominal aortic aneurysms.* Payment may not be made for an ultrasound screening for an abdominal aortic aneurysm that is performed for an individual who is not an eligible beneficiary, as described in the definition of "Eligible beneficiary" in this section.

8. Section 410.31 is revised to read as follows:

§ 410.31 Bone mass measurement: Conditions for coverage and frequency standards.

(a) *Definition.* As used in this section unless specified otherwise, the following definition applies:

Bone mass measurement means a radiologic, radioisotopic, or other procedure that meets the following conditions:

(1) Is performed for the purpose of identifying bone mass, detecting bone loss, or determining bone quality.

(2) Is performed with either a bone densitometer (other than single-photon or dual-photon absorptiometry) or with a bone sonometer system that has been cleared for marketing for this use by the FDA under 21 CFR part 807, or approved for marketing by the FDA for this use under 21 CFR part 814.

(3) Includes a physician's interpretation of the results of the procedure.

(b) *Conditions for coverage.* (1) Medicare covers a medically necessary bone mass measurement if the following conditions are met:

(i) Following an evaluation of the beneficiary's need for the measurement, including a determination as to the medically appropriate procedure to be used for the beneficiary, it is ordered by the physician or a qualified nonphysician practitioner (as these terms are defined in § 410.32(a)) treating the beneficiary.

(ii) It is performed under the appropriate level of supervision of a physician (as set forth in § 410.32(b)).

(iii) It is reasonable and necessary for diagnosing and treating the condition of a beneficiary who meets the conditions described in paragraph (d) of this section.

(2) Medicare covers a medically necessary bone mass measurement for an individual defined under paragraph (d)(5) of this section if the conditions under paragraph (b)(1) of this section are met and the monitoring is performed by the use of a dual energy x-ray absorptiometry system (axial skeleton).

(3) Medicare covers a medically necessary confirmatory baseline bone mass measurement for an individual defined under paragraph (d) of this section, if the conditions under paragraph (b)(1) of this section are met and the confirmatory baseline bone mass measurement is performed by a dual energy x-ray absorptiometry system (axial skeleton) and the initial measurement was not performed by a dual energy x-ray absorptiometry system (axial skeleton).

(c) *Standards on frequency of coverage* —(1) *General rule.* Except as allowed under paragraph (c)(2) of this section, Medicare may cover a bone mass measurement for a beneficiary if at least 23 months have passed since the month the last bone mass measurement was performed.

(2) *Exception.* If medically necessary, Medicare may cover a bone mass measurement for a beneficiary more frequently than allowed under paragraph (c)(1) of this section. Examples of situations where more frequent bone mass measurement procedures may be medically necessary include, but are not limited to the following medical circumstances.

(i) Monitoring beneficiaries on long-term glucocorticoid (steroid) therapy of more than 3 months.

(ii) Allowing for a confirmatory baseline measurement to permit monitoring of beneficiaries in the future if the requirements of paragraph (b)(3) of this section are met.

(d) *Beneficiaries who may be covered.* The following categories of beneficiaries may receive Medicare coverage for a medically necessary bone mass measurement:

(1) A woman who has been determined by the physician (or a qualified nonphysician practitioner) treating her to be estrogen-deficient and at clinical risk for osteoporosis, based on her medical history and other findings.

(2) An individual with vertebral abnormalities as demonstrated by an x-ray to be indicative of osteoporosis, osteopenia, or vertebral fracture.

(3) An individual receiving (or expecting to receive) glucocorticoid (steroid) therapy equivalent to an average of 5.0 mg of prednisone, or greater, per day for more than 3 months.

(4) An individual with primary hyperparathyroidism.

(5) An individual being monitored to assess the response to or efficacy of an

FDA-approved osteoporosis drug therapy.

(e) *Denial as not reasonable and necessary.* If CMS determines that a bone mass measurement does not meet the conditions for coverage in paragraphs (b) or (d) of this section, or the standards on frequency of coverage in paragraph (c) of this section, it is excluded from Medicare coverage as not "reasonable" and "necessary" under section 1862(a)(1)(A) of the Act and § 411.15(k) of this chapter.

(f) *Use of the National Coverage Determination Process.* For the purposes of paragraphs (b)(2) and (b)(3) of this section, CMS may determine through the National Coverage Determination process that additional bone mass measurement systems are reasonable and necessary under section 1862(a)(1) of the Act for monitoring and confirming baseline bone mass measurements.

* * * * *

9. Section 410.33 is amended by—

A. Revising paragraph (b)(1).

B. Revising paragraph (e).

C. Adding paragraphs (g), (h), and (i).

The revision and additions read as follows:

§ 410.33 Independent diagnostic testing facility.

* * * * * *

(b) *Supervising physician.* (1) Each supervising physician must be limited to providing supervision to no more than three (3) IDTF sites. The IDTF supervising physician is responsible for the overall operation and administration of the IDTFs, including the employment of personnel who are competent to perform test procedures, record and report test results promptly, accurately and proficiently, and for assuring compliance with the applicable regulations.

* * * * *

(e) *Multi-State entities.* (1) An IDTF that operates across State boundaries must—

(i) Maintain documentation that its supervising physicians and technicians are licensed and certified in each of the States in which it operates; and

(ii) Operate in compliance with all applicable Federal, State, and local licensure and regulatory requirements with regard to the health and safety of patients.

(2) The point of the actual delivery of services is the Place of Service on the claim form. When an IDTF performs a diagnostic test at the beneficiary's residence, the beneficiary's residence is the Place of Service.

* * * * *

(g) *Application certification standards.* The IDTF must certify in its enrollment application that it meets the following standards:

(1) Operate its business in compliance with all applicable Federal and State licensure and regulatory requirements.

(2) Provide complete and accurate information on their enrollment application. Any change in enrollment information must be reported to the designated fee-for-service contractor on the Medicare enrollment application within 30 calendar days of the change.

(3) Maintain a physical facility on an appropriate site. For the purposes of this standard, a post office box or commercial mail box is not considered a physical facility. The physical facility must contain space for equipment appropriate to the services designated on the enrollment application, facilities for hand washing, adequate patient privacy accommodations, and the storage of both business records and current medical records.

(4) Have all applicable testing equipment available at the physical site excluding portable equipment. A catalog of portable equipment, including equipment serial numbers, must be maintained at the physical site. In addition, portable equipment must be available for inspection within two business days of a CMS inspection request. The IDTF must maintain a current inventory of the equipment, including serial and registration numbers, provide this information to the designated fee-for-service contractor upon request, and notify the contractor of any changes in equipment within 90 days.

(5) Maintain a primary business phone under the name of the designated business. The business phone must be located at the designated site of the business. The telephone number or toll free numbers must be available in a local directory and through directory assistance.

(6) Have a comprehensive liability insurance policy of at least $300,000 or 20 percent of its average annual Medicare billings, whichever amount is greater, that covers both the place of business and all customers and employees of the IDTF. The policy must be carried by a non-relative owned company and list the serial numbers of any and all equipment used by the IDTF.

(7) Agree not to directly solicit patients through any means including, but not limited to, a prohibition on telephone, computer, or in-person contacts. The IDTF must accept only those patients referred for diagnostic testing by an attending physician, who is furnishing a consultation or treating a beneficiary for a specific medical problem and who uses the results in the management of the beneficiary's specific medical problem. Nonphysician practictioners may order tests as set forth in § 410.32(a)(3).

(8) Answer beneficiaries' questions and respond to their complaints. Documentation of those contacts must be maintained at the physical site.

(9) Openly post these standards for review by patients and the public.

(10) Disclose to the government any person having ownership, financial, or control interest or any other legal interest in the supplier.

(11) Have its testing equipment calibrated per equipment instructions and in compliance with applicable national standards.

(12) Have technical staff on duty with the appropriate credentials to perform tests. The IDTF must be able to produce the applicable Federal or State licenses or certifications of the individuals performing these services.

(13) Have proper medical record storage and be able to retrieve medical records upon request from CMS or its fee-for-service contractor within 2 business days.

(14) Permit CMS, including its agents, or its designated fee-for-service contractors, to conduct unannounced, on-site inspections to confirm the IDTF's compliance with these standards. The IDTF must be accessible during regular business hours to CMS and beneficiaries and must maintain a visible sign posting the normal business hours of the IDTF.

(h) *Failure to meet standards.* If an IDTF fails to meet one or more of the standards in paragraph (g) of this section at the time of enrollment, its enrollment will be denied. CMS will revoke a supplier's billing privileges if and IDTF is found not to meet the standards in paragraph (g) or (b)(1) of this section.

(i) *Definition.* For purposes of this section, the following definition applies:

Point of actual delivery of service. The point of the actual delivery of service means the Place of Service on the claim form. When an IDTF performs a diagnostic test at the beneficiary's residence, the beneficiary's residence is the Place of Service.

Subpart I—Payment of SMI Benefits

10. Section 410.160 is amended by adding paragraphs (b)(7) and (b)(8) to read as follows:

§ 410.160 Part B annual deductible.

* * * * *

(b) * * *

(7) Beginning January 1, 2007, colorectal cancer screening tests as described in § 410.37.

(8) Beginning January 1, 2007, ultrasound screening for abdominal aortic aneurysms described in § 410.19.

* * * * *

PART 411—EXCLUSIONS FROM MEDICARE AND LIMITATIONS ON MEDICARE PAYMENT

11. The authority citation for part 411 is amended to read as follows:

Authority: Secs. 1102, 1860D–1 through 1860D–42, 1871, and 1877 of the Social Security Act (42 U.S.C. 1302, 1395w–101 through 1395w–152, 1395hh, and 1395nn).

Subpart A—General Exclusions and Exclusion of Particular Services

12. Section 411.15 is amended by—

A. Revising paragraph (a)(1).

B. Adding a new paragraph (k)(12).

C. Revising paragraph (o).

The revisions and addition read as follows:

§ 411.15 Particular services excluded from coverage.

* * * * *

(a) * * *

(1) Examinations performed for a purpose other than treatment or diagnosis of a specific illness, symptoms, complaint, or injury, except for screening mammography, colorectal cancer screening tests, screening pelvic exams, prostate cancer screening tests, glaucoma screening exams, initial preventive physical examinations, or ultrasound screening for abdominal aortic aneurysms that meet the criteria specified in paragraphs (k)(6) through (k)(12) of this section.

* * * * *

(k) * * *

(12) In the case of ultrasound screening for abdominal aortic aneurysms, with the goal of early detection of abdominal aortic aneurysms, subject to the conditions and limitation specified in § 410.19 of this chapter.

* * * * *

(o) Experimental or investigational devices, except for certain devices—

(1) Categorized by the FDA as a Category A or B device defined in § 405.201(b) of this chapter; and

(2) Furnished in accordance with the CMS clinical research policy.

Subpart J—Financial Relationships Between Physicians and Entities Furnishing Designated Health Services

13. Section 411.351 is amended by—

A. Revising the definition "Centralized building".

B. Revising the definition "Physician in the group practice".

The revisions read as follows:

§ 411.351 Definitions.

* * * * *

Centralized building means all or part of a building, including, for purposes of this subpart only, a mobile vehicle, van, or trailer that is owned or leased on a full-time basis (that is, 24 hours per day, 7 days per week, for a term of not less than 6 months) by a group practice and that is used exclusively by the group practice. Space in a building or a mobile vehicle, van, or trailer that is shared by more than one group practice, by a group practice and one or more solo practitioners, or by a group practice and another provider or supplier (for example, a diagnostic imaging facility) is not a centralized building for purposes of this subpart. This definition does not preclude a group practice from providing services to other providers or suppliers (for example, purchased diagnostic tests) in the group practice's centralized building. A group practice may have more than one centralized building. A centralized building does not include space that is owned or leased by a group practice if that space is less than 350 square feet. This limitation does not apply to space owned or rented in a building where no more than three group practices own or lease space in the "same building" (as defined in this section) and share the same "physician in the group practice" (as defined in this section). A centralized building does not include space owned or leased by a group practice if equipment needed to perform substantially all (at least 90 percent) of the designated health services furnished in that space in any given calendar year is not permanently located in that space. That is, equipment needed to perform more than 10 percent of the designated health services furnished in that space in a calendar year cannot be temporarily moved into that space from another space in the "same building" or from outside the "same building" (as defined in this section).

* * * * *

Physician in the group practice means a member of the group practice, as well as an independent contractor physician during the time the independent contractor is furnishing patient care services (as defined in this section) for the group practice under a contractual arrangement with the group practice to provide services to the group practice's patients in the group practice's facilities. The contract must contain the same restrictions on compensation that apply to members of the group practice under § 411.352(g) (or the contract must fit in the personal services exception in § 411.357(d)), and the independent contractor's arrangement with the group practice and must comply with the reassignment rules at § 424.80(d)(3) of this chapter or section 30.2.9.1 of the CMS Internet-only manual, publication 100–04, Claims Processing Manual, chapter 1 on general billing requirements (as amended or replaced from time to time). Referrals from an independent contractor who is a physician in the group practice are subject to the prohibition on referrals in § 411.353(a), and the group practice is subject to the limitation on billing for those referrals in § 411.353(b).

* * * * *

PART 414—PAYMENT FOR PART B MEDICAL AND OTHER HEALTH SERVICES

14. The authority citation for part 414 continues to read as follows:

Authority: Secs. 1102, 1871, and 1881(b)(1) of the Social Security Act (42 U.S.C. 1302, 1395hh, and 1395rr(b)(1).

15. A new subpart F is added as follows:

Subpart F—Payment for New Clinical Diagnostic Laboratory Tests

Sec.

Subpart F—Payment for New Clinical Diagnostic Laboratory Tests

§ 414.400 Basis and scope.

This subpart implements provisions of 1833(h)(8) of the Act procedures for determining the basis for, and amount of, payment for a new clinical diagnostic laboratory test with respect to which a new or substantially revised Healthcare Common Procedure Coding System code is assigned on or after January 1, 2005.

§ 414.402 Definitions.

For purposes of this subpart—

Substantially Revised Healthcare Common Procedure Coding System Code means a code for which there has been a substantive change to the definition of the test or procedure to which the code applies (such as a new

analyte or a new methodology for measuring an existing analyte specific test).

§ 414.404 [Reserved]

§ 414.406 Procedures for public consultation for payment for a new clinical diagnostic laboratory test.

For a new clinical diagnostic laboratory test that is assigned a new or substantially revised code on or after January 1, 2005, CMS determines the payment after the performance of the following:

(a) CMS makes available to the public (through an Internet Web site and other appropriate mechanisms) a list that includes codes for which establishment of a payment amount is being considered for the next calendar year.

(b) CMS publishes a **Federal Register** notice of a meeting to receive public comments and recommendations (and data on which recommendations are based) on the appropriate basis, as specified in § 414.408, for establishing payment amounts for the list of codes made available to the public.

(c) Not fewer than 30 days after publication of the notice in the **Federal Register**, CMS convenes a meeting that includes representatives of CMS officials involved in determining payment amounts, to receive public comments and recommendations (and data on which the recommendations are based).

(d) Taking into account the comments and recommendations (and accompanying data) received at the public meeting, CMS develops and makes available to the public (through an Internet Web site and other appropriate mechanisms)—

(1) A list of proposed determinations with respect to the appropriate basis for establishing a payment amount for each code, with an explanation of the reasons for each determination, the data on which the determinations are based, and a request for public written comments within a specified time period on the proposed determination; and

(2) A list of final determinations of the payment amounts for tests, with the rationale for each determination, the data on which the determinations are based, and responses to comments and suggestions from the public.

§ 414.408 Payment for a new clinical diagnostic laboratory test.

For a new clinical diagnostic laboratory test that is assigned a new or substantially revised code on or after January 1, 2005, CMS determines the payment amount based on either of the following:

(a) *Crosswalking.* Crosswalking is used if it is determined that a new test is comparable to an existing test, multiple existing test codes, or a portion of an existing test code.

(1) CMS assigns to the new test code, the local fee schedule amounts and national limitation amount of the existing test.

(2) Payment for the new test code is made at the lesser of the local fee schedule amount or the national limitation amount.

(b) *Gapfilling.* Gapfilling is used when no comparable existing test is available.

(1) Carrier-specific amounts are established for the new test code for the first year using the following sources of information to determine gapfill amounts, if available:

(i) Charges for the test and routine discounts to charges;

(ii) Resources required to perform the test;

(iii) Payment amounts determined by other payers; and

(iv) Charges, payment amounts, and resources required for other tests that may be comparable or otherwise relevant.

(2) In the second year, the test code is paid at the national limitation amount, which is the median of the carrier-specific amounts.

§ 414.410 Clinical Diagnostic Laboratory Date of Service for Specimens.

The date of service for a laboratory test is as follows:

(a) Except as provided under paragraph (b) of this section, the date of service of the test shall be the date the specimen was collected.

(b)(1) If a specimen is collected over a period that spans two calendar days, then the date of service shall be the date the collection ended.

(2) If a specimen was stored for more than 30 calendar days before testing (otherwise known as "an archived specimen"), the date of service of the test shall be the date the specimen was obtained from storage.

(3) If a specimen was stored for less than or equal to 30 calendar days from the date it was collected, the date of service of the test must be the date the specimen was obtained from storage if—

(i) The test is ordered by the patient's physician at least 14 days following the date of the patient's discharge from the hospital.

(ii) The test could not reasonably have been ordered while the patient was hospitalized.

(iii) The procedure performed while the beneficiary is a patient of the hospital is for purposes other than collection of the specimen needed for the test.

(iv) The test is reasonable and medically necessary.

Subpart J—Submission of Manufacturer's Average Sales Price Data

16. Section 414.802 is amended by adding the definition of "Bona fide service fees" in alphabetical order to read as follows:

§ 414.802 Definitions.

* * * * *

Bona fide service fees means fees paid by a manufacturer to an entity, that represent fair market value for a bona fide, itemized service actually performed on behalf of the manufacturer that the manufacturer would otherwise perform (or contract for) in the absence of the service arrangement, and that are not passed on in whole or in part to a client or customer of an entity, whether or not the entity takes title to the drug.

* * * * *

17. Section 414.804 is amended by revising paragraphs (a)(1), (a)(2), (a)(3), and (a)(4).

The revisions read as follows:

§ 414.804 Basis of Payment.

(a) * * *

(1) The manufacturer's average sales price for a quarter for a drug represented by a particular 11-digit National Drug Code must be calculated as the manufacturer's sales to all purchasers in the United States for that particular 11-digit National Drug Code (after excluding sales as specified in paragraph (a)(4) of this section and then deducting price concessions as specified in paragraphs (a)(2) and (a)(3) of this section) divided by the total number of units sold by the manufacturer in that quarter (after excluding units associated with sales as specified in paragraph (a)(4) of this section).

(2) *Price concessions.* (i) In calculating the manufacturer's average sales price, a manufacturer must deduct price concessions. Price concessions include the following types of transactions and items:

(A) Volume discounts.

(B) Prompt pay discounts.

(C) Cash discounts.

(D) Free goods that are contingent on any purchase requirement.

(E) Chargebacks and rebates (other than rebates under the Medicaid program).

(ii) For the purposes of paragraph (a)(2)(i), bona fide services fees are not considered price concessions.

(3) To the extent that data on price concessions, as described in paragraph (a)(2) of this section, are available on a

lagged basis, the manufacturer must estimate this amount in accordance with the methodology described in this paragraph.

(i)(A) For each National Drug Code with at least 12 months of sales (including products for which the manufacturer has redesignated the National Drug Code for the specific product and package size and has 12 months of sales across the prior and current National Drug Codes), after adjusting for exempted sales, the manufacturer calculates a percentage equal to the sum of the price concessions for the most recent 12-month period available associated with sales subject to the average sales price reporting requirement divided by the total in dollars for the sales subject to the average sales price reporting requirement for the same 12-month period.

(B) For each National Drug Code with less than 12 months of sales, the calculation described in paragraph (i)(A) of this section is performed for the time period equaling the total number of months of sales.

(ii) The manufacturer multiplies the applicable percentage described in paragraph (a)(3)(i)(A) or (a)(3)(i)(B) of this section by the total in dollars for the sales subject to the average sales price reporting requirement (after adjusting for exempted sales) for the quarter being submitted. (The manufacturer must carry a sufficient number of decimal places in the calculation of the price concessions percentage in order to round accurately the net total sales amount for the quarter to the nearest whole dollar.) The result of this multiplication is then subtracted from the total in dollars for the sales subject to the average sales price reporting requirement (after adjusting for exempted sales) for the quarter being submitted.

(iii) The manufacturer uses the result of the calculation described in paragraph (a)(3)(ii) of this section as the numerator and the number of units sold in the quarter (after adjusting for exempted sales) as the denominator to calculate the manufacturer's average sales price for the National Drug Code for the quarter being submitted.

(iv) *Example.* After adjusting for exempted sales, the total lagged price concessions (discounts, rebates, etc.) over the most recent 12-month period available associated with sales for National Drug Code 12345–6789–01 subject to the ASP reporting requirement equal $200,000, and the total in dollars for the sales subject to the average sales price reporting requirement for the same period equals $600,000. The lagged price concessions percentage for this period equals 200,000/600,000 = .33333. The total in dollars for the sales subject to the average sales price reporting requirement for the quarter being reported, after accounting for non-lagged price concessions, equals $50,000 for 10,000 units sold. The manufacturer's average sales price calculation for this National Drug Code for this quarter is: $50,000 − (0.33333 × 50,000) = $33,334 (net total sales amount); $33,334/10,000 = $3.33 (average sales price).

(4) *Exempted sales.* (i) In calculating the manufacturer's average sales price, a manufacturer must exclude sales that are exempt from the Medicaid best price calculation under sections 1927(c)(1)(C)(i) and 1927(c)(1)(C)(ii)(III) of the Act as limited by section 1927(c)(1)(D) of the Act.

(ii) In determining nominal sales exempted under section 1927(c)(1)(C)(ii)(III) of the Act, the manufacturer calculates the average manufacturer price as defined in section 1927(k) of the Act and then identifies sales that are eligible to be considered a nominal sale under section 1927(c)(1)(D) of the Act and are at less than 10 percent of the average manufacturer price. To identify nominal sales, the manufacturer must use the average manufacturer price for the calendar quarter that is the same calendar quarter as the average sales price reporting period.

(iii) For exempted sales under section 1927(c)(1)(C)(i) of the Act known on a lagged basis because of chargebacks or rebates, manufacturers must estimate such lagged exempted sales using the ratio methodology specified in this paragraph to exclude lagged exempted sales before accounting for price concessions as specified in paragraphs (a)(2) and (a)(3) of this section.

(A) For each National Drug Code with at least 12 months of sales (including products for which the manufacturer has redesignated the Nation Drug Code and has 12 months of sales across the prior and current National Drug Codes), the manufacturer calculates a percentage using the sum of lagged exempted sales (in units) for the most recent 12 month period available as the numerator and the sales (the number of units after non-lagged exempted sales have been subtracted from total sales) for the same 12 month period as the denominator. The result is a rolling average percentage estimate of lagged exempted sales that is applied to the sales (the number of units after non-lagged exempted sales have been subtracted from total sales) for the quarter being submitted. The product that results from the multiplication of the rolling average percentage estimate of lagged exempted sales and the sales for the quarter determines the estimated lagged exempted sales in units to subtract from the denominator of the average sales price calculation. Manufacturers must make a corresponding adjustment to the numerator of the average sales price calculation to ensure that the total in dollars for the reporting quarter does not include revenue related to lagged exempted sales removed from the denominator using the estimation methodology.

(B) For National Drug Codes with less than 12 months of sales, the calculation described in paragraph (4)(iii)(A) of this section is calculated based on the sales and exempted sales (lagged and non-lagged) for the period equaling the total number of months of sales.

(C) Manufacturers must exclude lagged exempted sales (as calculated using the ratio methodology in paragraph (a)(4)(iii)(A) of this section) from their estimates of lagged price concessions described in paragraph (a)(3) of this section.

* * * * *

Subpart K—Payment for Drugs and Biologicals Under Part B

18. Section 414.904 is amended by revising paragraphs (d)(2)(iii) and (d)(3) to read as follows:

§ 414.904 Average sales price as the basis for payment.

* * * * *

(d) * * *

(2) * * *

(iii) Effective for drugs and biologicals furnished in CY 2006 and subsequent calendar years, the payment for such drugs and biologicals furnished in connection with renal dialysis services and separately billed by freestanding and hospital-based renal dialysis facilities not paid on a cost basis is 106 percent of the average sales price.

(3) *Widely available market price and average manufacturer price.* If the Inspector General finds that the average sales price exceeds the widely available market price or the average manufacturer price by 5 percent or more in CY 2007, the payment limit in the quarter following the transmittal of this information to the Secretary is the lesser of the widely available market price or 103 percent of the average manufacturer price.

* * * * *

PART 415—SERVICES FURNISHED BY PHYSICIANS IN PROVIDERS, SUPERVISING PHYSICIANS IN TEACHING SETTINGS, AND RESIDENTS IN CERTAIN SETTINGS

19. The authority citation for part 415 continues to read as follows:

Authority: Secs. 1102 and 1871 of the Social Security Act (42 U.S.C. 1302 and 1395hh).

Subpart C—Part B Carrier Payments for Physician Services to Beneficiaries in Providers

20. Section 415.130 is amended by revising paragraph (d) to read as follows:

§ 415.130 Conditions for payment: Physician pathology services.

* * * * *

(d) *Physician pathology services furnished by an independent laboratory.* The technical component of physician pathology services furnished by an independent laboratory to a hospital inpatient or outpatient on or before December 31, 2006 may be paid to the laboratory by the carrier under the physician fee schedule if the Medicare beneficiary is a patient of a covered hospital as defined in paragraph (a)(1) of this section. For services furnished after December 31, 2006, an independent laboratory may not bill the carrier for physician pathology services furnished to a hospital inpatient or outpatient.

* * * * *

PART 424—CONDITIONS FOR MEDICARE PAYMENT

21. The authority citation for part 424 continues to read as follows:

Authority: Secs. 1102 and 1871 of the Social Security Act (42 U.S.C. 1302 and 1395hh).

Subpart B—Certification and Plan of Treatment Requirements

22. Section 424.24 is amended by—

A. Redesignating paragraph (f) as paragraph (g).

B. Adding a new paragraph (f).

The addition reads as follows:

§ 424.24 Requirements for medical and other health services furnished by providers under Medicare Part B.

* * * * *

(f) *Blood glucose monitoring in skilled nursing facilities.* For each blood glucose test furnished to a resident of a skilled nursing facility, the physician must certify that the test is medically necessary. A physician's standing order is not sufficient to order a series of blood glucose tests.

* * * * *

Subpart F—Limitations on Assignment and Reassignment of Claims

23. Section 424.80 is amended by—

A. Revising the heading of paragraph (d).

B. Revising paragraph (d)(2)

C. Adding a new paragraph (d)(3).

The revisions and addition read as follows:

§ 424.80 Prohibition of reassignment of claims by suppliers.

* * * * * .

(d) *Reassignment to an entity under an employer-employee relationship or under a contractual arrangement: Conditions and limitations.* (1) * * *

(2) *Access to records.* The supplier who furnishes the service has unrestricted access to claims submitted by an entity for services provided by that supplier. This paragraph applies irrespective of whether the supplier is an employee or whether the service is provided under a contractual arrangement. If an entity refuses to provide, upon request, the billing information to the supplier performing the service, the entity's right to receive reassigned benefits may be revoked under § 424.82(c)(3).

(3) *Contractual arrangements for provision of diagnostic test services.* If a physician or medical group bills for the technical component of a diagnostic test covered under section 1861(s)(3) of the Act and paid for under part 414 of this chapter (other than clinical diagnostic laboratory tests paid under section 1833(a)(2)(D) of the Act, which are subject to the special rules set forth in section 1833(h)(5)(A) of the Act), following a reassignment involving a contractual arrangement with the physician or other supplier who performed the technical component, each of the following conditions must be met:

(i) The payment to the billing physician, or medical group, less the applicable deductibles and coinsurance, may not exceed the lowest of the following amounts:

(A) The physician or other supplier's net charge to the billing physician or medical group.

(B) The billing physician's or medical group's actual charge.

(C) The fee schedule amount for the service that would be allowed if the physician or other supplier billed directly.

(ii) The physician or medical group billing for the test must identify the physician or other supplier that performed the test and indicate the supplier's net charge for the test. If the physician or medical group billing for the test fails to provide this information, CMS will not make any payment to the physician or medical group billing for the test and the billing physician or medical group can not bill the beneficiary.

(iii) In order to bill for the technical component of the service, the physician or medical group must directly perform the professional component of the service.

(Catalog of Federal Domestic Assistance Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: June 29, 2006.

Mark B. McClellan,

Administrator, Centers for Medicare & Medicaid Services.

Approved: August 3, 2006.

Michael O. Leavitt,

Secretary.

Note: These addenda will not appear in the Code of Federal Regulations.

Addendum A: Explanation and Use of Addenda B

The addenda on the following pages provide various data pertaining to the Medicare fee schedule for physicians' services furnished in 2007. Addendum B contains the RVUs for work, non-facility PE, facility PE, and malpractice expense, and other information for all services included in the PFS.

In previous years, we have listed many services in Addendum B that are not paid under the PFS. To avoid publishing as many pages of codes for these services, we are not including clinical laboratory codes or the alphanumeric codes (Healthcare Common Procedure Coding System (HCPCS) codes not included in CPT) not paid under the PFS in Addendum B.

Addendum B—2007 Relative Value Units and Related Information Used in Determining Medicare Payments for 2007

This addendum contains the following information for each CPT code and alphanumeric HCPCS code, except for: alphanumeric codes beginning with B (enteral and parenteral therapy), E (durable medical equipment), K (temporary stcodes for nonphysicians' services or items), or L (orthotics); and codes for anesthesiology. Please also note the following:

- An "NA" in the "Non-facility PE RVUs" column of Addendum B means that CMS has not developed a PE RVU

in the non-facility setting for the service because it is typically performed in the hospital (for example, an open heart surgery is generally performed in the hospital setting and not a physician's office). If there is an "NA" in the non-facility PE RVU column, and the contractor determines that this service can be performed in the non-facility setting, the service will be paid at the facility PE RVU rate.

• Services that have an "NA" in the "Facility PE RVUs" column of Addendum B are typically not paid using the PFS when provided in a facility setting. These services (which include "incident to" services and the technical portion of diagnostic tests) are generally paid under either the outpatient hospital prospective payment system or bundled into the hospital inpatient prospective payment system payment.

1. *CPT/HCPCS code.* This is the CPT or alphanumeric HCPCS number for the service. Alphanumeric HCPCS codes are included at the end of this addendum.

2. *Modifier.* A modifier is shown if there is a technical component (modifier TC) and a professional component (PC) (modifier –26) for the service. If there is a PC and a TC for the service, Addendum B contains three entries for the code. A code for: the global values (both professional and technical); modifier –26 (PC); and, modifier TC. The global service is not designated by a modifier, and physicians must bill using the code without a modifier if the physician furnishes both the PC and the TC of the service.

Modifier-53 is shown for a discontinued procedure, for example, a colonoscopy that is not completed. There will be RVUs for a code with this modifier.

3. *Status indicator.* This indicator shows whether the CPT/HCPCS code is in the PFS and whether it is separately payable if the service is covered.

A = Active code. These codes are separately payable under the PFS if covered. There will be RVUs for codes with this status. The presence of an "A" indicator does not mean that Medicare has made a national coverage determination regarding the service. Carriers remain responsible for coverage decisions in the absence of a national Medicare policy.

B = Bundled code. Payments for covered services are always bundled into payment for other services not specified. If RVUs are shown, they are not used for Medicare payment. If these services are covered, payment for them is subsumed by the payment for the services to which they are incident (an example is a telephone call from a hospital nurse regarding care of a patient).

C = Carriers price the code. Carriers will establish RVUs and payment amounts for these services, generally on an individual case basis following review of documentation, such as an operative report.

D* = Deleted/discontinued code.

E = Excluded from the PFS by regulation. These codes are for items and services that CMS chose to exclude from the fee schedule payment by regulation. No RVUs are shown, and no payment may be made under the PFS for these codes. Payment for them, when covered, continues under reasonable charge procedures.

F = Deleted/discontinued codes. (Code not subject to a 90-day grace period.) These codes are deleted effective with the beginning of the year and are never subject to a grace period. This indicator is no longer effective beginning with the 2005 fee schedule as of January 1, 2005.

G = Code not valid for Medicare purposes. Medicare uses another code for reporting of, and payment for, these services. (Codes subject to a 90-day grace period.) This indicator is no longer effective with the 2005 PFS as of January 1, 2005.

H* = Deleted modifier. For 2000 and later years, either the TC or PC component shown for the code has been deleted and the deleted component is shown in the database with the H status indicator.

I = Not valid for Medicare purposes. Medicare uses another code for the reporting of, and the payment for these services. (Codes not subject to a 90-day grace period.)

L = Local codes. Carriers will apply this status to all local codes in effect on January 1, 1998 or subsequently approved by central office for use. Carriers will complete the RVUs and payment amounts for these codes.

M = Measurement codes, used for reporting purposes only. There are no RVUs and no payment amounts for these codes. Medicare uses them to aid with performance measurement. No separate payment is made. These codes should be billed with a zero (($0.00) charge and are denied) on the MPFSDB.

N = Non-covered service. These codes are noncovered services. Medicare payment may not be made for these codes. If RVUs are shown, they are not used for Medicare payment.

R = Restricted coverage. Special coverage instructions apply. If the service is covered and no RVUs are shown, it is carrier-priced.

T = There are RVUs for these services, but they are only paid if there are no other services payable under the PFS billed on the same date by the same provider. If any other services payable under the PFS are billed on the same date by the same provider, these services are bundled into the service(s) for which payment is made.

X = Statutory exclusion. These codes represent an item or service that is not within the statutory definition of "physicians' services" for PFS payment purposes. No RVUs are shown for these codes, and no payment may be made under the PFS. (Examples are ambulance services and clinical diagnostic laboratory services.)

4. *Description of code.* This is an abbreviated version of the narrative description of the code.

5. *Physician work RVUs.* These are the RVUs for the physician work for this service in 2007. As stated in the June 29, 2006 proposed notice, the RVUs for codes with a 10- or 90-day global period reflect the application of the RUC-recommended values for the E/M services that are included as part of the global period for the service.

Note: The separate budget neutrality adjustor is *not* reflected in these physician work RVUs.

6. *Fully implemented non-facility practice expense RVUs.* These are the fully implemented resource-based PE RVUs for non-facility settings.

7. *Transitional Non-facility practice expense RVUs.* These are the 2007 resource-based PE RVUs for non-facility settings.

8. *Fully implemented facility practice expense RVUs.* These are the fully implemented resource-based PE RVUs for facility settings.

9. *Transitional facility practice expense RVUs.* These are the 2007 resource-based PE RVUs for facility settings.

10. *Malpractice expense RVUs.* These are the RVUs for the malpractice expense for the service for 2006.

11. *Non-facility total.* This is the sum of the work, fully implemented non-facility PE, and malpractice expense RVUs.

12. *Transitional non-facility total.* This is the sum of the work, 2007 transitional non-facility PE, and malpractice expense RVUs.

13. *Facility total.* This is the sum of the work, fully implemented facility PE, and malpractice expense RVUs.

14. *Transitional facility total.* This is the sum of the work, 2007 transitional facility PE, and malpractice expense RVUs.

15. *Global period.* This indicator shows the number of days in the global period for the code (0, 10, or 90 days).

An explanation of the alpha codes follows:

MMM = Code describes a service furnished in uncomplicated maternity cases including antepartum care, delivery, and postpartum care. The usual global surgical concept does not apply. See the 1999 Physicians' Current Procedural Terminology for specific definitions.

XXX = The global concept does not apply.

YYY = The global period is to be set by the carrier (for example, unlisted surgery codes).

ZZZ = Code related to another service that is always included in the global period of the other service. (Note: Physician work and PE are associated with intra service time and in some instances in the post service time.

*Codes with these indicators had a 90-day grace period before January 1, 2005.

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
0003T		C	Cervicography	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0008T		C	Upper gi endoscopy w/suture	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0016T		C	Thermotx choroid vasc lesion	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0017T		C	Photocoagulat macular drusen	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0018T		C	Transcranial magnetic stimul	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0019T		C	Extracorp shock wv tx,ms nos	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0021T		C	Fetal oximetry, tmsvag/cerv	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0024T		C	Transcath cardiac reduction	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0026T		C	Measure remnant lipoproteins	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0027T		C	Endoscopic epidural lysis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0028T		C	Dexa body composition study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0029T		C	Magnetic tx for incontinence	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0030T		C	Antiprothrombin antibody	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0031T		C	Speculoscopy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0032T		C	Speculoscopy w/direct sample	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0041T		C	Detect ur infect agnt w/cpas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0042T		C	Ct perfusion w/contrast, cbf	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0043T		C	Co expired gas analysis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0044T		C	Whole body photography	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0045T		C	Whole body photography	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0046T		C	Cath lavage, mammary duct(s	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0047T		C	Cath lavage, mammary duct(s)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0048T		C	Implant ventricular device	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0049T		C	External circulation assist	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0050T		C	Removal circulation assist	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0051T		C	Implant total heart system	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0052T		C	Replace component heart syst	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0053T		C	Replace component heart syst	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0054T		C	Bone surgery using computer	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0055T		C	Bone surgery using computer	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0056T		C	Bone surgery using computer	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0058T		C	Cryopreservation, ovary tiss	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0059T		C	Cryopreservation, oocyte	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0060T		C	Electrical impedance scan	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0061T		C	Destruction of tumor, breast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0062T		C	Rep intradisc annulus;1 lev	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0063T		C	Rep intradisc annulus;>1lev	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0064T		C	Spectroscop eval expired gas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0065T		C	Ocular photoscreen bilat	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0067T		C	Ct colonography;dx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0067T	26	C	Ct colonography;dx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0067T	TC	C	Ct colonography;dx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0068T		C	Interp/rept heart sound	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0069T		C	Analysis only heart sound	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0070T		C	Interp only heart sound	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0071T		C	U/s leiomyomata ablate <200	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0072T		C	U/s leiomyomata ablate >200	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0073T		A	Delivery, comp imrt	0.00	13.02	16.77	NA	NA	0.13	13.15	16.90	NA	NA	XXX
0075T		C	Perq stent/chest vert art	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0075T	26	C	Perq stent/chest vert art	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0075T	TC	C	Perq stent/chest vert art	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0076T		C	S&i stent/chest vert art	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0076T	26	C	S&i stent/chest vert art	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0076T	TC	C	S&i stent/chest vert art	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0077T		C	Cereb therm perfusion probe	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0078T		C	Endovasc aort repr w/device	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
0079T		C	Endovasc visc extnsn repr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0080T		C	Endovasc aort repr rad s&i	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0081T		C	Endovasc visc extnsn s&i	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0082T		C	Stereotactic rad delivery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0083T		C	Stereotactic rad tx mngmt	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0084T		C	Temp prostate urethral stent	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0085T		C	Breath test heart reject	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0086T		C	L ventricle fill pressure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0087T		C	Sperm eval hyaluronan	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0088T		C	Rf tongue base vol reduxn	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0089T		C	Actigraphy testing, 3-day	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0090T		C	Cervical artific disc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0091T		C	Lumbar artific disc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0092T		C	Artific disc addl	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0093T		C	Cervical artific diskectomy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0094T		C	Lumbar artific diskectomy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0095T		C	Artific diskectomy addl	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0096T		C	Rev cervical artific disc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0097T		C	Rev lumbar artific disc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0098T		C	Rev artific disc addl	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0099T		C	Implant comeal ring	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0100T		C	Prosth retina receive&gen	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0101T		C	Extracorp shockwv tx,hi enrg	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0102T		C	Extracorp shockwv tx,anesth	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0103T		C	Holotranscobalamin	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0104T		C	At rest cardio gas rebreathe	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0105T		C	Exerc cardio gas rebreathe	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0106T		C	Touch quant sensory test	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0107T		C	Vibrate quant sensory test	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0108T		C	Cool quant sensory test	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0109T		C	Heat quant sensory test	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0110T		C	Nos quant sensory test	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0111T		C	Rbc membranes fatty acids	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0115T		C	Med tx mngmt 15 min	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0116T		C	Med tx mngmt subsqt	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0117T		C	Med tx mngmt addl 15 min	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0120T		C	Fibroadenoma cryoablate, ea	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0123T		C	Scleral fistulization	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0124T		C	Conjunctival drug placement	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0126T		C	Chd risk imt study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0130T		C	Chron care drug investigatn	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0133T		C	Esophageal implant injexn	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0135T		C	Perq cryoablate renal tumor	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0137T		C	Prostate saturation sampling	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0140T		C	Exhaled breath condensate ph	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0144T		C	CT heart wo dye; qual calc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0144T	26	C	CT heart wo dye; qual calc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0144T	TC	C	CT heart wo dye; qual calc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0145T		C	CT heart w/wo dye funct	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0145T	26	C	CT heart w/wo dye funct	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0145T	TC	C	CT heart w/wo dye funct	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0146T		C	CCTA w/wo dye	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0146T	26	C	CCTA w/wo dye	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0146T	TC	C	CCTA w/wo dye	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0147T		C	CCTA w/wo, quan calcium	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0147T	26	C	CCTA w/wo, quan calcium	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX

0147T	TC	C	CCTA w/wo, quan calcium	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0148T		C	CCTA w/wo, strxr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0148T	26	C	CCTA w/wo, strxr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0148T	TC	C	CCTA w/wo, strxr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0149T		C	CCTA w/wo, strxr quan calc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0149T	26	C	CCTA w/wo, strxr quan calc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0149T	TC	C	CCTA w/wo, strxr quan calc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0150T		C	CCTA w/wo, disease strxr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0150T	26	C	CCTA w/wo, disease strxr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0150T	TC	C	CCTA w/wo, disease strxr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0151T		C	CT heart funct add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0151T	26	C	CT heart funct add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0151T	TC	C	CT heart funct add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0152T		C	Computer chest add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0153T		C	Implant aneur sensor add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0154T		C	Implant aneur sensor study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0155T		C	Lap ins gastr eltrd for mo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0156T		C	Lap redo gastr eltrd for mo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0157T		C	Opn ins gastr eltrd for mo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0158T		C	Opn redo gastr eltrd for mo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0159T		C	Computer breast MRI add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
0159T	26	C	Computer breast MRI add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
0159T	TC	C	Computer breast MRI add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
0160T		C	Transcran mag stim planning	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
0161T		C	Transcran mag stim delivery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
10021		A	Fna w/o image	1.27	2.13	2.15	0.36	0.50	0.10	3.50	3.52	1.73	1.87	XXX
10022		A	Fna w/image	1.27	2.13	2.44	0.38	0.41	0.08	3.48	3.79	1.73	1.76	XXX
10040		A	Acne surgery	1.18	1.26	1.07	0.93	0.83	0.05	2.49	2.30	2.16	2.06	010
10060		A	Drainage of skin abscess	1.17	1.50	1.28	1.08	0.97	0.12	2.79	2.57	2.37	2.26	010
10061		A	Drainage of skin abscess	2.40	2.07	1.88	1.51	1.50	0.26	4.73	4.54	4.17	4.16	010
10080		A	Drainage of pilonidal cyst	1.17	2.65	2.99	1.09	1.11	0.11	3.93	4.27	2.37	2.39	010
10081		A	Drainage of pilonidal cyst	2.45	3.49	3.93	1.44	1.49	0.24	6.18	6.62	4.13	4.18	010
10120		A	Remove foreign body	1.22	2.10	2.15	0.94	0.96	0.12	3.44	3.49	2.28	2.30	010
10121		A	Remove foreign body	2.69	3.52	3.51	1.65	1.75	0.33	6.54	6.53	4.67	4.77	010
10140		A	Drainage of hematoma/fluid	1.53	2.27	1.90	1.29	1.29	0.19	3.99	3.62	3.01	3.01	010
10160		A	Puncture drainage of lesion	1.20	1.85	1.66	1.07	1.08	0.14	3.19	3.00	2.41	2.42	010
10180		A	Complex drainage, wound	2.25	3.30	3.06	1.83	1.94	0.35	5.90	5.66	4.43	4.54	010
11000		A	Debride infected skin	0.60	0.73	0.62	0.16	0.21	0.07	1.40	1.29	0.83	0.88	000
11001		A	Debride infected skin add-on	0.30	0.23	0.23	0.08	0.10	0.04	0.57	0.57	0.42	0.44	ZZZ
11004		A	Debride genitalia & perineum	10.31	NA	NA	3.04	3.69	0.67	NA	NA	14.02	14.67	000
11005		A	Debride abdom wall	13.75	NA	NA	4.06	5.19	0.96	NA	NA	18.77	19.90	000
11006		A	Debride genit/per/abdom wall	12.61	NA	NA	3.61	4.54	1.28	NA	NA	17.50	18.43	000
11008		A	Remove mesh from abd wall	5.00	NA	NA	1.36	1.86	0.61	NA	NA	6.97	7.47	ZZZ
11010		A	Debride skin, fx	4.19	6.77	6.85	2.33	2.55	0.66	11.62	11.70	7.18	7.40	010
11011		A	Debride skin/muscle, fx	4.94	7.09	7.89	2.04	2.27	0.74	12.77	13.57	7.72	7.95	000
11012		A	Debride skin/muscle/bone, fx	6.87	9.03	11.33	3.12	3.66	1.16	17.06	19.36	11.15	11.69	000
11040		A	Debride skin, partial	0.48	0.68	0.56	0.16	0.20	0.06	1.22	1.10	0.70	0.74	000
11041		A	Debride skin, full	0.60	0.73	0.68	0.19	0.30	0.10	1.43	1.38	0.89	1.00	000
11042		A	Debride skin/tissue	0.80	0.96	0.97	0.25	0.39	0.13	1.89	1.90	1.18	1.32	000
11043		A	Debride tissue/muscle	3.00	3.64	3.45	2.71	2.62	0.32	6.96	6.77	6.03	5.94	010
11044		A	Debride tissue/muscle/bone	4.05	4.96	4.58	3.67	3.73	0.43	9.44	9.06	8.15	8.21	010
11055		R	Trim skin lesion	0.43	0.82	0.63	0.11	0.16	0.05	1.30	1.11	0.59	0.64	000
11056		R	Trim skin lesions, 2 to 4	0.61	0.89	0.70	0.16	0.21	0.07	1.57	1.38	0.84	0.89	000
11057		R	Trim skin lesions, over 4	0.79	1.00	0.81	0.21	0.28	0.10	1.89	1.70	1.10	1.17	000
11100		A	Biopsy, skin lesion	0.81	1.83	1.40	0.37	0.37	0.03	2.67	2.24	1.21	1.21	000
11101		A	Biopsy, skin add-on	0.41	0.40	0.35	0.19	0.19	0.02	0.83	0.78	0.62	0.62	ZZZ
11200		A	Removal of skin tags	0.77	1.20	1.08	0.88	0.79	0.04	2.01	1.89	1.69	1.60	010
11201		A	Remove skin tags add-on	0.29	0.16	0.16	0.11	0.12	0.02	0.47	0.47	0.42	0.43	ZZZ
11300		A	Shave skin lesion	0.51	1.17	1.04	0.20	0.21	0.03	1.71	1.58	0.74	0.75	000
11301		A	Shave skin lesion	0.85	1.47	1.20	0.37	0.38	0.04	2.36	2.09	1.26	1.27	000
11302		A	Shave skin lesion	1.05	1.73	1.41	0.47	0.46	0.05	2.83	2.51	1.57	1.56	000
11303		A	Shave skin lesion	1.24	1.97	1.68	0.53	0.52	0.07	3.28	2.99	1.84	1.83	000
11305		A	Shave skin lesion	0.67	1.06	0.90	0.20	0.25	0.07	1.80	1.64	0.94	0.99	000
11306		A	Shave skin lesion	0.99	1.39	1.17	0.37	0.41	0.07	2.45	2.23	1.43	1.47	000
11307		A	Shave skin lesion	1.14	1.66	1.38	0.46	0.48	0.07	2.87	2.59	1.67	1.69	000
11308		A	Shave skin lesion	1.41	1.71	1.52	0.50	0.57	0.13	3.25	3.06	2.04	2.11	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
11310		A	Shave skin lesion	0.73	1.35	1.17	0.30	0.32	0.04	2.12	1.94	1.07	1.09	000
11311		A	Shave skin lesion	1.05	1.60	1.32	0.46	0.48	0.05	2.70	2.42	1.56	1.58	000
11312		A	Shave skin lesion	1.20	1.87	1.53	0.54	0.55	0.06	3.13	2.79	1.80	1.81	000
11313		A	Shave skin lesion	1.62	2.13	1.88	0.71	0.72	0.10	3.85	3.60	2.43	2.44	000
11400		A	Exc tr-ext b9+marg 0.5 < cm	0.85	1.86	1.96	0.92	0.89	0.06	2.77	2.87	1.83	1.80	010
11401		A	Exc tr-ext b9+marg 0.6–1 cm	1.23	2.14	2.07	1.12	1.05	0.10	3.47	3.40	2.45	2.38	010
11402		A	Exc tr-ext b9+marg 1.1–2 cm	1.40	2.35	2.25	1.18	1.11	0.13	3.88	3.78	2.71	2.64	010
11403		A	Exc tr-ext b9+marg 2.1–3 cm	1.79	2.52	2.42	1.54	1.38	0.17	4.48	4.38	3.50	3.34	010
11404		A	Exc tr-ext b9+marg 3.1–4 cm	2.06	2.84	2.74	1.61	1.45	0.21	5.11	5.01	3.88	3.72	010
11406		A	Exc tr-ext b9+marg > 4.0 cm	3.45	3.50	3.17	2.07	1.76	0.32	7.27	6.94	5.84	5.53	010
11420		A	Exc h-f-nk-sp b9+marg 0.5 <	0.98	1.82	1.78	0.92	0.93	0.09	2.89	2.85	1.99	2.00	010
11421		A	Exc h-f-nk-sp b9+marg 0.6–1	1.42	2.18	2.09	1.14	1.12	0.13	3.73	3.64	2.69	2.67	010
11422		A	Exc h-f-nk-sp b9+marg 1.1–2	1.63	2.39	2.29	1.50	1.37	0.16	4.18	4.08	3.29	3.16	010
11423		A	Exc h-f-nk-sp b9+marg 2.1–3	2.01	2.62	2.59	1.62	1.49	0.20	4.83	4.80	3.83	3.70	010
11424		A	Exc h-f-nk-sp b9+marg 3.1–4	2.43	2.94	2.84	1.75	1.64	0.25	5.62	5.52	4.43	4.32	010
11426		A	Exc h-f-nk-sp b9+marg > 4 cm	4.02	3.58	3.51	2.29	2.15	0.44	8.04	7.97	6.75	6.61	010
11440		A	Exc face-mm b9+marg 0.5 < cm	1.00	1.99	2.15	1.30	1.31	0.08	3.07	3.23	2.38	2.39	010
11441		A	Exc face-mm b9+marg 0.6–1 cm	1.48	2.34	2.33	1.52	1.50	0.13	3.95	3.94	3.13	3.11	010
11442		A	Exc face-mm b9+marg 1.1–2 cm	1.72	2.59	2.55	1.62	1.58	0.16	4.47	4.43	3.50	3.46	010
11443		A	Exc face-mm b9+marg 2.1–3 cm	2.29	2.82	2.89	1.79	1.81	0.22	5.33	5.40	4.30	4.32	010
11444		A	Exc face-mm b9+marg 3.1–4 cm	3.14	3.23	3.41	2.04	2.15	0.30	6.67	6.85	5.48	5.59	010
11446		A	Exc face-mm b9+marg > 4 cm	4.73	4.01	4.03	2.62	2.73	0.43	9.17	9.19	7.78	7.89	010
11450		A	Removal, sweat gland lesion	3.11	5.19	5.07	2.44	2.13	0.34	8.64	8.52	5.89	5.58	090
11451		A	Removal, sweat gland lesion	4.32	6.17	6.49	2.79	2.60	0.53	11.02	11.34	7.64	7.45	090
11462		A	Removal, sweat gland lesion	2.89	5.33	5.17	2.47	2.13	0.32	8.54	8.38	5.68	5.34	090
11463		A	Removal, sweat gland lesion	4.32	6.64	6.78	2.98	2.76	0.54	11.50	11.64	7.84	7.62	090
11470		A	Removal, sweat gland lesion	3.63	5.61	5.20	2.70	2.37	0.40	9.64	9.23	6.73	6.40	090
11471		A	Removal, sweat gland lesion	4.78	6.48	6.65	2.99	2.82	0.58	11.84	12.01	8.35	8.18	090
11600		A	Exc tr-ext mlg+marg 0.5 < cm	1.56	2.71	2.65	1.12	1.01	0.10	4.37	4.31	2.78	2.67	010
11601		A	Exc tr-ext mlg+marg 0.6–1 cm	2.00	3.37	2.87	1.47	1.28	0.12	5.49	4.99	3.59	3.40	010
11602		A	Exc tr-ext mlg+marg 1.1–2 cm	2.20	3.74	3.05	1.63	1.35	0.12	6.06	5.37	3.95	3.67	010
11603		A	Exc tr-ext mlg+marg 2.1–3 cm	2.75	3.95	3.29	1.81	1.45	0.16	6.86	6.20	4.72	4.36	010
11604		A	Exc tr-ext mlg+marg 3.1–4 cm	3.10	4.26	3.59	1.88	1.51	0.20	7.56	6.89	5.18	4.81	010
11606		A	Exc tr-ext mlg+marg > 4 cm	4.95	5.41	4.40	2.41	1.90	0.36	10.72	9.71	7.72	7.21	010
11620		A	Exc h-f-nk-sp mlg+marg 0.5 <	1.57	2.81	2.65	1.17	1.01	0.09	4.47	4.31	2.83	2.67	010
11621		A	Exc h-f-nk-sp mlg+marg 0.6–1	2.01	3.42	2.88	1.49	1.30	0.12	5.55	5.01	3.62	3.43	010
11622		A	Exc h-f-nk-sp mlg+marg 1.1–2	2.34	3.80	3.17	1.69	1.47	0.14	6.28	5.65	4.17	3.95	010
11623		A	Exc h-f-nk-sp mlg+marg 2.1–3	3.04	4.03	3.51	1.90	1.66	0.20	7.27	6.75	5.14	4.90	010
11624		A	Exc h-f-nk-sp mlg+marg 3.1–4	3.55	4.35	3.89	2.03	1.84	0.27	8.17	7.71	5.85	5.66	010
11626		A	Exc h-f-nk-sp mlg+mar > 4 cm	4.54	4.90	4.70	2.28	2.36	0.45	9.89	9.69	7.27	7.35	010
11640		A	Exc face-mm malig+marg 0.5 <	1.60	3.00	2.74	1.26	1.15	0.11	4.71	4.45	2.97	2.86	010
11641		A	Exc face-mm malig+marg 0.6–1	2.10	3.55	3.15	1.56	1.54	0.16	5.81	5.41	3.82	3.80	010
11642		A	Exc face-mm malig+marg 1.1–2	2.55	3.93	3.53	1.78	1.73	0.19	6.67	6.27	4.52	4.47	010
11643		A	Exc face-mm malig+marg 2.1–3	3.35	4.18	3.90	2.04	1.98	0.26	7.79	7.51	5.65	5.59	010
11644		A	Exc face-mm malig+marg 3.1–4	4.27	4.95	4.75	2.38	2.43	0.37	9.59	9.39	7.02	7.07	010
11646		A	Exc face-mm mlg+marg > 4 cm	6.19	5.76	5.75	3.03	3.36	0.61	12.56	12.55	9.83	10.16	010
11719		R	Trim nail(s)	0.17	0.38	0.28	0.04	0.06	0.02	0.57	0.47	0.23	0.25	000
11720		A	Debride nail, 1–5	0.32	0.47	0.37	0.08	0.11	0.04	0.83	0.73	0.44	0.47	000
11721		A	Debride nail, 6 or more	0.54	0.55	0.47	0.14	0.19	0.07	1.16	1.08	0.75	0.80	000
11730		A	Removal of nail plate	1.10	1.35	1.11	0.29	0.40	0.14	2.59	2.35	1.53	1.64	000
11732		A	Remove nail plate, add-on	0.57	0.55	0.47	0.15	0.20	0.07	1.19	1.11	0.79	0.84	ZZZ
11740		A	Drain blood from under nail	0.37	0.80	0.61	0.44	0.37	0.04	1.21	1.02	0.85	0.78	000
11750		A	Removal of nail bed	2.36	2.98	2.37	1.89	1.79	0.22	5.56	4.95	4.47	4.37	010
11752		A	Remove nail bed/finger tip	3.42	4.12	3.27	2.82	2.95	0.35	7.89	7.04	6.59	6.72	010
11755		A	Biopsy, nail unit	1.31	2.02	1.68	0.76	0.77	0.14	3.47	3.13	2.21	2.22	000
11760		A	Repair of nail bed	1.58	3.45	2.83	1.44	1.70	0.21	5.24	4.62	3.23	3.49	010

11762		A	Reconstruction of nail bed	2.89	3.72	3.09	1.69	2.18	0.36	6.97	6.34	4.94	5.43	010
11765		A	Excision of nail fold, toe	0.69	2.69	2.01	1.01	0.82	0.08	3.46	2.78	1.78	1.59	010
11770		A	Removal of pilonidal lesion	2.61	3.49	3.48	1.53	1.51	0.33	6.43	6.42	4.47	4.45	010
11771		A	Removal of pilonidal lesion	5.91	6.72	5.91	3.74	3.42	0.74	13.37	12.56	10.39	10.07	090
11772		A	Removal of pilonidal lesion	7.15	8.06	7.64	5.56	5.19	0.89	16.10	15.68	13.60	13.23	090
11900		A	Injection into skin lesions	0.52	0.89	0.71	0.24	0.22	0.02	1.43	1.25	0.78	0.76	000
11901		A	Added skin lesions injection	0.80	0.98	0.74	0.38	0.36	0.03	1.81	1.57	1.21	1.19	000
11920		R	Correct skin color defects	1.61	2.40	3.38	1.12	1.10	0.24	4.25	5.23	2.97	2.95	000
11921		R	Correct skin color defects	1.93	2.67	3.64	1.26	1.27	0.29	4.89	5.86	3.48	3.49	000
11922		R	Correct skin color defects	0.49	0.93	1.09	0.22	0.24	0.07	1.49	1.65	0.78	0.80	ZZZ
11950		R	Therapy for contour defects	0.84	0.86	1.07	0.35	0.38	0.06	1.76	1.97	1.25	1.28	000
11951		R	Therapy for contour defects	1.19	1.18	1.41	0.53	0.52	0.11	2.48	2.71	1.83	1.82	000
11952		R	Therapy for contour defects	1.69	1.71	1.82	0.81	0.71	0.16	3.56	3.67	2.66	2.56	000
11954		R	Therapy for contour defects	1.85	1.76	2.27	0.76	0.87	0.25	3.86	4.37	2.86	2.97	000
11960		A	Insert tissue expander(s)	10.85	NA	NA	10.58	10.44	1.31	NA	NA	22.74	22.60	090
11970		A	Replace tissue expander	7.80	NA	NA	6.20	6.15	1.05	NA	NA	15.05	15.00	090
11971		A	Remove tissue expander(s)	3.13	7.42	8.69	4.01	3.85	0.32	10.87	12.14	7.46	7.30	090
11975		N	Insert contraceptive cap	1.48	1.55	1.45	0.34	0.51	0.17	3.20	3.10	1.99	2.16	XXX
11976		R	Removal of contraceptive cap	1.78	1.71	1.72	0.47	0.63	0.21	3.70	3.71	2.46	2.62	000
11977		N	Removal/reinsert contra cap	3.30	2.00	2.20	0.77	1.14	0.37	5.67	5.87	4.44	4.81	XXX
11980		A	Implant hormone pellet(s)	1.48	1.17	1.10	0.55	0.54	0.13	2.78	2.71	2.16	2.15	000
11981		A	Insert drug implant device	1.48	1.92	1.76	0.59	0.66	0.12	3.52	3.36	2.19	2.26	XXX
11982		A	Remove drug implant device	1.78	2.05	1.97	0.71	0.80	0.17	4.00	3.92	2.66	2.75	XXX
11983		A	Remove/insert drug implant	3.30	2.67	2.38	1.34	1.44	0.23	6.20	5.91	4.87	4.97	XXX
12001		A	Repair superficial wound(s)	1.70	1.73	1.92	0.72	0.76	0.15	3.58	3.77	2.57	2.61	010
12002		A	Repair superficial wound(s)	1.86	1.79	1.98	0.83	0.88	0.17	3.82	4.01	2.86	2.91	010
12004		A	Repair superficial wound(s)	2.24	2.07	2.26	0.92	0.99	0.21	4.52	4.71	3.37	3.44	010
12005		A	Repair superficial wound(s)	2.86	2.52	2.75	1.06	1.17	0.27	5.65	5.88	4.19	4.30	010
12006		A	Repair superficial wound(s)	3.66	3.03	3.30	1.30	1.46	0.35	7.04	7.31	5.31	5.47	010
12007		A	Repair superficial wound(s)	4.11	3.40	3.72	1.49	1.73	0.45	7.96	8.28	6.05	6.29	010
12011		A	Repair superficial wound(s)	1.76	1.89	2.07	0.75	0.77	0.16	3.81	3.99	2.67	2.69	010
12013		A	Repair superficial wound(s)	1.99	2.05	2.22	0.88	0.92	0.18	4.22	4.39	3.05	3.09	010
12014		A	Repair superficial wound(s)	2.46	2.28	2.50	0.97	1.04	0.23	4.97	5.19	3.66	3.73	010
12015		A	Repair superficial wound(s)	3.19	2.76	3.04	1.11	1.22	0.29	6.24	6.52	4.59	4.70	010
12016		A	Repair superficial wound(s)	3.92	3.16	3.45	1.29	1.46	0.37	7.45	7.74	5.58	5.75	010
12017		A	Repair superficial wound(s)	4.70	NA	NA	1.48	1.79	0.47	NA	NA	6.65	6.96	010
12018		A	Repair superficial wound(s)	5.52	NA	NA	1.96	2.18	0.64	NA	NA	8.12	8.34	010
12020		A	Closure of split wound	2.62	3.75	3.80	1.77	1.88	0.30	6.67	6.72	4.69	4.80	010
12021		A	Closure of split wound	1.84	1.86	1.83	1.33	1.39	0.24	3.94	3.91	3.41	3.47	010
12031		A	Layer closure of wound(s)	2.15	3.82	2.67	1.73	1.15	0.17	6.14	4.99	4.05	3.47	010
12032		A	Layer closure of wound(s)	2.47	5.08	4.15	2.21	1.90	0.16	7.71	6.78	4.84	4.53	010
12034		A	Layer closure of wound(s)	2.92	4.50	3.52	1.93	1.57	0.25	7.67	6.69	5.10	4.74	010
12035		A	Layer closure of wound(s)	3.42	5.25	5.21	2.08	2.13	0.39	9.06	9.02	5.89	5.94	010
12036		A	Layer closure of wound(s)	4.04	5.38	5.51	2.22	2.46	0.55	9.97	10.10	6.81	7.05	010
12037		A	Layer closure of wound(s)	4.66	5.94	6.05	2.59	2.87	0.66	11.26	11.37	7.91	8.19	010
12041		A	Layer closure of wound(s)	2.37	3.77	2.85	1.72	1.28	0.19	6.33	5.41	4.28	3.84	010
12042		A	Layer closure of wound(s)	2.74	4.36	3.54	2.04	1.61	0.17	7.27	6.45	4.95	4.52	010
12044		A	Layer closure of wound(s)	3.14	5.27	3.73	1.89	1.67	0.27	8.68	7.14	5.30	5.08	010
12045		A	Layer closure of wound(s)	3.63	5.07	5.21	2.06	2.23	0.41	9.11	9.25	6.10	6.27	010
12046		A	Layer closure of wound(s)	4.24	5.64	6.29	2.27	2.63	0.54	10.42	11.07	7.05	7.41	010
12047		A	Layer closure of wound(s)	4.64	6.16	6.30	2.51	2.94	0.58	11.38	11.52	7.73	8.16	010
12051		A	Layer closure of wound(s)	2.47	4.01	3.46	1.86	1.55	0.20	6.68	6.13	4.53	4.22	010
12052		A	Layer closure of wound(s)	2.77	4.69	3.59	2.44	1.68	0.17	7.63	6.53	5.38	4.62	010
12053		A	Layer closure of wound(s)	3.12	5.23	3.74	2.05	1.66	0.23	8.58	7.09	5.40	5.01	010
12054		A	Layer closure of wound(s)	3.45	5.30	4.00	2.01	1.73	0.30	9.05	7.75	5.76	5.48	010
12055		A	Layer closure of wound(s)	4.42	6.00	4.86	2.10	2.12	0.45	10.87	9.73	6.97	6.99	010
12056		A	Layer closure of wound(s)	5.23	6.21	6.62	2.38	2.88	0.59	12.03	12.44	8.20	8.70	010
12057		A	Layer closure of wound(s)	5.95	7.45	6.46	2.79	3.51	0.56	13.96	12.97	9.30	10.02	010
13100		A	Repair of wound or lesion	3.12	4.32	4.12	2.39	2.32	0.26	7.70	7.50	5.77	5.70	010
13101		A	Repair of wound or lesion	3.91	5.79	4.94	2.88	2.73	0.26	9.96	9.11	7.05	6.90	010
13102		A	Repair wound/lesion add-on	1.24	1.34	1.21	0.52	0.56	0.13	2.71	2.58	1.89	1.93	ZZZ
13120		A	Repair of wound or lesion	3.30	4.46	4.22	2.50	2.38	0.26	8.02	7.78	6.06	5.94	010
13121		A	Repair of wound or lesion	4.32	6.47	5.26	3.46	2.96	0.25	11.04	9.83	8.03	7.53	010
13122		A	Repair wound/lesion add-on	1.44	1.37	1.48	0.58	0.62	0.15	2.96	3.07	2.17	2.21	ZZZ
13131		A	Repair of wound or lesion	3.78	4.86	4.49	2.78	2.71	0.26	8.90	8.53	6.82	6.75	010
13132		A	Repair of wound or lesion	6.44	7.64	6.34	4.77	4.31	0.32	14.40	13.10	11.53	11.07	010

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
13133		A	Repair wound/lesion add-on	2.19	1.82	1.70	0.94	1.01	0.18	4.19	4.07	3.31	3.38	ZZZ
13150		A	Repair of wound or lesion	3.80	4.59	4.80	2.64	2.73	0.34	8.73	8.94	6.78	6.87	010
13151		A	Repair of wound or lesion	4.44	5.35	4.94	3.11	3.13	0.31	10.10	9.69	7.86	7.88	010
13152		A	Repair of wound or lesion	6.32	7.31	6.35	3.77	3.97	0.40	14.03	13.07	10.49	10.69	010
13153		A	Repair wound/lesion add-on	2.38	1.98	1.94	0.98	1.10	0.24	4.60	4.56	3.60	3.72	ZZZ
13160		A	Late closure of wound	11.76	NA	NA	7.07	7.14	1.54	NA	NA	20.37	20.44	090
14000		A	Skin tissue rearrangement	6.76	8.78	8.08	5.92	5.58	0.59	16.13	15.43	13.27	12.93	090
14001		A	Skin tissue rearrangement	9.52	10.90	9.78	7.40	7.15	0.82	21.24	20.12	17.74	17.49	090
14020		A	Skin tissue rearrangement	7.58	9.79	8.91	6.70	6.57	0.64	18.01	17.13	14.92	14.79	090
14021		A	Skin tissue rearrangement	11.10	12.13	10.52	8.40	8.31	0.81	24.04	22.43	20.31	20.22	090
14040		A	Skin tissue rearrangement	8.36	9.92	9.08	6.77	7.09	0.62	18.90	18.06	15.75	16.07	090
14041		A	Skin tissue rearrangement	12.59	13.17	11.24	9.03	8.76	0.73	26.49	24.56	22.35	22.08	090
14060		A	Skin tissue rearrangement	8.99	9.40	8.94	6.94	7.31	0.68	19.07	18.61	16.61	16.98	090
14061		A	Skin tissue rearrangement	13.58	14.41	12.30	9.84	9.59	0.76	28.75	26.64	24.18	23.93	090
14300		A	Skin tissue rearrangement	13.17	13.26	11.66	9.24	9.19	1.16	27.59	25.99	23.57	23.52	090
14350		A	Skin tissue rearrangement	10.73	NA	NA	6.92	7.09	1.34	NA	NA	18.99	19.16	090
15000		A	Wound prep, 1st 100 sq cm	3.99	4.24	3.90	1.73	2.07	0.54	8.77	8.43	6.26	6.60	000
15001		A	Wound prep, addl 100 sq cm	1.00	0.56	1.15	0.35	0.40	0.14	1.70	2.29	1.49	1.54	ZZZ
15040		A	Harvest cultured skin graft	2.00	3.86	4.39	1.03	1.11	0.24	6.10	6.63	3.27	3.35	000
15050		A	Skin pinch graft	5.29	7.65	7.10	5.02	5.09	0.57	13.51	12.96	10.88	10.95	090
15100		A	Skin splt grft, trnk/arm/leg	9.66	9.84	11.90	6.73	7.55	1.28	20.78	22.84	17.67	18.49	090
15101		A	Skin splt grft t/a/l, add-on	1.72	2.51	3.43	0.87	1.10	0.24	4.47	5.39	2.83	3.06	ZZZ
15110		A	Epidrm autogrft trnk/arm/leg	10.82	8.92	10.23	6.50	6.88	1.31	21.05	22.36	18.63	19.01	090
15111		A	Epidrm autogrft t/a/l add-on	1.85	0.89	1.19	0.64	0.75	0.26	3.00	3.30	2.75	2.86	ZZZ
15115		A	Epidrm a-grft face/nck/hf/g	11.13	9.16	9.21	6.68	7.18	1.15	21.44	21.49	18.96	19.46	090
15116		A	Epidrm a-grft f/n/hf/g addl	2.50	1.22	1.49	0.89	1.06	0.33	4.05	4.32	3.72	3.89	ZZZ
15120		A	Skn splt a-grft fac/nck/hf/g	10.88	11.18	10.84	7.32	7.67	1.16	23.22	22.88	19.36	19.71	090
15121		A	Skn splt a-grft f/n/hf/g add	2.67	3.47	4.24	1.33	1.71	0.36	6.50	7.27	4.36	4.74	ZZZ
15130		A	Derm autograft, trnk/arm/leg	7.33	8.03	9.40	5.64	6.17	0.97	16.33	17.70	13.94	14.47	090
15131		A	Derm autograft t/a/l add-on	1.50	0.70	0.98	0.52	0.61	0.21	2.41	2.69	2.23	2.32	ZZZ
15135		A	Derm autograft face/nck/hf/g	10.83	9.41	9.76	6.98	7.84	1.23	21.47	21.82	19.04	19.90	090
15136		A	Derm autograft, f/n/hf/g add	1.50	0.68	0.84	0.53	0.64	0.20	2.38	2.54	2.23	2.34	ZZZ
15150		A	Cult epiderm grft t/arm/leg	9.24	7.22	8.15	5.92	6.31	1.14	17.60	18.53	16.30	16.69	090
15151		A	Cult epiderm grft t/a/l addl	2.00	0.90	1.21	0.70	0.81	0.28	3.18	3.49	2.98	3.09	ZZZ
15152		A	Cult epiderm graft t/a/l +%	2.50	1.08	1.44	0.87	1.01	0.35	3.93	4.29	3.72	3.86	ZZZ
15155		A	Cult epiderm graft, f/n/hf/g	9.99	7.60	7.77	6.25	6.78	1.05	18.64	18.81	17.29	17.82	090
15156		A	Cult epidrm grft f/n/hfg add	2.75	1.18	1.47	0.98	1.18	0.36	4.29	4.58	4.09	4.29	ZZZ
15157		A	Cult epiderm grft f/n/hfg +%	3.00	1.37	1.67	1.07	1.28	0.39	4.76	5.06	4.46	4.67	ZZZ
15170		A	Acell graft trunk/arms/legs	5.99	3.65	3.79	2.36	2.36	0.55	10.19	10.33	8.90	8.90	090
15171		A	Acell graft t/arm/leg add-on	1.55	0.65	0.67	0.51	0.59	0.19	2.39	2.41	2.25	2.33	ZZZ
15175		A	Acellular graft, f/n/hf/g	7.99	5.24	5.38	3.75	3.94	0.82	14.05	14.19	12.56	12.75	090
15176		A	Acell graft, f/n/hf/g add-on	2.45	1.07	1.10	0.81	0.95	0.29	3.81	3.84	3.55	3.69	ZZZ
15200		A	Skin full graft, trunk	8.90	9.85	9.51	6.29	6.22	0.98	19.73	19.39	16.17	16.10	090
15201		A	Skin full graft trunk add-on	1.32	2.11	2.45	0.56	0.61	0.19	3.62	3.96	2.07	2.12	ZZZ
15220		A	Skin full graft sclp/arm/leg	7.86	10.21	9.44	6.51	6.64	0.84	18.91	18.14	15.21	15.34	090
15221		A	Skin full graft add-on	1.19	2.01	2.24	0.50	0.55	0.16	3.36	3.59	1.85	1.90	ZZZ
15240		A	Skin full grft face/genit/hf	10.03	11.73	10.58	8.64	8.12	0.92	22.68	21.53	19.59	19.07	090
15241		A	Skin full graft add-on	1.86	2.51	2.46	0.79	0.88	0.23	4.60	4.55	2.88	2.97	ZZZ
15260		A	Skin full graft een & lips	11.29	12.63	10.82	9.02	8.69	0.69	24.61	22.80	21.00	20.67	090
15261		A	Skin full graft add-on	2.23	2.91	2.75	1.12	1.33	0.21	5.35	5.19	3.56	3.77	ZZZ
15300		A	Apply skinallogrft, t/arm/lg	4.65	3.36	3.24	2.10	2.20	0.49	8.50	8.38	7.24	7.34	090
15301		A	Apply sknallogrft t/a/l addl	1.00	0.47	0.47	0.34	0.39	0.14	1.61	1.61	1.48	1.53	ZZZ
15320		A	Apply skin allogrft f/n/hf/g	5.36	3.75	3.65	2.32	2.48	0.58	9.69	9.59	8.26	8.42	090
15321		A	Aply sknallogrft f/n/hfg add	1.50	0.68	0.69	0.50	0.57	0.21	2.39	2.40	2.21	2.28	ZZZ
15330		A	Aply acell alogrft t/arm/leg	3.99	3.14	3.18	1.90	2.14	0.49	7.62	7.66	6.38	6.62	090
15331		A	Aply acell grft t/a/l add-on	1.00	0.46	0.46	0.34	0.39	0.14	1.60	1.60	1.48	1.53	ZZZ

15335		A	Apply acell graft, f/n/hf/g	4.50	3.40	3.45	2.06	2.35	0.55	8.45	8.50	7.11	7.40	090
15336		A	Aply acell grft f/n/hf/g add	1.43	0.72	0.70	0.48	0.55	0.20	2.35	2.33	2.11	2.18	ZZZ
15340		A	Apply cult skin substitute	3.72	3.79	3.95	2.72	2.74	0.41	7.92	8.08	6.85	6.87	010
15341		A	Apply cult skin sub add-on	0.50	0.72	0.64	0.17	0.19	0.06	1.28	1.20	0.73	0.75	ZZZ
15360		A	Apply cult derm sub, t/a/l	3.87	4.31	4.43	3.11	3.09	0.43	8.61	8.73	7.41	7.39	090
15361		A	Aply cult derm sub t/a/l add	1.15	0.57	0.58	0.38	0.44	0.14	1.86	1.87	1.67	1.73	ZZZ
15365		A	Apply cult derm sub f/n/hf/g	4.15	4.35	4.50	3.19	3.19	0.46	8.96	9.11	7.80	7.80	090
15366		A	Apply cult derm f/hf/g add	1.45	0.69	0.70	0.48	0.56	0.17	2.31	2.32	2.10	2.18	ZZZ
15400		A	Apply skin xenograft, t/a/l	4.32	4.91	4.24	3.69	3.93	0.47	9.70	9.03	8.48	8.72	090
15401		A	Apply skn xenogrft t/a/l add	1.00	1.02	1.67	0.35	0.42	0.14	2.16	2.81	1.49	1.56	ZZZ
15420		A	Apply skin xgraft, f/n/hf/g	4.83	5.04	4.85	3.86	3.81	0.52	10.39	10.20	9.21	9.16	090
15421		A	Apply skn xgrft f/n/hf/g add	1.50	1.20	1.29	0.52	0.60	0.21	2.91	3.00	2.23	2.31	ZZZ
15430		A	Apply acellular xenograft	5.75	7.01	6.93	6.44	6.57	0.66	13.42	13.34	12.85	12.98	090
15431		C	Apply acellular xgraft add	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
15570		A	Form skin pedicle flap	9.94	10.36	11.07	6.46	6.69	1.34	21.64	22.35	17.74	17.97	090
15572		A	Form skin pedicle flap	9.88	9.74	9.55	6.62	6.49	1.20	20.82	20.63	17.70	17.57	090
15574		A	Form skin pedicle flap	10.48	10.36	10.60	6.89	7.57	1.20	22.04	22.28	18.57	19.25	090
15576		A	Form skin pedicle flap	9.18	9.50	9.69	6.39	6.76	0.87	19.55	19.74	16.44	16.81	090
15600		A	Skin graft	1.91	5.28	7.02	2.71	2.97	0.27	7.46	9.20	4.89	5.15	090
15610		A	Skin graft	2.42	5.55	4.91	3.03	3.32	0.35	8.32	7.68	5.80	6.09	090
15620		A	Skin graft	3.57	6.33	7.42	3.80	3.86	0.35	10.25	11.34	7.72	7.78	090
15630		A	Skin graft	3.90	6.89	7.00	4.18	4.16	0.34	11.13	11.24	8.42	8.40	090
15650		A	Transfer skin pedicle flap	4.59	7.02	7.11	4.20	4.21	0.42	12.03	12.12	9.21	9.22	090
15732		A	Muscle-skin graft, head/neck	19.62	14.71	17.21	11.13	11.94	1.99	36.32	38.82	32.74	33.55	090
15734		A	Muscle-skin graft, trunk	19.52	15.75	17.52	11.89	12.25	2.61	37.88	39.65	34.02	34.38	090
15736		A	Muscle-skin graft, arm	16.86	13.77	17.12	9.95	10.90	2.45	33.08	36.43	29.26	30.21	090
15738		A	Muscle-skin graft, leg	18.86	14.03	16.99	10.41	11.39	2.65	35.54	38.50	31.92	32.90	090
15740		A	Island pedicle flap graft	11.48	13.10	10.87	9.05	8.46	0.63	25.21	22.98	21.16	20.57	090
15750		A	Neurovascular pedicle graft	12.64	NA	NA	8.80	8.98	1.42	NA	NA	22.86	23.04	090
15756		A	Free myo/skin flap microvasc	36.64	NA	NA	18.38	20.02	4.61	NA	NA	59.63	61.27	090
15757		A	Free skin flap, microvasc	36.85	NA	NA	16.63	20.35	3.89	NA	NA	57.37	61.09	090
15758		A	Free fascial flap, microvasc	36.60	NA	NA	16.47	20.30	4.23	NA	NA	57.30	61.13	090
15760		A	Composite skin graft	9.61	10.14	10.05	6.84	7.16	0.85	20.60	20.51	17.30	17.62	090
15770		A	Derma-fat-fascia graft	8.64	NA	NA	6.56	6.65	1.05	NA	NA	16.25	16.34	090
15775		R	Hair transplant punch grafts	3.95	3.50	4.05	1.70	1.40	0.52	7.97	8.52	6.17	5.87	000
15776		R	Hair transplant punch grafts	5.53	3.98	5.01	1.61	2.50	0.72	10.23	11.26	7.86	8.75	000
15780		A	Abrasion treatment of skin	8.41	11.65	11.55	6.74	7.87	0.67	20.73	20.63	15.82	16.95	090
15781		A	Abrasion treatment of skin	4.84	8.43	7.29	5.47	5.39	0.34	13.61	12.47	10.65	10.57	090
15782		A	Abrasion treatment of skin	4.31	9.44	9.75	5.43	6.27	0.34	14.09	14.40	10.08	10.92	090
15783		A	Abrasion treatment of skin	4.28	7.83	7.11	4.89	4.36	0.28	12.39	11.67	9.45	8.92	090
15786		A	Abrasion, lesion, single	2.03	3.76	3.45	1.22	1.30	0.11	5.90	5.59	3.36	3.44	010
15787		A	Abrasion, lesions, add-on	0.33	0.83	1.03	0.10	0.15	0.04	1.20	1.40	0.47	0.52	ZZZ
15788		R	Chemical peel, face, epiderm	2.09	8.43	7.14	3.66	3.23	0.11	10.63	9.34	5.86	5.43	090
15789		R	Chemical peel, face, dermal	4.91	9.00	8.32	5.56	4.99	0.20	14.11	13.43	10.67	10.10	090
15792		R	Chemical peel, nonfacial	1.86	6.85	7.03	3.46	4.20	0.13	8.84	9.02	5.45	6.19	090
15793		A	Chemical peel, nonfacial	3.73	5.54	6.10	3.27	4.10	0.19	9.46	10.02	7.19	8.02	090
15819		A	Plastic surgery, neck	10.37	NA	NA	6.67	7.05	0.97	NA	NA	18.01	18.39	090
15820		A	Revision of lower eyelid	6.02	6.47	6.85	5.25	5.48	0.40	12.89	13.27	11.67	11.90	090
15821		A	Revision of lower eyelid	6.59	6.73	7.20	5.41	5.64	0.45	13.77	14.24	12.45	12.68	090
15822		A	Revision of upper eyelid	4.44	5.34	5.71	4.18	4.41	0.37	10.15	10.52	8.99	9.22	090
15823		A	Revision of upper eyelid	8.04	7.59	7.79	6.29	6.40	0.50	16.13	16.33	14.83	14.94	090
15831		A	Excise excessive skin tissue	13.57	NA	NA	8.73	8.30	1.75	NA	NA	24.05	23.62	090
15832		A	Excise excessive skin tissue	12.57	NA	NA	8.30	8.33	1.66	NA	NA	22.53	22.56	090
15833		A	Excise excessive skin tissue	11.62	NA	NA	7.09	7.93	1.49	NA	NA	20.20	21.04	090
15834		A	Excise excessive skin tissue	11.89	NA	NA	7.73	7.70	1.61	NA	NA	21.23	21.20	090
15835		A	Excise excessive skin tissue	12.71	NA	NA	7.81	7.61	1.60	NA	NA	22.12	21.92	090
15836		A	Excise excessive skin tissue	10.33	NA	NA	7.02	6.84	1.34	NA	NA	18.69	18.51	090
15837		A	Excise excessive skin tissue	9.30	8.79	8.61	5.78	6.97	1.18	19.27	19.09	16.26	17.45	090
15838		A	Excise excessive skin tissue	8.00	NA	NA	4.88	5.77	0.58	NA	NA	13.46	14.35	090
15839		A	Excise excessive skin tissue	10.25	9.40	8.97	6.19	6.34	1.22	20.87	20.44	17.66	17.81	090
15840		A	Graft for face nerve palsy	14.67	NA	NA	8.55	9.62	1.32	NA	NA	24.54	25.61	090
15841		A	Graft for face nerve palsy	25.57	NA	NA	13.05	14.51	2.54	NA	NA	41.16	42.62	090
15842		A	Flap for face nerve palsy	40.55	NA	NA	21.01	22.44	4.93	NA	NA	66.49	67.92	090
15845		A	Skin and muscle repair, face	13.93	NA	NA	8.77	9.17	0.81	NA	NA	23.51	23.91	090
15850		B	Removal of sutures	0.78	1.21	1.47	0.18	0.27	0.05	2.04	2.30	1.01	1.10	XXX
15851		A	Removal of sutures	0.86	1.33	1.59	0.24	0.29	0.06	2.25	2.51	1.16	1.21	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
15852		A	Dressing change not for burn	0.86	1.62	1.79	0.25	0.31	0.09	2.57	2.74	1.20	1.26	000
15860		A	Test for blood flow in graft	1.95	NA	NA	0.70	0.76	0.27	NA	NA	2.92	2.98	000
15920		A	Removal of tail bone ulcer	8.06	NA	NA	5.83	5.62	1.04	NA	NA	14.93	14.72	090
15922		A	Removal of tail bone ulcer	10.13	NA	NA	7.01	7.16	1.42	NA	NA	18.56	18.71	090
15931		A	Remove sacrum pressure sore	9.89	NA	NA	5.55	5.65	1.25	NA	NA	16.69	16.79	090
15933		A	Remove sacrum pressure sore	11.49	NA	NA	7.34	7.72	1.52	NA	NA	20.35	20.73	090
15934		A	Remove sacrum pressure sore	13.45	NA	NA	7.61	7.93	1.78	NA	NA	22.84	23.16	090
15935		A	Remove sacrum pressure sore	15.45	NA	NA	10.14	10.28	2.09	NA	NA	27.68	27.82	090
15936		A	Remove sacrum pressure sore	12.96	NA	NA	7.49	8.04	1.76	NA	NA	22.21	22.76	090
15937		A	Remove sacrum pressure sore	14.91	NA	NA	8.96	9.61	2.06	NA	NA	25.93	26.58	090
15940		A	Remove hip pressure sore	10.05	NA	NA	5.84	6.09	1.31	NA	NA	17.20	17.45	090
15941		A	Remove hip pressure sore	12.13	NA	NA	8.51	9.22	1.66	NA	NA	22.30	23.01	090
15944		A	Remove hip pressure sore	12.16	NA	NA	8.24	8.51	1.65	NA	NA	22.05	22.32	090
15945		A	Remove hip pressure sore	13.45	NA	NA	9.15	9.52	1.84	NA	NA	24.44	24.81	090
15946		A	Remove hip pressure sore	23.72	NA	NA	13.95	14.27	3.16	NA	NA	40.83	41.15	090
15950		A	Remove thigh pressure sore	7.83	NA	NA	5.40	5.41	1.04	NA	NA	14.27	14.28	090
15951		A	Remove thigh pressure sore	11.30	NA	NA	8.00	7.90	1.49	NA	NA	20.79	20.69	090
15952		A	Remove thigh pressure sore	12.03	NA	NA	7.77	7.76	1.60	NA	NA	21.40	21.39	090
15953		A	Remove thigh pressure sore	13.27	NA	NA	9.10	9.02	1.79	NA	NA	24.16	24.08	090
15956		A	Remove thigh pressure sore	16.46	NA	NA	9.66	10.49	2.21	NA	NA	28.33	29.16	090
15958		A	Remove thigh pressure sore	16.42	NA	NA	10.28	10.85	2.25	NA	NA	28.95	29.52	090
15999		C	Removal of pressure sore	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
16000		A	Initial treatment of burn(s)	0.89	0.73	0.83	0.24	0.26	0.08	1.70	1.80	1.21	1.23	000
16020		A	Dress/debrid p-thick burn, s	0.80	1.11	1.25	0.56	0.58	0.08	1.99	2.13	1.44	1.46	000
16025		A	Dress/debrid p-thick burn, m	1.85	1.61	1.72	0.88	0.94	0.19	3.65	3.76	2.92	2.98	000
16030		A	Dress/debrid p-thick burn, l	2.08	1.98	2.12	0.96	1.08	0.24	4.30	4.44	3.28	3.40	000
16035		A	Incision of burn scab, initi	3.74	NA	NA	1.27	1.50	0.46	NA	NA	5.47	5.70	090
16036		A	Escharotomy; addll incision	1.50	NA	NA	0.49	0.57	0.20	NA	NA	2.19	2.27	ZZZ
17000		A	Destroy benign/premlg lesion	0.60	1.36	1.07	0.71	0.58	0.03	1.99	1.70	1.34	1.21	010
17003		A	Destroy lesions, 2–14	0.07	0.10	0.11	0.03	0.06	0.01	0.18	0.19	0.11	0.14	ZZZ
17004		A	Destroy lesions, 15 or more	1.58	2.23	2.28	1.20	1.49	0.11	3.92	3.97	2.89	3.18	010
17106		A	Destruction of skin lesions	4.58	4.56	4.59	3.18	3.29	0.35	9.49	9.52	8.11	8.22	090
17107		A	Destruction of skin lesions	9.15	7.08	7.17	5.01	5.34	0.63	16.86	16.95	14.79	15.12	090
17108		A	Destruction of skin lesions	13.18	9.19	9.24	6.64	7.41	0.54	22.91	22.96	20.36	21.13	090
17110		A	Destruct lesion, 1–14	0.65	1.74	1.65	0.85	0.74	0.05	2.44	2.35	1.55	1.44	010
17111		A	Destruct lesion, 15 or more	0.92	2.23	1.81	1.09	0.88	0.05	3.20	2.78	2.06	1.85	010
17250		A	Chemical cautery, tissue	0.50	1.32	1.25	0.38	0.35	0.06	1.88	1.81	0.94	0.91	000
17260		A	Destruction of skin lesions	0.91	1.37	1.30	0.68	0.67	0.04	2.32	2.25	1.63	1.62	010
17261		A	Destruction of skin lesions	1.17	2.42	1.81	1.02	0.88	0.05	3.64	3.03	2.24	2.10	010
17262		A	Destruction of skin lesions	1.58	2.74	2.10	1.22	1.07	0.06	4.38	3.74	2.86	2.71	010
17263		A	Destruction of skin lesions	1.79	2.97	2.28	1.31	1.15	0.07	4.83	4.14	3.17	3.01	010
17264		A	Destruction of skin lesions	1.94	3.17	2.46	1.38	1.19	0.08	5.19	4.48	3.40	3.21	010
17266		A	Destruction of skin lesions	2.34	3.42	2.73	1.54	1.30	0.09	5.85	5.16	3.97	3.73	010
17270		A	Destruction of skin lesions	1.32	2.36	1.87	1.05	0.92	0.05	3.73	3.24	2.42	2.29	010
17271		A	Destruction of skin lesions	1.49	2.58	1.97	1.17	1.03	0.06	4.13	3.52	2.72	2.58	010
17272		A	Destruction of skin lesions	1.77	2.88	2.21	1.31	1.16	0.07	4.72	4.05	3.15	3.00	010
17273		A	Destruction of skin lesions	2.05	3.12	2.43	1.43	1.27	0.08	5.25	4.56	3.56	3.40	010
17274		A	Destruction of skin lesions	2.59	3.50	2.80	1.68	1.50	0.10	6.19	5.49	4.37	4.19	010
17276		A	Destruction of skin lesions	3.20	3.78	3.15	1.91	1.74	0.16	7.14	6.51	5.27	5.10	010
17280		A	Destruction of skin lesions	1.17	2.29	1.78	0.99	0.86	0.05	3.51	3.00	2.21	2.08	010
17281		A	Destruction of skin lesions	1.72	2.65	2.09	1.28	1.14	0.07	4.44	3.88	3.07	2.93	010
17282		A	Destruction of skin lesions	2.04	3.04	2.37	1.43	1.29	0.08	5.16	4.49	3.55	3.41	010
17283		A	Destruction of skin lesions	2.64	3.45	2.77	1.70	1.54	0.11	6.20	5.52	4.45	4.29	010
17284		A	Destruction of skin lesions	3.21	3.86	3.16	1.95	1.80	0.13	7.20	6.50	5.29	5.14	010
17286		A	Destruction of skin lesions	4.43	4.28	3.82	2.38	2.43	0.23	8.94	8.48	7.04	7.09	010
17304		A	1 stage mohs, up to 5 spec	7.59	11.63	9.09	3.58	3.57	0.30	19.52	16.98	11.47	11.46	000

17305		A	2 stage mohs, up to 5 spec	2.85	6.74	4.60	1.34	1.34	0.11	9.70	7.56	4.30	4.30	000
17306		A	3 stage mohs, up to 5 spec	2.85	6.99	4.68	1.33	1.35	0.11	9.95	7.64	4.29	4.31	000
17307		A	Mohs addl stage up to 5 spec	2.85	6.74	4.36	1.34	1.36	0.11	9.70	7.32	4.30	4.32	000
17310		A	Mohs any stage > 5 spec each	0.95	1.94	1.70	0.45	0.46	0.03	2.92	2.68	1.43	1.44	ZZZ
17340		A	Cryotherapy of skin	0.76	0.33	0.36	0.36	0.36	0.05	1.14	1.17	1.17	1.17	010
17360		A	Skin peel therapy	1.43	1.38	1.43	0.95	0.89	0.06	2.87	2.92	2.44	2.38	010
17999		C	Skin tissue procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
19000		A	Drainage of breast lesion	0.84	1.90	1.96	0.24	0.29	0.08	2.82	2.88	1.16	1.21	000
19001		A	Drain breast lesion add-on	0.42	0.24	0.25	0.12	0.14	0.04	0.70	0.71	0.58	0.60	ZZZ
19020		A	Incision of breast lesion	3.68	6.67	6.42	3.05	2.77	0.45	10.80	10.55	7.18	6.90	090
19030		A	Injection for breast x-ray	1.53	2.62	2.80	0.48	0.50	0.09	4.24	4.42	2.10	2.12	000
19100		A	Bx breast percut w/o image	1.27	2.09	2.08	0.33	0.40	0.16	3.52	3.51	1.76	1.83	000
19101		A	Biopsy of breast, open	3.18	4.35	4.46	1.77	1.88	0.39	7.92	8.03	5.34	5.45	010
19102		A	Bx breast percut w/image	2.00	3.41	3.73	0.61	0.65	0.14	5.55	5.87	2.75	2.79	000
19103		A	Bx breast percut w/device	3.69	10.05	11.13	1.09	1.20	0.30	14.04	15.12	5.08	5.19	000
19110		A	Nipple exploration	4.29	6.45	5.96	3.28	2.97	0.57	11.31	10.82	8.14	7.83	090
19112		A	Excise breast duct fistula	3.66	6.31	6.12	3.17	2.80	0.48	10.45	10.26	7.31	6.94	090
19120		A	Removal of breast lesion	5.80	5.12	4.69	3.39	3.14	0.73	11.65	11.22	9.92	9.67	090
19125		A	Excision, breast lesion	6.55	5.60	4.99	3.68	3.38	0.80	12.95	12.34	11.03	10.73	090
19126		A	Excision, addl breast lesion	2.93	NA	NA	0.76	0.94	0.38	NA	NA	4.07	4.25	ZZZ
19140		A	Removal of breast tissue	5.13	8.06	7.37	3.85	3.51	0.69	13.88	13.19	9.67	9.33	090
19160		A	Partial mastectomy	5.98	NA	NA	3.64	3.48	0.79	NA	NA	10.41	10.25	090
19162		A	P-mastectomy w/ln removal	13.81	NA	NA	6.16	6.29	1.79	NA	NA	21.76	21.89	090
19180		A	Removal of breast	15.61	NA	NA	7.07	5.53	1.18	NA	NA	23.86	22.32	090
19182		A	Removal of breast	7.72	NA	NA	5.01	4.82	1.04	NA	NA	13.77	13.58	090
19200		A	Removal of breast	17.14	NA	NA	8.22	8.03	1.92	NA	NA	27.28	27.09	090
19220		A	Removal of breast	17.74	NA	NA	8.69	8.35	2.07	NA	NA	28.50	28.16	090
19240		A	Removal of breast	17.84	NA	NA	8.85	8.36	2.12	NA	NA	28.81	28.32	090
19260		A	Removal of chest wall lesion	17.53	NA	NA	10.33	10.95	2.13	NA	NA	29.99	30.61	090
19271		A	Revision of chest wall	21.73	NA	NA	16.03	17.47	2.62	NA	NA	40.38	41.82	090
19272		A	Extensive chest wall surgery	24.68	NA	NA	17.13	18.48	2.99	NA	NA	44.80	46.15	090
19290		A	Place needle wire, breast	1.27	2.85	2.85	0.39	0.41	0.07	4.19	4.19	1.73	1.75	000
19291		A	Place needle wire, breast	0.63	1.12	1.19	0.20	0.21	0.04	1.79	1.86	0.87	0.88	ZZZ
19295		A	Place breast clip, percut	0.00	2.30	2.59	0.00	2.02	0.01	2.31	2.60	0.01	2.03	ZZZ
19296		A	Place po breast cath for rad	3.63	85.32	115.4	1.21	1.45	0.36	89.31	119.4	5.20	5.44	000
19297		A	Place breast cath for rad	1.72	NA	NA	0.47	0.60	0.17	NA	NA	2.36	2.49	ZZZ
19298		A	Place breast rad tube/caths	6.00	22.79	37.32	1.92	2.29	0.43	29.22	43.75	8.35	8.72	000
19316		A	Suspension of breast	10.92	NA	NA	7.10	7.41	1.64	NA	NA	19.66	19.97	090
19318		A	Reduction of large breast	15.85	NA	NA	9.99	10.88	2.92	NA	NA	28.76	29.65	090
19324		A	Enlarge breast	6.59	NA	NA	4.67	4.84	0.84	NA	NA	12.10	12.27	090
19325		A	Enlarge breast with implant	8.44	NA	NA	6.46	6.51	1.33	NA	NA	16.23	16.28	090
19328		A	Removal of breast implant	6.30	NA	NA	5.03	5.02	0.91	NA	NA	12.24	12.23	090
19330		A	Removal of implant material	8.33	NA	NA	6.21	6.08	1.26	NA	NA	15.80	15.67	090
19340		A	Immediate breast prosthesis	6.32	NA	NA	2.86	3.05	1.06	NA	NA	10.24	10.43	ZZZ
19342		A	Delayed breast prosthesis	12.31	NA	NA	9.01	8.94	1.83	NA	NA	23.15	23.08	090
19350		A	Breast reconstruction	8.91	9.93	12.86	6.61	7.03	1.41	20.25	23.18	16.93	17.35	090
19355		A	Correct inverted nipple(s)	8.31	7.78	9.63	4.93	4.76	0.92	17.01	18.86	14.16	13.99	090
19357		A	Breast reconstruction	20.33	NA	NA	15.50	15.58	2.93	NA	NA	38.76	38.84	090
19361		A	Breast reconstruction	20.63	NA	NA	12.36	12.41	2.92	NA	NA	35.91	35.96	090
19364		A	Breast reconstruction	42.30	NA	NA	22.88	23.38	6.22	NA	NA	71.40	71.90	090
19366		A	Breast reconstruction	21.62	NA	NA	10.10	11.21	3.24	NA	NA	34.96	36.07	090
19367		A	Breast reconstruction	26.51	NA	NA	15.33	16.35	4.03	NA	NA	45.87	46.89	090
19368		A	Breast reconstruction	33.51	NA	NA	18.23	18.75	5.52	NA	NA	57.26	57.78	090
19369		A	Breast reconstruction	30.92	NA	NA	15.98	17.80	4.50	NA	NA	51.40	53.22	090
19370		A	Surgery of breast capsule	8.92	NA	NA	6.86	6.89	1.29	NA	NA	17.07	17.10	090
19371		A	Removal of breast capsule	10.34	NA	NA	7.74	7.80	1.62	NA	NA	19.70	19.76	090
19380		A	Revise breast reconstruction	10.13	NA	NA	7.67	7.69	1.44	NA	NA	19.24	19.26	090
19396		A	Design custom breast implant	2.17	4.52	1.94	1.24	1.05	0.30	6.99	4.41	3.71	3.52	000
19499		C	Breast surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
20000		A	Incision of abscess	2.12	2.79	2.72	1.53	1.68	0.25	5.16	5.09	3.90	4.05	010
20005		A	Incision of deep abscess	3.53	3.72	3.55	2.04	2.20	0.46	7.71	7.54	6.03	6.19	010
20100		A	Explore wound, neck	10.31	NA	NA	3.63	4.25	1.21	NA	NA	15.15	15.77	010
20101		A	Explore wound, chest	3.22	6.46	6.06	1.52	1.60	0.44	10.12	9.72	5.18	5.26	010
20102		A	Explore wound, abdomen	3.93	6.99	7.34	1.85	1.89	0.49	11.41	11.76	6.27	6.31	010
20103		A	Explore wound, extremity	5.29	7.72	8.37	2.73	3.23	0.75	13.76	14.41	8.77	9.27	010
20150		A	Excise epiphyseal bar	14.54	NA	NA	7.73	7.21	2.03	NA	NA	24.30	23.78	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
20200		A	Muscle biopsy	1.46	3.17	3.07	0.70	0.74	0.23	4.86	4.76	2.39	2.43	000
20205		A	Deep muscle biopsy	2.35	3.86	3.88	1.11	1.17	0.33	6.54	6.56	3.79	3.85	000
20206		A	Needle biopsy, muscle	0.99	5.25	6.19	0.54	0.61	0.07	6.31	7.25	1.60	1.67	000
20220		A	Bone biopsy, trocar/needle	1.27	2.71	4.10	0.65	0.76	0.08	4.06	5.45	2.00	2.11	000
20225		A	Bone biopsy, trocar/needle	1.87	13.16	21.63	1.03	1.11	0.22	15.25	23.72	3.12	3.20	000
20240		A	Bone biopsy, excisional	3.23	NA	NA	2.07	2.43	0.44	NA	NA	5.74	6.10	010
20245		A	Bone biopsy, excisional	8.71	NA	NA	5.79	6.38	1.31	NA	NA	15.81	16.40	010
20250		A	Open bone biopsy	5.14	NA	NA	3.74	3.56	1.02	NA	NA	9.90	9.72	010
20251		A	Open bone biopsy	5.67	NA	NA	3.91	4.10	1.15	NA	NA	10.73	10.92	010
20500		A	Injection of sinus tract	1.23	1.30	2.02	0.85	1.36	0.12	2.65	3.37	2.20	2.71	010
20501		A	Inject sinus tract for x-ray	0.76	2.35	2.77	0.24	0.25	0.04	3.15	3.57	1.04	1.05	000
20520		A	Removal of foreign body	1.85	2.59	2.83	1.44	1.68	0.21	4.65	4.89	3.50	3.74	010
20525		A	Removal of foreign body	3.49	7.09	8.63	2.20	2.52	0.51	11.09	12.63	6.20	6.52	010
20526		A	Ther injection, carp tunnel	0.94	0.82	0.93	0.41	0.49	0.13	1.89	2.00	1.48	1.56	000
20550		A	Inj tendon sheath/ligament	0.75	0.63	0.69	0.28	0.24	0.09	1.47	1.53	1.12	1.08	000
20551		A	Inj tendon origin/insertion	0.75	0.64	0.67	0.29	0.32	0.08	1.47	1.50	1.12	1.15	000
20552		A	Inj trigger point, 1/2 muscl	0.66	0.58	0.69	0.25	0.21	0.05	1.29	1.40	0.96	0.92	000
20553		A	Inject trigger points, =/> 3	0.75	0.65	0.78	0.27	0.23	0.04	1.44	1.57	1.06	1.02	000
20600		A	Drain/inject, joint/bursa	0.66	0.67	0.66	0.31	0.34	0.08	1.41	1.40	1.05	1.08	000
20605		A	Drain/inject, joint/bursa	0.68	0.74	0.76	0.33	0.35	0.08	1.50	1.52	1.09	1.11	000
20610		A	Drain/inject, joint/bursa	0.79	1.07	0.98	0.40	0.42	0.11	1.97	1.88	1.30	1.32	000
20612		A	Aspirate/inj ganglion cyst	0.70	0.70	0.71	0.32	0.35	0.10	1.50	1.51	1.12	1.15	000
20615		A	Treatment of bone cyst	2.28	2.72	3.31	1.41	1.73	0.20	5.20	5.79	3.89	4.21	010
20650		A	Insert and remove bone pin	2.23	2.51	2.40	1.48	1.53	0.31	5.05	4.94	4.02	4.07	010
20660		A	Apply, rem fixation device	2.51	3.39	3.14	1.50	1.58	0.59	6.49	6.24	4.60	4.68	000
20661		A	Application of head brace	5.06	NA	NA	6.00	5.18	1.14	NA	NA	12.20	11.38	090
20662		A	Application of pelvis brace	6.18	NA	NA	4.85	5.35	0.56	NA	NA	11.59	12.09	090
20663		A	Application of thigh brace	5.54	NA	NA	5.14	4.91	0.94	NA	NA	11.62	11.39	090
20664		A	Halo brace application	9.78	NA	NA	8.13	7.31	1.74	NA	NA	19.65	18.83	090
20665		A	Removal of fixation device	1.31	1.38	1.96	0.97	1.26	0.19	2.88	3.46	2.47	2.76	010
20670		A	Removal of support implant	1.74	6.70	10.33	1.68	2.00	0.28	8.72	12.35	3.70	4.02	010
20680		A	Removal of support implant	5.86	8.20	8.64	4.10	3.82	0.56	14.62	15.06	10.52	10.24	090
20690		A	Apply bone fixation device	3.63	NA	NA	2.27	2.45	0.59	NA	NA	6.49	6.67	090
20692		A	Apply bone fixation device	6.40	NA	NA	3.29	3.65	1.05	NA	NA	10.74	11.10	090
20693		A	Adjust bone fixation device	5.91	NA	NA	4.54	5.22	0.98	NA	NA	11.43	12.11	090
20694		A	Remove bone fixation device	4.15	5.37	6.70	3.56	3.92	0.71	10.23	11.56	8.42	8.78	090
20802		A	Replantation, arm, complete	42.16	NA	NA	24.05	21.73	3.81	NA	NA	70.02	67.70	090
20805		A	Replant forearm, complete	51.00	NA	NA	25.95	32.22	4.84	NA	NA	81.79	88.06	090
20808		A	Replantation hand, complete	62.63	NA	NA	38.79	41.36	6.86	NA	NA	108.28	110.85	090
20816		A	Replantation digit, complete	31.64	NA	NA	24.53	34.48	4.52	NA	NA	60.69	70.64	090
20822		A	Replantation digit, complete	26.30	NA	NA	22.24	31.50	4.18	NA	NA	52.72	61.98	090
20824		A	Replantation thumb, complete	31.64	NA	NA	25.77	33.85	4.61	NA	NA	62.02	70.10	090
20827		A	Replantation thumb, complete	27.12	NA	NA	23.90	33.33	3.66	NA	NA	54.68	64.11	090
20838		A	Replantation foot, complete	42.42	NA	NA	13.65	20.12	1.12	NA	NA	57.19	63.66	090
20900		A	Removal of bone for graft	5.69	9.33	8.66	4.95	5.49	0.94	15.96	15.29	11.58	12.12	090
20902		A	Removal of bone for graft	7.90	NA	NA	5.84	6.62	1.30	NA	NA	15.04	15.82	090
20910		A	Remove cartilage for graft	5.33	NA	NA	4.62	5.04	0.71	NA	NA	10.66	11.08	090
20912		A	Remove cartilage for graft	6.34	NA	NA	4.67	5.51	0.69	NA	NA	11.70	12.54	090
20920		A	Removal of fascia for graft	5.36	NA	NA	4.36	4.26	0.66	NA	NA	10.38	10.28	090
20922		A	Removal of fascia for graft	6.78	7.52	7.54	4.96	4.89	0.70	15.00	15.02	12.44	12.37	090
20924		A	Removal of tendon for graft	6.53	NA	NA	5.00	5.66	1.04	NA	NA	12.57	13.23	090
20926		A	Removal of tissue for graft	5.64	NA	NA	4.41	4.67	0.87	NA	NA	10.92	11.18	090
20931		A	Spinal bone allograft	1.81	NA	NA	0.69	0.87	0.43	NA	NA	2.93	3.11	ZZZ
20937		A	Spinal bone autograft	2.79	NA	NA	1.09	1.36	0.54	NA	NA	4.42	4.69	ZZZ
20938		A	Spinal bone autograft	3.02	NA	NA	1.16	1.46	0.64	NA	NA	4.82	5.12	ZZZ
20950		A	Fluid pressure, muscle	1.26	4.19	6.18	0.88	0.96	0.20	5.65	7.64	2.34	2.42	000

20955		A	Fibula bone graft, microvasc	39.90	NA	NA	18.08	22.72	4.89	NA	NA	62.87	67.51	090
20956		A	Iliac bone graft, microvasc	40.79	NA	NA	20.77	23.75	7.01	NA	NA	68.57	71.55	090
20957		A	Mt bone graft, microvasc	42.17	NA	NA	19.43	19.06	7.05	NA	NA	68.65	68.28	090
20962		A	Other bone graft, microvasc	39.21	NA	NA	21.28	25.21	6.55	NA	NA	67.04	70.97	090
20969		A	Bone/skin graft, microvasc	44.99	NA	NA	20.27	25.04	4.79	NA	NA	70.05	74.82	090
20970		A	Bone/skin graft, iliac crest	44.14	NA	NA	20.21	24.09	6.60	NA	NA	70.95	74.83	090
20972		A	Bone/skin graft, metatarsal	44.07	NA	NA	17.61	19.84	5.30	NA	NA	66.98	69.21	090
20973		A	Bone/skin graft, great toe	46.83	NA	NA	15.05	22.63	5.54	NA	NA	67.42	75.00	090
20974		A	Electrical bone stimulation	0.62	0.99	0.77	0.49	0.53	0.11	1.72	1.50	1.22	1.26	000
20975		A	Electrical bone stimulation	2.60	NA	NA	1.48	1.65	0.51	NA	NA	4.59	4.76	000
20979		A	Us bone stimulation	0.62	0.58	0.75	0.19	0.30	0.09	1.29	1.46	0.90	1.01	000
20982		A	Ablate, bone tumor(s) perq	7.27	83.20	103.0	2.62	2.88	0.69	91.16	110.9	10.58	10.84	000
20999		C	Musculoskeletal surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
21010		A	Incision of jaw joint	10.82	NA	NA	5.85	6.78	1.11	NA	NA	17.78	18.71	090
21015		A	Resection of facial tumor	5.53	NA	NA	4.30	4.83	0.70	NA	NA	10.53	11.06	090
21025		A	Excision of bone, lower jaw	10.99	12.48	12.30	8.68	9.18	1.32	24.79	24.61	20.99	21.49	090
21026		A	Excision of facial bone(s)	5.46	8.70	8.07	5.84	6.20	0.60	14.76	14.13	11.90	12.26	090
21029		A	Contour of face bone lesion	8.20	9.26	9.34	6.27	6.83	0.94	18.40	18.48	15.41	15.97	090
21030		A	Excise max/zygoma b9 tumor	4.74	7.18	6.54	4.67	4.94	0.54	12.46	11.82	9.95	10.22	090
21031		A	Remove exostosis, mandible	3.24	5.99	5.38	3.51	3.59	0.48	9.71	9.10	7.23	7.31	090
21032		A	Remove exostosis, maxilla	3.24	6.07	5.52	3.37	3.48	0.47	9.78	9.23	7.08	7.19	090
21034		A	Excise max/zygoma mlg tumor	17.09	13.17	15.23	9.51	11.87	1.71	31.97	34.03	28.31	30.67	090
21040		A	Excise mandible lesion	4.74	7.25	6.61	4.67	4.71	0.54	12.53	11.89	9.95	9.99	090
21044		A	Removal of jaw bone lesion	12.53	NA	NA	7.48	8.90	1.12	NA	NA	21.13	22.55	090
* 21045		A	Extensive jaw surgery	18.03	NA	NA	10.01	11.77	1.52	NA	NA	29.56	31.32	090
21046		A	Remove mandible cyst complex	13.85	NA	NA	11.62	11.83	1.85	NA	NA	27.32	27.53	090
21047		A	Excise lwr jaw cyst w/repair	19.71	NA	NA	9.74	12.52	2.12	NA	NA	31.57	34.35	090
21048		A	Remove maxilla cyst complex	14.35	NA	NA	11.37	11.94	1.76	NA	NA	27.48	28.05	090
21049		A	Excis uppr jaw cyst w/repair	18.96	NA	NA	9.09	12.04	1.59	NA	NA	29.64	32.59	090
21050		A	Removal of jaw joint	11.44	NA	NA	8.18	9.13	1.47	NA	NA	21.09	22.04	090
21060		A	Remove jaw joint cartilage	10.83	NA	NA	7.52	8.34	1.38	NA	NA	19.73	20.55	090
21070		A	Remove coronoid process	8.44	NA	NA	6.15	6.86	1.27	NA	NA	15.86	16.57	090
21076		A	Prepare face/oral prosthesis	13.40	7.85	11.23	4.80	8.70	1.99	23.24	26.62	20.19	24.09	010
21077		A	Prepare face/oral prosthesis	33.70	18.26	28.06	12.31	22.58	4.55	56.51	66.31	50.56	60.83	090
21079		A	Prepare face/oral prosthesis	22.31	13.35	19.46	8.28	14.93	3.15	38.81	44.92	33.74	40.39	090
21080		A	Prepare face/oral prosthesis	25.06	15.43	22.23	9.22	16.83	3.74	44.23	51.03	38.02	45.63	090
21081		A	Prepare face/oral prosthesis	22.85	14.17	20.27	8.48	15.24	3.20	40.22	46.32	34.53	41.29	090
21082		A	Prepare face/oral prosthesis	20.84	14.12	18.04	8.42	13.90	3.11	38.07	41.99	32.37	37.85	090
21083		A	Prepare face/oral prosthesis	19.27	14.06	17.61	7.91	12.80	2.88	36.21	39.76	30.06	34.95	090
21084		A	Prepare face/oral prosthesis	22.48	15.56	20.71	8.82	15.48	2.18	40.22	45.37	33.48	40.14	090
21085		A	Prepare face/oral prosthesis	8.99	6.54	7.85	3.57	5.98	1.27	16.80	18.11	13.83	16.24	010
21086		A	Prepare face/oral prosthesis	24.88	12.62	20.96	8.63	16.73	3.71	41.21	49.55	37.22	45.32	090
21087		A	Prepare face/oral prosthesis	24.88	12.85	20.67	8.82	16.60	3.44	41.17	48.99	37.14	44.92	090
21088		C	Prepare face/oral prosthesis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
21089		C	Prepare face/oral prosthesis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
21100		A	Maxillofacial fixation	4.46	13.75	12.09	5.05	4.82	0.34	18.55	16.89	9.85	9.62	090
21110		A	Interdental fixation	5.70	13.26	10.49	9.89	8.74	0.72	19.68	16.91	16.31	15.16	090
21116		A	Injection, jaw joint x-ray	0.81	2.44	3.86	0.22	0.30	0.06	3.31	4.73	1.09	1.17	000
21120		A	Reconstruction of chin	4.92	10.02	10.44	6.88	7.34	0.60	15.54	15.96	12.40	12.86	090
21121		A	Reconstruction of chin	7.63	10.59	9.95	7.50	7.74	0.90	19.12	18.48	16.03	16.27	090
21122		A	Reconstruction of chin	8.51	NA	NA	7.64	8.38	1.07	NA	NA	17.22	17.96	090
21123		A	Reconstruction of chin	11.14	NA	NA	10.06	10.62	1.40	NA	NA	22.60	23.16	090
21125		A	Augmentation, lower jaw bone	10.60	68.89	58.64	7.04	8.00	0.79	80.28	70.03	18.43	19.39	090
21127		A	Augmentation, lower jaw bone	12.16	86.74	53.79	7.70	9.01	1.52	100.4	67.47	21.38	22.69	090
21137		A	Reduction of forehead	10.06	NA	NA	6.30	7.37	1.32	NA	NA	17.68	18.75	090
21138		A	Reduction of forehead	12.67	NA	NA	8.50	9.27	1.74	NA	NA	22.91	23.68	090
21139		A	Reduction of forehead	14.84	NA	NA	8.49	10.42	1.18	NA	NA	24.51	26.44	090
21141		A	Reconstruct midface, lefort	19.13	NA	NA	11.47	13.11	2.35	NA	NA	32.95	34.59	090
21142		A	Reconstruct midface, lefort	19.84	NA	NA	10.53	12.25	2.38	NA	NA	32.75	34.47	090
21143		A	Reconstruct midface, lefort	20.61	NA	NA	8.90	12.96	1.66	NA	NA	31.17	35.23	090
21145		A	Reconstruct midface, lefort	23.52	NA	NA	12.75	13.61	2.84	NA	NA	39.11	39.97	090
21146		A	Reconstruct midface, lefort	24.42	NA	NA	9.45	13.86	3.09	NA	NA	36.96	41.37	090
21147		A	Reconstruct midface, lefort	26.01	NA	NA	13.58	14.68	1.84	NA	NA	41.43	42.53	090
21150		A	Reconstruct midface, lefort	25.70	NA	NA	13.25	15.88	2.55	NA	NA	41.50	44.13	090
21151		A	Reconstruct midface, lefort	28.76	NA	NA	11.72	20.14	2.30	NA	NA	42.78	51.20	090
21154		A	Reconstruct midface, lefort	30.95	NA	NA	21.25	22.65	2.48	NA	NA	54.68	56.08	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
21155		A	Reconstruct midface, lefort	34.88	NA	NA	13.43	21.28	6.64	NA	NA	54.95	62.80	090
21159		A	Reconstruct midface, lefort	42.80	NA	NA	15.27	25.63	8.18	NA	NA	66.25	76.61	090
21160		A	Reconstruct midface, lefort	46.85	NA	NA	23.11	26.38	4.13	NA	NA	74.09	77.36	090
21172		A	Reconstruct orbit/forehead	28.01	NA	NA	13.59	13.71	3.55	NA	NA	45.15	45.27	090
21175		A	Reconstruct orbit/forehead	33.37	NA	NA	12.92	16.57	4.83	NA	NA	51.12	54.77	090
21179		A	Reconstruct entire forehead	22.47	NA	NA	10.96	13.34	2.80	NA	NA	36.23	38.61	090
21180		A	Reconstruct entire forehead	25.40	NA	NA	13.01	14.79	3.48	NA	NA	41.89	43.67	090
21181		A	Contour cranial bone lesion	10.14	NA	NA	7.05	7.36	1.32	NA	NA	18.51	18.82	090
21182		A	Reconstruct cranial bone	32.39	NA	NA	14.29	17.91	2.80	NA	NA	49.48	53.10	090
21183		A	Reconstruct cranial bone	35.51	NA	NA	15.48	19.49	4.47	NA	NA	55.46	59.47	090
21184		A	Reconstruct cranial bone	38.43	NA	NA	21.02	21.71	5.70	NA	NA	65.15	65.84	090
21188		A	Reconstruction of midface	22.91	NA	NA	14.82	17.86	1.69	NA	NA	39.42	42.46	090
21193		A	Reconst lwr jaw w/o graft	18.55	NA	NA	10.06	12.00	2.23	NA	NA	30.84	32.78	090
21194		A	Reconst lwr jaw w/graft	21.43	NA	NA	11.45	13.18	2.02	NA	NA	34.90	36.63	090
21195		A	Reconst lwr jaw w/o fixation	18.77	NA	NA	13.26	14.43	1.64	NA	NA	33.67	34.84	090
21196		A	Reconst lwr jaw w/fixation	20.44	NA	NA	13.20	15.07	2.07	NA	NA	35.71	37.58	090
21198		A	Reconstr lwr jaw segment	15.39	NA	NA	11.05	12.29	1.44	NA	NA	27.88	29.12	090
21199		A	Reconstr lwr jaw w/advance	16.56	NA	NA	6.79	8.53	1.39	NA	NA	24.74	26.48	090
21206		A	Reconstruct upper jaw bone	15.27	NA	NA	11.15	12.26	1.33	NA	NA	27.75	28.86	090
21208		A	Augmentation of facial bones	11.03	32.43	24.86	7.71	9.11	1.09	44.55	36.98	19.83	21.23	090
21209		A	Reduction of facial bones	7.46	12.33	11.18	7.42	7.91	0.90	20.69	19.54	15.78	16.27	090
21210		A	Face bone graft	11.28	43.84	29.61	7.70	8.94	1.30	56.42	42.19	20.28	21.52	090
21215		A	Lower jaw bone graft	11.82	86.57	53.05	7.99	9.02	1.53	99.92	66.40	21.34	22.37	090
21230		A	Rib cartilage graft	11.00	NA	NA	6.94	7.77	1.29	NA	NA	19.23	20.06	090
21235		A	Ear cartilage graft	7.21	9.70	9.81	5.89	6.28	0.61	17.52	17.63	13.71	14.10	090
21240		A	Reconstruction of jaw joint	15.65	NA	NA	11.31	11.87	2.24	NA	NA	29.20	29.76	090
21242		A	Reconstruction of jaw joint	14.20	NA	NA	10.64	11.29	1.78	NA	NA	26.62	27.27	090
21243		A	Reconstruction of jaw joint	23.83	NA	NA	15.77	17.02	3.25	NA	NA	42.85	44.10	090
21244		A	Reconstruction of lower jaw	13.23	NA	NA	10.93	11.80	1.25	NA	NA	25.41	26.28	090
21245		A	Reconstruction of jaw	12.78	13.37	14.14	7.99	9.39	1.19	27.34	28.11	21.96	23.36	090
21246		A	Reconstruction of jaw	12.70	NA	NA	6.67	8.45	1.35	NA	NA	20.72	22.50	090
21247		A	Reconstruct lower jaw bone	23.91	NA	NA	13.59	16.41	2.83	NA	NA	40.33	43.15	090
21248		A	Reconstruction of jaw	12.46	12.60	12.25	7.51	8.93	1.55	26.61	26.26	21.52	22.94	090
21249		A	Reconstruction of jaw	18.49	16.13	16.57	9.94	12.00	2.48	37.10	37.54	30.91	32.97	090
21255		A	Reconstruct lower jaw bone	18.00	NA	NA	13.33	15.43	2.38	NA	NA	33.71	35.81	090
21256		A	Reconstruction of orbit	17.32	NA	NA	9.98	11.36	1.50	NA	NA	28.80	30.18	090
21260		A	Revise eye sockets	17.66	NA	NA	9.51	11.95	0.97	NA	NA	28.14	30.58	090
21261		A	Revise eye sockets	33.66	NA	NA	14.88	21.89	3.42	NA	NA	51.96	58.97	090
21263		A	Revise eye sockets	30.60	NA	NA	14.17	17.85	2.62	NA	NA	47.39	51.07	090
21267		A	Revise eye sockets	20.35	NA	NA	16.14	18.86	1.70	NA	NA	38.19	40.91	090
21268		A	Revise eye sockets	26.66	NA	NA	15.74	19.09	3.65	NA	NA	46.05	49.40	090
21270		A	Augmentation, cheek bone	10.46	11.17	11.53	5.89	6.91	0.72	22.35	22.71	17.07	18.09	090
21275		A	Revision, orbitofacial bones	11.59	NA	NA	7.41	7.97	1.29	NA	NA	20.29	20.85	090
21280		A	Revision of eyelid	6.84	NA	NA	5.84	5.90	0.42	NA	NA	13.10	13.16	090
21282		A	Revision of eyelid	4.05	NA	NA	4.26	4.43	0.26	NA	NA	8.57	8.74	090
21295		A	Revision of jaw muscle/bone	1.78	NA	NA	2.61	2.55	0.16	NA	NA	4.55	4.49	090
21296		A	Revision of jaw muscle/bone	4.61	NA	NA	5.46	5.05	0.34	NA	NA	10.41	10.00	090
21299		C	Cranio/maxillofacial surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
21300		A	Treatment of skull fracture	0.72	0.28	1.84	0.28	0.27	0.13	1.13	2.69	1.13	1.12	000
21310		A	Treatment of nose fracture	0.58	1.97	2.20	0.11	0.14	0.05	2.60	2.83	0.74	0.77	000
21315		A	Treatment of nose fracture	1.76	4.46	4.29	1.65	1.82	0.14	6.36	6.19	3.55	3.72	010
21320		A	Treatment of nose fracture	1.85	4.05	3.95	1.25	1.53	0.18	6.08	5.98	3.28	3.56	010
21325		A	Treatment of nose fracture	4.01	NA	NA	6.72	8.15	0.31	NA	NA	11.04	12.47	090
21330		A	Treatment of nose fracture	5.62	NA	NA	7.44	9.14	0.56	NA	NA	13.62	15.32	090
21335		A	Treatment of nose fracture	8.85	NA	NA	7.74	9.15	0.74	NA	NA	17.33	18.74	090
21336		A	Treat nasal septal fracture	6.46	NA	NA	8.16	9.25	0.55	NA	NA	15.17	16.26	090

21337		A	Treat nasal septal fracture	3.20	5.87	6.06	3.36	3.52	0.28	9.35	9.54	6.84	7.00	090
21338		A	Treat nasoethmoid fracture	6.70	NA	NA	9.66	12.93	0.82	NA	NA	17.18	20.45	090
21339		A	Treat nasoethmoid fracture	8.33	NA	NA	10.63	13.08	0.96	NA	NA	19.92	22.37	090
21340		A	Treatment of nose fracture	11.25	NA	NA	7.36	8.14	1.15	NA	NA	19.76	20.54	090
21343		A	Treatment of sinus fracture	14.01	NA	NA	12.51	14.73	1.47	NA	NA	27.99	30.21	090
21344		A	Treatment of sinus fracture	21.26	NA	NA	13.04	15.64	2.43	NA	NA	36.73	39.33	090
21345		A	Treat nose/jaw fracture	8.77	9.69	9.80	5.98	6.87	0.92	19.38	19.49	15.67	16.56	090
21346		A	Treat nose/jaw fracture	11.21	NA	NA	10.76	11.84	1.21	NA	NA	23.18	24.26	090
21347		A	Treat nose/jaw fracture	13.29	NA	NA	11.56	15.03	1.47	NA	NA	26.32	29.79	090
21348		A	Treat nose/jaw fracture	17.28	NA	NA	6.42	9.94	2.48	NA	NA	26.18	29.70	090
21355		A	Treat cheek bone fracture	4.26	5.61	6.08	3.00	3.36	0.34	10.21	10.68	7.60	7.96	010
21356		A	Treat cheek bone fracture	4.64	6.78	7.04	3.92	4.39	0.46	11.88	12.14	9.02	9.49	010
21360		A	Treat cheek bone fracture	6.95	NA	NA	5.25	5.76	0.74	NA	NA	12.94	13.45	090
21365		A	Treat cheek bone fracture	16.42	NA	NA	8.90	10.35	1.69	NA	NA	27.01	28.46	090
21366		A	Treat cheek bone fracture	18.36	NA	NA	10.35	11.09	2.49	NA	NA	31.20	31.94	090
21385		A	Treat eye socket fracture	9.40	NA	NA	6.90	7.94	0.97	NA	NA	17.27	18.31	090
21386		A	Treat eye socket fracture	9.40	NA	NA	5.69	6.73	0.97	NA	NA	16.06	17.10	090
21387		A	Treat eye socket fracture	9.94	NA	NA	7.25	8.53	1.08	NA	NA	18.27	19.55	090
21390		A	Treat eye socket fracture	11.01	NA	NA	7.05	7.61	0.90	NA	NA	18.96	19.52	090
21395		A	Treat eye socket fracture	14.58	NA	NA	7.78	8.71	1.44	NA	NA	23.80	24.73	090
21400		A	Treat eye socket fracture	1.40	2.74	2.64	1.98	1.90	0.15	4.29	4.19	3.53	3.45	090
21401		A	Treat eye socket fracture	3.51	7.21	7.80	3.10	3.39	0.38	11.10	11.69	6.99	7.28	090
21406		A	Treat eye socket fracture	7.25	NA	NA	5.08	5.83	0.73	NA	NA	13.06	13.81	090
21407		A	Treat eye socket fracture	8.85	NA	NA	5.89	6.62	0.94	NA	NA	15.68	16.41	090
21408		A	Treat eye socket fracture	12.61	NA	NA	7.91	8.64	1.44	NA	NA	21.96	22.69	090
21421		A	Treat mouth roof fracture	5.70	12.09	10.02	8.96	8.47	0.73	18.52	16.45	15.39	14.90	090
21422		A	Treat mouth roof fracture	8.56	NA	NA	6.79	7.76	0.99	NA	NA	16.34	17.31	090
21423		A	Treat mouth roof fracture	10.63	NA	NA	7.28	8.81	1.27	NA	NA	19.18	20.71	090
21431		A	Treat craniofacial fracture	7.66	NA	NA	9.34	9.48	0.70	NA	NA	17.70	17.84	090
21432		A	Treat craniofacial fracture	8.72	NA	NA	7.18	7.84	0.81	NA	NA	16.71	17.37	090
21433		A	Treat craniofacial fracture	26.05	NA	NA	12.51	15.43	2.78	NA	NA	41.34	44.26	090
21435		A	Treat craniofacial fracture	19.92	NA	NA	10.77	12.22	1.98	NA	NA	32.67	34.12	090
21436		A	Treat craniofacial fracture	29.89	NA	NA	14.38	17.26	3.09	NA	NA	47.36	50.24	090
21440		A	Treat dental ridge fracture	3.20	10.31	7.90	7.63	6.53	0.38	13.89	11.48	11.21	10.11	090
21445		A	Treat dental ridge fracture	5.94	12.48	10.43	8.61	8.43	0.78	19.20	17.15	15.33	15.15	090
21450		A	Treat lower jaw fracture	3.47	10.41	8.14	7.64	7.06	0.33	14.21	11.94	11.44	10.86	090
21451		A	Treat lower jaw fracture	5.36	12.93	10.25	9.63	8.71	0.63	18.92	16.24	15.62	14.70	090
21452		A	Treat lower jaw fracture	2.23	11.77	12.71	5.89	4.93	0.27	14.27	15.21	8.39	7.43	090
21453		A	Treat lower jaw fracture	6.28	14.74	11.74	11.59	10.95	0.74	21.76	18.76	18.61	17.97	090
21454		A	Treat lower jaw fracture	7.07	NA	NA	5.64	6.11	0.82	NA	NA	13.53	14.00	090
21461		A	Treat lower jaw fracture	8.95	41.23	28.65	12.59	12.64	0.98	51.16	38.58	22.52	22.57	090
21462		A	Treat lower jaw fracture	10.65	42.46	31.32	13.17	12.83	1.27	54.38	43.24	25.09	24.75	090
21465		A	Treat lower jaw fracture	12.76	NA	NA	8.26	9.42	1.50	NA	NA	22.52	23.68	090
21470		A	Treat lower jaw fracture	17.12	NA	NA	10.05	11.53	1.96	NA	NA	29.13	30.61	090
21480		A	Reset dislocated jaw	0.61	1.51	1.71	0.18	0.19	0.06	2.18	2.38	0.85	0.86	000
21485		A	Reset dislocated jaw	4.48	12.20	9.22	9.18	8.04	0.51	17.19	14.21	14.17	13.03	090
21490		A	Repair dislocated jaw	12.59	NA	NA	7.86	9.23	1.96	NA	NA	22.41	23.78	090
21495		A	Treat hyoid bone fracture	6.43	NA	NA	9.57	8.71	0.46	NA	NA	16.46	15.60	090
21497		A	Interdental wiring	4.35	11.96	9.33	9.14	8.02	0.50	16.81	14.18	13.99	12.87	090
21499		C	Head surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
21501		A	Drain neck/chest lesion	3.80	6.42	6.42	3.43	3.72	0.43	10.65	10.65	7.66	7.95	090
21502		A	Drain chest lesion	7.35	NA	NA	4.77	5.42	0.97	NA	NA	13.09	13.74	090
21510		A	Drainage of bone lesion	5.97	NA	NA	4.71	5.42	0.80	NA	NA	11.48	12.19	090
21550		A	Biopsy of neck/chest	2.06	4.28	3.76	1.73	1.72	0.16	6.50	5.98	3.95	3.94	010
21555		A	Remove lesion, neck/chest	4.34	5.76	5.57	3.41	3.25	0.56	10.66	10.47	8.31	8.15	090
21556		A	Remove lesion, neck/chest	5.56	NA	NA	4.01	4.08	0.65	NA	NA	10.22	10.29	090
21557		A	Remove tumor, neck/chest	8.87	NA	NA	4.42	5.12	1.08	NA	NA	14.37	15.07	090
21600		A	Partial removal of rib	7.06	NA	NA	5.79	5.75	0.99	NA	NA	13.84	13.80	090
21610		A	Partial removal of rib	15.70	NA	NA	8.13	8.68	3.07	NA	NA	26.90	27.45	090
21615		A	Removal of rib	10.22	NA	NA	5.46	6.38	1.45	NA	NA	17.13	18.05	090
21616		A	Removal of rib and nerves	12.44	NA	NA	7.15	7.80	1.86	NA	NA	21.45	22.10	090
21620		A	Partial removal of sternum	7.08	NA	NA	4.88	5.70	0.98	NA	NA	12.94	13.76	090
21627		A	Sternal debridement	7.10	NA	NA	5.62	6.13	1.02	NA	NA	13.74	14.25	090
21630		A	Extensive sternum surgery	18.90	NA	NA	10.55	11.52	2.58	NA	NA	32.03	33.00	090
21632		A	Extensive sternum surgery	19.40	NA	NA	9.62	10.74	2.65	NA	NA	31.67	32.79	090
21685		A	Hyoid myotomy & suspension	14.77	NA	NA	7.81	9.43	1.06	NA	NA	23.64	25.26	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
21700		A	Revision of neck muscle	6.18	NA	NA	3.93	4.31	0.32	NA	NA	10.43	10.81	090
21705		A	Revision of neck muscle/rib	9.77	NA	NA	4.71	5.36	1.43	NA	NA	15.91	16.56	090
21720		A	Revision of neck muscle	5.67	NA	NA	4.32	2.93	0.91	NA	NA	10.90	9.51	090
21725		A	Revision of neck muscle	7.04	NA	NA	4.60	5.23	1.21	NA	NA	12.85	13.48	090
21740		A	Reconstruction of sternum	17.43	NA	NA	8.77	8.58	2.36	NA	NA	28.56	28.37	090
21742		C	Repair stern/nuss w/o scope	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
21743		C	Repair sternum/nuss w/scope	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
21750		A	Repair of sternum separation	11.33	NA	NA	5.45	5.95	1.63	NA	NA	18.41	18.91	090
21800		A	Treatment of rib fracture	0.96	1.35	1.34	1.42	1.36	0.09	2.40	2.39	2.47	2.41	090
21805		A	Treatment of rib fracture	2.75	NA	NA	3.56	3.29	0.38	NA	NA	6.69	6.42	090
21810		A	Treatment of rib fracture(s)	6.85	NA	NA	5.27	5.05	0.94	NA	NA	13.06	12.84	090
21820		A	Treat sternum fracture	1.28	1.80	1.82	1.87	1.79	0.16	3.24	3.26	3.31	3.23	090
21825		A	Treat sternum fracture	7.58	NA	NA	5.46	6.16	1.11	NA	NA	14.15	14.85	090
21899		C	Neck/chest surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
21920		A	Biopsy soft tissue of back	2.06	4.32	3.54	1 82	1.56	0.14	6.52	5.74	4.02	3.76	010
21925		A	Biopsy soft tissue of back	4.48	5.50	5.25	3.45	3.29	0.60	10.58	10.33	8.53	8.37	090
21930		A	Remove lesion, back or flank	4.99	6.05	5.80	3.77	3.49	0.66	11.70	11.45	9.42	9.14	090
21935		A	Remove tumor, back	18.29	NA	NA	8.56	9.36	2.47	NA	NA	29.32	30.12	090
22010		A	I&d, p-spine, c/t/cerv-thor	12.49	NA	NA	8.06	8.68	1.73	NA	NA	22.28	22.90	090
22015		A	I&d, p-spine, l/s/ls	12.38	NA	NA	8.02	8.62	1.71	NA	NA	22.11	22.71	090
22100		A	Remove part of neck vertebra	10.72	NA	NA	8.01	7.65	2.13	NA	NA	20.86	20.50	090
22101		A	Remove part, thorax vertebra	10.80	NA	NA	7.94	7.80	1.90	NA	NA	20.64	20.50	090
22102		A	Remove part, lumbar vertebra	10.80	NA	NA	7.24	7.89	1.87	NA	NA	19.91	20.56	090
22103		A	Remove extra spine segment	2.34	NA	NA	0.89	1.13	0.44	NA	NA	3.67	3.91	ZZZ
22110		A	Remove part of neck vertebra	13.72	NA	NA	9.09	9.14	2.76	NA	NA	25.57	25.62	090
22112		A	Remove part, thorax vertebra	13.79	NA	NA	8.97	9.20	2.52	NA	NA	25.28	25.51	090
22114		A	Remove part, lumbar vertebra	13.79	NA	NA	9.08	9.21	2.63	NA	NA	25.50	25.63	090
22116		A	Remove extra spine segment	2.32	NA	NA	0.87	1.10	0.50	NA	NA	3.69	3.92	ZZZ
22210		A	Revision of neck spine	25.03	NA	NA	14.74	15.24	5.44	NA	NA	45.21	45.71	090
22212		A	Revision of thorax spine	20.64	NA	NA	12.49	13.08	3.90	NA	NA	37.03	37.62	090
22214		A	Revision of lumbar spine	20.67	NA	NA	12.59	13.51	3.91	NA	NA	37.17	38.09	090
22216		A	Revise, extra spine segment	6.03	NA	NA	2.37	2.94	1.29	NA	NA	9.69	10.26	ZZZ
22220		A	Revision of neck spine	22.59	NA	NA	13.42	13.57	5.06	NA	NA	41.07	41.22	090
22222		A	Revision of thorax spine	22.74	NA	NA	12.19	11.40	4.12	NA	NA	39.05	38.26	090
22224		A	Revision of lumbar spine	22.74	NA	NA	13.17	13.96	4.18	NA	NA	40.09	40.88	090
22226		A	Revise, extra spine segment	6.03	NA	NA	2.15	2.86	1.29	NA	NA	9.47	10.18	ZZZ
22305		A	Treat spine process fracture	2.05	2.16	2.27	1.81	1.89	0.39	4.60	4.71	4.25	4.33	090
22310		A	Treat spine fracture	3.61	2.99	2.85	2.50	2.39	0.50	7.10	6.96	6.61	6.50	090
22315		A	Treat spine fracture	9.83	9.81	9.71	7.39	7.35	1.85	21.49	21.39	19.07	19.03	090
22318		A	Treat odontoid fx w/o graft	22.46	NA	NA	13.25	13.35	5.28	NA	NA	40.99	41.09	090
22319		A	Treat odontoid fx w/graft	25.07	NA	NA	14.00	14.53	6.03	NA	NA	45.10	45.63	090
22325		A	Treat spine fracture	19.52	NA	NA	12.03	12.06	3.87	NA	NA	35.42	35.45	090
22326		A	Treat neck spine fracture	20.56	NA	NA	12.13	12.56	4.42	NA	NA	37.11	37.54	090
22327		A	Treat thorax spine fracture	20.42	NA	NA	12.07	12.29	3.98	NA	NA	36.47	36.69	090
22328		A	Treat each add spine fx	4.60	NA	NA	1.80	2.15	0.94	NA	NA	7.34	7.69	ZZZ
22505		A	Manipulation of spine	1.87	NA	NA	1.06	0.97	0.36	NA	NA	3.29	3.20	010
22520		A	Percut vertebroplasty thor	9.15	44.71	57.42	4.39	4.92	1.71	55.57	68.28	15.25	15.78	010
22521		A	Percut vertebroplasty lumb	8.58	45.98	53.47	4.20	4.76	1.60	56.16	63.65	14.38	14.94	010
22522		A	Percut vertebroplasty addll	4.30	NA	NA	1.41	1.61	0.82	NA	NA	6.53	6.73	ZZZ
22523		A	Percut kyphoplasty, thor	9.19	NA	NA	4.75	5.61	1.71	NA	NA	15.65	16.51	010
22524		A	Percut kyphoplasty, lumbar	8.79	NA	NA	4.60	5.42	1.60	NA	NA	14.99	15.81	010
22525		A	Percut kyphoplasty, add-on	4.47	NA	NA	1.68	2.12	0.82	NA	NA	6.97	7.41	ZZZ
22532		A	Lat thorax spine fusion	25.73	NA	NA	13.79	14.56	4.34	NA	NA	43.86	44.63	090
22533		A	Lat lumbar spine fusion	24.53	NA	NA	13.43	13.55	3.15	NA	NA	41.11	41.23	090
22534		A	Lat thor/lumb, addll seg	5.99	NA	NA	2.31	2.85	1.25	NA	NA	9.55	10.09	ZZZ
22548		A	Neck spine fusion	26.78	NA	NA	15.08	15.62	5.59	NA	NA	47.45	47.99	090

22554		A	Neck spine fusion	17.48	NA	NA	10.74	11.94	4.45	NA	NA	32.67	33.87	090
22556		A	Thorax spine fusion	24.42	NA	NA	13.07	14.32	4.34	NA	NA	41.83	43.08	090
22558		A	Lumbar spine fusion	23.25	NA	NA	11.53	12.85	3.15	NA	NA	37.93	39.25	090
22585		A	Additional spinal fusion	5.52	NA	NA	2.09	2.62	1.25	NA	NA	8.86	9.39	ZZZ
22590		A	Spine & skull spinal fusion	21.48	NA	NA	13.10	13.27	4.78	NA	NA	39.36	39.53	090
22595		A	Neck spinal fusion	20.36	NA	NA	12.61	12.78	4.40	NA	NA	37.37	37.54	090
22600		A	Neck spine fusion	17.12	NA	NA	11.28	11.21	3.72	NA	NA	32.12	32.05	090
22610		A	Thorax spine fusion	17.00	NA	NA	10.88	11.28	3.52	NA	NA	31.40	31.80	090
22612		A	Lumbar spine fusion	22.50	NA	NA	12.92	13.88	4.46	NA	NA	39.88	40.84	090
22614		A	Spine fusion, extra segment	6.43	NA	NA	2.49	3.14	1.38	NA	NA	10.30	10.95	ZZZ
22630		A	Lumbar spine fusion	21.81	NA	NA	12.64	13.36	4.72	NA	NA	39.17	39.89	090
22632		A	Spine fusion, extra segment	5.22	NA	NA	2.01	2.50	1.16	NA	NA	8.39	8.88	ZZZ
22800		A	Fusion of spine	19.22	NA	NA	11.15	12.37	3.75	NA	NA	34.12	35.34	090
22802		A	Fusion of spine	31.83	NA	NA	16.17	18.74	6.15	NA	NA	54.15	56.72	090
22804		A	Fusion of spine	37.22	NA	NA	18.20	21.57	6.98	NA	NA	62.40	65.77	090
22808		A	Fusion of spine	27.23	NA	NA	13.85	15.69	4.92	NA	NA	46.00	47.84	090
22810		A	Fusion of spine	31.22	NA	NA	14.93	17.50	5.13	NA	NA	51.28	53.85	090
22812		A	Fusion of spine	33.90	NA	NA	16.75	19.23	5.28	NA	NA	55.93	58.41	090
22818		A	Kyphectomy, 1–2 segments	34.12	NA	NA	16.65	18.32	6.45	NA	NA	57.22	58.89	090
22819		A	Kyphectomy, 3 or more	39.10	NA	NA	19.45	19.90	7.65	NA	NA	66.20	66.65	090
22830		A	Exploration of spinal fusion	11.07	NA	NA	7.11	7.75	2.29	NA	NA	20.47	21.11	090
22840		A	Insert spine fixation device	12.52	NA	NA	4.84	6.08	2.78	NA	NA	20.14	21.38	ZZZ
22842		A	Insert spine fixation device	12.56	NA	NA	4.86	6.09	2.74	NA	NA	20.16	21.39	ZZZ
22843		A	Insert spine fixation device	13.44	NA	NA	5.26	6.27	2.85	NA	NA	21.55	22.56	ZZZ
22844		A	Insert spine fixation device	16.42	NA	NA	6.47	8.18	3.18	NA	NA	26.07	27.78	ZZZ
22845		A	Insert spine fixation device	11.94	NA	NA	4.55	5.69	2.85	NA	NA	19.34	20.48	ZZZ
22846		A	Insert spine fixation device	12.40	NA	NA	4.72	5.93	2.95	NA	NA	20.07	21.28	ZZZ
22847		A	Insert spine fixation device	13.78	NA	NA	5.34	6.60	2.99	NA	NA	22.11	23.37	ZZZ
22848		A	Insert pelv fixation device	5.99	NA	NA	2.37	2.98	1.15	NA	NA	9.51	10.12	ZZZ
22849		A	Reinsert spinal fixation	19.02	NA	NA	10.28	11.37	3.89	NA	NA	33.19	34.28	090
22850		A	Remove spine fixation device	9.69	NA	NA	6.51	6.87	2.04	NA	NA	18.24	18.60	090
22851		A	Apply spine prosth device	6.70	NA	NA	2.58	3.17	1.49	NA	NA	10.77	11.36	ZZZ
22852		A	Remove spine fixation device	9.24	NA	NA	6.23	6.65	1.89	NA	NA	17.36	17.78	090
22855		A	Remove spine fixation device	15.71	NA	NA	9.28	9.57	3.51	NA	NA	28.50	28.79	090
22899		C	Spine surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
22900		A	Remove abdominal wall lesion	6.09	NA	NA	3.56	3.31	0.76	NA	NA	10.41	10.16	090
22999		C	Abdomen surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
23000		A	Removal of calcium deposits	4.35	7.83	8.36	3.68	4.24	0.68	12.86	13.39	8.71	9.27	090
23020		A	Release shoulder joint	9.16	NA	NA	6.51	7.30	1.54	NA	NA	17.21	18.00	090
23030		A	Drain shoulder lesion	3.42	6.32	7.12	2.41	2.78	0.57	10.31	11.11	6.40	6.77	010
23031		A	Drain shoulder bursa	2.74	6.53	7.53	2.23	2.60	0.46	9.73	10.73	5.43	5.80	010
23035		A	Drain shoulder bone lesion	8.96	NA	NA	7.02	7.96	1.47	NA	NA	17.45	18.39	090
23040		A	Exploratory shoulder surgery	9.55	NA	NA	6.80	7.60	1.60	NA	NA	17.95	18.75	090
23044		A	Exploratory shoulder surgery	7.41	NA	NA	5.59	6.22	1.24	NA	NA	14.24	14.87	090
23065		A	Biopsy shoulder tissues	2.27	2.91	2.59	1.70	1.64	0.20	5.38	5.06	4.17	4.11	010
23066		A	Biopsy shoulder tissues	4.15	7.72	7.68	3.60	3.89	0.63	12.50	12.46	8.38	8.67	090
23075		A	Removal of shoulder lesion	2.39	3.74	3.68	1.74	1.77	0.34	6.47	6.41	4.47	4.50	010
23076		A	Removal of shoulder lesion	7.68	NA	NA	5.33	5.50	1.13	NA	NA	14.14	14.31	090
23077		A	Remove tumor of shoulder	17.98	NA	NA	9.81	10.11	2.33	NA	NA	30.12	30.42	090
23100		A	Biopsy of shoulder joint	6.02	NA	NA	5.15	5.53	1.04	NA	NA	12.21	12.59	090
23101		A	Shoulder joint surgery	5.57	NA	NA	4.58	5.14	0.96	NA	NA	11.11	11.67	090
23105		A	Remove shoulder joint lining	8.28	NA	NA	6.12	6.87	1.42	NA	NA	15.82	16.57	090
23106		A	Incision of collarbone joint	5.95	NA	NA	4.62	5.43	0.99	NA	NA	11.56	12.37	090
23107		A	Explore treat shoulder joint	8.67	NA	NA	6.27	7.11	1.49	NA	NA	16.43	17.27	090
23120		A	Partial removal, collar bone	7.16	NA	NA	5.50	6.22	1.23	NA	NA	13.89	14.61	090
23125		A	Removal of collar bone	9.44	NA	NA	6.38	7.27	1.62	NA	NA	17.44	18.33	090
23130		A	Remove shoulder bone, part	7.54	NA	NA	6.10	6.87	1.30	NA	NA	14.94	15.71	090
23140		A	Removal of bone lesion	6.94	NA	NA	4.82	5.12	1.08	NA	NA	12.84	13.14	090
23145		A	Removal of bone lesion	9.20	NA	NA	5.83	7.04	1.49	NA	NA	16.52	17.73	090
23146		A	Removal of bone lesion	7.88	NA	NA	5.99	6.83	1.35	NA	NA	15.22	16.06	090
23150		A	Removal of humerus lesion	8.71	NA	NA	6.06	6.71	1.32	NA	NA	16.09	16.74	090
23155		A	Removal of humerus lesion	10.63	NA	NA	7.36	8.09	1.80	NA	NA	19.79	20.52	090
23156		A	Removal of humerus lesion	8.91	NA	NA	6.42	7.14	1.50	NA	NA	16.83	17.55	090
23170		A	Remove collar bone lesion	7.03	NA	NA	5.08	5.79	1.12	NA	NA	13.23	13.94	090
23172		A	Remove shoulder blade lesion	7.13	NA	NA	4.98	5.96	1.01	NA	NA	13.12	14.10	090
23174		A	Remove humerus lesion	9.80	NA	NA	7.30	8.10	1.65	NA	NA	18.75	19.55	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
23180		A	Remove collar bone lesion	8.76	NA	NA	7.08	8.51	1.47	NA	NA	17.31	18.74	090
23182		A	Remove shoulder blade lesion	8.38	NA	NA	6.91	8.14	1.37	NA	NA	16.66	17.89	090
23184		A	Remove humerus lesion	9.67	NA	NA	7.55	8.87	1.63	NA	NA	18.85	20.17	090
23190		A	Partial removal of scapula	7.29	NA	NA	5.43	5.99	1.17	NA	NA	13.89	14.45	090
23195		A	Removal of head of humerus	10.16	NA	NA	6.80	7.50	1.70	NA	NA	18.66	19.36	090
23200		A	Removal of collar bone	12.60	NA	NA	7.51	8.42	1.93	NA	NA	22.04	22.95	090
23210		A	Removal of shoulder blade	13.07	NA	NA	8.24	8.80	2.02	NA	NA	23.33	23.89	090
23220		A	Partial removal of humerus	15.26	NA	NA	9.09	10.39	2.48	NA	NA	26.83	28.13	090
23221		A	Partial removal of humerus	18.31	NA	NA	6.67	10.46	3.05	NA	NA	28.03	31.82	090
23222		A	Partial removal of humerus	25.36	NA	NA	13.58	15.23	3.94	NA	NA	42.88	44.53	090
23330		A	Remove shoulder foreign body	1.85	3.37	3.60	1.53	1.79	0.24	5.46	5.69	3.62	3.88	010
23331		A	Remove shoulder foreign body	7.43	NA	NA	5.89	6.57	1.27	NA	NA	14.59	15.27	090
23332		A	Remove shoulder foreign body	12.14	NA	NA	8.03	9.00	2.02	NA	NA	22.19	23.16	090
23350		A	Injection for shoulder x-ray	1.00	2.72	3.28	0.32	0.33	0.06	3.78	4.34	1.38	1.39	000
23395		A	Muscle transfer,shoulder/arm	18.19	NA	NA	11.26	12.46	2.93	NA	NA	32.38	33.58	090
23397		A	Muscle transfers	16.53	NA	NA	9.70	10.95	2.73	NA	NA	28.96	30.21	090
23400		A	Fixation of shoulder blade	13.64	NA	NA	8.57	9.70	2.29	NA	NA	24.50	25.63	090
23405		A	Incision of tendon & muscle	8.36	NA	NA	5.97	6.68	1.45	NA	NA	15.78	16.49	090
23406		A	Incise tendon(s) & muscle(s)	10.83	NA	NA	6.95	7.99	1.87	NA	NA	19.65	20.69	090
23410		A	Repair rotator cuff, acute	12.55	NA	NA	7.84	9.01	2.16	NA	NA	22.55	23.72	090
23412		A	Repair rotator cuff, chronic	13.47	NA	NA	8.23	9.48	2.31	NA	NA	24.01	25.26	090
23415		A	Release of shoulder ligament	10.02	NA	NA	6.62	7.65	1.73	NA	NA	18.37	19.40	090
23420		A	Repair of shoulder	14.65	NA	NA	9.78	10.58	2.31	NA	NA	26.74	27.54	090
23430		A	Repair biceps tendon	9.97	NA	NA	6.81	7.78	1.73	NA	NA	18.51	19.48	090
23440		A	Remove/transplant tendon	10.46	NA	NA	6.82	7.90	1.82	NA	NA	19.10	20.18	090
23450		A	Repair shoulder capsule	13.50	NA	NA	8.21	9.43	2.32	NA	NA	24.03	25.25	090
23455		A	Repair shoulder capsule	14.47	NA	NA	8.60	9.98	2.49	NA	NA	25.56	26.94	090
23460		A	Repair shoulder capsule	15.59	NA	NA	9.36	10.87	2.66	NA	NA	27.61	29.12	090
23462		A	Repair shoulder capsule	15.52	NA	NA	9.11	10.34	2.59	NA	NA	27.22	28.45	090
23465		A	Repair shoulder capsule	16.07	NA	NA	9.61	10.79	2.76	NA	NA	28.44	29.62	090
23466		A	Repair shoulder capsule	15.45	NA	NA	10.11	11.06	2.46	NA	NA	28.02	28.97	090
23470		A	Reconstruct shoulder joint	17.66	NA	NA	10.20	11.74	2.98	NA	NA	30.84	32.38	090
23472		A	Reconstruct shoulder joint	22.39	NA	NA	12.25	13.87	3.66	NA	NA	38.30	39.92	090
23480		A	Revision of collar bone	11.34	NA	NA	7.37	8.42	1.94	NA	NA	20.65	21.70	090
23485		A	Revision of collar bone	13.71	NA	NA	8.33	9.50	2.33	NA	NA	24.37	25.54	090
23490		A	Reinforce clavicle	11.96	NA	NA	6.69	8.19	1.47	NA	NA	20.12	21.62	090
23491		A	Reinforce shoulder bones	14.31	NA	NA	8.89	10.26	2.46	NA	NA	25.66	27.03	090
23500		A	Treat clavicle fracture	2.08	2.64	2.81	2.71	2.57	0.30	5.02	5.19	5.09	4.95	090
23505		A	Treat clavicle fracture	3.68	4.03	4.32	3.63	3.79	0.61	8.32	8.61	7.92	8.08	090
23515		A	Treat clavicle fracture	7.40	NA	NA	5.59	6.31	1.28	NA	NA	14.27	14.99	090
23520		A	Treat clavicle dislocation	2.16	2.65	2.80	2.72	2.74	0.34	5.15	5.30	5.22	5.24	090
23525		A	Treat clavicle dislocation	3.59	4.51	4.53	3.92	3.94	0.46	8.56	8.58	7.97	7.99	090
23530		A	Treat clavicle dislocation	7.30	NA	NA	5.28	5.77	1.20	NA	NA	13.78	14.27	090
23532		A	Treat clavicle dislocation	8.00	NA	NA	6.08	6.75	1.38	NA	NA	15.46	16.13	090
23540		A	Treat clavicle dislocation	2.23	2.62	2.80	2.70	2.45	0.29	5.14	5.32	5.22	4.97	090
23545		A	Treat clavicle dislocation	3.25	3.75	4.08	3.27	3.34	0.35	7.35	7.68	6.87	6.94	090
23550		A	Treat clavicle dislocation	7.41	NA	NA	5.54	6.16	1.25	NA	NA	14.20	14.82	090
23552		A	Treat clavicle dislocation	8.62	NA	NA	6.28	7.06	1.46	NA	NA	16.36	17.14	090
23570		A	Treat shoulder blade fx	2.23	2.80	2.96	2.94	2.90	0.36	5.39	5.55	5.53	5.49	090
23575		A	Treat shoulder blade fx	4.05	4.36	4.75	3.86	4.20	0.59	9.00	9.39	8.50	8.84	090
23585		A	Treat scapula fracture	9.07	NA	NA	6.52	7.36	1.54	NA	NA	17.13	17.97	090
23600		A	Treat humerus fracture	2.93	4.08	4.43	3.66	3.58	0.48	7.49	7.84	7.07	6.99	090
23605		A	Treat humerus fracture	4.86	5.42	5.97	4.63	4.99	0.84	11.12	11.67	10.33	10.69	090
23615		A	Treat humerus fracture	10.83	NA	NA	8.33	8.71	1.62	NA	NA	20.78	21.16	090
23616		A	Treat humerus fracture	21.60	NA	NA	11.56	13.50	3.69	NA	NA	36.85	38.79	090
23620		A	Treat humerus fracture	2.40	3.42	3.56	3.16	3.03	0.40	6.22	6.36	5.96	5.83	090

23625		A	Treat humerus fracture	3.92	4.44	4.82	3.91	4.19	0.67	9.03	9.41	8.50	8.78	090
23630		A	Treat humerus fracture	7.40	NA	NA	5.69	6.40	1.27	NA	NA	14.36	15.07	090
23650		A	Treat shoulder dislocation	3.38	3.27	3.65	2.80	2.77	0.30	6.95	7.33	6.48	6.45	090
23655		A	Treat shoulder dislocation	4.56	NA	NA	4.17	4.17	0.69	NA	NA	9.42	9.42	090
23660		A	Treat shoulder dislocation	7.48	NA	NA	5.63	6.19	1.29	NA	NA	14.40	14.96	090
23665		A	Treat dislocation/fracture	4.46	4.85	5.21	4.26	4.61	0.71	10.02	10.38	9.43	9.78	090
23670		A	Treat dislocation/fracture	7.95	NA	NA	5.89	6.60	1.36	NA	NA	15.20	15.91	090
23675		A	Treat dislocation/fracture	6.04	6.16	6.66	5.16	5.66	1.01	13.21	13.71	12.21	12.71	090
23680		A	Treat dislocation/fracture	10.22	NA	NA	7.02	7.84	1.75	NA	NA	18.99	19.81	090
23700		A	Fixation of shoulder	2.52	NA	NA	1.92	2.11	0.44	NA	NA	4.88	5.07	010
23800		A	Fusion of shoulder joint	14.50	NA	NA	7.55	9.70	2.35	NA	NA	24.40	26.55	090
23802		A	Fusion of shoulder joint	18.07	NA	NA	10.99	10.38	2.70	NA	NA	31.76	31.15	090
23900		A	Amputation of arm & girdle	20.47	NA	NA	10.72	11.46	3.18	NA	NA	34.37	35.11	090
23920		A	Amputation at shoulder joint	15.95	NA	NA	9.56	9.83	2.46	NA	NA	27.97	28.24	090
23921		A	Amputation follow-up surgery	5.54	NA	NA	4.88	5.03	0.78	NA	NA	11.20	11.35	090
23929		C	Shoulder surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
23930		A	Drainage of arm lesion	2.94	5.00	5.99	1.99	2.23	0.43	8.37	9.36	5.36	5.60	010
23931		A	Drainage of arm bursa	1.79	4.34	5.52	1.75	2.07	0.28	6.41	7.59	3.82	4.14	010
23935		A	Drain arm/elbow bone lesion	6.20	NA	NA	5.14	5.72	1.05	NA	NA	12.39	12.97	090
24000		A	Exploratory elbow surgery	5.93	NA	NA	4.78	5.25	0.97	NA	NA	11.68	12.15	090
24006		A	Release elbow joint	9.54	NA	NA	6.67	7.48	1.50	NA	NA	17.71	18.52	090
24065		A	Biopsy arm/elbow soft tissue	2.08	4.08	3.43	1.87	1.77	0.17	6.33	5.68	4.12	4.02	010
24066		A	Biopsy arm/elbow soft tissue	5.20	8.33	8.78	3.94	4.08	0.80	14.33	14.78	9.94	10.08	090
24075		A	Remove arm/elbow lesion	3.91	7.22	7.32	3.27	3.37	0.56	11.69	11.79	7.74	7.84	090
24076		A	Remove arm/elbow lesion	6.29	NA	NA	4.59	4.79	0.95	NA	NA	11.83	12.03	090
24077		A	Remove tumor of arm/elbow	11.86	NA	NA	6.96	7.55	1.72	NA	NA	20.54	21.13	090
24100		A	Biopsy elbow joint lining	4.92	NA	NA	4.28	4.46	0.85	NA	NA	10.05	10.23	090
24101		A	Explore/treat elbow joint	6.12	NA	NA	5.08	5.72	1.03	NA	NA	12.23	12.87	090
24102		A	Remove elbow joint lining	8.08	NA	NA	5.82	6.60	1.33	NA	NA	15.23	16.01	090
24105		A	Removal of elbow bursa	3.60	NA	NA	4.04	4.30	0.61	NA	NA	8.25	8.51	090
24110		A	Remove humerus lesion	7.38	NA	NA	5.66	6.41	1.28	NA	NA	14.32	15.07	090
24115		A	Remove/graft bone lesion	9.92	NA	NA	6.83	7.12	1.67	NA	NA	18.42	18.71	090
24116		A	Remove/graft bone lesion	12.03	NA	NA	7.67	8.72	2.05	NA	NA	21.75	22.80	090
24120		A	Remove elbow lesion	6.64	NA	NA	5.22	5.75	1.10	NA	NA	12.96	13.49	090
24125		A	Remove/graft bone lesion	7.94	NA	NA	6.03	6.13	1.06	NA	NA	15.03	15.13	090
24126		A	Remove/graft bone lesion	8.42	NA	NA	6.22	6.82	1.16	NA	NA	15.80	16.40	090
24130		A	Removal of head of radius	6.24	NA	NA	5.13	5.80	1.04	NA	NA	12.41	13.08	090
24134		A	Removal of arm bone lesion	10.02	NA	NA	7.49	8.51	1.64	NA	NA	19.15	20.17	090
24136		A	Remove radius bone lesion	8.22	NA	NA	5.67	6.83	1.38	NA	NA	15.27	16.43	090
24138		A	Remove elbow bone lesion	8.22	NA	NA	6.71	7.51	1.34	NA	NA	16.27	17.07	090
24140		A	Partial removal of arm bone	9.35	NA	NA	7.20	8.63	1.51	NA	NA	18.06	19.49	090
24145		A	Partial removal of radius	7.63	NA	NA	6.30	7.62	1.25	NA	NA	15.18	16.50	090
24147		A	Partial removal of elbow	7.59	NA	NA	6.90	8.18	1.30	NA	NA	15.79	17.07	090
24149		A	Radical resection of elbow	15.80	NA	NA	10.86	11.43	2.34	NA	NA	29.00	29.57	090
24150		A	Extensive humerus surgery	13.61	NA	NA	8.54	9.63	2.32	NA	NA	24.47	25.56	090
24151		A	Extensive humerus surgery	15.98	NA	NA	9.77	11.08	2.59	NA	NA	28.34	29.65	090
24152		A	Extensive radius surgery	10.16	NA	NA	6.29	7.37	1.48	NA	NA	17.93	19.01	090
24153		A	Extensive radius surgery	11.64	NA	NA	4.92	5.41	0.74	NA	NA	17.30	17.79	090
24155		A	Removal of elbow joint	11.89	NA	NA	7.61	8.20	1.92	NA	NA	21.42	22.01	090
24160		A	Remove elbow joint implant	7.82	NA	NA	5.82	6.62	1.30	NA	NA	14.94	15.74	090
24164		A	Remove radius head implant	6.28	NA	NA	4.92	5.56	1.03	NA	NA	12.23	12.87	090
24200		A	Removal of arm foreign body	1.76	2.78	3.25	1.38	1.57	0.20	4.74	5.21	3.34	3.53	010
24201		A	Removal of arm foreign body	4.55	7.92	9.34	3.71	4.10	0.72	13.19	14.61	8.98	9.37	090
24220		A	Injection for elbow x-ray	1.31	2.64	3.38	0.43	0.44	0.08	4.03	4.77	1.82	1.83	000
24300		A	Manipulate elbow w/anesth	3.74	NA	NA	5.18	5.58	0.65	NA	NA	9.57	9.97	090
24301		A	Muscle/tendon transfer	10.18	NA	NA	6.85	7.85	1.66	NA	NA	18.69	19.69	090
24305		A	Arm tendon lengthening	7.44	NA	NA	5.66	6.45	1.15	NA	NA	14.25	15.04	090
24310		A	Revision of arm tendon	5.97	NA	NA	4.78	5.38	0.96	NA	NA	11.71	12.31	090
24320		A	Repair of arm tendon	10.66	NA	NA	7.11	7.43	1.73	NA	NA	19.50	19.82	090
24330		A	Revision of arm muscles	9.59	NA	NA	6.64	7.57	1.60	NA	NA	17.83	18.76	090
24331		A	Revision of arm muscles	10.75	NA	NA	6.52	8.13	1.77	NA	NA	19.04	20.65	090
24332		A	Tenolysis, triceps	7.69	NA	NA	5.75	6.52	1.23	NA	NA	14.67	15.44	090
24340		A	Repair of biceps tendon	7.88	NA	NA	6.00	6.74	1.36	NA	NA	15.24	15.98	090
24341		A	Repair arm tendon/muscle	9.14	NA	NA	7.52	7.82	1.36	NA	NA	18.02	18.32	090
24342		A	Repair of ruptured tendon	10.66	NA	NA	7.11	8.17	1.85	NA	NA	19.62	20.68	090
24343		A	Repr elbow lat ligmnt w/tiss	8.89	NA	NA	7.02	7.87	1.43	NA	NA	17.34	18.19	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
24344		A	Reconstruct elbow lat ligmnt	14.85	NA	NA	10.06	11.16	2.36	NA	NA	27.27	28.37	090
24345		A	Repr elbw med ligmnt w/tissu	8.89	NA	NA	6.98	7.76	1.44	NA	NA	17.31	18.09	090
24346		A	Reconstruct elbow med ligmnt	14.85	NA	NA	10.06	11.02	2.33	NA	NA	27.24	28.20	090
24350		A	Repair of tennis elbow	5.24	NA	NA	4.89	5.41	0.87	NA	NA	11.00	11.52	090
24351		A	Repair of tennis elbow	5.90	NA	NA	5.01	5.69	1.02	NA	NA	11.93	12.61	090
24352		A	Repair of tennis elbow	6.42	NA	NA	5.23	5.94	1.10	NA	NA	12.75	13.46	090
24354		A	Repair of tennis elbow	6.47	NA	NA	5.25	5.93	1.07	NA	NA	12.79	13.47	090
24356		A	Revision of tennis elbow	6.67	NA	NA	5.32	6.06	1.11	NA	NA	13.10	13.84	090
24360		A	Reconstruct elbow joint	12.44	NA	NA	7.97	9.10	2.05	NA	NA	22.46	23.59	090
24361		A	Reconstruct elbow joint	14.18	NA	NA	8.78	10.13	2.18	NA	NA	25.14	28.49	090
24362		A	Reconstruct elbow joint	15.09	NA	NA	9.30	9.86	2.60	NA	NA	26.99	27.55	090
24363		A	Replace elbow joint	22.39	NA	NA	12.26	13.35	3.01	NA	NA	37.66	38.75	090
24365		A	Reconstruct head of radius	8.44	NA	NA	5.94	6.89	1.41	NA	NA	15.79	16.74	090
24366		A	Reconstruct head of radius	9.18	NA	NA	6.31	7.23	1.52	NA	NA	17.01	17.93	090
24400		A	Revision of humerus	11.10	NA	NA	7.62	8.54	1.92	NA	NA	20.64	21.56	090
24410		A	Revision of humerus	14.86	NA	NA	9.32	10.06	2.57	NA	NA	26.75	27.49	090
24420		A	Revision of humerus	13.48	NA	NA	8.88	10.13	2.17	NA	NA	24.53	25.78	090
24430		A	Repair of humerus	14.99	NA	NA	9.30	9.63	2.21	NA	NA	26.50	26.83	090
24435		A	Repair humerus with graft	14.64	NA	NA	9.86	10.63	2.27	NA	NA	26.77	27.54	090
24470		A	Revision of elbow joint	8.73	NA	NA	6.43	7.40	1.48	NA	NA	16.64	17.61	090
24495		A	Decompression of forearm	8.23	NA	NA	6.68	8.23	1.18	NA	NA	16.09	17.64	090
24498		A	Reinforce humerus	12.08	NA	NA	7.75	8.83	2.06	NA	NA	21.89	23.02	090
24500		A	Treat humerus fracture	3.21	4.45	4.75	3.80	3.71	0.50	8.16	8.46	7.51	7.42	090
24505		A	Treat humerus fracture	5.16	5.87	6.42	4.90	5.27	0.89	11.92	12.47	10.95	11.32	090
24515		A	Treat humerus fracture	11.87	NA	NA	8.09	9.06	2.02	NA	NA	21.98	22.95	090
24516		A	Treat humerus fracture	11.99	NA	NA	7.71	8.76	2.02	NA	NA	21.72	22.77	090
24530		A	Treat humerus fracture	3.49	4.74	5.09	4.00	4.03	0.57	8.80	9.15	8.06	8.09	090
24535		A	Treat humerus fracture	6.86	6.82	7.59	5.86	6.43	1.18	14.86	15.63	13.90	14.47	090
24538		A	Treat humerus fracture	9.54	NA	NA	7.22	8.33	1.64	NA	NA	18.40	19.51	090
24545		A	Treat humerus fracture	10.80	NA	NA	7.24	8.15	1.82	NA	NA	19.86	20.77	090
24546		A	Treat humerus fracture	15.91	NA	NA	9.50	10.87	2.73	NA	NA	28.14	29.51	090
24560		A	Treat humerus fracture	2.80	4.05	4.37	3.38	3.24	0.44	7.29	7.61	6.62	6.48	090
24565		A	Treat humerus fracture	5.55	5.86	6.42	4.97	5.38	0.93	12.34	12.90	11.45	11.86	090
24566		A	Treat humerus fracture	8.78	NA	NA	6.97	7.86	1.30	NA	NA	17.05	17.94	090
24575		A	Treat humerus fracture	10.94	NA	NA	7.27	8.12	1.86	NA	NA	20.07	20.92	090
24576		A	Treat humerus fracture	2.86	4.45	4.68	3.74	3.72	0.46	7.77	8.00	7.06	7.04	090
24577		A	Treat humerus fracture	5.78	6.01	6.70	5.08	5.65	0.95	12.74	13.43	11.81	12.38	090
24579		A	Treat humerus fracture	11.88	NA	NA	7.87	8.59	2.02	NA	NA	21.77	22.49	090
24582		A	Treat humerus fracture	9.79	NA	NA	8.21	8.89	1.48	NA	NA	19.48	20.16	090
24586		A	Treat elbow fracture	15.55	NA	NA	9.36	10.76	2.64	NA	NA	27.55	28.95	090
24587		A	Treat elbow fracture	15.56	NA	NA	9.37	10.61	2.52	NA	NA	27.45	28.69	090
24600		A	Treat elbow dislocation	4.22	3.87	4.61	3.29	3.45	0.50	8.59	9.33	8.01	8.17	090
24605		A	Treat elbow dislocation	5.41	NA	NA	4.96	5.26	0.89	NA	NA	11.26	11.56	090
24615		A	Treat elbow dislocation	9.65	NA	NA	6.59	7.51	1.60	NA	NA	17.84	18.76	090
24620		A	Treat elbow fracture	6.97	NA	NA	5.48	6.06	1.07	NA	NA	13.52	14.10	090
24635		A	Treat elbow fracture	13.47	NA	NA	10.23	13.10	2.28	NA	NA	25.98	28.85	090
24640		A	Treat elbow dislocation	1.20	1.48	1.75	0.80	0.80	0.12	2.80	3.07	2.12	2.12	010
24650		A	Treat radius fracture	2.16	3.44	3.70	3.00	2.81	0.35	5.95	6.21	5.51	5.32	090
24655		A	Treat radius fracture	4.39	5.20	5.76	4.41	4.70	0.70	10.29	10.85	9.50	9.79	090
24665		A	Treat radius fracture	8.13	NA	NA	6.53	7.27	1.41	NA	NA	16.07	16.81	090
24666		A	Treat radius fracture	9.66	NA	NA	7.00	7.80	1.62	NA	NA	18.28	19.08	090
24670		A	Treat ulnar fracture	2.54	3.74	4.02	3.16	3.09	0.41	6.69	6.97	6.11	6.04	090
24675		A	Treat ulnar fracture	4.71	5.30	5.83	4.50	4.85	0.81	10.82	11.35	10.02	10.37	090
24685		A	Treat ulnar fracture	8.85	NA	NA	6.48	7.26	1.52	NA	NA	16.85	17.63	090
24800		A	Fusion of elbow joint	11.18	NA	NA	7.66	8.47	1.63	NA	NA	20.47	21.28	090
24802		A	Fusion/graft of elbow joint	14.09	NA	NA	8.56	9.93	2.37	NA	NA	25.02	26.39	090

24900		A	Amputation of upper arm	9.95	NA	NA	6.47	6.91	1.53	NA	NA	17.95	18.39	090
24920		A	Amputation of upper arm	9.95	NA	NA	6.45	6.82	1.61	NA	NA	18.01	18.38	090
24925		A	Amputation follow-up surgery	7.12	NA	NA	4.95	5.80	1.14	NA	NA	13.21	14.06	090
24930		A	Amputation follow-up surgery	10.65	NA	NA	5.90	6.91	1.67	NA	NA	18.22	19.23	090
24931		A	Amputate upper arm & implant	13.24	NA	NA	8.23	6.35	1.89	NA	NA	23.36	21.48	090
24935		A	Revision of amputation	16.20	NA	NA	8.90	8.24	2.13	NA	NA	27.23	26.57	090
24940		C	Revision of upper arm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
24999		C	Upper arm/elbow surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
25000		A	Incision of tendon sheath	3.37	NA	NA	5.06	6.42	0.55	NA	NA	8.98	10.34	090
25001		A	Incise flexor carpi radialis	3.62	NA	NA	3.85	4.14	0.55	NA	NA	8.02	8.31	090
25020		A	Decompress forearm 1 space	5.91	NA	NA	6.90	8.90	0.93	NA	NA	13.74	15.74	090
25023		A	Decompress forearm 1 space	13.60	NA	NA	11.48	14.08	2.03	NA	NA	27.11	29.71	090
25024		A	Decompress forearm 2 spaces	10.52	NA	NA	7.20	7.40	1.36	NA	NA	19.08	19.28	090
25025		A	Decompress forearm 2 spaces	17.67	NA	NA	9.03	9.74	1.82	NA	NA	28.52	29.23	090
25028		A	Drainage of forearm lesion	5.24	NA	NA	6.25	7.68	0.81	NA	NA	12.30	13.73	090
25031		A	Drainage of forearm bursa	4.13	NA	NA	5.47	7.31	0.63	NA	NA	10.23	12.07	090
25035		A	Treat forearm bone lesion	7.47	NA	NA	8.88	12.41	1.24	NA	NA	17.59	21.12	090
25040		A	Explore/treat wrist joint	7.35	NA	NA	5.90	6.95	1.15	NA	NA	14.40	15.45	090
25065		A	Biopsy forearm soft tissues	1.99	4.19	3.46	1.90	1.90	0.15	6.33	5.60	4.04	4.04	010
25066		A	Biopsy forearm soft tissues	4.12	NA	NA	5.46	6.66	0.64	NA	NA	10.22	11.42	090
25075		A	Removal forearm lesion subcu	3.73	NA	NA	4.90	5.64	0.55	NA	NA	9.18	9.92	090
25076		A	Removal forearm lesion deep	4.91	NA	NA	6.92	8.89	0.74	NA	NA	12.57	14.54	090
25077		A	Remove tumor, forearm/wrist	9.81	NA	NA	8.95	11.30	1.42	NA	NA	20.18	22.53	090
25085		A	Incision of wrist capsule	5.49	NA	NA	5.44	6.70	0.85	NA	NA	11.78	13.04	090
25100		A	Biopsy of wrist joint	3.89	NA	NA	4.28	5.02	0.59	NA	NA	8.76	9.50	090
25101		A	Explore/treat wrist joint	4.68	NA	NA	4.83	5.63	0.75	NA	NA	10.26	11.06	090
25105		A	Remove wrist joint lining	5.84	NA	NA	5.82	6.93	0.92	NA	NA	12.58	13.69	090
25107		A	Remove wrist joint cartilage	7.42	NA	NA	7.16	8.05	0.99	NA	NA	15.57	16.46	090
25110		A	Remove wrist tendon lesion	3.91	NA	NA	5.29	6.61	0.62	NA	NA	9.82	11.14	090
25111		A	Remove wrist tendon lesion	3.38	NA	NA	4.10	4.55	0.53	NA	NA	8.01	8.46	090
25112		A	Reremove wrist tendon lesion	4.52	NA	NA	4.54	5.07	0.70	NA	NA	9.76	10.29	090
25115		A	Remove wrist/forearm lesion	9.81	NA	NA	10.21	13.08	1.31	NA	NA	21.33	24.20	090
25116		A	Remove wrist/forearm lesion	7.28	NA	NA	9.08	12.13	1.11	NA	NA	17.47	20.52	090
25118		A	Excise wrist tendon sheath	4.36	NA	NA	4.63	5.46	0.68	NA	NA	9.67	10.50	090
25119		A	Partial removal of ulna	6.03	NA	NA	5.86	7.17	0.96	NA	NA	12.85	14.16	090
25120		A	Removal of forearm lesion	6.09	NA	NA	7.93	11.04	1.00	NA	NA	15.02	18.13	090
25125		A	Remove/graft forearm lesion	7.47	NA	NA	8.75	11.82	1.06	NA	NA	17.28	20.35	090
25126		A	Remove/graft forearm lesion	7.54	NA	NA	8.78	11.95	1.27	NA	NA	17.59	20.76	090
25130		A	Removal of wrist lesion	5.25	NA	NA	5.21	6.12	0.80	NA	NA	11.26	12.17	090
25135		A	Remove & graft wrist lesion	6.88	NA	NA	6.12	7.16	1.02	NA	NA	14.02	15.06	090
25136		A	Remove & graft wrist lesion	5.96	NA	NA	5.53	6.33	1.03	NA	NA	12.52	13.32	090
25145		A	Remove forearm bone lesion	6.36	NA	NA	8.12	11.08	1.01	NA	NA	15.49	18.45	090
25150		A	Partial removal of ulna	7.20	NA	NA	6.38	7.75	1.14	NA	NA	14.72	16.09	090
25151		A	Partial removal of radius	7.50	NA	NA	8.52	11.67	1.18	NA	NA	17.20	20.35	090
25170		A	Extensive forearm surgery	11.25	NA	NA	10.52	13.99	1.77	NA	NA	23.54	27.01	090
25210		A	Removal of wrist bone	5.94	NA	NA	5.53	6.48	0.88	NA	NA	12.35	13.30	090
25215		A	Removal of wrist bones	7.94	NA	NA	6.83	8.27	1.19	NA	NA	15.96	17.40	090
25230		A	Partial removal of radius	5.22	NA	NA	4.96	5.85	0.79	NA	NA	10.97	11.86	090
25240		A	Partial removal of ulna	5.16	NA	NA	5.27	6.53	0.81	NA	NA	11.24	12.50	090
25246		A	Injection for wrist x-ray	1.45	2.70	3.26	0.48	0.48	0.09	4.24	4.80	2.02	2.02	000
25248		A	Remove forearm foreign body	5.13	NA	NA	6.57	8.03	0.72	NA	NA	12.42	13.88	090
25250		A	Removal of wrist prosthesis	6.59	NA	NA	5.32	5.91	1.01	NA	NA	12.92	13.51	090
25251		A	Removal of wrist prosthesis	9.62	NA	NA	6.71	7.62	1.26	NA	NA	17.59	18.50	090
25259		A	Manipulate wrist w/anesthes	3.74	NA	NA	5.14	5.58	0.62	NA	NA	9.50	9.94	090
25260		A	Repair forearm tendon/muscle	7.79	NA	NA	9.22	12.29	1.19	NA	NA	18.20	21.27	090
25263		A	Repair forearm tendon/muscle	7.81	NA	NA	8.96	12.19	1.18	NA	NA	17.95	21.18	090
25265		A	Repair forearm tendon/muscle	9.87	NA	NA	10.00	13.23	1.47	NA	NA	21.34	24.57	090
25270		A	Repair forearm tendon/muscle	5.99	NA	NA	7.90	11.00	0.95	NA	NA	14.84	17.94	090
25272		A	Repair forearm tendon/muscle	7.03	NA	NA	8.37	11.69	1.11	NA	NA	16.51	19.83	090
25274		A	Repair forearm tendon/muscle	8.74	NA	NA	9.20	12.52	1.36	NA	NA	19.30	22.62	090
25275		A	Repair forearm tendon sheath	8.74	NA	NA	6.50	7.31	1.31	NA	NA	16.55	17.36	090
25280		A	Revise wrist/forearm tendon	7.21	NA	NA	8.47	11.59	1.08	NA	NA	16.76	19.88	090
25290		A	Incise wrist/forearm tendon	5.28	NA	NA	9.17	13.54	0.82	NA	NA	15.27	19.64	090
25295		A	Release wrist/forearm tendon	6.54	NA	NA	8.14	11.15	1.00	NA	NA	15.68	18.69	090
25300		A	Fusion of tendons at wrist	8.79	NA	NA	7.19	8.14	1.26	NA	NA	17.24	18.19	090
25301		A	Fusion of tendons at wrist	8.39	NA	NA	6.73	7.73	1.29	NA	NA	16.41	17.41	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
25310		A	Transplant forearm tendon	8.19	NA	NA	8.82	11.98	1.21	NA	NA	18.22	21.38	090
25312		A	Transplant forearm tendon	9.62	NA	NA	9.60	12.86	1.41	NA	NA	20.63	23.89	090
25315		A	Revise palsy hand tendon(s)	10.48	NA	NA	10.00	13.30	1.58	NA	NA	22.06	25.36	090
25316		A	Revise palsy hand tendon(s)	12.67	NA	NA	11.08	14.94	1.74	NA	NA	25.49	29.35	090
25320		A	Repair/revise wrist joint	12.28	NA	NA	10.38	11.14	1.61	NA	NA	24.27	25.03	090
25332		A	Revise wrist joint	11.51	NA	NA	7.74	8.81	1.83	NA	NA	21.08	22.15	090
25335		A	Realignment of hand	13.16	NA	NA	7.01	10.45	1.92	NA	NA	22.09	25.53	090
25337		A	Reconstruct ulna/radioulnar	11.36	NA	NA	9.39	10.66	1.61	NA	NA	22.36	23.63	090
25350		A	Revision of radius	8.89	NA	NA	9.27	12.80	1.46	NA	NA	19.62	23.15	090
25355		A	Revision of radius	10.33	NA	NA	10.03	13.47	1.73	NA	NA	22.09	25.53	090
25360		A	Revision of ulna	8.54	NA	NA	9.13	12.69	1.41	NA	NA	19.08	22.64	090
25365		A	Revise radius & ulna	12.68	NA	NA	11.06	14.50	2.15	NA	NA	25.89	29.33	090
25370		A	Revise radius or ulna	13.82	NA	NA	11.97	15.05	2.28	NA	NA	28.07	31.15	090
25375		A	Revise radius & ulna	13.32	NA	NA	11.33	15.15	2.26	NA	NA	26.91	30.73	090
25390		A	Shorten radius or ulna	10.50	NA	NA	9.94	13.42	1.65	NA	NA	22.09	25.57	090
25391		A	Lengthen radius or ulna	14.05	NA	NA	11.65	15.33	2.21	NA	NA	27.91	31.59	090
25392		A	Shorten radius & ulna	14.35	NA	NA	11.78	14.92	2.10	NA	NA	28.23	31.37	090
25393		A	Lengthen radius & ulna	16.33	NA	NA	13.18	16.48	2.76	NA	NA	32.27	35.57	090
25394		A	Repair carpal bone, shorten	10.63	NA	NA	6.80	7.75	1.59	NA	NA	19.02	19.97	090
25400		A	Repair radius or ulna	11.08	NA	NA	10.18	13.94	1.82	NA	NA	23.08	26.84	090
25405		A	Repair/graft radius or ulna	14.78	NA	NA	11.92	15.93	2.32	NA	NA	29.02	33.03	090
25415		A	Repair radius & ulna	13.57	NA	NA	11.02	15.14	2.17	NA	NA	26.76	30.88	090
25420		A	Repair/graft radius & ulna	16.79	NA	NA	12.79	16.90	2.61	NA	NA	32.19	36.30	090
25425		A	Repair/graft radius or ulna	13.49	NA	NA	14.14	19.58	2.08	NA	NA	29.71	35.15	090
25426		A	Repair/graft radius & ulna	16.22	NA	NA	12.50	15.54	2.54	NA	NA	31.26	34.30	090
25430		A	Vasc graft into carpal bone	9.49	NA	NA	7.04	7.27	1.27	NA	NA	17.80	18.03	090
25431		A	Repair nonunion carpal bone	10.67	NA	NA	7.26	8.12	1.90	NA	NA	19.83	20.69	090
25440		A	Repair/graft wrist bone	10.48	NA	NA	7.53	8.93	1.63	NA	NA	19.64	21.04	090
25441		A	Reconstruct wrist joint	13.06	NA	NA	8.50	9.63	2.07	NA	NA	23.63	24.76	090
25442		A	Reconstruct wrist joint	10.89	NA	NA	7.32	8.49	1.53	NA	NA	19.74	20.91	090
25443		A	Reconstruct wrist joint	10.43	NA	NA	6.61	8.23	1.37	NA	NA	18.41	20.03	090
25444		A	Reconstruct wrist joint	11.19	NA	NA	7.65	8.69	1.71	NA	NA	20.55	21.59	090
25445		A	Reconstruct wrist joint	9.68	NA	NA	6.72	7.67	1.55	NA	NA	17.95	18.90	090
25446		A	Wrist replacement	17.07	NA	NA	9.88	11.41	2.47	NA	NA	29.42	30.95	090
25447		A	Repair wrist joint(s)	10.85	NA	NA	7.88	8.46	1.61	NA	NA	20.34	20.92	090
25449		A	Remove wrist joint implant	14.71	NA	NA	9.05	10.27	2.21	NA	NA	25.97	27.19	090
25450		A	Revision of wrist joint	7.86	NA	NA	7.34	9.48	1.36	NA	NA	16.56	18.70	090
25455		A	Revision of wrist joint	9.48	NA	NA	6.50	9.77	0.96	NA	NA	16.94	20.21	090
25490		A	Reinforce radius	9.53	NA	NA	9.47	12.67	1.43	NA	NA	20.43	23.63	090
25491		A	Reinforce ulna	9.95	NA	NA	9.73	13.28	1.60	NA	NA	21.28	24.83	090
25492		A	Reinforce radius and ulna	12.43	NA	NA	10.59	14.12	2.14	NA	NA	25.16	28.69	090
25500		A	Treat fracture of radius	2.45	3.33	3.51	2.89	2.76	0.35	6.13	6.31	5.69	5.56	090
25505		A	Treat fracture of radius	5.20	5.87	6.37	5.01	5.32	0.90	11.97	12.47	11.11	11.42	090
25515		A	Treat fracture of radius	9.29	NA	NA	6.75	7.28	1.59	NA	NA	17.63	18.16	090
25520		A	Treat fracture of radius	6.25	6.02	6.65	5.43	5.90	1.08	13.35	13.98	12.76	13.23	090
25525		A	Treat fracture of radius	12.59	NA	NA	8.74	9.68	2.12	NA	NA	23.45	24.39	090
25526		A	Treat fracture of radius	13.33	NA	NA	10.23	12.68	2.19	NA	NA	25.75	28.20	090
25530		A	Treat fracture of ulna	2.09	3.48	3.69	2.97	2.89	0.34	5.91	6.12	5.40	5.32	090
25535		A	Treat fracture of ulna	5.13	5.68	5.93	4.93	5.20	0.89	11.70	11.95	10.95	11.22	090
25545		A	Treat fracture of ulna	9.01	NA	NA	6.64	7.41	1.53	NA	NA	17.18	17.95	090
25560		A	Treat fracture radius & ulna	2.44	3.40	3.62	2.87	2.67	0.35	6.19	6.41	5.66	5.46	090
25565		A	Treat fracture radius & ulna	5.62	5.97	6.52	4.99	5.31	0.93	12.52	13.07	11.54	11.86	090
25574		A	Treat fracture radius & ulna	7.37	NA	NA	6.64	7.06	1.21	NA	NA	15.22	15.64	090
25575		A	Treat fracture radius/ulna	11.92	NA	NA	9.00	9.38	1.81	NA	NA	22.73	23.11	090
25600		A	Treat fracture radius/ulna	2.63	3.69	3.99	3.18	3.02	0.42	6.74	7.04	6.23	6.07	090
25605		A	Treat fracture radius/ulna	6.93	6.91	7.15	6.18	6.21	1.00	14.84	15.08	14.11	14.14	090

25611		A	Treat fracture radius/ulna	9.14	NA	NA	8.34	8.81	1.34	NA	NA	18.82	19.29	090
25620		A	Treat fracture radius/ulna	8.54	NA	NA	6.27	7.01	1.42	NA	NA	16.23	16.97	090
25622		A	Treat wrist bone fracture	2.61	3.91	4.18	3.36	3.17	0.41	6.93	7.20	6.38	6.19	090
25624		A	Treat wrist bone fracture	4.52	5.58	6.12	4.73	4.99	0.76	10.86	11.40	10.01	10.27	090
25628		A	Treat wrist bone fracture	9.42	NA	NA	7.34	7.70	1.37	NA	NA	18.13	18.49	090
25630		A	Treat wrist bone fracture	2.88	3.76	4.08	3.25	3.02	0.45	7.09	7.41	6.58	6.35	090
25635		A	Treat wrist bone fracture	4.38	5.38	5.80	4.56	4.07	0.74	10.50	10.92	9.68	9.19	090
25645		A	Treat wrist bone fracture	7.24	NA	NA	5.80	6.42	1.20	NA	NA	14.24	14.86	090
25650		A	Treat wrist bone fracture	3.05	3.86	4.20	3.46	3.24	0.45	7.36	7.70	6.96	6.74	090
25651		A	Pin ulnar styloid fracture	5.60	NA	NA	5.13	5.39	0.86	NA	NA	11.59	11.85	090
25652		A	Treat fracture ulnar styloid	7.84	NA	NA	6.21	6.80	1.21	NA	NA	15.26	15.85	090
25660		A	Treat wrist dislocation	4.75	NA	NA	4.48	4.65	0.58	NA	NA	9.81	9.98	090
25670		A	Treat wrist dislocation	7.91	NA	NA	5.99	6.74	1.28	NA	NA	15.18	15.93	090
25671		A	Pin radioulnar dislocation	6.24	NA	NA	5.53	6.00	1.00	NA	NA	12.77	13.24	090
25675		A	Treat wrist dislocation	4.66	4.88	5.46	4.14	4.52	0.62	10.16	10.74	9.42	9.80	090
25676		A	Treat wrist dislocation	8.09	NA	NA	6.28	7.05	1.34	NA	NA	15.71	16.48	090
25680		A	Treat wrist fracture	5.98	NA	NA	4.37	4.65	0.78	NA	NA	11.13	11.41	090
25685		A	Treat wrist fracture	9.89	NA	NA	6.70	7.53	1.60	NA	NA	18.19	19.02	090
25690		A	Treat wrist dislocation	5.49	NA	NA	4.82	5.33	0.88	NA	NA	11.19	11.70	090
25695		A	Treat wrist dislocation	8.33	NA	NA	6.19	6.87	1.32	NA	NA	15.84	16.52	090
25800		A	Fusion of wrist joint	9.87	NA	NA	7.28	8.64	1.57	NA	NA	18.72	20.08	090
25805		A	Fusion/graft of wrist joint	11.50	NA	NA	8.17	9.73	1.80	NA	NA	21.47	23.03	090
25810		A	Fusion/graft of wrist joint	11.67	NA	NA	8.56	9.57	1.67	NA	NA	21.90	22.91	090
25820		A	Fusion of hand bones	7.44	NA	NA	6.28	7.46	1.22	NA	NA	14.94	16.12	090
25825		A	Fuse hand bones with graft	9.44	NA	NA	7.56	8.81	1.41	NA	NA	18.41	19.66	090
25830		A	Fusion, radioulnar jnt/ulna	10.61	NA	NA	10.46	13.42	1.55	NA	NA	22.62	25.58	090
25900		A	Amputation of forearm	9.36	NA	NA	9.27	11.74	1.30	NA	NA	19.93	22.40	090
25905		A	Amputation of forearm	9.41	NA	NA	8.44	11.33	1.40	NA	NA	19.25	22.14	090
25907		A	Amputation follow-up surgery	7.91	NA	NA	7.81	10.77	1.10	NA	NA	16.82	19.78	090
25909		A	Amputation follow-up surgery	9.13	NA	NA	9.04	11.46	1.44	NA	NA	19.61	22.03	090
25915		A	Amputation of forearm	17.30	NA	NA	8.23	16.22	2.93	NA	NA	28.46	36.45	090
25920		A	Amputate hand at wrist	8.85	NA	NA	6.72	7.57	1.35	NA	NA	16.92	17.77	090
25922		A	Amputate hand at wrist	7.47	NA	NA	6.40	6.89	1.12	NA	NA	14.99	15.48	090
25924		A	Amputation follow-up surgery	8.63	NA	NA	6.71	7.75	1.32	NA	NA	16.66	17.70	090
25927		A	Amputation of hand	8.91	NA	NA	8.62	10.92	1.27	NA	NA	18.80	21.10	090
25929		A	Amputation follow-up surgery	7.64	NA	NA	5.42	5.76	1.14	NA	NA	14.20	14.54	090
25931		A	Amputation follow-up surgery	7.86	NA	NA	8.53	10.73	1.15	NA	NA	17.54	19.74	090
25999		C	Forearm or wrist surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
26010		A	Drainage of finger abscess	1.54	4.02	5.18	1.51	1.60	0.18	5.74	6.90	3.23	3.32	010
26011		A	Drainage of finger abscess	2.19	6.29	8.18	1.98	2.24	0.33	8.81	10.70	4.50	4.76	010
26020		A	Drain hand tendon sheath	4.90	NA	NA	4.75	5.20	0.73	NA	NA	10.38	10.83	090
26025		A	Drainage of palm bursa	4.93	NA	NA	4.46	4.96	0.76	NA	NA	10.15	10.65	090
26030		A	Drainage of palm bursa(s)	6.10	NA	NA	4.99	5.54	0.92	NA	NA	12.01	12.56	090
26034		A	Treat hand bone lesion	6.40	NA	NA	5.55	6.15	1.01	NA	NA	12.96	13.56	090
26035		A	Decompress fingers/hand	11.05	NA	NA	8.01	7.91	1.47	NA	NA	20.53	20.43	090
26037		A	Decompress fingers/hand	7.42	NA	NA	5.51	6.12	1.13	NA	NA	14.06	14.67	090
26040		A	Release palm contracture	3.33	NA	NA	3.60	3.94	0.53	NA	NA	7.46	7.80	090
26045		A	Release palm contracture	5.55	NA	NA	4.88	5.45	0.93	NA	NA	11.36	11.93	090
26055		A	Incise finger tendon sheath	2.94	9.07	13.03	3.83	3.91	0.43	12.44	16.40	7.20	7.28	090
26060		A	Incision of finger tendon	2.81	NA	NA	3.06	3.40	0.45	NA	NA	6.32	6.66	090
26070		A	Explore/treat hand joint	3.68	NA	NA	3.04	3.28	0.48	NA	NA	7.20	7.44	090
26075		A	Explore/treat finger joint	3.78	NA	NA	3.41	3.69	0.53	NA	NA	7.72	8.00	090
26080		A	Explore/treat finger joint	4.29	NA	NA	4.34	4.72	0.66	NA	NA	9.29	9.67	090
26100		A	Biopsy hand joint lining	3.66	NA	NA	3.56	3.99	0.54	NA	NA	7.76	8.19	090
26105		A	Biopsy finger joint lining	3.70	NA	NA	3.74	4.11	0.59	NA	NA	8.03	8.40	090
26110		A	Biopsy finger joint lining	3.52	NA	NA	3.60	3.93	0.53	NA	NA	7.65	7.98	090
26115		A	Removal hand lesion subcut	3.85	9.84	12.28	4.21	4.63	0.59	14.28	16.72	8.65	9.07	090
26116		A	Removal hand lesion, deep	5.52	NA	NA	5.29	5.82	0.84	NA	NA	11.65	12.18	090
26117		A	Remove tumor, hand/finger	8.54	NA	NA	6.21	6.85	1.26	NA	NA	16.01	16.65	090
26121		A	Release palm contracture	7.53	NA	NA	5.94	6.71	1.17	NA	NA	14.64	15.41	090
26123		A	Release palm contracture	10.53	NA	NA	8.23	8.70	1.43	NA	NA	20.19	20.66	090
26125		A	Release palm contracture	4.60	NA	NA	1.89	2.30	0.70	NA	NA	7.19	7.60	ZZZ
26130		A	Remove wrist joint lining	5.41	NA	NA	4.85	5.22	0.94	NA	NA	11.20	11.57	090
26135		A	Revise finger joint, each	6.95	NA	NA	5.49	6.22	1.07	NA	NA	13.51	14.24	090
26140		A	Revise finger joint, each	6.16	NA	NA	5.17	5.82	0.92	NA	NA	12.25	12.90	090
26145		A	Tendon excision, palm/finger	6.31	NA	NA	5.19	5.84	0.97	NA	NA	12.47	13.12	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
26160		A	Remove tendon sheath lesion	3.40	9.02	11.53	3.92	4.07	0.49	12.91	15.42	7.81	7.96	090
26170		A	Removal of palm tendon, each	4.76	NA	NA	4.36	4.80	0.69	NA	NA	9.81	10.25	090
26180		A	Removal of finger tendon	5.17	NA	NA	4.77	5.25	0.78	NA	NA	10.72	11.20	090
26185		A	Remove finger bone	6.24	NA	NA	5.81	5.98	0.81	NA	NA	12.86	13.03	090
26200		A	Remove hand bone lesion	5.50	NA	NA	4.58	5.16	0.88	NA	NA	10.96	11.54	090
26205		A	Remove/graft bone lesion	7.75	NA	NA	5.85	6.63	1.20	NA	NA	14.80	15.58	090
26210		A	Removal of finger lesion	5.14	NA	NA	4.74	5.25	0.79	NA	NA	10.67	11.18	090
26215		A	Remove/graft finger lesion	7.09	NA	NA	5.53	6.12	0.98	NA	NA	13.60	14.19	090
26230		A	Partial removal of hand bone	6.32	NA	NA	5.01	5.69	1.01	NA	NA	12.34	13.02	090
26235		A	Partial removal, finger bone	6.18	NA	NA	4.96	5.60	0.95	NA	NA	12.09	12.73	090
26236		A	Partial removal, finger bone	5.31	NA	NA	4.55	5.13	0.81	NA	NA	10.67	11.25	090
26250		A	Extensive hand surgery	7.54	NA	NA	5.21	6.13	1.07	NA	NA	13.82	14.74	090
26255		A	Extensive hand surgery	12.71	NA	NA	8.39	9.13	1.68	NA	NA	22.78	23.52	090
26260		A	Extensive finger surgery	7.02	NA	NA	5.36	5.98	1.01	NA	NA	13.39	14.01	090
26261		A	Extensive finger surgery	9.20	NA	NA	6.88	6.35	1.14	NA	NA	17.22	16.69	090
26262		A	Partial removal of finger	5.66	NA	NA	4.66	5.16	0.88	NA	NA	11.20	11.70	090
26320		A	Removal of implant from hand	3.97	NA	NA	3.78	4.18	0.59	NA	NA	8.34	8.74	090
26340		A	Manipulate finger w/anesth	2.50	NA	NA	4.60	4.81	0.39	NA	NA	7.49	7.70	090
26350		A	Repair finger/hand tendon	5.98	NA	NA	9.45	13.32	0.93	NA	NA	16.36	20.23	090
26352		A	Repair/graft hand tendon	7.67	NA	NA	10.04	14.03	1.13	NA	NA	18.84	22.83	090
26356		A	Repair finger/hand tendon	10.06	NA	NA	13.68	17.20	1.21	NA	NA	24.95	28.47	090
26357		A	Repair finger/hand tendon	8.57	NA	NA	10.26	14.29	1.33	NA	NA	20.16	24.19	090
26358		A	Repair/graft hand tendon	9.13	NA	NA	10.81	15.18	1.38	NA	NA	21.32	25.69	090
26370		A	Repair finger/hand tendon	7.10	NA	NA	9.50	13.71	1.12	NA	NA	17.72	21.93	090
26372		A	Repair/graft hand tendon	8.81	NA	NA	10.48	15.02	1.40	NA	NA	20.69	25.23	090
26373		A	Repair finger/hand tendon	8.21	NA	NA	10.16	14.57	1.23	NA	NA	19.60	24.01	090
26390		A	Revise hand/finger tendon	9.24	NA	NA	9.08	12.23	1.40	NA	NA	19.72	22.87	090
26392		A	Repair/graft hand tendon	10.30	NA	NA	11.02	15.30	1.57	NA	NA	22.89	27.17	090
26410		A	Repair hand tendon	4.62	NA	NA	7.56	10.85	0.73	NA	NA	12.91	16.20	090
26412		A	Repair/graft hand tendon	6.30	NA	NA	8.57	12.10	0.97	NA	NA	15.84	19.37	090
26415		A	Excision, hand/finger tendon	8.33	NA	NA	6.71	10.51	0.98	NA	NA	16.02	19.82	090
26416		A	Graft hand or finger tendon	9.36	NA	NA	8.70	13.12	0.79	NA	NA	18.85	23.27	090
26418		A	Repair finger tendon	4.24	NA	NA	8.07	11.26	0.67	NA	NA	12.98	16.17	090
26420		A	Repair/graft finger tendon	6.76	NA	NA	8.75	12.41	1.07	NA	NA	16.58	20.24	090
26426		A	Repair finger/hand tendon	6.14	NA	NA	8.52	12.00	0.95	NA	NA	15.61	19.09	090
26428		A	Repair/graft finger tendon	7.20	NA	NA	9.19	12.69	1.09	NA	NA	17.48	20.98	090
26432		A	Repair finger tendon	4.01	NA	NA	6.71	9.37	0.64	NA	NA	11.36	14.02	090
26433		A	Repair finger tendon	4.55	NA	NA	6.93	9.83	0.72	NA	NA	12.20	15.10	090
26434		A	Repair/graft finger tendon	6.08	NA	NA	7.87	10.62	0.93	NA	NA	14.88	17.63	090
26437		A	Realignment of tendons	5.81	NA	NA	7.71	10.61	0.89	NA	NA	14.41	17.31	090
26440		A	Release palm/finger tendon	5.01	NA	NA	8.43	12.18	0.75	NA	NA	14.19	17.94	090
26442		A	Release palm & finger tendon	9.40	NA	NA	11.61	14.86	1.20	NA	NA	22.21	25.46	090
26445		A	Release hand/finger tendon	4.30	NA	NA	8.10	11.88	0.65	NA	NA	13.05	16.83	090
26449		A	Release forearm/hand tendon	8.24	NA	NA	11.30	14.65	1.06	NA	NA	20.60	23.95	090
26450		A	Incision of palm tendon	3.66	NA	NA	5.11	6.78	0.59	NA	NA	9.36	11.03	090
26455		A	Incision of finger tendon	3.63	NA	NA	5.07	6.73	0.58	NA	NA	9.28	10.94	090
26460		A	Incise hand/finger tendon	3.45	NA	NA	5.01	6.61	0.55	NA	NA	9.01	10.61	090
26471		A	Fusion of finger tendons	5.72	NA	NA	7.66	10.35	0.88	NA	NA	14.26	16.95	090
26474		A	Fusion of finger tendons	5.31	NA	NA	7.48	10.41	0.76	NA	NA	13.55	16.48	090
26476		A	Tendon lengthening	5.17	NA	NA	7.39	10.05	0.79	NA	NA	13.35	16.01	090
26477		A	Tendon shortening	5.14	NA	NA	7.47	10.16	0.81	NA	NA	13.42	16.11	090
26478		A	Lengthening of hand tendon	5.79	NA	NA	7.67	10.80	0.90	NA	NA	14.36	17.49	090
26479		A	Shortening of hand tendon	5.73	NA	NA	7.66	10.59	0.92	NA	NA	14.31	17.24	090
26480		A	Transplant hand tendon	6.68	NA	NA	9.57	13.67	1.02	NA	NA	17.27	21.37	090
26483		A	Transplant/graft hand tendon	8.28	NA	NA	10.22	14.18	1.26	NA	NA	19.76	23.72	090
26485		A	Transplant palm tendon	7.69	NA	NA	9.94	14.01	1.15	NA	NA	18.78	22.85	090

26489			A	Transplant/graft palm tendon	9.66	NA	NA	10.29	11.62	1.26	NA	NA	21.21	22.54	090
26490			A	Revise thumb tendon	8.40	NA	NA	8.89	11.84	1.21	NA	NA	18.50	21.45	090
26492			A	Tendon transfer with graft	9.61	NA	NA	9.77	12.64	1.40	NA	NA	20.78	23.65	090
26494			A	Hand tendon/muscle transfer	8.46	NA	NA	9.01	11.98	1.28	NA	NA	18.75	21.72	090
26496			A	Revise thumb tendon	9.58	NA	NA	9.46	12.29	1.45	NA	NA	20.49	23.32	090
26497			A	Finger tendon transfer	9.56	NA	NA	9.42	12.53	1.41	NA	NA	20.39	23.50	090
26498			A	Finger tendon transfer	13.98	NA	NA	11.48	14.99	2.10	NA	NA	27.56	31.07	090
26499			A	Revision of finger	8.97	NA	NA	8.72	11.96	1.35	NA	NA	19.04	22.28	090
26500			A	Hand tendon reconstruction	5.95	NA	NA	7.75	10.52	0.90	NA	NA	14.60	17.37	090
26502			A	Hand tendon reconstruction	7.13	NA	NA	8.34	11.10	1.13	NA	NA	16.60	19.36	090
26504			A	Hand tendon reconstruction	7.46	NA	NA	8.59	11.58	1.24	NA	NA	17.29	20.28	090
26508			A	Release thumb contracture	6.00	NA	NA	7.75	10.70	0.98	NA	NA	14.73	17.68	090
26510			A	Thumb tendon transfer	5.42	NA	NA	7.56	10.40	0.79	NA	NA	13.77	16.61	090
26516			A	Fusion of knuckle joint	7.14	NA	NA	8.22	11.23	1.10	NA	NA	16.46	19.47	090
26517			A	Fusion of knuckle joints	8.88	NA	NA	9.21	12.43	1.41	NA	NA	19.50	22.72	090
26518			A	Fusion of knuckle joints	9.07	NA	NA	9.24	12.35	1.35	NA	NA	19.66	22.77	090
26520			A	Release knuckle contracture	5.29	NA	NA	8.81	12.62	0.80	NA	NA	14.90	18.71	090
26525			A	Release finger contracture	5.32	NA	NA	8.82	12.68	0.81	NA	NA	14.95	18.81	090
26530			A	Revise knuckle joint	6.68	NA	NA	5.43	5.96	1.04	NA	NA	13.15	13.68	090
26531			A	Revise knuckle with implant	7.90	NA	NA	6.15	6.88	1.17	NA	NA	15.22	15.95	090
26535			A	Revise finger joint	5.23	NA	NA	4.04	3.82	0.71	NA	NA	9.98	9.76	090
26536			A	Revise/implant finger joint	6.36	NA	NA	9.14	9.52	0.96	NA	NA	16.46	16.84	090
26540			A	Repair hand joint	6.42	NA	NA	7.98	10.90	0.99	NA	NA	15.39	18.31	090
26541			A	Repair hand joint with graft	8.61	NA	NA	9.04	12.30	1.28	NA	NA	18.93	22.19	090
26542			A	Repair hand joint with graft	6.77	NA	NA	8.13	11.06	1.02	NA	NA	15.92	18.85	090
26545			A	Reconstruct finger joint	6.91	NA	NA	8.32	11.18	1.05	NA	NA	16.28	19.14	090
26546			A	Repair nonunion hand	10.41	NA	NA	11.42	14.13	1.44	NA	NA	23.27	25.98	090
26548			A	Reconstruct finger joint	8.02	NA	NA	8.78	11.83	1.20	NA	NA	18.00	21.05	090
26550			A	Construct thumb replacement	21.46	NA	NA	15.40	17.04	2.45	NA	NA	39.31	40.95	090
26551			A	Great toe-hand transfer	48.09	NA	NA	21.71	29.76	7.96	NA	NA	77.76	85.81	090
26553			A	Single transfer, toe-hand	47.78	NA	NA	20.29	22.08	2.41	NA	NA	70.48	72.27	090
26554			A	Double transfer, toe-hand	56.57	NA	NA	19.56	33.04	9.41	NA	NA	85.54	99.02	090
26555			A	Positional change of finger	16.86	NA	NA	13.88	17.11	2.48	NA	NA	33.22	36.45	090
26556			A	Toe joint transfer	49.27	NA	NA	17.86	29.46	2.57	NA	NA	69.70	81.30	090
26560			A	Repair of web finger	5.37	NA	NA	7.09	9.12	0.85	NA	NA	13.31	15.34	090
26561			A	Repair of web finger	10.90	NA	NA	9.41	11.61	1.45	NA	NA	21.76	23.96	090
26562			A	Repair of web finger	16.30	NA	NA	13.88	16.33	2.23	NA	NA	32.41	34.86	090
26565			A	Correct metacarpal flaw	6.73	NA	NA	7.90	10.98	1.00	NA	NA	15.63	18.71	090
26567			A	Correct finger deformity	6.81	NA	NA	8.15	11.00	1.04	NA	NA	16.00	18.85	090
26568			A	Lengthen metacarpal/finger	9.07	NA	NA	10.13	14.11	1.49	NA	NA	20.69	24.67	090
26580			A	Repair hand deformity	19.40	NA	NA	11.01	12.98	2.28	NA	NA	32.69	34.66	090
26587			A	Reconstruct extra finger	14.28	NA	NA	8.43	9.02	1.53	NA	NA	24.24	24.83	090
26590			A	Repair finger deformity	18.43	NA	NA	10.52	13.09	2.77	NA	NA	31.72	34.29	090
26591			A	Repair muscles of hand	3.25	NA	NA	6.26	8.78	0.48	NA	NA	9.99	12.51	090
26593			A	Release muscles of hand	5.30	NA	NA	7.73	10.28	0.78	NA	NA	13.81	16.36	090
26596			A	Excision constricting tissue	8.94	NA	NA	7.48	8.49	1.43	NA	NA	17.85	18.86	090
26600			A	Treat metacarpal fracture	2.40	3.83	3.67	3.48	2.86	0.30	6.53	6.37	6.18	5.56	090
26605			A	Treat metacarpal fracture	2.85	4.09	4.44	3.50	3.61	0.49	7.43	7.78	6.84	6.95	090
26607			A	Treat metacarpal fracture	5.35	NA	NA	4.88	5.92	0.87	NA	NA	11.10	12.14	090
26608			A	Treat metacarpal fracture	5.35	NA	NA	5.25	6.00	0.88	NA	NA	11.48	12.23	090
26615			A	Treat metacarpal fracture	5.32	NA	NA	4.75	5.16	0.86	NA	NA	10.93	11.34	090
26641			A	Treat thumb dislocation	3.93	4.17	4.47	3.52	3.53	0.39	8.49	8.79	7.84	7.85	090
26645			A	Treat thumb fracture	4.40	4.62	5.03	3.93	4.13	0.67	9.69	10.10	9.00	9.20	090
26650			A	Treat thumb fracture	5.71	NA	NA	5.62	6.42	0.94	NA	NA	12.27	13.07	090
26665			A	Treat thumb fracture	7.65	NA	NA	5.87	6.43	0.90	NA	NA	14.42	14.98	090
26670			A	Treat hand dislocation	3.68	3.55	4.08	2.96	2.95	0.39	7.62	8.15	7.03	7.02	090
26675			A	Treat hand dislocation	4.63	4.85	5.32	4.15	4.39	0.77	10.25	10.72	9.55	9.79	090
26676			A	Pin hand dislocation	5.51	NA	NA	5.57	6.41	0.91	NA	NA	11.99	12.83	090
26685			A	Treat hand dislocation	7.03	NA	NA	5.44	5.97	1.09	NA	NA	13.56	14.09	090
26686			A	Treat hand dislocation	7.99	NA	NA	6.12	6.71	1.24	NA	NA	15.35	15.94	090
26700			A	Treat knuckle dislocation	3.68	3.32	3.65	2.95	2.88	0.35	7.35	7.68	6.98	6.91	090
26705			A	Treat knuckle dislocation	4.18	4.82	5.20	4.10	4.25	0.66	9.66	10.04	8.94	9.09	090
26706			A	Pin knuckle dislocation	5.11	NA	NA	4.69	4.99	0.81	NA	NA	10.61	10.91	090
26715			A	Treat knuckle dislocation	5.73	NA	NA	4.92	5.36	0.91	NA	NA	11.56	12.00	090
26720			A	Treat finger fracture, each	1.66	2.59	2.73	2.31	2.12	0.24	4.49	4.63	4.21	4.02	090
26725			A	Treat finger fracture, each	3.33	4.10	4.60	3.42	3.48	0.53	7.96	8.46	7.28	7.34	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
26727		A	Treat finger fracture, each	5.22	NA	NA	5.21	5.98	0.84	NA	NA	11.27	12.04	090
26735		A	Treat finger fracture, each	5.97	NA	NA	5.00	5.41	0.95	NA	NA	11.92	12.33	090
26740		A	Treat finger fracture, each	1.94	2.95	3.09	2.66	2.69	0.31	5.20	5.34	4.91	4.94	090
26742		A	Treat finger fracture, each	3.84	4.33	4.83	3.62	3.82	0.58	8.75	9.25	8.04	8.24	090
26746		A	Treat finger fracture, each	5.80	NA	NA	4.96	5.41	0.91	NA	NA	11.67	12.12	090
26750		A	Treat finger fracture, each	1.70	2.25	2.42	2.26	2.07	0.22	4.17	4.34	4.18	3.99	090
26755		A	Treat finger fracture, each	3.10	3.79	4.26	2.98	3.00	0.42	7.31	7.78	6.50	6.52	090
26756		A	Pin finger fracture, each	4.38	NA	NA	4.86	5.51	0.71	NA	NA	9.95	10.60	090
26765		A	Treat finger fracture, each	4.16	NA	NA	4.02	4.30	0.66	NA	NA	8.84	9.12	090
26770		A	Treat finger dislocation	3.02	2.91	3.30	2.53	2.44	0.27	6.20	6.59	5.82	5.73	090
26775		A	Treat finger dislocation	3.70	4.54	5.03	3.81	3.81	0.54	8.78	9.27	8.05	8.05	090
26776		A	Pin finger dislocation	4.79	NA	NA	5.01	5.75	0.77	NA	NA	10.57	11.31	090
26785		A	Treat finger dislocation	4.20	NA	NA	4.08	4.42	0.68	NA	NA	8.96	9.30	090
26820		A	Thumb fusion with graft	8.25	NA	NA	8.71	12.12	1.30	NA	NA	18.26	21.67	090
26841		A	Fusion of thumb	7.12	NA	NA	8.69	12.10	1.18	NA	NA	16.99	20.40	090
26842		A	Thumb fusion with graft	8.29	NA	NA	8.95	12.27	1.32	NA	NA	18.56	21.88	090
26843		A	Fusion of hand joint	7.60	NA	NA	8.17	11.31	1.15	NA	NA	16.92	20.06	090
26844		A	Fusion/graft of hand joint	8.78	NA	NA	9.14	12.31	1.33	NA	NA	19.25	22.42	090
26850		A	Fusion of knuckle	6.96	NA	NA	8.29	11.22	1.06	NA	NA	16.31	19.24	090
26852		A	Fusion of knuckle with graft	8.51	NA	NA	9.12	11.95	1.22	NA	NA	18.85	21.68	090
26860		A	Fusion of finger joint	4.68	NA	NA	7.54	10.28	0.73	NA	NA	12.95	15.69	090
26861		A	Fusion of finger jnt, add-on	1.74	NA	NA	0.71	0.88	0.27	NA	NA	2.72	2.89	ZZZ
26862		A	Fusion/graft of finger joint	7.36	NA	NA	8.68	11.43	1.10	NA	NA	17.14	19.89	090
26863		A	Fuse/graft added joint	3.89	NA	NA	1.58	1.98	0.56	NA	NA	6.03	6.43	ZZZ
26910		A	Amputate metacarpal bone	7.59	NA	NA	8.30	10.49	1.16	NA	NA	17.05	19.24	090
26951		A	Amputation of finger/thumb	5.75	NA	NA	8.39	9.71	0.71	NA	NA	14.85	16.17	090
26952		A	Amputation of finger/thumb	6.30	NA	NA	7.94	10.73	0.95	NA	NA	15.19	17.98	090
26989		C	Hand/finger surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
26990		A	Drainage of pelvis lesion	7.77	NA	NA	6.29	6.98	1.22	NA	NA	15.28	15.97	090
26991		A	Drainage of pelvis bursa	6.91	8.60	10.52	4.85	5.29	1.11	16.62	18.54	12.87	13.31	090
26992		A	Drainage of bone lesion	13.30	NA	NA	8.64	9.95	2.16	NA	NA	24.10	25.41	090
27000		A	Incision of hip tendon	5.61	NA	NA	4.55	5.10	0.98	NA	NA	11.14	11.69	090
27001		A	Incision of hip tendon	6.99	NA	NA	5.23	5.88	1.24	NA	NA	13.46	14.11	090
27003		A	Incision of hip tendon	7.63	NA	NA	5.82	6.32	1.12	NA	NA	14.57	15.07	090
27005		A	Incision of hip tendon	9.89	NA	NA	6.79	7.56	1.72	NA	NA	18.40	19.17	090
27006		A	Incision of hip tendons	9.91	NA	NA	6.84	7.70	1.69	NA	NA	18.44	19.30	090
27025		A	Incision of hip/thigh fascia	12.57	NA	NA	8.10	8.44	1.84	NA	NA	22.51	22.85	090
27030		A	Drainage of hip joint	13.47	NA	NA	8.10	9.26	2.26	NA	NA	23.83	24.99	090
27033		A	Exploration of hip joint	13.91	NA	NA	8.45	9.55	2.32	NA	NA	24.68	25.78	090
27035		A	Denervation of hip joint	17.14	NA	NA	9.53	10.81	2.15	NA	NA	28.82	30.10	090
27036		A	Excision of hip joint/muscle	14.10	NA	NA	8.98	9.75	2.26	NA	NA	25.34	26.11	090
27040		A	Biopsy of soft tissues	2.87	5.14	5.21	1.81	1.96	0.27	8.28	8.35	4.95	5.10	010
27041		A	Biopsy of soft tissues	10.00	NA	NA	5.79	6.43	1.35	NA	NA	17.14	17.78	090
27047		A	Remove hip/pelvis lesion	7.44	7.12	7.11	4.57	4.72	1.03	15.59	15.58	13.04	13.19	090
27048		A	Remove hip/pelvis lesion	6.36	NA	NA	4.65	4.76	0.92	NA	NA	11.93	12.04	090
27049		A	Remove tumor, hip/pelvis	15.12	NA	NA	8.24	8.36	2.06	NA	NA	25.42	25.54	090
27050		A	Biopsy of sacroiliac joint	4.59	NA	NA	3.79	4.26	0.60	NA	NA	8.98	9.45	090
27052		A	Biopsy of hip joint	7.21	NA	NA	5.68	5.83	1.08	NA	NA	13.97	14.12	090
27054		A	Removal of hip joint lining	9.01	NA	NA	6.49	7.13	1.47	NA	NA	16.97	17.61	090
27060		A	Removal of ischial bursa	5.72	NA	NA	4.38	4.37	0.80	NA	NA	10.90	10.89	090
27062		A	Remove femur lesion/bursa	5.60	NA	NA	4.63	5.05	0.93	NA	NA	11.16	11.58	090
27065		A	Removal of hip bone lesion	6.37	NA	NA	5.12	5.36	1.01	NA	NA	12.50	12.74	090
27066		A	Removal of hip bone lesion	10.97	NA	NA	7.46	8.20	1.79	NA	NA	20.22	20.96	090
27067		A	Remove/graft hip bone lesion	14.47	NA	NA	8.80	10.20	1.84	NA	NA	25.11	26.51	090
27070		A	Partial removal of hip bone	11.36	NA	NA	7.94	8.83	1.74	NA	NA	21.04	21.93	090
27071		A	Partial removal of hip bone	12.16	NA	NA	8.54	9.73	1.92	NA	NA	22.62	23.81	090

27075			A	Extensive hip surgery	36.71	NA	NA	16.62	18.56	5.64	NA	NA	58.97	60.91	090
27076			A	Extensive hip surgery	24.17	NA	NA	12.75	14.07	3.70	NA	NA	40.62	41.94	090
27077			A	Extensive hip surgery	42.48	NA	NA	19.99	21.99	6.12	NA	NA	68.59	70.59	090
27078			A	Extensive hip surgery	14.44	NA	NA	8.79	9.65	2.22	NA	NA	25.45	26.31	090
27079			A	Extensive hip surgery	14.81	NA	NA	7.52	9.04	1.94	NA	NA	24.27	25.79	090
27080			A	Removal of tail bone	6.74	NA	NA	4.72	4.80	0.93	NA	NA	12.39	12.47	090
27086			A	Remove hip foreign body	1.87	3.78	4.36	1.54	1.75	0.25	5.90	6.48	3.66	3.87	010
27087			A	Remove hip foreign body	8.65	NA	NA	5.66	6.41	1.35	NA	NA	15.66	16.41	090
27090			A	Removal of hip prosthesis	11.49	NA	NA	7.44	8.45	1.94	NA	NA	20.87	21.88	090
27091			A	Removal of hip prosthesis	24.07	NA	NA	13.05	13.76	3.84	NA	NA	40.96	41.67	090
27093			A	Injection for hip x-ray	1.30	3.09	4.12	0.44	0.47	0.13	4.52	5.55	1.87	1.90	000
27095			A	Injection for hip x-ray	1.50	3.73	5.22	0.50	0.52	0.14	5.37	6.86	2.14	2.16	000
27096			A	Inject sacroiliac joint	1.40	2.54	3.90	0.33	0.33	0.08	4.02	5.38	1.81	1.81	000
27097			A	Revision of hip tendon	9.09	NA	NA	6.35	6.40	1.57	NA	NA	17.01	17.06	090
27098			A	Transfer tendon to pelvis	9.12	NA	NA	4.96	6.51	0.95	NA	NA	15.03	16.58	090
27100			A	Transfer of abdominal muscle	11.12	NA	NA	7.39	8.34	1.85	NA	NA	20.36	21.31	090
27105			A	Transfer of spinal muscle	11.81	NA	NA	7.93	8.85	1.72	NA	NA	21.46	22.38	090
27110			A	Transfer of iliopsoas muscle	13.54	NA	NA	8.61	8.99	2.18	NA	NA	24.33	24.71	090
27111			A	Transfer of iliopsoas muscle	12.37	NA	NA	8.13	8.88	1.94	NA	NA	22.44	23.19	090
27120			A	Reconstruction of hip socket	19.00	NA	NA	10.79	11.58	3.08	NA	NA	32.87	33.66	090
27122			A	Reconstruction of hip socket	15.86	NA	NA	9.49	10.65	2.61	NA	NA	27.96	29.12	090
27125			A	Partial hip replacement	16.39	NA	NA	9.69	10.39	2.54	NA	NA	28.62	29.32	090
27130			A	Total hip arthroplasty	17.40	NA	NA	10.24	12.54	3.50	NA	NA	31.14	33.44	090
27132			A	Total hip arthroplasty	25.41	NA	NA	13.57	15.12	4.04	NA	NA	43.02	44.57	090
27134			A	Revise hip joint replacement	30.07	NA	NA	14.86	17.06	4.94	NA	NA	49.87	52.07	090
27137			A	Revise hip joint replacement	22.49	NA	NA	11.85	13.41	3.67	NA	NA	38.01	39.57	090
27138			A	Revise hip joint replacement	23.49	NA	NA	12.24	13.85	3.84	NA	NA	39.57	41.18	090
27140			A	Transplant femur ridge	12.58	NA	NA	7.81	9.01	2.11	NA	NA	22.50	23.70	090
27146			A	Incision of hip bone	18.64	NA	NA	10.74	11.78	2.96	NA	NA	32.34	33.38	090
27147			A	Revision of hip bone	21.79	NA	NA	11.94	12.92	3.57	NA	NA	37.30	38.28	090
27151			A	Incision of hip bones	23.84	NA	NA	12.44	9.07	3.91	NA	NA	40.19	36.82	090
27156			A	Revision of hip bones	25.95	NA	NA	13.54	15.43	4.21	NA	NA	43.70	45.59	090
27158			A	Revision of pelvis	20.79	NA	NA	7.19	10.03	3.16	NA	NA	31.14	33.98	090
27161			A	Incision of neck of femur	17.64	NA	NA	10.42	11.68	2.94	NA	NA	31.00	32.26	090
27165			A	Incision/fixation of femur	19.97	NA	NA	11.73	12.62	3.10	NA	NA	34.80	35.69	090
27170			A	Repair/graft femur head/neck	17.40	NA	NA	9.82	10.93	2.81	NA	NA	30.03	31.14	090
27175			A	Treat slipped epiphysis	9.23	NA	NA	5.80	6.45	1.46	NA	NA	16.49	17.14	090
27176			A	Treat slipped epiphysis	12.69	NA	NA	8.26	8.82	2.22	NA	NA	23.17	23.73	090
27177			A	Treat slipped epiphysis	15.84	NA	NA	9.69	10.59	2.61	NA	NA	28.14	29.04	090
27178			A	Treat slipped epiphysis	12.69	NA	NA	8.26	8.38	2.08	NA	NA	23.03	23.15	090
27179			A	Revise head/neck of femur	13.74	NA	NA	8.56	9.63	2.25	NA	NA	24.55	25.62	090
27181			A	Treat slipped epiphysis	15.90	NA	NA	9.83	10.11	1.57	NA	NA	27.30	27.58	090
27185			A	Revision of femur epiphysis	9.59	NA	NA	6.69	7.31	2.39	NA	NA	18.67	19.29	090
27187			A	Reinforce hip bones	14.00	NA	NA	8.72	9.92	2.37	NA	NA	25.09	26.29	090
27193			A	Treat pelvic ring fracture	5.92	4.65	4.98	4.78	5.01	0.96	11.53	11.86	11.66	11.89	090
27194			A	Treat pelvic ring fracture	10.00	NA	NA	6.62	7.39	1.65	NA	NA	18.27	19.04	090
27200			A	Treat tail bone fracture	1.84	2.09	2.19	2.24	2.17	0.28	4.21	4.31	4.36	4.29	090
27202			A	Treat tail bone fracture	7.21	NA	NA	11.28	15.47	1.06	NA	NA	19.55	23.74	090
27215			A	Treat pelvic fracture(s)	10.39	NA	NA	6.53	6.94	1.97	NA	NA	18.89	19.30	090
27216			A	Treat pelvic ring fracture	15.65	NA	NA	9.25	9.51	2.63	NA	NA	27.53	27.79	090
27217			A	Treat pelvic ring fracture	14.57	NA	NA	8.70	9.78	2.41	NA	NA	25.68	26.76	090
27218			A	Treat pelvic ring fracture	20.85	NA	NA	11.41	11.40	3.48	NA	NA	35.74	35.73	090
27220			A	Treat hip socket fracture	6.65	5.28	5.61	5.18	5.52	1.07	13.00	13.33	12.90	13.24	090
27222			A	Treat hip socket fracture	13.88	NA	NA	8.50	9.60	2.19	NA	NA	24.57	25.67	090
27226			A	Treat hip wall fracture	15.37	NA	NA	9.00	8.11	2.48	NA	NA	26.85	25.96	090
27227			A	Treat hip fracture(s)	25.13	NA	NA	13.44	14.91	4.05	NA	NA	42.62	44.09	090
27228			A	Treat hip fracture(s)	29.05	NA	NA	15.03	16.97	4.66	NA	NA	48.74	50.68	090
27230			A	Treat thigh fracture	5.61	4.98	5.38	4.91	5.05	0.95	11.54	11.94	11.47	11.61	090
27232			A	Treat thigh fracture	11.62	NA	NA	6.00	6.88	1.85	NA	NA	19.47	20.35	090
27235			A	Treat thigh fracture	12.80	NA	NA	8.05	9.10	2.11	NA	NA	22.96	24.01	090
27236			A	Treat thigh fracture	14.54	NA	NA	9.10	10.56	2.71	NA	NA	26.35	27.81	090
27238			A	Treat thigh fracture	5.57	NA	NA	4.69	5.03	0.89	NA	NA	11.15	11.49	090
27240			A	Treat thigh fracture	13.56	NA	NA	8.10	9.13	2.16	NA	NA	23.82	24.85	090
27244			A	Treat thigh fracture	17.00	NA	NA	9.71	10.90	2.77	NA	NA	29.48	30.67	090
27245			A	Treat thigh fracture	21.01	NA	NA	11.46	13.17	3.52	NA	NA	35.99	37.70	090
27246			A	Treat thigh fracture	4.70	3.93	4.33	3.97	4.31	0.81	9.44	9.84	9.48	9.82	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
27248		A	Treat thigh fracture	10.73	NA	NA	7.01	7.91	1.81	NA	NA	19.55	20.45	090
27250		A	Treat hip dislocation	7.12	NA	NA	4.27	4.53	0.62	NA	NA	12.01	12.27	090
27252		A	Treat hip dislocation	10.85	NA	NA	6.52	7.20	1.66	NA	NA	19.03	19.71	090
27253		A	Treat hip dislocation	13.38	NA	NA	8.26	9.40	2.24	NA	NA	23.88	25.02	090
27254		A	Treat hip dislocation	18.71	NA	NA	10.56	11.66	3.17	NA	NA	32.44	33.54	090
27256		A	Treat hip dislocation	4.23	2.39	3.24	1.39	1.91	0.46	7.08	7.93	6.08	6.60	010
27257		A	Treat hip dislocation	5.33	NA	NA	2.57	2.75	0.69	NA	NA	8.59	8.77	010
27258		A	Treat hip dislocation	15.95	NA	NA	9.45	10.52	2.64	NA	NA	28.04	29.11	090
27259		A	Treat hip dislocation	22.95	NA	NA	12.91	13.82	3.74	NA	NA	39.60	40.51	090
27265		A	Treat hip dislocation	5.04	NA	NA	3.98	4.59	0.63	NA	NA	9.65	10.26	090
27266		A	Treat hip dislocation	7.60	NA	NA	5.55	6.14	1.29	NA	NA	14.44	15.03	090
27275		A	Manipulation of hip joint	2.27	NA	NA	1.89	2.05	0.39	NA	NA	4.55	4.71	010
27280		A	Fusion of sacroiliac joint	14.39	NA	NA	9.05	9.96	2.53	NA	NA	25.97	26.88	090
27282		A	Fusion of pubic bones	11.62	NA	NA	7.83	7.96	1.86	NA	NA	21.31	21.44	090
27284		A	Fusion of hip joint	24.85	NA	NA	12.86	14.29	3.92	NA	NA	41.63	43.06	090
27286		A	Fusion of hip joint	24.89	NA	NA	13.47	15.21	3.12	NA	NA	41.48	43.22	090
27290		A	Amputation of leg at hip	24.27	NA	NA	12.53	13.68	3.43	NA	NA	40.23	41.38	090
27295		A	Amputation of leg at hip	19.46	NA	NA	9.79	10.93	2.95	NA	NA	32.20	33.34	090
27299		C	Pelvis/hip joint surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
27301		A	Drain thigh/knee lesion	6.60	8.23	9.61	4.66	5.02	1.04	15.87	17.25	12.30	12.66	090
27303		A	Drainage of bone lesion	8.45	NA	NA	6.07	6.75	1.43	NA	NA	15.95	16.63	090
27305		A	Incise thigh tendon & fascia	6.03	NA	NA	4.63	5.04	1.01	NA	NA	11.67	12.08	090
27306		A	Incision of thigh tendon	4.61	NA	NA	4.07	4.56	0.85	NA	NA	9.53	10.02	090
27307		A	Incision of thigh tendons	5.91	NA	NA	4.81	5.24	1.04	NA	NA	11.76	12.19	090
27310		A	Exploration of knee joint	9.80	NA	NA	6.83	7.39	1.61	NA	NA	18.24	18.80	090
27315		A	Partial removal, thigh nerve	7.02	NA	NA	5.44	5.07	1.09	NA	NA	13.55	13.18	090
27320		A	Partial removal, thigh nerve	6.29	NA	NA	4.75	5.11	1.06	NA	NA	12.10	12.46	090
27323		A	Biopsy, thigh soft tissues	2.28	4.09	3.66	1.87	1.88	0.24	6.61	6.18	4.39	4.40	010
27324		A	Biopsy, thigh soft tissues	4.89	NA	NA	3.85	4.10	0.75	NA	NA	9.49	9.74	090
27327		A	Removal of thigh lesion	4.46	6.08	6.01	3.61	3.69	0.64	11.18	11.11	8.71	8.79	090
27328		A	Removal of thigh lesion	5.56	NA	NA	4.07	4.30	0.84	NA	NA	10.47	10.70	090
27329		A	Remove tumor, thigh/knee	15.60	NA	NA	8.58	8.91	2.14	NA	NA	26.32	26.65	090
27330		A	Biopsy, knee joint lining	4.96	NA	NA	4.12	4.46	0.86	NA	NA	9.94	10.28	090
27331		A	Explore/treat knee joint	5.87	NA	NA	4.84	5.35	1.02	NA	NA	11.73	12.24	090
27332		A	Removal of knee cartilage	8.26	NA	NA	6.15	6.88	1.43	NA	NA	15.84	16.57	090
27333		A	Removal of knee cartilage	7.35	NA	NA	5.73	6.44	1.26	NA	NA	14.34	15.05	090
27334		A	Remove knee joint lining	8.99	NA	NA	6.49	7.18	1.51	NA	NA	16.99	17.68	090
27335		A	Remove knee joint lining	10.35	NA	NA	7.06	7.93	1.74	NA	NA	19.15	20.02	090
27340		A	Removal of kneecap bursa	4.17	NA	NA	4.05	4.43	0.72	NA	NA	8.94	9.32	090
27345		A	Removal of knee cyst	5.91	NA	NA	4.89	5.44	1.00	NA	NA	11.80	12.35	090
27347		A	Remove knee cyst	6.52	NA	NA	5.26	5.38	0.98	NA	NA	12.76	12.88	090
27350		A	Removal of kneecap	8.46	NA	NA	6.29	7.00	1.41	NA	NA	16.16	16.87	090
27355		A	Remove femur lesion	7.82	NA	NA	5.87	6.55	1.32	NA	NA	15.01	15.69	090
27356		A	Remove femur lesion/graft	9.89	NA	NA	6.86	7.60	1.65	NA	NA	18.40	19.14	090
27357		A	Remove femur lesion/graft	10.93	NA	NA	7.54	8.41	1.95	NA	NA	20.42	21.29	090
27358		A	Remove femur lesion/fixation	4.73	NA	NA	1.90	2.37	0.82	NA	NA	7.45	7.92	ZZZ
27360		A	Partial removal, leg bone(s)	11.26	NA	NA	8.13	9.20	1.83	NA	NA	21.22	22.29	090
27365		A	Extensive leg surgery	17.85	NA	NA	10.52	11.39	2.79	NA	NA	31.16	32.03	090
27370		A	Injection for knee x-ray	0.96	2.62	3.50	0.33	0.32	0.08	3.86	4.54	1.37	1.36	000
27372		A	Removal of foreign body	5.06	8.34	9.62	4.05	4.53	0.84	14.24	15.52	9.95	10.43	090
27380		A	Repair of kneecap tendon	7.27	NA	NA	6.08	6.98	1.24	NA	NA	14.59	15.49	090
27381		A	Repair/graft kneecap tendon	10.56	NA	NA	7.56	8.71	1.79	NA	NA	19.91	21.06	090
27385		A	Repair of thigh muscle	7.93	NA	NA	6.36	7.31	1.36	NA	NA	15.65	16.60	090
27386		A	Repair/graft of thigh muscle	10.90	NA	NA	7.98	9.13	1.85	NA	NA	20.73	21.88	090
27390		A	Incision of thigh tendon	5.38	NA	NA	4.57	4.98	0.92	NA	NA	10.87	11.28	090
27391		A	Incision of thigh tendons	7.31	NA	NA	5.52	6.30	1.23	NA	NA	14.06	14.84	090

27392		A	Incision of thigh tendons	9.43	NA	NA	6.72	7.37	1.57	NA	NA	17.72	18.37	090
27393		A	Lengthening of thigh tendon	6.44	NA	NA	5.01	5.63	1.10	NA	NA	12.55	13.17	090
27394		A	Lengthening of thigh tendons	8.61	NA	NA	6.19	6.96	1.47	NA	NA	16.27	17.04	090
27395		A	Lengthening of thigh tendons	12.01	NA	NA	7.99	8.99	2.04	NA	NA	22.04	23.04	090
27396		A	Transplant of thigh tendon	7.97	NA	NA	5.93	6.73	1.34	NA	NA	15.24	16.04	090
27397		A	Transplants of thigh tendons	12.38	NA	NA	8.42	8.89	1.82	NA	NA	22.62	23.09	090
27400		A	Revise thigh muscles/tendons	9.13	NA	NA	6.17	6.98	1.31	NA	NA	16.61	17.42	090
27403		A	Repair of knee cartilage	8.44	NA	NA	6.09	6.91	1.44	NA	NA	15.97	16.79	090
27405		A	Repair of knee ligament	8.88	NA	NA	6.44	7.23	1.51	NA	NA	16.83	17.62	090
27407		A	Repair of knee ligament	10.62	NA	NA	6.67	7.91	1.78	NA	NA	19.07	20.31	090
27409		A	Repair of knee ligaments	13.48	NA	NA	8.44	9.57	2.24	NA	NA	24.16	25.29	090
27412		A	Autochondrocyte implant knee	24.43	NA	NA	13.66	14.52	4.35	NA	NA	42.44	43.30	090
27415		A	Osteochondral knee allograft	19.69	NA	NA	11.86	12.38	4.35	NA	NA	35.90	36.42	090
27418		A	Repair degenerated kneecap	11.37	NA	NA	7.61	8.58	1.88	NA	NA	20.86	21.83	090
27420		A	Revision of unstable kneecap	10.06	NA	NA	6.96	7.82	1.71	NA	NA	18.73	19.59	090
27422		A	Revision of unstable kneecap	10.01	NA	NA	6.91	7.82	1.70	NA	NA	18.62	19.53	090
27424		A	Revision/removal of kneecap	10.04	NA	NA	6.92	7.80	1.70	NA	NA	18.66	19.54	090
27425		A	Lat retinacular release open	5.21	NA	NA	4.71	5.32	0.90	NA	NA	10.82	11.43	090
27427		A	Reconstruction, knee	9.59	NA	NA	6.70	7.53	1.63	NA	NA	17.92	18.75	090
27428		A	Reconstruction, knee	15.23	NA	NA	10.13	10.96	2.42	NA	NA	27.78	28.61	090
27429		A	Reconstruction, knee	17.12	NA	NA	11.33	12.14	2.70	NA	NA	31.15	31.96	090
27430		A	Revision of thigh muscles	9.96	NA	NA	6.89	7.72	1.69	NA	NA	18.54	19.37	090
27435		A	Incision of knee joint	10.60	NA	NA	7.69	8.28	1.69	NA	NA	19.98	20.57	090
27437		A	Revise kneecap	8.75	NA	NA	6.24	6.99	1.49	NA	NA	16.48	17.23	090
27438		A	Revise kneecap with implant	11.69	NA	NA	7.57	8.30	1.95	NA	NA	21.21	21.94	090
27440		A	Revision of knee joint	10.89	NA	NA	7.16	6.28	1.81	NA	NA	19.86	18.98	090
27441		A	Revision of knee joint	11.34	NA	NA	7.50	6.91	1.88	NA	NA	20.72	20.13	090
27442		A	Revision of knee joint	12.17	NA	NA	7.78	8.63	2.09	NA	NA	22.04	22.89	090
27443		A	Revision of knee joint	11.21	NA	NA	7.40	8.39	1.90	NA	NA	20.51	21.50	090
27445		A	Revision of knee joint	18.43	NA	NA	10.53	11.90	3.08	NA	NA	32.04	33.41	090
27446		A	Revision of knee joint	16.18	NA	NA	9.37	10.80	2.80	NA	NA	28.35	29.78	090
27447		A	Total knee arthroplasty	20.81	NA	NA	11.84	13.91	3.79	NA	NA	36.44	38.51	090
27448		A	Incision of thigh	11.40	NA	NA	7.43	8.31	1.94	NA	NA	20.77	21.65	090
27450		A	Incision of thigh	14.38	NA	NA	8.85	10.15	2.42	NA	NA	25.65	26.95	090
27454		A	Realignment of thigh bone	18.89	NA	NA	10.74	12.06	3.12	NA	NA	32.75	34.07	090
27455		A	Realignment of knee	13.16	NA	NA	8.40	9.51	2.24	NA	NA	23.80	24.91	090
27457		A	Realignment of knee	13.85	NA	NA	8.26	9.51	2.34	NA	NA	24.45	25.70	090
27465		A	Shortening of thigh bone	18.36	NA	NA	10.30	10.24	2.47	NA	NA	31.13	31.07	090
27466		A	Lengthening of thigh bone	17.03	NA	NA	10.15	11.41	2.77	NA	NA	29.95	31.21	090
27468		A	Shorten/lengthen thighs	19.72	NA	NA	11.28	12.08	3.30	NA	NA	34.30	35.10	090
27470		A	Repair of thigh	16.87	NA	NA	10.22	11.40	2.79	NA	NA	29.88	31.06	090
27472		A	Repair/graft of thigh	18.47	NA	NA	10.72	12.19	3.07	NA	NA	32.26	33.73	090
27475		A	Surgery to stop leg growth	8.75	NA	NA	6.65	7.07	1.36	NA	NA	16.76	17.18	090
27477		A	Surgery to stop leg growth	9.96	NA	NA	6.65	7.46	1.73	NA	NA	18.34	19.15	090
27479		A	Surgery to stop leg growth	12.96	NA	NA	5.11	8.51	2.78	NA	NA	20.85	24.25	090
27485		A	Surgery to stop leg growth	8.95	NA	NA	6.24	7.11	1.53	NA	NA	16.72	17.59	090
27486		A	Revise/replace knee joint	20.84	NA	NA	11.74	13.05	3.36	NA	NA	35.94	37.25	090
27487		A	Revise/replace knee joint	26.83	NA	NA	14.14	15.95	4.39	NA	NA	45.36	47.17	090
27488		A	Removal of knee prosthesis	17.32	NA	NA	10.34	11.36	2.74	NA	NA	30.40	31.42	090
27495		A	Reinforce thigh	16.31	NA	NA	9.70	10.98	2.71	NA	NA	28.72	30.00	090
27496		A	Decompression of thigh/knee	6.58	NA	NA	5.02	5.46	0.99	NA	NA	12.59	13.03	090
27497		A	Decompression of thigh/knee	7.64	NA	NA	4.68	5.24	1.15	NA	NA	13.47	14.03	090
27498		A	Decompression of thigh/knee	8.46	NA	NA	5.37	5.81	1.24	NA	NA	15.07	15.51	090
27499		A	Decompression of thigh/knee	9.23	NA	NA	5.83	6.57	1.47	NA	NA	16.53	17.27	090
27500		A	Treatment of thigh fracture	6.15	5.44	5.95	4.65	4.91	1.02	12.61	13.12	11.82	12.08	090
27501		A	Treatment of thigh fracture	6.28	5.04	5.60	4.95	5.27	1.03	12.35	12.91	12.26	12.58	090
27502		A	Treatment of thigh fracture	11.16	NA	NA	6.92	7.81	1.78	NA	NA	19.86	20.75	090
27503		A	Treatment of thigh fracture	11.05	NA	NA	7.26	8.03	1.84	NA	NA	20.15	20.92	090
27506		A	Treatment of thigh fracture	19.33	NA	NA	11.21	12.39	3.03	NA	NA	33.57	34.75	090
27507		A	Treatment of thigh fracture	14.33	NA	NA	8.20	9.43	2.42	NA	NA	24.95	26.18	090
27508		A	Treatment of thigh fracture	6.00	5.71	6.27	5.07	5.38	0.97	12.68	13.24	12.04	12.35	090
27509		A	Treatment of thigh fracture	7.94	NA	NA	6.57	7.61	1.34	NA	NA	15.85	16.89	090
27510		A	Treatment of thigh fracture	9.60	NA	NA	6.34	7.08	1.53	NA	NA	17.47	18.21	090
27511		A	Treatment of thigh fracture	13.86	NA	NA	9.11	10.68	2.37	NA	NA	25.34	26.91	090
27513		A	Treatment of thigh fracture	19.37	NA	NA	11.85	13.37	3.12	NA	NA	34.34	35.86	090
27514		A	Treatment of thigh fracture	19.00	NA	NA	11.98	13.01	3.00	NA	NA	33.98	35.01	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
27516		A	Treat thigh fx growth plate	5.36	5.69	6.19	5.05	5.40	0.81	11.86	12.36	11.22	11.57	090
27517		A	Treat thigh fx growth plate	8.89	NA	NA	6.04	7.10	1.22	NA	NA	16.15	17.21	090
27519		A	Treat thigh fx growth plate	15.72	NA	NA	9.88	11.16	2.55	NA	NA	28.15	29.43	090
27520		A	Treat kneecap fracture	2.86	4.11	4.43	3.53	3.46	0.47	7.44	7.76	6.86	6.79	090
27524		A	Treat kneecap fracture	10.17	NA	NA	6.98	7.92	1.74	NA	NA	18.89	19.83	090
27530		A	Treat knee fracture	3.89	4.83	5.19	4.27	4.38	0.65	9.37	9.73	8.81	8.92	090
27532		A	Treat knee fracture	7.35	6.45	7.13	5.67	6.26	1.26	15.06	15.74	14.28	14.87	090
27535		A	Treat knee fracture	11.72	NA	NA	8.26	9.65	2.00	NA	NA	21.98	23.37	090
27536		A	Treat knee fracture	17.11	NA	NA	10.29	11.28	2.73	NA	NA	30.13	31.12	090
27538		A	Treat knee fracture(s)	4.86	5.54	5.98	4.92	5.12	0.84	11.24	11.68	10.62	10.82	090
27540		A	Treat knee fracture	13.38	NA	NA	8.02	9.14	2.27	NA	NA	23.67	24.79	090
27550		A	Treat knee dislocation	5.75	5.31	5.84	4.59	4.85	0.76	11.82	12.35	11.10	11.36	090
27552		A	Treat knee dislocation	7.95	NA	NA	6.12	6.74	1.36	NA	NA	15.43	16.05	090
27556		A	Treat knee dislocation	14.87	NA	NA	9.31	11.07	2.50	NA	NA	26.68	28.44	090
27557		A	Treat knee dislocation	17.22	NA	NA	10.58	12.49	2.97	NA	NA	30.77	32.68	090
27558		A	Treat knee dislocation	17.93	NA	NA	10.62	12.44	3.08	NA	NA	31.63	33.45	090
27560		A	Treat kneecap dislocation	3.81	3.93	4.61	3.41	3.24	0.40	8.14	8.82	7.62	7.45	090
27562		A	Treat kneecap dislocation	5.78	NA	NA	4.45	4.69	0.94	NA	NA	11.17	11.41	090
27566		A	Treat kneecap dislocation	12.51	NA	NA	7.85	8.95	2.12	NA	NA	22.48	23.58	090
27570		A	Fixation of knee joint	1.74	NA	NA	1.62	1.73	0.30	NA	NA	3.66	3.77	010
27580		A	Fusion of knee	20.82	NA	NA	12.34	14.19	3.37	NA	NA	36.53	38.38	090
27590		A	Amputate leg at thigh	13.27	NA	NA	6.14	6.54	1.74	NA	NA	21.15	21.55	090
27591		A	Amputate leg at thigh	13.74	NA	NA	7.43	8.34	2.02	NA	NA	23.19	24.10	090
27592		A	Amputate leg at thigh	10.78	NA	NA	5.50	6.00	1.45	NA	NA	17.73	18.23	090
27594		A	Amputation follow-up surgery	7.09	NA	NA	4.76	5.07	1.02	NA	NA	12.87	13.18	090
27596		A	Amputation follow-up surgery	11.06	NA	NA	6.06	6.62	1.57	NA	NA	18.69	19.25	090
27598		A	Amputate lower leg at knee	10.99	NA	NA	6.34	6.85	1.65	NA	NA	18.98	19.49	090
27599		C	Leg surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
27600		A	Decompression of lower leg	5.88	NA	NA	3.85	4.36	0.86	NA	NA	10.59	11.10	090
27601		A	Decompression of lower leg	5.87	NA	NA	4.26	4.70	0.80	NA	NA	10.93	11.37	090
27602		A	Decompression of lower leg	7.64	NA	NA	4.39	4.95	1.10	NA	NA	13.13	13.69	090
27603		A	Drain lower leg lesion	5.05	7.05	7.38	3.90	4.10	0.74	12.84	13.17	9.69	9.89	090
27604		A	Drain lower leg bursa	4.46	6.47	6.18	3.42	3.83	0.69	11.62	11.33	8.57	8.98	090
27605		A	Incision of achilles tendon	2.87	5.28	7.08	1.78	2.19	0.41	8.56	10.36	5.06	5.47	010
27606		A	Incision of achilles tendon	4.13	NA	NA	2.67	3.19	0.69	NA	NA	7.49	8.01	010
27607		A	Treat lower leg bone lesion	8.44	NA	NA	5.76	6.07	1.31	NA	NA	15.51	15.82	090
27610		A	Explore/treat ankle joint	8.93	NA	NA	6.17	6.79	1.40	NA	NA	16.50	17.12	090
27612		A	Exploration of ankle joint	7.92	NA	NA	5.35	5.91	1.13	NA	NA	14.40	14.96	090
27613		A	Biopsy lower leg soft tissue	2.17	3.81	3.38	1.72	1.78	0.20	6.18	5.75	4.09	4.15	010
27614		A	Biopsy lower leg soft tissue	5.65	7.88	7.32	4.00	4.33	0.78	14.31	13.75	10.43	10.76	090
27615		A	Remove tumor, lower leg	12.84	NA	NA	8.04	9.05	1.83	NA	NA	22.71	23.72	090
27618		A	Remove lower leg lesion	5.08	6.40	6.11	3.77	3.94	0.72	12.20	11.91	9.57	9.74	090
27619		A	Remove lower leg lesion	8.39	10.08	9.65	5.29	5.79	1.25	19.72	19.29	14.93	15.43	090
27620		A	Explore/treat ankle joint	5.97	NA	NA	4.61	5.25	0.97	NA	NA	11.55	12.19	090
27625		A	Remove ankle joint lining	8.29	NA	NA	5.59	6.24	1.28	NA	NA	15.16	15.81	090
27626		A	Remove ankle joint lining	8.90	NA	NA	5.95	6.68	1.48	NA	NA	16.33	17.06	090
27630		A	Removal of tendon lesion	4.79	7.98	7.67	3.80	4.24	0.74	13.51	13.20	9.33	9.77	090
27635		A	Remove lower leg bone lesion	7.83	NA	NA	5.67	6.47	1.31	NA	NA	14.81	15.61	090
27637		A	Remove/graft leg bone lesion	10.08	NA	NA	7.16	8.01	1.66	NA	NA	18.90	19.75	090
27638		A	Remove/graft leg bone lesion	10.79	NA	NA	6.98	7.96	1.84	NA	NA	19.61	20.59	090
27640		A	Partial removal of tibia	12.01	NA	NA	8.19	9.78	1.88	NA	NA	22.08	23.67	090
27641		A	Partial removal of fibula	9.65	NA	NA	6.78	7.95	1.46	NA	NA	17.89	19.06	090
27645		A	Extensive lower leg surgery	14.69	NA	NA	9.51	11.42	2.41	NA	NA	26.61	28.52	090
27646		A	Extensive lower leg surgery	13.12	NA	NA	8.41	10.38	2.05	NA	NA	23.58	25.55	090
27647		A	Extensive ankle/heel surgery	12.76	NA	NA	6.61	7.36	1.75	NA	NA	21.12	21.87	090
27648		A	Injection for ankle x-ray	0.96	2.71	3.32	0.31	0.33	0.08	3.75	4.36	1.35	1.37	000

27650		A	Repair achilles tendon	9.86	NA	NA	6.30	7.21	1.59	NA	NA	17.75	18.66	090
27652		A	Repair/graft achilles tendon	10.55	NA	NA	6.45	7.64	1.71	NA	NA	18.71	19.90	090
27654		A	Repair of achilles tendon	10.24	NA	NA	5.96	6.85	1.58	NA	NA	17.78	18.67	090
27656		A	Repair leg fascia defect	4.56	8.06	8.41	3.65	3.74	0.69	13.31	13.66	8.90	8.99	090
27658		A	Repair of leg tendon, each	4.97	NA	NA	3.91	4.40	0.79	NA	NA	9.67	10.16	090
27659		A	Repair of leg tendon, each	6.92	NA	NA	4.87	5.45	1.09	NA	NA	12.88	13.46	090
27664		A	Repair of leg tendon, each	4.58	NA	NA	3.95	4.40	0.76	NA	NA	9.29	9.74	090
27665		A	Repair of leg tendon, each	5.39	NA	NA	4.50	4.85	0.89	NA	NA	10.78	11.13	090
27675		A	Repair lower leg tendons	7.17	NA	NA	4.75	5.49	1.11	NA	NA	13.03	13.77	090
27676		A	Repair lower leg tendons	8.53	NA	NA	5.79	6.51	1.37	NA	NA	15.69	16.41	090
27680		A	Release of lower leg tendon	5.73	NA	NA	4.37	4.93	0.93	NA	NA	11.03	11.59	090
27681		A	Release of lower leg tendons	6.87	NA	NA	4.77	5.63	1.15	NA	NA	12.79	13.65	090
27685		A	Revision of lower leg tendon	6.49	8.82	7.67	4.59	5.24	0.97	16.28	15.13	12.05	12.70	090
27686		A	Revise lower leg tendons	7.57	NA	NA	5.38	6.21	1.24	NA	NA	14.19	15.02	090
27687		A	Revision of calf tendon	6.23	NA	NA	4.54	5.12	1.00	NA	NA	11.77	12.35	090
27690		A	Revise lower leg tendon	8.88	NA	NA	5.47	6.13	1.33	NA	NA	15.68	16.34	090
27691		A	Revise lower leg tendon	10.19	NA	NA	6.72	7.50	1.64	NA	NA	18.55	19.33	090
27692		A	Revise additional leg tendon	1.87	NA	NA	0.73	0.88	0.32	NA	NA	2.92	3.07	ZZZ
27695		A	Repair of ankle ligament	6.50	NA	NA	5.00	5.65	1.05	NA	NA	12.55	13.20	090
27696		A	Repair of ankle ligaments	8.38	NA	NA	5.39	6.17	1.28	NA	NA	15.05	15.83	090
27698		A	Repair of ankle ligament	9.41	NA	NA	5.93	6.69	1.47	NA	NA	16.81	17.57	090
27700		A	Revision of ankle joint	9.46	NA	NA	5.14	5.55	1.30	NA	NA	15.90	16.31	090
27702		A	Reconstruct ankle joint	14.19	NA	NA	8.73	10.03	2.37	NA	NA	25.29	26.59	090
27703		A	Reconstruction, ankle joint	16.69	NA	NA	9.89	10.90	2.76	NA	NA	29.34	30.35	090
27704		A	Removal of ankle implant	7.61	NA	NA	5.70	5.62	1.27	NA	NA	14.58	14.50	090
27705		A	Incision of tibia	10.66	NA	NA	6.91	7.86	1.80	NA	NA	19.37	20.32	090
27707		A	Incision of fibula	4.60	NA	NA	4.50	4.83	0.76	NA	NA	9.86	10.19	090
27709		A	Incision of tibia & fibula	17.24	NA	NA	9.94	8.58	1.73	NA	NA	28.91	27.55	090
27712		A	Realignment of lower leg	15.59	NA	NA	9.18	10.35	2.47	NA	NA	27.24	28.41	090
27715		A	Revision of lower leg	15.27	NA	NA	9.07	10.35	2.49	NA	NA	26.83	28.11	090
27720		A	Repair of tibia	12.13	NA	NA	7.97	9.04	2.04	NA	NA	22.14	23.21	090
27722		A	Repair/graft of tibia	12.22	NA	NA	8.07	8.87	2.05	NA	NA	22.34	23.14	090
27724		A	Repair/graft of tibia	19.12	NA	NA	10.34	11.86	3.16	NA	NA	32.62	34.14	090
27725		A	Repair of lower leg	17.07	NA	NA	10.61	11.59	2.71	NA	NA	30.39	31.37	090
27727		A	Repair of lower leg	14.59	NA	NA	8.59	9.90	2.43	NA	NA	25.61	26.92	090
27730		A	Repair of tibia epiphysis	7.52	NA	NA	5.30	6.14	1.72	NA	NA	14.54	15.38	090
27732		A	Repair of fibula epiphysis	5.31	NA	NA	4.68	4.87	0.77	NA	NA	10.76	10.95	090
27734		A	Repair lower leg epiphyses	8.65	NA	NA	6.20	6.26	1.35	NA	NA	16.20	16.26	090
27740		A	Repair of leg epiphyses	9.41	NA	NA	6.65	7.66	1.62	NA	NA	17.68	18.69	090
27742		A	Repair of leg epiphyses	10.40	NA	NA	5.20	5.47	1.79	NA	NA	17.39	17.66	090
27745		A	Reinforce tibia	10.29	NA	NA	7.01	7.88	1.75	NA	NA	19.05	19.92	090
27750		A	Treatment of tibia fracture	3.19	4.33	4.65	3.74	3.82	0.55	8.07	8.39	7.48	7.56	090
27752		A	Treatment of tibia fracture	6.07	5.98	6.48	5.14	5.54	1.01	13.06	13.56	12.22	12.62	090
27756		A	Treatment of tibia fracture	7.25	NA	NA	5.77	6.29	1.17	NA	NA	14.19	14.71	090
27758		A	Treatment of tibia fracture	12.31	NA	NA	8.07	8.90	2.03	NA	NA	22.41	23.24	090
27759		A	Treatment of tibia fracture	14.23	NA	NA	8.73	9.92	2.38	NA	NA	25.34	26.53	090
27760		A	Treatment of ankle fracture	3.01	4.29	4.58	3.68	3.61	0.48	7.78	8.07	7.17	7.10	090
27762		A	Treatment of ankle fracture	5.24	5.58	6.14	4.75	5.14	0.85	11.67	12.23	10.84	11.23	090
27766		A	Treatment of ankle fracture	8.65	NA	NA	6.29	6.99	1.44	NA	NA	16.38	17.08	090
27780		A	Treatment of fibula fracture	2.65	3.89	4.11	3.33	3.24	0.41	6.95	7.17	6.39	6.30	090
27781		A	Treatment of fibula fracture	4.39	4.97	5.36	4.34	4.57	0.73	10.09	10.48	9.46	9.69	090
27784		A	Treatment of fibula fracture	7.34	NA	NA	5.62	6.26	1.23	NA	NA	14.19	14.83	090
27786		A	Treatment of ankle fracture	2.84	4.07	4.36	3.44	3.36	0.46	7.37	7.66	6.74	6.66	090
27788		A	Treatment of ankle fracture	4.44	5.00	5.48	4.26	4.55	0.74	10.18	10.66	9.44	9.73	090
27792		A	Treatment of ankle fracture	7.83	NA	NA	5.95	6.71	1.32	NA	NA	15.10	15.86	090
27808		A	Treatment of ankle fracture	2.83	4.40	4.70	3.70	3.70	0.46	7.69	7.99	6.99	6.99	090
27810		A	Treatment of ankle fracture	5.12	5.46	6.05	4.60	5.01	0.82	11.40	11.99	10.54	10.95	090
27814		A	Treatment of ankle fracture	11.02	NA	NA	7.28	8.24	1.85	NA	NA	20.15	21.11	090
27816		A	Treatment of ankle fracture	2.89	4.03	4.29	3.36	3.40	0.43	7.35	7.61	6.68	6.72	090
27818		A	Treatment of ankle fracture	5.49	5.44	6.14	4.47	5.00	0.82	11.75	12.45	10.78	11.31	090
27822		A	Treatment of ankle fracture	12.04	NA	NA	8.87	10.21	1.91	NA	NA	22.82	24.16	090
27823		A	Treatment of ankle fracture	14.18	NA	NA	9.51	10.98	2.25	NA	NA	25.94	27.41	090
27824		A	Treat lower leg fracture	3.14	3.74	3.98	3.55	3.56	0.45	7.33	7.57	7.14	7.15	090
27825		A	Treat lower leg fracture	6.54	5.88	6.42	4.84	5.25	1.02	13.44	13.98	12.40	12.81	090
27826		A	Treat lower leg fracture	8.89	NA	NA	7.01	8.37	1.47	NA	NA	17.37	18.73	090
27827		A	Treat lower leg fracture	15.65	NA	NA	10.82	12.28	2.43	NA	NA	28.90	30.36	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
27828		A	Treat lower leg fracture	18.07	NA	NA	12.36	13.54	2.81	NA	NA	33.24	34.42	090
27829		A	Treat lower leg joint	5.60	NA	NA	5.53	6.47	0.95	NA	NA	12.08	13.02	090
27830		A	Treat lower leg dislocation	3.78	4.32	4.37	3.76	3.83	0.54	8.64	8.69	8.08	8.15	090
27831		A	Treat lower leg dislocation	4.55	NA	NA	3.99	4.34	0.73	NA	NA	9.27	9.62	090
27832		A	Treat lower leg dislocation	6.60	NA	NA	4.75	5.82	1.03	NA	NA	12.38	13.45	090
27840		A	Treat ankle dislocation	4.57	NA	NA	3.62	3.73	0.46	NA	NA	8.65	8.76	090
27842		A	Treat ankle dislocation	6.26	NA	NA	4.90	5.07	1.00	NA	NA	12.16	12.33	090
27846		A	Treat ankle dislocation	10.08	NA	NA	6.87	7.67	1.70	NA	NA	18.65	19.45	090
27848		A	Treat ankle dislocation	11.48	NA	NA	7.72	9.21	1.94	NA	NA	21.14	22.63	090
27860		A	Fixation of ankle joint	2.34	NA	NA	1.70	1.91	0.39	NA	NA	4.43	4.64	010
27870		A	Fusion of ankle joint, open	15.13	NA	NA	9.19	10.19	2.36	NA	NA	26.68	27.68	090
27871		A	Fusion of tibiofibular joint	9.34	NA	NA	6.54	7.32	1.59	NA	NA	17.47	18.25	090
27880		A	Amputation of lower leg	15.18	NA	NA	6.78	7.04	1.75	NA	NA	23.71	23.97	090
27881		A	Amputation of lower leg	13.22	NA	NA	7.45	8.49	1.98	NA	NA	22.65	23.69	090
27882		A	Amputation of lower leg	9.59	NA	NA	5.55	6.25	1.29	NA	NA	16.43	17.13	090
27884		A	Amputation follow-up surgery	8.56	NA	NA	5.11	5.59	1.22	NA	NA	14.89	15.37	090
27886		A	Amputation follow-up surgery	9.79	NA	NA	5.75	6.32	1.40	NA	NA	16.94	17.51	090
27888		A	Amputation of foot at ankle	10.14	NA	NA	6.25	7.19	1.51	NA	NA	17.90	18.84	090
27889		A	Amputation of foot at ankle	10.63	NA	NA	5.35	6.19	1.46	NA	NA	17.44	18.28	090
27892		A	Decompression of leg	7.74	NA	NA	4.88	5.41	1.10	NA	NA	13.72	14.25	090
27893		A	Decompression of leg	7.70	NA	NA	5.14	5.38	1.10	NA	NA	13.94	14.18	090
27894		A	Decompression of leg	12.32	NA	NA	7.36	7.67	1.65	NA	NA	21.33	21.64	090
27899		C	Leg/ankle surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
28001		A	Drainage of bursa of foot	2.73	4.04	3.25	1.63	1.87	0.33	7.10	6.31	4.69	4.93	010
28002		A	Treatment of foot infection	5.72	6.77	5.44	3.62	3.73	0.61	13.10	11.77	9.95	10.06	010
28003		A	Treatment of foot infection	8.88	7.86	6.64	4.61	5.07	1.12	17.86	16.64	14.61	15.07	090
28005		A	Treat foot bone lesion	9.21	NA	NA	5.48	5.90	1.16	NA	NA	15.85	16.27	090
28008		A	Incision of foot fascia	4.44	6.22	4.97	3.02	3.16	0.57	11.23	9.98	8.03	8.17	090
28010		A	Incision of toe tendon	2.84	2.87	2.50	2.35	2.37	0.36	6.07	5.70	5.55	5.57	090
28011		A	Incision of toe tendons	4.13	3.83	3.43	3.05	3.24	0.59	8.55	8.15	7.77	7.96	090
28020		A	Exploration of foot joint	5.00	7.57	6.40	3.68	4.02	0.72	13.29	12.12	9.40	9.74	090
28022		A	Exploration of foot joint	4.66	6.94	5.63	3.33	3.72	0.62	12.22	10.91	8.61	9.00	090
28024		A	Exploration of toe joint	4.37	6.71	5.59	3.19	3.74	0.58	11.66	10.54	8.14	8.69	090
28030		A	Removal of foot nerve	6.14	NA	NA	3.47	3.61	0.74	NA	NA	10.35	10.49	090
28035		A	Decompression of tibia nerve	5.08	7.52	6.27	3.68	3.99	0.70	13.30	12.05	9.46	9.77	090
28043		A	Excision of foot lesion	3.53	4.84	4.07	2.76	3.07	0.46	8.83	8.06	6.75	7.06	090
28045		A	Excision of foot lesion	4.71	7.12	5.81	3.29	3.52	0.63	12.46	11.15	8.63	8.86	090
28046		A	Resection of tumor, foot	10.46	10.49	9.19	5.84	6.31	1.36	22.31	21.01	17.66	18.13	090
28050		A	Biopsy of foot joint lining	4.24	6.93	5.40	3.28	3.51	0.60	11.77	10.24	8.12	8.35	090
28052		A	Biopsy of foot joint lining	3.93	6.49	5.31	2.96	3.31	0.53	10.95	9.77	7.42	7.77	090
28054		A	Biopsy of toe joint lining	3.44	6.25	5.10	2.78	3.12	0.46	10.15	9.00	6.68	7.02	090
28060		A	Partial removal, foot fascia	5.22	7.19	5.90	3.60	3.80	0.70	13.11	11.82	9.52	9.72	090
28062		A	Removal of foot fascia	6.51	7.91	6.86	3.86	3.97	0.83	15.25	14.20	11.20	11.31	090
28070		A	Removal of foot joint lining	5.09	7.27	5.73	3.48	3.73	0.73	13.09	11.55	9.30	9.55	090
28072		A	Removal of foot joint lining	4.57	7.66	6.06	3.65	4.14	0.68	12.91	11.31	8.90	9.39	090
28080		A	Removal of foot lesion	4.57	7.73	5.77	4.22	3.82	0.47	12.77	10.81	9.26	8.86	090
28086		A	Excise foot tendon sheath	4.77	7.85	7.95	3.80	4.46	0.76	13.38	13.48	9.33	9.99	090
28088		A	Excise foot tendon sheath	3.85	7.00	6.06	3.18	3.71	0.61	11.46	10.52	7.64	8.17	090
28090		A	Removal of foot lesion	4.40	6.84	5.57	3.21	3.39	0.59	11.83	10.56	8.20	8.38	090
28092		A	Removal of toe lesions	3.63	6.55	5.55	3.02	3.40	0.49	10.67	9.67	7.14	7.52	090
28100		A	Removal of ankle/heel lesion	5.65	8.29	8.04	4.10	4.54	0.82	14.76	14.51	10.57	11.01	090
28102		A	Remove/graft foot lesion	7.72	NA	NA	4.97	5.70	1.14	NA	NA	13.83	14.56	090
28103		A	Remove/graft foot lesion	6.49	NA	NA	4.17	4.50	0.91	NA	NA	11.57	11.90	090
28104		A	Removal of foot lesion	5.11	7.31	5.94	3.50	3.82	0.70	13.12	11.75	9.31	9.63	090
28106		A	Remove/graft foot lesion	7.15	NA	NA	4.46	4.44	0.97	NA	NA	12.58	12.56	090
28107		A	Remove/graft foot lesion	5.55	7.90	6.87	3.76	4.09	0.74	14.19	13.16	10.05	10.38	090

28108		A	Removal of toe lesions	4.15	6.42	5.05	3.01	3.19	0.53	11.10	9.73	7.69	7.87	090
28110		A	Part removal of metatarsal	4.07	7.02	5.66	3.10	3.19	0.54	11.63	10.27	7.71	7.80	090
28111		A	Part removal of metatarsal	5.00	7.37	6.55	3.33	3.57	0.67	13.04	12.22	9.00	9.24	090
28112		A	Part removal of metatarsal	4.48	7.31	6.18	3.30	3.50	0.61	12.40	11.27	8.39	8.59	090
28113		A	Part removal of metatarsal	5.78	8.48	6.66	4.67	4.40	0.63	14.89	13.07	11.08	10.81	090
28114		A	Removal of metatarsal heads	11.49	13.43	12.07	8.31	8.36	1.42	26.34	24.98	21.22	21.27	090
28116		A	Revision of foot	8.86	9.58	7.49	5.41	5.23	1.03	19.47	17.38	15.30	15.12	090
28118		A	Removal of heel bone	5.95	8.00	6.68	4.05	4.27	0.84	14.79	13.47	10.84	11.06	090
28119		A	Removal of heel spur	5.38	7.28	5.89	3.60	3.69	0.70	13.36	11.97	9.68	9.77	090
28120		A	Part removal of ankle/heel	5.57	8.14	7.50	3.98	4.30	0.77	14.48	13.84	10.32	10.64	090
28122		A	Partial removal of foot bone	7.46	8.57	7.27	4.83	5.15	0.98	17.01	15.71	13.27	13.59	090
28124		A	Partial removal of toe	4.80	6.82	5.45	3.47	3.61	0.60	12.22	10.85	8.87	9.01	090
28126		A	Partial removal of toe	3.51	6.00	4.66	2.67	2.91	0.45	9.96	8.62	6.63	6.87	090
28130		A	Removal of ankle bone	9.22	NA	NA	5.91	6.51	1.26	NA	NA	16.39	16.99	090
28140		A	Removal of metatarsal	6.96	7.91	7.39	4.16	4.61	0.92	15.79	15.27	12.04	12.49	090
28150		A	Removal of toe	4.08	6.46	5.24	3.03	3.22	0.53	11.07	9.85	7.64	7.83	090
28153		A	Partial removal of toe	3.65	6.23	4.79	2.89	2.73	0.47	10.35	8.91	7.01	6.85	090
28160		A	Partial removal of toe	3.73	6.41	5.02	2.97	3.24	0.49	10.63	9.24	7.19	7.46	090
28171		A	Extensive foot surgery	9.77	NA	NA	5.34	5.40	1.33	NA	NA	16.44	16.50	090
28173		A	Extensive foot surgery	8.97	8.85	7.91	4.68	5.06	1.12	18.94	18.00	14.77	15.15	090
28175		A	Extensive foot surgery	6.10	7.18	6.07	3.64	3.69	0.73	14.01	12.90	10.47	10.52	090
28190		A	Removal of foot foreign body	1.96	4.04	3.55	1.34	1.45	0.22	6.22	5.73	3.52	3.63	010
28192		A	Removal of foot foreign body	4.63	6.79	5.80	3.22	3.54	0.61	12.03	11.04	8.46	8.78	090
28193		A	Removal of foot foreign body	5.72	7.38	6.05	3.64	3.85	0.73	13.83	12.50	10.09	10.30	090
28200		A	Repair of foot tendon	4.59	6.95	5.56	3.26	3.48	0.61	12.15	10.76	8.46	8.68	090
28202		A	Repair/graft of foot tendon	6.89	8.03	7.42	4.09	4.39	0.91	15.83	15.22	11.89	12.19	090
28208		A	Repair of foot tendon	4.36	6.73	5.29	3.19	3.27	0.58	11.67	10.23	8.13	8.21	090
28210		A	Repair/graft of foot tendon	6.34	7.59	6.56	3.91	3.99	0.81	14.74	13.71	11.06	11.14	090
28220		A	Release of foot tendon	4.52	6.45	5.12	3.09	3.34	0.57	11.54	10.21	8.18	8.43	090
28222		A	Release of foot tendons	5.61	6.93	5.66	3.34	3.93	0.69	13.23	11.96	9.64	10.23	090
28225		A	Release of foot tendon	3.65	6.09	4.73	2.75	2.86	0.46	10.20	8.84	6.86	6.97	090
28226		A	Release of foot tendons	4.52	7.01	5.35	3.32	3.64	0.58	12.11	10.45	8.42	8.74	090
28230		A	Incision of foot tendon(s)	4.23	6.34	5.09	2.91	3.48	0.55	11.12	9.87	7.69	8.26	090
28232		A	Incision of toe tendon	3.38	5.99	4.89	2.70	3.16	0.44	9.81	8.71	6.52	6.98	090
28234		A	Incision of foot tendon	3.36	6.32	5.08	3.06	3.28	0.44	10.12	8.88	6.86	7.08	090
28238		A	Revision of foot tendon	7.78	8.40	7.53	4.37	4.79	1.06	17.24	16.37	13.21	13.63	090
28240		A	Release of big toe	4.35	6.47	5.09	3.00	3.36	0.58	11.40	10.02	7.93	8.29	090
28250		A	Revision of foot fascia	5.91	7.49	6.09	3.78	4.04	0.82	14.22	12.82	10.51	10.77	090
28260		A	Release of midfoot joint	8.01	8.65	6.90	4.73	4.93	1.14	17.80	16.05	13.88	14.08	090
28261		A	Revision of foot tendon	12.83	10.79	9.16	6.40	7.08	1.57	25.19	23.56	20.80	21.48	090
28262		A	Revision of foot and ankle	16.93	15.68	14.08	9.83	10.64	2.59	35.20	33.60	29.35	30.16	090
28264		A	Release of midfoot joint	10.45	10.45	8.41	6.03	6.97	1.54	22.44	20.40	18.02	18.96	090
28270		A	Release of foot contracture	4.75	6.97	5.41	3.46	3.66	0.62	12.34	10.78	8.83	9.03	090
28272		A	Release of toe joint, each	3.79	5.87	4.60	2.66	2.80	0.46	10.12	8.85	6.91	7.05	090
28280		A	Fusion of toes	5.18	7.41	6.53	3.60	4.26	0.73	13.32	12.44	9.51	10.17	090
28285		A	Repair of hammertoe	4.58	6.77	5.34	3.37	3.41	0.59	11.94	10.51	8.54	8.58	090
28286		A	Repair of hammertoe	4.55	6.54	5.23	3.05	3.20	0.57	11.66	10.35	8.17	8.32	090
28288		A	Partial removal of foot bone	5.73	8.69	6.62	4.74	4.85	0.65	15.07	13.00	11.12	11.23	090
28289		A	Repair hallux rigidus	8.03	9.52	8.37	5.39	5.67	1.02	18.57	17.42	14.44	14.72	090
28290		A	Correction of bunion	5.65	8.24	6.75	3.98	4.54	0.82	14.71	13.22	10.45	11.01	090
28292		A	Correction of bunion	8.60	10.42	8.20	6.19	5.70	0.91	19.93	17.71	15.70	15.21	090
28293		A	Correction of bunion	10.96	14.60	11.71	6.97	6.32	1.13	26.69	23.80	19.06	18.41	090
28294		A	Correction of bunion	8.55	9.19	7.87	4.61	4.69	1.09	18.83	17.51	14.25	14.33	090
28296		A	Correction of bunion	9.23	9.66	8.53	4.83	5.27	1.19	20.08	18.95	15.25	15.69	090
28297		A	Correction of bunion	9.23	10.54	9.34	5.36	6.03	1.32	21.09	19.89	15.91	16.58	090
28298		A	Correction of bunion	7.93	9.30	7.73	4.58	4.90	1.05	18.28	16.71	13.56	13.88	090
28299		A	Correction of bunion	11.31	10.63	9.23	5.77	5.99	1.37	23.31	21.91	18.45	18.67	090
28300		A	Incision of heel bone	9.53	NA	NA	6.11	6.80	1.54	NA	NA	17.18	17.87	090
28302		A	Incision of ankle bone	9.54	NA	NA	5.72	6.59	1.42	NA	NA	16.68	17.55	090
28304		A	Incision of midfoot bones	9.21	9.57	8.35	5.09	5.57	1.27	20.05	18.83	15.57	16.05	090
28305		A	Incise/graft midfoot bones	10.54	NA	NA	5.61	6.44	1.27	NA	NA	17.42	18.25	090
28306		A	Incision of metatarsal	5.85	8.39	7.22	3.87	4.10	0.84	15.08	13.91	10.56	10.79	090
28307		A	Incision of metatarsal	6.32	9.57	10.66	4.48	5.08	0.90	16.79	17.88	11.70	12.30	090
28308		A	Incision of metatarsal	5.28	7.95	6.29	3.83	3.72	0.70	13.93	12.27	9.81	9.70	090
28309		A	Incision of metatarsals	13.88	NA	NA	7.79	7.91	2.04	NA	NA	23.71	23.83	090
28310		A	Revision of big toe	5.42	7.56	6.20	3.42	3.52	0.70	13.68	12.32	9.54	9.64	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
28312		A	Revision of toe	4.54	7.41	5.93	3.24	3.53	0.63	12.58	11.10	8.41	8.70	090
28313		A	Repair deformity of toe	5.00	7.39	5.80	3.67	4.54	0.73	13.12	11.53	9.40	10.27	090
28315		A	Removal of sesamoid bone	4.85	6.74	5.35	3.25	3.31	0.63	12.22	10.83	8.73	8.79	090
28320		A	Repair of foot bones	9.17	NA	NA	5.78	6.48	1.43	NA	NA	16.38	17.08	090
28322		A	Repair of metatarsals	8.33	10.03	9.39	5.48	6.12	1.27	19.63	18.99	15.08	15.72	090
28340		A	Resect enlarged toe tissue	6.97	8.08	6.85	4.07	4.20	0.84	15.89	14.66	11.88	12.01	090
28341		A	Resect enlarged toe	8.52	8.70	7.37	4.47	4.73	1.01	18.23	16.90	14.00	14.26	090
28344		A	Repair extra toe(s)	4.25	6.83	6.01	3.19	3.52	0.51	11.59	10.77	7.95	8.28	090
28345		A	Repair webbed toe(s)	5.91	7.82	6.60	3.89	4.48	0.80	14.53	13.31	10.60	11.19	090
28360		A	Reconstruct cleft foot	14.57	NA	NA	6.39	9.47	2.28	NA	NA	23.24	26.32	090
28400		A	Treatment of heel fracture	2.16	3.39	3.57	2.93	3.02	0.35	5.90	6.08	5.44	5.53	090
28405		A	Treatment of heel fracture	4.56	4.53	4.76	3.76	4.41	0.73	9.82	10.05	9.05	9.70	090
28406		A	Treatment of heel fracture	6.36	NA	NA	5.69	6.52	1.11	NA	NA	13.16	13.99	090
28415		A	Treat heel fracture	17.44	NA	NA	10.92	12.69	2.66	NA	NA	31.02	32.79	090
28420		A	Treat/graft heel fracture	16.98	NA	NA	10.21	12.24	2.80	NA	NA	29.99	32.02	090
28430		A	Treatment of ankle fracture	2.09	3.15	3.33	2.59	2.57	0.31	5.55	5.73	4.99	4.97	090
28435		A	Treatment of ankle fracture	3.39	3.76	3.85	3.07	3.57	0.55	7.70	7.79	7.01	7.51	090
28436		A	Treatment of ankle fracture	4.70	NA	NA	5.00	5.68	0.81	NA	NA	10.51	11.19	090
28445		A	Treat ankle fracture	16.99	NA	NA	9.79	10.72	2.58	NA	NA	29.36	30.29	090
28450		A	Treat midfoot fracture, each	1.90	2.95	3.07	2.44	2.46	0.28	5.13	5.25	4.62	4.64	090
28455		A	Treat midfoot fracture, each	3.09	3.68	3.49	3.05	3.33	0.44	7.21	7.02	6.58	6.86	090
28456		A	Treat midfoot fracture	2.68	NA	NA	3.63	4.02	0.44	NA	NA	6.75	7.14	090
28465		A	Treat midfoot fracture, each	7.06	NA	NA	5.09	6.01	1.10	NA	NA	13.25	14.17	090
28470		A	Treat metatarsal fracture	1.99	2.84	3.05	2.40	2.43	0.30	5.13	5.34	4.69	4.72	090
28475		A	Treat metatarsal fracture	2.97	3.18	3.29	2.56	3.05	0.44	6.59	6.70	5.97	6.46	090
28476		A	Treat metatarsal fracture	3.37	NA	NA	4.35	4.82	0.54	NA	NA	8.26	8.73	090
28485		A	Treat metatarsal fracture	5.70	NA	NA	4.57	5.22	0.83	NA	NA	11.10	11.75	090
28490		A	Treat big toe fracture	1.09	2.11	2.04	1.69	1.65	0.14	3.34	3.27	2.92	2.88	090
28495		A	Treat big toe fracture	1.58	2.48	2.25	1.88	2.02	0.20	4.26	4.03	3.66	3.80	090
28496		A	Treat big toe fracture	2.33	7.22	7.99	2.90	3.12	0.36	9.91	10.68	5.59	5.81	090
28505		A	Treat big toe fracture	3.80	7.53	7.96	3.28	3.75	0.56	11.89	12.32	7.64	8.11	090
28510		A	Treatment of toe fracture	1.09	1.68	1.57	1.61	1.55	0.14	2.91	2.80	2.84	2.78	090
28515		A	Treatment of toe fracture	1.46	2.25	1.98	1.84	1.88	0.18	3.89	3.62	3.48	3.52	090
28525		A	Treat toe fracture	3.32	6.93	7.37	2.92	3.30	0.49	10.74	11.18	6.73	7.11	090
28530		A	Treat sesamoid bone fracture	1.06	1.65	1.49	1.36	1.42	0.14	2.85	2.69	2.56	2.62	090
28531		A	Treat sesamoid bone fracture	2.47	5.84	6.91	2.13	2.08	0.34	8.65	9.72	4.94	4.89	090
28540		A	Treat foot dislocation	2.04	2.78	2.50	2.33	2.38	0.26	5.08	4.80	4.63	4.68	090
28545		A	Treat foot dislocation	2.45	3.25	2.57	2.66	2.42	0.37	6.07	5.39	5.48	5.24	090
28546		A	Treat foot dislocation	3.20	7.69	7.11	3.45	4.15	0.52	11.41	10.83	7.17	7.87	090
28555		A	Repair foot dislocation	6.35	9.82	9.88	4.96	5.49	1.04	17.21	17.27	12.35	12.88	090
28570		A	Treat foot dislocation	1.66	2.59	2.46	2.00	2.25	0.23	4.48	4.35	3.89	4.14	090
28575		A	Treat foot dislocation	3.31	4.38	3.89	3.68	3.71	0.56	8.25	7.76	7.55	7.58	090
28576		A	Treat foot dislocation	4.40	NA	NA	4.01	4.13	0.69	NA	NA	9.10	9.22	090
28585		A	Repair foot dislocation	8.10	9.98	7.99	5.29	5.70	1.25	19.33	17.34	14.64	15.05	090
28600		A	Treat foot dislocation	1.89	3.06	2.87	2.40	2.61	0.27	5.22	5.03	4.56	4.77	090
28605		A	Treat foot dislocation	2.71	3.76	3.28	3.16	3.13	0.40	6.87	6.39	6.27	6.24	090
28606		A	Treat foot dislocation	4.89	NA	NA	4.31	4.60	0.82	NA	NA	10.02	10.31	090
28615		A	Repair foot dislocation	8.88	NA	NA	7.00	7.78	1.30	NA	NA	17.18	17.96	090
28630		A	Treat toe dislocation	1.70	1.96	1.67	0.95	0.99	0.20	3.86	3.57	2.85	2.89	010
28635		A	Treat toe dislocation	1.91	2.27	2.08	1.33	1.48	0.26	4.44	4.25	3.50	3.65	010
28636		A	Treat toe dislocation	2.77	4.38	4.00	2.05	2.48	0.43	7.58	7.20	5.25	5.68	010
28645		A	Repair toe dislocation	4.21	6.90	5.44	3.20	3.25	0.57	11.68	10.22	7.98	8.03	090
28660		A	Treat toe dislocation	1.23	1.31	1.27	0.79	0.79	0.13	2.67	2.63	2.15	2.15	010
28665		A	Treat toe dislocation	1.92	1.85	1.54	1.34	1.41	0.26	4.03	3.72	3.52	3.59	010
28666		A	Treat toe dislocation	2.66	NA	NA	1.92	2.42	0.43	NA	NA	5.01	5.51	010
28675		A	Repair of toe dislocation	2.92	6.72	7.04	2.87	3.23	0.45	10.09	10.41	6.24	6.60	090

28705		A	Fusion of foot bones	20.04	NA	NA	10.77	12.02	3.08	NA	NA	33.89	35.14	090
28715		A	Fusion of foot bones	14.32	NA	NA	8.54	9.45	2.16	NA	NA	25.02	25.93	090
28725		A	Fusion of foot bones	11.89	NA	NA	6.95	7.92	1.86	NA	NA	20.70	21.67	090
28730		A	Fusion of foot bones	12.11	NA	NA	7.79	8.31	1.70	NA	NA	21.60	22.12	090
28735		A	Fusion of foot bones	11.95	NA	NA	6.99	7.61	1.68	NA	NA	20.62	21.24	090
28737		A	Revision of foot bones	10.75	NA	NA	6.13	6.63	1.47	NA	NA	18.35	18.85	090
28740		A	Fusion of foot bones	9.01	10.96	10.89	6.04	6.36	1.22	21.19	21.12	16.27	16.59	090
28750		A	Fusion of big toe joint	8.29	10.90	11.66	5.95	6.48	1.13	20.32	21.08	15.37	15.90	090
28755		A	Fusion of big toe joint	4.73	7.30	6.40	3.37	3.66	0.65	12.68	11.78	8.75	9.04	090
28760		A	Fusion of big toe joint	8.86	10.01	8.48	5.34	5.47	1.05	19.92	18.39	15.25	15.38	090
28800		A	Amputation of midfoot	8.56	NA	NA	5.08	5.61	1.15	NA	NA	14.79	15.32	090
28805		A	Amputation thru metatarsal	12.47	NA	NA	6.02	5.74	1.18	NA	NA	19.67	19.39	090
28810		A	Amputation toe & metatarsal	6.44	NA	NA	4.13	4.39	0.86	NA	NA	11.43	11.69	090
28820		A	Amputation of toe	4.82	7.78	7.61	3.60	3.74	0.61	13.21	13.04	9.03	9.17	090
28825		A	Partial amputation of toe	3.64	7.23	7.05	3.16	3.40	0.50	11.37	11.19	7.30	7.54	090
28890		A	High energy eswt, plantar f	3.30	4.65	5.45	2.31	2.14	0.41	8.36	9.16	6.02	5.85	090
28899		C	Foot/toes surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
29000		A	Application of body cast	2.25	4.76	3.41	1.85	1.76	0.41	7.42	6.07	4.51	4.42	000
29010		A	Application of body cast	2.06	3.37	3.30	1.33	1.66	0.45	5.88	5.81	3.84	4.17	000
29015		A	Application of body cast	2.41	3.37	3.07	1.48	1.57	0.28	6.06	5.76	4.17	4.26	000
29020		A	Application of body cast	2.11	3.79	3.33	1.48	1.43	0.28	6.18	5.72	3.87	3.82	000
29025		A	Application of body cast	2.40	3.62	3.26	1.59	1.79	0.44	6.46	6.10	4.43	4.63	000
29035		A	Application of body cast	1.77	3.71	3.64	1.48	1.56	0.28	5.76	5.69	3.53	3.61	000
29040		A	Application of body cast	2.22	3.63	2.75	1.50	1.51	0.36	6.21	5.33	4.08	4.09	000
29044		A	Application of body cast	2.12	3.98	3.97	1.66	1.84	0.35	6.45	6.44	4.13	4.31	000
29046		A	Application of body cast	2.41	4.21	3.48	1.80	2.02	0.42	7.04	6.31	4.63	4.85	000
29049		A	Application of figure eight	0.89	1.13	1.26	0.60	0.55	0.13	2.15	2.28	1.62	1.57	000
29055		A	Application of shoulder cast	1.78	2.92	2.97	1.31	1.43	0.30	5.00	5.05	3.39	3.51	000
29058		A	Application of shoulder cast	1.31	1.25	1.48	0.68	0.71	0.17	2.73	2.96	2.16	2.19	000
29065		A	Application of long arm cast	0.87	1.28	1.32	0.71	0.74	0.15	2.30	2.34	1.73	1.76	000
29075		A	Application of forearm cast	0.77	1.24	1.26	0.67	0.68	0.13	2.14	2.16	1.57	1.58	000
29085		A	Apply hand/wrist cast	0.87	1.26	1.28	0.69	0.65	0.14	2.27	2.29	1.70	1.66	000
29086		A	Apply finger cast	0.62	1.03	0.98	0.53	0.50	0.07	1.72	1.67	1.22	1.19	000
29105		A	Apply long arm splint	0.87	1.10	1.20	0.53	0.52	0.12	2.09	2.19	1.52	1.51	000
29125		A	Apply forearm splint	0.59	0.97	1.01	0.43	0.40	0.07	1.63	1.67	1.09	1.06	000
29126		A	Apply forearm splint	0.77	1.02	1.16	0.48	0.47	0.07	1.86	2.00	1.32	1.31	000
29130		A	Application of finger splint	0.50	0.43	0.46	0.18	0.17	0.06	0.99	1.02	0.74	0.73	000
29131		A	Application of finger splint	0.55	0.63	0.71	0.26	0.25	0.03	1.21	1.29	0.84	0.83	000
29200		A	Strapping of chest	0.65	0.62	0.70	0.35	0.34	0.04	1.31	1.39	1.04	1.03	000
29220		A	Strapping of low back	0.64	0.62	0.70	0.35	0.38	0.04	1.30	1.38	1.03	1.06	000
29240		A	Strapping of shoulder	0.71	0.67	0.81	0.39	0.37	0.06	1.44	1.58	1.16	1.14	000
29260		A	Strapping of elbow or wrist	0.55	0.65	0.72	0.36	0.33	0.05	1.25	1.32	0.96	0.93	000
29280		A	Strapping of hand or finger	0.51	0.66	0.77	0.37	0.33	0.03	1.20	1.31	0.91	0.87	000
29305		A	Application of hip cast	2.03	3.40	3.36	1.61	1.72	0.35	5.78	5.74	3.99	4.10	000
29325		A	Application of hip casts	2.32	3.70	3.57	1.75	1.90	0.40	6.42	6.29	4.47	4.62	000
29345		A	Application of long leg cast	1.40	1.67	1.74	0.95	1.03	0.24	3.31	3.38	2.59	2.67	000
29355		A	Application of long leg cast	1.53	1.64	1.69	0.95	1.08	0.26	3.43	3.48	2.74	2.87	000
29358		A	Apply long leg cast brace	1.43	2.06	2.06	0.94	1.05	0.25	3.74	3.74	2.62	2.73	000
29365		A	Application of long leg cast	1.18	1.58	1.64	0.86	0.93	0.20	2.96	3.02	2.24	2.31	000
29405		A	Apply short leg cast	0.86	1.21	1.22	0.66	0.70	0.14	2.21	2.22	1.66	1.70	000
29425		A	Apply short leg cast	1.01	1.24	1.23	0.67	0.72	0.15	2.40	2.39	1.83	1.88	000
29435		A	Apply short leg cast	1.18	1.54	1.56	0.82	0.90	0.20	2.92	2.94	2.20	2.28	000
29440		A	Addition of walker to cast	0.57	0.62	0.67	0.25	0.27	0.08	1.27	1.32	0.90	0.92	000
29445		A	Apply rigid leg cast	1.78	1.62	1.76	0.93	0.95	0.27	3.67	3.81	2.98	3.00	000
29450		A	Application of leg cast	2.08	1.53	1.49	0.86	1.03	0.27	3.88	3.84	3.21	3.38	000
29505		A	Application, long leg splint	0.69	1.06	1.15	0.45	0.45	0.08	1.83	1.92	1.22	1.22	000
29515		A	Application lower leg splint	0.73	0.96	0.89	0.46	0.46	0.09	1.78	1.71	1.28	1.28	000
29520		A	Strapping of hip	0.54	0.68	0.81	0.38	0.45	0.03	1.25	1.38	0.95	1.02	000
29530		A	Strapping of knee	0.57	0.65	0.76	0.36	0.34	0.05	1.27	1.38	0.98	0.96	000
29540		A	Strapping of ankle and/or ft	0.51	0.55	0.45	0.31	0.31	0.06	1.12	1.02	0.88	0.88	000
29550		A	Strapping of toes	0.47	0.57	0.46	0.30	0.29	0.06	1.10	0.99	0.83	0.82	000
29580		A	Application of paste boot	0.55	0.73	0.67	0.34	0.35	0.07	1.35	1.29	0.96	0.97	000
29590		A	Application of foot splint	0.76	0.60	0.53	0.26	0.28	0.09	1.45	1.38	1.11	1.13	000
29700		A	Removal/revision of cast	0.57	0.97	0.91	0.26	0.28	0.08	1.62	1.56	0.91	0.93	000
29705		A	Removal/revision of cast	0.76	0.77	0.81	0.37	0.38	0.13	1.66	1.70	1.26	1.27	000
29710		A	Removal/revision of cast	1.34	1.45	1.51	0.63	0.68	0.20	2.99	3.05	2.17	2.22	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
29715		A	Removal/revision of cast	0.94	1.14	1.16	0.41	0.40	0.09	2.17	2.19	1.44	1.43	000
29720		A	Repair of body cast	0.68	1.15	1.16	0.34	0.38	0.12	1.95	1.96	1.14	1.18	000
29730		A	Windowing of cast	0.75	0.76	0.80	0.35	0.35	0.12	1.63	1.67	1.22	1.22	000
29740		A	Wedging of cast	1.12	1.05	1.13	0.49	0.49	0.18	2.35	2.43	1.79	1.79	000
29750		A	Wedging of clubfoot cast	1.26	0.91	1.02	0.44	0.55	0.21	2.38	2.49	1.91	2.02	000
29799		C	Casting/strapping procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
29800		A	Jaw arthroscopy/surgery	6.67	NA	NA	5.72	6.66	0.99	NA	NA	13.38	14.32	090
29804		A	Jaw arthroscopy/surgery	8.63	NA	NA	7.34	7.55	1.38	NA	NA	17.35	17.56	090
29805		A	Shoulder arthroscopy, dx	5.88	NA	NA	4.74	5.44	1.02	NA	NA	11.64	12.34	090
29806		A	Shoulder arthroscopy/surgery	14.85	NA	NA	9.41	10.72	2.49	NA	NA	26.75	28.06	090
29807		A	Shoulder arthroscopy/surgery	14.38	NA	NA	9.28	10.56	2.41	NA	NA	28.07	27.35	090
29819		A	Shoulder arthroscopy/surgery	7.61	NA	NA	5.66	6.51	1.32	NA	NA	14.59	15.44	090
29820		A	Shoulder arthroscopy/surgery	7.06	NA	NA	5.21	5.97	1.22	NA	NA	13.49	14.25	090
29821		A	Shoulder arthroscopy/surgery	7.71	NA	NA	5.68	6.52	1.33	NA	NA	14.72	15.56	090
29822		A	Shoulder arthroscopy/surgery	7.42	NA	NA	5.61	6.42	1.28	NA	NA	14.31	15.12	090
29823		A	Shoulder arthroscopy/surgery	8.16	NA	NA	6.07	6.93	1.41	NA	NA	15.64	16.50	090
29824		A	Shoulder arthroscopy/surgery	8.74	NA	NA	6.57	7.29	1.42	NA	NA	16.73	17.45	090
29825		A	Shoulder arthroscopy/surgery	7.61	NA	NA	5.67	6.49	1.32	NA	NA	14.60	15.42	090
29826		A	Shoulder arthroscopy/surgery	8.98	NA	NA	6.22	7.20	1.55	NA	NA	16.75	17.73	090
29827		A	Arthroscop rotator cuff repr	15.34	NA	NA	9.38	10.99	2.66	NA	NA	27.38	28.99	090
29830		A	Elbow arthroscopy	5.75	NA	NA	4.52	5.14	0.99	NA	NA	11.26	11.88	090
29834		A	Elbow arthroscopy/surgery	6.27	NA	NA	4.87	5.59	1.08	NA	NA	12.22	12.94	090
29835		A	Elbow arthroscopy/surgery	6.47	NA	NA	4.99	5.66	1.13	NA	NA	12.59	13.26	090
29836		A	Elbow arthroscopy/surgery	7.54	NA	NA	5.59	6.49	1.22	NA	NA	14.35	15.25	090
29837		A	Elbow arthroscopy/surgery	6.86	NA	NA	5.15	5.89	1.19	NA	NA	13.20	13.94	090
29838		A	Elbow arthroscopy/surgery	7.70	NA	NA	5.70	6.59	1.30	NA	NA	14.70	15.59	090
29840		A	Wrist arthroscopy	5.53	NA	NA	4.62	5.15	0.84	NA	NA	10.99	11.52	090
29843		A	Wrist arthroscopy/surgery	6.00	NA	NA	4.92	5.45	0.92	NA	NA	11.84	12.37	090
29844		A	Wrist arthroscopy/surgery	6.36	NA	NA	4.96	5.61	1.04	NA	NA	12.36	13.01	090
29845		A	Wrist arthroscopy/surgery	7.51	NA	NA	5.51	6.23	0.99	NA	NA	14.01	14.73	090
29846		A	Wrist arthroscopy/surgery	6.74	NA	NA	5.10	5.81	1.07	NA	NA	12.91	13.62	090
29847		A	Wrist arthroscopy/surgery	7.07	NA	NA	5.17	5.94	1.08	NA	NA	13.32	14.09	090
29848		A	Wrist endoscopy/surgery	6.18	NA	NA	5.29	5.52	0.86	NA	NA	12.33	12.56	090
29850		A	Knee arthroscopy/surgery	8.18	NA	NA	5.13	5.07	1.25	NA	NA	14.56	14.50	090
29851		A	Knee arthroscopy/surgery	13.08	NA	NA	8.32	9.42	2.34	NA	NA	23.74	24.84	090
29855		A	Tibial arthroscopy/surgery	10.60	NA	NA	7.39	8.42	1.84	NA	NA	19.83	20.86	090
29856		A	Tibial arthroscopy/surgery	14.12	NA	NA	8.76	10.19	2.39	NA	NA	25.27	26.70	090
29860		A	Hip arthroscopy, dx	8.79	NA	NA	6.23	6.77	1.36	NA	NA	16.38	16.92	090
29861		A	Hip arthroscopy/surgery	9.89	NA	NA	6.64	7.17	1.59	NA	NA	18.12	18.65	090
29862		A	Hip arthroscopy/surgery	10.89	NA	NA	7.62	8.33	1.62	NA	NA	20.13	20.84	090
29863		A	Hip arthroscopy/surgery	10.89	NA	NA	7.53	8.27	1.42	NA	NA	19.84	20.58	090
29866		A	Autgrft implnt, knee w/scope	14.38	NA	NA	9.54	10.90	2.39	NA	NA	26.31	27.67	090
29867		A	Allgrft implnt, knee w/scope	18.08	NA	NA	11.24	12.73	2.78	NA	NA	32.10	33.59	090
29868		A	Meniscal trnspl, knee w/scpe	24.79	NA	NA	13.94	16.08	4.35	NA	NA	43.08	45.22	090
29870		A	Knee arthroscopy, dx	5.06	NA	NA	4.18	4.71	0.85	NA	NA	10.09	10.62	090
29871		A	Knee arthroscopy/drainage	6.54	NA	NA	5.03	5.66	1.14	NA	NA	12.71	13.34	090
29873		A	Knee arthroscopy/surgery	5.99	NA	NA	5.61	6.33	1.04	NA	NA	12.64	13.36	090
29874		A	Knee arthroscopy/surgery	7.04	NA	NA	5.18	5.85	1.11	NA	NA	13.33	14.00	090
29875		A	Knee arthroscopy/surgery	6.30	NA	NA	4.92	5.62	1.09	NA	NA	12.31	13.01	090
29876		A	Knee arthroscopy/surgery	8.66	NA	NA	6.23	6.82	1.37	NA	NA	16.26	16.85	090
29877		A	Knee arthroscopy/surgery	8.09	NA	NA	5.99	6.55	1.28	NA	NA	15.36	15.92	090
29879		A	Knee arthroscopy/surgery	8.78	NA	NA	6.28	6.91	1.39	NA	NA	16.45	17.08	090
29880		A	Knee arthroscopy/surgery	9.24	NA	NA	6.48	7.14	1.47	NA	NA	17.19	17.85	090
29881		A	Knee arthroscopy/surgery	8.50	NA	NA	6.18	6.77	1.34	NA	NA	16.02	16.61	090
29882		A	Knee arthroscopy/surgery	9.39	NA	NA	6.52	7.06	1.50	NA	NA	17.41	17.95	090
29883		A	Knee arthroscopy/surgery	11.53	NA	NA	7.65	8.71	1.92	NA	NA	21.10	22.16	090

29884		A	Knee arthroscopy/surgery	8.07	NA	NA	6.01	6.53	1.27	NA	NA	15.35	15.87	090
29885		A	Knee arthroscopy/surgery	9.96	NA	NA	7.05	7.74	1.58	NA	NA	18.58	19.28	090
29886		A	Knee arthroscopy/surgery	8.28	NA	NA	6.08	6.66	1.30	NA	NA	15.66	16.24	090
29887		A	Knee arthroscopy/surgery	9.91	NA	NA	7.04	7.71	1.57	NA	NA	18.52	19.19	090
29888		A	Knee arthroscopy/surgery	14.06	NA	NA	8.34	9.74	2.41	NA	NA	24.81	26.21	090
29889		A	Knee arthroscopy/surgery	17.05	NA	NA	10.75	12.01	2.78	NA	NA	30.58	31.84	090
29891		A	Ankle arthroscopy/surgery	9.39	NA	NA	6.69	7.31	1.39	NA	NA	17.47	18.09	090
29892		A	Ankle arthroscopy/surgery	9.99	NA	NA	6.58	7.45	1.41	NA	NA	17.98	18.85	090
29893		A	Scope, plantar fasciotomy	5.96	8.86	6.93	4.67	4.16	0.63	15.45	13.52	11.26	10.75	090
29894		A	Ankle arthroscopy/surgery	7.20	NA	NA	4.72	5.28	1.15	NA	NA	13.07	13.63	090
29895		A	Ankle arthroscopy/surgery	6.98	NA	NA	4.54	5.24	1.11	NA	NA	12.63	13.33	090
29897		A	Ankle arthroscopy/surgery	7.17	NA	NA	4.96	5.65	1.17	NA	NA	13.30	13.99	090
29898		A	Ankle arthroscopy/surgery	8.31	NA	NA	5.29	5.97	1.28	NA	NA	14.88	15.56	090
29899		A	Ankle arthroscopy/surgery	15.13	NA	NA	9.30	10.23	2.40	NA	NA	26.83	27.76	090
29900		A	Mcp joint arthroscopy, dx	5.66	NA	NA	4.74	5.58	0.94	NA	NA	11.34	12.18	090
29901		A	Mcp joint arthroscopy, surg	6.37	NA	NA	5.50	6.07	1.06	NA	NA	12.93	13.50	090
29902		A	Mcp joint arthroscopy, surg	6.94	NA	NA	3.68	5.83	1.12	NA	NA	11.74	13.89	090
29999		C	Arthroscopy of joint	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
30000		A	Drainage of nose lesion	1.43	3.73	3.99	1.23	1.35	0.12	5.28	5.54	2.78	2.90	010
30020		A	Drainage of nose lesion	1.43	3.86	3.42	1.26	1.42	0.12	5.41	4.97	2.81	2.97	010
30100		A	Intranasal biopsy	0.94	2.40	2.08	0.68	0.79	0.07	3.41	3.09	1.69	1.80	000
30110		A	Removal of nose polyp(s)	1.63	3.62	3.34	1.32	1.51	0.14	5.39	5.11	3.09	3.28	010
30115		A	Removal of nose polyp(s)	4.34	NA	NA	5.47	5.69	0.41	NA	NA	10.22	10.44	090
30117		A	Removal of intranasal lesion	3.16	16.90	14.08	4.51	4.60	0.26	20.32	17.50	7.93	8.02	090
30118		A	Removal of intranasal lesion	9.74	NA	NA	7.73	8.83	0.78	NA	NA	18.25	19.35	090
30120		A	Revision of nose	5.26	6.78	6.56	4.84	5.71	0.52	12.56	12.34	10.62	11.49	090
30124		A	Removal of nose lesion	3.10	NA	NA	3.59	3.61	0.25	NA	NA	6.94	6.96	090
30125		A	Removal of nose lesion	7.15	NA	NA	7.00	7.99	0.63	NA	NA	14.78	15.77	090
30130		A	Excise inferior turbinate	3.37	NA	NA	5.28	5.51	0.31	NA	NA	8.96	9.19	090
30140		A	Resect inferior turbinate	3.42	NA	NA	6.54	6.28	0.35	NA	NA	10.31	10.05	090
30150		A	Partial removal of nose	9.37	NA	NA	8.50	10.38	0.93	NA	NA	18.80	20.68	090
30160		A	Removal of nose	9.81	NA	NA	8.12	9.69	0.88	NA	NA	18.81	20.38	090
30200		A	Injection treatment of nose	0.78	1.87	1.68	0.61	0.71	0.06	2.71	2.52	1.45	1.55	000
30210		A	Nasal sinus therapy	1.08	2.31	2.15	1.15	1.27	0.09	3.48	3.32	2.32	2.44	010
30220		A	Insert nasal septal button	1.54	5.41	4.53	1.29	1.47	0.12	7.07	6.19	2.95	3.13	010
30300		A	Remove nasal foreign body	1.04	4.14	4.51	1.79	1.88	0.08	5.26	5.63	2.91	3.00	010
30310		A	Remove nasal foreign body	1.96	NA	NA	2.71	3.00	0.16	NA	NA	4.83	5.12	010
30320		A	Remove nasal foreign body	4.51	NA	NA	5.93	6.76	0.39	NA	NA	10.83	11.66	090
30400		R	Reconstruction of nose	10.46	NA	NA	13.64	15.03	1.04	NA	NA	25.14	26.53	090
30410		R	Reconstruction of nose	13.60	NA	NA	14.27	17.35	1.42	NA	NA	29.29	32.37	090
30420		R	Reconstruction of nose	16.50	NA	NA	14.69	17.11	1.46	NA	NA	32.65	35.07	090
30430		R	Revision of nose	7.84	NA	NA	12.76	15.20	0.77	NA	NA	21.37	23.81	090
30435		R	Revision of nose	12.33	NA	NA	14.67	18.18	1.22	NA	NA	28.22	31.73	090
30450		R	Revision of nose	19.26	NA	NA	16.12	20.45	1.96	NA	NA	37.34	41.67	090
30460		A	Revision of nose	10.20	NA	NA	7.13	9.24	1.03	NA	NA	18.36	20.47	090
30462		A	Revision of nose	20.04	NA	NA	14.29	18.75	2.53	NA	NA	36.86	41.32	090
30465		A	Repair nasal stenosis	12.12	NA	NA	10.25	11.54	1.06	NA	NA	23.43	24.72	090
30520		A	Repair of nasal septum	7.63	NA	NA	7.58	6.89	0.46	NA	NA	15.67	14.98	090
30540		A	Repair nasal defect	7.74	NA	NA	7.01	8.71	0.67	NA	NA	15.42	17.12	090
30545		A	Repair nasal defect	11.42	NA	NA	10.02	11.43	1.70	NA	NA	23.14	24.55	090
30560		A	Release of nasal adhesions	1.26	4.93	4.81	1.87	2.07	0.10	6.29	6.17	3.23	3.43	010
30580		A	Repair upper jaw fistula	6.68	8.15	7.87	4.69	5.52	0.89	15.72	15.44	12.26	13.09	090
30600		A	Repair mouth/nose fistula	6.01	7.47	7.51	4.04	4.78	0.70	14.18	14.22	10.75	11.49	090
30620		A	Intranasal reconstruction	5.96	NA	NA	8.08	8.64	0.57	NA	NA	14.61	15.17	090
30630		A	Repair nasal septum defect	7.11	NA	NA	7.05	7.73	0.61	NA	NA	14.77	15.45	090
30801		A	Ablate inf turbinate, superf	1.09	4.03	4.11	1.97	1.93	0.09	5.21	5.29	3.15	3.11	010
30802		A	Cauterization, inner nose	2.03	4.60	4.61	2.30	2.35	0.16	6.79	6.80	4.49	4.54	010
30901		A	Control of nosebleed	1.21	1.20	1.32	0.28	0.31	0.11	2.52	2.64	1.60	1.63	000
30903		A	Control of nosebleed	1.54	3.07	2.80	0.38	0.47	0.13	4.74	4.47	2.05	2.14	000
30905		A	Control of nosebleed	1.97	3.73	3.57	0.46	0.69	0.17	5.87	5.71	2.60	2.83	000
30906		A	Repeat control of nosebleed	2.45	3.96	3.91	0.66	1.07	0.20	6.61	6.56	3.31	3.72	000
30915		A	Ligation, nasal sinus artery	7.31	NA	NA	5.80	6.47	0.58	NA	NA	13.69	14.36	090
30920		A	Ligation, upper jaw artery	10.97	NA	NA	8.11	8.76	0.80	NA	NA	19.88	20.53	090
30930		A	Ther fx, nasal inf turbinate	1.26	NA	NA	1.52	1.60	0.12	NA	NA	2.90	2.98	010
30999		C	Nasal surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
31000		A	Irrigation, maxillary sinus	1.15	3.00	2.88	1.23	1.36	0.09	4.24	4.12	2.47	2.60	010

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
31002		A	Irrigation, sphenoid sinus	1.91	NA	NA	2.51	3.06	0.15	NA	NA	4.57	5.12	010
31020		A	Exploration, maxillary sinus	2.94	8.06	8.41	5.16	5.18	0.29	11.29	11.64	8.39	8.41	090
31030		A	Exploration, maxillary sinus	5.91	9.77	11.07	6.01	6.50	0.60	16.28	17.58	12.52	13.01	090
31032		A	Explore sinus, remove polyps	6.56	NA	NA	6.46	7.04	0.59	NA	NA	13.61	14.19	090
31040		A	Exploration behind upper jaw	9.59	NA	NA	7.26	9.18	0.87	NA	NA	17.72	19.64	090
31050		A	Exploration, sphenoid sinus	5.27	NA	NA	6.12	6.29	0.49	NA	NA	11.88	12.05	090
31051		A	Sphenoid sinus surgery	7.10	NA	NA	7.68	8.10	0.62	NA	NA	15.40	15.82	090
31070		A	Exploration of frontal sinus	4.27	NA	NA	5.68	5.87	0.38	NA	NA	10.33	10.52	090
31075		A	Exploration of frontal sinus	9.33	NA	NA	8.49	9.42	0.75	NA	NA	18.57	19.50	090
31080		A	Removal of frontal sinus	12.46	NA	NA	10.39	12.75	1.23	NA	NA	24.08	26.44	090
31081		A	Removal of frontal sinus	13.91	NA	NA	14.59	14.15	2.46	NA	NA	30.96	30.52	090
31084		A	Removal of frontal sinus	14.67	NA	NA	11.82	13.08	1.19	NA	NA	27.68	28.94	090
31085		A	Removal of frontal sinus	15.36	NA	NA	12.90	13.70	1.72	NA	NA	29.98	30.78	090
31086		A	Removal of frontal sinus	14.08	NA	NA	11.66	12.88	1.07	NA	NA	26.81	28.03	090
31087		A	Removal of frontal sinus	14.32	NA	NA	10.69	12.07	1.44	NA	NA	26.45	27.83	090
31090		A	Exploration of sinuses	10.78	NA	NA	12.26	12.48	0.94	NA	NA	23.98	24.20	090
31200		A	Removal of ethmoid sinus	4.96	NA	NA	7.42	8.76	0.29	NA	NA	12.67	14.01	090
31201		A	Removal of ethmoid sinus	8.42	NA	NA	8.22	8.93	0.82	NA	NA	17.46	18.17	090
31205		A	Removal of ethmoid sinus	10.40	NA	NA	9.52	11.29	0.67	NA	NA	20.59	22.36	090
31225		A	Removal of upper jaw	26.34	NA	NA	16.28	17.44	1.59	NA	NA	44.21	45.37	090
31230		A	Removal of upper jaw	30.46	NA	NA	16.95	18.76	1.77	NA	NA	49.18	50.99	090
31231		A	Nasal endoscopy, dx	1.10	3.34	3.37	0.69	0.83	0.09	4.53	4.56	1.88	2.02	000
31233		A	Nasal/sinus endoscopy, dx	2.18	3.94	4.21	0.99	1.36	0.20	6.32	6.59	3.37	3.74	000
31235		A	Nasal/sinus endoscopy, dx	2.64	4.28	4.75	1.12	1.57	0.26	7.18	7.65	4.02	4.47	000
31237		A	Nasal/sinus endoscopy, surg	2.98	4.51	5.02	1.22	1.72	0.28	7.77	8.28	4.48	4.98	000
31238		A	Nasal/sinus endoscopy, surg	3.26	4.43	5.03	1.30	1.89	0.27	7.96	8.56	4.83	5.42	000
31239		A	Nasal/sinus endoscopy, surg	9.19	NA	NA	6.27	7.57	0.62	NA	NA	16.08	17.38	010
31240		A	Nasal/sinus endoscopy, surg	2.61	NA	NA	1.12	1.58	0.24	NA	NA	3.97	4.43	000
31254		A	Revision of ethmoid sinus	4.64	NA	NA	1.70	2.56	0.45	NA	NA	6.79	7.65	000
31255		A	Removal of ethmoid sinus	6.95	NA	NA	2.34	3.67	0.73	NA	NA	10.02	11.35	000
31256		A	Exploration maxillary sinus	3.29	NA	NA	1.31	1.91	0.33	NA	NA	4.93	5.53	000
31267		A	Endoscopy, maxillary sinus	5.45	NA	NA	1.92	2.95	0.55	NA	NA	7.92	8.95	000
31276		A	Sinus endoscopy, surgical	8.84	NA	NA	2.87	4.56	0.92	NA	NA	12.63	14.32	000
31287		A	Nasal/sinus endoscopy, surg	3.91	NA	NA	1.48	2.21	0.39	NA	NA	5.78	6.51	000
31288		A	Nasal/sinus endoscopy, surg	4.57	NA	NA	1.67	2.53	0.46	NA	NA	6.70	7.56	000
31290		A	Nasal/sinus endoscopy, surg	18.46	NA	NA	7.99	11.04	1.40	NA	NA	27.85	30.90	010
31291		A	Nasal/sinus endoscopy, surg	19.41	NA	NA	8.60	11.50	1.68	NA	NA	29.69	32.59	010
31292		A	Nasal/sinus endoscopy, surg	15.75	NA	NA	7.20	9.76	1.21	NA	NA	24.16	26.72	010
31293		A	Nasal/sinus endoscopy, surg	17.32	NA	NA	7.82	10.49	1.28	NA	NA	26.42	29.09	010
31294		A	Nasal/sinus endoscopy, surg	20.16	NA	NA	8.72	11.83	1.53	NA	NA	30.41	33.52	010
31299		C	Sinus surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
31300		A	Removal of larynx lesion	15.63	NA	NA	13.43	14.59	1.17	NA	NA	30.23	31.39	090
31320		A	Diagnostic incision, larynx	5.55	NA	NA	9.17	10.02	0.46	NA	NA	15.18	16.03	090
31360		A	Removal of larynx	27.23	NA	NA	17.39	16.89	1.38	NA	NA	46.00	45.50	090
31365		A	Removal of larynx	34.85	NA	NA	19.55	20.16	1.97	NA	NA	56.37	56.98	090
31367		A	Partial removal of larynx	27.11	NA	NA	19.32	21.25	1.78	NA	NA	48.21	50.14	090
31368		A	Partial removal of larynx	33.73	NA	NA	22.12	24.65	2.20	NA	NA	58.05	60.58	090
31370		A	Partial removal of larynx	27.11	NA	NA	20.11	21.72	1.74	NA	NA	48.96	50.57	090
31375		A	Partial removal of larynx	25.61	NA	NA	19.22	20.09	1.63	NA	NA	46.46	47.33	090
31380		A	Partial removal of larynx	25.11	NA	NA	18.90	20.18	1.70	NA	NA	45.71	46.99	090
31382		A	Partial removal of larynx	28.11	NA	NA	20.41	21.31	1.67	NA	NA	50.19	51.09	090
31390		A	Removal of larynx & pharynx	38.72	NA	NA	22.29	23.86	2.23	NA	NA	63.24	64.81	090
31395		A	Reconstruct larynx & pharynx	43.34	NA	NA	25.53	27.61	2.48	NA	NA	71.35	73.43	090
31400		A	Revision of larynx	11.40	NA	NA	11.42	13.18	0.83	NA	NA	23.65	25.41	090
31420		A	Removal of epiglottis	11.25	NA	NA	7.82	9.11	0.83	NA	NA	19.90	21.19	090
31500		A	Insert emergency airway	2.33	NA	NA	0.43	0.52	0.17	NA	NA	2.93	3.02	000

31502		A	Change of windpipe airway	0.65	NA	NA	0.20	0.26	0.05	NA	NA	0.90	0.96	000
31505		A	Diagnostic laryngoscopy	0.61	1.33	1.42	0.54	0.59	0.05	1.99	2.08	1.20	1.25	000
31510		A	Laryngoscopy with biopsy	1.92	2.98	3.22	0.91	1.17	0.16	5.06	5.30	2.99	3.25	000
31511		A	Remove foreign body, larynx	2.16	2.75	3.03	0.93	1.03	0.19	5.10	5.38	3.28	3.38	000
31512		A	Removal of larynx lesion	2.07	2.73	3.08	0.95	1.26	0.18	4.98	5.33	3.20	3.51	000
31513		A	Injection into vocal cord	2.10	NA	NA	0.97	1.34	0.17	NA	NA	3.24	3.61	000
31515		A	Laryngoscopy for aspiration	1.80	3.06	3.42	0.83	1.00	0.14	5.00	5.36	2.77	2.94	000
31520		A	Dx laryngoscopy, newborn	2.56	NA	NA	1.09	1.44	0.20	NA	NA	3.85	4.20	000
31525		A	Dx laryngoscopy excl nb	2.63	3.22	3.54	1.10	1.52	0.21	6.06	6.38	3.94	4.36	000
31526		A	Dx laryngoscopy w/oper scope	2.57	NA	NA	1.10	1.57	0.21	NA	NA	3.88	4.35	000
31527		A	Laryngoscopy for treatment	3.27	NA	NA	1.29	1.73	0.26	NA	NA	4.82	5.26	000
31528		A	Laryngoscopy and dilation	2.37	NA	NA	0.97	1.34	0.19	NA	NA	3.53	3.90	000
31529		A	Laryngoscopy and dilation	2.68	NA	NA	1.09	1.56	0.22	NA	NA	3.99	4.46	000
31530		A	Laryngoscopy w/fb removal	3.38	NA	NA	1.29	1.79	0.29	NA	NA	4.96	5.46	000
31531		A	Laryngoscopy w/fb & op scope	3.58	NA	NA	1.39	2.05	0.29	NA	NA	5.26	5.92	000
31535		A	Laryngoscopy w/biopsy	3.16	NA	NA	1.27	1.81	0.26	NA	NA	4.69	5.23	000
31536		A	Laryngoscopy w/bx & op scope	3.55	NA	NA	1.38	2.03	0.29	NA	NA	5.22	5.87	000
31540		A	Laryngoscopy w/exc of tumor	4.12	NA	NA	1.54	2.29	0.33	NA	NA	5.99	6.74	000
31541		A	Larynscop w/tumr exc + scope	4.52	NA	NA	1.66	2.50	0.37	NA	NA	6.55	7.39	000
31545		A	Remove vc lesion w/scope	6.30	NA	NA	2.19	3.15	0.37	NA	NA	8.86	9.82	000
31546		A	Remove vc lesion scope/graft	9.73	NA	NA	3.71	4.66	0.78	NA	NA	14.22	15.17	000
31560		A	Laryngoscop w/arytenoidectom	5.45	NA	NA	1.87	2.83	0.43	NA	NA	7.75	8.71	000
31561		A	Larynscop, remve cart + scop	5.99	NA	NA	2.02	3.03	0.49	NA	NA	8.50	9.51	000
31570		A	Laryngoscope w/vc inj	3.86	3.93	5.24	1.46	2.15	0.31	8.10	9.41	5.63	6.32	000
31571		A	Laryngoscop w/vc inj + scope	4.26	NA	NA	1.58	2.35	0.35	NA	NA	6.19	6.96	000
31575		A	Diagnostic laryngoscopy	1.10	1.56	1.82	0.69	0.84	0.09	2.75	3.01	1.88	2.03	000
31576		A	Laryngoscopy with biopsy	1.97	3.26	3.56	0.94	1.20	0.14	5.37	5.67	3.05	3.31	000
31577		A	Remove foreign body, larynx	2.47	3.22	3.63	1.09	1.42	0.21	5.90	6.31	3.77	4.10	000
31578		A	Removal of larynx lesion	2.84	3.66	4.13	1.18	1.44	0.23	6.73	7.20	4.25	4.51	000
31579		A	Diagnostic laryngoscopy	2.26	2.63	3.49	1.02	1.37	0.18	5.07	5.93	3.46	3.81	000
31580		A	Revision of larynx	14.38	NA	NA	13.35	15.27	1.00	NA	NA	28.73	30.65	090
31582		A	Revision of larynx	22.73	NA	NA	20.27	24.42	1.75	NA	NA	44.75	48.90	090
31584		A	Treat larynx fracture	20.27	NA	NA	14.11	17.14	1.71	NA	NA	36.09	39.12	090
31587		A	Revision of larynx	15.06	NA	NA	7.88	8.92	0.97	NA	NA	23.91	24.95	090
31588		A	Revision of larynx	14.48	NA	NA	11.28	13.03	1.06	NA	NA	26.82	28.57	090
31590		A	Reinnervate larynx	7.53	NA	NA	11.98	14.64	0.84	NA	NA	20.35	23.01	090
31595		A	Larynx nerve surgery	8.69	NA	NA	8.86	10.13	0.68	NA	NA	18.23	19.50	090
31599		C	Larynx surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
31600		A	Incision of windpipe	7.17	NA	NA	2.19	2.94	0.80	NA	NA	10.16	10.91	000
31601		A	Incision of windpipe	4.44	NA	NA	1.61	2.20	0.40	NA	NA	6.45	7.04	000
31603		A	Incision of windpipe	4.14	NA	NA	1.11	1.56	0.44	NA	NA	5.69	6.14	000
31605		A	Incision of windpipe	3.57	NA	NA	0.82	1.10	0.40	NA	NA	4.79	5.07	000
31610		A	Incision of windpipe	9.23	NA	NA	7.12	7.98	0.79	NA	NA	17.14	18.00	090
31611		A	Surgery/speech prosthesis	5.87	NA	NA	6.44	6.91	0.46	NA	NA	12.77	13.24	090
31612		A	Puncture/clear windpipe	0.91	1.07	1.09	0.24	0.32	0.08	2.06	2.08	1.23	1.31	000
31613		A	Repair windpipe opening	4.58	NA	NA	5.79	5.94	0.42	NA	NA	10.79	10.94	090
31614		A	Repair windpipe opening	8.39	NA	NA	8.81	8.74	0.58	NA	NA	17.78	17.71	090
31615		A	Visualization of windpipe	2.09	2.21	2.50	0.95	1.14	0.16	4.46	4.75	3.20	3.39	000
31620		A	Endobronchial us add-on	1.40	6.04	5.74	0.34	0.50	0.11	7.55	7.25	1.85	2.01	ZZZ
31622		A	Dx bronchoscope/wash	2.78	5.26	5.55	0.90	1.02	0.18	8.22	8.51	3.86	3.98	000
31623		A	Dx bronchoscope/brush	2.88	6.03	6.32	0.90	1.01	0.13	9.04	9.33	3.91	4.02	000
31624		A	Dx bronchoscope/lavage	2.88	5.38	5.67	0.90	1.01	0.13	8.39	8.68	3.91	4.02	000
31625		A	Bronchoscopy w/biopsy(s)	3.36	5.52	5.74	1.02	1.16	0.18	9.06	9.28	4.56	4.70	000
31628		A	Bronchoscopy/lung bx, each	3.80	7.02	7.02	1.11	1.25	0.18	11.00	11.00	5.09	5.23	000
31629		A	Bronchoscopy/needle bx, each	4.09	12.10	13.71	1.19	1.35	0.16	16.35	17.96	5.44	5.60	000
31630		A	Bronchoscopy dilate/fx repr	3.81	NA	NA	1.25	1.60	0.32	NA	NA	5.38	5.73	000
31631		A	Bronchoscopy, dilate w/stent	4.36	NA	NA	1.39	1.67	0.34	NA	NA	6.09	6.37	000
31632		A	Bronchoscopy/lung bx, addll	1.03	0.86	0.82	0.24	0.29	0.18	2.07	2.03	1.45	1.50	ZZZ
31633		A	Bronchoscopy/needle bx addll	1.32	0.99	0.94	0.31	0.38	0.16	2.47	2.42	1.79	1.86	ZZZ
31635		A	Bronchoscopy w/fb removal	3.67	5.20	5.88	1.13	1.36	0.24	9.11	9.79	5.04	5.27	000
31636		A	Bronchoscopy, bronch stents	4.30	NA	NA	1.37	1.66	0.31	NA	NA	5.98	6.27	000
31637		A	Bronchoscopy, stent add-on	1.58	NA	NA	0.42	0.53	0.13	NA	NA	2.13	2.24	ZZZ
31638		A	Bronchoscopy, revise stent	4.88	NA	NA	1.55	1.87	0.22	NA	NA	6.65	6.97	000
31640		A	Bronchoscopy w/tumor excise	4.93	NA	NA	1.52	1.93	0.46	NA	NA	6.91	7.32	000
31641		A	Bronchoscopy, treat blockage	5.02	NA	NA	1.49	1.78	0.35	NA	NA	6.86	7.15	000
31643		A	Diag bronchoscope/catheter	3.49	NA	NA	1.05	1.19	0.20	NA	NA	4.74	4.88	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
31645		A	Bronchoscopy, clear airways	3.16	4.77	5.05	0.97	1.08	0.16	8.09	8.37	4.29	4.40	000
31646		A	Bronchoscopy, reclear airway	2.72	4.48	4.77	0.86	0.97	0.14	7.34	7.63	3.72	3.83	000
31656		A	Bronchoscopy, inj for x-ray	2.17	5.31	6.80	0.65	0.79	0.15	7.63	9.12	2.97	3.11	000
31700		A	Insertion of airway catheter	1.34	2.30	2.19	0.68	0.68	0.08	3.72	3.61	2.10	2.10	000
31708		A	Instill airway contrast dye	1.41	NA	NA	0.40	0.45	0.07	NA	NA	1.88	1.93	000
31710		A	Insertion of airway catheter	1.30	NA	NA	0.42	0.41	0.12	NA	NA	1.84	1.83	000
31715		A	Injection for bronchus x-ray	1.11	NA	NA	0.29	0.33	0.07	NA	NA	1.47	1.51	000
31717		A	Bronchial brush biopsy	2.12	5.86	7.65	0.76	0.78	0.14	8.12	9.91	3.02	3.04	000
31720		A	Clearance of airways	1.06	NA	NA	0.25	0.31	0.07	NA	NA	1.38	1.44	000
31725		A	Clearance of airways	1.96	NA	NA	0.45	0.55	0.14	NA	NA	2.55	2.65	000
31730		A	Intro, windpipe wire/tube	2.85	25.67	8.06	0.72	0.93	0.21	28.73	11.12	3.78	3.99	000
31750		A	Repair of windpipe	15.11	NA	NA	16.11	17.19	1.05	NA	NA	32.27	33.35	090
31755		A	Repair of windpipe	17.05	NA	NA	22.15	23.93	1.29	NA	NA	40.49	42.27	090
31760		A	Repair of windpipe	23.28	NA	NA	9.76	10.47	2.94	NA	NA	35.98	36.69	090
31766		A	Reconstruction of windpipe	31.52	NA	NA	11.44	13.10	4.52	NA	NA	47.48	49.14	090
31770		A	Repair/graft of bronchus	23.44	NA	NA	8.83	9.89	2.83	NA	NA	35.10	36.16	090
31775		A	Reconstruct bronchus	24.46	NA	NA	9.07	11.11	3.01	NA	NA	36.54	38.58	090
31780		A	Reconstruct windpipe	19.62	NA	NA	7.98	10.28	1.65	NA	NA	29.25	31.55	090
31781		A	Reconstruct windpipe	24.72	NA	NA	9.17	11.38	2.24	NA	NA	36.13	38.34	090
31785		A	Remove windpipe lesion	18.25	NA	NA	5.49	9.01	1.59	NA	NA	25.33	28.85	090
31786		A	Remove windpipe lesion	25.29	NA	NA	9.74	12.25	3.29	NA	NA	38.32	40.83	090
31800		A	Repair of windpipe injury	8.05	NA	NA	8.35	9.02	0.79	NA	NA	17.19	17.86	090
31805		A	Repair of windpipe injury	13.29	NA	NA	6.24	6.97	1.82	NA	NA	21.35	22.08	090
31820		A	Closure of windpipe lesion	4.54	5.43	5.60	2.98	3.48	0.38	10.35	10.52	7.90	8.40	090
31825		A	Repair of windpipe defect	6.92	6.78	7.44	4.00	5.03	0.53	14.23	14.89	11.45	12.48	090
31830		A	Revise windpipe scar	4.49	5.60	5.72	3.33	3.82	0.44	10.53	10.65	8.26	8.75	090
31899		C	Airways surgical procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
32000		A	Drainage of chest	1.54	2.39	2.89	0.43	0.47	0.08	4.01	4.51	2.05	2.09	000
32002		A	Treatment of collapsed lung	2.19	2.85	3.12	0.99	1.04	0.12	5.16	5.43	3.30	3.35	000
32005		A	Treat lung lining chemically	2.19	5.11	6.12	0.59	0.67	0.23	7.53	8.54	3.01	3.09	000
32019		A	Insert pleural catheter	4.17	15.54	18.86	1.45	1.60	0.42	20.13	23.45	6.04	6.19	000
32020		A	Insertion of chest tube	3.97	NA	NA	1.14	1.30	0.43	NA	NA	5.54	5.70	000
32035		A	Exploration of chest	11.14	NA	NA	6.11	5.92	1.26	NA	NA	18.50	18.32	090
32036		A	Exploration of chest	12.15	NA	NA	6.43	6.43	1.43	NA	NA	20.01	20.01	090
32095		A	Biopsy through chest wall	10.03	NA	NA	5.22	5.33	1.22	NA	NA	16.47	16.58	090
32100		A	Exploration/biopsy of chest	16.04	NA	NA	7.09	7.64	2.23	NA	NA	25.36	25.91	090
32110		A	Explore/repair chest	25.11	NA	NA	10.03	10.56	3.21	NA	NA	38.35	38.88	090
32120		A	Re-exploration of chest	14.24	NA	NA	6.91	7.03	1.63	NA	NA	22.78	22.90	090
32124		A	Explore chest free adhesions	15.30	NA	NA	7.09	7.18	1.89	NA	NA	24.28	24.37	090
32140		A	Removal of lung lesion(s)	16.51	NA	NA	7.48	7.63	1.96	NA	NA	25.95	26.10	090
32141		A	Remove/treat lung lesions	17.14	NA	NA	7.69	7.59	2.00	NA	NA	26.83	26.73	090
32150		A	Removal of lung lesion(s)	16.67	NA	NA	7.54	7.59	2.00	NA	NA	26.21	26.26	090
32151		A	Remove lung foreign body	16.79	NA	NA	8.73	8.18	2.03	NA	NA	27.55	27.00	090
32160		A	Open chest heart massage	13.00	NA	NA	5.89	5.42	1.31	NA	NA	20.20	19.73	090
32200		A	Drain, open, lung lesion	18.43	NA	NA	8.91	8.69	2.13	NA	NA	29.47	29.25	090
32201		A	Drain, percut, lung lesion	3.99	19.87	20.49	1.26	1.29	0.24	24.10	24.72	5.49	5.52	000
32215		A	Treat chest lining	12.90	NA	NA	6.43	6.78	1.68	NA	NA	21.01	21.36	090
32220		A	Release of lung	26.31	NA	NA	12.11	12.74	3.56	NA	NA	41.98	42.61	090
32225		A	Partial release of lung	16.60	NA	NA	7.54	7.62	2.06	NA	NA	26.20	26.28	090
32310		A	Removal of chest lining	15.13	NA	NA	6.98	7.29	1.99	NA	NA	24.10	24.41	090
32320		A	Free/remove chest lining	26.96	NA	NA	11.63	12.02	3.51	NA	NA	42.10	42.49	090
32400		A	Needle biopsy chest lining	1.76	2.12	2.12	0.52	0.54	0.10	3.98	3.98	2.38	2.40	000
32402		A	Open biopsy chest lining	8.86	NA	NA	4.81	5.04	1.07	NA	NA	14.74	14.97	090
32405		A	Biopsy, lung or mediastinum	1.93	0.61	0.66	0.61	0.63	0.11	2.65	2.70	2.65	2.67	000
32420		A	Puncture/clear lung	2.18	NA	NA	0.68	0.68	0.12	NA	NA	2.98	2.98	000
32440		A	Removal of lung	27.11	NA	NA	11.11	12.45	3.68	NA	NA	41.90	43.24	090

32442		A	Sleeve pneumonectomy	37.74	NA	NA	13.28	14.39	3.84	NA	NA	54.86	55.97	090
32445		A	Removal of lung	40.73	NA	NA	16.31	14.62	3.71	NA	NA	60.75	59.06	090
32480		A	Partial removal of lung	25.65	NA	NA	10.37	11.64	3.49	NA	NA	39.51	40.78	090
32482		A	Bilobectomy	27.22	NA	NA	11.22	12.49	3.66	NA	NA	42.10	43.37	090
32484		A	Segmentectomy	22.67	NA	NA	8.92	10.77	3.03	NA	NA	34.62	36.47	090
32486		A	Sleeve lobectomy	31.72	NA	NA	11.89	12.90	3.51	NA	NA	47.12	48.13	090
32488		A	Completion pneumonectomy	32.69	NA	NA	12.78	13.53	3.80	NA	NA	49.27	50.02	090
32491		R	Lung volume reduction	25.03	NA	NA	10.69	12.14	2.98	NA	NA	38.70	40.15	090
32500		A	Partial removal of lung	24.42	NA	NA	10.43	11.87	3.25	NA	NA	38.10	39.54	090
32501		A	Repair bronchus add-on	4.68	NA	NA	1.37	1.50	0.65	NA	NA	6.70	6.83	ZZZ
32503		A	Resect apical lung tumor	31.55	NA	NA	12.31	14.38	4.37	NA	NA	48.23	50.30	090
32504		A	Resect apical lung tum/chest	36.35	NA	NA	13.73	15.94	5.07	NA	NA	55.15	57.36	090
32540		A	Removal of lung lesion	23.68	NA	NA	10.25	9.79	2.07	NA	NA	36.00	35.54	090
32601		A	Thoracoscopy, diagnostic	5.45	NA	NA	2.11	2.29	0.80	NA	NA	8.36	8.54	000
32602		A	Thoracoscopy, diagnostic	5.95	NA	NA	2.25	2.45	0.87	NA	NA	9.07	9.27	000
32603		A	Thoracoscopy, diagnostic	7.80	NA	NA	2.99	3.02	1.14	NA	NA	11.93	11.96	000
32604		A	Thoracoscopy, diagnostic	8.77	NA	NA	3.08	3.36	1.25	NA	NA	13.10	13.38	000
32605		A	Thoracoscopy, diagnostic	6.92	NA	NA	2.56	2.82	1.00	NA	NA	10.48	10.74	000
32606		A	Thoracoscopy, diagnostic	8.39	NA	NA	3.02	3.25	1.22	NA	NA	12.63	12.86	000
32650		A	Thoracoscopy, surgical	10.73	NA	NA	5.32	6.40	1.58	NA	NA	17.63	18.71	090
32651		A	Thoracoscopy, surgical	16.28	NA	NA	7.09	7.20	1.86	NA	NA	25.23	25.34	090
32652		A	Thoracoscopy, surgical	23.34	NA	NA	9.65	10.02	2.72	NA	NA	35.71	36.08	090
32653		A	Thoracoscopy, surgical	19.86	NA	NA	8.01	7.23	1.88	NA	NA	29.75	28.97	090
32654		A	Thoracoscopy, surgical	18.49	NA	NA	7.47	7.52	1.63	NA	NA	27.59	27.64	090
32655		A	Thoracoscopy, surgical	14.95	NA	NA	6.74	7.12	1.89	NA	NA	23.58	23.96	090
32656		A	Thoracoscopy, surgical	13.14	NA	NA	6.04	7.47	1.89	NA	NA	21.07	22.50	090
32657		A	Thoracoscopy, surgical	14.54	NA	NA	6.47	7.38	1.99	NA	NA	23.00	23.91	090
32658		A	Thoracoscopy, surgical	11.61	NA	NA	5.64	6.92	1.69	NA	NA	18.94	20.22	090
32659		A	Thoracoscopy, surgical	11.82	NA	NA	5.95	7.08	1.62	NA	NA	19.39	20.52	090
32660		A	Thoracoscopy, surgical	17.65	NA	NA	7.52	8.99	2.08	NA	NA	27.25	28.72	090
32661		A	Thoracoscopy, surgical	13.23	NA	NA	6.22	7.40	1.92	NA	NA	21.37	22.55	090
32662		A	Thoracoscopy, surgical	17.00	NA	NA	7.23	8.42	2.17	NA	NA	26.40	27.59	090
32663		A	Thoracoscopy, surgical	19.96	NA	NA	8.91	10.30	2.72	NA	NA	31.59	32.98	090
32664		A	Thoracoscopy, surgical	14.18	NA	NA	6.42	7.33	2.32	NA	NA	22.92	23.83	090
32665		A	Thoracoscopy, surgical	17.37	NA	NA	7.66	8.01	2.15	NA	NA	27.18	27.53	090
32800		A	Repair lung hernia	15.56	NA	NA	7.13	7.34	1.98	NA	NA	24.67	24.88	090
32810		A	Close chest after drainage	14.80	NA	NA	7.12	7.42	1.93	NA	NA	23.85	24.15	090
32815		A	Close bronchial fistula	37.94	NA	NA	15.43	12.09	3.27	NA	NA	56.64	53.30	090
32820		A	Reconstruct injured chest	22.27	NA	NA	11.75	12.06	2.52	NA	NA	36.54	36.85	090
32851		A	Lung transplant, single	40.72	NA	NA	20.99	25.99	5.56	NA	NA	67.27	72.27	090
32852		A	Lung transplant with bypass	44.37	NA	NA	23.82	30.83	6.00	NA	NA	74.19	81.20	090
32853		A	Lung transplant, double	49.89	NA	NA	23.39	29.66	7.05	NA	NA	80.33	86.60	090
32854		A	Lung transplant with bypass	53.60	NA	NA	26.62	32.70	7.20	NA	NA	87.42	93.50	090
32855		C	Prepare donor lung, single	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
32856		C	Prepare donor lung, double	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
32900		A	Removal of rib(s)	23.66	NA	NA	9.81	9.86	2.93	NA	NA	36.40	36.45	090
32905		A	Revise & repair chest wall	23.14	NA	NA	9.64	10.01	3.15	NA	NA	35.93	36.30	090
32906		A	Revise & repair chest wall	29.15	NA	NA	11.34	11.88	3.97	NA	NA	44.46	45.00	090
32940		A	Revision of lung	21.19	NA	NA	8.66	9.27	2.88	NA	NA	32.73	33.34	090
32960		A	Therapeutic pneumothorax	1.84	1.59	1.70	0.67	0.59	0.16	3.59	3.70	2.67	2.59	000
32997		A	Total lung lavage	5.99	NA	NA	1.51	1.81	0.55	NA	NA	8.05	8.35	000
32999		C	Chest surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
33010		A	Drainage of heart sac	2.24	NA	NA	1.02	0.84	0.14	NA	NA	3.40	3.22	000
33011		A	Repeat drainage of heart sac	2.24	NA	NA	1.10	0.88	0.15	NA	NA	3.49	3.27	000
33015		A	Incision of heart sac	8.41	NA	NA	5.08	4.98	0.65	NA	NA	14.14	14.04	090
33020		A	Incision of heart sac	14.85	NA	NA	6.54	6.72	1.79	NA	NA	23.18	23.36	090
33025		A	Incision of heart sac	13.63	NA	NA	5.98	6.26	1.80	NA	NA	21.41	21.69	090
33030		A	Partial removal of heart sac	22.24	NA	NA	9.26	9.46	2.83	NA	NA	34.33	34.53	090
33031		A	Partial removal of heart sac	25.28	NA	NA	9.96	10.01	3.13	NA	NA	38.37	38.42	090
33050		A	Removal of heart sac lesion	16.82	NA	NA	7.63	7.79	2.14	NA	NA	26.59	26.75	090
33120		A	Removal of heart lesion	27.30	NA	NA	10.79	11.38	3.69	NA	NA	41.78	42.37	090
33130		A	Removal of heart lesion	24.02	NA	NA	9.48	9.95	3.00	NA	NA	36.50	36.97	090
33140		A	Heart revascularize (tmr)	22.72	NA	NA	10.09	10.68	2.85	NA	NA	35.66	36.25	090
33141		A	Heart tmr w/other procedure	4.83	NA	NA	1.52	1.57	0.69	NA	NA	7.04	7.09	ZZZ
33200		A	Insertion of heart pacemaker	14.70	NA	NA	7.45	6.99	1.70	NA	NA	23.85	23.39	090
33201		A	Insertion of heart pacemaker	12.08	NA	NA	6.40	6.54	1.36	NA	NA	19.84	19.98	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
33206		A	Insertion of heart pacemaker	7.28	NA	NA	5.13	4.63	0.52	NA	NA	12.92	12.42	090
33207		A	Insertion of heart pacemaker	9.03	NA	NA	5.78	4.94	0.59	NA	NA	15.40	14.56	090
33208		A	Insertion of heart pacemaker	8.12	NA	NA	5.43	4.94	0.56	NA	NA	14.11	13.62	090
33210		A	Insertion of heart electrode	3.30	NA	NA	1.70	1.36	0.18	NA	NA	5.18	4.84	000
33211		A	Insertion of heart electrode	3.39	NA	NA	1.67	1.40	0.21	NA	NA	5.27	5.00	000
33212		A	Insertion of pulse generator	5.51	NA	NA	3.75	3.46	0.43	NA	NA	9.69	9.40	090
33213		A	Insertion of pulse generator	6.36	NA	NA	4.17	3.83	0.45	NA	NA	10.98	10.64	090
33214		A	Upgrade of pacemaker system	7.74	NA	NA	5.38	5.01	0.58	NA	NA	13.70	13.33	090
33215		A	Reposition pacing-defib lead	4.87	NA	NA	3.52	3.27	0.37	NA	NA	8.76	8.51	090
33216		A	Insert lead pace-defib, one	5.77	NA	NA	4.58	4.30	0.36	NA	NA	10.71	10.43	090
33217		A	Insert lead pace-defib, dual	5.74	NA	NA	4.50	4.30	0.39	NA	NA	10.63	10.43	090
33218		A	Repair lead pace-defib, one	5.93	NA	NA	4.83	4.43	0.37	NA	NA	11.13	10.73	090
33220		A	Repair lead pace-defib, dual	6.01	NA	NA	4.89	4.43	0.37	NA	NA	11.27	10.81	090
33222		A	Revise pocket, pacemaker	4.95	NA	NA	4.33	4.30	0.42	NA	NA	9.70	9.67	090
33223		A	Revise pocket, pacing-defib	6.45	NA	NA	4.97	4.69	0.45	NA	NA	11.87	11.59	090
33224		A	Insert pacing lead & connect	9.04	NA	NA	5.03	4.26	0.54	NA	NA	14.61	13.84	000
33225		A	L ventric pacing lead add-on	8.33	NA	NA	4.45	3.55	0.45	NA	NA	13.23	12.33	ZZZ
33226		A	Reposition l ventric lead	8.68	NA	NA	4.87	4.08	0.59	NA	NA	14.14	13.35	000
33233		A	Removal of pacemaker system	3.29	NA	NA	3.29	3.28	0.22	NA	NA	6.80	6.79	090
33234		A	Removal of pacemaker system	7.81	NA	NA	5.52	5.06	0.56	NA	NA	13.89	13.43	090
33235		A	Removal pacemaker electrode	9.85	NA	NA	7.32	6.94	0.73	NA	NA	17.90	17.52	090
33236		A	Remove electrode/thoracotomy	12.58	NA	NA	6.70	7.25	1.68	NA	NA	20.96	21.51	090
33237		A	Remove electrode/thoracotomy	13.69	NA	NA	7.68	7.76	1.59	NA	NA	22.96	23.04	090
33238		A	Remove electrode/thoracotomy	15.20	NA	NA	8.35	8.24	2.02	NA	NA	25.57	25.46	090
33240		A	Insert pulse generator	7.59	NA	NA	5.34	4.77	0.41	NA	NA	13.34	12.77	090
33241		A	Remove pulse generator	3.24	NA	NA	3.04	2.98	0.18	NA	NA	6.46	6.40	090
33243		A	Remove eltrd/thoracotomy	23.36	NA	NA	11.00	11.35	2.09	NA	NA	36.45	36.80	090
33244		A	Remove eltrd, transven	13.74	NA	NA	9.53	9.05	0.99	NA	NA	24.26	23.78	090
33245		A	Insert epic eltrd pace-defib	16.82	NA	NA	7.96	7.92	2.01	NA	NA	26.79	26.75	090
33246		A	Insert epic eltrd/generator	23.11	NA	NA	10.73	10.39	2.63	NA	NA	36.47	36.13	090
33249		A	Eltrd/insert pace-defib	14.96	NA	NA	10.33	8.85	0.77	NA	NA	26.06	24.58	090
33250		A	Ablate heart dysrhythm focus	25.75	NA	NA	10.16	10.81	3.18	NA	NA	39.09	39.74	090
33251		A	Ablate heart dysrhythm focus	28.77	NA	NA	11.15	11.53	3.59	NA	NA	43.51	43.89	090
33253		A	Reconstruct atria	31.33	NA	NA	12.15	13.40	4.52	NA	NA	48.00	49.25	090
33261		A	Ablate heart dysrhythm focus	28.77	NA	NA	11.33	11.66	3.45	NA	NA	43.55	43.88	090
33282		A	Implant pat-active ht record	4.66	NA	NA	4.29	4.09	0.23	NA	NA	9.18	8.98	090
33284		A	Remove pat-active ht record	3.00	NA	NA	3.40	3.50	0.14	NA	NA	6.54	6.64	090
33300		A	Repair of heart wound	29.93	NA	NA	11.14	9.71	2.65	NA	NA	43.72	42.29	090
33305		A	Repair of heart wound	33.67	NA	NA	12.24	11.02	3.12	NA	NA	49.03	47.81	090
33310		A	Exploratory heart surgery	20.19	NA	NA	8.83	9.39	2.58	NA	NA	31.60	32.16	090
33315		A	Exploratory heart surgery	26.02	NA	NA	10.46	10.78	3.27	NA	NA	39.75	40.07	090
33320		A	Repair major blood vessel(s)	18.43	NA	NA	8.69	8.34	2.07	NA	NA	29.19	28.84	090
33321		A	Repair major vessel	20.67	NA	NA	10.28	9.91	2.90	NA	NA	33.85	33.48	090
33322		A	Repair major blood vessel(s)	24.27	NA	NA	9.83	10.23	2.85	NA	NA	36.95	37.35	090
33330		A	Insert major vessel graft	25.14	NA	NA	9.80	10.15	2.81	NA	NA	37.75	38.10	090
33332		A	Insert major vessel graft	24.42	NA	NA	9.65	10.30	3.02	NA	NA	37.09	37.74	090
33335		A	Insert major vessel graft	33.76	NA	NA	12.97	13.24	4.27	NA	NA	51.00	51.27	090
33400		A	Repair of aortic valve	39.23	NA	NA	14.57	15.39	4.10	NA	NA	57.90	58.72	090
33401		A	Valvuloplasty, open	24.33	NA	NA	9.83	12.58	3.56	NA	NA	37.72	40.47	090
33403		A	Valvuloplasty, w/cp bypass	25.31	NA	NA	10.53	13.36	3.54	NA	NA	39.38	42.21	090
33404		A	Prepare heart-aorta conduit	31.22	NA	NA	12.26	13.97	4.32	NA	NA	47.80	49.51	090
33405		A	Replacement of aortic valve	39.97	NA	NA	15.12	17.50	5.31	NA	NA	60.40	62.78	090
33406		A	Replacement of aortic valve	48.87	NA	NA	17.72	18.77	5.43	NA	NA	72.02	73.07	090
33410		A	Replacement of aortic valve	38.69	NA	NA	14.63	16.09	4.68	NA	NA	58.00	59.46	090
33411		A	Replacement of aortic valve	57.11	NA	NA	20.12	19.09	5.46	NA	NA	82.69	81.66	090
33412		A	Replacement of aortic valve	43.71	NA	NA	16.57	19.44	6.37	NA	NA	66.65	69.52	090

33413		A	Replacement of aortic valve	55.27	NA	NA	19.33	20.44	6.51	NA	NA	81.11	82.22	090
33414		A	Repair of aortic valve	39.27	NA	NA	15.20	14.40	4.56	NA	NA	59.03	58.23	090
33415		A	Revision, subvalvular tissue	29.70	NA	NA	11.14	11.80	4.13	NA	NA	44.97	45.63	090
33416		A	Revise ventricle muscle	36.39	NA	NA	13.63	13.53	4.56	NA	NA	54.58	54.48	090
33417		A	Repair of aortic valve	29.13	NA	NA	12.14	13.24	4.09	NA	NA	45.36	46.46	090
33420		A	Revision of mitral valve	25.64	NA	NA	8.85	9.38	1.81	NA	NA	36.30	36.83	090
33422		A	Revision of mitral valve	29.58	NA	NA	12.50	13.36	3.93	NA	NA	46.01	46.87	090
33425		A	Repair of mitral valve	38.37	NA	NA	14.50	13.41	4.06	NA	NA	56.93	55.84	090
33426		A	Repair of mitral valve	41.28	NA	NA	15.51	16.73	5.01	NA	NA	61.80	63.02	090
33427		A	Repair of mitral valve	42.78	NA	NA	16.33	18.60	6.07	NA	NA	65.18	67.45	090
33430		A	Replacement of mitral valve	49.81	NA	NA	18.75	17.66	5.08	NA	NA	73.64	72.55	090
33460		A	Revision of tricuspid valve	27.97	NA	NA	10.98	11.22	3.44	NA	NA	42.39	42.63	090
33463		A	Valvuloplasty, tricuspid	42.57	NA	NA	15.50	13.56	3.86	NA	NA	61.93	59.99	090
33464		A	Valvuloplasty, tricuspid	30.93	NA	NA	12.13	13.17	4.14	NA	NA	47.20	48.24	090
33465		A	Replace tricuspid valve	33.58	NA	NA	12.60	12.87	4.38	NA	NA	50.56	50.83	090
33468		A	Revision of tricuspid valve	32.79	NA	NA	15.30	14.06	4.06	NA	NA	52.15	50.91	090
33470		A	Revision of pulmonary valve	21.24	NA	NA	8.74	10.20	1.03	NA	NA	31.01	32.47	090
33471		A	Valvotomy, pulmonary valve	22.79	NA	NA	7.77	9.26	3.38	NA	NA	33.94	35.43	090
33472		A	Revision of pulmonary valve	22.86	NA	NA	7.28	10.72	3.54	NA	NA	33.68	37.12	090
33474		A	Revision of pulmonary valve	25.85	NA	NA	12.10	11.19	3.21	NA	NA	41.16	40.25	090
33475		A	Replacement, pulmonary valve	44.81	NA	NA	16.54	15.66	4.92	NA	NA	66.27	65.39	090
33476		A	Revision of heart chamber	26.37	NA	NA	11.78	11.92	2.41	NA	NA	40.56	40.70	090
33478		A	Revision of heart chamber	27.34	NA	NA	11.04	12.55	3.88	NA	NA	42.26	43.77	090
33496		A	Repair, prosth valve clot	29.67	NA	NA	11.51	12.43	4.12	NA	NA	45.30	46.22	090
33500		A	Repair heart vessel fistula	27.79	NA	NA	11.08	11.37	3.86	NA	NA	42.73	43.02	090
33501		A	Repair heart vessel fistula	19.39	NA	NA	8.25	8.27	1.90	NA	NA	29.54	29.56	090
33502		A	Coronary artery correction	21.65	NA	NA	9.32	10.63	2.99	NA	NA	33.96	35.27	090
33503		A	Coronary artery graft	22.21	NA	NA	10.61	9.95	1.77	NA	NA	34.59	33.93	090
33504		A	Coronary artery graft	25.26	NA	NA	10.18	11.40	3.35	NA	NA	38.79	40.01	090
33505		A	Repair artery w/tunnel	38.33	NA	NA	12.33	12.76	2.18	NA	NA	52.84	53.27	090
33506		A	Repair artery, translocation	37.78	NA	NA	15.51	14.80	4.65	NA	NA	57.94	57.23	090
33507		A	Repair art, intramural	31.33	NA	NA	11.78	13.18	4.05	NA	NA	47.16	48.56	090
33508		A	Endoscopic vein harvest	0.31	NA	NA	0.10	0.10	0.04	NA	NA	0.45	0.45	ZZZ
33510		A	CABG, vein, single	33.45	NA	NA	12.81	15.45	4.40	NA	NA	50.66	53.30	090
33511		A	CABG, vein, two	34.59	NA	NA	13.37	16.15	4.55	NA	NA	52.51	55.29	090
33512		A	CABG, vein, three	38.73	NA	NA	14.72	16.88	4.66	NA	NA	58.11	60.27	090
33513		A	CABG, vein, four	39.69	NA	NA	15.13	17.12	4.87	NA	NA	59.69	61.68	090
33514		A	CABG, vein, five	40.50	NA	NA	15.38	17.38	4.76	NA	NA	60.64	62.64	090
33516		A	Cabg, vein, six or more	41.96	NA	NA	16.16	18.14	5.11	NA	NA	63.23	65.21	090
33517		A	CABG, artery-vein, single	2.57	NA	NA	0.79	0.83	0.39	NA	NA	3.75	3.79	ZZZ
33518		A	CABG, artery-vein, two	4.84	NA	NA	1.48	1.56	0.73	NA	NA	7.05	7.13	ZZZ
33519		A	CABG, artery-vein, three	7.11	NA	NA	2.18	2.29	1.04	NA	NA	10.33	10.44	ZZZ
33521		A	CABG, artery-vein, four	9.39	NA	NA	2.89	3.03	1.37	NA	NA	13.65	13.79	ZZZ
33522		A	CABG, artery-vein, five	11.65	NA	NA	3.56	3.75	1.77	NA	NA	16.98	17.17	ZZZ
33523		A	Cabg, art-vein, six or more	13.93	NA	NA	4.29	4.47	2.12	NA	NA	20.34	20.52	ZZZ
33530		A	Coronary artery, bypass/reop	5.85	NA	NA	1.79	1.88	0.88	NA	NA	8.52	8.61	ZZZ
33533		A	CABG, arterial, single	37.38	NA	NA	14.00	15.85	4.55	NA	NA	55.93	57.78	090
33534		A	CABG, arterial, two	38.81	NA	NA	14.74	16.97	4.69	NA	NA	58.24	60.47	090
33535		A	CABG, arterial, three	41.48	NA	NA	15.68	17.52	5.01	NA	NA	62.17	64.01	090
33536		A	Cabg, arterial, four or more	40.79	NA	NA	15.30	17.54	5.42	NA	NA	61.51	63.75	090
33542		A	Removal of heart lesion	32.65	NA	NA	12.64	12.90	4.37	NA	NA	49.66	49.92	090
33545		A	Repair of heart damage	41.12	NA	NA	15.46	15.58	5.19	NA	NA	61.77	61.89	090
33548		A	Restore/remodel, ventricle	42.46	NA	NA	16.52	18.60	5.51	NA	NA	64.49	66.57	090
33572		A	Open coronary endarterectomy	4.44	NA	NA	1.34	1.42	0.65	NA	NA	6.43	6.51	ZZZ
33600		A	Closure of valve	30.11	NA	NA	12.44	12.49	4.41	NA	NA	46.96	47.01	090
33602		A	Closure of valve	29.14	NA	NA	13.30	12.66	3.81	NA	NA	46.25	45.61	090
33606		A	Anastomosis/artery-aorta	31.33	NA	NA	12.17	13.30	4.40	NA	NA	47.90	49.03	090
33608		A	Repair anomaly w/conduit	31.68	NA	NA	13.41	13.93	4.73	NA	NA	49.82	50.34	090
33610		A	Repair by enlargement	31.20	NA	NA	11.20	13.00	4.55	NA	NA	46.95	48.75	090
33611		A	Repair double ventricle	35.47	NA	NA	12.37	13.69	4.36	NA	NA	52.20	53.52	090
33612		A	Repair double ventricle	36.47	NA	NA	12.97	14.61	5.28	NA	NA	54.72	56.36	090
33615		A	Repair, modified fontan	35.72	NA	NA	12.49	12.98	4.31	NA	NA	52.52	53.01	090
33617		A	Repair single ventricle	38.92	NA	NA	16.37	16.09	5.64	NA	NA	60.93	60.65	090
33619		A	Repair single ventricle	48.56	NA	NA	18.36	20.19	6.44	NA	NA	73.36	75.19	090
33641		A	Repair heart septum defect	28.47	NA	NA	10.73	9.86	3.22	NA	NA	42.42	41.55	090
33645		A	Revision of heart veins	27.95	NA	NA	11.02	11.58	3.78	NA	NA	42.75	43.31	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
33647		A	Repair heart septum defects	29.33	NA	NA	12.34	13.41	3.31	NA	NA	44.98	46.05	090
33660		A	Repair of heart defects	31.73	NA	NA	11.49	12.98	4.48	NA	NA	47.70	49.19	090
33665		A	Repair of heart defects	34.75	NA	NA	12.45	13.49	3.99	NA	NA	51.19	52.23	090
33670		A	Repair of heart chambers	36.56	NA	NA	12.28	12.95	4.64	NA	NA	53.48	54.15	090
33681		A	Repair heart septum defect	32.10	NA	NA	13.28	14.33	4.44	NA	NA	49.82	50.87	090
33684		A	Repair heart septum defect	34.27	NA	NA	19.40	15.07	3.38	NA	NA	57.05	52.72	090
33688		A	Repair heart septum defect	34.65	NA	NA	9.50	10.23	4.72	NA	NA	48.87	49.60	090
33690		A	Reinforce pulmonary artery	20.16	NA	NA	8.63	9.78	1.96	NA	NA	30.75	31.90	090
33692		A	Repair of heart defects	31.34	NA	NA	9.29	12.76	4.57	NA	NA	45.20	48.67	090
33694		A	Repair of heart defects	35.47	NA	NA	10.16	13.21	5.26	NA	NA	50.89	53.94	090
33697		A	Repair of heart defects	37.47	NA	NA	21.66	16.57	4.08	NA	NA	63.21	58.12	090
33702		A	Repair of heart defects	27.07	NA	NA	11.48	12.29	3.67	NA	NA	42.22	43.03	090
33710		A	Repair of heart defects	30.24	NA	NA	11.69	13.39	4.42	NA	NA	46.35	48.05	090
33720		A	Repair of heart defect	27.09	NA	NA	11.17	12.00	3.83	NA	NA	42.09	42.92	090
33722		A	Repair of heart defect	29.01	NA	NA	8.75	12.58	1.30	NA	NA	39.06	42.89	090
33730		A	Repair heart-vein defect(s)	35.97	NA	NA	13.35	13.93	5.01	NA	NA	54.33	54.91	090
33732		A	Repair heart-vein defect	28.76	NA	NA	14.75	13.72	3.67	NA	NA	47.18	46.15	090
33735		A	Revision of heart chamber	22.00	NA	NA	9.50	9.09	1.91	NA	NA	33.41	33.00	090
33736		A	Revision of heart chamber	24.12	NA	NA	10.80	11.59	3.08	NA	NA	38.00	38.79	090
33737		A	Revision of heart chamber	22.30	NA	NA	7.62	10.10	3.24	NA	NA	33.16	35.64	090
33750		A	Major vessel shunt	22.02	NA	NA	11.30	10.48	1.16	NA	NA	34.48	33.66	090
33755		A	Major vessel shunt	22.40	NA	NA	7.87	8.57	3.25	NA	NA	33.52	34.22	090
33762		A	Major vessel shunt	22.40	NA	NA	7.21	9.42	3.13	NA	NA	32.74	34.95	090
33764		A	Major vessel shunt & graft	22.40	NA	NA	9.29	9.99	3.00	NA	NA	34.69	35.39	090
33766		A	Major vessel shunt	23.37	NA	NA	8.58	10.90	3.69	NA	NA	35.64	37.96	090
33767		A	Major vessel shunt	25.10	NA	NA	9.47	11.16	3.81	NA	NA	38.38	40.07	090
33768		A	Cavopulmonary shunting	8.00	NA	NA	2.22	2.55	1.19	NA	NA	11.41	11.74	ZZZ
33770		A	Repair great vessels defect	39.00	NA	NA	10.67	13.68	5.72	NA	NA	55.39	58.40	090
33771		A	Repair great vessels defect	40.56	NA	NA	10.65	11.95	5.66	NA	NA	56.87	58.17	090
33774		A	Repair great vessels defect	31.48	NA	NA	12.45	14.11	4.80	NA	NA	48.73	50.39	090
33775		A	Repair great vessels defect	32.79	NA	NA	10.21	13.80	4.98	NA	NA	47.98	51.57	090
33776		A	Repair great vessels defect	34.45	NA	NA	13.39	15.20	5.07	NA	NA	52.91	54.72	090
33777		A	Repair great vessels defect	33.87	NA	NA	10.02	14.21	5.47	NA	NA	49.36	53.55	090
33778		A	Repair great vessels defect	42.58	NA	NA	15.26	16.48	6.18	NA	NA	64.02	65.24	090
33779		A	Repair great vessels defect	43.13	NA	NA	11.48	14.40	2.91	NA	NA	57.52	60.44	090
33780		A	Repair great vessels defect	43.83	NA	NA	11.79	17.26	3.67	NA	NA	59.29	64.76	090
33781		A	Repair great vessels defect	43.14	NA	NA	14.18	13.54	5.95	NA	NA	63.27	62.63	090
33786		A	Repair arterial trunk	41.70	NA	NA	11.53	15.42	5.69	NA	NA	58.92	62.81	090
33788		A	Revision of pulmonary artery	27.22	NA	NA	9.69	11.39	4.02	NA	NA	40.93	42.63	090
33800		A	Aortic suspension	17.21	NA	NA	7.32	7.91	2.45	NA	NA	26.98	27.57	090
33802		A	Repair vessel defect	18.20	NA	NA	7.50	8.79	2.26	NA	NA	27.96	29.25	090
33803		A	Repair vessel defect	20.14	NA	NA	7.95	9.31	3.19	NA	NA	31.28	32.64	090
33813		A	Repair septal defect	21.19	NA	NA	9.00	10.43	3.12	NA	NA	33.31	34.74	090
33814		A	Repair septal defect	26.37	NA	NA	10.48	12.10	3.84	NA	NA	40.69	42.31	090
33820		A	Revise major vessel	16.59	NA	NA	8.39	8.37	2.34	NA	NA	27.32	27.30	090
33822		A	Revise major vessel	17.61	NA	NA	6.00	8.21	2.67	NA	NA	26.28	28.49	090
33824		A	Revise major vessel	20.06	NA	NA	8.62	9.64	2.88	NA	NA	31.56	32.58	090
33840		A	Remove aorta constriction	21.17	NA	NA	8.99	9.97	2.15	NA	NA	32.31	33.29	090
33845		A	Remove aorta constriction	22.73	NA	NA	9.64	10.92	3.21	NA	NA	35.58	36.86	090
33851		A	Remove aorta constriction	21.81	NA	NA	9.17	10.30	3.17	NA	NA	34.15	35.28	090
33852		A	Repair septal defect	24.24	NA	NA	9.90	11.00	2.15	NA	NA	36.29	37.39	090
33853		A	Repair septal defect	32.31	NA	NA	13.03	14.37	4.47	NA	NA	49.81	51.15	090
33860		A	Ascending aortic graft	43.13	NA	NA	15.73	16.27	5.74	NA	NA	64.60	65.14	090
33861		A	Ascending aortic graft	43.88	NA	NA	16.12	17.31	6.35	NA	NA	66.35	67.54	090
33863		A	Ascending aortic graft	48.52	NA	NA	17.69	18.44	6.57	NA	NA	72.78	73.53	090
33870		A	Transverse aortic arch graft	45.87	NA	NA	16.67	17.95	6.60	NA	NA	69.14	70.42	090

33875		A	Thoracic aortic graft	35.64	NA	NA	13.16	13.86	4.88	NA	NA	53.68	54.38	090
33877		A	Thoracoabdominal graft	57.75	NA	NA	18.83	16.94	5.92	NA	NA	82.50	80.61	090
33880		A	Endovasc taa repr incl subcl	34.44	NA	NA	10.59	12.75	2.74	NA	NA	47.77	49.93	090
33881		A	Endovasc taa repr w/o subcl	29.44	NA	NA	9.35	11.31	2.32	NA	NA	41.11	43.07	090
33883		A	Insert endovasc prosth, taa	20.95	NA	NA	7.01	8.64	2.10	NA	NA	30.06	31.69	090
33884		A	Endovasc prosth, taa, add-on	8.20	NA	NA	2.01	2.43	0.86	NA	NA	11.07	11.49	ZZZ
33886		A	Endovasc prosth, delayed	17.95	NA	NA	6.25	7.74	1.79	NA	NA	25.99	27.48	090
33889		A	Artery transpose/endovas taa	15.92	NA	NA	4.17	4.92	2.17	NA	NA	22.26	23.01	000
33891		A	Car-car bp grft/endovas taa	20.00	NA	NA	6.45	6.83	2.72	NA	NA	29.17	29.55	000
33910		A	Remove lung artery emboli	29.56	NA	NA	11.34	11.41	3.69	NA	NA	44.59	44.66	090
33915		A	Remove lung artery emboli	24.80	NA	NA	10.04	9.73	1.44	NA	NA	36.28	35.97	090
33916		A	Surgery of great vessel	28.27	NA	NA	10.92	11.24	3.66	NA	NA	42.85	43.17	090
33917		A	Repair pulmonary artery	25.10	NA	NA	10.43	11.74	3.69	NA	NA	39.22	40.53	090
33920		A	Repair pulmonary atresia	32.54	NA	NA	11.39	13.21	4.37	NA	NA	48.30	50.12	090
33922		A	Transect pulmonary artery	24.05	NA	NA	11.44	11.04	3.09	NA	NA	38.58	38.18	090
33924		A	Remove pulmonary shunt	5.49	NA	NA	2.12	1.91	0.82	NA	NA	8.43	8.22	ZZZ
33925		A	Rpr pul art unifocal w/o cpb	31.23	NA	NA	10.21	13.55	4.60	NA	NA	46.04	49.38	090
33926		A	Repr pul art, unifocal w/cpb	44.66	NA	NA	14.38	16.86	6.20	NA	NA	65.24	67.72	090
33933		C	Prepare donor heart/lung	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
33935		R	Transplantation, heart/lung	61.56	NA	NA	23.37	27.42	9.03	NA	NA	93.96	98.01	090
33944		C	Prepare donor heart	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
33945		R	Transplantation of heart	50.14	NA	NA	19.01	20.80	6.24	NA	NA	75.39	77.18	090
33960		A	External circulation assist	19.33	NA	NA	5.60	5.08	2.66	NA	NA	27.59	27.07	000
33961		A	External circulation assist	10.91	NA	NA	2.91	3.44	0.88	NA	NA	14.70	15.23	ZZZ
33967		A	Insert ia percut device	4.84	NA	NA	2.44	1.99	0.35	NA	NA	7.63	7.18	000
33968		A	Remove aortic assist device	0.64	NA	NA	0.27	0.24	0.07	NA	NA	0.98	0.95	000
33970		A	Aortic circulation assist	6.74	NA	NA	2.54	2.35	0.82	NA	NA	10.10	9.91	000
33971		A	Aortic circulation assist	11.89	NA	NA	6.09	6.02	1.25	NA	NA	19.23	19.16	090
33973		A	Insert balloon device	9.75	NA	NA	3.88	3.45	1.26	NA	NA	14.89	14.46	000
33974		A	Remove intra-aortic balloon	14.89	NA	NA	7.79	7.86	1.73	NA	NA	24.41	24.48	090
33975		A	Implant ventricular device	20.97	NA	NA	6.63	6.37	3.06	NA	NA	30.66	30.40	XXX
33976		A	Implant ventricular device	22.97	NA	NA	7.92	7.64	3.25	NA	NA	34.14	33.86	XXX
33977		A	Remove ventricular device	19.99	NA	NA	9.37	10.65	2.80	NA	NA	32.16	33.44	090
33978		A	Remove ventricular device	22.43	NA	NA	10.52	11.44	3.30	NA	NA	36.25	37.17	090
33979		A	Insert intracorporeal device	45.93	NA	NA	14.38	14.79	6.95	NA	NA	67.26	67.67	XXX
33980		A	Remove intracorporeal device	64.76	NA	NA	25.09	25.20	8.56	NA	NA	98.41	98.52	090
33999		C	Cardiac surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
34001		A	Removal of artery clot	17.74	NA	NA	6.68	6.70	1.84	NA	NA	26.26	26.28	090
34051		A	Removal of artery clot	16.86	NA	NA	6.93	7.57	2.20	NA	NA	25.99	26.63	090
34101		A	Removal of artery clot	10.81	NA	NA	4.44	5.12	1.41	NA	NA	16.66	17.34	090
34111		A	Removal of arm artery clot	10.81	NA	NA	4.50	5.14	1.40	NA	NA	16.71	17.35	090
34151		A	Removal of artery clot	26.35	NA	NA	8.87	10.02	3.55	NA	NA	38.77	39.92	090
34201		A	Removal of artery clot	18.40	NA	NA	6.57	5.70	1.45	NA	NA	26.42	25.55	090
34203		A	Removal of leg artery clot	17.67	NA	NA	6.57	7.69	2.35	NA	NA	26.59	27.71	090
34401		A	Removal of vein clot	26.35	NA	NA	9.64	10.41	3.09	NA	NA	39.08	39.85	090
34421		A	Removal of vein clot	13.25	NA	NA	5.36	6.06	1.55	NA	NA	20.16	20.86	090
34451		A	Removal of vein clot	28.35	NA	NA	9.71	11.01	3.83	NA	NA	41.89	43.19	090
34471		A	Removal of vein clot	20.94	NA	NA	7.73	5.91	1.18	NA	NA	29.85	28.03	090
34490		A	Removal of vein clot	10.79	NA	NA	4.54	5.20	1.41	NA	NA	16.74	17.40	090
34501		A	Repair valve, femoral vein	16.68	NA	NA	6.96	8.11	2.34	NA	NA	25.98	27.13	090
34502		A	Reconstruct vena cava	27.80	NA	NA	10.78	11.91	3.62	NA	NA	42.20	43.33	090
34510		A	Transposition of vein valve	19.74	NA	NA	7.25	8.87	2.32	NA	NA	29.31	30.93	090
34520		A	Cross-over vein graft	18.99	NA	NA	9.19	8.64	2.28	NA	NA	30.46	29.91	090
34530		A	Leg vein fusion	17.69	NA	NA	7.88	8.43	1.73	NA	NA	27.30	27.85	090
34800		A	Endovas aaa repr w/sm tube	21.42	NA	NA	7.49	8.74	2.45	NA	NA	31.36	32.61	090
34802		A	Endovas aaa repr w/2-p part	23.67	NA	NA	8.32	9.42	2.32	NA	NA	34.31	35.41	090
34803		A	Endovas aaa repr w/3-p part	24.70	NA	NA	8.25	9.72	2.00	NA	NA	34.95	36.42	090
34804		A	Endovas aaa repr w/1-p part	23.67	NA	NA	8.18	9.40	2.29	NA	NA	34.14	35.36	090
34805		A	Endovas aaa repr w/long tube	22.55	NA	NA	7.34	9.07	2.00	NA	NA	31.89	33.62	090
34808		A	Endovas iliac a device addon	4.12	NA	NA	1.11	1.31	0.59	NA	NA	5.82	6.02	ZZZ
34812		A	Xpose for endoprosth, femorl	6.74	NA	NA	1.73	2.11	1.18	NA	NA	9.65	10.03	000
34813		A	Femoral endovas graft add-on	4.79	NA	NA	1.21	1.48	0.67	NA	NA	6.67	6.94	ZZZ
34820		A	Xpose for endoprosth, iliac	9.74	NA	NA	2.47	3.04	1.50	NA	NA	13.71	14.28	000
34825		A	Endovasc extend prosth, init	12.68	NA	NA	5.23	5.91	1.28	NA	NA	19.19	19.87	090
34826		A	Endovasc exten prosth, addll	4.12	NA	NA	1.16	1.32	0.44	NA	NA	5.72	5.88	ZZZ
34830		A	Open aortic tube prosth repr	35.04	NA	NA	10.82	12.97	4.54	NA	NA	50.40	52.55	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
34831		A	Open aortoiliac prosth repr	37.79	NA	NA	12.15	11.84	4.88	NA	NA	54.82	54.51	090
34832		A	Open aortofemor prosth repr	37.79	NA	NA	11.68	13.89	4.84	NA	NA	54.31	56.52	090
34833		A	Xpose for endoprosth, iliac	11.98	NA	NA	3.32	4.15	1.69	NA	NA	16.99	17.82	000
34834		A	Xpose, endoprosth, brachial	5.34	NA	NA	1.62	2.05	0.76	NA	NA	7.72	8.15	000
34900		A	Endovasc iliac repr w/graft	16.73	NA	NA	6.34	7.27	1.99	NA	NA	25.06	25.99	090
35001		A	Repair defect of artery	20.63	NA	NA	7.64	9.07	2.80	NA	NA	31.07	32.50	090
35002		A	Repair artery rupture, neck	22.05	NA	NA	7.82	9.22	2.99	NA	NA	32.86	34.26	090
35005		A	Repair defect of artery	19.11	NA	NA	8.14	8.67	1.76	NA	NA	29.01	29.54	090
35011		A	Repair defect of artery	18.46	NA	NA	6.43	7.59	2.54	NA	NA	27.43	28.59	090
35013		A	Repair artery rupture, arm	23.04	NA	NA	7.96	9.24	3.09	NA	NA	34.09	35.37	090
35021		A	Repair defect of artery	22.04	NA	NA	8.70	9.23	2.86	NA	NA	33.60	34.13	090
35022		A	Repair artery rupture, chest	25.57	NA	NA	9.50	9.76	3.16	NA	NA	38.23	38.49	090
35045		A	Repair defect of arm artery	17.91	NA	NA	6.42	7.23	2.44	NA	NA	26.77	27.58	090
35081		A	Repair defect of artery	33.31	NA	NA	11.10	11.37	4.00	NA	NA	48.41	48.68	090
35082		A	Repair artery rupture, aorta	41.87	NA	NA	13.19	14.77	5.42	NA	NA	60.48	62.06	090
35091		A	Repair defect of artery	35.35	NA	NA	10.46	12.79	5.12	NA	NA	50.93	53.26	090
35092		A	Repair artery rupture, aorta	50.75	NA	NA	15.09	17.00	6.38	NA	NA	72.22	74.13	090
35102		A	Repair defect of artery	36.31	NA	NA	11.68	12.18	4.47	NA	NA	52.46	52.96	090
35103		A	Repair artery rupture, groin	43.43	NA	NA	13.31	15.21	5.74	NA	NA	62.48	64.38	090
35111		A	Repair defect of artery	26.11	NA	NA	8.62	10.00	3.46	NA	NA	38.19	39.57	090
35112		A	Repair artery rupture,spleen	32.38	NA	NA	10.53	11.60	4.07	NA	NA	46.98	48.05	090
35121		A	Repair defect of artery	31.35	NA	NA	10.51	11.90	4.29	NA	NA	46.15	47.54	090
35122		A	Repair artery rupture, belly	37.70	NA	NA	12.17	13.39	4.74	NA	NA	54.61	55.83	090
35131		A	Repair defect of artery	26.23	NA	NA	8.92	10.29	3.79	NA	NA	38.94	40.31	090
35132		A	Repair artery rupture, groin	32.38	NA	NA	10.33	11.86	4.29	NA	NA	47.00	48.53	090
35141		A	Repair defect of artery	20.79	NA	NA	7.15	8.47	2.89	NA	NA	30.83	32.15	090
35142		A	Repair artery rupture, thigh	24.97	NA	NA	8.46	9.89	3.35	NA	NA	36.78	38.21	090
35151		A	Repair defect of artery	23.55	NA	NA	7.96	9.48	3.23	NA	NA	34.74	36.26	090
35152		A	Repair artery rupture, knee	27.47	NA	NA	9.15	10.82	3.60	NA	NA	40.22	41.89	090
35180		A	Repair blood vessel lesion	14.95	NA	NA	6.15	6.74	1.00	NA	NA	22.10	22.69	090
35182		A	Repair blood vessel lesion	31.52	NA	NA	11.82	12.55	4.35	NA	NA	47.69	48.42	090
35184		A	Repair blood vessel lesion	18.67	NA	NA	6.96	7.96	2.52	NA	NA	28.15	29.15	090
35188		A	Repair blood vessel lesion	14.98	NA	NA	6.23	7.28	2.15	NA	NA	23.36	24.41	090
35189		A	Repair blood vessel lesion	29.79	NA	NA	10.15	11.50	4.00	NA	NA	43.94	45.29	090
35190		A	Repair blood vessel lesion	13.27	NA	NA	5.34	6.19	1.79	NA	NA	20.40	21.25	090
35201		A	Repair blood vessel lesion	16.78	NA	NA	6.45	7.61	2.33	NA	NA	25.56	26.72	090
35206		A	Repair blood vessel lesion	13.72	NA	NA	5.42	6.27	1.86	NA	NA	21.00	21.85	090
35207		A	Repair blood vessel lesion	10.79	NA	NA	6.60	7.16	1.48	NA	NA	18.87	19.43	090
35211		A	Repair blood vessel lesion	24.45	NA	NA	10.11	10.49	3.19	NA	NA	37.75	38.13	090
35216		A	Repair blood vessel lesion	36.43	NA	NA	13.90	10.20	2.64	NA	NA	52.97	49.27	090
35221		A	Repair blood vessel lesion	26.50	NA	NA	8.59	9.60	3.36	NA	NA	38.45	39.46	090
35226		A	Repair blood vessel lesion	15.18	NA	NA	5.91	7.05	2.01	NA	NA	23.10	24.24	090
35231		A	Repair blood vessel lesion	21.04	NA	NA	7.70	9.25	2.88	NA	NA	31.62	33.17	090
35236		A	Repair blood vessel lesion	17.90	NA	NA	6.50	7.54	2.42	NA	NA	26.82	27.86	090
35241		A	Repair blood vessel lesion	25.45	NA	NA	9.97	10.83	3.52	NA	NA	38.94	39.80	090
35246		A	Repair blood vessel lesion	28.11	NA	NA	11.95	11.55	3.85	NA	NA	43.91	43.51	090
35251		A	Repair blood vessel lesion	31.79	NA	NA	9.83	11.30	4.12	NA	NA	45.74	47.21	090
35256		A	Repair blood vessel lesion	18.94	NA	NA	6.65	7.93	2.62	NA	NA	28.21	29.49	090
35261		A	Repair blood vessel lesion	18.84	NA	NA	7.26	7.82	2.60	NA	NA	28.70	29.26	090
35266		A	Repair blood vessel lesion	15.71	NA	NA	5.72	6.68	2.09	NA	NA	23.52	24.48	090
35271		A	Repair blood vessel lesion	24.45	NA	NA	9.69	10.31	3.15	NA	NA	37.29	37.91	090
35276		A	Repair blood vessel lesion	25.67	NA	NA	9.66	10.82	3.48	NA	NA	38.81	39.97	090
35281		A	Repair blood vessel lesion	29.87	NA	NA	9.81	11.23	3.96	NA	NA	43.64	45.06	090
35286		A	Repair blood vessel lesion	17.00	NA	NA	6.47	7.66	2.34	NA	NA	25.81	27.00	090
35301		A	Rechanneling of artery	19.49	NA	NA	6.90	8.05	2.67	NA	NA	29.06	30.21	090
35311		A	Rechanneling of artery	28.48	NA	NA	9.69	11.23	3.41	NA	NA	41.58	43.12	090

35321		A	Rechanneling of artery	16.47	NA	NA	6.00	7.04	2.24	NA	NA	24.71	25.75	090
35331		A	Rechanneling of artery	27.55	NA	NA	9.04	10.68	3.62	NA	NA	40.41	42.05	090
35341		A	Rechanneling of artery	26.03	NA	NA	8.58	10.29	3.77	NA	NA	38.38	40.09	090
35351		A	Rechanneling of artery	24.49	NA	NA	7.98	9.19	3.34	NA	NA	35.81	37.02	090
35355		A	Rechanneling of artery	19.74	NA	NA	6.57	7.70	2.66	NA	NA	28.97	30.10	090
35361		A	Rechanneling of artery	30.05	NA	NA	9.75	11.21	4.14	NA	NA	43.94	45.40	090
35363		A	Rechanneling of artery	32.16	NA	NA	10.60	12.09	4.32	NA	NA	47.08	48.57	090
35371		A	Rechanneling of artery	15.19	NA	NA	5.51	6.59	2.13	NA	NA	22.83	23.91	090
35372		A	Rechanneling of artery	18.46	NA	NA	6.33	7.61	2.62	NA	NA	27.41	28.69	090
35381		A	Rechanneling of artery	16.63	NA	NA	6.33	7.44	2.25	NA	NA	25.21	26.32	090
35390		A	Reoperation, carotid add-on	3.19	NA	NA	0.85	1.01	0.46	NA	NA	4.50	4.66	ZZZ
35400		A	Angioscopy	3.00	NA	NA	0.75	1.02	0.43	NA	NA	4.18	4.45	ZZZ
35450		A	Repair arterial blockage	10.05	NA	NA	3.22	3.48	1.25	NA	NA	14.52	14.78	000
35452		A	Repair arterial blockage	6.90	NA	NA	2.12	2.48	0.94	NA	NA	9.96	10.32	000
35454		A	Repair arterial blockage	6.03	NA	NA	1.83	2.19	0.87	NA	NA	8.73	9.09	000
35456		A	Repair arterial blockage	7.34	NA	NA	2.30	2.65	1.04	NA	NA	10.68	11.03	000
35458		A	Repair arterial blockage	9.48	NA	NA	2.91	3.33	1.26	NA	NA	13.65	14.07	000
35459		A	Repair arterial blockage	8.62	NA	NA	2.53	3.01	1.21	NA	NA	12.36	12.84	000
35460		A	Repair venous blockage	6.03	NA	NA	1.79	2.15	0.83	NA	NA	8.65	9.01	000
35470		A	Repair arterial blockage	8.62	62.11	82.17	3.47	3.38	0.69	71.42	91.48	12.78	12.69	000
35471		A	Repair arterial blockage	10.05	66.97	91.94	4.70	4.14	0.67	77.69	102.7	15.42	14.86	000
35472		A	Repair arterial blockage	6.90	48.34	60.35	2.81	2.76	0.58	55.82	67.83	10.29	10.24	000
35473		A	Repair arterial blockage	6.03	47.23	56.69	2.51	2.44	0.51	53.77	63.23	9.05	8.98	000
35474		A	Repair arterial blockage	7.35	61.24	81.11	3.00	2.92	0.57	69.16	89.03	10.92	10.84	000
35475		R	Repair arterial blockage	9.48	49.26	54.39	3.40	3.52	0.62	59.36	64.49	13.50	13.62	000
35476		A	Repair venous blockage	6.03	37.43	42.91	2.13	2.30	0.34	43.80	49.28	8.50	8.67	000
35480		A	Atherectomy, open	11.06	NA	NA	3.96	4.02	1.28	NA	NA	16.30	16.36	000
35481		A	Atherectomy, open	7.60	NA	NA	2.50	2.78	1.13	NA	NA	11.23	11.51	000
35482		A	Atherectomy, open	6.64	NA	NA	2.13	2.45	0.89	NA	NA	9.66	9.98	000
35483		A	Atherectomy, open	8.09	NA	NA	2.79	2.96	1.15	NA	NA	12.03	12.20	000
35484		A	Atherectomy, open	10.42	NA	NA	3.08	3.60	1.27	NA	NA	14.77	15.29	000
35485		A	Atherectomy, open	9.48	NA	NA	3.00	3.40	1.35	NA	NA	13.83	14.23	000
35490		A	Atherectomy, percutaneous	11.06	NA	NA	6.27	5.09	0.71	NA	NA	18.04	16.86	000
35491		A	Atherectomy, percutaneous	7.60	NA	NA	3.97	3.46	0.74	NA	NA	12.31	11.80	000
35492		A	Atherectomy, percutaneous	6.64	NA	NA	3.63	3.30	0.43	NA	NA	10.70	10.37	000
35493		A	Atherectomy, percutaneous	8.09	NA	NA	4.15	3.89	0.56	NA	NA	12.80	12.54	000
35494		A	Atherectomy, percutaneous	10.42	NA	NA	5.23	4.65	0.59	NA	NA	16.24	15.66	000
35495		A	Atherectomy, percutaneous	9.48	NA	NA	4.64	4.45	0.69	NA	NA	14.81	14.62	000
35500		A	Harvest vein for bypass	6.44	NA	NA	1.69	1.94	0.93	NA	NA	9.06	9.31	ZZZ
35501		A	Artery bypass graft	19.70	NA	NA	7.29	8.17	2.80	NA	NA	29.79	30.67	090
35506		A	Artery bypass graft	25.19	NA	NA	8.48	9.22	2.86	NA	NA	36.53	37.27	090
35507		A	Artery bypass graft	20.60	NA	NA	7.54	8.95	2.84	NA	NA	30.98	32.39	090
35508		A	Artery bypass graft	25.95	NA	NA	9.15	9.37	2.77	NA	NA	37.87	38.09	090
35509		A	Artery bypass graft	18.94	NA	NA	6.78	8.27	2.61	NA	NA	28.33	29.82	090
35510		A	Artery bypass graft	24.25	NA	NA	7.80	9.58	2.11	NA	NA	34.16	35.94	090
35511		A	Artery bypass graft	22.08	NA	NA	7.33	8.85	2.90	NA	NA	32.31	33.83	090
35512		A	Artery bypass graft	23.75	NA	NA	7.53	9.38	2.11	NA	NA	33.39	35.24	090
35515		A	Artery bypass graft	25.95	NA	NA	8.45	9.07	2.77	NA	NA	37.17	37.79	090
35516		A	Artery bypass graft	24.07	NA	NA	7.80	7.05	2.33	NA	NA	34.20	33.45	090
35518		A	Artery bypass graft	22.53	NA	NA	7.54	8.61	3.02	NA	NA	33.09	34.16	090
35521		A	Artery bypass graft	23.94	NA	NA	8.15	9.41	3.12	NA	NA	35.21	36.47	090
35522		A	Artery bypass graft	23.01	NA	NA	7.51	9.19	2.11	NA	NA	32.63	34.31	090
35525		A	Artery bypass graft	21.55	NA	NA	7.19	8.83	2.11	NA	NA	30.85	32.49	090
35526		A	Artery bypass graft	31.43	NA	NA	18.22	13.93	3.62	NA	NA	53.27	48.98	090
35531		A	Artery bypass graft	38.92	NA	NA	11.95	13.84	5.16	NA	NA	56.03	57.92	090
35533		A	Artery bypass graft	29.73	NA	NA	9.99	11.29	3.84	NA	NA	43.56	44.86	090
35536		A	Artery bypass graft	33.54	NA	NA	10.69	12.38	4.61	NA	NA	48.84	50.53	090
35541		A	Artery bypass graft	26.90	NA	NA	9.26	10.72	3.70	NA	NA	39.86	41.32	090
35546		A	Artery bypass graft	26.40	NA	NA	9.07	10.41	3.69	NA	NA	39.16	40.50	090
35548		A	Artery bypass graft	22.50	NA	NA	7.97	9.06	2.97	NA	NA	33.44	34.53	090
35549		A	Artery bypass graft	24.27	NA	NA	9.18	10.07	3.29	NA	NA	36.74	37.63	090
35551		A	Artery bypass graft	27.65	NA	NA	9.90	11.09	3.74	NA	NA	41.29	42.48	090
35556		A	Artery bypass graft	26.56	NA	NA	8.93	9.52	3.09	NA	NA	38.58	39.17	090
35558		A	Artery bypass graft	22.94	NA	NA	8.09	9.18	2.99	NA	NA	34.02	35.11	090
35560		A	Artery bypass graft	33.84	NA	NA	10.79	12.68	4.74	NA	NA	49.37	51.26	090
35563		A	Artery bypass graft	25.93	NA	NA	8.62	10.05	3.51	NA	NA	38.06	39.49	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
35565		A	Artery bypass graft	24.94	NA	NA	8.51	9.73	3.29	NA	NA	36.74	37.96	090
35566		A	Artery bypass graft	32.16	NA	NA	10.20	11.09	3.82	NA	NA	46.18	47.07	090
35571		A	Artery bypass graft	25.33	NA	NA	8.45	10.24	3.42	NA	NA	37.20	38.99	090
35572		A	Harvest femoropopliteal vein	6.81	NA	NA	1.88	2.15	0.99	NA	NA	9.68	9.95	ZZZ
35583		A	Vein bypass graft	27.56	NA	NA	9.01	9.87	3.16	NA	NA	39.73	40.59	090
35585		A	Vein bypass graft	32.16	NA	NA	10.15	11.70	4.01	NA	NA	46.32	47.87	090
35587		A	Vein bypass graft	26.02	NA	NA	8.69	10.76	3.51	NA	NA	38.22	40.29	090
35600		A	Harvest artery for cabg	4.94	NA	NA	1.54	1.60	0.73	NA	NA	7.21	7.27	ZZZ
35601		A	Artery bypass graft	18.31	NA	NA	6.63	8.12	2.49	NA	NA	27.43	28.92	090
35606		A	Artery bypass graft	22.32	NA	NA	7.68	8.68	2.69	NA	NA	32.69	33.69	090
35612		A	Artery bypass graft	16.64	NA	NA	6.40	7.51	2.08	NA	NA	25.12	26.23	090
35616		A	Artery bypass graft	21.70	NA	NA	7.14	7.86	2.19	NA	NA	31.03	31.75	090
35621		A	Artery bypass graft	20.91	NA	NA	7.04	8.26	2.91	NA	NA	30.86	32.08	090
35623		A	Bypass graft, not vein	25.73	NA	NA	8.65	10.03	3.45	NA	NA	37.83	39.21	090
35626		A	Artery bypass graft	29.02	NA	NA	10.25	11.54	4.07	NA	NA	43.34	44.63	090
35631		A	Artery bypass graft	35.84	NA	NA	11.04	13.13	4.95	NA	NA	51.83	53.92	090
35636		A	Artery bypass graft	31.56	NA	NA	9.94	11.70	4.09	NA	NA	45.59	47.35	090
35641		A	Artery bypass graft	26.24	NA	NA	9.23	10.60	3.53	NA	NA	39.00	40.37	090
35642		A	Artery bypass graft	18.79	NA	NA	7.70	8.44	2.27	NA	NA	28.76	29.50	090
35645		A	Artery bypass graft	18.28	NA	NA	7.32	8.03	2.49	NA	NA	28.09	28.80	090
35646		A	Artery bypass graft	32.78	NA	NA	10.78	12.52	4.43	NA	NA	47.99	49.73	090
35647		A	Artery bypass graft	29.56	NA	NA	9.79	11.28	3.98	NA	NA	43.33	44.82	090
35650		A	Artery bypass graft	20.04	NA	NA	6.80	7.97	2.71	NA	NA	29.55	30.72	090
35651		A	Artery bypass graft	25.90	NA	NA	8.84	10.25	3.35	NA	NA	38.09	39.50	090
35654		A	Artery bypass graft	26.11	NA	NA	8.59	10.14	3.52	NA	NA	38.22	39.77	090
35656		A	Artery bypass graft	20.35	NA	NA	7.05	8.21	2.79	NA	NA	30.19	31.35	090
35661		A	Artery bypass graft	20.16	NA	NA	7.30	8.52	2.71	NA	NA	30.17	31.39	090
35663		A	Artery bypass graft	23.74	NA	NA	8.13	9.51	3.10	NA	NA	34.97	36.35	090
35665		A	Artery bypass graft	22.16	NA	NA	7.65	8.99	3.00	NA	NA	32.81	34.15	090
35666		A	Artery bypass graft	23.47	NA	NA	8.78	10.18	3.15	NA	NA	35.40	36.80	090
35671		A	Artery bypass graft	20.58	NA	NA	7.98	9.02	2.77	NA	NA	31.33	32.37	090
35681		A	Composite bypass graft	1.60	NA	NA	0.42	0.50	0.23	NA	NA	2.25	2.33	ZZZ
35682		A	Composite bypass graft	7.19	NA	NA	1.78	2.23	1.03	NA	NA	10.00	10.45	ZZZ
35683		A	Composite bypass graft	8.49	NA	NA	2.12	2.65	1.20	NA	NA	11.81	12.34	ZZZ
35685		A	Bypass graft patency/patch	4.04	NA	NA	1.01	1.27	0.58	NA	NA	5.63	5.89	ZZZ
35686		A	Bypass graft/av fist patency	3.34	NA	NA	0.85	1.06	0.47	NA	NA	4.66	4.87	ZZZ
35691		A	Arterial transposition	18.26	NA	NA	6.33	7.88	2.58	NA	NA	27.17	28.72	090
35693		A	Arterial transposition	15.58	NA	NA	6.09	7.31	2.21	NA	NA	23.88	25.10	090
35694		A	Arterial transposition	19.13	NA	NA	6.59	8.10	2.69	NA	NA	28.41	29.92	090
35695		A	Arterial transposition	19.91	NA	NA	6.64	8.07	2.73	NA	NA	29.28	30.71	090
35697		A	Reimplant artery each	3.00	NA	NA	0.77	0.96	0.41	NA	NA	4.18	4.37	ZZZ
35700		A	Reoperation, bypass graft	3.08	NA	NA	0.80	0.97	0.44	NA	NA	4.32	4.49	ZZZ
35701		A	Exploration, carotid artery	9.07	NA	NA	4.26	4.93	1.12	NA	NA	14.45	15.12	090
35721		A	Exploration, femoral artery	7.62	NA	NA	3.76	4.26	1.03	NA	NA	12.41	12.91	090
35741		A	Exploration popliteal artery	8.57	NA	NA	3.98	4.49	1.12	NA	NA	13.67	14.18	090
35761		A	Exploration of artery/vein	5.78	NA	NA	3.49	3.88	0.75	NA	NA	10.02	10.41	090
35800		A	Explore neck vessels	7.94	NA	NA	3.96	4.48	0.95	NA	NA	12.85	13.37	090
35820		A	Explore chest vessels	30.08	NA	NA	11.17	8.19	1.94	NA	NA	43.19	40.21	090
35840		A	Explore abdominal vessels	10.81	NA	NA	4.89	5.18	1.34	NA	NA	17.04	17.33	090
35860		A	Explore limb vessels	6.67	NA	NA	3.49	3.90	0.78	NA	NA	10.94	11.35	090
35870		A	Repair vessel graft defect	24.32	NA	NA	8.25	9.38	3.00	NA	NA	35.57	36.70	090
35875		A	Removal of clot in graft	10.60	NA	NA	4.43	4.99	1.41	NA	NA	16.44	17.00	090
35876		A	Removal of clot in graft	17.70	NA	NA	6.16	7.17	2.39	NA	NA	26.25	27.26	090
35879		A	Revise graft w/vein	17.24	NA	NA	6.17	7.31	2.27	NA	NA	25.68	26.82	090
35881		A	Revise graft w/vein	19.16	NA	NA	6.72	8.18	2.55	NA	NA	28.43	29.89	090
35901		A	Excision, graft, neck	8.18	NA	NA	4.32	5.06	1.15	NA	NA	13.65	14.39	090

35903		A	Excision, graft, extremity	9.38	NA	NA	4.72	5.79	1.30	NA	NA	15.40	16.47	090
35905		A	Excision, graft, thorax	33.33	NA	NA	10.76	12.58	4.43	NA	NA	48.52	50.34	090
35907		A	Excision, graft, abdomen	37.08	NA	NA	11.35	13.46	4.91	NA	NA	53.34	55.45	090
36000		A	Place needle in vein	0.18	0.46	0.54	0.06	0.05	0.01	0.65	0.73	0.25	0.24	XXX
36002		A	Pseudoaneurysm injection trt	1.96	2.23	2.70	0.82	0.93	0.17	4.36	4.83	2.95	3.06	000
36005		A	Injection ext venography	0.95	8.54	7.87	0.37	0.33	0.05	9.54	8.87	1.37	1.33	000
36010		A	Place catheter in vein	2.43	11.23	17.28	0.75	0.78	0.20	13.86	19.91	3.38	3.41	XXX
36011		A	Place catheter in vein	3.14	19.70	25.79	0.97	1.04	0.27	23.11	29.20	4.38	4.45	XXX
36012		A	Place catheter in vein	3.51	20.46	19.33	1.20	1.19	0.23	24.20	23.07	4.94	4.93	XXX
36013		A	Place catheter in artery	2.52	19.36	20.86	0.96	0.76	0.25	22.13	23.63	3.73	3.53	XXX
36014		A	Place catheter in artery	3.02	19.16	19.88	1.03	1.03	0.19	22.37	23.09	4.24	4.24	XXX
36015		A	Place catheter in artery	3.51	18.23	22.30	0.94	1.13	0.21	21.95	26.02	4.66	4.85	XXX
36100		A	Establish access to artery	3.02	11.30	11.88	1.20	1.13	0.26	14.58	15.16	4.48	4.41	XXX
36120		A	Establish access to artery	2.01	9.35	10.36	0.58	0.63	0.14	11.50	12.51	2.73	2.78	XXX
36140		A	Establish access to artery	2.01	10.55	12.22	0.70	0.66	0.16	12.72	14.39	2.87	2.83	XXX
36145		A	Artery to vein shunt	2.01	10.36	12.00	0.62	0.65	0.11	12.48	14.12	2.74	2.77	XXX
36160		A	Establish access to aorta	2.52	11.88	13.08	0.76	0.82	0.26	14.66	15.86	3.54	3.60	XXX
36200		A	Place catheter in aorta	3.02	13.76	15.82	1.00	1.01	0.24	17.02	19.08	4.26	4.27	XXX
36215		A	Place catheter in artery	4.67	26.10	26.80	1.83	1.67	0.27	31.04	31.74	6.77	6.61	XXX
36216		A	Place catheter in artery	5.27	28.11	28.84	1.99	1.84	0.31	33.69	34.42	7.57	7.42	XXX
36217		A	Place catheter in artery	6.29	46.29	53.15	2.30	2.20	0.44	53.02	59.88	9.03	8.93	XXX
36218		A	Place catheter in artery	1.01	3.78	4.76	0.36	0.35	0.07	4.86	5.84	1.44	1.43	ZZZ
36245		A	Place catheter in artery	4.67	29.09	31.34	2.09	1.78	0.31	34.07	36.32	7.07	6.76	XXX
36246		A	Place catheter in artery	5.27	27.75	29.41	1.96	1.86	0.38	33.40	35.06	7.61	7.51	XXX
36247		A	Place catheter in artery	6.29	45.77	48.58	2.34	2.19	0.47	52.53	55.34	9.10	8.95	XXX
36248		A	Place catheter in artery	1.01	3.21	3.83	0.37	0.35	0.07	4.29	4.91	1.45	1.43	ZZZ
36260		A	Insertion of infusion pump	9.76	NA	NA	4.86	4.88	1.29	NA	NA	15.91	15.93	090
36261		A	Revision of infusion pump	5.50	NA	NA	3.25	3.56	0.70	NA	NA	9.45	9.76	090
36262		A	Removal of infusion pump	4.01	NA	NA	2.69	2.74	0.54	NA	NA	7.24	7.29	090
36299		C	Vessel injection procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
36400		A	Bl draw < 3 yrs fem/jugular	0.38	0.33	0.29	0.11	0.10	0.03	0.74	0.70	0.52	0.51	XXX
36405		A	Bl draw < 3 yrs scalp vein	0.31	0.29	0.27	0.08	0.08	0.03	0.63	0.61	0.42	0.42	XXX
36406		A	Bl draw < 3 yrs other vein	0.18	0.30	0.29	0.08	0.06	0.01	0.49	0.48	0.27	0.25	XXX
36410		A	Non-routine bl draw > 3 yrs	0.18	0.32	0.30	0.05	0.05	0.01	0.51	0.49	0.24	0.24	XXX
36420		A	Vein access cutdown < 1 yr	1.01	NA	NA	0.21	0.26	0.07	NA	NA	1.29	1.34	XXX
36425		A	Vein access cutdown > 1 yr	0.76	NA	NA	0.22	0.22	0.06	NA	NA	1.04	1.04	XXX
36430		A	Blood transfusion service	0.00	0.93	0.99	0.00	0.76	0.06	0.99	1.05	0.06	0.82	XXX
36440		A	Bl push transfuse, 2 yr or <	1.03	NA	NA	0.43	0.33	0.10	NA	NA	1.56	1.46	XXX
36450		A	Bl exchange/transfuse, nb	2.23	NA	NA	0.78	0.73	0.21	NA	NA	3.22	3.17	XXX
36455		A	Bl exchange/transfuse non-nb	2.43	NA	NA	0.74	0.94	0.15	NA	NA	3.32	3.52	XXX
36460		A	Transfusion service, fetal	6.58	NA	NA	1.70	2.11	0.79	NA	NA	9.07	9.48	XXX
36470		A	Injection therapy of vein	1.09	2.46	2.63	0.66	0.71	0.12	3.67	3.84	1.87	1.92	010
36471		A	Injection therapy of veins	1.57	2.58	2.95	0.80	0.92	0.19	4.34	4.71	2.56	2.68	010
36475		A	Endovenous rf, 1st vein	6.72	36.90	47.77	1.97	2.39	0.37	43.99	54.86	9.06	9.48	000
36476		A	Endovenous rf, vein add-on	3.38	6.04	7.42	0.89	1.08	0.18	9.60	10.98	4.45	4.64	ZZZ
36478		A	Endovenous laser, 1st vein	6.72	33.79	43.53	2.08	2.42	0.37	40.88	50.62	9.17	9.51	000
36479		A	Endovenous laser vein addon	3.38	6.55	7.63	1.01	1.11	0.18	10.11	11.19	4.57	4.67	ZZZ
36481		A	Insertion of catheter, vein	6.98	NA	NA	2.14	2.48	0.55	NA	NA	9.67	10.01	000
36500		A	Insertion of catheter, vein	3.51	NA	NA	1.25	1.34	0.20	NA	NA	4.96	5.05	000
36510		A	Insertion of catheter, vein	1.09	1.09	3.19	0.31	0.54	0.10	2.28	4.38	1.50	1.73	000
36511		A	Apheresis wbc	1.74	NA	NA	0.58	0.69	0.08	NA	NA	2.40	2.51	000
36512		A	Apheresis rbc	1.74	NA	NA	0.61	0.71	0.08	NA	NA	2.43	2.53	000
36513		A	Apheresis platelets	1.74	NA	NA	0.52	0.68	0.17	NA	NA	2.43	2.59	000
36514		A	Apheresis plasma	1.74	10.54	15.36	0.53	0.67	0.08	12.36	17.18	2.35	2.49	000
36515		A	Apheresis, adsorp/reinfuse	1.74	45.31	61.05	0.51	0.62	0.08	47.13	62.87	2.33	2.44	000
36516		A	Apheresis, selective	1.22	49.90	75.51	0.38	0.46	0.08	51.20	76.81	1.68	1.76	000
36522		A	Photopheresis	1.67	35.02	33.03	0.85	0.93	0.13	36.82	34.83	2.65	2.73	000
36550		A	Declot vascular device	0.00	0.33	0.38	0.06	0.31	0.37	0.70	0.75	0.43	0.68	XXX
36555		A	Insert non-tunnel cv cath	2.68	4.16	5.35	0.62	0.76	0.11	6.95	8.14	3.41	3.55	000
36556		A	Insert non-tunnel cv cath	2.50	2.91	4.94	0.57	0.70	0.19	5.60	7.63	3.26	3.39	000
36557		A	Insert tunneled cv cath	5.09	14.96	19.60	2.37	2.58	0.57	20.62	25.26	8.03	8.24	010
36558		A	Insert tunneled cv cath	4.79	15.00	19.53	2.30	2.49	0.57	20.36	24.89	7.66	7.85	010
36560		A	Insert tunneled cv cath	6.24	21.22	27.56	2.55	2.91	0.57	28.03	34.37	9.36	9.72	010
36561		A	Insert tunneled cv cath	5.99	22.48	27.81	2.61	2.87	0.57	29.04	34.37	9.17	9.43	010
36563		A	Insert tunneled cv cath	6.19	23.25	25.87	2.62	2.89	0.84	30.28	32.90	9.65	9.92	010
36565		A	Insert tunneled cv cath	5.99	17.83	22.98	2.51	2.84	0.57	24.39	29.54	9.07	9.40	010

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
36566		A	Insert tunneled cv cath	6.49	114.71	47.80	2.67	3.00	0.57	121.77	54.86	9.73	10.06	010
36568		A	Insert picc cath	1.92	5.73	7.08	0.57	0.58	0.11	7.76	9.11	2.60	2.61	000
36569		A	Insert picc cath	1.82	4.46	6.62	0.61	0.58	0.19	6.47	8.63	2.62	2.59	000
36570		A	Insert picvad cath	5.31	23.19	30.68	2.34	2.63	0.57	29.07	36.56	8.22	8.51	010
36571		A	Insert picvad cath	5.29	25.04	31.19	2.42	2.64	0.57	30.90	37.05	8.28	8.50	010
36575		A	Repair tunneled cv cath	0.67	3.33	3.87	0.23	0.25	0.20	4.20	4.74	1.10	1.12	000
36576		A	Repair tunneled cv cath	3.19	5.88	6.68	1.55	1.77	0.19	9.26	10.06	4.93	5.15	010
36578		A	Replace tunneled cv cath	3.49	9.11	10.63	1.91	2.20	0.19	12.79	14.31	5.59	5.88	010
36580		A	Replace cvad cath	1.31	3.99	6.20	0.41	0.41	0.19	5.49	7.70	1.91	1.91	000
36581		A	Replace tunneled cv cath	3.43	15.64	18.53	1.66	1.86	0.19	19.26	22.15	5.28	5.48	010
36582		A	Replace tunneled cv cath	5.19	20.79	24.71	2.29	2.72	0.19	26.17	30.09	7.67	8.10	010
36583		A	Replace tunneled cv cath	5.24	21.00	24.77	2.41	2.76	0.19	26.43	30.20	7.84	8.19	010
36584		A	Replace picc cath	1.20	3.97	6.22	0.57	0.56	0.19	5.36	7.61	1.96	1.95	000
36585		A	Replace picvad cath	4.79	22.75	26.55	2.30	2.62	0.19	27.73	31.53	7.28	7.60	010
36589		A	Removal tunneled cv cath	2.27	1.86	2.15	1.22	1.35	0.24	4.37	4.66	3.73	3.86	010
36590		A	Removal tunneled cv cath	3.30	3.64	3.44	1.59	1.69	0.44	7.38	7.18	5.33	5.43	010
36595		A	Mech remov tunneled cv cath	3.59	10.85	15.65	1.31	1.42	0.21	14.65	19.45	5.11	5.22	000
36596		A	Mech remov tunneled cv cath	0.75	2.59	3.42	0.42	0.48	0.05	3.39	4.22	1.22	1.28	000
36597		A	Reposition venous catheter	1.21	2.02	2.31	0.42	0.44	0.07	3.30	3.59	1.70	1.72	000
36598		T	Inj w/fluor, eval cv device	0.74	2.25	2.54	0.26	2.05	0.05	3.04	3.33	1.05	2.84	000
36600		A	Withdrawal of arterial blood	0.32	0.50	0.49	0.08	0.09	0.02	0.84	0.83	0.42	0.43	XXX
36620		A	Insertion catheter, artery	1.15	NA	NA	0.17	0.22	0.07	NA	NA	1.39	1.44	000
36625		A	Insertion catheter, artery	2.11	NA	NA	0.49	0.52	0.26	NA	NA	2.86	2.89	000
36640		A	Insertion catheter, artery	2.10	NA	NA	0.91	1.01	0.21	NA	NA	3.22	3.32	000
36660		A	Insertion catheter, artery	1.40	NA	NA	0.20	0.38	0.14	NA	NA	1.74	1.92	000
36680		A	Insert needle, bone cavity	1.20	NA	NA	0.33	0.45	0.11	NA	NA	1.64	1.76	000
36800		A	Insertion of cannula	2.43	NA	NA	1.55	1.74	0.25	NA	NA	4.23	4.42	000
36810		A	Insertion of cannula	3.96	NA	NA	1.36	1.60	0.45	NA	NA	5.77	6.01	000
36815		A	Insertion of cannula	2.62	NA	NA	1.04	1.14	0.35	NA	NA	4.01	4.11	000
36818		A	Av fuse, uppr arm, cephalic	11.77	NA	NA	4.88	5.74	1.89	NA	NA	18.54	19.40	090
36819		A	Av fuse, uppr arm, basilic	14.35	NA	NA	5.26	6.09	1.95	NA	NA	21.56	22.39	090
36820		A	Av fusion/forearm vein	14.35	NA	NA	5.34	6.12	1.94	NA	NA	21.63	22.41	090
36821		A	Av fusion direct any site	9.10	NA	NA	4.04	4.50	1.23	NA	NA	14.37	14.83	090
36822		A	Insertion of cannula(s)	5.47	NA	NA	3.82	4.24	0.79	NA	NA	10.08	10.50	090
36823		A	Insertion of cannula(s)	22.74	NA	NA	8.91	9.26	2.88	NA	NA	34.53	34.88	090
36825		A	Artery-vein autograft	9.95	NA	NA	4.34	4.87	1.35	NA	NA	15.64	16.17	090
36830		A	Artery-vein nonautograft	11.98	NA	NA	4.25	4.99	1.66	NA	NA	17.89	18.63	090
36831		A	Open thrombect av fistula	7.99	NA	NA	3.28	3.78	1.09	NA	NA	12.36	12.86	090
36832		A	Av fistula revision, open	10.48	NA	NA	3.87	4.51	1.44	NA	NA	15.79	16.43	090
36833		A	Av fistula revision	11.93	NA	NA	4.25	4.96	1.65	NA	NA	17.83	18.54	090
36834		A	Repair A-V aneurysm	11.07	NA	NA	4.35	4.68	1.37	NA	NA	16.79	17.12	090
36835		A	Artery to vein shunt	7.38	NA	NA	3.90	4.22	0.98	NA	NA	12.26	12.58	090
36838		A	Dist revas ligation, hemo	21.55	NA	NA	7.14	8.82	3.01	NA	NA	31.70	33.38	090
36860		A	External cannula declotting	2.01	3.35	2.17	0.62	0.67	0.11	5.47	4.29	2.74	2.79	000
36861		A	Cannula declotting	2.52	NA	NA	1.25	1.43	0.27	NA	NA	4.04	4.22	000
36870		A	Percut thrombect av fistula	5.15	41.10	50.05	2.67	3.03	0.29	46.54	55.49	8.11	8.47	090
37140		A	Revision of circulation	25.05	NA	NA	9.04	10.12	2.01	NA	NA	36.10	37.18	090
37145		A	Revision of circulation	26.06	NA	NA	9.10	10.42	3.25	NA	NA	38.41	39.73	090
37160		A	Revision of circulation	23.06	NA	NA	8.16	8.98	2.81	NA	NA	34.03	34.85	090
37180		A	Revision of circulation	26.06	NA	NA	9.00	9.97	3.34	NA	NA	38.40	39.37	090
37181		A	Splice spleen/kidney veins	28.19	NA	NA	9.34	10.59	3.40	NA	NA	40.92	42.17	090
37182		A	Insert hepatic shunt (tips)	16.97	NA	NA	5.73	5.98	1.00	NA	NA	23.70	23.95	000
37183		A	Remove hepatic shunt (tips)	7.99	NA	NA	2.80	2.96	0.47	NA	NA	11.26	11.42	000
37184		A	Prim art mech thrombectomy	8.66	49.86	66.23	3.00	3.26	0.55	59.07	75.44	12.21	12.47	000
37185		A	Prim art m-thrombect add-on	3.28	16.20	21.21	1.02	1.09	0.21	19.69	24.70	4.51	4.58	ZZZ
37186		A	Sec art m-thrombect add-on	4.92	34.21	45.60	1.53	1.63	0.32	39.45	50.84	6.77	6.87	ZZZ

37187		A	Venous mech thrombectomy	8.03	48.71	64.81	2.81	3.06	0.51	57.25	73.35	11.35	11.60	000
37188		A	Venous m-thrombectomy add-on	5.71	42.51	57.11	2.09	2.29	0.37	48.59	63.19	8.17	8.37	000
37195		C	Thrombolytic therapy, stroke	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
37200		A	Transcatheter biopsy	4.55	NA	NA	1.49	1.50	0.27	NA	NA	6.31	6.32	000
37201		A	Transcatheter therapy infuse	4.99	NA	NA	2.25	2.47	0.33	NA	NA	7.57	7.79	000
37202		A	Transcatheter therapy infuse	5.67	NA	NA	3.40	3.12	0.43	NA	NA	9.50	9.22	000
37203		A	Transcatheter retrieval	5.02	30.34	32.24	1.95	2.01	0.29	35.65	37.55	7.26	7.32	000
37204		A	Transcatheter occlusion	18.11	NA	NA	5.79	5.87	1.48	NA	NA	25.38	25.46	000
37205		A	Transcath iv stent, percut	8.27	NA	NA	3.90	3.79	0.60	NA	NA	12.77	12.66	000
37206		A	Transcath iv stent/perc addl	4.12	NA	NA	1.59	1.47	0.31	NA	NA	6.02	5.90	ZZZ
37207		A	Transcath iv stent, open	8.27	NA	NA	2.45	2.98	1.17	NA	NA	11.89	12.42	000
37208		A	Transcath iv stent/open addl	4.12	NA	NA	1.05	1.30	0.59	NA	NA	5.76	6.01	ZZZ
37209		A	Change iv cath at thromb tx	2.27	NA	NA	0.73	0.74	0.15	NA	NA	3.15	3.16	000
37215		R	Transcath stent, cca w/eps	19.54	NA	NA	10.12	9.35	1.09	NA	NA	30.75	29.98	090
37216		N	Transcath stent, cca w/o eps	18.81	NA	NA	8.74	8.79	1.04	NA	NA	28.59	28.64	090
37250		A	Iv us first vessel add-on	2.10	NA	NA	0.81	0.77	0.21	NA	NA	3.12	3.08	ZZZ
37251		A	Iv us each add vessel add-on	1.60	NA	NA	0.52	0.54	0.19	NA	NA	2.31	2.33	ZZZ
37500		A	Endoscopy ligate perf veins	11.48	NA	NA	5.46	6.50	1.54	NA	NA	18.48	19.52	090
37501		C	Vascular endoscopy procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
37565		A	Ligation of neck vein	11.93	NA	NA	5.10	5.49	1.33	NA	NA	18.36	18.75	090
37600		A	Ligation of neck artery	12.30	NA	NA	4.80	6.17	1.41	NA	NA	18.51	19.88	090
37605		A	Ligation of neck artery	14.16	NA	NA	5.57	6.57	1.98	NA	NA	21.71	22.71	090
37606		A	Ligation of neck artery	8.66	NA	NA	4.87	4.64	1.23	NA	NA	14.76	14.53	090
37607		A	Ligation of a-v fistula	6.15	NA	NA	3.11	3.45	0.85	NA	NA	10.11	10.45	090
37609		A	Temporal artery procedure	3.00	4.24	4.44	1.84	1.93	0.36	7.60	7.80	5.20	5.29	010
37615		A	Ligation of neck artery	7.67	NA	NA	3.98	4.08	0.68	NA	NA	12.33	12.43	090
37616		A	Ligation of chest artery	18.84	NA	NA	7.94	8.05	2.32	NA	NA	29.10	29.21	090
37617		A	Ligation of abdomen artery	23.67	NA	NA	7.92	8.86	2.97	NA	NA	34.56	35.50	090
37618		A	Ligation of extremity artery	5.90	NA	NA	3.40	3.56	0.67	NA	NA	9.97	10.13	090
37620		A	Revision of major vein	11.44	NA	NA	5.24	5.59	0.91	NA	NA	17.59	17.94	090
37650		A	Revision of major vein	8.37	NA	NA	4.22	4.57	1.01	NA	NA	13.60	13.95	090
37660		A	Revision of major vein	22.16	NA	NA	8.13	8.82	2.48	NA	NA	32.77	33.46	090
37700		A	Revise leg vein	3.72	NA	NA	2.45	2.71	0.53	NA	NA	6.70	6.96	090
37718		A	Ligate/strip short leg vein	7.01	NA	NA	3.53	3.93	0.14	NA	NA	10.68	11.08	090
37722		A	Ligate/strip long leg vein	8.04	NA	NA	3.80	4.26	0.86	NA	NA	12.70	13.16	090
37735		A	Removal of leg veins/lesion	10.75	NA	NA	4.67	5.29	1.48	NA	NA	16.90	17.52	090
37760		A	Ligation, leg veins, open	10.63	NA	NA	4.55	5.14	1.44	NA	NA	16.62	17.21	090
37765		A	Phleb veins—extrem—to 20	7.59	NA	NA	3.60	4.37	0.48	NA	NA	11.67	12.44	090
37766		A	Phleb veins—extrem 20+	9.54	NA	NA	4.15	5.03	0.48	NA	NA	14.17	15.05	090
37780		A	Revision of leg vein	3.83	NA	NA	2.50	2.76	0.53	NA	NA	6.86	7.12	090
37785		A	Ligate/divide/excise vein	3.83	4.96	5.13	2.59	2.69	0.54	9.33	9.50	6.96	7.06	090
37788		A	Revascularization, penis	23.13	NA	NA	11.95	9.80	2.25	NA	NA	37.33	35.18	090
37790		A	Penile venous occlusion	8.33	NA	NA	5.09	4.55	0.59	NA	NA	14.01	13.47	090
37799		C	Vascular surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
38100		A	Removal of spleen, total	19.43	NA	NA	6.94	6.36	1.91	NA	NA	28.28	27.70	090
38101		A	Removal of spleen, partial	19.43	NA	NA	7.36	6.73	2.04	NA	NA	28.83	28.20	090
38102		A	Removal of spleen, total	4.79	NA	NA	1.27	1.55	0.63	NA	NA	6.69	6.97	ZZZ
38115		A	Repair of ruptured spleen	21.76	NA	NA	7.59	6.88	2.08	NA	NA	31.43	30.72	090
38120		A	Laparoscopy, splenectomy	16.97	NA	NA	7.00	7.29	2.24	NA	NA	26.21	26.50	090
38129		C	Laparoscope proc, spleen	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
38200		A	Injection for spleen x-ray	2.64	NA	NA	1.00	0.92	0.14	NA	NA	3.78	3.70	000
38205		R	Harvest allogenic stem cells	1.50	NA	NA	0.54	0.64	0.07	NA	NA	2.11	2.21	000
38206		R	Harvest auto stem cells	1.50	NA	NA	0.54	0.64	0.07	NA	NA	2.11	2.21	000
38220		A	Bone marrow aspiration	1.08	2.67	3.46	0.44	0.50	0.05	3.80	4.59	1.57	1.63	XXX
38221		A	Bone marrow biopsy	1.37	2.79	3.65	0.57	0.63	0.07	4.23	5.09	2.01	2.07	XXX
38230		R	Bone marrow collection	4.78	NA	NA	2.76	3.11	0.48	NA	NA	8.02	8.37	010
38240		R	Bone marrow/stem transplant	2.24	NA	NA	0.93	1.01	0.11	NA	NA	3.28	3.36	XXX
38241		R	Bone marrow/stem transplant	2.24	NA	NA	0.93	1.01	0.11	NA	NA	3.28	3.36	XXX
38242		A	Lymphocyte infuse transplant	1.71	NA	NA	0.69	0.76	0.08	NA	NA	2.48	2.55	000
38300		A	Drainage, lymph node lesion	2.24	3.63	4.13	1.75	1.98	0.25	6.12	6.62	4.24	4.47	010
38305		A	Drainage, lymph node lesion	6.49	NA	NA	3.42	4.19	0.88	NA	NA	10.79	11.56	090
38308		A	Incision of lymph channels	6.69	NA	NA	3.59	3.70	0.85	NA	NA	11.13	11.24	090
38380		A	Thoracic duct procedure	8.26	NA	NA	4.64	5.42	0.74	NA	NA	13.64	14.42	090
38381		A	Thoracic duct procedure	13.28	NA	NA	6.11	6.69	1.84	NA	NA	21.23	21.81	090
38382		A	Thoracic duct procedure	10.42	NA	NA	5.47	5.68	1.37	NA	NA	17.26	17.47	090
38500		A	Biopsy/removal, lymph nodes	3.74	3.78	3.71	2.04	2.07	0.49	8.01	7.94	6.27	6.30	010

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
38505		A	Needle biopsy, lymph nodes	1.14	2.08	2.06	0.70	0.76	0.09	3.31	3.29	1.93	1.99	000
38510		A	Biopsy/removal, lymph nodes	6.67	5.21	5.46	2.96	3.35	0.72	12.60	12.85	10.35	10.74	010
38520		A	Biopsy/removal, lymph nodes	6.91	NA	NA	3.71	3.97	0.84	NA	NA	11.46	11.72	090
38525		A	Biopsy/removal, lymph nodes	6.31	NA	NA	3.50	3.34	0.80	NA	NA	10.61	10.45	090
38530		A	Biopsy/removal, lymph nodes	8.22	NA	NA	4.12	4.32	1.12	NA	NA	13.46	13.66	090
38542		A	Explore deep node(s), neck	6.02	NA	NA	3.73	4.29	0.60	NA	NA	10.35	10.91	090
38550		A	Removal, neck/armpit lesion	6.91	NA	NA	4.24	3.99	0.88	NA	NA	12.03	11.78	090
38555		A	Removal, neck/armpit lesion	15.31	NA	NA	7.25	8.21	1.75	NA	NA	24.31	25.27	090
38562		A	Removal, pelvic lymph nodes	10.83	NA	NA	5.77	5.77	1.20	NA	NA	17.80	17.80	090
38564		A	Removal, abdomen lymph nodes	11.23	NA	NA	5.25	5.24	1.32	NA	NA	17.80	17.79	090
38570		A	Laparoscopy, lymph node biop	9.24	NA	NA	3.98	3.97	1.13	NA	NA	14.35	14.34	010
38571		A	Laparoscopy, lymphadenectomy	14.66	NA	NA	6.86	5.95	1.15	NA	NA	22.67	21.76	010
38572		A	Laparoscopy, lymphadenectomy	16.82	NA	NA	6.16	6.84	1.90	NA	NA	24.88	25.56	010
38589		C	Laparoscope proc, lymphatic	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
38700		A	Removal of lymph nodes, neck	12.62	NA	NA	5.91	6.15	0.72	NA	NA	19.25	19.49	090
38720		A	Removal of lymph nodes, neck	21.64	NA	NA	9.21	9.32	1.20	NA	NA	32.05	32.16	090
38724		A	Removal of lymph nodes, neck	23.64	NA	NA	9.79	9.82	1.28	NA	NA	34.71	34.74	090
38740		A	Remove armpit lymph nodes	10.51	NA	NA	5.07	4.97	1.32	NA	NA	16.90	16.80	090
38745		A	Remove armpit lymph nodes	13.65	NA	NA	6.12	6.08	1.73	NA	NA	21.50	21.46	090
38746		A	Remove thoracic lymph nodes	4.88	NA	NA	1.45	1.57	0.72	NA	NA	7.05	7.17	ZZZ
38747		A	Remove abdominal lymph nodes	4.88	NA	NA	1.28	1.57	0.64	NA	NA	6.80	7.09	ZZZ
38760		A	Remove groin lymph nodes	13.43	NA	NA	6.01	6.09	1.71	NA	NA	21.15	21.23	090
38765		A	Remove groin lymph nodes	21.72	NA	NA	8.72	8.78	2.47	NA	NA	32.91	32.97	090
38770		A	Remove pelvis lymph nodes	13.93	NA	NA	6.91	6.03	1.40	NA	NA	22.24	21.36	090
38780		A	Remove abdomen lymph nodes	17.47	NA	NA	8.00	8.15	1.88	NA	NA	27.35	27.50	090
38790		A	Inject for lymphatic x-ray	1.29	NA	NA	0.73	0.75	0.13	NA	NA	2.15	2.17	000
38792		A	Identify sentinel node	0.52	NA	NA	0.48	0.45	0.06	NA	NA	1.06	1.03	000
38794		A	Access thoracic lymph duct	4.44	NA	NA	3.04	3.35	0.32	NA	NA	7.80	8.11	090
38999		C	Blood/lymph system procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
39000		A	Exploration of chest	7.46	NA	NA	4.36	4.58	0.89	NA	NA	12.71	12.93	090
39010		A	Exploration of chest	13.08	NA	NA	6.17	7.20	1.75	NA	NA	21.00	22.03	090
39200		A	Removal chest lesion	15.02	NA	NA	6.29	7.22	2.02	NA	NA	23.33	24.26	090
39220		A	Removal chest lesion	18.42	NA	NA	7.64	8.93	2.45	NA	NA	28.51	29.80	090
39400		A	Visualization of chest	5.97	NA	NA	3.62	4.54	0.82	NA	NA	10.41	11.33	010
39499		C	Chest procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
39501		A	Repair diaphragm laceration	13.83	NA	NA	5.93	6.32	1.77	NA	NA	21.53	21.92	090
39502		A	Repair paraesophageal hemia	17.03	NA	NA	6.66	7.02	2.18	NA	NA	25.85	26.21	090
39503		A	Repair of diaphragm hemia	108 57	NA	NA	30.95	32.77	10.95	NA	NA	150.47	152.29	090
39520		A	Repair of diaphragm hemia	16.56	NA	NA	6.93	7.76	2.23	NA	NA	25.72	26.55	090
39530		A	Repair of diaphragm hemia	16.17	NA	NA	6.43	6.96	2.10	NA	NA	24.70	25.23	090
39531		A	Repair of diaphragm hemia	17.18	NA	NA	6.63	7.19	2.21	NA	NA	26.02	26.58	090
39540		A	Repair of diaphragm hernia	14.47	NA	NA	5.65	6.08	1.79	NA	NA	21.91	22.34	090
39541		A	Repair of diaphragm hemia	15.62	NA	NA	6.21	6.49	1.92	NA	NA	23.75	24.03	090
39545		A	Revision of diaphragm	14.52	NA	NA	7.23	7.46	1.83	NA	NA	23.58	23.81	090
39560		A	Resect diaphragm, simple	12.91	NA	NA	5.58	6.11	1.59	NA	NA	20.08	20.61	090
39561		A	Resect diaphragm, complex	19.69	NA	NA	9.42	9.35	2.44	NA	NA	31.55	31.48	090
39599		C	Diaphragm surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
40490		A	Biopsy of lip	1.22	2.02	1.73	0.55	0.60	0.05	3.29	3.00	1.82	1.87	000
40500		A	Partial excision of lip	4.27	7.65	7.08	4.18	4.29	0.38	12.30	11.73	8.83	8.94	090
40510		A	Partial excision of lip	4.69	6.52	6.59	3.48	3.88	0.49	11.70	11.77	8.66	9.06	090
40520		A	Partial excision of lip	4.66	6.79	7.35	3.68	4.00	0.52	11.97	12.53	8.86	9.18	090
40525		A	Reconstruct lip with flap	7.54	NA	NA	5.23	6.03	0.85	NA	NA	13.62	14.42	090
40527		A	Reconstruct lip with flap	9.12	NA	NA	5.84	6.97	0.97	NA	NA	15.93	17.06	090
40530		A	Partial removal of lip	5.39	7.28	7.68	4.07	4.45	0.55	13.22	13.62	10.01	10.39	090
40650		A	Repair lip	3.63	5.91	6.57	3.12	3.25	0.38	9.92	10.58	7.13	7.26	090
40652		A	Repair lip	4.25	6.97	7.55	3.94	4.18	0.52	11.74	12.32	8.71	8.95	090

40654		A	Repair lip	5.30	7.98	8.45	4.60	4.85	0.60	13.88	14.35	10.50	10.75	090
40700		A	Repair cleft lip/nasal	13.89	NA	NA	9.13	9.09	0.95	NA	NA	23.97	23.93	090
40701		A	Repair cleft lip/nasal	16.95	NA	NA	11.13	11.28	1.65	NA	NA	29.73	29.88	090
40702		A	Repair cleft lip/nasal	14.02	NA	NA	7.21	7.99	1.23	NA	NA	22.46	23.24	090
40720		A	Repair cleft lip/nasal	14.47	NA	NA	9.01	9.67	1.79	NA	NA	25.27	25.93	090
40761		A	Repair cleft lip/nasal	15.63	NA	NA	8.82	9.91	1.93	NA	NA	26.38	27.47	090
40799		C	Lip surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
40800		A	Drainage of mouth lesion	1.17	3.84	3.18	1.88	1.80	0.13	5.14	4.48	3.18	3.10	010
40801		A	Drainage of mouth lesion	2.53	4.85	4.23	2.55	2.69	0.31	7.69	7.07	5.39	5.53	010
40804		A	Removal, foreign body, mouth	1.24	3.63	3.45	1.75	1.83	0.11	4.98	4.80	3.10	3.18	010
40805		A	Removal, foreign body, mouth	2.69	5.04	4.62	2.56	2.75	0.32	8.05	7.63	5.57	5.76	010
40806		A	Incision of lip fold	0.31	2.38	1.97	0.50	0.50	0.04	2.73	2.32	0.85	0.85	000
40808		A	Biopsy of mouth lesion	0.96	3.51	2.87	1.57	1.50	0.10	4.57	3.93	2.63	2.56	010
40810		A	Excision of mouth lesion	1.31	3.57	3.05	1.66	1.66	0.13	5.01	4.49	3.10	3.10	010
40812		A	Excise/repair mouth lesion	2.31	4.51	3.92	2.26	2.37	0.28	7.10	6.51	4.85	4.96	010
40814		A	Excise/repair mouth lesion	3.41	5.62	5.11	3.64	3.83	0.41	9.44	8.93	7.46	7.65	090
40816		A	Excision of mouth lesion	3.66	5.79	5.33	3.68	3.92	0.40	9.85	9.39	7.74	7.98	090
40818		A	Excise oral mucosa for graft	2.66	5.77	5.32	3.70	3.90	0.21	8.64	8.19	6.57	6.77	090
40819		A	Excise lip or cheek fold	2.41	4.87	4.28	3.06	3.08	0.29	7.57	6.98	5.76	5.78	090
40820		A	Treatment of mouth lesion	1.28	5.11	4.23	2.82	2.54	0.11	6.50	5.62	4.21	3.93	010
40830		A	Repair mouth laceration	1.76	4.11	3.82	2.02	2.07	0.19	6.06	5.77	3.97	4.02	010
40831		A	Repair mouth laceration	2.46	5.33	4.83	2.73	2.97	0.30	8.09	7.59	5.49	5.73	010
40840		R	Reconstruction of mouth	8.97	9.99	9.83	5.53	6.61	1.08	20.04	19.88	15.58	16.66	090
40842		R	Reconstruction of mouth	8.97	9.71	9.97	5.32	6.42	1.08	19.76	20.02	15.37	16.47	090
40843		R	Reconstruction of mouth	12.56	11.76	11.90	6.01	7.36	1.39	25.71	25.85	19.96	21.31	090
40844		R	Reconstruction of mouth	16.47	14.78	15.52	8.75	10.86	1.99	33.24	33.98	27.21	29.32	090
40845		R	Reconstruction of mouth	19.03	15.15	16.58	9.55	12.30	2.00	36.18	37.61	30.58	33.33	090
40899		C	Mouth surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
41000		A	Drainage of mouth lesion	1.30	2.49	2.36	1.29	1.38	0.12	3.91	3.78	2.71	2.80	010
41005		A	Drainage of mouth lesion	1.26	4.23	3.56	1.71	1.72	0.12	5.61	4.94	3.09	3.10	010
41006		A	Drainage of mouth lesion	3.24	5.29	4.92	2.73	3.06	0.35	8.88	8.51	6.32	6.65	090
41007		A	Drainage of mouth lesion	3.10	5.33	5.19	2.71	2.94	0.31	8.74	8.60	6.12	6.35	090
41008		A	Drainage of mouth lesion	3.36	5.41	4.86	2.78	3.10	0.42	9.19	8.64	6.56	6.88	090
41009		A	Drainage of mouth lesion	3.58	5.80	5.18	3.11	3.46	0.47	9.85	9.23	7.16	7.51	090
41010		A	Incision of tongue fold	1.06	3.44	3.43	1.37	1.54	0.07	4.57	4.56	2.50	2.67	010
41015		A	Drainage of mouth lesion	3.95	6.21	5.60	3.93	4.09	0.46	10.62	10.01	8.34	8.50	090
41016		A	Drainage of mouth lesion	4.06	6.16	5.75	4.02	4.17	0.53	10.75	10.34	8.61	8.76	090
41017		A	Drainage of mouth lesion	4.06	6.31	5.80	4.08	4.25	0.53	10.90	10.39	8.67	8.84	090
41018		A	Drainage of mouth lesion	5.09	6.54	6.23	4.32	4.51	0.68	12.31	12.00	10.09	10.28	090
41100		A	Biopsy of tongue	1.37	2.57	2.46	1.11	1.34	0.15	4.09	3.98	2.63	2.86	010
41105		A	Biopsy of tongue	1.42	2.56	2.37	1.13	1.27	0.13	4.11	3.92	2.68	2.82	010
41108		A	Biopsy of floor of mouth	1.05	2.40	2.15	1.02	1.10	0.10	3.55	3.30	2.17	2.25	010
41110		A	Excision of tongue lesion	1.51	3.46	3.10	1.54	1.62	0.13	5.10	4.74	3.18	3.26	010
41112		A	Excision of tongue lesion	2.73	5.11	4.63	3.14	3.20	0.28	8.12	7.64	6.15	6.21	090
41113		A	Excision of tongue lesion	3.19	5.38	4.90	3.29	3.43	0.34	8.91	8.43	6.82	6.96	090
41114		A	Excision of tongue lesion	8.64	NA	NA	5.94	6.88	0.83	NA	NA	15.41	16.35	090
41115		A	Excision of tongue fold	1.74	4.27	3.54	1.75	1.83	0.18	6.19	5.46	3.67	3.75	010
41116		A	Excision of mouth lesion	2.44	5.31	4.59	2.65	2.76	0.23	7.98	7.26	5.32	5.43	090
41120		A	Partial removal of tongue	10.83	NA	NA	13.22	14.79	0.79	NA	NA	24.84	26.41	090
41130		A	Partial removal of tongue	15.43	NA	NA	14.55	15.78	0.93	NA	NA	30.91	32.14	090
41135		A	Tongue and neck surgery	29.71	NA	NA	19.86	22.38	1.88	NA	NA	51.45	53.97	090
41140		A	Removal of tongue	28.69	NA	NA	21.36	25.34	2.26	NA	NA	52.31	56.29	090
41145		A	Tongue removal, neck surgery	37.47	NA	NA	26.29	29.48	2.54	NA	NA	66.30	69.49	090
41150		A	Tongue, mouth, jaw surgery	29.40	NA	NA	21.09	23.81	1.94	NA	NA	52.43	55.15	090
41153		A	Tongue, mouth, neck surgery	33.16	NA	NA	21.82	24.22	2.00	NA	NA	56.98	59.38	090
41155		A	Tongue, jaw, & neck surgery	39.84	NA	NA	23.98	26.10	2.33	NA	NA	66.15	68.27	090
41250		A	Repair tongue laceration	1.91	3.79	3.00	1.58	1.28	0.18	5.88	5.09	3.67	3.37	010
41251		A	Repair tongue laceration	2.27	3.15	3.24	1.63	1.57	0.22	5.64	5.73	4.12	4.06	010
41252		A	Repair tongue laceration	2.97	4.34	4.00	1.96	2.18	0.29	7.60	7.26	5.22	5.44	010
41500		A	Fixation of tongue	3.70	NA	NA	6.54	7.22	0.30	NA	NA	10.54	11.22	090
41510		A	Tongue to lip surgery	3.41	NA	NA	7.02	7.70	0.20	NA	NA	10.63	11.31	090
41520		A	Reconstruction, tongue fold	2.73	5.71	4.89	3.20	3.52	0.27	8.71	7.89	6.20	6.52	090
41599		C	Tongue and mouth surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
41800		A	Drainage of gum lesion	1.17	4.76	3.13	2.09	1.48	0.12	6.05	4.42	3.38	2.77	010
41805		A	Removal foreign body, gum	1.24	4.73	3.19	2.75	2.35	0.13	6.10	4.56	4.12	3.72	010
41806		A	Removal foreign body,jawbone	2.69	5.91	4.16	3.39	3.12	0.37	8.97	7.22	6.45	6.18	010

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
41822		R	Excision of gum lesion	2.31	4.65	4.08	1.77	1.85	0.31	7.27	6.70	4.39	4.47	010
41823		R	Excision of gum lesion	3.55	6.48	5.79	3.74	3.94	0.47	10.50	9.81	7.76	7.96	090
41825		A	Excision of gum lesion	1.31	3.62	3.20	1.43	2.04	0.15	5.08	4.66	2.89	3.50	010
41826		A	Excision of gum lesion	2.31	5.12	3.10	2.59	2.22	0.30	7.73	5.71	5.20	4.83	010
41827		A	Excision of gum lesion	3.66	6.60	5.78	3.35	3.58	0.35	10.61	9.79	7.36	7.59	090
41828		R	Excision of gum lesion	3.09	4.12	3.88	1.65	2.63	0.44	7.65	7.41	5.18	6.16	010
41830		R	Removal of gum tissue	3.34	6.03	5.23	3.13	3.50	0.44	9.81	9.01	6.91	7.28	010
41872		R	Repair gum	2.84	5.87	5.23	3.25	3.41	0.30	9.01	8.37	6.39	6.55	090
41874		R	Repair tooth socket	3.09	5.76	5.07	2.76	3.07	0.45	9.30	8.61	6.30	6.61	090
41899		C	Dental surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
42000		A	Drainage mouth roof lesion	1.23	2.34	2.51	1.14	1.22	0.12	3.69	3.86	2.49	2.57	010
42100		A	Biopsy roof of mouth	1.31	2.18	2.11	1.20	1.32	0.13	3.62	3.55	2.64	2.76	010
42104		A	Excision lesion, mouth roof	1.64	3.43	2.76	1.58	1.56	0.16	5.23	4.56	3.38	3.36	010
42106		A	Excision lesion, mouth roof	2.10	4.41	3.52	2.04	2.34	0.25	6.76	5.87	4.39	4.69	010
42107		A	Excision lesion, mouth roof	4.43	6.31	5.86	3.53	3.85	0.44	11.18	10.73	8.40	8.72	090
42120		A	Remove palate/lesion	11.62	NA	NA	11.41	11.68	0.52	NA	NA	23.55	23.82	090
42140		A	Excision of uvula	1.62	4.22	3.85	1.93	2.05	0.13	5.97	5.60	3.68	3.80	090
42145		A	Repair palate, pharynx/uvula	9.57	NA	NA	6.75	7.31	0.65	NA	NA	16.97	17.53	090
42160		A	Treatment mouth roof lesion	1.80	3.61	4.09	1.60	2.12	0.17	5.58	6.06	3.57	4.09	010
42180		A	Repair palate	2.50	3.21	3.11	1.76	2.02	0.21	5.92	5.82	4.47	4.73	010
42182		A	Repair palate	3.82	4.01	3.91	2.36	2.86	0.40	8.23	8.13	6.58	7.08	010
42200		A	Reconstruct cleft palate	12.35	NA	NA	8.11	9.69	1.27	NA	NA	21.73	23.31	090
42205		A	Reconstruct cleft palate	13.51	NA	NA	7.46	9.42	1.58	NA	NA	22.55	24.51	090
42210		A	Reconstruct cleft palate	14.85	NA	NA	9.72	11.03	2.16	NA	NA	26.73	28.04	090
42215		A	Reconstruct cleft palate	8.81	NA	NA	7.21	8.61	1.31	NA	NA	17.33	18.73	090
42220		A	Reconstruct cleft palate	7.01	NA	NA	6.71	6.76	0.73	NA	NA	14.45	14.50	090
42225		A	Reconstruct cleft palate	9.59	NA	NA	12.00	15.80	0.86	NA	NA	22.45	26.25	090
42226		A	Lengthening of palate	10.17	NA	NA	11.33	13.86	1.01	NA	NA	22.51	25.04	090
42227		A	Lengthening of palate	9.75	NA	NA	9.68	14.08	0.98	NA	NA	20.41	24.81	090
42235		A	Repair palate	7.86	NA	NA	10.27	11.46	0.72	NA	NA	18.85	20.04	090
42260		A	Repair nose to lip fistula	10.04	9.54	10.03	5.81	6.75	1.26	20.84	21.33	17.11	18.05	090
42280		A	Preparation, palate mold	1.54	2.25	2.03	0.84	1.07	0.19	3.98	3.76	2.57	2.80	010
42281		A	Insertion, palate prosthesis	1.93	2.82	2.68	1.56	1.79	0.17	4.92	4.78	3.66	3.89	010
42299		C	Palate/uvula surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
42300		A	Drainage of salivary gland	1.93	2.92	2.85	1.59	1.76	0.16	5.01	4.94	3.68	3.85	010
42305		A	Drainage of salivary gland	6.18	NA	NA	3.65	4.45	0.51	NA	NA	10.34	11.14	090
42310		A	Drainage of salivary gland	1.56	2.18	2.24	1.31	1.48	0.13	3.87	3.93	3.00	3.17	010
42320		A	Drainage of salivary gland	2.35	3.54	3.34	1.76	2.01	0.21	6.10	5.90	4.32	4.57	010
42330		A	Removal of salivary stone	2.21	3.19	3.15	1.59	1.78	0.19	5.59	5.55	3.99	4.18	010
42335		A	Removal of salivary stone	3.31	5.43	5.03	2.65	3.02	0.29	9.03	8.63	6.25	6.62	090
42340		A	Removal of salivary stone	4.59	6.27	6.10	3.21	3.75	0.42	11.28	11.11	8.22	8.76	090
42400		A	Biopsy of salivary gland	0.78	1.90	1.71	0.60	0.69	0.06	2.74	2.55	1.44	1.53	000
42405		A	Biopsy of salivary gland	3.29	3.71	3.93	1.99	2.34	0.28	7.28	7.50	5.56	5.91	010
42408		A	Excision of salivary cyst	4.53	6.07	5.95	3.05	3.47	0.45	11.05	10.93	8.03	8.45	090
42409		A	Drainage of salivary cyst	2.81	5.05	4.65	2.37	2.66	0.27	8.13	7.73	5.45	5.74	090
42410		A	Excise parotid gland/lesion	9.39	NA	NA	4.90	5.89	0.91	NA	NA	15.20	16.19	090
42415		A	Excise parotid gland/lesion	17.92	NA	NA	7.69	10.07	1.43	NA	NA	27.04	29.42	090
42420		A	Excise parotid gland/lesion	20.80	NA	NA	8.50	11.40	1.65	NA	NA	30.95	33.85	090
42425		A	Excise parotid gland/lesion	13.24	NA	NA	6.03	7.97	1.05	NA	NA	20.32	22.26	090
42426		A	Excise parotid gland/lesion	22.46	NA	NA	8.77	11.95	1.80	NA	NA	33.03	36.21	090
42440		A	Excise submaxillary gland	7.02	NA	NA	3.46	4.46	0.59	NA	NA	11.07	12.07	090
42450		A	Excise sublingual gland	4.61	5.87	5.89	3.66	4.10	0.42	10.90	10.92	8.69	9.13	090
42500		A	Repair salivary duct	4.29	5.79	5.71	3.62	4.04	0.41	10.49	10.41	8.32	8.74	090
42505		A	Repair salivary duct	6.17	6.73	7.02	4.32	5.10	0.55	13.45	13.74	11.04	11.82	090
42507		A	Parotid duct diversion	6.10	NA	NA	5.90	6.37	0.49	NA	NA	12.49	12.96	090
42508		A	Parotid duct diversion	9.15	NA	NA	7.50	8.13	1.04	NA	NA	17.69	18.32	090

42509		A	Parotid duct diversion	11.58	NA	NA	8.70	9.82	0.93	NA	NA	21.21	22.33	090
42510		A	Parotid duct diversion	8.20	NA	NA	6.33	7.43	0.66	NA	NA	15.19	16.29	090
42550		A	Injection for salivary x-ray	1.25	2.24	2.97	0.39	0.41	0.07	3.56	4.29	1.71	1.73	000
42600		A	Closure of salivary fistula	4.81	6.46	6.55	3.32	3.92	0.43	11.70	11.79	8.56	9.16	090
42650		A	Dilation of salivary duct	0.77	1.20	1.13	0.61	0.69	0.07	2.04	1.97	1.45	1.53	000
42660		A	Dilation of salivary duct	1.13	1.43	1.37	0.73	0.82	0.09	2.65	2.59	1.95	2.04	000
42665		A	Ligation of salivary duct	2.53	4.71	4.31	2.20	2.49	0.23	7.47	7.07	4.96	5.25	090
42699		C	Salivary surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
42700		A	Drainage of tonsil abscess	1.62	2.74	2.67	1.51	1.65	0.13	4.49	4.42	3.26	3.40	010
42720		A	Drainage of throat abscess	6.31	4.28	4.69	2.84	3.55	0.44	11.03	11.44	9.59	10.30	010
42725		A	Drainage of throat abscess	12.22	NA	NA	6.56	7.81	0.91	NA	NA	19.69	20.94	090
42800		A	Biopsy of throat	1.39	2.27	2.20	1.17	1.34	0.11	3.77	3.70	2.67	2.84	010
42802		A	Biopsy of throat	1.54	3.83	4.53	1.52	1.93	0.12	5.49	6.19	3.18	3.59	010
42804		A	Biopsy of upper nose/throat	1.24	3.33	3.64	1.37	1.64	0.10	4.67	4.98	2.71	2.98	010
42806		A	Biopsy of upper nose/throat	1.58	3.55	3.94	1.47	1.82	0.13	5.26	5.65	3.18	3.53	010
42808		A	Excise pharynx lesion	2.30	2.96	3.06	1.44	1.81	0.19	5.45	5.55	3.93	4.30	010
42809		A	Remove pharynx foreign body	1.81	2.12	2.28	1.25	1.31	0.16	4.09	4.25	3.22	3.28	010
42810		A	Excision of neck cyst	3.25	5.73	5.72	3.40	3.51	0.29	9.27	9.26	6.94	7.05	090
42815		A	Excision of neck cyst	7.18	NA	NA	5.70	6.23	0.61	NA	NA	13.49	14.02	090
42820		A	Remove tonsils and adenoids	4.15	NA	NA	2.53	3.10	0.31	NA	NA	6.99	7.56	090
42821		A	Remove tonsils and adenoids	4.28	NA	NA	2.68	3.30	0.35	NA	NA	7.31	7.93	090
42825		A	Removal of tonsils	3.41	NA	NA	2.42	2.98	0.25	NA	NA	6.08	6.64	090
42826		A	Removal of tonsils	3.37	NA	NA	2.42	2.88	0.27	NA	NA	6.06	6.52	090
42830		A	Removal of adenoids	2.57	NA	NA	2.19	2.47	0.20	NA	NA	4.96	5.24	090
42831		A	Removal of adenoids	2.71	NA	NA	2.41	2.73	0.22	NA	NA	5.34	5.66	090
42835		A	Removal of adenoids	2.30	NA	NA	1.79	2.29	0.21	NA	NA	4.30	4.80	090
42836		A	Removal of adenoids	3.18	NA	NA	2.40	2.82	0.26	NA	NA	5.84	6.26	090
42842		A	Extensive surgery of throat	11.94	NA	NA	10.96	10.98	0.71	NA	NA	23.61	23.63	090
42844		A	Extensive surgery of throat	17.49	NA	NA	13.99	15.67	1.16	NA	NA	32.64	34.32	090
42845		A	Extensive surgery of throat	32.27	NA	NA	19.00	22.14	1.98	NA	NA	53.25	56.39	090
42860		A	Excision of tonsil tags	2.22	NA	NA	2.10	2.33	0.18	NA	NA	4.50	4.73	090
42870		A	Excision of lingual tonsil	5.39	NA	NA	7.97	8.42	0.44	NA	NA	13.80	14.25	090
42890		A	Partial removal of pharynx	18.84	NA	NA	13.79	14.06	1.05	NA	NA	33.68	33.95	090
42892		A	Revision of pharyngeal walls	25.67	NA	NA	17.34	17.21	1.28	NA	NA	44.29	44.16	090
42894		A	Revision of pharyngeal walls	33.49	NA	NA	21.04	21.78	1.86	NA	NA	56.39	57.13	090
42900		A	Repair throat wound	5.24	NA	NA	2.70	3.42	0.50	NA	NA	8.44	9.16	010
42950		A	Reconstruction of throat	8.09	NA	NA	10.21	11.46	0.72	NA	NA	19.02	20.27	090
42953		A	Repair throat, esophagus	9.25	NA	NA	12.87	16.22	0.88	NA	NA	23.00	26.35	090
42955		A	Surgical opening of throat	7.86	NA	NA	9.37	10.35	0.80	NA	NA	18.03	19.01	090
42960		A	Control throat bleeding	2.33	NA	NA	1.59	1.87	0.19	NA	NA	4.11	4.39	010
42961		A	Control throat bleeding	5.64	NA	NA	4.08	4.74	0.45	NA	NA	10.17	10.83	090
42962		A	Control throat bleeding	7.25	NA	NA	4.69	5.61	0.58	NA	NA	12.52	13.44	090
42970		A	Control nose/throat bleeding	5.72	NA	NA	3.49	4.01	0.39	NA	NA	9.60	10.12	090
42971		A	Control nose/throat bleeding	6.50	NA	NA	4.08	4.86	0.51	NA	NA	11.09	11.87	090
42972		A	Control nose/throat bleeding	7.49	NA	NA	4.42	5.38	0.62	NA	NA	12.53	13.49	090
42999		C	Throat surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
43020		A	Incision of esophagus	8.08	NA	NA	4.32	5.14	0.87	NA	NA	13.27	14.09	090
43030		A	Throat muscle surgery	7.86	NA	NA	4.13	5.15	0.70	NA	NA	12.69	13.71	090
43045		A	Incision of esophagus	21.63	NA	NA	10.07	10.54	2.58	NA	NA	34.28	34.75	090
43100		A	Excision of esophagus lesion	9.48	NA	NA	5.07	5.93	0.93	NA	NA	15.48	16.34	090
43101		A	Excision of esophagus lesion	16.94	NA	NA	7.27	7.73	2.31	NA	NA	26.52	26.98	090
43107		A	Removal of esophagus	43.89	NA	NA	16.66	17.86	5.22	NA	NA	65.77	66.97	090
43108		A	Removal of esophagus	63.23	NA	NA	20.50	15.78	4.07	NA	NA	87.80	83.08	090
43112		A	Removal of esophagus	47.21	NA	NA	17.15	18.81	5.79	NA	NA	70.15	71.81	090
43113		A	Removal of esophagus	46.95	NA	NA	17.99	15.83	4.42	NA	NA	69.36	67.20	090
43116		A	Partial removal of esophagus	71.39	NA	NA	22.74	18.20	3.05	NA	NA	97.18	92.64	090
43117		A	Partial removal of esophagus	43.46	NA	NA	15.40	16.80	5.17	NA	NA	64.03	65.43	090
43118		A	Partial removal of esophagus	52.07	NA	NA	17.39	14.68	4.10	NA	NA	73.56	70.85	090
43121		A	Partial removal of esophagus	46.35	NA	NA	17.01	14.51	3.90	NA	NA	67.26	64.76	090
43122		A	Partial removal of esophagus	43.89	NA	NA	15.83	17.00	5.40	NA	NA	65.12	66.29	090
43123		A	Partial removal of esophagus	63.83	NA	NA	21.00	15.83	4.15	NA	NA	88.98	83.81	090
43124		A	Removal of esophagus	64.63	NA	NA	22.76	15.50	3.73	NA	NA	91.12	83.86	090
43130		A	Removal of esophagus pouch	12.33	NA	NA	5.93	7.15	1.16	NA	NA	19.42	20.64	090
43135		A	Removal of esophagus pouch	22.37	NA	NA	8.93	8.30	2.33	NA	NA	33.63	33.00	090
43200		A	Esophagus endoscopy	1.59	3.53	3.98	0.91	1.03	0.13	5.25	5.70	2.63	2.75	000
43201		A	Esoph scope w/submucous inj	2.09	5.56	4.86	1.18	1.12	0.15	7.80	7.10	3.42	3.36	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
43202		A	Esophagus endoscopy, biopsy	1.89	5.13	5.44	0.97	0.95	0.15	7.17	7.48	3.01	2.99	000
43204		A	Esoph scope w/sclerosis inj	3.76	NA	NA	1.93	1.62	0.30	NA	NA	5.99	5.68	000
43205		A	Esophagus endoscopy/ligation	3.78	NA	NA	2.02	1.65	0.28	NA	NA	6.08	5.71	000
43215		A	Esophagus endoscopy	2.60	NA	NA	1.25	1.21	0.22	NA	NA	4.07	4.03	000
43216		A	Esophagus endoscopy/lesion	2.40	3.00	1.55	1.21	1.10	0.20	5.60	4.15	3.81	3.70	000
43217		A	Esophagus endoscopy	2.90	6.58	6.86	1.40	1.24	0.26	9.74	10.02	4.56	4.40	000
43219		A	Esophagus endoscopy	2.80	NA	NA	1.53	1.40	0.24	NA	NA	4.57	4.44	000
43220		A	Esoph endoscopy, dilation	2.10	NA	NA	1.12	1.01	0.17	NA	NA	3.39	3.28	000
43226		A	Esoph endoscopy, dilation	2.34	NA	NA	1.27	1.09	0.19	NA	NA	3.80	3.62	000
43227		A	Esoph endoscopy, repair	3.59	NA	NA	1.81	1.54	0.28	NA	NA	5.68	5.41	000
43228		A	Esoph endoscopy, ablation	3.76	NA	NA	1.84	1.62	0.34	NA	NA	5.94	5.72	000
43231		A	Esoph endoscopy w/us exam	3.19	NA	NA	1.72	1.41	0.23	NA	NA	5.14	4.83	000
43232		A	Esoph endoscopy w/us fn bx	4.47	NA	NA	2.34	1.94	0.34	NA	NA	7.15	6.75	000
43234		A	Upper GI endoscopy, exam	2.01	4.98	5.24	1.01	0.91	0.17	7.16	7.42	3.19	3.09	000
43235		A	Uppr gi endoscopy, diagnosis	2.39	5.26	5.19	1.34	1.10	0.19	7.84	7.77	3.92	3.68	000
43236		A	Uppr gi scope w/submuc inj	2.92	6.67	6.47	1.64	1.33	0.21	9.80	9.60	4.77	4.46	000
43237		A	Endoscopic us exam, esoph	3.98	NA	NA	2.12	1.72	0.43	NA	NA	6.53	6.13	000
43238		A	Uppr gi endoscopy w/us fn bx	5.02	NA	NA	2.52	2.10	0.43	NA	NA	7.97	7.55	000
43239		A	Upper GI endoscopy, biopsy	2.87	6.01	5.79	1.54	1.28	0.22	9.10	8.88	4.63	4.37	000
43240		A	Esoph endoscope w/drain cyst	6.85	NA	NA	3.41	2.80	0.56	NA	NA	10.82	10.21	000
43241		A	Upper GI endoscopy with tube	2.59	NA	NA	1.40	1.18	0.21	NA	NA	4.20	3.98	000
43242		A	Uppr gi endoscopy w/us fn bx	7.30	NA	NA	3.65	2.96	0.53	NA	NA	11.48	10.79	000
43243		A	Upper gi endoscopy & inject	4.56	NA	NA	2.34	1.93	0.33	NA	NA	7.23	6.82	000
43244		A	Upper GI endoscopy/ligation	5.04	NA	NA	2.62	2.13	0.37	NA	NA	8.03	7.54	000
43245		A	Uppr gi scope dilate strictr	3.18	NA	NA	1.62	1.38	0.26	NA	NA	5.06	4.82	000
43246		A	Place gastrostomy tube	4.32	NA	NA	2.10	1.79	0.34	NA	NA	6.76	6.45	000
43247		A	Operative upper GI endoscopy	3.38	NA	NA	1.77	1.47	0.27	NA	NA	5.42	5.12	000
43248		A	Uppr gi endoscopy/guide wire	3.15	NA	NA	1.76	1.42	0.23	NA	NA	5.14	4.80	000
43249		A	Esoph endoscopy, dilation	2.90	NA	NA	1.61	1.31	0.22	NA	NA	4.73	4.43	000
43250		A	Upper GI endoscopy/tumor	3.20	NA	NA	1.62	1.39	0.26	NA	NA	5.08	4.85	000
43251		A	Operative upper GI endoscopy	3.69	NA	NA	1.91	1.59	0.29	NA	NA	5.89	5.57	000
43255		A	Operative upper GI endoscopy	4.81	NA	NA	2.50	2.04	0.35	NA	NA	7.66	7.20	000
43256		A	Uppr gi endoscopy w/stent	4.34	NA	NA	2.23	1.84	0.32	NA	NA	6.89	6.50	000
43257		A	Uppr gi scope w/thrml txmnt	5.50	NA	NA	2.05	2.16	0.36	NA	NA	7.91	8.02	000
43258		A	Operative upper GI endoscopy	4.54	NA	NA	2.36	1.93	0.33	NA	NA	7.23	6.80	000
43259		A	Endoscopic ultrasound exam	5.19	NA	NA	2.66	2.16	0.35	NA	NA	8.20	7.70	000
43260		A	Endo cholangiopancreatograph	5.95	NA	NA	3.04	2.47	0.43	NA	NA	9.42	8.85	000
43261		A	Endo cholangiopancreatograph	6.26	NA	NA	3.19	2.59	0.46	NA	NA	9.91	9.31	000
43262		A	Endo cholangiopancreatograph	7.38	NA	NA	3.69	3.01	0.54	NA	NA	11.61	10.93	000
43263		A	Endo cholangiopancreatograph	7.28	NA	NA	3.70	3.00	0.54	NA	NA	11.52	10.82	000
43264		A	Endo cholangiopancreatograph	8.89	NA	NA	4.41	3.59	0.65	NA	NA	13.95	13.13	000
43265		A	Endo cholangiopancreatograph	10.00	NA	NA	4.90	3.99	0.73	NA	NA	15.63	14.72	000
43267		A	Endo cholangiopancreatograph	7.38	NA	NA	3.60	2.99	0.54	NA	NA	11.52	10.91	000
43268		A	Endo cholangiopancreatograph	7.38	NA	NA	3.85	3.12	0.54	NA	NA	11.77	11.04	000
43269		A	Endo cholangiopancreatograph	8.20	NA	NA	4.07	3.32	0.60	NA	NA	12.87	12.12	000
43271		A	Endo cholangiopancreatograph	7.38	NA	NA	3.70	3.01	0.54	NA	NA	11.62	10.93	000
43272		A	Endo cholangiopancreatograph	7.38	NA	NA	3.77	3.03	0.54	NA	NA	11.69	10.95	000
43280		A	Laparoscopy, fundoplasty	17.96	NA	NA	6.73	7.14	2.27	NA	NA	26.96	27.37	090
43289		C	Laparoscope proc, esoph	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
43300		A	Repair of esophagus	9.13	NA	NA	5.17	6.07	1.12	NA	NA	15.42	16.32	090
43305		A	Repair esophagus and fistula	17.90	NA	NA	7.46	9.88	1.54	NA	NA	26.90	29.32	090
43310		A	Repair of esophagus	26.13	NA	NA	10.13	10.83	3.60	NA	NA	39.86	40.56	090
43312		A	Repair esophagus and fistula	29.22	NA	NA	9.96	11.41	4.00	NA	NA	43.18	44.63	090
43313		A	Esophagoplasty congenital	48.07	NA	NA	17.38	18.45	5.45	NA	NA	70.90	71.97	090
43314		A	Tracheo-esophagoplasty cong	53.05	NA	NA	18.43	18.99	6.63	NA	NA	78.11	78.67	090
43320		A	Fuse esophagus & stomach	23.12	NA	NA	8.85	9.11	2.73	NA	NA	34.70	34.96	090

43324		A	Revise esophagus & stomach	22.80	NA	NA	8.42	8.68	2.75	NA	NA	33.97	34.23	090
43325		A	Revise esophagus & stomach	22.41	NA	NA	8.39	8.68	2.59	NA	NA	33.39	33.68	090
43326		A	Revise esophagus & stomach	22.09	NA	NA	9.37	9.31	2.84	NA	NA	34.30	34.24	090
43330		A	Repair of esophagus	22.00	NA	NA	8.27	8.47	2.62	NA	NA	32.89	33.09	090
43331		A	Repair of esophagus	22.87	NA	NA	9.58	9.73	2.93	NA	NA	35.38	35.53	090
43340		A	Fuse esophagus & intestine	22.80	NA	NA	9.09	8.99	2.45	NA	NA	34.34	34.24	090
43341		A	Fuse esophagus & intestine	24.04	NA	NA	10.12	10.04	2.91	NA	NA	37.07	36.99	090
43350		A	Surgical opening, esophagus	19.23	NA	NA	8.06	8.35	1.42	NA	NA	28.71	29.00	090
43351		A	Surgical opening, esophagus	21.79	NA	NA	9.60	9.74	2.46	NA	NA	33.85	33.99	090
43352		A	Surgical opening, esophagus	17.62	NA	NA	8.19	8.33	2.05	NA	NA	27.86	28.00	090
43360		A	Gastrointestinal repair	39.82	NA	NA	15.81	15.26	4.96	NA	NA	60.59	60.04	090
43361		A	Gastrointestinal repair	45.42	NA	NA	16.89	16.88	4.49	NA	NA	66.80	66.79	090
43400		A	Ligate esophagus veins	25.41	NA	NA	13.74	10.51	1.95	NA	NA	41.10	37.87	090
43401		A	Esophagus surgery for veins	26.30	NA	NA	9.49	9.48	3.04	NA	NA	38.83	38.82	090
43405		A	Ligate/staple esophagus	24.47	NA	NA	10.42	9.79	2.83	NA	NA	37.72	37.09	090
43410		A	Repair esophagus wound	16.22	NA	NA	7.53	7.61	1.71	NA	NA	25.46	25.54	090
43415		A	Repair esophagus wound	28.62	NA	NA	11.99	11.80	3.52	NA	NA	44.13	43.94	090
43420		A	Repair esophagus opening	16.59	NA	NA	6.86	7.27	1.43	NA	NA	24.88	25.29	090
43425		A	Repair esophagus opening	24.85	NA	NA	10.38	10.07	3.02	NA	NA	38.25	37.94	090
43450		A	Dilate esophagus	1.38	2.66	2.64	0.92	0.75	0.11	4.15	4.13	2.41	2.24	000
43453		A	Dilate esophagus	1.51	6.29	6.12	1.00	0.80	0.11	7.91	7.74	2.62	2.42	000
43456		A	Dilate esophagus	2.57	12.99	13.55	1.45	1.19	0.20	15.76	16.32	4.22	3.96	000
43458		A	Dilate esophagus	3.06	6.93	6.72	1.61	1.36	0.24	10.23	10.02	4.91	4.66	000
43460		A	Pressure treatment esophagus	3.79	NA	NA	1.70	1.54	0.31	NA	NA	5.80	5.64	000
43496		C	Free jejunum flap, microvasc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
43499		C	Esophagus surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
43500		A	Surgical opening of stomach	12.67	NA	NA	5.27	5.05	1.45	NA	NA	19.39	19.17	090
43501		A	Surgical repair of stomach	22.41	NA	NA	8.18	8.27	2.64	NA	NA	33.23	33.32	090
43502		A	Surgical repair of stomach	25.50	NA	NA	9.04	9.35	3.09	NA	NA	37.63	37.94	090
43510		A	Surgical opening of stomach	14.95	NA	NA	6.89	6.66	1.48	NA	NA	23.32	23.09	090
43520		A	Incision of pyloric muscle	11.17	NA	NA	4.89	5.16	1.36	NA	NA	17.42	17.69	090
43600		A	Biopsy of stomach	1.91	NA	NA	0.80	0.70	0.14	NA	NA	2.85	2.75	000
43605		A	Biopsy of stomach	13.60	NA	NA	5.46	5.33	1.58	NA	NA	20.64	20.51	090
43610		A	Excision of stomach lesion	16.22	NA	NA	6.11	6.13	1.93	NA	NA	24.26	24.28	090
43611		A	Excision of stomach lesion	20.19	NA	NA	7.61	7.57	2.35	NA	NA	30.15	30.11	090
43620		A	Removal of stomach	33.85	NA	NA	11.16	11.63	3.95	NA	NA	48.96	49.43	090
43621		A	Removal of stomach	39.34	NA	NA	12.57	12.12	4.03	NA	NA	55.94	55.49	090
43622		A	Removal of stomach	39.84	NA	NA	12.71	12.61	4.29	NA	NA	56.84	56.74	090
43631		A	Removal of stomach, partial	24.32	NA	NA	8.68	9.03	2.98	NA	NA	35.98	36.33	090
43632		A	Removal of stomach, partial	34.95	NA	NA	11.43	9.72	2.98	NA	NA	49.36	47.65	090
43633		A	Removal of stomach, partial	32.95	NA	NA	10.92	9.72	3.05	NA	NA	46.92	45.72	090
43634		A	Removal of stomach, partial	36.45	NA	NA	11.97	10.55	3.32	NA	NA	51.74	50.32	090
43635		A	Removal of stomach, partial	2.06	NA	NA	0.53	0.66	0.27	NA	NA	2.86	2.99	ZZZ
43640		A	Vagotomy & pylorus repair	19.37	NA	NA	7.42	7.29	2.25	NA	NA	29.04	28.91	090
43641		A	Vagotomy & pylorus repair	19.62	NA	NA	7.72	7.45	2.24	NA	NA	29.58	29.31	090
43644		A	Lap gastric bypass/roux-en-y	29.18	NA	NA	10.29	10.98	3.15	NA	NA	42.62	43.31	090
43645		A	Lap gastr bypass incl smll i	31.31	NA	NA	11.27	11.83	3.53	NA	NA	46.11	46.67	090
43651		A	Laparoscopy, vagus nerve	10.13	NA	NA	4.67	4.74	1.33	NA	NA	16.13	16.20	090
43652		A	Laparoscopy, vagus nerve	12.13	NA	NA	5.23	5.62	1.55	NA	NA	18.91	19.30	090
43653		A	Laparoscopy, gastrostomy	8.34	NA	NA	4.43	4.24	1.01	NA	NA	13.78	13.59	090
43659		C	Laparoscope proc, stom	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
43750		A	Place gastrostomy tube	4.60	NA	NA	1.96	2.13	0.43	NA	NA	6.99	7.16	010
43752		A	Nasal/orogastric w/stent	0.81	NA	NA	0.24	0.26	0.02	NA	NA	1.07	1.09	000
43760		A	Change gastrostomy tube	1.10	13.09	4.83	0.39	0.44	0.09	14.28	6.02	1.58	1.63	000
43761		A	Reposition gastrostomy tube	2.01	0.98	1.12	0.64	0.66	0.13	3.12	3.26	2.78	2.80	000
43770		A	Lap, place gastr adjust band	17.79	NA	NA	7.57	7.68	2.18	NA	NA	27.54	27.65	090
43771		A	Lap, revise adjust gast band	20.58	NA	NA	8.22	8.50	2.54	NA	NA	31.34	31.62	090
43772		A	Lap, remove adjust gast band	15.58	NA	NA	6.03	6.32	1.92	NA	NA	23.53	23.82	090
43773		A	Lap, change adjust gast band	20.58	NA	NA	8.22	8.50	2.55	NA	NA	31.35	31.63	090
43774		A	Lap remov adj gast band/port	15.62	NA	NA	6.22	6.48	1.84	NA	NA	23.68	23.94	090
43800		A	Reconstruction of pylorus	15.31	NA	NA	5.91	5.90	1.81	NA	NA	23.03	23.02	090
43810		A	Fusion of stomach and bowel	16.76	NA	NA	6.28	6.20	1.93	NA	NA	24.97	24.89	090
43820		A	Fusion of stomach and bowel	22.34	NA	NA	8.19	6.85	2.03	NA	NA	32.56	31.22	090
43825		A	Fusion of stomach and bowel	21.57	NA	NA	7.96	8.00	2.53	NA	NA	32.06	32.10	090
43830		A	Place gastrostomy tube	10.71	NA	NA	5.22	4.94	1.25	NA	NA	17.18	16.90	090
43831		A	Place gastrostomy tube	8.31	NA	NA	5.17	4.68	1.03	NA	NA	14.51	14.02	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
43832		A	Place gastrostomy tube	17.22	NA	NA	7.15	6.92	1.97	NA	NA	26.34	26.11	090
43840		A	Repair of stomach lesion	22.64	NA	NA	8.26	7.14	2.05	NA	NA	32.95	31.83	090
43842		N	V-band gastroplasty	20.84	NA	NA	7.81	7.80	2.44	NA	NA	31.09	31.08	090
43843		A	Gastroplasty w/o v-band	21.02	NA	NA	7.88	7.79	2.45	NA	NA	31.35	31.26	090
43845		A	Gastroplasty duodenal switch	33.04	NA	NA	12.63	11.24	4.05	NA	NA	49.72	48.33	090
43846		A	Gastric bypass for obesity	27.15	NA	NA	10.09	10.04	3.18	NA	NA	40.42	40.37	090
43847		A	Gastric bypass incl small i	30.02	NA	NA	10.72	10.85	3.55	NA	NA	44.29	44.42	090
43848		A	Revision gastroplasty	32.49	NA	NA	11.41	11.71	3.87	NA	NA	47.77	48.07	090
43850		A	Revise stomach-bowel fusion	27.39	NA	NA	9.48	9.73	3.27	NA	NA	40.14	40.39	090
43855		A	Revise stomach-bowel fusion	28.50	NA	NA	9.83	10.20	3.46	NA	NA	41.79	42.16	090
43860		A	Revise stomach-bowel fusion	27.70	NA	NA	9.57	9.86	3.30	NA	NA	40.57	40.86	090
43865		A	Revise stomach-bowel fusion	28.86	NA	NA	10.17	10.42	3.50	NA	NA	42.53	42.78	090
43870		A	Repair stomach opening	11.32	NA	NA	5.05	4.65	1.27	NA	NA	17.64	17.24	090
43880		A	Repair stomach-bowel fistula	26.99	NA	NA	9.42	9.77	3.26	NA	NA	39.67	40.02	090
43886		A	Revise gastric port, open	4.50	NA	NA	3.45	3.21	0.25	NA	NA	8.20	7.96	090
43887		A	Remove gastric port, open	4.20	NA	NA	3.00	2.83	0.51	NA	NA	7.71	7.54	090
43888		A	Change gastric port, open	6.30	NA	NA	3.94	3.81	0.70	NA	NA	10.94	10.81	090
43999		C	Stomach surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
44005		A	Freeing of bowel adhesion	18.34	NA	NA	6.67	6.70	2.14	NA	NA	27.15	27.18	090
44010		A	Incision of small bowel	14.14	NA	NA	5.58	5.48	1.64	NA	NA	21.36	21.26	090
44015		A	Insert needle cath bowel	2.62	NA	NA	0.69	0.83	0.35	NA	NA	3.66	3.80	ZZZ
44020		A	Explore small intestine	16.10	NA	NA	6.06	5.96	1.85	NA	NA	24.01	23.91	090
44021		A	Decompress small bowel	16.19	NA	NA	6.33	6.05	1.86	NA	NA	24.38	24.10	090
44025		A	Incision of large bowel	16.39	NA	NA	6.19	6.06	1.89	NA	NA	24.47	24.34	090
44050		A	Reduce bowel obstruction	15.40	NA	NA	5.89	5.94	1.85	NA	NA	23.14	23.19	090
44055		A	Correct malrotation of bowel	25.49	NA	NA	8.60	8.69	2.90	NA	NA	36.99	37.08	090
44100		A	Biopsy of bowel	2.01	NA	NA	0.88	0.75	0.17	NA	NA	3.06	2.93	000
44110		A	Excise intestine lesion(s)	13.92	NA	NA	5.58	5.31	1.55	NA	NA	21.05	20.78	090
44111		A	Excision of bowel lesion(s)	16.40	NA	NA	6.20	6.13	1.86	NA	NA	24.46	24.39	090
44120		A	Removal of small intestine	20.70	NA	NA	7.24	7.11	2.24	NA	NA	30.18	30.05	090
44121		A	Removal of small intestine	4.44	NA	NA	1.14	1.43	0.58	NA	NA	6.16	6.45	ZZZ
44125		A	Removal of small intestine	19.89	NA	NA	7.10	7.21	2.26	NA	NA	29.25	29.36	090
44126		A	Enterectomy w/o taper, cong	41.94	NA	NA	13.97	14.08	4.68	NA	NA	60.59	60.70	090
44127		A	Enterectomy w/taper, cong	49.01	NA	NA	14.84	15.49	5.75	NA	NA	69.60	70.25	090
44128		A	Enterectomy cong, add-on	4.44	NA	NA	1.07	1.42	0.61	NA	NA	6.12	6.47	ZZZ
44130		A	Bowel to bowel fusion	21.92	NA	NA	8.05	6.67	1.87	NA	NA	31.84	30.46	090
44137		C	Remove intestinal allograft	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
44139		A	Mobilization of colon	2.23	NA	NA	0.56	0.71	0.28	NA	NA	3.07	3.22	ZZZ
44140		A	Partial removal of colon	22.40	NA	NA	8.17	8.52	2.70	NA	NA	33.27	33.62	090
44141		A	Partial removal of colon	29.69	NA	NA	11.96	10.52	2.52	NA	NA	44.17	42.73	090
44143		A	Partial removal of colon	27.57	NA	NA	10.40	10.61	3.04	NA	NA	41.01	41.22	090
44144		A	Partial removal of colon	29.69	NA	NA	10.75	9.90	2.85	NA	NA	43.29	42.44	090
44145		A	Partial removal of colon	28.39	NA	NA	9.58	10.50	3.28	NA	NA	41.25	42.17	090
44146		A	Partial removal of colon	35.08	NA	NA	13.46	13.00	3.40	NA	NA	51.94	51.48	090
44147		A	Partial removal of colon	33.50	NA	NA	11.06	9.28	2.55	NA	NA	47.11	45.33	090
44150		A	Removal of colon	29.91	NA	NA	12.74	12.20	3.03	NA	NA	45.68	45.14	090
44151		A	Removal of colon/ileostomy	34.65	NA	NA	14.19	13.59	3.48	NA	NA	52.32	51.72	090
44152		A	Removal of colon/ileostomy	29.91	NA	NA	10.53	11.33	3.51	NA	NA	43.95	44.75	090
44153		A	Removal of colon/ileostomy	33.18	NA	NA	14.40	14.38	3.54	NA	NA	51.12	51.10	090
44155		A	Removal of colon/ileostomy	34.15	NA	NA	13.59	13.37	3.27	NA	NA	51.01	50.79	090
44156		A	Removal of colon/ileostomy	37.15	NA	NA	14.84	14.98	3.94	NA	NA	55.93	56.07	090
44160		A	Removal of colon	20.72	NA	NA	7.60	7.71	2.36	NA	NA	30.68	30.79	090
44180		A	Lap, enterolysis	15.15	NA	NA	5.87	6.14	1.85	NA	NA	22.87	23.14	090
44186		A	Lap, jejunostomy	10.26	NA	NA	4.63	4.75	1.27	NA	NA	16.16	16.28	090
44187		A	Lap, ileo/jejuno-stomy	17.21	NA	NA	8.25	8.27	1.95	NA	NA	27.41	27.43	090
44188		A	Lap, colostomy	19.14	NA	NA	8.82	8.84	2.23	NA	NA	30.19	30.21	090

44202		A	Lap, enterectomy	23.20	NA	NA	8.41	8.79	2.84	NA	NA	34.45	34.83	090
44203		A	Lap resect s/intestine, addl	4.44	NA	NA	1.14	1.41	0.57	NA	NA	6.15	6.42	ZZZ
44204		A	Laparo partial colectomy	26.23	NA	NA	9.00	9.71	3.10	NA	NA	38.33	39.04	090
44205		A	Lap colectomy part w/ileum	22.80	NA	NA	7.89	8.60	2.74	NA	NA	33.43	34.14	090
44206		A	Lap part colectomy w/stoma	29.57	NA	NA	10.60	11.09	3.45	NA	NA	43.62	44.11	090
44207		A	L colectomy/coloproctostomy	31.73	NA	NA	10.22	11.17	3.66	NA	NA	45.61	46.56	090
44208		A	L colectomy/coloproctostomy	33.80	NA	NA	12.15	12.89	3.87	NA	NA	49.82	50.56	090
44210		A	Laparo total proctocolectomy	29.80	NA	NA	11.27	11.72	3.41	NA	NA	44.48	44.93	090
44211		A	Laparo total proctocolectomy	36.79	NA	NA	13.90	14.48	4.16	NA	NA	54.85	55.43	090
44212		A	Laparo total proctocolectomy	34.29	NA	NA	13.27	13.58	3.77	NA	NA	51.33	51.64	090
44213		A	Lap, mobil splenic fl add-on	3.50	NA	NA	0.89	1.14	0.44	NA	NA	4.83	5.08	ZZZ
44227		A	Lap, close enterostomy	28.43	NA	NA	9.59	10.36	3.37	NA	NA	41.39	42.16	090
44238		C	Laparoscope proc, intestine	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
44300		A	Open bowel to skin	13.61	NA	NA	5.63	5.52	1.60	NA	NA	20.84	20.73	090
44310		A	Ileostomy/jejunostomy	17.45	NA	NA	6.46	6.63	1.98	NA	NA	25.89	26.06	090
44312		A	Revision of ileostomy	9.29	NA	NA	4.66	4.16	0.92	NA	NA	14.87	14.37	090
44314		A	Revision of ileostomy	16.55	NA	NA	6.88	6.63	1.74	NA	NA	25.17	24.92	090
44316		A	Devise bowel pouch	23.40	NA	NA	9.34	8.74	2.37	NA	NA	35.11	34.51	090
44320		A	Colostomy	19.69	NA	NA	7.69	7.66	2.25	NA	NA	29.63	29.60	090
44322		A	Colostomy with biopsies	13.04	NA	NA	9.47	8.80	1.54	NA	NA	24.05	23.38	090
44340		A	Revision of colostomy	9.06	NA	NA	4.99	4.44	0.99	NA	NA	15.04	14.49	090
44345		A	Revision of colostomy	17.00	NA	NA	6.98	6.91	1.96	NA	NA	25.94	25.87	090
44346		A	Revision of colostomy	19.41	NA	NA	7.60	7.44	2.12	NA	NA	29.13	28.97	090
44360		A	Small bowel endoscopy	2.59	NA	NA	1.50	1.20	0.19	NA	NA	4.28	3.98	000
44361		A	Small bowel endoscopy/biopsy	2.87	NA	NA	1.63	1.31	0.21	NA	NA	4.71	4.39	000
44363		A	Small bowel endoscopy	3.49	NA	NA	1.92	1.52	0.27	NA	NA	5.68	5.28	000
44364		A	Small bowel endoscopy	3.73	NA	NA	2.00	1.62	0.27	NA	NA	6.00	5.62	000
44365		A	Small bowel endoscopy	3.31	NA	NA	1.77	1.46	0.24	NA	NA	5.32	5.01	000
44366		A	Small bowel endoscopy	4.40	NA	NA	2.37	1.89	0.32	NA	NA	7.09	6.61	000
44369		A	Small bowel endoscopy	4.51	NA	NA	2.40	1.90	0.33	NA	NA	7.24	6.74	000
44370		A	Small bowel endoscopy/stent	4.79	NA	NA	2.53	2.11	0.37	NA	NA	7.69	7.27	000
44372		A	Small bowel endoscopy	4.40	NA	NA	2.12	1.83	0.35	NA	NA	6.87	6.58	000
44373		A	Small bowel endoscopy	3.49	NA	NA	1.73	1.50	0.27	NA	NA	5.49	5.26	000
44376		A	Small bowel endoscopy	5.25	NA	NA	2.44	2.13	0.42	NA	NA	8.11	7.80	000
44377		A	Small bowel endoscopy/biopsy	5.52	NA	NA	2.77	2.29	0.40	NA	NA	8.69	8.21	000
44378		A	Small bowel endoscopy	7.12	NA	NA	3.52	2.90	0.52	NA	NA	11.16	10.54	000
44379		A	S bowel endoscope w/stent	7.46	NA	NA	3.28	3.00	0.62	NA	NA	11.36	11.08	000
44380		A	Small bowel endoscopy	1.05	NA	NA	0.75	0.60	0.08	NA	NA	1.88	1.73	000
44382		A	Small bowel endoscopy	1.27	NA	NA	0.79	0.67	0.12	NA	NA	2.18	2.06	000
44383		A	Ileoscopy w/stent	2.94	NA	NA	1.63	1.36	0.21	NA	NA	4.78	4.51	000
44385		A	Endoscopy of bowel pouch	1.82	4.90	3.74	0.89	0.79	0.15	6.87	5.71	2.86	2.76	000
44386		A	Endoscopy, bowel pouch/biop	2.12	6.75	6.67	1.04	0.92	0.20	9.07	8.99	3.36	3.24	000
44388		A	Colonoscopy	2.82	6.11	5.34	1.34	1.20	0.26	9.19	8.42	4.42	4.28	000
44389		A	Colonoscopy with biopsy	3.13	7.07	6.73	1.56	1.34	0.27	10.47	10.13	4.96	4.74	000
44390		A	Colonoscopy for foreign body	3.82	7.98	7.33	1.78	1.56	0.32	12.12	11.47	5.92	5.70	000
44391		A	Colonoscopy for bleeding	4.31	8.93	8.77	2.19	1.82	0.34	13.58	13.42	6.84	6.47	000
44392		A	Colonoscopy & polypectomy	3.81	7.38	6.78	1.71	1.55	0.34	11.53	10.93	5.86	5.70	000
44393		A	Colonoscopy, lesion removal	4.83	7.89	7.15	2.04	1.91	0.42	13.14	12.40	7.29	7.16	000
44394		A	Colonoscopy w/snare	4.42	8.47	7.98	2.05	1.80	0.38	13.27	12.78	6.85	6.60	000
44397		A	Colonoscopy w/stent	4.70	NA	NA	2.28	1.91	0.39	NA	NA	7.37	7.00	000
44500		A	Intro, gastrointestinal tube	0.49	NA	NA	0.15	0.16	0.03	NA	NA	0.67	0.68	000
44602		A	Suture, small intestine	24.60	NA	NA	7.73	6.73	2.11	NA	NA	34.44	33.44	090
44603		A	Suture, small intestine	27.97	NA	NA	9.10	7.73	2.41	NA	NA	39.48	38.11	090
44604		A	Suture, large intestine	18.02	NA	NA	6.14	6.37	2.11	NA	NA	26.27	26.50	090
44605		A	Repair of bowel lesion	21.96	NA	NA	7.98	8.29	2.51	NA	NA	32.45	32.76	090
44615		A	Intestinal stricturoplasty	18.04	NA	NA	6.64	6.66	2.06	NA	NA	26.74	26.76	090
44620		A	Repair bowel opening	14.31	NA	NA	5.55	5.38	1.51	NA	NA	21.37	21.20	090
44625		A	Repair bowel opening	17.16	NA	NA	6.22	6.28	1.85	NA	NA	25.23	25.29	090
44626		A	Repair bowel opening	27.78	NA	NA	9.02	9.61	3.26	NA	NA	40.06	40.65	090
44640		A	Repair bowel-skin fistula	24.08	NA	NA	8.15	8.47	2.77	NA	NA	35.00	35.32	090
44650		A	Repair bowel fistula	25.00	NA	NA	8.40	8.76	2.92	NA	NA	36.32	36.68	090
44660		A	Repair bowel-bladder fistula	23.79	NA	NA	9.72	8.69	2.13	NA	NA	35.64	34.61	090
44661		A	Repair bowel-bladder fistula	27.23	NA	NA	9.46	9.53	2.80	NA	NA	39.49	39.56	090
44680		A	Surgical revision, intestine	17.84	NA	NA	6.64	6.49	1.99	NA	NA	26.47	26.32	090
44700		A	Suspend bowel w/prosthesis	17.36	NA	NA	6.27	6.56	1.83	NA	NA	25.46	25.75	090
44701		A	Intraop colon lavage add-on	3.10	NA	NA	0.78	0.99	0.37	NA	NA	4.25	4.46	ZZZ

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
44715		C	Prepare donor intestine	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
44720		A	Prep donor intestine/venous	5.00	NA	NA	1.25	1.60	0.37	NA	NA	6.62	6.97	XXX
44721		A	Prep donor intestine/artery	7.00	NA	NA	1.81	2.25	0.97	NA	NA	9.78	10.22	XXX
44799		C	Unlisted procedure intestine	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
44800		A	Excision of bowel pouch	11.87	NA	NA	5.56	5.43	1.47	NA	NA	18.90	18.77	090
44820		A	Excision of mesentery lesion	13.59	NA	NA	5.66	5.53	1.59	NA	NA	20.84	20.71	090
44850		A	Repair of mesentery	11.99	NA	NA	5.06	5.02	1.39	NA	NA	18.44	18.40	090
44899		C	Bowel surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
44900		A	Drain app abscess, open	12.38	NA	NA	5.07	4.79	1.33	NA	NA	18.78	18.50	090
44901		A	Drain app abscess, percut	3.37	19.86	25.88	1.05	1.10	0.22	23.45	29.47	4.64	4.69	000
44950		A	Appendectomy	10.48	NA	NA	4.09	4.26	1.31	NA	NA	15.88	16.05	090
44955		A	Appendectomy add-on	1.53	NA	NA	0.40	0.51	0.20	NA	NA	2.13	2.24	ZZZ
44960		A	Appendectomy	14.33	NA	NA	5.47	5.37	1.63	NA	NA	21.43	21.33	090
44970		A	Laparoscopy, appendectomy	9.31	NA	NA	4.24	4.12	1.14	NA	NA	14.69	14.57	090
44979		C	Laparoscope proc, app	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
45000		A	Drainage of pelvic abscess	6.16	NA	NA	3.56	3.11	0.52	NA	NA	10.24	9.79	090
45005		A	Drainage of rectal abscess	1.99	4.00	4.04	1.60	1.59	0.25	6.24	6.28	3.84	3.83	010
45020		A	Drainage of rectal abscess	8.37	NA	NA	4.58	3.60	0.55	NA	NA	13.50	12.52	090
45100		A	Biopsy of rectum	3.92	NA	NA	2.84	2.48	0.44	NA	NA	7.20	6.84	090
45108		A	Removal of anorectal lesion	5.00	NA	NA	3.08	2.85	0.59	NA	NA	8.67	8.44	090
45110		A	Removal of rectum	30.49	NA	NA	11.98	12.29	3.35	NA	NA	45.82	46.13	090
45111		A	Partial removal of rectum	17.81	NA	NA	7.08	7.14	2.06	NA	NA	26.95	27.01	090
45112		A	Removal of rectum	32.99	NA	NA	10.39	11.42	3.42	NA	NA	46.80	47.83	090
45113		A	Partial proctectomy	33.03	NA	NA	11.60	12.34	3.48	NA	NA	48.11	48.85	090
45114		A	Partial removal of rectum	30.57	NA	NA	10.45	10.77	3.35	NA	NA	44.37	44.69	090
45116		A	Partial removal of rectum	27.50	NA	NA	9.50	9.89	2.87	NA	NA	39.87	40.26	090
45119		A	Remove rectum w/reservoir	33.29	NA	NA	11.71	12.27	3.35	NA	NA	48.35	48.91	090
45120		A	Removal of rectum	26.15	NA	NA	9.44	9.95	2.89	NA	NA	38.48	38.99	090
45121		A	Removal of rectum and colon	28.83	NA	NA	10.34	10.91	3.24	NA	NA	42.41	42.98	090
45123		A	Partial proctectomy	18.64	NA	NA	7.07	6.91	1.85	NA	NA	27.56	27.40	090
45126		A	Pelvic exenteration	48.81	NA	NA	17.39	18.75	4.32	NA	NA	70.52	71.88	090
45130		A	Excision of rectal prolapse	18.31	NA	NA	6.73	6.75	1.79	NA	NA	26.83	26.85	090
45135		A	Excision of rectal prolapse	22.07	NA	NA	9.28	8.63	2.35	NA	NA	33.70	33.05	090
45136		A	Excise ileoanal reservior	30.55	NA	NA	11.86	12.35	2.81	NA	NA	45.22	45.71	090
45150		A	Excision of rectal stricture	5.72	NA	NA	3.40	3.07	0.61	NA	NA	9.73	9.40	090
45160		A	Excision of rectal lesion	16.11	NA	NA	6.59	6.63	1.67	NA	NA	24.37	24.41	090
45170		A	Excision of rectal lesion	12.42	NA	NA	5.41	5.28	1.35	NA	NA	19.18	19.05	090
45190		A	Destruction, rectal tumor	10.23	NA	NA	5.55	4.85	1.13	NA	NA	16.91	16.21	090
45300		A	Proctosigmoidoscopy dx	0.38	2.00	1.65	0.35	0.30	0.04	2.42	2.07	0.77	0.72	000
45303		A	Proctosigmoidoscopy dilate	0.44	19.63	18.92	0.38	0.34	0.05	20.12	19.41	0.87	0.83	000
45305		A	Proctosigmoidoscopy w/bx	1.01	3.31	2.80	0.53	0.51	0.11	4.43	3.92	1.65	1.63	000
45307		A	Proctosigmoidoscopy fb	0.94	3.52	3.15	0.51	0.49	0.11	4.57	4.20	1.56	1.54	000
45308		A	Proctosigmoidoscopy removal	0.83	3.30	2.32	0.49	0.45	0.09	4.22	3.24	1.41	1.37	000
45309		A	Proctosigmoidoscopy removal	2.01	3.73	3.04	0.83	0.84	0.22	5.96	5.27	3.06	3.07	000
45315		A	Proctosigmoidoscopy removal	1.40	3.74	3.08	0.65	0.64	0.15	5.29	4.63	2.20	2.19	000
45317		A	Proctosigmoidoscopy bleed	1.50	3.83	2.78	0.66	0.66	0.15	5.48	4.43	2.31	2.31	000
45320		A	Proctosigmoidoscopy ablate	1.58	4.49	3.31	0.75	0.72	0.16	6.23	5.05	2.49	2.46	000
45321		A	Proctosigmoidoscopy volvul	1.17	NA	NA	0.65	0.58	0.13	NA	NA	1.95	1.88	000
45327		A	Proctosigmoidoscopy w/stent	1.65	NA	NA	0.83	0.73	0.16	NA	NA	2.64	2.54	000
45330		A	Diagnostic sigmoidoscopy	0.96	2.49	2.33	0.61	0.53	0.08	3.53	3.37	1.65	1.57	000
45331		A	Sigmoidoscopy and biopsy	1.15	3.24	3.11	0.78	0.64	0.09	4.48	4.35	2.02	1.88	000
45332		A	Sigmoidoscopy w/fb removal	1.79	5.62	5.16	1.02	0.86	0.16	7.57	7.11	2.97	2.81	000
45333		A	Sigmoidoscopy & polypectomy	1.79	5.63	5.06	0.98	0.85	0.15	7.57	7.00	2.92	2.79	000
45334		A	Sigmoidoscopy for bleeding	2.73	NA	NA	1.52	1.24	0.20	NA	NA	4.45	4.17	000
45335		A	Sigmoidoscopy w/submuc inj	1.46	5.32	3.74	0.90	0.74	0.11	6.89	5.31	2.47	2.31	000
45337		A	Sigmoidoscopy & decompress	2.36	NA	NA	1.23	1.06	0.21	NA	NA	3.80	3.63	000

45338		A	Sigmoidoscopy w/tumr remove	2.34	5.85	5.37	1.26	1.07	0.19	8.38	7.90	3.79	3.60	000
45339		A	Sigmoidoscopy w/ablate tumr	3.14	5.73	4.03	1.66	1.38	0.26	9.13	7.43	5.06	4.78	000
45340		A	Sig w/balloon dilation	1.89	10.25	7.19	1.03	0.88	0.15	12.29	9.23	3.07	2.92	000
45341		A	Sigmoidoscopy w/ultrasound	2.60	NA	NA	1.45	1.17	0.19	NA	NA	4.24	3.96	000
45342		A	Sigmoidoscopy w/us guide bx	4.05	NA	NA	2.15	1.69	0.30	NA	NA	6.50	6.04	000
45345		A	Sigmoidoscopy w/stent	2.92	NA	NA	1.53	1.25	0.23	NA	NA	4.68	4.40	000
45355		A	Surgical colonoscopy	3.51	NA	NA	1.55	1.42	0.36	NA	NA	5.42	5.29	000
45378		A	Diagnostic colonoscopy	3.69	6.36	6.20	1.81	1.56	0.30	10.35	10.19	5.80	5.55	000
45378	53	A	Diagnostic colonoscopy	0.96	2.49	2.33	0.61	0.53	0.08	3.53	3.37	1.65	1.57	000
45379		A	Colonoscopy w/fb removal	4.68	8.14	7.78	2.20	1.91	0.39	13.21	12.85	7.27	6.98	000
45380		A	Colonoscopy and biopsy	4.43	7.71	7.32	2.22	1.85	0.35	12.49	12.10	7.00	6.63	000
45381		A	Colonoscopy, submucous inj	4.19	7.68	7.25	2.14	1.77	0.30	12.17	11.74	6.63	6.26	000
45382		A	Colonoscopy/control bleeding	5.68	10.31	10.03	2.87	2.35	0.41	16.40	16.12	8.96	8.44	000
45383		A	Lesion removal colonoscopy	5.86	8.54	8.08	2.63	2.32	0.48	14.88	14.42	8.97	8.66	000
45384		A	Lesion remove colonoscopy	4.69	7.20	6.90	2.19	1.91	0.38	12.27	11.97	7.26	6.98	000
45385		A	Lesion removal colonoscopy	5.30	8.33	7.93	2.57	2.17	0.42	14.05	13.65	8.29	7.89	000
45386		A	Colonoscopy dilate stricture	4.57	12.31	12.38	2.16	1.88	0.39	17.27	17.34	7.12	6.84	000
45387		A	Colonoscopy w/stent	5.90	NA	NA	2.89	2.47	0.48	NA	NA	9.27	8.85	000
45391		A	Colonoscopy w/endoscope us	5.09	NA	NA	2.54	2.11	0.42	NA	NA	8.05	7.62	000
45392		A	Colonoscopy w/endoscopic fnb	6.54	NA	NA	3.10	2.64	0.42	NA	NA	10.06	9.60	000
45395		A	Lap, removal of rectum	32.71	NA	NA	13.06	13.52	3.62	NA	NA	49.39	49.85	090
45397		A	Lap, remove rectum w/pouch	36.21	NA	NA	13.59	14.09	3.66	NA	NA	53.46	53.96	090
45400		A	Laparoscopic proctopexy	19.25	NA	NA	7.18	7.67	2.02	NA	NA	28.45	28.94	090
45402		A	Lap proctopexy w/sig resect	26.32	NA	NA	8.87	9.70	2.81	NA	NA	38.00	38.83	090
45499		C	Laparoscope proc, rectum	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
45500		A	Repair of rectum	7.58	NA	NA	4.35	3.74	0.75	NA	NA	12.68	12.07	090
45505		A	Repair of rectum	8.14	NA	NA	5.11	4.17	0.86	NA	NA	14.11	13.17	090
45520		A	Treatment of rectal prolapse	0.55	3.07	2.00	0.41	0.38	0.05	3.67	2.60	1.01	0.98	000
45540		A	Correct rectal prolapse	17.98	NA	NA	5.89	6.57	1.84	NA	NA	25.71	26.39	090
45541		A	Correct rectal prolapse	14.66	NA	NA	6.59	6.10	1.55	NA	NA	22.80	22.31	090
45550		A	Repair rectum/remove sigmoid	24.61	NA	NA	9.02	9.16	2.61	NA	NA	36.24	36.38	090
45560		A	Repair of rectocele	11.38	NA	NA	5.52	5.17	1.13	NA	NA	18.03	17.68	090
45562		A	Exploration/repair of rectum	17.74	NA	NA	8.17	7.28	1.83	NA	NA	27.74	26.85	090
45563		A	Exploration/repair of rectum	26.14	NA	NA	10.97	10.63	3.10	NA	NA	40.21	39.87	090
45800		A	Repair rect/bladder fistula	20.12	NA	NA	9.23	7.87	1.85	NA	NA	31.20	29.84	090
45805		A	Repair fistula w/colostomy	23.13	NA	NA	9.26	9.44	2.02	NA	NA	34.41	34.59	090
45820		A	Repair rectourethral fistula	20.18	NA	NA	9.29	8.04	1.58	NA	NA	31.05	29.80	090
45825		A	Repair fistula w/colostomy	23.93	NA	NA	10.94	10.09	2.31	NA	NA	37.18	36.33	090
45900		A	Reduction of rectal prolapse	2.94	NA	NA	1.70	1.55	0.30	NA	NA	4.94	4.79	010
45905		A	Dilation of anal sphincter	2.30	NA	NA	1.65	1.49	0.27	NA	NA	4.22	4.06	010
45910		A	Dilation of rectal narrowing	2.80	NA	NA	1.80	1.70	0.30	NA	NA	4.90	4.80	010
45915		A	Remove rectal obstruction	3.14	4.26	4.31	2.04	2.08	0.30	7.70	7.75	5.48	5.52	010
45990		A	Surg dx exam, anorectal	1.80	NA	NA	0.78	0.79	0.17	NA	NA	2.75	2.76	000
45999		C	Rectum surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
46020		A	Placement of seton	2.90	3.29	2.57	2.37	1.98	0.31	6.50	5.78	5.58	5.19	010
46030		A	Removal of rectal marker	1.23	1.90	1.49	0.81	0.74	0.14	3.27	2.86	2.18	2.11	010
46040		A	Incision of rectal abscess	5.20	6.58	5.76	4.01	3.69	0.62	12.40	11.58	9.83	9.51	090
46045		A	Incision of rectal abscess	5.75	NA	NA	3.93	3.15	0.54	NA	NA	10.22	9.44	090
46050		A	Incision of anal abscess	1.19	3.21	2.71	0.98	0.88	0.14	4.54	4.04	2.31	2.21	010
46060		A	Incision of rectal abscess	6.18	NA	NA	3.99	3.43	0.67	NA	NA	10.84	10.28	090
46070		A	Incision of anal septum	2.71	NA	NA	2.35	1.96	0.36	NA	NA	5.42	5.03	090
46080		A	Incision of anal sphincter	2.49	3.09	2.54	1.13	1.13	0.30	5.88	5.33	3.92	3.92	010
46083		A	Incise external hemorrhoid	1.40	2.36	2.48	0.95	0.93	0.15	3.91	4.03	2.50	2.48	010
46200		A	Removal of anal fissure	3.41	6.32	4.47	3.74	3.08	0.39	10.12	8.27	7.54	6.88	090
46210		A	Removal of anal crypt	2.67	6.00	5.33	3.39	2.81	0.31	8.98	8.31	6.37	5.79	090
46211		A	Removal of anal crypts	4.24	7.18	5.85	4.13	3.66	0.48	11.90	10.57	8.85	8.38	090
46220		A	Removal of anal tag	1.56	3.01	2.47	1.10	0.99	0.17	4.74	4.20	2.83	2.72	010
46221		A	Ligation of hemorrhoid(s)	2.29	3.75	2.92	2.00	1.81	0.23	6.27	5.44	4.52	4.33	010
46230		A	Removal of anal tags	2.57	3.52	3.18	1.34	1.30	0.30	6.39	6.05	4.21	4.17	010
46250		A	Hemorrhoidectomy	4.13	6.02	5.48	2.86	2.67	0.48	10.63	10.09	7.47	7.28	090
46255		A	Hemorrhoidectomy	4.84	6.44	5.98	3.12	2.90	0.58	11.86	11.40	8.54	8.32	090
46257		A	Remove hemorrhoids & fissure	5.64	NA	NA	3.80	3.10	0.64	NA	NA	10.08	9.38	090
46258		A	Remove hemorrhoids & fistula	6.22	NA	NA	4.01	3.46	0.68	NA	NA	10.91	10.36	090
46260		A	Hemorrhoidectomy	6.61	NA	NA	4.06	3.40	0.76	NA	NA	11.43	10.77	090
46261		A	Remove hemorrhoids & fissure	7.57	NA	NA	4.32	3.78	0.79	NA	NA	12.68	12.14	090
46262		A	Remove hemorrhoids & fistula	7.74	NA	NA	4.68	3.97	0.83	NA	NA	13.25	12.54	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
46270		A	Removal of anal fistula	4.75	6.33	5.33	3.91	3.10	0.46	11.54	10.54	9.12	8.31	090
46275		A	Removal of anal fistula	5.25	6.66	5.14	4.00	3.23	0.52	12.43	10.91	9.77	9.00	090
46280		A	Removal of anal fistula	6.22	NA	NA	4.26	3.50	0.66	NA	NA	11.14	10.38	090
46285		A	Removal of anal fistula	5.25	6.54	4.46	3.95	3.04	0.44	12.23	10.15	9.64	8.73	090
46288		A	Repair anal fistula	7.62	NA	NA	4.67	3.92	0.79	NA	NA	13.08	12.33	090
46320		A	Removal of hemorrhoid clot	1.61	2.42	2.20	0.89	0.86	0.18	4.21	3.99	2.68	2.65	010
46500		A	Injection into hemorrhoid(s)	1.61	3.61	2.49	1.25	1.18	0.16	5.38	4.26	3.02	2.95	010
46505		A	Chemodenervation anal musc	3.11	3.30	3.11	2.31	2.05	0.14	6.55	6.36	5.56	5.30	010
46600		A	Diagnostic anoscopy	0.50	1.48	1.54	0.37	0.35	0.05	2.03	2.09	0.92	0.90	000
46604		A	Anoscopy and dilation	1.31	12.65	10.00	0.58	0.61	0.12	14.08	11.43	2.01	2.04	000
46606		A	Anoscopy and biopsy	0.81	4.02	3.84	0.48	0.44	0.09	4.92	4.74	1.38	1.34	000
46608		A	Anoscopy, remove for body	1.51	4.06	4.32	0.62	0.64	0.16	5.73	5.99	2.29	2.31	000
46610		A	Anoscopy, remove lesion	1.32	4.29	4.10	0.66	0.62	0.15	5.76	5.57	2.13	2.09	000
46611		A	Anoscopy	1.81	2.88	3.22	0.72	0.77	0.19	4.88	5.22	2.72	2.77	000
46612		A	Anoscopy, remove lesions	2.34	5.51	5.26	0.95	0.97	0.28	8.13	7.88	3.57	3.59	000
46614		A	Anoscopy, control bleeding	2.01	2.78	2.44	0.82	0.84	0.20	4.99	4.65	3.03	3.05	000
46615		A	Anoscopy	2.68	2.43	2.47	0.97	1.05	0.33	5.44	5.48	3.98	4.06	000
46700		A	Repair of anal stricture	9.62	NA	NA	4.72	4.33	0.94	NA	NA	15.28	14.89	090
46705		A	Repair of anal stricture	7.25	NA	NA	4.08	3.78	0.91	NA	NA	12.24	11.94	090
46706		A	Repr of anal fistula w/glue	2.39	NA	NA	1.45	1.30	0.28	NA	NA	4.12	3.97	010
46710		A	Repr per/vag pouch sngl proc	16.95	NA	NA	7.79	7.76	1.38	NA	NA	26.12	26.09	090
46712		A	Repr per/vag pouch dbl proc	36.26	NA	NA	14.16	14.82	3.66	NA	NA	54.08	54.74	090
46715		A	Rep perf anoper fistu	7.49	NA	NA	3.77	3.62	0.92	NA	NA	12.18	12.03	090
46716		A	Rep perf anoper/vestib fistu	17.04	NA	NA	9.66	8.39	1.58	NA	NA	28.28	27.01	090
46730		A	Construction of absent anus	30.05	NA	NA	11.66	11.93	2.46	NA	NA	44.17	44.44	090
46735		A	Construction of absent anus	35.54	NA	NA	13.36	13.50	3.20	NA	NA	52.10	52.24	090
46740		A	Construction of absent anus	33.30	NA	NA	14.66	13.58	2.41	NA	NA	50.37	49.29	090
46742		A	Repair of imperforated anus	39.54	NA	NA	16.19	17.08	3.19	NA	NA	58.92	59.81	090
46744		A	Repair of cloacal anomaly	58.34	NA	NA	21.08	21.10	6.38	NA	NA	85.80	85.82	090
46746		A	Repair of cloacal anomaly	64.79	NA	NA	19.85	23.82	7.68	NA	NA	92.32	96.29	090
46748		A	Repair of cloacal anomaly	70.77	NA	NA	21.25	23.04	3.36	NA	NA	95.38	97.17	090
46750		A	Repair of anal sphincter	11.96	NA	NA	5.81	5.24	1.10	NA	NA	18.87	18.30	090
46751		A	Repair of anal sphincter	9.12	NA	NA	4.45	5.17	0.94	NA	NA	14.51	15.23	090
46753		A	Reconstruction of anus	8.77	NA	NA	4.61	4.03	0.94	NA	NA	14.32	13.74	090
46754		A	Removal of suture from anus	2.82	3.73	3.63	2.27	1.82	0.19	6.74	6.64	5.28	4.83	010
46760		A	Repair of anal sphincter	17.11	NA	NA	8.26	7.38	1.59	NA	NA	26.96	26.08	090
46761		A	Repair of anal sphincter	15.10	NA	NA	6.45	6.11	1.43	NA	NA	22.98	22.64	090
46762		A	Implant artificial sphincter	14.58	NA	NA	6.79	5.83	1.24	NA	NA	22.61	21.65	090
46900		A	Destruction, anal lesion(s)	1.91	3.62	2.84	1.30	1.28	0.17	5.70	4.92	3.38	3.36	010
46910		A	Destruction, anal lesion(s)	1.86	3.88	3.15	1.20	1.10	0.19	5.93	5.20	3.25	3.15	010
46916		A	Cryosurgery, anal lesion(s)	1.86	3.70	3.29	1.54	1.43	0.11	5.67	5.26	3.51	3.40	010
46917		A	Laser surgery, anal lesions	1.86	8.73	9.02	1.21	1.14	0.21	10.80	11.09	3.28	3.21	010
46922		A	Excision of anal lesion(s)	1.86	4.15	3.49	1.20	1.10	0.22	6.23	5.57	3.28	3.18	010
46924		A	Destruction, anal lesion(s)	2.76	9.61	8.91	1.52	1.39	0.26	12.63	11.93	4.54	4.41	010
46934		A	Destruction of hemorrhoids	3.75	5.41	5.16	2.80	2.91	0.32	9.48	9.23	6.87	6.98	090
46935		A	Destruction of hemorrhoids	2.43	3.70	3.52	1.08	1.18	0.23	6.36	6.18	3.74	3.84	010
46936		A	Destruction of hemorrhoids	3.68	6.16	5.19	2.60	2.52	0.34	10.18	9.21	6.62	6.54	090
46937		A	Cryotherapy of rectal lesion	2.69	4.01	3.08	1.80	1.37	0.14	6.84	5.91	4.63	4.20	010
46938		A	Cryotherapy of rectal lesion	4.65	5.85	4.46	3.66	3.20	0.58	11.08	9.69	8.89	8.43	090
46940		A	Treatment of anal fissure	2.32	2.85	2.21	1.04	1.08	0.23	5.40	4.76	3.59	3.63	010
46942		A	Treatment of anal fissure	2.04	2.80	2.07	0.95	1.00	0.19	5.03	4.30	3.18	3.23	010
46945		A	Ligation of hemorrhoids	2.09	4.83	3.65	3.00	2.60	0.19	7.11	5.93	5.28	4.88	090
46946		A	Ligation of hemorrhoids	2.58	4.65	3.95	2.66	2.46	0.27	7.50	6.80	5.51	5.31	090
46947		A	Hemorrhoidopexy by stapling	5.45	NA	NA	3.12	2.81	0.75	NA	NA	9.32	9.01	090
46999		C	Anus surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
47000		A	Needle biopsy of liver	1.90	7.68	4.22	0.63	0.63	0.12	9.70	6.24	2.65	2.65	000

47001			A	Needle biopsy, liver add-on	1.90	NA	NA	0.49	0.61	0.25	NA	NA	2.64	2.76	ZZZ
47010			A	Open drainage, liver lesion	19.21	NA	NA	8.34	8.38	1.80	NA	NA	29.35	29.39	090
47011			A	Percut drain, liver lesion	3.69	NA	NA	1.18	1.20	0.22	NA	NA	5.09	5.11	000
47015			A	Inject/aspirate liver cyst	18.31	NA	NA	7.92	7.59	1.83	NA	NA	28.06	27.73	090
47100			A	Wedge biopsy of liver	12.72	NA	NA	6.39	6.12	1.53	NA	NA	20.64	20.37	090
47120			A	Partial removal of liver	38.74	NA	NA	14.23	14.91	4.65	NA	NA	57.62	58.30	090
47122			A	Extensive removal of liver	59.29	NA	NA	19.03	20.84	7.19	NA	NA	85.51	87.32	090
47125			A	Partial removal of liver	52.85	NA	NA	17.27	18.94	6.45	NA	NA	76.57	78.24	090
47130			A	Partial removal of liver	57.00	NA	NA	18.28	20.29	6.94	NA	NA	82.22	84.23	090
47135			R	Transplantation of liver	83.15	NA	NA	28.01	30.63	9.93	NA	NA	121.09	123.71	090
47136			R	Transplantation of liver	70.25	NA	NA	23.80	26.21	8.41	NA	NA	102.46	104.87	090
47140			A	Partial removal, donor liver	59.14	NA	NA	21.89	22.18	5.17	NA	NA	86.20	86.49	090
47141			A	Partial removal, donor liver	71.17	NA	NA	25.67	26.59	5.17	NA	NA	102.01	102.93	090
47142			A	Partial removal, donor liver	79.11	NA	NA	27.72	29.03	5.17	NA	NA	112.00	113.31	090
47143			C	Prep donor liver, whole	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
47144			C	Prep donor liver, 3-segment	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
47145			C	Prep donor liver, lobe split	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
47146			A	Prep donor liver/venous	6.00	NA	NA	1.54	1.92	0.83	NA	NA	8.37	8.75	XXX
47147			A	Prep donor liver/arterial	7.00	NA	NA	1.80	2.24	0.97	NA	NA	9.77	10.21	XXX
47300			A	Surgery for liver lesion	17.95	NA	NA	7.71	7.34	1.98	NA	NA	27.64	27.27	090
47350			A	Repair liver wound	22.30	NA	NA	8.95	8.88	2.58	NA	NA	33.83	33.76	090
47360			A	Repair liver wound	31.12	NA	NA	11.51	11.56	3.37	NA	NA	46.00	46.05	090
47361			A	Repair liver wound	52.41	NA	NA	16.93	18.12	5.85	NA	NA	75.19	76.38	090
47362			A	Repair liver wound	23.35	NA	NA	9.35	8.87	2.50	NA	NA	35.20	34.72	090
47370			A	Laparo ablate liver tumor rf	20.61	NA	NA	7.75	8.04	2.55	NA	NA	30.91	31.20	090
47371			A	Laparo ablate liver cryosurg	20.61	NA	NA	8.16	8.15	2.60	NA	NA	31.37	31.36	090
47379			C	Laparoscope procedure, liver	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
47380			A	Open ablate liver tumor rf	24.37	NA	NA	8.69	9.19	2.86	NA	NA	35.92	36.42	090
47381			A	Open ablate liver tumor cryo	24.64	NA	NA	9.23	9.49	2.84	NA	NA	36.71	36.97	090
47382			A	Percut ablate liver rf	15.17	NA	NA	5.68	5.97	0.96	NA	NA	21.81	22.10	010
47399			C	Liver surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
47400			A	Incision of liver duct	36.17	NA	NA	13.24	13.38	3.07	NA	NA	52.48	52.62	090
47420			A	Incision of bile duct	21.86	NA	NA	8.69	8.74	2.62	NA	NA	33.17	33.22	090
47425			A	Incision of bile duct	22.14	NA	NA	8.70	8.78	2.61	NA	NA	33.45	33.53	090
47460			A	Incise bile duct sphincter	20.35	NA	NA	9.06	8.54	2.20	NA	NA	31.61	31.09	090
47480			A	Incision of gallbladder	13.06	NA	NA	6.72	6.11	1.42	NA	NA	21.20	20.59	090
47490			A	Incision of gallbladder	8.00	NA	NA	5.02	5.43	0.43	NA	NA	13.45	13.86	090
47500			A	Injection for liver x-rays	1.96	NA	NA	0.64	0.64	0.12	NA	NA	2.72	2.72	000
47505			A	Injection for liver x-rays	0.76	NA	NA	0.25	0.25	0.04	NA	NA	1.05	1.05	000
47510			A	Insert catheter, bile duct	7.88	NA	NA	4.35	4.85	0.46	NA	NA	12.69	13.19	090
47511			A	Insert bile duct drain	10.72	NA	NA	4.67	4.98	0.62	NA	NA	16.01	16.32	090
47525			A	Change bile duct catheter	5.54	14.92	15.05	2.51	2.73	0.33	20.79	20.92	8.38	8.60	010
47530			A	Revise/reinsert bile tube	5.90	30.79	33.03	3.26	3.60	0.37	37.06	39.30	9.53	9.87	090
47550			A	Bile duct endoscopy add-on	3.02	NA	NA	0.79	0.96	0.40	NA	NA	4.21	4.38	ZZZ
47552			A	Biliary endoscopy thru skin	6.03	NA	NA	2.32	2.36	0.42	NA	NA	8.77	8.81	000
47553			A	Biliary endoscopy thru skin	6.34	NA	NA	2.05	2.06	0.37	NA	NA	8.76	8.77	000
47554			A	Biliary endoscopy thru skin	9.05	NA	NA	3.12	3.29	0.96	NA	NA	13.13	13.30	000
47555			A	Biliary endoscopy thru skin	7.55	NA	NA	2.50	2.47	0.45	NA	NA	10.50	10.47	000
47556			A	Biliary endoscopy thru skin	8.55	NA	NA	2.77	2.78	0.50	NA	NA	11.82	11.83	000
47560			A	Laparoscopy w/cholangio	4.88	NA	NA	1.26	1.57	0.65	NA	NA	6.79	7.10	000
47561			A	Laparo w/cholangio/biopsy	5.17	NA	NA	1.57	1.83	0.66	NA	NA	7.40	7.66	000
47562			A	Laparoscopic cholecystectomy	11.57	NA	NA	5.32	5.07	1.46	NA	NA	18.35	18.10	090
47563			A	Laparo cholecystectomy/graph	11.98	NA	NA	5.13	5.25	1.58	NA	NA	18.69	18.81	090
47564			A	Laparo cholecystectomy/explr	14.21	NA	NA	5.50	5.83	1.88	NA	NA	21.59	21.92	090
47570			A	Laparo cholecystoenterostomy	12.56	NA	NA	5.10	5.30	1.65	NA	NA	19.31	19.51	090
47579			C	Laparoscope proc, biliary	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
47600			A	Removal of gallbladder	15.44	NA	NA	6.82	6.30	1.79	NA	NA	24.05	23.53	090
47605			A	Removal of gallbladder	15.86	NA	NA	6.46	6.48	1.94	NA	NA	24.26	24.28	090
47610			A	Removal of gallbladder	20.80	NA	NA	7.78	7.89	2.48	NA	NA	31.06	31.17	090
47612			A	Removal of gallbladder	21.09	NA	NA	7.78	7.85	2.47	NA	NA	31.34	31.41	090
47620			A	Removal of gallbladder	22.95	NA	NA	8.29	8.46	2.73	NA	NA	33.97	34.14	090
47630			A	Remove bile duct stone	9.52	NA	NA	4.55	4.80	0.65	NA	NA	14.72	14.97	090
47700			A	Exploration of bile ducts	16.32	NA	NA	7.33	7.38	2.06	NA	NA	25.71	25.76	090
47701			A	Bile duct revision	28.55	NA	NA	10.18	11.15	3.67	NA	NA	42.40	43.37	090
47711			A	Excision of bile duct tumor	25.71	NA	NA	9.68	9.85	3.04	NA	NA	38.43	38.60	090
47712			A	Excision of bile duct tumor	33.53	NA	NA	11.69	12.22	3.92	NA	NA	49.14	49.67	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
47715		A	Excision of bile duct cyst	21.36	NA	NA	8.64	8.48	2.48	NA	NA	32.48	32.32	090
47716		A	Fusion of bile duct cyst	19.01	NA	NA	7.99	7.86	2.14	NA	NA	29.14	29.01	090
47720		A	Fuse gallbladder & bowel	18.15	NA	NA	7.80	7.55	2.10	NA	NA	28.05	27.80	090
47721		A	Fuse upper gi structures	21.80	NA	NA	8.69	8.59	2.52	NA	NA	33.01	32.91	090
47740		A	Fuse gallbladder & bowel	21.04	NA	NA	8.56	8.41	2.41	NA	NA	32.01	31.86	090
47741		A	Fuse gallbladder & bowel	24.02	NA	NA	9.33	9.29	2.82	NA	NA	36.17	36.13	090
47760		A	Fuse bile ducts and bowel	38.08	NA	NA	13.24	11.43	3.41	NA	NA	54.73	52.92	090
47765		A	Fuse liver ducts & bowel	51.95	NA	NA	17.09	12.36	3.29	NA	NA	72.33	67.60	090
47780		A	Fuse bile ducts and bowel	42.08	NA	NA	14.27	11.96	3.49	NA	NA	59.84	57.53	090
47785		A	Fuse bile ducts and bowel	55.95	NA	NA	18.09	14.19	4.09	NA	NA	78.13	74.23	090
47800		A	Reconstruction of bile ducts	25.98	NA	NA	9.84	9.99	3.07	NA	NA	38.89	39.04	090
47801		A	Placement, bile duct support	17.41	NA	NA	8.19	8.15	1.16	NA	NA	26.76	26.72	090
47802		A	Fuse liver duct & intestine	24.74	NA	NA	9.64	9.65	2.85	NA	NA	37.23	37.24	090
47900		A	Suture bile duct injury	22.25	NA	NA	8.82	8.84	2.64	NA	NA	33.71	33.73	090
47999		C	Bile tract surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
48000		A	Drainage of abdomen	31.76	NA	NA	11.07	11.39	3.47	NA	NA	46.30	46.62	090
48001		A	Placement of drain, pancreas	39.50	NA	NA	12.81	13.60	4.68	NA	NA	56.99	57.78	090
48005		A	Resect/debride pancreas	48.97	NA	NA	16.10	16.43	5.54	NA	NA	70.61	70.94	090
48020		A	Removal of pancreatic stone	18.90	NA	NA	7.68	7.39	2.12	NA	NA	28.70	28.41	090
48100		A	Biopsy of pancreas, open	14.34	NA	NA	5.96	5.68	1.62	NA	NA	21.92	21.64	090
48102		A	Needle biopsy, pancreas	4.67	9.57	8.36	1.74	1.89	0.28	14.52	13.31	6.69	6.84	010
48120		A	Removal of pancreas lesion	18.29	NA	NA	6.98	6.88	2.09	NA	NA	27.36	27.26	090
48140		A	Partial removal of pancreas	26.13	NA	NA	9.48	9.51	3.02	NA	NA	38.63	38.66	090
48145		A	Partial removal of pancreas	27.20	NA	NA	9.83	9.82	3.17	NA	NA	40.20	40.19	090
48146		A	Pancreatectomy	30.34	NA	NA	12.02	11.98	3.49	NA	NA	45.85	45.81	090
48148		A	Removal of pancreatic duct	20.20	NA	NA	8.14	7.73	2.29	NA	NA	30.63	30.22	090
48150		A	Partial removal of pancreas	52.55	NA	NA	18.29	19.18	6.30	NA	NA	77.14	78.03	090
48152		A	Pancreatectomy	48.39	NA	NA	16.84	17.85	5.78	NA	NA	71.01	72.02	090
48153		A	Pancreatectomy	52.53	NA	NA	18.15	19.18	6.29	NA	NA	76.97	78.00	090
48154		A	Pancreatectomy	48.62	NA	NA	17.15	17.95	5.82	NA	NA	71.59	72.39	090
48155		A	Removal of pancreas	29.19	NA	NA	12.09	11.76	3.26	NA	NA	44.54	44.21	090
48180		A	Fuse pancreas and bowel	27.90	NA	NA	10.01	10.11	3.27	NA	NA	41.18	41.28	090
48400		A	Injection, intraop add-on	1.95	NA	NA	0.84	0.69	0.15	NA	NA	2.94	2.79	ZZZ
48500		A	Surgery of pancreatic cyst	17.97	NA	NA	8.12	7.52	2.02	NA	NA	28.11	27.51	090
48510		A	Drain pancreatic pseudocyst	17.00	NA	NA	7.64	7.48	1.82	NA	NA	26.46	26.30	090
48511		A	Drain pancreatic pseudocyst	3.99	20.24	20.73	1.27	1.30	0.24	24.47	24.96	5.50	5.53	000
48520		A	Fuse pancreas cyst and bowel	18.03	NA	NA	6.85	6.73	2.05	NA	NA	26.93	26.81	090
48540		A	Fuse pancreas cyst and bowel	21.82	NA	NA	7.81	8.03	2.60	NA	NA	32.23	32.45	090
48545		A	Pancreatorrhaphy	22.04	NA	NA	8.16	8.02	2.37	NA	NA	32.57	32.43	090
48547		A	Duodenal exclusion	30.19	NA	NA	10.36	10.44	3.41	NA	NA	43.96	44.04	090
48551		C	Prep donor pancreas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
48552		A	Prep donor pancreas/venous	4.30	NA	NA	1.14	1.38	0.31	NA	NA	5.75	5.99	XXX
48554		R	Transpl allograft pancreas	36.77	NA	NA	20.69	18.86	4.18	NA	NA	61.64	59.81	090
48556		A	Removal, allograft pancreas	19.16	NA	NA	9.48	8.42	2.07	NA	NA	30.71	29.65	090
48999		C	Pancreas surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
49000		A	Exploration of abdomen	12.40	NA	NA	5.25	5.34	1.52	NA	NA	19.17	19.26	090
49002		A	Reopening of abdomen	17.51	NA	NA	6.47	5.38	1.37	NA	NA	25.35	24.26	090
49010		A	Exploration behind abdomen	15.94	NA	NA	6.36	6.01	1.51	NA	NA	23.81	23.46	090
49020		A	Drain abdominal abscess	26.38	NA	NA	9.95	10.12	2.84	NA	NA	39.17	39.34	090
49021		A	Drain abdominal abscess	3.37	19.73	20.72	1.08	1.10	0.20	23.30	24.29	4.65	4.67	000
49040		A	Drain, open, abdom abscess	16.35	NA	NA	6.57	6.45	1.69	NA	NA	24.61	24.49	090
49041		A	Drain, percut, abdom abscess	3.99	19.97	19.63	1.28	1.30	0.24	24.20	23.86	5.51	5.53	000
49060		A	Drain, open, retrop abscess	18.36	NA	NA	7.30	7.39	1.74	NA	NA	27.40	27.49	090
49061		A	Drain, percut, retroper absc	3.69	19.83	19.67	1.18	1.20	0.22	23.74	23.58	5.09	5.11	000
49062		A	Drain to peritoneal cavity	12.08	NA	NA	5.26	5.38	1.39	NA	NA	18.73	18.85	090
49080		A	Puncture, peritoneal cavity	1.35	2.72	3.67	0.44	0.46	0.08	4.15	5.10	1.87	1.89	000

49081		A	Removal of abdominal fluid	1.26	2.93	2.67	0.44	0.43	0.09	4.28	4.02	1.79	1.78	000
49085		A	Remove abdomen foreign body	13.97	NA	NA	5.61	5.52	1.62	NA	NA	21.20	21.11	090
49180		A	Biopsy, abdominal mass	1.73	2.43	2.93	0.55	0.57	0.10	4.26	4.76	2.38	2.40	000
49200		A	Removal of abdominal lesion	10.89	NA	NA	4.90	4.99	1.24	NA	NA	17.03	17.12	090
49201		A	Remove abdom lesion, complex	15.60	NA	NA	6.48	6.89	1.87	NA	NA	23.95	24.36	090
49215		A	Excise sacral spine tumor	37.60	NA	NA	12.80	13.73	4.37	NA	NA	54.77	55.70	090
49220		A	Multiple surgery, abdomen	15.64	NA	NA	6.30	6.54	1.88	NA	NA	23.82	24.06	090
49250		A	Excision of umbilicus	8.88	NA	NA	4.32	4.28	1.08	NA	NA	14.28	14.24	090
49255		A	Removal of omentum	12.35	NA	NA	5.68	5.62	1.43	NA	NA	19.46	19.40	090
49320		A	Diag laparo separate proc	5.34	NA	NA	2.54	2.61	0.65	NA	NA	8.53	8.60	010
49321		A	Laparoscopy, biopsy	5.39	NA	NA	2.59	2.63	0.70	NA	NA	8.68	8.72	010
49322		A	Laparoscopy, aspiration	5.94	NA	NA	2.66	2.91	0.71	NA	NA	9.31	9.56	010
49323		A	Laparo drain lymphocele	10.09	NA	NA	4.72	4.55	1.20	NA	NA	16.01	15.84	090
49329		C	Laparo proc, abdm/per/oment	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
49400		A	Air injection into abdomen	1.88	2.44	2.91	0.57	0.61	0.15	4.47	4.94	2.60	2.64	000
49419		A	Insrt abdom cath for chemotx	7.01	NA	NA	3.49	3.54	0.81	NA	NA	11.31	11.36	090
49420		A	Insert abdom drain, temp	2.22	NA	NA	1.16	1.11	0.21	NA	NA	3.59	3.54	000
49421		A	Insert abdom drain, perm	5.83	NA	NA	3.16	3.15	0.74	NA	NA	9.73	9.72	090
49422		A	Remove perm cannula/catheter	6.24	NA	NA	2.64	2.83	0.83	NA	NA	9.71	9.90	010
49423		A	Exchange drainage catheter	1.46	13.26	13.87	0.51	0.52	0.09	14.81	15.42	2.06	2.07	000
49424		A	Assess cyst, contrast inject	0.76	3.09	3.56	0.28	0.29	0.04	3.89	4.36	1.08	1.09	000
49425		A	Insert abdomen-venous drain	12.07	NA	NA	5.32	5.52	1.54	NA	NA	18.93	19.13	090
49426		A	Revise abdomen-venous shunt	10.28	NA	NA	4.55	4.71	1.28	NA	NA	16.11	16.27	090
49427		A	Injection, abdominal shunt	0.89	NA	NA	0.28	0.30	0.07	NA	NA	1.24	1.26	000
49428		A	Ligation of shunt	6.75	NA	NA	3.08	3.71	0.80	NA	NA	10.63	11.26	010
49429		A	Removal of shunt	7.39	NA	NA	3.01	3.32	1.02	NA	NA	11.42	11.73	010
49491		A	Rpr hern preemie reduc	12.36	NA	NA	5.47	5.16	1.40	NA	NA	19.23	18.92	090
49492		A	Rpr ing hem premie, blocked	15.26	NA	NA	5.86	6.04	1.80	NA	NA	22.92	23.10	090
49495		A	Rpr ing hemia baby, reduc	6.13	NA	NA	3.00	2.96	0.74	NA	NA	9.87	9.83	090
49496		A	Rpr ing hemia baby, blocked	9.28	NA	NA	4.39	4.30	1.07	NA	NA	14.74	14.65	090
49500		A	Rpr ing hemia, init, reduce	5.72	NA	NA	3.62	3.24	0.71	NA	NA	10.05	9.67	090
49501		A	Rpr ing hemia, init blocked	9.24	NA	NA	4.28	4.22	1.12	NA	NA	14.64	14.58	090
49505		A	Prp i/hern init reduc >5 yr	7.84	NA	NA	3.92	3.79	1.03	NA	NA	12.79	12.66	090
49507		A	Prp i/hern init block >5 yr	9.93	NA	NA	4.50	4.46	1.27	NA	NA	15.70	15.66	090
49520		A	Rerepair ing hernia, reduce	9.87	NA	NA	4.42	4.43	1.28	NA	NA	15.57	15.58	090
49521		A	Rerepair ing hernia, blocked	12.32	NA	NA	5.04	5.18	1.59	NA	NA	18.95	19.09	090
49525		A	Repair ing hemia, sliding	8.81	NA	NA	4.17	4.10	1.13	NA	NA	14.11	14.04	090
49540		A	Repair lumbar hernia	10.62	NA	NA	4.67	4.72	1.37	NA	NA	16.66	16.71	090
49550		A	Rpr rem hemia, init, reduce	8.87	NA	NA	4.15	4.13	1.14	NA	NA	14.16	14.14	090
49553		A	Rpr fem hernia, init blocked	9.80	NA	NA	4.45	4.42	1.24	NA	NA	15.49	15.46	090
49555		A	Rerepair fem hemia, reduce	9.27	NA	NA	4.26	4.26	1.20	NA	NA	14.73	14.73	090
49557		A	Rerepair fem hemia, blocked	11.50	NA	NA	4.90	4.96	1.47	NA	NA	17.87	17.93	090
49560		A	Rpr ventral hem init, reduc	11.80	NA	NA	4.93	5.09	1.52	NA	NA	18.25	18.41	090
49561		A	Rpr ventral hern init, block	15.26	NA	NA	5.86	6.00	1.88	NA	NA	23.00	23.14	090
49565		A	Rerepair ventrl hern, reduce	12.25	NA	NA	5.17	5.20	1.52	NA	NA	18.94	18.97	090
49566		A	Rerepair ventrl hem, block	15.41	NA	NA	5.92	6.07	1.90	NA	NA	23.23	23.38	090
49568		A	Hemia repair w/mesh	4.88	NA	NA	1.26	1.57	0.64	NA	NA	6.78	7.09	ZZZ
49570		A	Rpr epigastric hern, reduce	5.93	NA	NA	3.36	3.21	0.75	NA	NA	10.04	9.89	090
49572		A	Rpr epigastric hem, blocked	7.75	NA	NA	3.87	3.56	0.88	NA	NA	12.50	12.19	090
49580		A	Rpr umbil hern, reduc < 5 yr	4.35	NA	NA	3.03	2.70	0.54	NA	NA	7.92	7.59	090
49582		A	Rpr umbil hem, block < 5 yr	7.01	NA	NA	3.64	3.51	0.88	NA	NA	11.53	11.40	090
49585		A	Rpr umbil hern, reduc > 5 yr	6.47	NA	NA	3.54	3.35	0.82	NA	NA	10.83	10.64	090
49587		A	Rpr umbil hern, block > 5 yr	7.92	NA	NA	3.90	3.77	0.99	NA	NA	12.81	12.68	090
49590		A	Repair spigelian hemia	8.78	NA	NA	4.14	4.10	1.13	NA	NA	14.05	14.01	090
49600		A	Repair umbilical lesion	11.42	NA	NA	5.20	5.29	1.32	NA	NA	17.94	18.03	090
49605		A	Repair umbilical lesion	86.79	NA	NA	26.58	28.02	9.36	NA	NA	122.73	124.17	090
49606		A	Repair umbilical lesion	18.87	NA	NA	6.66	7.43	2.45	NA	NA	27.98	28.75	090
49610		A	Repair umbilical lesion	10.78	NA	NA	4.73	5.08	1.07	NA	NA	16.58	16.93	090
49611		A	Repair umbilical lesion	9.21	NA	NA	3.66	6.14	0.78	NA	NA	13.65	16.13	090
49650		A	Laparo hernia repair initial	6.26	NA	NA	3.37	3.24	0.93	NA	NA	10.56	10.43	090
49651		A	Laparo hernia repair recur	8.23	NA	NA	4.26	4.10	1.14	NA	NA	13.63	13.47	090
49659		C	Laparo proc, hernia repair	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
49900		A	Repair of abdominal wall	12.26	NA	NA	6.35	6.25	1.62	NA	NA	20.23	20.13	090
49904		A	Omental flap, extra-abdom	22.06	NA	NA	12.17	14.45	2.69	NA	NA	36.92	39.20	090
49905		A	Omental flap, intra-abdom	6.54	NA	NA	1.74	2.15	0.75	NA	NA	9.03	9.44	ZZZ
49906		C	Free omental flap, microvasc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
49999		C	Abdomen surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
50010		A	Exploration of kidney	12.07	NA	NA	6.90	5.63	0.93	NA	NA	19.90	18.63	090
50020		A	Renal abscess, open drain	17.80	NA	NA	8.63	7.96	1.34	NA	NA	27.77	27.10	090
50021		A	Renal abscess, percut drain	3.37	21.26	21.55	1.09	1.10	0.20	24.83	25.12	4.66	4.67	000
50040		A	Drainage of kidney	16.40	NA	NA	8.91	7.33	1.03	NA	NA	26.34	24.76	090
50045		A	Exploration of kidney	16.61	NA	NA	8.55	7.08	1.24	NA	NA	26.40	24.93	090
50060		A	Removal of kidney stone	20.74	NA	NA	11.10	8.64	1.36	NA	NA	33.20	30.74	090
50065		A	Incision of kidney	22.11	NA	NA	11.69	7.48	1.59	NA	NA	35.39	31.18	090
50070		A	Incision of kidney	21.64	NA	NA	11.49	9.03	1.44	NA	NA	34.57	32.11	090
50075		A	Removal of kidney stone	26.84	NA	NA	13.79	10.87	1.80	NA	NA	42.43	39.51	090
50080		A	Removal of kidney stone	15.56	NA	NA	8.64	6.86	1.04	NA	NA	25.24	23.46	090
50081		A	Removal of kidney stone	23.25	NA	NA	12.32	9.64	1.54	NA	NA	37.11	34.43	090
50100		A	Revise kidney blood vessels	17.24	NA	NA	7.34	7.67	2.06	NA	NA	26.64	26.97	090
50120		A	Exploration of kidney	17.00	NA	NA	8.80	7.27	1.21	NA	NA	27.01	25.48	090
50125		A	Explore and drain kidney	17.61	NA	NA	9.85	7.68	1.43	NA	NA	28.89	26.72	090
50130		A	Removal of kidney stone	18.61	NA	NA	10.12	7.90	1.22	NA	NA	29.95	27.73	090
50135		A	Exploration of kidney	20.38	NA	NA	10.81	8.53	1.33	NA	NA	32.52	30.24	090
50200		A	Biopsy of kidney	2.63	NA	NA	1.13	1.25	0.16	NA	NA	3.92	4.04	000
50205		A	Biopsy of kidney	12.15	NA	NA	5.62	5.16	1.30	NA	NA	19.07	18.61	090
50220		A	Remove kidney, open	18.47	NA	NA	9.64	7.83	1.35	NA	NA	29.46	27.65	090
50225		A	Removal kidney open, complex	21.67	NA	NA	11.14	8.89	1.50	NA	NA	34.31	32.06	090
50230		A	Removal kidney open, radical	23.63	NA	NA	11.81	9.38	1.55	NA	NA	36.99	34.56	090
50234		A	Removal of kidney & ureter	23.84	NA	NA	12.20	9.67	1.59	NA	NA	37.63	35.10	090
50236		A	Removal of kidney & ureter	26.66	NA	NA	14.10	11.21	1.76	NA	NA	42.52	39.63	090
50240		A	Partial removal of kidney	23.93	NA	NA	12.78	9.95	1.55	NA	NA	38.26	35.43	090
50250		A	Cryoablate renal mass open	21.98	NA	NA	11.01	9.62	1.39	NA	NA	34.38	32.99	090
50280		A	Removal of kidney lesion	16.88	NA	NA	9.35	7.35	1.19	NA	NA	27.42	25.42	090
50290		A	Removal of kidney lesion	15.94	NA	NA	8.19	6.89	1.41	NA	NA	25.54	24.24	090
50320		A	Remove kidney, living donor	22.18	NA	NA	12.52	11.12	2.35	NA	NA	37.05	35.65	090
50323		C	Prep cadaver renal allograft	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
50325		C	Prep donor renal graft	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
50327		A	Prep renal graft/venous	4.00	NA	NA	1.10	1.29	0.29	NA	NA	5.39	5.58	XXX
50328		A	Prep renal graft/arterial	3.50	NA	NA	0.98	1.13	0.26	NA	NA	4.74	4.89	XXX
50329		A	Prep renal graft/ureteral	3.34	NA	NA	0.97	1.09	0.25	NA	NA	4.56	4.68	XXX
50340		A	Removal of kidney	13.79	NA	NA	7.70	6.79	1.65	NA	NA	23.14	22.23	090
50360		A	Transplantation of kidney	40.27	NA	NA	18.95	16.34	3.81	NA	NA	63.03	60.42	090
50365		A	Transplantation of kidney	45.50	NA	NA	19.63	18.55	4.42	NA	NA	69.55	68.47	090
50370		A	Remove transplanted kidney	18.60	NA	NA	9.35	7.69	1.67	NA	NA	29.62	27.96	090
50380		A	Reimplantation of kidney	29.48	NA	NA	16.43	13.12	2.50	NA	NA	48.41	45.10	090
50382		A	Change ureter stent, percut	5.50	26.41	33.69	1.86	1.86	0.34	32.25	39.53	7.70	7.70	000
50384		A	Remove ureter stent, percut	5.00	20.77	31.61	1.69	1.71	0.31	26.08	36.92	7.00	7.02	000
50387		A	Change ext/int ureter stent	2.00	12.75	16.85	0.66	0.67	0.12	14.87	18.97	2.78	2.79	000
50389		A	Remove renal tube w/fluoro	1.10	6.75	11.24	0.36	0.37	0.07	7.92	12.41	1.53	1.54	000
50390		A	Drainage of kidney lesion	1.96	NA	NA	0.64	0.64	0.12	NA	NA	2.72	2.72	000
50391		A	Instll rx agnt into mal tub	1.96	1.51	1.56	0.79	0.67	0.14	3.61	3.66	2.89	2.77	000
50392		A	Insert kidney drain	3.37	NA	NA	1.40	1.49	0.20	NA	NA	4.97	5.06	000
50393		A	Insert ureteral tube	4.15	NA	NA	1.66	1.75	0.25	NA	NA	6.06	6.15	000
50394		A	Injection for kidney x-ray	0.76	1.88	2.48	0.56	0.64	0.05	2.69	3.29	1.37	1.45	000
50395		A	Create passage to kidney	3.37	NA	NA	1.48	1.50	0.21	NA	NA	5.06	5.08	000
50396		A	Measure kidney pressure	2.09	NA	NA	1.02	1.07	0.13	NA	NA	3.24	3.29	000
50398		A	Change kidney tube	1.46	11.99	15.23	0.52	0.52	0.09	13.54	16.78	2.07	2.07	000
50400		A	Revision of kidney/ureter	21.06	NA	NA	11.12	8.68	1.38	NA	NA	33.56	31.12	090
50405		A	Revision of kidney/ureter	25.61	NA	NA	13.16	10.06	1.78	NA	NA	40.55	37.45	090
50500		A	Repair of kidney wound	21.01	NA	NA	9.29	8.61	2.01	NA	NA	32.31	31.63	090
50520		A	Close kidney-skin fistula	18.67	NA	NA	9.40	7.92	1.49	NA	NA	29.56	28.08	090
50525		A	Repair renal-abdomen fistula	24.14	NA	NA	10.99	9.49	1.83	NA	NA	36.96	35.46	090

50526		A	Repair renal-abdomen fistula	26.06	NA	NA	8.23	9.45	1.96	NA	NA	36.25	37.47	090
50540		A	Revision of horseshoe kidney	20.89	NA	NA	10.79	8.94	1.36	NA	NA	33.04	31.19	090
50541		A	Laparo ablate renal cyst	16.72	NA	NA	8.81	7.06	1.13	NA	NA	26.66	24.91	090
50542		A	Laparo ablate renal mass	21.12	NA	NA	11.24	8.91	1.39	NA	NA	33.75	31.42	090
50543		A	Laparo partial nephrectomy	27.10	NA	NA	14.20	11.19	1.80	NA	NA	43.10	40.09	090
50544		A	Laparoscopy, pyeloplasty	23.23	NA	NA	11.51	9.27	1.58	NA	NA	36.32	34.08	090
50545		A	Laparo radical nephrectomy	24.89	NA	NA	12.35	9.97	1.70	NA	NA	38.94	36.56	090
50546		A	Laparoscopic nephrectomy	21.63	NA	NA	11.39	9.12	1.57	NA	NA	34.59	32.32	090
50547		A	Laparo removal donor kidney	26.20	NA	NA	12.68	11.50	2.76	NA	NA	41.64	40.46	090
50548		A	Laparo remove w/ureter	25.22	NA	NA	12.27	9.95	1.72	NA	NA	39.21	36.89	090
50549		C	Laparoscope proc, renal	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
50551		A	Kidney endoscopy	5.59	4.61	4.26	2.66	2.14	0.40	10.60	10.25	8.65	8.13	000
50553		A	Kidney endoscopy	5.98	4.45	4.38	2.55	2.27	0.39	10.82	10.75	8.92	8.64	000
50555		A	Kidney endoscopy & biopsy	6.52	5.12	4.89	3.03	2.51	0.45	12.09	11.86	10.00	9.48	000
50557		A	Kidney endoscopy & treatment	6.61	5.28	4.76	3.07	2.49	0.47	12.36	11.84	10.15	9.57	000
50561		A	Kidney endoscopy & treatment	7.58	5.80	5.26	3.42	2.84	0.54	13.92	13.38	11.54	10.96	000
50562		A	Renal scope w/tumor resect	10.90	NA	NA	5.42	4.59	0.73	NA	NA	17.05	16.22	090
50570		A	Kidney endoscopy	9.53	NA	NA	4.27	3.48	0.68	NA	NA	14.48	13.69	000
50572		A	Kidney endoscopy	10.33	NA	NA	4.60	3.78	0.85	NA	NA	15.78	14.96	000
50574		A	Kidney endoscopy & biopsy	11.00	NA	NA	4.78	4.00	0.77	NA	NA	16.55	15.77	000
50575		A	Kidney endoscopy	13.96	NA	NA	6.06	4.99	0.99	NA	NA	21.01	19.94	000
50576		A	Kidney endoscopy & treatment	10.97	NA	NA	4.86	3.96	0.78	NA	NA	16.61	15.71	000
50580		A	Kidney endoscopy & treatment	11.84	NA	NA	5.17	4.26	0.83	NA	NA	17.84	16.93	000
50590		A	Fragmenting of kidney stone	9.58	17.26	13.61	6.19	4.63	0.65	27.49	23.84	16.42	14.86	090
50592		A	Perc rf ablate renal tumor	6.75	77.05	131.0	2.81	2.94	0.43	84.23	138.2	9.99	10.12	010
50600		A	Exploration of ureter	16.99	NA	NA	8.60	7.15	1.13	NA	NA	26.72	25.27	090
50605		A	Insert ureteral support	16.61	NA	NA	8.00	7.05	1.45	NA	NA	26.06	25.11	090
50610		A	Removal of ureter stone	17.07	NA	NA	9.12	7.50	1.43	NA	NA	27.62	26.00	090
50620		A	Removal of ureter stone	16.25	NA	NA	8.97	6.99	1.07	NA	NA	26.29	24.31	090
50630		A	Removal of ureter stone	16.03	NA	NA	8.30	6.78	1.09	NA	NA	25.42	23.90	090
50650		A	Removal of ureter	18.61	NA	NA	10.15	7.95	1.23	NA	NA	29.99	27.79	090
50660		A	Removal of ureter	20.81	NA	NA	10.87	8.68	1.38	NA	NA	33.06	30.87	090
50684		A	Injection for ureter x-ray	0.76	4.12	4.76	0.64	0.51	0.05	4.93	5.57	1.45	1.32	000
50686		A	Measure ureter pressure	1.51	2.07	3.10	0.71	0.79	0.11	3.69	4.72	2.33	2.41	000
50688		A	Change of ureter tube/stent	1.17	NA	NA	0.92	1.03	0.07	NA	NA	2.16	2.27	010
50690		A	Injection for ureter x-ray	1.16	1.43	1.72	0.72	0.72	0.07	2.66	2.95	1.95	1.95	000
50700		A	Revision of ureter	16.48	NA	NA	8.46	7.45	1.27	NA	NA	26.21	25.20	090
50715		A	Release of ureter	20.43	NA	NA	8.65	8.71	2.13	NA	NA	31.21	31.27	090
50722		A	Release of ureter	17.74	NA	NA	8.02	7.86	1.90	NA	NA	27.66	27.50	090
50725		A	Release/revise ureter	19.99	NA	NA	9.70	8.46	1.52	NA	NA	31.21	29.97	090
50727		A	Revise ureter	8.17	NA	NA	5.78	4.65	0.61	NA	NA	14.56	13.43	090
50728		A	Revise ureter	12.00	NA	NA	7.21	5.97	1.00	NA	NA	20.21	18.97	090
50740		A	Fusion of ureter & kidney	19.86	NA	NA	9.03	8.06	1.96	NA	NA	30.85	29.88	090
50750		A	Fusion of ureter & kidney	21.01	NA	NA	9.84	8.45	1.38	NA	NA	32.23	30.84	090
50760		A	Fusion of ureters	19.86	NA	NA	9.84	8.21	1.55	NA	NA	31.25	29.62	090
50770		A	Splicing of ureters	21.01	NA	NA	10.70	8.65	1.45	NA	NA	33.16	31.11	090
50780		A	Reimplant ureter in bladder	19.74	NA	NA	10.14	8.22	1.51	NA	NA	31.39	29.47	090
50782		A	Reimplant ureter in bladder	19.51	NA	NA	8.30	8.65	1.61	NA	NA	29.42	29.77	090
50783		A	Reimplant ureter in bladder	20.52	NA	NA	10.07	8.68	1.98	NA	NA	32.57	31.18	090
50785		A	Reimplant ureter in bladder	22.02	NA	NA	11.19	9.02	1.45	NA	NA	34.66	32.49	090
50800		A	Implant ureter in bowel	16.16	NA	NA	9.32	7.18	1.19	NA	NA	26.67	24.53	090
50810		A	Fusion of ureter & bowel	22.29	NA	NA	9.65	9.22	2.31	NA	NA	34.25	33.82	090
50815		A	Urine shunt to intestine	21.98	NA	NA	11.63	9.24	1.54	NA	NA	35.15	32.76	090
50820		A	Construct bowel bladder	23.82	NA	NA	12.00	9.47	1.89	NA	NA	37.71	35.18	090
50825		A	Construct bowel bladder	30.40	NA	NA	15.09	12.11	2.07	NA	NA	47.56	44.58	090
50830		A	Revise urine flow	33.49	NA	NA	15.92	13.10	2.37	NA	NA	51.78	48.96	090
50840		A	Replace ureter by bowel	22.11	NA	NA	11.93	9.30	1.47	NA	NA	35.51	32.88	090
50845		A	Appendico-vesicostomy	22.11	NA	NA	12.42	9.77	1.57	NA	NA	36.10	33.45	090
50860		A	Transplant ureter to skin	16.87	NA	NA	9.05	7.22	1.29	NA	NA	27.21	25.38	090
50900		A	Repair of ureter	14.83	NA	NA	8.10	6.62	1.14	NA	NA	24.07	22.59	090
50920		A	Closure ureter/skin fistula	15.60	NA	NA	8.54	7.06	1.01	NA	NA	25.15	23.67	090
50930		A	Closure ureter/bowel fistula	19.98	NA	NA	10.29	8.54	1.28	NA	NA	31.55	29.80	090
50940		A	Release of ureter	15.72	NA	NA	8.27	6.86	1.26	NA	NA	25.25	23.84	090
50945		A	Laparoscopy ureterolithotomy	17.83	NA	NA	8.78	7.47	1.36	NA	NA	27.97	26.66	090
50947		A	Laparo new ureter/bladder	25.57	NA	NA	12.50	10.39	2.16	NA	NA	40.23	38.12	090
50948		A	Laparo new ureter/bladder	23.65	NA	NA	12.02	9.52	1.70	NA	NA	37.37	34.87	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
50949		C	Laparoscope proc, ureter	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
50951		A	Endoscopy of ureter	5.83	4.87	4.44	2.79	2.24	0.41	11.11	10.68	9.03	8.48	000
50953		A	Endoscopy of ureter	6.23	5.05	4.56	3.31	2.60	0.43	11.71	11.22	9.97	9.26	000
50955		A	Ureter endoscopy & biopsy	6.74	5.28	6.13	3.52	2.89	0.48	12.50	13.35	10.74	10.11	000
50957		A	Ureter endoscopy & treatment	6.78	5.37	4.76	3.15	2.57	0.48	12.63	12.02	10.41	9.83	000
50961		A	Ureter endoscopy & treatment	6.04	4.85	4.48	2.82	2.34	0.41	11.30	10.93	9.27	8.79	000
50970		A	Ureter endoscopy	7.13	NA	NA	3.30	2.67	0.52	NA	NA	10.95	10.32	000
50972		A	Ureter endoscopy & catheter	6.88	NA	NA	3.14	2.63	0.49	NA	NA	10.51	10.00	000
50974		A	Ureter endoscopy & biopsy	9.16	NA	NA	3.97	3.32	0.64	NA	NA	13.77	13.12	000
50976		A	Ureter endoscopy & treatment	9.03	NA	NA	3.76	3.24	0.66	NA	NA	13.45	12.93	000
50980		A	Ureter endoscopy & treatment	6.84	NA	NA	3.13	2.56	0.48	NA	NA	10.45	9.88	000
51000		A	Drainage of bladder	0.78	0.94	1.69	0.28	0.25	0.05	1.77	2.52	1.11	1.08	000
51005		A	Drainage of bladder	1.02	2.43	4.13	0.30	0.33	0.10	3.55	5.25	1.42	1.45	000
51010		A	Drainage of bladder	4.25	4.78	5.40	2.38	2.00	0.28	9.31	9.93	6.91	6.53	010
51020		A	Incise & treat bladder	7.51	NA	NA	5.35	4.23	0.47	NA	NA	13.33	12.21	090
51030		A	Incise & treat bladder	7.63	NA	NA	4.80	4.18	0.58	NA	NA	13.01	12.39	090
51040		A	Incise & drain bladder	4.39	NA	NA	3.72	3.00	0.31	NA	NA	8.42	7.70	090
51045		A	Incise bladder/drain ureter	7.63	NA	NA	5.23	4.25	0.52	NA	NA	13.38	12.40	090
51050		A	Removal of bladder stone	7.83	NA	NA	5.38	4.08	0.49	NA	NA	13.70	12.40	090
51060		A	Removal of ureter stone	9.77	NA	NA	6.42	4.98	0.62	NA	NA	16.81	15.37	090
51065		A	Remove ureter calculus	9.77	NA	NA	6.35	4.85	0.63	NA	NA	16.75	15.25	090
51080		A	Drainage of bladder abscess	6.57	NA	NA	4.35	3.74	0.43	NA	NA	11.35	10.74	090
51500		A	Removal of bladder cyst	10.87	NA	NA	5.85	5.21	1.03	NA	NA	17.75	17.11	090
51520		A	Removal of bladder lesion	10.03	NA	NA	6.51	5.13	0.69	NA	NA	17.23	15.85	090
51525		A	Removal of bladder lesion	15.24	NA	NA	8.66	6.76	0.99	NA	NA	24.89	22.99	090
51530		A	Removal of bladder lesion	13.53	NA	NA	7.33	6.14	1.05	NA	NA	21.91	20.72	090
51535		A	Repair of ureter lesion	13.72	NA	NA	7.54	6.46	1.23	NA	NA	22.49	21.41	090
51550		A	Partial removal of bladder	17.05	NA	NA	8.91	7.27	1.31	NA	NA	27.27	25.63	090
51555		A	Partial removal of bladder	22.97	NA	NA	11.51	9.37	1.69	NA	NA	36.17	34.03	090
51565		A	Revise bladder & ureter(s)	23.43	NA	NA	12.07	9.73	1.63	NA	NA	37.13	34.79	090
51570		A	Removal of bladder	27.25	NA	NA	13.39	10.65	1.71	NA	NA	42.35	39.61	090
51575		A	Removal of bladder & nodes	33.93	NA	NA	16.79	13.21	2.16	NA	NA	52.88	49.30	090
51580		A	Remove bladder/revise tract	35.05	NA	NA	17.64	13.77	2.24	NA	NA	54.93	51.06	090
51585		A	Removal of bladder & nodes	39.32	NA	NA	19.63	15.18	2.48	NA	NA	61.43	56.98	090
51590		A	Remove bladder/revise tract	36.08	NA	NA	17.47	13.82	2.27	NA	NA	55.82	52.17	090
51595		A	Remove bladder/revise tract	41.04	NA	NA	19.79	15.54	2.59	NA	NA	63.42	59.17	090
51596		A	Remove bladder/create pouch	43.91	NA	NA	21.37	16.76	2.77	NA	NA	68.04	63.44	090
51597		A	Removal of pelvic structures	42.51	NA	NA	20.13	16.15	2.81	NA	NA	65.45	61.47	090
51600		A	Injection for bladder x-ray	0.88	4.25	4.85	0.31	0.30	0.06	5.19	5.79	1.25	1.24	000
51605		A	Preparation for bladder xray	0.64	NA	NA	0.42	0.37	0.04	NA	NA	1.10	1.05	000
51610		A	Injection for bladder x-ray	1.05	1.93	2.19	0.70	0.63	0.07	3.05	3.31	1.82	1.75	000
51700		A	Irrigation of bladder	0.88	1.52	1.58	0.34	0.30	0.06	2.46	2.52	1.28	1.24	000
51701		A	Insert bladder catheter	0.50	1.05	1.45	0.25	0.21	0.04	1.59	1.99	0.79	0.75	000
51702		A	Insert temp bladder cath	0.50	1.54	1.95	0.34	0.27	0.04	2.08	2.49	0.88	0.81	000
51703		A	Insert bladder cath, complex	1.47	2.29	2.62	0.81	0.62	0.10	3.86	4.19	2.38	2.19	000
51705		A	Change of bladder tube	1.02	2.04	2.21	0.85	0.67	0.07	3.13	3.30	1.94	1.76	010
51710		A	Change of bladder tube	1.49	2.75	3.19	1.19	0.88	0.11	4.35	4.79	2.79	2.48	010
51715		A	Endoscopic injection/implant	3.73	4.47	4.04	1.76	1.45	0.29	8.49	8.06	5.78	5.47	000
51720		A	Treatment of bladder lesion	1.50	1.64	1.72	0.75	0.71	0.14	3.28	3.36	2.39	2.35	000
51725		A	Simple cystometrogram	1.51	4.32	5.27	4.32	5.27	0.16	5.99	6.94	5.99	6.94	000
51725	26	A	Simple cystometrogram	1.51	0.57	0.51	0.57	0.51	0.12	2.20	2.14	2.20	2.14	000
51725	TC	A	Simple cystometrogram	0.00	3.75	4.76	3.75	4.76	0.04	3.79	4.80	3.79	4.80	000
51726		A	Complex cystometrogram	1.71	7.18	7.42	7.18	7.42	0.18	9.07	9.31	9.07	9.31	000
51726	26	A	Complex cystometrogram	1.71	0.65	0.58	0.65	0.58	0.13	2.49	2.42	2.49	2.42	000
51726	TC	A	Complex cystometrogram	0.00	6.53	6.84	6.53	6.84	0.05	6.58	6.89	6.58	6.89	000
51736		A	Urine flow measurement	0.61	0.91	0.66	0.91	0.66	0.06	1.58	1.33	1.58	1.33	000

51736	26	A	Urine flow measurement	0.61	0.23	0.21	0.23	0.21	0.05	0.89	0.87	0.89	0.87	000
51736	TC	A	Urine flow measurement	0.00	0.68	0.46	0.68	0.46	0.01	0.69	0.47	0.69	0.47	000
51741		A	Electro-uroflowmetry, first	1.14	1.27	0.91	1.27	0.91	0.11	2.52	2.16	2.52	2.16	000
51741	26	A	Electro-uroflowmetry, first	1.14	0.44	0.39	0.44	0.39	0.09	1.67	1.62	1.67	1.62	000
51741	TC	A	Electro-uroflowmetry, first	0.00	0.83	0.52	0.83	0.52	0.02	0.85	0.54	0.85	0.54	000
51772		A	Urethra pressure profile	1.61	5.09	5.45	5.09	5.45	0.20	6.90	7.26	6.90	7.26	000
51772	26	A	Urethra pressure profile	1.61	0.55	0.55	0.55	0.55	0.15	2.31	2.31	2.31	2.31	000
51772	TC	A	Urethra pressure profile	0.00	4.54	4.91	4.54	4.91	0.05	4.59	4.96	4.59	4.96	000
51784		A	Anal/urinary muscle study	1.53	3.85	3.95	3.85	3.95	0.16	5.54	5.64	5.54	5.64	000
51784	26	A	Anal/urinary muscle study	1.53	0.52	0.51	0.52	0.51	0.12	2.17	2.16	2.17	2.16	000
51784	TC	A	Anal/urinary muscle study	0.00	3.33	3.44	3.33	3.44	0.04	3.37	3.48	3.37	3.48	000
51785		A	Anal/urinary muscle study	1.53	4.54	4.47	4.54	4.47	0.15	6.22	6.15	6.22	6.15	000
51785	26	A	Anal/urinary muscle study	1.53	0.56	0.52	0.56	0.52	0.11	2.20	2.16	2.20	2.16	000
51785	TC	A	Anal/urinary muscle study	0.00	3.97	3.95	3.97	3.95	0.04	4.01	3.99	4.01	3.99	000
51792		A	Urinary reflex study	1.10	5.01	5.75	5.01	5.75	0.20	6.31	7.05	6.31	7.05	000
51792	26	A	Urinary reflex study	1.10	0.40	0.41	0.40	0.41	0.07	1.57	1.58	1.57	1.58	000
51792	TC	A	Urinary reflex study	0.00	4.61	5.34	4.61	5.34	0.13	4.74	5.47	4.74	5.47	000
51795		A	Urine voiding pressure study	1.53	6.78	7.16	6.78	7.16	0.22	8.53	8.91	8.53	8.91	000
51795	26	A	Urine voiding pressure study	1.53	0.58	0.52	0.58	0.52	0.12	2.23	2.17	2.23	2.17	000
51795	TC	A	Urine voiding pressure study	0.00	6.21	6.65	6.21	6.65	0.10	6.31	6.75	6.31	6.75	000
51797		A	Intraabdominal pressure test	1.60	4.88	5.56	4.88	5.56	0.17	6.65	7.33	6.65	7.33	000
51797	26	A	Intraabdominal pressure test	1.60	0.60	0.55	0.60	0.55	0.12	2.32	2.27	2.32	2.27	000
51797	TC	A	Intraabdominal pressure test	0.00	4.28	5.01	4.28	5.01	0.05	4.33	5.06	4.33	5.06	000
51798		A	Us urine capacity measure	0.00	0.60	0.41	NA	NA	0.08	0.68	0.49	NA	NA	XXX
51800		A	Revision of bladder/urethra	18.68	NA	NA	10.11	8.20	1.32	NA	NA	30.11	28.20	090
51820		A	Revision of urinary tract	19.34	NA	NA	10.54	8.85	1.74	NA	NA	31.62	29.93	090
51840		A	Attach bladder/urethra	11.23	NA	NA	5.81	5.62	1.06	NA	NA	18.10	17.91	090
51841		A	Attach bladder/urethra	13.55	NA	NA	6.85	6.49	1.24	NA	NA	21.64	21.28	090
51845		A	Repair bladder neck	10.02	NA	NA	5.88	5.03	0.79	NA	NA	16.69	15.84	090
51860		A	Repair of bladder wound	12.42	NA	NA	6.83	6.02	1.16	NA	NA	20.41	19.60	090
51865		A	Repair of bladder wound	15.62	NA	NA	8.47	7.12	1.23	NA	NA	25.32	23.97	090
51880		A	Repair of bladder opening	7.77	NA	NA	4.73	4.15	0.72	NA	NA	13.22	12.64	090
51900		A	Repair bladder/vagina lesion	14.42	NA	NA	8.04	6.56	1.21	NA	NA	23.67	22.19	090
51920		A	Close bladder-uterus fistula	13.20	NA	NA	7.77	6.17	1.18	NA	NA	22.15	20.55	090
51925		A	Hysterectomy/bladder repair	17.28	NA	NA	10.27	9.03	2.03	NA	NA	29.58	28.34	090
51940		A	Correction of bladder defect	30.41	NA	NA	11.41	11.91	2.14	NA	NA	43.96	44.46	090
51960		A	Revision of bladder & bowel	25.12	NA	NA	13.18	10.52	1.63	NA	NA	39.93	37.27	090
51980		A	Construct bladder opening	12.39	NA	NA	7.29	5.85	0.86	NA	NA	20.54	19.10	090
51990		A	Laparo urethral suspension	13.22	NA	NA	5.99	6.10	1.39	NA	NA	20.60	20.71	090
51992		A	Laparo sling operation	14.73	NA	NA	6.65	6.31	1.41	NA	NA	22.79	22.45	090
51999		C	Laparoscope proc, bladder	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
52000		A	Cystoscopy	2.23	3.70	3.40	1.33	0.90	0.14	6.07	5.77	3.70	3.27	000
52001		A	Cystoscopy, removal of clots	5.44	5.14	5.09	2.62	2.05	0.39	10.97	10.92	8.45	7.88	000
52005		A	Cystoscopy & ureter catheter	2.37	5.79	5.62	1.39	1.02	0.17	8.33	8.16	3.93	3.56	000
52007		A	Cystoscopy and biopsy	3.02	10.83	15.04	1.64	1.27	0.22	14.07	18.28	4.88	4.51	000
52010		A	Cystoscopy & duct catheter	3.02	8.20	10.11	1.65	1.28	0.21	11.43	13.34	4.88	4.51	000
52204		A	Cystoscopy	2.59	8.39	12.98	1.40	1.03	0.17	11.15	15.74	4.16	3.79	000
52214		A	Cystoscopy and treatment	3.70	20.07	33.59	1.86	1.46	0.26	24.03	37.55	5.82	5.42	000
52224		A	Cystoscopy and treatment	3.14	19.25	32.15	1.63	1.27	0.22	22.61	35.51	4.99	4.63	000
52234		A	Cystoscopy and treatment	4.62	NA	NA	2.31	1.82	0.33	NA	NA	7.26	6.77	000
52235		A	Cystoscopy and treatment	5.44	NA	NA	2.68	2.12	0.39	NA	NA	8.51	7.95	000
52240		A	Cystoscopy and treatment	9.71	NA	NA	4.42	3.58	0.69	NA	NA	14.82	13.98	000
52250		A	Cystoscopy and radiotracer	4.49	NA	NA	2.35	1.83	0.32	NA	NA	7.16	6.64	000
52260		A	Cystoscopy and treatment	3.91	NA	NA	1.97	1.56	0.28	NA	NA	6.16	5.75	000
52265		A	Cystoscopy and treatment	2.94	7.74	11.94	1.53	1.22	0.22	10.90	15.10	4.69	4.38	000
52270		A	Cystoscopy & revise urethra	3.36	7.08	10.04	1.77	1.37	0.24	10.68	13.64	5.37	4.97	000
52275		A	Cystoscopy & revise urethra	4.69	9.39	14.01	2.31	1.82	0.33	14.41	19.03	7.33	6.84	000
52276		A	Cystoscopy and treatment	4.99	NA	NA	2.48	1.96	0.35	NA	NA	7.82	7.30	000
52277		A	Cystoscopy and treatment	6.16	NA	NA	2.91	2.39	0.44	NA	NA	9.51	8.99	000
52281		A	Cystoscopy and treatment	2.80	5.34	6.65	1.56	1.20	0.20	8.34	9.65	4.56	4.20	000
52282		A	Cystoscopy, implant stent	6.39	NA	NA	3.01	2.43	0.45	NA	NA	9.85	9.27	000
52283		A	Cystoscopy and treatment	3.73	4.14	3.99	1.90	1.51	0.26	8.13	7.98	5.89	5.50	000
52285		A	Cystoscopy and treatment	3.60	4.40	4.11	1.87	1.47	0.26	8.26	7.97	5.73	5.33	000
52290		A	Cystoscopy and treatment	4.58	NA	NA	2.30	1.81	0.32	NA	NA	7.20	6.71	000
52300		A	Cystoscopy and treatment	5.30	NA	NA	2.65	2.09	0.38	NA	NA	8.33	7.77	000
52301		A	Cystoscopy and treatment	5.50	NA	NA	2.13	2.02	0.46	NA	NA	8.09	7.98	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
52305		A	Cystoscopy and treatment	5.30	NA	NA	2.53	2.02	0.38	NA	NA	8.21	7.70	000
52310		A	Cystoscopy and treatment	2.81	4.05	4.53	1.45	1.14	0.20	7.08	7.54	4.46	4.15	000
52315		A	Cystoscopy and treatment	5.20	6.70	8.17	2.51	2.00	0.37	12.27	13.74	8.08	7.57	000
52317		A	Remove bladder stone	6.71	17.25	26.02	3.04	2.47	0.48	24.44	33.21	10.23	9.68	000
52318		A	Remove bladder stone	9.18	NA	NA	4.11	3.35	0.65	NA	NA	13.94	13.18	000
52320		A	Cystoscopy and treatment	4.69	NA	NA	2.24	1.78	0.33	NA	NA	7.26	6.80	000
52325		A	Cystoscopy, stone removal	6.15	NA	NA	2.86	2.30	0.44	NA	NA	9.45	8.89	000
52327		A	Cystoscopy, inject material	5.18	17.98	28.35	2.36	1.95	0.37	23.53	33.90	7.91	7.50	000
52330		A	Cystoscopy and treatment	5.03	20.61	34.27	2.38	1.91	0.36	26.00	39.66	7.77	7.30	000
52332		A	Cystoscopy and treatment	2.83	12.54	7.44	1.58	1.18	0.21	15.58	10.48	4.62	4.22	000
52334		A	Create passage to kidney	4.82	NA	NA	2.34	1.88	0.35	NA	NA	7.51	7.05	000
52341		A	Cysto w/ureter stricture tx	5.99	NA	NA	3.04	2.42	0.43	NA	NA	9.46	8.84	000
52342		A	Cysto w/up stricture tx	6.49	NA	NA	3.26	2.57	0.46	NA	NA	10.21	9.52	000
52343		A	Cysto w/renal stricture tx	7.19	NA	NA	3.54	2.82	0.51	NA	NA	11.24	10.52	000
52344		A	Cysto/uretero, stricture tx	7.69	NA	NA	3.91	3.07	0.55	NA	NA	12.15	11.31	000
52345		A	Cysto/uretero w/up stricture	8.19	NA	NA	4.12	3.24	0.58	NA	NA	12.89	12.01	000
52346		A	Cystouretero w/renal strict	9.22	NA	NA	4.52	3.59	0.65	NA	NA	14.39	13.46	000
52351		A	Cystouretero & or pyeloscope	5.85	NA	NA	3.00	2.36	0.41	NA	NA	9.26	8.62	000
52352		A	Cystouretero w/stone remove	6.87	NA	NA	3.52	2.76	0.49	NA	NA	10.88	10.12	000
52353		A	Cystouretero w/lithotripsy	7.96	NA	NA	3.96	3.13	0.57	NA	NA	12.49	11.66	000
52354		A	Cystouretero w/biopsy	7.33	NA	NA	3.71	2.93	0.52	NA	NA	11.56	10.78	000
52355		A	Cystouretero w/excise tumor	8.81	NA	NA	4.30	3.43	0.63	NA	NA	13.74	12.87	000
52400		A	Cystouretero w/congen repr	10.04	NA	NA	5.47	4.17	0.68	NA	NA	16.19	14.89	090
52402		A	Cystourethro cut ejacul duct	5.27	NA	NA	2.20	1.83	0.40	NA	NA	7.87	7.50	000
52450		A	Incision of prostate	7.63	NA	NA	5.56	4.14	0.54	NA	NA	13.73	12.31	090
52500		A	Revision of bladder neck	9.33	NA	NA	6.24	4.50	0.60	NA	NA	16.17	14.43	090
52510		A	Dilation prostatic urethra	7.45	NA	NA	4.95	3.57	0.48	NA	NA	12.88	11.50	090
52601		A	Prostatectomy (TURP)	15.07	NA	NA	8.54	5.96	0.87	NA	NA	24.48	21.90	090
52606		A	Control postop bleeding	8.80	NA	NA	5.57	4.06	0.57	NA	NA	14.94	13.43	090
52612		A	Prostatectomy, first stage	9.02	NA	NA	5.94	4.28	0.56	NA	NA	15.52	13.86	090
52614		A	Prostatectomy, second stage	7.76	NA	NA	5.44	3.87	0.48	NA	NA	13.68	12.11	090
52620		A	Remove residual prostate	7.16	NA	NA	4.64	3.40	0.47	NA	NA	12.27	11.03	090
52630		A	Remove prostate regrowth	7.61	NA	NA	4.85	3.61	0.51	NA	NA	12.97	11.73	090
52640		A	Relieve bladder contracture	6.85	NA	NA	4.45	3.33	0.47	NA	NA	11.77	10.65	090
52647		A	Laser surgery of prostate	11.09	42.33	66.04	6.97	5.14	0.73	54.15	77.86	18.79	16.96	090
52648		A	Laser surgery of prostate	11.94	42.86	66.17	7.30	5.42	0.79	55.59	78.90	20.03	18.15	090
52700		A	Drainage of prostate abscess	7.35	NA	NA	5.00	3.64	0.48	NA	NA	12.83	11.47	090
53000		A	Incision of urethra	2.28	NA	NA	1.81	1.61	0.16	NA	NA	4.25	4.05	010
53010		A	Incision of urethra	4.31	NA	NA	3.83	3.14	0.24	NA	NA	8.38	7.69	090
53020		A	Incision of urethra	1.77	NA	NA	0.96	0.74	0.13	NA	NA	2.86	2.64	000
53025		A	Incision of urethra	1.13	NA	NA	0.68	0.55	0.08	NA	NA	1.89	1.76	000
53040		A	Drainage of urethra abscess	6.45	NA	NA	4.45	3.69	0.45	NA	NA	11.35	10.59	090
53060		A	Drainage of urethra abscess	2.63	2.01	2.06	1.47	1.40	0.28	4.92	4.97	4.38	4.31	010
53080		A	Drainage of urinary leakage	6.78	NA	NA	4.94	5.70	0.52	NA	NA	12.24	13.00	090
53085		A	Drainage of urinary leakage	11.00	NA	NA	4.54	6.69	0.92	NA	NA	16.46	18.60	090
53200		A	Biopsy of urethra	2.59	1.71	1.42	1.30	1.06	0.20	4.50	4.21	4.09	3.85	000
53210		A	Removal of urethra	13.54	NA	NA	7.80	6.32	0.89	NA	NA	22.23	20.75	090
53215		A	Removal of urethra	16.67	NA	NA	9.22	7.27	1.10	NA	NA	26.99	25.04	090
53220		A	Treatment of urethra lesion	7.49	NA	NA	5.04	4.04	0.49	NA	NA	13.02	12.02	090
53230		A	Removal of urethra lesion	10.26	NA	NA	6.49	5.16	0.73	NA	NA	17.48	16.15	090
53235		A	Removal of urethra lesion	10.81	NA	NA	6.96	5.42	0.72	NA	NA	18.49	16.95	090
53240		A	Surgery for urethra pouch	6.94	NA	NA	4.80	3.84	0.52	NA	NA	12.26	11.30	090
53250		A	Removal of urethra gland	6.38	NA	NA	4.72	3.65	0.49	NA	NA	11.59	10.52	090
53260		A	Treatment of urethra lesion	2.98	2.48	2.30	1.86	1.53	0.25	5.71	5.53	5.09	4.76	010
53265		A	Treatment of urethra lesion	3.12	2.98	2.78	2.02	1.57	0.24	6.34	6.14	5.38	4.93	010
53270		A	Removal of urethra gland	3.09	2.31	2.23	1.72	1.59	0.30	5.70	5.62	5.11	4.98	010

53275		A	Repair of urethra defect	4.52	NA	NA	2.79	2.39	0.32	NA	NA	7.63	7.23	010
53400		A	Revise urethra, stage 1	13.92	NA	NA	8.23	6.57	0.98	NA	NA	23.13	21.47	090
53405		A	Revise urethra, stage 2	15.45	NA	NA	8.96	6.97	1.10	NA	NA	25.51	23.52	090
53410		A	Reconstruction of urethra	17.47	NA	NA	9.84	7.75	1.16	NA	NA	28.47	26.38	090
53415		A	Reconstruction of urethra	20.49	NA	NA	11.00	8.25	1.37	NA	NA	32.86	30.11	090
53420		A	Reconstruct urethra, stage 1	14.99	NA	NA	6.51	6.34	0.96	NA	NA	22.46	22.29	090
53425		A	Reconstruct urethra, stage 2	16.89	NA	NA	9.30	7.49	1.13	NA	NA	27.32	25.51	090
53430		A	Reconstruction of urethra	17.25	NA	NA	8.73	7.43	1.15	NA	NA	27.13	25.83	090
53431		A	Reconstruct urethra/bladder	20.97	NA	NA	11.08	8.81	1.41	NA	NA	33.46	31.19	090
53440		A	Male sling procedure	15.33	NA	NA	9.31	6.81	0.96	NA	NA	25.60	23.10	090
53442		A	Remove/revise male sling	13.28	NA	NA	8.50	6.20	0.82	NA	NA	22.60	20.30	090
53444		A	Insert tandem cuff	14.00	NA	NA	8.09	6.43	0.94	NA	NA	23.03	21.37	090
53445		A	Insert uro/ves nck sphincter	15.15	NA	NA	8.86	7.53	0.99	NA	NA	25.00	23.67	090
53446		A	Remove uro sphincter	10.83	NA	NA	7.10	5.68	0.72	NA	NA	18.65	17.23	090
53447		A	Remove/replace ur sphincter	14.09	NA	NA	8.48	6.94	0.95	NA	NA	23.52	21.98	090
53448		A	Remov/replc ur sphinctr comp	23.20	NA	NA	12.52	9.91	1.50	NA	NA	37.22	34.61	090
53449		A	Repair uro sphincter	10.38	NA	NA	6.70	5.22	0.68	NA	NA	17.76	16.28	090
53450		A	Revision of urethra	6.63	NA	NA	4.81	3.67	0.43	NA	NA	11.87	10.73	090
53460		A	Revision of urethra	7.61	NA	NA	5.17	4.06	0.50	NA	NA	13.28	12.17	090
53500		A	Urethrlys, transvag w/scope	12.81	NA	NA	7.47	6.52	0.90	NA	NA	21.18	20.23	090
53502		A	Repair of urethra injury	8.12	NA	NA	5.06	4.25	0.62	NA	NA	13.80	12.99	090
53505		A	Repair of urethra injury	8.12	NA	NA	5.45	4.26	0.54	NA	NA	14.11	12.92	090
53510		A	Repair of urethra injury	10.78	NA	NA	6.78	5.57	0.74	NA	NA	18.30	17.08	090
53515		A	Repair of urethra injury	14.04	NA	NA	7.89	6.41	1.05	NA	NA	22.98	21.50	090
53520		A	Repair of urethra defect	9.30	NA	NA	6.17	4.90	0.61	NA	NA	16.08	14.81	090
53600		A	Dilate urethra stricture	1.21	1.16	1.15	0.57	0.47	0.09	2.46	2.45	1.87	1.77	000
53601		A	Dilate urethra stricture	0.98	1.38	1.30	0.53	0.41	0.07	2.43	2.35	1.58	1.46	000
53605		A	Dilate urethra stricture	1.28	NA	NA	0.52	0.44	0.09	NA	NA	1.89	1.81	000
53620		A	Dilate urethra stricture	1.62	1.72	1.92	0.84	0.65	0.11	3.45	3.65	2.57	2.38	000
53621		A	Dilate urethra stricture	1.35	1.83	2.01	0.68	0.54	0.10	3.28	3.46	2.13	1.99	000
53660		A	Dilation of urethra	0.71	1.33	1.32	0.46	0.35	0.05	2.09	2.08	1.22	1.11	000
53661		A	Dilation of urethra	0.72	1.31	1.30	0.42	0.32	0.05	2.08	2.07	1.19	1.09	000
53665		A	Dilation of urethra	0.76	NA	NA	0.27	0.26	0.06	NA	NA	1.09	1.08	000
53850		A	Prostatic microwave thermotx	9.94	49.68	82.97	5.94	4.44	0.67	60.29	93.58	16.55	15.05	090
53852		A	Prostatic rf thermotx	10.62	46.82	78.28	6.74	4.96	0.70	58.14	89.60	18.06	16.28	090
53853		A	Prostatic water thermother	5.48	29.37	48.85	4.39	3.24	0.37	35.22	54.70	10.24	9.09	090
53899		C	Urology surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
54000		A	Slitting of prepuce	1.54	2.72	2.86	1.49	1.07	0.11	4.37	4.51	3.14	2.72	010
54001		A	Slitting of prepuce	2.19	3.07	3.15	1.67	1.25	0.15	5.41	5.49	4.01	3.59	010
54015		A	Drain penis lesion	5.31	NA	NA	3.22	2.72	0.38	NA	NA	8.91	8.41	010
54050		A	Destruction, penis lesion(s)	1.24	2.05	1.76	1.35	1.11	0.08	3.37	3.08	2.67	2.43	010
54055		A	Destruction, penis lesion(s)	1.22	1.97	1.67	1.23	0.91	0.08	3.27	2.97	2.53	2.21	010
54056		A	Cryosurgery, penis lesion(s)	1.24	2.29	1.84	1.48	1.22	0.06	3.59	3.14	2.78	2.52	010
54057		A	Laser surg, penis lesion(s)	1.24	2.61	2.31	1.36	0.96	0.09	3.94	3.64	2.69	2.29	010
54060		A	Excision of penis lesion(s)	1.93	3.11	3.10	1.64	1.21	0.13	5.17	5.16	3.70	3.27	010
54065		A	Destruction, penis lesion(s)	2.42	3.22	2.78	1.94	1.41	0.13	5.77	5.33	4.49	3.96	010
54100		A	Biopsy of penis	1.90	3.30	2.93	1.34	0.95	0.10	5.30	4.93	3.34	2.95	000
54105		A	Biopsy of penis	3.49	4.03	4.22	2.47	2.07	0.25	7.77	7.96	6.21	5.81	010
54110		A	Treatment of penis lesion	10.74	NA	NA	6.58	5.21	0.72	NA	NA	18.03	16.67	090
54111		A	Treat penis lesion, graft	14.24	NA	NA	8.13	6.35	0.96	NA	NA	23.33	21.55	090
54112		A	Treat penis lesion, graft	16.77	NA	NA	9.42	7.45	1.11	NA	NA	27.30	25.33	090
54115		A	Treatment of penis lesion	6.77	5.87	4.75	5.03	3.85	0.43	13.07	11.95	12.23	11.05	090
54120		A	Partial removal of penis	10.83	NA	NA	6.81	5.21	0.68	NA	NA	18.32	16.72	090
54125		A	Removal of penis	14.38	NA	NA	8.25	6.43	0.95	NA	NA	23.58	21.76	090
54130		A	Remove penis & nodes	21.59	NA	NA	11.40	8.98	1.52	NA	NA	34.51	32.09	090
54135		A	Remove penis & nodes	27.92	NA	NA	14.31	11.20	1.87	NA	NA	44.10	40.99	090
54150		A	Circumcision	1.81	2.56	3.90	0.57	0.67	0.16	4.53	5.87	2.54	2.64	000
54152		A	Circumcision	2.31	NA	NA	1.72	1.33	0.19	NA	NA	4.22	3.83	010
54160		A	Circumcision	2.48	3.69	4.03	1.45	1.18	0.19	6.36	6.70	4.12	3.85	010
54161		A	Circumcision	3.27	NA	NA	2.22	1.73	0.23	NA	NA	5.72	5.23	010
54162		A	Lysis penil circumic lesion	3.25	4.02	4.49	2.27	1.65	0.21	7.48	7.95	5.73	5.11	010
54163		A	Repair of circumcision	3.25	NA	NA	2.89	2.22	0.21	NA	NA	6.35	5.68	010
54164		A	Frenulotomy of penis	2.75	NA	NA	2.65	2.04	0.18	NA	NA	5.58	4.97	010
54200		A	Treatment of penis lesion	1.06	2.03	1.85	1.31	1.06	0.08	3.17	2.99	2.45	2.20	010
54205		A	Treatment of penis lesion	8.79	NA	NA	6.12	5.04	0.56	NA	NA	15.47	14.39	090
54220		A	Treatment of penis lesion	2.42	3.35	3.72	1.37	1.06	0.17	5.94	6.31	3.96	3.65	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
54230		A	Prepare penis study	1.34	1.41	1.16	0.91	0.70	0.09	2.84	2.59	2.34	2.13	000
54231		A	Dynamic cavernosometry	2.04	1.87	1.50	1.18	0.95	0.16	4.07	3.70	3.38	3.15	000
54235		A	Penile injection	1.19	1.40	1.07	0.90	0.66	0.08	2.67	2.34	2.17	1.93	000
54240		A	Penis study	1.31	1.55	1.16	1.55	1.16	0.17	3.03	2.64	3.03	2.64	000
54240	26	A	Penis study	1.31	0.50	0.45	0.50	0.45	0.11	1.92	1.87	1.92	1.87	000
54240	TC	A	Penis study	0.00	1.05	0.71	1.05	0.71	0.06	1.11	0.77	1.11	0.77	000
54250		A	Penis study	2.22	1.25	1.00	1.25	1.00	0.18	3.65	3.40	3.65	3.40	000
54250	26	A	Penis study	2.22	0.88	0.75	0.88	0.75	0.16	3.26	3.13	3.26	3.13	000
54250	TC	A	Penis study	0.00	0.37	0.24	0.37	0.24	0.02	0.39	0.26	0.39	0.26	000
54300		A	Revision of penis	11.02	NA	NA	6.80	5.87	0.76	NA	NA	18.58	17.65	090
54304		A	Revision of penis	13.10	NA	NA	7.89	6.71	0.88	NA	NA	21.87	20.69	090
54308		A	Reconstruction of urethra	12.44	NA	NA	7.58	6.36	0.84	NA	NA	20.86	19.64	090
54312		A	Reconstruction of urethra	14.30	NA	NA	8.58	7.38	1.24	NA	NA	24.12	22.92	090
54316		A	Reconstruction of urethra	17.84	NA	NA	10.07	8.47	1.21	NA	NA	29.12	27.52	090
54318		A	Reconstruction of urethra	12.22	NA	NA	6.25	5.90	1.39	NA	NA	19.86	19.51	090
54322		A	Reconstruction of urethra	13.80	NA	NA	7.94	6.82	0.92	NA	NA	22.66	21.54	090
54324		A	Reconstruction of urethra	17.34	NA	NA	9.83	8.42	1.14	NA	NA	28.31	26.90	090
54326		A	Reconstruction of urethra	16.81	NA	NA	9.65	8.24	1.11	NA	NA	27.57	26.16	090
54328		A	Revise penis/urethra	16.68	NA	NA	9.73	7.86	0.98	NA	NA	27.39	25.52	090
54332		A	Revise penis/urethra	18.16	NA	NA	10.20	8.34	1.21	NA	NA	29.57	27.71	090
54336		A	Revise penis/urethra	21.37	NA	NA	11.88	10.68	2.20	NA	NA	35.45	34.25	090
54340		A	Secondary urethral surgery	9.53	NA	NA	6.43	5.38	0.63	NA	NA	16.58	15.54	090
54344		A	Secondary urethral surgery	16.85	NA	NA	9.79	8.25	1.54	NA	NA	28.18	26.64	090
54348		A	Secondary urethral surgery	18.11	NA	NA	6.40	7.86	1.23	NA	NA	25.74	27.20	090
54352		A	Reconstruct urethra/penis	25.88	NA	NA	13.72	11.81	2.24	NA	NA	41.84	39.93	090
54360		A	Penis plastic surgery	12.60	NA	NA	7.54	6.40	0.84	NA	NA	20.98	19.84	090
54380		A	Repair penis	13.97	NA	NA	5.59	6.35	0.93	NA	NA	20.49	21.25	090
54385		A	Repair penis	16.31	NA	NA	8.37	8.28	0.86	NA	NA	25.54	25.45	090
54390		A	Repair penis and bladder	22.52	NA	NA	7.49	8.92	1.54	NA	NA	31.55	32.98	090
54400		A	Insert semi-rigid prosthesis	9.04	NA	NA	5.80	4.71	0.64	NA	NA	15.48	14.39	090
54401		A	Insert self-contd prosthesis	10.26	NA	NA	8.26	6.36	0.73	NA	NA	19.25	17.35	090
54405		A	Insert multi-comp penis pros	14.34	NA	NA	8.22	6.49	0.95	NA	NA	23.51	21.78	090
54406		A	Remove muti-comp penis pros	12.70	NA	NA	7.70	5.98	0.86	NA	NA	21.26	19.54	090
54408		A	Repair multi-comp penis pros	13.67	NA	NA	8.31	6.37	0.90	NA	NA	22.88	20.94	090
54410		A	Remove/replace penis prosth	16.42	NA	NA	9.45	7.32	1.10	NA	NA	26.97	24.84	090
54411		A	Remov/replc penis pros, comp	18.06	NA	NA	10.50	7.90	1.13	NA	NA	29.69	27.09	090
54415		A	Remove self-contd penis pros	8.69	NA	NA	6.06	4.66	0.58	NA	NA	15.33	13.93	090
54416		A	Remv/repl penis contain pros	11.79	NA	NA	7.96	6.01	0.77	NA	NA	20.52	18.57	090
54417		A	Remv/replc penis pros, compl	15.88	NA	NA	9.22	6.93	1.00	NA	NA	26.10	23.81	090
54420		A	Revision of penis	12.21	NA	NA	7.61	6.07	0.81	NA	NA	20.63	19.08	090
54430		A	Revision of penis	10.88	NA	NA	6.99	5.57	0.72	NA	NA	18.58	17.17	090
54435		A	Revision of penis	6.67	NA	NA	4.98	3.95	0.43	NA	NA	12.08	11.05	090
54440		C	Repair of penis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
54450		A	Preputial stretching	1.12	0.86	0.93	0.49	0.45	0.08	2.06	2.13	1.69	1.65	000
54500		A	Biopsy of testis	1.31	NA	NA	0.80	0.62	0.10	NA	NA	2.21	2.03	000
54505		A	Biopsy of testis	3.45	NA	NA	2.41	2.04	0.27	NA	NA	6.13	5.76	010
54512		A	Excise lesion testis	9.19	NA	NA	5.72	4.52	0.67	NA	NA	15.58	14.38	090
54520		A	Removal of testis	5.22	NA	NA	3.76	3.03	0.50	NA	NA	9.48	8.75	090
54522		A	Orchiectomy, partial	10.11	NA	NA	5.80	5.10	0.89	NA	NA	16.80	16.10	090
54530		A	Removal of testis	9.26	NA	NA	6.13	4.71	0.66	NA	NA	16.05	14.63	090
54535		A	Extensive testis surgery	13.01	NA	NA	7.59	6.05	0.95	NA	NA	21.55	20.01	090
54550		A	Exploration for testis	8.27	NA	NA	5.38	4.20	0.59	NA	NA	14.24	13.06	090
54560		A	Exploration for testis	11.92	NA	NA	6.32	5.44	0.90	NA	NA	19.14	18.26	090
54600		A	Reduce testis torsion	7.50	NA	NA	5.18	3.95	0.51	NA	NA	13.19	11.96	090
54620		A	Suspension of testis	5.14	NA	NA	3.28	2.64	0.37	NA	NA	8.79	8.15	010
54640		A	Suspension of testis	7.53	NA	NA	5.50	4.17	0.62	NA	NA	13.65	12.32	090

54650		A	Orchiopexy (Fowler-Stephens)	12.18	NA	NA	7.72	5.97	1.16	NA	NA	21.06	19.31	090
54660		A	Revision of testis	5.60	NA	NA	4.44	3.35	0.44	NA	NA	10.48	9.39	090
54670		A	Repair testis injury	6.52	NA	NA	4.84	3.86	0.47	NA	NA	11.83	10.85	090
54680		A	Relocation of testis(es)	13.86	NA	NA	7.78	6.55	1.16	NA	NA	22.80	21.57	090
54690		A	Laparoscopy, orchiectomy	11.56	NA	NA	6.20	5.25	1.02	NA	NA	18.78	17.83	090
54692		A	Laparoscopy, orchiopexy	13.60	NA	NA	7.66	5.98	1.30	NA	NA	22.56	20.88	090
54699		C	Laparoscope proc, testis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
54700		A	Drainage of scrotum	3.42	NA	NA	2.40	2.05	0.28	NA	NA	6.10	5.75	010
54800		A	Biopsy of epididymis	2.33	NA	NA	1.00	0.93	0.23	NA	NA	3.56	3.49	000
54820		A	Exploration of epididymis	5.63	NA	NA	4.32	3.28	0.40	NA	NA	10.35	9.31	090
54830		A	Remove epididymis lesion	5.87	NA	NA	4.48	3.38	0.41	NA	NA	10.76	9.66	090
54840		A	Remove epididymis lesion	5.19	NA	NA	3.84	3.04	0.37	NA	NA	9.40	8.60	090
54860		A	Removal of epididymis	6.81	NA	NA	4.92	3.71	0.45	NA	NA	12.18	10.97	090
54861		A	Removal of epididymis	9.52	NA	NA	6.32	4.81	0.63	NA	NA	16.47	14.96	090
54900		A	Fusion of spermatic ducts	13.99	NA	NA	5.29	5.66	0.93	NA	NA	20.21	20.58	090
54901		A	Fusion of spermatic ducts	18.85	NA	NA	6.64	7.29	1.82	NA	NA	27.31	27.96	090
55000		A	Drainage of hydrocele	1.43	1.86	2.01	0.92	0.72	0.11	3.40	3.55	2.46	2.26	000
55040		A	Removal of hydrocele	5.35	NA	NA	3.98	3.16	0.43	NA	NA	9.76	8.94	090
55041		A	Removal of hydroceles	8.36	NA	NA	5.74	4.41	0.60	NA	NA	14.70	13.37	090
55060		A	Repair of hydrocele	6.01	NA	NA	4.47	3.42	0.46	NA	NA	10.94	9.89	090
55100		A	Drainage of scrotum abscess	2.38	3.52	3.63	2.12	1.70	0.17	6.07	6.18	4.67	4.25	010
55110		A	Explore scrotum	6.19	NA	NA	4.52	3.47	0.43	NA	NA	11.14	10.09	090
55120		A	Removal of scrotum lesion	5.58	NA	NA	4.30	3.28	0.39	NA	NA	10.27	9.25	090
55150		A	Removal of scrotum	7.96	NA	NA	5.49	4.25	0.56	NA	NA	14.01	12.77	090
55175		A	Revision of scrotum	5.73	NA	NA	4.38	3.35	0.37	NA	NA	10.48	9.45	090
55180		A	Revision of scrotum	11.57	NA	NA	7.32	5.84	0.90	NA	NA	19.79	18.31	090
55200		A	Incision of sperm duct	4.48	8.27	11.30	3.38	2.62	0.33	13.08	16.11	8.19	7.43	090
55250		A	Removal of sperm duct(s)	3.29	7.74	10.54	3.00	2.41	0.25	11.28	14.08	6.54	5.95	090
55300		A	Prepare, sperm duct x-ray	3.50	NA	NA	1.63	1.39	0.25	NA	NA	5.38	5.14	000
55400		A	Repair of sperm duct	8.48	NA	NA	5.50	4.41	0.64	NA	NA	14.62	13.53	090
55450		A	Ligation of sperm duct	4.36	6.00	6.74	2.86	2.11	0.29	10.65	11.39	7.51	6.76	010
55500		A	Removal of hydrocele	6.08	NA	NA	4.26	3.38	0.55	NA	NA	10.89	10.01	090
55520		A	Removal of sperm cord lesion	6.52	NA	NA	3.86	3.40	0.75	NA	NA	11.13	10.67	090
55530		A	Revise spermatic cord veins	5.65	NA	NA	4.16	3.29	0.45	NA	NA	10.26	9.39	090
55535		A	Revise spermatic cord veins	7.05	NA	NA	4.88	3.76	0.47	NA	NA	12.40	11.28	090
55540		A	Revise hernia & sperm veins	8.16	NA	NA	4.32	3.92	0.94	NA	NA	13.42	13.02	090
55550		A	Laparo ligate spermatic vein	7.06	NA	NA	4.58	3.61	0.57	NA	NA	12.21	11.24	090
55559		C	Laparo proc, spermatic cord	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
55600		A	Incise sperm duct pouch	6.87	NA	NA	4.95	3.73	0.62	NA	NA	12.44	11.22	090
55605		A	Incise sperm duct pouch	8.58	NA	NA	4.94	4.45	0.64	NA	NA	14.16	13.67	090
55650		A	Remove sperm duct pouch	12.47	NA	NA	7.31	5.77	0.92	NA	NA	20.70	19.16	090
55680		A	Remove sperm pouch lesion	5.56	NA	NA	3.90	3.20	0.47	NA	NA	9.93	9.23	090
55700		A	Biopsy of prostate	2.58	3.75	4.08	1.34	0.82	0.11	6.44	6.77	4.03	3.51	000
55705		A	Biopsy of prostate	4.56	NA	NA	2.89	2.44	0.32	NA	NA	7.77	7.32	010
55720		A	Drainage of prostate abscess	7.63	NA	NA	4.84	4.07	0.95	NA	NA	13.42	12.65	090
55725		A	Drainage of prostate abscess	9.84	NA	NA	6.41	4.96	0.70	NA	NA	16.95	15.50	090
55801		A	Removal of prostate	19.55	NA	NA	10.68	8.37	1.34	NA	NA	31.57	29.26	090
55810		A	Extensive prostate surgery	24.08	NA	NA	12.49	9.81	1.60	NA	NA	38.17	35.49	090
55812		A	Extensive prostate surgery	29.61	NA	NA	15.07	11.99	2.04	NA	NA	46.72	43.64	090
55815		A	Extensive prostate surgery	32.67	NA	NA	16.50	13.03	2.16	NA	NA	51.33	47.86	090
55821		A	Removal of prostate	15.58	NA	NA	8.79	6.84	1.01	NA	NA	25.38	23.43	090
55831		A	Removal of prostate	17.01	NA	NA	9.37	7.32	1.10	NA	NA	27.48	25.43	090
55840		A	Extensive prostate surgery	24.38	NA	NA	12.82	10.15	1.61	NA	NA	38.81	36.14	090
55842		A	Extensive prostate surgery	26.24	NA	NA	13.67	10.78	1.72	NA	NA	41.63	38.74	090
55845		A	Extensive prostate surgery	30.46	NA	NA	14.90	11.91	2.02	NA	NA	47.38	44.39	090
55859		A	Percut/needle insert, pros	13.25	NA	NA	7.90	6.35	0.89	NA	NA	22.04	20.49	090
55860		A	Surgical exposure, prostate	15.66	NA	NA	8.73	6.98	1.02	NA	NA	25.41	23.66	090
55862		A	Extensive prostate surgery	19.83	NA	NA	10.84	8.58	1.49	NA	NA	32.16	29.90	090
55865		A	Extensive prostate surgery	24.32	NA	NA	12.97	10.17	1.63	NA	NA	38.92	36.12	090
55866		A	Laparo radical prostatectomy	32.17	NA	NA	16.15	12.81	2.16	NA	NA	50.48	47.14	090
55870		A	Electroejaculation	2.58	2.47	1.77	1.44	1.17	0.16	5.21	4.51	4.18	3.91	000
55873		A	Cryoablate prostate	20.19	NA	NA	11.44	9.56	1.38	NA	NA	33.01	31.13	090
55899		C	Genital surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
56405		A	I & D of vulva/perineum	1.44	1.18	1.29	1.16	1.15	0.17	2.79	2.90	2.77	2.76	010
56420		A	Drainage of gland abscess	1.39	1.52	2.08	0.78	0.98	0.16	3.07	3.63	2.33	2.53	010
56440		A	Surgery for vulva lesion	2.84	NA	NA	1.54	1.67	0.34	NA	NA	4.72	4.85	010

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
56441		A	Lysis of labial lesion(s)	1.97	1.71	1.79	1.56	1.45	0.20	3.88	3.96	3.73	3.62	010
56501		A	Destroy, vulva lesions, sim	1.53	1.64	1.75	1.22	1.24	0.18	3.35	3.46	2.93	2.95	010
56515		A	Destroy vulva lesion/s compl	3.01	2.37	2.50	1.73	1.79	0.33	5.71	5.84	5.07	5.13	010
56605		A	Biopsy of vulva/perineum	1.10	0.91	1.03	0.35	0.43	0.13	2.14	2.26	1.58	1.66	000
56606		A	Biopsy of vulva/perineum	0.55	0.36	0.46	0.16	0.21	0.07	0.98	1.08	0.78	0.83	ZZZ
56620		A	Partial removal of vulva	8.39	NA	NA	4.41	4.70	0.90	NA	NA	13.70	13.99	090
56625		A	Complete removal of vulva	9.50	NA	NA	4.77	5.18	1.02	NA	NA	15.28	15.70	090
56630		A	Extensive vulva surgery	14.62	NA	NA	6.28	6.69	1.49	NA	NA	22.39	22.80	090
56631		A	Extensive vulva surgery	18.75	NA	NA	7.74	8.54	1.95	NA	NA	28.44	29.24	090
56632		A	Extensive vulva surgery	21.51	NA	NA	9.30	9.46	2.38	NA	NA	33.19	33.35	090
56633		A	Extensive vulva surgery	19.41	NA	NA	7.79	8.39	1.97	NA	NA	29.17	29.77	090
56634		A	Extensive vulva surgery	20.42	NA	NA	8.18	9.11	2.16	NA	NA	30.76	31.69	090
56637		A	Extensive vulva surgery	24.51	NA	NA	9.20	10.60	2.60	NA	NA	36.31	37.71	090
56640		A	Extensive vulva surgery	24.60	NA	NA	9.07	10.23	2.88	NA	NA	36.55	37.71	090
56700		A	Partial removal of hymen	2.77	NA	NA	1.77	1.82	0.30	NA	NA	4.84	4.89	010
56720		A	Incision of hymen	0.68	NA	NA	0.52	0.51	0.08	NA	NA	1.28	1.27	000
56740		A	Remove vagina gland lesion	4.81	NA	NA	2.32	2.50	0.56	NA	NA	7.69	7.87	010
56800		A	Repair of vagina	3.88	NA	NA	2.00	2.14	0.44	NA	NA	6.32	6.46	010
56805		A	Repair clitoris	19.69	NA	NA	9.28	9.38	2.14	NA	NA	31.11	31.21	090
56810		A	Repair of perineum	4.24	NA	NA	2.06	2.23	0.49	NA	NA	6.79	6.96	010
56820		A	Exam of vulva w/scope	1.50	1.20	1.28	0.53	0.62	0.18	2.88	2.96	2.21	2.30	000
56821		A	Exam/biopsy of vulva w/scope	2.05	1.55	1.70	0.69	0.86	0.25	3.85	4.00	2.99	3.16	000
57000		A	Exploration of vagina	2.97	NA	NA	1.72	1.72	0.31	NA	NA	5.00	5.00	010
57010		A	Drainage of pelvic abscess	6.70	NA	NA	3.85	3.81	0.71	NA	NA	11.26	11.22	090
57020		A	Drainage of pelvic fluid	1.50	0.76	0.90	0.45	0.56	0.18	2.44	2.58	2.13	2.24	000
57022		A	I & d vaginal hematoma, pp	2.68	NA	NA	1.44	1.48	0.26	NA	NA	4.38	4.42	010
57023		A	I & d vag hematoma, non-ob	5.11	NA	NA	2.40	2.53	0.58	NA	NA	8.09	8.22	010
57061		A	Destroy vag lesions, simple	1.25	1.52	1.62	1.12	1.12	0.15	2.92	3.02	2.52	2.52	010
57065		A	Destroy vag lesions, complex	2.61	2.03	2.23	1.49	1.63	0.31	4.95	5.15	4.41	4.55	010
57100		A	Biopsy of vagina	1.20	0.93	1.04	0.37	0.45	0.14	2.27	2.38	1.71	1.79	000
57105		A	Biopsy of vagina	1.69	1.59	1.74	1.34	1.40	0.20	3.48	3.63	3.23	3.29	010
57106		A	Remove vagina wall, partial	7.29	NA	NA	4.26	4.20	0.73	NA	NA	12.28	12.22	090
57107		A	Remove vagina tissue, part	24.37	NA	NA	9.11	10.12	2.71	NA	NA	36.19	37.20	090
57109		A	Vaginectomy partial w/nodes	28.19	NA	NA	10.34	11.02	3.21	NA	NA	41.74	42.42	090
57110		A	Remove vagina wall, complete	15.34	NA	NA	6.27	7.02	1.73	NA	NA	23.34	24.09	090
57111		A	Remove vagina tissue, compl	28.19	NA	NA	10.26	12.02	3.17	NA	NA	41.62	43.38	090
57112		A	Vaginectomy w/nodes, compl	30.31	NA	NA	11.58	11.96	3.07	NA	NA	44.96	45.34	090
57120		A	Closure of vagina	8.14	NA	NA	4.21	4.50	0.89	NA	NA	13.24	13.53	090
57130		A	Remove vagina lesion	2.43	1.99	2.11	1.49	1.53	0.29	4.71	4.83	4.21	4.25	010
57135		A	Remove vagina lesion	2.67	2.03	2.20	1.54	1.62	0.31	5.01	5.18	4.52	4.60	010
57150		A	Treat vagina infection	0.55	0.58	0.97	0.16	0.20	0.07	1.20	1.59	0.78	0.82	000
57155		A	Insert uteri tandems/ovoids	6.75	NA	NA	3.11	4.20	0.43	NA	NA	10.29	11.38	090
57160		A	Insert pessary/other device	0.89	1.05	1.02	0.26	0.32	0.10	2.04	2.01	1.25	1.31	000
57170		A	Fitting of diaphragm/cap	0.91	0.57	1.25	0.25	0.31	0.11	1.59	2.27	1.27	1.33	000
57180		A	Treat vaginal bleeding	1.58	1.85	2.08	0.92	1.18	0.19	3.62	3.85	2.69	2.95	010
57200		A	Repair of vagina	4.31	NA	NA	2.95	2.91	0.46	NA	NA	7.72	7.68	090
57210		A	Repair vagina/perineum	5.60	NA	NA	3.28	3.39	0.62	NA	NA	9.50	9.61	090
57220		A	Revision of urethra	4.74	NA	NA	3.03	3.08	0.51	NA	NA	8.28	8.33	090
57230		A	Repair of urethral lesion	6.19	NA	NA	3.78	3.50	0.54	NA	NA	10.51	10.23	090
57240		A	Repair bladder & vagina	11.38	NA	NA	5.47	4.23	0.62	NA	NA	17.47	16.23	090
57250		A	Repair rectum & vagina	11.38	NA	NA	5.04	3.94	0.65	NA	NA	17.07	15.97	090
57260		A	Repair of vagina	14.32	NA	NA	5.86	5.09	0.97	NA	NA	21.15	20.38	090
57265		A	Extensive repair of vagina	15.82	NA	NA	6.33	6.11	1.32	NA	NA	23.47	23.25	090
57267		A	Insert mesh/pelvic flr addon	4.88	NA	NA	1.52	1.86	0.64	NA	NA	7.04	7.38	ZZZ
57268		A	Repair of bowel bulge	7.43	NA	NA	4.31	4.22	0.79	NA	NA	12.53	12.44	090
57270		A	Repair of bowel pouch	13.53	NA	NA	5.71	6.11	1.42	NA	NA	20.66	21.06	090

57280		A	Suspension of vagina	16.58	NA	NA	7.02	7.28	1.67	NA	NA	25.27	25.53	090
57282		A	Colpopexy, extraperitoneal	7.79	NA	NA	4.43	4.48	1.02	NA	NA	13.24	13.29	090
57283		A	Colpopexy, intraperitoneal	11.54	NA	NA	5.24	5.74	1.02	NA	NA	17.80	18.30	090
57284		A	Repair paravaginal defect	13.43	NA	NA	6.77	7.05	1.41	NA	NA	21.61	21.89	090
57287		A	Revise/remove sling repair	11.43	NA	NA	6.47	5.72	0.90	NA	NA	18.80	18.05	090
57288		A	Repair bladder defect	13.95	NA	NA	7.09	6.20	1.12	NA	NA	22.16	21.27	090
57289		A	Repair bladder & vagina	12.63	NA	NA	6.23	6.08	1.21	NA	NA	20.07	19.92	090
57291		A	Construction of vagina	8.50	NA	NA	4.39	4.79	0.93	NA	NA	13.82	14.22	090
57292		A	Construct vagina with graft	13.87	NA	NA	5.99	6.70	1.58	NA	NA	21.44	22.15	090
57295		A	Change vaginal graft	7.70	NA	NA	3.77	4.27	0.91	NA	NA	12.38	12.88	090
57300		A	Repair rectum-vagina fistula	8.53	NA	NA	4.48	4.33	0.87	NA	NA	13.88	13.73	090
57305		A	Repair rectum-vagina fistula	15.18	NA	NA	6.20	6.25	1.72	NA	NA	23.10	23.15	090
57307		A	Fistula repair & colostomy	16.96	NA	NA	7.04	7.00	2.01	NA	NA	26.01	25.97	090
57308		A	Fistula repair, transperine	10.42	NA	NA	4.88	5.04	1.14	NA	NA	16.44	16.60	090
57310		A	Repair urethrovaginal lesion	7.51	NA	NA	5.05	4.14	0.54	NA	NA	13.10	12.19	090
57311		A	Repair urethrovaginal lesion	8.77	NA	NA	5.16	4.37	0.65	NA	NA	14.58	13.79	090
57320		A	Repair bladder-vagina lesion	8.74	NA	NA	5.34	4.61	0.69	NA	NA	14.77	14.04	090
57330		A	Repair bladder-vagina lesion	13.07	NA	NA	7.18	6.07	1.06	NA	NA	21.31	20.20	090
57335		A	Repair vagina	19.81	NA	NA	8.80	8.97	1.91	NA	NA	30.52	30.69	090
57400		A	Dilation of vagina	2.27	NA	NA	0.99	1.08	0.26	NA	NA	3.52	3.61	000
57410		A	Pelvic examination	1.75	NA	NA	0.92	0.90	0.18	NA	NA	2.85	2.83	000
57415		A	Remove vaginal foreign body	2.42	NA	NA	1.51	1.44	0.24	NA	NA	4.17	4.10	010
57420		A	Exam of vagina w/scope	1.60	1.24	1.32	0.57	0.65	0.19	3.03	3.11	2.36	2.44	000
57421		A	Exam/biopsy of vag w/scope	2.20	1.60	1.78	0.73	0.90	0.27	4.07	4.25	3.20	3.37	000
57425		A	Laparoscopy, surg, colpopexy	16.89	NA	NA	7.00	6.72	1.75	NA	NA	25.64	25.36	090
57452		A	Exam of cervix w/scope	1.50	1.19	1.26	0.75	0.76	0.18	2.87	2.94	2.43	2.44	000
57454		A	Bx/curett of cervix w/scope	2.33	1.41	1.58	0.97	1.11	0.28	4.02	4.19	3.58	3.72	000
57455		A	Biopsy of cervix w/scope	1.99	1.51	1.67	0.67	0.82	0.24	3.74	3.90	2.90	3.05	000
57456		A	Endocerv curettage w/scope	1.85	1.47	1.61	0.63	0.77	0.22	3.54	3.68	2.70	2.84	000
57460		A	Bx of cervix w/scope, leep	2.83	4.33	5.46	1.11	1.31	0.34	7.50	8.63	4.28	4.48	000
57461		A	Conz of cervix w/scope, leep	3.43	4.63	5.73	1.08	1.37	0.41	8.47	9.57	4.92	5.21	000
57500		A	Biopsy of cervix	1.20	2.03	2.41	0.65	0.64	0.12	3.35	3.73	1.97	1.96	000
57505		A	Endocervical curettage	1.14	1.32	1.43	1.07	1.09	0.14	2.60	2.71	2.35	2.37	010
57510		A	Cauterization of cervix	1.90	1.32	1.50	0.91	1.01	0.23	3.45	3.63	3.04	3.14	010
57511		A	Cryocautery of cervix	1.90	1.61	1.77	1.27	1.35	0.23	3.74	3.90	3.40	3.48	010
57513		A	Laser surgery of cervix	1.90	1.57	1.68	1.28	1.37	0.23	3.70	3.81	3.41	3.50	010
57520		A	Conization of cervix	4.03	3.39	3.80	2.52	2.78	0.49	7.91	8.32	7.04	7.30	090
57522		A	Conization of cervix	3.60	2.79	3.06	2.27	2.41	0.41	6.80	7.07	6.28	6.42	090
57530		A	Removal of cervix	5.16	NA	NA	3.12	3.32	0.58	NA	NA	8.86	9.06	090
57531		A	Removal of cervix, radical	29.71	NA	NA	10.66	12.54	3.34	NA	NA	43.71	45.59	090
57540		A	Removal of residual cervix	13.15	NA	NA	5.61	6.08	1.49	NA	NA	20.25	20.72	090
57545		A	Remove cervix/repair pelvis	13.96	NA	NA	6.23	6.56	1.52	NA	NA	21.71	22.04	090
57550		A	Removal of residual cervix	6.20	NA	NA	3.65	3.78	0.67	NA	NA	10.52	10.65	090
57555		A	Remove cervix/repair vagina	9.80	NA	NA	4.80	5.01	1.09	NA	NA	15.69	15.90	090
57556		A	Remove cervix, repair bowel	9.22	NA	NA	4.68	4.81	0.92	NA	NA	14.82	14.95	090
57700		A	Revision of cervix	4.17	NA	NA	3.31	3.15	0.41	NA	NA	7.89	7.73	090
57720		A	Revision of cervix	4.50	NA	NA	2.92	3.06	0.49	NA	NA	7.91	8.05	090
57800		A	Dilation of cervical canal	0.77	0.71	0.75	0.42	0.46	0.09	1.57	1.61	-1.28	1.32	000
57820		A	D & c of residual cervix	1.67	1.35	1.44	1.05	1.12	0.20	3.22	3.31	2.92	2.99	010
58100		A	Biopsy of uterus lining	1.53	1.14	1.28	0.59	0.69	0.18	2.85	2.99	2.30	2.40	000
58110		A	Bx done w/colposcopy add-on	0.77	0.40	0.51	0.21	0.29	0.09	1.26	1.37	1.07	1.15	ZZZ
58120		A	Dilation and curettage	3.52	2.72	2.41	1.67	1.82	0.39	6.63	6.32	5.58	5.73	010
58140		A	Myomectomy abdom method	15.65	NA	NA	6.25	6.89	1.81	NA	NA	23.71	24.35	090
58145		A	Myomectomy vag method	8.77	NA	NA	4.28	4.66	0.97	NA	NA	14.02	14.40	090
58146		A	Myomectomy abdom complex	20.20	NA	NA	7.36	8.59	2.32	NA	NA	29.88	31.11	090
58150		A	Total hysterectomy	17.17	NA	NA	6.59	7.26	1.84	NA	NA	25.60	26.27	090
58152		A	Total hysterectomy	21.68	NA	NA	8.18	9.43	2.47	NA	NA	32.33	33.58	090
58180		A	Partial hysterectomy	16.46	NA	NA	6.38	7.18	1.64	NA	NA	24.48	25.28	090
58200		A	Extensive hysterectomy	22.96	NA	NA	8.15	9.53	2.54	NA	NA	33.65	35.03	090
58210		A	Extensive hysterectomy	30.70	NA	NA	10.71	12.57	3.37	NA	NA	44.78	46.64	090
58240		A	Removal of pelvis contents	43.13	NA	NA	15.92	17.19	4.22	NA	NA	63.27	64.54	090
58260		A	Vaginal hysterectomy	13.98	NA	NA	5.83	6.48	1.57	NA	NA	21.38	22.03	090
58262		A	Vag hyst including t/o	15.77	NA	NA	6.31	7.11	1.79	NA	NA	23.87	24.67	090
58263		A	Vag hyst w/t/o & vag repair	17.06	NA	NA	6.67	7.58	1.94	NA	NA	25.67	26.58	090
58267		A	Vag hyst w/urinary repair	18.18	NA	NA	7.06	8.04	2.06	NA	NA	27.30	28.28	090
58270		A	Vag hyst w/enterocele repair	15.16	NA	NA	5.99	6.79	1.73	NA	NA	22.88	23.68	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
58275		A	Hysterectomy/revise vagina	16.85	NA	NA	6.70	7.50	1.91	NA	NA	25.46	26.26	090
58280		A	Hysterectomy/revise vagina	18.15	NA	NA	7.08	7.96	2.06	NA	NA	27.28	28.17	090
58285		A	Extensive hysterectomy	23.26	NA	NA	7.96	9.45	2.70	NA	NA	33.92	35.41	090
58290		A	Vag hyst complex	20.13	NA	NA	7.44	8.70	2.29	NA	NA	29.86	31.12	090
58291		A	Vag hyst incl t/o, complex	21.92	NA	NA	7.87	9.37	2.52	NA	NA	32.31	33.81	090
58292		A	Vag hyst t/o & repair, compl	23.21	NA	NA	8.34	9.86	2.67	NA	NA	34.22	35.74	090
58293		A	Vag hyst w/uro repair, compl	24.19	NA	NA	8.55	10.13	2.78	NA	NA	35.52	37.10	090
58294		A	Vag hyst w/enterocele, compl	21.41	NA	NA	7.22	8.97	2.39	NA	NA	31.02	32.77	090
58300		N	Insert intrauterine device	1.01	0.63	1.22	0.24	0.35	0.12	1.76	2.35	1.37	1.48	XXX
58301		A	Remove intrauterine device	1.27	1.06	1.26	0.35	0.45	0.15	2.48	2.68	1.77	1.87	000
58321		A	Artificial insemination	0.92	0.98	1.11	0.25	0.34	0.10	2.00	2.13	1.27	1.36	000
58322		A	Artificial insemination	1.10	1.05	1.16	0.31	0.39	0.13	2.28	2.39	1.54	1.62	000
58323		A	Sperm washing	0.23	0.15	0.44	0.07	0.09	0.03	0.41	0.70	0.33	0.35	000
58340		A	Catheter for hysterography	0.88	2.17	2.91	0.57	0.63	0.09	3.14	3.88	1.54	1.60	000
58345		A	Reopen fallopian tube	4.65	NA	NA	2.08	2.34	0.41	NA	NA	7.14	7.40	010
58346		A	Insert heyman uteri capsule	7.44	NA	NA	3.34	3.78	0.56	NA	NA	11.34	11.78	090
58350		A	Reopen fallopian tube	1.01	1.34	1.45	0.87	0.91	0.12	2.47	2.58	2.00	2.04	010
58353		A	Endometr ablate, thermal	3.55	23.12	32.53	1.72	1.97	0.43	27.10	36.51	5.70	5.95	010
58356		A	Endometrial cryoablation	6.36	43.78	57.02	1.86	2.48	0.82	50.96	64.20	9.04	9.66	010
58400		A	Suspension of uterus	7.03	NA	NA	3.85	3.91	0.75	NA	NA	11.63	11.69	090
58410		A	Suspension of uterus	13.66	NA	NA	5.91	6.30	1.45	NA	NA	21.02	21.41	090
58520		A	Repair of ruptured uterus	13.34	NA	NA	5.48	5.89	1.47	NA	NA	20.29	20.70	090
58540		A	Revision of uterus	15.57	NA	NA	6.25	6.78	1.78	NA	NA	23.60	24.13	090
58545		A	Laparoscopic myomectomy	15.65	NA	NA	6.03	6.89	1.77	NA	NA	23.45	24.31	090
58546		A	Laparo-myomectomy, complex	20.20	NA	NA	7.26	8.50	2.30	NA	NA	29.76	31.00	090
58550		A	Laparo-asst vag hysterectomy	14.91	NA	NA	6.20	7.02	1.72	NA	NA	22.83	23.65	090
58552		A	Laparo-vag hyst incl t/o	16.23	NA	NA	6.49	7.63	1.72	NA	NA	24.44	25.58	090
58553		A	Laparo-vag hyst, complex	20.13	NA	NA	7.24	8.49	2.30	NA	NA	29.67	30.92	090
58554		A	Laparo-vag hyst w/t/o, compl	23.13	NA	NA	8.41	9.90	2.27	NA	NA	33.81	35.30	090
58555		A	Hysteroscopy, dx, sep proc	3.33	2.76	2.33	1.25	1.48	0.40	6.49	6.06	4.98	5.21	000
58558		A	Hysteroscopy, biopsy	4.74	3.63	2.54	1.68	2.05	0.57	8.94	7.85	6.99	7.36	000
58559		A	Hysteroscopy, lysis	6.16	NA	NA	2.07	2.57	0.74	NA	NA	8.97	9.47	000
58560		A	Hysteroscopy, resect septum	6.99	NA	NA	2.31	2.89	0.84	NA	NA	10.14	10.72	000
58561		A	Hysteroscopy, remove myoma	9.99	NA	NA	3.16	4.00	1.21	NA	NA	14.36	15.20	000
58562		A	Hysteroscopy, remove fb	5.20	3.53	2.65	1.78	2.21	0.63	9.36	8.48	7.61	8.04	000
58563		A	Hysteroscopy, ablation	6.16	37.70	51.57	2.08	2.58	0.74	44.60	58.47	8.98	9.48	000
58565		A	Hysteroscopy, sterilization	7.02	34.73	45.85	3.39	3.77	1.19	42.94	54.06	11.60	11.98	090
58578		C	Laparo proc, uterus	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
58579		C	Hysteroscope procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
58600		A	Division of fallopian tube	5.84	NA	NA	2.94	3.23	0.66	NA	NA	9.44	9.73	090
58605		A	Division of fallopian tube	5.23	NA	NA	2.69	3.01	0.59	NA	NA	8.51	8.83	090
58611		A	Ligate oviduct(s) add-on	1.45	NA	NA	0.40	0.53	0.18	NA	NA	2.03	2.16	ZZZ
58615		A	Occlude fallopian tube(s)	3.89	NA	NA	2.00	2.53	0.47	NA	NA	6.36	6.89	010
58660		A	Laparoscopy, lysis	11.52	NA	NA	4.56	5.08	1.40	NA	NA	17.48	18.00	090
58661		A	Laparoscopy, remove adnexa	11.28	NA	NA	4.04	4.85	1.34	NA	NA	16.66	17.47	010
58662		A	Laparoscopy, excise lesions	12.06	NA	NA	4.83	5.54	1.43	NA	NA	18.32	19.03	090
58670		A	Laparoscopy, tubal cautery	5.84	NA	NA	2.98	3.20	0.67	NA	NA	9.49	9.71	090
58671		A	Laparoscopy, tubal block	5.84	NA	NA	2.97	3.20	0.68	NA	NA	9.49	9.72	090
58672		A	Laparoscopy, fimbrioplasty	12.86	NA	NA	4.79	5.83	1.60	NA	NA	19.25	20.29	090
58673		A	Laparoscopy, salpingostomy	13.97	NA	NA	5.23	6.24	1.69	NA	NA	20.89	21.90	090
58679		C	Laparo proc, oviduct-ovary	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
58700		A	Removal of fallopian tube	12.80	NA	NA	5.56	5.88	1.51	NA	NA	19.87	20.19	090
58720		A	Removal of ovary/tube(s)	12.04	NA	NA	5.13	5.61	1.39	NA	NA	18.56	19.04	090
58740		A	Revise fallopian tube(s)	14.75	NA	NA	6.11	6.88	1.71	NA	NA	22.57	23.34	090
58750		A	Repair oviduct	15.52	NA	NA	6.14	7.06	1.84	NA	NA	23.50	24.42	090
58752		A	Revise ovarian tube(s)	15.52	NA	NA	6.04	6.72	1.80	NA	NA	23.36	24.04	090

58760		A	Remove tubal obstruction	13.81	NA	NA	5.66	6.45	1.79	NA	NA	21.26	22.05	090
58770		A	Create new tubal opening	14.65	NA	NA	5.81	6.63	1.73	NA	NA	22.19	23.01	090
58800		A	Drainage of ovarian cyst(s)	4.51	3.20	3.53	2.68	2.85	0.43	8.14	8.47	7.62	7.79	090
58805		A	Drainage of ovarian cyst(s)	6.31	NA	NA	3.49	3.50	0.69	NA	NA	10.49	10.50	090
58820		A	Drain ovary abscess, open	4.59	NA	NA	2.89	3.19	0.52	NA	NA	8.00	8.30	090
58822		A	Drain ovary abscess, percut	11.67	NA	NA	5.18	5.20	1.16	NA	NA	18.01	18.03	090
58823		A	Drain pelvic abscess, percut	3.37	20.10	21.02	1.04	1.10	0.24	23.71	24.63	4.65	4.71	000
58825		A	Transposition, ovary(s)	11.66	NA	NA	4.98	5.59	1.32	NA	NA	17.96	18.57	090
58900		A	Biopsy of ovary(s)	6.48	NA	NA	3.49	3.55	0.69	NA	NA	10.66	10.72	090
58920		A	Partial removal of ovary(s)	11.84	NA	NA	5.24	5.49	1.43	NA	NA	18.51	18.76	090
58925		A	Removal of ovarian cyst(s)	12.29	NA	NA	5.31	5.59	1.41	NA	NA	19.01	19.29	090
58940		A	Removal of ovary(s)	8.08	NA	NA	4.07	4.09	0.91	NA	NA	13.06	13.08	090
58943		A	Removal of ovary(s)	19.38	NA	NA	7.25	8.29	2.22	NA	NA	28.85	29.89	090
58950		A	Resect ovarian malignancy	18.18	NA	NA	7.29	8.12	2.04	NA	NA	27.51	28.34	090
58951		A	Resect ovarian malignancy	24.11	NA	NA	8.61	9.98	2.63	NA	NA	35.35	36.72	090
58952		A	Resect ovarian malignancy	27.09	NA	NA	9.81	11.27	3.02	NA	NA	39.92	41.38	090
58953		A	Tah, rad dissect for debulk	33.91	NA	NA	11.63	13.81	3.83	NA	NA	49.37	51.55	090
58954		A	Tah rad debulk/lymph remove	36.91	NA	NA	12.49	14.90	4.17	NA	NA	53.57	55.98	090
58956		A	Bso, omentectomy w/tah	22.59	NA	NA	8.59	9.88	4.00	NA	NA	35.18	36.47	090
58960		A	Exploration of abdomen	15.64	NA	NA	6.29	7.09	1.79	NA	NA	23.72	24.52	090
58970		A	Retrieval of oocyte	3.52	1.83	2.19	1.26	1.43	0.43	5.78	6.14	5.21	5.38	000
58974		C	Transfer of embryo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
58976		A	Transfer of embryo	3.82	1.96	2.50	1.22	1.67	0.47	6.25	6.79	5.51	5.96	000
58999		C	Genital surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
59000		A	Amniocentesis, diagnostic	1.30	1.75	1.99	0.56	0.64	0.31	3.36	3.60	2.17	2.25	000
59001		A	Amniocentesis, therapeutic	3.00	NA	NA	1.09	1.33	0.71	NA	NA	4.80	5.04	000
59012		A	Fetal cord puncture,prenatal	3.44	NA	NA	1.16	1.45	0.82	NA	NA	5.42	5.71	000
59015		A	Chorion biopsy	2.20	1.43	1.52	0.81	0.98	0.52	4.15	4.24	3.53	3.70	000
59020		A	Fetal contract stress test	0.66	1.08	0.86	1.08	0.86	0.26	2.00	1.78	2.00	1.78	000
59020	26	A	Fetal contract stress test	0.66	0.19	0.24	0.19	0.24	0.16	1.01	1.06	1.01	1.06	000
59020	TC	A	Fetal contract stress test	0.00	0.90	0.62	0.90	0.62	0.10	1.00	0.72	1.00	0.72	000
59025		A	Fetal non-stress test	0.53	0.63	0.49	0.63	0.49	0.15	1.31	1.17	1.31	1.17	000
59025	26	A	Fetal non-stress test	0.53	0.15	0.20	0.15	0.20	0.13	0.81	0.86	0.81	0.86	000
59025	TC	A	Fetal non-stress test	0.00	0.49	0.30	0.49	0.30	0.02	0.51	0.32	0.51	0.32	000
59030		A	Fetal scalp blood sample	1.99	NA	NA	0.56	0.72	0.47	NA	NA	3.02	3.18	000
59050		A	Fetal monitor w/report	0.89	NA	NA	0.26	0.33	0.21	NA	NA	1.36	1.43	XXX
59051		A	Fetal monitor/interpret only	0.74	NA	NA	0.21	0.27	0.17	NA	NA	1.12	1.18	XXX
59070		A	Transabdom amnioinfus w/us	5.24	4.48	4.98	1.83	2.19	0.28	10.00	10.50	7.35	7.71	000
59072		A	Umbilical cord occlud w/us	8.99	NA	NA	2.88	3.06	0.16	NA	NA	12.03	12.21	000
59074		A	Fetal fluid drainage w/us	5.24	3.91	4.41	1.71	2.16	0.28	9.43	9.93	7.23	7.68	000
59076		A	Fetal shunt placement, w/us	8.99	NA	NA	2.42	2.95	0.16	NA	NA	11.57	12.10	000
59100		A	Remove uterus lesion	13.22	NA	NA	5.80	6.29	2.94	NA	NA	21.96	22.45	090
59120		A	Treat ectopic pregnancy	12.52	NA	NA	5.47	6.05	2.72	NA	NA	20.71	21.29	090
59121		A	Treat ectopic pregnancy	12.60	NA	NA	5.42	6.10	2.78	NA	NA	20.80	21.48	090
59130		A	Treat ectopic pregnancy	14.94	NA	NA	6.09	5.12	3.38	NA	NA	24.41	23.44	090
59135		A	Treat ectopic pregnancy	14.78	NA	NA	5.12	6.70	3.30	NA	NA	23.20	24.78	090
59136		A	Treat ectopic pregnancy	14.11	NA	NA	5.77	6.39	3.13	NA	NA	23.01	23.63	090
59140		A	Treat ectopic pregnancy	5.83	NA	NA	2.91	2.39	1.29	NA	NA	10.03	9.51	090
59150		A	Treat ectopic pregnancy	12.15	NA	NA	5.26	5.81	2.78	NA	NA	20.19	20.74	090
59151		A	Treat ectopic pregnancy	11.97	NA	NA	4.93	5.77	2.73	NA	NA	19.63	20.47	090
59160		A	D & c after delivery	2.71	2.00	2.97	1.19	1.90	0.64	5.35	6.32	4.54	5.25	010
59200		A	Insert cervical dilator	0.79	0.95	1.13	0.22	0.28	0.19	1.93	2.11	1.20	1.26	000
59300		A	Episiotomy or vaginal repair	2.41	2.21	2.18	1.03	0.98	0.57	5.19	5.16	4.01	3.96	000
59320		A	Revision of cervix	2.48	NA	NA	1.02	1.19	0.59	NA	NA	4.09	4.26	000
59325		A	Revision of cervix	4.06	NA	NA	1.24	1.73	0.88	NA	NA	6.18	6.67	000
59350		A	Repair of uterus	4.94	NA	NA	1.41	1.76	1.17	NA	NA	7.52	7.87	000
59400		A	Obstetrical care	26.53	NA	NA	14.36	15.08	5.48	NA	NA	46.37	47.09	MMM
59409		A	Obstetrical care	13.48	NA	NA	3.76	4.92	3.21	NA	NA	20.45	21.61	MMM
59410		A	Obstetrical care	15.26	NA	NA	4.97	5.97	3.51	NA	NA	23.74	24.74	MMM
59412		A	Antepartum manipulation	1.71	NA	NA	0.65	0.77	0.40	NA	NA	2.76	2.88	MMM
59414		A	Deliver placenta	1.61	NA	NA	0.44	0.59	0.38	NA	NA	2.43	2.58	MMM
59425		A	Antepartum care only	6.12	4.25	4.21	1.68	1.81	1.14	11.51	11.47	8.94	9.07	MMM
59426		A	Antepartum care only	10.84	7.82	7.61	2.97	3.16	1.97	20.63	20.42	15.78	15.97	MMM
59430		A	Care after delivery	2.13	1.04	1.18	0.66	0.87	0.50	3.67	3.81	3.29	3.50	MMM
59510		A	Cesarean delivery	30.05	NA	NA	16.03	16.95	6.23	NA	NA	52.31	53.23	MMM
59514		A	Cesarean delivery only	15.95	NA	NA	4.51	5.79	3.79	NA	NA	24.25	25.53	MMM

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
59515		A	Cesarean delivery	18.21	NA	NA	6.25	7.44	4.12	NA	NA	28.58	29.77	MMM
59525		A	Remove uterus after cesarean	8.53	NA	NA	2.40	3.08	1.94	NA	NA	12.87	13.55	ZZZ
59610		A	Vbac delivery	27.95	NA	NA	14.66	15.56	5.85	NA	NA	48.46	49.36	MMM
59612		A	Vbac delivery only	15.04	NA	NA	4.28	5.61	3.58	NA	NA	22.90	24.23	MMM
59614		A	Vbac care after delivery	16.57	NA	NA	5.19	6.50	3.88	NA	NA	25.64	26.95	MMM
59618		A	Attempted vbac delivery	31.48	NA	NA	16.38	17.77	6.59	NA	NA	54.45	55.84	MMM
59620		A	Attempted vbac delivery only	17.50	NA	NA	4.80	6.27	4.16	NA	NA	26.46	27.93	MMM
59622		A	Attempted vbac after care	19.64	NA	NA	6.69	8.15	4.49	NA	NA	30.82	32.28	MMM
59812		A	Treatment of miscarriage	4.37	3.12	2.69	2.38	2.50	0.95	8.44	8.01	7.70	7.82	090
59820		A	Care of miscarriage	4.64	4.10	4.34	3.49	3.54	0.95	9.69	9.93	9.08	9.13	090
59821		A	Treatment of miscarriage	4.94	3.85	4.17	3.19	3.35	1.06	9.85	10.17	9.19	9.35	090
59830		A	Treat uterus infection	6.48	NA	NA	3.47	3.85	1.44	NA	NA	11.39	11.77	090
59840		R	Abortion	3.01	2.04	2.10	1.81	2.04	0.71	5.76	5.82	5.53	5.76	010
59841		R	Abortion	5.55	3.19	3.42	2.61	2.88	1.24	9.98	10.21	9.40	9.67	010
59850		R	Abortion	5.90	NA	NA	2.66	3.10	1.28	NA	NA	9.84	10.28	090
59851		R	Abortion	5.92	NA	NA	3.33	3.64	1.28	NA	NA	10.53	10.84	090
59852		R	Abortion	8.23	NA	NA	3.84	4.74	1.80	NA	NA	13.87	14.77	090
59855		R	Abortion	6.36	NA	NA	3.00	3.41	1.45	NA	NA	10.81	11.22	090
59856		R	Abortion	7.72	NA	NA	3.85	4.01	1.78	NA	NA	13.35	13.51	090
59857		R	Abortion	9.28	NA	NA	3.17	4.33	2.01	NA	NA	14.46	15.62	090
59866		R	Abortion (mpr)	3.99	NA	NA	1.26	1.73	0.87	NA	NA	6.12	6.59	000
59870		A	Evacuate mole of uterus	6.32	NA	NA	4.31	4.44	1.42	NA	NA	12.05	12.18	090
59871		A	Remove cerclage suture	2.13	NA	NA	0.94	1.08	0.50	NA	NA	3.57	3.71	000
59897		C	Fetal invas px w/us	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
59898		C	Laparo proc, ob care/deliver	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
59899		C	Maternity care procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
60000		A	Drain thyroid/tongue cyst	1.76	2.06	1.96	1.67	1.70	0.15	3.97	3.87	3.58	3.61	010
60001		A	Aspirate/inject thyriod cyst	0.97	1.93	1.54	0.28	0.32	0.07	2.97	2.58	1.32	1.36	000
60100		A	Biopsy of thyroid	1.56	1.27	1.37	0.47	0.52	0.10	2.93	3.03	2.13	2.18	000
60200		A	Remove thyroid lesion	9.84	NA	NA	5.20	5.79	1.01	NA	NA	16.05	16.64	090
60210		A	Partial thyroid excision	11.11	NA	NA	5.04	5.48	1.23	NA	NA	17.38	17.82	090
60212		A	Partial thyroid excision	16.26	NA	NA	6.55	7.39	1.94	NA	NA	24.75	25.59	090
60220		A	Partial removal of thyroid	12.25	NA	NA	5.37	5.95	1.32	NA	NA	18.94	19.52	090
60225		A	Partial removal of thyroid	14.59	NA	NA	6.65	7.21	1.64	NA	NA	22.88	23.44	090
60240		A	Removal of thyroid	16.16	NA	NA	6.14	7.22	1.85	NA	NA	24.15	25.23	090
60252		A	Removal of thyroid	21.82	NA	NA	8.38	9.66	2.29	NA	NA	32.49	33.77	090
60254		A	Extensive thyroid surgery	28.23	NA	NA	10.28	13.18	2.60	NA	NA	41.11	44.01	090
60260		A	Repeat thyroid surgery	18.14	NA	NA	6.96	8.22	1.93	NA	NA	27.03	28.29	090
60270		A	Removal of thyroid	23.01	NA	NA	8.90	10.06	2.32	NA	NA	34.23	35.39	090
60271		A	Removal of thyroid	17.50	NA	NA	6.77	8.13	1.74	NA	NA	26.01	27.37	090
60280		A	Remove thyroid duct lesion	5.98	NA	NA	4.07	4.51	0.54	NA	NA	10.59	11.03	090
60281		A	Remove thyroid duct lesion	8.64	NA	NA	4.63	5.53	0.73	NA	NA	14.00	14.90	090
60500		A	Explore parathyroid glands	16.63	NA	NA	6.74	7.24	2.00	NA	NA	25.37	25.87	090
60502		A	Re-explore parathyroids	20.92	NA	NA	8.47	9.13	2.53	NA	NA	31.92	32.58	090
60505		A	Explore parathyroid glands	22.81	NA	NA	9.23	10.50	2.64	NA	NA	34.68	35.95	090
60512		A	Autotransplant parathyroid	4.44	NA	NA	1.18	1.51	0.53	NA	NA	6.15	6.48	ZZZ
60520		A	Removal of thymus gland	17.03	NA	NA	6.97	7.96	2.19	NA	NA	26.19	27.18	090
60521		A	Removal of thymus gland	19.09	NA	NA	8.31	9.23	2.81	NA	NA	30.21	31.13	090
60522		A	Removal of thymus gland	23.31	NA	NA	9.80	10.90	3.26	NA	NA	36.37	37.47	090
60540		A	Explore adrenal gland	17.84	NA	NA	8.14	7.72	1.74	NA	NA	27.72	27.30	090
60545		A	Explore adrenal gland	20.75	NA	NA	8.92	8.63	2.07	NA	NA	31.74	31.45	090
60600		A	Remove carotid body lesion	24.95	NA	NA	8.78	10.42	2.19	NA	NA	35.92	37.56	090
60605		A	Remove carotid body lesion	31.82	NA	NA	12.29	12.26	2.49	NA	NA	46.60	46.57	090
60650		A	Laparoscopy adrenalectomy	20.59	NA	NA	8.20	8.04	2.28	NA	NA	31.07	30.91	090
60659		C	Laparo proc, endocrine	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
60699		C	Endocrine surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY

61000		A	Remove cranial cavity fluid	1.58	NA	NA	1.23	1.02	0.13	NA	NA	2.94	2.73	000
61001		A	Remove cranial cavity fluid	1.49	NA	NA	1.20	1.10	0.16	NA	NA	2.85	2.75	000
61020		A	Remove brain cavity fluid	1.51	NA	NA	1.58	1.40	0.34	NA	NA	3.43	3.25	000
61026		A	Injection into brain canal	1.69	NA	NA	1.49	1.42	0.33	NA	NA	3.51	3.44	000
61050		A	Remove brain canal fluid	1.51	NA	NA	1.13	1.24	0.11	NA	NA	2.75	2.86	000
61055		A	Injection into brain canal	2.10	NA	NA	1.29	1.39	0.17	NA	NA	3.56	3.66	000
61070		A	Brain canal shunt procedure	0.89	NA	NA	1.17	1.05	0.17	NA	NA	2.23	2.11	000
61105		A	Twist drill hole	5.38	NA	NA	4.89	4.17	1.32	NA	NA	11.59	10.87	090
61107		A	Drill skull for implantation	4.99	NA	NA	1.85	2.36	1.29	NA	NA	8.13	8.64	000
61108		A	Drill skull for drainage	11.46	NA	NA	8.43	7.46	2.63	NA	NA	22.52	21.55	090
61120		A	Burr hole for puncture	9.49	NA	NA	6.69	6.17	2.09	NA	NA	18.27	17.75	090
61140		A	Pierce skull for biopsy	17.05	NA	NA	10.39	10.01	4.11	NA	NA	31.55	31.17	090
61150		A	Pierce skull for drainage	18.76	NA	NA	10.73	10.46	4.31	NA	NA	33.80	33.53	090
61151		A	Pierce skull for drainage	13.38	NA	NA	8.49	7.98	3.00	NA	NA	24.87	24.36	090
61154		A	Pierce skull & remove clot	16.86	NA	NA	10.76	9.80	4.20	NA	NA	31.82	30.86	090
61156		A	Pierce skull for drainage	17.34	NA	NA	9.88	9.84	4.22	NA	NA	31.44	31.40	090
61210		A	Pierce skull, implant device	5.83	NA	NA	2.18	2.73	1.50	NA	NA	9.51	10.06	000
61215		A	Insert brain-fluid device	5.74	NA	NA	5.44	4.36	1.26	NA	NA	12.44	11.36	090
61250		A	Pierce skull & explore	11.38	NA	NA	7.49	7.01	2.76	NA	NA	21.63	21.15	090
61253		A	Pierce skull & explore	13.38	NA	NA	7.80	7.74	2.61	NA	NA	23.79	23.73	090
61304		A	Open skull for exploration	23.27	NA	NA	12.61	12.78	5.61	NA	NA	41.49	41.66	090
61305		A	Open skull for exploration	28.46	NA	NA	15.07	15.25	6.07	NA	NA	49.60	49.78	090
61312		A	Open skull for drainage	30.03	NA	NA	15.34	15.12	6.34	NA	NA	51.71	51.49	090
61313		A	Open skull for drainage	27.88	NA	NA	15.48	14.97	6.43	NA	NA	49.79	49.28	090
61314		A	Open skull for drainage	25.72	NA	NA	14.22	13.33	6.26	NA	NA	46.20	45.31	090
61315		A	Open skull for drainage	29.47	NA	NA	15.56	15.90	7.14	NA	NA	52.17	52.51	090
61316		A	Implt cran bone flap to abdo	1.39	NA	NA	0.52	0.58	0.35	NA	NA	2.26	2.32	ZZZ
61320		A	Open skull for drainage	27.28	NA	NA	14.29	14.64	6.60	NA	NA	48.17	48.52	090
61321		A	Open skull for drainage	30.35	NA	NA	14.29	15.66	7.12	NA	NA	51.76	53.13	090
61322		A	Decompressive craniotomy	34.00	NA	NA	17.78	16.19	7.61	NA	NA	59.39	57.80	090
61323		A	Decompressive lobectomy	34.87	NA	NA	17.00	16.31	8.01	NA	NA	59.88	59.19	090
61330		A	Decompress eye socket	25.12	NA	NA	11.88	13.26	2.31	NA	NA	39.31	40.69	090
61332		A	Explore/biopsy eye socket	28.46	NA	NA	13.45	15.06	4.82	NA	NA	46.73	48.34	090
61333		A	Explore orbit/remove lesion	29.13	NA	NA	13.31	15.01	3.91	NA	NA	46.35	48.05	090
61334		A	Explore orbit/remove object	19.46	NA	NA	9.11	10.25	1.74	NA	NA	30.31	31.45	090
61340		A	Subtemporal decompression	19.97	NA	NA	11.40	11.19	4.83	NA	NA	36.20	35.99	090
61343		A	Incise skull (press relief)	31.68	NA	NA	16.14	16.64	7.62	NA	NA	55.44	55.94	090
61345		A	Relieve cranial pressure	29.05	NA	NA	15.24	15.35	7.02	NA	NA	51.31	51.42	090
61440		A	Incise skull for surgery	28.48	NA	NA	14.06	14.17	6.88	NA	NA	49.42	49.53	090
61450		A	Incise skull for surgery	27.55	NA	NA	12.70	13.89	5.77	NA	NA	46.02	47.21	090
61458		A	Incise skull for brain wound	28.66	NA	NA	15.01	15.39	7.01	NA	NA	50.68	51.06	090
61460		A	Incise skull for surgery	30.06	NA	NA	15.14	16.09	6.02	NA	NA	51.22	52.17	090
61470		A	Incise skull for surgery	27.48	NA	NA	13.11	13.67	5.88	NA	NA	46.47	47.03	090
61480		A	Incise skull for surgery	27.91	NA	NA	8.23	13.51	6.71	NA	NA	42.85	48.13	090
61490		A	Incise skull for surgery	27.08	NA	NA	14.34	14.33	6.90	NA	NA	48.32	48.31	090
61500		A	Removal of skull lesion	19.00	NA	NA	10.64	10.76	4.10	NA	NA	33.74	33.86	090
61501		A	Remove infected skull bone	16.17	NA	NA	9.52	9.28	3.21	NA	NA	28.90	28.66	090
61510		A	Removal of brain lesion	30.55	NA	NA	17.08	16.79	7.33	NA	NA	54.96	54.67	090
61512		A	Remove brain lining lesion	36.93	NA	NA	18.56	19.39	9.05	NA	NA	64.54	65.37	090
61514		A	Removal of brain abscess	27.05	NA	NA	14.53	14.46	6.52	NA	NA	48.10	48.03	090
61516		A	Removal of brain lesion	26.40	NA	NA	14.28	14.27	6.33	NA	NA	47.01	47.00	090
61517		A	Implt brain chemotx add-on	1.38	NA	NA	0.51	0.61	0.35	NA	NA	2.24	2.34	ZZZ
61518		A	Removal of brain lesion	39.61	NA	NA	20.45	20.93	9.62	NA	NA	69.68	70.16	090
61519		A	Remove brain lining lesion	43.22	NA	NA	20.82	22.19	10.60	NA	NA	74.64	76.01	090
61520		A	Removal of brain lesion	56.81	NA	NA	25.64	29.15	11.18	NA	NA	93.63	97.14	090
61521		A	Removal of brain lesion	46.78	NA	NA	22.16	23.70	11.36	NA	NA	80.30	81.84	090
61522		A	Removal of brain abscess	31.36	NA	NA	15.56	16.20	7.60	NA	NA	54.52	55.16	090
61524		A	Removal of brain lesion	29.71	NA	NA	15.78	15.69	7.14	NA	NA	52.63	52.54	090
61526		A	Removal of brain lesion	53.84	NA	NA	21.66	27.53	7.05	NA	NA	82.55	88.42	090
61530		A	Removal of brain lesion	45.38	NA	NA	18.18	23.33	6.13	NA	NA	69.69	74.84	090
61531		A	Implant brain electrodes	16.24	NA	NA	10.26	9.41	3.78	NA	NA	30.28	29.43	090
61533		A	Implant brain electrodes	21.32	NA	NA	11.76	11.59	5.10	NA	NA	38.18	38.01	090
61534		A	Removal of brain lesion	22.83	NA	NA	13.21	12.36	5.42	NA	NA	41.46	40.61	090
61535		A	Remove brain electrodes	13.01	NA	NA	8.93	7.80	3.01	NA	NA	24.95	23.82	090
61536		A	Removal of brain lesion	37.54	NA	NA	18.46	19.45	9.18	NA	NA	65.18	66.17	090
61537		A	Removal of brain tissue	36.31	NA	NA	17.52	15.44	6.92	NA	NA	60.75	58.67	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
61538		A	Removal of brain tissue	39.31	NA	NA	18.80	16.18	6.92	NA	NA	65.03	62.41	090
61539		A	Removal of brain tissue	34.10	NA	NA	15.51	17.20	8.30	NA	NA	57.91	59.60	090
61540		A	Removal of brain tissue	31.24	NA	NA	15.91	16.91	8.30	NA	NA	55.45	56.45	090
61541		A	Incision of brain tissue	30.76	NA	NA	16.10	16.18	6.58	NA	NA	53.44	53.52	090
61542		A	Removal of brain tissue	32.98	NA	NA	16.23	17.42	8.01	NA	NA	57.22	58.41	090
61543		A	Removal of brain tissue	31.13	NA	NA	16.35	16.37	7.54	NA	NA	55.02	55.04	090
61544		A	Remove & treat brain lesion	27.22	NA	NA	14.39	13.96	5.95	NA	NA	47.56	47.13	090
61545		A	Excision of brain tumor	46.15	NA	NA	22.36	23.75	10.60	NA	NA	79.11	80.50	090
61546		A	Removal of pituitary gland	33.26	NA	NA	16.62	17.27	7.65	NA	NA	57.53	58.17	090
61548		A	Removal of pituitary gland	23.23	NA	NA	11.37	12.43	3.42	NA	NA	38.02	39.08	090
61550		A	Release of skull seams	15.38	NA	NA	5.70	6.62	0.98	NA	NA	22.06	22.98	090
61552		A	Release of skull seams	20.22	NA	NA	6.71	8.51	1.06	NA	NA	27.99	29.78	090
61556		A	Incise skull/sutures	23.96	NA	NA	12.76	11.71	4.64	NA	NA	41.36	40.31	090
61557		A	Incise skull/sutures	23.10	NA	NA	13.73	13.65	5.78	NA	NA	42.61	42.53	090
61558		A	Excision of skull/sutures	26.29	NA	NA	8.24	12.70	1.36	NA	NA	35.89	40.35	090
61559		A	Excision of skull/sutures	33.74	NA	NA	18.83	19.19	8.48	NA	NA	61.05	61.41	090
61563		A	Excision of skull tumor	28.31	NA	NA	14.31	15.01	5.15	NA	NA	47.77	48.47	090
61564		A	Excision of skull tumor	34.53	NA	NA	16.25	17.77	8.75	NA	NA	59.53	61.05	090
61566		A	Removal of brain tissue	32.26	NA	NA	16.65	17.49	6.92	NA	NA	55.83	56.67	090
61567		A	Incision of brain tissue	36.76	NA	NA	16.84	19.71	6.52	NA	NA	60.12	62.99	090
61570		A	Remove foreign body, brain	26.33	NA	NA	14.16	13.97	5.86	NA	NA	46.35	46.16	090
61571		A	Incise skull for brain wound	28.24	NA	NA	15.21	15.16	6.77	NA	NA	50.22	50.17	090
61575		A	Skull base/brainstem surgery	36.38	NA	NA	15.53	18.61	5.32	NA	NA	57.23	60.31	090
61576		A	Skull base/brainstem surgery	55.03	NA	NA	25.88	32.52	5.56	NA	NA	86.47	93.11	090
61580		A	Craniofacial approach, skull	34.26	NA	NA	20.69	24.36	3.36	NA	NA	58.31	61.98	090
61581		A	Craniofacial approach, skull	38.78	NA	NA	24.86	23.80	3.91	NA	NA	67.55	66.49	090
61582		A	Craniofacial approach, skull	34.83	NA	NA	30.37	28.07	7.19	NA	NA	72.39	70.09	090
61583		A	Craniofacial approach, skull	38.37	NA	NA	25.79	25.28	9.18	NA	NA	73.34	72.83	090
61584		A	Orbitocranial approach/skull	37.57	NA	NA	25.56	24.78	8.16	NA	NA	71.29	70.51	090
61585		A	Orbitocranial approach/skull	42.40	NA	NA	24.83	26.08	7.01	NA	NA	74.24	75.49	090
61586		A	Resect nasopharynx, skull	27.20	NA	NA	23.97	22.93	4.36	NA	NA	55.53	54.49	090
61590		A	Infratemporal approach/skull	46.79	NA	NA	23.16	27.26	5.29	NA	NA	75.24	79.34	090
61591		A	Infratemporal approach/skull	46.81	NA	NA	23.73	28.07	5.64	NA	NA	76.18	80.52	090
61592		A	Orbitocranial approach/skull	42.94	NA	NA	27.58	26.77	10.04	NA	NA	80.56	79.75	090
61595		A	Transtemporal approach/skull	33.49	NA	NA	19.29	21.59	3.97	NA	NA	56.75	59.05	090
61596		A	Transcochlear approach/skull	39.25	NA	NA	18.52	22.96	3.39	NA	NA	61.16	65.60	090
61597		A	Transcondylar approach/skull	40.67	NA	NA	22.86	22.96	8.81	NA	NA	72.34	72.44	090
61598		A	Transpetrosal approach/skull	36.35	NA	NA	20.81	22.63	5.68	NA	NA	62.84	64.66	090
61600		A	Resect/excise cranial lesion	29.76	NA	NA	18.31	19.41	3.78	NA	NA	51.85	52.95	090
61601		A	Resect/excise cranial lesion	31.00	NA	NA	22.32	20.95	6.61	NA	NA	59.93	58.56	090
61605		A	Resect/excise cranial lesion	32.32	NA	NA	17.57	20.86	2.85	NA	NA	52.74	56.03	090
61606		A	Resect/excise cranial lesion	41.88	NA	NA	24.31	24.94	8.94	NA	NA	75.13	75.76	090
61607		A	Resect/excise cranial lesion	40.76	NA	NA	20.51	22.96	6.88	NA	NA	68.15	70.60	090
61608		A	Resect/excise cranial lesion	45.39	NA	NA	26.51	26.56	10.72	NA	NA	82.62	82.67	090
61609		A	Transect artery, sinus	9.88	NA	NA	3.73	4.57	2.55	NA	NA	16.16	17.00	ZZZ
61610		A	Transect artery, sinus	29.63	NA	NA	11.19	12.65	7.66	NA	NA	48.48	49.94	ZZZ
61611		A	Transect artery, sinus	7.41	NA	NA	2.80	3.57	1.88	NA	NA	12.09	12.86	ZZZ
61612		A	Transect artery, sinus	27.84	NA	NA	8.15	12.02	4.30	NA	NA	40.29	44.16	ZZZ
61613		A	Remove aneurysm, sinus	44.88	NA	NA	27.54	26.58	8.42	NA	NA	80.84	79.88	090
61615		A	Resect/excise lesion, skull	35.57	NA	NA	19.35	21.88	4.72	NA	NA	59.64	62.17	090
61616		A	Resect/excise lesion, skull	46.54	NA	NA	26.45	28.10	8.24	NA	NA	81.23	82.88	090
61618		A	Repair dura	18.52	NA	NA	10.11	10.36	3.71	NA	NA	32.34	32.59	090
61619		A	Repair dura	21.95	NA	NA	10.97	11.92	3.94	NA	NA	36.86	37.81	090
61623		A	Endovasc tempory vessel occl	9.95	NA	NA	3.40	3.91	1.05	NA	NA	14.40	14.91	000
61624		A	Transcath occlusion, cns	20.12	NA	NA	6.80	6.87	1.95	NA	NA	28.87	28.94	000
61626		A	Transcath occlusion, non-cns	16.60	NA	NA	5.43	5.49	1.24	NA	NA	23.27	23.33	000

61630		N	Intracranial angioplasty	22.03	NA	NA	6.50	10.99	2.01	NA	NA	30.54	35.03	090
61635		N	Intracran angioplsty w/stent	24.24	NA	NA	7.02	11.91	2.20	NA	NA	33.46	38.35	090
61680		A	Intracranial vessel surgery	32.34	NA	NA	16.85	17.29	7.93	NA	NA	57.12	57.56	090
61682		A	Intracranial vessel surgery	63.27	NA	NA	27.31	30.99	15.85	NA	NA	106.43	110.11	090
61684		A	Intracranial vessel surgery	41.43	NA	NA	20.46	21.62	10.28	NA	NA	72.17	73.33	090
61686		A	Intracranial vessel surgery	67.26	NA	NA	30.29	33.61	16.66	NA	NA	114.21	117.53	090
61690		A	Intracranial vessel surgery	31.14	NA	NA	15.88	16.51	6.92	NA	NA	53.94	54.57	090
61692		A	Intracranial vessel surgery	54.39	NA	NA	24.71	26.78	13.39	NA	NA	92.49	94.56	090
61697		A	Brain aneurysm repr, complx	63.16	NA	NA	28.85	28.22	12.81	NA	NA	104.82	104.19	090
61698		A	Brain aneurysm repr, complx	69.39	NA	NA	30.92	27.75	12.50	NA	NA	112.81	109.64	090
61700		A	Brain aneurysm repr, simple	50.44	NA	NA	24.03	26.86	12.98	NA	NA	87.45	90.28	090
61702		A	Inner skull vessel surgery	59.80	NA	NA	27.94	26.51	10.76	NA	NA	98.50	97.07	090
61703		A	Clamp neck artery	18.66	NA	NA	10.84	10.56	4.05	NA	NA	33.55	33.27	090
61705		A	Revise circulation to head	37.92	NA	NA	17.61	18.84	8.84	NA	NA	64.37	65.60	090
61708		A	Revise circulation to head	37.02	NA	NA	13.19	14.66	2.50	NA	NA	52.71	54.18	090
61710		A	Revise circulation to head	31.15	NA	NA	13.35	13.57	4.51	NA	NA	49.01	49.23	090
61711		A	Fusion of skull arteries	38.05	NA	NA	18.57	19.49	9.39	NA	NA	66.01	66.93	090
61720		A	Incise skull/brain surgery	17.48	NA	NA	8.13	9.51	2.78	NA	NA	28.39	29.77	090
61735		A	Incise skull/brain surgery	22.17	NA	NA	11.32	11.95	2.72	NA	NA	36.21	36.84	090
61750		A	Incise skull/brain biopsy	19.69	NA	NA	10.97	10.70	4.71	NA	NA	35.37	35.10	090
61751		A	Brain biopsy w/ct/mr guide	18.58	NA	NA	11.42	10.97	4.55	NA	NA	34.55	34.10	090
61760		A	Implant brain electrodes	22.24	NA	NA	11.94	9.52	5.40	NA	NA	39.58	37.16	090
61770		A	Incise skull for treatment	23.05	NA	NA	9.87	11.66	3.54	NA	NA	36.46	38.25	090
61790		A	Treat trigeminal nerve	11.46	NA	NA	7.79	6.38	2.81	NA	NA	22.06	20.65	090
61791		A	Treat trigeminal tract	15.27	NA	NA	7.61	8.59	3.39	NA	NA	26.27	27.25	090
61793		A	Focus radiation beam	17.71	NA	NA	9.79	10.04	4.45	NA	NA	31.95	32.20	090
61795		A	Brain surgery using computer	4.03	NA	NA	1.37	1.87	0.79	NA	NA	6.19	6.69	ZZZ
61850		A	Implant neuroelectrodes	13.23	NA	NA	5.56	7.14	3.21	NA	NA	22.00	23.58	090
61860		A	Implant neuroelectrodes	22.12	NA	NA	11.19	11.84	4.94	NA	NA	38.25	38.90	090
61863		A	Implant neuroelectrode	20.50	NA	NA	12.48	11.95	5.41	NA	NA	38.39	37.86	090
61864		A	Implant neuroelectrde, addl	4.49	NA	NA	1.70	2.14	5.41	NA	NA	11.60	12.04	ZZZ
61867		A	Implant neuroelectrode	32.82	NA	NA	16.69	17.69	5.41	NA	NA	54.92	55.92	090
61868		A	Implant neuroelectrde, addll	7.91	NA	NA	2.96	3.75	5.41	NA	NA	16.28	17.07	ZZZ
61870		A	Implant neuroelectrodes	16.20	NA	NA	8.63	9.43	3.86	NA	NA	28.69	29.49	090
61875		A	Implant neuroelectrodes	16.32	NA	NA	5.38	7.77	2.94	NA	NA	24.64	27.03	090
61880		A	Revise/remove neuroelectrode	6.84	NA	NA	5.47	4.80	1.66	NA	NA	13.97	13.30	090
61885		A	Insrt/redo neurostim 1 array	7.29	NA	NA	7.42	5.83	1.59	NA	NA	16.30	14.71	090
61886		A	Implant neurostim arrays	9.65	NA	NA	8.74	6.95	1.96	NA	NA	20.35	18.56	090
61888		A	Revise/remove neuroreceiver	5.18	NA	NA	3.59	3.65	1.33	NA	NA	10.10	10.16	010
62000		A	Treat skull fracture	13.79	NA	NA	7.21	5.94	1.06	NA	NA	22.06	20.79	090
62005		A	Treat skull fracture	17.49	NA	NA	9.47	8.96	3.86	NA	NA	30.82	30.31	090
62010		A	Treatment of head injury	21.25	NA	NA	11.91	11.76	5.12	NA	NA	38.28	38.13	090
62100		A	Repair brain fluid leakage	23.35	NA	NA	11.84	12.55	4.83	NA	NA	40.02	40.73	090
62115		A	Reduction of skull defect	22.63	NA	NA	13.97	12.22	5.49	NA	NA	42.09	40.34	090
62116		A	Reduction of skull defect	24.82	NA	NA	13.12	13.30	6.09	NA	NA	44.03	44.21	090
62117		A	Reduction of skull defect	28.20	NA	NA	14.69	15.20	4.52	NA	NA	47.41	47.92	090
62120		A	Repair skull cavity lesion	24.31	NA	NA	15.76	17.80	2.99	NA	NA	43.06	45.10	090
62121		A	Incise skull repair	22.89	NA	NA	14.03	15.10	4.16	NA	NA	41.08	42.15	090
62140		A	Repair of skull defect	14.41	NA	NA	8.60	8.39	3.46	NA	NA	26.47	26.26	090
62141		A	Repair of skull defect	15.93	NA	NA	9.30	9.11	3.75	NA	NA	28.98	28.79	090
62142		A	Remove skull plate/flap	11.69	NA	NA	7.72	7.17	2.72	NA	NA	22.13	21.58	090
62143		A	Replace skull plate/flap	14.01	NA	NA	8.79	8.23	3.36	NA	NA	26.16	25.60	090
62145		A	Repair of skull & brain	19.95	NA	NA	10.20	10.72	4.49	NA	NA	34.64	35.16	090
62146		A	Repair of skull with graft	17.14	NA	NA	9.04	9.48	3.61	NA	NA	29.79	30.23	090
62147		A	Repair of skull with graft	20.53	NA	NA	10.59	11.12	4.31	NA	NA	35.43	35.96	090
62148		A	Retr bone flap to fix skull	2.00	NA	NA	0.76	0.84	0.48	NA	NA	3.24	3.32	ZZZ
62160		A	Neuroendoscopy add-on	3.00	NA	NA	1.12	1.43	0.77	NA	NA	4.89	5.20	ZZZ
62161		A	Dissect brain w/scope	21.04	NA	NA	12.12	12.10	5.17	NA	NA	38.33	38.31	090
62162		A	Remove colloid cyst w/scope	26.61	NA	NA	13.85	14.60	5.89	NA	NA	46.35	47.10	090
62163		A	Neuroendoscopy w/fb removal	16.34	NA	NA	10.53	10.07	4.00	NA	NA	30.87	30.41	090
62164		A	Remove brain tumor w/scope	29.19	NA	NA	14.93	14.95	5.36	NA	NA	49.48	49.50	090
62165		A	Remove pituit tumor w/scope	23.04	NA	NA	11.46	12.90	3.00	NA	NA	37.50	38.94	090
62180		A	Establish brain cavity shunt	22.41	NA	NA	12.00	12.21	4.97	NA	NA	39.38	39.59	090
62190		A	Establish brain cavity shunt	12.03	NA	NA	7.67	7.23	2.79	NA	NA	22.49	22.05	090
62192		A	Establish brain cavity shunt	13.21	NA	NA	8.40	7.82	3.01	NA	NA	24.62	24.04	090
62194		A	Replace/irrigate catheter	5.64	NA	NA	3.81	2.78	0.92	NA	NA	10.37	9.34	010

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
62200		A	Establish brain cavity shunt	19.15	NA	NA	10.69	10.80	4.64	NA	NA	34.48	34.59	090
62201		A	Brain cavity shunt w/scope	15.83	NA	NA	10.52	9.71	3.67	NA	NA	30.02	29.21	090
62220		A	Establish brain cavity shunt	13.96	NA	NA	8.39	8.08	3.34	NA	NA	25.69	25.38	090
62223		A	Establish brain cavity shunt	13.84	NA	NA	9.42	8.54	3.13	NA	NA	26.39	25.51	090
62225		A	Replace/irrigate catheter	6.08	NA	NA	5.49	4.44	1.39	NA	NA	12.96	11.91	090
62230		A	Replace/revise brain shunt	11.32	NA	NA	7.28	6.68	2.70	NA	NA	21.30	20.70	090
62252		A	Csf shunt reprogram	0.74	1.78	1.55	NA	NA	0.21	2.73	2.50	NA	NA	XXX
62252	26	A	Csf shunt reprogram	0.74	0.27	0.35	0.27	0.35	0.19	1.20	1.28	1.20	1.28	XXX
62252	TC	A	Csf shunt reprogram	0.00	1.51	1.20	NA	NA	0.02	1.53	1.22	NA	NA	XXX
62256		A	Remove brain cavity shunt	7.27	NA	NA	5.88	4.99	1.71	NA	NA	14.86	13.97	090
62258		A	Replace brain cavity shunt	15.50	NA	NA	9.25	8.85	3.73	NA	NA	28.48	28.08	090
62263		A	Epidural lysis mult sessions	6.37	9.18	11.81	2.88	3.11	0.41	15.96	18.59	9.66	9.89	010
62264		A	Epidural lysis on single day	4.42	5.78	7.24	1.31	1.39	0.27	10.47	11.93	6.00	6.08	010
62268		A	Drain spinal cord cyst	4.73	6.76	10.34	1.74	2.04	0.43	11.92	15.50	6.90	7.20	000
62269		A	Needle biopsy, spinal cord	5.01	6.84	12.72	1.67	1.90	0.37	12.22	18.10	7.05	7.28	000
62270		A	Spinal fluid tap, diagnostic	1.37	2.38	2.84	0.55	0.56	0.08	3.83	4.29	2.00	2.01	000
62272		A	Drain cerebro spinal fluid	1.35	3.14	3.49	0.61	0.69	0.18	4.67	5.02	2.14	2.22	000
62273		A	Inject epidural patch	2.15	1.70	2.46	0.58	0.68	0.13	3.98	4.74	2.86	2.96	000
62280		A	Treat spinal cord lesion	2.63	4.30	6.27	1.07	1.03	0.30	7.23	9.20	4.00	3.96	010
62281		A	Treat spinal cord lesion	2.66	3.79	5.19	0.91	0.90	0.19	6.64	8.04	3.76	3.75	010
62282		A	Treat spinal canal lesion	2.33	3.97	7.26	1.07	0.96	0.17	6.47	9.76	3.57	3.46	010
62284		A	Injection for myelogram	1.54	3.79	4.67	0.67	0.68	0.13	5.46	6.34	2.34	2.35	000
62287		A	Percutaneous diskectomy	8.82	NA	NA	4.24	5.22	0.58	NA	NA	13.64	14.62	090
62290		A	Inject for spine disk x-ray	3.00	4.46	6.46	1.13	1.32	0.23	7.69	9.69	4.36	4.55	000
62291		A	Inject for spine disk x-ray	2.91	4.25	5.51	1.07	1.19	0.26	7.42	8.68	4.24	4.36	000
62292		A	Injection into disk lesion	9.10	NA	NA	3.19	4.15	0.82	NA	NA	13.11	14.07	090
62294		A	Injection into spinal artery	12.73	NA	NA	5.63	5.59	1.24	NA	NA	19.60	19.56	090
62310		A	Inject spine c/t	1.91	3.06	4.37	0.58	0.63	0.12	5.09	6.40	2.61	2.66	000
62311		A	Inject spine l/s (cd)	1.54	2.70	4.37	0.54	0.58	0.09	4.33	6.00	2.17	2.21	000
62318		A	Inject spine w/cath, c/t	2.04	3.24	5.10	0.48	0.61	0.12	5.40	7.26	2.64	2.77	000
62319		A	Inject spine w/cath l/s (cd)	1.87	2.90	4.46	0.47	0.58	0.11	4.88	6.44	2.45	2.56	000
62350		A	Implant spinal canal cath	7.96	NA	NA	4.19	4.00	1.02	NA	NA	13.17	12.98	090
62351		A	Implant spinal canal cath	11.46	NA	NA	7.73	7.27	2.24	NA	NA	21.43	20.97	090
62355		A	Remove spinal canal catheter	6.54	NA	NA	3.61	3.27	0.71	NA	NA	10.86	10.52	090
62360		A	Insert spine infusion device	3.60	NA	NA	3.46	2.88	0.34	NA	NA	7.40	6.82	090
62361		A	Implant spine infusion pump	6.51	NA	NA	4.00	3.94	0.80	NA	NA	11.31	11.25	090
62362		A	Implant spine infusion pump	8.50	NA	NA	4.78	4.47	1.18	NA	NA	14.46	14.15	090
62365		A	Remove spine infusion device	6.51	NA	NA	3.85	3.65	0.86	NA	NA	11.22	11.02	090
62367		A	Analyze spine infusion pump	0.48	0.41	0.56	0.11	0.10	0.03	0.92	1.07	0.62	0.61	XXX
62368		A	Analyze spine infusion pump	0.75	0.60	0.67	0.19	0.18	0.06	1.41	1.48	1.00	0.99	XXX
63001		A	Removal of spinal lamina	17.47	NA	NA	9.89	9.61	3.76	NA	NA	31.12	30.84	090
63003		A	Removal of spinal lamina	17.60	NA	NA	9.80	9.85	3.72	NA	NA	31.12	31.17	090
63005		A	Removal of spinal lamina	16.22	NA	NA	9.78	9.92	3.34	NA	NA	29.34	29.48	090
63011		A	Removal of spinal lamina	15.73	NA	NA	9.22	8.51	3.37	NA	NA	28.32	27.61	090
63012		A	Removal of spinal lamina	16.67	NA	NA	9.84	10.05	3.48	NA	NA	29.99	30.20	090
63015		A	Removal of spinal lamina	20.64	NA	NA	12.01	11.91	4.75	NA	NA	37.40	37.30	090
63016		A	Removal of spinal lamina	21.85	NA	NA	11.95	11.82	4.58	NA	NA	38.38	38.25	090
63017		A	Removal of spinal lamina	17.12	NA	NA	10.43	10.40	3.63	NA	NA	31.18	31.15	090
63020		A	Neck spine disk surgery	15.99	NA	NA	9.99	9.75	3.71	NA	NA	29.69	29.45	090
63030		A	Low back disk surgery	12.97	NA	NA	8.67	8.48	3.00	NA	NA	24.64	24.45	090
63035		A	Spinal disk surgery add-on	3.15	NA	NA	1.21	1.50	0.79	NA	NA	5.15	5.44	ZZZ
63040		A	Laminotomy, single cervical	20.13	NA	NA	11.08	11.40	4.67	NA	NA	35.88	36.20	090
63042		A	Laminotomy, single lumbar	18.55	NA	NA	10.68	11.18	4.25	NA	NA	33.48	33.98	090
63043		C	Laminotomy, addll cervical	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
63044		C	Laminotomy, addll lumbar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
63045		A	Removal of spinal lamina	17.77	NA	NA	10.41	10.37	3.98	NA	NA	32.16	32.12	090

63046		A	Removal of spinal lamina	17.07	NA	NA	9.88	10.11	3.55	NA	NA	30.50	30.73	090
63047		A	Removal of spinal lamina	15.16	NA	NA	9.41	9.77	3.23	NA	NA	27.80	28.16	090
63048		A	Remove spinal lamina add-on	3.26	NA	NA	1.25	1.56	0.72	NA	NA	5.23	5.54	ZZZ
63050		A	Cervical laminoplasty	21.82	NA	NA	8.87	11.10	4.66	NA	NA	35.35	37.58	090
63051		A	C-laminoplasty w/graft/plate	25.32	NA	NA	11.71	13.03	4.66	NA	NA	41.69	43.01	090
63055		A	Decompress spinal cord	23.37	NA	NA	12.40	12.95	5.27	NA	NA	41.04	41.59	090
63056		A	Decompress spinal cord	21.68	NA	NA	11.41	12.27	4.75	NA	NA	37.84	38.70	090
63057		A	Decompress spine cord add-on	5.25	NA	NA	1.97	2.47	1.22	NA	NA	8.44	8.94	ZZZ
63064		A	Decompress spinal cord	26.04	NA	NA	13.41	14.17	5.69	NA	NA	45.14	45.90	090
63066		A	Decompress spine cord add-on	3.26	NA	NA	1.24	1.56	0.69	NA	NA	5.19	5.51	ZZZ
63075		A	Neck spine disk surgery	19.41	NA	NA	11.11	11.84	4.62	NA	NA	35.14	35.87	090
63076		A	Neck spine disk surgery	4.04	NA	NA	1.53	1.92	0.96	NA	NA	6.53	6.92	ZZZ
63077		A	Spine disk surgery, thorax	22.70	NA	NA	11.20	12.39	3.98	NA	NA	37.88	39.07	090
63078		A	Spine disk surgery, thorax	3.28	NA	NA	1.20	1.53	0.66	NA	NA	5.14	5.47	ZZZ
63081		A	Removal of vertebral body	25.92	NA	NA	13.62	14.15	5.54	NA	NA	45.08	45.61	090
63082		A	Remove vertebral body add-on	4.36	NA	NA	1.66	2.08	1.02	NA	NA	7.04	7.46	ZZZ
63085		A	Removal of vertebral body	29.29	NA	NA	13.77	15.05	4.48	NA	NA	47.54	48.82	090
63086		A	Remove vertebral body add-on	3.19	NA	NA	1.17	1.49	0.59	NA	NA	4.95	5.27	ZZZ
63087		A	Removal of vertebral body	37.32	NA	NA	16.85	18.80	6.20	NA	NA	60.37	62.32	090
63088		A	Remove vertebral body add-on	4.32	NA	NA	1.64	2.04	0.82	NA	NA	6.78	7.18	ZZZ
63090		A	Removal of vertebral body	30.72	NA	NA	14.16	15.56	4.21	NA	NA	49.09	50.49	090
63091		A	Remove vertebral body add-on	3.03	NA	NA	1.13	1.38	0.48	NA	NA	4.64	4.89	ZZZ
63101		A	Removal of vertebral body	33.84	NA	NA	17.18	18.75	5.69	NA	NA	56.71	58.28	090
63102		A	Removal of vertebral body	33.84	NA	NA	16.90	18.68	5.69	NA	NA	56.43	58.21	090
63103		A	Remove vertebral body add-on	4.82	NA	NA	1.78	2.32	0.69	NA	NA	7.29	7.83	ZZZ
63170		A	Incise spinal cord tract(s)	22.03	NA	NA	12.64	12.06	4.86	NA	NA	39.53	38.95	090
63172		A	Drainage of spinal cyst	19.62	NA	NA	11.31	10.81	4.48	NA	NA	35.41	34.91	090
63173		A	Drainage of spinal cyst	24.13	NA	NA	13.38	12.95	5.68	NA	NA	43.19	42.76	090
63180		A	Revise spinal cord ligaments	20.35	NA	NA	10.94	10.97	3.95	NA	NA	35.24	35.27	090
63182		A	Revise spinal cord ligaments	22.64	NA	NA	7.25	10.03	5.30	NA	NA	35.19	37.97	090
63185		A	Incise spinal column/nerves	16.31	NA	NA	10.11	8.60	2.79	NA	NA	29.21	27.70	090
63190		A	Incise spinal column/nerves	18.71	NA	NA	10.16	10.14	3.24	NA	NA	32.11	32.09	090
63191		A	Incise spinal column/nerves	18.74	NA	NA	10.78	10.55	6.34	NA	NA	35.86	35.63	090
63194		A	Incise spinal column & cord	21.92	NA	NA	8.65	10.95	3.26	NA	NA	33.83	36.13	090
63195		A	Incise spinal column & cord	21.50	NA	NA	12.18	11.33	4.87	NA	NA	38.55	37.70	090
63196		A	Incise spinal column & cord	25.09	NA	NA	13.88	13.51	5.76	NA	NA	44.73	44.36	090
63197		A	Incise spinal column & cord	23.90	NA	NA	13.43	12.51	5.36	NA	NA	42.69	41.77	090
63198		A	Incise spinal column & cord	29.69	NA	NA	9.01	8.58	6.43	NA	NA	45.13	44.70	090
63199		A	Incise spinal column & cord	31.26	NA	NA	9.38	13.62	1.40	NA	NA	42.04	46.28	090
63200		A	Release of spinal cord	21.26	NA	NA	11.74	11.40	4.96	NA	NA	37.96	37.62	090
63250		A	Revise spinal cord vessels	43.68	NA	NA	21.09	20.21	9.01	NA	NA	73.78	72.90	090
63251		A	Revise spinal cord vessels	44.43	NA	NA	21.36	22.28	10.41	NA	NA	76.20	77.12	090
63252		A	Revise spinal cord vessels	44.42	NA	NA	21.41	22.03	10.64	NA	NA	76.47	77.09	090
63265		A	Excise intraspinal lesion	23.64	NA	NA	13.10	12.85	5.43	NA	NA	42.17	41.92	090
63266		A	Excise intraspinal lesion	24.50	NA	NA	13.27	13.20	5.54	NA	NA	43.31	43.24	090
63267		A	Excise intraspinal lesion	19.27	NA	NA	11.22	11.11	4.37	NA	NA	34.86	34.75	090
63268		A	Excise intraspinal lesion	19.84	NA	NA	10.84	10.48	3.69	NA	NA	34.37	34.01	090
63270		A	Excise intraspinal lesion	29.62	NA	NA	15.73	15.53	6.82	NA	NA	52.17	51.97	090
63271		A	Excise intraspinal lesion	29.74	NA	NA	15.34	15.51	6.90	NA	NA	51.98	52.15	090
63272		A	Excise intraspinal lesion	27.32	NA	NA	14.33	14.59	6.18	NA	NA	47.83	48.09	090
63273		A	Excise intraspinal lesion	26.29	NA	NA	13.84	14.21	5.74	NA	NA	45.87	46.24	090
63275		A	Biopsy/excise spinal tumor	25.68	NA	NA	13.51	13.70	5.80	NA	NA	44.99	45.18	090
63276		A	Biopsy/excise spinal tumor	25.51	NA	NA	13.73	13.69	5.83	NA	NA	45.07	45.03	090
63277		A	Biopsy/excise spinal tumor	22.21	NA	NA	12.17	12.43	5.01	NA	NA	39.39	39.65	090
63278		A	Biopsy/excise spinal tumor	21.94	NA	NA	12.07	12.30	4.55	NA	NA	38.56	38.79	090
63280		A	Biopsy/excise spinal tumor	30.08	NA	NA	16.02	16.23	7.27	NA	NA	53.37	53.58	090
63281		A	Biopsy/excise spinal tumor	29.78	NA	NA	15.82	16.08	7.17	NA	NA	52.77	53.03	090
63282		A	Biopsy/excise spinal tumor	27.94	NA	NA	15.14	15.28	6.76	NA	NA	49.84	49.98	090
63283		A	Biopsy/excise spinal tumor	26.55	NA	NA	14.20	14.54	6.26	NA	NA	47.01	47.35	090
63285		A	Biopsy/excise spinal tumor	37.84	NA	NA	19.05	19.71	9.18	NA	NA	66.07	66.73	090
63286		A	Biopsy/excise spinal tumor	37.41	NA	NA	18.80	19.62	9.21	NA	NA	65.42	66.24	090
63287		A	Biopsy/excise spinal tumor	39.87	NA	NA	19.48	20.18	9.39	NA	NA	68.74	69.43	090
63290		A	Biopsy/excise spinal tumor	40.61	NA	NA	20.06	20.45	9.02	NA	NA	69.68	70.07	090
63295		A	Repair of laminectomy defect	5.25	NA	NA	1.33	1.94	1.03	NA	NA	7.61	8.22	ZZZ
63300		A	Removal of vertebral body	26.62	NA	NA	13.54	14.10	5.97	NA	NA	46.13	46.69	090
63301		A	Removal of vertebral body	31.36	NA	NA	15.06	15.42	5.39	NA	NA	51.81	52.17	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
63302		A	Removal of vertebral body	30.94	NA	NA	14.83	15.59	5.53	NA	NA	51.30	52.06	090
63303		A	Removal of vertebral body	33.37	NA	NA	14.68	16.35	4.68	NA	NA	52.73	54.40	090
63304		A	Removal of vertebral body	33.64	NA	NA	17.05	17.21	6.41	NA	NA	57.10	57.26	090
63305		A	Removal of vertebral body	36.03	NA	NA	17.60	17.93	5.71	NA	NA	59.34	59.67	090
63306		A	Removal of vertebral body	35.34	NA	NA	15.77	17.29	8.33	NA	NA	59.43	60.96	090
63307		A	Removal of vertebral body	34.75	NA	NA	17.66	17.02	4.46	NA	NA	56.87	56.23	090
63308		A	Remove vertebral body add-on	5.24	NA	NA	1.93	2.43	1.29	NA	NA	8.46	8.96	ZZZ
63600		A	Remove spinal cord lesion	14.98	NA	NA	4.61	5.20	1.52	NA	NA	21.11	21.70	090
63610		A	Stimulation of spinal cord	8.72	14.20	48.31	1.58	2.08	0.86	23.78	57.89	11.16	11.66	000
63615		A	Remove lesion of spinal cord	17.18	NA	NA	5.98	8.44	2.84	NA	NA	26.00	28.46	090
63650		A	Implant neuroelectrodes	7.53	NA	NA	2.98	3.12	0.53	NA	NA	11.04	11.18	090
63655		A	Implant neuroelectrodes	11.38	NA	NA	7.84	7.13	2.43	NA	NA	21.65	20.94	090
63660		A	Revise/remove neuroelectrode	6.83	NA	NA	3.36	3.55	0.78	NA	NA	10.97	11.16	090
63685		A	Insrt/redo spine n generator	7.83	NA	NA	3.74	4.04	1.05	NA	NA	12.62	12.92	090
63688		A	Revise/remove neuroreceiver	6.06	NA	NA	3.60	3.56	0.89	NA	NA	10.55	10.51	090
63700		A	Repair of spinal herniation	17.26	NA	NA	9.78	10.17	3.52	NA	NA	30.56	30.95	090
63702		A	Repair of spinal herniation	19.20	NA	NA	10.93	11.01	4.12	NA	NA	34.25	34.33	090
63704		A	Repair of spinal herniation	22.15	NA	NA	12.60	12.83	4.57	NA	NA	39.32	39.55	090
63706		A	Repair of spinal herniation	25.07	NA	NA	15.07	13.95	6.23	NA	NA	46.37	45.25	090
63707		A	Repair spinal fluid leakage	12.47	NA	NA	7.90	7.75	2.51	NA	NA	22.88	22.73	090
63709		A	Repair spinal fluid leakage	15.47	NA	NA	9.06	9.31	3.09	NA	NA	27.62	27.87	090
63710		A	Graft repair of spine defect	15.22	NA	NA	9.26	9.09	3.40	NA	NA	27.88	27.71	090
63740		A	Install spinal shunt	12.45	NA	NA	8.25	7.57	2.93	NA	NA	23.63	22.95	090
63741		A	Install spinal shunt	8.98	NA	NA	4.85	4.78	1.66	NA	NA	15.49	15.42	090
63744		A	Revision of spinal shunt	8.83	NA	NA	6.06	5.45	1.89	NA	NA	16.78	16.17	090
63746		A	Removal of spinal shunt	7.22	NA	NA	4.75	4.02	1.53	NA	NA	13.50	12.77	090
64400		A	N block inj, trigeminal	1.11	1.41	1.77	0.45	0.44	0.07	2.59	2.95	1.63	1.62	000
64402		A	N block inj, facial	1.25	1.46	1.57	0.53	0.58	0.09	2.80	2.91	1.87	1.92	000
64405		A	N block inj, occipital	1.32	1.17	1.39	0.51	0.47	0.08	2.57	2.79	1.91	1.87	000
64408		A	N block inj, vagus	1.41	1.45	1.55	0.70	0.81	0.10	2.96	3.06	2.21	2.32	000
64410		A	N block inj, phrenic	1.43	1.82	2.33	0.52	0.48	0.09	3.34	3.85	2.04	2.00	000
64412		A	N block inj, spinal accessor	1.18	2.05	2.50	0.55	0.46	0.08	3.31	3.76	1.81	1.72	000
64413		A	N block inj, cervical plexus	1.40	1.30	1.71	0.47	0.49	0.08	2.78	3.19	1.95	1.97	000
64415		A	N block inj, brachial plexus	1.48	1.50	2.48	0.34	0.43	0.09	3.07	4.05	1.91	2.00	000
64416		A	N block cont infuse, b plex	3.85	NA	NA	0.57	0.74	0.31	NA	NA	4.73	4.90	010
64417		A	N block inj, axillary	1.44	1.51	2.65	0.35	0.46	0.11	3.06	4.20	1.90	2.01	000
64418		A	N block inj, suprascapular	1.32	1.90	2.44	0.52	0.46	0.07	3.29	3.83	1.91	1.85	000
64420		A	N block inj, intercost, sng	1.18	2.40	3.51	0.44	0.43	0.08	3.66	4.77	1.70	1.69	000
64421		A	N block inj, intercost, mlt	1.68	3.55	5.45	0.53	0.52	0.11	5.34	7.24	2.32	2.31	000
64425		A	N block inj, ilio-ing/hypogi	1.75	1.34	1.57	0.56	0.55	0.13	3.22	3.45	2.44	2.43	000
64430		A	N block inj, pudendal	1.46	2.41	2.49	0.78	0.61	0.10	3.97	4.05	2.34	2.17	000
64435		A	N block inj, paracervical	1.45	2.00	2.39	0.56	0.66	0.16	3.61	4.00	2.17	2.27	000
64445		A	N block inj, sciatic, sng	1.48	1.67	2.42	0.52	0.51	0.10	3.25	4.00	2.10	2.09	000
64446		A	N blk inj, sciatic, cont inf	3.61	NA	NA	0.59	0.90	0.20	NA	NA	4.40	4.71	010
64447		A	N block inj fem, single	1.50	NA	NA	0.21	0.38	0.09	NA	NA	1.80	1.97	000
64448		A	N block inj fem, cont inf	3.36	NA	NA	0.47	0.73	0.18	NA	NA	4.01	4.27	010
64449		A	N block inj, lumbar plexus	3.24	NA	NA	0.49	0.84	0.15	NA	NA	3.88	4.23	010
64450		A	N block, other peripheral	1.27	1.29	1.25	0.50	0.49	0.13	2.69	2.65	1.90	1.89	000
64470		A	Inj paravertebral c/t	1.85	3.87	6.39	0.71	0.71	0.11	5.83	8.35	2.67	2.67	000
64472		A	Inj paravertebral c/t add-on	1.29	1.23	2.06	0.34	0.34	0.08	2.60	3.43	1.71	1.71	ZZZ
64475		A	Inj paravertebral l/s	1.41	3.72	6.09	0.60	0.62	0.10	5.23	7.60	2.11	2.13	000
64476		A	Inj paravertebral l/s add-on	0.98	1.12	1.87	0.23	0.24	0.07	2.17	2.92	1.28	1.29	ZZZ
64479		A	Inj foramen epidural c/t	2.20	3.81	6.57	0.82	0.87	0.12	6.13	8.89	3.14	3.19	000
64480		A	Inj foramen epidural add-on	1.54	1.50	2.51	0.38	0.45	0.10	3.14	4.15	2.02	2.09	ZZZ
64483		A	Inj foramen epidural l/s	1.90	3.85	6.88	0.76	0.81	0.11	5.86	8.89	2.77	2.82	000
64484		A	Inj foramen epidural add-on	1.33	1.63	2.87	0.32	0.36	0.08	3.04	4.28	1.73	1.77	ZZZ

64505		A	N block, spenopalatine gangl	1.36	1.11	1.21	0.73	0.68	0.10	2.57	2.67	2.19	2.14	000
64508		A	N block, carotid sinus s/p	1.12	1.89	2.96	0.48	0.68	0.07	3.08	4.15	1.67	1.87	000
64510		A	N block, stellate ganglion	1.22	1.92	3.07	0.44	0.49	0.07	3.21	4.36	1.73	1.78	000
64517		A	N block inj, hypogas plxs	2.20	1.70	2.47	0.67	0.82	0.11	4.01	4.78	2.98	3.13	000
64520		A	N block, lumbar/thoracic	1.35	2.62	4.51	0.52	0.54	0.08	4.05	5.94	1.95	1.97	000
64530		A	N block inj, celiac pelus	1.58	2.65	4.00	0.60	0.64	0.10	4.33	5.68	2.28	2.32	000
64550		A	Apply neurostimulator	0.18	0.20	0.26	0.06	0.05	0.01	0.39	0.45	0.25	0.24	000
64553		A	Implant neuroelectrodes	2.31	2.50	2.75	1.35	1.73	0.18	4.99	5.24	3.84	4.22	010
64555		A	Implant neuroelectrodes	2.27	2.57	2.97	1.36	1.23	0.19	5.03	5.43	3.82	3.69	010
64560		A	Implant neuroelectrodes	2.36	2.49	2.60	1.33	1.29	0.22	5.07	5.18	3.91	3.87	010
64561		A	Implant neuroelectrodes	7.05	20.04	27.55	3.87	3.05	0.51	27.60	35.11	11.43	10.61	010
64565		A	Implant neuroelectrodes	1.76	2.47	3.08	1.28	1.27	0.13	4.36	4.97	3.17	3.16	010
64573		A	Implant neuroelectrodes	8.11	NA	NA	5.44	5.29	1.60	NA	NA	15.15	15.00	090
64575		A	Implant neuroelectrodes	4.34	NA	NA	2.00	2.50	0.61	NA	NA	6.95	7.45	090
64577		A	Implant neuroelectrodes	4.61	NA	NA	2.87	3.18	1.04	NA	NA	8.52	8.83	090
64580		A	Implant neuroelectrodes	4.11	NA	NA	2.69	3.34	0.36	NA	NA	7.16	7.81	090
64581		A	Implant neuroelectrodes	14.13	NA	NA	6.72	5.71	1.05	NA	NA	21.90	20.89	090
64585		A	Revise/remove neuroelectrode	2.06	5.79	9.91	2.24	2.16	0.20	8.05	12.17	4.50	4.42	010
64590		A	Insrt/redo perph n generator	2.40	6.44	6.97	2.47	2.33	0.19	9.03	9.56	5.06	4.92	010
64595		A	Revise/remove neuroreceiver	1.73	6.52	9.42	2.20	1.99	0.19	8.44	11.34	4.12	3.91	010
64600		A	Injection treatment of nerve	3.44	5.28	8.33	1.58	1.63	0.34	9.06	12.11	5.36	5.41	010
64605		A	Injection treatment of nerve	5.60	7.65	9.08	2.39	2.23	0.79	14.04	15.47	8.78	8.62	010
64610		A	Injection treatment of nerve	7.15	9.41	9.00	3.52	3.66	1.58	18.14	17.73	12.25	12.39	010
64612		A	Destroy nerve, face muscle	1.96	1.61	2.26	1.36	1.33	0.11	3.68	4.33	3.43	3.40	010
64613		A	Destroy nerve, neck muscle	1.96	1.36	2.54	1.13	1.20	0.11	3.43	4.61	3.20	3.27	010
64614		A	Destroy nerve, extrem musc	2.20	1.62	2.82	1.31	1.31	0.10	3.92	5.12	3.61	3.61	010
64620		A	Injection treatment of nerve	2.84	3.44	4.66	1.17	1.29	0.20	6.48	7.70	4.21	4.33	010
64622		A	Destr paravertebrl nerve l/s	3.00	4.10	6.85	1.27	1.35	0.18	7.28	10.03	4.45	4.53	010
64623		A	Destr paravertebral n add-on	0.99	1.65	2.63	0.22	0.22	0.06	2.70	3.68	1.27	1.27	ZZZ
64626		A	Destr paravertebrl nerve c/t	3.78	4.74	7.02	1.87	1.94	0.20	8.72	11.00	5.85	5.92	010
64627		A	Destr paravertebral n add-on	1.16	2.38	3.99	0.25	0.27	0.07	3.61	5.22	1.48	1.50	ZZZ
64630		A	Injection treatment of nerve	3.00	2.81	2.75	1.88	1.53	0.22	6.03	5.97	5.10	4.75	010
64640		A	Injection treatment of nerve	2.76	2.45	3.75	1.44	1.74	0.29	5.50	6.80	4.49	4.79	010
64650		A	Chemodenerv eccrine glands	0.70	0.78	0.85	0.18	0.27	0.06	1.54	1.61	0.94	1.03	000
64653		A	Chemodenerv eccrine glands	0.88	0.83	0.90	0.22	0.34	0.08	1.79	1.86	1.18	1.30	000
64680		A	Injection treatment of nerve	2.62	4.01	6.04	1.09	1.35	0.18	6.81	8.84	3.89	4.15	010
64681		A	Injection treatment of nerve	3.78	4.92	8.20	1.32	1.88	0.28	8.98	12.26	5.38	5.94	010
64702		A	Revise finger/toe nerve	6.02	NA	NA	5.27	4.21	0.61	NA	NA	11.90	10.84	090
64704		A	Revise hand/foot nerve	4.56	NA	NA	3.20	3.28	0.61	NA	NA	8.37	8.45	090
64708		A	Revise arm/leg nerve	6.17	NA	NA	4.29	4.72	0.96	NA	NA	11.42	11.85	090
64712		A	Revision of sciatic nerve	7.92	NA	NA	4.55	4.86	0.95	NA	NA	13.42	13.73	090
64713		A	Revision of arm nerve(s)	11.22	NA	NA	6.47	6.02	1.82	NA	NA	19.51	19.06	090
64714		A	Revise low back nerve(s)	10.37	NA	NA	4.91	4.38	1.19	NA	NA	16.47	15.94	090
64716		A	Revision of cranial nerve	6.80	NA	NA	5.15	5.77	0.63	NA	NA	12.58	13.20	090
64718		A	Revise ulnar nerve at elbow	6.98	NA	NA	6.23	6.05	1.05	NA	NA	14.26	14.08	090
64719		A	Revise ulnar nerve at wrist	4.84	NA	NA	4.16	4.43	0.77	NA	NA	9.77	10.04	090
64721		A	Carpal tunnel surgery	4.78	4.72	5.20	4.66	5.19	0.73	10.23	10.71	10.17	10.70	090
64722		A	Relieve pressure on nerve(s)	4.69	NA	NA	2.83	2.99	0.48	NA	NA	8.00	8.16	090
64726		A	Release foot/toe nerve	4.17	NA	NA	2.73	2.78	0.54	NA	NA	7.44	7.49	090
64727		A	Internal nerve revision	3.10	NA	NA	1.23	1.43	0.48	NA	NA	4.81	5.01	ZZZ
64732		A	Incision of brow nerve	4.78	NA	NA	4.27	3.69	0.98	NA	NA	10.03	9.45	090
64734		A	Incision of cheek nerve	5.41	NA	NA	4.64	4.20	0.89	NA	NA	10.94	10.50	090
64736		A	Incision of chin nerve	5.09	NA	NA	3.87	3.98	0.52	NA	NA	9.48	9.59	090
64738		A	Incision of jaw nerve	6.22	NA	NA	4.22	4.51	1.08	NA	NA	11.52	11.81	090
64740		A	Incision of tongue nerve	6.08	NA	NA	4.41	4.94	0.69	NA	NA	11.18	11.71	090
64742		A	Incision of facial nerve	6.71	NA	NA	4.35	4.61	0.73	NA	NA	11.79	12.05	090
64744		A	Incise nerve, back of head	5.61	NA	NA	4.59	3.98	1.16	NA	NA	11.36	10.75	090
64746		A	Incise diaphragm nerve	6.42	NA	NA	3.88	4.35	0.82	NA	NA	11.12	11.59	090
64752		A	Incision of vagus nerve	7.55	NA	NA	4.06	4.23	0.93	NA	NA	12.54	12.71	090
64755		A	Incision of stomach nerves	14.93	NA	NA	5.84	5.68	1.83	NA	NA	22.60	22.44	090
64760		A	Incision of vagus nerve	7.45	NA	NA	3.85	3.55	0.81	NA	NA	12.11	11.81	090
64761		A	Incision of pelvis nerve	6.90	NA	NA	3.99	3.64	0.53	NA	NA	11.42	11.07	090
64763		A	Incise hip/thigh nerve	7.42	NA	NA	5.07	5.16	0.94	NA	NA	13.43	13.52	090
64766		A	Incise hip/thigh nerve	9.29	NA	NA	5.31	5.26	1.06	NA	NA	15.66	15.61	090
64771		A	Sever cranial nerve	7.97	NA	NA	5.28	5.48	1.23	NA	NA	14.48	14.68	090
64772		A	Incision of spinal nerve	7.70	NA	NA	5.32	5.02	1.40	NA	NA	14.42	14.12	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
64774		A	Remove skin nerve lesion	5.66	NA	NA	3.97	3.87	0.74	NA	NA	10.37	10.27	090
64776		A	Remove digit nerve lesion	5.49	NA	NA	3.73	3.69	0.76	NA	NA	9.98	9.94	090
64778		A	Digit nerve surgery add-on	3.11	NA	NA	1.19	1.42	0.46	NA	NA	4.76	4.99	ZZZ
64782		A	Remove limb nerve lesion	6.72	NA	NA	4.11	3.86	0.86	NA	NA	11.69	11.44	090
64783		A	Limb nerve surgery add-on	3.71	NA	NA	1.41	1.73	0.51	NA	NA	5.63	5.95	ZZZ
64784		A	Remove nerve lesion	10.44	NA	NA	6.20	6.49	1.38	NA	NA	18.01	18.30	090
64786		A	Remove sciatic nerve lesion	16.07	NA	NA	8.97	9.62	2.60	NA	NA	27.64	28.29	090
64787		A	Implant nerve end	4.29	NA	NA	1.60	1.99	0.58	NA	NA	6.47	6.86	ZZZ
64788		A	Remove skin nerve lesion	5.10	NA	NA	3.87	3.56	0.73	NA	NA	9.70	9.39	090
64790		A	Removal of nerve lesion	11.92	NA	NA	6.81	7.10	2.10	NA	NA	20.83	21.12	090
64792		A	Removal of nerve lesion	15.65	NA	NA	8.40	8.72	2.48	NA	NA	26.53	26.85	090
64795		A	Biopsy of nerve	3.01	NA	NA	1.44	1.53	0.52	NA	NA	4.97	5.06	000
64802		A	Remove sympathetic nerves	10.19	NA	NA	4.22	4.90	1.29	NA	NA	15.70	16.38	090
64804		A	Remove sympathetic nerves	15.73	NA	NA	6.10	6.90	2.14	NA	NA	23.97	24.77	090
64809		A	Remove sympathetic nerves	14.57	NA	NA	6.60	5.97	1.50	NA	NA	22.67	22.04	090
64818		A	Remove sympathetic nerves	11.20	NA	NA	4.36	5.05	1.33	NA	NA	16.89	17.58	090
64820		A	Remove sympathetic nerves	10.60	NA	NA	7.04	7.10	1.49	NA	NA	19.13	19.19	090
64821		A	Remove sympathetic nerves	9.11	NA	NA	6.64	7.17	1.24	NA	NA	16.99	17.52	090
64822		A	Remove sympathetic nerves	9.11	NA	NA	6.45	7.04	1.30	NA	NA	16.86	17.45	090
64823		A	Remove sympathetic nerves	10.72	NA	NA	7.11	7.88	1.57	NA	NA	19.40	20.17	090
64831		A	Repair of digit nerve	10.18	NA	NA	6.67	6.97	1.41	NA	NA	18.26	18.56	090
64832		A	Repair nerve add-on	5.65	NA	NA	2.36	2.79	0.85	NA	NA	8.86	9.29	ZZZ
64834		A	Repair of hand or foot nerve	10.67	NA	NA	6.57	6.96	1.54	NA	NA	18.78	19.17	090
64835		A	Repair of hand or foot nerve	11.55	NA	NA	7.32	7.60	1.73	NA	NA	20.60	20.88	090
64836		A	Repair of hand or foot nerve	11.55	NA	NA	7.04	7.51	1.67	NA	NA	20.26	20.73	090
64837		A	Repair nerve add-on	6.25	NA	NA	2.67	3.09	0.97	NA	NA	9.89	10.31	ZZZ
64840		A	Repair of leg nerve	13.81	NA	NA	5.07	7.46	1.37	NA	NA	20.25	22.64	090
64856		A	Repair/transpose nerve	14.89	NA	NA	8.60	9.04	2.12	NA	NA	25.61	26.05	090
64857		A	Repair arm/leg nerve	15.64	NA	NA	8.93	9.46	2.21	NA	NA	26.78	27.31	090
64858		A	Repair sciatic nerve	17.64	NA	NA	10.15	10.62	3.33	NA	NA	31.12	31.58	090
64859		A	Nerve surgery	4.25	NA	NA	1.88	2.11	0.67	NA	NA	6.80	7.03	ZZZ
64861		A	Repair of arm nerves	20.68	NA	NA	10.04	11.34	4.08	NA	NA	34.80	36.10	090
64862		A	Repair of low back nerves	20.88	NA	NA	6.83	10.66	4.31	NA	NA	32.02	35.85	090
64864		A	Repair of facial nerve	13.27	NA	NA	7.03	8.33	1.26	NA	NA	21.56	22.86	090
64865		A	Repair of facial nerve	15.91	NA	NA	9.89	12.61	1.50	NA	NA	27.30	30.02	090
64866		A	Fusion of facial/other nerve	16.65	NA	NA	12.27	12.94	2.04	NA	NA	30.96	31.63	090
64868		A	Fusion of facial/other nerve	14.76	NA	NA	9.07	10.84	1.43	NA	NA	25.26	27.03	090
64870		A	Fusion of facial/other nerve	16.90	NA	NA	8.42	8.65	1.30	NA	NA	26.62	26.85	090
64872		A	Subsequent repair of nerve	1.99	NA	NA	0.81	1.01	0.29	NA	NA	3.09	3.29	ZZZ
64874		A	Repair & revise nerve add-on	2.98	NA	NA	1.21	1.45	0.42	NA	NA	4.61	4.85	ZZZ
64876		A	Repair nerve/shorten bone	3.37	NA	NA	0.78	1.50	0.47	NA	NA	4.62	5.34	ZZZ
64885		A	Nerve graft, head or neck	17.50	NA	NA	8.84	10.91	1.63	NA	NA	27.97	30.04	090
64886		A	Nerve graft, head or neck	20.72	NA	NA	9.68	12.58	2.08	NA	NA	32.48	35.38	090
64890		A	Nerve graft, hand or foot	16.06	NA	NA	9.05	9.76	2.29	NA	NA	27.40	28.11	090
64891		A	Nerve graft, hand or foot	17.17	NA	NA	9.87	8.15	1.63	NA	NA	28.67	26.95	090
64892		A	Nerve graft, arm or leg	15.56	NA	NA	8.95	8.88	2.47	NA	NA	26.98	26.91	090
64893		A	Nerve graft, arm or leg	16.69	NA	NA	9.67	9.81	2.61	NA	NA	28.97	29.11	090
64895		A	Nerve graft, hand or foot	20.21	NA	NA	10.02	9.74	2.57	NA	NA	32.80	32.52	090
64896		A	Nerve graft, hand or foot	21.75	NA	NA	11.89	11.21	3.16	NA	NA	36.80	36.12	090
64897		A	Nerve graft, arm or leg	19.20	NA	NA	10.43	10.63	2.54	NA	NA	32.17	32.37	090
64898		A	Nerve graft, arm or leg	20.76	NA	NA	11.28	11.66	2.77	NA	NA	34.81	35.19	090
64901		A	Nerve graft add-on	10.20	NA	NA	3.82	4.90	1.37	NA	NA	15.39	16.47	ZZZ
64902		A	Nerve graft add-on	11.81	NA	NA	4.25	5.53	1.55	NA	NA	17.61	18.89	ZZZ
64905		A	Nerve pedicle transfer	14.93	NA	NA	6.84	8.08	2.00	NA	NA	23.77	25.01	090
64907		A	Nerve pedicle transfer	19.85	NA	NA	6.41	10.99	3.16	NA	NA	29.42	34.00	090
64999		C	Nervous system surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY

65091		A	Revise eye	7.08	NA	NA	6.91	7.99	0.32	NA	NA	14.31	15.39	090
65093		A	Revise eye with implant	6.86	NA	NA	7.00	8.28	0.34	NA	NA	14.20	15.48	090
65101		A	Removal of eye	8.02	NA	NA	8.15	9.18	0.35	NA	NA	16.52	17.55	090
65103		A	Remove eye/insert implant	8.56	NA	NA	8.37	9.39	0.37	NA	NA	17.30	18.32	090
65105		A	Remove eye/attach implant	9.61	NA	NA	9.06	10.11	0.42	NA	NA	19.09	20.14	090
65110		A	Removal of eye	15.31	NA	NA	11.58	13.15	0.81	NA	NA	27.70	29.27	090
65112		A	Remove eye/revise socket	18.05	NA	NA	13.05	15.36	1.30	NA	NA	32.40	34.71	090
65114		A	Remove eye/revise socket	19.19	NA	NA	13.69	15.68	1.02	NA	NA	33.90	35.89	090
65125		A	Revise ocular implant	3.12	6.82	8.31	3.18	3.50	0.19	10.13	11.62	6.49	6.81	090
65130		A	Insert ocular implant	8.14	NA	NA	7.92	8.85	0.35	NA	NA	16.41	17.34	090
65135		A	Insert ocular implant	8.32	NA	NA	7.97	8.98	0.36	NA	NA	16.65	17.66	090
65140		A	Attach ocular implant	9.14	NA	NA	8.59	9.55	0.40	NA	NA	18.13	19.09	090
65150		A	Revise ocular implant	6.25	NA	NA	6.47	7.60	0.31	NA	NA	13.03	14.16	090
65155		A	Reinsert ocular implant	9.78	NA	NA	8.85	10.07	0.50	NA	NA	19.13	20.35	090
65175		A	Removal of ocular implant	7.15	NA	NA	7.27	8.18	0.31	NA	NA	14.73	15.64	090
65205		A	Remove foreign body from eye	0.71	0.59	0.63	0.33	0.30	0.03	1.33	1.37	1.07	1.04	000
65210		A	Remove foreign body from eye	0.84	0.74	0.79	0.41	0.39	0.04	1.62	1.67	1.29	1.27	000
65220		A	Remove foreign body from eye	0.71	0.60	0.63	0.29	0.28	0.05	1.36	1.39	1.05	1.04	000
65222		A	Remove foreign body from eye	0.93	0.81	0.87	0.43	0.39	0.04	1.78	1.84	1.40	1.36	000
65235		A	Remove foreign body from eye	8.69	NA	NA	6.99	6.80	0.37	NA	NA	16.05	15.86	090
65260		A	Remove foreign body from eye	12.19	NA	NA	9.03	9.50	0.57	NA	NA	21.79	22.26	090
65265		A	Remove foreign body from eye	13.95	NA	NA	9.90	10.44	0.62	NA	NA	24.47	25.01	090
65270		A	Repair of eye wound	1.90	3.88	4.89	1.22	1.35	0.09	5.87	6.88	3.21	3.34	010
65272		A	Repair of eye wound	4.44	6.50	7.41	3.27	3.29	0.19	11.13	12.04	7.90	7.92	090
65273		A	Repair of eye wound	4.98	NA	NA	3.43	3.54	0.22	NA	NA	8.63	8.74	090
65275		A	Repair of eye wound	6.08	6.43	6.34	3.99	3.95	0.26	12.77	12.68	10.33	10.29	090
65280		A	Repair of eye wound	8.78	NA	NA	6.02	6.18	0.38	NA	NA	15.18	15.34	090
65285		A	Repair of eye wound	14.32	NA	NA	8.70	9.08	0.64	NA	NA	23.66	24.04	090
65286		A	Repair of eye wound	6.38	8.96	10.60	4.53	4.60	0.27	15.61	17.25	11.18	11.25	090
65290		A	Repair of eye socket wound	6.28	NA	NA	4.55	4.69	0.31	NA	NA	11.14	11.28	090
65400		A	Removal of eye lesion	7.18	7.66	8.16	6.03	6.10	0.30	15.14	15.64	13.51	13.58	090
65410		A	Biopsy of cornea	1.47	1.72	2.01	0.90	0.95	0.07	3.26	3.55	2.44	2.49	000
65420		A	Removal of eye lesion	4.16	7.03	8.40	4.07	4.35	0.21	11.40	12.77	8.44	8.72	090
65426		A	Removal of eye lesion	5.85	8.41	9.73	4.71	4.87	0.25	14.51	15.83	10.81	10.97	090
65430		A	Corneal smear	1.47	1.13	1.25	0.90	0.96	0.07	2.67	2.79	2.44	2.50	000
65435		A	Curette/treat cornea	0.92	0.89	0.97	0.67	0.70	0.04	1.85	1.93	1.63	1.66	000
65436		A	Curette/treat cornea	4.68	3.88	4.04	3.55	3.64	0.21	8.77	8.93	8.44	8.53	090
65450		A	Treatment of corneal lesion	3.27	3.76	3.99	3.68	3.88	0.16	7.19	7.42	7.11	7.31	090
65600		A	Revision of cornea	4.02	4.58	4.90	3.51	3.39	0.17	8.77	9.09	7.70	7.58	090
65710		A	Corneal transplant	13.97	NA	NA	10.49	11.02	0.61	NA	NA	25.07	25.60	090
65730		A	Corneal transplant	15.87	NA	NA	11.29	11.84	0.70	NA	NA	27.86	28.41	090
65750		A	Corneal transplant	16.48	NA	NA	11.00	11.73	0.74	NA	NA	28.22	28.95	090
65755		A	Corneal transplant	16.37	NA	NA	10.97	11.66	0.73	NA	NA	28.07	28.76	090
65770		A	Revise cornea with implant	19.28	NA	NA	12.09	12.92	0.87	NA	NA	32.24	33.07	090
65772		A	Correction of astigmatism	4.91	4.99	5.40	4.04	4.11	0.21	10.11	10.52	9.16	9.23	090
65775		A	Correction of astigmatism	6.66	NA	NA	5.46	5.83	0.28	NA	NA	12.40	12.77	090
65780		A	Ocular reconst, transplant	10.23	NA	NA	9.18	10.01	0.44	NA	NA	19.85	20.68	090
65781		A	Ocular reconst, transplant	17.64	NA	NA	11.94	13.24	0.44	NA	NA	30.02	31.32	090
65782		A	Ocular reconst, transplant	14.98	NA	NA	10.53	11.63	0.44	NA	NA	25.95	27.05	090
65800		A	Drainage of eye	1.91	1.45	1.71	1.07	1.15	0.09	3.45	3.71	3.07	3.15	000
65805		A	Drainage of eye	1.91	1.76	2.07	1.07	1.16	0.09	3.76	4.07	3.07	3.16	000
65810		A	Drainage of eye	5.61	NA	NA	4.82	4.73	0.24	NA	NA	10.67	10.58	090
65815		A	Drainage of eye	5.79	8.14	9.54	4.72	4.79	0.25	14.18	15.58	10.76	10.83	090
65820		A	Relieve inner eye pressure	8.62	NA	NA	7.88	8.76	0.40	NA	NA	16.90	17.78	090
65850		A	Incision of eye	11.14	NA	NA	7.56	8.22	0.52	NA	NA	19.22	19.88	090
65855		A	Laser surgery of eye	3.84	3.59	4.13	2.71	3.00	0.19	7.62	8.16	6.74	7.03	010
65860		A	Incise inner eye adhesions	3.54	3.37	3.87	2.16	2.42	0.18	7.09	7.59	5.88	6.14	090
65865		A	Incise inner eye adhesions	5.59	NA	NA	4.84	5.43	0.28	NA	NA	10.71	11.30	090
65870		A	Incise inner eye adhesions	7.14	NA	NA	5.88	6.28	0.31	NA	NA	13.33	13.73	090
65875		A	Incise inner eye adhesions	7.53	NA	NA	6.33	6.68	0.32	NA	NA	14.18	14.53	090
65880		A	Incise inner eye adhesions	8.08	NA	NA	6.54	6.91	0.35	NA	NA	14.97	15.34	090
65900		A	Remove eye lesion	12.16	NA	NA	9.15	9.98	0.54	NA	NA	21.85	22.68	090
65920		A	Remove implant of eye	9.64	NA	NA	7.72	8.06	0.41	NA	NA	17.77	18.11	090
65930		A	Remove blood clot from eye	8.18	NA	NA	5.98	6.62	0.37	NA	NA	14.53	15.17	090
66020		A	Injection treatment of eye	1.59	2.49	2.96	1.31	1.41	0.08	4.16	4.63	2.98	3.08	010
66030		A	Injection treatment of eye	1.25	2.36	2.81	1.18	1.26	0.06	3.67	4.12	2.49	2.57	010

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
66130		A	Remove eye lesion	7.68	7.75	9.15	5.04	5.47	0.38	15.81	17.21	13.10	13.53	090
66150		A	Glaucoma surgery	10.04	NA	NA	9.04	9.31	0.46	NA	NA	19.54	19.81	090
66155		A	Glaucoma surgery	10.03	NA	NA	9.02	9.27	0.41	NA	NA	19.46	19.71	090
66160		A	Glaucoma surgery	11.90	NA	NA	9.78	10.09	0.50	NA	NA	22.18	22.49	090
66165		A	Glaucoma surgery	9.75	NA	NA	8.97	9.17	0.40	NA	NA	19.12	19.32	090
66170		A	Glaucoma surgery	14.39	NA	NA	11.90	12.14	0.60	NA	NA	26.89	27.13	090
66172		A	Incision of eye	18.02	NA	NA	15.09	15.17	0.74	NA	NA	33.85	33.93	090
66180		A	Implant eye shunt	15.91	NA	NA	10.05	10.58	0.71	NA	NA	26.67	27.20	090
66185		A	Revise eye shunt	9.26	NA	NA	7.28	7.36	0.40	NA	NA	16.94	17.01	090
66220		A	Repair eye lesion	8.89	NA	NA	7.21	7.13	0.40	NA	NA	16.50	16.42	090
66225		A	Repair/graft eye lesion	12.28	NA	NA	8.41	8.65	0.55	NA	NA	21.24	21.48	090
66250		A	Follow-up surgery of eye	6.85	9.51	11.15	5.42	5.47	0.30	16.66	18.30	12.57	12.62	090
66500		A	Incision of iris	3.70	NA	NA	4.07	4.50	0.18	NA	NA	7.95	8.38	090
66505		A	Incision of iris	4.07	NA	NA	4.43	4.85	0.20	NA	NA	8.70	9.12	090
66600		A	Remove iris and lesion	9.80	NA	NA	8.55	8.30	0.43	NA	NA	18.78	18.53	090
66605		A	Removal of iris	13.90	NA	NA	9.43	9.87	0.77	NA	NA	24.10	24.54	090
66625		A	Removal of iris	5.12	NA	NA	4.34	4.63	0.26	NA	NA	9.72	10.01	090
66630		A	Removal of iris	7.03	NA	NA	5.52	5.66	0.31	NA	NA	12.86	13.00	090
66635		A	Removal of iris	7.12	NA	NA	5.55	5.69	0.31	NA	NA	12.98	13.12	090
66680		A	Repair iris & ciliary body	6.18	NA	NA	5.23	5.26	0.27	NA	NA	11.68	11.71	090
66682		A	Repair iris & ciliary body	7.08	NA	NA	6.92	6.69	0.31	NA	NA	14.31	14.08	090
66700		A	Destruction, ciliary body	5.02	4.96	5.17	3.73	3.88	0.24	10.22	10.43	8.99	9.14	090
66710		A	Ciliary transsleral therapy	5.02	4.73	5.06	3.71	3.81	0.23	9.98	10.31	8.96	9.06	090
66711		A	Ciliary endoscopic ablation	7.60	NA	NA	6.49	6.48	0.30	NA	NA	14.39	14.38	090
66720		A	Destruction, ciliary body	4.77	5.47	5.71	4.40	4.64	0.26	10.50	10.74	9.43	9.67	090
66740		A	Destruction, ciliary body	5.02	4.68	4.99	3.73	3.91	0.23	9.93	10.24	8.98	9.16	090
66761		A	Revision of iris	4.81	5.17	5.49	4.32	4.31	0.20	10.18	10.50	9.33	9.32	090
66762		A	Revision of iris	5.20	5.26	5.55	4.20	4.27	0.23	10.69	10.98	9.63	9.70	090
66770		A	Removal of inner eye lesion	5.92	5.71	5.99	4.74	4.79	0.26	11.89	12.17	10.92	10.97	090
66820		A	Incision, secondary cataract	3.88	NA	NA	4.76	5.55	0.19	NA	NA	8.83	9.62	090
66821		A	After cataract laser surgery	3.28	3.93	4.05	3.51	3.59	0.11	7.32	7.44	6.90	6.98	090
66825		A	Reposition intraocular lens	8.72	NA	NA	8.01	8.80	0.40	NA	NA	17.13	17.92	090
66830		A	Removal of lens lesion	9.19	NA	NA	6.57	6.86	0.36	NA	NA	16.12	16.41	090
66840		A	Removal of lens material	8.90	NA	NA	6.51	6.77	0.39	NA	NA	15.80	16.06	090
66850		A	Removal of lens material	10.23	NA	NA	7.31	7.56	0.45	NA	NA	17.99	18.24	090
66852		A	Removal of lens material	11.09	NA	NA	7.65	7.99	0.49	NA	NA	19.23	19.57	090
66920		A	Extraction of lens	9.85	NA	NA	6.87	7.19	0.44	NA	NA	17.16	17.48	090
66930		A	Extraction of lens	11.29	NA	NA	7.73	8.04	0.49	NA	NA	19.51	19.82	090
66940		A	Extraction of lens	10.05	NA	NA	7.25	7.51	0.43	NA	NA	17.73	17.99	090
66982		A	Cataract surgery, complex	14.73	NA	NA	9.28	9.72	0.63	NA	NA	24.64	25.08	090
66983		A	Cataract surg w/iol, 1 stage	10.11	NA	NA	6.30	6.16	0.14	NA	NA	16.55	16.41	090
66984		A	Cataract surg w/iol, 1 stage	10.28	NA	NA	6.62	7.22	0.39	NA	NA	17.29	17.89	090
66985		A	Insert lens prosthesis	9.63	NA	NA	7.33	7.42	0.36	NA	NA	17.32	17.41	090
66986		A	Exchange lens prosthesis	12.26	NA	NA	8.38	8.97	0.60	NA	NA	21.24	21.83	090
66990		A	Ophthalmic endoscope add-on	1.51	NA	NA	0.57	0.66	0.07	NA	NA	2.15	2.24	ZZZ
66999		C	Eye surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
67005		A	Partial removal of eye fluid	5.69	NA	NA	4.72	4.83	0.28	NA	NA	10.69	10.80	090
67010		A	Partial removal of eye fluid	6.86	NA	NA	5.16	5.35	0.34	NA	NA	12.36	12.55	090
67015		A	Release of eye fluid	6.91	NA	NA	5.88	6.31	0.34	NA	NA	13.13	13.56	090
67025		A	Replace eye fluid	7.83	8.11	8.94	6.11	6.19	0.34	16.28	17.11	14.28	14.36	090
67027		A	Implant eye drug system	11.33	NA	NA	7.61	7.90	0.54	NA	NA	19.48	19.77	090
67028		A	Injection eye drug	2.52	2.23	2.58	1.30	1.42	0.12	4.87	5.22	3.94	4.06	000
67030		A	Incise inner eye strands	5.83	NA	NA	5.77	5.83	0.24	NA	NA	11.84	11.90	090
67031		A	Laser surgery, eye strands	4.29	4.21	4.50	3.53	3.61	0.18	8.68	8.97	8.00	8.08	090
67036		A	Removal of inner eye fluid	13.00	NA	NA	8.35	8.93	0.58	NA	NA	21.93	22.51	090
67038		A	Strip retinal membrane	23.15	NA	NA	13.97	15.11	1.04	NA	NA	38.16	39.30	090

67039		A	Laser treatment of retina	16.25	NA	NA	11.08	11.91	0.71	NA	NA	28.04	28.87	090
67040		A	Laser treatment of retina	19.08	NA	NA	12.45	13.37	0.85	NA	NA	32.38	33.30	090
67101		A	Repair detached retina	8.52	8.75	9.03	6.38	6.49	0.37	17.64	17.92	15.27	15.38	090
67105		A	Repair detached retina	8.28	7.65	7.97	5.99	6.11	0.37	16.30	16.62	14.64	14.75	090
67107		A	Repair detached retina	16.26	NA	NA	10.74	11.16	0.73	NA	NA	27.73	28.15	090
67108		A	Repair detached retina	22.39	NA	NA	13.45	14.18	1.02	NA	NA	36.86	37.59	090
67110		A	Repair detached retina	9.93	9.22	9.98	7.20	7.34	0.44	19.59	20.35	17.57	17.71	090
67112		A	Rerepair detached retina	18.33	NA	NA	11.27	11.68	0.83	NA	NA	30.43	30.84	090
67115		A	Release encircling material	5.86	NA	NA	5.07	5.08	0.25	NA	NA	11.18	11.19	090
67120		A	Remove eye implant material	6.85	7.57	8.33	5.45	5.51	0.29	14.71	15.47	12.59	12.65	090
67121		A	Remove eye implant material	11.90	NA	NA	8.25	8.46	0.53	NA	NA	20.68	20.89	090
67141		A	Treatment of retina	5.94	5.59	5.79	4.81	4.85	0.26	11.79	11.99	11.01	11.05	090
67145		A	Treatment of retina	6.11	5.51	5.67	4.87	4.92	0.27	11.89	12.05	11.25	11.30	090
67208		A	Treatment of retinal lesion	7.44	5.84	6.05	5.38	5.48	0.33	13.61	13.82	13.15	13.25	090
67210		A	Treatment of retinal lesion	9.31	6.14	6.46	5.65	5.82	0.44	15.89	16.21	15.40	15.57	090
67218		A	Treatment of retinal lesion	20.14	NA	NA	11.08	11.88	0.92	NA	NA	32.14	32.94	090
67220		A	Treatment of choroid lesion	14.11	9.55	10.20	8.47	8.88	0.65	24.31	24.96	23.23	23.64	090
67221		R	Ocular photodynamic ther	3.45	3.03	4.01	1.45	1.71	0.20	6.68	7.66	5.10	5.36	000
67225		A	Eye photodynamic ther add-on	0.47	0.24	0.25	0.18	0.20	0.02	0.73	0.74	0.67	0.69	ZZZ
67227		A	Treatment of retinal lesion	7.32	6.19	6.48	5.33	5.47	0.33	13.84	14.13	12.98	13.12	090
67228		A	Treatment of retinal lesion	13.60	10.27	11.18	7.98	8.40	0.63	24.50	25.41	22.21	22.63	090
67250		A	Reinforce eye wall	9.40	NA	NA	7.90	8.85	0.47	NA	NA	17.77	18.72	090
67255		A	Reinforce/graft eye wall	9.89	NA	NA	8.71	9.60	0.44	NA	NA	19.04	19.93	090
67299		C	Eye surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
67311		A	Revise eye muscle	7.52	NA	NA	5.68	5.94	0.37	NA	NA	13.57	13.83	090
67312		A	Revise two eye muscles	9.41	NA	NA	6.42	6.67	0.43	NA	NA	16.26	16.51	090
67314		A	Revise eye muscle	8.51	NA	NA	6.37	6.51	0.39	NA	NA	15.27	15.41	090
67316		A	Revise two eye muscles	10.65	NA	NA	7.18	7.42	0.49	NA	NA	18.32	18.56	090
67318		A	Revise eye muscle(s)	8.84	NA	NA	6.76	6.89	0.41	NA	NA	16.01	16.14	090
67320		A	Revise eye muscle(s) add-on	4.32	NA	NA	1.62	1.87	0.22	NA	NA	6.16	6.41	ZZZ
67331		A	Eye surgery follow-up add-on	4.05	NA	NA	1.51	1.75	0.21	NA	NA	5.77	6.01	ZZZ
67332		A	Rerevise eye muscles add-on	4.48	NA	NA	1.68	1.94	0.23	NA	NA	6.39	6.65	ZZZ
67334		A	Revise eye muscle w/suture	3.97	NA	NA	1.48	1.71	0.20	NA	NA	5.65	5.88	ZZZ
67335		A	Eye suture during surgery	2.49	NA	NA	0.93	1.07	0.13	NA	NA	3.55	3.69	ZZZ
67340		A	Revise eye muscle add-on	4.92	NA	NA	1.84	2.11	0.25	NA	NA	7.01	7.28	ZZZ
67343		A	Release eye tissue	8.22	NA	NA	6.25	6.45	0.37	NA	NA	14.84	15.04	090
67345		A	Destroy nerve of eye muscle	2.96	2.27	2.50	1.77	1.95	0.17	5.40	5.63	4.90	5.08	010
67350		A	Biopsy eye muscle	2.87	NA	NA	1.69	1.83	0.15	NA	NA	4.71	4.85	000
67399		C	Eye muscle surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
67400		A	Explore/biopsy eye socket	10.88	NA	NA	9.71	10.87	0.56	NA	NA	21.15	22.31	090
67405		A	Explore/drain eye socket	8.92	NA	NA	8.48	9.45	0.44	NA	NA	17.84	18.81	090
67412		A	Explore/treat eye socket	10.12	NA	NA	8.81	10.40	0.48	NA	NA	19.41	21.00	090
67413		A	Explore/treat eye socket	9.99	NA	NA	8.94	10.31	0.50	NA	NA	19.43	20.80	090
67414		A	Explr/decompress eye socket	17.72	NA	NA	11.99	12.03	0.65	NA	NA	30.36	30.40	090
67415		A	Aspiration, orbital contents	1.76	NA	NA	0.63	0.73	0.09	NA	NA	2.48	2.58	000
67420		A	Explore/treat eye socket	21.52	NA	NA	14.59	16.69	1.15	NA	NA	37.26	39.36	090
67430		A	Explore/treat eye socket	14.87	NA	NA	12.66	14.33	0.86	NA	NA	28.39	30.06	090
67440		A	Explore/drain eye socket	14.45	NA	NA	12.12	13.73	0.70	NA	NA	27.27	28.88	090
67445		A	Explr/decompress eye socket	18.90	NA	NA	12.58	13.58	0.90	NA	NA	32.38	33.38	090
67450		A	Explore/biopsy eye socket	14.99	NA	NA	12.63	14.18	0.68	NA	NA	28.30	29.85	090
67500		A	Inject/treat eye socket	1.44	0.61	0.66	0.48	0.34	0.05	2.10	2.15	1.97	1.83	000
67505		A	Inject/treat eye socket	1.27	0.53	0.65	0.40	0.33	0.05	1.85	1.97	1.72	1.65	000
67515		A	Inject/treat eye socket	1.40	0.81	0.65	0.64	0.45	0.03	2.24	2.08	2.07	1.88	000
67550		A	Insert eye socket implant	11.42	NA	NA	10.04	10.99	0.72	NA	NA	22.18	23.13	090
67560		A	Revise eye socket implant	11.83	NA	NA	10.07	11.05	0.60	NA	NA	22.50	23.48	090
67570		A	Decompress optic nerve	14.13	NA	NA	11.33	13.02	0.68	NA	NA	26.14	27.83	090
67599		C	Orbit surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
67700		A	Drainage of eyelid abscess	1.35	4.42	5.62	1.21	1.26	0.07	5.84	7.04	2.63	2.68	010
67710		A	Incision of eyelid	1.02	3.79	4.98	1.10	1.18	0.05	4.86	6.05	2.17	2.25	010
67715		A	Incision of eyelid fold	1.22	3.91	5.01	1.18	1.26	0.06	5.19	6.29	2.46	2.54	010
67800		A	Remove eyelid lesion	1.38	1.44	1.58	0.93	1.01	0.07	2.89	3.03	2.38	2.46	010
67801		A	Remove eyelid lesions	1.88	1.73	1.90	1.12	1.23	0.09	3.70	3.87	3.09	3.20	010
67805		A	Remove eyelid lesions	2.22	2.25	2.45	1.46	1.60	0.11	4.58	4.78	3.79	3.93	010
67808		A	Remove eyelid lesion(s)	4.42	NA	NA	3.70	3.75	0.19	NA	NA	8.31	8.36	090
67810		A	Biopsy of eyelid	1.48	3.87	3.47	0.66	0.68	0.06	5.41	5.01	2.20	2.22	000
67820		A	Revise eyelashes	0.71	0.45	0.56	0.52	0.55	0.04	1.20	1.31	1.27	1.30	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
67825		A	Revise eyelashes	1.38	1.44	1.66	1.30	1.38	0.07	2.89	3.11	2.75	2.83	010
67830		A	Revise eyelashes	1.70	4.10	5.17	1.36	1.47	0.08	5.88	6.95	3.14	3.25	010
67835		A	Revise eyelashes	5.55	NA	NA	4.18	4.51	0.28	NA	NA	10.01	10.34	090
67840		A	Remove eyelid lesion	2.04	4.01	5.11	1.50	1.61	0.10	6.15	7.25	3.64	3.75	010
67850		A	Treat eyelid lesion	1.69	3.26	3.34	1.43	1.46	0.07	5.02	5.10	3.19	3.22	010
67875		A	Closure of eyelid by suture	1.35	2.45	3.09	0.86	0.92	0.07	3.87	4.51	2.28	2.34	000
67880		A	Revision of eyelid	4.42	5.58	6.35	3.67	3.77	0.19	10.19	10.96	8.28	8.38	090
67882		A	Revision of eyelid	5.81	6.56	7.36	4.62	4.76	0.25	12.62	13.42	10.68	10.82	090
67900		A	Repair brow defect	6.63	7.52	8.68	4.72	5.12	0.38	14.53	15.69	11.73	12.13	090
67901		A	Repair eyelid defect	7.39	9.25	6.36	5.46	5.42	0.54	17.18	14.29	13.39	13.35	090
67902		A	Repair eyelid defect	9.60	NA	NA	6.58	5.74	0.60	NA	NA	16.78	15.94	090
67903		A	Repair eyelid defect	6.36	6.82	8.88	4.48	5.25	0.47	13.65	15.71	11.31	12.08	090
67904		A	Repair eyelid defect	7.75	8.47	9.34	5.54	5.31	0.41	16.63	17.50	13.70	13.47	090
67906		A	Repair eyelid defect	6.78	NA	NA	4.63	4.93	0.46	NA	NA	11.87	12.17	090
67908		A	Repair eyelid defect	5.12	5.71	6.40	4.25	5.07	0.28	11.11	11.80	9.65	10.47	090
67909		A	Revise eyelid defect	5.39	6.39	7.62	4.31	4.79	0.31	12.09	13.32	10.01	10.49	090
67911		A	Revise eyelid defect	7.30	NA	NA	5.21	4.89	0.31	NA	NA	12.82	12.50	090
67912		A	Correction eyelid w/implant	6.17	13.18	17.49	4.74	5.33	0.28	19.63	23.94	11.19	11.78	090
67914		A	Repair eyelid defect	3.67	4.88	5.98	2.76	2.98	0.19	8.74	9.84	6.62	6.84	090
67915		A	Repair eyelid defect	3.18	4.54	5.62	2.57	2.74	0.16	7.88	8.96	5.91	6.08	090
67916		A	Repair eyelid defect	5.30	6.53	7.67	4.26	4.64	0.28	12.11	13.25	9.84	10.22	090
67917		A	Repair eyelid defect	6.01	6.91	8.07	4.54	4.94	0.36	13.28	14.44	10.91	11.31	090
67921		A	Repair eyelid defect	3.39	4.75	5.83	2.64	2.83	0.17	8.31	9.39	6.20	6.39	090
67922		A	Repair eyelid defect	3.06	4.44	5.54	2.51	2.69	0.15	7.65	8.75	5.72	5.90	090
67923		A	Repair eyelid defect	5.87	6.63	7.75	4.46	4.84	0.30	12.80	13.92	10.63	11.01	090
67924		A	Repair eyelid defect	5.78	7.11	8.47	4.19	4.56	0.30	13.19	14.55	10.27	10.64	090
67930		A	Repair eyelid wound	3.60	4.50	5.41	1.85	2.09	0.19	8.29	9.20	5.64	5.88	010
67935		A	Repair eyelid wound	6.21	6.95	8.13	3.70	4.23	0.39	13.55	14.73	10.30	10.83	090
67938		A	Remove eyelid foreign body	1.33	3.95	5.02	1.27	1.26	0.06	5.34	6.41	2.66	2.65	010
67950		A	Revision of eyelid	5.81	6.80	8.17	4.47	5.03	0.36	12.97	14.34	10.64	11.20	090
67961		A	Revision of eyelid	5.68	7.00	8.26	4.43	4.88	0.33	13.01	14.27	10.44	10.89	090
67966		A	Revision of eyelid	8.75	8.29	8.92	5.93	5.65	0.37	17.41	18.04	15.05	14.77	090
67971		A	Reconstruction of eyelid	9.78	NA	NA	6.40	7.06	0.53	NA	NA	16.71	17.37	090
67973		A	Reconstruction of eyelid	12.85	NA	NA	8.02	8.99	0.75	NA	NA	21.62	22.59	090
67974		A	Reconstruction of eyelid	12.82	NA	NA	8.04	8.93	0.75	NA	NA	21.61	22.50	090
67975		A	Reconstruction of eyelid	9.12	NA	NA	6.16	6.75	0.50	NA	NA	15.78	16.37	090
67999		C	Revision of eyelid	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
68020		A	Incise/drain eyelid lining	1.37	1.28	1.38	1.09	1.18	0.06	2.71	2.81	2.52	2.61	010
68040		A	Treatment of eyelid lesions	0.85	0.62	0.69	0.37	0.42	0.04	1.51	1.58	1.26	1.31	000
68100		A	Biopsy of eyelid lining	1.35	2.41	3.04	0.88	0.93	0.07	3.83	4.46	2.30	2.35	000
68110		A	Remove eyelid lining lesion	1.77	3.15	3.86	1.52	1.62	0.09	5.01	5.72	3.38	3.48	010
68115		A	Remove eyelid lining lesion	2.36	4.44	5.58	1.74	1.87	0.12	6.92	8.06	4.22	4.35	010
68130		A	Remove eyelid lining lesion	4.92	6.84	8.24	4.16	4.49	0.24	12.00	13.40	9.32	9.65	090
68135		A	Remove eyelid lining lesion	1.84	1.63	1.77	1.51	1.62	0.09	3.56	3.70	3.44	3.55	010
68200		A	Treat eyelid by injection	0.49	0.47	0.52	0.30	0.32	0.02	0.98	1.03	0.81	0.83	000
68320		A	Revise/graft eyelid lining	6.36	9.42	10.82	5.47	5.51	0.27	16.05	17.45	12.10	12.14	090
68325		A	Revise/graft eyelid lining	8.35	NA	NA	6.16	6.45	0.44	NA	NA	14.95	15.24	090
68326		A	Revise/graft eyelid lining	8.14	NA	NA	6.12	6.34	0.35	NA	NA	14.61	14.83	090
68328		A	Revise/graft eyelid lining	9.17	NA	NA	6.66	7.13	0.54	NA	NA	16.37	16.84	090
68330		A	Revise eyelid lining	5.57	7.64	8.97	4.59	4.69	0.24	13.45	14.78	10.40	10.50	090
68335		A	Revise/graft eyelid lining	8.18	NA	NA	6.13	6.32	0.36	NA	NA	14.67	14.86	090
68340		A	Separate eyelid adhesions	4.79	7.07	8.42	3.99	4.07	0.21	12.07	13.42	8.99	9.07	090
68360		A	Revise eyelid lining	4.99	6.60	7.68	4.07	4.15	0.22	11.81	12.89	9.28	9.36	090
68362		A	Revise eyelid lining	8.33	NA	NA	6.18	6.35	0.36	NA	NA	14.87	15.04	090
68371		A	Harvest eye tissue, alograft	4.89	NA	NA	4.18	4.59	0.44	NA	NA	9.51	9.92	010
68399		C	Eyelid lining surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY

68400		A	Incise/drain tear gland	1.69	4.44	5.54	1.22	1.67	0.08	6.21	7.31	2.99	3.44	010
68420		A	Incise/drain tear sac	2.30	4.70	5.82	1.46	1.94	0.11	7.11	8.23	3.87	4.35	010
68440		A	Incise tear duct opening	0.94	1.28	1.88	1.21	1.26	0.05	2.27	2.87	2.20	2.25	010
68500		A	Removal of tear gland	12.38	NA	NA	8.97	9.54	0.55	NA	NA	21.90	22.47	090
68505		A	Partial removal, tear gland	12.30	NA	NA	9.11	10.27	0.55	NA	NA	21.96	23.12	090
68510		A	Biopsy of tear gland	4.60	5.37	6.84	2.11	2.10	0.23	10.20	11.67	6.94	6.93	000
68520		A	Removal of tear sac	8.50	NA	NA	6.68	7.24	0.37	NA	NA	15.55	16.11	090
68525		A	Biopsy of tear sac	4.42	NA	NA	1.64	1.93	0.22	NA	NA	6.28	6.57	000
68530		A	Clearance of tear duct	3.65	5.75	7.57	2.14	2.52	0.18	9.58	11.40	5.97	6.35	010
68540		A	Remove tear gland lesion	11.83	NA	NA	8.71	9.22	0.52	NA	NA	21.06	21.57	090
68550		A	Remove tear gland lesion	14.74	NA	NA	10.52	11.14	0.80	NA	NA	26.06	26.68	090
68700		A	Repair tear ducts	7.59	NA	NA	5.74	5.92	0.32	NA	NA	13.65	13.83	090
68705		A	Revise tear duct opening	2.06	3.12	3.91	1.63	1.75	0.10	5.28	6.07	3.79	3.91	010
68720		A	Create tear sac drain	9.70	NA	NA	7.10	7.67	0.44	NA	NA	17.24	17.81	090
68745		A	Create tear duct drain	9.62	NA	NA	7.45	7.76	0.52	NA	NA	17.59	17.90	090
68750		A	Create tear duct drain	9.78	NA	NA	7.64	8.11	0.43	NA	NA	17.85	18.32	090
68760		A	Close tear duct opening	1.73	2.66	3.32	1.50	1.60	0.09	4.48	5.14	3.32	3.42	010
68761		A	Close tear duct opening	1.36	1.88	2.17	1.28	1.31	0.06	3.30	3.59	2.70	2.73	010
68770		A	Close tear system fistula	8.01	NA	NA	5.88	3.86	0.35	NA	NA	14.24	12.22	090
68801		A	Dilate tear duct opening	0.94	1.82	1.91	1.45	1.47	0.05	2.81	2.90	2.44	2.46	010
68810		A	Probe nasolacrimal duct	2.59	3.49	3.62	2.76	2.69	0.10	6.18	6.31	5.45	5.38	010
68811		A	Probe nasolacrimal duct	2.35	NA	NA	2.17	2.35	0.13	NA	NA	4.65	4.83	010
68815		A	Probe nasolacrimal duct	3.20	6.57	7.82	2.49	2.73	0.17	9.94	11.19	5.86	6.10	010
68840		A	Explore/irrigate tear ducts	1.25	1.56	1.59	1.32	1.17	0.06	2.87	2.90	2.63	2.48	010
68850		A	Injection for tear sac x-ray	0.80	0.72	0.84	0.60	0.66	0.04	1.56	1.68	1.44	1.50	000
68899		C	Tear duct system surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
69000		A	Drain external ear lesion	1.45	2.70	2.84	1.24	1.33	0.12	4.27	4.41	2.81	2.90	010
69005		A	Drain external ear lesion	2.11	2.74	2.88	1 45	1.74	0.17	5.02	5.16	3.73	4.02	010
69020		A	Drain outer ear canal lesion	1.48	3.84	3.95	1.76	1.99	0.12	5.44	5.55	3.36	3.59	010
69100		A	Biopsy of external ear	0.81	1.80	1.73	0.38	0.39	0.03	2.64	2.57	1.22	1.23	000
69105		A	Biopsy of external ear canal	0.85	2.47	2.37	0.65	0.74	0.07	3.39	3.29	1.57	1.66	000
69110		A	Remove external ear, partial	3.43	7.50	6.93	4.23	4.41	0.30	11.23	10.66	7.96	8.14	090
69120		A	Removal of external ear	4.04	NA	NA	5.09	5.91	0.38	NA	NA	9.51	10.33	090
69140		A	Remove ear canal lesion(s)	7.96	NA	NA	12.30	13.04	0.65	NA	NA	20.91	21.65	090
69145		A	Remove ear canal lesion(s)	2.62	6.53	5.97	3.10	3.25	0.21	9.36	8.80	5.93	6.08	090
69150		A	Extensive ear canal surgery	13.41	NA	NA	10.55	12.69	1.22	NA	NA	25.18	27.32	090
69155		A	Extensive ear/neck surgery	22.96	NA	NA	15.01	18.41	1.92	NA	NA	39.89	43.29	090
69200		A	Clear outer ear canal	0.77	2.03	2.29	0.57	0.56	0.06	2.86	3.12	1.40	1.39	000
69205		A	Clear outer ear canal	1.20	NA	NA	1.14	1.31	0.10	NA	NA	2.44	2.61	010
69210		A	Remove impacted ear wax	0.61	0.55	0.61	0.16	0.21	0.05	1.21	1.27	0.82	0.87	000
69220		A	Clean out mastoid cavity	0.83	2.37	2.36	0.61	0.70	0.07	3.27	3.26	1.51	1.60	000
69222		A	Clean out mastoid cavity	1.40	3.66	3.80	1.73	1.98	0.12	5.18	5.32	3.25	3.50	010
69300		R	Revise external ear	6.35	9.61	5.57	4.51	4.29	0.72	16.68	12.64	11.58	11.36	YYY
69310		A	Rebuild outer ear canal	10.77	NA	NA	14.19	15.76	0.85	NA	NA	25.81	27.38	090
69320		A	Rebuild outer ear canal	16.93	NA	NA	18.16	20.92	1.37	NA	NA	36.46	39.22	090
69399		C	Outer ear surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
69400		A	Inflate middle ear canal	0.83	2.60	2.27	0.61	0.66	0.07	3.50	3.17	1.51	1.56	000
69401		A	Inflate middle ear canal	0.63	1.46	1.30	0.56	0.63	0.05	2.14	1.98	1.24	1.31	000
69405		A	Catheterize middle ear canal	2.63	3.38	3.47	1.78	2.18	0.21	6.22	6.31	4.62	5.02	010
69420		A	Incision of eardrum	1.33	3.05	3.13	1.41	1.55	0.11	4.49	4.57	2.85	2.99	010
69421		A	Incision of eardrum	1.73	NA	NA	1.68	2.04	0.15	NA	NA	3.56	3.92	010
69424		A	Remove ventilating tube	0.85	2.18	2.18	0.62	0.67	0.07	3.10	3.10	1.54	1.59	000
69433		A	Create eardrum opening	1.52	3.06	3.08	1.44	1.59	0.13	4.71	4.73	3.09	3.24	010
69436		A	Create eardrum opening	1.96	NA	NA	1.72	2.15	0.19	NA	NA	3.87	4.30	010
69440		A	Exploration of middle ear	7.56	NA	NA	8.31	8.66	0.61	NA	NA	16.48	16.83	090
69450		A	Eardrum revision	5.56	NA	NA	6.96	7.01	0.45	NA	NA	12.97	13.02	090
69501		A	Mastoidectomy	9.06	NA	NA	7.80	8.70	0.73	NA	NA	17.59	18.49	090
69502		A	Mastoidectomy	12.36	NA	NA	10.02	11.20	1.00	NA	NA	23.38	24.56	090
69505		A	Remove mastoid structures	12.97	NA	NA	14.81	16.60	1.05	NA	NA	28.83	30.62	090
69511		A	Extensive mastoid surgery	13.50	NA	NA	14.89	16.83	1.09	NA	NA	29.48	31.42	090
69530		A	Extensive mastoid surgery	20.15	NA	NA	17.97	20.72	1.54	NA	NA	39.66	42.41	090
69535		A	Remove part of temporal bone	37.17	NA	NA	24.19	30.02	2.92	NA	NA	64.28	70.11	090
69540		A	Remove ear lesion	1.20	3.62	3.71	1.70	1.90	0.10	4.92	5.01	3.00	3.20	010
69550		A	Remove ear lesion	10.97	NA	NA	13.06	14.41	0.89	NA	NA	24.92	26.27	090
69552		A	Remove ear lesion	19.61	NA	NA	16.55	19.64	1.59	NA	NA	37.75	40.84	090
69554		A	Remove ear lesion	35.63	NA	NA	22.41	28.35	2.91	NA	NA	60.95	66.89	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
69601		A	Mastoid surgery revision	13.22	NA	NA	10.84	12.21	1.07	NA	NA	25.13	26.50	090
69602		A	Mastoid surgery revision	13.56	NA	NA	11.56	12.81	1.10	NA	NA	26.22	27.47	090
69603		A	Mastoid surgery revision	14.00	NA	NA	15.03	17.53	1.14	NA	NA	30.17	32.67	090
69604		A	Mastoid surgery revision	14.00	NA	NA	11.67	13.19	1.14	NA	NA	26.81	28.33	090
69605		A	Mastoid surgery revision	18.46	NA	NA	17.50	20.09	1.50	NA	NA	37.46	40.05	090
69610		A	Repair of eardrum	4.42	4.47	5.28	2.30	3.03	0.36	9.25	10.06	7.08	7.81	010
69620		A	Repair of eardrum	5.88	10.04	10.85	5.29	6.04	0.48	16.40	17.21	11.65	12.40	090
69631		A	Repair eardrum structures	9.85	NA	NA	10.50	11.03	0.80	NA	NA	21.15	21.68	090
69632		A	Rebuild eardrum structures	12.73	NA	NA	12.08	13.12	1.03	NA	NA	25.84	26.88	090
69633		A	Rebuild eardrum structures	12.08	NA	NA	11.91	12.77	0.98	NA	NA	24.97	25.83	090
69635		A	Repair eardrum structures	13.31	NA	NA	14.83	16.26	1.08	NA	NA	29.22	30.65	090
69636		A	Rebuild eardrum structures	15.20	NA	NA	16.60	18.63	1.23	NA	NA	33.03	35.06	090
69637		A	Rebuild eardrum structures	15.09	NA	NA	16.58	18.56	1.22	NA	NA	32.89	34.87	090
69641		A	Revise middle ear & mastoid	12.69	NA	NA	11.31	12.41	1.03	NA	NA	25.03	26.13	090
69642		A	Revise middle ear & mastoid	16.81	NA	NA	14.05	15.72	1.36	NA	NA	32.22	33.89	090
69643		A	Revise middle ear & mastoid	15.36	NA	NA	12.81	14.32	1.24	NA	NA	29.41	30.92	090
69644		A	Revise middle ear & mastoid	17.00	NA	NA	17.09	19.57	1.37	NA	NA	35.46	37.94	090
69645		A	Revise middle ear & mastoid	16.48	NA	NA	17.01	19.27	1.33	NA	NA	34.82	37.08	090
69646		A	Revise middle ear & mastoid	18.14	NA	NA	17.42	19.93	1.46	NA	NA	37.02	39.53	090
69650		A	Release middle ear bone	9.65	NA	NA	8.64	9.59	0.78	NA	NA	19.07	20.02	090
69660		A	Revise middle ear bone	11.88	NA	NA	9.52	10.77	0.96	NA	NA	22.36	23.61	090
69661		A	Revise middle ear bone	15.72	NA	NA	12.17	14.07	1.27	NA	NA	29.16	31.06	090
69662		A	Revise middle ear bone	15.42	NA	NA	11.29	13.14	1.25	NA	NA	27.96	29.81	090
69666		A	Repair middle ear structures	9.74	NA	NA	8.92	9.71	0.79	NA	NA	19.45	20.24	090
69667		A	Repair middle ear structures	9.75	NA	NA	8.83	9.69	0.79	NA	NA	19.37	20.23	090
69670		A	Remove mastoid air cells	11.55	NA	NA	10.15	11.32	0.93	NA	NA	22.63	23.80	090
69676		A	Remove middle ear nerve	9.51	NA	NA	9.63	10.47	0.81	NA	NA	19.95	20.79	090
69700		A	Close mastoid fistula	8.22	NA	NA	7.65	8.84	0.67	NA	NA	16.54	17.73	090
69711		A	Remove/repair hearing aid	10.42	NA	NA	9.42	10.45	0.83	NA	NA	20.67	21.70	090
69714		A	Implant temple bone w/stimul	14.23	NA	NA	10.56	12.14	1.13	NA	NA	25.92	27.50	090
69715		A	Temple bne implnt w/stimulat	18.72	NA	NA	11.94	14.26	1.48	NA	NA	32.14	34.46	090
69717		A	Temple bone implant revision	15.21	NA	NA	11.31	13.68	0.90	NA	NA	27.42	29.79	090
69718		A	Revise temple bone implant	18.97	NA	NA	20.26	16.54	3.21	NA	NA	42.44	38.72	090
69720		A	Release facial nerve	14.48	NA	NA	12.75	14.08	1.16	NA	NA	28.39	29.72	090
69725		A	Release facial nerve	27.36	NA	NA	16.30	19.17	2.44	NA	NA	46.10	48.97	090
69740		A	Repair facial nerve	16.12	NA	NA	11.17	12.85	1.27	NA	NA	28.56	30.24	090
69745		A	Repair facial nerve	16.84	NA	NA	11.87	14.20	1.14	NA	NA	29.85	32.18	090
69799		C	Middle ear surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
69801		A	Incise inner ear	8.55	NA	NA	8.75	9.28	0.69	NA	NA	17.99	18.52	090
69802		A	Incise inner ear	13.32	NA	NA	10.54	11.88	1.06	NA	NA	24.92	26.26	090
69805		A	Explore inner ear	14.49	NA	NA	9.80	11.36	1.12	NA	NA	25.41	26.97	090
69806		A	Explore inner ear	12.45	NA	NA	9.37	10.62	1.00	NA	NA	22.82	24.07	090
69820		A	Establish inner ear window	10.32	NA	NA	9.83	10.87	0.90	NA	NA	21.05	22.09	090
69840		A	Revise inner ear window	10.24	NA	NA	11.67	12.80	0.79	NA	NA	22.70	23.83	090
69905		A	Remove inner ear	11.08	NA	NA	10.08	11.03	0.90	NA	NA	22.06	23.01	090
69910		A	Remove inner ear & mastoid	13.73	NA	NA	9.79	11.39	1.07	NA	NA	24.59	26.19	090
69915		A	Incise inner ear nerve	22.57	NA	NA	13.38	15.69	1.69	NA	NA	37.64	39.95	090
69930		A	Implant cochlear device	17.54	NA	NA	11.81	14.02	1.36	NA	NA	30.71	32.92	090
69949		C	Inner ear surgery procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
69950		A	Incise inner ear nerve	27.38	NA	NA	15.12	17.96	2.28	NA	NA	44.78	47.62	090
69955		A	Release facial nerve	29.14	NA	NA	17.30	20.36	2.48	NA	NA	48.92	51.98	090
69960		A	Release inner ear canal	29.14	NA	NA	15.41	18.89	2.17	NA	NA	46.72	50.20	090
69970		A	Remove inner ear lesion	32.13	NA	NA	17.78	21.90	2.41	NA	NA	52.32	56.44	090
69979		C	Temporal bone surgery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
69990		R	Microsurgery add-on	3.46	NA	NA	1.29	1.67	0.69	NA	NA	5.64	6.02	ZZZ
70010		A	Contrast x-ray of brain	1.19	2.77	4.23	NA	NA	0.27	4.23	5.69	NA	NA	XXX

70010	26	A	Contrast x-ray of brain	1.19	0.37	0.39	0.37	0.39	0.05	1.61	1.63	1.61	1.63	XXX
70010	TC	A	Contrast x-ray of brain	0.00	2.40	3.85	NA	NA	0.22	2.62	4.07	NA	NA	XXX
70015		A	Contrast x-ray of brain	1.19	2.85	2.01	NA	NA	0.16	4.20	3.36	NA	NA	XXX
70015	26	A	Contrast x-ray of brain	1.19	0.38	0.39	0.38	0.39	0.08	1.65	1.66	1.65	1.66	XXX
70015	TC	A	Contrast x-ray of brain	0.00	2.47	1.63	NA	NA	0.08	2.55	1.71	NA	NA	XXX
70030		A	X-ray eye for foreign body	0.17	0.60	0.51	NA	NA	0.03	0.80	0.71	NA	NA	XXX
70030	26	A	X-ray eye for foreign body	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
70030	TC	A	X-ray eye for foreign body	0.00	0.55	0.45	NA	NA	0.02	0.57	0.47	NA	NA	XXX
70100		A	X-ray exam of jaw	0.18	0.63	0.59	NA	NA	0.03	0.84	0.80	NA	NA	XXX
70100	26	A	X-ray exam of jaw	0.18	0.05	0.06	0.05	0.06	0.01	0.24	0.25	0.24	0.25	XXX
70100	TC	A	X-ray exam of jaw	0.00	0.58	0.54	NA	NA	0.02	0.60	0.56	NA	NA	XXX
70110		A	X-ray exam of jaw	0.25	0.80	0.73	NA	NA	0.05	1.10	1.03	NA	NA	XXX
70110	26	A	X-ray exam of jaw	0.25	0.08	0.08	0.08	0.08	0.01	0.34	0.34	0.34	0.34	XXX
70110	TC	A	X-ray exam of jaw	0.00	0.72	0.65	NA	NA	0.04	0.76	0.69	NA	NA	XXX
70120		A	X-ray exam of mastoids	0.18	0.69	0.68	NA	NA	0.05	0.92	0.91	NA	NA	XXX
70120	26	A	X-ray exam of mastoids	0.18	0.05	0.06	0.05	0.06	0.01	0.24	0.25	0.24	0.25	XXX
70120	TC	A	X-ray exam of mastoids	0.00	0.64	0.63	NA	NA	0.04	0.68	0.67	NA	NA	XXX
70130		A	X-ray exam of mastoids	0.34	1.16	0.96	NA	NA	0.07	1.57	1.37	NA	NA	XXX
70130	26	A	X-ray exam of mastoids	0.34	0.10	0.11	0.10	0.11	0.02	0.46	0.47	0.46	0.47	XXX
70130	TC	A	X-ray exam of mastoids	0.00	1.06	0.85	NA	NA	0.05	1.11	0.90	NA	NA	XXX
70134		A	X-ray exam of middle ear	0.34	0.92	0.86	NA	NA	0.07	1.33	1.27	NA	NA	XXX
70134	26	A	X-ray exam of middle ear	0.34	0.11	0.11	0.11	0.11	0.02	0.47	0.47	0.47	0.47	XXX
70134	TC	A	X-ray exam of middle ear	0.00	0.82	0.75	NA	NA	0.05	0.87	0.80	NA	NA	XXX
70140		A	X-ray exam of faclal bones	0.19	0.55	0.65	NA	NA	0.05	0.79	0.89	NA	NA	XXX
70140	26	A	X-ray exam of facial bones	0.19	0.05	0.06	0.05	0.06	0.01	0.25	0.26	0.25	0.26	XXX
70140	TC	A	X-ray exam of faclal bones	0.00	0.50	0.59	NA	NA	0.04	0.54	0.63	NA	NA	XXX
70150		A	X-ray exam of facial bones	0.26	0.85	0.86	NA	NA	0.06	1.17	1.18	NA	NA	XXX
70150	26	A	X-ray exam of facial bones	0.26	0.07	0.08	0.07	0.08	0.01	0.34	0.35	0.34	0.35	XXX
70150	TC	A	X-ray exam of facial bones	0.00	0.77	0.78	NA	NA	0.05	0.82	0.83	NA	NA	XXX
70160		A	X-ray exam of nasal bones	0.17	0.70	0.61	NA	NA	0.03	0.90	0.81	NA	NA	XXX
70160	26	A	X-ray exam of nasal bones	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
70160	TC	A	X-ray exam of nasal bones	0.00	0.65	0.55	NA	NA	0.02	0.67	0.57	NA	NA	XXX
70170		A	X-ray exam of tear duct	0.30	NA	NA	NA	NA	0.07	NA	NA	NA	NA	XXX
70170	26	A	X-ray exam of tear duct	0.30	0.09	0.10	0.09	0.10	0.01	0.40	0.41	0.40	0.41	XXX
70170	TC	A	X-ray exam of tear duct	0.00	NA	NA	NA	NA	0.06	NA	NA	NA	NA	XXX
70190		A	X-ray exam of eye sockets	0.21	0.72	0.70	NA	NA	0.05	0.98	0.96	NA	NA	XXX
70190	26	A	X-ray exam of eye sockets	0.21	0.06	0.07	0.06	0.07	0.01	0.28	0.29	0.28	0.29	XXX
70190	TC	A	X-ray exam of eye sockets	0.00	0.66	0.63	NA	NA	0.04	0.70	0.67	NA	NA	XXX
70200		A	X-ray exam of eye sockets	0.28	0.87	0.87	NA	NA	0.06	1.21	1.21	NA	NA	XXX
70200	26	A	X-ray exam of eye sockets	0.28	0.08	0.09	0.08	0.09	0.01	0.37	0.38	0.37	0.38	XXX
70200	TC	A	X-ray exam of eye sockets	0.00	0.79	0.78	NA	NA	0.05	0.84	0.83	NA	NA	XXX
70210		A	X-ray exam of sinuses	0.17	0.57	0.65	NA	NA	0.05	0.79	0.87	NA	NA	XXX
70210	26	A	X-ray exam of sinuses	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
70210	TC	A	X-ray exam of sinuses	0.00	0.52	0.60	NA	NA	0.04	0.56	0.64	NA	NA	XXX
70220		A	X-ray exam of sinuses	0.25	0.72	0.83	NA	NA	0.06	1.03	1.14	NA	NA	XXX
70220	26	A	X-ray exam of sinuses	0.25	0.07	0.08	0.07	0.08	0.01	0.33	0.34	0.33	0.34	XXX
70220	TC	A	X-ray exam of sinuses	0.00	0.65	0.75	NA	NA	0.05	0.70	0.80	NA	NA	XXX
70240		A	X-ray exam, pituitary saddle	0.19	0.61	0.51	NA	NA	0.03	0.83	0.73	NA	NA	XXX
70240	26	A	X-ray exam, pituitary saddle	0.19	0.06	0.06	0.06	0.06	0.01	0.26	0.26	0.26	0.26	XXX
70240	TC	A	X-ray exam, pituitary saddle	0.00	0.55	0.45	NA	NA	0.02	0.57	0.47	NA	NA	XXX
70250		A	X-ray exam of skull	0.24	0.70	0.70	NA	NA	0.05	0.99	0.99	NA	NA	XXX
70250	26	A	X-ray exam of skull	0.24	0.07	0.08	0.07	0.08	0.01	0.32	0.33	0.32	0.33	XXX
70250	TC	A	X-ray exam of skull	0.00	0.64	0.63	NA	NA	0.04	0.68	0.67	NA	NA	XXX
70260		A	X-ray exam of skull	0.34	0.88	0.97	NA	NA	0.08	1.30	1.39	NA	NA	XXX
70260	26	A	X-ray exam of skull	0.34	0.10	0.11	0.10	0.11	0.02	0.46	0.47	0.46	0.47	XXX
70260	TC	A	X-ray exam of skull	0.00	0.78	0.86	NA	NA	0.06	0.84	0.92	NA	NA	XXX
70300		A	X-ray exam of teeth	0.10	0.24	0.29	NA	NA	0.03	0.37	0.42	NA	NA	XXX
70300	26	A	X-ray exam of teeth	0.10	0.03	0.05	0.03	0.05	0.01	0.14	0.16	0.14	0.16	XXX
70300	TC	A	X-ray exam of teeth	0.00	0.21	0.25	NA	NA	0.02	0.23	0.27	NA	NA	XXX
70310		A	X-ray exam of teeth	0.16	0.82	0.58	NA	NA	0.03	1.01	0.77	NA	NA	XXX
70310	26	A	X-ray exam of teeth	0.16	0.05	0.07	0.05	0.07	0.01	0.22	0.24	0.22	0.24	XXX
70310	TC	A	X-ray exam of teeth	0.00	0.77	0.51	NA	NA	0.02	0.79	0.53	NA	NA	XXX
70320		A	Full mouth x-ray of teeth	0.22	0.98	0.89	NA	NA	0.06	1.26	1.17	NA	NA	XXX
70320	26	A	Full mouth x-ray of teeth	0.22	0.06	0.08	0.06	0.08	0.01	0.29	0.31	0.29	0.31	XXX
70320	TC	A	Full mouth x-ray of teeth	0.00	0.91	0.81	NA	NA	0.05	0.96	0.86	NA	NA	XXX
70328		A	X-ray exam of jaw joint	0.18	0.62	0.57	NA	NA	0.03	0.83	0.78	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
70328	26	A	X-ray exam of jaw joint	0.18	0.05	0.06	0.05	0.06	0.01	0.24	0.25	0.24	0.25	XXX
70328	TC	A	X-ray exam of jaw joint	0.00	0.57	0.51	NA	NA	0.02	0.59	0.53	NA	NA	XXX
70330		A	X-ray exam of jaw joints	0.24	1.01	0.94	NA	NA	0.06	1.31	1.24	NA	NA	XXX
70330	26	A	X-ray exam of jaw joints	0.24	0.07	0.08	0.07	0.08	0.01	0.32	0.33	0.32	0.33	XXX
70330	TC	A	X-ray exam of jaw joints	0.00	0.94	0.87	NA	NA	0.05	0.99	0.92	NA	NA	XXX
70332		A	X-ray exam of jaw joint	0.54	1.46	2.09	NA	NA	0.14	2.14	2.77	NA	NA	XXX
70332	26	A	X-ray exam of jaw joint	0.54	0.16	0.19	0.16	0.19	0.02	0.72	0.75	0.72	0.75	XXX
70332	TC	A	X-ray exam of jaw joint	0.00	1.30	1.90	NA	NA	0.12	1.42	2.02	NA	NA	XXX
70336		A	Magnetic image, jaw joint	1.48	12.60	11.92	NA	NA	0.66	14.74	14.06	NA	NA	XXX
70336	26	A	Magnetic image, jaw joint	1.48	0.50	0.49	0.50	0.49	0.07	2.05	2.04	2.05	2.04	XXX
70336	TC	A	Magnetic image, jaw joint	0.00	12.10	11.43	NA	NA	0.59	12.69	12.02	NA	NA	XXX
70350		A	X-ray head for orthodontia	0.17	0.33	0.42	NA	NA	0.03	0.53	0.62	NA	NA	XXX
70350	26	A	X-ray head for orthodontia	0.17	0.05	0.07	0.05	0.07	0.01	0.23	0.25	0.23	0.25	XXX
70350	TC	A	X-ray head for orthodontia	0.00	0.27	0.35	NA	NA	0.02	0.29	0.37	NA	NA	XXX
70355		A	Panoramic x-ray of jaws	0.20	0.30	0.56	NA	NA	0.05	0.55	0.81	NA	NA	XXX
70355	26	A	Panoramic x-ray of jaws	0.20	0.06	0.07	0.06	0.07	0.01	0.27	0.28	0.27	0.28	XXX
70355	TC	A	Panoramic x-ray of jaws	0.00	0.24	0.49	NA	NA	0.04	0.28	0.53	NA	NA	XXX
70360		A	X-ray exam of neck	0.17	0.58	0.51	NA	NA	0.03	0.78	0.71	NA	NA	XXX
70360	26	A	X-ray exam of neck	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
70360	TC	A	X-ray exam of neck	0.00	0.52	0.45	NA	NA	0.02	0.54	0.47	NA	NA	XXX
70370		A	Throat x-ray & fluoroscopy	0.32	1.65	1.47	NA	NA	0.08	2.05	1.87	NA	NA	XXX
70370	26	A	Throat x-ray & fluoroscopy	0.32	0.09	0.10	0.09	0.10	0.01	0.42	0.43	0.42	0.43	XXX
70370	TC	A	Throat x-ray & fluoroscopy	0.00	1.56	1.37	NA	NA	0.07	1.63	1.44	NA	NA	XXX
70371		A	Speech evaluation, complex	0.84	1.50	2.16	NA	NA	0.16	2.50	3.16	NA	NA	XXX
70371	26	A	Speech evaluation, complex	0.84	0.26	0.28	0.26	0.28	0.04	1.14	1.16	1.14	1.16	XXX
70371	TC	A	Speech evaluation, complex	0.00	1.24	1.89	NA	NA	0.12	1.36	2.01	NA	NA	XXX
70373		A	Contrast x-ray of larynx	0.44	1.71	1.87	NA	NA	0.13	2.28	2.44	NA	NA	XXX
70373	26	A	Contrast x-ray of larynx	0.44	0.13	0.14	0.13	0.14	0.02	0.59	0.60	0.59	0.60	XXX
70373	TC	A	Contrast x-ray of larynx	0.00	1.58	1.73	NA	NA	0.11	1.69	1.84	NA	NA	XXX
70380		A	X-ray exam of salivary gland	0.17	0.82	0.75	NA	NA	0.05	1.04	0.97	NA	NA	XXX
70380	26	A	X-ray exam of salivary gland	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
70380	TC	A	X-ray exam of salivary gland	0.00	0.76	0.69	NA	NA	0.04	0.80	0.73	NA	NA	XXX
70390		A	X-ray exam of salivary duct	0.38	2.34	2.01	NA	NA	0.13	2.85	2.52	NA	NA	XXX
70390	26	A	X-ray exam of salivary duct	0.38	0.12	0.12	0.12	0.12	0.02	0.52	0.52	0.52	0.52	XXX
70390	TC	A	X-ray exam of salivary duct	0.00	2.22	1.89	NA	NA	0.11	2.33	2.00	NA	NA	XXX
70450		A	Ct head/brain w/o dye	0.85	4.90	4.98	NA	NA	0.29	6.04	6.12	NA	NA	XXX
70450	26	A	Ct head/brain w/o dye	0.85	0.27	0.28	0.27	0.28	0.04	1.16	1.17	1.16	1.17	XXX
70450	TC	A	Ct head/brain w/o dye	0.00	4.64	4.70	NA	NA	0.25	4.89	4.95	NA	NA	XXX
70460		A	Ct head/brain w/dye	1.13	6.52	6.15	NA	NA	0.35	8.00	7.63	NA	NA	XXX
70460	26	A	Ct head/brain w/dye	1.13	0.36	0.37	0.36	0.37	0.05	1.54	1.55	1.54	1.55	XXX
70460	TC	A	Ct head/brain w/dye	0.00	6.16	5.79	NA	NA	0.30	6.46	6.09	NA	NA	XXX
70470		A	Ct head/brain w/o & w/dye	1.27	7.96	7.61	NA	NA	0.43	9.66	9.31	NA	NA	XXX
70470	26	A	Ct head/brain w/o & w/dye	1.27	0.40	0.42	0.40	0.42	0.06	1.73	1.75	1.73	1.75	XXX
70470	TC	A	Ct head/brain w/o & w/dye	0.00	7.56	7.19	NA	NA	0.37	7.93	7.56	NA	NA	XXX
70480		A	Ct orbit/ear/fossa w/o dye	1.28	8.52	5.99	NA	NA	0.31	10.11	7.58	NA	NA	XXX
70480	26	A	Ct orbit/ear/fossa w/o dye	1.28	0.41	0.42	0.41	0.42	0.06	1.75	1.76	1.75	1.76	XXX
70480	TC	A	Ct orbit/ear/fossa w/o dye	0.00	8.11	5.57	NA	NA	0.25	8.36	5.82	NA	NA	XXX
70481		A	Ct orbit/ear/fossa w/dye	1.38	10.04	7.09	NA	NA	0.36	11.78	8.83	NA	NA	XXX
70481	26	A	Ct orbit/ear/fossa w/dye	1.38	0.44	0.45	0.44	0.45	0.06	1.88	1.89	1.88	1.89	XXX
70481	TC	A	Ct orbit/ear/fossa w/dye	0.00	9.60	6.65	NA	NA	0.30	9.90	6.95	NA	NA	XXX
70482		A	Ct orbit/ear/fossa w/o&w/dye	1.45	11.56	8.55	NA	NA	0.43	13.44	10.43	NA	NA	XXX
70482	26	A	Ct orbit/ear/fossa w/o&w/dye	1.45	0.47	0.48	0.47	0.48	0.06	1.98	1.99	1.98	1.99	XXX
70482	TC	A	Ct orbit/ear/fossa w/o&w/dye	0.00	11.09	8.08	NA	NA	0.37	11.46	8.45	NA	NA	XXX
70486		A	Ct maxillofacial w/o dye	1.14	6.81	5.52	NA	NA	0.30	8.25	6.96	NA	NA	XXX
70486	26	A	Ct maxillofacial w/o dye	1.14	0.36	0.37	0.36	0.37	0.05	1.55	1.56	1.55	1.56	XXX
70486	TC	A	Ct maxillofacial w/o dye	0.00	6.44	5.15	NA	NA	0.25	6.69	5.40	NA	NA	XXX

70487		A	Ct maxillofacial w/dye	1.30	8.39	6.67	NA	NA	0.36	10.05	8.33	NA	NA	XXX
70487	26	A	Ct maxillofacial w/dye	1.30	0.42	0.43	0.42	0.43	0.06	1.78	1.79	1.78	1.79	XXX
70487	TC	A	Ct maxillofacial w/dye	0.00	7.97	6.24	NA	NA	0.30	8.27	6.54	NA	NA	XXX
70488		A	Ct maxillofacial w/o & w/dye	1.42	10.48	8.27	NA	NA	0.43	12.33	10.12	NA	NA	XXX
70488	26	A	Ct maxillofacial w/o & w/dye	1.42	0.46	0.46	0.46	0.46	0.06	1.94	1.94	1.94	1.94	XXX
70488	TC	A	Ct maxillofacial w/o & w/dye	0.00	10.03	7.81	NA	NA	0.37	10.40	8.18	NA	NA	XXX
70490		A	Ct soft tissue neck w/o dye	1.28	6.52	5.49	NA	NA	0.31	8.11	7.08	NA	NA	XXX
70490	26	A	Ct soft tissue neck w/o dye	1.28	0.41	0.42	0.41	0.42	0.06	1.75	1.76	1.75	1.76	XXX
70490	TC	A	Ct soft tissue neck w/o dye	0.00	6.11	5.07	NA	NA	0.25	6.36	5.32	NA	NA	XXX
70491		A	Ct soft tissue neck w/dye	1.38	8.06	6.60	NA	NA	0.36	9.80	8.34	NA	NA	XXX
70491	26	A	Ct soft tissue neck w/dye	1.38	0.44	0.45	0.44	0.45	0.06	1.88	1.89	1.88	1.89	XXX
70491	TC	A	Ct soft tissue neck w/dye	0.00	7.62	6.15	NA	NA	0.30	7.92	6.45	NA	NA	XXX
70492		A	Ct sft tsue nck w/o & w/dye	1.45	10.18	8.20	NA	NA	0.43	12.06	10.08	NA	NA	XXX
70492	26	A	Ct sft tsue nck w/o & w/dye	1.45	0.47	0.47	0.47	0.47	0.06	1.98	1.98	1.98	1.98	XXX
70492	TC	A	Ct sft tsue nck w/o & w/dye	0.00	9.71	7.73	NA	NA	0.37	10.08	8.10	NA	NA	XXX
70496		A	Ct angiography, head	1.75	17.16	12.67	NA	NA	0.66	19.57	15.08	NA	NA	XXX
70496	26	A	Ct angiography, head	1.75	0.57	0.57	0.57	0.57	0.08	2.40	2.40	2.40	2.40	XXX
70496	TC	A	Ct angiography, head	0.00	16.59	12.10	NA	NA	0.58	17.17	12.68	NA	NA	XXX
70498		A	Ct angiography, neck	1.75	17.26	12.69	NA	NA	0.66	19.67	15.10	NA	NA	XXX
70498	26	A	Ct angiography, neck	1.75	0.58	0.57	0.58	0.57	0.08	2.41	2.40	2.41	2.40	XXX
70498	TC	A	Ct angiography, neck	0.00	16.68	12.12	NA	NA	0.58	17.26	12.70	NA	NA	XXX
70540		A	Mri orbit/face/neck w/o dye	1.35	14.58	12.38	NA	NA	0.45	16.38	14.18	NA	NA	XXX
70540	26	A	Mri orbit/face/neck w/o dye	1,35	0.45	0.44	0.45	0.44	0.06	1.86	1.85	1.86	1.85	XXX
70540	TC	A	Mri orbit/face/neck w/o dye	0.00	14.13	11.93	NA	NA	0.39	14.52	12.32	NA	NA	XXX
70542		A	Mri orbit/face/neck w/dye	1.62	15.53	14.36	NA	NA	0.54	17.69	16.52	NA	NA	XXX
70542	26	A	Mri orbit/face/neck w/dye	1.62	0.53	0.53	0.53	0.53	0.07	2.22	2.22	2.22	2.22	XXX
70542	TC	A	Mri orbit/face/neck w/dye	0.00	15.00	13.83	NA	NA	0.47	15.47	14.30	NA	NA	XXX
70543		A	Mri orbt/fac/nck w/o & w/dye	2.15	19.26	24.01	NA	NA	0.94	22.35	27.10	NA	NA	XXX
70543	26	A	Mri orbt/fac/nck w/o & w/dye	2.15	0.72	0.71	0.72	0.71	0.10	2.97	2.96	2.97	2.96	XXX
70543	TC	A	Mri orbt/fac/nck w/o & w/dye	0.00	18.54	23.30	NA	NA	0.84	19.38	24.14	NA	NA	XXX
70544		A	Mr angiography head w/o dye	1.20	16.05	12.71	NA	NA	0.64	17.89	14.55	NA	NA	XXX
70544	26	A	Mr angiography head w/o dye	1.20	0.39	0.40	0.39	0.40	0.05	1.64	1.65	1.64	1.65	XXX
70544	TC	A	Mr angiography head w/o dye	0.00	15.67	12.32	NA	NA	0.59	16.26	12.91	NA	NA	XXX
70545		A	Mr angiography head w/dye	1.20	15.97	12.69	NA	NA	0.64	17.81	14.53	NA	NA	XXX
70545	26	A	Mr angiography head w/dye	1.20	0.38	0.39	0.38	0.39	0.05	1.63	1.64	1.63	1.64	XXX
70545	TC	A	Mr angiography head w/dye	0.00	15.59	12.30	NA	NA	0.59	16.18	12.89	NA	NA	XXX
70546		A	Mr angiograph head w/o&w/dye	1.80	24.49	23.37	NA	NA	0.67	26.96	25.84	NA	NA	XXX
70546	26	A	Mr angiograph head w/o&w/dye	1.80	0.58	0.59	0.58	0.59	0.08	2.46	2.47	2.46	2.47	XXX
70546	TC	A	Mr angiograph head w/o&w/dye	0.00	23.91	22.79	NA	NA	0.59	24.50	23.38	NA	NA	XXX
70547		A	Mr angiography neck w/o dye	1.20	16.09	12.72	NA	NA	0.64	17.93	14.56	NA	NA	XXX
70547	26	A	Mr angiography neck w/o dye	1.20	0.39	0.39	0.39	0.39	0.05	1.64	1.64	1.64	1.64	XXX
70547	TC	A	Mr angiography neck w/o dye	0.00	15.70	12.33	NA	NA	0.59	16.29	12.92	NA	NA	XXX
70548		A	Mr angiography neck w/dye	1.20	16.79	12.89	NA	NA	0.64	18.63	14.73	NA	NA	XXX
70548	26	A	Mr angiography neck w/dye	1.20	0.38	0.39	0.38	0.39	0.05	1.63	1.64	1.63	1.64	XXX
70548	TC	A	Mr angiography neck w/dye	0.00	16.41	12.50	NA	NA	0.59	17.00	13.09	NA	NA	XXX
70549		A	Mr angiograph neck w/o&w/dye	1.80	24.41	23.35	NA	NA	0.67	26.88	25.82	NA	NA	XXX
70549	26	A	Mr angiograph neck w/o&w/dye	1.80	0.58	0.59	0.58	0.59	0.08	2.46	2.47	2.46	2.47	XXX
70549	TC	A	Mr angiograph neck w/o&w/dye	0.00	23.83	22.77	NA	NA	0.59	24.42	23.36	NA	NA	XXX
70551		A	Mri brain w/o dye	1.48	14.69	12.44	NA	NA	0.66	16.83	14.58	NA	NA	XXX
70551	26	A	Mri brain w/o dye	1.48	0.48	0.49	0.48	0.49	0.07	2.03	2.04	2.03	2.04	XXX
70551	TC	A	Mri brain w/o dye	0.00	14.22	11.96	NA	NA	0.59	14.81	12.55	NA	NA	XXX
70552		A	Mri brain w/dye	1.78	15.73	14.46	NA	NA	0.78	18.29	17.02	NA	NA	XXX
70552	26	A	Mri brain w/dye	1.78	0.57	0.59	0.57	0.59	0.08	2.43	2.45	2.43	2.45	XXX
70552	TC	A	Mri brain w/dye	0.00	15.16	13.87	NA	NA	0.70	15.86	14.57	NA	NA	XXX
70553		A	Mri brain w/o & w/dye	2.36	18.37	23.84	NA	NA	1.41	22.14	27.61	NA	NA	XXX
70553	26	A	Mri brain w/o & w/dye	2.36	0.76	0.78	0.76	0.78	0.10	3.22	3.24	3.22	3.24	XXX
70553	TC	A	Mri brain w/o & w/dye	0.00	17.61	23.06	NA	NA	1.31	18.92	24.37	NA	NA	XXX
70557		C	Mri brain w/o dye	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
70557	26	A	Mri brain w/o dye	2.90	0.92	1.08	0.92	1.08	0.08	3.90	4.06	3.90	4.06	XXX
70557	TC	C	Mri brain w/o dye	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
70558		C	Mri brain w/dye	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
70558	26	A	Mri brain w/dye	3.20	1.15	1.22	1.15	1.22	0.10	4.45	4.52	4.45	4.52	XXX
70558	TC	C	Mri brain w/dye	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
70559		C	Mri brain w/o & w/dye	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
70559	26	A	Mri brain w/o & w/dye	3.20	1.03	1.19	1.03	1.19	0.12	4.35	4.51	4.35	4.51	XXX
70559	TC	C	Mri brain w/o & w/dye	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
71010		A	Chest x-ray	0.18	0.43	0.51	NA	NA	0.03	0.64	0.72	NA	NA	XXX
71010	26	A	Chest x-ray	0.18	0.05	0.06	0.05	0.06	0.01	0.24	0.25	0.24	0.25	XXX
71010	TC	A	Chest x-ray	0.00	0.37	0.45	NA	NA	0.02	0.39	0.47	NA	NA	XXX
71015		A	Chest x-ray	0.21	0.57	0.59	NA	NA	0.03	0.81	0.83	NA	NA	XXX
71015	26	A	Chest x-ray	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	XXX
71015	TC	A	Chest x-ray	0.00	0.51	0.52	NA	NA	0.02	0.53	0.54	NA	NA	XXX
71020		A	Chest x-ray	0.22	0.57	0.66	NA	NA	0.05	0.84	0.93	NA	NA	XXX
71020	26	A	Chest x-ray	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
71020	TC	A	Chest x-ray	0.00	0.50	0.59	NA	NA	0.04	0.54	0.63	NA	NA	XXX
71021		A	Chest x-ray	0.27	0.71	0.79	NA	NA	0.06	1.04	1.12	NA	NA	XXX
71021	26	A	Chest x-ray	0.27	0.08	0.09	0.08	0.09	0.01	0.36	0.37	0.36	0.37	XXX
71021	TC	A	Chest x-ray	0.00	0.63	0.71	NA	NA	0.05	0.68	0.76	NA	NA	XXX
71022		A	Chest x-ray	0.31	0.89	0.85	NA	NA	0.06	1.26	1.22	NA	NA	XXX
71022	26	A	Chest x-ray	0.31	0.09	0.10	0.09	0.10	0.01	0.41	0.42	0.41	0.42	XXX
71022	TC	A	Chest x-ray	0.00	0.80	0.75	NA	NA	0.05	0.85	0.80	NA	NA	XXX
71023		A	Chest x-ray and fluoroscopy	0.38	1.57	1.08	NA	NA	0.06	2.01	1.52	NA	NA	XXX
71023	26	A	Chest x-ray and fluoroscopy	0.38	0.14	0.13	0.14	0.13	0.01	0.53	0.52	0.53	0.52	XXX
71023	TC	A	Chest x-ray and fluoroscopy	0.00	1.42	0.94	NA	NA	0.05	1.47	0.99	NA	NA	XXX
71030		A	Chest x-ray	0.31	0.91	0.89	NA	NA	0.06	1.28	1.26	NA	NA	XXX
71030	26	A	Chest x-ray	0.31	0.09	0.10	0.09	0.10	0.01	0.41	0.42	0.41	0.42	XXX
71030	TC	A	Chest x-ray	0.00	0.82	0.79	NA	NA	0.05	0.87	0.84	NA	NA	XXX
71034		A	Chest x-ray and fluoroscopy	0.46	2.04	1.71	NA	NA	0.10	2.60	2.27	NA	NA	XXX
71034	26	A	Chest x-ray and fluoroscopy	0.46	0.18	0.17	0.18	0.17	0.02	0.66	0.65	0.66	0.65	XXX
71034	TC	A	Chest x-ray and fluoroscopy	0.00	1.86	1.55	NA	NA	0.08	1.94	1.63	NA	NA	XXX
71035		A	Chest x-ray	0.18	0.77	0.63	NA	NA	0.03	0.98	0.84	NA	NA	XXX
71035	26	A	Chest x-ray	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
71035	TC	A	Chest x-ray	0.00	0.72	0.57	NA	NA	0.02	0.74	0.59	NA	NA	XXX
71040		A	Contrast x-ray of bronchi	0.58	2.08	1.76	NA	NA	0.11	2.77	2.45	NA	NA	XXX
71040	26	A	Contrast x-ray of bronchi	0.58	0.16	0.18	0.16	0.18	0.03	0.77	0.79	0.77	0.79	XXX
71040	TC	A	Contrast x-ray of bronchi	0.00	1.92	1.58	NA	NA	0.08	2.00	1.66	NA	NA	XXX
71060		A	Contrast x-ray of bronchi	0.74	3.07	2.60	NA	NA	0.16	3.97	3.50	NA	NA	XXX
71060	26	A	Contrast x-ray of bronchi	0.74	0.23	0.24	0.23	0.24	0.03	1.00	1.01	1.00	1.01	XXX
71060	TC	A	Contrast x-ray of bronchi	0.00	2.84	2.36	NA	NA	0.13	2.97	2.49	NA	NA	XXX
71090		A	X-ray & pacemaker insertion	0.54	NA	NA	NA	NA	0.13	NA	NA	NA	NA	XXX
71090	26	A	X-ray & pacemaker insertion	0.54	0.28	0.23	0.28	0.23	0.02	0.84	0.79	0.84	0.79	XXX
71090	TC	A	X-ray & pacemaker insertion	0.00	NA	NA	NA	NA	0.11	NA	NA	NA	NA	XXX
71100		A	X-ray exam of ribs	0.22	0.62	0.64	NA	NA	0.05	0.89	0.91	NA	NA	XXX
71100	26	A	X-ray exam of ribs	0.22	0.06	0.07	0.06	0.07	0.01	0.29	0.30	0.29	0.30	XXX
71100	TC	A	X-ray exam of ribs	0.00	0.55	0.57	NA	NA	0.04	0.59	0.61	NA	NA	XXX
71101		A	X-ray exam of ribs/chest	0.27	0.76	0.76	NA	NA	0.05	1.08	1.08	NA	NA	XXX
71101	26	A	X-ray exam of ribs/chest	0.27	0.08	0.09	0.08	0.09	0.01	0.36	0.37	0.36	0.37	XXX
71101	TC	A	X-ray exam of ribs/chest	0.00	0.68	0.67	NA	NA	0.04	0.72	0.71	NA	NA	XXX
71110		A	X-ray exam of ribs	0.27	0.78	0.85	NA	NA	0.06	1.11	1.18	NA	NA	XXX
71110	26	A	X-ray exam of ribs	0.27	0.08	0.09	0.08	0.09	0.01	0.36	0.37	0.36	0.37	XXX
71110	TC	A	X-ray exam of ribs	0.00	0.70	0.76	NA	NA	0.05	0.75	0.81	NA	NA	XXX
71111		A	X-ray exam of ribs/chest	0.32	1.06	1.01	NA	NA	0.07	1.45	1.40	NA	NA	XXX
71111	26	A	X-ray exam of ribs/chest	0.32	0.09	0.10	0.09	0.10	0.01	0.42	0.43	0.42	0.43	XXX
71111	TC	A	X-ray exam of ribs/chest	0.00	0.97	0.91	NA	NA	0.06	1.03	0.97	NA	NA	XXX
71120		A	X-ray exam of breastbone	0.20	0.62	0.70	NA	NA	0.05	0.87	0.95	NA	NA	XXX
71120	26	A	X-ray exam of breastbone	0.20	0.06	0.07	0.06	0.07	0.01	0.27	0.28	0.27	0.28	XXX
71120	TC	A	X-ray exam of breastbone	0.00	0.56	0.63	NA	NA	0.04	0.60	0.67	NA	NA	XXX
71130		A	X-ray exam of breastbone	0.22	0.75	0.77	NA	NA	0.05	1.02	1.04	NA	NA	XXX
71130	26	A	X-ray exam of breastbone	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
71130	TC	A	X-ray exam of breastbone	0.00	0.68	0.70	NA	NA	0.04	0.72	0.74	NA	NA	XXX
71250		A	Ct thorax w/o dye	1.16	6.47	6.34	NA	NA	0.36	7.99	7.86	NA	NA	XXX
71250	26	A	Ct thorax w/o dye	1.16	0.37	0.38	0.37	0.38	0.05	1.58	1.59	1.58	1.59	XXX

71250	TC	A	Ct thorax w/o dye	0.00	6.10	5.96	NA	NA	0.31	6.41	6.27	NA	NA	XXX
71260		A	Ct thorax w/dye	1.24	8.01	7.61	NA	NA	0.42	9.67	9.27	NA	NA	XXX
71260	26	A	Ct thorax w/dye	1.24	0.39	0.41	0.39	0.41	0.05	1.68	1.70	1.68	1.70	XXX
71260	TC	A	Ct thorax w/dye	0.00	7.61	7.21	NA	NA	0.37	7.98	7.58	NA	NA	XXX
71270		A	Ct thorax w/o & w/dye	1.38	10.15	9.51	NA	NA	0.52	12.05	11.41	NA	NA	XXX
71270	26	A	Ct thorax w/o & w/dye	1.38	0.44	0.45	0.44	0.45	0.06	1.88	1.89	1.88	1.89	XXX
71270	TC	A	Ct thorax w/o & w/dye	0.00	9.71	9.07	NA	NA	0.46	10.17	9.53	NA	NA	XXX
71275		A	Ct angiography, chest	1.92	11.77	12.70	NA	NA	0.48	14.17	15.10	NA	NA	XXX
71275	26	A	Ct angiography, chest	1.92	0.62	0.63	0.62	0.63	0.09	2.63	2.64	2.63	2.64	XXX
71275	TC	A	Ct angiography, chest	0.00	11.14	12.07	NA	NA	0.39	11.53	12.46	NA	NA	XXX
71550		A	Mri chest w/o dye	1.46	16.75	12.95	NA	NA	0.51	18.72	14.92	NA	NA	XXX
71550	26	A	Mri chest w/o dye	1.46	0.48	0.48	0.48	0.48	0.06	2.00	2.00	2.00	2.00	XXX
71550	TC	A	Mri chest w/o dye	0.00	16.27	12.47	NA	NA	0.45	16.72	12.92	NA	NA	XXX
71551		A	Mri chest w/dye	1.73	18.16	15.05	NA	NA	0.60	20.49	17.38	NA	NA	XXX
71551	26	A	Mri chest w/dye	1.73	0.56	0.57	0.56	0.57	0.08	2.37	2.38	2.37	2.38	XXX
71551	TC	A	Mri chest w/dye	0.00	17.59	14.48	NA	NA	0.52	18.11	15.00	NA	NA	XXX
71552		A	Mri chest w/o & w/dye	2.26	22.91	24.94	NA	NA	0.78	25.95	27.98	NA	NA	XXX
71552	26	A	Mri chest w/o & w/dye	2.26	0.75	0.74	0.75	0.74	0.10	3.11	3.10	3.11	3.10	XXX
71552	TC	A	Mri chest w/o & w/dye	0.00	22.16	24.20	NA	NA	0.68	22.84	24.88	NA	NA	XXX
71555		R	Mri angio chest w or w/o dye	1.81	15.55	12.74	NA	NA	0.67	18.03	15.22	NA	NA	XXX
71555	26	R	Mri angio chest w or w/o dye	1.81	0.62	0.61	0.62	0.61	0.08	2.51	2.50	2.51	2.50	XXX
71555	TC	R	Mri angio chest w or w/o dye	0.00	14.94	12.14	NA	NA	0.59	15.53	12.73	NA	NA	XXX
72010		A	X-ray exam of spine	0.45	1.45	1.24	NA	NA	0.08	1.98	1.77	NA	NA	XXX
72010	26	A	X-ray exam of spine	0.45	0.13	0.15	0.13	0.15	0.02	0.60	0.62	0.60	0.62	XXX
72010	TC	A	X-ray exam of spine	0.00	1.32	1.10	NA	NA	0.06	1.38	1.16	NA	NA	XXX
72020		A	X-ray exam of spine	0.15	0.46	0.47	NA	NA	0.03	0.64	0.65	NA	NA	XXX
72020	26	A	X-ray exam of spine	0.15	0.05	0.05	0.05	0.05	0.01	0.21	0.21	0.21	0.21	XXX
72020	TC	A	X-ray exam of spine	0.00	0.42	0.42	NA	NA	0.02	0.44	0.44	NA	NA	XXX
72040		A	X-ray exam of neck spine	0.22	0.77	0.70	NA	NA	0.05	1.04	0.97	NA	NA	XXX
72040	26	A	X-ray exam of neck spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72040	TC	A	X-ray exam of neck spine	0.00	0.70	0.63	NA	NA	0.04	0.74	0.67	NA	NA	XXX
72050		A	X-ray exam of neck spine	0.31	1.07	1.01	NA	NA	0.07	1.45	1.39	NA	NA	XXX
72050	26	A	X-ray exam of neck spine	0.31	0.10	0.10	0.10	0.10	0.01	0.42	0.42	0.42	0.42	XXX
72050	TC	A	X-ray exam of neck spine	0.00	0.97	0.91	NA	NA	0.06	1.03	0.97	NA	NA	XXX
72052		A	X-ray exam of neck spine	0.36	1.39	1.29	NA	NA	0.08	1.83	1.73	NA	NA	XXX
72052	26	A	X-ray exam of neck spine	0.36	0.11	0.12	0.11	0.12	0.02	0.49	0.50	0.49	0.50	XXX
72052	TC	A	X-ray exam of neck spine	0.00	1.27	1.17	NA	NA	0.06	1.33	1.23	NA	NA	XXX
72069		A	X-ray exam of trunk spine	0.22	0.77	0.62	NA	NA	0.03	1.02	0.87	NA	NA	XXX
72069	26	A	X-ray exam of trunk spine	0.22	0.08	0.08	0.08	0.08	0.01	0.31	0.31	0.31	0.31	XXX
72069	TC	A	X-ray exam of trunk spine	0.00	0.69	0.54	NA	NA	0.02	0.71	0.56	NA	NA	XXX
72070		A	X-ray exam of thoracic spine	0.22	0.64	0.70	NA	NA	0.05	0.91	0.97	NA	NA	XXX
72070	26	A	X-ray exam of thoracic spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72070	TC	A	X-ray exam of thoracic spine	0.00	0.57	0.63	NA	NA	0.04	0.61	0.67	NA	NA	XXX
72072		A	X-ray exam of thoracic spine	0.22	0.77	0.79	NA	NA	0.06	1.05	1.07	NA	NA	XXX
72072	26	A	X-ray exam of thoracic spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72072	TC	A	X-ray exam of thoracic spine	0.00	0.70	0.72	NA	NA	0.05	0.75	0.77	NA	NA	XXX
72074		A	X-ray exam of thoracic spine	0.22	0.95	0.97	NA	NA	0.07	1.24	1.26	NA	NA	XXX
72074	26	A	X-ray exam of thoracic spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72074	TC	A	X-ray exam of thoracic spine	0.00	0.88	0.90	NA	NA	0.06	0.94	0.96	NA	NA	XXX
72080		A	X-ray exam of trunk spine	0.22	0.70	0.73	NA	NA	0.05	0.97	1.00	NA	NA	XXX
72080	26	A	X-ray exam of trunk spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72080	TC	A	X-ray exam of trunk spine	0.00	0.62	0.66	NA	NA	0.04	0.66	0.70	NA	NA	XXX
72090		A	X-ray exam of trunk spine	0.28	1.01	0.82	NA	NA	0.05	1.34	1.15	NA	NA	XXX
72090	26	A	X-ray exam of trunk spine	0.28	0.10	0.09	0.10	0.09	0.01	0.39	0.38	0.39	0.38	XXX
72090	TC	A	X-ray exam of trunk spine	0.00	0.92	0.73	NA	NA	0.04	0.96	0.77	NA	NA	XXX
72100		A	X-ray exam of lower spine	0.22	0.81	0.76	NA	NA	0.05	1.08	1.03	NA	NA	XXX
72100	26	A	X-ray exam of lower spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72100	TC	A	X-ray exam of lower spine	0.00	0.74	0.69	NA	NA	0.04	0.78	0.73	NA	NA	XXX
72110		A	X-ray exam of lower spine	0.31	1.14	1.04	NA	NA	0.07	1.52	1.42	NA	NA	XXX
72110	26	A	X-ray exam of lower spine	0.31	0.10	0.10	0.10	0.10	0.01	0.42	0.42	0.42	0.42	XXX
72110	TC	A	X-ray exam of lower spine	0.00	1.04	0.94	NA	NA	0.06	1.10	1.00	NA	NA	XXX
72114		A	X-ray exam of lower spine	0.36	1.57	1.38	NA	NA	0.08	2.01	1.82	NA	NA	XXX
72114	26	A	X-ray exam of lower spine	0.36	0.12	0.12	0.12	0.12	0.02	0.50	0.50	0.50	0.50	XXX
72114	TC	A	X-ray exam of lower spine	0.00	1.45	1.26	NA	NA	0.06	1.51	1.32	NA	NA	XXX
72120		A	X-ray exam of lower spine	0.22	1.07	0.99	NA	NA	0.07	1.36	1.28	NA	NA	XXX
72120	26	A	X-ray exam of lower spine	0.22	0.08	0.07	0.08	0.07	0.01	0.31	0.30	0.31	0.30	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
72120	TC	A	X-ray exam of lower spine	0.00	1.00	0.92	NA	NA	0.06	1.06	0.98	NA	NA	XXX
72125		A	Ct neck spine w/o dye	1.16	6.46	6.33	NA	NA	0.36	7.98	7.85	NA	NA	XXX
72125	26	A	Ct neck spine w/o dye	1.16	0.37	0.38	0.37	0.38	0.05	1.58	1.59	1.58	1.59	XXX
72125	TC	A	Ct neck spine w/o dye	0.00	6.09	5.96	NA	NA	0.31	6.40	6.27	NA	NA	XXX
72126		A	Ct neck spine w/dye	1.22	8.04	7.61	NA	NA	0.42	9.68	9.25	NA	NA	XXX
72126	26	A	Ct neck spine w/dye	1.22	0.39	0.40	0.39	0.40	0.05	1.66	1.67	1.66	1.67	XXX
72126	TC	A	Ct neck spine w/dye	0.00	7.65	7.22	NA	NA	0.37	8.02	7.59	NA	NA	XXX
72127		A	Ct neck spine w/o & w/dye	1.27	10.17	9.50	NA	NA	0.52	11.96	11.29	NA	NA	XXX
72127	26	A	Ct neck spine w/o & w/dye	1.27	0.43	0.42	0.43	0.42	0.06	1.76	1.75	1.76	1.75	XXX
72127	TC	A	Ct neck spine w/o & w/dye	0.00	9.73	9.07	NA	NA	0.46	10.19	9.53	NA	NA	XXX
72128		A	Ct chest spine w/o dye	1.16	6.47	6.34	NA	NA	0.36	7.99	7.86	NA	NA	XXX
72128	26	A	Ct chest spine w/o dye	1.16	0.37	0.38	0.37	0.38	0.05	1.58	1.59	1.58	1.59	XXX
72128	TC	A	Ct chest spine w/o dye	0.00	6.10	5.96	NA	NA	0.31	6.41	6.27	NA	NA	XXX
72129		A	Ct chest spine w/dye	1.22	8.03	7.61	NA	NA	0.42	9.67	9.25	NA	NA	XXX
72129	26	A	Ct chest spine w/dye	1.22	0.39	0.40	0.39	0.40	0.05	1.66	1.67	1.66	1.67	XXX
72129	TC	A	Ct chest spine w/dye	0.00	7.64	7.21	NA	NA	0.37	8.01	7.58	NA	NA	XXX
72130		A	Ct chest spine w/o & w/dye	1.27	10.14	9.49	NA	NA	0.52	11.93	11.28	NA	NA	XXX
72130	26	A	Ct chest spine w/o & w/dye	1.27	0.43	0.42	0.43	0.42	0.06	1.76	1.75	1.76	1.75	XXX
72130	TC	A	Ct chest spine w/o & w/dye	0.00	9.70	9.06	NA	NA	0.46	10.16	9.52	NA	NA	XXX
72131		A	Ct lumbar spine w/o dye	1.16	6.47	6.34	NA	NA	0.36	7.99	7.86	NA	NA	XXX
72131	26	A	Ct lumbar spine w/o dye	1.16	0.37	0.38	0.37	0.38	0.05	1.58	1.59	1.58	1.59	XXX
72131	TC	A	Ct lumbar spine w/o dye	0.00	6.10	5.96	NA	NA	0.31	6.41	6.27	NA	NA	XXX
72132		A	Ct lumbar spine w/dye	1.22	8.03	7.61	NA	NA	0.42	9.67	9.25	NA	NA	XXX
72132	26	A	Ct lumbar spine w/dye	1.22	0.39	0.40	0.39	0.40	0.05	1.66	1.67	1.66	1.67	XXX
72132	TC	A	Ct lumbar spine w/dye	0.00	7.64	7.21	NA	NA	0.37	8.01	7.58	NA	NA	XXX
72133		A	Ct lumbar spine w/o & w/dye	1.27	10.21	9.51	NA	NA	0.52	12.00	11.30	NA	NA	XXX
72133	26	A	Ct lumbar spine w/o & w/dye	1.27	0.41	0.42	0.41	0.42	0.06	1.74	1.75	1.74	1.75	XXX
72133	TC	A	Ct lumbar spine w/o & w/dye	0.00	9.79	9.09	NA	NA	0.46	10.25	9.55	NA	NA	XXX
72141		A	Mri neck spine w/o dye	1.60	12.80	12.00	NA	NA	0.66	15.06	14.26	NA	NA	XXX
72141	26	A	Mri neck spine w/o dye	1.60	0.53	0.53	0.53	0.53	0.07	2.20	2.20	2.20	2.20	XXX
72141	TC	A	Mri neck spine w/o dye	0.00	12.26	11.47	NA	NA	0.59	12.85	12.06	NA	NA	XXX
72142		A	Mri neck spine w/dye	1.92	15.86	14.53	NA	NA	0.79	18.57	17.24	NA	NA	XXX
72142	26	A	Mri neck spine w/dye	1.92	0.63	0.64	0.63	0.64	0.09	2.64	2.65	2.64	2.65	XXX
72142	TC	A	Mri neck spine w/dye	0.00	15.24	13.89	NA	NA	0.70	15.94	14.59	NA	NA	XXX
72146		A	Mri chest spine w/o dye	1.60	12.77	12.92	NA	NA	0.71	15.08	15.23	NA	NA	XXX
72146	26	A	Mri chest spine w/o dye	1.60	0.53	0.53	0.53	0.53	0.07	2.20	2.20	2.20	2.20	XXX
72146	TC	A	Mri chest spine w/o dye	0.00	12.24	12.39	NA	NA	0.64	12.88	13.03	NA	NA	XXX
72147		A	Mri chest spine w/dye	1.92	13.70	13.98	NA	NA	0.79	16.41	16.69	NA	NA	XXX
72147	26	A	Mri chest spine w/dye	1.92	0.62	0.63	0.62	0.63	0.09	2.63	2.64	2.63	2.64	XXX
72147	TC	A	Mri chest spine w/dye	0.00	13.08	13.35	NA	NA	0.70	13.78	14.05	NA	NA	XXX
72148		A	Mri lumbar spine w/o dye	1.48	12.77	12.89	NA	NA	0.71	14.96	15.08	NA	NA	XXX
72148	26	A	Mri lumbar spine w/o dye	1.48	0.50	0.49	0.50	0.49	0.07	2.05	2.04	2.05	2.04	XXX
72148	TC	A	Mri lumbar spine w/o dye	0.00	12.28	12.40	NA	NA	0.64	12.92	13.04	NA	NA	XXX
72149		A	Mri lumbar spine w/dye	1.78	15.83	14.49	NA	NA	0.78	18.39	17.05	NA	NA	XXX
72149	26	A	Mri lumbar spine w/dye	1.78	0.59	0.60	0.59	0.60	0.08	2.45	2.46	2.45	2.46	XXX
72149	TC	A	Mri lumbar spine w/dye	0.00	15.25	13.89	NA	NA	0.70	15.95	14.59	NA	NA	XXX
72156		A	Mri neck spine w/o & w/dye	2.57	18.13	23.83	NA	NA	1.42	22.12	27.82	NA	NA	XXX
72156	26	A	Mri neck spine w/o & w/dye	2.57	0.84	0.85	0.84	0.85	0.11	3.52	3.53	3.52	3.53	XXX
72156	TC	A	Mri neck spine w/o & w/dye	0.00	17.29	22.98	NA	NA	1.31	18.60	24.29	NA	NA	XXX
72157		A	Mri chest spine w/o & w/dye	2.57	16.43	23.40	NA	NA	1.42	20.42	27.39	NA	NA	XXX
72157	26	A	Mri chest spine w/o & w/dye	2.57	0.83	0.84	0.83	0.84	0.11	3.51	3.52	3.51	3.52	XXX
72157	TC	A	Mri chest spine w/o & w/dye	0.00	15.60	22.56	NA	NA	1.31	16.91	23.87	NA	NA	XXX
72158		A	Mri lumbar spine w/o & w/dye	2.36	18.10	23.77	NA	NA	1.41	21.87	27.54	NA	NA	XXX
72158	26	A	Mri lumbar spine w/o & w/dye	2.36	0.78	0.78	0.78	0.78	0.10	3.24	3.24	3.24	3.24	XXX
72158	TC	A	Mri lumbar spine w/o & w/dye	0.00	17.32	22.99	NA	NA	1.31	18.63	24.30	NA	NA	XXX
72159		N	Mr angio spine w/o&w/dye	1.80	14.79	13.39	NA	NA	0.74	17.33	15.93	NA	NA	XXX

72159	26	N	Mr angio spine w/o&w/dye	1.80	0.42	0.62	0.42	0.62	0.10	2.32	2.52	2.32	2.52	XXX
72159	TC	N	Mr angio spine w/o&w/dye	0.00	14.37	12.77	NA	NA	0.64	15.01	13.41	NA	NA	XXX
72170		A	X-ray exam of pelvis	0.17	0.50	0.56	NA	NA	0.03	0.70	0.76	NA	NA	XXX
72170	26	A	X-ray exam of pelvis	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
72170	TC	A	X-ray exam of pelvis	0.00	0.44	0.50	NA	NA	0.02	0.46	0.52	NA	NA	XXX
72190		A	X-ray exam of pelvis	0.21	0.85	0.77	NA	NA	0.05	1.11	1.03	NA	NA	XXX
72190	26	A	X-ray exam of pelvis	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	XXX
72190	TC	A	X-ray exam of pelvis	0.00	0.78	0.70	NA	NA	0.04	0.82	0.74	NA	NA	XXX
72191		A	Ct angiograph pelv w/o&w/dye	1.81	11.43	12.32	NA	NA	0.47	13.71	14.60	NA	NA	XXX
72191	26	A	Ct angiograph pelv w/o&w/dye	1.81	0.60	0.60	0.60	0.60	0.08	2.49	2.49	2.49	2.49	XXX
72191	TC	A	Ct angiograph pelv w/o&w/dye	0.00	10.83	11.73	NA	NA	0.39	11.22	12.12	NA	NA	XXX
72192		A	Ct pelvis w/o dye	1.09	6.02	6.21	NA	NA	0.36	7.47	7.66	NA	NA	XXX
72192	26	A	Ct pelvis w/o dye	1.09	0.34	0.36	0.34	0.36	0.05	1.48	1.50	1.48	1.50	XXX
72192	TC	A	Ct pelvis w/o dye	0.00	5.68	5.85	NA	NA	0.31	5.99	6.16	NA	NA	XXX
72193		A	Ct pelvis w/dye	1.16	7.55	7.30	NA	NA	0.41	9.12	8.87	NA	NA	XXX
72193	26	A	Ct pelvis w/dye	1.16	0.37	0.38	0.37	0.38	0.05	1.58	1.59	1.58	1.59	XXX
72193	TC	A	Ct pelvis w/dye	0.00	7.18	6.93	NA	NA	0.36	7.54	7.29	NA	NA	XXX
72194		A	Ct pelvis w/o & w/dye	1.22	10.18	9.21	NA	NA	0.48	11.88	10.91	NA	NA	XXX
72194	26	A	Ct pelvis w/o & w/dye	1.22	0.39	0.40	0.39	0.40	0.05	1.66	1.67	1.66	1.67	XXX
72194	TC	A	Ct pelvis w/o & w/dye	0.00	9.78	8.81	NA	NA	0.43	10.21	9.24	NA	NA	XXX
72195		A	Mri pelvis w/o dye	1.46	14.74	12.45	NA	NA	0.51	16.71	14.42	NA	NA	XXX
72195	26	A	Mri pelvis w/o dye	1.46	0.48	0.48	0.48	0.48	0.06	2.00	2.00	2.00	2.00	XXX
72195	TC	A	Mri pelvis w/o dye	0.00	14.25	11.96	NA	NA	0.45	14.70	12.41	NA	NA	XXX
72196		A	Mri pelvis w/dye	1.73	15.67	14.43	NA	NA	0.60	18.00	16.76	NA	NA	XXX
72196	26	A	Mri pelvis w/dye	1.73	0.56	0.57	0.56	0.57	0.08	2.37	2.38	2.37	2.38	XXX
72196	TC	A	Mri pelvis w/dye	0.00	15.11	13.86	NA	NA	0.52	15.63	14.38	NA	NA	XXX
72197		A	Mri pelvis w/o & w/dye	2.26	19.28	24.04	NA	NA	1.02	22.56	27.32	NA	NA	XXX
72197	26	A	Mri pelvis w/o & w/dye	2.26	0.74	0.74	0.74	0.74	0.10	3.10	3.10	3.10	3.10	XXX
72197	TC	A	Mri pelvis w/o & w/dye	0.00	18.54	23.30	NA	NA	0.92	19.46	24.22	NA	NA	XXX
72198		A	Mr angio pelvis w/o & w/dye	1.80	15.34	12.68	NA	NA	0.67	17.81	15.15	NA	NA	XXX
72198	26	A	Mr angio pelvis w/o & w/dye	1.80	0.60	0.59	0.60	0.59	0.08	2.48	2.47	2.48	2.47	XXX
72198	TC	A	Mr angio pelvis w/o & w/dye	0.00	14.75	12.09	NA	NA	0.59	15.34	12.68	NA	NA	XXX
72200		A	X-ray exam sacroiliac joints	0.17	0.60	0.59	NA	NA	0.03	0.80	0.79	NA	NA	XXX
72200	26	A	X-ray exam sacroiliac joints	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
72200	TC	A	X-ray exam sacroiliac joints	0.00	0.55	0.53	NA	NA	0.02	0.57	0.55	NA	NA	XXX
72202		A	X-ray exam sacroiliac joints	0.19	0.74	0.70	NA	NA	0.05	0.98	0.94	NA	NA	XXX
72202	26	A	X-ray exam sacroiliac joints	0.19	0.06	0.06	0.06	0.06	0.01	0.26	0.26	0.26	0.26	XXX
72202	TC	A	X-ray exam sacroiliac joints	0.00	0.68	0.64	NA	NA	0.04	0.72	0.68	NA	NA	XXX
72220		A	X-ray exam of tailbone	0.17	0.58	0.62	NA	NA	0.05	0.80	0.84	NA	NA	XXX
72220	26	A	X-ray exam of tailbone	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
72220	TC	A	X-ray exam of tailbone	0.00	0.53	0.56	NA	NA	0.04	0.57	0.60	NA	NA	XXX
72240		A	Contrast x-ray of neck spine	0.91	2.53	4.41	NA	NA	0.29	3.73	5.61	NA	NA	XXX
72240	26	A	Contrast x-ray of neck spine	0.91	0.28	0.29	0.28	0.29	0.04	1.23	1.24	1.23	1.24	XXX
72240	TC	A	Contrast x-ray of neck spine	0.00	2.25	4.13	NA	NA	0.25	2.50	4.38	NA	NA	XXX
72255		A	Contrast x-ray, thorax spine	0.91	2.27	4.02	NA	NA	0.26	3.44	5.19	NA	NA	XXX
72255	26	A	Contrast x-ray, thorax spine	0.91	0.27	0.27	0.27	0.27	0.04	1.22	1.22	1.22	1.22	XXX
72255	TC	A	Contrast x-ray, thorax spine	0.00	2.00	3.75	NA	NA	0.22	2.22	3.97	NA	NA	XXX
72265		A	Contrast x-ray, lower spine	0.83	2.50	3.87	NA	NA	0.26	3.59	4.96	NA	NA	XXX
72265	26	A	Contrast x-ray, lower spine	0.83	0.26	0.25	0.26	0.25	0.04	1.13	1.12	1.13	1.12	XXX
72265	TC	A	Contrast x-ray, lower spine	0.00	2.24	3.61	NA	NA	0.22	2.46	3.83	NA	NA	XXX
72270		A	Contrast x-ray, spine	1.33	3.95	5.88	NA	NA	0.39	5.67	7.60	NA	NA	XXX
72270	26	A	Contrast x-ray, spine	1.33	0.43	0.42	0.43	0.42	0.06	1.82	1.81	1.82	1.81	XXX
72270	TC	A	Contrast x-ray, spine	0.00	3.52	5.46	NA	NA	0.33	3.85	5.79	NA	NA	XXX
72275		A	Epidurography	0.76	1.71	2.15	NA	NA	0.26	2.73	3.17	NA	NA	XXX
72275	26	A	Epidurography	0.76	0.19	0.20	0.19	0.20	0.04	0.99	1.00	0.99	1.00	XXX
72275	TC	A	Epidurography	0.00	1.52	1.96	NA	NA	0.22	1.74	2.18	NA	NA	XXX
72285		A	X-ray c/t spine disk	1.16	1.42	6.90	NA	NA	0.50	3.08	8.56	NA	NA	XXX
72285	26	A	X-ray c/t spine disk	1.16	0.29	0.34	0.29	0.34	0.07	1.52	1.57	1.52	1.57	XXX
72285	TC	A	X-ray c/t spine disk	0.00	1.13	6.57	NA	NA	0.43	1.56	7.00	NA	NA	XXX
72295		A	X-ray of lower spine disk	0.83	1.41	6.45	NA	NA	0.46	2.70	7.74	NA	NA	XXX
72295	26	A	X-ray of lower spine disk	0.83	0.23	0.26	0.23	0.26	0.06	1.12	1.15	1.12	1.15	XXX
72295	TC	A	X-ray of lower spine disk	0.00	1.18	6.19	NA	NA	0.40	1.58	6.59	NA	NA	XXX
73000		A	X-ray exam of collar bone	0.16	0.56	0.57	NA	NA	0.03	0.75	0.76	NA	NA	XXX
73000	26	A	X-ray exam of collar bone	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73000	TC	A	X-ray exam of collar bone	0.00	0.50	0.52	NA	NA	0.02	0.52	0.54	NA	NA	XXX
73010		A	X-ray exam of shoulder blade	0.17	0.58	0.58	NA	NA	0.03	0.78	0.78	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
73010	26	A	X-ray exam of shoulder blade	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73010	TC	A	X-ray exam of shoulder blade	0.00	0.53	0.52	NA	NA	0.02	0.55	0.54	NA	NA	XXX
73020		A	X-ray exam of shoulder	0.15	0.45	0.50	NA	NA	0.03	0.63	0.68	NA	NA	XXX
73020	26	A	X-ray exam of shoulder	0.15	0.05	0.05	0.05	0.05	0.01	0.21	0.21	0.21	0.21	XXX
73020	TC	A	X-ray exam of shoulder	0.00	0.40	0.45	NA	NA	0.02	0.42	0.47	NA	NA	XXX
73030		A	X-ray exam of shoulder	0.18	0.57	0.62	NA	NA	0.05	0.80	0.85	NA	NA	XXX
73030	26	A	X-ray exam of shoulder	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
73030	TC	A	X-ray exam of shoulder	0.00	0.51	0.56	NA	NA	0.04	0.55	0.60	NA	NA	XXX
73040		A	Contrast x-ray of shoulder	0.54	2.24	2.27	NA	NA	0.14	2.92	2.95	NA	NA	XXX
73040	26	A	Contrast x-ray of shoulder	0.54	0.17	0.18	0.17	0.18	0.02	0.73	0.74	0.73	0.74	XXX
73040	TC	A	Contrast x-ray of shoulder	0.00	2.06	2.09	NA	NA	0.12	2.18	2.21	NA	NA	XXX
73050		A	X-ray exam of shoulders	0.20	0.74	0.74	NA	NA	0.05	0.99	0.99	NA	NA	XXX
73050	26	A	X-ray exam of shoulders	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	XXX
73050	TC	A	X-ray exam of shoulders	0.00	0.66	0.67	NA	NA	0.04	0.70	0.71	NA	NA	XXX
73060		A	X-ray exam of humerus	0.17	0.57	0.62	NA	NA	0.05	0.79	0.84	NA	NA	XXX
73060	26	A	X-ray exam of humerus	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
73060	TC	A	X-ray exam of humerus	0.00	0.52	0.56	NA	NA	0.04	0.56	0.60	NA	NA	XXX
73070		A	X-ray exam of elbow	0.15	0.56	0.57	NA	NA	0.03	0.74	0.75	NA	NA	XXX
73070	26	A	X-ray exam of elbow	0.15	0.05	0.05	0.05	0.05	0.01	0.21	0.21	0.21	0.21	XXX
73070	TC	A	X-ray exam of elbow	0.00	0.51	0.52	NA	NA	0.02	0.53	0.54	NA	NA	XXX
73080		A	X-ray exam of elbow	0.17	0.75	0.66	NA	NA	0.05	0.97	0.88	NA	NA	XXX
73080	26	A	X-ray exam of elbow	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
73080	TC	A	X-ray exam of elbow	0.00	0.70	0.60	NA	NA	0.04	0.74	0.64	NA	NA	XXX
73085		A	Contrast x-ray of elbow	0.54	1.82	2.17	NA	NA	0.14	2.50	2.85	NA	NA	XXX
73085	26	A	Contrast x-ray of elbow	0.54	0.17	0.19	0.17	0.19	0.02	0.73	0.75	0.73	0.75	XXX
73085	TC	A	Contrast x-ray of elbow	0.00	1.65	1.99	NA	NA	0.12	1.77	2.11	NA	NA	XXX
73090		A	X-ray exam of forearm	0.16	0.55	0.57	NA	NA	0.03	0.74	0.76	NA	NA	XXX
73090	26	A	X-ray exam of forearm	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73090	TC	A	X-ray exam of forearm	0.00	0.50	0.52	NA	NA	0.02	0.52	0.54	NA	NA	XXX
73092		A	X-ray exam of arm, infant	0.16	0.59	0.55	NA	NA	0.03	0.78	0.74	NA	NA	XXX
73092	26	A	X-ray exam of arm, infant	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73092	TC	A	X-ray exam of arm, infant	0.00	0.54	0.50	NA	NA	0.02	0.56	0.52	NA	NA	XXX
73100		A	X-ray exam of wrist	0.16	0.61	0.56	NA	NA	0.03	0.80	0.75	NA	NA	XXX
73100	26	A	X-ray exam of wrist	0.16	0.06	0.05	0.06	0.05	0.01	0.23	0.22	0.23	0.22	XXX
73100	TC	A	X-ray exam of wrist	0.00	0.55	0.51	NA	NA	0.02	0.57	0.53	NA	NA	XXX
73110		A	X-ray exam of wrist	0.17	0.78	0.64	NA	NA	0.03	0.98	0.84	NA	NA	XXX
73110	26	A	X-ray exam of wrist	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
73110	TC	A	X-ray exam of wrist	0.00	0.72	0.58	NA	NA	0.02	0.74	0.60	NA	NA	XXX
73115		A	Contrast x-ray of wrist	0.54	2.38	1.91	NA	NA	0.12	3.04	2.57	NA	NA	XXX
73115	26	A	Contrast x-ray of wrist	0.54	0.18	0.18	0.18	0.18	0.02	0.74	0.74	0.74	0.74	XXX
73115	TC	A	Contrast x-ray of wrist	0.00	2.20	1.74	NA	NA	0.10	2.30	1.84	NA	NA	XXX
73120		A	X-ray exam of hand	0.16	0.56	0.55	NA	NA	0.03	0.75	0.74	NA	NA	XXX
73120	26	A	X-ray exam of hand	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73120	TC	A	X-ray exam of hand	0.00	0.51	0.50	NA	NA	0.02	0.53	0.52	NA	NA	XXX
73130		A	X-ray exam of hand	0.17	0.66	0.61	NA	NA	0.03	0.86	0.81	NA	NA	XXX
73130	26	A	X-ray exam of hand	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
73130	TC	A	X-ray exam of hand	0.00	0.61	0.55	NA	NA	0.02	0.63	0.57	NA	NA	XXX
73140		A	X-ray exam of finger(s)	0.13	0.68	0.52	NA	NA	0.03	0.84	0.68	NA	NA	XXX
73140	26	A	X-ray exam of finger(s)	0.13	0.04	0.04	0.04	0.04	0.01	0.18	0.18	0.18	0.18	XXX
73140	TC	A	X-ray exam of finger(s)	0.00	0.64	0.48	NA	NA	0.02	0.66	0.50	NA	NA	XXX
73200		A	Ct upper extremity w/o dye	1.09	6.45	5.60	NA	NA	0.30	7.84	6.99	NA	NA	XXX
73200	26	A	Ct upper extremity w/o dye	1.09	0.35	0.36	0.35	0.36	0.05	1.49	1.50	1.49	1.50	XXX
73200	TC	A	Ct upper extremity w/o dye	0.00	6.10	5.25	NA	NA	0.25	6.35	5.50	NA	NA	XXX
73201		A	Ct upper extremity w/dye	1.16	7.97	6.71	NA	NA	0.36	9.49	8.23	NA	NA	XXX
73201	26	A	Ct upper extremity w/dye	1.16	0.37	0.38	0.37	0.38	0.05	1.58	1.59	1.58	1.59	XXX
73201	TC	A	Ct upper extremity w/dye	0.00	7.60	6.33	NA	NA	0.31	7.91	6.64	NA	NA	XXX

73202		A	Ct uppr extremity w/o&w/dye	1.22	10.74	8.55	NA	NA	0.44	12.40	10.21	NA	NA	XXX
73202	26	A	Ct uppr extremity w/o&w/dye	1.22	0.39	0.40	0.39	0.40	0.05	1.66	1.67	1.66	1.67	XXX
73202	TC	A	Ct uppr extremity w/o&w/dye	0.00	10.35	8.15	NA	NA	0.39	10.74	8.54	NA	NA	XXX
73206		A	Ct angio upr extrm w/o&w/dye	1.81	10.85	11.38	NA	NA	0.47	13.13	13.66	NA	NA	XXX
73206	26	A	Ct angio upr extrm w/o&w/dye	1.81	0.60	0.59	0.60	0.59	0.08	2.49	2.48	2.49	2.48	XXX
73206	TC	A	Ct angio upr extrm w/o&w/dye	0.00	10.25	10.78	NA	NA	0.39	10.64	11.17	NA	NA	XXX
73218		A	Mri upper extremity w/o dye	1.35	15.03	12.49	NA	NA	0.45	16.83	14.29	NA	NA	XXX
73218	26	A	Mri upper extremity w/o dye	1.35	0.45	0.44	0.45	0.44	0.06	1.86	1.85	1.86	1.85	XXX
73218	TC	A	Mri upper extremity w/o dye	0.00	14.58	12.05	NA	NA	0.39	14.97	12.44	NA	NA	XXX
73219		A	Mri upper extremity w/dye	1.62	15.68	14.41	NA	NA	0.54	17.84	16.57	NA	NA	XXX
73219	26	A	Mri upper extremity w/dye	1.62	0.53	0.54	0.53	0.54	0.07	2.22	2.23	2.22	2.23	XXX
73219	TC	A	Mri upper extremity w/dye	0.00	15.15	13.87	NA	NA	0.47	15.62	14.34	NA	NA	XXX
73220		A	Mri uppr extremity w/o&w/dye	2.15	19.37	24.04	NA	NA	0.94	22.46	27.13	NA	NA	XXX
73220	26	A	Mri uppr extremity w/o&w/dye	2.15	0.70	0.71	0.70	0.71	0.10	2.95	2.96	2.95	2.96	XXX
73220	TC	A	Mri uppr extremity w/o&w/dye	0.00	18.67	23.33	NA	NA	0.84	19.51	24.17	NA	NA	XXX
73221		A	Mri joint upr extrem w/o dye	1.35	13.95	12.22	NA	NA	0.45	15.75	14.02	NA	NA	XXX
73221	26	A	Mri joint upr extrem w/o dye	1.35	0.46	0.45	0.46	0.45	0.06	1.87	1.86	1.87	1.86	XXX
73221	TC	A	Mri joint upr extrem w/o dye	0.00	13.49	11.77	NA	NA	0.39	13.88	12.16	NA	NA	XXX
73222		A	Mri joint upr extrem w/dye	1.62	14.71	14.16	NA	NA	0.54	16.87	16.32	NA	NA	XXX
73222	26	A	Mri joint upr extrem w/dye	1.62	0.55	0.54	0.55	0.54	0.07	2.24	2.23	2.24	2.23	XXX
73222	TC	A	Mri joint upr extrem w/dye	0.00	14.16	13.62	NA	NA	0.47	14.63	14.09	NA	NA	XXX
73223		A	Mri joint upr extr w/o&w/dye	2.15	18.04	23.70	NA	NA	0.94	21.13	26.79	NA	NA	XXX
73223	26	A	Mri joint upr extr w/o&w/dye	2.15	0.71	0.71	0.71	0.71	0.10	2.96	2.96	2.96	2.96	XXX
73223	TC	A	Mri joint upr extr w/o&w/dye	0.00	17.33	22.99	NA	NA	0.84	18.17	23.83	NA	NA	XXX
73225		N	Mr angio upr extr w/o&w/dye	1.73	14.77	12.45	NA	NA	0.69	17.19	14.87	NA	NA	XXX
73225	26	N	Mr angio upr extr w/o&w/dye	1.73	0.40	0.60	0.40	0.60	0.10	2.23	2.43	2.23	2.43	XXX
73225	TC	N	Mr angio upr extr w/o&w/dye	0.00	14.37	11.85	NA	NA	0.59	14.96	12.44	NA	NA	XXX
73500		A	X-ray exam of hip	0.17	0.49	0.52	NA	NA	0.03	0.69	0.72	NA	NA	XXX
73500	26	A	X-ray exam of hip	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73500	TC	A	X-ray exam of hip	0.00	0.43	0.46	NA	NA	0.02	0.45	0.48	NA	NA	XXX
73510		A	X-ray exam of hip	0.21	0.78	0.68	NA	NA	0.05	1.04	0.94	NA	NA	XXX
73510	26	A	X-ray exam of hip	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	XXX
73510	TC	A	X-ray exam of hip	0.00	0.71	0.61	NA	NA	0.04	0.75	0.65	NA	NA	XXX
73520		A	X-ray exam of hips	0.26	0.79	0.77	NA	NA	0.05	1.10	1.08	NA	NA	XXX
73520	26	A	X-ray exam of hips	0.26	0.08	0.09	0.08	0.09	0.01	0.35	0.36	0.35	0.36	XXX
73520	TC	A	X-ray exam of hips	0.00	0.71	0.68	NA	NA	0.04	0.75	0.72	NA	NA	XXX
73525		A	Contrast x-ray of hip	0.54	1.79	2.16	NA	NA	0.15	2.48	2.85	NA	NA	XXX
73525	26	A	Contrast x-ray of hip	0.54	0.17	0.18	0.17	0.18	0.03	0.74	0.75	0.74	0.75	XXX
73525	TC	A	Contrast x-ray of hip	0.00	1.62	1.98	NA	NA	0.12	1.74	2.10	NA	NA	XXX
73530		A	X-ray exam of hip	0.29	NA	NA	NA	NA	0.03	NA	NA	NA	NA	XXX
73530	26	A	X-ray exam of hip	0.29	0.09	0.10	0.09	0.10	0.01	0.39	0.40	0.39	0.40	XXX
73530	TC	A	X-ray exam of hip	0.00	NA	NA	NA	NA	0.02	NA	NA	NA	NA	XXX
73540		A	X-ray exam of pelvis & hips	0.20	0.80	0.68	NA	NA	0.05	1.05	0.93	NA	NA	XXX
73540	26	A	X-ray exam of pelvis & hips	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	XXX
73540	TC	A	X-ray exam of pelvis & hips	0.00	0.73	0.61	NA	NA	0.04	0.77	0.65	NA	NA	XXX
73542		A	X-ray exam, sacroiliac joint	0.59	1.12	1.98	NA	NA	0.15	1.86	2.72	NA	NA	XXX
73542	26	A	X-ray exam, sacroiliac joint	0.59	0.14	0.16	0.14	0.16	0.03	0.76	0.78	0.76	0.78	XXX
73542	TC	A	X-ray exam, sacroiliac joint	0.00	0.98	1.82	NA	NA	0.12	1.10	1.94	NA	NA	XXX
73550		A	X-ray exam of thigh	0.17	0.54	0.61	NA	NA	0.05	0.76	0.83	NA	NA	XXX
73550	26	A	X-ray exam of thigh	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
73550	TC	A	X-ray exam of thigh	0.00	0.49	0.55	NA	NA	0.04	0.53	0.59	NA	NA	XXX
73560		A	X-ray exam of knee, 1 or 2	0.17	0.59	0.58	NA	NA	0.03	0.79	0.78	NA	NA	XXX
73560	26	A	X-ray exam of knee, 1 or 2	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73560	TC	A	X-ray exam of knee, 1 or 2	0.00	0.53	0.52	NA	NA	0.02	0.55	0.54	NA	NA	XXX
73562		A	X-ray exam of knee, 3	0.18	0.73	0.66	NA	NA	0.05	0.96	0.89	NA	NA	XXX
73562	26	A	X-ray exam of knee, 3	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
73562	TC	A	X-ray exam of knee, 3	0.00	0.67	0.60	NA	NA	0.04	0.71	0.64	NA	NA	XXX
73564		A	X-ray exam, knee, 4 or more	0.22	0.87	0.74	NA	NA	0.05	1.14	1.01	NA	NA	XXX
73564	26	A	X-ray exam, knee, 4 or more	0.22	0.08	0.07	0.08	0.07	0.01	0.31	0.30	0.31	0.30	XXX
73564	TC	A	X-ray exam, knee, 4 or more	0.00	0.79	0.66	NA	NA	0.04	0.83	0.70	NA	NA	XXX
73565		A	X-ray exam of knees	0.17	0.65	0.58	NA	NA	0.03	0.85	0.78	NA	NA	XXX
73565	26	A	X-ray exam of knees	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73565	TC	A	X-ray exam of knees	0.00	0.59	0.52	NA	NA	0.02	0.61	0.54	NA	NA	XXX
73580		A	Contrast x-ray of knee joint	0.54	2.40	2.69	NA	NA	0.17	3.11	3.40	NA	NA	XXX
73580	26	A	Contrast x-ray of knee joint	0.54	0.18	0.17	0.18	0.17	0.03	0.75	0.74	0.75	0.74	XXX
73580	TC	A	Contrast x-ray of knee joint	0.00	2.22	2.52	NA	NA	0.14	2.36	2.66	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
73590		A	X-ray exam of lower leg	0.17	0.54	0.57	NA	NA	0.03	0.74	0.77	NA	NA	XXX
73590	26	A	X-ray exam of lower leg	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
73590	TC	A	X-ray exam of lower leg	0.00	0.49	0.51	NA	NA	0.02	0.51	0.53	NA	NA	XXX
73592		A	X-ray exam of leg, infant	0.16	0.60	0.56	NA	NA	0.03	0.79	0.75	NA	NA	XXX
73592	26	A	X-ray exam of leg, infant	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73592	TC	A	X-ray exam of leg, infant	0.00	0.55	0.51	NA	NA	0.02	0.57	0.53	NA	NA	XXX
73600		A	X-ray exam of ankle	0.16	0.57	0.55	NA	NA	0.03	0.76	0.74	NA	NA	XXX
73600	26	A	X-ray exam of ankle	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73600	TC	A	X-ray exam of ankle	0.00	0.51	0.50	NA	NA	0.02	0.53	0.52	NA	NA	XXX
73610		A	X-ray exam of ankle	0.17	0.67	0.61	NA	NA	0.03	0.87	0.81	NA	NA	XXX
73610	26	A	X-ray exam of ankle	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
73610	TC	A	X-ray exam of ankle	0.00	0.62	0.55	NA	NA	0.02	0.64	0.57	NA	NA	XXX
73615		A	Contrast x-ray of ankle	0.54	1.89	2.18	NA	NA	0.15	2.58	2.87	NA	NA	XXX
73615	26	A	Contrast x-ray of ankle	0.54	0.17	0.18	0.17	0.18	0.03	0.74	0.75	0.74	0.75	XXX
73615	TC	A	Contrast x-ray of ankle	0.00	1.72	2.01	NA	NA	0.12	1.84	2.13	NA	NA	XXX
73620		A	X-ray exam of foot	0.16	0.53	0.54	NA	NA	0.03	0.72	0.73	NA	NA	XXX
73620	26	A	X-ray exam of foot	0.16	0.04	0.05	0.04	0.05	0.01	0.21	0.22	0.21	0.22	XXX
73620	TC	A	X-ray exam of foot	0.00	0.49	0.49	NA	NA	0.02	0.51	0.51	NA	NA	XXX
73630		A	X-ray exam of foot	0.17	0.66	0.61	NA	NA	0.03	0.86	0.81	NA	NA	XXX
73630	26	A	X-ray exam of foot	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
73630	TC	A	X-ray exam of foot	0.00	0.60	0.55	NA	NA	0.02	0.62	0.57	NA	NA	XXX
73650		A	X-ray exam of heel	0.16	0.56	0.53	NA	NA	0.03	0.75	0.72	NA	NA	XXX
73650	26	A	X-ray exam of heel	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73650	TC	A	X-ray exam of heel	0.00	0.51	0.48	NA	NA	0.02	0.53	0.50	NA	NA	XXX
73660		A	X-ray exam of toe(s)	0.13	0.64	0.51	NA	NA	0.03	0.80	0.67	NA	NA	XXX
73660	26	A	X-ray exam of toe(s)	0.13	0.04	0.04	0.04	0.04	0.01	0.18	0.18	0.18	0.18	XXX
73660	TC	A	X-ray exam of toe(s)	0.00	0.60	0.47	NA	NA	0.02	0.62	0.49	NA	NA	XXX
73700		A	Ct lower extremity w/o dye	1.09	6.44	5.59	NA	NA	0.30	7.83	6.98	NA	NA	XXX
73700	26	A	Ct lower extremity w/o dye	1.09	0.35	0.36	0.35	0.36	0.05	1.49	1.50	1.49	1.50	XXX
73700	TC	A	Ct lower extremity w/o dye	0.00	6.09	5.24	NA	NA	0.25	6.34	5.49	NA	NA	XXX
73701		A	Ct lower extremity w/dye	1.16	7.95	6.71	NA	NA	0.36	9.47	8.23	NA	NA	XXX
73701	26	A	Ct lower extremity w/dye	1.16	0.36	0.38	0.36	0.38	0.05	1.57	1.59	1.57	1.59	XXX
73701	TC	A	Ct lower extremity w/dye	0.00	7.59	6.33	NA	NA	0.31	7.90	6.64	NA	NA	XXX
73702		A	Ct lwr extremity w/o&w/dye	1.22	10.81	8.57	NA	NA	0.44	12.47	10.23	NA	NA	XXX
73702	26	A	Ct lwr extremity w/o&w/dye	1.22	0.40	0.40	0.40	0.40	0.05	1.67	1.67	1.67	1.67	XXX
73702	TC	A	Ct lwr extremity w/o&w/dye	0.00	10.41	8.17	NA	NA	0.39	10.80	8.56	NA	NA	XXX
73706		A	Ct angio lwr extr w/o&w/dye	1.90	12.39	11.78	NA	NA	0.47	14.76	14.15	NA	NA	XXX
73706	26	A	Ct angio lwr extr w/o&w/dye	1.90	0.66	0.63	0.66	0.63	0.08	2.64	2.61	2.64	2.61	XXX
73706	TC	A	Ct angio lwr extr w/o&w/dye	0.00	11.73	11.15	NA	NA	0.39	12.12	11.54	NA	NA	XXX
73718		A	Mri lower extremity w/o dye	1.35	14.74	12.42	NA	NA	0.45	16.54	14.22	NA	NA	XXX
73718	26	A	Mri lower extremity w/o dye	1.35	0.46	0.45	0.46	0.45	0.06	1.87	1.86	1.87	1.86	XXX
73718	TC	A	Mri lower extremity w/o dye	0.00	14.28	11.97	NA	NA	0.39	14.67	12.36	NA	NA	XXX
73719		A	Mri lower extremity w/dye	1.62	15.59	14.38	NA	NA	0.54	17.75	16.54	NA	NA	XXX
73719	26	A	Mri lower extremity w/dye	1.62	0.52	0.53	0.52	0.53	0.07	2.21	2.22	2.21	2.22	XXX
73719	TC	A	Mri lower extremity w/dye	0.00	15.07	13.85	NA	NA	0.47	15.54	14.32	NA	NA	XXX
73720		A	Mri lwr extremity w/o&w/dye	2.15	19.28	24.01	NA	NA	0.94	22.37	27.10	NA	NA	XXX
73720	26	A	Mri lwr extremity w/o&w/dye	2.15	0.69	0.70	0.69	0.70	0.10	2.94	2.95	2.94	2.95	XXX
73720	TC	A	Mri lwr extremity w/o&w/dye	0.00	18.59	23.31	NA	NA	0.84	19.43	24.15	NA	NA	XXX
73721		A	Mri jnt of lwr extre w/o dye	1.35	14.27	12.30	NA	NA	0.45	16.07	14.10	NA	NA	XXX
73721	26	A	Mri jnt of lwr extre w/o dye	1.35	0.46	0.45	0.46	0.45	0.06	1.87	1.86	1.87	1.86	XXX
73721	TC	A	Mri jnt of lwr extre w/o dye	0.00	13.81	11.85	NA	NA	0.39	14.20	12.24	NA	NA	XXX
73722		A	Mri joint of lwr extr w/dye	1.62	14.86	14.19	NA	NA	0.54	17.02	16.35	NA	NA	XXX
73722	26	A	Mri joint of lwr extr w/dye	1.62	0.54	0.53	0.54	0.53	0.07	2.23	2.22	2.23	2.22	XXX
73722	TC	A	Mri joint of lwr extr w/dye	0.00	14.32	13.66	NA	NA	0.47	14.79	14.13	NA	NA	XXX
73723		A	Mri joint lwr extr w/o&w/dye	2.15	17.91	23.67	NA	NA	0.94	21.00	26.76	NA	NA	XXX
73723	26	A	Mri joint lwr extr w/o&w/dye	2.15	0.70	0.71	0.70	0.71	0.10	2.95	2.96	2.95	2.96	XXX

73723	TC	A	Mri joint lwr extr w/o&w/dye	0.00	17.21	22.96	NA	NA	0.84	18.05	23.80	NA	NA	XXX
73725		R	Mr ang lwr ext w or w/o dye	1.82	15.34	12.69	NA	NA	0.67	17.83	15.18	NA	NA	XXX
73725	26	R	Mr ang lwr ext w or w/o dye	1.82	0.60	0.60	0.60	0.60	0.08	2.50	2.50	2.50	2.50	XXX
73725	TC	R	Mr ang lwr ext w or w/o dye	0.00	14.75	12.09	NA	NA	0.59	15.34	12.68	NA	NA	XXX
74000		A	X-ray exam of abdomen	0.18	0.46	0.55	NA	NA	0.03	0.67	0.76	NA	NA	XXX
74000	26	A	X-ray exam of abdomen	0.18	0.05	0.06	0.05	0.06	0.01	0.24	0.25	0.24	0.25	XXX
74000	TC	A	X-ray exam of abdomen	0.00	0.40	0.49	NA	NA	0.02	0.42	0.51	NA	NA	XXX
74010		A	X-ray exam of abdomen	0.23	0.79	0.69	NA	NA	0.05	1.07	0.97	NA	NA	XXX
74010	26	A	X-ray exam of abdomen	0.23	0.07	0.08	0.07	0.08	0.01	0.31	0.32	0.31	0.32	XXX
74010	TC	A	X-ray exam of abdomen	0.00	0.72	0.61	NA	NA	0.04	0.76	0.65	NA	NA	XXX
74020		A	X-ray exam of abdomen	0.27	0.80	0.73	NA	NA	0.05	1.12	1.05	NA	NA	XXX
74020	26	A	X-ray exam of abdomen	0.27	0.08	0.09	0.08	0.09	0.01	0.36	0.37	0.36	0.37	XXX
74020	TC	A	X-ray exam of abdomen	0.00	0.71	0.64	NA	NA	0.04	0.75	0.68	NA	NA	XXX
74022		A	X-ray exam series, abdomen	0.32	0.97	0.87	NA	NA	0.06	1.35	1.25	NA	NA	XXX
74022	26	A	X-ray exam series, abdomen	0.32	0.10	0.10	0.10	0.10	0.01	0.43	0.43	0.43	0.43	XXX
74022	TC	A	X-ray exam series, abdomen	0.00	0.87	0.77	NA	NA	0.05	0.92	0.82	NA	NA	XXX
74150		A	Ct abdomen w/o dye	1.19	6.06	6.05	NA	NA	0.35	7.60	7.59	NA	NA	XXX
74150	26	A	Ct abdomen w/o dye	1.19	0.38	0.39	0.38	0.39	0.05	1.62	1.63	1.62	1.63	XXX
74150	TC	A	Ct abdomen w/o dye	0.00	5.68	5.67	NA	NA	0.30	5.98	5.97	NA	NA	XXX
74160		A	Ct abdomen w/dye	1.27	8.83	7.65	NA	NA	0.42	10.52	9.34	NA	NA	XXX
74160	26	A	Ct abdomen w/dye	1.27	0.40	0.42	0.40	0.42	0.06	1.73	1.75	1.73	1.75	XXX
74160	TC	A	Ct abdomen w/dye	0.00	8.43	7.24	NA	NA	0.36	8.79	7.60	NA	NA	XXX
74170		A	Ct abdomen w/o & w/dye	1.40	12.27	9.77	NA	NA	0.49	14.16	11.66	NA	NA	XXX
74170	26	A	Ct abdomen w/o & w/dye	1.40	0.45	0.46	0.45	0.46	0.06	1.91	1.92	1.91	1.92	XXX
74170	TC	A	Ct abdomen w/o & w/dye	0.00	11.82	9.32	NA	NA	0.43	12.25	9.75	NA	NA	XXX
74175		A	Ct angio abdom w/o & w/dye	1.90	12.34	12.57	NA	NA	0.47	14.71	14.94	NA	NA	XXX
74175	26	A	Ct angio abdom w/o & w/dye	1.90	0.63	0.62	0.63	0.62	0.08	2.61	2.60	2.61	2.60	XXX
74175	TC	A	Ct angio abdom w/o & w/dye	0.00	11.71	11.95	NA	NA	0.39	12.10	12.34	NA	NA	XXX
74181		A	Mri abdomen w/o dye	1.46	12.60	11.91	NA	NA	0.51	14.57	13.88	NA	NA	XXX
74181	26	A	Mri abdomen w/o dye	1.46	0.47	0.48	0.47	0.48	0.06	1.99	2.00	1.99	2.00	XXX
74181	TC	A	Mri abdomen w/o dye	0.00	12.13	11.43	NA	NA	0.45	12.58	11.88	NA	NA	XXX
74182		A	Mri abdomen w/dye	1.73	17.59	14.91	NA	NA	0.60	19.92	17.24	NA	NA	XXX
74182	26	A	Mri abdomen w/dye	1.73	0.55	0.57	0.55	0.57	0.08	2.36	2.38	2.36	2.38	XXX
74182	TC	A	Mri abdomen w/dye	0.00	17.04	14.34	NA	NA	0.52	17.56	14.86	NA	NA	XXX
74183		A	Mri abdomen w/o & w/dye	2.26	19.27	24.03	NA	NA	1.02	22.55	27.31	NA	NA	XXX
74183	26	A	Mri abdomen w/o & w/dye	2.26	0.73	0.74	0.73	0.74	0.10	3.09	3.10	3.09	3.10	XXX
74183	TC	A	Mri abdomen w/o & w/dye	0.00	18.54	23.30	NA	NA	0.92	19.46	24.22	NA	NA	XXX
74185		R	Mri angio, abdom w orw/o dye	1.80	15.31	12.67	NA	NA	0.67	17.78	15.14	NA	NA	XXX
74185	26	R	Mri angio, abdom w orw/o dye	1.80	0.59	0.59	0.59	0.59	0.08	2.47	2.47	2.47	2.47	XXX
74185	TC	R	Mri angio, abdom w orw/o dye	0.00	14.72	12.08	NA	NA	0.59	15.31	12.67	NA	NA	XXX
74190		A	X-ray exam of peritoneum	0.48	NA	NA	NA	NA	0.09	NA	NA	NA	NA	XXX
74190	26	A	X-ray exam of peritoneum	0.48	0.15	0.16	0.15	0.16	0.02	0.65	0.66	0.65	0.66	XXX
74190	TC	A	X-ray exam of peritoneum	0.00	NA	NA	NA	NA	0.07	NA	NA	NA	NA	XXX
74210		A	Contrst x-ray exam of throat	0.36	1.76	1.42	NA	NA	0.08	2.20	1.86	NA	NA	XXX
74210	26	A	Contrst x-ray exam of throat	0.36	0.11	0.12	0.11	0.12	0.02	0.49	0.50	0.49	0.50	XXX
74210	TC	A	Contrst x-ray exam of throat	0.00	1.65	1.31	NA	NA	0.06	1.71	1.37	NA	NA	XXX
74220		A	Contrast x-ray, esophagus	0.46	2.01	1.51	NA	NA	0.08	2.55	2.05	NA	NA	XXX
74220	26	A	Contrast x-ray, esophagus	0.46	0.14	0.15	0.14	0.15	0.02	0.62	0.63	0.62	0.63	XXX
74220	TC	A	Contrast x-ray, esophagus	0.00	1.87	1.36	NA	NA	0.06	1.93	1.42	NA	NA	XXX
74230		A	Cine/vid x-ray, throat/esoph	0.53	1.93	1.59	NA	NA	0.09	2.55	2.21	NA	NA	XXX
74230	26	A	Cine/vid x-ray, throat/esoph	0.53	0.17	0.17	0.17	0.17	0.02	0.72	0.72	0.72	0.72	XXX
74230	TC	A	Cine/vid x-ray, throat/esoph	0.00	1.76	1.42	NA	NA	0.07	1.83	1.49	NA	NA	XXX
74235		C	Remove esophagus obstruction	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
74235	26	A	Remove esophagus obstruction	1.19	0.40	0.39	0.40	0.39	0.05	1.64	1.63	1.64	1.63	XXX
74235	TC	C	Remove esophagus obstruction	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
74240		A	X-ray exam, upper gi tract	0.69	2.28	1.84	NA	NA	0.11	3.08	2.64	NA	NA	XXX
74240	26	A	X-ray exam, upper gi tract	0.69	0.22	0.23	0.22	0.23	0.03	0.94	0.95	0.94	0.95	XXX
74240	TC	A	X-ray exam, upper gi tract	0.00	2.07	1.61	NA	NA	0.08	2.15	1.69	NA	NA	XXX
74241		A	X-ray exam, upper gi tract	0.69	2.55	1.93	NA	NA	0.11	3.35	2.73	NA	NA	XXX
74241	26	A	X-ray exam, upper gi tract	0.69	0.21	0.23	0.21	0.23	0.03	0.93	0.95	0.93	0.95	XXX
74241	TC	A	X-ray exam, upper gi tract	0.00	2.34	1.70	NA	NA	0.08	2.42	1.78	NA	NA	XXX
74245		A	X-ray exam, upper gi tract	0.91	3.94	3.00	NA	NA	0.17	5.02	4.08	NA	NA	XXX
74245	26	A	X-ray exam, upper gi tract	0.91	0.29	0.30	0.29	0.30	0.04	1.24	1.25	1.24	1.25	XXX
74245	TC	A	X-ray exam, upper gi tract	0.00	3.65	2.70	NA	NA	0.13	3.78	2.83	NA	NA	XXX
74246		A	Contrst x-ray uppr gi tract	0.69	2.78	2.09	NA	NA	0.13	3.60	2.91	NA	NA	XXX
74246	26	A	Contrst x-ray uppr gi tract	0.69	0.22	0.23	0.22	0.23	0.03	0.94	0.95	0.94	0.95	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
74246	TC	A	Contrst x-ray uppr gi tract	0.00	2.57	1.87	NA	NA	0.10	2.67	1.97	NA	NA	XXX
74247		A	Contrst x-ray uppr gi tract	0.69	3.21	2.23	NA	NA	0.14	4.04	3.06	NA	NA	XXX
74247	26	A	Contrst x-ray uppr gi tract	0.69	0.22	0.23	0.22	0.23	0.03	0.94	0.95	0.94	0.95	XXX
74247	TC	A	Contrst x-ray uppr gi tract	0.00	2.99	2.01	NA	NA	0.11	3.10	2.12	NA	NA	XXX
74249		A	Contrst x-ray uppr gi tract	0.91	4.33	3.24	NA	NA	0.18	5.42	4.33	NA	NA	XXX
74249	26	A	Contrst x-ray uppr gi tract	0.91	0.29	0.30	0.29	0.30	0.04	1.24	1.25	1.24	1.25	XXX
74249	TC	A	Contrst x-ray uppr gi tract	0.00	4.05	2.94	NA	NA	0.14	4.19	3.08	NA	NA	XXX
74250		A	X-ray exam of small bowel	0.47	2.48	1.72	NA	NA	0.09	3.04	2.28	NA	NA	XXX
74250	26	A	X-ray exam of small bowel	0.47	0.15	0.15	0.15	0.15	0.02	0.64	0.64	0.64	0.64	XXX
74250	TC	A	X-ray exam of small bowel	0.00	2.33	1.57	NA	NA	0.07	2.40	1.64	NA	NA	XXX
74251		A	X-ray exam of small bowel	0.69	10.01	3.66	NA	NA	0.10	10.80	4.45	NA	NA	XXX
74251	26	A	X-ray exam of small bowel	0.69	0.22	0.23	0.22	0.23	0.03	0.94	0.95	0.94	0.95	XXX
74251	TC	A	X-ray exam of small bowel	0.00	9.80	3.43	NA	NA	0.07	9.87	3.50	NA	NA	XXX
74260		A	X-ray exam of small bowel	0.50	8.32	3.32	NA	NA	0.10	8.92	3.92	NA	NA	XXX
74260	26	A	X-ray exam of small bowel	0.50	0.15	0.16	0.15	0.16	0.02	0.67	0.68	0.67	0.68	XXX
74260	TC	A	X-ray exam of small bowel	0.00	8.17	3.16	NA	NA	0.08	8.25	3.24	NA	NA	XXX
74270		A	Contrast x-ray exam of colon	0.69	3.57	2.33	NA	NA	0.14	4.40	3.16	NA	NA	XXX
74270	26	A	Contrast x-ray exam of colon	0.69	0.22	0.23	0.22	0.23	0.03	0.94	0.95	0.94	0.95	XXX
74270	TC	A	Contrast x-ray exam of colon	0.00	3.35	2.11	NA	NA	0.11	3.46	2.22	NA	NA	XXX
74280		A	Contrast x-ray exam of colon	0.99	4.94	3.15	NA	NA	0.17	6.10	4.31	NA	NA	XXX
74280	26	A	Contrast x-ray exam of colon	0.99	0.31	0.32	0.31	0.32	0.04	1.34	1.35	1.34	1.35	XXX
74280	TC	A	Contrast x-ray exam of colon	0.00	4.63	2.83	NA	NA	0.13	4.76	2.96	NA	NA	XXX
74283		A	Contrast x-ray exam of colon	2.02	3.42	3.27	NA	NA	0.23	5.67	5.52	NA	NA	XXX
74283	26	A	Contrast x-ray exam of colon	2.02	0.61	0.65	0.61	0.65	0.09	2.72	2.76	2.72	2.76	XXX
74283	TC	A	Contrast x-ray exam of colon	0.00	2.80	2.62	NA	NA	0.14	2.94	2.76	NA	NA	XXX
74290		A	Contrast x-ray, gallbladder	0.32	1.56	1.01	NA	NA	0.06	1.94	1.39	NA	NA	XXX
74290	26	A	Contrast x-ray, gallbladder	0.32	0.10	0.10	0.10	0.10	0.01	0.43	0.43	0.43	0.43	XXX
74290	TC	A	Contrast x-ray, gallbladder	0.00	1.46	0.91	NA	NA	0.05	1.51	0.96	NA	NA	XXX
74291		A	Contrast x-rays, gallbladder	0.20	1.60	0.77	NA	NA	0.03	1.83	1.00	NA	NA	XXX
74291	26	A	Contrast x-rays, gallbladder	0.20	0.06	0.07	0.06	0.07	0.01	0.27	0.28	0.27	0.28	XXX
74291	TC	A	Contrast x-rays, gallbladder	0.00	1.54	0.70	NA	NA	0.02	1.56	0.72	NA	NA	XXX
74300		C	X-ray bile ducts/pancreas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
74300	26	A	X-ray bile ducts/pancreas	0.36	0.11	0.12	0.11	0.12	0.02	0.49	0.50	0.49	0.50	XXX
74300	TC	C	X-ray bile ducts/pancreas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
74301		C	X-rays at surgery add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
74301	26	A	X-rays at surgery add-on	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	ZZZ
74301	TC	C	X-rays at surgery add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
74305		A	X-ray bile ducts/pancreas	0.42	NA	NA	NA	NA	0.07	NA	NA	NA	NA	XXX
74305	26	A	X-ray bile ducts/pancreas	0.42	0.14	0.14	0.14	0.14	0.02	0.58	0.58	0.58	0.58	XXX
74305	TC	A	X-ray bile ducts/pancreas	0.00	NA	NA	NA	NA	0.05	NA	NA	NA	NA	XXX
74320		A	Contrast x-ray of bile ducts	0.54	2.13	3.03	NA	NA	0.19	2.86	3.76	NA	NA	XXX
74320	26	A	Contrast x-ray of bile ducts	0.54	0.17	0.18	0.17	0.18	0.02	0.73	0.74	0.73	0.74	XXX
74320	TC	A	Contrast x-ray of bile ducts	0.00	1.95	2.85	NA	NA	0.17	2.12	3.02	NA	NA	XXX
74327		A	X-ray bile stone removal	0.70	2.99	2.24	NA	NA	0.14	3.83	3.08	NA	NA	XXX
74327	26	A	X-ray bile stone removal	0.70	0.23	0.23	0.23	0.23	0.03	0.96	0.96	0.96	0.96	XXX
74327	TC	A	X-ray bile stone removal	0.00	2.76	2.01	NA	NA	0.11	2.87	2.12	NA	NA	XXX
74328		A	X-ray bile duct endoscopy	0.70	NA	NA	NA	NA	0.20	NA	NA	NA	NA	XXX
74328	26	A	X-ray bile duct endoscopy	0.70	0.23	0.23	0.23	0.23	0.03	0.96	0.96	0.96	0.96	XXX
74328	TC	A	X-ray bile duct endoscopy	0.00	NA	NA	NA	NA	0.17	NA	NA	NA	NA	XXX
74329		C	X-ray for pancreas endoscopy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
74329	26	A	X-ray for pancreas endoscopy	0.70	0.23	0.23	0.23	0.23	0.03	0.96	0.96	0.96	0.96	XXX
74329	TC	C	X-ray for pancreas endoscopy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
74330		A	X-ray bile/panc endoscopy	0.90	NA	NA	NA	NA	0.21	NA	NA	NA	NA	XXX
74330	26	A	X-ray bile/panc endoscopy	0.90	0.30	0.29	0.30	0.29	0.04	1.24	1.23	1.24	1.23	XXX
74330	TC	A	X-ray bile/panc endoscopy	0.00	NA	NA	NA	NA	0.17	NA	NA	NA	NA	XXX
74340		A	X-ray guide for GI tube	0.54	NA	NA	NA	NA	0.16	NA	NA	NA	NA	XXX

74340	26	A	X-ray guide for GI tube	0.54	0.17	0.18	0.17	0.18	0.02	0.73	0.74	0.73	0.74	XXX
74340	TC	A	X-ray guide for GI tube	0.00	NA	NA	NA	NA	0.14	NA	NA	NA	NA	XXX
74350		A	X-ray guide, stomach tube	0.76	2.22	3.11	NA	NA	0.20	3.18	4.07	NA	NA	XXX
74350	26	A	X-ray guide, stomach tube	0.76	0.25	0.25	0.25	0.25	0.03	1.04	1.04	1.04	1.04	XXX
74350	TC	A	X-ray guide, stomach tube	0.00	1.97	2.86	NA	NA	0.17	2.14	3.03	NA	NA	XXX
74355		A	X-ray guide, intestinal tube	0.76	NA	NA	NA	NA	0.17	NA	NA	NA	NA	XXX
74355	26	A	X-ray guide, intestinal tube	0.76	0.25	0.25	0.25	0.25	0.03	1.04	1.04	1.04	1.04	XXX
74355	TC	A	X-ray guide, intestinal tube	0.00	NA	NA	NA	NA	0.14	NA	NA	NA	NA	XXX
74360		A	X-ray guide, GI dilation	0.54	NA	NA	NA	NA	0.19	NA	NA	NA	NA	XXX
74360	26	A	X-ray guide, GI dilation	0.54	0.24	0.20	0.24	0.20	0.02	0.80	0.76	0.80	0.76	XXX
74360	TC	A	X-ray guide, GI dilation	0.00	NA	NA	NA	NA	0.17	NA	NA	NA	NA	XXX
74363		C	X-ray, bile duct dilation	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
74363	26	A	X-ray, bile duct dilation	0.88	0.29	0.29	0.29	0.29	0.04	1.21	1.21	1.21	1.21	XXX
74363	TC	C	X-ray, bile duct dilation	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
74400		A	Contrst x-ray, urinary tract	0.49	2.60	2.02	NA	NA	0.13	3.22	2.64	NA	NA	XXX
74400	26	A	Contrst x-ray, urinary tract	0.49	0.16	0.16	0.16	0.16	0.02	0.67	0.67	0.67	0.67	XXX
74400	TC	A	Contrst x-ray, urinary tract	0.00	2.44	1.87	NA	NA	0.11	2.55	1.98	NA	NA	XXX
74410		A	Contrst x-ray, urinary tract	0.49	2.73	2.27	NA	NA	0.13	3.35	2.89	NA	NA	XXX
74410	26	A	Contrst x-ray, urinary tract	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XXX
74410	TC	A	Contrst x-ray, urinary tract	0.00	2.56	2.10	NA	NA	0.11	2.67	2.21	NA	NA	XXX
74415		A	Contrst x-ray, urinary tract	0.49	3.29	2.53	NA	NA	0.14	3.92	3.16	NA	NA	XXX
74415	26	A	Contrst x-ray, urinary tract	0.49	0.16	0.16	0.16	0.16	0.02	0.67	0.67	0.67	0.67	XXX
74415	TC	A	Contrst x-ray, urinary tract	0.00	3.13	2.37	NA	NA	0.12	3.25	2.49	NA	NA	XXX
74420		A	Contrst x-ray, urinary tract	0.36	NA	NA	NA	NA	0.16	NA	NA	NA	NA	XXX
74420	26	A	Contrst x-ray, urinary tract	0.36	0.13	0.12	0.13	0.12	0.02	0.51	0.50	0.51	0.50	XXX
74420	TC	A	Contrst x-ray, urinary tract	0.00	NA	NA	NA	NA	0.14	NA	NA	NA	NA	XXX
74425		A	Contrst x-ray, urinary tract	0.36	NA	NA	NA	NA	0.09	NA	NA	NA	NA	XXX
74425	26	A	Contrst x-ray, urinary tract	0.36	0.12	0.12	0.12	0.12	0.02	0.50	0.50	0.50	0.50	XXX
74425	TC	A	Contrst x-ray, urinary tract	0.00	NA	NA	NA	NA	0.07	NA	NA	NA	NA	XXX
74430		A	Contrast x-ray, bladder	0.32	1.96	1.35	NA	NA	0.08	2.36	1.75	NA	NA	XXX
74430	26	A	Contrast x-ray, bladder	0.32	0.11	0.10	0.11	0.10	0.02	0.45	0.44	0.45	0.44	XXX
74430	TC	A	Contrast x-ray, bladder	0.00	1.85	1.25	NA	NA	0.06	1.91	1.31	NA	NA	XXX
74440		A	X-ray, male genital tract	0.38	2.20	1.49	NA	NA	0.08	2.66	1.95	NA	NA	XXX
74440	26	A	X-ray, male genital tract	0.38	0.15	0.13	0.15	0.13	0.02	0.55	0.53	0.55	0.53	XXX
74440	TC	A	X-ray, male genital tract	0.00	2.06	1.36	NA	NA	0.06	2.12	1.42	NA	NA	XXX
74445		A	X-ray exam of penis	1.14	NA	NA	NA	NA	0.13	NA	NA	NA	NA	XXX
74445	26	A	X-ray exam of penis	1.14	0.44	0.39	0.44	0.39	0.07	1.65	1.60	1.65	1.60	XXX
74445	TC	A	X-ray exam of penis	0.00	NA	NA	NA	NA	0.06	NA	NA	NA	NA	XXX
74450		A	X-ray, urethra/bladder	0.33	NA	NA	NA	NA	0.10	NA	NA	NA	NA	XXX
74450	26	A	X-ray, urethra/bladder	0.33	0.11	0.11	0.11	0.11	0.02	0.46	0.46	0.46	0.46	XXX
74450	TC	A	X-ray, urethra/bladder	0.00	NA	NA	NA	NA	0.08	NA	NA	NA	NA	XXX
74455		A	X-ray, urethra/bladder	0.33	2.18	1.81	NA	NA	0.12	2.63	2.26	NA	NA	XXX
74455	26	A	X-ray, urethra/bladder	0.33	0.12	0.11	0.12	0.11	0.02	0.47	0.46	0.47	0.46	XXX
74455	TC	A	X-ray, urethra/bladder	0.00	2.06	1.70	NA	NA	0.10	2.16	1.80	NA	NA	XXX
74470		A	X-ray exam of kidney lesion	0.54	NA	NA	NA	NA	0.09	NA	NA	NA	NA	XXX
74470	26	A	X-ray exam of kidney lesion	0.54	0.16	0.18	0.16	0.18	0.02	0.72	0.74	0.72	0.74	XXX
74470	TC	A	X-ray exam of kidney lesion	0.00	NA	NA	NA	NA	0.07	NA	NA	NA	NA	XXX
74475		A	X-ray control, cath insert	0.54	2.12	3.72	NA	NA	0.24	2.90	4.50	NA	NA	XXX
74475	26	A	X-ray control, cath insert	0.54	0.18	0.18	0.18	0.18	0.02	0.74	0.74	0.74	0.74	XXX
74475	TC	A	X-ray control, cath insert	0.00	1.94	3.54	NA	NA	0.22	2.16	3.76	NA	NA	XXX
74480		A	X-ray control, cath insert	0.54	2.13	3.72	NA	NA	0.24	2.91	4.50	NA	NA	XXX
74480	26	A	X-ray control, cath insert	0.54	0.18	0.18	0.18	0.18	0.02	0.74	0.74	0.74	0.74	XXX
74480	TC	A	X-ray control, cath insert	0.00	1.95	3.54	NA	NA	0.22	2.17	3.76	NA	NA	XXX
74485		A	X-ray guide, GU dilation	0.54	2.29	3.06	NA	NA	0.20	3.03	3.80	NA	NA	XXX
74485	26	A	X-ray guide, GU dilation	0.54	0.19	0.18	0.19	0.18	0.03	0.76	0.75	0.76	0.75	XXX
74485	TC	A	X-ray guide, GU dilation	0.00	2.10	2.89	NA	NA	0.17	2.27	3.06	NA	NA	XXX
74710		A	X-ray measurement of pelvis	0.34	0.64	1.03	NA	NA	0.08	1.06	1.45	NA	NA	XXX
74710	26	A	X-ray measurement of pelvis	0.34	0.11	0.11	0.11	0.11	0.02	0.47	0.47	0.47	0.47	XXX
74710	TC	A	X-ray measurement of pelvis	0.00	0.53	0.92	NA	NA	0.06	0.59	0.98	NA	NA	XXX
74740		A	X-ray, female genital tract	0.38	1.77	1.52	NA	NA	0.09	2.24	1.99	NA	NA	XXX
74740	26	A	X-ray, female genital tract	0.38	0.12	0.13	0.12	0.13	0.02	0.52	0.53	0.52	0.53	XXX
74740	TC	A	X-ray, female genital tract	0.00	1.65	1.40	NA	NA	0.07	1.72	1.47	NA	NA	XXX
74742		C	X-ray, fallopian tube	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
74742	26	A	X-ray, fallopian tube	0.61	0.17	0.19	0.17	0.19	0.03	0.81	0.83	0.81	0.83	XXX
74742	TC	C	X-ray, fallopian tube	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
74775		A	X-ray exam of perineum	0.62	NA	NA	NA	NA	0.11	NA	NA	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
74775	26	A	X-ray exam of perineum	0.62	0.19	0.21	0.19	0.21	0.03	0.84	0.86	0.84	0.86	XXX
74775	TC	A	X-ray exam of perineum	0.00	NA	NA	NA	NA	0.08	NA	NA	NA	NA	XXX
75552		A	Heart mri for morph w/o dye	1.60	19.30	13.62	NA	NA	0.66	21.58	15.88	NA	NA	XXX
75552	26	A	Heart mri for morph w/o dye	1.60	0.57	0.54	0.57	0.54	0.07	2.24	2.21	2.24	2.21	XXX
75552	TC	A	Heart mri for morph w/o dye	0.00	18.73	13.08	NA	NA	0.59	19.32	13.67	NA	NA	XXX
75553		A	Heart mri for morph w/dye	2.00	24.28	14.96	NA	NA	0.66	26.94	17.62	NA	NA	XXX
75553	26	A	Heart mri for morph w/dye	2.00	0.94	0.72	0.94	0.72	0.07	3.01	2.79	3.01	2.79	XXX
75553	TC	A	Heart mri for morph w/dye	0.00	23.34	14.24	NA	NA	0.59	23.93	14.83	NA	NA	XXX
75554		A	Cardiac MRI/function	1.83	27.20	15.68	NA	NA	0.66	29.69	18.17	NA	NA	XXX
75554	26	A	Cardiac MRI/function	1.83	0.79	0.68	0.79	0.68	0.07	2.69	2.58	2.69	2.58	XXX
75554	TC	A	Cardiac MRI/function	0.00	26.41	15.00	NA	NA	0.59	27.00	15.59	NA	NA	XXX
75555		A	Cardiac MRI/limited study	1.74	27.64	15.79	NA	NA	0.66	30.04	18.19	NA	NA	XXX
75555	26	A	Cardiac MRI/limited study	1.74	0.84	0.69	0.84	0.69	0.07	2.65	2.50	2.65	2.50	XXX
75555	TC	A	Cardiac MRI/limited study	0.00	26.80	15.10	NA	NA	0.59	27.39	15.69	NA	NA	XXX
75600		A	Contrast x-ray exam of aorta	0.49	6.49	11.22	NA	NA	0.67	7.65	12.38	NA	NA	XXX
75600	26	A	Contrast x-ray exam of aorta	0.49	0.25	0.21	0.25	0.21	0.02	0.76	0.72	0.76	0.72	XXX
75600	TC	A	Contrast x-ray exam of aorta	0.00	6.24	11.01	NA	NA	0.65	6.89	11.66	NA	NA	XXX
75605		A	Contrast x-ray exam of aorta	1.14	3.63	10.66	NA	NA	0.70	5.47	12.50	NA	NA	XXX
75605	26	A	Contrast x-ray exam of aorta	1.14	0.51	0.43	0.51	0.43	0.05	1.70	1.62	1.70	1.62	XXX
75605	TC	A	Contrast x-ray exam of aorta	0.00	3.13	10.23	NA	NA	0.65	3.78	10.88	NA	NA	XXX
75625		A	Contrast x-ray exam of aorta	1.14	3.38	10.58	NA	NA	0.71	5.23	12.43	NA	NA	XXX
75625	26	A	Contrast x-ray exam of aorta	1.14	0.42	0.39	0.42	0.39	0.06	1.62	1.59	1.62	1.59	XXX
75625	TC	A	Contrast x-ray exam of aorta	0.00	2.96	10.19	NA	NA	0.65	3.61	10.84	NA	NA	XXX
75630		A	X-ray aorta, leg arteries	1.79	3.80	11.26	NA	NA	0.80	6.39	13.85	NA	NA	XXX
75630	26	A	X-ray aorta, leg arteries	1.79	0.72	0.64	0.72	0.64	0.11	2.62	2.54	2.62	2.54	XXX
75630	TC	A	X-ray aorta, leg arteries	0.00	3.08	10.62	NA	NA	0.69	3.77	11.31	NA	NA	XXX
75635		A	Ct angio abdominal arteries	2.40	12.87	15.74	NA	NA	0.50	15.77	18.64	NA	NA	XXX
75635	26	A	Ct angio abdominal arteries	2.40	0.83	0.80	0.83	0.80	0.11	3.34	3.31	3.34	3.31	XXX
75635	TC	A	Ct angio abdominal arteries	0.00	12.04	14.94	NA	NA	0.39	12.43	15.33	NA	NA	XXX
75650		A	Artery x-rays, head & neck	1.49	3.53	10.70	NA	NA	0.72	5.74	12.91	NA	NA	XXX
75650	26	A	Artery x-rays, head & neck	1.49	0.55	0.51	0.55	0.51	0.07	2.11	2.07	2.11	2.07	XXX
75650	TC	A	Artery x-rays, head & neck	0.00	2.97	10.19	NA	NA	0.65	3.62	10.84	NA	NA	XXX
75658		A	Artery x-rays, arm	1.31	3.86	10.77	NA	NA	0.72	5.89	12.80	NA	NA	XXX
75658	26	A	Artery x-rays, arm	1.31	0.48	0.47	0.48	0.47	0.07	1.86	1.85	1.86	1.85	XXX
75658	TC	A	Artery x-rays, arm	0.00	3.37	10.29	NA	NA	0.65	4.02	10.94	NA	NA	XXX
75660		A	Artery x-rays, head & neck	1.31	3.94	10.77	NA	NA	0.71	5.96	12.79	NA	NA	XXX
75660	26	A	Artery x-rays, head & neck	1.31	0.49	0.45	0.49	0.45	0.06	1.86	1.82	1.86	1.82	XXX
75660	TC	A	Artery x-rays, head & neck	0.00	3.45	10.31	NA	NA	0.65	4.10	10.96	NA	NA	XXX
75662		A	Artery x-rays, head & neck	1.66	5.11	11.17	NA	NA	0.71	7.48	13.54	NA	NA	XXX
75662	26	A	Artery x-rays, head & neck	1.66	0.72	0.62	0.72	0.62	0.06	2.44	2.34	2.44	2.34	XXX
75662	TC	A	Artery x-rays, head & neck	0.00	4.39	10.55	NA	NA	0.65	5.04	11.20	NA	NA	XXX
75665		A	Artery x-rays, head & neck	1.31	4.10	10.81	NA	NA	0.74	6.15	12.86	NA	NA	XXX
75665	26	A	Artery x-rays, head & neck	1.31	0.46	0.45	0.46	0.45	0.09	1.86	1.85	1.86	1.85	XXX
75665	TC	A	Artery x-rays, head & neck	0.00	3.64	10.36	NA	NA	0.65	4.29	11.01	NA	NA	XXX
75671		A	Artery x-rays, head & neck	1.66	5.09	11.14	NA	NA	0.72	7.47	13.52	NA	NA	XXX
75671	26	A	Artery x-rays, head & neck	1.66	0.61	0.57	0.61	0.57	0.07	2.34	2.30	2.34	2.30	XXX
75671	TC	A	Artery x-rays, head & neck	0.00	4.48	10.57	NA	NA	0.65	5.13	11.22	NA	NA	XXX
75676		A	Artery x-rays, neck	1.31	3.86	10.75	NA	NA	0.72	5.89	12.78	NA	NA	XXX
75676	26	A	Artery x–rays, neck	1.31	0.47	0.45	0.47	0.45	0.07	1.85	1.83	1.85	1.83	XXX
75676	TC	A	Artery x-rays, neck	0.00	3.40	10.30	NA	NA	0.65	4.05	10.95	NA	NA	XXX
75680		A	Artery x-rays, neck	1.66	4.61	11.02	NA	NA	0.72	6.99	13.40	NA	NA	XXX
75680	26	A	Artery x-rays, neck	1.66	0.64	0.57	0.64	0.57	0.07	2.37	2.30	2.37	2.30	XXX
75680	TC	A	Artery x-rays, neck	0.00	3.98	10.45	NA	NA	0.65	4.63	11.10	NA	NA	XXX
75685		A	Artery x-rays, spine	1.31	3.90	10.75	NA	NA	0.71	5.92	12.77	NA	NA	XXX
75685	26	A	Artery x-rays, spine	1.31	0.49	0.45	0.49	0.45	0.06	1.86	1.82	1.86	1.82	XXX
75685	TC	A	Artery x-rays, spine	0.00	3.41	10.30	NA	NA	0.65	4.06	10.95	NA	NA	XXX

75705		A	Artery x-rays, spine	2.18	4.07	11.02	NA	NA	0.78	7.03	13.98	NA	NA	XXX
75705	26	A	Artery x-rays, spine	2.18	0.72	0.73	0.72	0.73	0.13	3.03	3.04	3.03	3.04	XXX
75705	TC	A	Artery x-rays, spine	0.00	3.35	10.29	NA	NA	0.65	4.00	10.94	NA	NA	XXX
75710		A	Artery x-rays, arm/leg	1.14	3.99	10.74	NA	NA	0.72	5.85	12.60	NA	NA	XXX
75710	26	A	Artery x-rays, arm/leg	1.14	0.42	0.40	0.42	0.40	0.07	1.63	1.61	1.63	1.61	XXX
75710	TC	A	Artery x-rays, arm/leg	0.00	3.57	10.34	NA	NA	0.65	4.22	10.99	NA	NA	XXX
75716		A	Artery x-rays, arms/legs	1.31	4.94	11.01	NA	NA	0.72	6.97	13.04	NA	NA	XXX
75716	26	A	Artery x-rays, arms/legs	1.31	0.49	0.45	0.49	0.45	0.07	1.87	1.83	1.87	1.83	XXX
75716	TC	A	Artery x-rays, arms/legs	0.00	4.45	10.56	NA	NA	0.65	5.10	11.21	NA	NA	XXX
75722		A	Artery x-rays, kidney	1.14	3.89	10.72	NA	NA	0.70	5.73	12.56	NA	NA	XXX
75722	26	A	Artery x-rays, kidney	1.14	0.47	0.42	0.47	0.42	0.05	1.66	1.61	1.66	1.61	XXX
75722	TC	A	Artery x-rays, kidney	0.00	3.42	10.31	NA	NA	0.65	4.07	10.96	NA	NA	XXX
75724		A	Artery x-rays, kidneys	1.49	5.20	11.17	NA	NA	0.70	7.39	13.36	NA	NA	XXX
75724	26	A	Artery x-rays, kidneys	1.49	0.75	0.61	0.75	0.61	0.05	2.29	2.15	2.29	2.15	XXX
75724	TC	A	Artery x-rays, kidneys	0.00	4.44	10.56	NA	NA	0.65	5.09	11.21	NA	NA	XXX
75726		A	Artery x-rays, abdomen	1.14	3.73	10.66	NA	NA	0.70	5.57	12.50	NA	NA	XXX
75726	26	A	Artery x-rays, abdomen	1.14	0.38	0.37	0.38	0.37	0.05	1.57	1.56	1.57	1.56	XXX
75726	TC	A	Artery x-rays, abdomen	0.00	3.35	10.29	NA	NA	0.65	4.00	10.94	NA	NA	XXX
75731		A	Artery x-rays, adrenal gland	1.14	3.90	10.70	NA	NA	0.71	5.75	12.55	NA	NA	XXX
75731	26	A	Artery x-rays, adrenal gland	1.14	0.42	0.38	0.42	0.38	0.06	1.62	1.58	1.62	1.58	XXX
75731	TC	A	Artery x-rays, adrenal gland	0.00	3.48	10.32	NA	NA	0.65	4.13	10.97	NA	NA	XXX
75733		A	Artery x-rays, adrenals	1.31	5.27	11.10	NA	NA	0.71	7.29	13.12	NA	NA	XXX
75733	26	A	Artery x-rays, adrenals	1.31	0.59	0.48	0.59	0.48	0.06	1.96	1.85	1.96	1.85	XXX
75733	TC	A	Artery x-rays, adrenals	0.00	4.68	10.62	NA	NA	0.65	5.33	11.27	NA	NA	XXX
75736		A	Artery x-rays, pelvis	1.14	3.87	10.70	NA	NA	0.71	5.72	12.55	NA	NA	XXX
75736	26	A	Artery x-rays, pelvis	1.14	0.41	0.39	0.41	0.39	0.06	1.61	1.59	1.61	1.59	XXX
75736	TC	A	Artery x-rays, pelvis	0.00	3.46	10.32	NA	NA	0.65	4.11	10.97	NA	NA	XXX
75741		A	Artery x-rays, lung	1.31	3.14	10.56	NA	NA	0.71	5.16	12.58	NA	NA	XXX
75741	26	A	Artery x-rays, lung	1.31	0.45	0.44	0.45	0.44	0.06	1.82	1.81	1.82	1.81	XXX
75741	TC	A	Artery x-rays, lung	0.00	2.70	10.13	NA	NA	0.65	3.35	10.78	NA	NA	XXX
75743		A	Artery x-rays, lungs	1.66	3.53	10.74	NA	NA	0.72	5.91	13.12	NA	NA	XXX
75743	26	A	Artery x-rays, lungs	1.66	0.57	0.55	0.57	0.55	0.07	2.30	2.28	2.30	2.28	XXX
75743	TC	A	Artery x-rays, lungs	0.00	2.96	10.19	NA	NA	0.65	3.61	10.84	NA	NA	XXX
75746		A	Artery x-rays, lung	1.14	3.46	10.60	NA	NA	0.70	5.30	12.44	NA	NA	XXX
75746	26	A	Artery x-rays, lung	1.14	0.36	0.38	0.36	0.38	0.05	1.55	1.57	1.55	1.57	XXX
75746	TC	A	Artery x-rays, lung	0.00	3.10	10.23	NA	NA	0.65	3.75	10.88	NA	NA	XXX
75756		A	Artery x-rays, chest	1.14	4.45	10.90	NA	NA	0.69	6.28	12.73	NA	NA	XXX
75756	26	A	Artery x-rays, chest	1.14	0.60	0.49	0.60	0.49	0.04	1.78	1.67	1.78	1.67	XXX
75756	TC	A	Artery x-rays, chest	0.00	3.84	10.41	NA	NA	0.65	4.49	11.06	NA	NA	XXX
75774		A	Artery x-ray, each vessel	0.36	2.53	10.17	2.53	10.17	0.67	3.56	11.20	3.56	11.20	ZZZ
75774	26	A	Artery x-ray, each vessel	0.36	0.13	0.12	0.13	0.12	0.02	0.51	0.50	0.51	0.50	ZZZ
75774	TC	A	Artery x-ray, each vessel	0.00	2.40	10.05	2.40	10.05	0.65	3.05	10.70	3.05	10.70	ZZZ
75790		A	Visualize A-V shunt	1.84	3.11	2.23	NA	NA	0.17	5.12	4.24	NA	NA	XXX
75790	26	A	Visualize A-V shunt	1.84	0.57	0.59	0.57	0.59	0.09	2.50	2.52	2.50	2.52	XXX
75790	TC	A	Visualize A-V shunt	0.00	2.54	1.65	NA	NA	0.08	2.62	1.73	NA	NA	XXX
75801		A	Lymph vessel x-ray, arm/leg	0.81	NA	NA	NA	NA	0.37	NA	NA	NA	NA	XXX
75801	26	A	Lymph vessel x-ray, arm/leg	0.81	0.22	0.26	0.22	0.26	0.08	1.11	1.15	1.11	1.15	XXX
75801	TC	A	Lymph vessel x-ray, arm/leg	0.00	NA	NA	NA	NA	0.29	NA	NA	NA	NA	XXX
75803		A	Lymph vessel x-ray,arms/legs	1.17	NA	NA	NA	NA	0.34	NA	NA	NA	NA	XXX
75803	26	A	Lymph vessel x-ray,arms/legs	1.17	0.35	0.37	0.35	0.37	0.05	1.57	1.59	1.57	1.59	XXX
75803	TC	A	Lymph vessel x-ray,arms/legs	0.00	NA	NA	NA	NA	0.29	NA	NA	NA	NA	XXX
75805		A	Lymph vessel x-ray, trunk	0.81	NA	NA	NA	NA	0.38	NA	NA	NA	NA	XXX
75805	26	A	Lymph vessel x-ray, trunk	0.81	0.23	0.26	0.23	0.26	0.05	1.09	1.12	1.09	1.12	XXX
75805	TC	A	Lymph vessel x-ray, trunk	0.00	NA	NA	NA	NA	0.33	NA	NA	NA	NA	XXX
75807		C	Lymph vessel x-ray, trunk	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75807	26	A	Lymph vessel x-ray, trunk	1.17	0.37	0.38	0.37	0.38	0.05	1.59	1.60	1.59	1.60	XXX
75807	TC	C	Lymph vessel x-ray, trunk	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75809		A	Nonvascular shunt, x-ray	0.47	2.18	1.24	NA	NA	0.07	2.72	1.78	NA	NA	XXX
75809	26	A	Nonvascular shunt, x-ray	0.47	0.15	0.15	0.15	0.15	0.02	0.64	0.64	0.64	0.64	XXX
75809	TC	A	Nonvascular shunt, x-ray	0.00	2.03	1.09	NA	NA	0.05	2.08	1.14	NA	NA	XXX
75810		A	Vein x-ray, spleen/liver	1.14	NA	NA	NA	NA	0.70	NA	NA	NA	NA	XXX
75810	26	A	Vein x-ray, spleen/liver	1.14	0.39	0.38	0.39	0.38	0.05	1.58	1.57	1.58	1.57	XXX
75810	TC	A	Vein x-ray, spleen/liver	0.00	NA	NA	NA	NA	0.65	NA	NA	NA	NA	XXX
75820		A	Vein x-ray, arm/leg	0.70	3.02	1.64	NA	NA	0.09	3.81	2.43	NA	NA	XXX
75820	26	A	Vein x-ray, arm/leg	0.70	0.28	0.24	0.28	0.24	0.03	1.01	0.97	1.01	0.97	XXX
75820	TC	A	Vein x-ray, arm/leg	0.00	2.74	1.40	NA	NA	0.06	2.80	1.46	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
75822		A	Vein x-ray, arms/legs	1.06	3.18	2.16	NA	NA	0.13	4.37	3.35	NA	NA	XXX
75822	26	A	Vein x-ray, arms/legs	1.06	0.35	0.35	0.35	0.35	0.05	1.46	1.46	1.46	1.46	XXX
75822	TC	A	Vein x-ray, arms/legs	0.00	2.83	1.82	NA	NA	0.08	2.91	1.90	NA	NA	XXX
75825		A	Vein x-ray, trunk	1.14	2.93	10.46	NA	NA	0.72	4.79	12.32	NA	NA	XXX
75825	26	A	Vein x-ray, trunk	1.14	0.36	0.37	0.36	0.37	0.07	1.57	1.58	1.57	1.58	XXX
75825	TC	A	Vein x-ray, trunk	0.00	2.57	10.09	NA	NA	0.65	3.22	10.74	NA	NA	XXX
75827		A	Vein x-ray, chest	1.14	2.98	10.47	NA	NA	0.70	4.82	12.31	NA	NA	XXX
75827	26	A	Vein x-ray, chest	1.14	0.38	0.37	0.36	0.37	0.05	1.55	1.56	1.55	1.56	XXX
75827	TC	A	Vein x-ray, chest	0.00	2.61	10.10	NA	NA	0.65	3.26	10.75	NA	NA	XXX
75831		A	Vein x-ray, kidney	1.14	3.05	10.49	NA	NA	0.71	4.90	12.34	NA	NA	XXX
75831	26	A	Vein x-ray, kidney	1.14	0.36	0.37	0.36	0.37	0.06	1.56	1.57	1.56	1.57	XXX
75831	TC	A	Vein x-ray, kidney	0.00	2.69	10.12	NA	NA	0.65	3.34	10.77	NA	NA	XXX
75833		A	Vein x-ray, kidneys	1.49	3.71	10.75	NA	NA	0.74	5.94	12.98	NA	NA	XXX
75833	26	A	Vein x-ray, kidneys	1.49	0.48	0.49	0.48	0.49	0.09	2.06	2.07	2.06	2.07	XXX
75833	TC	A	Vein x-ray, kidneys	0.00	3.23	10.26	NA	NA	0.65	3.88	10.91	NA	NA	XXX
75840		A	Vein x-ray, adrenal gland	1.14	3.29	10.56	NA	NA	0.72	5.15	12.42	NA	NA	XXX
75840	26	A	Vein x-ray, adrenal gland	1.14	0.45	0.40	0.45	0.40	0.07	1.66	1.61	1.66	1.61	XXX
75840	TC	A	Vein x-ray, adrenal gland	0.00	2.84	10.16	NA	NA	0.65	3.49	10.81	NA	NA	XXX
75842		A	Vein x-ray, adrenal glands	1.49	3.68	10.73	NA	NA	0.72	5.89	12.94	NA	NA	XXX
75842	26	A	Vein x-ray, adrenal glands	1.49	0.49	0.48	0.49	0.48	0.07	2.05	2.04	2.05	2.04	XXX
75842	TC	A	Vein x-ray, adrenal glands	0.00	3.19	10.25	NA	NA	0.65	3.84	10.90	NA	NA	XXX
75860		A	Vein x-ray, neck	1.14	3.45	10.61	NA	NA	0.69	5.28	12.44	NA	NA	XXX
75860	26	A	Vein x-ray, neck	1.14	0.50	0.42	0.50	0.42	0.04	1.68	1.60	1.68	1.60	XXX
75860	TC	A	Vein x-ray, neck	0.00	2.96	10.19	NA	NA	0.65	3.61	10.84	NA	NA	XXX
75870		A	Vein x-ray, skull	1.14	3.23	10.55	NA	NA	0.70	5.07	12.39	NA	NA	XXX
75870	26	A	Vein x-ray, skull	1.14	0.39	0.39	0.39	0.39	0.05	1.58	1.58	1.58	1.58	XXX
75870	TC	A	Vein x-ray, skull	0.00	2.84	10.16	NA	NA	0.65	3.49	10.81	NA	NA	XXX
75872		A	Vein x-ray, skull	1.14	3.91	10.71	NA	NA	0.79	5.84	12.64	NA	NA	XXX
75872	26	A	Vein x-ray, skull	1.14	0.42	0.38	0.42	0.38	0.14	1.70	1.66	1.70	1.66	XXX
75872	TC	A	Vein x-ray, skull	0.00	3.48	10.32	NA	NA	0.65	4.13	10.97	NA	NA	XXX
75880		A	Vein x-ray, eye socket	0.70	2.99	1.63	NA	NA	0.09	3.78	2.42	NA	NA	XXX
75880	26	A	Vein x-ray, eye socket	0.70	0.23	0.23	0.23	0.23	0.03	0.96	0.96	0.96	0.96	XXX
75880	TC	A	Vein x-ray, eye socket	0.00	2.76	1.40	NA	NA	0.06	2.82	1.46	NA	NA	XXX
75885		A	Vein x-ray, liver	1.44	3.17	10.60	NA	NA	0.71	5.32	12.75	NA	NA	XXX
75885	26	A	Vein x-ray, liver	1.44	0.47	0.47	0.47	0.47	0.06	1.97	1.97	1.97	1.97	XXX
75885	TC	A	Vein x-ray, liver	0.00	2.70	10.13	NA	NA	0.65	3.35	10.78	NA	NA	XXX
75887		A	Vein x-ray, liver	1.44	3.35	10.64	NA	NA	0.71	5.50	12.79	NA	NA	XXX
75887	26	A	Vein x-ray, liver	1.44	0.51	0.48	0.51	0.48	0.06	2.01	1.98	2.01	1.98	XXX
75887	TC	A	Vein x-ray, liver	0.00	2.84	10.16	NA	NA	0.65	3.49	10.81	NA	NA	XXX
75889		A	Vein x-ray, liver	1.14	3.07	10.50	NA	NA	0.70	4.91	12.34	NA	NA	XXX
75889	26	A	Vein x-ray, liver	1.14	0.38	0.37	0.38	0.37	0.05	1.57	1.56	1.57	1.56	XXX
75889	TC	A	Vein x-ray, liver	0.00	2.70	10.13	NA	NA	0.65	3.35	10.78	NA	NA	XXX
75891		A	Vein x-ray, liver	1.14	3.05	10.49	NA	NA	0.70	4.89	12.33	NA	NA	XXX
75891	26	A	Vein x-ray, liver	1.14	0.37	0.37	0.37	0.37	0.05	1.56	1.56	1.56	1.56	XXX
75891	TC	A	Vein x-ray, liver	0.00	2.68	10.12	NA	NA	0.65	3.33	10.77	NA	NA	XXX
75893		A	Venous sampling by catheter	0.54	2.87	10.30	NA	NA	0.67	4.08	11.51	NA	NA	XXX
75893	26	A	Venous sampling by catheter	0.54	0.18	0.18	0.18	0.18	0.02	0.74	0.74	0.74	0.74	XXX
75893	TC	A	Venous sampling by catheter	0.00	2.69	10.12	NA	NA	0.65	3.34	10.77	NA	NA	XXX
75894		A	X-rays, transcath therapy	1.31	NA	NA	NA	NA	1.35	NA	NA	NA	NA	XXX
75894	26	A	X-rays, transcath therapy	1.31	0.42	0.43	0.42	0.43	0.08	1.81	1.82	1.81	1.82	XXX
75894	TC	A	X-rays, transcath therapy	0.00	NA	NA	NA	NA	1.27	NA	NA	NA	NA	XXX
75896		A	X-rays, transcath therapy	1.31	NA	NA	NA	NA	1.15	NA	NA	NA	NA	XXX
75896	26	A	X-rays, transcath therapy	1.31	0.51	0.47	0.51	0.47	0.05	1.87	1.83	1.87	1.83	XXX
75896	TC	A	X-rays, transcath therapy	0.00	NA	NA	NA	NA	1.10	NA	NA	NA	NA	XXX
75898		A	Follow-up angiography	1.65	NA	NA	NA	NA	0.13	NA	NA	NA	NA	XXX
75898	26	A	Follow-up angiography	1.65	0.60	0.56	0.60	0.56	0.07	2.32	2.28	2.32	2.28	XXX

75898	TC	A	Follow-up angiography	0.00	NA	NA	NA	NA	0.06	NA	NA	NA	NA	XXX
75900		C	Intravascular cath exchange	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75900	26	A	Intravascular cath exchange	0.49	0.16	0.16	0.16	0.16	0.03	0.68	0.68	0.68	0.68	XXX
75900	TC	C	Intravascular cath exchange	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75901		A	Remove cva device obstruct	0.49	4.20	2.15	NA	NA	0.85	5.54	3.49	NA	NA	XXX
75901	26	A	Remove cva device obstruct	0.49	0.16	0.16	0.16	0.16	0.02	0.67	0.67	0.67	0.67	XXX
75901	TC	A	Remove cva device obstruct	0.00	4.04	1.99	NA	NA	0.83	4.87	2.82	NA	NA	XXX
75902		A	Remove cva lumen obstruct	0.39	1.64	1.49	NA	NA	0.85	2.88	2.73	NA	NA	XXX
75902	26	A	Remove cva lumen obstruct	0.39	0.13	0.13	0.13	0.13	0.02	0.54	0.54	0.54	0.54	XXX
75902	TC	A	Remove cva lumen obstruct	0.00	1.52	1.36	NA	NA	0.83	2.35	2.19	NA	NA	XXX
75940		A	X-ray placement, vein filter	0.54	NA	NA	NA	NA	0.69	NA	NA	NA	NA	XXX
75940	26	A	X-ray placement, vein filter	0.54	0.17	0.18	0.17	0.18	0.04	0.75	0.76	0.75	0.76	XXX
75940	TC	A	X-ray placement, vein filter	0.00	NA	NA	NA	NA	0.65	NA	NA	NA	NA	XXX
75945		A	Intravascular us	0.40	NA	NA	NA	NA	0.28	NA	NA	NA	NA	XXX
75945	26	A	Intravascular us	0.40	0.15	0.14	0.15	0.14	0.04	0.59	0.58	0.59	0.58	XXX
75945	TC	A	Intravascular us	0.00	NA	NA	NA	NA	0.24	NA	NA	NA	NA	XXX
75946		C	Intravascular us add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
75946	26	A	Intravascular us add-on	0.40	0.13	0.14	0.13	0.14	0.05	0.58	0.59	0.58	0.59	ZZZ
75946	TC	C	Intravascular us add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
75952		C	Endovasc repair abdom aorta	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75952	26	A	Endovasc repair abdom aorta	4.49	1.31	1.45	1.31	1.45	0.43	6.23	6.37	6.23	6.37	XXX
75952	TC	C	Endovasc repair abdom aorta	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75953		C	Abdom aneurysm endovas rpr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75953	26	A	Abdom aneurysm endovas rpr	1.36	0.40	0.44	0.40	0.44	0.13	1.89	1.93	1.89	1.93	XXX
75953	TC	C	Abdom aneurysm endovas rpr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75954		C	Iliac aneurysm endovas rpr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75954	26	A	Iliac aneurysm endovas rpr	2.25	0.66	0.75	0.66	0.75	0.15	3.06	3.15	3.06	3.15	XXX
75954	TC	C	Iliac aneurysm endovas rpr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75956		C	Xray, endovasc thor ao repr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75956	26	A	Xray, endovasc thor ao repr	7.00	1.63	2.43	1.63	2.43	0.69	9.32	10.12	9.32	10.12	XXX
75956	TC	C	Xray, endovasc thor ao repr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75957		C	Xray, endovasc thor ao repr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75957	26	A	Xray, endovasc thor ao repr	6.00	1.40	2.08	1.40	2.08	0.59	7.99	8.67	7.99	8.67	XXX
75957	TC	C	Xray, endovasc thor ao repr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75958		C	Xray, place prox ext thor ao	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75958	26	A	Xray, place prox ext thor ao	4.00	0.93	1.40	0.93	1.40	0.39	5.32	5.79	5.32	5.79	XXX
75958	TC	C	Xray, place prox ext thor ao	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75959		C	Xray, place dist ext thor ao	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75959	26	A	Xray, place dist ext thor ao	3.50	0.82	1.23	0.82	1.23	0.34	4.66	5.07	4.66	5.07	XXX
75959	TC	C	Xray, place dist ext thor ao	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
75960		A	Transcath iv stent rs&i	0.82	NA	NA	NA	NA	0.82	NA	NA	NA	NA	XXX
75960	26	A	Transcath iv stent rs&i	0.82	0.32	0.29	0.32	0.29	0.05	1.19	1.16	1.19	1.16	XXX
75960	TC	A	Transcath iv stent rs&i	0.00	NA	NA	NA	NA	0.77	NA	NA	NA	NA	XXX
75961		A	Retrieval, broken catheter	4.24	4.59	10.07	NA	NA	0.73	9.56	15.04	NA	NA	XXX
75961	26	A	Retrieval, broken catheter	4.24	1.38	1.39	1.38	1.39	0.18	5.80	5.81	5.80	5.81	XXX
75961	TC	A	Retrieval, broken catheter	0.00	3.20	8.68	NA	NA	0.55	3.75	9.23	NA	NA	XXX
75962		A	Repair arterial blockage	0.54	3.54	12.83	NA	NA	0.86	4.94	14.23	NA	NA	XXX
75962	26	A	Repair arterial blockage	0.54	0.20	0.19	0.20	0.19	0.03	0.77	0.76	0.77	0.76	XXX
75962	TC	A	Repair arterial blockage	0.00	3.34	12.64	NA	NA	0.83	4.17	13.47	NA	NA	XXX
75964		A	Repair artery blockage, each	0.36	2.38	6.98	2.38	6.98	0.46	3.20	7.80	3.20	7.80	ZZZ
75964	26	A	Repair artery blockage, each	0.36	0.13	0.12	0.13	0.12	0.03	0.52	0.51	0.52	0.51	ZZZ
75964	TC	A	Repair artery blockage, each	0.00	2.26	6.86	2.26	6.86	0.43	2.69	7.29	2.69	7.29	ZZZ
75966		A	Repair arterial blockage	1.31	4.21	13.20	NA	NA	0.89	6.41	15.40	NA	NA	XXX
75966	26	A	Repair arterial blockage	1.31	0.57	0.49	0.57	0.49	0.06	1.94	1.86	1.94	1.86	XXX
75966	TC	A	Repair arterial blockage	0.00	3.64	12.72	NA	NA	0.83	4.47	13.55	NA	NA	XXX
75968		A	Repair artery blockage, each	0.36	2.44	7.00	2.44	7.00	0.45	3.25	7.81	3.25	7.81	ZZZ
75968	26	A	Repair artery blockage, each	0.36	0.16	0.14	0.16	0.14	0.02	0.54	0.52	0.54	0.52	ZZZ
75968	TC	A	Repair artery blockage, each	0.00	2.29	6.87	2.29	6.87	0.43	2.72	7.30	2.72	7.30	ZZZ
75970		A	Vascular biopsy	0.83	NA	NA	NA	NA	0.64	NA	NA	NA	NA	XXX
75970	26	A	Vascular biopsy	0.83	0.28	0.28	0.28	0.28	0.04	1.15	1.15	1.15	1.15	XXX
75970	TC	A	Vascular biopsy	0.00	NA	NA	NA	NA	0.60	NA	NA	NA	NA	XXX
75978		A	Repair venous blockage	0.54	3.27	12.76	NA	NA	0.85	4.66	14.15	NA	NA	XXX
75978	26	A	Repair venous blockage	0.54	0.17	0.18	0.17	0.18	0.02	0.73	0.74	0.73	0.74	XXX
75978	TC	A	Repair venous blockage	0.00	3.11	12.58	NA	NA	0.83	3.94	13.41	NA	NA	XXX
75980		A	Contrast xray exam bile duct	1.44	NA	NA	NA	NA	0.35	NA	NA	NA	NA	XXX
75980	26	A	Contrast xray exam bile duct	1.44	0.47	0.47	0.47	0.47	0.06	1.97	1.97	1.97	1.97	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT1/ HCPCS2	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
75980	TC	A	Contrast xray exam bile duct	0.00	NA	NA	NA	NA	0.29	NA	NA	NA	NA	XXX
75982		C	Contrast xray exam bile duct	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75982	26	A	Contrast xray exam bile duct	1.44	0.47	0.47	0.47	0.47	0.06	1.97	1.97	1.97	1.97	XXX
75982	TC	C	Contrast xray exam bile duct	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75984		A	Xray control catheter change	0.72	2.31	2.21	NA	NA	0.14	3.17	3.07	NA	NA	XXX
75984	26	A	Xray control catheter change	0.72	0.24	0.23	0.24	0.23	0.03	0.99	0.98	0.99	0.98	XXX
75984	TC	A	Xray control catheter change	0.00	2.08	1.98	NA	NA	0.11	2.19	2.09	NA	NA	XXX
75989		A	Abscess drainage under x-ray	1.19	2.21	3.21	NA	NA	0.22	3.62	4.62	NA	NA	XXX
75989	26	A	Abscess drainage under x-ray	1.19	0.38	0.39	0.38	0.39	0.05	1.62	1.63	1.62	1.63	XXX
75989	TC	A	Abscess drainage under x-ray	0.00	1.83	2.82	NA	NA	0.17	2.00	2.99	NA	NA	XXX
75992		A	Atherectomy, x-ray exam	0.54	NA	NA	NA	NA	0.86	NA	NA	NA	NA	XXX
75992	26	A	Atherectomy, x-ray exam	0.54	0.23	0.20	0.23	0.20	0.03	0.80	0.77	0.80	0.77	XXX
75992	TC	A	Atherectomy, x-ray exam	0.00	NA	NA	NA	NA	0.83	NA	NA	NA	NA	XXX
75993		C	Atherectomy, x-ray exam	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	ZZZ
75993	26	A	Atherectomy, x-ray exam	0.36	0.15	0.14	0.15	0.14	0.02	0.53	0.52	0.53	0.52	ZZZ
75993	TC	C	Atherectomy, x-ray exam	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	ZZZ
75994		C	Atherectomy, x-ray exam	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75994	26	A	Atherectomy, x-ray exam	1.31	0.62	0.50	0.62	0.50	0.07	2.00	1.88	2.00	1.88	XXX
75994	TC	C	Atherectomy, x-ray exam	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75995		C	Atherectomy, x-ray exam	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75995	26	A	Atherectomy, x-ray exam	1.31	0.51	0.48	0.51	0.48	0.05	1.87	1.84	1.87	1.84	XXX
75995	TC	C	Atherectomy, x-ray exam	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75996		C	Atherectomy, x-ray exam	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	XXX
75996	26	A	Atherectomy, x-ray exam	0.36	0.15	0.13	0.15	0.13	0.02	0.53	0.51	0.53	0.51	ZZZ
75996	TC	C	Atherectomy, x-ray exam	0.00	NA	NA	NA	NA	0.00	NA	NA	NA	NA	ZZZ
75998		A	Fluoroguide for vein device	0.38	2.73	1.76	NA	NA	0.11	3.22	2.25	NA	NA	ZZZ
75998	26	A	Fluoroguide for vein device	0.38	0.12	0.13	0.12	0.13	0.01	0.51	0.52	0.51	0.52	ZZZ
75998	TC	A	Fluoroguide for vein device	0.00	2.61	1.64	NA	NA	0.10	2.71	1.74	NA	NA	ZZZ
76000		A	Fluoroscope examination	0.17	2.75	1.71	NA	NA	0.08	3.00	1.96	NA	NA	XXX
76000	26	A	Fluoroscope examination	0.17	0.06	0.05	0.06	0.05	0.01	0.24	0.23	0.24	0.23	XXX
76000	TC	A	Fluoroscope examination	0.00	2.70	1.66	NA	NA	0.07	2.77	1.73	NA	NA	XXX
76001		A	Fluoroscope exam, extensive	0.67	NA	NA	NA	NA	0.19	NA	NA	NA	NA	XXX
76001	26	A	Fluoroscope exam, extensive	0.67	0.22	0.22	0.22	0.22	0.05	0.94	0.94	0.94	0.94	XXX
76001	TC	A	Fluoroscope exam, extensive	0.00	NA	NA	NA	NA	0.14	NA	NA	NA	NA	XXX
76003		A	Needle localization by x-ray	0.54	1.21	1.41	NA	NA	0.09	1.84	2.04	NA	NA	XXX
76003	26	A	Needle localization by x-ray	0.54	0.15	0.17	0.15	0.17	0.02	0.71	0.73	0.71	0.73	XXX
76003	TC	A	Needle localization by x-ray	0.00	1.06	1.25	NA	NA	0.07	1.13	1.32	NA	NA	XXX
76005		A	Fluoroguide for spine inject	0.60	0.76	1.29	NA	NA	0.10	1.46	1.99	NA	NA	XXX
76005	26	A	Fluoroguide for spine inject	0.60	0.14	0.15	0.14	0.15	0.03	0.77	0.78	0.77	0.78	XXX
76005	TC	A	Fluoroguide for spine inject	0.00	0.62	1.14	NA	NA	0.07	0.69	1.21	NA	NA	XXX
76006		A	X-ray stress view	0.41	0.77	0.33	0.77	0.33	0.06	1.24	0.80	1.24	0.80	XXX
76010		A	X-ray, nose to rectum	0.18	0.55	0.57	NA	NA	0.03	0.76	0.78	NA	NA	XXX
76010	26	A	X-ray, nose to rectum	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
76010	TC	A	X-ray, nose to rectum	0.00	0.49	0.51	NA	NA	0.02	0.51	0.53	NA	NA	XXX
76012		C	Percut vertebroplasty fluor	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76012	26	A	Percut vertebroplasty fluor	1.31	0.44	0.46	0.44	0.46	0.10	1.85	1.87	1.85	1.87	XXX
76012	TC	C	Percut vertebroplasty fluor	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76013		C	Percut vertebroplasty, ct	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76013	26	A	Percut vertebroplasty, ct	1.38	0.45	0.47	0.45	0.47	0.07	1.90	1.92	1.90	1.92	XXX
76013	TC	C	Percut vertebroplasty, ct	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76020		A	X-rays for bone age	0.19	0.42	0.54	NA	NA	0.03	0.64	0.76	NA	NA	XXX
76020	26	A	X-rays for bone age	0.19	0.06	0.06	0.06	0.06	0.01	0.26	0.26	0.26	0.26	XXX
76020	TC	A	X-rays for bone age	0.00	0.36	0.48	NA	NA	0.02	0.38	0.50	NA	NA	XXX
76040		A	X-rays, bone evaluation	0.27	0.67	0.82	NA	NA	0.06	1.00	1.15	NA	NA	XXX
76040	26	A	X-rays, bone evaluation	0.27	0.10	0.09	0.10	0.09	0.01	0.38	0.37	0.38	0.37	XXX
76040	TC	A	X-rays, bone evaluation	0.00	0.57	0.73	NA	NA	0.05	0.62	0.78	NA	NA	XXX

76061		A	X-rays, bone survey	0.45	1.43	1.22	NA	NA	0.08	1.96	1.75	NA	NA	XXX
76061	26	A	X-rays, bone survey	0.45	0.14	0.15	0.14	0.15	0.02	0.61	0.62	0.61	0.62	XXX
76061	TC	A	X-rays, bone survey	0.00	1.28	1.07	NA	NA	0.06	1.34	1.13	NA	NA	XXX
76062		A	X-rays, bone survey	0.54	2.28	1.79	NA	NA	0.10	2.92	2.43	NA	NA	XXX
76062	26	A	X-rays, bone survey	0.54	0.17	0.18	0.17	0.18	0.02	0.73	0.74	0.73	0.74	XXX
76062	TC	A	X-rays, bone survey	0.00	2.10	1.61	NA	NA	0.08	2.18	1.69	NA	NA	XXX
76065		A	X-rays, bone evaluation	0.70	2.01	1.22	NA	NA	0.08	2.79	2.00	NA	NA	XXX
76065	26	A	X-rays, bone evaluation	0.70	0.20	0.22	0.20	0.22	0.03	0.93	0.95	0.93	0.95	XXX
76065	TC	A	X-rays, bone evaluation	0.00	1.81	1.00	NA	NA	0.05	1.86	1.05	NA	NA	XXX
76066		A	Joint survey, single view	0.31	0.65	1.07	NA	NA	0.08	1.04	1.46	NA	NA	XXX
76066	26	A	Joint survey, single view	0.31	0.11	0.10	0.11	0.10	0.02	0.44	0.43	0.44	0.43	XXX
76066	TC	A	Joint survey, single view	0.00	0.55	0.97	NA	NA	0.06	0.61	1.03	NA	NA	XXX
76070		A	Ct bone density, axial	0.25	4.78	3.47	NA	NA	0.17	5.20	3.89	NA	NA	XXX
76070	26	A	Ct bone density, axial	0.25	0.08	0.08	0.08	0.08	0.01	0.34	0.34	0.34	0.34	XXX
76070	TC	A	Ct bone density, axial	0.00	4.70	3.39	NA	NA	0.16	4.86	3.55	NA	NA	XXX
76071		A	Ct bone density, peripheral	0.22	0.78	2.46	NA	NA	0.06	1.06	2.74	NA	NA	XXX
76071	26	A	Ct bone density, peripheral	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
76071	TC	A	Ct bone density, peripheral	0.00	0.71	2.39	NA	NA	0.05	0.76	2.44	NA	NA	XXX
76075		A	Dxa bone density, axial	0.20	0.53	2.53	NA	NA	0.18	0.91	2.91	NA	NA	XXX
76075	26	A	Dxa bone density, axial	0.20	0.06	0.09	0.06	0.09	0.01	0.27	0.30	0.27	0.30	XXX
76075	TC	A	Dxa bone density, axial	0.00	0.47	2.44	NA	NA	0.17	0.64	2.61	NA	NA	XXX
76076		A	Dxa bone density/peripheral	0.22	0.57	0.77	NA	NA	0.06	0.85	1.05	NA	NA	XXX
76076	26	A	Dxa bone density/peripheral	0.22	0.06	0.08	0.06	0.08	0.01	0.29	0.31	0.29	0.31	XXX
76076	TC	A	Dxa bone density/peripheral	0.00	0.50	0.69	NA	NA	0.05	0.55	0.74	NA	NA	XXX
76077		A	Dxa bone density/v-fracture	0.17	0.41	0.71	NA	NA	0.06	0.64	0.94	NA	NA	XXX
76077	26	A	Dxa bone density/v-fracture	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
76077	TC	A	Dxa bone density/v-fracture	0.00	0.36	0.65	NA	NA	0.05	0.41	0.70	NA	NA	XXX
76078		A	Radiographic absorptiometry	0.20	0.38	0.71	NA	NA	0.06	0.64	0.97	NA	NA	XXX
76078	26	A	Radiographic absorptiometry	0.20	0.05	0.07	0.05	0.07	0.01	0.26	0.28	0.26	0.28	XXX
76078	TC	A	Radiographic absorptiometry	0.00	0.33	0.65	NA	NA	0.05	0.38	0.70	NA	NA	XXX
76080		A	X-ray exam of fistula	0.54	1.08	1.19	NA	NA	0.08	1.70	1.81	NA	NA	XXX
76080	26	A	X-ray exam of fistula	0.54	0.17	0.18	0.17	0.18	0.02	0.73	0.74	0.73	0.74	XXX
76080	TC	A	X-ray exam of fistula	0.00	0.90	1.01	NA	NA	0.06	0 96	1.07	NA	NA	XXX
76082		A	Computer mammogram add-on	0.06	0.20	0.38	0.20	0.38	0.02	0.28	0.46	0.28	0.46	ZZZ
76082	26	A	Computer mammogram add-on	0.06	0.02	0.02	0.02	0.02	0.01	0.09	0.09	0.09	0.09	ZZZ
76082	TC	A	Computer mammogram add-on	0.00	0.18	0.36	0.18	0.36	0.01	0.19	0.37	0.19	0.37	ZZZ
76083		A	Computer mammogram add-on	0.06	0.20	0.38	0.20	0.38	0.02	0.28	0.46	0.28	0.46	ZZZ
76083	26	A	Computer mammogram add-on	0.06	0.02	0.02	0.02	0.02	0.01	0.09	0.09	0.09	0.09	ZZZ
76083	TC	A	Computer mammogram add-on	0.00	0.18	0.36	0.18	0.36	0.01	0.19	0.37	0.19	0.37	ZZZ
76086		A	X-ray of mammary duct	0.36	1.22	2.36	NA	NA	0.16	1.74	2.88	NA	NA	XXX
76086	26	A	X-ray of mammary duct	0.36	0.11	0.12	0.11	0.12	0.02	0.49	0.50	0.49	0.50	XXX
76086	TC	A	X-ray of mammary duct	0.00	1.11	2.24	NA	NA	0.14	1.25	2.38	NA	NA	XXX
76088		A	X-ray of mammary ducts	0.45	1.66	3.27	NA	NA	0.21	2.32	3.93	NA	NA	XXX
76088	26	A	X-ray of mammary ducts	0.45	0.14	0.15	0.14	0.15	0.02	0.61	0.62	0.61	0.62	XXX
76088	TC	A	X-ray of mammary ducts	0.00	1.52	3.13	NA	NA	0.19	1.71	3.32	NA	NA	XXX
76090		A	Mammogram, one breast	0.70	1.62	1.37	NA	NA	0.09	2.41	2.16	NA	NA	XXX
76090	26	A	Mammogram, one breast	0.70	0.22	0.23	0.22	0.23	0.03	0.95	0.96	0.95	0.96	XXX
76090	TC	A	Mammogram, one breast	0.00	1.40	1.14	NA	NA	0.06	1.46	1.20	NA	NA	XXX
76091		A	Mammogram, both breasts	0.87	2.11	1.72	NA	NA	0.11	3.09	2.70	NA	NA	XXX
76091	26	A	Mammogram, both breasts	0.87	0.27	0.28	0.27	0.28	0.04	1.18	1.19	1.18	1.19	XXX
76091	TC	A	Mammogram, both breasts	0.00	1.84	1.44	NA	NA	0.07	1.91	1.51	NA	NA	XXX
76092		A	Mammogram, screening	0.70	1.42	1.45	NA	NA	0.10	2.22	2.25	NA	NA	XXX
76092	26	A	Mammogram, screening	0.70	0.22	0.23	0.22	0.23	0.03	0.95	0.96	0.95	0.96	XXX
76092	TC	A	Mammogram, screening	0.00	1.20	1.22	NA	NA	0.07	1.27	1.29	NA	NA	XXX
76093		A	Magnetic image, breast	1.63	22.03	19.12	NA	NA	0.99	24.65	21.74	NA	NA	XXX
76093	26	A	Magnetic image, breast	1.63	0.53	0.53	0.53	0.53	0.07	2.23	2.23	2.23	2.23	XXX
76093	TC	A	Magnetic image, breast	0.00	21.50	18.59	NA	NA	0.92	22.42	19.51	NA	NA	XXX
76094		A	Magnetic image, both breasts	1.63	22.03	23.84	NA	NA	1.31	24.97	26.78	NA	NA	XXX
76094	26	A	Magnetic image, both breasts	1.63	0.53	0.53	0.53	0.53	0.07	2.23	2.23	2.23	2.23	XXX
76094	TC	A	Magnetic image, both breasts	0.00	21.50	23.31	NA	NA	1.24	22.74	24.55	NA	NA	XXX
76095		A	Stereotactic breast biopsy	1.59	1.82	6.22	NA	NA	0.46	3.87	8.27	NA	NA	XXX
76095	26	A	Stereotactic breast biopsy	1.59	0.48	0.51	0.48	0.51	0.09	2.16	2.19	2.16	2.19	XXX
76095	TC	A	Stereotactic breast biopsy	0.00	1.34	5.71	NA	NA	0.37	1.71	6.08	NA	NA	XXX
76096		A	X-ray of needle wire, breast	0.56	0.82	1.32	NA	NA	0.09	1.47	1.97	NA	NA	XXX
76096	26	A	X-ray of needle wire, breast	0.56	0.18	0.18	0.18	0.18	0.02	0.76	0.76	0.76	0.76	XXX
76096	TC	A	X-ray of needle wire, breast	0.00	0.64	1.14	NA	NA	0.07	0.71	1.21	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
76098		A	X-ray exam, breast specimen	0.16	0.32	0.43	NA	NA	0.03	0.51	0.62	NA	NA	XXX
76098	26	A	X-ray exam, breast specimen	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
76098	TC	A	X-ray exam, breast specimen	0.00	0.27	0.38	NA	NA	0.02	0.29	0.40	NA	NA	XXX
76100		A	X-ray exam of body section	0.58	3.54	1.97	NA	NA	0.10	4.22	2.65	NA	NA	XXX
76100	26	A	X-ray exam of body section	0.58	0.20	0.19	0.20	0.19	0.03	0.81	0.80	0.81	0.80	XXX
76100	TC	A	X-ray exam of body section	0.00	3.35	1.78	NA	NA	0.07	3.42	1.85	NA	NA	XXX
76101		A	Complex body section x-ray	0.58	5.35	2.55	NA	NA	0.11	6.04	3.24	NA	NA	XXX
76101	26	A	Complex body section x-ray	0.58	0.19	0.19	0.19	0.19	0.03	0.80	0.80	0.80	0.80	XXX
76101	TC	A	Complex body section x-ray	0.00	5.16	2.36	NA	NA	0.08	5.24	2.44	NA	NA	XXX
76102		A	Complex body section x-rays	0.58	7.74	3.38	NA	NA	0.14	8.46	4.10	NA	NA	XXX
76102	26	A	Complex body section x-rays	0.58	0.18	0.19	0.18	0.19	0.03	0.79	0.80	0.79	0.80	XXX
76102	TC	A	Complex body section x-rays	0.00	7.56	3.19	NA	NA	0.11	7.67	3.30	NA	NA	XXX
76120		A	Cine/video x-rays	0.38	2.00	1.39	NA	NA	0.08	2.46	1.85	NA	NA	XXX
76120	26	A	Cine/video x-rays	0.38	0.15	0.14	0.15	0.14	0.02	0.55	0.54	0.55	0.54	XXX
76120	TC	A	Cine/video x-rays	0.00	1.85	1.25	NA	NA	0.06	1.91	1.31	NA	NA	XXX
76125		A	Cine/video x-rays add-on	0.27	NA	NA	NA	NA	0.06	NA	NA	NA	NA	ZZZ
76125	26	A	Cine/video x-rays add-on	0.27	0.10	0.09	0.10	0.09	0.01	0.38	0.37	0.38	0.37	ZZZ
76125	TC	A	Cine/video x-rays add-on	0.00	NA	NA	NA	NA	0.05	NA	NA	NA	NA	ZZZ
76150		A	X-ray exam, dry process	0.00	0.68	0.49	NA	NA	0.02	0.70	0.51	NA	NA	XXX
76350		C	Special x-ray contrast study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76355		A	Ct scan for localization	1.21	20.46	11.60	NA	NA	0.47	22.14	13.28	NA	NA	XXX
76355	26	A	Ct scan for localization	1.21	0.37	0.39	0.37	0.39	0.05	1.63	1.65	1.63	1.65	XXX
76355	TC	A	Ct scan for localization	0.00	20.09	11.22	NA	NA	0.42	20.51	11.64	NA	NA	XXX
76360		A	Ct scan for needle biopsy	1.16	2.30	7.05	NA	NA	0.47	3.93	8.68	NA	NA	XXX
76360	26	A	Ct scan for needle biopsy	1.16	0.37	0.38	0.37	0.38	0.05	1.58	1.59	1.58	1.59	XXX
76360	TC	A	Ct scan for needle biopsy	0.00	1.93	6.68	NA	NA	0.42	2.35	7.10	NA	NA	XXX
76362		A	Ct guide for tissue ablation	3.99	NA	NA	NA	NA	1.64	NA	NA	NA	NA	XXX
76362	26	A	Ct guide for tissue ablation	3.99	1.25	1.29	1.25	1.29	0.18	5.42	5.46	5.42	5.46	XXX
76362	TC	A	Ct guide for tissue ablation	0.00	NA	NA	NA	NA	1.46	NA	NA	NA	NA	XXX
76370		A	Ct scan for therapy guide	0.85	4.43	3.53	NA	NA	0.20	5.48	4.58	NA	NA	XXX
76370	26	A	Ct scan for therapy guide	0.85	0.24	0.27	0.24	0.27	0.04	1.13	1.16	1.13	1.16	XXX
76370	TC	A	Ct scan for therapy guide	0.00	4.19	3.26	NA	NA	0.16	4.35	3.42	NA	NA	XXX
76376		A	3d render w/o postprocess	0.20	1.40	2.97	NA	NA	0.10	1.70	3.27	NA	NA	XXX
76376	26	A	3d render w/o postprocess	0.20	0.06	0.07	0.06	0.07	0.02	0.28	0.29	0.28	0.29	XXX
76376	TC	A	3d render w/o postprocess	0.00	1.34	2.90	NA	NA	0.08	1.42	2.98	NA	NA	XXX
76377		A	3d rendering w/postprocess	0.79	1.38	3.11	NA	NA	0.39	2.56	4.29	NA	NA	XXX
76377	26	A	3d rendering w/postprocess	0.79	0.25	0.27	0.25	0.27	0.08	1.12	1.14	1.12	1.14	XXX
76377	TC	A	3d rendering w/postprocess	0.00	1.13	2.85	NA	NA	0.31	1.44	3.16	NA	NA	XXX
76380		A	CAT scan follow-up study	0.98	4.72	4.05	NA	NA	0.22	5.92	5.25	NA	NA	XXX
76380	26	A	CAT scan follow-up study	0.98	0.31	0.32	0.31	0.32	0.04	1.33	1.34	1.33	1.34	XXX
76380	TC	A	CAT scan follow-up study	0.00	4.42	3.73	NA	NA	0.18	4.60	3.91	NA	NA	XXX
76390		N	Mr spectroscopy	1.40	9.51	10.99	NA	NA	0.66	11.57	13.05	NA	NA	XXX
76390	26	N	Mr spectroscopy	1.40	0.33	0.44	0.33	0.44	0.07	1.80	1.91	1.80	1.91	XXX
76390	TC	N	Mr spectroscopy	0.00	9.19	10.56	NA	NA	0.59	9.78	11.15	NA	NA	XXX
76393		A	Mr guidance for needle place	1.50	9.83	11.23	NA	NA	0.64	11.97	13.37	NA	NA	XXX
76393	26	A	Mr guidance for needle place	1.50	0.49	0.50	0.49	0.50	0.09	2.08	2.09	2.08	2.09	XXX
76393	TC	A	Mr guidance for needle place	0.00	9.34	10.74	NA	NA	0.55	9.89	11.29	NA	NA	XXX
76394		A	Mri for tissue ablation	4.24	NA	NA	NA	NA	1.81	NA	NA	NA	NA	XXX
76394	26	A	Mri for tissue ablation	4.24	1.34	1.37	1.34	1.37	0.24	5.82	5.85	5.82	5.85	XXX
76394	TC	A	Mri for tissue ablation	0.00	NA	NA	NA	NA	1.57	NA	NA	NA	NA	XXX
76400		A	Magnetic image, bone marrow	1.60	14.85	12.50	NA	NA	0.66	17.11	14.76	NA	NA	XXX
76400	26	A	Magnetic image, bone marrow	1.60	0.56	0.53	0.56	0.53	0.07	2.23	2.20	2.23	2.20	XXX
76400	TC	A	Magnetic image, bone marrow	0.00	14.30	11.98	NA	NA	0.59	14.89	12.57	NA	NA	XXX
76496		C	Fluoroscopic procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76496	26	C	Fluoroscopic procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76496	TC	C	Fluoroscopic procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX

76497		C	Ct procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76497	26	C	Ct procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76497	TC	C	Ct procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76498		C	Mri procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76498	26	C	Mri procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76498	TC	C	Mri procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76499		C	Radiographic procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76499	26	C	Radiographic procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76499	TC	C	Radiographic procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76506		A	Echo exam of head	0.63	2.83	1.95	NA	NA	0.14	3.60	2.72	NA	NA	XXX
76506	26	A	Echo exam of head	0.63	0.20	0.23	0.20	0.23	0.06	0.89	0.92	0.89	0.92	XXX
76506	TC	A	Echo exam of head	0.00	2.63	1.72	NA	NA	0.08	2.71	1.80	NA	NA	XXX
76510		A	Ophth us, b & quant a	1.55	2.31	2.72	NA	NA	0.10	3.96	4.37	NA	NA	XXX
76510	26	A	Ophth us, b & quant a	1.55	0.58	0.66	0.58	0.66	0.03	2.16	2.24	2.16	2.24	XXX
76510	TC	A	Ophth us, b & quant a	0.00	1.73	2.07	NA	NA	0.07	1.80	2.14	NA	NA	XXX
76511		A	Ophth us, quant a only	0.94	1.39	2.17	NA	NA	0.10	2.43	3.21	NA	NA	XXX
76511	26	A	Ophth us, quant a only	0.94	0.35	0.39	0.35	0.39	0.03	1.32	1.36	1.32	1.36	XXX
76511	TC	A	Ophth us, quant a only	0.00	1.05	1.79	NA	NA	0.07	1.12	1.86	NA	NA	XXX
76512		A	Ophth us, b w/non-quant a	0.94	1.19	1.97	NA	NA	0.12	2.25	3.03	NA	NA	XXX
76512	26	A	Ophth us, b w/non-quant a	0.94	0.35	0.40	0.35	0.40	0.02	1.31	1.36	1.31	1.36	XXX
76512	TC	A	Ophth us, b w/non-quant a	0.00	0.85	1.57	NA	NA	0.10	0.95	1.67	NA	NA	XXX
76513		A	Echo exam of eye, water bath	0.66	1.58	1.75	NA	NA	0.12	2.36	2.53	NA	NA	XXX
76513	26	A	Echo exam of eye, water bath	0.66	0.25	0.28	0.25	0.28	0.02	0.93	0.96	0.93	0.96	XXX
76513	TC	A	Echo exam of eye, water bath	0.00	1.33	1.47	NA	NA	0.10	1.43	1.57	NA	NA	XXX
76514		A	Echo exam of eye, thickness	0.17	0.17	0.14	NA	NA	0.02	0.36	0.33	NA	NA	XXX
76514	26	A	Echo exam of eye, thickness	0.17	0.06	0.08	0.06	0.08	0.01	0.24	0.26	0.24	0.26	XXX
76514	TC	A	Echo exam of eye, thickness	0.00	0.11	0.07	NA	NA	0.01	0.12	0.08	NA	NA	XXX
76516		A	Echo exam of eye	0.54	1.19	1.39	NA	NA	0.08	1.81	2.01	NA	NA	XXX
76516	26	A	Echo exam of eye	0.54	0.19	0.23	0.19	0.23	0.01	0.74	0.78	0.74	0.78	XXX
76516	TC	A	Echo exam of eye	0.00	1.00	1.17	NA	NA	0.07	1.07	1.24	NA	NA	XXX
76519		A	Echo exam of eye	0.54	1.33	1.50	NA	NA	0.08	1.95	2.12	NA	NA	XXX
76519	26	A	Echo exam of eye	0.54	0.20	0.23	0.20	0.23	0.01	0.75	0.78	0.75	0.78	XXX
76519	TC	A	Echo exam of eye	0.00	1.12	1.26	NA	NA	0.07	1.19	1.33	NA	NA	XXX
76529		A	Echo exam of eye	0.57	1.19	1.33	NA	NA	0.10	1.86	2.00	NA	NA	XXX
76529	26	A	Echo exam of eye	0.57	0.21	0.23	0.21	0.23	0.02	0.80	0.82	0.80	0.82	XXX
76529	TC	A	Echo exam of eye	0.00	0.98	1.09	NA	NA	0.08	1.06	1.17	NA	NA	XXX
76536		A	Us exam of head and neck	0.56	2.69	1.87	NA	NA	0.10	3.35	2.53	NA	NA	XXX
76536	26	A	Us exam of head and neck	0.56	0.17	0.18	0.17	0.18	0.02	0.75	0.76	0.75	0.76	XXX
76536	TC	A	Us exam of head and neck	0.00	2.52	1.70	NA	NA	0.08	2.60	1.78	NA	NA	XXX
76604		A	Us exam, chest, b-scan	0.55	1.81	1.57	NA	NA	0.09	2.45	2.21	NA	NA	XXX
76604	26	A	Us exam, chest, b-scan	0.55	0.17	0.18	0.17	0.18	0.02	0.74	0.75	0.74	0.75	XXX
76604	TC	A	Us exam, chest, b-scan	0.00	1.64	1.39	NA	NA	0.07	1.71	1.46	NA	NA	XXX
76645		A	Us exam, breast(s)	0.54	2.11	1.45	NA	NA	0.08	2.73	2.07	NA	NA	XXX
76645	26	A	Us exam, breast(s)	0.54	0.17	0.18	0.17	0.18	0.02	0.73	0.74	0.73	0.74	XXX
76645	TC	A	Us exam, breast(s)	0.00	1.94	1.27	NA	NA	0.06	2.00	1.33	NA	NA	XXX
76700		A	Us exam, abdom, complete	0.81	3.04	2.44	NA	NA	0.15	4.00	3.40	NA	NA	XXX
76700	26	A	Us exam, abdom, complete	0.81	0.26	0.27	0.26	0.27	0.04	1.11	1.12	1.11	1.12	XXX
76700	TC	A	Us exam, abdom, complete	0.00	2.78	2.17	NA	NA	0.11	2.89	2.28	NA	NA	XXX
76705		A	Echo exam of abdomen	0.59	2.34	1.79	NA	NA	0.11	3.04	2.49	NA	NA	XXX
76705	26	A	Echo exam of abdomen	0.59	0.19	0.19	0.19	0.19	0.03	0.81	0.81	0.81	0.81	XXX
76705	TC	A	Echo exam of abdomen	0.00	2.16	1.61	NA	NA	0.08	2.24	1.69	NA	NA	XXX
76770		A	Us exam abdo back wall, comp	0.74	2.94	2.39	NA	NA	0.14	3.82	3.27	NA	NA	XXX
76770	26	A	Us exam abdo back wall, comp	0.74	0.24	0.24	0.24	0.24	0.03	1.01	1.01	1.01	1.01	XXX
76770	TC	A	Us exam abdo back wall, comp	0.00	2.70	2.15	NA	NA	0.11	2.81	2.26	NA	NA	XXX
76775		A	Us exam abdo back wall, lim	0.58	2.42	1.81	NA	NA	0.11	3.11	2.50	NA	NA	XXX
76775	26	A	Us exam abdo back wall, lim	0.58	0.19	0.19	0.19	0.19	0.03	0.80	0.80	0.80	0.80	XXX
76775	TC	A	Us exam abdo back wall, lim	0.00	2.23	1.62	NA	NA	0.08	2.31	1.70	NA	NA	XXX
76778		A	Us exam kidney transplant	0.74	3.21	2.46	NA	NA	0.14	4.09	3.34	NA	NA	XXX
76778	26	A	Us exam kidney transplant	0.74	0.23	0.24	0.23	0.24	0.03	1.00	1.01	1.00	1.01	XXX
76778	TC	A	Us exam kidney transplant	0.00	2.98	2.22	NA	NA	0.11	3.09	2.33	NA	NA	XXX
76800		A	Us exam, spinal canal	1.13	2.34	1.90	NA	NA	0.13	3.60	3.16	NA	NA	XXX
76800	26	A	Us exam, spinal canal	1.13	0.30	0.33	0.30	0.33	0.05	1.48	1.51	1.48	1.51	XXX
76800	TC	A	Us exam, spinal canal	0.00	2.04	1.58	NA	NA	0.08	2.12	1.66	NA	NA	XXX
76801		A	Ob us < 14 wks, single fetus	0.99	2.46	2.45	NA	NA	0.16	3.61	3.60	NA	NA	XXX
76801	26	A	Ob us < 14 wks, single fetus	0.99	0.30	0.33	0.30	0.33	0.04	1.33	1.36	1.33	1.36	XXX
76801	TC	A	Ob us < 14 wks, single fetus	0.00	2.16	2.12	NA	NA	0.12	2.28	2.24	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
76802		A	Ob us < 14 wks, addl fetus	0.83	0.97	1.25	0.97	1.25	0.16	1.96	2.24	1.96	2.24	ZZZ
76802	26	A	Ob us < 14 wks, addl fetus	0.83	0.25	0.28	0.25	0.28	0.04	1.12	1.15	1.12	1.15	ZZZ
76802	TC	A	Ob us < 14 wks, addl fetus	0.00	0.72	0.97	0.72	0.97	0.12	0.84	1.09	0.84	1.09	ZZZ
76805		A	Ob us >/= 14 wks, sngl fetus	0.99	3.05	2.59	NA	NA	0.16	4.20	3.74	NA	NA	XXX
76805	26	A	Ob us >/= 14 wks, sngl fetus	0.99	0.29	0.33	0.29	0.33	0.04	1.32	1.36	1.32	1.36	XXX
76805	TC	A	Ob us >/= 14 wks, sngl fetus	0.00	2.75	2.26	NA	NA	0.12	2.87	2.38	NA	NA	XXX
76810		A	Ob us >/= 14 wks, addl fetus	0.98	1.66	1.46	1.66	1.46	0.26	2.90	2.70	2.90	2.70	ZZZ
76810	26	A	Ob us >/= 14 wks, addl fetus	0.98	0.29	0.33	0.29	0.33	0.04	1.31	1.35	1.31	1.35	ZZZ
76810	TC	A	Ob us >/= 14 wks, addl fetus	0.00	1.37	1.13	1.37	1.13	0.22	1.59	1.35	1.59	1.35	ZZZ
76811		A	Ob us, detailed, sngl fetus	1.90	3.07	3.95	NA	NA	0.52	5.49	6.37	NA	NA	XXX
76811	26	A	Ob us, detailed, sngl fetus	1.90	0.54	0.67	0.54	0.67	0.09	2.53	2.66	2.53	2.66	XXX
76811	TC	A	Ob us, detailed, sngl fetus	0.00	2.53	3.28	NA	NA	0.43	2.96	3.71	NA	NA	XXX
76812		A	Ob us, detailed, addl fetus	1.78	3.98	2.28	3.98	2.28	0.49	6.25	4.55	6.25	4.55	ZZZ
76812	26	A	Ob us, detailed, addl fetus	1.78	0.51	0.62	0.51	0.62	0.08	2.37	2.48	2.37	2.48	ZZZ
76812	TC	A	Ob us, detailed, addl fetus	0.00	3.47	1.66	3.47	1.66	0.41	3.88	2.07	3.88	2.07	ZZZ
76815		A	Ob us, limited, fetus(s)	0.65	1.80	1.69	NA	NA	0.11	2.56	2.45	NA	NA	XXX
76815	26	A	Ob us, limited, fetus(s)	0.65	0.19	0.22	0.19	0.22	0.03	0.87	0.90	0.87	0.90	XXX
76815	TC	A	Ob us, limited, fetus(s)	0.00	1.61	1.47	NA	NA	0.08	1.69	1.55	NA	NA	XXX
76816		A	Ob us, follow-up, per fetus	0.85	2.40	1.67	NA	NA	0.10	3.35	2.62	NA	NA	XXX
76816	26	A	Ob us, follow-up, per fetus	0.85	0.24	0.30	0.24	0.30	0.04	1.13	1.19	1.13	1.19	XXX
76816	TC	A	Ob us, follow-up, per fetus	0.00	2.15	1.37	NA	NA	0.06	2.21	1.43	NA	NA	XXX
76817		A	Transvaginal us, obstetric	0.75	2.02	1.83	NA	NA	0.09	2.86	2.67	NA	NA	XXX
76817	26	A	Transvaginal us, obstetric	0.75	0.22	0.25	0.22	0.25	0.03	1.00	1.03	1.00	1.03	XXX
76817	TC	A	Transvaginal us, obstetric	0.00	1.80	1.59	NA	NA	0.06	1.86	1.65	NA	NA	XXX
76818		A	Fetal biophys profile w/nst	1.05	2.22	2.05	NA	NA	0.15	3.42	3.25	NA	NA	XXX
76818	26	A	Fetal biophys profile w/nst	1.05	0.30	0.37	0.30	0.37	0.05	1.40	1.47	1.40	1.47	XXX
76818	TC	A	Fetal biophys profile w/nst	0.00	1.92	1.69	NA	NA	0.10	2.02	1.79	NA	NA	XXX
76819		A	Fetal biophys profil w/o nst	0.77	1.63	1.82	NA	NA	0.13	2.53	2.72	NA	NA	XXX
76819	26	A	Fetal biophys profil w/o nst	0.77	0.23	0.27	0.23	0.27	0.03	1.03	1.07	1.03	1.07	XXX
76819	TC	A	Fetal biophys profil w/o nst	0.00	1.41	1.56	NA	NA	0.10	1.51	1.66	NA	NA	XXX
76820		A	Umbilical artery echo	0.50	0.57	1.49	NA	NA	0.15	1.22	2.14	NA	NA	XXX
76820	26	A	Umbilical artery echo	0.50	0.14	0.18	0.14	0.18	0.03	0.67	0.71	0.67	0.71	XXX
76820	TC	A	Umbilical artery echo	0.00	0.43	1.32	NA	NA	0.12	0.55	1.44	NA	NA	XXX
76821		A	Middle cerebral artery echo	0.70	1.88	1.87	NA	NA	0.15	2.73	2.72	NA	NA	XXX
76821	26	A	Middle cerebral artery echo	0.70	0.20	0.25	0.20	0.25	0.03	0.93	0.98	0.93	0.98	XXX
76821	TC	A	Middle cerebral artery echo	0.00	1.68	1.63	NA	NA	0.12	1.80	1.75	NA	NA	XXX
76825		A	Echo exam of fetal heart	1.67	4.37	3.02	NA	NA	0.18	6.22	4.87	NA	NA	XXX
76825	26	A	Echo exam of fetal heart	1.67	0.49	0.57	0.49	0.57	0.07	2.23	2.31	2.23	2.31	XXX
76825	TC	A	Echo exam of fetal heart	0.00	3.88	2.45	NA	NA	0.11	3.99	2.56	NA	NA	XXX
76826		A	Echo exam of fetal heart	0.83	2.75	1.44	NA	NA	0.08	3.66	2.35	NA	NA	XXX
76826	26	A	Echo exam of fetal heart	0.83	0.24	0.28	0.24	0.28	0.03	1.10	1.14	1.10	1.14	XXX
76826	TC	A	Echo exam of fetal heart	0.00	2.51	1.16	NA	NA	0.05	2.56	1.21	NA	NA	XXX
76827		A	Echo exam of fetal heart	0.58	1.07	1.71	NA	NA	0.14	1.79	2.43	NA	NA	XXX
76827	26	A	Echo exam of fetal heart	0.58	0.17	0.20	0.17	0.20	0.02	0.77	0.80	0.77	0.80	XXX
76827	TC	A	Echo exam of fetal heart	0.00	0.90	1.52	NA	NA	0.12	1.02	1.64	NA	NA	XXX
76828		A	Echo exam of fetal heart	0.56	0.64	1.16	NA	NA	0.11	1.31	1.83	NA	NA	XXX
76828	26	A	Echo exam of fetal heart	0.56	0.16	0.21	0.16	0.21	0.03	0.75	0.80	0.75	0.80	XXX
76828	TC	A	Echo exam of fetal heart	0.00	0.48	0.95	NA	NA	0.08	0.56	1.03	NA	NA	XXX
76830		A	Transvaginal us, non-ob	0.69	2.77	2.00	NA	NA	0.13	3.59	2.82	NA	NA	XXX
76830	26	A	Transvaginal us, non-ob	0.69	0.21	0.23	0.21	0.23	0.03	0.93	0.95	0.93	0.95	XXX
76830	TC	A	Transvaginal us, non-ob	0.00	2.56	1.78	NA	NA	0.10	2.66	1.88	NA	NA	XXX
76831		A	Echo exam, uterus	0.72	2.76	2.01	NA	NA	0.13	3.61	2.86	NA	NA	XXX
76831	26	A	Echo exam, uterus	0.72	0.21	0.24	0.21	0.24	0.03	0.96	0.99	0.96	0.99	XXX
76831	TC	A	Echo exam, uterus	0.00	2.55	1.78	NA	NA	0.10	2.65	1.88	NA	NA	XXX
76856		A	Us exam, pelvic, complete	0.69	2.81	2.01	NA	NA	0.13	3.63	2.83	NA	NA	XXX
76856	26	A	Us exam, pelvic, complete	0.69	0.22	0.23	0.22	0.23	0.03	0.94	0.95	0.94	0.95	XXX

76856	TC	A	Us exam, pelvic, complete	0.00	2.59	1.79	NA	NA	0.10	2.69	1.89	NA	NA	XXX
76857		A	Us exam, pelvic, limited	0.38	2.53	2.00	NA	NA	0.08	2.99	2.46	NA	NA	XXX
76857	26	A	Us exam, pelvic, limited	0.38	0.14	0.13	0.14	0.13	0.02	0.54	0.53	0.54	0.53	XXX
76857	TC	A	Us exam, pelvic, limited	0.00	2.38	1.88	NA	NA	0.06	2.44	1.94	NA	NA	XXX
76870		A	Us exam, scrotum	0.64	2.83	2.00	NA	NA	0.13	3.60	2.77	NA	NA	XXX
76870	26	A	Us exam, scrotum	0.64	0.21	0.21	0.21	0.21	0.03	0.88	0.88	0.88	0.88	XXX
76870	TC	A	Us exam, scrotum	0.00	2.62	1.80	NA	NA	0.10	2.72	1.90	NA	NA	XXX
76872		A	Us, transrectal	0.69	3.43	2.54	NA	NA	0.14	4.26	3.37	NA	NA	XXX
76872	26	A	Us, transrectal	0.69	0.27	0.23	0.27	0.23	0.04	1.00	0.96	1.00	0.96	XXX
76872	TC	A	Us, transrectal	0.00	3.16	2.31	NA	NA	0.10	3.26	2.41	NA	NA	XXX
76873		A	Echograp trans r, pros study	1.55	3.39	2.80	NA	NA	0.25	5.19	4.60	NA	NA	XXX
76873	26	A	Echograp trans r, pros study	1.55	0.51	0.50	0.51	0.50	0.09	2.15	2.14	2.15	2.14	XXX
76873	TC	A	Echograp trans r, pros study	0.00	2.87	2.29	NA	NA	0.16	3.03	2.45	NA	NA	XXX
76880		A	Us exam, extremity	0.59	3.19	2.01	NA	NA	0.11	3.89	2.71	NA	NA	XXX
76880	26	A	Us exam, extremity	0.59	0.18	0.19	0.18	0.19	0.03	0.80	0.81	0.80	0.81	XXX
76880	TC	A	Us exam, extremity	0.00	3.01	1.82	NA	NA	0.08	3.09	1.90	NA	NA	XXX
76885		A	Us exam infant hips, dynamic	0.74	3.21	2.12	NA	NA	0.13	4.08	2.99	NA	NA	XXX
76885	26	A	Us exam infant hips, dynamic	0.74	0.22	0.24	0.22	0.24	0.03	0.99	1.01	0.99	1.01	XXX
76885	TC	A	Us exam infant hips, dynamic	0.00	2.99	1.89	NA	NA	0.10	3.09	1.99	NA	NA	XXX
76886		A	Us exam infant hips, static	0.62	2.30	1.79	NA	NA	0.11	3.03	2.52	NA	NA	XXX
76886	26	A	Us exam infant hips, static	0.62	0.18	0.20	0.18	0.20	0.03	0.83	0.85	0.83	0.85	XXX
76886	TC	A	Us exam infant hips, static	0.00	2.12	1.60	NA	NA	0.08	2.20	1.68	NA	NA	XXX
76930		A	Echo guide, cardiocentesis	0.67	2.11	1.85	NA	NA	0.12	2.90	2.64	NA	NA	XXX
76930	26	A	Echo guide, cardiocentesis	0.67	0.34	0.27	0.34	0.27	0.02	1.03	0.96	1.03	0.96	XXX
76930	TC	A	Echo guide, cardiocentesis	0.00	1.76	1.58	NA	NA	0.10	1.86	1.68	NA	NA	XXX
76932		A	Echo guide for heart biopsy	0.67	NA	NA	NA	NA	0.12	NA	NA	NA	NA	XXX
76932	26	A	Echo guide for heart biopsy	0.67	0.35	0.28	0.35	0.28	0.02	1.04	0.97	1.04	0.97	XXX
76932	TC	A	Echo guide for heart biopsy	0.00	NA	NA	NA	NA	0.10	NA	NA	NA	NA	XXX
76936		A	Echo guide for artery repair	1.99	6.05	6.73	NA	NA	0.47	8.51	9.19	NA	NA	XXX
76936	26	A	Echo guide for artery repair	1.99	0.67	0.66	0.67	0.66	0.13	2.79	2.78	2.79	2.78	XXX
76936	TC	A	Echo guide for artery repair	0.00	5.38	6.06	NA	NA	0.34	5.72	6.40	NA	NA	XXX
76937		A	Us guide, vascular access	0.30	0.61	0.51	0.61	0.51	0.13	1.04	0.94	1.04	0.94	ZZZ
76937	26	A	Us guide, vascular access	0.30	0.09	0.10	0.09	0.10	0.03	0.42	0.43	0.42	0.43	ZZZ
76937	TC	A	Us guide, vascular access	0.00	0.52	0.42	0.52	0.42	0.10	0.62	0.52	0.62	0.52	ZZZ
76940		A	Us guide, tissue ablation	2.00	NA	NA	NA	NA	0.60	NA	NA	NA	NA	XXX
76940	26	A	Us guide, tissue ablation	2.00	0.60	0.64	0.60	0.64	0.31	2.91	2.95	2.91	2.95	XXX
76940	TC	A	Us guide, tissue ablation	0.00	NA	NA	NA	NA	0.29	NA	NA	NA	NA	XXX
76941		A	Echo guide for transfusion	1.34	NA	NA	NA	NA	0.15	NA	NA	NA	NA	XXX
76941	26	A	Echo guide for transfusion	1.34	0.44	0.46	0.44	0.46	0.07	1.85	1.87	1.85	1.87	XXX
76941	TC	A	Echo guide for transfusion	0.00	NA	NA	NA	NA	0.08	NA	NA	NA	NA	XXX
76942		A	Echo guide for biopsy	0.67	4.83	3.48	NA	NA	0.13	5.63	4.28	NA	NA	XXX
76942	26	A	Echo guide for biopsy	0.67	0.23	0.22	0.23	0.22	0.03	0.93	0.92	0.93	0.92	XXX
76942	TC	A	Echo guide for biopsy	0.00	4.60	3.26	NA	NA	0.10	4.70	3.36	NA	NA	XXX
76945		A	Echo guide, villus sampling	0.67	NA	NA	NA	NA	0.11	NA	NA	NA	NA	XXX
76945	26	A	Echo guide, villus sampling	0.67	0.21	0.22	0.21	0.22	0.03	0.91	0.92	0.91	0.92	XXX
76945	TC	A	Echo guide, villus sampling	0.00	NA	NA	NA	NA	0.08	NA	NA	NA	NA	XXX
76946		A	Echo guide for amniocentesis	0.38	0.45	1.36	NA	NA	0.12	0.95	1.86	NA	NA	XXX
76946	26	A	Echo guide for amniocentesis	0.38	0.11	0.13	0.11	0.13	0.02	0.51	0.53	0.51	0.53	XXX
76946	TC	A	Echo guide for amniocentesis	0.00	0.34	1.23	NA	NA	0.10	0.44	1.33	NA	NA	XXX
76948		A	Echo guide, ova aspiration	0.38	0.45	1.35	NA	NA	0.12	0.95	1.85	NA	NA	XXX
76948	26	A	Echo guide, ova aspiration	0.38	0.11	0.13	0.11	0.13	0.02	0.51	0.53	0.51	0.53	XXX
76948	TC	A	Echo guide, ova aspiration	0.00	0.34	1.23	NA	NA	0.10	0.44	1.33	NA	NA	XXX
76950		A	Echo guidance radiotherapy	0.58	1.16	1.42	NA	NA	0.10	1.84	2.10	NA	NA	XXX
76950	26	A	Echo guidance radiotherapy	0.58	0.16	0.18	0.16	0.18	0.03	0.77	0.79	0.77	0.79	XXX
76950	TC	A	Echo guidance radiotherapy	0.00	1.00	1.23	NA	NA	0.07	1.07	1.30	NA	NA	XXX
76965		A	Echo guidance radiotherapy	1.34	1.18	4.80	NA	NA	0.37	2.89	6.51	NA	NA	XXX
76965	26	A	Echo guidance radiotherapy	1.34	0.48	0.44	0.48	0.44	0.08	1.90	1.86	1.90	1.86	XXX
76965	TC	A	Echo guidance radiotherapy	0.00	0.70	4.35	NA	NA	0.29	0.99	4.64	NA	NA	XXX
76970		A	Ultrasound exam follow-up	0.40	2.14	1.42	NA	NA	0.08	2.62	1.90	NA	NA	XXX
76970	26	A	Ultrasound exam follow-up	0.40	0.11	0.13	0.11	0.13	0.02	0.53	0.55	0.53	0.55	XXX
76970	TC	A	Ultrasound exam follow-up	0.00	2.03	1.30	NA	NA	0.06	2.09	1.36	NA	NA	XXX
76975		A	GI endoscopic ultrasound	0.81	NA	NA	NA	NA	0.14	NA	NA	NA	NA	XXX
76975	26	A	GI endoscopic ultrasound	0.81	0.29	0.28	0.29	0.28	0.04	1.14	1.13	1.14	1.13	XXX
76975	TC	A	GI endoscopic ultrasound	0.00	NA	NA	NA	NA	0.10	NA	NA	NA	NA	XXX
76977		A	Us bone density measure	0.05	0.11	0.66	NA	NA	0.06	0.22	0.77	NA	NA	XXX
76977	26	A	Us bone density measure	0.05	0.01	0.02	0.01	0.02	0.01	0.07	0.08	0.07	0.08	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facillty PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
76977	TC	A	Us bone density measure	0.00	0.09	0.64	NA	NA	0.05	0.14	0.69	NA	NA	XXX
76986		A	Ultrasound guide intraoper	1.20	NA	NA	NA	NA	0.27	NA	NA	NA	NA	XXX
76986	26	A	Ultrasound guide intraoper	1.20	0.35	0.39	0.35	0.39	0.13	1.68	1.72	1.68	1.72	XXX
76986	TC	A	Ultrasound guide intraoper	0.00	NA	NA	NA	NA	0.14	NA	NA	NA	NA	XXX
76999		C	Echo examination procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76999	26	C	Echo examination procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
76999	TC	C	Echo examination procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77261		A	Radiation therapy planning	1.39	0.41	0.49	0.41	0.49	0.07	1.87	1.95	1.87	1.95	XXX
77262		A	Radiation therapy planning	2.11	0.58	0.71	0.58	0.71	0.11	2.80	2.93	2.80	2.93	XXX
77263		A	Radiation therapy planning	3.14	0.86	1.05	0.86	1.05	0.16	4.16	4.35	4.16	4.35	XXX
77280		A	Set radiation therapy field	0.70	4.35	3.86	NA	NA	0.22	5.27	4.78	NA	NA	XXX
77280	26	A	Set radiation therapy field	0.70	0.19	0.21	0.19	0.21	0.04	0.93	0.95	0.93	0.95	XXX
77280	TC	A	Set radiation therapy field	0.00	4.16	3.64	NA	NA	0.18	4.34	3.82	NA	NA	XXX
77285		A	Set radiation therapy field	1.05	7.91	6.41	NA	NA	0.35	9.31	7.81	NA	NA	XXX
77285	26	A	Set radiation therapy field	1.05	0.29	0.33	0.29	0.33	0.05	1.39	1.43	1.39	1.43	XXX
77285	TC	A	Set radiation therapy field	0.00	7.62	6.08	NA	NA	0.30	7.92	6.38	NA	NA	XXX
77290		A	Set radiation therapy field	1.56	13.23	8.57	NA	NA	0.43	15.22	10.56	NA	NA	XXX
77290	26	A	Set radiation therapy field	1.56	0.43	0.48	0.43	0.48	0.08	2.07	2.12	2.07	2.12	XXX
77290	TC	A	Set radiation therapy field	0.00	12.81	8.09	NA	NA	0.35	13.16	8.44	NA	NA	XXX
77295		A	Set radiation therapy field	4.56	6.90	23.76	NA	NA	1.71	13.17	30.03	NA	NA	XXX
77295	26	A	Set radiation therapy field	4.56	1.25	1.41	1.25	1.41	0.23	6.04	6.20	6.04	6.20	XXX
77295	TC	A	Set radiation therapy field	0.00	5.65	22.36	NA	NA	1.48	7.13	23.84	NA	NA	XXX
77299		C	Radiation therapy planning	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77299	26	C	Radiation therapy planning	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77299	TC	C	Radiation therapy planning	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77300		A	Radiation therapy dose plan	0.62	1.08	1.43	NA	NA	0.10	1.80	2.15	NA	NA	XXX
77300	26	A	Radiation therapy dose plan	0.62	0.17	0.19	0.17	0.19	0.03	0.82	0.84	0.82	0.84	XXX
77300	TC	A	Radiation therapy dose plan	0.00	0.91	1.23	NA	NA	0.07	0.98	1.30	NA	NA	XXX
77301		A	Radiotherapy dose plan, imrt	7.99	53.43	36.23	NA	NA	1.88	63.30	46.10	NA	NA	XXX
77301	26	A	Radiotherapy dose plan, imrt	7.99	2.19	2.47	2.19	2.47	0.40	10.58	10.86	10.58	10.86	XXX
77301	TC	A	Radiotherapy dose plan, imrt	0.00	51.24	33.76	NA	NA	1.48	52.72	35.24	NA	NA	XXX
77305		A	Teletx isodose plan simple	0.70	0.85	1.78	NA	NA	0.15	1.70	2.63	NA	NA	XXX
77305	26	A	Teletx isodose plan simple	0.70	0.19	0.22	0.19	0.22	0.04	0.93	0.96	0.93	0.96	XXX
77305	TC	A	Teletx isodose plan simple	0.00	0.65	1.56	NA	NA	0.11	0.76	1.67	NA	NA	XXX
77310		A	Teletx isodose plan intermed	1.05	1.17	2.30	NA	NA	0.18	2.40	3.53	NA	NA	XXX
77310	26	A	Teletx isodose plan intermed	1.05	0.28	0.33	0.28	0.33	0.05	1.38	1.43	1.38	1.43	XXX
77310	TC	A	Teletx isodose plan intermed	0.00	0.89	1.97	NA	NA	0.13	1.02	2.10	NA	NA	XXX
77315		A	Teletx isodose plan complex	1.56	1.97	2.86	NA	NA	0.22	3.75	4.64	NA	NA	XXX
77315	26	A	Teletx isodose plan complex	1.56	0.43	0.48	0.43	0.48	0.08	2.07	2.12	2.07	2.12	XXX
77315	TC	A	Teletx isodose plan complex	0.00	1.54	2.38	NA	NA	0.14	1.68	2.52	NA	NA	XXX
77321		A	Special teletx port plan	0.95	1.38	3.60	NA	NA	0.26	2.59	4.81	NA	NA	XXX
77321	26	A	Special teletx port plan	0.95	0.26	0.29	0.26	0.29	0.05	1.26	1.29	1.26	1.29	XXX
77321	TC	A	Special teletx port plan	0.00	1.12	3.31	NA	NA	0.21	1.33	3.52	NA	NA	XXX
77326		A	Brachytx isodose calc simp	0.93	2.78	2.69	NA	NA	0.18	3.89	3.80	NA	NA	XXX
77326	26	A	Brachytx isodose calc simp	0.93	0.25	0.29	0.25	0.29	0.05	1.23	1.27	1.23	1.27	XXX
77326	TC	A	Brachytx isodose calc simp	0.00	2.53	2.40	NA	NA	0.13	2.66	2.53	NA	NA	XXX
77327		A	Brachytx isodose calc interm	1.39	3.84	3.89	NA	NA	0.25	5.48	5.53	NA	NA	XXX
77327	26	A	Brachytx isodose calc interm	1.39	0.38	0.43	0.38	0.43	0.07	1.84	1.89	1.84	1.89	XXX
77327	TC	A	Brachytx isodose calc interm	0.00	3.46	3.47	NA	NA	0.18	3.64	3.65	NA	NA	XXX
77328		A	Brachytx isodose plan compl	2.09	4.93	5.45	NA	NA	0.36	7.38	7.90	NA	NA	XXX
77328	26	A	Brachytx isodose plan compl	2.09	0.57	0.65	0.57	0.65	0.11	2.77	2.85	2.77	2.85	XXX
77328	TC	A	Brachytx isodose plan compl	0.00	4.36	4.81	NA	NA	0.25	4.61	5.06	NA	NA	XXX
77331		A	Special radiation dosimetry	0.87	0.72	0.77	NA	NA	0.06	1.65	1.70	NA	NA	XXX
77331	26	A	Special radiation dosimetry	0.87	0.24	0.27	0.24	0.27	0.04	1.15	1.18	1.15	1.18	XXX
77331	TC	A	Special radiation dosimetry	0.00	0.49	0.50	NA	NA	0.02	0.51	0.52	NA	NA	XXX
77332		A	Radiation treatment aid(s)	0.54	1.52	1.51	NA	NA	0.10	2.16	2.15	NA	NA	XXX

77332	26	A	Radiation treatment aid(s)	0.54	0.15	0.17	0.15	0.17	0.03	0.72	0.74	0.72	0.74	XXX
77332	TC	A	Radiation treatment aid(s)	0.00	1.37	1.35	NA	NA	0.07	1.44	1.42	NA	NA	XXX
77333		A	Radiation treatment aid(s)	0.84	0.46	1.74	NA	NA	0.15	1.45	2.73	NA	NA	XXX
77333	26	A	Radiation treatment aid(s)	0.84	0.23	0.26	0.23	0.26	0.04	1.11	1.14	1.11	1.14	XXX
77333	TC	A	Radiation treatment aid(s)	0.00	0.23	1.48	NA	NA	0.11	0.34	1.59	NA	NA	XXX
77334		A	Radiation treatment aid(s)	1.24	2.61	3.39	NA	NA	0.23	4.08	4.86	NA	NA	XXX
77334	26	A	Radiation treatment aid(s)	1.24	0.34	0.39	0.34	0.39	0.06	1.64	1.69	1.64	1.69	XXX
77334	TC	A	Radiation treatment aid(s)	0.00	2.27	3.01	NA	NA	0.17	2.44	3.18	NA	NA	XXX
77336		A	Radiation physics consult	0.00	0.92	2.47	NA	NA	0.16	1.08	2.63	NA	NA	XXX
77370		A	Radiation physics consult	0.00	2.33	3.20	NA	NA	0.18	2.51	3.38	NA	NA	XXX
77399		C	External radiation dosimetry	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77399	26	C	External radiation dosimetry	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77399	TC	C	External radiation dosimetry	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77401		A	Radiation treatment delivery	0.00	0.49	1.45	NA	NA	0.11	0.60	1.56	NA	NA	XXX
77402		A	Radiation treatment delivery	0.00	4.15	2.37	NA	NA	0.11	4.26	2.48	NA	NA	XXX
77403		A	Radiation treatment delivery	0.00	3.73	2.26	NA	NA	0.11	3.84	2.37	NA	NA	XXX
77404		A	Radiation treatment delivery	0.00	4.19	2.38	NA	NA	0.11	4.30	2.49	NA	NA	XXX
77406		A	Radiation treatment delivery	0.00	4.18	2.37	NA	NA	0.11	4.29	2.48	NA	NA	XXX
77407		A	Radiation treatment delivery	0.00	5.39	2.92	NA	NA	0.12	5.51	3.04	NA	NA	XXX
77408		A	Radiation treatment delivery	0.00	5.18	2.86	NA	NA	0.12	5.30	2.98	NA	NA	XXX
77409		A	Radiation treatment delivery	0.00	5.78	3.01	NA	NA	0.12	5.90	3.13	NA	NA	XXX
77411		A	Radiation treatment delivery	0.00	5.68	2.99	NA	NA	0.12	5.80	3.11	NA	NA	XXX
77412		A	Radiation treatment delivery	0.00	6.78	3.44	NA	NA	0.13	6.91	3.57	NA	NA	XXX
77413		A	Radiation treatment delivery	0.00	6.80	3.45	NA	NA	0.13	6.93	3.58	NA	NA	XXX
77414		A	Radiation treatment delivery	0.00	7.66	3.66	NA	NA	0.13	7.79	3.79	NA	NA	XXX
77416		A	Radiation treatment delivery	0.00	7.65	3.66	NA	NA	0.13	7.78	3.79	NA	NA	XXX
77417		A	Radiology port film(s)	0.00	0.35	0.53	NA	NA	0.04	0.39	0.57	NA	NA	XXX
77418		A	Radiation tx delivery, imrt	0.00	13.02	16.77	NA	NA	0.13	13.15	16.90	NA	NA	XXX
77421		A	Stereoscopic x-ray guidance	0.39	1.95	3.10	NA	NA	0.12	2.46	3.61	NA	NA	XXX
77421	26	A	Stereoscopic x-ray guidance	0.39	0.11	0.13	0.11	0.13	0.02	0.52	0.54	0.52	0.54	XXX
77421	TC	A	Stereoscopic x-ray guidance	0.00	1.84	2.97	NA	NA	0.10	1.94	3.07	NA	NA	XXX
77422		A	Neutron beam tx, simple	0.00	11.79	4.23	NA	NA	0.13	11.92	4.36	NA	NA	XXX
77423		A	Neutron beam tx, complex	0.00	7.83	3.65	NA	NA	0.13	7.96	3.78	NA	NA	XXX
77427		A	Radiation tx management, x5	3.31	1.08	1.07	1.08	1.07	0.17	4.56	4.55	4.56	4.55	XXX
77431		A	Radiation therapy management	1.81	0.68	0.68	0.68	0.68	0.09	2.58	2.58	2.58	2.58	XXX
77432		A	Stereotactic radiation trmt	7.92	2.17	2.72	2.17	2.72	0.41	10.50	11.05	10.50	11.05	XXX
77470		A	Special radiation treatment	2.09	1.76	9.31	NA	NA	0.70	4.55	12.10	NA	NA	XXX
77470	26	A	Special radiation treatment	2.09	0.57	0.65	0.57	0.65	0.11	2.77	2.85	2.77	2.85	XXX
77470	TC	A	Special radiation treatment	0.00	1.19	8.66	NA	NA	0.59	1.78	9.25	NA	NA	XXX
77499		C	Radiation therapy management	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77499	26	C	Radiation therapy management	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77499	TC	C	Radiation therapy management	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77520		C	Proton trmt, simple w/o comp	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77522		C	Proton trmt, simple w/comp	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77523		C	Proton trmt, Intermediate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77525		C	Proton treatment, complex	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77600		R	Hyperthermia treatment	1.56	9.32	4.99	NA	NA	0.24	11.12	6.79	NA	NA	XXX
77600	26	R	Hyperthermia treatment	1.56	0.35	0.46	0.35	0.46	0.08	1.99	2.10	1.99	2.10	XXX
77600	TC	R	Hyperthermia treatment	0.00	8.97	4.53	NA	NA	0.16	9.13	4.69	NA	NA	XXX
77605		R	Hyperthermia treatment	2.09	16.90	7.77	NA	NA	0.38	19.37	10.24	NA	NA	XXX
77605	26	R	Hyperthermia treatment	2.09	0.53	0.63	0.53	0.63	0.16	2.78	2.88	2.78	2.88	XXX
77605	TC	R	Hyperthermia treatment	0.00	16.36	7.14	NA	NA	0.22	16.58	7.36	NA	NA	XXX
77610		R	Hyperthermia treatment	1.56	16.54	6.81	NA	NA	0.24	18.34	8.61	NA	NA	XXX
77610	26	R	Hyperthermia treatment	1.56	0.43	0.49	0.43	0.49	0.08	2.07	2.13	2.07	2.13	XXX
77610	TC	R	Hyperthermia treatment	0.00	16.12	6.32	NA	NA	0.16	16.28	6.48	NA	NA	XXX
77615		R	Hyperthermia treatment	2.09	24.51	9.67	NA	NA	0.33	26.93	12.09	NA	NA	XXX
77615	26	R	Hyperthermia treatment	2.09	0.55	0.63	0.55	0.63	0.11	2.75	2.83	2.75	2.83	XXX
77615	TC	R	Hyperthermia treatment	0.00	23.95	9.03	NA	NA	0.22	24.17	9.25	NA	NA	XXX
77620		R	Hyperthermia treatment	1.56	9.58	5.07	NA	NA	0.36	11.50	6.99	NA	NA	XXX
77620	26	R	Hyperthermia treatment	1.56	0.41	0.49	0.41	0.49	0.20	2.17	2.25	2.17	2.25	XXX
77620	TC	R	Hyperthermia treatment	0.00	9.18	4.58	NA	NA	0.16	9.34	4.74	NA	NA	XXX
77750		A	Infuse radioactive materials	4.90	4.19	3.22	4.19	3.22	0.32	9.41	8.44	9.41	8.44	090
77750	26	A	Infuse radioactive materials	4.90	1.35	1.52	1.35	1.52	0.25	6.50	6.67	6.50	6.67	090
77750	TC	A	Infuse radioactive materials	0.00	2.84	1.71	2.84	1.71	0.07	2.91	1.78	2.91	1.78	090
77761		A	Apply intrcav radiat simple	3.80	5.59	4.09	5.59	4.09	0.33	9.72	8.22	9.72	8.22	090
77761	26	A	Apply intrcav radiat simple	3.80	1.05	1.08	1.05	1.08	0.19	5.04	5.07	5.04	5.07	090

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
77761	TC	A	Apply intrcav radiat simple	0.00	4.54	3.01	4.54	3.01	0.14	4.68	3.15	4.68	3.15	090
77762		A	Apply intrcav radiat interm	5.71	6.58	5.73	6.58	5.73	0.48	12.77	11.92	12.77	11.92	090
77762	26	A	Apply intrcav radiat interm	5.71	1.56	1.76	1.56	1.76	0.29	7.56	7.76	7.56	7.76	090
77762	TC	A	Apply intrcav radiat interm	0.00	5.03	3.97	5.03	3.97	0.19	5.22	4.16	5.22	4.16	090
77763		A	Apply intrcav radiat compl	8.56	8.87	7.64	8.87	7.64	0.66	18.09	16.86	18.09	16.86	090
77763	26	A	Apply intrcav radiat compl	8.56	2.33	2.64	2.33	2.64	0.43	11.32	11.63	11.32	11.63	090
77763	TC	A	Apply intrcav radiat compl	0.00	6.54	5.00	6.54	5.00	0.23	6.77	5.23	6.77	5.23	090
77776		A	Apply interstit radiat simpl	4.65	6.66	4.01	6.66	4.01	0.57	11.88	9.23	11.88	9.23	090
77776	26	A	Apply interstit radiat simpl	4.65	1.54	1.10	1.54	1.10	0.44	6.63	6.19	6.63	6.19	090
77776	TC	A	Apply interstit radiat simpl	0.00	5.12	2.92	5.12	2.92	0.13	5.25	3.05	5.25	3.05	090
77777		A	Apply interstit radiat inter	7.47	6.93	6.68	6.93	6.68	0.61	15.01	14.76	15.01	14.76	090
77777	26	A	Apply interstit radiat inter	7.47	2.18	2.32	2.18	2.32	0.39	10.04	10.18	10.04	10.18	090
77778		A	Apply interstit radiat compl	11.17	9.61	8.92	9.61	8.92	0.84	21.62	20.93	21.62	20.93	090
77778	26	A	Apply interstit radiat compl	11.17	3.08	3.45	3.08	3.45	0.57	14.82	15.19	14.82	15.19	090
77778	TC	A	Apply interstit radiat compl	0.00	6.54	5.48	6.54	5.48	0.27	6.81	5.75	6.81	5.75	090
77781		A	High intensity brachytherapy	1.21	4.23	16.68	NA	NA	1.14	6.58	19.03	NA	NA	XXX
77781	26	A	High intensity brachytherapy	1.21	0.33	0.48	0.33	0.48	0.08	1.62	1.77	1.62	1.77	XXX
77781	TC	A	High intensity brachytherapy	0.00	3.90	16.20	NA	NA	1.06	4.96	17.26	NA	NA	XXX
77782		A	High intensity brachytherapy	2.04	12.03	18.83	NA	NA	1.19	15.26	22.06	NA	NA	XXX
77782	26	A	High intensity brachytherapy	2.04	0.55	0.74	0.55	0.74	0.13	2.72	2.91	2.72	2.91	XXX
77782	TC	A	High intensity brachytherapy	0.00	11.48	18.10	NA	NA	1.06	12.54	19.16	NA	NA	XXX
77783		A	High intensity brachytherapy	3.27	23.55	22.01	NA	NA	1.25	28.07	26.53	NA	NA	XXX
77783	26	A	High intensity brachytherapy	3.27	0.89	1.12	0.89	1.12	0.19	4.35	4.58	4.35	4.58	XXX
77783	TC	A	High intensity brachytherapy	0.00	22.67	20.69	NA	NA	1.06	23.73	21.95	NA	NA	XXX
77784		A	High intensity brachytherapy	5.15	44.52	27.71	NA	NA	1.35	51.02	34.21	NA	NA	XXX
77784	26	A	High intensity brachytherapy	5.15	1.40	1.69	1.40	1.69	0.29	6.84	7.13	6.84	7.13	XXX
77784	TC	A	High intensity brachytherapy	0.00	43.12	26.01	NA	NA	1.06	44.18	27.07	NA	NA	XXX
77789		A	Apply surface radiation	1.12	1.95	1.10	1.95	1.10	0.08	3.15	2.30	3.15	2.30	000
77789	26	A	Apply surface radiation	1.12	0.35	0.37	0.35	0.37	0.06	1.53	1.55	1.53	1.55	000
77789	TC	A	Apply surface radiation	0.00	1.60	0.74	1.60	0.74	0.02	1.62	0.76	1.62	0.76	000
77790		A	Radiation handling	1.05	1.16	0.92	NA	NA	0.07	2.28	2.04	NA	NA	XXX
77790	26	A	Radiation handling	1.05	0.29	0.33	0.29	0.33	0.05	1.39	1.43	1.39	1.43	XXX
77790	TC	A	Radiation handling	0.00	0.87	0.59	NA	NA	0.02	0.89	0.61	NA	NA	XXX
77799		C	Radium/radioisotope therapy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77799	26	C	Radium/radioisotope therapy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
77799	TC	C	Radium/radioisotope therapy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78000		A	Thyroid, single uptake	0.19	1.85	1.24	NA	NA	0.07	2.11	1.50	NA	NA	XXX
78000	26	A	Thyroid, single uptake	0.19	0.06	0.06	0.06	0.06	0.01	0.26	0.26	0.26	0.26	XXX
78000	TC	A	Thyroid, single uptake	0.00	1.79	1.18	NA	NA	0.06	1.85	1.24	NA	NA	XXX
78001		A	Thyroid, multiple uptakes	0.26	2.27	1.62	NA	NA	0.08	2.61	1.96	NA	NA	XXX
78001	26	A	Thyroid, multiple uptakes	0.26	0.08	0.09	0.08	0.09	0.01	0.35	0.36	0.35	0.36	XXX
78001	TC	A	Thyroid, multiple uptakes	0.00	2.19	1.53	NA	NA	0.07	2.26	1.60	NA	NA	XXX
78003		A	Thyroid suppress/stimul	0.33	1.89	1.28	NA	NA	0.07	2.29	1.68	NA	NA	XXX
78003	26	A	Thyroid suppress/stimul	0.33	0.10	0.11	0.10	0.11	0.01	0.44	0.45	0.44	0.45	XXX
78003	TC	A	Thyroid suppress/stimul	0.00	1.78	1.17	NA	NA	0.06	1.84	1.23	NA	NA	XXX
78006		A	Thyroid imaging with uptake	0.49	6.24	3.47	NA	NA	0.15	6.88	4.11	NA	NA	XXX
78006	26	A	Thyroid imaging with uptake	0.49	0.15	0.16	0.15	0.16	0.02	0.66	0.67	0.66	0.67	XXX
78006	TC	A	Thyroid imaging with uptake	0.00	6.08	3.31	NA	NA	0.13	6.21	3.44	NA	NA	XXX
78007		A	Thyroid image, mult uptakes	0.50	3.02	2.81	NA	NA	0.16	3.68	3.47	NA	NA	XXX
78007	26	A	Thyroid image, mult uptakes	0.50	0.16	0.17	0.16	0.17	0.02	0.68	0.69	0.68	0.69	XXX
78007	TC	A	Thyroid image, mult uptakes	0.00	2.86	2.64	NA	NA	0.14	3.00	2.78	NA	NA	XXX
78010		A	Thyroid imaging	0.39	4.20	2.51	NA	NA	0.13	4.72	3.03	NA	NA	XXX
78010	26	A	Thyroid imaging	0.39	0.12	0.13	0.12	0.13	0.02	0.53	0.54	0.53	0.54	XXX
78010	TC	A	Thyroid imaging	0.00	4.08	2.39	NA	NA	0.11	4.19	2.50	NA	NA	XXX
78011		A	Thyroid imaging with flow	0.45	4.55	3.06	NA	NA	0.15	5.15	3.66	NA	NA	XXX
78011	28	A	Thyroid imaging with flow	0.45	0.14	0.15	0.14	0.15	0.02	0.61	0.62	0.61	0.62	XXX

78011	TC	A	Thyroid imaging with flow	0.00	4.41	2.91	NA	NA	0.13	4.54	3.04	NA	NA	XXX
78015		A	Thyroid met imaging	0.67	5.43	3.46	NA	NA	0.17	6.27	4.30	NA	NA	XXX
78015	26	A	Thyroid met imaging	0.67	0.21	0.23	0.21	0.23	0.03	0.91	0.93	0.91	0.93	XXX
78015	TC	A	Thyroid met imaging	0.00	5.22	3.23	NA	NA	0.14	5.36	3.37	NA	NA	XXX
78016		A	Thyroid met imaging/studies	0.82	8.63	4.98	NA	NA	0.21	9.66	6.01	NA	NA	XXX
78016	26	A	Thyroid met imaging/studies	0.82	0.26	0.28	0.26	0.28	0.03	1.11	1.13	1.11	1.13	XXX
78016	TC	A	Thyroid met imaging/studies	0.00	8.37	4.70	NA	NA	0.18	8.55	4.88	NA	NA	XXX
78018		A	Thyroid met imaging, body	0.86	7.96	6.28	NA	NA	0.33	9.15	7.47	NA	NA	XXX
78018	26	A	Thyroid met imaging, body	0.86	0.27	0.29	0.27	0.29	0.04	1.17	1.19	1.17	1.19	XXX
78018	TC	A	Thyroid met imaging, body	0.00	7.69	5.99	NA	NA	0.29	7.98	6.28	NA	NA	XXX
78020		A	Thyroid met uptake	0.60	1.79	1.59	1.79	1.59	0.16	2.55	2.35	2.55	2.35	ZZZ
78020	26	A	Thyroid met uptake	0.60	0.18	0.20	0.18	0.20	0.02	0.80	0.82	0.80	0.82	ZZZ
78020	TC	A	Thyroid met uptake	0.00	1.60	1.38	1.60	1.38	0.14	1.74	1.52	1.74	1.52	ZZZ
78070		A	Parathyroid nuclear imaging	0.82	3.43	4.27	NA	NA	0.15	4.40	5.24	NA	NA	XXX
78070	26	A	Parathyroid nuclear imaging	0.82	0.26	0.28	0.26	0.28	0.04	1.12	1.14	1.12	1.14	XXX
78070	TC	A	Parathyroid nuclear imaging	0.00	3.17	4.00	NA	NA	0.11	3.28	4.11	NA	NA	XXX
78075		A	Adrenal nuclear imaging	0.74	11.67	7.18	NA	NA	0.32	12.73	8.24	NA	NA	XXX
78075	26	A	Adrenal nuclear imaging	0.74	0.23	0.25	0.23	0.25	0.03	1.00	1.02	1.00	1.02	XXX
78075	TC	A	Adrenal nuclear imaging	0.00	11.44	6.93	NA	NA	0.29	11.73	7.22	NA	NA	XXX
78099		C	Endocrine nuclear procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78099	26	C	Endocrine nuclear procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78099	TC	C	Endocrine nuclear procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78102		A	Bone marrow imaging, ltd	0.55	4.17	2.72	NA	NA	0.14	4.86	3.41	NA	NA	XXX
78102	26	A	Bone marrow imaging, ltd	0.55	0.17	0.19	0.17	0.19	0.02	0.74	0.76	0.74	0.76	XXX
78102	TC	A	Bone marrow imaging, ltd	0.00	4.00	2.53	NA	NA	0.12	4.12	2.65	NA	NA	XXX
78103		A	Bone marrow imaging, mult	0.75	5.43	3.93	NA	NA	0.20	6.38	4.88	NA	NA	XXX
78103	26	A	Bone marrow imaging, mult	0.75	0.23	0.25	0.23	0.25	0.03	1.01	1.03	1.01	1.03	XXX
78103	TC	A	Bone marrow imaging, mult	0.00	5.20	3.68	NA	NA	0.17	5.37	3.85	NA	NA	XXX
78104		A	Bone marrow imaging, body	0.80	6.30	4.83	NA	NA	0.25	7.35	5.88	NA	NA	XXX
78104	26	A	Bone marrow imaging, body	0.80	0.27	0.27	0.27	0.27	0.03	1.10	1.10	1.10	1.10	XXX
78104	TC	A	Bone marrow imaging, body	0.00	6.02	4.56	NA	NA	0.22	6.24	4.78	NA	NA	XXX
78110		A	Plasma volume, single	0.19	2.16	1.31	NA	NA	0.07	2.42	1.57	NA	NA	XXX
78110	26	A	Plasma volume, single	0.19	0.06	0.07	0.06	0.07	0.01	0.26	0.27	0.26	0.27	XXX
78110	TC	A	Plasma volume, single	0.00	2.10	1.24	NA	NA	0.06	2.16	1.30	NA	NA	XXX
78111		A	Plasma volume, multiple	0.22	2.16	2.53	NA	NA	0.15	2.53	2.90	NA	NA	XXX
78111	26	A	Plasma volume, multiple	0.22	0.07	0.08	0.07	0.08	0.01	0.30	0.31	0.30	0.31	XXX
78111	TC	A	Plasma volume, multiple	0.00	2.09	2.45	NA	NA	0.14	2.23	2.59	NA	NA	XXX
78120		A	Red cell mass, single	0.23	2.09	1.88	NA	NA	0.12	2.44	2.23	NA	NA	XXX
78120	26	A	Red cell mass, single	0.23	0.07	0.08	0.07	0.08	0.01	0.31	0.32	0.31	0.32	XXX
78120	TC	A	Red cell mass, single	0.00	2.02	1.80	NA	NA	0.11	2.13	1.91	NA	NA	XXX
78121		A	Red cell mass, multiple	0.32	2.19	2.81	NA	NA	0.15	2.66	3.28	NA	NA	XXX
78121	26	A	Red cell mass, multiple	0.32	0.10	0.11	0.10	0.11	0.01	0.43	0.44	0.43	0.44	XXX
78121	TC	A	Red cell mass, multiple	0.00	2.10	2.71	NA	NA	0.14	2.24	2.85	NA	NA	XXX
78122		A	Blood volume	0.45	2.25	4.13	NA	NA	0.26	2.96	4.84	NA	NA	XXX
78122	26	A	Blood volume	0.45	0.14	0.16	0.14	0.16	0.02	0.61	0.63	0.61	0.63	XXX
78122	TC	A	Blood volume	0.00	2.11	3.98	NA	NA	0.24	2.35	4.22	NA	NA	XXX
78130		A	Red cell survival study	0.61	3.55	3.18	NA	NA	0.17	4.33	3.96	NA	NA	XXX
78130	26	A	Red cell survival study	0.61	0.20	0.21	0.20	0.21	0.03	0.84	0.85	0.84	0.85	XXX
78130	TC	A	Red cell survival study	0.00	3.35	2.98	NA	NA	0.14	3.49	3.12	NA	NA	XXX
78135		A	Red cell survival kinetics	0.64	8.59	5.97	NA	NA	0.28	9.51	6.89	NA	NA	XXX
78135	26	A	Red cell survival kinetics	0.64	0.20	0.22	0.20	0.22	0.03	0.87	0.89	0.87	0.89	XXX
78135	TC	A	Red cell survival kinetics	0.00	8.39	5.75	NA	NA	0.25	8.64	6.00	NA	NA	XXX
78140		A	Red cell sequestration	0.61	2.87	3.82	NA	NA	0.24	3.72	4.67	NA	NA	XXX
78140	26	A	Red cell sequestration	0.61	0.19	0.20	0.19	0.20	0.03	0.83	0.84	0.83	0.84	XXX
78140	TC	A	Red cell sequestration	0.00	2.68	3.62	NA	NA	0.21	2.89	3.83	NA	NA	XXX
78185		A	Spleen imaging	0.40	5.22	3.18	NA	NA	0.15	5.77	3.73	NA	NA	XXX
78185	26	A	Spleen imaging	0.40	0.12	0.14	0.12	0.14	0.02	0.54	0.56	0.54	0.56	XXX
78185	TC	A	Spleen imaging	0.00	5.10	3.05	NA	NA	0.13	5.23	3.18	NA	NA	XXX
78190		A	Platelet survival, kinetics	1.09	9.05	6.84	NA	NA	0.38	10.52	8.31	NA	NA	XXX
78190	26	A	Platelet survival, kinetics	1.09	0.34	0.38	0.34	0.38	0.08	1.51	1.55	1.51	1.55	XXX
78190	TC	A	Platelet survival, kinetics	0.00	8.71	6.46	NA	NA	0.30	9.01	6.76	NA	NA	XXX
78191		A	Platelet survival	0.61	3.43	6.51	NA	NA	0.40	4.44	7.52	NA	NA	XXX
78191	26	A	Platelet survival	0.61	0.19	0.20	0.19	0.20	0.03	0.83	0.84	0.83	0.84	XXX
78191	TC	A	Platelet survival	0.00	3.24	6.32	NA	NA	0.37	3.61	6.69	NA	NA	XXX
78195		A	Lymph system imaging	1.20	8.66	5.53	NA	NA	0.28	10.14	7.01	NA	NA	XXX
78195	26	A	Lymph system imaging	1.20	0.37	0.40	0.37	0.40	0.06	1.63	1.66	1.63	1.66	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
78195	TC	A	Lymph system imaging	0.00	8.29	5.13	NA	NA	0.22	8.51	5.35	NA	NA	XXX
78199		C	Blood/lymph nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78199	26	C	Blood/lymph nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78199	TC	C	Blood/lymph nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78201		A	Liver imaging	0.44	4.75	3.07	NA	NA	0.15	5.34	3.66	NA	NA	XXX
78201	26	A	Liver imaging	0.44	0.13	0.15	0.13	0.15	0.02	0.59	0.61	0.59	0.61	XXX
78201	TC	A	Liver imaging	0.00	4.61	2.92	NA	NA	0.13	4.74	3.05	NA	NA	XXX
78202		A	Liver imaging with flow	0.51	5.34	3.62	NA	NA	0.16	6.01	4.29	NA	NA	XXX
78202	26	A	Liver imaging with flow	0.51	0.16	0.17	0.16	0.17	0.02	0.69	0.70	0.69	0.70	XXX
78202	TC	A	Liver imaging with flow	0.00	5.19	3.46	NA	NA	0.14	5.33	3.60	NA	NA	XXX
78205		A	Liver imaging (3D)	0.71	5.26	5.93	NA	NA	0.34	6.31	6.98	NA	NA	XXX
78205	26	A	Liver imaging (3D)	0.71	0.22	0.24	0.22	0.24	0.03	0.96	0.98	0.96	0.98	XXX
78205	TC	A	Liver imaging (3D)	0.00	5.04	5.69	NA	NA	0.31	5.35	6.00	NA	NA	XXX
78206		A	Liver image (3d) with flow	0.96	14.57	8.32	NA	NA	0.15	15.68	9.43	NA	NA	XXX
78206	26	A	Liver image (3d) with flow	0.96	0.30	0.32	0.30	0.32	0.04	1.30	1.32	1.30	1.32	XXX
78206	TC	A	Liver image (3d) with flow	0.00	14.26	8.00	NA	NA	0.11	14.37	8.11	NA	NA	XXX
78215		A	Liver and spleen imaging	0.49	4.81	3.53	NA	NA	0.16	5.46	4.18	NA	NA	XXX
78215	26	A	Liver and spleen imaging	0.49	0.15	0.16	0.15	0.16	0.02	0.66	0.67	0.66	0.67	XXX
78215	TC	A	Liver and spleen imaging	0.00	4.66	3.37	NA	NA	0.14	4.80	3.51	NA	NA	XXX
78216		A	Liver & spleen image/flow	0.57	2.82	3.46	NA	NA	0.20	3.59	4.23	NA	NA	XXX
78216	26	A	Liver & spleen image/flow	0.57	0.18	0.19	0.18	0.19	0.02	0.77	0.78	0.77	0.78	XXX
78216	TC	A	Liver & spleen image/flow	0.00	2.64	3.27	NA	NA	0.18	2.82	3.45	NA	NA	XXX
78220		A	Liver function study	0.49	3.04	3.67	NA	NA	0.21	3.74	4.37	NA	NA	XXX
78220	26	A	Liver function study	0.49	0.15	0.16	0.15	0.16	0.02	0.66	0.67	0.66	0.67	XXX
78220	TC	A	Liver function study	0.00	2.89	3.51	NA	NA	0.19	3.08	3.70	NA	NA	XXX
78223		A	Hepatobiliary imaging	0.84	8.49	5.08	NA	NA	0.23	9.56	6.15	NA	NA	XXX
78223	26	A	Hepatobiliary imaging	0.84	0.26	0.28	0.26	0.28	0.04	1.14	1.16	1.14	1.16	XXX
78223	TC	A	Hepatobiliary imaging	0.00	8.23	4.80	NA	NA	0.19	8.42	4.99	NA	NA	XXX
78230		A	Salivary gland imaging	0.45	4.16	2.79	NA	NA	0.15	4.76	3.39	NA	NA	XXX
78230	26	A	Salivary gland imaging	0.45	0.14	0.15	0.14	0.15	0.02	0.61	0.62	0.61	0.62	XXX
78230	TC	A	Salivary gland imaging	0.00	4.02	2.64	NA	NA	0.13	4.15	2.77	NA	NA	XXX
78231		A	Serial salivary imaging	0.52	2.81	3.22	NA	NA	0.19	3.52	3.93	NA	NA	XXX
78231	26	A	Serial salivary imaging	0.52	0.16	0.18	0.16	0.18	0.02	0.70	0.72	0.70	0.72	XXX
78231	TC	A	Serial salivary imaging	0.00	2.64	3.04	NA	NA	0.17	2.81	3.21	NA	NA	XXX
78232		A	Salivary gland function exam	0.47	2.78	3.47	NA	NA	0.20	3.45	4.14	NA	NA	XXX
78232	26	A	Salivary gland function exam	0.47	0.15	0.16	0.15	0.16	0.02	0.64	0.65	0.64	0.65	XXX
78232	TC	A	Salivary gland function exam	0.00	2.64	3.32	NA	NA	0.18	2.82	3.50	NA	NA	XXX
78258		A	Esophageal motility study	0.74	5.83	3.81	NA	NA	0.17	6.74	4.72	NA	NA	XXX
78258	26	A	Esophageal motility study	0.74	0.27	0.26	0.27	0.26	0.03	1.04	1.03	1.04	1.03	XXX
78258	TC	A	Esophageal motility study	0.00	5.56	3.55	NA	NA	0.14	5.70	3.69	NA	NA	XXX
78261		A	Gastric mucosa imaging	0.69	6.07	4.77	NA	NA	0.25	7.01	5.71	NA	NA	XXX
78261	26	A	Gastric mucosa imaging	0.69	0.22	0.24	0.22	0.24	0.03	0.94	0.96	0.94	0.96	XXX
78261	TC	A	Gastric mucosa imaging	0.00	5.85	4.54	NA	NA	0.22	6.07	4.76	NA	NA	XXX
78262		A	Gastroesophageal reflux exam	0.68	5.94	4.85	NA	NA	0.25	6.87	5.78	NA	NA	XXX
78262	26	A	Gastroesophageal reflux exam	0.68	0.20	0.22	0.20	0.22	0.03	0.91	0.93	0.91	0.93	XXX
78262	TC	A	Gastroesophageal reflux exam	0.00	5.74	4.62	NA	NA	0.22	5.96	4.84	NA	NA	XXX
78264		A	Gastric emptying study	0.78	7.16	5.08	NA	NA	0.25	8.19	6.11	NA	NA	XXX
78264	26	A	Gastric emptying study	0.78	0.25	0.26	0.25	0.26	0.03	1.06	1.07	1.06	1.07	XXX
78264	TC	A	Gastric emptying study	0.00	6.91	4.83	NA	NA	0.22	7.13	5.05	NA	NA	XXX
78270		A	Vit B-12 absorption exam	0.20	1.94	1.70	NA	NA	0.11	2.25	2.01	NA	NA	XXX
78270	26	A	Vit B-12 absorption exam	0.20	0.06	0.07	0.06	0.07	0.01	0.27	0.28	0.27	0.28	XXX
78270	TC	A	Vit B-12 absorption exam	0.00	1.88	1.63	NA	NA	0.10	1.98	1.73	NA	NA	XXX
78271		A	Vit b-12 absrp exam, int fac	0.20	1.90	1.76	NA	NA	0.11	2.21	2.07	NA	NA	XXX
78271	26	A	Vit b-12 absrp exam, int fac	0.20	0.05	0.07	0.05	0.07	0.01	0.26	0.28	0.26	0.28	XXX
78271	TC	A	Vit b-12 absrp exam, int fac	0.00	1.85	1.69	NA	NA	0.10	1.95	1.79	NA	NA	XXX
78272		A	Vit B-12 absorp, combined	0.27	2.02	2.31	NA	NA	0.14	2.43	2.72	NA	NA	XXX

78272	26	A	Vit B-12 absorp, combined	0.27	0.07	0.09	0.07	0.09	0.01	0.35	0.37	0.35	0.37	XXX
78272	TC	A	Vit B-12 absorp, combined	0.00	1.95	2.23	NA	NA	0.13	2.08	2.36	NA	NA	XXX
78278		A	Acute GI blood loss imaging	0.99	8.57	6.04	NA	NA	0.29	9.85	7.32	NA	NA	XXX
78278	26	A	Acute GI blood loss imaging	0.99	0.31	0.33	0.31	0.33	0.04	1.34	1.36	1.34	1.36	XXX
78278	TC	A	Acute GI blood loss imaging	0.00	8.26	5.72	NA	NA	0.25	8.51	5.97	NA	NA	XXX
78282		C	GI protein loss exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78282	26	A	GI protein loss exam	0.38	0.12	0.13	0.12	0.13	0.02	0.52	0.53	0.52	0.53	XXX
78282	TC	C	GI protein loss exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78290		A	Meckells divert exam	0.68	8.46	4.58	NA	NA	0.19	9.33	5.45	NA	NA	XXX
78290	26	A	Meckells divert exam	0.68	0.21	0.23	0.21	0.23	0.03	0.92	0.94	0.92	0.94	XXX
78290	TC	A	Meckells divert exam	0.00	8.25	4.35	NA	NA	0.16	8.41	4.51	NA	NA	XXX
78291		A	Leveen/shunt patency exam	0.88	6.17	4.06	NA	NA	0.20	7.25	5.14	NA	NA	XXX
78291	26	A	Leveen/shunt patency exam	0.88	0.27	0.29	0.27	0.29	0.04	1.19	1.21	1.19	1.21	XXX
78291	TC	A	Leveen/shunt patency exam	0.00	5.90	3.77	NA	NA	0.16	6.06	3.93	NA	NA	XXX
78299		C	GI nuclear procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78299	26	C	GI nuclear procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78299	TC	C	GI nuclear procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78300		A	Bone imaging, limited area	0.62	4.20	3.07	NA	NA	0.17	4.99	3.86	NA	NA	XXX
78300	26	A	Bone imaging, limited area	0.62	0.19	0.21	0.19	0.21	0.03	0.84	0.86	0.84	0.86	XXX
78300	TC	A	Bone imaging, limited area	0.00	4.01	2.86	NA	NA	0.14	4.15	3.00	NA	NA	XXX
78305		A	Bone imaging, multiple areas	0.83	5.46	4.32	NA	NA	0.23	6.52	5.38	NA	NA	XXX
78305	26	A	Bone imaging, multiple areas	0.83	0.26	0.28	0.26	0.28	0.04	1.13	1.15	1.13	1.15	XXX
78305	TC	A	Bone imaging, multiple areas	0.00	5.20	4.05	NA	NA	0.19	5.39	4.24	NA	NA	XXX
78306		A	Bone imaging, whole body	0.86	6.05	4.93	NA	NA	0.26	7.17	6.05	NA	NA	XXX
78306	26	A	Bone imaging, whole body	0.86	0.27	0.29	0.27	0.29	0.04	1.17	1.19	1.17	1.19	XXX
78306	TC	A	Bone imaging, whole body	0.00	5.78	4.65	NA	NA	0.22	6.00	4.87	NA	NA	XXX
78315		A	Bone imaging, 3 phase	1.02	8.59	5.99	NA	NA	0.29	9.90	7.30	NA	NA	XXX
78315	26	A	Bone imaging, 3 phase	1.02	0.32	0.34	0.32	0.34	0.04	1.38	1.40	1.38	1.40	XXX
78315	TC	A	Bone imaging, 3 phase	0.00	8.27	5.65	NA	NA	0.25	8.52	5.90	NA	NA	XXX
78320		A	Bone imaging (3D)	1.04	5.36	6.04	NA	NA	0.35	6.75	7.43	NA	NA	XXX
78320	26	A	Bone imaging (3D)	1.04	0.33	0.35	0.33	0.35	0.04	1.41	1.43	1.41	1.43	XXX
78320	TC	A	Bone imaging (3D)	0.00	5.03	5.69	NA	NA	0.31	5.34	6.00	NA	NA	XXX
78350		A	Bone mineral, single photon	0.22	0.56	0.76	NA	NA	0.06	0.84	1.04	NA	NA	XXX
78350	26	A	Bone mineral, single photon	0.22	0.06	0.07	0.06	0.07	0.01	0.29	0.30	0.29	0.30	XXX
78350	TC	A	Bone mineral, single photon	0.00	0.49	0.69	NA	NA	0.05	0.54	0.74	NA	NA	XXX
78351		N	Bone mineral, dual photon	0.30	2.80	1.99	0.07	0.11	0.01	3.11	2.30	0.38	0.42	XXX
78399		C	Musculoskeletal nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78399	26	C	Musculoskeletal nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78399	TC	C	Musculoskeletal nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78414		C	Non-imaging heart function	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78414	26	A	Non-imaging heart function	0.45	0.14	0.16	0.14	0.16	0.02	0.61	0.63	0.61	0.63	XXX
78414	TC	C	Non-imaging heart function	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78428		A	Cardiac shunt imaging	0.78	5.36	3.25	NA	NA	0.16	6.30	4.19	NA	NA	XXX
78428	26	A	Cardiac shunt imaging	0.78	0.38	0.31	0.38	0.31	0.03	1.19	1.12	1.19	1.12	XXX
78428	TC	A	Cardiac shunt imaging	0.00	4.98	2.93	NA	NA	0.13	5.11	3.06	NA	NA	XXX
78445		A	Vascular flow imaging	0.49	4.63	2.68	NA	NA	0.13	5.25	3.30	NA	NA	XXX
78445	26	A	Vascular flow imaging	0.49	0.18	0.17	0.18	0.17	0.02	0.69	0.68	0.69	0.68	XXX
78445	TC	A	Vascular flow imaging	0.00	4.45	2.51	NA	NA	0.11	4.56	2.62	NA	NA	XXX
78456		A	Acute venous thrombus image	1.00	10.04	5.75	NA	NA	0.33	11.37	7.08	NA	NA	XXX
78456	26	A	Acute venous thrombus image	1.00	0.50	0.38	0.50	0.38	0.04	1.54	1.42	1.54	1.42	XXX
78456	TC	A	Acute venous thrombus image	0.00	9.54	5.37	NA	NA	0.29	9.83	5.66	NA	NA	XXX
78457		A	Venous thrombosis imaging	0.77	4.73	3.38	NA	NA	0.17	5.67	4.32	NA	NA	XXX
78457	26	A	Venous thrombosis imaging	0.77	0.24	0.26	0.24	0.26	0.03	1.04	1.06	1.04	1.06	XXX
78457	TC	A	Venous thrombosis imaging	0.00	4.49	3.12	NA	NA	0.14	4.63	3.26	NA	NA	XXX
78458		A	Ven thrombosis images, bilat	0.90	4.59	4.40	NA	NA	0.25	5.74	5.55	NA	NA	XXX
78458	26	A	Ven thrombosis images, bilat	0.90	0.28	0.31	0.28	0.31	0.04	1.22	1.25	1.22	1.25	XXX
78458	TC	A	Ven thrombosis images, bilat	0.00	4.31	4.09	NA	NA	0.21	4.52	4.30	NA	NA	XXX
78459		C	Heart muscle imaging (PET)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78459	26	A	Heart muscle imaging (PET)	1.50	0.55	0.57	0.55	0.57	0.05	2.10	2.12	2.10	2.12	XXX
78459	TC	C	Heart muscle imaging (PET)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78460		A	Heart muscle blood, single	0.86	4.68	3.16	NA	NA	0.17	5.71	4.19	NA	NA	XXX
78460	26	A	Heart muscle blood, single	0.86	0.29	0.29	0.29	0.29	0.04	1.19	1.19	1.19	1.19	XXX
78460	TC	A	Heart muscle blood, single	0.00	4.39	2.87	NA	NA	0.13	4.52	3.00	NA	NA	XXX
78461		A	Heart muscle blood, multiple	1.23	4.01	4.87	NA	NA	0.30	5.54	6.40	NA	NA	XXX
78461	26	A	Heart muscle blood, multiple	1.23	0.42	0.43	0.42	0.43	0.05	1.70	1.71	1.70	1.71	XXX
78461	TC	A	Heart muscle blood, multiple	0.00	3.59	4.44	NA	NA	0.25	3.84	4.69	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
78464		A	Heart image (3d), single	1.09	5.91	7.07	NA	NA	0.41	7.41	8.57	NA	NA	XXX
78464	26	A	Heart image (3d), single	1.09	0.49	0.41	0.49	0.41	0.04	1.62	1.54	1.62	1.54	XXX
78464	TC	A	Heart image (3d), single	0.00	5.42	6.66	NA	NA	0.37	5.79	7.03	NA	NA	XXX
78465		A	Heart image (3d), multiple	1.46	11.58	12.12	NA	NA	0.67	13.71	14.25	NA	NA	XXX
78465	26	A	Heart image (3d), multiple	1.46	0.71	0.57	0.71	0.57	0.05	2.22	2.08	2.22	2.08	XXX
78465	TC	A	Heart image (3d), multiple	0.00	10.87	11.56	NA	NA	0.62	11.49	12.18	NA	NA	XXX
78466		A	Heart infarct image	0.69	4.52	3.28	NA	NA	0.17	5.38	4.14	NA	NA	XXX
78466	26	A	Heart infarct image	0.69	0.25	0.24	0.25	0.24	0.03	0.97	0.96	0.97	0.96	XXX
78466	TC	A	Heart infarct image	0.00	4.27	3.03	NA	NA	0.14	4.41	3.17	NA	NA	XXX
78468		A	Heart infarct image (ef)	0.80	6.06	4.46	NA	NA	0.22	7.08	5.48	NA	NA	XXX
78468	26	A	Heart infarct image (ef)	0.80	0.42	0.31	0.42	0.31	0.03	1.25	1.14	1.25	1.14	XXX
78468	TC	A	Heart infarct image (ef)	0.00	5.64	4.16	NA	NA	0.19	5.83	4.35	NA	NA	XXX
78469		A	Heart infarct image (3D)	0.92	6.29	5.72	NA	NA	0.31	7.52	6.95	NA	NA	XXX
78469	26	A	Heart infarct image (3D)	0.92	0.43	0.34	0.43	0.34	0.03	1.38	1.29	1.38	1.29	XXX
78469	TC	A	Heart infarct image (3D)	0.00	5.85	5.38	NA	NA	0.28	6.13	5.66	NA	NA	XXX
78472		A	Gated heart, planar, single	0.98	6.15	5.93	NA	NA	0.34	7.47	7.25	NA	NA	XXX
78472	26	A	Gated heart, planar, single	0.98	0.40	0.36	0.40	0.36	0.04	1.42	1.38	1.42	1.38	XXX
78472	TC	A	Gated heart, planar, single	0.00	5.75	5.57	NA	NA	0.30	6.05	5.87	NA	NA	XXX
78473		A	Gated heart, multiple	1.47	7.79	8.52	NA	NA	0.48	9.74	10.47	NA	NA	XXX
78473	26	A	Gated heart, multiple	1.47	0.62	0.54	0.62	0.54	0.06	2.15	2.07	2.15	2.07	XXX
78473	TC	A	Gated heart, multiple	0.00	7.17	7.99	NA	NA	0.42	7.59	8.41	NA	NA	XXX
78478		A	Heart wall motion add-on	0.50	0.81	1.54	NA	NA	0.12	1.43	2.16	NA	NA	XXX
78478	26	A	Heart wall motion add-on	0.50	0.24	0.23	0.24	0.23	0.02	0.76	0.75	0.76	0.75	XXX
78478	TC	A	Heart wall motion add-on	0.00	0.57	1.31	NA	NA	0.10	0.67	1.41	NA	NA	XXX
78480		A	Heart function add-on	0.30	0.71	1.51	NA	NA	0.12	1.13	1.93	NA	NA	XXX
78480	26	A	Heart function add-on	0.30	0.15	0.20	0.15	0.20	0.02	0.47	0.52	0.47	0.52	XXX
78480	TC	A	Heart function add-on	0.00	0.57	1.31	NA	NA	0.10	0.67	1.41	NA	NA	XXX
78481		A	Heart first pass, single	0.98	5.12	5.47	NA	NA	0.31	6.41	6.76	NA	NA	XXX
78481	26	A	Heart first pass. single	0.98	0.49	0.39	0.49	0.39	0.03	1.50	1.40	1.50	1.40	XXX
78481	TC	A	Heart first pass, single	0.00	4.62	5.07	NA	NA	0.28	4.90	5.35	NA	NA	XXX
78483		A	Heart first pass, multiple	1.47	6.93	8.04	NA	NA	0.46	8.86	9.97	NA	NA	XXX
78483	26	A	Heart first pass, multiple	1.47	0.79	0.60	0.79	0.60	0.05	2.31	2.12	2.31	2.12	XXX
78483	TC	A	Heart first pass, multiple	0.00	6.14	7.44	NA	NA	0.41	6.55	7.85	NA	NA	XXX
78491		C	Heart image (pet), single	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78491	26	A	Heart image (pet), single	1.50	0.62	0.60	0.62	0.60	0.06	2.18	2.16	2.18	2.16	XXX
78491	TC	C	Heart image (pet), single	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78492		C	Heart image (pet), multiple	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78492	26	A	Heart image (pet), multiple	1.87	0.91	0.78	0.91	0.78	0.07	2.85	2.72	2.85	2.72	XXX
78492	TC	C	Heart image (pet), multiple	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78494		A	Heart image, spect	1.19	6.30	7.19	NA	NA	0.35	7.84	8.73	NA	NA	XXX
78494	26	A	Heart image, spect	1.19	0.54	0.45	0.54	0.45	0.05	1.78	1.69	1.78	1.69	XXX
78494	TC	A	Heart image, spect	0.00	5.75	6.74	NA	NA	0.30	6.05	7.04	NA	NA	XXX
78496		A	Heart first pass add-on	0.50	0.93	5.67	0.93	5.67	0.32	1.75	6.49	1.75	6.49	ZZZ
78496	26	A	Heart first pass add-on	0.50	0.25	0.20	0.25	0.20	0.02	0.77	0.72	0.77	0.72	ZZZ
78496	TC	A	Heart first pass add-on	0.00	0.68	5.47	0.68	5.47	0.30	0.98	5.77	0.98	5.77	ZZZ
78499		C	Cardiovascular nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78499	26	C	Cardiovascular nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78499	TC	C	Cardiovascular nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78580		A	Lung perfusion imaging	0.74	5.12	4.04	NA	NA	0.21	6.07	4.99	NA	NA	XXX
78580	26	A	Lung perfusion imaging	0.74	0.24	0.25	0.24	0.25	0.03	1.01	1.02	1.01	1.02	XXX
78580	TC	A	Lung perfusion imaging	0.00	4.88	3.79	NA	NA	0.18	5.06	3.97	NA	NA	XXX
78584		A	Lung V/Q image single breath	0.99	2.93	3.38	NA	NA	0.21	4.13	4.58	NA	NA	XXX
78584	26	A	Lung V/Q image single breath	0.99	0.31	0.33	0.31	0.33	0.04	1.34	1.36	1.34	1.36	XXX
78584	TC	A	Lung V/Q image single breath	0.00	2.62	3.06	NA	NA	0.17	2.79	3.23	NA	NA	XXX
78585		A	Lung V/Q imaging	1.09	8.60	6.65	NA	NA	0.35	10.04	8.09	NA	NA	XXX
78585	26	A	Lung V/Q imaging	1.09	0.34	0.36	0.34	0.36	0.05	1.48	1.50	1.48	1.50	XXX

78585		TC	A	Lung V/Q imaging	0.00	8.26	6.30	NA	NA	0.30	8.56	6.60	NA	NA	XXX
78586			A	Aerosol lung image, single	0.40	4.13	3.07	NA	NA	0.16	4.69	3.63	NA	NA	XXX
78586		26	A	Aerosol lung image, single	0.40	0.12	0.13	0.12	0.13	0.02	0.54	0.55	0.54	0.55	XXX
78586		TC	A	Aerosol lung image, single	0.00	4.01	2.95	NA	NA	0.14	4.15	3.09	NA	NA	XXX
78587			A	Aerosol lung image, multiple	0.49	5.43	3.59	NA	NA	0.16	6.08	4.24	NA	NA	XXX
78587		26	A	Aerosol lung image, multiple	0.49	0.15	0.17	0.15	0.17	0.02	0.66	0.68	0.66	0.68	XXX
78587		TC	A	Aerosol lung image, multiple	0.00	5.27	3.42	NA	NA	0.14	5.41	3.56	NA	NA	XXX
78588			A	Perfusion lung image	1.09	8.63	4.83	NA	NA	0.23	9.95	6.15	NA	NA	XXX
78588		26	A	Perfusion lung image	1.09	0.34	0.36	0.34	0.36	0.05	1.48	1.50	1.48	1.50	XXX
78588		TC	A	Perfusion lung image	0.00	8.29	4.47	NA	NA	0.18	8.47	4.65	NA	NA	XXX
78591			A	Vent image, 1 breath, 1 proj	0.40	4.12	3.27	NA	NA	0.16	4.68	3.83	NA	NA	XXX
78591		26	A	Vent image, 1 breath, 1 proj	0.40	0.12	0.13	0.12	0.13	0.02	0.54	0.55	0.54	0.55	XXX
78591		TC	A	Vent image, 1 breath, 1 proj	0.00	4.00	3.14	NA	NA	0.14	4.14	3.28	NA	NA	XXX
78593			A	Vent image, 1 proj, gas	0.49	4.79	3.91	NA	NA	0.20	5.48	4.60	NA	NA	XXX
78593		26	A	Vent image, 1 proj, gas	0.49	0.15	0.16	0.15	0.16	0.02	0.66	0.67	0.66	0.67	XXX
78593		TC	A	Vent image, 1 proj, gas	0.00	4.64	3.75	NA	NA	0.18	4.82	3.93	NA	NA	XXX
78594			A	Vent image, mult proj, gas	0.53	5.29	5.19	NA	NA	0.27	6.09	5.99	NA	NA	XXX
78594		26	A	Vent image, mult proj, gas	0.53	0.16	0.18	0.16	0.18	0.02	0.71	0.73	0.71	0.73	XXX
78594		TC	A	Vent image, mult proj, gas	0.00	5.13	5.02	NA	NA	0.25	5.38	5.27	NA	NA	XXX
78596			A	Lung differential function	1.27	8.73	7.80	NA	NA	0.42	10.42	9.49	NA	NA	XXX
78596		26	A	Lung differential function	1.27	0.37	0.41	0.37	0.41	0.05	1.69	1.73	1.69	1.73	XXX
78596		TC	A	Lung differential function	0.00	8.36	7.39	NA	NA	0.37	8.73	7.76	NA	NA	XXX
78599			C	Respiratory nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78599		26	C	Respiratory nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78599		TC	C	Respiratory nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78600			A	Brain imaging, ltd static	0.44	7.30	4.10	NA	NA	0.16	7.90	4.70	NA	NA	XXX
78600		26	A	Brain imaging, ltd static	0.44	0.14	0.15	0.14	0.15	0.02	0.60	0.61	0.60	0.61	XXX
78600		TC	A	Brain imaging, ltd static	0.00	7.16	3.95	NA	NA	0.14	7.30	4.09	NA	NA	XXX
78601			A	Brain imaging, ltd w/flow	0.51	5.35	4.02	NA	NA	0.20	6.06	4.73	NA	NA	XXX
78601		26	A	Brain imaging, ltd w/flow	0.51	0.16	0.17	0.16	0.17	0.02	0.69	0.70	0.69	0.70	XXX
78601		TC	A	Brain imaging, ltd w/flow	0.00	5.19	3.85	NA	NA	0.18	5.37	4.03	NA	NA	XXX
78605			A	Brain imaging, complete	0.53	4.75	3.87	NA	NA	0.20	5.48	4.60	NA	NA	XXX
78605		26	A	Brain imaging, complete	0.53	0.17	0.18	0.17	0.18	0.02	0.72	0.73	0.72	0.73	XXX
78605		TC	A	Brain imaging, complete	0.00	4.59	3.70	NA	NA	0.18	4.77	3.88	NA	NA	XXX
78606			A	Brain imaging, compl w/flow	0.64	8.54	5.20	NA	NA	0.24	9.42	6.08	NA	NA	XXX
78606		26	A	Brain imaging, compl w/flow	0.64	0.20	0.21	0.20	0.21	0.03	0.87	0.88	0.87	0.88	XXX
78606		TC	A	Brain imaging, compl w/flow	0.00	8.34	4.99	NA	NA	0.21	8.55	5.20	NA	NA	XXX
78607			A	Brain imaging (3D)	1.23	15.23	9.04	NA	NA	0.40	16.86	10.67	NA	NA	XXX
78607		26	A	Brain imaging (3D)	1.23	0.38	0.42	0.38	0.42	0.05	1.66	1.70	1.66	1.70	XXX
78607		TC	A	Brain imaging (3D)	0.00	14.85	8.63	NA	NA	0.35	15.20	8.98	NA	NA	XXX
78608			C	Brain imaging (PET)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78608		26	A	Brain imaging (PET)	1.50	0.47	0.50	0.47	0.50	0.06	2.03	2.06	2.03	2.06	XXX
78608		TC	C	Brain imaging (PET)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78609			C	Brain imaging (PET)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78609		26	A	Brain imaging (PET)	1.50	0.47	0.50	0.47	0.50	0.06	2.03	2.06	2.03	2.06	XXX
78609		TC	C	Brain imaging (PET)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78610			A	Brain flow imaging only	0.30	4.44	2.38	NA	NA	0.11	4.85	2.79	NA	NA	XXX
78610		26	A	Brain flow imaging only	0.30	0.09	0.11	0.09	0.11	0.01	0.40	0.42	0.40	0.42	XXX
78610		TC	A	Brain flow imaging only	0.00	4.35	2.27	NA	NA	0.10	4.45	2.37	NA	NA	XXX
78615			A	Cerebral vascular flow image	0.42	5.34	4.34	NA	NA	0.23	5.99	4.99	NA	NA	XXX
78615		26	A	Cerebral vascular flow image	0.42	0.13	0.15	0.13	0.15	0.02	0.57	0.59	0.57	0.59	XXX
78615		TC	A	Cerebral vascular flow image	0.00	5.21	4.19	NA	NA	0.21	5.42	4.40	NA	NA	XXX
78630			A	Cerebrospinal fluid scan	0.68	8.61	6.10	NA	NA	0.30	9.59	7.08	NA	NA	XXX
78630		26	A	Cerebrospinal fluid scan	0.68	0.21	0.23	0.21	0.23	0.03	0.92	0.94	0.92	0.94	XXX
78630		TC	A	Cerebrospinal fluid scan	0.00	8.40	5.88	NA	NA	0.27	8.67	6.15	NA	NA	XXX
78635			A	CSF ventriculography	0.61	8.54	4.21	NA	NA	0.16	9.31	4.98	NA	NA	XXX
78635		26	A	CSF ventriculography	0.61	0.19	0.22	0.19	0.22	0.02	0.82	0.85	0.82	0.85	XXX
78635		TC	A	CSF ventriculography	0.00	8.35	3.99	NA	NA	0.14	8.49	4.13	NA	NA	XXX
78645			A	CSF shunt evaluation	0.57	8.43	4.82	NA	NA	0.20	9.20	5.59	NA	NA	XXX
78645		26	A	CSF shunt evaluation	0.57	0.18	0.19	0.18	0.19	0.02	0.77	0.78	0.77	0.78	XXX
78645		TC	A	CSF shunt evaluation	0.00	8.25	4.64	NA	NA	0.18	8.43	4.82	NA	NA	XXX
78647			A	Cerebrospinal fluid scan	0.90	14.31	8.24	NA	NA	0.35	15.56	9.49	NA	NA	XXX
78647		26	A	Cerebrospinal fluid scan	0.90	0.27	0.30	0.27	0.30	0.04	1.21	1.24	1.21	1.24	XXX
78647		TC	A	Cerebrospinal fluid scan	0.00	14.05	7.95	NA	NA	0.31	14.36	8.26	NA	NA	XXX
78650			A	CSF leakage imaging	0.61	8.62	5.79	NA	NA	0.27	9.50	6.67	NA	NA	XXX
78650		26	A	CSF leakage imaging	0.61	0.19	0.21	0.19	0.21	0.03	0.83	0.85	0.83	0.85	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
78650	TC	A	CSF leakage imaging	0.00	8.43	5.59	NA	NA	0.24	8.67	5.83	NA	NA	XXX
78660		A	Nuclear exam of tear flow	0.53	4.24	2.79	NA	NA	0.14	4.91	3.46	NA	NA	XXX
78660	26	A	Nuclear exam of tear flow	0.53	0.17	0.18	0.17	0.18	0.02	0.72	0.73	0.72	0.73	XXX
78660	TC	A	Nuclear exam of tear flow	0.00	4.07	2.61	NA	NA	0.12	4.19	2.73	NA	NA	XXX
78699		C	Nervous system nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78699	26	C	Nervous system nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78699	TC	C	Nervous system nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78700		A	Kidney imaging, static	0.45	4.47	3.52	NA	NA	0.18	5.10	4.15	NA	NA	XXX
78700	26	A	Kidney imaging, static	0.45	0.15	0.15	0.15	0.15	0.02	0.62	0.62	0.62	0.62	XXX
78700	TC	A	Kidney imaging, static	0.00	4.32	3.37	NA	NA	0.16	4.48	3.53	NA	NA	XXX
78701		A	Kidney imaging with flow	0.49	5.36	4.13	NA	NA	0.20	6.05	4.82	NA	NA	XXX
78701	26	A	Kidney imaging with flow	0.49	0.15	0.16	0.15	0.16	0.02	0.66	0.67	0.66	0.67	XXX
78701	TC	A	Kidney imaging with flow	0.00	5.21	3.97	NA	NA	0.18	5.39	4.15	NA	NA	XXX
78704		A	Imaging renogram	0.74	5.42	4.51	NA	NA	0.24	6.40	5.49	NA	NA	XXX
78704	26	A	Imaging renogram	0.74	0.23	0.25	0.23	0.25	0.03	1.00	1.02	1.00	1.02	XXX
78704	TC	A	Imaging renogram	0.00	5.19	4.26	NA	NA	0.21	5.40	4.47	NA	NA	XXX
78707		A	Kidney flow/function image	0.96	5.48	4.96	NA	NA	0.27	6.71	6.19	NA	NA	XXX
78707	26	A	Kidney flow/function image	0.96	0.30	0.32	0.30	0.32	0.04	1.30	1.32	1.30	1.32	XXX
78707	TC	A	Kidney flow/function image	0.00	5.18	4.65	NA	NA	0.23	5.41	4.88	NA	NA	XXX
78708		A	Kidney flow/function image	1.21	3.41	4.51	NA	NA	0.28	4.90	6.00	NA	NA	XXX
78708	26	A	Kidney flow/function image	1.21	0.38	0.40	0.38	0.40	0.05	1.64	1.66	1.64	1.66	XXX
78708	TC	A	Kidney flow/function image	0.00	3.03	4.11	NA	NA	0.23	3.26	4.34	NA	NA	XXX
78709		A	Kidney flow/function image	1.41	8.88	5.93	NA	NA	0.29	10.58	7.63	NA	NA	XXX
78709	26	A	Kidney flow/function image	1.41	0.45	0.47	0.45	0.47	0.06	1.92	1.94	1.92	1.94	XXX
78709	TC	A	Kidney flow/function image	0.00	8.43	5.46	NA	NA	0.23	8.66	5.69	NA	NA	XXX
78710		A	Kidney imaging (3D)	0.66	5.29	5.92	NA	NA	0.34	6.29	6.92	NA	NA	XXX
78710	26	A	Kidney imaging (3D)	0.66	0.21	0.22	0.21	0.22	0.03	0.90	0.91	0.90	0.91	XXX
78710	TC	A	Kidney imaging (3D)	0.00	5.08	5.70	NA	NA	0.31	5.39	6.01	NA	NA	XXX
78715		A	Renal vascular flow exam	0.30	4.82	2.47	NA	NA	0.11	5.23	2.88	NA	NA	XXX
78715	26	A	Renal vascular flow exam	0.30	0.13	0.12	0.13	0.12	0.01	0.44	0.43	0.44	0.43	XXX
78715	TC	A	Renal vascular flow exam	0.00	4.69	2.36	NA	NA	0.10	4.79	2.46	NA	NA	XXX
78725		A	Kidney function study	0.38	2.35	2.02	NA	NA	0.13	2.86	2.53	NA	NA	XXX
78725	26	A	Kidney function study	0.38	0.12	0.13	0.12	0.13	0.02	0.52	0.53	0.52	0.53	XXX
78725	TC	A	Kidney function study	0.00	2.23	1.89	NA	NA	0.11	2.34	2.00	NA	NA	XXX
78730		A	Urinary bladder retention	0.36	1.85	1.65	1.85	1.65	0.10	2.31	2.11	2.31	2.11	XXX
78730	26	A	Urinary bladder retention	0.36	0.14	0.13	0.14	0.13	0.02	0.52	0.51	0.52	0.51	XXX
78730	TC	A	Urinary bladder retention	0.00	1.71	1.52	1.71	1.52	0.08	1.79	1.60	1.79	1.60	XXX
78740		A	Ureteral reflux study	0.57	5.48	3.10	NA	NA	0.15	6.20	3.82	NA	NA	XXX
78740	26	A	Ureteral reflux study	0.57	0.18	0.19	0.18	0.19	0.03	0.78	0.79	0.78	0.79	XXX
78740	TC	A	Ureteral reflux study	0.00	5.30	2.92	NA	NA	0.12	5.42	3.04	NA	NA	XXX
78760		A	Testicular imaging	0.66	4.52	3.31	NA	NA	0.17	5.35	4.14	NA	NA	XXX
78760	26	A	Testicular imaging	0.66	0.22	0.22	0.22	0.22	0.03	0.91	0.91	0.91	0.91	XXX
78760	TC	A	Testicular imaging	0.00	4.30	3.09	NA	NA	0.14	4.44	3.23	NA	NA	XXX
78761		A	Testicular imaging/flow	0.71	4.96	3.82	NA	NA	0.20	5.87	4.73	NA	NA	XXX
78761	26	A	Testicular imaging/flow	0.71	0.23	0.24	0.23	0.24	0.03	0.97	0.98	0.97	0.98	XXX
78761	TC	A	Testicular imaging/flow	0.00	4.72	3.58	NA	NA	0.17	4.89	3.75	NA	NA	XXX
78799		C	Genitourinary nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78799	26	C	Genitourinary nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78799	TC	C	Genitourinary nuclear exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78800		A	Tumor imaging, limited area	0.66	4.29	3.79	NA	NA	0.22	5.17	4.67	NA	NA	XXX
78800	26	A	Tumor imaging, limited area	0.66	0.20	0.22	0.20	0.22	0.04	0.90	0.92	0.90	0.92	XXX
78800	TC	A	Tumor imaging, limited area	0.00	4.09	3.57	NA	NA	0.18	4.27	3.75	NA	NA	XXX
78801		A	Tumor imaging, mult areas	0.79	6.10	4.89	NA	NA	0.27	7.16	5.95	NA	NA	XXX
78801	26	A	Tumor imaging, mult areas	0.79	0.24	0.26	0.24	0.26	0.05	1.08	1.10	1.08	1.10	XXX
78801	TC	A	Tumor imaging, mult areas	0.00	5.86	4.63	NA	NA	0.22	6.08	4.85	NA	NA	XXX
78802		A	Tumor imaging, whole body	0.86	8.17	6.41	NA	NA	0.34	9.37	7.61	NA	NA	XXX

78802		A	Tumor imaging, whole body	0.86	0.27	0.27	0.29	0.04	1.17	1.19	1.17	1.19	XXX
78802	26	A	Tumor imaging, whole body	0.00	7.90	6.12	NA	0.30	8.20	6.42	NA	NA	XXX
78802	TC	A	Tumor imaging, whole body	1.09	15.02	8.95	NA	0.40	16.51	10.44	NA	NA	XXX
78803		A	Tumor imaging (3D)	1.09	0.34	0.37	0.37	0.05	1.48	1.51	1.48	1.51	XXX
78803	26	A	Tumor imaging (3D)	0.00	14.67	8.58	NA	0.35	15.02	8.93	NA	NA	XXX
78803	TC	A	Tumor imaging (3D)	1.07	14.91	12.30	NA	0.34	16.32	13.71	NA	NA	XXX
78804		A	Tumor imaging, whole body	1.07	0.34	0.36	0.36	0.04	1.45	1.47	1.45	1.47	XXX
78804	26	A	Tumor imaging, whole body	0.00	14.58	11.94	NA	0.30	14.88	12.24	NA	NA	XXX
78804	TC	A	Tumor imaging, whole body	0.73	4.20	3.79	NA	0.21	5.14	4.73	NA	NA	XXX
78805		A	Abscess imaging, ltd area	0.73	0.23	0.25	0.25	0.03	0.99	1.01	0.99	1.01	XXX
78805	26	A	Abscess imaging, ltd area	0.00	3.97	3.54	NA	0.18	4.15	3.72	NA	NA	XXX
78805	TC	A	Abscess imaging, ltd area	0.86	8.35	7.13	NA	0.39	9.60	8.38	NA	NA	XXX
78806		A	Abscess imaging, whole body	0.86	0.27	0.29	0.29	0.04	1.17	1.19	1.17	1.19	XXX
78806	26	A	Abscess imaging, whole body	0.00	6.84	6.08	NA	0.35	8.43	7.19	NA	NA	XXX
78806	TC	A	Abscess imaging, whole body	1.09	14.28	8.78	NA	0.39	15.76	10.26	NA	NA	XXX
78807		A	Nuclear localization/abscess	1.09	0.34	0.38	0.38	0.04	1.47	1.51	1.47	1.51	XXX
78807	26	A	Nuclear localization/abscess	0.00	13.94	8.40	NA	0.35	14.29	8.75	NA	NA	XXX
78807	TC	A	Nuclear localization/abscess	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78811		C	Tumor imaging (pet), limited	0.00	0.48	0.52	0.52	0.11	2.13	2.17	2.13	2.17	XXX
78811	26	A	Tumor imaging (pet), limited	1.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78811	TC	C	Tumor imaging (pet), limited	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78812		C	Tumor image (pet)/skul-thigh	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78812	26	A	Tumor image (pet)/skul-thigh	1.93	0.65	0.61	0.65	0.11	2.65	2.69	2.65	2.69	XXX
78812	TC	C	Tumor image (pet)/skul-thigh	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78813		C	Tumor image (pet) full body	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78813	26	A	Tumor image (pet) full body	2.00	0.67	0.62	0.67	0.11	2.73	2.78	2.73	2.78	XXX
78813	TC	C	Tumor image (pet) full body	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78814		C	Tumor image pet/ct, limited	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78814	26	A	Tumor image pet/ct, limited	2.20	0.74	0.68	0.74	0.11	2.99	3.05	2.99	3.05	XXX
78814	TC	C	Tumor image pet/ct, limited	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78815		C	Tumorimage pet/ct skul-thigh	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78815	26	A	Tumorimage pet/ct skul-thigh	2.44	0.82	0.77	0.82	0.11	3.32	3.37	3.32	3.37	XXX
78815	TC	C	Tumorimage pet/ct skul-thigh	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78816		C	Tumor image pet/ct full body	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78816	26	A	Tumor image pet/ct full body	2.50	0.84	0.78	0.84	0.11	3.39	3.45	3.39	3.45	XXX
78816	TC	C	Tumor image pet/ct full body	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78890		B	Nuclear medicine data proc	0.05	1.10	0.39	NA	0.07	1.22	NA	NA	NA	XXX
78890	26	B	Nuclear medicine data proc	0.05	0.02	0.01	0.02	0.01	0.07	0.08	0.07	0.08	XXX
78890	TC	B	Nuclear medicine data proc	0.00	1.08	0.38	NA	0.06	1.14	NA	NA	NA	XXX
78891		B	Nuclear med data proc	0.10	2.22	0.89	NA	0.14	2.46	NA	NA	NA	XXX
78891	26	B	Nuclear med data proc	0.10	0.04	0.02	0.04	0.01	0.15	0.15	0.13	0.15	XXX
78891	TC	B	Nuclear med data proc	0.00	2.18	0.86	NA	0.13	2.31	NA	NA	NA	XXX
78999		C	Nuclear diagnostic exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78999	26	C	Nuclear diagnostic exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
78999	TC	C	Nuclear diagnostic exam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
79005		A	Nuclear rx, oral admin	1.80	1.78	0.53	NA	0.22	3.80	4.88	NA	NA	XXX
79005	26	A	Nuclear rx, oral admin	1.80	0.58	0.58	NA	0.08	2.41	2.46	2.41	2.46	XXX
79005	TC	A	Nuclear rx, oral admin	0.00	1.25	2.28	NA	0.14	1.39	2.42	NA	NA	XXX
79101		A	Nuclear rx, iv admin	1.96	2.10	2.99	NA	0.22	4.28	5.17	NA	NA	XXX
79101	26	A	Nuclear rx, iv admin	1.96	0.68	0.67	0.68	0.08	2.72	2.71	2.72	2.71	XXX
79101	TC	A	Nuclear rx, iv admin	0.00	1.41	2.32	NA	0.14	1.55	2.46	NA	NA	XXX
79200		A	Nuclear rx, intracav admin	1.99	2.18	3.03	NA	0.23	4.40	5.25	NA	NA	XXX
79200	26	A	Nuclear rx, intracav admin	1.99	0.59	0.67	0.59	0.09	2.67	2.75	2.67	2.75	XXX
79200	TC	A	Nuclear rx, intracav admin	0.00	1.60	2.37	NA	0.14	1.74	2.51	NA	NA	XXX
79300		C	Nuclr rx, interstit colloid	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
79300	26	A	Nuclr rx, interstit colloid	1.60	0.54	0.46	0.54	0.13	2.19	2.27	2.19	2.27	XXX
79300	TC	C	Nuclr rx, interstit colloid	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
79403		A	Hematopoietic nuclear tx	2.25	4.58	2.83	NA	0.24	5.32	7.07	NA	NA	XXX
79403	26	A	Hematopoietic nuclear tx	2.25	0.84	0.68	0.84	0.10	3.03	3.19	3.03	3.19	XXX
79403	TC	A	Hematopoietic nuclear tx	0.00	3.74	2.15	NA	0.14	2.29	3.88	NA	NA	XXX
79440		A	Nuclear rx, intra-articular	1.99	2.95	1.77	NA	0.22	3.98	5.16	NA	NA	XXX
79440	26	A	Nuclear rx, intra-articular	1.99	0.69	0.61	0.69	0.08	2.68	2.76	2.68	2.76	XXX
79440	TC	A	Nuclear rx, intra-articular	0.00	2.26	1.16	NA	0.14	1.30	2.40	NA	NA	XXX
79445		C	Nuclear rx, intra-arterial	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
79445	26	A	Nuclear rx, intra-arterial	2.40	0.77	0.81	0.81	0.12	3.29	3.33	3.29	3.33	XXX
79445	TC	C	Nuclear rx, intra-arterial	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
79999		C	Nuclear medicine therapy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
79999	26	C	Nuclear medicine therapy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
79999	TC	C	Nuclear medicine therapy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
80500		A	Lab pathology consultation	0.37	0.20	0.21	0.11	0.15	0.01	0.58	0.59	0.49	0.53	XXX
80502		A	Lab pathology consultation	1.33	0.31	0.48	0.25	0.47	0.04	1.68	1.85	1.62	1.84	XXX
83020	26	A	Hemoglobin electrophoresis	0.37	0.12	0.14	0.12	0.14	0.01	0.50	0.52	0.50	0.52	XXX
83912	26	A	Genetic examination	0.37	0.11	0.12	0.11	0.12	0.01	0.49	0.50	0.49	0.50	XXX
84165	26	A	Protein e-phoresis, serum	0.37	0.12	0.14	0.12	0.14	0.01	0.50	0.52	0.50	0.52	XXX
84166	26	A	Protein e-phoresis/urine/csf	0.37	0.12	0.14	0.12	0.14	0.01	0.50	0.52	0.50	0.52	XXX
84181	26	A	Western blot test	0.37	0.12	0.14	0.12	0.14	0.01	0.50	0.52	0.50	0.52	XXX
84182	26	A	Protein, western blot test	0.37	0.12	0.15	0.12	0.15	0.02	0.51	0.54	0.51	0.54	XXX
85060		A	Blood smear interpretation	0.45	0.14	0.17	0.14	0.17	0.02	0.61	0.64	0.61	0.64	XXX
85097		A	Bone marrow interpretation	0.94	1.30	1.76	0.28	0.38	0.04	2.28	2.74	1.26	1.36	XXX
85390	26	A	Fibrinolysins screen	0.37	0.12	0.13	0.12	0.13	0.01	0.50	0.51	0.50	0.51	XXX
85396		A	Clotting assay, whole blood	0.37	NA	NA	0.05	0.13	0.04	NA	NA	0.46	0.54	XXX
85576	26	A	Blood platelet aggregation	0.37	0.12	0.15	0.12	0.15	0.01	0.50	0.53	0.50	0.53	XXX
86077		A	Physician blood bank service	0.94	0.38	0.39	0.29	0.37	0.03	1.35	1.36	1.26	1.34	XXX
86078		A	Physician blood bank service	0.94	0.38	0.44	0.29	0.37	0.03	1.35	1.41	1.26	1.34	XXX
86079		A	Physician blood bank service	0.94	0.38	0.43	0.30	0.38	0.03	1.35	1.40	1.27	1.35	XXX
86255	26	A	Fluorescent antibody, screen	0.37	0.12	0.14	0.12	0.14	0.01	0.50	0.52	0.50	0.52	XXX
86256	26	A	Fluorescent antibody, titer	0.37	0.12	0.14	0.12	0.14	0.01	0.50	0.52	0.50	0.52	XXX
86320	26	A	Serum immunoelectrophoresis	0.37	0.12	0.14	0.12	0.14	0.01	0.50	0.52	0.50	0.52	XXX
86325	26	A	Other immunoelectrophoresis	0.37	0.11	0.13	0.11	0.13	0.01	0.49	0.51	0.49	0.51	XXX
86327	26	A	Immunoelectrophoresis assay	0.42	0.13	0.17	0.13	0.17	0.02	0.57	0.61	0.57	0.61	XXX
86334	26	A	Immunofix e-phoresis, serum	0.37	0.12	0.14	0.12	0.14	0.01	0.50	0.52	0.50	0.52	XXX
86335	26	A	Immunfix e-phorsis/urine/csf	0.37	0.12	0.14	0.12	0.14	0.01	0.50	0.52	0.50	0.52	XXX
86485		C	Skin test, candida	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
86490		A	Coccidioidomycosis skin test	0.00	0.12	0.25	NA	NA	0.02	0.14	0.27	NA	NA	XXX
86510		A	Histoplasmosis skin test	0.00	0.14	0.28	NA	NA	0.02	0.16	0.30	NA	NA	XXX
86580		A	TB intradermal test	0.00	0.16	0.23	NA	NA	0.02	0.18	0.25	NA	NA	XXX
87164	26	A	Dark field examination	0.37	0.12	0.12	0.12	0.12	0.01	0.50	0.50	0.50	0.50	XXX
87207	26	A	Smear, special stain	0.37	0.11	0.15	0.11	0.15	0.01	0.49	0.53	0.49	0.53	XXX
88104		A	Cytopathology, fluids	0.56	1.16	0.93	NA	NA	0.04	1.76	1.53	NA	NA	XXX
88104	26	A	Cytopathology, fluids	0.56	0.16	0.22	0.16	0.22	0.02	0.74	0.80	0.74	0.80	XXX
88104	TC	A	Cytopathology, fluids	0.00	1.01	0.71	NA	NA	0.02	1.03	0.73	NA	NA	XXX
88106		A	Cytopathology, fluids	0.56	1.52	1.39	NA	NA	0.04	2.12	1.99	NA	NA	XXX
88106	26	A	Cytopathology, fluids	0.56	0.15	0.22	0.15	0.22	0.02	0.73	0.80	0.73	0.80	XXX
88106	TC	A	Cytopathology, fluids	0.00	1.36	1.17	NA	NA	0.02	1.38	1.19	NA	NA	XXX
88107		A	Cytopathology, fluids	0.76	2.02	1.66	NA	NA	0.05	2.83	2.47	NA	NA	XXX
88107	26	A	Cytopathology, fluids	0.76	0.23	0.31	0.23	0.31	0.03	1.02	1.10	1.02	1.10	XXX
88107	TC	A	Cytopathology, fluids	0.00	1.79	1.36	NA	NA	0.02	1.81	1.38	NA	NA	XXX
88108		A	Cytopath, concentrate tech	0.56	1.49	1.28	NA	NA	0.04	2.09	1.88	NA	NA	XXX
88108	26	A	Cytopath, concentrate tech	0.56	0.16	0.22	0.16	0.22	0.02	0.74	0.80	0.74	0.80	XXX
88108	TC	A	Cytopath, concentrate tech	0.00	1.33	1.06	NA	NA	0.02	1.35	1.08	NA	NA	XXX
88112		A	Cytopath, cell enhance tech	1.18	1.53	1.85	NA	NA	0.04	2.75	3.07	NA	NA	XXX
88112	26	A	Cytopath, cell enhance tech	1.18	0.31	0.46	0.31	0.46	0.02	1.51	1.66	1.51	1.66	XXX
88112	TC	A	Cytopath, cell enhance tech	0.00	1.22	1.40	NA	NA	0.02	1.24	1.42	NA	NA	XXX
88125		A	Forensic cytopathology	0.26	0.25	0.27	NA	NA	0.02	0.53	0.55	NA	NA	XXX
88125	26	A	Forensic cytopathology	0.26	0.06	0.10	0.06	0.10	0.01	0.33	0.37	0.33	0.37	XXX
88125	TC	A	Forensic cytopathology	0.00	0.20	0.17	NA	NA	0.01	0.21	0.18	NA	NA	XXX
88141		A	Cytopath, c/v, interpret	0.42	0.38	0.21	0.38	0.21	0.02	0.82	0.65	0.82	0.65	XXX
88160		A	Cytopath smear, other source	0.50	0.91	0.85	NA	NA	0.04	1.45	1.39	NA	NA	XXX
88160	26	A	Cytopath smear, other source	0.50	0.13	0.19	0.13	0.19	0.02	0.65	0.71	0.65	0.71	XXX
88160	TC	A	Cytopath smear, other source	0.00	0.78	0.66	NA	NA	0.02	0.80	0.68	NA	NA	XXX
88161		A	Cytopath smear, other source	0.50	1.13	0.99	NA	NA	0.04	1.67	1.53	NA	NA	XXX
88161	26	A	Cytopath smear, other source	0.50	0.15	0.20	0.15	0.20	0.02	0.67	0.72	0.67	0.72	XXX
88161	TC	A	Cytopath smear, other source	0.00	0.98	0.79	NA	NA	0.02	1.00	0.81	NA	NA	XXX

88162			A	Cytopath smear, other source	0.76	1.18	1.06	NA	NA	0.05	1.99	1.87	NA	NA	XXX
88162	26		A	Cytopath smear, other source	0.76	0.17	0.29	0.17	0.29	0.03	0.96	1.08	0.96	1.08	XXX
88162	TC		A	Cytopath smear, other source	0.00	1.01	0.77	NA	NA	0.02	1.03	0.79	NA	NA	XXX
88172			A	Cytopathology eval of fna	0.60	0.86	0.76	NA	NA	0.04	1.50	1.40	NA	NA	XXX
88172	26		A	Cytopathology eval of fna	0.60	0.18	0.24	0.18	0.24	0.02	0.80	0.86	0.80	0.86	XXX
88172	TC		A	Cytopathology eval of fna	0.00	0.68	0.52	NA	NA	0.02	0.70	0.54	NA	NA	XXX
88173			A	Cytopath eval, fna, report	1.39	2.33	2.18	NA	NA	0.07	3.79	3.64	NA	NA	XXX
88173	26		A	Cytopath eval, fna, report	1.39	0.40	0.54	0.40	0.54	0.05	1.84	1.98	1.84	1.98	XXX
88173	TC		A	Cytopath eval, fna, report	0.00	1.93	1.65	NA	NA	0.02	1.95	1.67	NA	NA	XXX
88182			A	Cell marker study	0.77	1.97	1.97	NA	NA	0.07	2.81	2.81	NA	NA	XXX
88182	26		A	Cell marker study	0.77	0.13	0.28	0.13	0.28	0.03	0.93	1.08	0.93	1.08	XXX
88182	TC		A	Cell marker study	0.00	1.85	1.70	NA	NA	0.04	1.89	1.74	NA	NA	XXX
88184			A	Flowcytometry/tc, 1 marker	0.00	2.51	1.62	NA	NA	0.02	2.53	1.64	NA	NA	XXX
88185			A	Flowcytometry/tc, add-on	0.00	1.52	0.86	NA	NA	0.02	1.54	0.88	NA	NA	ZZZ
88187			A	Flowcytometry/read, 2-8	1.36	0.39	0.44	0.39	0.44	0.01	1.76	1.81	1.76	1.81	XXX
88188			A	Flowcytometry/read, 9-15	1.69	0.44	0.54	0.44	0.54	0.01	2.14	2.24	2.14	2.24	XXX
88189			A	Flowcytometry/read, 16 & >	2.23	0.49	0.69	0.49	0.69	0.01	2.73	2.93	2.73	2.93	XXX
88199			C	Cytopathology procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88199	26		C	Cytopathology procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88199	TC		C	Cytopathology procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88291			A	Cyto/molecular report	0.52	0.28	0.20	0.28	0.20	0.02	0.82	0.74	0.82	0.74	XXX
88299			C	Cytogenetic study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88300			A	Surgical path, gross	0.08	0.60	0.49	NA	NA	0.02	0.70	0.59	NA	NA	XXX
88300	26		A	Surgical path, gross	0.08	0.02	0.03	0.02	0.03	0.01	0.11	0.12	0.11	0.12	XXX
88300	TC		A	Surgical path, gross	0.00	0.57	0.46	NA	NA	0.01	0.58	0.47	NA	NA	XXX
88302			A	Tissue exam by pathologist	0.13	1.30	1.10	NA	NA	0.03	1.46	1.26	NA	NA	XXX
88302	26		A	Tissue exam by pathologist	0.13	0.04	0.06	0.04	0.06	0.01	0.18	0.20	0.18	0.20	XXX
88302	TC		A	Tissue exam by pathologist	0.00	1.27	1.05	NA	NA	0.02	1.29	1.07	NA	NA	XXX
88304			A	Tissue exam by pathologist	0.22	1.57	1.38	NA	NA	0.03	1.82	1.63	NA	NA	XXX
88304	26		A	Tissue exam by pathologist	0.22	0.06	0.08	0.06	0.08	0.01	0.29	0.31	0.29	0.31	XXX
88304	TC		A	Tissue exam by pathologist	0.00	1.50	1.30	NA	NA	0.02	1.52	1.32	NA	NA	XXX
88305			A	Tissue exam by pathologist	0.75	2.20	1.98	NA	NA	0.07	3.02	2.80	NA	NA	XXX
88305	26		A	Tissue exam by pathologist	0.75	0.21	0.30	0.21	0.30	0.03	0.99	1.08	0.99	1.08	XXX
88305	TC		A	Tissue exam by pathologist	0.00	1.99	1.68	NA	NA	0.04	2.03	1.72	NA	NA	XXX
88307			A	Tissue exam by pathologist	1.59	4.54	3.50	NA	NA	0.12	6.25	5.21	NA	NA	XXX
88307	26		A	Tissue exam by pathologist	1.59	0.48	0.63	0.48	0.63	0.06	2.13	2.28	2.13	2.28	XXX
88307	TC		A	Tissue exam by pathologist	0.00	4.06	2.87	NA	NA	0.06	4.12	2.93	NA	NA	XXX
88309			A	Tissue exam by pathologist	2.80	6.37	4.89	NA	NA	0.14	9.31	7.83	NA	NA	XXX
88309	26		A	Tissue exam by pathologist	2.80	0.84	0.94	0.84	0.94	0.08	3.72	3.82	3.72	3.82	XXX
88309	TC		A	Tissue exam by pathologist	0.00	5.52	3.95	NA	NA	0.06	5.58	4.01	NA	NA	XXX
88311			A	Decalcify tissue	0.24	0.26	0.24	NA	NA	0.02	0.52	0.50	NA	NA	XXX
88311	26		A	Decalcify tissue	0.24	0.07	0.09	0.07	0.09	0.01	0.32	0.34	0.32	0.34	XXX
88311	TC		A	Decalcify tissue	0.00	0.18	0.14	NA	NA	0.01	0.19	0.15	NA	NA	XXX
88312			A	Special stains	0.54	2.51	1.77	NA	NA	0.03	3.08	2.34	NA	NA	XXX
88312	26		A	Special stains	0.54	0.15	0.21	0.15	0.21	0.02	0.71	0.77	0.71	0.77	XXX
88312	TC		A	Special stains	0.00	2.36	1.56	NA	NA	0.01	2.37	1.57	NA	NA	XXX
88313			A	Special stains	0.24	1.96	1.43	NA	NA	0.02	2.22	1.69	NA	NA	XXX
88313	26		A	Special stains	0.24	0.06	0.09	0.06	0.09	0.01	0.31	0.34	0.31	0.34	XXX
88313	TC		A	Special stains	0.00	1.90	1.34	NA	NA	0.01	1.91	1.35	NA	NA	XXX
88314			A	Special stains	0.45	1.96	2.04	NA	NA	0.04	2.45	2.53	NA	NA	XXX
88314	26		A	Histochemical stain	0.45	0.14	0.18	0.14	0.18	0.02	0.61	0.65	0.61	0.65	XXX
88314	TC		A	Histochemical stain	0.00	1.83	1.86	NA	NA	0.02	1.85	1.88	NA	NA	XXX
88318			A	Histochemical stain	0.42	3.01	1.99	NA	NA	0.03	3.46	2.44	NA	NA	XXX
88318	26		A	Chemical histochemistry	0.42	0.13	0.17	0.13	0.17	0.02	0.57	0.61	0.57	0.61	XXX
88318	TC		A	Chemical histochemistry	0.00	2.89	1.83	NA	NA	0.01	2.90	1.84	NA	NA	XXX
88319			A	Chemical histochemistry	0.53	3.29	3.38	NA	NA	0.04	3.86	3.95	NA	NA	XXX
88319	26		A	Enzyme histochemistry	0.53	0.15	0.20	0.15	0.20	0.02	0.70	0.75	0.70	0.75	XXX
88319	TC		A	Enzyme histochemistry	0.00	3.14	3.18	NA	NA	0.02	3.16	3.20	NA	NA	XXX
88321			A	Enzyme histochemistry	1.63	0.74	0.78	0.48	0.54	0.05	2.42	2.46	2.16	2.22	XXX
88323			A	Microslide consultation	1.83	2.23	1.89	NA	NA	0.07	4.13	3.79	NA	NA	XXX
88323	26		A	Microslide consultation	1.83	0.47	0.55	0.47	0.55	0.05	2.35	2.43	2.35	2.43	XXX
88323	TC		A	Microslide consultation	0.00	1.77	1.35	NA	NA	0.02	1.79	1.37	NA	NA	XXX
88325			A	Microslide consultation	2.50	2.27	2.77	0.63	0.87	0.07	4.84	5.34	3.20	3.44	XXX
88329			A	Comprehensive review of data	0.67	0.69	0.66	0.21	0.27	0.02	1.38	1.35	0.90	0.96	XXX
88331			A	Path consult introp	1.19	1.25	1.14	NA	NA	0.08	2.52	2.41	NA	NA	XXX
88331	26		A	Path consult intraop, 1 bloc	1.19	0.37	0.48	0.37	0.48	0.04	1.60	1.71	1.60	1.71	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
88331	TC	A	Path consult intraop, 1 bloc	0.00	0.88	0.66	NA	NA	0.04	0.92	0.70	NA	NA	XXX
88332		A	Path consult intraop, addl	0.59	0.48	0.47	NA	NA	0.04	1.11	1.10	NA	NA	XXX
88332	26	A	Path consult intraop, addl	0.59	0.18	0.23	0.18	0.23	0.02	0.79	0.84	0.79	0.84	XXX
88332	TC	A	Path consult intraop, addl	0.00	0.30	0.23	NA	NA	0.02	0.32	0.25	NA	NA	XXX
88333		A	Intraop cyto path consult, 1	1.20	1.36	1.15	NA	NA	0.08	2.64	2.43	NA	NA	XXX
88333	26	A	Intraop cyto path consult, 1	1.20	0.38	0.49	0.38	0.49	0.04	1.62	1.73	1.62	1.73	XXX
88333	TC	A	Intraop cyto path consult, 1	0.00	0.98	0.66	NA	NA	0.04	1.02	0.70	NA	NA	XXX
88334		A	Intraop cyto path consult, 2	0.59	0.75	0.64	NA	NA	0.04	1.38	1.27	NA	NA	XXX
88334	26	A	Intraop cyto path consult, 2	0.59	0.18	0.24	0.18	0.24	0.02	0.79	0.85	0.79	0.85	XXX
88334	TC	A	Intraop cyto path consult, 2	0.00	0.57	0.40	NA	NA	0.02	0.59	0.42	NA	NA	XXX
88342		A	Immunohistochemistry	0.85	2.05	1.61	NA	NA	0.05	2.95	2.51	NA	NA	XXX
88342	26	A	Immunohistochemistry	0.85	0.23	0.33	0.23	0.33	0.03	1.11	1.21	1.11	1.21	XXX
88342	TC	A	Immunohistochemistry	0.00	1.82	1.28	NA	NA	0.02	1.84	1.30	NA	NA	XXX
88346		A	Immunofluorescent study	0.86	1.97	1.67	NA	NA	0.05	2.88	2.58	NA	NA	XXX
88346	26	A	Immunofluorescent study	0.86	0.23	0.33	0.23	0.33	0.03	1.12	1.22	1.12	1.22	XXX
88346	TC	A	Immunofluorescent study	0.00	1.74	1.34	NA	NA	0.02	1.76	1.36	NA	NA	XXX
88347		A	Immunofluorescent study	0.86	1.30	1.27	NA	NA	0.05	2.21	2.18	NA	NA	XXX
88347	26	A	Immunofluorescent study	0.86	0.18	0.31	0.18	0.31	0.03	1.07	1.20	1.07	1.20	XXX
88347	TC	A	Immunofluorescent study	0.00	1.12	0.96	NA	NA	0.02	1.14	0.98	NA	NA	XXX
88348		A	Electron microscopy	1.51	18.27	11.58	NA	NA	0.13	19.91	13.22	NA	NA	XXX
88348	26	A	Electron microscopy	1.51	0.42	0.59	0.42	0.59	0.06	1.99	2.16	1.99	2.16	XXX
88348	TC	A	Electron microscopy	0.00	17.85	11.00	NA	NA	0.07	17.92	11.07	NA	NA	XXX
88349		A	Scanning electron microscopy	0.76	8.97	4.91	NA	NA	0.09	9.82	5.76	NA	NA	XXX
88349	26	A	Scanning electron microscopy	0.76	0.22	0.30	0.22	0.30	0.03	1.01	1.09	1.01	1.09	XXX
88349	TC	A	Scanning electron microscopy	0.00	8.75	4.61	NA	NA	0.06	8.81	4.67	NA	NA	XXX
88355		A	Analysis, skeletal muscle	1.85	3.40	7.42	NA	NA	0.13	5.38	9.40	NA	NA	XXX
88355	26	A	Analysis, skeletal muscle	1.85	0.40	0.69	0.40	0.69	0.07	2.32	2.61	2.32	2.61	XXX
88355	TC	A	Analysis, skeletal muscle	0.00	2.99	6.73	NA	NA	0.06	3.05	6.79	NA	NA	XXX
88356		A	Analysis, nerve	3.02	6.75	4.82	NA	NA	0.19	9.96	8.03	NA	NA	XXX
88356	26	A	Analysis, nerve	3.02	0.79	1.14	0.79	1.14	0.12	3.93	4.28	3.93	4.28	XXX
88356	TC	A	Analysis, nerve	0.00	5.96	3.68	NA	NA	0.07	6.03	3.75	NA	NA	XXX
88358		A	Analysis, tumor	0.95	1.14	0.92	NA	NA	0.17	2.26	2.04	NA	NA	XXX
88358	26	A	Analysis, tumor	0.95	0.17	0.34	0.17	0.34	0.10	1.22	1.39	1.22	1.39	XXX
88358	TC	A	Analysis, tumor	0.00	0.97	0.57	NA	NA	0.07	1.04	0.64	NA	NA	XXX
88360		A	Tumor immunohistochem/manual	1.10	2.33	1.87	NA	NA	0.08	3.51	3.05	NA	NA	XXX
88360	26	A	Tumor immunohistochem/manual	1.10	0.28	0.42	0.28	0.42	0.06	1.44	1.58	1.44	1.58	XXX
88360	TC	A	Tumor immunohistochem/manual	0.00	2.04	1.46	NA	NA	0.02	2.06	1.48	NA	NA	XXX
88361		A	Tumor immunohistochem/comput	1.18	2.79	2.96	NA	NA	0.17	4.14	4.31	NA	NA	XXX
88361	26	A	Tumor immunohistochem/comput	1.18	0.26	0.43	0.26	0.43	0.10	1.54	1.71	1.54	1.71	XXX
88361	TC	A	Tumor immunohistochem/comput	0.00	2.53	2.53	NA	NA	0.07	2.60	2.60	NA	NA	XXX
88362		A	Nerve teasing preparations	2.17	5.31	4.85	NA	NA	0.15	7.63	7.17	NA	NA	XXX
88362	26	A	Nerve teasing preparations	2.17	0.61	0.84	0.61	0.84	0.09	2.87	3.10	2.87	3.10	XXX
88362	TC	A	Nerve teasing preparations	0.00	4.71	4.01	NA	NA	0.06	4.77	4.07	NA	NA	XXX
88365		A	Insitu hybridization (fish)	1.20	2.99	2.34	NA	NA	0.05	4.24	3.59	NA	NA	XXX
88365	26	A	Insitu hybridization (fish)	1.20	0.25	0.45	0.25	0.45	0.03	1.48	1.68	1.48	1.68	XXX
88365	TC	A	Insitu hybridization (fish)	0.00	2.74	1.90	NA	NA	0.02	2.76	1.92	NA	NA	XXX
88367		A	Insitu hybridization, auto	1.30	5.30	4.35	NA	NA	0.12	6.72	5.77	NA	NA	XXX
88367	26	A	Insitu hybridization, auto	1.30	0.23	0.46	0.23	0.46	0.06	1.59	1.82	1.59	1.82	XXX
88367	TC	A	Insitu hybridization, auto	0.00	5.06	3.88	NA	NA	0.06	5.12	3.94	NA	NA	XXX
88368		A	Insitu hybridization, manual	1.40	4.83	3.00	NA	NA	0.12	6.35	4.52	NA	NA	XXX
88368	26	A	Insitu hybridization, manual	1.40	0.22	0.51	0.22	0.51	0.06	1.68	1.97	1.68	1.97	XXX
88368	TC	A	Insitu hybridization, manual	0.00	4.60	2.49	NA	NA	0.06	4.66	2.55	NA	NA	XXX
88371	26	A	Protein, western blot tissue	0.37	0.10	0.12	0.10	0.12	0.01	0.48	0.50	0.48	0.50	XXX
88372	26	A	Protein analysis w/probe	0.37	0.11	0.15	0.11	0.15	0.01	0.49	0.53	0.49	0.53	XXX
88380		C	Microdissection	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88380	26	C	Microdissection	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX

88380	TC	C	Microdissection	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88384		C	Eval molecular probes, 11–50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88384	26	C	Eval molecular probes, 11–50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88384	TC	C	Eval molecular probes, 11–50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88385		A	Eval molecul probes, 51–250	1.50	14.75	9.00	NA	NA	0.12	16.37	10.62	NA	NA	XXX
88385	26	A	Eval molecul probes, 51–250	1.50	0.24	0.55	0.24	0.55	0.06	1.80	2.11	1.80	2.11	XXX
88385	TC	A	Eval molecul probes, 51–250	0.00	14.51	8.45	NA	NA	0.06	14.57	8.51	NA	NA	XXX
88386		A	Eval molecul probes, 251–500	1.88	14.65	8.94	NA	NA	0.16	16.69	10.98	NA	NA	XXX
88386	26	A	Eval molecul probes, 251–500	1.88	0.30	0.69	0.30	0.69	0.08	2.26	2.65	2.26	2.65	XXX
88386	TC	A	Eval molecul probes, 251–500	0.00	14.35	8.25	NA	NA	0.08	14.43	8.33	NA	NA	XXX
88399		C	Surgical pathology procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88399	26	C	Surgical pathology procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
88399	TC	C	Surgical pathology procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
89049		A	Chct for mal hyperthermia	1.40	3.62	3.57	0.20	0.25	0.06	5.08	5.03	1.66	1.71	XXX
89060	26	A	Exam,synovial fluid crystals	0.37	0.12	0.15	0.12	0.15	0.01	0.50	0.53	0.50	0.53	XXX
89100		A	Sample intestinal contents	0.60	8.87	3.59	0.59	0.31	0.03	9.50	4.22	1.22	0.94	XXX
89105		A	Sample intestinal contents	0.50	7.68	3.59	0.45	0.24	0.02	8.20	4.11	0.97	0.76	XXX
89130		A	Sample stomach contents	0.45	6.95	3.04	0.39	0.20	0.02	7.42	3.51	0.86	0.67	XXX
89132		A	Sample stomach contents	0.19	6.51	2.79	0.29	0.12	0.01	6.71	2.99	0.49	0.32	XXX
89135		A	Sample stomach contents	0.79	8.87	3.64	0.67	0.36	0.04	9.70	4.47	1.50	1.19	XXX
89136		A	Sample stomach contents	0.21	7.13	3.08	0.32	0.15	0.01	7.35	3.30	0.54	0.37	XXX
89140		A	Sample stomach contents	0.94	6.89	3.28	0.50	0.33	0.04	7.87	4.26	1.48	1.31	XXX
89141		A	Sample stomach contents	0.85	5.54	3.48	0.40	0.35	0.03	6.42	4.36	1.28	1.23	XXX
89220		A	Sputum specimen collection	0.00	0.36	0.41	NA	NA	0.02	0.38	0.43	NA	NA	XXX
89230		A	Collect sweat for test	0.00	0.08	0.10	NA	NA	0.02	0.10	0.12	NA	NA	XXX
89240		C	Pathology lab procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
90465		A	Immune admin 1 inj, < 8 yrs	0.17	0.45	0.35	NA	NA	0.01	0.63	0.53	NA	NA	XXX
90466		A	Immune admin addl inj, < 8 y	0.15	0.12	0.13	0.04	0.11	0.01	0.28	0.29	0.20	0.27	ZZZ
90467		R	Immune admin o or n, < 8 yrs	0.17	0.17	0.17	0.07	0.09	0.01	0.35	0.35	0.25	0.27	XXX
90468		R	Immune admin o/n, addl < 8 y	0.15	0.10	0.11	0.03	0.05	0.01	0.26	0.27	0.19	0.21	ZZZ
90471		A	Immunization admin	0.17	0.45	0.35	NA	NA	0.01	0.63	0.53	NA	NA	XXX
90472		A	Immunization admin, each add	0.15	0.12	0.13	0.04	0.11	0.01	0.28	0.29	0.20	0.27	ZZZ
90473		R	Immune admin oral/nasal	0.17	0.16	0.18	0.04	0.06	0.01	0.34	0.36	0.22	0.24	XXX
90474		R	Immune admin oral/nasal addl	0.15	0.08	0.10	0.03	0.05	0.01	0.24	0.26	0.19	0.21	ZZZ
90760		A	Hydration iv infusion, init	0.17	1.31	1.40	NA	NA	0.07	1.55	1.64	NA	NA	XXX
90761		A	Hydrate iv infusion, add-on	0.09	0.32	0.38	NA	NA	0.04	0.45	0.51	NA	NA	ZZZ
90765		A	Ther/proph/diag iv inf, init	0.21	1.62	1.72	NA	NA	0.07	1.90	2.00	NA	NA	XXX
90766		A	Ther/proph/dg iv inf, add-on	0.18	0.37	0.44	NA	NA	0.04	0.59	0.66	NA	NA	ZZZ
90767		A	Tx/proph/dg addl seq iv inf	0.19	0.69	0.84	NA	NA	0.04	0.92	1.07	NA	NA	ZZZ
90768		A	Ther/diag concurrent inf	0.17	0.33	0.41	NA	NA	0.04	0.54	0.62	NA	NA	ZZZ
90772		A	Ther/proph/diag inj, sc/im	0.17	0.45	0.35	NA	NA	0.01	0.63	0.53	NA	NA	XXX
90773		A	Ther/proph/diag inj, ia	0.17	0.30	0.31	NA	NA	0.02	0.49	0.50	NA	NA	XXX
90774		A	Ther/proph/diag inj, iv push	0.18	1.34	1.31	NA	NA	0.04	1.56	1.53	NA	NA	XXX
90775		A	Ther/proph/diag inj add-on	0.10	0.51	0.56	NA	NA	0.04	0.65	0.70	NA	NA	ZZZ
90779		C	Ther/prop/diag inj/inf proc	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
90801		A	Psy dx interview	2.80	1.47	1.25	0.59	0.85	0.06	4.33	4.11	3.45	3.71	XXX
90802		A	Intac psy dx interview	3.01	1.51	1.28	0.65	0.90	0.07	4.59	4.36	3.73	3.98	XXX
90804		A	Psytx, office, 20–30 min	1.21	0.54	0.50	0.21	0.34	0.03	1.78	1.74	1.45	1.58	XXX
90805		A	Psytx, off, 20–30 min w/e&m	1.37	0.59	0.52	0.24	0.38	0.03	1.99	1.92	1.64	1.78	XXX
90806		A	Psytx, off, 45–50 min	1.86	0.51	0.65	0.32	0.53	0.04	2.41	2.55	2.22	2.43	XXX
90807		A	Psytx, off, 45–50 min w/e&m	2.02	0.70	0.70	0.35	0.56	0.05	2.77	2.77	2.42	2.63	XXX
90808		A	Psytx, office, 75–80 min	2.79	0.67	0.94	0.48	0.80	0.06	3.52	3.79	3.33	3.65	XXX
90809		A	Psytx, off, 75–80, w/e&m	2.95	0.85	0.96	0.51	0.82	0.07	3.87	3.98	3.53	3.84	XXX
90810		A	Intac psytx, off, 20–30 min	1.32	0.51	0.51	0.23	0.37	0.04	1.87	1.87	1.59	1.73	XXX
90811		A	Intac psytx, 20–30, w/e&m	1.48	0.72	0.61	0.26	0.41	0.04	2.24	2.13	1.78	1.93	XXX
90812		A	Intac psytx, off, 45–50 min	1.97	0.63	0.75	0.33	0.56	0.04	2.64	2.76	2.34	2.57	XXX
90813		A	Intac psytx, 45–50 min w/e&m	2.13	0.82	0.78	0.37	0.60	0.05	3.00	2.96	2.55	2.78	XXX
90814		A	Intac psytx, off, 75–80 min	2.90	0.77	1.02	0.50	0.86	0.06	3.73	3.98	3.46	3.82	XXX
90815		A	Intac psytx, 75–80 w/e&m	3.06	0.98	1.03	0.53	0.85	0.07	4.11	4.16	3.66	3.98	XXX
90816		A	Psytx, hosp, 20–30 min	1.25	NA	NA	0.31	0.42	0.03	NA	NA	1.59	1.70	XXX
90817		A	Psytx, hosp, 20–30 min w/e&m	1.41	NA	NA	0.35	0.43	0.03	NA	NA	1.79	1.87	XXX
90818		A	Psytx, hosp, 45–50 min	1.89	NA	NA	0.42	0.62	0.04	NA	NA	2.35	2.55	XXX
90819		A	Psytx, hosp, 45–50 min w/e&m	2.05	NA	NA	0.46	0.60	0.05	NA	NA	2.56	2.70	XXX
90821		A	Psytx, hosp, 75–80 min	2.83	NA	NA	0.58	0.90	0.06	NA	NA	3.47	3.79	XXX
90822		A	Psytx, hosp, 75–80 min w/e&m	2.99	NA	NA	0.62	0.87	0.08	NA	NA	3.69	3.94	XXX
90823		A	Intac psytx, hosp, 20–30 min	1.36	NA	NA	0.33	0.44	0.03	NA	NA	1.72	1.83	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
90824		A	Intac psytx, hsp 20–30 w/e&m	1.52	NA	NA	0.37	0.46	0.04	NA	NA	1.93	2.02	XXX
90826		A	Intac psytx, hosp, 45–50 min	2.01	NA	NA	0.44	0.65	0.05	NA	NA	2.50	2.71	XXX
90827		A	Intac psytx, hsp 45–50 w/e&m	2.16	NA	NA	0.48	0.63	0.05	NA	NA	2.69	2.84	XXX
90828		A	Intac psytx, hosp, 75–80 min	2.94	NA	NA	0.60	0.95	0.06	NA	NA	3.60	3.95	XXX
90829		A	Intac psytx, hsp 75–80 w/e&m	3.10	NA	NA	0.64	0.90	0.07	NA	NA	3.81	4.07	XXX
90845		A	Psychoanalysis	1.79	0.38	0.53	0.31	0.49	0.04	2.21	2.36	2.14	2.32	XXX
90846		R	Family psytx w/o patient	1.83	0.50	0.61	0.42	0.59	0.04	2.37	2.48	2.29	2.46	XXX
90847		R	Family psytx w/patient	2.21	0.72	0.80	0.48	0.69	0.05	2.98	3.06	2.74	2.95	XXX
90849		R	Multiple family group psytx	0.59	0.30	0.28	0.20	0.23	0.02	0.91	0.89	0.81	0.84	XXX
90853		A	Group psychotherapy	0.59	0.27	0.26	0.20	0.22	0.01	0.87	0.86	0.80	0.82	XXX
90857		A	Intac group psytx	0.63	0.36	0.31	0.20	0.24	0.01	1.00	0.95	0.84	0.88	XXX
90862		A	Medication management	0.95	0.62	0.46	0.27	0.31	0.02	1.59	1.43	1.24	1.28	XXX
90865		A	Narcosynthesis	2.84	1.18	1.32	0.63	0.84	0.12	4.14	4.28	3.59	3.80	XXX
90870		A	Electroconvulsive therapy	1.88	1.90	1.92	0.38	0.54	0.04	3.82	3.84	2.30	2.46	000
90875		N	Psychophysiological therapy	1.20	0.53	0.81	0.28	0.42	0.04	1.77	2.05	1.52	1.66	XXX
90876		N	Psychophysiological therapy	1.90	0.68	1.04	0.44	0.66	0.05	2.63	2.99	2.39	2.61	XXX
90880		A	Hypnotherapy	2.19	0.56	0.92	0.37	0.61	0.05	2.80	3.16	2.61	2.85	XXX
90885		B	Psy evaluation of records	0.97	0.23	0.34	0.23	0.34	0.02	1.22	1.33	1.22	1.33	XXX
90887		B	Consultation with family	1.48	0.62	0.77	0.34	0.51	0.04	2.14	2.29	1.86	2.03	XXX
90899		C	Psychiatric service/therapy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
90901		A	Biofeedback train, any meth	0.41	0.48	0.61	0.11	0.13	0.02	0.91	1.04	0.54	0.56	000
90911		A	Biofeedback peri/uro/rectal	0.89	1.38	1.52	0.30	0.31	0.06	2.33	2.47	1.25	1.26	000
90918		I	ESRD related services, month	11.16	4.75	5.77	3.78	5.53	0.36	16.27	17.29	15.30	17.05	XXX
90919		I	ESRD related services, month	8.53	3.06	3.77	2.58	3.65	0.29	11.88	12.59	11.40	12.47	XXX
90920		I	ESRD related services, month	7.26	2.77	3.51	2.29	3.39	0.23	10.26	11.00	9.78	10.88	XXX
90921		I	ESRD related services, month	4.46	1.73	2.26	1.63	2.24	0.14	6.33	6.86	6.23	6.84	XXX
90922		I	ESRD related services, day	0.37	0.16	0.20	0.13	0.19	0.01	0.54	0.58	0.51	0.57	XXX
90923		I	Esrd related services, day	0.28	0.10	0.12	0.08	0.12	0.01	0.39	0.41	0.37	0.41	XXX
90924		I	Esrd related services, day	0.24	0.09	0.11	0.08	0.11	0.01	0.34	0.36	0.33	0.36	XXX
90925		I	Esrd related services, day	0.15	0.06	0.08	0.05	0.07	0.01	0.22	0.24	0.21	0.23	XXX
90935		A	Hemodialysis, one evaluation	1.22	NA	NA	0.54	0.64	0.04	NA	NA	1.80	1.90	000
90937		A	Hemodialysis, repeated eval	2.11	NA	NA	0.78	0.92	0.07	NA	NA	2.96	3.10	000
90945		A	Dialysis, one evaluation	1.28	NA	NA	0.56	0.66	0.04	NA	NA	1.88	1.98	000
90947		A	Dialysis, repeated eval	2.16	NA	NA	0.80	0.94	0.07	NA	NA	3.03	3.17	000
90997		A	Hemoperfusion	1.84	NA	NA	0.50	0.62	0.06	NA	NA	2.40	2.52	000
90999		C	Dialysis procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
91000		A	Esophageal intubation	0.73	2.22	0.80	2.22	0.80	0.04	2.99	1.57	2.99	1.57	000
91000	26	A	Esophageal intubation	0.73	0.24	0.25	0.24	0.25	0.03	1.00	1.01	1.00	1.01	000
91000	TC	A	Esophageal intubation	0.00	1.98	0.56	1.98	0.56	0.01	1.99	0.57	1.99	0.57	000
91010		A	Esophagus motility study	1.25	3.66	4.22	3.66	4.22	0.12	5.03	5.59	5.03	5.59	000
91010	26	A	Esophagus motility study	1.25	0.55	0.47	0.55	0.47	0.06	1.86	1.78	1.86	1.78	000
91010	TC	A	Esophagus motility study	0.00	3.11	3.76	3.11	3.76	0.06	3.17	3.82	3.17	3.82	000
91011		A	Esophagus motility study	1.50	5.31	5.24	5.31	5.24	0.13	6.94	6.87	6.94	6.87	000
91011	26	A	Esophagus motility study	1.50	0.70	0.57	0.70	0.57	0.07	2.27	2.14	2.27	2.14	000
91011	TC	A	Esophagus motility study	0.00	4.61	4.68	4.61	4.68	0.06	4.67	4.74	4.67	4.74	000
91012		A	Esophagus motility study	1.46	5.49	5.69	5.49	5.69	0.13	7.08	7.28	7.08	7.28	000
91012	26	A	Esophagus motility study	1.46	0.68	0.55	0.68	0.55	0.06	2.20	2.07	2.20	2.07	000
91012	TC	A	Esophagus motility study	0.00	4.81	5.13	4.81	5.13	0.07	4.88	5.20	4.88	5.20	000
91020		A	Gastric motility studies	1.44	4.79	4.59	4.79	4.59	0.13	6.36	6.16	6.36	6.16	000
91020	26	A	Gastric motility studies	1.44	0.61	0.52	0.61	0.52	0.07	2.12	2.03	2.12	2.03	000
91020	TC	A	Gastric motility studies	0.00	4.19	4.07	4.19	4.07	0.06	4.25	4.13	4.25	4.13	000
91022		A	Duodenal motility study	1.44	3.09	4.07	3.09	4.07	0.13	4.66	5.64	4.66	5.64	000
91022	26	A	Duodenal motility study	1.44	0.61	0.54	0.61	0.54	0.07	2.12	2.05	2.12	2.05	000
91022	TC	A	Duodenal motility study	0.00	2.48	3.54	2.48	3.54	0.06	2.54	3.60	2.54	3.60	000
91030		A	Acid perfusion of esophagus	0.91	2.92	2.55	2.92	2.55	0.06	3.89	3.52	3.89	3.52	000
91030	26	A	Acid perfusion of esophagus	0.91	0.43	0.35	0.43	0.35	0.04	1.38	1.30	1.38	1.30	000

91030	TC	A	Acid perfusion of esophagus	0.00	2.49	2.21	2.49	2.21	0.02	2.51	2.23	2.51	2.23	000
91034		A	Gastroesophageal reflux test	0.97	4.12	4.95	4.12	4.95	0.12	5.21	6.04	5.21	6.04	000
91034	26	A	Gastroesophageal reflux test	0.97	0.41	0.36	0.41	0.36	0.06	1.44	1.39	1.44	1.39	000
91034	TC	A	Gastroesophageal reflux test	0.00	3.70	4.60	3.70	4.60	0.06	3.76	4.66	3.76	4.66	000
91035		A	G-esoph reflx tst w/electrod	1.59	11.33	10.93	11.33	10.93	0.12	13.04	12.64	13.04	12.64	000
91035	26	A	G-esoph reflx tst w/electrod	1.59	0.70	0.60	0.70	0.60	0.06	2.35	2.25	2.35	2.25	000
91035	TC	A	G-esoph reflx tst w/electrod	0.00	10.63	10.34	10.63	10.34	0.06	10.69	10.40	10.69	10.40	000
91037		A	Esoph imped function test	0.97	3.41	3.05	3.41	3.05	0.12	4.50	4.14	4.50	4.14	000
91037	26	A	Esoph imped function test	0.97	0.42	0.36	0.42	0.36	0.06	1.45	1.39	1.45	1.39	000
91037	TC	A	Esoph imped function test	0.00	2.99	2.69	2.99	2.69	0.06	3.05	2.75	3.05	2.75	000
91038		A	Esoph imped funct test > 1h	1.10	2.78	2.36	2.78	2.36	0.12	4.00	3.58	4.00	3.58	000
91038	26	A	Esoph imped funct test > 1h	1.10	0.50	0.42	0.50	0.42	0.06	1.66	1.58	1.66	1.58	000
91038	TC	A	Esoph imped funct test > 1h	0.00	2.28	1.94	2.28	1.94	0.06	2.34	2.00	2.34	2.00	000
91040		A	Esoph balloon distension tst	0.97	9.35	10.69	9.35	10.69	0.12	10.44	11.78	10.44	11.78	000
91040	26	A	Esoph balloon distension tst	0.97	0.37	0.35	0.37	0.35	0.06	1.40	1.38	1.40	1.38	000
91040	TC	A	Esoph balloon distension tst	0.00	8.97	10.34	8.97	10.34	0.06	9.03	10.40	9.03	10.40	000
91052		A	Gastric analysis test	0.79	2.99	2.59	2.99	2.59	0.05	3.83	3.43	3.83	3.43	000
91052	26	A	Gastric analysis test	0.79	0.37	0.30	0.37	0.30	0.03	1.19	1.12	1.19	1.12	000
91052	TC	A	Gastric analysis test	0.00	2.62	2.28	2.62	2.28	0.02	2.64	2.30	2.64	2.30	000
91055		A	Gastric intubation for smear	0.94	2.44	2.82	2.44	2.82	0.07	3.45	3.83	3.45	3.83	000
91055	26	A	Gastric intubation for smear	0.94	0.27	0.27	0.27	0.27	0.05	1.26	1.26	1.26	1.26	000
91055	TC	A	Gastric intubation for smear	0.00	2.17	2.55	2.17	2.55	0.02	2.19	2.57	2.19	2.57	000
91060		A	Gastric saline load test	0.45	1.65	1.88	1.65	1.88	0.05	2.15	2.38	2.15	2.38	000
91060	26	A	Gastric saline load test	0.45	0.11	0.13	0.11	0.13	0.03	0.59	0.61	0.59	0.61	000
91060	TC	A	Gastric saline load test	0.00	1.54	1.75	1.54	1.75	0.02	1.56	1.77	1.56	1.77	000
91065		A	Breath hydrogen test	0.20	1.41	1.45	1.41	1.45	0.03	1.64	1.68	1.64	1.68	000
91065	26	A	Breath hydrogen test	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	000
91065	TC	A	Breath hydrogen test	0.00	1.34	1.38	1.34	1.38	0.02	1.36	1.40	1.36	1.40	000
91100		A	Pass intestine bleeding tube	1.08	2.15	2.63	0.37	0.30	0.07	3.30	3.78	1.52	1.45	000
91105		A	Gastric intubation treatment	0.37	1.76	2.02	0.07	0.09	0.03	2.16	2.42	0.47	0.49	000
91110		A	Gi tract capsule endoscopy	3.64	20.55	21.77	NA	NA	0.16	24.35	25.57	NA	NA	XXX
91110	26	A	Gi tract capsule endoscopy	3.64	1.66	1.38	1.66	1.38	0.09	5.39	5.11	5.39	5.11	XXX
91110	TC	A	Gi tract capsule endoscopy	0.00	18.90	20.40	NA	NA	0.07	18.97	20.47	NA	NA	XXX
91120		A	Rectal sensation test	0.97	9.12	10.52	9.12	10.52	0.11	10.20	11.60	10.20	11.60	XXX
91120	26	A	Rectal sensation test	0.97	0.30	0.33	0.30	0.33	0.07	1.34	1.37	1.34	1.37	XXX
91120	TC	A	Rectal sensation test	0.00	8.82	10.19	8.82	10.19	0.04	8.86	10.23	8.86	10.23	XXX
91122		A	Anal pressure record	1.77	3.76	4.77	3.76	4.77	0.21	5.74	6.75	5.74	6.75	000
91122	26	A	Anal pressure record	1.77	0.52	0.58	0.52	0.58	0.13	2.42	2.48	2.42	2.48	000
91122	TC	A	Anal pressure record	0.00	3.24	4.19	3.24	4.19	0.08	3.32	4.27	3.32	4.27	000
91132		C	Electrogastrography	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
91132	26	A	Electrogastrography	0.52	0.25	0.20	0.25	0.20	0.02	0.79	0.74	0.79	0.74	XXX
91132	TC	C	Electrogastrography	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
91133		C	Electrogastrography w/test	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
91133	26	A	Electrogastrography w/test	0.66	0.30	0.25	0.30	0.25	0.03	0.99	0.94	0.99	0.94	XXX
91133	TC	C	Electrogastrography w/test	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
91299		C	Gastroenterology procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
91299	26	C	Gastroenterology procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
91299	TC	C	Gastroenterology procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
92002		A	Eye exam, new patient	0.88	0.97	0.97	0.27	0.32	0.02	1.87	1.87	1.17	1.22	XXX
92004		A	Eye exam, new patient	1.67	1.59	1.67	0.54	0.65	0.04	3.30	3.38	2.25	2.36	XXX
92012		A	Eye exam established pat	0.67	0.94	1.01	0.24	0.28	0.02	1.63	1.70	0.93	0.97	XXX
92014		A	Eye exam & treatment	1.10	1.32	1.39	0.38	0.45	0.03	2.45	2.52	1.51	1.58	XXX
92015		N	Refraction	0.38	0.10	1.14	0.09	0.14	0.01	0.49	1.53	0.48	0.53	XXX
92018		A	New eye exam & treatment	2.50	NA	NA	0.91	1.03	0.07	NA	NA	3.48	3.60	XXX
92019		A	Eye exam & treatment	1.31	NA	NA	0.44	0.53	0.03	NA	NA	1.78	1.87	XXX
92020		A	Special eye evaluation	0.37	0.26	0.32	0.13	0.15	0.01	0.64	0.70	0.51	0.53	XXX
92060		A	Special eye evaluation	0.69	0.79	0.75	NA	NA	0.03	1.51	1.47	NA	NA	XXX
92060	26	A	Special eye evaluation	0.69	0.23	0.28	0.23	0.28	0.02	0.94	0.99	0.94	0.99	XXX
92060	TC	A	Special eye evaluation	0.00	0.56	0.47	NA	NA	0.01	0.57	0.48	NA	NA	XXX
92065		A	Orthoptic/pleoptic training	0.37	0.89	0.62	NA	NA	0.02	1.28	1.01	NA	NA	XXX
92065	26	A	Orthoptic/pleoptic training	0.37	0.09	0.14	0.09	0.14	0.01	0.47	0.52	0.47	0.52	XXX
92065	TC	A	Orthoptic/pleoptic training	0.00	0.79	0.48	NA	NA	0.01	0.80	0.49	NA	NA	XXX
92070		A	Fitting of contact lens	0.70	0.94	1.04	0.24	0.30	0.02	1.66	1.76	0.96	1.02	XXX
92081		A	Visual field examination(s)	0.36	0.97	0.95	NA	NA	0.02	1.35	1.33	NA	NA	XXX
92081	26	A	Visual field examination(s)	0.36	0.11	0.14	0.11	0.14	0.01	0.48	0.51	0.48	0.51	XXX
92081	TC	A	Visual field examination(s)	0.00	0.86	0.81	NA	NA	0.01	0.87	0.82	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
92082		A	Visual field examination(s)	0.44	1.36	1.26	NA	NA	0.02	1.82	1.72	NA	NA	XXX
92082	26	A	Visual field examination(s)	0.44	0.14	0.18	0.14	0.18	0.01	0.59	0.63	0.59	0.63	XXX
92082	TC	A	Visual field examination(s)	0.00	1.22	1.09	NA	NA	0.01	1.23	1.10	NA	NA	XXX
92083		A	Visual field examination(s)	0.50	1.56	1.46	NA	NA	0.02	2.08	1.98	NA	NA	XXX
92083	26	A	Visual field examination(s)	0.50	0.17	0.21	0.17	0.21	0.01	0.68	0.72	0.68	0.72	XXX
92083	TC	A	Visual field examination(s)	0.00	1.39	1.26	NA	NA	0.01	1.40	1.27	NA	NA	XXX
92100		A	Serial tonometry exam(s)	0.92	1.28	1.33	0.29	0.34	0.02	2.22	2.27	1.23	1.28	XXX
92120		A	Tonography & eye evaluation	0.81	1.00	1.05	0.26	0.31	0.02	1.83	1.88	1.09	1.14	XXX
92130		A	Water provocation tonography	0.81	1.21	1.26	0.28	0.35	0.02	2.04	2.09	1.11	1.18	XXX
92135		A	Opthalmic dx imaging	0.35	0.81	0.80	NA	NA	0.02	1.18	1.17	NA	NA	XXX
92135	26	A	Opthalmic dx imaging	0.35	0.12	0.14	0.12	0.14	0.01	0.48	0.50	0.48	0.50	XXX
92135	TC	A	Opthalmic dx imaging	0.00	0.69	0.65	NA	NA	0.01	0.70	0.66	NA	NA	XXX
92136		A	Ophthalmic biometry	0.54	1.46	1.60	NA	NA	0.08	2.08	2.22	NA	NA	XXX
92136	26	A	Ophthalmic biometry	0.54	0.20	0.23	0.20	0.23	0.01	0.75	0.78	0.75	0.78	XXX
92136	TC	A	Ophthalmic biometry	0.00	1.26	1.37	NA	NA	0.07	1.33	1.44	NA	NA	XXX
92140		A	Glaucoma provocative tests	0.50	0.92	0.97	0.15	0.20	0.01	1.43	1.48	0.66	0.71	XXX
92225		A	Special eye exam, initial	0.38	0.25	0.23	0.13	0.15	0.01	0.64	0.62	0.52	0.54	XXX
92226		A	Special eye exam, subsequent	0.33	0.24	0.22	0.12	0.14	0.01	0.58	0.56	0.46	0.48	XXX
92230		A	Eye exam with photos	0.60	0.73	1.33	0.21	0.20	0.02	1.35	1.95	0.83	0.82	XXX
92235		A	Eye exam with photos	0.81	2.33	2.54	NA	NA	0.08	3.22	3.43	NA	NA	XXX
92235	26	A	Eye exam with photos	0.81	0.30	0.35	0.30	0.35	0.02	1.13	1.18	1.13	1.18	XXX
92235	TC	A	Eye exam with photos	0.00	2.02	2.19	NA	NA	0.06	2.08	2.25	NA	NA	XXX
92240		A	Icg angiography	1.10	4.51	5.70	NA	NA	0.09	5.70	6.89	NA	NA	XXX
92240	26	A	Icg angiography	1.10	0.41	0.48	0.41	0.48	0.03	1.54	1.61	1.54	1.61	XXX
92240	TC	A	Icg angiography	0.00	4.09	5.22	NA	NA	0.06	4.15	5.28	NA	NA	XXX
92250		A	Eye exam with photos	0.44	1.34	1.48	NA	NA	0.02	1.80	1.94	NA	NA	XXX
92250	26	A	Eye exam with photos	0.44	0.15	0.18	0.15	0.18	0.01	0.60	0.63	0.60	0.63	XXX
92250	TC	A	Eye exam with photos	0.00	1.19	1.30	NA	NA	0.01	1.20	1.31	NA	NA	XXX
92260		A	Ophthalmoscopy/dynamometry	0.20	0.23	0.25	0.07	0.09	0.01	0.44	0.46	0.28	0.30	XXX
92265		A	Eye muscle evaluation	0.81	1.01	1.37	NA	NA	0.06	1.88	2.24	NA	NA	XXX
92265	26	A	Eye muscle evaluation	0.81	0.24	0.27	0.24	0.27	0.04	1.09	1.12	1.09	1.12	XXX
92265	TC	A	Eye muscle evaluation	0.00	0.76	1.10	NA	NA	0.02	0.78	1.12	NA	NA	XXX
92270		A	Electro-oculography	0.81	1.42	1.50	NA	NA	0.05	2.28	2.36	NA	NA	XXX
92270	26	A	Electro-oculography	0.81	0.24	0.31	0.24	0.31	0.03	1.08	1.15	1.08	1.15	XXX
92270	TC	A	Electro-oculography	0.00	1.17	1.19	NA	NA	0.02	1.19	1.21	NA	NA	XXX
92275		A	Electroretinography	1.01	2.48	2.07	NA	NA	0.05	3.54	3.13	NA	NA	XXX
92275	26	A	Electroretinography	1.01	0.36	0.41	0.36	0.41	0.03	1.40	1.45	1.40	1.45	XXX
92275	TC	A	Electroretinography	0.00	2.12	1.66	NA	NA	0.02	2.14	1.68	NA	NA	XXX
92283		A	Color vision examination	0.17	1.02	0.89	NA	NA	0.02	1.21	1.08	NA	NA	XXX
92283	26	A	Color vision examination	0.17	0.05	0.07	0.05	0.07	0.01	0.23	0.25	0.23	0.25	XXX
92283	TC	A	Color vision examination	0.00	0.96	0.82	NA	NA	0.01	0.97	0.83	NA	NA	XXX
92284		A	Dark adaptation eye exam	0.24	1.25	1.72	NA	NA	0.02	1.51	1.98	NA	NA	XXX
92284	26	A	Dark adaptation eye exam	0.24	0.09	0.08	0.09	0.08	0.01	0.34	0.33	0.34	0.33	XXX
92284	TC	A	Dark adaptation eye exam	0.00	1.16	1.64	NA	NA	0.01	1.17	1.65	NA	NA	XXX
92285		A	Eye photography	0.20	0.82	0.95	NA	NA	0.02	1.04	1.17	NA	NA	XXX
92285	26	A	Eye photography	0.20	0.07	0.09	0.07	0.09	0.01	0.28	0.30	0.28	0.30	XXX
92285	TC	A	Eye photography	0.00	0.75	0.86	NA	NA	0.01	0.76	0.87	NA	NA	XXX
92286		A	Internal eye photography	0.66	2.16	2.83	NA	NA	0.04	2.86	3.53	NA	NA	XXX
92286	26	A	Internal eye photography	0.66	0.24	0.28	0.24	0.28	0.02	0.92	0.96	0.92	0.96	XXX
92286	TC	A	Internal eye photography	0.00	1.92	2.55	NA	NA	0.02	1.94	2.57	NA	NA	XXX
92287		A	Internal eye photography	0.81	1.98	2.28	0.30	0.31	0.02	2.81	3.11	1.13	1.14	XXX
92310		N	Contact lens fitting	1.17	1.07	1.11	0.27	0.41	0.04	2.28	2.32	1.48	1.62	XXX
92311		A	Contact lens fitting	1.08	1.31	1.15	0.32	0.34	0.03	2.42	2.26	1.43	1.45	XXX
92312		A	Contact lens fitting	1.26	1.51	1.19	0.36	0.47	0.03	2.80	2.48	1.65	1.76	XXX
92313		A	Contact lens fitting	0.92	1.49	1.17	0.33	0.30	0.02	2.43	2.11	1.27	1.24	XXX
92314		N	Prescription of contact lens	0.69	1.15	0.99	0.16	0.24	0.01	1.85	1.69	0.86	0.94	XXX

92315		A	Prescription of contact lens	0.45	1.35	0.98	0.13	0.15	0.01	1.81	1.44	0.59	0.61	XXX
92316		A	Prescription of contact lens	0.68	1.69	1.11	0.24	0.28	0.02	2.39	1.81	0.94	0.98	XXX
92317		A	Prescription of contact lens	0.45	1.46	1.07	0.14	0.15	0.01	1.92	1.53	0.60	0.61	XXX
92325		A	Modification of contact lens	0.00	0.85	0.51	NA	NA	0.01	0.86	0.52	NA	NA	XXX
92326		A	Replacement of contact lens	0.00	0.76	1.41	NA	NA	0.06	0.82	1.47	NA	NA	XXX
92340		N	Fitting of spectacles	0.37	0.45	0.64	0.09	0.13	0.01	0.83	1.02	0.47	0.51	XXX
92341		N	Fitting of spectacles	0.47	0.47	0.67	0.11	0.16	0.01	0.95	1.15	0.59	0.64	XXX
92342		N	Fitting of spectacles	0.53	0.48	0.69	0.12	0.19	0.01	1.02	1.23	0.66	0.73	XXX
92352		B	Special spectacles fitting	0.37	0.57	0.65	0.09	0.13	0.01	0.95	1.03	0.47	0.51	XXX
92353		B	Special spectacles fitting	0.50	0.60	0.70	0.12	0.17	0.02	1.12	1.22	0.64	0.69	XXX
92354		B	Special spectacles fitting	0.00	0.29	6.72	NA	NA	0.10	0.39	6.82	NA	NA	XXX
92355		B	Special spectacles fitting	0.00	0.45	3.36	NA	NA	0.01	0.46	3.37	NA	NA	XXX
92358		B	Eye prosthesis service	0.00	0.24	0.79	NA	NA	0.05	0.29	0.84	NA	NA	XXX
92370		N	Repair & adjust spectacles	0.32	0.39	0.51	0.07	0.12	0.02	0.73	0.85	0.41	0.46	XXX
92371		B	Repair & adjust spectacles	0.00	0.24	0.53	NA	NA	0.02	0.26	0.55	NA	NA	XXX
92499		C	Eye service or procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
92499	26	C	Eye service or procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
92499	TC	C	Eye service or procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
92502		A	Ear and throat examination	1.51	NA	NA	0.77	1.03	0.05	NA	NA	2.33	2.59	000
92504		A	Ear microscopy examination	0.18	0.55	0.51	0.05	0.08	0.01	0.74	0.70	0.24	0.27	XXX
92506		A	Speech/hearing evaluation	0.86	3.28	2.76	0.24	0.36	0.03	4.17	3.65	1.13	1.25	XXX
92507		A	Speech/hearing therapy	0.52	1.19	1.13	0.14	0.21	0.02	1.73	1.67	0.68	0.75	XXX
92508		A	Speech/hearing therapy	0.26	0.52	0.51	0.08	0.11	0.01	0.79	0.78	0.35	0.38	XXX
92511		A	Nasopharyngoscopy	0.84	2.92	3.21	0.61	0.74	0.03	3.79	4.08	1.48	1.61	000
92512		A	Nasal function studies	0.55	0.93	1.09	0.15	0.17	0.02	1.50	1.66	0.72	0.74	XXX
92516		A	Facial nerve function test	0.43	1.15	1.19	0.12	0.20	0.01	1.59	1.63	0.56	0.64	XXX
92520		A	Laryngeal function studies	0.75	0.91	0.61	0.23	0.35	0.03	1.69	1.39	1.01	1.13	XXX
92526		A	Oral function therapy	0.55	1.68	1.65	0.16	0.19	0.02	2.25	2.22	0.73	0.76	XXX
92541		A	Spontaneous nystagmus test	0.40	1.16	1.06	NA	NA	0.04	1.60	1.50	NA	NA	XXX
92541	26	A	Spontaneous nystagmus test	0.40	0.12	0.17	0.12	0.17	0.02	0.54	0.59	0.54	0.59	XXX
92541	TC	A	Spontaneous nystagmus test	0.00	1.04	0.89	NA	NA	0.02	1.06	0.91	NA	NA	XXX
92542		A	Positional nystagmus test	0.33	1.30	1.18	NA	NA	0.03	1.66	1.54	NA	NA	XXX
92542	26	A	Positional nystagmus test	0.33	0.10	0.15	0.10	0.15	0.01	0.44	0.49	0.44	0.49	XXX
92542	TC	A	Positional nystagmus test	0.00	1.20	1.04	NA	NA	0.02	1.22	1.06	NA	NA	XXX
92543		A	Caloric vestibular test	0.10	0.66	0.59	NA	NA	0.02	0.78	0.71	NA	NA	XXX
92543	26	A	Caloric vestibular test	0.10	0.03	0.05	0.03	0.05	0.01	0.14	0.16	0.14	0.16	XXX
92543	TC	A	Caloric vestibular test	0.00	0.63	0.55	NA	NA	0.01	0.64	0.56	NA	NA	XXX
92544		A	Optokinetic nystagmus test	0.26	1.06	0.94	NA	NA	0.03	1.35	1.23	NA	NA	XXX
92544	26	A	Optokinetic nystagmus test	0.26	0.08	0.11	0.08	0.11	0.01	0.35	0.38	0.35	0.38	XXX
92544	TC	A	Optokinetic nystagmus test	0.00	0.98	0.83	NA	NA	0.02	1.00	0.85	NA	NA	XXX
92545		A	Oscillating tracking test	0.23	1.03	0.86	NA	NA	0.03	1.29	1.12	NA	NA	XXX
92545	26	A	Oscillating tracking test	0.23	0.07	0.10	0.07	0.10	0.01	0.31	0.34	0.31	0.34	XXX
92545	TC	A	Oscillating tracking test	0.00	0.96	0.76	NA	NA	0.02	0.98	0.78	NA	NA	XXX
92546		A	Sinusoidal rotational test	0.29	1.90	1.96	NA	NA	0.03	2.22	2.28	NA	NA	XXX
92546	26	A	Sinusoidal rotational test	0.29	0.09	0.12	0.09	0.12	0.01	0.39	0.42	0.39	0.42	XXX
92546	TC	A	Sinusoidal rotational test	0.00	1.81	1.84	NA	NA	0.02	1.83	1.86	NA	NA	XXX
92547		A	Supplemental electrical test	0.00	0.11	0.09	0.11	0.09	0.06	0.17	0.15	0.17	0.15	ZZZ
92548		A	Posturography	0.50	1.72	2.12	NA	NA	0.15	2.37	2.77	NA	NA	XXX
92548	26	A	Posturography	0.50	0.15	0.23	0.15	0.23	0.02	0.67	0.75	0.67	0.75	XXX
92548	TC	A	Posturography	0.00	1.57	1.89	NA	NA	0.13	1.70	2.02	NA	NA	XXX
92552		A	Pure tone audiometry, air	0.00	0.56	0.47	NA	NA	0.04	0.60	0.51	NA	NA	XXX
92553		A	Audiometry, air & bone	0.00	0.71	0.67	NA	NA	0.06	0.77	0.73	NA	NA	XXX
92555		A	Speech threshold audiometry	0.00	0.38	0.38	NA	NA	0.04	0.42	0.42	NA	NA	XXX
92556		A	Speech audiometry, complete	0.00	0.52	0.56	NA	NA	0.06	0.58	0.62	NA	NA	XXX
92557		A	Comprehensive hearing test	0.00	1.27	1.21	NA	NA	0.12	1.39	1.33	NA	NA	XXX
92561		A	Bekesy audiometry, diagnosis	0.00	0.79	0.74	NA	NA	0.06	0.85	0.80	NA	NA	XXX
92562		A	Loudness balance test	0.00	0.67	0.48	NA	NA	0.04	0.71	0.52	NA	NA	XXX
92563		A	Tone decay hearing test	0.00	0.53	0.42	NA	NA	0.04	0.57	0.46	NA	NA	XXX
92564		A	Sisi hearing test	0.00	0.51	0.48	NA	NA	0.05	0.56	0.53	NA	NA	XXX
92565		A	Stenger test, pure tone	0.00	0.27	0.37	NA	NA	0.04	0.31	0.41	NA	NA	XXX
92567		A	Tympanometry	0.00	0.50	0.52	NA	NA	0.06	0.56	0.58	NA	NA	XXX
92568		A	Acoustic refl threshold tst	0.00	0.15	0.32	NA	NA	0.04	0.19	0.36	NA	NA	XXX
92569		A	Acoustic reflex decay test	0.00	0.16	0.35	NA	NA	0.04	0.20	0.39	NA	NA	XXX
92571		A	Filtered speech hearing test	0.00	0.40	0.39	NA	NA	0.04	0.44	0.43	NA	NA	XXX
92572		A	Staggered spondaic word test	0.00	0.61	0.22	NA	NA	0.01	0.62	0.23	NA	NA	XXX
92573		A	Lombard test	0.00	0.49	0.39	NA	NA	0.04	0.53	0.43	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
92575		A	Sensorineural acuity test	0.00	1.10	0.50	NA	NA	0.02	1.12	0.52	NA	NA	XXX
92576		A	Synthetic sentence test	0.00	0.54	0.47	NA	NA	0.05	0.59	0.52	NA	NA	XXX
92577		A	Stenger test, speech	0.00	0.28	0.61	NA	NA	0.07	0.35	0.68	NA	NA	XXX
92579		A	Visual audiometry (vra)	0.00	0.84	0.76	NA	NA	0.06	0.90	0.82	NA	NA	XXX
92582		A	Conditioning play audiometry	0.00	1.08	0.82	NA	NA	0.06	1.14	0.88	NA	NA	XXX
92583		A	Select picture audiometry	0.00	0.70	0.84	NA	NA	0.08	0.78	0.92	NA	NA	XXX
92584		A	Electrocochleography	0.00	1.28	2.17	NA	NA	0.21	1.49	2.38	NA	NA	XXX
92585		A	Auditor evoke potent, compre	0.50	2.01	2.05	NA	NA	0.17	2.68	2.72	NA	NA	XXX
92585	26	A	Auditor evoke potent, compre	0.50	0.15	0.20	0.15	0.20	0.03	0.68	0.73	0.68	0.73	XXX
92585	TC	A	Auditor evoke potent, compre	0.00	1.86	1.85	NA	NA	0.14	2.00	1.99	NA	NA	XXX
92586		A	Auditor evoke potent, limit	0.00	1.41	1.74	NA	NA	0.14	1.55	1.88	NA	NA	XXX
92587		A	Evoked auditory test	0.13	0.61	1.18	NA	NA	0.12	0.86	1.43	NA	NA	XXX
92587	26	A	Evoked auditory test	0.13	0.04	0.06	0.04	0.06	0.01	0.18	0.20	0.18	0.20	XXX
92587	TC	A	Evoked auditory test	0.00	0.58	1.13	NA	NA	0.11	0.69	1.24	NA	NA	XXX
92588		A	Evoked auditory test	0.36	1.05	1.49	NA	NA	0.14	1.55	1.99	NA	NA	XXX
92588	26	A	Evoked auditory test	0.36	0.11	0.15	0.11	0.15	0.01	0.48	0.52	0.48	0.52	XXX
92588	TC	A	Evoked auditory test	0.00	0.95	1.34	NA	NA	0.13	1.08	1.47	NA	NA	XXX
92596		A	Ear protector evaluation	0.00	0.93	0.68	NA	NA	0.06	0.99	0.74	NA	NA	XXX
92597		A	Oral speech device eval	0.86	1.69	1.69	0.24	0.40	0.03	2.58	2.58	1.13	1.29	XXX
92601		A	Cochlear implt f/up exam < 7	0.00	4.87	3.84	NA	NA	0.07	4.94	3.91	NA	NA	XXX
92602		A	Reprogram cochlear implt < 7	0.00	3.34	2.62	NA	NA	0.07	3.41	2.69	NA	NA	XXX
92603		A	Cochlear implt f/up exam 7 >	0.00	3.17	2.40	NA	NA	0.07	3.24	2.47	NA	NA	XXX
92604		A	Reprogram cochlear implt 7 >	0.00	2.09	1.54	NA	NA	0.07	2.16	1.61	NA	NA	XXX
92607		A	Ex for speech device rx, 1hr	0.00	4.28	3.38	NA	NA	0.05	4.33	3.43	NA	NA	XXX
92608		A	Ex for speech device rx addl	0.00	0.87	0.63	NA	NA	0.05	0.92	0.68	NA	NA	XXX
92609		A	Use of speech device service	0.00	2.30	1.77	NA	NA	0.04	2.34	1.81	NA	NA	XXX
92610		A	Evaluate swallowing function	0.00	1.62	2.98	NA	NA	0.08	1.70	3.06	NA	NA	XXX
92611		A	Motion fluoroscopy/swallow	0.00	1.90	3.05	NA	NA	0.08	1.98	3.13	NA	NA	XXX
92612		A	Endoscopy swallow tst (fees)	1.27	2.74	2.74	0.36	0.59	0.04	4.05	4.05	1.67	1.90	XXX
92613		A	Endoscopy swallow tst (fees)	0.71	0.22	0.36	0.22	0.35	0.05	0.98	1.12	0.98	1.11	XXX
92614		A	Laryngoscopic sensory test	1.27	2.23	2.43	0.36	0.59	0.04	3.54	3.74	1.67	1.90	XXX
92615		A	Eval laryngoscopy sense tst	0.63	0.18	0.31	0.18	0.31	0.05	0.86	0.99	0.86	0.99	XXX
92616		A	Fees w/laryngeal sense test	1.88	2.91	3.27	0.53	0.88	0.06	4.85	5.21	2.47	2.82	XXX
92617		A	Interprt fees/laryngeal test	0.79	0.22	0.39	0.22	0.39	0.05	1.06	1.23	1.06	1.23	XXX
92620		A	Auditory function, 60 min	0.00	1.87	1.32	NA	NA	0.06	1.93	1.38	NA	NA	XXX
92621		A	Auditory function, + 15 min	0.00	0.40	0.29	NA	NA	0.06	0.46	0.35	NA	NA	ZZZ
92625		A	Tinnitus assessment	0.00	1.82	1.30	1.82	1.30	0.06	1.88	1.36	1.88	1.36	XXX
92626		A	Eval aud rehab status	0.00	1.85	2.11	NA	NA	0.06	1.91	2.17	NA	NA	XXX
92627		A	Eval aud status rehab add-on	0.00	0.42	0.52	0.42	0.52	0.02	0.44	0.54	0.44	0.54	ZZZ
92700		C	Ent procedure/service	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
92950		A	Heart/lung resuscitation cpr	3.79	3.24	3.96	0.77	0.92	0.28	7.31	8.03	4.84	4.99	000
92953		A	Temporary external pacing	0.23	NA	NA	0.07	0.07	0.02	NA	NA	0.32	0.32	000
92960		A	Cardioversion electric, ext	2.25	4.42	5.84	1.47	1.25	0.07	6.74	8.16	3.79	3.57	000
92961		A	Cardioversion, electric, int	4.59	NA	NA	2.49	2.18	0.29	NA	NA	7.37	7.06	000
92970		A	Cardioassist, internal	3.51	NA	NA	1.61	1.20	0.16	NA	NA	5.28	4.87	000
92971		A	Cardioassist, external	1.77	NA	NA	1.08	0.91	0.06	NA	NA	2.91	2.74	000
92973		A	Percut coronary thrombectomy	3.28	NA	NA	1.79	1.42	0.23	NA	NA	5.30	4.93	ZZZ
92974		A	Cath place, cardio brachytx	3.00	NA	NA	1.67	1.30	0.21	NA	NA	4.88	4.51	ZZZ
92975		A	Dissolve clot, heart vessel	7.24	NA	NA	3.88	3.08	0.50	NA	NA	11.62	10.82	000
92977		A	Dissolve clot, heart vessel	0.00	1.73	6.47	NA	NA	0.46	2.19	6.93	NA	NA	XXX
92978		A	Intravasc us, heart add-on	1.80	NA	NA	NA	NA	0.30	NA	NA	NA	NA	ZZZ
92978	26	A	Intravasc us, heart add-on	1.80	0.98	0.78	0.98	0.78	0.06	2.84	2.64	2.84	2.64	ZZZ
92978	TC	A	Intravasc us, heart add-on	0.00	NA	NA	NA	NA	0.24	NA	NA	NA	NA	ZZZ
92979		A	Intravasc us, heart add-on	1.44	NA	NA	NA	NA	0.19	NA	NA	NA	NA	ZZZ
92979	26	A	Intravasc us, heart add-on	1.44	0.78	0.62	0.78	0.62	0.06	2.28	2.12	2.28	2.12	ZZZ
92979	TC	A	Intravasc us, heart add-on	0.00	NA	NA	NA	NA	0.13	NA	NA	NA	NA	ZZZ

92980		A	Insert intracoronary stent	14.82	NA	NA	8.29	6.61	1.03	NA	NA	24.14	22.46	000
92981		A	Insert intracoronary stent	4.16	NA	NA	2.27	1.79	0.29	NA	NA	6.72	6.24	ZZZ
92982		A	Coronary artery dilation	10.96	NA	NA	6.20	4.95	0.76	NA	NA	17.92	16.67	000
92984		A	Coronary artery dilation	2.97	NA	NA	1.61	1.27	0.21	NA	NA	4.79	4.45	ZZZ
92986		A	Revision of aortic valve	22.64	NA	NA	15.66	12.79	1.51	NA	NA	39.81	36.94	090
92987		A	Revision of mitral valve	23.42	NA	NA	16.09	13.18	1.59	NA	NA	41.10	38.19	090
92990		A	Revision of pulmonary valve	18.06	NA	NA	11.18	10.14	1.20	NA	NA	30.44	29.40	090
92992		C	Revision of heart chamber	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
92993		C	Revision of heart chamber	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	090
92995		A	Coronary atherectomy	12.07	NA	NA	6.81	5.42	0.84	NA	NA	19.72	18.33	000
92996		A	Coronary atherectomy add-on	3.26	NA	NA	1.78	1.40	0.10	NA	NA	5.14	4.76	ZZZ
92997		A	Pul art balloon repr, percut	11.98	NA	NA	5.18	4.91	0.40	NA	NA	17.56	17.29	000
92998		A	Pul art balloon repr, percut	5.99	NA	NA	2.74	2.34	0.28	NA	NA	9.01	8.61	ZZZ
93000		A	Electrocardiogram, complete	0.17	0.35	0.47	0.35	0.47	0.03	0.55	0.67	0.55	0.67	XXX
93005		A	Electrocardiogram, tracing	0.00	0.28	0.41	NA	NA	0.02	0.30	0.43	NA	NA	XXX
93010		A	Electrocardiogram report	0.17	0.07	0.06	0.07	0.06	0.01	0.25	0.24	0.25	0.24	XXX
93012		A	Transmission of ecg	0.00	1.65	4.92	NA	NA	0.18	1.83	5.10	NA	NA	XXX
93014		A	Report on transmitted ecg	0.52	0.21	0.20	0.21	0.20	0.02	0.75	0.74	0.75	0.74	XXX
93015		A	Cardiovascular stress test	0.75	1.93	1.95	1.93	1.95	0.14	2.82	2.84	2.82	2.84	XXX
93016		A	Cardiovascular stress test	0.45	0.23	0.19	0.23	0.19	0.02	0.70	0.66	0.70	0.66	XXX
93017		A	Cardiovascular stress test	0.00	1.55	1.65	NA	NA	0.11	1.66	1.76	NA	NA	XXX
93018		A	Cardiovascular stress test	0.30	0.15	0.12	0.15	0.12	0.01	0.46	0.43	0.46	0.43	XXX
93024		A	Cardiac drug stress test	1.17	2.42	1.78	NA	NA	0.12	3.71	3.07	NA	NA	XXX
93024	26	A	Cardiac drug stress test	1.17	0.59	0.49	0.59	0.49	0.04	1.80	1.70	1.80	1.70	XXX
93024	TC	A	Cardiac drug stress test	0.00	1.84	1.30	NA	NA	0.08	1.92	1.38	NA	NA	XXX
93025		A	Microvolt t-wave assess	0.75	3.94	6.68	NA	NA	0.14	4.83	7.57	NA	NA	XXX
93025	26	A	Microvolt t-wave assess	0.75	0.38	0.31	0.38	0.31	0.03	1.16	1.09	1.16	1.09	XXX
93025	TC	A	Microvolt t-wave assess	0.00	3.56	6.37	NA	NA	0.11	3.67	6.48	NA	NA	XXX
93040		A	Rhythm ECG with report	0.16	0.19	0.20	0.19	0.20	0.02	0.37	0.38	0.37	0.38	XXX
93041		A	Rhythm ECG, tracing	0.00	0.14	0.15	NA	NA	0.01	0.15	0.16	NA	NA	XXX
93042		A	Rhythm ECG, report	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
93224		A	ECG monitor/report, 24 hrs	0.52	1.99	3.21	1.99	3.21	0.24	2.75	3.97	2.75	3.97	XXX
93225		A	ECG monitor/record, 24 hrs	0.00	1.08	1.20	NA	NA	0.08	1.16	1.28	NA	NA	XXX
93226		A	ECG monitor/report, 24 hrs	0.00	0.62	1.79	NA	NA	0.14	0.76	1.93	NA	NA	XXX
93227		A	ECG monitor/review, 24 hrs	0.52	0.28	0.21	0.28	0.21	0.02	0.82	0.75	0.82	0.75	XXX
93230		A	ECG monitor/report, 24 hrs	0.52	1.79	3.37	1.79	3.37	0.26	2.57	4.15	2.57	4.15	XXX
93231		A	Ecg monitor/record, 24 hrs	0.00	0.94	1.38	NA	NA	0.11	1.05	1.49	NA	NA	XXX
93232		A	ECG monitor/report, 24 hrs	0.00	0.62	1.79	NA	NA	0.13	0.75	1.92	NA	NA	XXX
93233		A	ECG monitor/review, 24 hrs	0.52	0.23	0.20	0.23	0.20	0.02	0.77	0.74	0.77	0.74	XXX
93235		A	ECG monitor/report, 24 hrs	0.45	0.21	2.14	0.21	2.14	0.16	0.82	2.75	0.82	2.75	XXX
93236		C	ECG monitor/report, 24 hrs	0.00	0.00	0.00	NA	NA	0.00	0.00	0.00	NA	NA	XXX
93237		A	ECG monitor/review, 24 hrs	0.45	0.21	0.17	0.21	0.17	0.02	0.68	0.64	0.68	0.64	XXX
93268		A	ECG record/review	0.52	0.83	5.79	0.83	5.79	0.28	1.63	6.59	1.63	6.59	XXX
93270		A	ECG recording	0.00	0.31	1.01	NA	NA	0.08	0.39	1.09	NA	NA	XXX
93271		A	Ecg/monitoring and analysis	0.00	1.99	5.01	NA	NA	0.18	2.17	5.19	NA	NA	XXX
93272		A	Ecg/review, interpret only	0.52	0.24	0.20	0.24	0.20	0.02	0.78	0.74	0.78	0.74	XXX
93278		A	ECG/signal-averaged	0.25	0.59	1.09	NA	NA	0.12	0.96	1.46	NA	NA	XXX
93278	26	A	ECG/signal-averaged	0.25	0.10	0.10	0.10	0.10	0.01	0.36	0.36	0.36	0.36	XXX
93278	TC	A	ECG/signal-averaged	0.00	0.49	0.99	NA	NA	0.11	0.60	1.10	NA	NA	XXX
93303		A	Echo transthoracic	1.30	4.65	4.42	NA	NA	0.27	6.22	5.99	NA	NA	XXX
93303	26	A	Echo transthoracic	1.30	0.57	0.50	0.57	0.50	0.04	1.91	1.84	1.91	1.84	XXX
93303	TC	A	Echo transthoracic	0.00	4.07	3.91	NA	NA	0.23	4.30	4.14	NA	NA	XXX
93304		A	Echo transthoracic	0.75	3.18	2.46	NA	NA	0.15	4.08	3.36	NA	NA	XXX
93304	26	A	Echo transthoracic	0.75	0.31	0.29	0.31	0.29	0.02	1.08	1.06	1.08	1.06	XXX
93304	TC	A	Echo transthoracic	0.00	2.87	2.17	NA	NA	0.13	3.00	2.30	NA	NA	XXX
93307		A	Echo exam of heart	0.92	3.78	4.10	NA	NA	0.26	4.96	5.28	NA	NA	XXX
93307	26	A	Echo exam of heart	0.92	0.46	0.38	0.46	0.38	0.03	1.41	1.33	1.41	1.33	XXX
93307	TC	A	Echo exam of heart	0.00	3.32	3.73	NA	NA	0.23	3.55	3.96	NA	NA	XXX
93308		A	Echo exam of heart	0.53	2.65	2.27	NA	NA	0.15	3.33	2.95	NA	NA	XXX
93308	26	A	Echo exam of heart	0.53	0.27	0.22	0.27	0.22	0.02	0.82	0.77	0.82	0.77	XXX
93308	TC	A	Echo exam of heart	0.00	2.38	2.05	NA	NA	0.13	2.51	2.18	NA	NA	XXX
93312		A	Echo transesophageal	2.20	7.55	5.32	NA	NA	0.37	10.12	7.89	NA	NA	XXX
93312	26	A	Echo transesophageal	2.20	1.01	0.85	1.01	0.85	0.08	3.29	3.13	3.29	3.13	XXX
93312	TC	A	Echo transesophageal	0.00	6.54	4.47	NA	NA	0.29	6.83	4.76	NA	NA	XXX
93313		A	Echo transesophageal	0.95	NA	NA	0.14	0.19	0.06	NA	NA	1.15	1.20	XXX
93314		A	Echo transesophageal	1.25	7.28	5.01	NA	NA	0.33	8.86	6.59	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
93314	26	A	Echo transesophageal	1.25	0.57	0.50	0.57	0.50	0.04	1.86	1.79	1.86	1.79	XXX
93314	TC	A	Echo transesophageal	0.00	6.71	4.51	NA	NA	0.29	7.00	4.80	NA	NA	XXX
93315		C	Echo transesophageal	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93315	26	A	Echo transesophageal	2.78	1.32	1.09	1.32	1.09	0.09	4.19	3.96	4.19	3.96	XXX
93315	TC	C	Echo transesophageal	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93316		A	Echo transesophageal	0.95	NA	NA	0.26	0.25	0.05	NA	NA	1.26	1.25	XXX
93317		C	Echo transesophageal	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93317	26	A	Echo transesophageal	1.83	0.74	0.69	0.74	0.69	0.08	2.65	2.60	2.65	2.60	XXX
93317	TC	C	Echo transesophageal	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93318		C	Echo transesophageal intraop	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93318	26	A	Echo transesophageal intraop	2.20	0.89	0.58	0.89	0.58	0.14	3.23	2.92	3.23	2.92	XXX
93318	TC	C	Echo transesophageal intraop	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93320		A	Doppler echo exam, heart	0.38	1.70	1.81	1.70	1.81	0.13	2.21	2.32	2.21	2.32	ZZZ
93320	26	A	Doppler echo exam, heart	0.38	0.19	0.16	0.19	0.16	0.01	0.58	0.55	0.58	0.55	ZZZ
93320	TC	A	Doppler echo exam, heart	0.00	1.51	1.66	1.51	1.66	0.12	1.63	1.78	1.63	1.78	ZZZ
93321		A	Doppler echo exam, heart	0.15	0.62	1.03	0.62	1.03	0.09	0.86	1.27	0.86	1.27	ZZZ
93321	26	A	Doppler echo exam, heart	0.15	0.08	0.07	0.08	0.07	0.01	0.24	0.23	0.24	0.23	ZZZ
93321	TC	A	Doppler echo exam, heart	0.00	0.55	0.97	0.55	0.97	0.08	0.63	1.05	0.63	1.05	ZZZ
93325		A	Doppler color flow add-on	0.07	0.67	2.37	0.67	2.37	0.22	0.96	2.66	0.96	2.66	ZZZ
93325	26	A	Doppler color flow add-on	0.07	0.04	0.03	0.04	0.03	0.01	0.12	0.11	0.12	0.11	ZZZ
93325	TC	A	Doppler color flow add-on	0.00	0.64	2.34	0.64	2.34	0.21	0.85	2.55	0.85	2.55	ZZZ
93350		A	Echo transthoracic	1.48	5.16	3.04	NA	NA	0.18	6.82	4.70	NA	NA	XXX
93350	26	A	Echo transthoracic	1.48	0.78	0.62	0.78	0.62	0.05	2.31	2.15	2.31	2.15	XXX
93350	TC	A	Echo transthoracic	0.00	4.38	2.42	NA	NA	0.13	4.51	2.55	NA	NA	XXX
93501		A	Right heart catheterization	3.02	23.11	19.32	23.11	19.32	1.26	27.39	23.60	27.39	23.60	000
93501	26	A	Right heart catheterization	3.02	1.61	1.27	1.61	1.27	0.21	4.84	4.50	4.84	4.50	000
93501	TC	A	Right heart catheterization	0.00	21.49	18.05	21.49	18.05	1.05	22.54	19.10	22.54	19.10	000
93503		A	Insert/place heart catheter	2.91	NA	NA	0.49	0.63	0.20	NA	NA	3.60	3.74	000
93505		A	Biopsy of heart lining	4.37	25.12	9.03	25.12	9.03	0.46	29.95	13.86	29.95	13.86	000
93505	26	A	Biopsy of heart lining	4.37	2.33	1.84	2.33	1.84	0.30	7.00	6.51	7.00	6.51	000
93505	TC	A	Biopsy of heart lining	0.00	22.78	7.18	22.78	7.18	0.16	22.94	7.34	22.94	7.34	000
93508		A	Cath placement, angiography	4.09	18.46	15.63	18.46	15.63	0.93	23.48	20.65	23.48	20.65	000
93508	26	A	Cath placement, angiography	4.09	2.23	2.12	2.23	2.12	0.28	6.60	6.49	6.60	6.49	000
93508	TC	A	Cath placement, angiography	0.00	16.23	13.51	16.23	13.51	0.65	16.88	14.16	16.88	14.16	000
93510		C	Left heart catheterization	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93510	26	A	Left heart catheterization	4.32	2.35	2.22	2.35	2.22	0.30	6.97	6.84	6.97	6.84	000
93510	TC	C	Left heart catheterization	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93511		C	Left heart catheterization	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93511	26	A	Left heart catheterization	5.02	2.66	2.50	2.66	2.50	0.35	8.03	7.87	8.03	7.87	000
93511	TC	C	Left heart catheterization	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93514		C	Left heart catheterization	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93514	26	A	Left heart catheterization	7.04	3.22	3.15	3.22	3.15	0.49	10.75	10.68	10.75	10.68	000
93514	TC	C	Left heart catheterization	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93524		C	Left heart catheterization	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93524	26	A	Left heart catheterization	6.94	3.72	3.31	3.72	3.31	0.48	11.14	10.73	11.14	10.73	000
93524	TC	C	Left heart catheterization	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93526		C	Rt & Lt heart catheters	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93526	26	A	Rt & Lt heart catheters	5.98	3.25	2.92	3.25	2.92	0.42	9.65	9.32	9.65	9.32	000
93526	TC	C	Rt & Lt heart catheters	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93527		C	Rt & Lt heart catheters	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93527	26	A	Rt & Lt heart catheters	7.27	3.99	3.48	3.99	3.48	0.51	11.77	11.26	11.77	11.26	000
93527	TC	C	Rt & Lt heart catheters	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93528		C	Rt & Lt heart catheters	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93528	26	A	Rt & Lt heart catheters	8.99	4.69	4.20	4.69	4.20	0.62	14.30	13.81	14.30	13.81	000
93528	TC	C	Rt & Lt heart catheters	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93529		C	Rt, lt heart catheterization	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000

93529	26	A	Rt, lt heart catheterization	4.79	2.62	2.36	2.62	2.36	0.33	7.74	7.48	7.74	7.48	000
93529	TC	C	Rt, lt heart catheterization	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93530		C	Rt heart cath, congenital	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93530	26	A	Rt heart cath, congenital	4.22	1.84	1.91	1.84	1.91	0.29	6.35	6.42	6.35	6.42	000
93530	TC	C	Rt heart cath, congenital	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93531		C	R & l heart cath, congenital	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93531	26	A	R & l heart cath, congenital	8.34	3.72	3.62	3.72	3.62	0.58	12.64	12.54	12.64	12.54	000
93531	TC	C	R & l heart cath, congenital	0.00	NA	NA	0.00	0.00	0.00	NA	NA	0.00	0.00	000
93532		C	R & l heart cath, congenital	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93532	26	A	R & l heart cath, congenital	9.99	4.60	4.34	4.60	4.34	0.69	15.28	15.02	15.28	15.02	000
93532	TC	C	R & l heart cath, congenital	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93533		C	R & l heart cath, congenital	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93533	26	A	R & l heart cath, congenital	6.69	3.03	2.85	3.03	2.85	0.47	10.19	10.01	10.19	10.01	000
93533	TC	C	R & l heart cath, congenital	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93539		A	Injection, cardiac cath	0.40	NA	NA	0.22	0.18	0.01	NA	NA	0.63	0.59	000
93540		A	Injection, cardiac cath	0.43	NA	NA	0.24	0.19	0.01	NA	NA	0.68	0.63	000
93541		A	Injection for lung angiogram	0.29	NA	NA	0.15	0.12	0.01	NA	NA	0.45	0.42	000
93542		A	Injection for heart x-rays	0.29	NA	NA	0.15	0.12	0.01	NA	NA	0.45	0.42	000
93543		A	Injection for heart x-rays	0.29	NA	NA	0.16	0.12	0.01	NA	NA	0.46	0.42	000
93544		A	Injection for aortography	0.25	NA	NA	0.14	0.11	0.01	NA	NA	0.40	0.37	000
93545		A	Inject for coronary x-rays	0.40	NA	NA	0.22	0.18	0.01	NA	NA	0.63	0.59	000
93555		A	Imaging, cardiac cath	0.81	0.65	5.11	NA	NA	0.37	1.83	6.29	NA	NA	XXX
93555	26	A	Imaging, cardiac cath	0.81	0.44	0.35	0.44	0.35	0.03	1.28	1.19	1.28	1.19	XXX
93555	TC	A	Imaging, cardiac cath	0.00	0.21	4.76	NA	NA	0.34	0.55	5.10	NA	NA	XXX
93556		A	Imaging, cardiac cath	0.83	0.93	7.89	NA	NA	0.54	2.30	9.26	NA	NA	XXX
93556	26	A	Imaging, cardiac cath	0.83	0.45	0.35	0.45	0.35	0.03	1.31	1.21	1.31	1.21	XXX
93556	TC	A	Imaging, cardiac cath	0.00	0.48	7.54	NA	NA	0.51	0.99	8.05	NA	NA	XXX
93561		A	Cardiac output measurement	0.50	NA	NA	NA	NA	0.08	NA	NA	NA	NA	000
93561	26	A	Cardiac output measurement	0.50	0.14	0.16	0.14	0.16	0.02	0.66	0.68	0.66	0.68	000
93561	TC	A	Cardiac output measurement	0.00	NA	NA	NA	NA	0.06	NA	NA	NA	NA	000
93562		A	Cardiac output measurement	0.16	NA	NA	NA	NA	0.05	NA	NA	NA	NA	000
93562	26	A	Cardiac output measurement	0.16	0.03	0.05	0.03	0.05	0.01	0.20	0.22	0.20	0.22	000
93562	TC	A	Cardiac output measurement	0.00	NA	NA	NA	NA	0.04	NA	NA	NA	NA	000
93571		A	Heart flow reserve measure	1.80	NA	NA	NA	NA	0.30	NA	NA	NA	NA	ZZZ
93571	26	A	Heart flow reserve measure	1.80	0.98	0.76	0.98	0.76	0.06	2.84	2.62	2.84	2.62	ZZZ
93571	TC	A	Heart flow reserve measure	0.00	NA	NA	NA	NA	0.24	NA	NA	NA	NA	ZZZ
93572		C	Heart flow reserve measure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93572	26	A	Heart flow reserve measure	1.44	0.74	0.56	0.74	0.56	0.04	2.22	2.04	2.22	2.04	ZZZ
93572	TC	C	Heart flow reserve measure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93580		A	Transcath closure of asd	17.97	NA	NA	9.50	7.91	1.25	NA	NA	28.72	27.13	000
93581		A	Transcath closure of vsd	24.39	NA	NA	13.17	10.34	1.71	NA	NA	39.27	36.44	000
93600		A	Bundle of His recording	2.12	NA	NA	NA	NA	0.29	NA	NA	NA	NA	000
93600	26	A	Bundle of His recording	2.12	1.09	0.90	1.09	0.90	0.16	3.37	3.18	3.37	3.18	000
93600	TC	A	Bundle of His recording	0.00	NA	NA	NA	NA	0.13	NA	NA	NA	NA	000
93602		A	Intra-atrial recording	2.12	NA	NA	NA	NA	0.24	NA	NA	NA	NA	000
93602	26	A	Intra-atrial recording	2.12	1.07	0.88	1.07	0.88	0.17	3.36	3.17	3.36	3.17	000
93602	TC	A	Intra-atrial recording	0.00	NA	NA	NA	NA	0.07	NA	NA	NA	NA	000
93603		A	Right ventricular recording	2.12	NA	NA	NA	NA	0.29	NA	NA	NA	NA	000
93603	26	A	Right ventricular recording	2.12	1.06	0.87	1.06	0.87	0.18	3.36	3.17	3.36	3.17	000
93603	TC	A	Right ventricular recording	0.00	NA	NA	NA	NA	0.11	NA	NA	NA	NA	000
93609		A	Map tachycardia, add-on	4.99	NA	NA	NA	NA	0.52	NA	NA	NA	NA	ZZZ
93609	26	A	Map tachycardia, add-on	4.99	2.68	2.13	2.68	2.13	0.35	8.02	7.47	8.02	7.47	ZZZ
93609	TC	A	Map tachycardia, add-on	0.00	NA	NA	NA	NA	0.17	NA	NA	NA	NA	ZZZ
93610		A	Intra-atrial pacing	3.02	NA	NA	NA	NA	0.34	NA	NA	NA	NA	000
93610	26	A	Intra-atrial pacing	3.02	1.50	1.25	1.50	1.25	0.24	4.76	4.51	4.76	4.51	000
93610	TC	A	Intra-atrial pacing	0.00	NA	NA	NA	NA	0.10	NA	NA	NA	NA	000
93612		A	Intraventricular pacing	3.02	NA	NA	NA	NA	0.36	NA	NA	NA	NA	000
93612	26	A	Intraventricular pacing	3.02	1.45	1.23	1.45	1.23	0.25	4.72	4.50	4.72	4.50	000
93612	TC	A	Intraventricular pacing	0.00	NA	NA	NA	NA	0.11	NA	NA	NA	NA	000
93613		A	Electrophys map 3d, add-on	6.99	NA	NA	3.78	3.02	0.49	NA	NA	11.26	10.50	ZZZ
93615		A	Esophageal recording	0.99	NA	NA	NA	NA	0.05	NA	NA	NA	NA	000
93615	26	A	Esophageal recording	0.99	0.49	0.33	0.49	0.33	0.03	1.51	1.35	1.51	1.35	000
93615	TC	A	Esophageal recording	0.00	NA	NA	NA	NA	0.02	NA	NA	NA	NA	000
93616		C	Esophageal recording	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93616	26	A	Esophageal recording	1.49	0.37	0.42	0.37	0.42	0.09	1.95	2.00	1.95	2.00	000
93616	TC	C	Esophageal recording	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
93618		A	Heart rhythm pacing	4.25	NA	NA	NA	NA	0.54	NA	NA	NA	NA	000
93618	26	A	Heart rhythm pacing	4.25	2.32	1.83	2.32	1.83	0.30	6.87	6.38	6.87	6.38	000
93618	TC	A	Heart rhythm pacing	0.00	NA	NA	NA	NA	0.24	NA	NA	NA	NA	000
93619		A	Electrophysiology evaluation	7.31	NA	NA	NA	NA	0.98	NA	NA	NA	NA	000
93619	26	A	Electrophysiology evaluation	7.31	3.87	3.35	3.87	3.35	0.51	11.69	11.17	11.69	11.17	000
93619	TC	A	Electrophysiology evaluation	0.00	NA	NA	NA	NA	0.47	NA	NA	NA	NA	000
93620		C	Electrophysiology evaluation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93620	26	A	Electrophysiology evaluation	11.57	6.24	5.19	6.24	5.19	0.80	18.61	17.56	18.61	17.56	000
93620	TC	C	Electrophysiology evaluation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93621		C	Electrophysiology evaluation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93621	26	A	Electrophysiology evaluation	2.10	1.13	0.90	1.13	0.90	0.15	3.38	3.15	3.38	3.15	ZZZ
93621	TC	C	Electrophysiology evaluation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93622		C	Electrophysiology evaluation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93622	26	A	Electrophysiology evaluation	3.10	1.68	1.33	1.68	1.33	0.22	5.00	4.65	5.00	4.65	ZZZ
93622	TC	C	Electrophysiology evaluation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93623		C	Stimulation, pacing heart	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93623	26	A	Stimulation, pacing heart	2.85	1.54	1.22	1.54	1.22	0.20	4.59	4.27	4.59	4.27	ZZZ
93623	TC	C	Stimulation, pacing heart	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93624		A	Electrophysiologic study	4.80	NA	NA	.	4.18	0.46	NA	NA	5.26	9.44	000
93624	26	A	Electrophysiologic study	4.80	2.63	2.30	2.63	2.30	0.33	7.76	7.43	7.76	7.43	000
93624	TC	A	Electrophysiologic study	0.00	NA	NA	.	1.98	0.13	NA	NA	0.13	2.11	000
93631		C	Heart pacing, mapping	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93631	26	A	Heart pacing, mapping	7.59	2.74	2.76	2.74	2.76	0.97	11.30	11.32	11.30	11.32	000
93631	TC	C	Heart pacing, mapping	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	000
93640		A	Evaluation heart device	3.51	NA	NA	NA	NA	0.66	NA	NA	NA	NA	000
93640	26	A	Evaluation heart device	3.51	1.89	1.49	1.89	1.49	0.24	5.64	5.24	5.64	5.24	000
93640	TC	A	Evaluation heart device	0.00	NA	NA	NA	NA	0.42	NA	NA	NA	NA	000
93641		A	Electrophysiology evaluation	5.92	NA	NA	NA	NA	0.83	NA	NA	NA	NA	000
93641	26	A	Electrophysiology evaluation	5.92	3.18	2.53	3.18	2.53	0.41	9.51	8.86	9.51	8.86	000
93641	TC	A	Electrophysiology evaluation	0.00	NA	NA	NA	NA	0.42	NA	NA	NA	NA	000
93642		A	Electrophysiology evaluation	4.88	7.45	8.90	7.45	8.90	0.57	12.90	14.35	12.90	14.35	000
93642	26	A	Electrophysiology evaluation	4.88	2.63	2.32	2.63	2.32	0.15	7.66	7.35	7.66	7.35	000
93642	TC	A	Electrophysiology evaluation	0.00	4.81	6.58	4.81	6.58	0.42	5.23	7.00	5.23	7.00	000
93650		A	Ablate heart dysrhythm focus	10.49	NA	NA	5.97	4.82	0.73	NA	NA	17.19	16.04	000
93651		A	Ablate heart dysrhythm focus	16.23	NA	NA	8.75	6.93	1.13	NA	NA	26.11	24.29	000
93652		A	Ablate heart dysrhythm focus	17.65	NA	NA	9.52	7.54	1.23	NA	NA	28.40	26.42	000
93660		A	Tilt table evaluation	1.89	3.05	2.57	3.05	2.57	0.08	5.02	4.54	5.02	4.54	000
93660	26	A	Tilt table evaluation	1.89	0.99	0.80	0.99	0.80	0.06	2.94	2.75	2.94	2.75	000
93660	TC	A	Tilt table evaluation	0.00	2.06	1.78	2.06	1.78	0.02	2.08	1.80	2.08	1.80	000
93662		C	Intracardiac ecg (ice)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93662	26	A	Intracardiac ecg (ice)	2.80	1.51	1.21	1.51	1.21	0.09	4.40	4.10	4.40	4.10	ZZZ
93662	TC	C	Intracardiac ecg (ice)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
93701		A	Bioimpedance, thoracic	0.17	0.70	0.91	NA	NA	0.02	0.89	1.10	NA	NA	XXX
93701	26	A	Bioimpedance, thoracic	0.17	0.06	0.07	0.06	0.07	0.01	0.24	0.25	0.24	0.25	XXX
93701	TC	A	Bioimpedance, thoracic	0.00	0.64	0.84	NA	NA	0.01	0.65	0.85	NA	NA	XXX
93720		A	Total body plethysmography	0.17	1.30	0.90	1.30	0.90	0.07	1.54	1.14	1.54	1.14	XXX
93721		A	Plethysmography tracing	0.00	1.15	0.82	NA	NA	0.06	1.21	0.88	NA	NA	XXX
93722		A	Plethysmography report	0.17	0.04	0.05	0.04	0.05	0.01	0.22	0.23	0.22	0.23	XXX
93724		A	Analyze pacemaker system	4.88	3.49	5.28	3.49	5.28	0.39	8.76	10.55	8.76	10.55	000
93724	26	A	Analyze pacemaker system	4.88	2.58	2.08	2.58	2.08	0.15	7.61	7.11	7.61	7.11	000
93724	TC	A	Analyze pacemaker system	0.00	0.92	3.20	0.92	3.20	0.24	1.16	3.44	1.16	3.44	000
93727		A	Analyze ilr system	0.52	0.65	0.31	0.65	0.31	0.02	1.19	0.85	1.19	0.85	XXX
93731		A	Analyze pacemaker system	0.45	0.80	0.70	NA	NA	0.05	1.30	1.20	NA	NA	XXX
93731	26	A	Analyze pacemaker system	0.45	0.24	0.19	0.24	0.19	0.01	0.70	0.65	0.70	0.65	XXX
93731	TC	A	Analyze pacemaker system	0.00	0.56	0.51	NA	NA	0.04	0.60	0.55	NA	NA	XXX
93732		A	Analyze pacemaker system	0.92	1.17	0.94	NA	NA	0.07	2.16	1.93	NA	NA	XXX

93732	26	A	Analyze pacemaker system	0.92	0.49	0.39	0.49	0.39	0.03	1.44	1.34	1.44	1.34	XXX
93732	TC	A	Analyze pacemaker system	0.00	0.68	0.55	NA	NA	0.04	0.72	0.59	NA	NA	XXX
93733		A	Telephone analy, pacemaker	0.17	0.32	0.68	NA	NA	0.07	0.56	0.92	NA	NA	XXX
93733	26	A	Telephone analy, pacemaker	0.17	0.09	0.08	0.09	0.08	0.01	0.27	0.26	0.27	0.26	XXX
93733	TC	A	Telephone analy, pacemaker	0.00	0.23	0.61	NA	NA	0.06	0.29	0.67	NA	NA	XXX
93734		A	Analyze pacemaker system	0.38	0.71	0.55	NA	NA	0.03	1.12	0.96	NA	NA	XXX
93734	26	A	Analyze pacemaker system	0.38	0.20	0.16	0.20	0.16	0.01	0.59	0.55	0.59	0.55	XXX
93734	TC	A	Analyze pacemaker system	0.00	0.51	0.39	NA	NA	0.02	0.53	0.41	NA	NA	XXX
93735		A	Analyze pacemaker system	0.74	0.97	0.78	NA	NA	0.06	1.77	1.58	NA	NA	XXX
93735	26	A	Analyze pacemaker system	0.74	0.39	0.31	0.39	0.31	0.02	1.15	1.07	1.15	1.07	XXX
93735	TC	A	Analyze pacemaker system	0.00	0.58	0.48	NA	NA	0.04	0.62	0.52	NA	NA	XXX
93736		A	Telephonic analy, pacemaker	0.15	0.28	0.59	NA	NA	0.07	0.50	0.81	NA	NA	XXX
93736	26	A	Telephonic analy, pacemaker	0.15	0.08	0.07	0.08	0.07	0.01	0.24	0.23	0.24	0.23	XXX
93736	TC	A	Telephonic analy, pacemaker	0.00	0.21	0.53	NA	NA	0.06	0.27	0.59	NA	NA	XXX
93740		B	Temperature gradient studies	0.16	0.04	0.15	NA	NA	0.02	0.22	0.33	NA	NA	XXX
93740	26	B	Temperature gradient studies	0.16	0.04	0.04	0.04	0.04	0.01	0.21	0.21	0.21	0.21	XXX
93740	TC	B	Temperature gradient studies	0.00	0.00	0.11	NA	NA	0.01	0.01	0.12	NA	NA	XXX
93741		A	Analyze ht pace device sngl	0.80	1.04	1.00	NA	NA	0.07	1.91	1.87	NA	NA	XXX
93741	26	A	Analyze ht pace device sngl	0.80	0.43	0.34	0.43	0.34	0.03	1.26	1.17	1.26	1.17	XXX
93741	TC	A	Analyze ht pace device sngl	0.00	0.60	0.65	NA	NA	0.04	0.64	0.69	NA	NA	XXX
93742		A	Analyze ht pace device sngl	0.91	1.17	1.07	NA	NA	0.07	2.15	2.05	NA	NA	XXX
93742	26	A	Analyze ht pace device sngl	0.91	0.50	0.40	0.50	0.40	0.03	1.44	1.34	1.44	1.34	XXX
93742	TC	A	Analyze ht pace device sngl	0.00	0.68	0.67	NA	NA	0.04	0.72	0.71	NA	NA	XXX
93743		A	Analyze ht pace device dual	1.03	1.21	1.15	NA	NA	0.07	2.31	2.25	NA	NA	XXX
93743	26	A	Analyze ht pace device dual	1.03	0.56	0.44	0.56	0.44	0.03	1.62	1.50	1.62	1.50	XXX
93743	TC	A	Analyze ht pace device dual	0.00	0.65	0.71	NA	NA	0.04	0.69	0.75	NA	NA	XXX
93744		A	Analyze ht pace device dual	1.18	1.36	1.19	NA	NA	0.08	2.62	2.45	NA	NA	XXX
93744	26	A	Analyze ht pace device dual	1.18	0.64	0.51	0.64	0.51	0.04	1.86	1.73	1.86	1.73	XXX
93744	TC	A	Analyze ht pace device dual	0.00	0.73	0.69	NA	NA	0.04	0.77	0.73	NA	NA	XXX
93745		C	Set-up cardiovert-defibrill	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93745	26	C	Set-up cardiovert-defibrill	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93745	TC	C	Set-up cardiovert-defibrill	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93770		B	Measure venous pressure	0.16	0.04	0.07	NA	NA	0.02	0.22	0.25	NA	NA	XXX
93770	26	B	Measure venous pressure	0 16	0.04	0.05	0.04	0.05	0.01	0.21	0.22	0.21	0.22	XXX
93770	TC	B	Measure venous pressure	0.00	0.00	0.02	NA	NA	0.01	0.01	0.03	NA	NA	XXX
93784		A	Ambulatory BP monitoring	0.38	1.36	1.50	1.36	1.50	0.03	1.77	1.91	1.77	1.91	XXX
93786		A	Ambulatory BP recording	0.00	1.09	0.96	NA	NA	0.01	1.10	0.97	NA	NA	XXX
93788		A	Ambulatory BP analysis	0.00	0.73	0.57	NA	NA	0.01	0.74	0.58	NA	NA	XXX
93790		A	Review/report BP recording	0.38	0.14	0.13	0.14	0.13	0.01	0.53	0.52	0.53	0.52	XXX
93797		A	Cardiac rehab	0.18	0.32	0.31	0.09	0.08	0.01	0.51	0.50	0.28	0.27	000
93798		A	Cardiac rehab/monitor	0.28	0.44	0.46	0.13	0.12	0.01	0.73	0.75	0.42	0.41	000
93799		C	Cardiovascular procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93799	26	C	Cardiovascular procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93799	TC	C	Cardiovascular procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
93875		A	Extracranial study	0.22	2.65	2.41	NA	NA	0.12	2.99	2.75	NA	NA	XXX
93875	26	A	Extracranial study	0.22	0.08	0.08	0.08	0.08	0.01	0.31	0.31	0.31	0.31	XXX
93875	TC	A	Extracranial study	0.00	2.57	2.33	NA	NA	0.11	2.68	2.44	NA	NA	XXX
93880		A	Extracranial study	0.60	6.23	5.72	NA	NA	0.39	7.22	6.71	NA	NA	XXX
93880	26	A	Extracranial study	0.60	0.21	0.20	0.21	0.20	0.04	0.85	0.84	0.85	0.84	XXX
93880	TC	A	Extracranial study	0.00	6.03	5.52	NA	NA	0.35	6.38	5.87	NA	NA	XXX
93882		A	Extracranial study	0.40	4.17	3.67	NA	NA	0.26	4.83	4.33	NA	NA	XXX
93882	26	A	Extracranial study	0.40	0.12	0.14	0.12	0.14	0.04	0.56	0.58	0.56	0.58	XXX
93882	TC	A	Extracranial study	0.00	4.05	3.53	NA	NA	0.22	4.27	3.75	NA	NA	XXX
93886		A	Intracranial study	0.94	7.31	6.88	NA	NA	0.45	8.70	8.27	NA	NA	XXX
93886	26	A	Intracranial study	0.94	0.31	0.36	0.31	0.36	0.06	1.31	1.36	1.31	1.36	XXX
93886	TC	A	Intracranial study	0.00	7.00	6.53	NA	NA	0.39	7.39	6.92	NA	NA	XXX
93888		A	Intracranial study	0.62	4.91	4.41	NA	NA	0.32	5.85	5.35	NA	NA	XXX
93888	26	A	Intracranial study	0.62	0.20	0.22	0.20	0.22	0.05	0.87	0.89	0.87	0.89	XXX
93888	TC	A	Intracranial study	0.00	4.71	4.19	NA	NA	0.27	4.98	4.46	NA	NA	XXX
93890		A	Tcd, vasoreactivity study	1.00	6.47	5.29	NA	NA	0.45	7.92	6.74	NA	NA	XXX
93890	26	A	Tcd, vasoreactivity study	1.00	0.33	0.38	0.33	0.38	0.06	1.39	1.44	1.39	1.44	XXX
93890	TC	A	Tcd, vasoreactivity study	0.00	6.13	4.91	NA	NA	0.39	6.52	5.30	NA	NA	XXX
93892		A	Tcd, emboli detect w/o inj	1.15	7.00	5.62	NA	NA	0.45	8.60	7.22	NA	NA	XXX
93892	26	A	Tcd, emboli detect w/o inj	1.15	0.38	0.44	0.38	0.44	0.06	1.59	1.65	1.59	1.65	XXX
93892	TC	A	Tcd, emboli detect w/o inj	0.00	6.62	5.18	NA	NA	0.39	7.01	5.57	NA	NA	XXX
93893		A	Tcd, emboli detect w/inj	1.15	6.67	5.44	NA	NA	0.45	8.27	7.04	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
93893	26	A	Tcd, emboli detect w/inj	1.15	0.38	0.44	0.38	0.44	0.06	1.59	1.65	1.59	1.65	XXX
93893	TC	A	Tcd, emboli detect w/inj	0.00	6.29	5.00	NA	NA	0.39	6.68	5.39	NA	NA	XXX
93922		A	Extremity study	0.25	3.16	2.80	NA	NA	0.15	3.56	3.20	NA	NA	XXX
93922	26	A	Extremity study	0.25	0.08	0.08	0.08	0.08	0.02	0.35	0.35	0.35	0.35	XXX
93922	TC	A	Extremity study	0.00	3.08	2.72	NA	NA	0.13	3.21	2.85	NA	NA	XXX
93923		A	Extremity study	0.45	4.80	4.22	NA	NA	0.26	5.51	4.93	NA	NA	XXX
93923	26	A	Extremity study	0.45	0.14	0.15	0.14	0.15	0.04	0.63	0.64	0.63	0.64	XXX
93923	TC	A	Extremity study	0.00	4.66	4.08	NA	NA	0.22	4.88	4.30	NA	NA	XXX
93924		A	Extremity study	0.50	6.06	5.11	NA	NA	0.30	6.86	5.91	NA	NA	XXX
93924	26	A	Extremity study	0.50	0.17	0.17	0.17	0.17	0.05	0.72	0.72	0.72	0.72	XXX
93924	TC	A	Extremity study	0.00	5.89	4.94	NA	NA	0.25	6.14	5.19	NA	NA	XXX
93925		A	Lower extremity study	0.58	8.24	7.15	NA	NA	0.39	9.21	8.12	NA	NA	XXX
93925	26	A	Lower extremity study	0.58	0.20	0.20	0.20	0.20	0.04	0.82	0.82	0.82	0.82	XXX
93925	TC	A	Lower extremity study	0.00	8.04	6.95	NA	NA	0.35	8.39	7.30	NA	NA	XXX
93926		A	Lower extremity study	0.39	5.25	4.35	NA	NA	0.27	5.91	5.01	NA	NA	XXX
93926	26	A	Lower extremity study	0.39	0.12	0.13	0.12	0.13	0.04	0.55	0.56	0.55	0.56	XXX
93926	TC	A	Lower extremity study	0.00	5.13	4.22	NA	NA	0.23	5.36	4.45	NA	NA	XXX
93930		A	Upper extremity study	0.46	6.35	5.60	NA	NA	0.41	7.22	6.47	NA	NA	XXX
93930	26	A	Upper extremity study	0.46	0.15	0.16	0.15	0.16	0.04	0.65	0.66	0.65	0.66	XXX
93930	TC	A	Upper extremity study	0.00	6.20	5.44	NA	NA	0.37	6.57	5.81	NA	NA	XXX
93931		A	Upper extremity study	0.31	4.32	3.69	NA	NA	0.27	4.90	4.27	NA	NA	XXX
93931	26	A	Upper extremity study	0.31	0.10	0.10	0.10	0.10	0.03	0.44	0.44	0.44	0.44	XXX
93931	TC	A	Upper extremity study	0.00	4.22	3.59	NA	NA	0.24	4.46	3.83	NA	NA	XXX
93965		A	Extremity study	0.35	3.13	2.88	NA	NA	0.14	3.62	3.37	NA	NA	XXX
93965	26	A	Extremity study	0.35	0.12	0.12	0.12	0.12	0.02	0.49	0.49	0.49	0.49	XXX
93965	TC	A	Extremity study	0.00	3.02	2.76	NA	NA	0.12	3.14	2.88	NA	NA	XXX
93970		A	Extremity study	0.68	6.32	5.51	NA	NA	0.46	7.46	6.65	NA	NA	XXX
93970	26	A	Extremity study	0.68	0.21	0.23	0.21	0.23	0.06	0.95	0.97	0.95	0.97	XXX
93970	TC	A	Extremity study	0.00	6.11	5.29	NA	NA	0.40	6.51	5.69	NA	NA	XXX
93971		A	Extremity study	0.45	4.12	3.72	NA	NA	0.30	4.87	4.47	NA	NA	XXX
93971	26	A	Extremity study	0.45	0.14	0.15	0.14	0.15	0.03	0.62	0.63	0.62	0.63	XXX
93971	TC	A	Extremity study	0.00	3.98	3.58	NA	NA	0.27	4.25	3.85	NA	NA	XXX
93975		A	Vascular study	1.80	8.56	7.86	NA	NA	0.56	10.92	10.22	NA	NA	XXX
93975	26	A	Vascular study	1.80	0.62	0.61	0.62	0.61	0.13	2.55	2.54	2.55	2.54	XXX
93975	TC	A	Vascular study	0.00	7.95	7.26	NA	NA	0.43	8.38	7.69	NA	NA	XXX
93976		A	Vascular study	1.21	4.57	4.39	NA	NA	0.35	6.13	5.95	NA	NA	XXX
93976	26	A	Vascular study	1.21	0.39	0.40	0.39	0.40	0.05	1.65	1.66	1.65	1.66	XXX
93976	TC	A	Vascular study	0.00	4.18	3.99	NA	NA	0.30	4.48	4.29	NA	NA	XXX
93978		A	Vascular study	0.65	6.15	4.92	NA	NA	0.43	7.23	6.00	NA	NA	XXX
93978	26	A	Vascular study	0.65	0.23	0.22	0.23	0.22	0.06	0.94	0.93	0.94	0.93	XXX
93978	TC	A	Vascular study	0.00	5.93	4.70	NA	NA	0.37	6.30	5.07	NA	NA	XXX
93979		A	Vascular study	0.44	4.40	3.51	NA	NA	0.27	5.11	4.22	NA	NA	XXX
93979	26	A	Vascular study	0.44	0.16	0.15	0.16	0.15	0.03	0.63	0.62	0.63	0.62	XXX
93979	TC	A	Vascular study	0.00	4.23	3.35	NA	NA	0.24	4.47	3.59	NA	NA	XXX
93980		A	Penile vascular study	1.25	3.49	3.01	NA	NA	0.42	5.16	4.68	NA	NA	XXX
93980	26	A	Penile vascular study	1.25	0.44	0.42	0.44	0.42	0.08	1.77	1.75	1.77	1.75	XXX
93980	TC	A	Penile vascular study	0.00	3.05	2.59	NA	NA	0.34	3.39	2.93	NA	NA	XXX
93981		A	Penile vascular study	0.44	2.88	2.87	NA	NA	0.33	3.65	3.64	NA	NA	XXX
93981	26	A	Penile vascular study	0.44	0.16	0.15	0.16	0.15	0.02	0.62	0.61	0.62	0.61	XXX
93981	TC	A	Penile vascular study	0.00	2.71	2.73	NA	NA	0.31	3.02	3.04	NA	NA	XXX
93990		A	Doppler flow testing	0.25	5.34	4.33	NA	NA	0.26	5.85	4.84	NA	NA	XXX
93990	26	A	Doppler flow testing	0.25	0.07	0.09	0.07	0.09	0.03	0.35	0.37	0.35	0.37	XXX
93990	TC	A	Doppler flow testing	0.00	5.27	4.24	NA	NA	0.23	5.50	4.47	NA	NA	XXX
94010		A	Breathing capacity test	0.17	0.74	0.69	NA	NA	0.03	0.94	0.89	NA	NA	XXX
94010	26	A	Breathing capacity test	0.17	0.04	0.05	0.04	0.05	0.01	0.22	0.23	0.22	0.23	XXX
94010	TC	A	Breathing capacity test	0.00	0.70	0.64	NA	NA	0.02	0.72	0.66	NA	NA	XXX

94014		A	Patient recorded spirometry	0.52	0.93	0.80	0.93	0.80	0.03	1.48	1.35	1.48	1.35	XXX
94015		A	Patient recorded spirometry	0.00	0.76	0.63	NA	NA	0.01	0.77	0.64	NA	NA	XXX
94016		A	Review patient spirometry	0.52	0.17	0.17	0.17	0.17	0.02	0.71	0.71	0.71	0.71	XXX
94060		A	Evaluation of wheezing	0.31	1.32	1.13	1.32	1.13	0.07	1.70	1.51	1.70	1.51	XXX
94060	26	A	Evaluation of wheezing	0.31	0.08	0.09	0.08	0.09	0.01	0.40	0.41	0.40	0.41	XXX
94060	TC	A	Evaluation of wheezing	0.00	1.24	1.05	1.24	1.05	0.06	1.30	1.11	1.30	1.11	XXX
94070		A	Evaluation of wheezing	0.60	1.01	0.87	NA	NA	0.13	1.74	1.60	NA	NA	XXX
94070	26	A	Evaluation of wheezing	0.60	0.15	0.17	0.15	0.17	0.03	0.78	0.80	0.78	0.80	XXX
94070	TC	A	Evaluation of wheezing	0.00	0.85	0.69	NA	NA	0.10	0.95	0.79	NA	NA	XXX
94150		B	Vital capacity test	0.07	0.48	0.47	NA	NA	0.02	0.57	0.56	NA	NA	XXX
94150	26	B	Vital capacity test	0.07	0.02	0.03	0.02	0.03	0.01	0.10	0.11	0.10	0.11	XXX
94150	TC	B	Vital capacity test	0.00	0.47	0.45	NA	NA	0.01	0.48	0.46	NA	NA	XXX
94200		A	Lung function test (MBC/MVV)	0.11	0.51	0.46	NA	NA	0.03	0.65	0.60	NA	NA	XXX
94200	26	A	Lung function test (MBC/MVV)	0.11	0.03	0.03	0.03	0.03	0.01	0.15	0.15	0.15	0.15	XXX
94200	TC	A	Lung function test (MBC/MVV)	0.00	0.48	0.43	NA	NA	0.02	0.50	0.45	NA	NA	XXX
94240		A	Residual lung capacity	0.26	0.84	0.71	NA	NA	0.06	1.16	1.03	NA	NA	XXX
94240	26	A	Residual lung capacity	0.26	0.07	0.08	0.07	0.08	0.01	0.34	0.35	0.34	0.35	XXX
94240	TC	A	Residual lung capacity	0.00	0.77	0.63	NA	NA	0.05	0.82	0.68	NA	NA	XXX
94250		A	Expired gas collection	0.11	0.57	0.62	NA	NA	0.02	0.70	0.75	NA	NA	XXX
94250	26	A	Expired gas collection	0.11	0.04	0.03	0.04	0.03	0.01	0.16	0.15	0.16	0.15	XXX
94250	TC	A	Expired gas collection	0.00	0.53	0.59	NA	NA	0.01	0.54	0.60	NA	NA	XXX
94260		A	Thoracic gas volume	0.13	0.77	0.63	NA	NA	0.05	0.95	0.81	NA	NA	XXX
94260	26	A	Thoracic gas volume	0.13	0.03	0.04	0.03	0.04	0.01	0.17	0.18	0.17	0.18	XXX
94260	TC	A	Thoracic gas volume	0.00	0.74	0.59	NA	NA	0.04	0.78	0.63	NA	NA	XXX
94350		A	Lung nitrogen washout curve	0.26	0.67	0.74	NA	NA	0.05	0.98	1.05	NA	NA	XXX
94350	26	A	Lung nitrogen washout curve	0.26	0.08	0.08	0.08	0.08	0.01	0.35	0.35	0.35	0.35	XXX
94350	TC	A	Lung nitrogen washout curve	0.00	0.59	0.66	NA	NA	0.04	0.63	0.70	NA	NA	XXX
94360		A	Measure airflow resistance	0.26	0.99	0.77	NA	NA	0.07	1.32	1.10	NA	NA	XXX
94360	26	A	Measure airflow resistance	0.26	0.07	0.08	0.07	0.08	0.01	0.34	0.35	0.34	0.35	XXX
94360	TC	A	Measure airflow resistance	0.00	0.92	0.70	NA	NA	0.06	0.98	0.76	NA	NA	XXX
94370		A	Breath airway closing volume	0.26	0.67	0.71	NA	NA	0.03	0.96	1.00	NA	NA	XXX
94370	26	A	Breath airway closing volume	0.26	0.09	0.08	0.09	0.08	0.01	0.36	0.35	0.36	0.35	XXX
94370	TC	A	Breath airway closing volume	0.00	0.58	0.63	NA	NA	0.02	0.60	0.65	NA	NA	XXX
94375		A	Respiratory flow volume loop	0.31	0.75	0.64	NA	NA	0.03	1.09	0.98	NA	NA	XXX
94375	26	A	Respiratory flow volume loop	0.31	0.08	0.09	0.08	0.09	0.01	0.40	0.41	0.40	0.41	XXX
94375	TC	A	Respiratory flow volume loop	0.00	0.66	0.55	NA	NA	0.02	0.68	0.57	NA	NA	XXX
94400		A	CO2 breathing response curve	0.40	1.03	0.89	NA	NA	0.09	1.52	1.38	NA	NA	XXX
94400	26	A	CO2 breathing response curve	0.40	0.10	0.12	0.10	0.12	0.03	0.53	0.55	0.53	0.55	XXX
94400	TC	A	CO2 breathing response curve	0.00	0.93	0.77	NA	NA	0.06	0.99	0.83	NA	NA	XXX
94450		A	Hypoxia response curve	0.40	1.03	0.90	NA	NA	0.04	1.47	1.34	NA	NA	XXX
94450	26	A	Hypoxia response curve	0.40	0.09	0.11	0.09	0.11	0.02	0.51	0.53	0.51	0.53	XXX
94450	TC	A	Hypoxia response curve	0.00	0.95	0.79	NA	NA	0.02	0.97	0.81	NA	NA	XXX
94452		A	Hast w/report	0.31	1.21	1.07	NA	NA	0.04	1.56	1.42	NA	NA	XXX
94452	26	A	Hast w/report	0.31	0.09	0.09	0.09	0.09	0.02	0.42	0.42	0.42	0.42	XXX
94452	TC	A	Hast w/report	0.00	1.12	0.98	NA	NA	0.02	1.14	1.00	NA	NA	XXX
94453		A	Hast w/oxygen titrate	0.40	1.69	1.56	NA	NA	0.04	2.13	2.00	NA	NA	XXX
94453	26	A	Hast w/oxygen titrate	0.40	0.11	0.12	0.11	0.12	0.02	0.53	0.54	0.53	0.54	XXX
94453	TC	A	Hast w/oxygen titrate	0.00	1.58	1.44	NA	NA	0.02	1.60	1.46	NA	NA	XXX
94620		A	Pulmonary stress test/simple	0.64	0.88	2.09	NA	NA	0.13	1.65	2.86	NA	NA	XXX
94620	26	A	Pulmonary stress test/simple	0.64	0.20	0.20	0.20	0.20	0.03	0.87	0.87	0.87	0.87	XXX
94620	TC	A	Pulmonary stress test/simple	0.00	0.68	1.89	NA	NA	0.10	0.78	1.99	NA	NA	XXX
94621		A	Pulm stress test/complex	1.42	3.18	2.45	NA	NA	0.16	4.76	4.03	NA	NA	XXX
94621	26	A	Pulm stress test/complex	1.42	0.45	0.44	0.45	0.44	0.06	1.93	1.92	1.93	1.92	XXX
94621	TC	A	Pulm stress test/complex	0.00	2.73	2.00	NA	NA	0.10	2.83	2.10	NA	NA	XXX
94640		A	Airway inhalation treatment	0.00	0.37	0.32	NA	NA	0.02	0.39	0.34	NA	NA	XXX
94642		C	Aerosol inhalation treatment	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
94656		A	Initial ventilator mgmt	1.22	1.12	1.15	0.24	0.30	0.06	2.40	2.43	1.52	1.58	XXX
94657		A	Continued ventilator mgmt	0.83	1.15	1.02	0.19	0.24	0.04	2.02	1.89	1.06	1.11	XXX
94660		A	Pos airway pressure, CPAP	0.76	0.82	0.69	0.20	0.22	0.04	1.62	1.49	1.00	1.02	XXX
94662		A	Neg press ventilation, cnp	0.76	NA	NA	0.18	0.22	0.03	NA	NA	0.97	1.01	XXX
94664		A	Evaluate pt use of inhaler	0.00	0.40	0.33	NA	NA	0.04	0.44	0.37	NA	NA	XXX
94667		A	Chest wall manipulation	0.00	0.55	0.53	NA	NA	0.05	0.60	0.58	NA	NA	XXX
94668		A	Chest wall manipulation	0.00	0.51	0.47	NA	NA	0.02	0.53	0.49	NA	NA	XXX
94680		A	Exhaled air analysis, o2	0.26	1.11	1.67	1.11	1.67	0.07	1.44	2.00	1.44	2.00	XXX
94680	26	A	Exhaled air analysis, o2	0.26	0.07	0.08	0.07	0.08	0.01	0.34	0.35	0.34	0.35	XXX
94680	TC	A	Exhaled air analysis, o2	0.00	1.04	1.60	1.04	1.60	0.06	1.10	1.66	1.10	1.66	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
94681		A	Exhaled air analysis, o2/co2	0.20	1.10	2.17	NA	NA	0.13	1.43	2.50	NA	NA	XXX
94681	26	A	Exhaled air analysis, o2/co2	0.20	0.05	0.06	0.05	0.06	0.01	0.26	0.27	0.26	0.27	XXX
94681	TC	A	Exhaled air analysis, o2/co2	0.00	1.04	2.11	NA	NA	0.12	1.16	2.23	NA	NA	XXX
94690		A	Exhaled air analysis	0.07	0.89	1.72	NA	NA	0.05	1.01	1.84	NA	NA	XXX
94690	26	A	Exhaled air analysis	0.07	0.02	0.02	0.02	0.02	0.01	0.10	0.10	0.10	0.10	XXX
94690	TC	A	Exhaled air analysis	0.00	0.87	1.70	NA	NA	0.04	0.91	1.74	NA	NA	XXX
94720		A	Monoxide diffusing capacity	0.26	1.18	1.05	NA	NA	0.07	1.51	1.38	NA	NA	XXX
94720	26	A	Monoxide diffusing capacity	0.26	0.06	0.08	0.06	0.08	0.01	0.33	0.35	0.33	0.35	XXX
94720	TC	A	Monoxide diffusing capacity	0.00	1.11	0.97	NA	NA	0.06	1.17	1.03	NA	NA	XXX
94725		A	Membrane diffusion capacity	0.26	1.10	2.46	NA	NA	0.13	1.49	2.85	NA	NA	XXX
94725	26	A	Membrane diffusion capacity	0.26	0.09	0.08	0.09	0.08	0.01	0.36	0.35	0.36	0.35	XXX
94725	TC	A	Membrane diffusion capacity	0.00	1.01	2.38	NA	NA	0.12	1.13	2.50	NA	NA	XXX
94750		A	Pulmonary compliance study	0.23	1.90	1.48	NA	NA	0.05	2.18	1.76	NA	NA	XXX
94750	26	A	Pulmonary compliance study	0.23	0.08	0.07	0.08	0.07	0.01	0.32	0.31	0.32	0.31	XXX
94750	TC	A	Pulmonary compliance study	0.00	1.82	1.41	NA	NA	0.04	1.86	1.45	NA	NA	XXX
94760		T	Measure blood oxygen level	0.00	0.06	0.05	NA	NA	0.02	0.08	0.07	NA	NA	XXX
94761		T	Measure blood oxygen level	0.00	0.12	0.08	NA	NA	0.06	0.18	0.14	NA	NA	XXX
94762		A	Measure blood oxygen level	0.00	0.96	0.59	NA	NA	0.10	1.06	0.69	NA	NA	XXX
94770		A	Exhaled carbon dioxide test	0.15	0.85	0.78	NA	NA	0.08	1.08	1.01	NA	NA	XXX
94770	26	A	Exhaled carbon dioxide test	0.15	0.04	0.04	0.04	0.04	0.01	0.20	0.20	0.20	0.20	XXX
94770	TC	A	Exhaled carbon dioxide test	0.00	0.81	0.74	NA	NA	0.07	0.88	0.81	NA	NA	XXX
94772		C	Breath recording, infant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
94772	26	C	Breath recording, infant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
94772	TC	C	Breath recording, infant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
94799		C	Pulmonary service/procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
94799	26	C	Pulmonary service/procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
94799	TC	C	Pulmonary service/procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95004		A	Percut allergy skin tests	0.00	0.16	0.12	NA	NA	0.01	0.17	0.13	NA	NA	XXX
95010		A	Percut allergy titrate test	0.15	0.30	0.32	0.04	0.06	0.01	0.46	0.48	0.20	0.22	XXX
95015		A	Id allergy titrate-drug/bug	0.15	0.20	0.16	0.04	0.06	0.01	0.36	0.32	0.20	0.22	XXX
95024		A	Id allergy test, drug/bug	0.00	0.21	0.17	NA	NA	0.01	0.22	0.18	NA	NA	XXX
95027		A	Id allergy titrate-airborne	0.00	0.24	0.17	NA	NA	0.01	0.25	0.18	NA	NA	XXX
95028		A	Id allergy test-delayed type	0.00	0.29	0.25	NA	NA	0.01	0.30	0.26	NA	NA	XXX
95044		A	Allergy patch tests	0.00	0.15	0.19	NA	NA	0.01	0.16	0.20	NA	NA	XXX
95052		A	Photo patch test	0.00	0.15	0.23	NA	NA	0.01	0.16	0.24	NA	NA	XXX
95056		A	Photosensitivity tests	0.00	1.18	0.42	NA	NA	0.01	1.19	0.43	NA	NA	XXX
95060		A	Eye allergy tests	0.00	0.75	0.45	NA	NA	0.02	0.77	0.47	NA	NA	XXX
95065		A	Nose allergy test	0.00	0.67	0.32	NA	NA	0.01	0.68	0.33	NA	NA	XXX
95070		A	Bronchial allergy tests	0.00	0.80	1.91	NA	NA	0.02	0.82	1.93	NA	NA	XXX
95071		A	Bronchial allergy tests	0.00	0.89	2.41	NA	NA	0.02	0.91	2.43	NA	NA	XXX
95075		A	Ingestion challenge test	0.95	0.67	0.78	0.25	0.35	0.03	1.65	1.76	1.23	1.33	XXX
95078		A	Provocative testing	0.00	0.33	0.27	NA	NA	0.02	0.35	0.29	NA	NA	XXX
95115		A	Immunotherapy, one injection	0.00	0.22	0.35	0.00	0.29	0.02	0.24	0.37	0.02	0.31	XXX
95117		A	Immunotherapy injections	0.00	0.27	0.44	0.00	0.38	0.02	0.29	0.46	0.02	0.40	XXX
95144		A	Antigen therapy services	0.06	0.26	0.21	0.02	0.02	0.01	0.33	0.28	0.09	0.09	XXX
95145		A	Antigen therapy services	0.06	0.35	0.33	0.02	0.02	0.01	0.42	0.40	0.09	0.09	XXX
95146		A	Antigen therapy services	0.06	0.66	0.50	0.02	0.03	0.01	0.73	0.57	0.09	0.10	XXX
95147		A	Antigen therapy services	0.06	0.64	0.48	0.02	0.02	0.01	0.71	0.55	0.09	0.09	XXX
95148		A	Antigen therapy services	0.06	0.94	0.67	0.02	0.03	0.01	1.01	0.74	0.09	0.10	XXX
95149		A	Antigen therapy services	0.06	1.25	0.91	0.02	0.03	0.01	1.32	0.98	0.09	0.10	XXX
95165		A	Antigen therapy services	0.06	0.25	0.21	0.02	0.02	0.01	0.32	0.28	0.09	0.09	XXX
95170		A	Antigen therapy services	0.06	0.20	0.15	0.02	0.03	0.01	0.27	0.22	0.09	0.10	XXX
95180		A	Rapid desensitization	2.01	1.57	1.92	0.71	0.88	0.04	3.62	3.97	2.76	2.93	XXX
95199		C	Allergy immunology services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95250		A	Glucose monitoring, cont	0.00	3.53	3.96	NA	NA	0.01	3.54	3.97	NA	NA	XXX
95251		A	Gluc monitor, cont, phys i&r	0.52	0.16	0.18	0.16	0.18	0.02	0.70	0.72	0.70	0.72	XXX

95805		A	Multiple sleep latency test	1.88	7.27	14.76	NA	NA	0.43	9.58	17.07	NA	NA	XXX
95805	26	A	Multiple sleep latency test	1.88	0.51	0.62	0.51	0.62	0.09	2.48	2.59	2.48	2.59	XXX
95805	TC	A	Multiple sleep latency test	0.00	6.76	14.14	NA	NA	0.34	7.10	14.48	NA	NA	XXX
95806		A	Sleep study, unattended	1.66	4.02	3.50	NA	NA	0.39	6.07	5.55	NA	NA	XXX
95806	26	A	Sleep study, unattended	1.66	0.50	0.53	0.50	0.53	0.08	2.24	2.27	2.24	2.27	XXX
95806	TC	A	Sleep study, unattended	0.00	3.52	2.97	NA	NA	0.31	3.83	3.28	NA	NA	XXX
95807		A	Sleep study, attended	1.66	12.81	12.09	NA	NA	0.50	14.97	14.25	NA	NA	XXX
95807	26	A	Sleep study, attended	1.66	0.51	0.53	0.51	0.53	0.08	2.25	2.27	2.25	2.27	XXX
95807	TC	A	Sleep study, attended	0.00	12.30	11.57	NA	NA	0.42	12.72	11.99	NA	NA	XXX
95808		A	Polysomnography, 1–3	2.65	15.72	13.82	NA	NA	0.55	18.92	17.02	NA	NA	XXX
95808	26	A	Polysomnography, 1–3	2.65	0.69	0.86	0.69	0.86	0.13	3.47	3.64	3.47	3.64	XXX
95808	TC	A	Polysomnography, 1–3	0.00	15.03	12.96	NA	NA	0.42	15.45	13.38	NA	NA	XXX
95810		A	Polysomnography, 4 or more	3.52	18.60	17.77	NA	NA	0.59	22.71	21.88	NA	NA	XXX
95810	26	A	Polysomnography, 4 or more	3.52	0.98	1.13	0.98	1.13	0.17	4.67	4.82	4.67	4.82	XXX
95810	TC	A	Polysomnography, 4 or more	0.00	17.62	16.64	NA	NA	0.42	18.04	17.06	NA	NA	XXX
95811		A	Polysomnography w/cpap	3.79	20.70	19.56	NA	NA	0.61	25.10	23.96	NA	NA	XXX
95811	26	A	Polysomnography w/cpap	3.79	1.05	1.22	1.05	1.22	0.18	5.02	5.19	5.02	5.19	XXX
95811	TC	A	Polysomnography w/cpap	0.00	19.66	18.36	NA	NA	0.43	20.09	18.79	NA	NA	XXX
95812		A	Eeg, 41–60 minutes	1.08	5.90	4.50	NA	NA	0.17	7.15	5.75	NA	NA	XXX
95812	26	A	Eeg, 41–60 minutes	1.08	0.31	0.42	0.31	0.42	0.06	1.45	1.56	1.45	1.56	XXX
95812	TC	A	Eeg, 41–60 minutes	0.00	5.59	4.08	NA	NA	0.11	5.70	4.19	NA	NA	XXX
95813		A	Eeg, over 1 hour	1.73	6.64	5.43	NA	NA	0.20	8.57	7.36	NA	NA	XXX
95813	26	A	Eeg, over 1 hour	1.73	0.50	0.65	0.50	0.65	0.09	2.32	2.47	2.32	2.47	XXX
95813	TC	A	Eeg, over 1 hour	0.00	6.14	4.78	NA	NA	0.11	6.25	4.89	NA	NA	XXX
95816		A	Eeg, awake and drowsy	1.08	5.30	4.11	NA	NA	0.16	6.54	5.35	NA	NA	XXX
95816	26	A	Eeg, awake and drowsy	1.08	0.30	0.42	0.30	0.42	0.06	1.44	1.56	1.44	1.56	XXX
95816	TC	A	Eeg, awake and drowsy	0.00	4.99	3.69	NA	NA	0.10	5.09	3.79	NA	NA	XXX
95819		A	Eeg, awake and asleep	1.08	6.15	3.77	NA	NA	0.16	7.39	5.01	NA	NA	XXX
95819	26	A	Eeg, awake and asleep	1.08	0.30	0.42	0.30	0.42	0.06	1.44	1.56	1.44	1.56	XXX
95819	TC	A	Eeg, awake and asleep	0.00	5.84	3.35	NA	NA	0.10	5.94	3.45	NA	NA	XXX
95822		A	Eeg, coma or sleep only	1.08	5.53	4.83	NA	NA	0.19	6.80	6.10	NA	NA	XXX
95822	26	A	Eeg, coma or sleep only	1.08	0.30	0.42	0.30	0.42	0.06	1.44	1.56	1.44	1.56	XXX
95822	TC	A	Eeg, coma or sleep only	0.00	5.23	4.41	NA	NA	0.13	5.36	4.54	NA	NA	XXX
95824		C	Eeg, cerebral death only	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95824	26	A	Eeg, cerebral death only	0.74	0.21	0.29	0.21	0.29	0.04	0.99	1.07	0.99	1.07	XXX
95824	TC	C	Eeg, cerebral death only	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95827		A	Eeg, all night recording	1.08	11.57	4.92	NA	NA	0.19	12.84	6.19	NA	NA	XXX
95827	26	A	Eeg, all night recording	1.08	0.29	0.38	0.29	0.38	0.05	1.42	1.51	1.42	1.51	XXX
95827	TC	A	Eeg, all night recording	0.00	11.28	4.54	NA	NA	0.14	11.42	4.68	NA	NA	XXX
95829		A	Surgery electrocorticogram	6.20	25.44	29.61	NA	NA	0.50	32.14	36.31	NA	NA	XXX
95829	26	A	Surgery electrocorticogram	6.20	1.79	2.18	1.79	2.18	0.48	8.47	8.86	8.47	8.86	XXX
95829	TC	A	Surgery electrocorticogram	0.00	23.65	27.43	NA	NA	0.02	23.67	27.45	NA	NA	XXX
95830		A	Insert electrodes for EEG	1.70	2.99	3.22	0.42	0.65	0.11	4.80	5.03	2.23	2.46	XXX
95831		A	Limb muscle testing, manual	0.28	0.39	0.44	0.09	0.12	0.01	0.68	0.73	0.38	0.41	XXX
95832		A	Hand muscle testing, manual	0.29	0.37	0.34	0.10	0.12	0.02	0.68	0.65	0.41	0.43	XXX
95833		A	Body muscle testing, manual	0.47	0.47	0.55	0.13	0.21	0.02	0.96	1.04	0.62	0.70	XXX
95834		A	Body muscle testing, manual	0.60	0.55	0.61	0.18	0.26	0.03	1.18	1.24	0.81	0.89	XXX
95851		A	Range of motion measurements	0.16	0.26	0.34	0.04	0.07	0.01	0.43	0.51	0.21	0.24	XXX
95852		A	Range of motion measurements	0.11	0.21	0.25	0.03	0.05	0.01	0.33	0.37	0.15	0.17	XXX
95857		A	Tensilon test	0.53	0.59	0.60	0.16	0.21	0.02	1.14	1.15	0.71	0.76	XXX
95860		A	Muscle test, one limb	0.96	1.16	1.36	NA	NA	0.07	2.19	2.39	NA	NA	XXX
95860	26	A	Muscle test, one limb	0.96	0.32	0.40	0.32	0.40	0.05	1.33	1.41	1.33	1.41	XXX
95860	TC	A	Muscle test, one limb	0.00	0.84	0.96	NA	NA	0.02	0.86	0.98	NA	NA	XXX
95861		A	Muscle test, 2 limbs	1.54	1.67	1.48	NA	NA	0.13	3.34	3.15	NA	NA	XXX
95861	26	A	Muscle test, 2 limbs	1.54	0.51	0.64	0.51	0.64	0.07	2.12	2.25	2.12	2.25	XXX
95861	TC	A	Muscle test, 2 limbs	0.00	1.16	0.84	NA	NA	0.06	1.22	0.90	NA	NA	XXX
95863		A	Muscle test, 3 limbs	1.87	1.94	1.78	NA	NA	0.15	3.96	3.80	NA	NA	XXX
95863	26	A	Muscle test, 3 limbs	1.87	0.58	0.75	0.58	0.75	0.09	2.54	2.71	2.54	2.71	XXX
95863	TC	A	Muscle test, 3 limbs	0.00	1.36	1.05	NA	NA	0.06	1.42	1.11	NA	NA	XXX
95864		A	Muscle test, 4 limbs	1.99	2.20	2.54	NA	NA	0.21	4.40	4.74	NA	NA	XXX
95864	26	A	Muscle test, 4 limbs	1.99	0.63	0.81	0.63	0.81	0.09	2.71	2.89	2.71	2.89	XXX
95864	TC	A	Muscle test, 4 limbs	0.00	1.57	1.73	NA	NA	0.12	1.69	1.85	NA	NA	XXX
95865		A	Muscle test, larynx	1.57	1.34	1.42	NA	NA	0.11	3.02	3.10	NA	NA	XXX
95865	26	A	Muscle test, larynx	1.57	0.46	0.69	0.46	0.69	0.08	2.11	2.34	2.11	2.34	XXX
95865	TC	A	Muscle test, larynx	0.00	0.88	0.73	NA	NA	0.03	0.91	0.76	NA	NA	XXX
95866		A	Muscle test, hemidiaphragm	1.25	1.34	0.91	NA	NA	0.10	2.69	2.26	NA	NA	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
95866	26	A	Muscle test, hemidiaphragm	1.25	0.40	0.52	0.40	0.52	0.07	1.72	1.84	1.72	1.84	XXX
95866	TC	A	Muscle test, hemidiaphragm	0.00	0.94	0.39	NA	NA	0.03	0.97	0.42	NA	NA	XXX
95867		A	Muscle test cran nerv unilat	0.79	1.12	0.98	NA	NA	0.07	1.98	1.84	NA	NA	XXX
95867	26	A	Muscle test cran nerv unilat	0.79	0.23	0.32	0.23	0.32	0.03	1.05	1.14	1.05	1.14	XXX
95867	TC	A	Muscle test cran nerv unilat	0.00	0.89	0.68	NA	NA	0.04	0.93	0.70	NA	NA	XXX
95868		A	Muscle test cran nerve bilat	1.18	1.43	1.27	NA	NA	0.10	2.71	2.55	NA	NA	XXX
95868	26	A	Muscle test cran nerve bilat	1.18	0.35	0.47	0.35	0.47	0.05	1.58	1.70	1.58	1.70	XXX
95868	TC	A	Muscle test cran nerve bilat	0.00	1.08	0.80	NA	NA	0.05	1.13	0.85	NA	NA	XXX
95869		A	Muscle test, thor paraspinal	0.37	1.03	0.54	NA	NA	0.04	1.44	0.95	NA	NA	XXX
95869	26	A	Muscle test, thor paraspinal	0.37	0.12	0.15	0.12	0.15	0.02	0.51	0.54	0.51	0.54	XXX
95869	TC	A	Muscle test, thor paraspinal	0.00	0.91	0.39	NA	NA	0.02	0.93	0.41	NA	NA	XXX
95870		A	Muscle test, nonparaspinal	0.37	1.00	0.53	NA	NA	0.04	1.41	0.94	NA	NA	XXX
95870	26	A	Muscle test, nonparaspinal	0.37	0.12	0.15	0.12	0.15	0.02	0.51	0.54	0.51	0.54	XXX
95870	TC	A	Muscle test, nonparaspinal	0.00	0.88	0.38	NA	NA	0.02	0.90	0.40	NA	NA	XXX
95872		A	Muscle test, one fiber	2.00	1.42	1.28	NA	NA	0.13	3.55	3.41	NA	NA	XXX
95872	26	A	Muscle test, one fiber	2.00	0.65	0.64	0.65	0.64	0.08	2.73	2.72	2.73	2.72	XXX
95872	TC	A	Muscle test, one fiber	0.00	0.78	0.65	NA	NA	0.05	0.83	0.70	NA	NA	XXX
95873		A	Guide nerv destr, elec stim	0.37	0.95	0.51	0.95	0.51	0.04	1.36	0.92	1.36	0.92	ZZZ
95873	26	A	Guide nerv destr, elec stim	0.37	0.12	0.15	0.12	0.15	0.02	0.51	0.54	0.51	0.54	ZZZ
95873	TC	A	Guide nerv destr, elec stim	0.00	0.83	0.36	0.83	0.36	0.02	0.85	0.38	0.85	0.38	ZZZ
95874		A	Guide nerv destr, needle emg	0.37	0.96	0.52	0.96	0.52	0.04	1.37	0.93	1.37	0.93	ZZZ
95874	26	A	Guide nerv destr, needle emg	0.37	0.12	0.16	0.12	0.16	0.02	0.51	0.55	0.51	0.55	ZZZ
95874	TC	A	Guide nerv destr, needle emg	0.00	0.84	0.36	0.84	0.36	0.02	0.86	0.38	0.86	0.38	ZZZ
95875		A	Limb exercise test	1.10	1.31	1.42	NA	NA	0.11	2.52	2.63	NA	NA	XXX
95875	26	A	Limb exercise test	1.10	0.31	0.43	0.31	0.43	0.05	1.46	1.58	1.46	1.58	XXX
95875	TC	A	Limb exercise test	0.00	1.00	0.99	NA	NA	0.06	1.06	1.05	NA	NA	XXX
95900		A	Motor nerve conduction test	0.42	0.94	1.18	NA	NA	0.04	1.40	1.64	NA	NA	XXX
95900	26	A	Motor nerve conduction test	0.42	0.14	0.17	0.14	0.17	0.02	0.58	0.61	0.58	0.61	XXX
95900	TC	A	Motor nerve conduction test	0.00	0.80	1.01	NA	NA	0.02	0.82	1.03	NA	NA	XXX
95903		A	Motor nerve conduction test	0.60	1.04	1.15	NA	NA	0.05	1.69	1.80	NA	NA	XXX
95903	26	A	Motor nerve conduction test	0.60	0.18	0.24	0.18	0.24	0.03	0.81	0.87	0.81	0.87	XXX
95903	TC	A	Motor nerve conduction test	0.00	0.86	0.91	NA	NA	0.02	0.88	0.93	NA	NA	XXX
95904		A	Sense nerve conduction test	0.34	0.88	1.04	NA	NA	0.04	1.26	1.42	NA	NA	XXX
95904	26	A	Sense nerve conduction test	0.34	0.11	0.14	0.11	0.14	0.02	0.47	0.50	0.47	0.50	XXX
95904	TC	A	Sense nerve conduction test	0.00	0.77	0.90	NA	NA	0.02	0.79	0.92	NA	NA	XXX
95920		A	Intraop nerve test add-on	2.11	1.80	2.12	1.80	2.12	0.23	4.14	4.46	4.14	4.46	ZZZ
95920	26	A	Intraop nerve test add-on	2.11	0.66	0.86	0.66	0.86	0.16	2.93	3.13	2.93	3.13	ZZZ
95920	TC	A	Intraop nerve test add-on	0.00	1.14	1.27	1.14	1.27	0.07	1.21	1.34	1.21	1.34	ZZZ
95921		A	Autonomic nerv function test	0.90	1.14	0.82	NA	NA	0.06	2.10	1.78	NA	NA	XXX
95921	26	A	Autonomic nerv function test	0.90	0.24	0.31	0.24	0.31	0.04	1.18	1.25	1.18	1.25	XXX
95921	TC	A	Autonomic nerv function test	0.00	0.89	0.51	NA	NA	0.02	0.91	0.53	NA	NA	XXX
95922		A	Autonomic nerv function test	0.96	1.65	1.00	NA	NA	0.07	2.68	2.03	NA	NA	XXX
95922	26	A	Autonomic nerv function test	0.96	0.27	0.37	0.27	0.37	0.05	1.28	1.38	1.28	1.38	XXX
95922	TC	A	Autonomic nerv function test	0.00	1.38	0.63	NA	NA	0.02	1.40	0.65	NA	NA	XXX
95923		A	Autonomic nerv function test	0.90	2.12	1.98	NA	NA	0.07	3.09	2.95	NA	NA	XXX
95923	26	A	Autonomic nerv function test	0.90	0.24	0.35	0.24	0.35	0.05	1.19	1.30	1.19	1.30	XXX
95923	TC	A	Autonomic nerv function test	0.00	1.88	1.64	NA	NA	0.02	1.90	1.66	NA	NA	XXX
95925		A	Somatosensory testing	0.54	3.19	1.65	NA	NA	0.10	3.83	2.29	NA	NA	XXX
95925	26	A	Somatosensory testing	0.54	0.17	0.21	0.17	0.21	0.04	0.75	0.79	0.75	0.79	XXX
95925	TC	A	Somatosensory testing	0.00	3.02	1.44	NA	NA	0.06	3.08	1.50	NA	NA	XXX
95926		A	Somatosensory testing	0.54	3.06	1.62	NA	NA	0.09	3.69	2.25	NA	NA	XXX
95926	26	A	Somatosensory testing	0.54	0.16	0.21	0.16	0.21	0.03	0.73	0.78	0.73	0.78	XXX
95926	TC	A	Somatosensory testing	0.00	2.90	1.41	NA	NA	0.06	2.96	1.47	NA	NA	XXX
95927		A	Somatosensory testing	0.54	3.08	1.64	NA	NA	0.10	3.72	2.28	NA	NA	XXX
95927	26	A	Somatosensory testing	0.54	0.16	0.23	0.16	0.23	0.04	0.74	0.81	0.74	0.81	XXX
95927	TC	A	Somatosensory testing	0.00	2.93	1.42	NA	NA	0.06	2.99	1.48	NA	NA	XXX

95928		A	C motor evoked, uppr limbs	1.50	3.98	3.26	NA	NA	0.09	5.57	4.85	NA	NA	XXX
95928	26	A	C motor evoked, uppr limbs	1.50	0.46	0.60	0.46	0.60	0.06	2.02	2.16	2.02	2.16	XXX
95928	TC	A	C motor evoked, uppr limbs	0.00	3.53	2.66	NA	NA	0.03	3.56	2.69	NA	NA	XXX
95929		A	C motor evoked, lwr limbs	1.50	4.30	3.48	NA	NA	0.09	5.89	5.07	NA	NA	XXX
95929	26	A	C motor evoked, lwr limbs	1.50	0.46	0.60	0.46	0.60	0.06	2.02	2.16	2.02	2.16	XXX
95930		A	Visual evoked potential test	0.35	2.64	2.34	NA	NA	0.03	3.02	2.72	NA	NA	XXX
95930	26	A	Visual evoked potential test	0.35	0.10	0.14	0.10	0.14	0.02	0.47	0.51	0.47	0.51	XXX
95930	TC	A	Visual evoked potential test	0.00	2.54	2.20	NA	NA	0.01	2.55	2.21	NA	NA	XXX
95933		A	Blink reflex test	0.59	1.10	1.04	NA	NA	0.10	1.79	1.73	NA	NA	XXX
95933	26	A	Blink reflex test	0.59	0.17	0.22	0.17	0.22	0.04	0.80	0.85	0.80	0.85	XXX
95933	TC	A	Blink reflex test	0.00	0.93	0.82	NA	NA	0.06	0.99	0.88	NA	NA	XXX
95934		A	H-reflex test	0.51	0.90	0.55	NA	NA	0.04	1.45	1.10	NA	NA	XXX
95934	26	A	H-reflex test	0.51	0.16	0.21	0.16	0.21	0.02	0.69	0.74	0.69	0.74	XXX
95934	TC	A	H-reflex test	0.00	0.73	0.34	NA	NA	0.02	0.75	0.36	NA	NA	XXX
95936		A	H-reflex test	0.55	0.62	0.49	NA	NA	0.05	1.22	1.09	NA	NA	XXX
95936	26	A	H-reflex test	0.55	0.17	0.22	0.17	0.22	0.03	0.75	0.80	0.75	0.80	XXX
95936	TC	A	H-reflex test	0.00	0.44	0.27	NA	NA	0.02	0.46	0.29	NA	NA	XXX
95937		A	Neuromuscular junction test	0.65	0.92	0.69	NA	NA	0.10	1.67	1.44	NA	NA	XXX
95937	26	A	Neuromuscular junction test	0.65	0.20	0.25	0.20	0.25	0.08	0.93	0.98	0.93	0.98	XXX
95937	TC	A	Neuromuscular junction test	0.00	0.72	0.44	NA	NA	0.02	0.74	0.46	NA	NA	XXX
95950		A	Ambulatory eeg monitoring	1.51	4.93	4.18	NA	NA	0.51	6.95	6.20	NA	NA	XXX
95950	26	A	Ambulatory eeg monitoring	1.51	0.42	0.59	0.42	0.59	0.08	2.01	2.18	2.01	2.18	XXX
95950	TC	A	Ambulatory eeg monitoring	0.00	4.52	3.60	NA	NA	0.43	4.95	4.03	NA	NA	XXX
95951		C	EEG monitoring/videorecord	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95951	26	A	EEG monitoring/videorecord	5.99	1.69	2.34	1.69	2.34	0.32	8.00	8.65	8.00	8.65	XXX
95951	TC	C	EEG monitoring/videorecord	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95953		A	EEG monitoring/computer	3.30	7.24	7.53	NA	NA	0.60	11.14	11.43	NA	NA	XXX
95953	26	A	EEG monitoring/computer	3.30	0.93	1.20	0.93	1.20	0.17	4.40	4.67	4.40	4.67	XXX
95953	TC	A	EEG monitoring/computer	0.00	6.31	6.33	NA	NA	0.43	6.74	6.76	NA	NA	XXX
95954		A	EEG monitoring/giving drugs	2.45	4.90	4.39	NA	NA	0.19	7.54	7.03	NA	NA	XXX
95954	26	A	EEG monitoring/giving drugs	2.45	0.51	0.91	0.51	0.91	0.13	3.09	3.49	3.09	3.49	XXX
95954	TC	A	EEG monitoring/giving drugs	0.00	4.39	3.48	NA	NA	0.06	4.45	3.54	NA	NA	XXX
95955		A	EEG during surgery	1.01	2.83	2.45	2.83	2.45	0.22	4.06	3.68	4.06	3.68	XXX
95955	26	A	EEG during surgery	1.01	0.29	0.34	0.29	0.34	0.05	1.35	1.40	1.35	1.40	XXX
95955	TC	A	EEG during surgery	0.00	2.54	2.11	2.54	2.11	0.17	2.71	2.28	2.71	2.28	XXX
95956		A	Eeg monitoring, cable/radio	3.08	17.21	15.86	NA	NA	0.59	20.88	19.53	NA	NA	XXX
95956	26	A	Eeg monitoring, cable/radio	3.08	1.03	1.23	1.03	1.23	0.16	4.27	4.47	4.27	4.47	XXX
95956	TC	A	Eeg monitoring, cable/radio	0.00	16.18	14.63	NA	NA	0.43	16.61	15.06	NA	NA	XXX
95957		A	EEG digital analysis	1.98	5.88	3.38	NA	NA	0.23	8.09	5.59	NA	NA	XXX
95957	26	A	EEG digital analysis	1.98	0.55	0.78	0.55	0.78	0.11	2.64	2.87	2.64	2.87	XXX
95957	TC	A	EEG digital analysis	0.00	5.32	2.61	NA	NA	0.12	5.44	2.73	NA	NA	XXX
95958		A	EEG monitoring/function test	4.24	6.67	4.29	NA	NA	0.34	11.25	8.87	NA	NA	XXX
95958	26	A	EEG monitoring/function test	4.24	1.21	1.61	1.21	1.61	0.21	5.66	6.06	5.66	6.06	XXX
95958	TC	A	EEG monitoring/function test	0.00	5.46	2.67	NA	NA	0.13	5.59	2.80	NA	NA	XXX
95961		A	Electrode stimulation, brain	2.97	3.12	2.75	NA	NA	0.55	6.64	6.27	NA	NA	XXX
95961	26	A	Electrode stimulation, brain	2.97	0.90	1.22	0.90	1.22	0.48	4.35	4.67	4.35	4.67	XXX
95961	TC	A	Electrode stimulation, brain	0.00	2.22	1.54	NA	NA	0.07	2.29	1.61	NA	NA	XXX
95962		A	Electrode stim, brain add-on	3.21	2.21	2.57	2.21	2.57	0.39	5.81	6.17	5.81	6.17	ZZZ
95962	26	A	Electrode stim, brain add-on	3.21	0.91	1.27	0.91	1.27	0.32	4.44	4.80	4.44	4.80	ZZZ
95962	TC	A	Electrode stim, brain add-on	0.00	1.30	1.31	1.30	1.31	0.07	1.37	1.38	1.37	1.38	ZZZ
95965		C	Meg, spontaneous	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95965	26	A	Meg, spontaneous	7.99	2.29	3.14	2.29	3.14	0.46	10.74	11.59	10.74	11.59	XXX
95965	TC	C	Meg, spontaneous	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95966		C	Meg, evoked, single	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95966	26	A	Meg, evoked, single	3.99	1.22	1.59	1.22	1.59	0.19	5.40	5.77	5.40	5.77	XXX
95966	TC	C	Meg, evoked, single	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
95967		C	Meg, evoked, each addll	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
95967	26	A	Meg, evoked, each addll	3.49	1.04	1.15	1.04	1.15	0.16	4.69	4.80	4.69	4.80	ZZZ
95967	TC	C	Meg, evoked, each addll	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
95970		A	Analyze neurostim, no prog	0.45	0.89	0.86	0.13	0.14	0.03	1.37	1.34	0.61	0.62	XXX
95971		A	Analyze neurostim, simple	0.78	0.62	0.67	0.20	0.22	0.07	1.47	1.52	1.05	1.07	XXX
95972		A	Analyze neurostim, complex	1.50	1.20	1.21	0.46	0.48	0.14	2.84	2.85	2.10	2.12	XXX
95973		A	Analyze neurostim, complex	0.92	0.56	0.61	0.24	0.32	0.07	1.55	1.60	1.23	1.31	ZZZ
95974		A	Cranial neurostim, complex	3.00	1.48	1.65	0.85	1.19	0.16	4.64	4.81	4.01	4.35	XXX
95975		A	Cranial neurostim, complex	1.70	0.74	0.85	0.48	0.67	0.12	2.56	2.67	2.30	2.49	ZZZ
95978		A	Analyze neurostim brain/1h	3.50	1.84	1.91	1.04	1.24	0.18	5.52	5.59	4.72	4.92	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
95979		A	Analyz neurostim brain addon	1.64	0.73	0.84	0.47	0.64	0.08	2.45	2.56	2.19	2.36	ZZZ
95990		A	Spin/brain pump refil & main	0.00	1.67	1.54	NA	NA	0.06	1.73	1.60	NA	NA	XXX
95991		A	Spin/brain pump refil & main	0.77	1.67	1.54	NA	NA	0.06	2.50	2.37	NA	NA	XXX
95999		C	Neurological procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
96000		A	Motion analysis, video/3d	1.80	NA	NA	0.58	0.54	0.11	NA	NA	2.49	2.45	XXX
96001		A	Motion test w/ft press meas	2.15	NA	NA	0.53	0.63	0.10	NA	NA	2.78	2.88	XXX
96002		A	Dynamic surface emg	0.41	NA	NA	0.11	0.14	0.02	NA	NA	0.54	0.57	XXX
96003		A	Dynamic fine wire emg	0.37	NA	NA	0.14	0.13	0.02	NA	NA	0.53	0.52	XXX
96004		A	Phys review of motion tests	2.14	0.54	0.84	0.54	0.84	0.11	2.79	3.09	2.79	3.09	XXX
96101		A	Psycho testing by psych/phys	1.86	0.34	0.57	0.33	0.56	0.05	2.25	2.48	2.24	2.47	XXX
96102		A	Psycho testing by technician	0.50	1.20	0.80	0.09	0.15	0.01	1.71	1.31	0.60	0.66	XXX
96103		A	Psycho testing admin by comp	0.51	1.31	0.49	0.09	0.15	0.02	1.84	1.02	0.62	0.68	XXX
96105		A	Assessment of aphasia	0.00	2.06	1.84	NA	NA	0.18	2.24	2.02	NA	NA	XXX
96110		A	Developmental test, lim	0.00	0.18	0.18	NA	NA	0.18	0.36	0.36	NA	NA	XXX
96111		A	Developmental test, extend	2.60	0.66	0.95	0.53	0.92	0.18	3.44	3.73	3.31	3.70	XXX
96116		A	Neurobehavioral status exam	1.86	0.53	0.76	0.42	0.59	0.18	2.57	2.80	2.46	2.63	XXX
96118		A	Neuropsych tst by psych/phys	1.86	0.81	1.25	0.32	0.55	0.18	2.85	3.29	2.36	2.59	XXX
96119		A	Neuropsych testing by tech	0.55	1.53	1.15	0.09	0.17	0.18	2.26	1.88	0.82	0.90	XXX
96120		A	Neuropsych tst admin w/comp	0.51	1.91	1.03	0.09	0.15	0.02	2.44	1.56	0.62	0.68	XXX
96150		A	Assess hlth/behave, init	0.50	0.10	0.16	0.09	0.16	0.01	0.61	0.67	0.60	0.67	XXX
96151		A	Assess hlth/behave, subseq	0.48	0.09	0.16	0.09	0.15	0.01	0.58	0.65	0.58	0.64	XXX
96152		A	Intervene hlth/behave, indiv	0.46	0.09	0.15	0.08	0.14	0.01	0.56	0.62	0.55	0.61	XXX
96153		A	Intervene hlth/behave, group	0.10	0.02	0.04	0.02	0.03	0.01	0.13	0.15	0.13	0.14	XXX
96154		A	Interv hlth/behav, fam w/pt	0.45	0.09	0.15	0.08	0.14	0.01	0.55	0.61	0.54	0.60	XXX
96155		N	Interv hlth/behav fam no pt	0.44	0.10	0.16	0.10	0.15	0.02	0.56	0.62	0.56	0.61	XXX
96401		A	Chemo, anti-neopl, sq/im	0.21	1.87	1.35	NA	NA	0.01	2.09	1.57	NA	NA	XXX
96402		A	Chemo hormon antineopl sq/im	0.19	0.72	0.94	NA	NA	0.01	0.92	1.14	NA	NA	XXX
96405		A	Chemo intralesional, up to 7	0.52	3.49	2.70	0.22	0.24	0.03	4.04	3.25	0.77	0.79	000
96406		A	Chemo intralesional over 7	0.80	3.26	3.07	0.27	0.29	0.03	4.09	3.90	1.10	1.12	000
96409		A	Chemo, iv push, sngl drug	0.24	2.78	2.89	NA	NA	0.06	3.08	3.19	NA	NA	XXX
96411		A	Chemo, iv push, addl drug	0.20	1.50	1.58	NA	NA	0.06	1.76	1.84	NA	NA	ZZZ
96413		A	Chemo, iv infusion, 1 hr	0.28	3.63	4.05	NA	NA	0.08	3.99	4.41	NA	NA	XXX
96415		A	Chemo, iv infusion, addl hr	0.19	0.66	0.74	NA	NA	0.07	0.92	1.00	NA	NA	ZZZ
96416		A	Chemo prolong infuse w/pump	0.21	4.08	4.47	NA	NA	0.08	4.37	4.76	NA	NA	XXX
96417		A	Chemo iv infus each addl seq	0.21	1.72	1.89	NA	NA	0.07	2.00	2.17	NA	NA	ZZZ
96420		A	Chemo, ia, push tecnique	0.17	2.70	2.67	NA	NA	0.08	2.95	2.92	NA	NA	XXX
96422		A	Chemo ia infusion up to 1 hr	0.17	3.70	4.55	NA	NA	0.08	3.95	4.80	NA	NA	XXX
96423		A	Chemo ia infuse each addl hr	0.17	1.93	1.89	NA	NA	0.02	2.12	2.08	NA	NA	ZZZ
96425		A	Chemotherapy,infusion method	0.17	4.54	4.49	NA	NA	0.08	4.79	4.74	NA	NA	XXX
96440		A	Chemotherapy, intracavitary	2.37	5.56	7.49	1.00	1.17	0.17	8.10	10.03	3.54	3.71	000
96445		A	Chemotherapy, intracavitary	2.20	5.45	7.39	0.94	1.12	0.14	7.79	9.73	3.28	3.46	000
96450		A	Chemotherapy, into CNS	1.53	5.02	6.47	0.83	1.18	0.09	6.64	8.09	2.45	2.80	000
96521		A	Refill/maint, portable pump	0.21	3.14	3.61	NA	NA	0.06	3.41	3.88	NA	NA	XXX
96522		A	Refill/maint pump/resvr syst	0.21	2.74	2.67	NA	NA	0.06	3.01	2.94	NA	NA	XXX
96523		T	Irrig drug delivery device	0.04	0.64	0.68	NA	NA	0.01	0.69	0.73	NA	NA	XXX
96542		A	Chemotherapy injection	0.75	3.55	4.08	0.32	0.58	0.07	4.37	4.90	1.14	1.40	XXX
96549		C	Chemotherapy, unspecified	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
96567		A	Photodynamic tx, skin	0.00	3.65	2.38	NA	NA	0.04	3.69	2.42	NA	NA	XXX
96570		A	Photodynamic tx, 30 min	1.10	0.41	0.38	0.41	0.38	0.11	1.62	1.59	1.62	1.59	ZZZ
96571		A	Photodynamic tx, addl 15 min	0.55	0.20	0.19	0.20	0.19	0.03	0.78	0.77	0.78	0.77	ZZZ
96900		A	Ultraviolet light therapy	0.00	0.55	0.47	NA	NA	0.02	0.57	0.49	NA	NA	XXX
96902		B	Trichogram	0.41	0.11	0.16	0.10	0.15	0.01	0.53	0.58	0.52	0.57	XXX
96910		A	Photochemotherapy with UV–B	0.00	1.95	1.23	NA	NA	0.04	1.99	1.27	NA	NA	XXX
96912		A	Photochemotherapy with UV–A	0.00	2.51	1.57	NA	NA	0.05	2.56	1.62	NA	NA	XXX
96913		A	Photochemotherapy, UV–A or B	0.00	3.55	2.15	NA	NA	0.10	3.65	2.25	NA	NA	XXX
96920		A	Laser tx, skin < 250 sq cm	1.15	3.48	2.77	0.54	0.56	0.02	4.65	3.94	1.71	1.73	000

96921		A	Laser tx, skin 250–500 sq cm	1.17	3.39	2.80	0.51	0.56	0.03	4.59	4.00	1.71	1.76	000
96922		A	Laser tx, skin > 500 sq cm	2.10	4.46	3.73	0.98	0.71	0.04	6.60	5.87	3.12	2.85	000
96999		C	Dermatological procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
97001		A	Pt evaluation	1.20	0.68	0.73	NA	NA	0.05	1.93	1.98	NA	NA	XXX
97002		A	Pt re-evaluation	0.60	0.43	0.44	NA	NA	0.02	1.05	1.06	NA	NA	XXX
97003		A	Ot evaluation	1.20	0.77	0.85	NA	NA	0.06	2.03	2.11	NA	NA	XXX
97004		A	Ot re-evaluation	0.60	0.54	0.64	NA	NA	0.02	1.16	1.26	NA	NA	XXX
97010		B	Hot or cold packs therapy	0.06	0.07	0.06	NA	NA	0.01	0.14	0.13	NA	NA	XXX
97012		A	Mechanical traction therapy	0.25	0.15	0.14	NA	NA	0.01	0.41	0.40	NA	NA	XXX
97014		I	Electric stimulation therapy	0.18	0.19	0.19	NA	NA	0.01	0.38	0.38	NA	NA	XXX
97016		A	Vasopneumatic device therapy	0.18	0.25	0.20	NA	NA	0.01	0.44	0.39	NA	NA	XXX
97018		A	Paraffin bath therapy	0.06	0.17	0.12	NA	NA	0.01	0.24	0.19	NA	NA	XXX
97022		A	Whirlpool therapy	0.17	0.34	0.24	NA	NA	0.01	0.52	0.42	NA	NA	XXX
97024		A	Diathermy eg, microwave	0.06	0.08	0.07	NA	NA	0.01	0.15	0.14	NA	NA	XXX
97026		A	Infrared therapy	0.06	0.07	0.06	NA	NA	0.01	0.14	0.13	NA	NA	XXX
97028		A	Ultraviolet therapy	0.08	0.09	0.08	NA	NA	0.01	0.18	0.17	NA	NA	XXX
97032		A	Electrical stimulation	0.25	0.20	0.17	NA	NA	0.01	0.46	0.43	NA	NA	XXX
97033		A	Electric current therapy	0.26	0.46	0.32	NA	NA	0.01	0.73	0.59	NA	NA	XXX
97034		A	Contrast bath therapy	0.21	0.21	0.17	NA	NA	0.01	0.43	0.39	NA	NA	XXX
97035		A	Ultrasound therapy	0.21	0.10	0.10	NA	NA	0.01	0.32	0.32	NA	NA	XXX
97036		A	Hydrotherapy	0.28	0.45	0.35	NA	NA	0.01	0.74	0.64	NA	NA	XXX
97039		C	Physical therapy treatment	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
97110		A	Therapeutic exercises	0.45	0.33	0.29	NA	NA	0.02	0.80	0.76	NA	NA	XXX
97112		A	Neuromuscular reeducation	0.45	0.36	0.32	NA	NA	0.01	0.82	0.78	NA	NA	XXX
97113		A	Aquatic therapy/exercises	0.44	0.55	0.43	NA	NA	0.01	1.00	0.88	NA	NA	XXX
97116		A	Gait training therapy	0.40	0.29	0.25	NA	NA	0.01	0.70	0.66	NA	NA	XXX
97124		A	Massage therapy	0.35	0.28	0.24	NA	NA	0.01	0.64	0.60	NA	NA	XXX
97139		C	Physical medicine procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
97140		A	Manual therapy	0.43	0.30	0.26	NA	NA	0.01	0.74	0.70	NA	NA	XXX
97150		A	Group therapeutic procedures	0.27	0.22	0.19	NA	NA	0.01	0.50	0.47	NA	NA	XXX
97530		A	Therapeutic activities	0.44	0.39	0.34	NA	NA	0.01	0.84	0.79	NA	NA	XXX
97532		A	Cognitive skills development	0.44	0.23	0.21	NA	NA	0.01	0.68	0.66	NA	NA	XXX
97533		A	Sensory integration	0.44	0.28	0.25	NA	NA	0.01	0.73	0.70	NA	NA	XXX
97535		A	Self care mngment training	0.45	0.39	0.35	NA	NA	0.01	0.85	0.81	NA	NA	XXX
97537		A	Community/work reintegration	0.45	0.29	0.27	NA	NA	0.01	0.75	0.73	NA	NA	XXX
97542		A	Wheelchair mngment training	0.45	0.30	0.29	NA	NA	0.01	0.76	0.75	NA	NA	XXX
97597		A	Active wound care/20 cm or <	0.58	1.13	0.78	0.13	0.53	0.05	1.76	1.41	0.76	1.16	XXX
97598		A	Active wound care > 20 cm	0.80	1.31	0.92	0.18	0.64	0.05	2.16	1.77	1.03	1.49	XXX
97605		A	Neg press wound tx, < 50 cm	0.55	0.42	0.36	0.12	0.20	0.02	0.99	0.93	0.69	0.77	XXX
97606		A	Neg press wound tx, > 50 cm	0.60	0.43	0.37	0.13	0.21	0.03	1.06	1.00	0.76	0.84	XXX
97750		A	Physical performance test	0.45	0.34	0.33	NA	NA	0.02	0.81	0.80	NA	NA	XXX
97755		A	Assistive technology assess	0.62	0.29	0.28	NA	NA	0.02	0.93	0.92	NA	NA	XXX
97760		A	Orthotic mgmt and training	0.45	0.44	0.37	NA	NA	0.03	0.92	0.85	NA	NA	XXX
97761		A	Prosthetic training	0.45	0.34	0.30	NA	NA	0.02	0.81	0.77	NA	NA	XXX
97762		A	C/o for orthotic/prosth use	0.25	0.75	0.50	NA	NA	0.02	1.02	0.77	NA	NA	XXX
97799		C	Physical medicine procedure	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
97802		A	Medical nutrition, indiv, in	0.45	0.12	0.38	0.11	0.38	0.01	0.58	0.84	0.57	0.84	XXX
97803		A	Med nutrition, indiv, subseq	0.37	0.10	0.38	0.09	0.38	0.01	0.48	0.76	0.47	0.76	XXX
97804		A	Medical nutrition, group	0.25	0.06	0.15	0.06	0.15	0.01	0.32	0.41	0.32	0.41	XXX
97810		N	Acupunct w/o stimul 15 min	0.60	0.26	0.35	0.14	0.21	0.03	0.89	0.98	0.77	0.84	XXX
97811		N	Acupunct w/o stimul addl 15m	0.50	0.16	0.23	0.12	0.17	0.03	0.69	0.76	0.65	0.70	ZZZ
97813		N	Acupunct w/stimul 15 min	0.65	0.27	0.37	0.15	0.23	0.03	0.95	1.05	0.83	0.91	XXX
97814		N	Acupunct w/stimul addl 15m	0.55	0.19	0.27	0.13	0.19	0.03	0.77	0.85	0.71	0.77	ZZZ
98925		A	Osteopathic manipulation	0.45	0.28	0.31	0.12	0.14	0.02	0.75	0.78	0.59	0.61	000
98926		A	Osteopathic manipulation	0.65	0.36	0.40	0.16	0.23	0.03	1.04	1.08	0.84	0.91	000
98927		A	Osteopathic manipulation	0.87	0.45	0.49	0.22	0.27	0.03	1.35	1.39	1.12	1.17	000
98928		A	Osteopathic manipulation	1.03	0.50	0.57	0.26	0.32	0.04	1.57	1.64	1.33	1.39	000
98929		A	Osteopathic manipulation	1.19	0.57	0.65	0.29	0.35	0.05	1.81	1.89	1.53	1.59	000
98940		A	Chiropractic manipulation	0.45	0.21	0.23	0.12	0.12	0.01	0.67	0.69	0.58	0.58	000
98941		A	Chiropractic manipulation	0.65	0.27	0.29	0.17	0.17	0.01	0.93	0.95	0.83	0.83	000
98942		A	Chiropractic manipulation	0.87	0.33	0.35	0.23	0.23	0.02	1.22	1.24	1.12	1.12	000
98943		N	Chiropractic manipulation	0.40	0.18	0.23	0.09	0.14	0.01	0.59	0.64	0.50	0.55	XXX
99082		C	Unusual physician travel	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
99143		C	Mod cs by same phys, < 5 yrs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
99144		C	Mod cs by same phys, 5 yrs +	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
99145		C	Mod cs by same phys add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ

ADDENDUM B.—RELATIVE VALUE UNITS (RVUs) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
99148		C	Mod cs diff phys < 5 yrs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
99149		C	Mod cs diff phys 5 yrs +	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
99150		C	Mod cs diff phys add-on	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ
99170		A	Anogenital exam, child	1.75	1.51	1.70	0.50	0.54	0.08	3.34	3.53	2.33	2.37	000
99175		A	Induction of vomiting	0.00	0.34	1.13	NA	NA	0.10	0.44	1.23	NA	NA	XXX
99183		A	Hyperbaric oxygen therapy	2.34	2.61	3.08	0.58	0.69	0.16	5.11	5.58	3.08	3.19	XXX
99185		A	Regional hypothermia	0.00	1.66	0.90	NA	NA	0.04	1.70	0.94	NA	NA	XXX
99186		A	Total body hypothermia	0.00	1.41	1.69	NA	NA	0.45	1.86	2.14	NA	NA	XXX
99195		A	Phlebotomy	0.00	2.60	0.98	NA	NA	0.02	2.62	1.00	NA	NA	XXX
99199		C	Special service/proc/report	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
99201		A	Office/outpatient visit, new	0.45	0.54	0.50	0.15	0.15	0.03	1.02	0.98	0.63	0.63	XXX
99202		A	Office/outpatient visit, new	0.88	0.83	0.80	0.29	0.31	0.05	1.76	1.73	1.22	1.24	XXX
99203		A	Office/outpatient visit, new	1.34	1.10	1.12	0.42	0.47	0.09	2.53	2.55	1.85	1.90	XXX
99204		A	Office/outpatient visit, new	2.30	1.49	1.50	0.71	0.71	0.12	3.91	3.92	3.13	3.13	XXX
99205		A	Office/outpatient visit, new	3.00	1.79	1.78	0.91	0.94	0.15	4.94	4.93	4.06	4.09	XXX
99211		A	Office/outpatient visit, est	0.17	0.33	0.38	0.06	0.06	0.01	0.51	0.56	0.24	0.24	XXX
99212		A	Office/outpatient visit, est	0.45	0.55	0.54	0.15	0.16	0.03	1.03	1.02	0.63	0.64	XXX
99213		A	Office/outpatient visit, est	0.92	0.76	0.71	0.28	0.25	0.03	1.71	1.66	1.23	1.20	XXX
99214		A	Office/outpatient visit, est	1.42	1.10	1.05	0.44	0.42	0.05	2.57	2.52	1.91	1.89	XXX
99215		A	Office/outpatient visit, est	2.00	1.39	1.34	0.61	0.64	0.08	3.47	3.42	2.69	2.72	XXX
99217		A	Observation care discharge	1.28	NA	NA	0.50	0.52	0.06	NA	NA	1.84	1.86	XXX
99218		A	Observation care	1.28	NA	NA	0.38	0.43	0.06	NA	NA	1.72	1.77	XXX
99219		A	Observation care	2.14	NA	NA	0.60	0.69	0.10	NA	NA	2.84	2.93	XXX
99220		A	Observation care	2.99	NA	NA	0.86	0.99	0.14	NA	NA	3.99	4.12	XXX
99221		A	Initial hospital care	1.88	NA	NA	0.55	0.48	0.07	NA	NA	2.50	2.43	XXX
99222		A	Initial hospital care	2.56	NA	NA	0.71	0.73	0.10	NA	NA	3.37	3.39	XXX
99223		A	Initial hospital care	3.78	NA	NA	1.08	1.04	0.13	NA	NA	4.99	4.95	XXX
99231		A	Subsequent hospital care	0.76	NA	NA	0.24	0.23	0.03	NA	NA	1.03	1.02	XXX
99232		A	Subsequent hospital care	1.39	NA	NA	0.43	0.39	0.04	NA	NA	1.86	1.82	XXX
99233		A	Subsequent hospital care	2.00	NA	NA	0.60	0.54	0.06	NA	NA	2.66	2.60	XXX
99234		A	Observ/hosp same date	2.56	NA	NA	0.78	0.86	0.13	NA	NA	3.47	3.55	XXX
99235		A	Observ/hosp same date	3.41	NA	NA	NA	NA	0.16	NA	NA	NA	NA	XXX
99236		A	Observ/hosp same date	4.26	NA	NA	1.25	1.39	0.19	NA	NA	5.70	5.84	XXX
99238		A	Hospital discharge day	1.28	NA	NA	0.50	0.53	0.05	NA	NA	1.83	1.86	XXX
99239		A	Hospital discharge day	1.90	NA	NA	0.68	0.72	0.07	NA	NA	2.65	2.69	XXX
99241		A	Office consultation	0.64	0.66	0.65	0.22	0.22	0.05	1.35	1.34	0.91	0.91	XXX
99242		A	Office consultation	1.34	1.08	1.05	0.47	0.46	0.10	2.52	2.49	1.91	1.90	XXX
99243		A	Office consultation	1.88	1.45	1.41	0.67	0.64	0.13	3.46	3.42	2.68	2.65	XXX
99244		A	Office consultation	3.02	1.95	1.85	1.09	0.96	0.16	5.13	5.03	4.27	4.14	XXX
99245		A	Office consultation	3.77	2.27	2.27	1.31	1.26	0.21	6.25	6.25	5.29	5.24	XXX
99251		A	Initial inpatient consult	1.00	NA	NA	0.31	0.26	0.05	NA	NA	1.36	1.31	XXX
99252		A	Initial inpatient consult	1.50	NA	NA	0.50	0.50	0.09	NA	NA	2.09	2.09	XXX
99253		A	Initial inpatient consult	2.27	NA	NA	0.81	0.71	0.11	NA	NA	3.19	3.09	XXX
99254		A	Initial inpatient consult	3.29	NA	NA	1.19	1.03	0.13	NA	NA	4.61	4.45	XXX
99255		A	Initial inpatient consult	4.00	NA	NA	1.40	1.36	0.18	NA	NA	5.58	5.54	XXX
99281		A	Emergency dept visit	0.45	NA	NA	0.09	0.09	0.02	NA	NA	0.56	0.56	XXX
99282		A	Emergency dept visit	0.88	NA	NA	0.17	0.15	0.04	NA	NA	1.09	1.07	XXX
99283		A	Emergency dept visit	1.34	NA	NA	0.25	0.30	0.09	NA	NA	1.68	1.73	XXX
99284		A	Emergency dept visit	2.56	NA	NA	0.46	0.47	0.14	NA	NA	3.16	3.17	XXX
99285		A	Emergency dept visit	3.80	NA	NA	0.67	0.71	0.23	NA	NA	4.70	4.74	XXX
99289		A	Ped crit care transport	4.79	NA	NA	1.11	1.37	0.24	NA	NA	6.14	6.40	XXX
99290		A	Ped crit care transport addl	2.40	NA	NA	0.60	0.76	0.12	NA	NA	3.12	3.28	ZZZ
99291		A	Critical care, first hour	4.50	2.28	2.50	1.12	1.24	0.21	6.99	7.21	5.83	5.95	XXX
99292		A	Critical care, addll 30 min	2.25	0.83	0.88	0.59	0.63	0.11	3.19	3.24	2.95	2.99	ZZZ
99293		A	Ped critical care, initial	15.98	NA	NA	3.59	4.46	1.12	NA	NA	20.69	21.56	XXX
99294		A	Ped critical care, subseq	7.99	NA	NA	1.72	2.23	0.45	NA	NA	10.16	10.67	XXX

99295		A	Neonate crit care, initial	18.46	NA	NA	4.34	5.11	1.16	NA	NA	23.96	24.73	XXX
99296		A	Neonate critical care subseq	7.99	NA	NA	1.76	2.35	0.32	NA	NA	10.07	10.66	XXX
99298		A	Ic for lbw infant < 1500 gm	2.75	NA	NA	0.66	0.86	0.17	NA	NA	3.58	3.78	XXX
99299		A	Ic, lbw infant 1500–2500 gm	2.50	NA	NA	0.75	0.83	0.16	NA	NA	3.41	3.49	XXX
99300		A	Ic, infant pbw 2501–5000 gm	2.40	NA	NA	0.72	0.81	0.15	NA	NA	3.27	3.36	XXX
99304		A	Nursing facility care, init	1.20	0.45	0.48	0.45	0.48	0.05	1.70	1.73	1.70	1.73	XXX
99305		A	Nursing facility care, init	1.61	0.56	0.61	0.56	0.61	0.07	2.24	2.29	2.24	2.29	XXX
99306		A	Nursing facility care, init	2.01	0.65	0.73	0.65	0.73	0.09	2.75	2.83	2.75	2.83	XXX
99307		A	Nursing fac care, subseq	0.60	0.27	0.27	0.27	0.27	0.03	0.90	0.90	0.90	0.90	XXX
99308		A	Nursing fac care, subseq	1.00	0.43	0.45	0.43	0.45	0.04	1.47	1.49	1.47	1.49	XXX
99309		A	Nursing fac care, subseq	1.42	0.58	0.61	0.58	0.61	0.06	2.06	2.09	2.06	2.09	XXX
99310		A	Nursing fac care, subseq	1.77	0.73	0.77	0.73	0.77	0.08	2.58	2.62	2.58	2.62	XXX
99315		A	Nursing fac discharge day	1.13	0.41	0.44	0.41	0.44	0.05	1.59	1.62	1.59	1.62	XXX
99316		A	Nursing fac discharge day	1.50	0.51	0.57	0.51	0.57	0.06	2.07	2.13	2.07	2.13	XXX
99318		A	Annual nursing fac assessmnt	1.20	0.45	0.48	0.45	0.48	0.05	1.70	1.73	1.70	1.73	XXX
99324		A	Domicil/r-home visit new pat	1.01	0.43	0.48	NA	NA	0.05	1.49	1.54	NA	NA	XXX
99325		A	Domicil/r-home visit new pat	1.52	0.56	0.65	NA	NA	0.07	2.15	2.24	NA	NA	XXX
99326		A	Domicil/r-home visit new pat	2.27	0.73	0.87	NA	NA	0.10	3.10	3.24	NA	NA	XXX
99327		A	Domicil/r-home visit new pat	3.03	0.92	1.11	NA	NA	0.13	4.08	4.27	NA	NA	XXX
99328		A	Domicil/r-home visit new pat	3.78	1.10	1.34	NA	NA	0.16	5.04	5.28	NA	NA	XXX
99334		A	Domicil/r-home visit est pat	0.76	0.36	0.39	NA	NA	0.04	1.16	1.19	NA	NA	XXX
99335		A	Domicil/r-home visit est pat	1.26	0.48	0.56	NA	NA	0.06	1.80	1.88	NA	NA	XXX
99336		A	Domicil/r-home visit est pat	2.02	0.66	0.78	NA	NA	0.09	2.77	2.89	NA	NA	XXX
99337		A	Domicil/r-home visit est pat	3.03	0.90	1.09	NA	NA	0.13	4.06	4.25	NA	NA	XXX
99341		A	Home visit, new patient	1.01	0.37	0.45	NA	NA	0.05	1.43	1.51	NA	NA	XXX
99342		A	Home visit, new patient	1.52	0.50	0.64	NA	NA	0.07	2.09	2.23	NA	NA	XXX
99343		A	Home visit, new patient	2.27	0.69	0.88	NA	NA	0.10	3.06	3.25	NA	NA	XXX
99344		A	Home visit, new patient	3.03	0.91	1.11	NA	NA	0.13	4.07	4.27	NA	NA	XXX
99345		A	Home visit, new patient	3.78	1.08	1.34	NA	NA	0.16	5.02	5.28	NA	NA	XXX
99347		A	Home visit, est patient	0.76	0.36	0.39	NA	NA	0.04	1.16	1.19	NA	NA	XXX
99348		A	Home visit, est patient	1.26	0.49	0.56	NA	NA	0.06	1.81	1.88	NA	NA	XXX
99349		A	Home visit, est patient	2.02	0.66	0.79	NA	NA	0.09	2.77	2.90	NA	NA	XXX
99350		A	Home visit, est patient	3.03	0.91	1.11	NA	NA	0.13	4.07	4.27	NA	NA	XXX
99354		A	Prolonged service, office	1.77	0.65	0.74	0.50	0.62	0.08	2.50	2.59	2.35	2.47	ZZZ
99355		A	Prolonged service, office	1.77	0.67	0.73	0.52	0.60	0.07	2.51	2.57	2.36	2.44	ZZZ
99356		A	Prolonged service, inpatient	1.71	NA	NA	0.51	0.59	0.07	NA	NA	2.29	2.37	ZZZ
99357		A	Prolonged service, inpatient	1.71	NA	NA	0.50	0.60	0.08	NA	NA	2.29	2.39	ZZZ
99374		B	Home health care supervision	1.10	0.55	0.66	0.26	0.38	0.05	1.70	1.81	1.41	1.53	XXX
99375		I	Home health care supervision	1.73	0.76	1.35	0.40	1.26	0.07	2.56	3.15	2.20	3.06	XXX
99377		B	Hospice care supervision	1.10	0.55	0.66	0.26	0.38	0.05	1.70	1.81	1.41	1.53	XXX
99378		I	Hospice care supervision	1.73	0.76	1.65	0.40	1.56	0.07	2.56	3.45	2.20	3.36	XXX
99379		B	Nursing fac care supervision	1.10	0.55	0.66	0.26	0.38	0.04	1.69	1.80	1.40	1.52	XXX
99380		B	Nursing fac care supervision	1.73	0.76	0.93	0.40	0.60	0.06	2.55	2.72	2.19	2.39	XXX
99381		N	Prev visit, new, infant	1.19	1.01	1.38	0.28	0.41	0.05	2.25	2.62	1.52	1.65	XXX
99382		N	Prev visit, new, age 1–4	1.36	1.05	1.42	0.32	0.47	0.05	2.46	2.83	1.73	1.88	XXX
99383		N	Prev visit, new, age 5–11	1.36	1.04	1.37	0.32	0.47	0.05	2.45	2.78	1.73	1.88	XXX
99384		N	Prev visit, new, age 12–17	1.53	1.08	1.43	0.36	0.53	0.06	2.67	3.02	1.95	2.12	XXX
99385		N	Prev visit, new, age 18–39	1.53	1.08	1.43	0.36	0.53	0.06	2.67	3.02	1.95	2.12	XXX
99386		N	Prev visit, new, age 40–64	1.88	1.16	1.60	0.44	0.65	0.07	3.11	3.55	2.39	2.60	XXX
99387		N	Prev visit, new, 65 & over	2.06	1.29	1.73	0.48	0.71	0.07	3.42	3.86	2.61	2.84	XXX
99391		N	Prev visit, est, infant	1.02	0.87	0.98	0.24	0.35	0.04	1.93	2.04	1.30	1.41	XXX
99392		N	Prev visit, est, age 1–4	1.19	0.91	1.05	0.28	0.41	0.05	2.15	2.29	1.52	1.65	XXX
99393		N	Prev visit, est, age 5–11	1.19	0.91	1.02	0.28	0.41	0.05	2.15	2.26	1.52	1.65	XXX
99394		N	Prev visit, est, age 12–17	1.36	0.95	1.09	0.32	0.47	0.05	2.36	2.50	1.73	1.88	XXX
99395		N	Prev visit, est, age 18–39	1.36	0.95	1.11	0.32	0.47	0.05	2.36	2.52	1.73	1.88	XXX
99396		N	Prev visit, est, age 40–64	1.53	0.99	1.19	0.36	0.53	0.06	2.58	2.78	1.95	2.12	XXX
99397		N	Prev visit, est, 65 & over	1.71	1.13	1.30	0.40	0.60	0.06	2.90	3.07	2.17	2.37	XXX
99401		N	Preventive counseling, indiv	0.48	0.36	0.56	0.11	0.17	0.01	0.85	1.05	0.60	0.66	XXX
99402		N	Preventive counseling, indiv	0.98	0.48	0.77	0.23	0.34	0.02	1.48	1.77	1.23	1.34	XXX
99403		N	Preventive counseling, indiv	1.46	0.59	0.97	0.34	0.51	0.04	2.09	2.47	1.84	2.01	XXX
99404		N	Preventive counseling, indiv	1.95	0.71	1.17	0.45	0.68	0.05	2.71	3.17	2.45	2.68	XXX
99411		N	Preventive counseling, group	0.15	0.22	0.19	0.03	0.05	0.01	0.38	0.35	0.19	0.21	XXX
99412		N	Preventive counseling, group	0.25	0.25	0.25	0.06	0.09	0.01	0.51	0.51	0.32	0.35	XXX
99431		A	Initial care, normal newborn	1.17	NA	NA	0.27	0.35	0.05	NA	NA	1.49	1.57	XXX
99432		A	Newborn care, not in hosp	1.26	1.02	0.95	0.29	0.37	0.07	2.35	2.28	1.62	1.70	XXX
99433		A	Normal newborn care/hospital	0.62	NA	NA	0.14	0.19	0.02	NA	NA	0.78	0.83	XXX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—Continued

CPT[1]/ HCPCS[2]	Mod	Status	Description	Physician Work RVUs	Fully Implemented Non-Facility PE RVUs	Year 2007 Transitional Non-Facility PE RVUs	Fully Implemented Facility PE RVUs	Year 2007 Transitional Facility PE RVUs	Mal-Practice RVUs	Fully Implemented Non-Facility Total	Year 2007 Transitional Non-Facility Total	Fully Implemented Facility Total	Year 2007 Transitional Facility Total	Global
99435		A	Newborn discharge day hosp	1.50	NA	NA	0.47	0.56	0.06	NA	NA	2.03	2.12	XXX
99438		A	Attendance, birth	1.50	NA	NA	0.35	0.44	0.06	NA	NA	1.91	2.00	XXX
99440		A	Newborn resuscitation	2.93	NA	NA	0.68	0.87	0.12	NA	NA	3.73	3.92	XXX
99499		C	Unlisted e&m service	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
G0101		A	CA screen;pelvic/breast exam	0.45	0.49	0.51	NA	NA	0.02	0.96	0.98	NA	NA	XXX
G0102		A	Prostate ca screening; dre	0.17	0.33	0.38	0.06	0.06	0.01	0.51	0.56	0.24	0.24	XXX
G0104		A	CA screen;flexl sigmoidscope	0.96	2.49	2.33	0.61	0.53	0.08	3.53	3.37	1.65	1.57	000
G0105		A	Colorectal scrn; hi risk ind	3.69	6.36	6.20	1.81	1.58	0.30	10.35	10.19	5.80	5.55	000
G0105	53	A	Colorectal scrn; hi risk ind	0.96	2.49	2.33	0.61	0.53	0.08	3.53	3.37	1.65	1.57	000
G0106		A	Colon CA screen;barium enema	0.99	4.94	3.15	NA	NA	0.17	6.10	4.31	NA	NA	XXX
G0106	26	A	Colon CA screen;barium enema	0.99	0.31	0.32	0.31	0.32	0.04	1.34	1.35	1.34	1.35	XXX
G0106	TC	A	Colon CA screen;barium enema	0.00	4.63	2.83	NA	NA	0.13	4.76	2.96	NA	NA	XXX
G0108		A	Diab manage trn per indiv	0.00	0.59	0.77	NA	NA	0.01	0.60	0.78	NA	NA	XXX
G0109		A	Diab manage trn ind/group	0.00	0.31	0.44	NA	NA	0.01	0.32	0.45	NA	NA	XXX
G0117		T	Glaucoma scrn hgh risk direc	0.45	0.80	0.74	NA	NA	0.01	1.26	1.20	NA	NA	XXX
G0118		T	Glaucoma scrn hgh risk direc	0.17	0.79	0.60	NA	NA	0.01	0.97	0.78	NA	NA	XXX
G0120		A	Colon ca scrn; barium enema	0.99	4.94	3.15	NA	NA	0.17	6.10	4.31	NA	NA	XXX
G0120	26	A	Colon ca scrn; barium enema	0.99	0.31	0.32	0.31	0.32	0.04	1.34	1.35	1.34	1.35	XXX
G0120	TC	A	Colon ca scrn; barium enema	0.00	4.63	2.83	NA	NA	0.13	4.76	2.96	NA	NA	XXX
G0121		A	Colon ca scrn not hi rsk ind	3.69	6.36	6.20	1.81	1.56	0.30	10.35	10.19	5.80	5.55	000
G0121	53	A	Colon ca scrn not hi rsk ind	0.96	2.49	2.33	0.61	0.53	0.08	3.53	3.37	1.65	1.57	000
G0122		N	Colon ca scrn; barium enema	0.99	5.69	3.35	NA	NA	0.18	6.86	4.52	NA	NA	XXX
G0122	26	N	Colon ca scrn; barium enema	0.99	0.23	0.34	0.23	0.34	0.05	1.27	1.38	1.27	1.38	XXX
G0122	TC	N	Colon ca scrn; barium enema	0.00	5.46	3.01	NA	NA	0.13	5.59	3.14	NA	NA	XXX
G0124		A	Screen c/v thin layer by MD	0.42	0.38	0.21	0.38	0.21	0.02	0.82	0.65	0.82	0.65	XXX
G0127		R	Trim nail(s)	0.17	0.39	0.29	0.04	0.06	0.01	0.57	0.47	0.22	0.24	000
G0128		R	CORF skilled nursing service	0.08	0.02	0.03	0.02	0.03	0.01	0.11	0.12	0.11	0.12	XXX
G0130		A	Single energy x-ray study	0.22	0.55	0.79	NA	NA	0.06	0.83	1.07	NA	NA	XXX
G0130	26	A	Single energy x-ray study	0.22	0.06	0.07	0.06	0.07	0.01	0.29	0.30	0.29	0.30	XXX
G0130	TC	A	Single energy x-ray study	0.00	0.49	0.72	NA	NA	0.05	0.54	0.77	NA	NA	XXX
G0141		A	Scr c/v cyto,autosys and md	0.42	0.38	0.21	0.38	0.21	0.02	0.82	0.65	0.82	0.65	XXX
G0166		A	Extrnl counterpulse, per tx	0.07	4.56	3.82	NA	NA	0.01	4.64	3.90	NA	NA	XXX
G0168		A	Wound closure by adhesive	0.45	1.57	1.84	0.21	0.22	0.03	2.05	2.32	0.69	0.70	000
G0179		A	MD recertification HHA PT	0.45	0.48	0.89	NA	NA	0.02	0.95	1.36	NA	NA	XXX
G0180		A	MD certification HHA patient	0.67	0.56	1.09	NA	NA	0.03	1.26	1.79	NA	NA	XXX
G0181		A	Home health care supervision	1.73	0.81	1.31	NA	NA	0.07	2.61	3.11	NA	NA	XXX
G0182		A	Hospice care supervision	1.73	0.83	1.45	NA	NA	0.07	2.63	3.25	NA	NA	XXX
G0186		C	Dstry eye lesn,fdr vssl tech	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	YYY
G0202		A	Screeningmammographydigital	0.70	2.82	2.78	NA	NA	0.10	3.62	3.58	NA	NA	XXX
G0202	26	A	Screeningmammographydigital	0.70	0.24	0.23	0.24	0.23	0.03	0.97	0.96	0.97	0.96	XXX
G0202	TC	A	Screeningmammographydigital	0.00	2.58	2.55	NA	NA	0.07	2.65	2.62	NA	NA	XXX
G0204		A	Diagnosticmammographydigital	0.87	3.42	2.94	NA	NA	0.11	4.40	3.92	NA	NA	XXX
G0204	26	A	Diagnosticmammographydigital	0.87	0.30	0.29	0.30	0.29	0.04	1.21	1.20	1.21	1.20	XXX
G0204	TC	A	Diagnosticmammographydigital	0.00	3.12	2.66	NA	NA	0.07	3.19	2.73	NA	NA	XXX
G0206		A	Diagnosticmammographydigital	0.70	2.68	2.36	NA	NA	0.09	3.47	3.15	NA	NA	XXX
G0206	26	A	Diagnosticmammographydigital	0.70	0.24	0.23	0.24	0.23	0.03	0.97	0.96	0.97	0.96	XXX
G0206	TC	A	Diagnosticmammographydigital	0.00	2.44	2.13	NA	NA	0.06	2.50	2.19	NA	NA	XXX
G0237		A	Therapeutic procd strg endur	0.00	0.22	0.41	NA	NA	0.02	0.24	0.43	NA	NA	XXX
G0238		A	Oth resp proc, indiv	0.00	0.23	0.43	NA	NA	0.02	0.25	0.45	NA	NA	XXX
G0239		A	Oth resp proc, group	0.00	0.32	0.33	NA	NA	0.02	0.34	0.35	NA	NA	XXX
G0245		R	Initial foot exam pt lops	0.88	0.83	0.80	0.29	0.31	0.04	1.75	1.72	1.21	1.23	XXX
G0246		R	Followup eval of foot pt lop	0.45	0.55	0.54	0.15	0.16	0.02	1.02	1.01	0.62	0.63	XXX
G0247		R	Routine footcare pt w lops	0.50	0.68	0.56	0.16	0.20	0.02	1.20	1.08	0.68	0.72	ZZZ
G0248		R	Demonstrate use home inr mon	0.00	3.30	5.78	NA	NA	0.01	3.31	5.79	NA	NA	XXX
G0249		R	Provide test material,equipm	0.00	2.38	3.57	NA	NA	0.01	2.39	3.58	NA	NA	XXX
G0250		R	MD review interpret of test	0.18	0.08	0.07	NA	NA	0.01	0.27	0.26	NA	NA	XXX

G0252	26	N	PET imaging initial dx	1.50	0.35	0.54	0.35	0.54	0.04	1.89	2.08	1.89	2.08	XXX
G0268		A	Removal of impacted wax md	0.61	0.60	0.62	0.17	0.22	0.02	1.23	1.25	0.80	0.85	000
G0270		A	MNT subs tx for change dx	0.37	0.10	0.38	0.09	0.38	0.01	0.48	0.76	0.47	0.76	XXX
G0271		A	Group MNT 2 or more 30 mins	0.25	0.06	0.15	0.06	0.15	0.01	0.32	0.41	0.32	0.41	XXX
G0275		A	Renal angio, cardiac cath	0.25	NA	NA	0.14	0.11	0.01	NA	NA	0.40	0.37	ZZZ
G0278		A	Iliac art angio,cardiac cath	0.25	NA	NA	0.14	0.11	0.01	NA	NA	0.40	0.37	ZZZ
G0281		A	Elec stim unattend for press	0.18	0.15	0.12	NA	NA	0.01	0.34	0.31	NA	NA	XXX
G0283		A	Elec stim other than wound	0.18	0.15	0.12	NA	NA	0.01	0.34	0.31	NA	NA	XXX
G0288		A	Recon, CTA for surg plan	0.00	0.99	8.21	NA	NA	0.18	1.17	8.39	NA	NA	XXX
G0289		A	Arthro, loose body + chondro	1.48	NA	NA	0.59	0.75	0.26	NA	NA	2.33	2.49	ZZZ
G0308		A	ESRD related svc 4+mo < 2yrs	12.74	5.52	7.79	5.52	7.79	0.42	18.68	20.95	18.68	20.95	XXX
G0309		A	ESRD related svc 2–3mo <2yrs	10.61	4.80	6.53	4.80	6.53	0.36	15.77	17.50	15.77	17.50	XXX
G0310		A	ESRD related svc 1 vst <2yrs	8.49	2.87	4.98	2.87	4.98	0.28	11.64	13.75	11.64	13.75	XXX
G0311		A	ESRD related svs 4+mo 2–11yr	9.73	3.59	4.44	3.59	4.44	0.34	13.66	14.51	13.66	14.51	XXX
G0312		A	ESRD relate svs 2–3 mo 2–11y	8.11	2.67	3.61	2.67	3.61	0.29	11.07	12.01	11.07	12.01	XXX
G0313		A	ESRD related svs 1 mon 2–11y	6.49	1.86	2.82	1.86	2.82	0.22	8.57	9.53	8.57	9.53	XXX
G0314		A	ESRD related svs 4+ mo 12–19	8.28	3.43	4.17	3.43	4.17	0.27	11.98	12.72	11.98	12.72	XXX
G0315		A	ESRD related svs 2–3mo/12–19	6.90	2.61	3.41	2.61	3.41	0.23	9.74	10.54	9.74	10.54	XXX
G0316		A	ESRD related svs 1vis/12–19y	5.52	1.69	2.63	1.69	2.63	0.17	7.38	8.32	7.38	8.32	XXX
G0317		A	ESRD related svs 4+mo 20+yrs	5.09	2.27	2.71	2.27	2.71	0.17	7.53	7.97	7.53	7.97	XXX
G0318		A	ESRD related svs 2–3 mo 20+y	4.24	1.71	2.21	1.71	2.21	0.14	6.09	6.59	6.09	6.59	XXX
G0319		A	ESRD related svs 1visit 20+y	3.39	1.14	1.71	1.14	1.71	0.11	4.64	5.21	4.64	5.21	XXX
G0320		A	ESD related svs home undr 2	10.61	2.68	6.00	2.68	6.00	0.36	13.65	16.97	13.65	16.97	XXX
G0321		A	ESRDrelatedsvs home mo 2–11y	8.11	1.99	3.44	1.99	3.44	0.29	10.39	11.84	10.39	11.84	XXX
G0322		A	ESRD related svs hom mo12–19	6.90	1.73	3.19	1.73	3.19	0.23	8.86	10.32	8.86	10.32	XXX
G0323		A	ESRD related svs home mo 20+	4.24	1.16	2.08	1.16	2.08	0.14	5.54	6.46	5.54	6.46	XXX
G0324		A	ESRD relate svs home/dy <2yr	0.35	0.16	0.22	0.16	0.22	0.01	0.52	0.58	0.52	0.58	XXX
G0325		A	ESRD relate home/day/ 2–11yr	0.23	0.09	0.11	0.09	0.11	0.01	0.33	0.35	0.33	0.35	XXX
G0326		A	ESRD relate home/dy 12–19yr	0.27	0.10	0.12	0.10	0.12	0.01	0.38	0.40	0.38	0.40	XXX
G0327		A	ESRD relate home/dy 20+yrs	0.14	0.06	0.08	0.06	0.08	0.01	0.21	0.23	0.21	0.23	XXX
G0329		A	Electromagntic tx for ulcers	0.06	0.16	0.15	NA	NA	0.01	0.23	0.22	NA	NA	XXX
G0332		D	Preadmin IV immunoglobulin	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
G0337		X	Hospice evaluation preelecti	1.34	0.31	0.46	0.31	0.46	0.09	1.74	1.89	1.74	1.89	XXX
G0339		C	Robot lin-radsurg com, first	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
G0340		C	Robt lin-radsurg fractx 2–5	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
G0341		A	Percutaneous islet celltrans	6.98	NA	NA	2.14	2.48	0.48	NA	NA	9.60	9.94	000
G0342		A	Laparoscopy islet cell trans	11.92	NA	NA	5.13	5.25	1.46	NA	NA	18.51	18.63	090
G0343		A	Laparotomy islet cell transp	19.85	NA	NA	8.69	8.74	2.06	NA	NA	30.60	30.65	090
G0344		A	Initial preventive exam	1.34	1.10	1.12	0.42	0.47	0.10	2.54	2.56	1.86	1.91	XXX
G0364		A	Bone marrow aspirate &biopsy	0.16	0.16	0.15	0.07	0.06	0.04	0.36	0.35	0.27	0.26	ZZZ
G0365		A	Vessel mapping hemo access	0.25	5.34	4.33	NA	NA	0.25	5.84	4.83	NA	NA	XXX
G0365	26	A	Vessel mapping hemo access	0.25	0.07	0.09	0.07	0.09	0.02	0.34	0.36	0.34	0.36	XXX
G0365	TC	A	Vessel mapping hemo access	0.00	5.27	4.24	NA	NA	0.23	5.50	4.47	NA	NA	XXX
G0366		A	EKG for initial prevent exam	0.17	0.35	0.47	0.35	0.47	0.03	0.55	0.67	0.55	0.67	XXX
G0367		A	EKG tracing for initial prev	0.00	0.28	0.41	NA	NA	0.02	0.30	0.43	NA	NA	XXX
G0368		A	EKG interpret & report preve	0.17	0.07	0.06	0.07	0.06	0.01	0.25	0.24	0.25	0.24	XXX
G0372		A	MD service required for PMD	0.17	0.04	0.30	0.04	0.06	0.01	0.22	0.48	0.22	0.24	XXX
G0375		A	Smoke/tobacco counselng 3–10	0.24	0.07	0.09	0.07	0.09	0.01	0.32	0.34	0.32	0.34	XXX
G0376		A	Smoke/tobacco counseling >10	0.48	0.13	0.17	0.13	0.16	0.01	0.62	0.66	0.62	0.65	XXX
Gxxx1		A	Ultrasound exam AAA screen	0.58	2.42	1.81	NA	NA	0.11	3.11	2.50	NA	NA	XXX
Gxxx1	26	A	Ultrasound exam AAA screen	0.58	0.19	0.19	0.19	0.19	0.03	0.80	0.80	0.80	0.80	XXX
Gxxx1	TC	A	Ultrasound exam AAA screen	0.00	2.23	1.62	NA	NA	0.08	2.31	1.70	NA	NA	XXX
M0064		A	Visit for drug monitoring	0.37	0.89	0.48	0.06	0.11	0.01	1.27	0.86	0.44	0.49	XXX
P3001		A	Screening pap smear by phys	0.42	0.38	0.21	0.38	0.21	0.02	0.82	0.65	0.82	0.65	XXX
Q0035		A	Cardiokymography	0.17	0.30	0.41	NA	NA	0.03	0.50	0.61	NA	NA	XXX
Q0035	26	A	Cardiokymography	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
Q0035	TC	A	Cardiokymography	0.00	0.25	0.36	NA	NA	0.02	0.27	0.38	NA	NA	XXX
Q0091		A	Obtaining screen pap smear	0.37	0.76	0.69	0.10	0.13	0.02	1.15	1.08	0.49	0.52	XXX
Q0092		A	Set up port xray equipment	0.00	0.50	0.37	0.50	0.37	0.01	0.51	0.38	0.51	0.38	XXX
Q3001		C	Brachytherapy Radioelements	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	XXX
R0070		C	Transport portable x-ray	0.00	0.00	0.00	0.00	0.00	0	0.00	0.00	0.00	0.00	XXX
R0075		C	Transport port x-ray multipl	0.00	0.00	0.00	0.00	0.00	0	0.00	0.00	0.00	0.00	XXX

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ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS

CPT Codes	Short descriptor
00100	Anesth, salivary gland
00102	Anesth, repair of cleft lip
00103	Anesth, blepharoplasty
00104	Anesth, electroshock
00120	Anesth, ear surgery
00124	Anesth, ear exam
00126	Anesth, tympanotomy
00140	Anesth, procedures on eye
00142	Anesth, lens surgery
00144	Anesth, corneal transplant
00145	Anesth, vitreoretinal surg
00147	Anesth, iridectomy
00148	Anesth, eye exam
00160	Anesth, nose/sinus surgery
00162	Anesth, nose/sinus surgery
00164	Anesth, biopsy of nose
00170	Anesth, procedure on mouth
00172	Anesth, cleft palate repair
00174	Anesth, pharyngeal surgery
00176	Anesth, pharyngeal surgery
00190	Anesth, face/skull bone surg
00192	Anesth, facial bone surgery
00210	Anesth, open head surgery
00212	Anesth, skull drainage
00214	Anesth, skull drainage
00215	Anesth, skull repair/fract
00216	Anesth, head vessel surgery
00218	Anesth, special head surgery
00220	Anesth, intrcrn nerve
00222	Anesth, head nerve surgery
00300	Anesth, head/neck/ptrunk
00320	Anesth, neck organ, 1 & over
00322	Anesth, biopsy of thyroid
00326	Anesth, larynx/trach, < 1 yr
00350	Anesth, neck vessel surgery
00352	Anesth, neck vessel surgery
00400	Anesth, skin, ext/per/atrunk
00402	Anesth, surgery of breast
00404	Anesth, surgery of breast
00406	Anesth, surgery of breast
00410	Anesth, correct heart rhythm
00450	Anesth, surgery of shoulder
00452	Anesth, surgery of shoulder
00454	Anesth, collar bone biopsy
00470	Anesth, removal of rib
00472	Anesth, chest wall repair
00474	Anesth, surgery of rib(s)
00500	Anesth, esophageal surgery
00520	Anesth, chest procedure
00522	Anesth, chest lining biopsy
00524	Anesth, chest drainage
00528	Anesth, chest partition view
00529	Anesth, chest partition view
00530	Anesth, pacemaker insertion
00532	Anesth, vascular access
00534	Anesth, cardioverter/defib
00537	Anesth, cardiac electrophys
00539	Anesth, trach-bronch reconst
00540	Anesth, chest surgery
00541	Anesth, one lung ventilation
00542	Anesth, release of lung
00546	Anesth, lung,chest wall surg
00548	Anesth, trachea,bronchi surg
00550	Anesth, sternal debridement
00560	Anesth, heart surg w/o pump
00561	Anesth, heart surg < age 1
00562	Anesth, heart surg w/pump

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
00563	Anesth, heart surg w/arrest
00566	Anesth, cabg w/o pump
00580	Anesth, heart/lung transplnt
00600	Anesth, spine, cord surgery
00604	Anesth, sitting procedure
00620	Anesth, spine, cord surgery
00622	Anesth, removal of nerves
00630	Anesth, spine, cord surgery
00632	Anesth, removal of nerves
00634	Anesth for chemonucleolysis
00635	Anesth, lumbar puncture
00640	Anesth, spine manipulation
00670	Anesth, spine, cord surgery
00700	Anesth, abdominal wall surg
00702	Anesth, for liver biopsy
00730	Anesth, abdominal wall surg
00740	Anesth, upper gi visualize
00750	Anesth, repair of hernia
00752	Anesth, repair of hernia
00754	Anesth, repair of hernia
00756	Anesth, repair of hernia
00770	Anesth, blood vessel repair
00790	Anesth, surg upper abdomen
00792	Anesth, hemorr/excise liver
00794	Anesth, pancreas removal
00796	Anesth, for liver transplant
00797	Anesth, surgery for obesity
00800	Anesth, abdominal wall surg
00802	Anesth, fat layer removal
00810	Anesth, low intestine scope
00820	Anesth, abdominal wall surg
00830	Anesth, repair of hernia
00832	Anesth, repair of hernia
00834	Anesth, hernia repair < 1 yr
00836	Anesth hernia repair preemie
00840	Anesth, surg lower abdomen
00842	Anesth, amniocentesis
00844	Anesth, pelvis surgery
00846	Anesth, hysterectomy
00848	Anesth, pelvic organ surg
00851	Anesth, tubal ligation
00860	Anesth, surgery of abdomen
00862	Anesth, kidney/ureter surg
00864	Anesth, removal of bladder
00865	Anesth, removal of prostate
00866	Anesth, removal of adrenal
00868	Anesth, kidney transplant
00870	Anesth, bladder stone surg
00872	Anesth kidney stone destruct
00873	Anesth kidney stone destruct
00880	Anesth, abdomen vessel surg
00882	Anesth, major vein ligation
00902	Anesth, anorectal surgery
00904	Anesth, perineal surgery
00906	Anesth, removal of vulva
00908	Anesth, removal of prostate
00910	Anesth, bladder surgery
00912	Anesth, bladder tumor surg
00914	Anesth, removal of prostate
00916	Anesth, bleeding control
00918	Anesth, stone removal
00920	Anesth, genitalia surgery
00921	Anesth, vasectomy
00922	Anesth, sperm duct surgery
00924	Anesth, testis exploration
00926	Anesth, removal of testis
00928	Anesth, removal of testis

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
00930	Anesth, testis suspension
00932	Anesth, amputation of penis
00934	Anesth, penis, nodes removal
00936	Anesth, penis, nodes removal
00938	Anesth, insert penis device
00940	Anesth, vaginal procedures
00942	Anesth, surg on vag/ureihral
00944	Anesth, vaginal hysterectomy
00948	Anesth, repair of cervix
00950	Anesth, vaginal endoscopy
00952	Anesth, hysteroscope/graph
01112	Anesth, bone aspirate/bx
01120	Anesth, pelvis surgery
01130	Anesth, body cast procedure
01140	Anesth, amputation at pelvis
01150	Anesth, pelvic tumor surgery
01160	Anesth, pelvis procedure
01170	Anesth, pelvis surgery
01173	Anesth, fx repair, pelvis
01180	Anesth, pelvis nerve removal
01190	Anesth, pelvis nerve removal
01200	Anesth, hip joint procedure
01202	Anesth, arthroscopy of hip
01210	Anesth, hip joint surgery
01212	Anesth, hip disarticulation
01214	Anesth, hip arthroplasty
01215	Anesth, revise hip repair
01220	Anesth, procedure on femur
01230	Anesth, surgery of femur
01232	Anesth, amputation of femur
01234	Anesth, radical femur surg
01250	Anesth, upper leg surgery
01260	Anesth, upper leg veins surg
01270	Anesth, thigh arteries surg
01272	Anesth, femoral artery surg
01274	Anesth, femoral embolectomy
01320	Anesth, knee area surgery
01340	Anesth, knee area procedure
01360	Anesth, knee area surgery
01380	Anesth, knee joint procedure
01382	Anesth, dx knee arthroscopy
01390	Anesth, knee area procedure
01392	Anesth, knee area surgery
01400	Anesth, knee joint surgery
01402	Anesth, knee arthroplasty
01404	Anesth, amputation at knee
01420	Anesth, knee joint casting
01430	Anesth, knee veins surgery
01432	Anesth, knee vessel surg
01440	Anesth, knee arteries surg
01442	Anesth, knee artery surg
01444	Anesth, knee artery repair
01462	Anesth, lower leg procedure
01464	Anesth, ankle/ft arthroscopy
01470	Anesth, lower leg surgery
01472	Anesth, achilles tendon surg
01474	Anesth, lower leg surgery
01480	Anesth, lower leg bone surg
01482	Anesth, radical leg surgery
01484	Anesth, lower leg revision
01486	Anesth, ankle replacement
01490	Anesth, lower leg casting
01500	Anesth, leg arteries surg
01502	Anesth, lwr leg embolectomy
01520	Anesth, lower leg vein surg
01522	Anesth, lower leg vein surg
01610	Anesth, surgery of shoulder

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
01620	Anesth, shoulder procedure
01622	Anes dx shoulder arthroscopy
01630	Anesth, surgery of shoulder
01632	Anesth, surgery of shoulder
01634	Anesth, shoulder joint amput
01636	Anesth, forequarter amput
01638	Anesth, shoulder replacement
01650	Anesth, shoulder artery surg
01652	Anesth, shoulder vessel surg
01654	Anesth, shoulder vessel surg
01656	Anesth, arm-leg vessel surg
01670	Anesth, shoulder vein surg
01680	Anesth, shoulder casting
01682	Anesth, airplane cast
01710	Anesth, elbow area surgery
01712	Anesth, uppr arm tendon surg
01714	Anesth, uppr arm tendon surg
01716	Anesth, biceps tendon repair
01730	Anesth, uppr arm procedure
01732	Anesth, dx elbow arthroscopy
01740	Anesth, upper arm surgery
01742	Anesth, humerus surgery
01744	Anesth, humerus repair
01756	Anesth, radical humerus surg
01758	Anesth, humeral lesion surg
01760	Anesth, elbow replacement
01770	Anesth, uppr arm artery surg
01772	Anesth, uppr arm embolectomy
01780	Anesth, upper arm vein surg
01782	Anesth, uppr arm vein repair
01810	Anesth, lower arm surgery
01820	Anesth, lower arm procedure
01829	Anesth, dx wrist arthroscopy
01830	Anesth, lower arm surgery
01832	Anesth, wrist replacement
01840	Anesth, lwr arm artery surg
01842	Anesth, lwr arm embolectomy
01844	Anesth, vascular shunt surg
01850	Anesth, lower arm vein surg
01852	Anesth, lwr arm vein repair
01860	Anesth, lower arm casting
01905	Anes, spine inject, x-ray/re
01916	Anesth, dx arteriography
01920	Anesth, catheterize heart
01922	Anesth, cat or mri scan
01924	Anes, ther interven rad, art
01925	Anes, ther interven rad, car
01926	Anes, tx interv rad hrt/cran
01930	Anes, ther interven rad, vei
01931	Anes, ther interven rad, tip
01932	Anes, tx interv rad, th vein
01933	Anes, tx interv rad, cran v
01951	Anesth, burn, less 4 percent
01952	Anesth, burn, 4–9 percent
01953	Anesth, burn, each 9 percent
01958	Anesth, antepartum manipul
01960	Anesth, vaginal delivery
01961	Anesth, cs delivery
01962	Anesth, emer hysterectomy
01963	Anesth, cs hysterectomy
01965	Anesth, inc/missed ab proc
01966	Anesth, induced ab procedure
01967	Anesth/analg, vag delivery
01968	Anes/analg cs deliver add-on
01969	Anesth/analg cs hyst add-on
01990	Support for organ donor
01991	Anesth, nerve block/inj
01992	Anesth, n block/inj, prone
01995	Regional anesthesia limb
01996	Hosp manage cont drug admin
01999	Unlisted anesth procedure
23500	Treat clavicle fracture
23680	Treat dislocation/fracture
24130	Removal of head of radius
24134	Removal of arm bone lesion
24136	Remove radius bone lesion
24138	Remove elbow bone lesion
24140	Partial removal of arm bone
24145	Partial removal of radius
24147	Partial removal of elbow
24495	Decompression of forearm
24500	Treat humerus fracture
24500	Treat humerus fracture
24505	Treat humerus fracture
24515	Treat humerus fracture
24516	Treat humerus fracture
24530	Treat humerus fracture
24535	Treat humerus fracture
24538	Treat humerus fracture
24545	Treat humerus fracture
24546	Treat humerus fracture
24560	Treat humerus fracture
24565	Treat humerus fracture
24566	Treat humerus fracture
24575	Treat humerus fracture
24576	Treat humerus fracture
24577	Treat humerus fracture
24579	Treat humerus fracture
24582	Treat humerus fracture
24586	Treat elbow fracture
24587	Treat elbow fracture
24600	Treat elbow dislocation
24605	Treat elbow dislocation
24615	Treat elbow dislocation
24620	Treat elbow fracture
24635	Treat elbow fracture
24640	Treat elbow dislocation
24650	Treat radius fracture
24655	Treat radius fracture
24665	Treat radius fracture
24666	Treat radius fracture
24670	Treat ulnar fracture
24675	Treat ulnar fracture
24685	Treat ulnar fracture
25000	Incision of tendon sheath
25020	Decompress forearm 1 space
25023	Decompress forearm 1 space
25028	Drainage of forearm lesion
25031	Drainage of forearm bursa
25035	Treat forearm bone lesion
25040	Explore/treat wrist joint
25066	Biopsy forearm soft tissues
25075	Removal forearm lesion subcu
25076	Removal forearm lesion deep
25077	Remove tumor, forearm/wrist
25085	Incision of wrist capsule
25100	Biopsy of wrist joint
25101	Explore/treat wrist joint
25105	Remove wrist joint lining
25107	Remove wrist joint cartilage
25110	Remove wrist tendon lesion
25111	Remove wrist tendon lesion
25112	Reremove wrist tendon lesion
25115	Remove wrist/forearm lesion
25116	Remove wrist/forearm lesion
25118	Excise wrist tendon sheath
25119	Partial removal of ulna
25120	Removal of forearm lesion
25125	Remove/graft forearm lesion
25126	Remove/graft forearm lesion
25130	Removal of wrist lesion
25135	Remove & graft wrist lesion
25136	Remove & graft wrist lesion
25145	Remove forearm bone lesion
25150	Partial removal of ulna
25151	Partial removal of radius
25170	Extensive forearm surgery
25210	Removal of wrist bone
25215	Removal of wrist bones
25230	Partial removal of radius
25240	Partial removal of ulna
25248	Remove forearm foreign body
25260	Repair forearm tendon/muscle
25263	Repair forearm tendon/muscle
25265	Repair forearm tendon/muscle
25270	Repair forearm tendon/muscle
25272	Repair forearm tendon/muscle
25274	Repair forearm tendon/muscle
25280	Revise wrist/forearm tendon
25290	Incise wrist/forearm tendon
25295	Release wrist/forearm tendon
25300	Fusion of tendons at wrist
25301	Fusion of tendons at wrist
25310	Transplant forearm tendon
25312	Transplant forearm tendon
25315	Revise palsy hand tendon(s)
25316	Revise palsy hand tendon(s)
25320	Repair/revise wrist joint
25335	Realignment of hand
25337	Reconstruct ulna/radioulnar
25350	Revision of radius
25355	Revision of radius
25360	Revision of ulna
25365	Revise radius & ulna
25370	Revise radius or ulna
25375	Revise radius & ulna
25390	Shorten radius or ulna
25391	Lengthen radius or ulna
25392	Shorten radius & ulna
25393	Lengthen radius & ulna
25400	Repair radius or ulna
25405	Repair/graft radius or ulna
25415	Repair radius & ulna
25420	Repair/graft radius & ulna
25425	Repair/graft radius or ulna
25426	Repair/graft radius & ulna
25440	Repair/graft wrist bone
25450	Revision of wrist joint
25455	Revision of wrist joint
25490	Reinforce radius
25491	Reinforce ulna
25492	Reinforce radius and ulna
25500	Treat fracture of radius
25505	Treat fracture of radius
25515	Treat fracture of radius
25520	Treat fracture of radius
25525	Treat fracture of radius
25526	Treat fracture of radius
25530	Treat fracture of ulna
25535	Treat fracture of ulna
25545	Treat fracture of ulna

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
25560	Treat fracture radius & ulna
25565	Treat fracture radius & ulna
25574	Treat fracture radius & ulna
25575	Treat fracture radius/ulna
25600	Treat fracture radius/ulna
25605	Treat fracture radius/ulna
25611	Treat fracture radius/ulna
25620	Treat fracture radius/ulna
25622	Treat wrist bone fracture
25624	Treat wrist bone fracture
25628	Treat wrist bone fracture
25630	Treat wrist bone fracture
25635	Treat wrist bone fracture
25645	Treat wrist bone fracture
25650	Treat wrist bone fracture
25651	Pin ulnar styloid fracture
25652	Treat fracture ulnar styloid
25660	Treat wrist dislocation
25670	Treat wrist dislocation
25671	Pin radioulnar dislocation
25675	Treat wrist dislocation
25676	Treat wrist dislocation
25680	Treat wrist fracture
25685	Treat wrist fracture
25690	Treat wrist dislocation
25695	Treat wrist dislocation
25800	Fusion of wrist joint
25805	Fusion/graft of wrist joint
25810	Fusion/graft of wrist joint
25820	Fusion of hand bones
25825	Fuse hand bones with graft
25830	Fusion, radioulnar jnt/ulna
25900	Amputation of forearm
25905	Amputation of forearm
25907	Amputation follow-up surgery
25909	Amputation follow-up surgery
25915	Amputation of forearm
25920	Amputate hand at wrist
25922	Amputate hand at wrist
25924	Amputation follow-up surgery
25927	Amputation of hand
25929	Amputation follow-up surgery
25931	Amputation follow-up surgery
26350	Repair finger/hand tendon
26352	Repair/graft hand tendon
26356	Repair finger/hand tendon
26357	Repair finger/hand tendon
26358	Repair/graft hand tendon
26370	Repair finger/hand tendon
26372	Repair/graft hand tendon
26373	Repair finger/hand tendon
26390	Revise hand/finger tendon
26392	Repair/graft hand tendon
26410	Repair hand tendon
26412	Repair/graft hand tendon
26415	Excision, hand/finger tendon
26416	Graft hand or finger tendon
26418	Repair finger tendon
26420	Repair/graft finger tendon
26426	Repair finger/hand tendon
26428	Repair/graft finger tendon
26432	Repair finger tendon
26433	Repair finger tendon
26434	Repair/graft finger tendon
26437	Realignment of tendons
26440	Release palm/finger tendon
26442	Release palm & finger tendon

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
26445	Release hand/finger tendon
26449	Release forearm/hand tendon
26450	Incision of palm tendon
26455	Incision of finger tendon
26460	Incise hand/finger tendon
26471	Fusion of finger tendons
26474	Fusion of finger tendons
26476	Tendon lengthening
26477	Tendon shortening
26478	Lengthening of hand tendon
26479	Shortening of hand tendon
26480	Transplant hand tendon
26483	Transplant/graft hand tendon
26485	Transplant palm tendon
26489	Transplant/graft palm tendon
26490	Revise thumb tendon
26492	Tendon transfer with graft
26494	Hand tendon/muscle transfer
26496	Revise thumb tendon
26497	Finger tendon transfer
26498	Finger tendon transfer
26499	Revision of finger
26500	Hand tendon reconstruction
26502	Hand tendon reconstruction
26504	Hand tendon reconstruction
26508	Release thumb contracture
26510	Thumb tendon transfer
26516	Fusion of knuckle joint
26517	Fusion of knuckle joints
26518	Fusion of knuckle joints
26520	Release knuckle contracture
26525	Release finger contracture
26536	Revise/implant finger joint
26540	Repair hand joint
26541	Repair hand joint with graft
26542	Repair hand joint with graft
26545	Reconstruct finger joint
26548	Reconstruct finger joint
26550	Construct thumb replacement
26555	Positional change of finger
26560	Repair of web finger
26561	Repair of web finger
26562	Repair of web finger
26565	Correct metacarpal flaw
26567	Correct finger deformity
26568	Lengthen metacarpal/finger
26580	Repair hand deformity
26590	Repair finger deformity
26591	Repair muscles of hand
26593	Release muscles of hand
26596	Excision constricting tissue
26600	Treat metacarpal fracture
26605	Treat metacarpal fracture
26607	Treat metacarpal fracture
26608	Treat metacarpal fracture
26615	Treat metacarpal fracture
26641	Treat thumb dislocation
26645	Treat thumb fracture
26650	Treat thumb fracture
26665	Treat thumb fracture
26670	Treat hand dislocation
26675	Treat hand dislocation
26676	Pin hand dislocation
26685	Treat hand dislocation
26686	Treat hand dislocation
26700	Treat knuckle dislocation
26705	Treat knuckle dislocation

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
26706	Pin knuckle dislocation
26715	Treat knuckle dislocation
26720	Treat finger fracture, each
26725	Treat finger fracture, each
26727	Treat finger fracture, each
26735	Treat finger fracture, each
26740	Treat finger fracture, each
26742	Treat finger fracture, each
26746	Treat finger fracture, each
26750	Treat finger fracture, each
26755	Treat finger fracture, each
26756	Pin finger fracture, each
26765	Treat finger fracture, each
26770	Treat finger dislocation
26775	Treat finger dislocation
26776	Pin finger dislocation
26785	Treat finger dislocation
26820	Thumb fusion with graft
26841	Fusion of thumb
26842	Thumb fusion with graft
26843	Fusion of hand joint
26844	Fusion/graft of hand joint
26850	Fusion of knuckle
26852	Fusion of knuckle with graft
26860	Fusion of finger joint
26862	Fusion/graft of finger joint
26910	Amputate metacarpal bone
26951	Amputation of finger/thumb
26952	Amputation of finger/thumb
27000	Incision of hip tendon
27001	Incision of hip tendon
27003	Incision of hip tendon
27005	Incision of hip tendon
27006	Incision of hip tendons
27025	Incision of hip/thigh fascia
27030	Drainage of hip joint
27033	Exploration of hip joint
27035	Denervation of hip joint
27041	Biopsy of soft tissues
27048	Remove hip/pelvis lesion
27049	Remove tumor, hip/pelvis
27050	Biopsy of sacroiliac joint
27052	Biopsy of hip joint
27054	Removal of hip joint lining
27060	Removal of ischial bursa
27062	Remove femur lesion/bursa
27065	Removal of hip bone lesion
27066	Removal of hip bone lesion
27067	Remove/graft hip bone lesion
27075	Extensive hip surgery
27076	Extensive hip surgery
27077	Extensive hip surgery
27078	Extensive hip surgery
27079	Extensive hip surgery
27080	Removal of tail bone
27087	Remove hip foreign body
27202	Treat tail bone fracture
27310	Exploration of knee joint
27315	Partial removal, thigh nerve
27320	Partial removal, thigh nerve
27324	Biopsy, thigh soft tissues
27328	Removal of thigh lesion
27329	Remove tumor, thigh/knee
27330	Biopsy, knee joint lining
27331	Explore/treat knee joint
27332	Removal of knee cartilage
27333	Removal of knee cartilage

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
27334	Remove knee joint lining
27335	Remove knee joint lining
27340	Removal of kneecap bursa
27345	Removal of knee cyst
27350	Removal of kneecap
27355	Remove femur lesion
27356	Remove femur lesion/graft
27357	Remove femur lesion/graft
27365	Extensive leg surgery
27380	Repair of kneecap tendon
27381	Repair/graft kneecap tendon
27385	Repair of thigh muscle
27386	Repair/graft of thigh muscle
27455	Realignment of knee
27500	Treatment of thigh fracture
27501	Treatment of thigh fracture
27502	Treatment of thigh fracture
27506	Treatment of thigh fracture
27507	Treatment of thigh fracture
27508	Treatment of thigh fracture
27509	Treatment of thigh fracture
27510	Treatment of thigh fracture
27511	Treatment of thigh fracture
27513	Treatment of thigh fracture
27514	Treatment of thigh fracture
27516	Treat thigh fx growth plate
27517	Treat thigh fx growth plate
27519	Treat thigh fx growth plate
27520	Treat kneecap fracture
27524	Treat kneecap fracture
27530	Treat knee fracture
27532	Treat knee fracture
27535	Treat knee fracture
27536	Treat knee fracture
27538	Treat knee fracture(s)
27540	Treat knee fracture
27550	Treat knee dislocation
27552	Treat knee dislocation
27556	Treat knee dislocation
27557	Treat knee dislocation
27558	Treat knee dislocation
27560	Treat kneecap dislocation
27562	Treat kneecap dislocation
27566	Treat kneecap dislocation
27580	Fusion of knee
27590	Amputate leg at thigh
27591	Amputate leg at thigh
27592	Amputate leg at thigh
27594	Amputation follow-up surgery
27596	Amputation follow-up surgery
27598	Amputate lower leg at knee
27600	Decompression of lower leg
27601	Decompression of lower leg
27602	Decompression of lower leg
27607	Treat lower leg bone lesion
27610	Explore/treat ankle joint
27612	Exploration of ankle joint
27615	Remove tumor, lower leg
27620	Explore/treat ankle joint
27625	Remove ankle joint lining
27626	Remove ankle joint lining
27635	Remove lower leg bone lesion
27637	Remove/graft leg bone lesion
27638	Remove/graft leg bone lesion
27640	Partial removal of tibia
27641	Partial removal of fibula
27645	Extensive lower leg surgery

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
27646	Extensive lower leg surgery
27647	Extensive ankle/heel surgery
27650	Repair achilles tendon
27652	Repair/graft achilles tendon
27654	Repair of achilles tendon
27675	Repair lower leg tendons
27676	Repair lower leg tendons
27680	Release of lower leg tendon
27681	Release of lower leg tendons
27687	Revision of calf tendon
27690	Revise lower leg tendon
27691	Revise lower leg tendon
27695	Repair of ankle ligament
27696	Repair of ankle ligaments
27698	Repair of ankle ligament
27705	Incision of tibia
27707	Incision of fibula
27709	Incision of tibia & fibula
27712	Realignment of lower leg
27715	Revision of lower leg
27720	Repair of tibia
27722	Repair/graft of tibia
27724	Repair/graft of tibia
27725	Repair of lower leg
27727	Repair of lower leg
27734	Repair lower leg epiphyses
27745	Reinforce tibia
27750	Treatment of tibia fracture
27752	Treatment of tibia fracture
27756	Treatment of tibia fracture
27758	Treatment of tibia fracture
27759	Treatment of tibia fracture
27760	Treatment of ankle fracture
27762	Treatment of ankle fracture
27766	Treatment of ankle fracture
27780	Treatment of fibula fracture
27781	Treatment of fibula fracture
27784	Treatment of fibula fracture
27786	Treatment of ankle fracture
27788	Treatment of ankle fracture
27792	Treatment of ankle fracture
27808	Treatment of ankle fracture
27810	Treatment of ankle fracture
27814	Treatment of ankle fracture
27816	Treatment of ankle fracture
27818	Treatment of ankle fracture
27822	Treatment of ankle fracture
27823	Treatment of ankle fracture
27824	Treat lower leg fracture
27825	Treat lower leg fracture
27826	Treat lower leg fracture
27827	Treat lower leg fracture
27828	Treat lower leg fracture
27829	Treat lower leg joint
27830	Treat lower leg dislocation
27831	Treat lower leg dislocation
27832	Treat lower leg dislocation
27840	Treat ankle dislocation
27842	Treat ankle dislocation
27846	Treat ankle dislocation
27848	Treat ankle dislocation
27870	Fusion of ankle joint, open
27871	Fusion of tibiofibular joint
27880	Amputation of lower leg
27881	Amputation of lower leg
27882	Amputation of lower leg
27884	Amputation follow-up surgery

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
27886	Amputation follow-up surgery
27888	Amputation of foot at ankle
27889	Amputation of foot at ankle
27892	Decompression of leg
27893	Decompression of leg
27894	Decompression of leg
28030	Removal of foot nerve
28102	Remove/graft foot lesion
28106	Remove/graft foot lesion
28130	Removal of ankle bone
28309	Incision of metatarsals
28320	Repair of foot bones
28400	Treatment of heel fracture
28405	Treatment of heel fracture
28406	Treatment of heel fracture
28415	Treat heel fracture
28420	Treat/graft heel fracture
28430	Treatment of ankle fracture
28435	Treatment of ankle fracture
28436	Treatment of ankle fracture
28445	Treat ankle fracture
28450	Treat midfoot fracture, each
28455	Treat midfoot fracture, each
28456	Treat midfoot fracture
28465	Treat midfoot fracture, each
28470	Treat metatarsal fracture
28475	Treat metatarsal fracture
28476	Treat metatarsal fracture
28485	Treat metatarsal fracture
28490	Treat big toe fracture
28495	Treat big toe fracture
28496	Treat big toe fracture
28505	Treat big toe fracture
28510	Treatment of toe fracture
28515	Treatment of toe fracture
28525	Treat toe fracture
28530	Treat sesamoid bone fracture
28531	Treat sesamoid bone fracture
28540	Treat foot dislocation
28545	Treat foot dislocation
28546	Treat foot dislocation
28555	Repair foot dislocation
28570	Treat foot dislocation
28575	Treat foot dislocation
28576	Treat foot dislocation
28585	Repair foot dislocation
28600	Treat foot dislocation
28605	Treat foot dislocation
28606	Treat foot dislocation
28615	Repair foot dislocation
28630	Treat toe dislocation
28635	Treat toe dislocation
28636	Treat toe dislocation
28645	Repair toe dislocation
28660	Treat toe dislocation
28665	Treat toe dislocation
28666	Treat toe dislocation
28675	Repair of toe dislocation
28705	Fusion of foot bones
28715	Fusion of foot bones
28725	Fusion of foot bones
28730	Fusion of foot bones
28735	Fusion of foot bones
28737	Revision of foot bones
29000	Application of body cast
29010	Application of body cast
29015	Application of body cast

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
29020	Application of body cast
29025	Application of body cast
29035	Application of body cast
29040	Application of body cast
29044	Application of body cast
29046	Application of body cast
29049	Application of figure eight
29055	Application of shoulder cast
29058	Application of shoulder cast
29065	Application of long arm cast
29075	Application of forearm cast
29085	Apply hand/wrist cast
29086	Apply finger cast
29105	Apply long arm splint
29125	Apply forearm splint
29126	Apply forearm splint
29130	Application of finger splint
29131	Application of finger splint
29200	Strapping of chest
29220	Strapping of low back
29240	Strapping of shoulder
29260	Strapping of elbow or wrist
29280	Strapping of hand or finger
29305	Application of hip cast
29325	Application of hip casts
29345	Application of long leg cast
29355	Application of long leg cast
29358	Apply long leg cast brace
29365	Application of long leg cast
29405	Apply short leg cast
29425	Apply short leg cast
29435	Apply short leg cast
29440	Addition of walker to cast
29445	Apply rigid leg cast
29450	Application of leg cast
29505	Application, long leg splint
29515	Application lower leg splint
29520	Strapping of hip
29530	Strapping of knee
29540	Strapping of ankle and/or ft
29550	Strapping of toes
29580	Application of paste boot
29590	Application of foot splint
29700	Removal/revision of cast
29705	Removal/revision of cast
29710	Removal/revision of cast
29715	Removal/revision of cast
29720	Repair of body cast
29730	Windowing of cast
29740	Wedging of cast
29750	Wedging of clubfoot cast
29800	Jaw arthroscopy/surgery
29804	Jaw arthroscopy/surgery
31760	Repair of windpipe
31766	Reconstruction of windpipe
31770	Repair/graft of bronchus
31775	Reconstruct bronchus
31780	Reconstruct windpipe
31781	Reconstruct windpipe
31785	Remove windpipe lesion
31786	Remove windpipe lesion
31805	Repair of windpipe injury
32035	Exploration of chest
32036	Exploration of chest
32095	Biopsy through chest wall
32100	Exploration/biopsy of chest
32110	Explore/repair chest

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
32120	Re-exploration of chest
32124	Explore chest free adhesions
32140	Removal of lung lesion(s)
32141	Remove/treat lung lesions
32150	Removal of lung lesion(s)
32151	Remove lung foreign body
32160	Open chest heart massage
32200	Drain, open, lung lesion
33015	Incision of heart sac
33414	Repair of aortic valve
33415	Revision, subvalvular tissue
33417	Repair of aortic valve
33468	Revision of tricuspid valve
33470	Revision of pulmonary valve
33471	Valvotomy, pulmonary valve
33503	Coronary artery graft
33504	Coronary artery graft
33505	Repair artery w/tunnel
33506	Repair artery, translocation
33600	Closure of valve
33602	Closure of valve
33606	Anastomosis/artery-aorta
33608	Repair anomaly w/conduit
33610	Repair by enlargement
33611	Repair double ventricle
33612	Repair double ventricle
33615	Repair, modified fontan
33617	Repair single ventricle
33619	Repair single ventricle
33645	Revision of heart veins
33647	Repair heart septum defects
33660	Repair of heart defects
33665	Repair of heart defects
33670	Repair of heart chambers
33681	Repair heart septum defect
33684	Repair heart septum defect
33688	Repair heart septum defect
33690	Reinforce pulmonary artery
33692	Repair of heart defects
33694	Repair of heart defects
33697	Repair of heart defects
33702	Repair of heart defects
33710	Repair of heart defects
33720	Repair of heart defect
33722	Repair of heart defect
33730	Repair heart-vein defect(s)
33732	Repair heart-vein defect
33735	Revision of heart chamber
33736	Revision of heart chamber
33737	Revision of heart chamber
33750	Major vessel shunt
33755	Major vessel shunt
33762	Major vessel shunt
33764	Major vessel shunt & graft
33766	Major vessel shunt
33767	Major vessel shunt
33770	Repair great vessels defect
33771	Repair great vessels defect
33774	Repair great vessels defect
33775	Repair great vessels defect
33776	Repair great vessels defect
33777	Repair great vessels defect
33778	Repair great vessels defect
33779	Repair great vessels defect
33780	Repair great vessels defect
33781	Repair great vessels defect
33786	Repair arterial trunk

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
33788	Revision of pulmonary artery
33800	Aortic suspension
33802	Repair vessel defect
33803	Repair vessel defect
33813	Repair septal defect
33814	Repair septal defect
33820	Revise major vessel
33822	Revise major vessel
33840	Remove aorta constriction
33845	Remove aorta constriction
33851	Remove aorta constriction
33852	Repair septal defect
33853	Repair septal defect
33917	Repair pulmonary artery
33920	Repair pulmonary atresia
33922	Transect pulmonary artery
34001	Removal of artery clot
34051	Removal of artery clot
34101	Removal of artery clot
34111	Removal of arm artery clot
34201	Removal of artery clot
34203	Removal of leg artery clot
34401	Removal of vein clot
34421	Removal of vein clot
34451	Removal of vein clot
34471	Removal of vein clot
34490	Removal of vein clot
34501	Repair valve, femoral vein
34502	Reconstruct vena cava
34510	Transposition of vein valve
34520	Cross-over vein graft
34530	Leg vein fusion
35001	Repair defect of artery
35002	Repair artery rupture, neck
35005	Repair defect of artery
35011	Repair defect of artery
35013	Repair artery rupture, arm
35021	Repair defect of artery
35022	Repair artery rupture, chest
35045	Repair defect of arm artery
35111	Repair defect of artery
35141	Repair defect of artery
35142	Repair artery rupture, thigh
35151	Repair defect of artery
35152	Repair artery rupture, knee
35180	Repair blood vessel lesion
35184	Repair blood vessel lesion
35188	Repair blood vessel lesion
35190	Repair blood vessel lesion
35201	Repair blood vessel lesion
35206	Repair blood vessel lesion
35207	Repair blood vessel lesion
35226	Repair blood vessel lesion
35231	Repair blood vessel lesion
35236	Repair blood vessel lesion
35246	Repair blood vessel lesion
35261	Repair blood vessel lesion
35266	Repair blood vessel lesion
35286	Repair blood vessel lesion
35311	Rechanneling of artery
35321	Rechanneling of artery
35371	Rechanneling of artery
35372	Rechanneling of artery
35381	Rechanneling of artery
35501	Artery bypass graft
35506	Artery bypass graft
35507	Artery bypass graft

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
35508	Artery bypass graft
35509	Artery bypass graft
35511	Artery bypass graft
35515	Artery bypass graft
35516	Artery bypass graft
35518	Artery bypass graft
35526	Artery bypass graft
35556	Artery bypass graft
35558	Artery bypass graft
35571	Artery bypass graft
35583	Vein bypass graft
35585	Vein bypass graft
35587	Vein bypass graft
35601	Artery bypass graft
35606	Artery bypass graft
35612	Artery bypass graft
35616	Artery bypass graft
35626	Artery bypass graft
35642	Artery bypass graft
35645	Artery bypass graft
35650	Artery bypass graft
35656	Artery bypass graft
35661	Artery bypass graft
35666	Artery bypass graft
35671	Artery bypass graft
35691	Arterial transposition
35693	Arterial transposition
35694	Arterial transposition
35695	Arterial transposition
35701	Exploration, carotid artery
35721	Exploration, femoral artery
35741	Exploration popliteal artery
35761	Exploration of artery/vein
35800	Explore neck vessels
35860	Explore limb vessels
35875	Removal of clot in graft
35876	Removal of clot in graft
35901	Excision, graft, neck
35903	Excision, graft, extremity
36260	Insertion of infusion pump
36261	Revision of infusion pump
36262	Removal of infusion pump
36475	Endovenous rf, 1st vein
36476	Endovenous rf, vein add-on
36478	Endovenous laser, 1st vein
36479	Endovenous laser vein addon
36566	Insert tunneled cv cath
36835	Artery to vein shunt
37565	Ligation of neck vein
37600	Ligation of neck artery
37605	Ligation of neck artery
37606	Ligation of neck artery
38740	Remove armpit lymph nodes
38745	Remove armpit lymph nodes
38760	Remove groin lymph nodes
38765	Remove groin lymph nodes
38770	Remove pelvis lymph nodes
38780	Remove abdomen lymph nodes
39501	Repair diaphragm laceration
39502	Repair paraesophageal hernia
39503	Repair of diaphragm hernia
39520	Repair of diaphragm hernia
39530	Repair of diaphragm hernia
39531	Repair of diaphragm hernia
39540	Repair of diaphragm hernia
39541	Repair of diaphragm hernia
39545	Revision of diaphragm

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
43045	Incision of esophagus
43100	Excision of esophagus lesion
43101	Excision of esophagus lesion
43108	Removal of esophagus
43113	Removal of esophagus
43116	Partial removal of esophagus
43118	Partial removal of esophagus
43123	Partial removal of esophagus
43124	Removal of esophagus
43130	Removal of esophagus pouch
43135	Removal of esophagus pouch
43300	Repair of esophagus
43320	Fuse esophagus & stomach
43324	Revise esophagus & stomach
43325	Revise esophagus & stomach
43326	Revise esophagus & stomach
43330	Repair of esophagus
43331	Repair of esophagus
43340	Fuse esophagus & intestine
43341	Fuse esophagus & intestine
43350	Surgical opening, esophagus
43351	Surgical opening, esophagus
43352	Surgical opening, esophagus
43360	Gastrointestinal repair
43361	Gastrointestinal repair
43400	Ligate esophagus veins
43401	Esophagus surgery for veins
43405	Ligate/staple esophagus
43410	Repair esophagus wound
43415	Repair esophagus wound
43420	Repair esophagus opening
43425	Repair esophagus opening
43500	Surgical opening of stomach
43501	Surgical repair of stomach
43502	Surgical repair of stomach
43520	Incision of pyloric muscle
43605	Biopsy of stomach
43610	Excision of stomach lesion
43611	Excision of stomach lesion
43620	Removal of stomach
43621	Removal of stomach
43622	Removal of stomach
43631	Removal of stomach, partial
43632	Removal of stomach, partial
43633	Removal of stomach, partial
43634	Removal of stomach, partial
43640	Vagotomy & pylorus repair
43641	Vagotomy & pylorus repair
43800	Reconstruction of pylorus
43810	Fusion of stomach and bowel
43820	Fusion of stomach and bowel
43825	Fusion of stomach and bowel
43830	Place gastrostomy tube
43831	Place gastrostomy tube
43832	Place gastrostomy tube
43840	Repair of stomach lesion
43842	V-band gastroplasty
43846	Gastric bypass for obesity
43847	Gastric bypass incl small i
43848	Revision gastroplasty
43850	Revise stomach-bowel fusion
43855	Revise stomach-bowel fusion
43860	Revise stomach-bowel fusion
43865	Revise stomach-bowel fusion
43870	Repair stomach opening
43880	Repair stomach-bowel fistula
44005	Freeing of bowel adhesion

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
44010	Incision of small bowel
44020	Explore small intestine
44021	Decompress small bowel
44025	Incision of large bowel
44050	Reduce bowel obstruction
44055	Correct malrotation of bowel
44110	Excise intestine lesion(s)
44111	Excision of bowel lesion(s)
45190	Destruction, rectal tumor
45500	Repair of rectum
45505	Repair of rectum
45541	Correct rectal prolapse
45550	Repair rectum/remove sigmoid
45560	Repair of rectocele
45562	Exploration/repair of rectum
45563	Exploration/repair of rectum
45800	Repair rect/bladder fistula
45805	Repair fistula w/colostomy
45820	Repair rectourethral fistula
45825	Repair fistula w/colostomy
46045	Incision of rectal abscess
46060	Incision of rectal abscess
46070	Incision of anal septum
46257	Remove hemorrhoids & fissure
46258	Remove hemorrhoids & fistula
46260	Hemorrhoidectomy
46261	Remove hemorrhoids & fissure
46262	Remove hemorrhoids & fistula
46280	Removal of anal fistula
46288	Repair anal fistula
46700	Repair of anal stricture
46705	Repair of anal stricture
46715	Rep perf anoper fistu
46716	Rep perf anoper/vestib fistu
46730	Construction of absent anus
46735	Construction of absent anus
46740	Construction of absent anus
46742	Repair of imperforated anus
46744	Repair of cloacal anomaly
46746	Repair of cloacal anomaly
46748	Repair of cloacal anomaly
46750	Repair of anal sphincter
46751	Repair of anal sphincter
46753	Reconstruction of anus
46760	Repair of anal sphincter
46761	Repair of anal sphincter
46762	Implant artificial sphincter
47010	Open drainage, liver lesion
47015	Inject/aspirate liver cyst
47100	Wedge biopsy of liver
47120	Partial removal of liver
47122	Extensive removal of liver
47125	Partial removal of liver
47130	Partial removal of liver
47300	Surgery for liver lesion
47350	Repair liver wound
47360	Repair liver wound
47400	Incision of liver duct
47420	Incision of bile duct
47425	Incision of bile duct
47460	Incise bile duct sphincter
47480	Incision of gallbladder
47490	Incision of gallbladder
47600	Removal of gallbladder
47605	Removal of gallbladder
47610	Removal of gallbladder
47612	Removal of gallbladder

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
47620	Removal of gallbladder
47700	Exploration of bile ducts
47701	Bile duct revision
47711	Excision of bile duct tumor
47712	Excision of bile duct tumor
47715	Excision of bile duct cyst
47716	Fusion of bile duct cyst
47720	Fuse gallbladder & bowel
47721	Fuse upper gi structures
47740	Fuse gallbladder & bowel
47741	Fuse gallbladder & bowel
47760	Fuse bile ducts and bowel
47765	Fuse liver ducts & bowel
47780	Fuse bile ducts and bowel
47785	Fuse bile ducts and bowel
47800	Reconstruction of bile ducts
47801	Placement, bile duct support
47802	Fuse liver duct & intestine
47900	Suture bile duct injury
48000	Drainage of abdomen
48001	Placement of drain, pancreas
48005	Resect/debride pancreas
48020	Removal of pancreatic stone
48100	Biopsy of pancreas, open
48120	Removal of pancreas lesion
48140	Partial removal of pancreas
48145	Partial removal of pancreas
48146	Pancreatectomy
48148	Removal of pancreatic duct
48150	Partial removal of pancreas
48152	Pancreatectomy
48153	Pancreatectomy
48154	Pancreatectomy
48155	Removal of pancreas
48180	Fuse pancreas and bowel
48500	Surgery of pancreatic cyst
48510	Drain pancreatic pseudocyst
48520	Fuse pancreas cyst and bowel
48540	Fuse pancreas cyst and bowel
48545	Pancreatorrhaphy
48547	Duodenal exclusion
49215	Excise sacral spine tumor
49900	Repair of abdominal wall
51020	Incise & treat bladder
51500	Removal of bladder cyst
51530	Removal of bladder lesion
51535	Repair of ureter lesion
51550	Partial removal of bladder
51555	Partial removal of bladder
51565	Revise bladder & ureter(s)
51570	Removal of bladder
51575	Removal of bladder & nodes
51580	Remove bladder/revise tract
51585	Removal of bladder & nodes
51590	Remove bladder/revise tract
51595	Remove bladder/revise tract
51596	Remove bladder/create pouch
51597	Removal of pelvic structures
51715	Endoscopic injection/implant
51800	Revision of bladder/urethra
51820	Revision of urinary tract
51845	Repair bladder neck
51860	Repair of bladder wound
51865	Repair of bladder wound
51880	Repair of bladder opening
51900	Repair bladder/vagina lesion
51920	Close bladder-uterus fistula

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
51925	Hysterectomy/bladder repair
51940	Correction of bladder defect
51960	Revision of bladder & bowel
51980	Construct bladder opening
52000	Cystoscopy
52001	Cystoscopy, removal of clots
52005	Cystoscopy & ureter catheter
52281	Cystoscopy and treatment
52283	Cystoscopy and treatment
52285	Cystoscopy and treatment
52332	Cystoscopy and treatment
52647	Laser surgery of prostate
52648	Laser surgery of prostate
53010	Incision of urethra
53080	Drainage of urinary leakage
53085	Drainage of urinary leakage
53210	Removal of urethra
53215	Removal of urethra
53220	Treatment of urethra lesion
53230	Removal of urethra lesion
53235	Removal of urethra lesion
53240	Surgery for urethra pouch
53250	Removal of urethra gland
53400	Revise urethra, stage 1
53405	Revise urethra, stage 2
53410	Reconstruction of urethra
53415	Reconstruction of urethra
53420	Reconstruct urethra, stage 1
53425	Reconstruct urethra, stage 2
53430	Reconstruction of urethra
53445	Insert uro/ves nck sphincter
53449	Repair uro sphincter
53450	Revision of urethra
53460	Revision of urethra
53502	Repair of urethra injury
53505	Repair of urethra injury
53510	Repair of urethra injury
53515	Repair of urethra injury
53520	Repair of urethra defect
54205	Treatment of penis lesion
54300	Revision of penis
54304	Revision of penis
54308	Reconstruction of urethra
54312	Reconstruction of urethra
54316	Reconstruction of urethra
54318	Reconstruction of urethra
54322	Reconstruction of urethra
54324	Reconstruction of urethra
54326	Reconstruction of urethra
54328	Revise penis/urethra
54332	Revise penis/urethra
54336	Revise penis/urethra
54340	Secondary urethral surgery
54344	Secondary urethral surgery
54348	Secondary urethral surgery
54352	Reconstruct urethra/penis
54360	Penis plastic surgery
54380	Repair penis
54385	Repair penis
54390	Repair penis and bladder
54400	Insert semi-rigid prosthesis
54401	Insert self-contd prosthesis
54405	Insert multi-comp penis pros
54520	Removal of testis
54530	Removal of testis
54535	Extensive testis surgery
54550	Exploration for testis

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
54560	Exploration for testis
54600	Reduce testis torsion
54640	Suspension of testis
54650	Orchiopexy (fowler-stephens)
54660	Revision of testis
54670	Repair testis injury
54680	Relocation of testis(es)
54820	Exploration of epididymis
54830	Remove epididymis lesion
54840	Remove epididymis lesion
54860	Removal of epididymis
54861	Removal of epididymis
54900	Fusion of spermatic ducts
54901	Fusion of spermatic ducts
55040	Removal of hydrocele
55041	Removal of hydroceles
55060	Repair of hydrocele
55500	Removal of hydrocele
55520	Removal of sperm cord lesion
55530	Revise spermatic cord veins
55535	Revise spermatic cord veins
55540	Revise hernia & sperm veins
55600	Incise sperm duct pouch
55605	Incise sperm duct pouch
55650	Remove sperm duct pouch
55680	Remove sperm pouch lesion
55720	Drainage of prostate abscess
55725	Drainage of prostate abscess
55801	Removal of prostate
55810	Extensive prostate surgery
55812	Extensive prostate surgery
55815	Extensive prostate surgery
55821	Removal of prostate
55831	Removal of prostate
55840	Extensive prostate surgery
55842	Extensive prostate surgery
55845	Extensive prostate surgery
55860	Surgical exposure, prostate
55862	Extensive prostate surgery
55865	Extensive prostate surgery
56620	Partial removal of vulva
56625	Complete removal of vulva
56630	Extensive vulva surgery
56631	Extensive vulva surgery
56632	Extensive vulva surgery
56633	Extensive vulva surgery
56634	Extensive vulva surgery
56637	Extensive vulva surgery
56640	Extensive vulva surgery
56805	Repair clitoris
57010	Drainage of pelvic abscess
57106	Remove vagina wall, partial
57107	Remove vagina tissue, part
57109	Vaginectomy partial w/nodes
57110	Remove vagina wall, complete
57111	Remove vagina tissue, compl
57112	Vaginectomy w/nodes, compl
57120	Closure of vagina
57210	Repair vagina/perineum
57307	Fistula repair & colostomy
57308	Fistula repair, transperine
57310	Repair urethrovaginal lesion
57311	Repair urethrovaginal lesion
57320	Repair bladder-vagina lesion
57330	Repair bladder-vagina lesion
57335	Repair vagina
57530	Removal of cervix

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
57531	Removal of cervix, radical
57540	Removal of residual cervix
57545	Remove cervix/repair pelvis
57550	Removal of residual cervix
57555	Remove cervix/repair vagina
57556	Remove cervix, repair bowel
57700	Revision of cervix
57720	Revision of cervix
58120	Dilation and curettage
58140	Myomectomy abdom method
58145	Myomectomy vag method
58400	Suspension of uterus
58410	Suspension of uterus
58520	Repair of ruptured uterus
58540	Revision of uterus
58555	Hysteroscopy, dx, sep proc
58558	Hysteroscopy, biopsy
58562	Hysteroscopy, remove fb
58600	Division of fallopian tube
58605	Division of fallopian tube
58660	Laparoscopy, lysis
58662	Laparoscopy, excise lesions
58670	Laparoscopy, tubal cautery
58672	Laparoscopy, fimbrioplasty
58673	Laparoscopy, salpingostomy
58700	Removal of fallopian tube
58720	Removal of ovary/tube(s)
58740	Revise fallopian tube(s)
58750	Repair oviduct
58752	Revise ovarian tube(s)
58760	Remove tubal obstruction
58770	Create new tubal opening
58805	Drainage of ovarian cyst(s)
58820	Drain ovary abscess, open
58822	Drain ovary abscess, percut
58825	Transposition, ovary(s)
58900	Biopsy of ovary(s)
58920	Partial removal of ovary(s)
58925	Removal of ovarian cyst(s)
58940	Removal of ovary(s)
58943	Removal of ovary(s)
58950	Resect ovarian malignancy
58951	Resect ovarian malignancy
58952	Resect ovarian malignancy
58960	Exploration of abdomen
59100	Remove uterus lesion
59120	Treat ectopic pregnancy
59121	Treat ectopic pregnancy
59130	Treat ectopic pregnancy
59130	Treat ectopic pregnancy
59135	Treat ectopic pregnancy
59136	Treat ectopic pregnancy
59150	Treat ectopic pregnancy
59151	Treat ectopic pregnancy
59812	Treatment of miscarriage
59850	Abortion
59851	Abortion
59852	Abortion
59855	Abortion
59856	Abortion
59857	Abortion
59870	Evacuate mole of uterus
60200	Remove thyroid lesion
60210	Partial thyroid excision
60212	Partial thyroid excision
60220	Partial removal of thyroid
60225	Partial removal of thyroid

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
60240	Removal of thyroid
60252	Removal of thyroid
60254	Extensive thyroid surgery
60260	Repeat thyroid surgery
60270	Removal of thyroid
60271	Removal of thyroid
60280	Remove thyroid duct lesion
60281	Remove thyroid duct lesion
60500	Explore parathyroid glands
60502	Re-explore parathyroids
60505	Explore parathyroid glands
60520	Removal of thymus gland
60521	Removal of thymus gland
60522	Removal of thymus gland
60540	Explore adrenal gland
60545	Explore adrenal gland
60600	Remove carotid body lesion
60605	Remove carotid body lesion
61343	Incise skull (press relief)
61345	Relieve cranial pressure
61440	Incise skull for surgery
61450	Incise skull for surgery
61458	Incise skull for brain wound
61460	Incise skull for surgery
61470	Incise skull for surgery
61480	Incise skull for surgery
61490	Incise skull for surgery
61500	Removal of skull lesion
61501	Remove infected skull bone
61510	Removal of brain lesion
61512	Remove brain lining lesion
61514	Removal of brain abscess
61516	Removal of brain lesion
61518	Removal of brain lesion
61519	Remove brain lining lesion
61520	Removal of brain lesion
61521	Removal of brain lesion
61522	Removal of brain abscess
61524	Removal of brain lesion
61526	Removal of brain lesion
61530	Removal of brain lesion
61531	Implant brain electrodes
61533	Implant brain electrodes
61534	Removal of brain lesion
61535	Remove brain electrodes
61536	Removal of brain lesion
61538	Removal of brain tissue
61539	Removal of brain tissue
61541	Incision of brain tissue
61542	Removal of brain tissue
61543	Removal of brain tissue
61544	Remove & treat brain lesion
61545	Excision of brain tumor
61546	Removal of pituitary gland
61548	Removal of pituitary gland
61550	Release of skull seams
61552	Release of skull seams
61556	Incise skull/sutures
61557	Incise skull/sutures
61558	Excision of skull/sutures
61559	Excision of skull/sutures
61563	Excision of skull tumor
61564	Excision of skull tumor
61570	Remove foreign body, brain
61571	Incise skull for brain wound
61575	Skull base/brainstem surgery
61618	Repair dura

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
61619	Repair dura
61680	Intracranial vessel surgery
61682	Intracranial vessel surgery
61684	Intracranial vessel surgery
61686	Intracranial vessel surgery
61690	Intracranial vessel surgery
61692	Intracranial vessel surgery
61700	Brain aneurysm repr, simple
61702	Inner skull vessel surgery
61703	Clamp neck artery
61705	Revise circulation to head
61708	Revise circulation to head
61710	Revise circulation to head
61711	Fusion of skull arteries
61720	Incise skull/brain surgery
61735	Incise skull/brain surgery
61750	Incise skull/brain biopsy
61751	Brain biopsy w/ct/mr guide
61760	Implant brain electrodes
61770	Incise skull for treatment
61790	Treat trigeminal nerve
61791	Treat trigeminal tract
61793	Focus radiation beam
61850	Implant neuroelectrodes
61860	Implant neuroelectrodes
61870	Implant neuroelectrodes
61875	Implant neuroelectrodes
61880	Revise/remove neuroelectrode
61885	Insrt/redo neurostim 1 array
62000	Treat skull fracture
62005	Treat skull fracture
62010	Treatment of head injury
62100	Repair brain fluid leakage
62115	Reduction of skull defect
62116	Reduction of skull defect
62117	Reduction of skull defect
62140	Repair of skull defect
62141	Repair of skull defect
62142	Remove skull plate/flap
62143	Replace skull plate/flap
62145	Repair of skull & brain
62146	Repair of skull with graft
62147	Repair of skull with graft
62180	Establish brain cavity shunt
62190	Establish brain cavity shunt
62192	Establish brain cavity shunt
62200	Establish brain cavity shunt
62201	Brain cavity shunt w/scope
62220	Establish brain cavity shunt
62223	Establish brain cavity shunt
62225	Replace/irrigate catheter
62230	Replace/revise brain shunt
62256	Remove brain cavity shunt
62258	Replace brain cavity shunt
62287	Percutaneous diskectomy
63170	Incise spinal cord tract(s)
63172	Drainage of spinal cyst
63173	Drainage of spinal cyst
63180	Revise spinal cord ligaments
63182	Revise spinal cord ligaments
63185	Incise spinal column/nerves
63190	Incise spinal column/nerves
63191	Incise spinal column/nerves
63195	Incise spinal column & cord
63196	Incise spinal column & cord
63197	Incise spinal column & cord
63198	Incise spinal column & cord

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
63199	Incise spinal column & cord
63200	Release of spinal cord
63250	Revise spinal cord vessels
63251	Revise spinal cord vessels
63252	Revise spinal cord vessels
63265	Excise intraspinal lesion
63266	Excise intraspinal lesion
63267	Excise intraspinal lesion
63268	Excise intraspinal lesion
63270	Excise intraspinal lesion
63271	Excise intraspinal lesion
63272	Excise intraspinal lesion
63273	Excise intraspinal lesion
63275	Biopsy/excise spinal tumor
63276	Biopsy/excise spinal tumor
63277	Biopsy/excise spinal tumor
63278	Biopsy/excise spinal tumor
63280	Biopsy/excise spinal tumor
63281	Biopsy/excise spinal tumor
63282	Biopsy/excise spinal tumor
63283	Biopsy/excise spinal tumor
63285	Biopsy/excise spinal tumor
63286	Biopsy/excise spinal tumor
63287	Biopsy/excise spinal tumor
63290	Biopsy/excise spinal tumor
63300	Removal of vertebral body
63301	Removal of vertebral body
63302	Removal of vertebral body
63303	Removal of vertebral body
63304	Removal of vertebral body
63305	Removal of vertebral body
63306	Removal of vertebral body
63307	Removal of vertebral body
63650	Implant neuroelectrodes
63655	Implant neuroelectrodes
63660	Revise/remove neuroelectrode
63685	Insrt/redo spine n generator
63688	Revise/remove neuroreceiver
63700	Repair of spinal herniation
63702	Repair of spinal herniation
63704	Repair of spinal herniation
63706	Repair of spinal herniation
63707	Repair spinal fluid leakage
63709	Repair spinal fluid leakage
63710	Graft repair of spine defect
63740	Install spinal shunt
63741	Install spinal shunt
63744	Revision of spinal shunt
63746	Removal of spinal shunt
64573	Implant neuroelectrodes
64575	Implant neuroelectrodes
64577	Implant neuroelectrodes
64580	Implant neuroelectrodes
64612	Destroy nerve, face muscle
64702	Revise finger/toe nerve
64704	Revise hand/foot nerve
64708	Revise arm/leg nerve
64712	Revision of sciatic nerve
64713	Revision of arm nerve(s)
64714	Revise low back nerve(s)
64718	Revise ulnar nerve at elbow
64719	Revise ulnar nerve at wrist
64721	Carpal tunnel surgery
64722	Relieve pressure on nerve(s)
64726	Release foot/toe nerve
64732	Incision of brow nerve
64734	Incision of cheek nerve

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
64736	Incision of chin nerve
64738	Incision of jaw nerve
64742	Incision of facial nerve
64744	Incise nerve, back of head
64746	Incise diaphragm nerve
64752	Incision of vagus nerve
64755	Incision of stomach nerves
64760	Incision of vagus nerve
64761	Incision of pelvis nerve
64763	Incise hip/thigh nerve
64766	Incise hip/thigh nerve
64771	Sever cranial nerve
64772	Incision of spinal nerve
64774	Remove skin nerve lesion
64776	Remove digit nerve lesion
64782	Remove limb nerve lesion
64784	Remove nerve lesion
64786	Remove sciatic nerve lesion
64788	Remove skin nerve lesion
64790	Removal of nerve lesion
64792	Removal of nerve lesion
64802	Remove sympathetic nerves
64804	Remove sympathetic nerves
64809	Remove sympathetic nerves
64818	Remove sympathetic nerves
64820	Remove sympathetic nerves
64831	Repair of digit nerve
64834	Repair of hand or foot nerve
64835	Repair of hand or foot nerve
64836	Repair of hand or foot nerve
64840	Repair of leg nerve
64856	Repair/transpose nerve
64857	Repair arm/leg nerve
64858	Repair sciatic nerve
64861	Repair of arm nerves
64862	Repair of low back nerves
64870	Fusion of facial/other nerve
64890	Nerve graft, hand or foot
64891	Nerve graft, hand or foot
64892	Nerve graft, arm or leg
64893	Nerve graft, arm or leg
64895	Nerve graft, hand or foot
64896	Nerve graft, hand or foot
64897	Nerve graft, arm or leg
64898	Nerve graft, arm or leg
64905	Nerve pedicle transfer
64907	Nerve pedicle transfer
65091	Revise eye
65093	Revise eye with implant
65101	Removal of eye
65103	Remove eye/insert implant
65105	Remove eye/attach implant
65110	Removal of eye
65112	Remove eye/revise socket
65114	Remove eye/revise socket
65125	Revise ocular implant
65130	Insert ocular implant
65135	Insert ocular implant
65140	Attach ocular implant
65150	Revise ocular implant
65155	Reinsert ocular implant
65175	Removal of ocular implant
65205	Remove foreign body from eye
65210	Remove foreign body from eye
65220	Remove foreign body from eye
65222	Remove foreign body from eye
65235	Remove foreign body from eye

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
65260	Remove foreign body from eye
65265	Remove foreign body from eye
65270	Repair of eye wound
65272	Repair of eye wound
65273	Repair of eye wound
65275	Repair of eye wound
65280	Repair of eye wound
65285	Repair of eye wound
65286	Repair of eye wound
65290	Repair of eye socket wound
65400	Removal of eye lesion
65410	Biopsy of cornea
65420	Removal of eye lesion
65426	Removal of eye lesion
65430	Corneal smear
65435	Curette/treat cornea
65436	Curette/treat cornea
65450	Treatment of corneal lesion
65600	Revision of cornea
65710	Corneal transplant
65730	Corneal transplant
65750	Corneal transplant
65755	Corneal transplant
65760	Revision of cornea
65765	Revision of cornea
65767	Corneal tissue transplant
65770	Revise cornea with implant
65771	Radial keratotomy
65772	Correction of astigmatism
65775	Correction of astigmatism
65780	Ocular reconst, transplant
65781	Ocular reconst, transplant
65782	Ocular reconst, transplant
65800	Drainage of eye
65805	Drainage of eye
65810	Drainage of eye
65815	Drainage of eye
65820	Relieve inner eye pressure
65850	Incision of eye
65855	Laser surgery of eye
65860	Incise inner eye adhesions
65865	Incise inner eye adhesions
65870	Incise inner eye adhesions
65875	Incise inner eye adhesions
65880	Incise inner eye adhesions
65900	Remove eye lesion
65920	Remove implant of eye
65930	Remove blood clot from eye
66020	Injection treatment of eye
66030	Injection treatment of eye
66130	Remove eye lesion
66150	Glaucoma surgery
66155	Glaucoma surgery
66160	Glaucoma surgery
66165	Glaucoma surgery
66170	Glaucoma surgery
66172	Incision of eye
66180	Implant eye shunt
66185	Revise eye shunt
66220	Repair eye lesion
66225	Repair/graft eye lesion
66250	Follow-up surgery of eye
66500	Incision of iris
66505	Incision of iris
66600	Remove iris and lesion
66605	Removal of iris
66625	Removal of iris

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
66630	Removal of iris
66635	Removal of iris
66680	Repair iris & ciliary body
66682	Repair iris & ciliary body
66700	Destruction, ciliary body
66710	Ciliary transsleral therapy
66711	Ciliary endoscopic ablation
66720	Destruction, ciliary body
66740	Destruction, ciliary body
66761	Revision of iris
66762	Revision of iris
66770	Removal of inner eye lesion
66820	Incision, secondary cataract
66821	After cataract laser surgery
66825	Reposition intraocular lens
66830	Removal of lens lesion
66840	Removal of lens material
66850	Removal of lens material
66852	Removal of lens material
66920	Extraction of lens
66930	Extraction of lens
66940	Extraction of lens
66982	Cataract surgery, complex
66983	Cataract surg w/iol, 1 stage
66984	Cataract surg w/iol, 1 stage
66985	Insert lens prosthesis
66986	Exchange lens prosthesis
66990	Ophthalmic endoscope add-on
66999	Eye surgery procedure
67005	Partial removal of eye fluid
67010	Partial removal of eye fluid
67015	Release of eye fluid
67025	Replace eye fluid
67027	Implant eye drug system
67028	Injection eye drug
67030	Incise inner eye strands
67031	Laser surgery, eye strands
67036	Removal of inner eye fluid
67038	Strip retinal membrane
67039	Laser treatment of retina
67040	Laser treatment of retina
67101	Repair detached retina
67105	Repair detached retina
67107	Repair detached retina
67108	Repair detached retina
67110	Repair detached retina
67112	Rerepair detached retina
67115	Release encircling material
67120	Remove eye implant material
67121	Remove eye implant material
67141	Treatment of retina
67145	Treatment of retina
67208	Treatment of retinal lesion
67210	Treatment of retinal lesion
67218	Treatment of retinal lesion
67220	Treatment of choroid lesion
67221	Ocular photodynamic ther
67225	Eye photodynamic ther add-on
67227	Treatment of retinal lesion
67228	Treatment of retinal lesion
67250	Reinforce eye wall
67255	Reinforce/graft eye wall
67299	Eye surgery procedure
67311	Revise eye muscle
67312	Revise two eye muscles
67314	Revise eye muscle
67316	Revise two eye muscles

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
67318	Revise eye muscle(s)
67320	Revise eye muscle(s) add-on
67331	Eye surgery follow-up add-on
67332	Rerevise eye muscles add-on
67334	Revise eye muscle w/suture
67335	Eye suture during surgery
67340	Revise eye muscle add-on
67343	Release eye tissue
67345	Destroy nerve of eye muscle
67350	Biopsy eye muscle
67399	Eye muscle surgery procedure
67400	Explore/biopsy eye socket
67405	Explore/drain eye socket
67412	Explore/treat eye socket
67413	Explore/treat eye socket
67414	Explr/decompress eye socket
67415	Aspiration, orbital contents
67420	Explore/treat eye socket
67430	Explore/treat eye socket
67440	Explore/drain eye socket
67445	Explr/decompress eye socket
67450	Explore/biopsy eye socket
67500	Inject/treat eye socket
67505	Inject/treat eye socket
67515	Inject/treat eye socket
67550	Insert eye socket implant
67560	Revise eye socket implant
67570	Decompress optic nerve
67599	Orbit surgery procedure
67700	Drainage of eyelid abscess
67710	Incision of eyelid
67715	Incision of eyelid fold
67800	Remove eyelid lesion
67801	Remove eyelid lesions
67805	Remove eyelid lesions
67808	Remove eyelid lesion(s)
67810	Biopsy of eyelid
67820	Revise eyelashes
67825	Revise eyelashes
67830	Revise eyelashes
67835	Revise eyelashes
67840	Remove eyelid lesion
67850	Treat eyelid lesion
67875	Closure of eyelid by suture
67880	Revision of eyelid
67882	Revision of eyelid
67900	Repair brow defect
67901	Repair eyelid defect
67902	Repair eyelid defect
67903	Repair eyelid defect
67904	Repair eyelid defect
67906	Repair eyelid defect
67908	Repair eyelid defect
67909	Revise eyelid defect
67911	Revise eyelid defect
67912	Correction eyelid w/implant
67914	Repair eyelid defect
67915	Repair eyelid defect
67916	Repair eyelid defect
67917	Repair eyelid defect
67921	Repair eyelid defect
67922	Repair eyelid defect
67923	Repair eyelid defect
67924	Repair eyelid defect
67930	Repair eyelid wound
67935	Repair eyelid wound
67938	Remove eyelid foreign body

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
67950	Revision of eyelid
67961	Revision of eyelid
67966	Revision of eyelid
67971	Reconstruction of eyelid
67973	Reconstruction of eyelid
67974	Reconstruction of eyelid
67975	Reconstruction of eyelid
67999	Revision of eyelid
68020	Incise/drain eyelid lining
68040	Treatment of eyelid lesions
68100	Biopsy of eyelid lining
68110	Remove eyelid lining lesion
68115	Remove eyelid lining lesion
68130	Remove eyelid lining lesion
68135	Remove eyelid lining lesion
68200	Treat eyelid by injection
68320	Revise/graft eyelid lining
68325	Revise/graft eyelid lining
68326	Revise/graft eyelid lining
68328	Revise/graft eyelid lining
68330	Revise eyelid lining
68335	Revise/graft eyelid lining
68340	Separate eyelid adhesions
68360	Revise eyelid lining
68362	Revise eyelid lining
68371	Harvest eye tissue, alograft
68399	Eyelid lining surgery
68400	Incise/drain tear gland
68420	Incise/drain tear sac
68440	Incise tear duct opening
68500	Removal of tear gland
68505	Partial removal, tear gland
68510	Biopsy of tear gland
68520	Removal of tear sac
68525	Biopsy of tear sac
68530	Clearance of tear duct
68540	Remove tear gland lesion
68550	Remove tear gland lesion
68700	Repair tear ducts
68705	Revise tear duct opening
68720	Create tear sac drain
68745	Create tear duct drain
68750	Create tear duct drain
68760	Close tear duct opening
68761	Close tear duct opening
68770	Close tear system fistula
68801	Dilate tear duct opening
68810	Probe nasolacrimal duct
68811	Probe nasolacrimal duct
68815	Probe nasolacrimal duct
68840	Explore/irrigate tear ducts
68850	Injection for tear sac x-ray
68899	Tear duct system surgery
76075	Dxa bone density, axial
76510	Ophth us, b & quant a
76511	Ophth us, quant a only
76512	Ophth us, b w/non-quant a
76513	Echo exam of eye, water bath
76514	Echo exam of eye, thickness
76516	Echo exam of eye
76519	Echo exam of eye
76529	Echo exam of eye
78350	Bone mineral, single photon
78472	Gated heart, planar, single
78481	Heart first pass, single
78483	Heart first pass, multipie
91010	Esophagus motility study

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
91034	Gastroesophageal reflux test
91037	Esoph imped function test
91038	Esoph imped funct test >1h
92002	Eye exam, new patient
92004	Eye exam, new patient
92012	Eye exam established pat
92014	Eye exam & treatment
92015	Refraction
92018	New eye exam & treatment
92019	Eye exam & treatment
92020	Special eye evaluation
92060	Special eye evaluation
92065	Orthoptic/pleoptic training
92070	Fitting of contact lens
92081	Visual field examination(s)
92082	Visual field examination(s)
92083	Visual field examination(s)

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
92100	Serial tonometry exam(s)
92120	Tonography & eye evaluation
92130	Water provocation tonography
92135	Opthalmic dx imaging
92136	Ophthalmic biometry
92140	Glaucoma provocative tests
92225	Special eye exam, initial
92226	Special eye exam, subsequent
92230	Eye exam with photos
92235	Eye exam with photos
92240	Icg angiography
92250	Eye exam with photos
92260	Ophthalmoscopy/dynamome try
92265	Eye muscle evaluation
92270	Electro-oculography
92275	Electroretinography
92283	Color vision examination

ADDENDUM C.—CODES FOR WHICH WE RECEIVED PERC RECOMMENDATIONS ON PE DIRECT COST INPUTS—Continued

CPT Codes	Short descriptor
92284	Dark adaptation eye exam
92285	Eye photography
92286	Internal eye photography
92287	Intemal eye photography
92310	Contact lens fitting
92311	Contact lens fitting
92312	Contact lens fitting
92313	Contact lens fitting
92314	Prescription of contact lens
92315	Prescription of contact lens
92316	Prescription of contact lens
92317	Prescription of contact lens
92325	Modification of contact lens
92326	Replacement of contact lens

ADDENDUM D.—PROPOSED 2007 GEOGRAPHIC PRACTICE COST INDICES BY MEDICARE CARRIER AND LOCALITY

Carrier	Locality	Locality name	Work GPCI	PE GPCI	MP GPCI
00510	00	Alabama	0.982	0.847	0.740
00831	01	Alaska	1.017	1.105	1.013
00832	00	Arizona	0.987	0.994	1.052
00520	13	Arkansas	0.961	0.832	0.431
31140	03	Marin/Napa/Solano, CA	1.035	1.342	0.640
31140	05	San Francisco, CA	1.060	1.546	0.640
31140	06	San Mateo, CA	1.073	1.539	0.629
31140	07	Oakland/Berkley, CA	1.054	1.373	0.640
31140	09	Santa Clara, CA	1.083	1.543	0.595
31146	17	Ventura, CA	1.028	1.181	0.732
31146	18	Los Angeles, CA	1.041	1.158	0.939
31146	26	Anaheim/Santa Ana, CA	1.034	1.238	0.939
31140	99	Rest of California*	1.007	1.054	0.721
31146	99	Rest of California*	1.007	1.054	0.721
00824	01	Colorado	0.986	1.015	0.790
00591	00	Connecticut	1.038	1.172	0.886
00903	01	DC + MD/VA Suburbs	1.048	1.252	0.911
00902	01	Delaware	1.012	1.020	0.877
00590	03	Fort Lauderdale, FL	0.988	0.990	1.675
00590	04	Miami, FL	1.000	1.048	2.233
00590	99	Rest of Florida	0.973	0.936	1.251
00511	01	Atlanta, GA	1.010	1.091	0.950
00511	99	Rest of Georgia	0.979	0.874	0.950
00833	01	Hawaii/Guam	1.005	1.113	0.787
05130	00	Idaho	0.968	0.869	0.452
00952	12	East St. Louis, IL	0.988	0.940	1.722
00952	15	Suburban Chicago, IL	1.018	1.117	1.626
00952	16	Chicago, IL	1.025	1.128	1.837
00952	99	Rest of Illinois	0.974	0.874	1.174
00630	00	Indiana	0.985	0.908	0.429
00826	00	Iowa	0.967	0.869	0.579
00650	00	Kansas*	0.968	0.880	0.709
00740	04	Kansas*	0.968	0.880	0.709
00660	00	Kentucky	0.970	0.855	0.859
00528	01	New Orleans, LA	0.986	0.947	1.178
00528	99	Rest of Louisiana	0.970	0.848	1.000
31142	03	Southern Maine	0.980	1.014	0.626
31142	99	Rest of Maine	0.962	0.887	0.626
00901	01	Baltimore/Surr. Cntys, MD	1.012	1.080	0.932
00901	99	Rest of Maryland	0.993	0.981	0.748
31143	01	Metropolitan Boston	1.030	1.331	0.810
31143	99	Rest of Massachusetts	1.007	1.015	0.810
00953	01	Detroit, MI	1.037	1.056	2.700
00953	99	Rest of Michigan	0.997	0.922	1.494
00954	00	Minnesota	0.991	1.006	0.404

ADDENDUM D.—PROPOSED 2007 GEOGRAPHIC PRACTICE COST INDICES BY MEDICARE CARRIER AND LOCALITY—Continued

Carrier	Locality	Locality name	Work GPCI	PE GPCI	MP GPCI
00512	00	Mississippi	0.960	0.841	0.711
00523	01	Metropolitan St. Louis, MO	0.992	0.956	0.926
00740	02	Metropolitan Kansas City, MO	0.989	0.977	0.931
00523	99	Rest of Missouri*	0.950	0.803	0.878
00740	99	Rest of Missouri*	0.950	0.803	0.878
00751	01	Montana	0.950	0.845	0.889
00655	00	Nebraska	0.959	0.876	0.447
00834	00	Nevada	1.003	1.045	1.050
31144	40	New Hampshire	0.981	1.029	0.927
00805	01	Northern NJ	1.058	1.222	0.958
00805	99	Rest of New Jersey	1.043	1.121	0.958
00521	05	New Mexico	0.972	0.888	0.880
00801	99	Rest of New York	0.997	0.919	0.666
00803	01	Manhattan, NY	1.065	1.300	1.000
00803	02	NYC Suburbs/Long I., NY	1.052	1.283	1.756
00803	03	Poughkpsie/N NYC Suburbs, NY	1.014	1.076	1.148
14330	04	Queens, NY	1.032	1.230	1.682
05535	00	North Carolina	0.971	0.922	0.630
00820	01	North Dakota	0.946	0.861	0.593
00883	00	Ohio	0.992	0.934	0.960
00522	00	Oklahoma	0.964	0.856	0.376
00835	01	Portland, OR	1.002	1.059	0.434
00835	99	Rest of Oregon	0.968	0.927	0.434
00865	01	Metropolitan Philadelphia, PA	1.016	1.106	1.364
00865	99	Rest of Pennsylvania	0.992	0.904	0.793
00973	20	Puerto Rico	0.906	0.699	0.257
00524	01	Rhode Island	1.045	0.991	0.895
00880	01	South Carolina	0.975	0.894	0.388
00820	02	South Dakota	0.943	0.877	0.359
05440	35	Tennessee	0.977	0.881	0.621
00900	09	Brazoria, TX	1.020	0.963	1.277
00900	11	Dallas, TX	1.009	1.064	1.044
00900	15	Galveston, TX	0.990	0.954	1.277
00900	18	Houston, TX	1.016	1.016	1.276
00900	20	Beaumont, TX	0.983	0.862	1.277
00900	28	Fort Worth, TX	0.997	0.991	1.044
00900	31	Austin, TX	0.991	1.048	0.970
00900	99	Rest of Texas	0.968	0.866	1.120
00910	09	Utah	0.977	0.938	0.651
31145	50	Vermont	0.968	0.970	0.505
00973	50	Virgin Islands	0.967	1.015	0.987
00904	00	Virginia	0.981	0.942	0.569
00836	02	Seattle (King Cnty), WA	1.014	1.133	0.805
00836	99	Rest of Washington	0.987	0.980	0.805
00884	16	West Virginia	0.973	0.820	1.522
00951	00	Wisconsin	0.987	0.920	0.777
00825	21	Wyoming	0.956	0.855	0.920

ADDENDUM E.—2007 PROPOSED GAFS

Carrier	Locality	Locality name	GAF
31140	09	Santa Clara, CA	1.265
31140	06	San Mateo, CA	1.259
31140	05	San Francisco, CA	1.256
00803	02	NYC Suburbs/Long I., NY	1.180
31140	07	Oakland/Berkley, CA	1.177
00803	01	Manhattan, NY	1.165
31140	03	Marin/Napa/Solano, CA	1.154
31143	01	Metropolitan Boston	1.153
14330	04	Queens, NY	1.144
00903	01	DC + MD/VA Suburbs	1.132
00805	01	Northern NJ	1.126
31146	26	Anaheim/Santa Ana, CA	1.120
00953	01	Detroit, MI	1.110
00952	16	Chicago, IL	1.102
00591	00	Connecticut	1.091
31146	18	Los Angeles, CA	1.088
00952	15	Suburban Chicago, IL	1.085

ADDENDUM E.—2007 PROPOSED GAFs—Continued

Carrier	Locality	Locality name	GAF
31146	17	Ventura, CA	1.084
00805	99	Rest of New Jersey	1.074
00865	01	Metropolitan Philadelphia, PA	1.069
00590	04	Miami, FL	1.069
00836	02	Seattle (King Cnty), WA	1.058
00831	01	Alaska	1.055
00803	03	Poughkpsie/N NYC Suburbs, NY	1.046
00833	01	Hawaii/Guam	1.044
00511	01	Atlanta, GA	1.043
00901	01	Baltimore/Surr. Cntys, MD	1.039
00900	11	Dallas, TX	1.035
00900	18	Houston, TX	1.026
00834	00	Nevada	1.023
31140	99	Rest of California*	1.017
31146	99	Rest of California*	1.017
00524	01	Rhode Island	1.016
00590	03	Fort Lauderdale, FL	1.015
00900	31	Austin, TX	1.015
00902	01	Delaware	1.011
00900	09	Brazoria, TX	1.005
00835	01	Portland, OR	1.005
31143	99	Rest of Massachusetts	1.003
31144	40	New Hampshire	1.000
00900	28	Fort Worth, TX	0.996
00952	12	East St. Louis, IL	0.995
00832	00	Arizona	0.993
00824	01	Colorado	0.991
00973	50	Virgin Islands	0.989
00900	15	Galveston, TX	0.985
00953	99	Rest of Michigan	0.984
00740	02	Metropolitan Kansas City, MO	0.982
31142	03	Southern Maine	0.981
00901	99	Rest of Maryland	0.978
00836	99	Rest of Washington	0.977
00528	01	New Orleans, LA	0.976
00954	00	Minnesota	0.975
00523	01	Metropolitan St. Louis, MO	0.974
00590	99	Rest of Florida	0.968
00883	00	Ohio	0.965
31145	50	Vermont	0.951
00801	99	Rest of New York	0.950
00951	00	Wisconsin	0.950
00904	00	Virginia	0.948
00910	09	Utah	0.947
00865	99	Rest of Pennsylvania	0.946
00900	20	Beaumont, TX	0.942
00952	99	Rest of Illinois	0.938
05535	00	North Carolina	0.936
00511	99	Rest of Georgia	0.932
00521	05	New Mexico	0.932
00630	00	Indiana	0.930
00835	99	Rest of Oregon	0.929
00900	99	Rest of Texas	0.929
00884	16	West Virginia	0.927
05440	35	Tennessee	0.921
00650	00	Kansas*	0.919
00740	04	Kansas*	0.919
00528	99	Rest of Louisiana	0.918
00880	01	South Carolina	0.917
31142	99	Rest of Maine	0.916
00660	00	Kentucky	0.915
00510	00	Alabama	0.914
00825	21	Wyoming	0.910
00826	00	Iowa	0.909
05130	00	Idaho	0.905
00655	00	Nebraska	0.903
00751	01	Montana	0.902
00512	00	Mississippi	0.898
00820	01	North Dakota	0.895
00522	00	Oklahoma	0.894
00820	02	South Dakota	0.891
00520	13	Arkansas	0.884

ADDENDUM E.—2007 PROPOSED GAFs—Continued

Carrier	Locality	Locality name	GAF
00523	99	Rest of Missouri	0.883
00740	99	Rest of Missouri	0.883
00973	20	Puerto Rico	0.790

ADDENDUM F.—PROPOSED CPT/HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA

HCPCS/CPT	Short descriptor
31620	Endobronchial us add-on
37250	Iv us first vessel add-on
37251	Iv us each add vessel add-on
51798	Us urine capacity measure
70010	Contrast x-ray of brain
70015	Contrast x-ray of brain
70030	X-ray eye for foreign body
70100	X-ray exam of jaw
70110	X-ray exam of jaw
70120	X-ray exam of mastoids
70130	X-ray exam of mastoids
70134	X-ray exam of middle ear
70140	X-ray exam of facial bones
70150	X-ray exam of facial bones
70160	X-ray exam of nasal bones
70170	X-ray exam of tear duct
70190	X-ray exam of eye sockets
70200	X-ray exam of eye sockets
70210	X-ray exam of sinuses
70220	X-ray exam of sinuses
70240	X-ray exam, pituitary saddle
70250	X-ray exam of skull
70260	X-ray exam of skull
70300	X-ray exam of teeth
70310	X-ray exam of teeth
70320	Full mouth x-ray of teeth
70328	X-ray exam of jaw joint
70330	X-ray exam of jaw joints
70332	X-ray exam of jaw joint
70336	Magnetic image, jaw joint
70350	X-ray head for orthodontia
70355	Panoramic x-ray of jaws
70360	X-ray exam of neck
70370	Throat x-ray & fluoroscopy
70371	Speech evaluation, complex
70373	Contrast x-ray of larynx
70380	X-ray exam of salivary gland
70390	X-ray exam of salivary duct
70450	Ct head/brain w/o dye
70460	Ct head/brain w/dye
70470	Ct head/brain w/o & w/dye
70480	Ct orbit/ear/fossa w/o dye
70481	Ct orbit/ear/fossa w/dye
70482	Ct orbit/ear/fossa w/o& w/dye
70486	Ct maxillofacial w/o dye
70487	Ct maxillofacial w/dye
70488	Ct maxillofacial w/o & w/dye
70490	Ct soft tissue neck w/o dye
70491	Ct soft tissue neck w/dye
70492	Ct sft tsue nck w/o & w/dye
70496	Ct angiography, head
70498	Ct angiography, neck
70540	Mri orbit/face/neck w/o dye
70542	Mri orbit/face/neck w/dye
70543	Mri orbt/fac/nck w/o & w/dye
70544	Mr angiography head w/o dye
70545	Mr angiography head w/dye
70546	Mr angiograph head w/o & w/ dye
70547	Mr angiography neck w/o dye

ADDENDUM F.—PROPOSED CPT/HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/CPT	Short descriptor
70548	Mr angiography neck w/dye
70549	Mr angiograph neck w/o & w/dye
70551	Mri brain w/o dye
70552	Mri brain w/dye
70553	Mri brain w/o & w/dye
70557	Mri brain w/o dye
70558	Mri brain w/dye
70559	Mri brain w/o & w/dye
71010	Chest x-ray
71015	Chest x-ray
71020	Chest x-ray
71021	Chest x-ray
71022	Chest x-ray
71023	Chest x-ray and fluoroscopy
71030	Chest x-ray
71034	Chest x-ray and fluoroscopy
71035	Chest x-ray
71040	Contrast x-ray of bronchi
71060	Contrast x-ray of bronchi
71090	X-ray & pacemaker insertion
71100	X-ray exam of ribs
71101	X-ray exam of ribs/chest
71110	X-ray exam of ribs
71111	X-ray exam of ribs/chest
71120	X-ray exam of breastbone
71130	X-ray exam of breastbone
71250	Ct thorax w/o dye
71260	Ct thorax w/dye
71270	Ct thorax w/o & w/dye
71275	Ct angiography, chest
71550	Mri chest w/o dye
71551	Mri chest w/dye
71552	Mri chest w/o & w/dye
71555	Mri angio chest w or w/o dye
72010	X-ray exam of spine
72020	X-ray exam of spine
72040	X-ray exam of neck spine
72050	X-ray exam of neck spine
72052	X-ray exam of neck spine
72069	X-ray exam of trunk spine
72070	X-ray exam of thoracic spine
72072	X-ray exam of thoracic spine
72074	X-ray exam of thoracic spine
72080	X-ray exam of trunk spine
72090	X-ray exam of trunk spine
72100	X-ray exam of lower spine
72110	X-ray exam of lower spine
72114	X-ray exam of lower spine
72120	X-ray exam of lower spine
72125	Ct neck spine w/o dye
72126	Ct neck spine w/dye
72127	Ct neck spine w/o & w/dye
72128	Ct chest spine w/o dye
72129	Ct chest spine w/dye
72130	Ct chest spine w/o & w/dye
72131	Ct lumbar spine w/o dye
72132	Ct lumbar spine w/dye
72133	Ct lumbar spine w/o & w/dye
72141	Mri neck spine w/o dye

ADDENDUM F.—PROPOSED CPT/HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/CPT	Short descriptor
72142	Mri neck spine w/dye
72146	Mri chest spine w/o dye
72147	Mri chest spine w/dye
72148	Mri lumbar spine w/o dye
72149	Mri lumbar spine w/dye
72156	Mri neck spine w/o & w/dye
72157	Mri chest spine w/o & w/dye
72158	Mri lumbar spine w/o & w/dye
72159	Mr angio spine w/o & w/dye
72170	X-ray exam of pelvis
72190	X-ray exam of pelvis
72191	Ct angiograph pelv w/o & w/dye
72192	Ct pelvis w/o dye
72193	Ct pelvis w/dye
72194	Ct pelvis w/o & w/dye
72195	Mri pelvis w/o dye
72196	Mri pelvis w/dye
72197	Mri pelvis w/o & w/dye
72198	Mr angio pelvis w/o & w/dye
72200	X-ray exam sacroiliac joints
72202	X-ray exam sacroiliac joints
72220	X-ray exam of tailbone
72240	Contrast x-ray of neck spine
72255	Contrast x-ray, thorax spine
72265	Contrast x-ray, lower spine
72270	Contrast x-ray, spine
72275	Epidurography
72285	X-ray c/t spine disk
72295	X-ray of lower spine disk
73000	X-ray exam of collar bone
73010	X-ray exam of shoulder blade
73020	X-ray exam of shoulder
73030	X-ray exam of shoulder
73040	Contrast x-ray of shoulder
73050	X-ray exam of shoulders
73060	X-ray exam of humerus
73070	X-ray exam of elbow
73080	X-ray exam of elbow
73085	Contrast x-ray of elbow
73090	X-ray exam of forearm
73092	X-ray exam of arm, infant
73100	X-ray exam of wrist
73110	X-ray exam of wrist
73115	Contrast x-ray of wrist
73120	X-ray exam of hand
73130	X-ray exam of hand
73140	X-ray exam of finger(s)
73200	Ct upper extremity w/o dye
73201	Ct upper extremity w/dye
73202	Ct uppr extremity w/o & w/dye
73206	Ct angio upr extrm w/o & w/dye
73218	Mri upper extremity w/o dye
73219	Mri upper extremity w/dye
73220	Mri uppr extremity w/o & w/dye
73221	Mri joint upr extrem w/o dye
73222	Mri joint upr extrem w/dye
73223	Mri joint upr extr w/o & w/dye
73225	Mr angio upr extr w/o & w/dye
73500	X-ray exam of hip

ADDENDUM F.—PROPOSED CPT/HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/CPT	Short descriptor
73510	X-ray exam of hip
73520	X-ray exam of hips
73525	Contrast x-ray of hip
73530	X-ray exam of hip
73540	X-ray exam of pelvis & hips
73542	X-ray exam, sacroiliac joint
73550	X-ray exam of thigh
73560	X-ray exam of knee, 1 or 2
73562	X-ray exam of knee, 3
73564	X-ray exam, knee, 4 or more
73565	X-ray exam of knees
73580	Contrast x-ray of knee joint
73590	X-ray exam of lower leg
73592	X-ray exam of leg, infant
73600	X-ray exam of ankle
73610	X-ray exam of ankle
73615	Contrast x-ray of ankle
73620	X-ray exam of foot
73630	X-ray exam of foot
73650	X-ray exam of heel
73660	X-ray exam of toe(s)
73700	Ct lower extremity w/o dye
73701	Ct lower extremity w/dye
73702	Ct lwr extremity w/o & w/dye
73706	Ct angio lwr extr w/o & w/dye
73718	Mri lower extremity w/o dye
73719	Mri lower extremity w/dye
73720	Mri lwr extremity w/o & w/dye
73721	Mri jnt of lwr extre w/o dye
73722	Mri joint of lwr extr w/dye
73723	Mri joint lwr extr w/o & w/dye
73725	Mr ang lwr ext w or w/o dye
74000	X-ray exam of abdomen
74010	X-ray exam of abdomen
74020	X-ray exam of abdomen
74022	X-ray exam series, abdomen
74150	Ct abdomen w/o dye
74160	Ct abdomen w/dye
74170	Ct abdomen w/o & w/dye
74175	Ct angio abdom w/o & w/dye
74181	Mri abdomen w/o dye
74182	Mri abdomen w/dye
74183	Mri abdomen w/o & w/dye
74185	Mri angio, abdom w orw/o dye
74190	X-ray exam of peritoneum
74210	Contrst x-ray exam of throat
74220	Contrast x-ray, esophagus
74230	Cine/vid x-ray, throat/esoph
74235	Remove esophagus obstruction
74240	X-ray exam, upper gi tract
74241	X-ray exam, upper gi tract
74245	X-ray exam, upper gi tract
74246	Contrst x-ray uppr gi tract
74247	Contrst x-ray uppr gi tract
74249	Contrst x-ray uppr gi tract
74250	X-ray exam of small bowel
74251	X-ray exam of small bowel
74260	X-ray exam of small bowel
74270	Contrast x-ray exam of colon
74280	Contrast x-ray exam of colon
74283	Contrast x-ray exam of colon
74290	Contrast x-ray, gallbladder
74291	Contrast x-rays, gallbladder
74300	X-ray bile ducts/pancreas
74301	X-rays at surgery add-on
74305	X-ray bile ducts/pancreas
74320	Contrast x-ray of bile ducts

ADDENDUM F.—PROPOSED CPT/HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/CPT	Short descriptor
74327	X-ray bile stone removal
74328	X-ray bile duct endoscopy
74329	X-ray for pancreas endoscopy
74330	X-ray bile/panc endoscopy
74340	X-ray guide for GI tube
74350	X-ray guide, stomach tube
74355	X-ray guide, intestinal tube
74360	X-ray guide, GI dilation
74363	X-ray, bile duct dilation
74400	Contrst x-ray, urinary tract
74410	Contrst x-ray, urinary tract
74415	Contrst x-ray, urinary tract
74420	Contrst x-ray, urinary tract
74425	Contrst x-ray, urinary tract
74430	Contrast x-ray, bladder
74440	X-ray, male genital tract
74445	X-ray exam of penis
74450	X-ray, urethra/bladder
74455	X-ray, urethra/bladder
74470	X-ray exam of kidney lesion
74475	X-ray control, cath insert
74480	X-ray control, cath insert
74485	X-ray guide, GU dilation
74710	X-ray measurement of pelvis
74740	X-ray, female genital tract
74742	X-ray, fallopian tube
74775	X-ray exam of perineum
75552	Heart mri for morph w/o dye
75553	Heart mri for morph w/dye
75554	Cardiac MRI/function
75555	Cardiac MRI/limited study
75556	Cardiac MRI/flow mapping
75600	Contrast x-ray exam of aorta
75605	Contrast x-ray exam of aorta
75625	Contrast x-ray exam of aorta
75630	X-ray aorta, leg arteries
75635	Ct angio abdominal arteries
75650	Artery x-rays, head & neck
75658	Artery x-rays, arm
75660	Artery x-rays, head & neck
75662	Artery x-rays, head & neck
75665	Artery x-rays, head & neck
75671	Artery x-rays, head & neck
75676	Artery x-rays, neck
75680	Artery x-rays, neck
75685	Artery x-rays, spine
75705	Artery x-rays, spine
75710	Artery x-rays, arm/leg
75716	Artery x-rays, arms/legs
75722	Artery x-rays, kidney
75724	Artery x-rays, kidneys
75726	Artery x-rays, abdomen
75731	Artery x-rays, adrenal gland
75733	Artery x-rays, adrenals
75736	Artery x-rays, pelvis
75741	Artery x-rays, lung
75743	Artery x-rays, lungs
75746	Artery x-rays, lung
75756	Artery x-rays, chest
75774	Artery x-ray, each vessel
75790	Visualize A-V shunt
75801	Lymph vessel x-ray, arm/leg
75803	Lymph vessel x-ray,arms/legs
75805	Lymph vessel x-ray, trunk
75807	Lymph vessel x-ray, trunk
75809	Nonvascular shunt, x-ray
75810	Vein x-ray, spleen/liver

ADDENDUM F.—PROPOSED CPT/HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/CPT	Short descriptor
75820	Vein x-ray, arm/leg
75822	Vein x-ray, arms/legs
75825	Vein x-ray, trunk
75827	Vein x-ray, chest
75831	Vein x-ray, kidney
75833	Vein x-ray, kidneys
75840	Vein x-ray, adrenal gland
75842	Vein x-ray, adrenal glands
75860	Vein x-ray, neck
75870	Vein x-ray, skull
75872	Vein x-ray, skull
75880	Vein x-ray, eye socket
75885	Vein x-ray, liver
75887	Vein x-ray, liver
75889	Vein x-ray, liver
75891	Vein x-ray, liver
75893	Venous sampling by catheter
75894	X-rays, transcath therapy
75896	X-rays, transcath therapy
75898	Follow-up angiography
75900	Intravascular cath exchange
75901	Remove cva device obstruct
75902	Remove cva lumen obstruct
75940	X-ray placement, vein filter
75945	Intravascular us
75946	Intravascular us add-on
75952	Endovasc repair abdom aorta
75953	Abdom aneurysm endovas rpr
75954	Iliac aneurysm endovas rpr
75956	Xray, endovasc thor ao repr
75957	Xray, endovasc thor ao repr
75958	Xray, place prox ext thor ao
75959	Xray, place dist ext thor ao
75960	Transcath iv stent rs&i
75961	Retrieval, broken catheter
75962	Repair arterial blockage
75964	Repair artery blockage, each
75966	Repair arterial blockage
75968	Repair artery blockage, each
75970	Vascular biopsy
75978	Repair venous blockage
75980	Contrast xray exam bile duct
75982	Contrast xray exam bile duct
75984	Xray control catheter change
75989	Abscess drainage under x-ray
75992	Atherectomy, x-ray exam
75993	Atherectomy, x-ray exam
75994	Atherectomy, x-ray exam
75995	Atherectomy, x-ray exam
75996	Atherectomy, x-ray exam
75998	Fluoroguide for vein device
76000	Fluoroscope examination
76001	Fluoroscope exam, extensive
76003	Needle localization by x-ray
76005	Fluoroguide for spine inject
76006	X-ray stress view
76010	X-ray, nose to rectum
76012	Percut vertebroplasty fluor
76013	Percut vertebroplasty, ct
76020	X-rays for bone age
76040	X-rays, bone evaluation
76061	X-rays, bone survey
76062	X-rays, bone survey
76065	X-rays, bone evaluation
76066	Joint survey, single view
76070	Ct bone density, axial
76071	Ct bone density, peripheral

ADDENDUM F.—PROPOSED CPT/HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/CPT	Short descriptor
76075	Dxa bone density, axial
76076	Dxa bone density/peripheral
76077	Dxa bone density/v-fracture
76078	Radiographic absorptiometry
76080	X-ray exam of fistula
76086	X-ray of mammary duct
76088	X-ray of mammary ducts
76093	Magnetic image, breast
76094	Magnetic image, both breasts
76095	Stereotactic breast biopsy
76096	X-ray of needle wire, breast
76098	X-ray exam, breast specimen
76100	X-ray exam of body section
76101	Complex body section x-ray
76102	Complex body section x-rays
76120	Cine/video x-rays
76125	Cine/video x-rays add-on
76140	X-ray consultation
76150	X-ray exam, dry process
76350	Special x-ray contrast study
76355	Ct scan for localization
76360	Ct scan for needle biopsy
76362	Ct guide for tissue ablation
76370	Ct scan for therapy guide
76376	3d render w/o postprocess
76377	3d rendering w/postprocess
76380	CAT scan follow-up study
76390	Mr spectroscopy
76393	Mr guidance for needle place
76394	Mri for tissue ablation
76400	Magnetic image, bone marrow
76496	Fluoroscopic procedure
76497	Ct procedure
76498	Mri procedure
76506	Echo exam of head
76510	Ophth us, b & quant a
76511	Ophth us, quant a only
76512	Ophth us, b w/non-quant a
76513	Echo exam of eye, water bath
76514	Echo exam of eye, thickness
76516	Echo exam of eye
76519	Echo exam of eye
76529	Echo exam of eye
76536	Us exam of head and neck
76604	Us exam, chest, b-scan
76645	Us exam, breast(s)
76700	Us exam, abdom, complete
76705	Echo exam of abdomen
76770	Us exam abdo back wall, comp
76775	Us exam abdo back wall, lim
76778	Us exam kidney transplant
76800	Us exam, spinal canal
76801	Ob us < 14 wks, single fetus
76802	Ob us < 14 wks, add'l fetus
76805	Ob us >/= 14 wks, sngl fetus
76810	Ob us >/= 14 wks, addl fetus
76811	Ob us, detailed, sngl fetus
76812	Ob us, detailed, addl fetus
76815	Ob us, limited, fetus(s)
76816	Ob us, follow-up, per fetus
76817	Transvaginal us, obstetric
76818	Fetal biophys profile w/nst
76819	Fetal biophys profil w/o nst
76820	Umbilical artery echo
76821	Middle cerebral artery echo
76825	Echo exam of fetal heart
76826	Echo exam of fetal heart

ADDENDUM F.—PROPOSED CPT/HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/CPT	Short descriptor
76827	Echo exam of fetal heart
76828	Echo exam of fetal heart
76830	Transvaginal us, non-ob
76831	Echo exam, uterus
76856	Us exam, pelvic, complete
76857	Us exam, pelvic, limited
76870	Us exam, scrotum
76872	Us, transrectal
76873	Echograp trans r, pros study
76880	Us exam, extremity
76885	Us exam infant hips, dynamic
76886	Us exam infant hips, static
76930	Echo guide, cardiocentesis
76932	Echo guide for heart biopsy
76936	Echo guide for artery repair
76937	Us guide, vascular access
76940	Us guide, tissue ablation
76941	Echo guide for transfusion
76942	Echo guide for biopsy
76945	Echo guide, villus sampling
76946	Echo guide for amniocentesis
76948	Echo guide, ova aspiration
76950	Echo guidance radiotherapy
76965	Echo guidance radiotherapy
76970	Ultrasound exam follow-up
76975	GI endoscopic ultrasound
76977	Us bone density measure
76986	Ultrasound guide intraoper
77417	Radiology port film(s)
77421	Stereoscopic x-ray guidance
78006	Thyroid imaging with uptake
78007	Thyroid image, mult uptakes
78010	Thyroid imaging
78011	Thyroid imaging with flow
78015	Thyroid met imaging
78016	Thyroid met imaging/studies
78018	Thyroid met imaging, body
78020	Thyroid met uptake
78070	Parathyroid nuclear imaging
78075	Adrenal nuclear imaging
78102	Bone marrow imaging, ltd
78103	Bone marrow imaging, mult
78104	Bone marrow imaging, body
78135	Red cell survival kinetics
78140	Red cell sequestration
78185	Spleen imaging
78190	Platelet survival, kinetics
78195	Lymph system imaging
78201	Liver imaging
78202	Liver imaging with flow
78205	Liver imaging (3D)
78206	Liver image (3d) with flow
78215	Liver and spleen imaging
78216	Liver & spleen image/flow
78220	Liver function study
78223	Hepatobiliary imaging
78230	Salivary gland imaging
78231	Serial salivary imaging
78232	Salivary gland function exam
78258	Esophageal motility study
78261	Gastric mucosa imaging
78262	Gastroesophageal reflux exam
78264	Gastric emptying study
78278	Acute GI blood loss imaging
78282	GI protein loss exam
78290	Meckel's divert exam
78291	Leveen/shunt patency exam

ADDENDUM F.—PROPOSED CPT/HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/CPT	Short descriptor
78300	Bone imaging, limited area
78305	Bone imaging, multiple areas
78306	Bone imaging, whole body
78315	Bone imaging, 3 phase
78320	Bone imaging (3D)
78350	Bone mineral, single photon
78351	Bone mineral, dual photon
78428	Cardiac shunt imaging
78445	Vascular flow imaging
78456	Acute venous thrombus image
78457	Venous thrombosis imaging
78458	Ven thrombosis images, bilat
78459	Heart muscle imaging (PET)
78460	Heart muscle blood, single
78461	Heart muscle blood, multiple
78464	Heart image (3d), single
78465	Heart image (3d), multiple
78466	Heart infarct image
78468	Heart infarct image (ef)
78469	Heart infarct image (3D)
78472	Gated heart, planar, single
78473	Gated heart, multiple
78478	Heart wall motion add-on
78480	Heart function add-on
78481	Heart first pass, single
78483	Heart first pass, multiple
78491	Heart image (pet), single
78492	Heart image (pet), multiple
78494	Heart image, spect
78496	Heart first pass add-on
78580	Lung perfusion imaging
78584	Lung V/Q image single breath
78585	Lung V/Q imaging
78586	Aerosol lung image, single
78587	Aerosol lung image, multiple
78588	Perfusion lung image
78591	Vent image, 1 breath, 1 proj
78593	Vent image, 1 proj, gas
78594	Vent image, mult proj, gas
78596	Lung differential function
78600	Brain imaging, ltd static
78601	Brain imaging, ltd w/flow
78605	Brain imaging, complete
78606	Brain imaging, compl w/flow
78607	Brain imaging (3D)
78608	Brain imaging (PET)
78609	Brain imaging (PET)
78610	Brain flow imaging only
78615	Cerebral vascular flow image
78630	Cerebrospinal fluid scan
78635	CSF ventriculography
78645	CSF shunt evaluation
78647	Cerebrospinal fluid scan
78650	CSF leakage imaging
78660	Nuclear exam of tear flow
78700	Kidney imaging, static
78701	Kidney imaging with flow
78704	Imaging renogram
78707	Kidney flow/function image
78708	Kidney flow/function image
78709	Kidney flow/function image
78710	Kidney imaging (3D)
78715	Renal vascular flow exam
78730	Urinary bladder retention
78740	Ureteral reflux study
78760	Testicular imaging
78761	Testicular imaging/flow

ADDENDUM F.—PROPOSED CPT/ HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/ CPT	Short descriptor
78800	Tumor imaging, limited area
78801	Tumor imaging, mult areas
78802	Tumor imaging, whole body
78803	Tumor imaging (3D)
78804	Tumor imaging, whole body
78805	Abscess imaging, ltd area
78806	Abscess imaging, whole body
78807	Nuclear localization/absce ss
78811	Tumor imaging (pet), limited
78812	Tumor image (pet)/skul-thigh
78813	Tumor image (pet) full body
78814	Tumor image pet/ct, limited
78815	Tumorimage pet/ct skul-thigh
78816	Tumor image pet/ct full body
78890	Nuclear medicine data proc
78891	Nuclear med data proc
93303	Echo transthoracic
93304	Echo transthoracic
93307	Echo exam of heart
93308	Echo exam of heart
93312	Echo transesophageal
93313	Echo transesophageal
93314	Echo transesophageal
93315	Echo transesophageal
93316	Echo transesophageal
93317	Echo transesophageal
93318	Echo transesophageal intraop
93320	Doppler echo exam, heart
93321	Doppler echo exam, heart

ADDENDUM F.—PROPOSED CPT/ HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/ CPT	Short descriptor
93325	Doppler color flow add-on
93350	Echo transthoracic
93555	Imaging, cardiac cath
93556	Imaging, cardiac cath
93571	Heart flow reserve measure
93572	Heart flow reserve measure
93875	Extracranial study
93880	Extracranial study
93882	Extracranial study
93886	Intracranial study
93888	Intracranial study
93890	Tcd, vasoreactivity study
93892	Tcd, emboli detect w/o inj
93893	Tcd, emboli detect w/inj
93922	Extremity study
93923	Extremity study
93924	Extremity study
93925	Lower extremity study
93926	Lower extremity study
93930	Upper extremity study
93931	Upper extremity study
93965	Extremity study
93970	Extremity study
93971	Extremity study
93975	Vascular study
93976	Vascular study
93978	Vascular study
93979	Vascular study
93980	Penile vascular study

ADDENDUM F.—PROPOSED CPT/ HCPCS IMAGING CODES DEFINED BY SECTION 5102(B) OF THE DRA—Continued

HCPCS/ CPT	Short descriptor
93981	Penile vascular study
93990	Doppler flow testing
0028T	Dexa body composition study
0042T	Ct perfusion w/contrast, cbf
0066T	Ct colonography;scree n
0067T	Ct colonography;dx
0080T	Endovasc aort repr rad s&i
0081T	Endovasc visc extnsn s&i
0144T	CT heart wo dye; qual calc
0145T	CT heart w/wo dye funct
0146T	CCTA w/wo dye
0147T	CCTA w/wo, quan calcium
0148T	CCTA w/wo, strxr
0149T	CCTA w/wo, strxr quan calc
0150T	CCTA w/wo, disease strxr
0151T	CT heart funct add-on
0152T	Computer chest add-on
G0120	Colon ca scrn; barium enema
G0122	Colon ca scrn; barium enema
G0130	Single energy x-ray study
G0219	PET img wholbod melano nonco
G0235	PET not otherwise specified
G0275	Renal angio, cardiac cath
G0278	Iliac art angio,cardiac cath
G0288	Recon, CTA for surg plan
G0365	Vessel mapping hemo access

[FR Doc. 06–6843 Filed 8–8–06; 4:15 pm]

BILLING CODE 4120–03–P

Federal Register

Tuesday,
August 22, 2006

Part III

Environmental Protection Agency

40 CFR Parts 72 and 75
Revisions to the Continuous Emissions Monitoring Rule for the Acid Rain Program, NO_X Budget Trading Program, the Clean Air Interstate Rule, and the Clean Air Mercury Rule; Proposed Rule

ENVIRONMENTAL PROTECTION AGENCY

40 CFR Parts 72 and 75

[OAR–2005–0132; FRL–8208–1]

Revisions to the Continuous Emissions Monitoring Rule for the Acid Rain Program, NO_X Budget Trading Program, the Clean Air Interstate Rule, and the Clean Air Mercury Rule

AGENCY: Environmental Protection Agency (EPA).

ACTION: Proposed rule.

SUMMARY: EPA is proposing rule revisions that would modify existing requirements for sources affected by the federally administered emission trading programs including the NO_X Budget Trading Program, the Acid Rain Program, the Clean Air Interstate Rule, and the Clean Air Mercury Rule.

The proposed revisions are prompted primarily by changes being implemented by EPA's Clean Air Markets Division in its data systems in order to utilize the latest modern technology for the submittal of data by affected sources. Other revisions address issues that have been raised during program implementation, fix specific inconsistencies in rule provisions, or update sources incorporated by reference. These revisions would not impose significant new requirements upon sources with regard to monitoring or quality assurance activities.

DATES: All public comments must be received on or before October 23, 2006.

ADDRESSES: Submit your comments, identified by Docket ID No. EPA–HQ–OAR–2005–0132, by one of the following methods:

- *Federal eRulemaking Portal: http://www.regulations.gov.* Follow the on-line instructions for submitting comments.
- *E-mail: a-and-r-docket@epa.gov.*
- *Fax:* (202) 566–1741.
- *Hand Delivery:* Air and Radiation Docket, Environmental Protection Agency, 1301 Constitution Avenue, NW., Room B–108, Washington, DC 20014. Such deliveries are accepted only during the Docket's normal hours of operation and special arrangements should be made for deliveries of boxed information.
- *Mail:* EPA Docket Center (EPA/DC), Environmental Protection Agency, Mailcode 6102T, 1200 Pennsylvania Avenue, NW., Washington, DC 20460. Please include a total of two copies. We request that a separate copy also be sent to the contact person identified below (see **FOR FURTHER INFORMATION CONTACT**).

Instructions: Direct your comments to Docket ID No. EPA–HQ–OAR–2005–0132. EPA's policy is that all comments received will be included in the public docket without change and may be made available online at *http://www.regulations.gov* including any personal information provided, unless the comment includes information claimed to be Confidential Business Information (CBI) or other information whose disclosure is restricted by statute. Do not submit information that you consider to be CBI or otherwise protected through *http://www.regulations.gov* or e-mail. The *http://www.regulations.gov* Web site is an "anonymous access" system, which means EPA will not know your identity or contact information unless you provide it in the body of your comment. If you send an e-mail comment directly to EPA without going through *http://www.regulations.gov,* your e-mail address will be automatically captured and included as part of the comment that is placed in the public docket and made available on the Internet. If you submit an electronic comment, EPA recommends that you include your name and other contact information in the body of your comment with a disk or CD–ROM you submit. If EPA cannot read your comment due to technical difficulties and cannot contact you for clarification, EPA may not be able to consider your comment. Electronic files should avoid the use of special characters, any form of encryption, and be free of any defects or viruses. *Docket:* All documents in the docket are listed in the *http://www.regulations.gov* index. Although listed in the index, some information is not publicly available, *e.g.*, CBI or other information whose disclosure is restricted by statute. Certain other material, such as copyrighted material, will be publicly available only in hard copy. Publicly available docket materials are available either electronically in *http://www.regulations.gov* or in hard copy at the Air and Radiation Docket, EPA/DC, EPA West, Room B102, 1301 Constitution Ave., NW., Washington, DC. The Public Reading Room is open from 8:30 a.m. to 4:30 p.m., Monday through Friday, excluding legal holidays. The telephone number for the Public Reading Room is (202) 566–1744, and the telephone number for the Air and Radiation Docket is (202) 566–1742.

FOR FURTHER INFORMATION CONTACT: Matthew Boze, Clean Air Markets Division, U.S. Environmental Protection Agency, Clean Air Markets Division, MC 6204J, Ariel Rios Building, 1200 Pennsylvania Ave., NW., Washington, DC 20460, telephone (202) 343–9211, e-mail at *boze.matthew@epa.gov.* Electronic copies of this document can be accessed through the EPA Web site at: *http://www.epa.gov/airmarkets.*

SUPPLEMENTARY INFORMATION: *Regulated Entities.* Entities regulated by this action primarily are fossil fuel-fired boilers, turbines, and combined cycle units that serve generators that produce electricity, generate steam, or cogenerate electricity and steam. Some trading programs include process sources, such as process heaters or cement kilns. Although Part 75 primarily regulates the electric utility industry, certain State and Federal NO_X mass emission trading programs rely on subpart H of Part 75, and those programs may include boilers, turbines, combined cycle, and certain process units from other industries. Regulated categories and entities include:

Category	NAICS code	Examples of potentially regulated industries
Industry	221112 and others	Electric service providers Process sources with large boilers, turbines, combined cycle units, process heaters, or cement kilns where emissions exhaust through a stack.

This table is not intended to be exhaustive, but rather to provide a guide for readers regarding entities likely to be regulated by this action. This table lists the types of entities which EPA is now aware could potentially be regulated by this action. Other types of entities not listed in this table could also be regulated. To determine whether your facility, company, business, organization, etc., is regulated by this action, you should carefully examine the applicability provisions in §§ 72.6, 72.7, and 72.8 of title 40 of the Code of Federal Regulations and in 40 CFR Parts 96 and 97. If you have questions regarding the applicability of this action to a particular entity, consult the person listed in the preceding **FOR FURTHER INFORMATION CONTACT** section.

Submitting CBI. Do not submit this information to EPA through *http://www.regulations.gov* or e-mail. Clearly mark the part or all of the information that you claim to be CBI. For CBI information on a disk or CD–ROM that you mail to EPA, mark the outside of the disk or CD–ROM as CBI and then identify electronically within the disk or CD–ROM the specific information that is claimed as CBI. In addition to one complete version of the comment that includes information claimed as CBI, a copy of the comment that does not contain the information claimed as CBI must be submitted for inclusion in the public docket. Information so marked will not be disclosed except in accordance with procedures set forth in 40 CFR part 2.

World Wide Web (WWW). In addition to being available in the docket, an electronic copy of the proposed rule is also available on the WWW through the Technology Transfer Network Web site (TTN Web). Following signature, a copy of the proposed rule will be posted on the TTN's policy and guidance page for newly proposed or promulgated rules at *http://www.epa.gov/ttn/oarpg.* The TTN provides information and technology exchange in various areas of air pollution control.

Outline:

I. Detailed Discussion of Proposed Rule Revisions

EPA is in the process of re-engineering the data systems associated with the collection and processing of emissions, monitoring plan, quality assurance, and certification data. The re-engineering project includes the creation of a client tool, provided by EPA that sources will use to evaluate and submit their Part 75 monitoring data. This process change will enable sources to assess the quality of their data prior to submitting the data using EPA established checking criteria. The process will also allow sources to report their data directly to a database. Having the data in a true database will allow the Agency to implement and assess the program more efficiently and will streamline access to the data. Also, this database structure will enable EPA to implement process changes that will reduce the redundant reporting of certain types of data. The re-engineered systems will be supported by a new extensible markup language (XML) data format that will replace the record type/column format currently used by EPA to collect electronic data. EPA intends to transition existing sources to the new XML electronic data report (XML–EDR) format during the 2008 reporting year. For sources reporting in 2008 for the first time, the new XML–EDR format should be used. All sources will be required to use the new process beginning 2009.

A. Rule Definitions

The proposed changes to Part 72 include adding a definition for "long-term cold storage" to mean "the complete shutdown of a unit intended to last for an extended period of time (at least two calendar years) where notice for long-term cold storage is provided under § 75.61(a)(7). *See* Section II.E.4 of this preamble for further discussion.

EPA also proposes to modify the definition of "capacity factor" so that the Agency can use the reported maximum hourly gross load, as currently reported in the electronic monitoring plan, to determine whether a unit qualifies for peaking unit status, by recalculating the capacity factor. This is important because the maximum hourly gross load can be greater than the nameplate capacity. Also, when using heat input to define capacity factor, the definition would be revised to refer to maximum rated hourly heat input rate, which is defined in § 72.2.

The proposed changes to § 72.2 would also modify the definition of "EPA Protocol Gas," and add a definition of "EPA Protocol Gas Verification Program", to support the proposed calibration gas audit program. EPA is also proposing to expand the definition of "excepted monitoring system" to include the sorbent trap and low mass emissions (LME) excepted methodologies for Hg. Finally, today's proposed rule would add definitions of "Air Emission Testing Body (AETB)" and "Qualified Individual", to support the proposed stack tester accreditation program. See Sections II.H.2 and II.H.3 of this preamble for a discussion of these proposed programs.

B. General Monitoring Provisions

1. Update of Incorporation by Reference (§ 75.6)

Section 75.6 identifies a number of methods and other standards that are incorporated by reference into Part 75. This section includes standards published by the American Society for Testing and Materials (ASTM), the American Society of Mechanical Engineers (ASME), the American National Standards Institute (ANSI), the Gas Processors Association (GPA), and the American Petroleum Institute (API). Changes in § 75.6 would reflect the need to incorporate recent updates for many of the referenced standards. The proposed revisions would recognize or adhere to these newer standards by updating references for the standards listed in §§ 75.6(a) through 75.6(f). Additionally, new §§ 75.6(a)(45) through 75.6(a)(48) and 75.6(f)(4) would incorporate by reference additional ASTM and API standards that are relevant to Part 75 implementation.

2. Default Emission Rates for Low Mass Emissions (LME) Units

Today's proposed rule revisions would allow LME units to use site-specific default SO_2 emission rates for fuel oil combustion, in lieu of using the "generic" default SO_2 emission rates specified in Table LM–1 of § 75.19. To use this option, a federally enforceable permit condition would have to be in place for the unit, limiting the sulfur content of the oil. This revision would allow more representative, yet still conservatively high, SO_2 emissions data to be reported from oil-burning LME units. The site-specific default SO_2 emission rate would be calculated using an equation from EPA publication AP–42. The sulfur content used in the calculations would be the maximum weight percent sulfur allowed by the federally-enforceable permit. Sources choosing to implement this option would be required to perform periodic oil sampling using one of the four methodologies described in Section 2.2

of Appendix D to Part 75, and would be required to keep records documenting the sulfur content of the fuel.

Today's proposed rule would also revise § 75.19(c)(1)(iv)(G) to clarify that fuel-and-unit-specific default NO_X emission rates for LME units may be determined using data from a Continuous Emissions Monitoring System (CEMS) that has been quality-assured according to either Appendix B of Part 75 or Appendix F of Part 60, or comparably quality-assured under a State CEMS program. The current rule simply states that 3 years (or 3 ozone seasons, if applicable) of quality-assured CEMS data may be used for this purpose, but it does not specify the acceptable level of QA required.

3. Default Moisture Value for Natural Gas

EPA is proposing to allow gas-fired boilers equipped with CEMS to use default moisture values in lieu of continuously monitoring the stack gas moisture content. Two default values are proposed: 14.0% H_2O under § 75.11(b), and 18.0% H_2O under § 75.12(b). The higher default value would apply only when Equation 19–3, 19–4, or 19–8 (from Method 19 in appendix A of Part 60) is used to determine the NO_X emission rate. These proposed default values are based on supplemental moisture data provided to the Agency in a December 13, 2004 petition from a gas-fired industrial source and moisture data collected during EPA's development of flow rate reference Methods 2F and 2G at two gas-fired facilities. (*See* Docket A–99–14; Items II–A–1 and II–A–7).

EPA selected the 10th and 90th percentile values from these data, rounded to the nearest whole number, as the proposed natural gas default moisture values. The selection of conservative 90th or 10th percentile values from representative moisture data sets is consistent with the approach that the Agency has approved in response to past petition under § 75.66 requesting to use site-specific default moisture values.

4. Expanded Use of Equation F–23

Today's proposed rule would revise § 75.11(e)(1) to remove the current restrictions on the use of Equation F–23 to determine the SO_2 mass emission rate. The current rule restricts the use of this equation to units equipped with SO_2 monitors and to hours when only fuel that meets the Part 72 definition of "pipeline natural gas" or "natural gas" is being combusted. EPA proposes to allow Equation F–23 to be used whether or not the unit has an SO_2 monitor and to expand its use to fuels other than natural gas.

Section 75.11(e) would be re-titled as "Special considerations during the combustion of gaseous fuels", and the introductory text of the section would be revised, so that the section would no longer apply exclusively to units with SO_2 monitors. Rather, it would apply to units that use certified flow rate and diluent gas monitors to quantify heat input. Such units would be required to implement the provisions of either revised § 75.11(e)(1) or revised § 75.11(e)(3) when gaseous fuel is the only fuel combusted in the unit. Section 75.11(e)(2) would be removed and reserved, as the use of Appendix D methodology during gaseous fuel combustion is not appropriate for a unit that uses flow and diluent monitors to measure heat input. This is because only one heat input methodology is allowed for each unit.

Revised § 75.11(e)(1) would expand the use of Equation F–23 beyond natural gas combustion to include the combustion of any gaseous fuel that qualifies for a default SO_2 emission rate under Section 2.3.6(b) of Appendix D. The proposed revisions to § 75.11(e)(3) would be relatively minor. The option to use a certified SO_2 monitor during hours of gaseous fuel combustion would be retained.

A new paragraph (e)(4) would also be added to § 75.11(e). This new provision would allow Equation F–23 to be used for the combustion of liquid and solid fuels that meet the definition of "very low sulfur fuel" in § 72.2, if a petition for a fuel-specific default SO_2 emission rate is submitted to the Administrator under § 75.66 and the Administrator approves the petition. Similar petitions would also be accepted for the combustion of mixtures of these fuels and for the co-firing of these fuels with gaseous fuel.

EPA believes that expanding the use of Equation F–23 will benefit certain units that are subject to the Acid Rain Program or to the SO_2 provisions of the Clean Air Interstate Rule (CAIR). In particular, the requirement to operate and maintain an SO_2 CEMS could be waived for units that burn low-sulfur solid fuels such as wood waste. Also, for units that combust non-traditional gaseous fuels, Equation F–23 would provide an alternative way of quantifying SO_2 mass emissions that does not require either an SO_2 CEMS or a certified fuel flowmeter.

5. Calculation of NO_X Emission Rate—LME Units

According to §§ 75.58(f), 75.64(a)(4), and 75.64(a)(9), oil and gas-fired units in the Acid Rain Program that qualify to use the low mass emissions (LME) methodology in § 75.19 are required to report both NO_X mass emissions (lb or tons, as applicable) and NO_X emission rate (lb/mmBtu) on an hourly, quarterly and annual basis. However, the mathematics in § 75.19(c)(4)(ii) pertains only to NO_X mass emissions, not NO_X emission rate. This is most likely because the criterion for initial and on-going LME qualification is based on the total tons of NO_X emitted the calendar year, rather than on the NO_X emission rate.

Today's rule would re-title § 75.19(c)(4)(ii) as "NO_X mass emissions and NO_X emission rate", and would add a new subparagraph (D) to § 75.19 (c)(4)(ii), providing instructions for determining quarterly and cumulative NO_X emission rates for an LME unit. The NO_X emission rate for each hour (lb/mmBtu) would simply be the appropriate generic or unit-specific default NO_X emission rate defined in the monitoring plan for the type of fuel being combusted and (if applicable) the NO_X emission control status. The quarterly NO_X emission rate would be determined by averaging all of the hourly NO_X emission rates and the cumulative (year-to-date) NO_X emission rate would be the arithmetic average of the quarterly values.

6. LME Units—Scope of Applicability

Today's rule would revise § 75.19(a)(1) to clarify that the low mass emissions (LME) methodology is a stand-alone alternative to a CEMS and/or the "excepted" monitoring methodologies in Appendices D, E, and G. In other words, if a unit qualifies for LME status, the owner or operator would be required either to use the LME methodology for all parameters or not to use the method at all. No mixing-and-matching of other monitoring methodologies with LME would be permitted. For example, the owner or operator of a qualifying LME unit in the Acid Rain Program would either be required to follow the provisions of § 75.19 for all parameters (*i.e.*, SO_2 and CO_2 mass emissions, NO_X emission rate, and unit heat input) or to monitor these parameters using a CEMS, Appendices D, E, and G, or a combination of these other methods. EPA has always intended for the LME methodology to be applied this way, but this was not explicitly stated in § 75.19 and in other sections of the rule. In fact, §§ 75.11(d)(3), 75.12(e)(3), and 75.13(d)(3)) suggest that mixing other monitoring methodologies with LME might not be prohibited. Today's rule would also make parallel revisions to

these other sections, consistent with the changes to § 75.19(a)(1), to clarify the Agency's intent.

7. Use of maximum controlled NO_X emission rate when using bypass stacks

Today's proposed rule would revise § 75.17(d)(2) to allow for the calculation and use of a maximum controlled NO_X emission rate (MCR) instead of the maximum potential NO_X emission rate (MER) whenever an unmonitored bypass stack is used, provided that the add-on controls are not bypassed and are documented to be operating properly. Documentation of proper add-on control operation for such hours of operation would be required as described in § 75.34(d). The MCR would be calculated in a manner similar to the calculation of the MER, except that the maximum expected NO_X concentration (MEC) would be used instead of the maximum potential NO_X concentration (MPC). EPA believes that this proposal would more fairly account for controlled emissions when unmonitored bypass stacks are used. The rule currently requires the use of the MER regardless of the operation and usage of add-on controls. When § 75.17(d)(2) was originally promulgated, EPA assumed that the add-on controls would be bypassed whenever a bypass stack is used. EPA is now aware that there are situations where this is not the case. An example would be a coal-fired unit equipped with FGD and SCR add-on emission controls. If the SCR is documented to be working during an FGD malfunction and the effluent gases are routed through an unmonitored bypass stack after passing through the SCR, then the MEC, rather than the MER, would be the more appropriate NO_X emission rate to report for the bypass hour(s).

C. Certification Requirements

1. Alternative Monitoring System Certification

The proposed rule would delete §§ 75.20(f)(1) and (2) from the rule, thereby removing the requirement for the Administrator to publish each request for certification of an alternative monitoring system in the **Federal Register**, with an associated 60-day public comment period. This rule provision is considered unnecessary, in view of the Agency's authority under Subpart E to approve alternative monitoring systems and the rigorous requirements that alternative monitoring systems must meet in order to be certified.

2. Part 60 Reference Test Methods

On May 15, 2006, EPA promulgated final revisions to EPA reference test methods 6C, 7E, and 3A, which are found in Appendix A of 40 CFR Part 60. (*See* 71 FR 28082, May 15, 2006). Today's proposed rule would update, (as necessary), various section references to these reference methods, as well as specify certain options that are not to be applied to RATA testing under Part 75. Specifically, the following provisions are not permitted unless specific approval is granted by the Administrator of Part 75:

(1) § 7.1 of the revised EPA Method 7E allowing for use of prepared calibration gas mixtures that are produced in accordance with Method 205 in Appendix M of 40 CFR Part 51. EPA maintains that for RATA testing under Part 75, that reference gases be selected in accordance with § 5.1 of Appendix A of 40 CFR Part 75.

(2) § 8.4 of the revised EPA Method 7E allowing for the use of a multi-hole probe to satisfy the multipoint traverse requirement of the method.

(3) § 8.6 of the revised EPA Method 7E allowing for the use of "Dynamic Spiking" as an alternative to the interference and system bias checks of the method. This proposed rule would allow for dynamic spiking to be conducted (optionally) as an additional quality assurance check for Part 75 applications.

3. Mercury Reference Methods

Today's proposed rule would add an alternative acceptance criterion for the results of mercury (Hg) emission data collected with the Ontario Hydro (OH) reference method and would allow the use of alternative reference methods for RATAs and for the low mass Hg emission testing described in § 75.81(c).

On May 18, 2005, EPA published the Clean Air Mercury Rule (CAMR). That rule requires coal-fired electric generating units (EGUs) to reduce Hg emissions, starting in 2010, and to continuously monitor Hg mass emissions according to Subpart I of Part 75, beginning in 2009.

Relative accuracy test audits (RATAs) of all continuous Hg monitoring systems are required under CAMR, and Hg emission testing is required for units seeking to qualify as low mass emitters under § 75.81(c). The principal reference method specified for the RATAs and the emission testing is the OH method. Alternatively, an instrumental method approved by the Administrator may be used. When the OH method is performed, § 75.22(a)(7) requires paired sampling trains for each test run, and the relative deviation (RD) of the results from the two trains must not exceed 10 percent.

As part of the May 18, 2005 rulemaking, EPA also promulgated revisions to Subpart Da of the New Source Performance Standards (NSPS) regulations, requiring continuous Hg emission monitoring for new coal-fired electric utility units constructed after January 1, 2004. Along with the Subpart Da revisions, a performance specification, PS–12A, for certifying the required continuous Hg monitors was published. PS–12A, like Part 75, requires RATA testing of all Hg monitoring systems, using paired reference method sampling trains; however, note that PS 12–A allows EPA Method 29 (from Appendix A–8 of 40 CFR Part 60) to be used as an alternative to the OH method, whereas Part 75 does not.

The principal acceptance criterion in Section 8.6.6.2 of PS 12–A for the data from the paired reference method trains (10 percent RD) is the same as in § 75.22(a)(7). However, PS 12–A includes an alternative acceptance criterion for sources with low Hg emissions. If the average Hg concentration during the RATA is 1.0 $\mu g/m^3$ or less, the RD specification is 20 percent. In view of this, today's proposed rule would revise § 75.22(a)(7), to include this same 20 percent alternative RD specification for low-emitters. This would harmonize the Part 60 and Part 75 RATA provisions for Hg monitors, thereby facilitating compliance for sources subject to both sets of regulations.

EPA is also proposing revisions to §§ 75.22(a)(7) and 75.81(c)(1) which would allow EPA Method 29 to be used as an alternative to the OH method, both for RATA testing and for periodic emission testing of units with low Hg mass emissions (≤ 29 lb/yr). Method 29 is an established test procedure that uses atomic absorption spectroscopy to determine the concentration of various metals, including Hg, in the stack gas. This method is more familiar to emission testers than the OH method, and Method 29 data have been accepted for compliance purposes by the State. Method 29 and the OH method both measure the total vapor phase Hg in the effluent. The main difference between the two methods is that the OH method performs "speciation" of the vapor phase Hg, *i.e.*, it quantifies the elemental and ionic portions of the vapor phase Hg separately, whereas Method 29 does not. However, the CAMR rule does not require speciation of the vapor phase Hg. Therefore, Method 29 could be used instead of the OH method.

There would be two caveats on the use of Method 29. First, sources electing to use Method 29 would be required to use paired sampling trains (*i.e.*, two trains sampling the source effluent simultaneously), and the relative deviation specification in § 75.22(a)(7) would have to be met for each run. The test results for each valid run would be based on the Hg collected in the back half of each sampling train (*i.e.*, the impinger catch), and the results from the two trains would be averaged arithmetically.

Second, certain analytical and QA procedures in the OH method (ASTM D6784–02) would be followed instead of the corresponding procedures in Method 29. Specifically, testers would be required to replace the procedures in sections 7.5.33 and 11.1.3 of Method 29 with the corresponding procedures in sections 13.4.1.1 through 13.4.1.3 of ASTM D6784–02, and to perform the QA/QC procedures in section 13.4.2 of the OH method instead of the procedures in section 9.2.3 of Method 29. EPA believes that implementing these sections of the OH method in lieu of the corresponding Method 29 provisions will improve the quality of the data, because the analytical and QA/QC requirements of the OH method are more detailed and rigorous than those in Method 29.

EPA is also proposing to allow several of the sample recovery and preparation procedures in the OH method to be followed instead of the Method 29 procedures. In particular: (a) Sections 13.2.9.1 through 13.2.9.3 of the OH method could be followed instead of sections 8.2.8 and 8.2.9.1 of RM 29; (b) sections 13.2.10.1 through 13.2.10.4 of the OH method could be followed instead of sections 8.2.9.2 and 8.2.9.3 of RM 29; (c) section 8.3.4 of RM 29 could be replaced with section 13.3.4 or 13.3.6 of the OH method (as appropriate); and (d) section 8.3.5 of RM 29 could be replaced with section 13.3.5 or 13.3.6 of the OH method (as appropriate). Use of these alternative procedures would increase the accuracy of moisture content determinations (by using a gravimetric rather than a volumetric technique), and would eliminate of the need for two separate analyses of the $KMnO_4$ fraction.

Revisions to § 75.59 and to Sections 6.5.10 and 7.6.1 of Appendix A to Part 75 are also being proposed, for purposes of consistency with the proposed changes to §§ 75.22(a)(7) and 75.81(c)(1).

Finally, the Agency is soliciting comment on the use of sorbent traps for reference method testing. At the 2006 Electric Utility Environmental Conference (EUEC) in Tucson, Arizona, a stakeholder meeting was held to discuss mercury monitoring issues. Many of the participants expressed an interest in using portable sorbent trap monitoring systems for Hg reference method testing, as an alternative to the OH method. After much internal discussion, EPA believes that a sorbent trap system could potentially serve as an alternative reference method for Hg emission testing and RATA applications, if it can be adequately demonstrated that the method does not have an inherent measurement bias when compared to the OH method, and if sufficiently rigorous quality-assurance (QA) procedures are developed and followed when the system is used in the field. In view of this, EPA requests comment on how such a demonstration might be made and what QA procedures would be appropriate. In anticipation that a viable reference method using sorbent trap technology may be developed in the near future, the Agency is also proposing to add language to § 75.22(a)(7), which would allow an "other suitable" reference method approved by the Administrator to be used for Hg emission testing and RATAs.

D. Missing Data Substitution

1. Block Versus Step-Wise Approach

During periods of missing CEMS data, Part 75 requires substitute data to be reported. Special mathematical algorithms are used to determine the appropriate substitute data values. As the length of a missing data period increases, the percent monitor data availability (PMA) decreases, and the required substitute data values become increasingly conservative each time that a particular PMA "cut point" is reached. The cut points are 95%, 90%, and 80% PMA for all parameters except Hg. For Hg, the cut points are slightly lower, *i.e.*, at 90%, 80% and 70% PMA.

Historically, EPA's policy has required sources to use a "block" approach for missing data substitution. The PMA at the end of the missing data period has been used to determine which mathematical algorithm applies, and the substitute data value or values prescribed by that one algorithm have been reported for each hour of the missing data period.

However, EPA has recently revised its missing substitution data policy. The revised policy guidance (*see* "Part 75 Emission Monitoring Policy Manual", Question 15.5) allows sources to apply the missing data algorithms in a stepwise manner instead of using the block approach. Under the stepwise methodology, the various missing data algorithms are applied sequentially. That is, the least conservative algorithm is applied to the missing data hours until the PMA drops below 95%. Then, the next algorithm is applied until the PMA has dropped below 90%, and so on.

Part 75 is not clear about which of the two methods should be used for missing data substitution. Today's proposed rule would revise the text of certain paragraphs in §§ 75.33 and 75.32(b), to clarify that the stepwise, hour-by-hour method (which is the least stringent approach) is the preferred one. The Agency favors this approach because it prevents sources from being penalized by the retroactive application of more stringent missing data algorithms to hours where the hourly PMA merits the use of less conservative algorithms. EPA intends that only the new stepwise, hour-by-hour method be used after January 1, 2009, or whenever emissions data are to be submitted in XML–format. Until this time, either method will be accepted.

2. Substitute Data Values for Controlled Units

For units with add-on emission controls, § 75.34(a)(3) provides that the designated representative (DR) may petition the Administrator under § 75.66 to report alternative substitute data values in certain instances. Specifically, when the percent monitor data availability (PMA) for SO_2 or NO_X is below 90.0 percent, the DR may petition to replace the maximum emission rate recorded in the last 720 quality-assured monitor operating hours with the maximum controlled emission rate recorded during that same lookback period, for each missing data hour in which the add-on controls are documented to be operating properly. Until recently, this petition provision applied only to units with add-on SO_2 or NO_X emission controls. However, revisions to Part 75 on May 18, 2005, extended it to include units with add-on Hg controls (*see* § 75.38(c)).

For several reasons, EPA believes it is appropriate to revise § 75.34(a)(3). First, the 720 hour lookback is only appropriate for SO_2 and Hg. For NO_X, the lookback should be 2,160 hours and should also be load-based. Second, for SO_2, Hg, and NO_X concentration monitoring systems, the terms "maximum emission rate" and "maximum controlled emission rate" are not appropriate and should be replaced by "maximum concentration" and "maximum controlled concentration", respectively. Third, the petition provision, as written, applies to

all PMA values below 90.0 percent (that was the intent when it was originally written), but in light of subsequent revisions to Part 75, it should be restricted to a narrower range of PMA values. Fourth, and most important, after more than ten years of implementing the Acid Rain Program, EPA no longer believes that special petitions are necessary to use maximum controlled values for missing data substitution, because sources with add-on controls are required to implement a quality assurance/quality control (QA/QC) program that includes the recording of parametric data to document the hourly operating status of the emission controls. This parametric information must be made available to inspectors and auditors upon request. Therefore, any claim that the emission controls were operating properly during a particular missing data period can be easily verified through the audit process.

At the time the petition provision in § 75.34(a)(3) was written, there were only three missing data tiers in existence, *i.e.*, for PMA values: (1) ≥ 95.0 percent; (2) ≥ 90.0 percent, but < 95.0 percent: and (3) < 90.0 percent. The provision was associated with the third tier (PMA < 90.0 percent), for which the required substitute data value is the maximum value recorded in a specified lookback period. However, on May 26, 1999, EPA added a fourth CEMS missing data tier to Part 75. The May 1999 rule revisions did not change the missing data algorithms for the third tier, but the PMA "cut off" point for the third tier was set at 80.0 percent, and below 80.0 percent PMA, reporting of the maximum potential concentration (MPC) or the maximum potential NO_X emission rate (MER) was required for a missing data period of any length.

Today's proposed rule would remove from § 75.34(a)(3) and § 75.66(f) the requirement to petition the Administrator to use the maximum controlled SO_2 or NO_X concentration (or maximum controlled NO_X emission rate) from the applicable lookback period. The proposed revisions would simply allow the maximum controlled values to be reported whenever parametric data are available to document that the emission controls are operating properly. The proposed rule would further clarify that this reporting option applies only to the third missing data tier, when the PMA is greater than or equal to 80.0 percent, but less than 90.0 percent.

EPA is also proposing to add a new paragraph (a)(5) to § 75.34, which would allow units with add-on emission controls to report alternative substitute data values for missing data periods in the fourth tier, when the PMA is below 80.0 percent. Proposed § 75.34(a)(5) would allow the owner or operator to replace the maximum potential SO_2 or NO_X concentration (MPC) or the maximum potential NO_X emission rate (MER) with a less conservative substitute data value, for missing data hours where parametric data, (as described in §§ 75.34(d) and 75.58(b)) are available to verify proper operation of the add-on controls. Specifically, for SO_2 and NO_X concentration, the replacement value for the MPC would be the greater of: (a) The maximum expected concentration (MEC); or (b) 1.25 times the maximum controlled value in the standard missing data lookback period. For NO_X emission rate, the replacement value for the MER would be the greater of: (a) The maximum controlled NO_X emission rate (MCR); or (b) 1.25 times the maximum controlled value in the standard missing data lookback period. The NO_X MCR would be calculated in the same manner as the NO_X MER (*see* Appendix A, section 2.1.2.1(b)), except that the MEC, rather than the MPC, would be used in the calculation.

Finally, today's proposed rule would revise § 75.38(c) to extend the alternative missing data options for the third and fourth tiers to mercury (Hg) concentration, and § 75.58(b)(3) would be revised to be consistent with the proposed revisions to §§ 75.34(a)(3), 75.34(a)(5), and 75.38(c).

EPA believes that for missing data hours in which the emission controls are working properly, these proposed rule revisions will prevent gross overestimation of emissions during hours when the source is operating its emission controls in a manner that is protective of the environment. When the emission controls are working properly, there can be as much as a tenfold difference between the MPC, MER, or maximum value in a lookback period and the actual source emissions. The proposed alternative substitute data values in §§ 75.34(a)(3) and (a)(5), though much closer to the actual emissions, would still be conservatively high and would provide the owner or operator with a strong incentive to keep the CEMS operational. The Agency also believes that the proposed alternative data substitution methodology in § 75.34(a)(5) ensures that the substitute data values for the fourth tier will always be higher than the corresponding substitute data values for the third tier.

3. Substitute Data Values for Hg

EPA is also proposing to revise the Hg missing data procedures. First, for Hg CEMS, the text of § 75.38(a) would be amended to make it consistent with Table 1 in § 75.33. Proposed § 75.38(a) clarifies that the percent monitor data availability (PMA) "trigger conditions" for Hg monitoring systems are different from the trigger conditions for all other parameters. For all parameters except Hg, the trigger points that define the boundaries of the four missing data tiers are 95 percent, 90 percent, and 80 percent PMA. However, for Hg the corresponding trigger points are 90 percent, 80 percent and 70 percent, respectively.

Second, EPA proposes to completely revise the missing data provisions in § 75.39 for sorbent trap monitoring systems. In the current rule, the missing data routines for sorbent trap systems are substantially different from those for Hg CEMS. At the time of publication of the Part 75 Hg monitoring provisions, the Agency believed that a different approach to missing data substitution was appropriate for sorbent traps, because unlike the Hg CEMS, a sorbent trap system does not provide real-time hourly average emissions data. Consequently, EPA prescribed a 12-month missing data "lookback" period for the sorbent trap systems. That is, the substitute data values are based on a lookback through the previous 12 months of sorbent trap sample results, instead of looking back through 720 quality-assured monitor operating hours, as is done for the Hg CEMS.

EPA has reconsidered the sorbent trap missing data methodology and has concluded that it is unnecessarily complex and will likely be difficult to implement and audit. In view of this, the Agency proposes to amend the missing data procedures for sorbent trap systems, to make them the same as for Hg CEMS. Section 75.39 would be revised to require that the initial missing data procedures of § 75.31(b) and the standard Hg missing data provisions of § 75.38 be followed for sorbent trap systems. EPA believes that this missing data approach can work because for the purposes of Part 75 reporting, the average Hg concentration measured by a sorbent trap system is "back-filled" into each hour of the data collection period to simulate hour-by-hour concentration measurements (*see* § 75.57(j)(1)(iii)). Thus, the hourly Hg concentration data stream from a sorbent trap system will look essentially the same as the data stream from a CEMS, except that the Hg concentration will "flat-line" (*i.e.*, will not change) during each data collection period. Therefore, the required missing data lookbacks through 720 hours of quality-assured data could be done on the

sorbent trap data stream, although in some cases, because of the flat-line effect, when the 720 hours of data are arranged in rank order, the 90th percentile, 95th percentile, and maximum values in the lookback might be identical.

Finally, a new paragraph "(f)" would be added to § 75.39 to address the case in which the owner or operator elects to use a primary Hg CEMS and a redundant backup sorbent trap system (or vice-versa). In that case, separate Hg concentration data streams would be recorded and maintained for the two systems. For reporting purposes, data from the primary monitoring system would be reported whenever that system is able to provide quality-assured data (*see* § 75.10(e)), and quality-assured data from the redundant backup system (if available) could be reported during primary monitoring system outages. However, when both the primary and redundant backup monitoring systems are down and quality-assured data from a reference method or approved alternative monitoring system are also unavailable, proposed § 75.39(f) would require the appropriate substitute data values to be derived from a lookback through the previous 720 hours of quality-assured data reported in the electronic quarterly report, irrespective of the source of those data, *i.e.*, whether they were from the primary system, the redundant backup system, a reference method, or an approved alternative monitoring system.

4. Correction of Cross-References

For sources in the NO_X Budget Program that report emissions data only during the ozone season (*i.e.*, May through September), the quality assurance requirements for the continuous emission monitoring systems are found in § 75.74(c). In §§ 75.74(c)(3)(xi) and (c)(3)(xii), data validation rules are provided for situations in which required quality-assurance tests of the CEMS are due by the end of the second or third calendar quarter, but are not completed on time. In some cases, these rule provisions require the use of missing data substitution, and refer to the "appropriate missing data routine in § 75.31, § 75.33 or § 75.37". These references to specific missing data sections are inadequate, because they only cover initial missing data (for all parameters) and the standard missing data procedures for NO_X, flow rate, and moisture. Sections 75.34 through 75.36 are not referenced, which address missing data substitution for units with add-on emission controls and for diluent gas (O_2 or CO_2) data used for heat input rate determination. Many NO_X Budget Program units are equipped with add-on NO_X emission controls, and a great number use data from a CO_2 or O_2 monitor to determine the hourly heat input rate. In view of this, today's rule would revise §§ 75.74(c)(3)(xi) and (c)(3)(xii) by replacing each of the cross-references to specific missing data sections with a more general reference to the entire block of CEMS missing data sections, *i.e.*, §§ 75.31 through 75.37.

E. Recordkeeping and Reporting

1. Revisions to the General Monitoring Plan Recordkeeping Requirements

EPA proposes to revise the monitoring plan recordkeeping requirements in § 75.53, to accommodate its new, re-engineered XML reporting format, which will replace the current electronic data reporting (EDR) format in 2009. The Subpart H monitoring plan record keeping provisions in § 75.73(c)(3) (for sources reporting NO_X mass emissions) and the Subpart I monitoring plan record keeping provisions in § 75.84 (for sources reporting Hg mass emissions) would be similarly revised to reflect the transition to XML format.

EPA proposes to add two new paragraphs, (g) and (h), to § 75.53, which describe the required monitoring plan data elements in EPA's re-engineered XML data structure. Proposed § 75.53(a)(1) would require all affected units to follow the provisions of paragraphs (g) and (h) instead of the existing recordkeeping requirements of paragraphs (e) and (f), on and after January 1, 2009. However, early implementation of the XML format would be allowed or, in some cases, required. In 2008, existing sources would be allowed to choose between the EDR format and XML, and new sources reporting for the first time in 2008 would be required to use XML.

Table 1 summarizes the data elements or requirements in § 75.53 that would be removed, replaced or added as a result of transitioning from the current EDR to XML EDR format.

TABLE 1.—MONITORING PLAN CHANGES ASSOCIATED WITH XML FORMAT

Data element(s) or requirement(s)	Proposed action(s)	Comments
• Facility short name • Unit program classification • Unit boiler type • Date of commence operation (Subpart H units) • Date of commence commercial operation (Acid Rain units) • Unit retirement date • Program code • Reporting frequency • Program participation date • State regulation code • State or local agency code • EIA cross-reference information.	Remove	These data elements would be collected and maintained through the Certificate of Representation form, the CAMD Business System, or internally by EPA.
• Recording and reporting of information associated with monitoring system certification, recertification, and other events.	Relocate	Relocate the requirement to record and report this information to § 75.59, the quality-assurance recordkeeping section.
• Fuel classification for boiler • Primary/secondary control indicator • Type of fuel associated with each monitoring methodology • Primary/secondary methodology indicator • Appendix E correlation curve segment data.	Remove	These data elements are deemed unnecessary for the new XML reporting format.

TABLE 1.—MONITORING PLAN CHANGES ASSOCIATED WITH XML FORMAT—Continued

Data element(s) or requirement(s)	Proposed action(s)	Comments
• Component status • Formula status • Submission status of fuel flowmeter data.	Replace	In § 75.53(g), use activation date/hour and deactivation date/hour instead of status codes to better track updates to monitoring components, formulas, and fuel flowmeter information.
• Indicator of exemption from multi-load flow RATAs • Shape of stack or duct cross-section • Stack/duct material of construction • Flag to indicate that a monitored location is a duct • Indicator of non-load based units.	Add	These new data elements are needed to properly assess specific Part 75 quality assurance/quality control (QA/QC) requirements and exemptions.
• Analyzer range code • Moisture measurement basis.	Add	Provide the measurement range (high, low, dual) and moisture basis (wet or dry) for each CEMS component type (SO_2, NO_X, CO_2, etc.)
• Provide the monitoring methodologies for each individual unit. • Represent bypass stack monitoring as a separate methodology.	Replace	For each parameter, associate the monitoring methodology with the monitored location (unit, stack or duct). Integrate bypass stack monitoring with other methodologies. Only one monitoring methodology per paramter would be allowed.
• For dual-range applications, indicate the trigger point at which the component switches from the normal measurement scale to the secondary scale.	Add	Many times data begin to be recorded on the high scale at a certain "trigger point", before the full-scale of the low range is reached. EPA needs this information to determine when certain QA tests of the high-scale are required.
• Require operating range and normal load information to be reported for units with CEMS and units using optional fuel flow-to-load ratio test.	Revise	In § 75.53(g), require operating range and maximum load information for all affected units. Require normal load determination for all except peaking units. Separate the date of historical load analysis from activation date of the operating range and load information.
• Duct width at test section • Duct depth at test section • WAF • Method of determining WAF • WAF effective date and hour • WAF no longer effective date and hour • WAF determination date • Number of WAF test runs • Number of Method 1 traverse points in WAF test • Number of test ports in WAF test • Number of Method 1 traverse points in reference flow RATA.	Add	Add data elements to § 75.53(e) and (g), describing monitoring plan requirements for units with rectangular ducts that apply a wall effects adjustment factor (WAF) to their flow rate data. (*See* Section II.E.2 for further discussion.)

2. Discussion of Wall Effects Adjustment Requirements for Rectangular Ducts

In 1999, EPA published a new reference method, Method 2H, in Appendix A of 40 CFR Part 60. Method 2H allows the owner or operator of a unit with an installed flow monitor to correct the measured gas flow rates for velocity decay near the stack wall (*i.e.*, "wall effects"). Applying Method 2H greatly reduces the possibility of over-reporting SO_2 and NO_X mass emissions, which are directly proportional to the stack flow rate. However, Method 2H applies only to circular stacks. Consequently, Acid Rain and NO_X Budget Program units with flow monitors installed on rectangular stacks or ducts (estimated at about 10 percent of the affected units with flow monitors) were unable to benefit from the use of a wall effects adjustment factor (WAF).

To remedy this situation, a wall effects correction method for rectangular stacks and ducts was developed. The method, known as CTM–041, has been adopted as a conditional test method by EPA. A conditional test method differs from a reference method in that it is not in the Code of Federal Regulations, but it is recognized as having technical merit. Sources interested in using a conditional method in a particular program must obtain permission from the regulatory agency administering the program.

Since 2004, when CTM–041 was adopted as a conditional EPA test method, many Acid Rain and NO_X Budget Program sources have requested (and received) permission from EPA to use it for Part 75 monitoring. As a condition of these approvals, the sources were asked to report the essential wall effects information in their quarterly electronic data reports (EDRs). However, EPA had not developed the necessary electronic record types (RTs) to accommodate the rectangular duct WAF information. Therefore, the Agency issued guidance, instructing the sources to use existing EDR record type 910 to report the WAF data. But record 910, unlike the other EDR record types, has no fixed data elements or fields. This created problems when the WAF information began to be reported. Even though detailed examples were provided in the EPA guidance, a significant portion of the WAF data were being entered into the wrong columns of the 910 records, making it difficult to perform electronic audits of the information.

In view of this, EPA created two new EDR record types, RT 532 and RT 617, to handle the rectangular duct WAF data. Record type 532, which is a monitoring plan record, summarizes the results of each WAF determination. Record type 617 is a quality-assurance record and is submitted along with the results of each flow RATA performed at a rectangular stack or duct, when EPA Method 2 is used and a wall effects correction is applied.

The Agency provided a mechanism (the "Monitoring Data Checking" (MDC) Software) by which a source could

create the new EDR records and add them to the quarterly report, without having to upgrade the data acquisition and handling system (DAHS). To date, use of the new record types has been voluntary, and the affected sources have been cooperative. Nevertheless, today's rule would make mandatory the recording and reporting of the key rectangular duct WAF data elements using these record types. The proposed requirements to record and report the results of the WAF determinations in the monitoring plan are found in §§ 75.53(e) and (g) and in § 75.64. For a discussion of the proposed requirement to record and report the RATA support data, see Section II.E.5.k, below.

3. Revisions to General Recordkeeping Provisions for Specific Situations

Today's proposed rule would make a series of modifications to § 75.58 to support the new XML data structure. These are summarized in Table 2.

TABLE 2.—PROPOSED CHANGES TO THE GENERAL RECORDKEEPING REQUIREMENTS IN § 75.58

Data element(s) or requirement(s)	Proposed action(s)	Comments
• For Appendix D units, report ID numbers of formulas used to calculate SO_2 mass emissions and heat input rate.	Add to § 75.58(c)	This would be required on and after January 1, 2009.
• For Appendix E units, report the heat input rate formula ID for each unit operating hour.	Add to § 75.58(d)	This would be required on and after January 1, 2009.
• For LME units that combust more than one type of fuel, report the fuel type that produces the highest NO_X emission rate.	Revise § 75.58(f)	Report the fuel type that produces the highest emission rate for each parameter individually (*i.e.*, for SO_2, NO_X, and CO_2, as applicable).
• For LME units under § 75.19(c)(1)(iv)(C)(9), indicate whether unit is operating at base or peak load, each hour.	Add to § 75.58(f)	This flag is needed to ensure that the proper NO_X emission factor is being applied.
• For LME units, flag each hour in which multiple fuels are combusted.	Add to § 75.58(f)	This flag is needed to ensure that the proper emission factors are used for multiple-fuel hours.
• For LME units using long-term fuel flow, report the component and system ID codes.	Revise § 75.58(f)	Require only the system ID. Long-term fuel flow systems have only one component.

4. Proposed Revisions to the QA/QC Recordkeeping Provisions

EPA is proposing to make a series of revisions and additions to the quality assurance and quality control recordkeeping provisions in § 75.59, in support of the XML data format. These are summarized in Table 3.

TABLE 3.—PROPOSED CHANGES TO THE QA/QC RECORDKEEPING PROVISIONS OF § 75.59

Data element(s) or requirement(s)	Proposed action(s)	Comments
• Describe each recertification event, and the date and type of each recertification test.	Revise § 75.59(a)(8)	Expand to include events that require certification and diagnostic testing. Add requirement to report conditional data validation begin date (if applicable). Corresponds to current EDR record type 556.
• Record component and system ID codes for daily calibrations, 7-day calibration error tests, cycle time tests, linearity checks, flow monitor leak checks and interference tests, and fuel flowmeter accuracy tests.	Revise §§ 75.59(a) and (b)	Require only the component ID for these tests. This requirement would be effective on and after January 1, 2009. The cycle time test for NO_X-diluent systems would be simplified.
• Record the test number and reason for test, for daily calibrations and 7-day calibration error tests.	Revise § 75.59(a)(1)(viii)	Clarify that test number and reason for test code apply only to 7-day calibration error tests, not to daily calibrations.
• Report the span value with the results of each linearity check.	Remove from § 75.59(a)(3)(ii)	The span value in the monitoring plan records will be used to evaluate the linearity checks.
• Provide an on-line or off-line indicator flag for all calibration error tests.	Add to § 75.59(a)(1)	This flag is needed to properly assess the hour-by-hour quality-assurance status of CEMS following calibration error tests.
• For flow-to-load tests of multiple stack configurations, indicate whether separate reference ratios are calculated for each stack.	Add, as § 75.59(a)(4)(vii)(M)	This addition is needed for consistency with the flow-to-load test reporting instructions (current EDR record type 605).
• Report sufficient information to validate all grace period claims.	Remove and reserve § 75.59(a)(12)(iii).	EPA's checking software no longer needs this information to evaluate grace periods.
• Record the component and system ID codes for each fuel flow-to-load ratio test.	Revise § 75.59(b)(4)(i)(A)	On and after January 1, 2009, record only the system ID for these tests.
• Report Appendix E correlation curve test data on a monitoring system basis.	Revise § 75.59(b)(5)	On and after January 1, 2009, report this data on a component basis.
• Report the type(s) of fuel(s) combusted during each run of an Appendix E correlation curve test.	Remove § 75.59(b)(5)(i)(H)	This information is not needed in the new XML format and would not be reported after December 31, 2008.
• Report the monitoring system ID code with reference fuel flow-to-load ratio test data.	Add, as § 75.59(b)(4)(ii)(N)	This requirement is consistent with the reporting instructions for the reference fuel flow-to-load ratio (current EDR record type 629).

TABLE 3.—PROPOSED CHANGES TO THE QA/QC RECORDKEEPING PROVISIONS OF § 75.59—Continued

Data element(s) or requirement(s)	Proposed action(s)	Comments
• For LME units, indicate which test runs are used to calculate fuel-and-unit-specific NO_X emission rates.	Add, as § 75.59(d)(1)(xiii)	This requirement is consistent with the reporting instructions for NO_X emission testing of LME units (current EDR version 2.2, record type 650).
• For LME units, multiply the tested NO_X emission rate by 1.15, if applicable.	Revise § 75.59(d)(2)(iii) and add new §§ 75.59(d)(2)(vi) and (vii).	This requirement applies only to turbines that operate only at base or peak load. Consistent with the reporting instructions (current EDR version 2.2, record type 650), reporting of an hourly base or peak load indicator and the default NO_X emission rate for peak load operation would be required.
• Record the date and hour of completion of all required DAHS verifications, whether for initial certification, recertification, or other events.	Add § 75.59(f)	This requirement would be effective on and after January 1, 2009. EPA needs this information to properly establish provisional certification or recertification dates. Proposed changes to § 75.63(a)(2)(iii) would allow this information to be reported electronically as part of the certification or recertification application.
• Record the appropriate reference method data elements for Hg emission tests of low-emitting units.	Add § 75.59(e)	For periodic testing of low mass emission units, recording of the reference method data elements in either § 75.59(a)(7)(vii), (viii), or (x) would be required, depending on which reference method is used for the testing.
• Monitoring system ID • Test number • Operating level • RATA end date and time • Number of Method 1 traverse points • Wall effects adjustment factor	Add, as § 75.59(a)(7)(ix)	Recording of certain data elements and test results would be required for units with rectangular ducts/stacks that apply a wall effects adjustment factor (WAF) to correct their flow rate data. These data elements would be required for each flow RATA.
• Percent CO_2 and O_2 in the stack gas, dry basis • Moisture content of the stack gas (percent H_2O) • Average stack gas temperature (°F) • Dry gas volume metered (dscm) • Percent isokinetic • Particulate Hg collected in the front half of the sampling train, corrected for the front-half blank value (μg) • Total vapor phase Hg collected in the back half of the sampling train, corrected for the back-half blank value (μg)	Add, as § 75.59(a)(7)(x)	Recording of certain data elements would be required when using Method 29 for the RATA of a Hg monitoring system. These data elements would be required for each RATA run.

5. Other Reporting Issues

a. Long-Term Cold Storage and Deferred Units

The proposed changes to Part 75 would clarify the issue of "long-term cold storage (LTCS)". First, as previously noted, a definition of "long-term cold storage" would be added to § 72.2. LTCS would mean that the unit has been completely shut down and placed in storage and that the shutdown is intended to last for an extended period of time (at least two calendar years). Second, a new paragraph, (a)(7), would be added to § 75.61. Proposed § 75.61(a)(7) would require the owner or operator to provide notifications when a unit is placed in LTCS and when the unit re-commences operation. Third, § 75.20(b) would be modified to require recertification of all monitoring systems when a unit re-commences operations after a period of long-term cold storage. If a source claiming LTCS status re-commenced operation sooner than two years after being placed in LTCS, the notification and recertification requirements would apply. Fourth, the proposed rule would exempt a unit in LTCS from quarterly emissions reporting under § 75.64 until the unit recommences operation. Parallel rule provisions and appropriate cross-references regarding quarterly reporting requirements for Subpart H and Subpart I units would be added to §§ 75.73(f)(1) and 75.84(f)(1), respectively. Finally, EPA notes that these proposed LTCS provisions are not intended to apply to periods of non-operation of units that are "on-call" and available for dispatch.

EPA also proposes to revise the provisions of §§ 75.4(d) and 75.61(a)(3) pertaining to "deferred" units, *i.e.*, units for which a planned or unplanned outage prevents the required continuous monitoring systems from being certified by the compliance date. The scope of § 75.4(d) would be broadened beyond the Acid Rain Program to include units in a State or Federal pollutant mass emissions reduction program that adopts the monitoring and reporting provisions of Part 75. Examples of such programs include the Clean Air Interstate Regulation (CAIR), which is scheduled to begin in 2008 and the Clean Air Mercury Regulation (CAMR), which goes into effect in 2009. The revisions to §§ 75.4(d) and 75.61(a)(3) are deemed necessary because the CAIR and CAMR rules do not address deferred units.

Revised § 75.4(d) would require the owner or operator of a deferred unit to provide notice of unit shutdown and recommencement of commercial operation, either according to § 75.61(a)(3) (for planned shutdowns such as scheduled maintenance outages and for unplanned, forced unit outages) or § 75.61(a)(7) (for units in long-term cold storage). For all of these circumstances involving deferred units, the Part 75 continuous monitoring systems would have to be certified within 90 unit operating days or 180

calendar days (whichever comes first) of the date that the unit recommences commercial operation. In the time interval between the unit re-start and the completion of the required certification tests, the owner or operator would be required to report emissions data, using either: (1) Maximum potential values; (2) the conditional data validation procedures of § 75.20(b)(3); (3) EPA reference methods; or (4) another procedure approved by petition to the Administrator under § 75.66.

Today's proposed rule would revise the notification requirements of § 75.61(a)(3) to be consistent with the changes to § 75.4(d). For planned unit outages, the owner or operator would be required to provide notice of shutdown at least 21 days prior to the compliance date. For unplanned outages, notice would be provided within 7 days after the shutdown. For both planned and unplanned outages, notice of the date on which the unit is expected to resume operation would be provided at least 21 days prior to that date. Proposed § 75.61(a)(3) also includes provisions to address situations in which there are changes to any of the planned or projected dates.

b. Notice of Initial Certification Deadline

EPA proposes to revise § 75.61(8) to require new and newly-affected sources to notify EPA when the monitoring system certification deadline is reached. Depending on the program(s) to which the unit is subject and whether the unit is new or newly-affected, this date will be the earlier of 90 unit operating days or 180 calendar days after the unit: (a) Commences commercial operation; (b) commences operation; or (c) becomes an affected unit. The Agency must know this date to correctly assess when to begin counting emissions against allowances pursuant to § 72.9. Knowing this date also confirms that the monitoring systems either have or have not been certified by the legal deadline.

c. Monitoring Plan Submittal Deadline

Today's proposed rule would change the submittal deadline for the initial monitoring plan for new and newly-affected units from 45 days to 21 days prior to the initial certification testing. This proposed revision would synchronize the initial monitoring plan submittal with the initial test notice (*see* proposed changes to §§ 75.62(a)(1) and (2), §§ 75.73(e)(1) and (2) for Subpart H units, and §§ 75.84(e)(1) and (e)(2) for Subpart I units).

EPA also proposes to remove the requirement in § 75.62(a)(1) that the monitoring plan must be submitted "in each electronic quarterly report". Rather, inclusion of the monitoring plan in the report would be optional, and monitoring plan updates would be made either prior to or concurrent with (but not later than) the date of submission of the quarterly report. These proposed revisions would allow sources to maintain their monitoring plan information separate from the quarterly report. However, this flexibility would only be available to sources reporting in the new XML–EDR format under the re-engineered data submission process. Until re-engineering of the data systems is complete, EPA will continue to collect and process all electronic monitoring plan data submitted in quarterly reports in the current EDR format.

d. EPA Form 7610–14

For each certification and recertification application, §§ 75.63(a)(1) and (a)(2) require hardcopy EPA form 7610–14 to be submitted to the Administrator along with the certification or recertification test results in EDR format. However, significant upgrades to EPA's data systems have been made in recent years, and Form 7610–14 is no longer needed to process the applications. Therefore, §§ 75.63(a)(1)(i)(A) and (a)(2)(i) would be revised to remove the requirement to submit Form 7610–14 to the Administrator.

e. LME Applications

EPA is proposing to remove the requirement from § 75.63(a)(1)(ii)(A) for a hardcopy LME certification application to be submitted to the Administrator. Only the electronic portion of the application, including the monitoring plan and LME qualification records, would be sent to EPA. The hardcopy portion of the LME application would be sent to the State and to the EPA Regional Office.

f. Reporting Test Data for Diagnostic Events

EPA proposes to revise § 75.63(a)(2)(iii) to make the reporting of the results of diagnostic tests more flexible. Rather than requiring these test results to be reported in the electronic quarterly report for the quarter in which the tests are performed, they could either be submitted prior to or concurrent with that quarterly report. However, this flexibility in the reporting of diagnostic test results would only be available to sources reporting in the new XML–EDR format under the re-engineered data submission process. Until re-engineering of the data systems is complete, EPA will continue to collect and process all diagnostic test results submitted in quarterly reports in the current EDR format.

g. Modifications to § 75.64

As part of its data systems re-engineering effort, EPA proposes to revise § 75.64(a) to incorporate language describing the transition from the current reporting requirements of paragraphs (a)(1), (a)(2) and (a)(8) through (a)(15) to the new requirements of paragraphs (a)(3) through (a)(15). Note that only the requirements of paragraphs (a)(1) and (a)(2) of the current rule would be replaced, by the requirements of paragraphs (a)(3) through (a)(7). Proposed paragraphs (a)(3) through (a)(7) better describe the separation of the monitoring plan and quality assurance test information from the quarterly emissions report. Current paragraphs (a)(3) through (a)(7) and (a)(9) through (a)(11) would remain unchanged, but would be renumbered as paragraphs (a)(8) through (a)(15). Current paragraph (a)(8) would be removed.

h. Steam Load Reporting

Historically, Part 75 has required units that produce electrical or thermal output to report unit load either in megawatts or in thousands of pounds per hour of steam. Today's proposed rule would add a third option, *i.e.*, to report load in units of mmBtu/hr of steam thermal output. This option is needed to accommodate emissions trading programs in which allowance allocations are made on an electrical or thermal output basis, rather than a heat input basis. Certain units in these programs (*e.g.*, industrial boilers) do not produce electrical output and would have to report thermal output instead. In the current rule, steam load is expressed only in thousands of pounds per hour, which does not provide the necessary thermal output information. EPA therefore proposes to add text to the following sections of Part 75, describing the new thermal output reporting option: §§ 75.16(e)(3), 75.57(b)(3), 75.59(b)(4)(ii); Appendix A, Sections 7.7(a) and 7.7(c); Appendix B, Sections 2.2.5(a) and 2.2.5(a)(2); Appendix D, Sections 2.1.7.1(a), 2.1.7.1(c), 2.1.7.2(a), and 2.1.7.2(c); and Appendix E, Section 2.4.1.

i. Test Notification Requirements—Hg Low Mass Emission Units

Section 75.61(a)(5) of the current rule requires the owner or operator or the designated representative to provide 21-day advance notice for various periodic quality-assurance tests. In particular, this notice must be provided to the

Administrator, to the appropriate EPA Regional Office and to the State or local agency (unless a particular agency issues a waiver from the requirement) for the semiannual or annual relative accuracy tests of CEMS, and for re-tests of both Appendix E peaking units and low mass emissions (LME) units.

Under Subpart I of Part 75, certain low-emitting units covered by CAMR may qualify under §§ 75.81(b) through (d) to perform periodic (semiannual or annual) Hg emission testing in lieu of operating and maintaining continuous Hg monitoring systems. Today's proposed rule would expand § 75.61(a)(5) and add corresponding introductory text to § 75.61(a)(1) to require the owner or operator or the designated representative to provide 21 day notice of these periodic Hg emission tests to EPA and to the State.

j. Hardcopy Reports for Retests of Hg Low Mass Emission Units

Sections 75.60(b)(6) and (b)(7) of the current rule require the designated representative (DR) to submit the results of certain periodic quality-assurance tests to the appropriate EPA Regional Office or to the State or local agency, when the test results are requested in writing (or by electronic mail). In particular, the results of semiannual or annual RATAs of CEMS and the routine re-tests of Appendix E units may be requested. If requested, the test results must be submitted within 45 days after the test is completed or within 15 days of the request, whichever is later. Today's rule would add a new paragraph (b)(8) to § 75.60, requiring the DR to provide, upon request from EPA or the State, the results of the semiannual or annual mercury emission tests required under § 75.81(d)(4) for low-emitting units covered by CAMR. The time frame for submitting these Hg emission test results would be the same as for the RATAs and Appendix E re-tests.

k. Wall Effects Adjustment Factors

As previously discussed in Section II.E.2 of this preamble, today's rule would require sources with flow monitors installed on rectangular stacks or ducts to report the results of wall effects adjustment factor (WAF) determinations in the monitoring plan, whenever Conditional Method CTM–041 is used to adjust the measured stack gas flow rates for the effects of velocity decay near the stack wall.

For sources with flow monitors installed on circular stacks, reporting of wall effects information is currently required when Method 2H is used in conjunction with Method 2, 2F or 2G (*see* §§ 75.64(a)(2)(xiii), 75.73(f)(1)(ii)(K) and 75.84(f)(1)(ii)(I)). The wall effects data elements that must be reported are found in §§ 75.59(a)(7)(ii) and (a)(7)(iii). These data are not reported in the monitoring plan, but are submitted along with flow RATA results, as supplementary information.

For rectangular stacks and ducts, some of the same supporting data elements in §§ 75.59(a)(7)(ii) and (a)(7)(iii) are needed for flow RATAs performed using Method 2F or 2G, when wall effects corrections are applied. Additional supporting data elements, not in the current rule, are also needed for Method 2 flow RATAs when wall effects adjustments are made. In view of this, today's rule would revise the text of §§ 75.64(a)(2)(xiii), 75.73(f)(1)(ii)(K) and 75.84(f)(1)(ii)(I) and would add RATA support data elements to a new paragraph, (vii), in § 75.59(a)(7). EPA believes that these proposed changes will clarify which wall effects data elements must be reported for circular stacks, which ones are reported for rectangular stacks and ducts, and which data elements must be reported for both types of stacks.

F. Subpart H (NO_X Mass Emissions)

1. Subpart H Diluent Monitoring Systems

For coal-fired Subpart H units that calculate NO_X mass emissions as the product of NO_X concentration and flow rate and are required to monitor and report the unit heat input, § 75.71(a)(2) requires the installation of an "O_2 or CO_2 diluent gas monitor". Consistent with the definition of a CEMS in § 72.2, this diluent monitor, which is only used for the heat input determination, should be described as an "O_2 or CO_2 monitoring system". Today's proposed rule would revise the text of § 75.71(a)(2) accordingly.

2. Identifying a NO_X Mass Methodology

EPA is proposing to revise § 75.72 to clarify that only one NO_X mass emissions methodology may be identified in the monitoring plan at any given time. Designation of primary and secondary NO_X mass calculation methodologies would no longer be allowed. EPA believes that one methodology for NO_X mass emissions is sufficient. If a source is subject to both Subpart H and to the Acid Rain Program (ARP) and is concerned about losing NO_X data when the diluent component of the NO_X emission rate system is out-of-control, that source should choose the NO_X concentration times flow rate calculation method as the NO_X mass calculation methodology. This would require a NO_X concentration system to be identified in the monitoring plan, in addition to the NO_X emission rate system. The NO_X concentration system would be used only to determine NO_X mass emissions, and the NO_X emission rate system would be used only to meet the ARP requirement to report NO_X in lb/mmBtu.

Although it is possible with the current EDR format to identify multiple methodologies for a parameter, this was intended for ARP applications, not for NO_X mass emission measurement. Multiple methodology records for SO_2 are sometimes necessary when a bypass stack is used. However, as discussed in Section II.E.1 of this preamble, the reporting of monitoring methodologies is being restructured as part of EPA's re-engineering effort. Bypass stack methods are being integrated with other monitoring methods and will no longer be considered stand-alone methodologies.

3. Reporting of Subpart H Facility Information

Consistent with the proposed revisions to § 75.64, EPA proposes to revise § 75.73(f)(1), to phase out the requirement of § 75.73(f)(1)(i)(B) to include facility location information in each quarterly report.

4. Linearity Check Requirements for Ozone Season-Only Reporters

For Subpart H sources that report emissions data on an ozone season-only (OSO) basis, today's proposed rule would revise the linearity check provisions in §§ 75.74(c)(2), (c)(2)(i), (c)(2)(ii), (c)(3)(ii), (c)(3)(vi), and (c)(3)(viii). Currently, OSO reporters are required to do a pre-season linearity check, an in-season second quarter linearity check (in May or June, if the unit operates for ≥168 hours in May and June), and a third quarter linearity check, if the unit operates for ≥168 hours in that quarter. Many sources have misunderstood these rule provisions, particularly the requirement to perform an in-season linearity check in the second quarter.

Since the beginning of the NO_X Budget Program, there have been a number of instances where sources have performed pre-season linearity checks in April, but have not done the required in-season linearity checks in May or June. In some cases, this has resulted in CEMS out-of-control periods and has required the use of missing data substitution. These sources apparently believed that the April tests were sufficient to satisfy both the pre-season and second quarter linearity check requirements because for year-round

reporters, linearity checks are required only once per quarter.

The current rule also requires OSO reporters to operate and maintain each CEMS and to perform daily calibration error tests, in the time period extending from the hour of completion of the pre-season linearity check through April 30. EPA has found that this rule provision is not well-understood by the affected sources. It is also difficult for the Agency to assess compliance with the provision, since sources are not required to report the results of any off-season calibration error tests done prior to April. Further, when pre-season linearity checks are done several months before the ozone season, the quality of the data at the start of the ozone season is somewhat questionable.

In view of these considerations, today's proposed rule would revise § 75.74(c)(2) to restrict the time period in which pre-season linearity checks may be conducted. EPA proposes to require the pre-season linearity checks to be done in the month of April. All references to performing the pre-season linearity checks at other times would be deleted, along with the requirement to keep the off-season daily calibration error tests in a format suitable for inspection.

Today's proposed rule would also revise § 75.74(c)(2)(i)(D) by removing the conditional grace period provision and adding a cross-reference to proposed § 75.74(c)(3)(ii)(E), which addresses data validation. If the April linearity check is not completed prior to the start of the ozone season, data from the monitor would be considered invalid as of May 1, unless the conditional data validation procedures of § 75.20(b)(3) are applied. Proposed § 75.74(c)(3)(ii)(E) would allow a probationary calibration error test to be done, to begin a period of conditional data validation. Then, the linearity check would be done "hands-off" within a 168 unit operating hour period following the calibration error test. If the linearity check is passed within the allotted time, the conditionally valid data would be considered quality-assured, back to the hour of the probationary calibration error test. If the linearity check is failed, all data from the monitor would be invalidated back to the beginning of the ozone season and would remain invalid until a linearity check is passed. If the linearity check is done after the 168-hour period expires, data validation would be done according to § 75.20(b)(3)(viii), subject to the restrictions of § 75.74(c)(3)(xii).

Today's proposed rule would add a new paragraph (F) to § 75.74(c)(3)(ii), stating that a pre-season linearity check done in April fulfills the second quarter linearity check requirement. Related Section 75.74(c)(3)(viii) would be removed and reserved. Further, proposed § 75.74(c)(3)(ii)(B) would require the third quarter linearity check to be conducted either by July 30 or within a 168 operating hour period of conditional data validation thereafter. Finally, proposed § 75.74(c)(3)(ii)(G) would address the case where a unit operates infrequently and the 168 operating hour conditional data validation period associated with the April linearity check extends through the second quarter, into the third quarter. In that case, if the linearity check is performed and passed in the third quarter, before the 168 operating hour window expires, then that one linearity check would satisfy all three of the ozone season linearity check requirements, *i.e.*, for the pre-season, for the second quarter, and for the third quarter.

EPA believes that the proposed linearity check schedule for OSO reporters would ensure that the gas monitors' response is linear throughout the ozone season and would simplify the regulation by reducing the number of required linearity checks from three to two (and in some cases, one) per season.

5. RATA Requirements for Ozone Season Only Reporters

For OSO reporters, Part 75 requires, for quality-assurance purposes, that at the start of each ozone season each required CEMS must be within the "window" of data validation of a current, non-expired RATA. Section 75.74(c)(2)(ii) states that this requirement can be met either by performing a RATA in the pre-season (between October 1 and April 30) or, in some instances, by relying on the results of a RATA done in the previous ozone season. For example, if a RATA was performed inside the ozone season, in the 3rd quarter of last year, the window of data validation for the test would extend through the 3rd quarter of this year, provided that the RATA results show that the CEMS qualifies for an "annual" RATA frequency. However, if a "semiannual" test frequency is obtained, the data validation window would expire at the end of the first quarter of this year, and the RATA could not be used to validate data in the current ozone season. Therefore, a pre-season RATA would be required.

The rule further requires each CEMS to be operated, calibrated and maintained in the time period extending from the completion of the RATA, through April 30. This means that if the RATA being used for data validation in the current ozone season was performed during the last ozone season, the CEMS would have to be operated, calibrated and maintained for the entire off-season from October 1 through April 30. Compliance with this type of requirement is difficult for EPA to assess, as previously explained in paragraph 4 of this section. Also, many sources choosing the OSO reporting option find this operation and maintenance (O&M) requirement to be counter-intuitive, because they expect to be required to meet Part 75 monitoring obligations only during the ozone season. If it were discovered during an audit that this O&M requirement had not been met, a facility could incur substantial data loss. Further, if a CEMS is not maintained in a manner consistent with normal operating practices for an extended period of time following a RATA that was done long before the ozone season, the results of that RATA may not be a true indicator of the CEMS data quality at the start of the ozone season.

In view of these considerations, EPA is proposing to restrict the window of time in which pre-season RATAs may be performed. Proposed § 75.74(c)(2)(ii) would require the RATAs to be done either in the first quarter of the year or in the month of April. This restriction would prohibit RATAs done in the previous year from being used to validate data in the current ozone season.

Section 75.74(c)(2)(ii)(F) would be revised to address data validation. The proposed data validation rules for RATAs would be similar to those proposed for linearity checks, *i.e.*, a period of conditional data validation (720 operating hours) would be allowed when the pre-season RATA is not completed by the April 30 deadline. Consistent with these revisions, today's proposed rule would delete the data validation and conditional grace period provisions in §§ 75.74(c)(2)(ii)(G) and (c)(2)(ii)(H) and would remove and reserve §§ 75.74(c)(3)(vi), (vii), and (viii).

Note that EPA is not modifying the provisions of § 75.74(c)(3)(xii), which allows the results of required quality assurance tests that are completed early in the fourth quarter, within a window of conditional data validation, to be submitted with the electronic data report for the third quarter. This provision provides sources with a "last chance" opportunity to complete the required quality assurance tests before the final ozone season reports for the NO_X Budget program are due.

6. Determining Peaking Status for Ozone Season Only Reporters

EPA proposes to revise § 75.74(c)(11) to clarify that when peaking unit status for ozone season-only reporters is determined, 3,672 hours (*i.e.*, the number of hours in the ozone season) should be used instead of 8,760 hours in the capacity factor equation. This clarification is supported by Question 27.1 in the "Part 75 Emissions Monitoring Policy Manual".

7. Calculation of Ozone Season NO_X Mass Emissions—LME Units

Today's rule would correct an organizational error in Subpart H of Part 75. Section 75.72(f), which describes ozone season NO_X mass calculations for units using the low mass emission (LME) methodology under § 75.19, would be removed, and its basic content would be relocated to § 75.71(e). The LME provision in § 75.72 appears to have been inadvertently placed in that section. The monitoring provisions of § 75.72 apply to common and multiple stack configurations, whereas § 75.71 addresses unit-level monitoring. LME is a unit-level monitoring methodology.

G. Subpart I (Hg Mass Emissions)

1. Heat Input Provisions for Common and Multiple Stacks

Subpart I of Part 75 provides the basic procedures for monitoring Hg mass emissions and heat input from affected units under CAMR. However, due to an apparent oversight, the heat input monitoring provisions for certain monitoring configurations were inadvertently omitted from the final rule. In particular, the heat input methodology for common stacks shared by affected and non-affected units, and the methodology for multiple stack or duct configurations are missing. Today's rule would add three new paragraphs, (b)(3), (c)(4) and (d)(3) to § 75.82 to correct this deficiency.

For the common stack shared by affected and non-affected units, proposed § 75.82(b)(3) would require the owner or operator to either measure the total heat input rate at the common stack and apportion it to the individual units by load, according to § 75.16(e)(3), or to determine the heat input rate at the individual units by installing a flow monitor and a diluent monitor on the duct leading from each unit to the common stack. For multiple stack configurations, proposed §§ 75.82(c)(4) and (d)(3) would require the owner or operator to determine the hourly unit heat input by measuring the hourly heat input rate (mmBtu/hr) at each stack, multiplying each stack heat input rate by the stack operating time (hr) to convert it to heat input (mmBtu), and then summing the hourly stack heat input values.

2. Low Mass Emission Alternative

Section 75.81(b) of Subpart I provides an alternative ("excepted") monitoring methodology for units with low Hg mass emissions. To qualify to use this methodology, emission testing is required to demonstrate that the unit has the potential to emit no more than 29 lb (464 ounces) of Hg per year. Once a unit qualifies, periodic retesting (semiannual or annual, depending on the emission level) is required to demonstrate that the unit is actually emitting less than 29 lb/yr of Hg.

Section 75.81(e) allows the low mass emission alternative to be used for common stacks, provided that the units sharing the stack are tested individually and each one qualifies as a low-emitter. Though not explicitly stated in the rule, it is implied that the periodic retests for common stack configurations would also have to be done at the unit level. EPA is reconsidering this approach, for two reasons: (1) With respect to the initial certification testing, it appears to be overly restrictive for at least one particular configuration; and (2) the Agency believes that for the retests it may be unnecessarily difficult and costly to implement.

Therefore, with one exception (discussed below), EPA is proposing to revise § 75.81(e) to require Hg testing of the individual units that share the common stack only for the initial demonstration that the units individually qualify as low emitters. Once this has been satisfactorily demonstrated, the required semiannual or annual retests could then be done at the common stack, at a normal load level for the configuration.

The proposed revisions to § 75.81(e) would also allow the initial low mass emitter qualification for a group of identical units sharing a common stack to be based on emission testing of a subset of those units. To exercise this option, the units would first have to qualify as identical under § 75.19(c)(1)(iv)(B). Then, the number of units required to be tested would be determined from Table LM–4 in § 75.19.

The proposed rule would allow one exception to the requirement to test the individual units sharing a common stack, in order to demonstrate that the units qualify for low mass emitter status. In the case where the gas streams from the individual units are combined together and routed through emission controls that reduce the Hg concentration (*e.g.*, a wet scrubber) before entering the common stack, the only way to measure the controlled Hg concentration from the individual units would be to operate them one at a time rather than concurrently. EPA believes that for many such configurations, this manner of unit operation is abnormal and potentially problematic. Therefore, the revisions to § 75.81(e) would allow both the initial and ongoing low mass emission testing to be done at the common stack in cases where the individual unit effluent gas streams are combined together upstream of a control device that removes Hg before entering the common stack. Owners or operators electing to use this option would be required to perform the testing with all of the units that share the stack in operation, and the combined load during the testing would be "normal", as defined in Section 6.5.2.1 of Appendix A.

Today's proposed rule would also revise § 75.81(c)(1), to clarify the time frame in which to perform the initial certification testing for the low mass emission option. The current rule simply states that this testing must be done "prior to the compliance date in § 75.80(b)", but does not specify how far in advance of that date the testing may be done and still be considered acceptable. Further, § 75.81(d)(1) requires the test results to be submitted as a certification application, no later than 45 days after completing the testing. And § 75.81(d)(4) requires periodic Hg retesting to commence within two or four "QA operating quarters" after the quarter of the certification testing.

This approach to implementing the low mass emission alternative should work reasonably well, provided that the certification test date is close in time to the compliance date. However if there is too long a gap between the certification testing and the start of the program, it becomes problematic. For instance, if the testing is done too early, the requirement to submit a certification application within 45 days could result in applications being submitted long before the regulatory agencies are ready to receive and process them. Also, the periodic retesting requirements of § 75.81(d)(4), which become active on the certification test date, could result in several Hg retests being done before the program begins. This is clearly contrary to the purpose of the retests, which, like the periodic relative accuracy tests of CEMS, are intended to commence after the compliance date, when Hg emissions reporting has begun. It also raises questions about which default emission rate to use for the initial reporting. In view of these

considerations, EPA is proposing to revise § 75.81(c)(1), to require that the Hg testing for initial certification be done no more than 1 year before the compliance date. Sections 75.81(d)(2) and 75.81(d)(5) would also be revised, to address the case where a retest may be required before the compliance date (*e.g.*, when § 75.81(d)(4) requires a retest within two QA operating quarters, following a certification test that was done 9 to 12 months before the compliance date). In such cases, the default Hg emission rate used at the beginning of the program would be the value that was obtained in the retest.

Finally, EPA proposes to amend § 75.81(d)(4) to address the emission testing requirements when the fuel supply is changed. Revised § 75.81(d)(4) would require additional Hg retesting within 720 unit operating hours, following a change in the fuel supply. The results of this retest would be applied retrospectively, back to the time of the fuel switch. Section 75.81(c)(1) would also be revised to require that the fuel combusted during the initial certification testing be from the same source of supply as the fuel combusted when the program starts. The Agency believes these rule provisions are necessary to ensure that the default Hg concentration used for Part 75 reporting is representative of the fuel being combusted in the unit. However, note that the proposed revisions only address the emission testing and reporting requirements for one case, *i.e.*, where the source of supply for the primary fuel (assumed to be coal) changes. Cases where the coal supply does not change, but the unit sometimes burns other types of fuel besides coal or co-fires mixtures of coal and other fuels, are not addressed. In view of this, EPA also solicits comments and suggestions on how to apply the Hg low mass emitter option in these situations (*i.e.*, what emission testing and reporting requirements might be appropriate).

3. Harmonization of Subpart I With Other Proposed Rule Revisions

Subpart I of Part 75 also contains a recordkeeping and reporting section (§ 75.84). Section 75.84 contains a few stand-alone provisions, but for the most part, it cross-references the primary monitoring plan, recordkeeping, notification and reporting sections of the rule (*i.e.*, §§ 75.53, 75.57 through 75.59, 75.61, and 75.64) and other sections of Subpart I.

As discussed in detail in Section E of this preamble, today's rule would make substantial revisions to the monitoring plan, recordkeeping and reporting sections of Part 75, in support of EPA's data systems re-engineering effort. To make Subpart I consistent with these proposed revisions and with the other proposed changes in today's rule, a number of minor adjustments would also be made to the text of §§ 75.84(c)(3), (e)(1), (e)(2), and (f)(1).

H. Appendix A

1. CO_2 Span Values

EPA proposes to revise Section 2.1.3 of Appendix A, to allow the use of CO_2 spans less than 6.0 percent CO_2 if a technical justification is provided in the hardcopy monitoring plan. This added flexibility in the CO_2 span value mirrors a similar provision in Section 2.1.3 for O_2 span values.

2. Protocol Gas Audit Program

EPA is responsible for implementing air quality programs that rely on accurate calibration gases. Under these programs, calibration gases are used to calibrate EPA reference methods which, in turn, are used to perform stack tests or to calibrate installed pollutant continuous emissions monitoring systems (CEMs) that are used by regulated sources to report emissions to EPA. If the reference methods are low by 20%, then emissions may be underreported by 20%. Calibration gases are also used to ensure that ambient air quality analyzers provide accurate results. Accurate calibrations gases are critical in helping to ensure that the Clean Air Act-mandated emission reductions are achieved.

Section 2.1.10 of "EPA Traceability Protocol for Assay and Certification of Gaseous Calibration Standards" (Protocol Procedures), September 1997 (EPA–600/R–97/121) states that EPA will periodically assess the accuracy of calibration gases and publish the results. Between 1978 and 1996, EPA conducted several performance audits of calibration gases from various manufacturers. These audits had two goals, to provide a quality check for gas vendors and to connect users with gas vendors. One notable result in the most recent five consecutive years of audits is a steady, significant reduction in failure rate of the calibration gases, from about 27% in 1992 down to 5% in 1996. In 2003, EPA conducted a "surprise" audit of 14 national specialty gas producers and found that the failure rate had risen to 11%.

Today's proposed rule would require that EPA Protocol Gases being used for 40 CFR Part 75 purposes be obtained from those specialty gas producers who participate in the audit program. Under the proposed rule, only audit participants may market these gas standards as "EPA Protocol Gases", although there will be no requirement for participants' audited standards to meet an accuracy acceptance criterion. The costs of the audits will be borne by the gas producers who elect to participate in the audits. Although it may take several years to revise all of the EPA monitoring regulations in 40 CFR Parts 58 and 60, today's proposed rule would ensure that under Part 75, any specialty gas producers who do not participate in the program will not have a price advantage (due to the lack of audit program costs) over those producers who do participate. An EPA-maintained web site will list the participants and the audit results, which will provide calibration gas users with detailed information about the quality of EPA Protocol Gases.

To clarify the calibration gas requirements in section 5.1 of appendix A to this part, a definition for "specialty gas producer" has been added to section 72.2. EPA believes that most of the gas standards and reference materials identified in section 5.1 of appendix A of this part are expensive and not used in practice by Part 75 affected units. Therefore, today's proposed rule also deletes several calibration gas options and definitions, and consolidates the remaining calibration gas descriptions under section 5.1 of appendix A to this part.

EPA is also requesting comment on the appropriate accuracy specification to apply to Hg cylinder gases and other Hg calibration standards (*e.g.*, gases from NIST-traceable generators). Currently, EPA requires that accuracy of EPA Protocol gases be within 2 percent of the certified tag values.

3. Requirements for Air Emission Testing Bodies

Since the inception of the Acid Rain Program, field audits of Part 75-affected facilities have brought to EPA's attention a number of improperly-performed RATAs and other QA/QC tests. When the proper test procedures are not followed, this can adversely affect the quality of the emissions data, and, in some cases, may call into question a unit's compliance with the requirement to hold allowances covering its emissions. In view of this, today's proposed rule would revise Section 6.1 of Appendix A to require all individuals who perform the emission tests and CEMS performance evaluations required by Part 75 to demonstrate conformance with ASTM D7036–04 "Standard Practice for Competence of Air Emission Testing Bodies". ASTM D7036–04 specifies the general requirements for demonstrating

that an air emission testing body (AETB) is competent to perform emission tests of stationary sources. ASTM D7036–04 covers testing and calibration performed using standard methods, non-standard methods and methods developed by the AETB.

Proposed Section 6.1.2 of Appendix A and revisions to Section 2.1 of Appendix E and to Section 1 of Appendix B would make it clear that this requirement applies only to AETBs that perform RATAs, NO_X emission tests of Appendix E and LME units, or Hg emission tests of low-emitting units. It would not be applicable to the daily operation, daily QA/QC (daily calibration error check, daily flow interference check, etc.), weekly QA/QC (*i.e.*, Hg system integrity checks), quarterly QA/QC (linearity checks, etc.), and routine maintenance of the CEMS.

ASTM D7036–04 would be incorporated by reference in § 75.6(a)(45), and a definition of "Air Emission Testing Body" would be added to § 72.2.

4. Linearity Requirements for Dual-Span Applications

Section 6.2 in Appendix A and Section 2.2 in Appendix B require the owner or operator of affected units with installed gas monitors to perform periodic linearity checks of the monitors. The basic linearity check requirements are to perform the test for initial certification and then, for ongoing quality assurance (QA), to repeat the test quarterly. In the original Part 75 regulations (published on January 11, 1993), there were no exceptions to these requirements.

However, in May 1999, EPA revised the linearity check provisions of Part 75 as follows. First, Section 6.2 of Appendix A was revised to exempt SO_2 and NO_X span values of 30 ppm or less from performing linearity checks. Second, revisions to Section 2.2 of Appendix B reduced the ongoing linearity check requirement from once per calendar quarter to once every "QA operating quarter" (*i.e.*, a calendar quarter in which the unit operates for at least 168 hours).

Since the May 1999 revisions became effective, the regulated sources appear to have understood the "QA operating quarter" concept in Section 2.2 of Appendix B, but there has been some confusion about the meaning of the linearity exemption in Appendix A. Some have questioned whether the linearity exemption applies only to ongoing QA or whether it applies also to initial certification. Others have asked whether the exemption applies only to a particular measurement range or to all of the linearity check requirements for a monitoring system. The misunderstanding appears to center around two sentences in Section 6.2. The first sentence states that "Notwithstanding these requirements, if the SO_2 or NO_X span value for a particular range is ≤ 30 ppm, that range is exempted from the linearity test requirements of this part." Since the phrase "of this part" refers to Part 75, this seems to exempt ranges of 30 ppm or less from all Part 75 linearity requirements, including initial certification and ongoing QA. However, the second sentence states that "For units using emission controls and other units using both a high and a low span, perform a linearity check on both the low- and high-scales for initial certification." Thus, for dual span applications, this statement appears to require linearity checks of both measurement scales for initial certification regardless of the span values, which does not harmonize with the 30 ppm exemption.

EPA believes that the key to understanding and reconciling these rule texts is the chronological order of the two sentences. The second sentence is from the original 1993 rule and the first sentence was added in 1999. Therefore, the 30 ppm linearity check exemption in the first sentence takes precedence over the low scale linearity check requirement of the second, and there is no actual contradiction. However, to eliminate any doubt as to the Agency's intended meaning, today's rule would revise Section 6.2 of Appendix A to make it clear that the 30 ppm linearity exemption: (1) Is range-specific; (2) covers both initial certification and ongoing QA; (3) does not remove the requirement to perform linearity checks of the high range (if > 30 ppm) for dual span applications; and (4) does not take away the linearity check requirements for the diluent monitor component of a NO_X-diluent monitoring system.

5. Dual Span Applications—Data Validation

Today's proposed rule would revise Sections 2.1.1.5 (b)(2) and 2.1.2.5(b)(2) of Appendix A to clarify the relationship between the quality-assured (QA) status of the low and high ranges of a gas monitor in a dual-span application. The changes would be consistent with the proposed revisions to Appendix B (*see* Section II.I.3, below).

In the current rule, Sections 2.1.1.5(b)(2) and 2.1.2.5(b)(2) of Appendix A provide instructions for reporting SO_2 and NO_X concentration data when the full-scale range of the monitor is exceeded. For single-range applications, a value of 200 percent of the maximum potential concentration (MPC) must be reported when a full-scale exceedance occurs. For dual range applications, if the low range is exceeded, no special reporting is necessary, provided that the high range is "available and not out-of-control or out-of-service for any reason". However, if the high range is "not able to provide quality-assured data" during the low-range exceedance, then the MPC must be reported.

EPA believes that for dual range applications, the two phrases used to describe the QA status of the high range during low-scale exceedances, *i.e.*, "available and not out-of-control or out-of-service for any reason" and "not able to provide quality assured data", are too general and do not adequately address the possible scenarios associated with dual range monitoring. Today's rule would revise these rule texts by defining the QA status of the high range in terms of its most recent calibration error and linearity checks. Provided that both of these QA tests are still "active", *i.e.*, their windows of data validation have not expired, the high range would be considered in-control and able to provide quality-assured data. However if either of the tests has expired, data recorded on the high range would be considered invalid until the expired test was repeated and passed. The MPC would have to be reported until the expired high-range test is redone or until the data return to the low scale.

These revisions would clarify that when the low range is up-to-date on its QA tests but the high range is not, the QA statuses of the two ranges are evaluated separately and may be different. However, as explained in greater detail in Section II.I.3, below, the QA statuses of the low and high ranges are not necessarily independent when a calibration error test or a linearity check on one of the ranges is failed.

6. Cycle Time Test—Stability Criteria

The cycle time test described in Section 6.4 of Appendix A is required for the initial certification and recertification of gas monitoring systems, and occasionally as a diagnostic test. The "upscale" portion of the test consists of injecting a zero-level calibration gas, allowing the reading to stabilize, recording it, and then stopping the calibration gas flow, waiting until a stable reading of the source emissions is obtained, and recording it. The "downscale" portion of the test is performed in like manner, except that a

high-level calibration gas is used instead of the zero-level gas.

Section 6.4 currently specifies criteria for determining when a stable reading has been obtained. The reading is considered stable if it changes by less than 2.0 percent of the span value for 2 minutes or less than 6.0 percent from the average concentration over 6 minutes. These criteria are reasonable when the source effluent concentrations are moderate or high. However, when concentrations are very low, the criteria are quite stringent and can be very difficult to meet. For example, if the span value of a NO_X analyzer is 10 ppm and the average measured source emissions are 3 ppm, the source emissions would have to remain constant within about 0.2 ppm for the specified amount of time to meet the stability criteria.

In recent years, hundreds of new combustion turbines (CTs) have been built. The vast majority are subject to Part 75, are equipped with NO_X monitoring systems, and have NO_X permit limits less than 10 ppm. Therefore, the 0.2 ppm cycle time stability criterion in the example above is realistic and applies to many of these new CTs. To provide a measure of relief for these low-emitting sources, today's rule would add alternative stability criteria to Section 6.4 of Appendix A. By the alternative criteria, an SO_2 or NO_X reading would be considered stable if it changed by no more than 0.5 ppm for 2 minutes or, for a diluent monitor, if it changed by no more than 0.2% CO_2 or O_2 for 2 minutes. EPA believes these alternative stability criteria are needed to ensure that minor temporal variations in the concentration of the source effluent do not cause testers to overestimate the amount of time it takes to achieve stable readings, resulting in "false positive" failures of the cycle time test.

7. System Integrity and Linearity Checks of Hg CEMS

Subpart I of Part 75 includes certification test procedures and performance specifications for Hg CEMS. The required certification tests for a Hg CEMS include a 3-level system integrity check, using a NIST-traceable source of oxidized Hg and a 3-level linearity check, using elemental Hg standards. The performance specification for the system integrity check, which is found in paragraph (3)(iii) of Appendix A, Section 3.2, states that the system measurement error must not exceed 5.0 percent of the span value at any of the three calibration gas levels. However no explanation of how to calculate the measurement error is provided. Today's proposed rule would restructure paragraph (3) of Section 3.2 (as described in the next paragraph) and add the necessary mathematical procedure.

EPA is also proposing to make the linearity and system integrity check specifications for Hg monitors the same. The principal linearity error specification in Section 3.2(3)(i) is currently 10.0 percent of the reference gas tag value at each calibration concentration, when calculated according to Equation A–4. The alternative specification in Section 3.2(3)(ii) allows an absolute difference of up to 1.0 $\mu g/m^3$ between the average reference gas and monitor values at each calibration gas level. Today's proposed rule would replace the principal linearity error specification with a specification of 5.0 percent of the span value, and would lower the alternative specification to 0.6 $\mu g/m^3$. Further, the same 0.6 $\mu g/m^3$ alternative specification would be added to the rule for the system integrity check.

The reason for making these changes is that nearly all Hg monitors are equipped with a converter and measure the total vapor phase Hg (*i.e.*, oxidized plus elemental) as elemental Hg. Therefore, the performance specification for the linearity check, which is done with elemental Hg, should be at least as stringent as the performance for the system integrity check, which is done with oxidized Hg. Because the current linearity specifications are less stringent than the specification for the system integrity check, EPA proposes to revise and restructure paragraph (3) in Section 3.2 of Appendix A, to make the performance specifications the same for linearity checks and system integrity checks of Part 75 Hg monitors (this includes both the 3-level and single-level system integrity checks). The alternative performance specification is deemed necessary for low (10 $\mu g/m^3$ Hg span values, where the principal specification of 5.0% of span may be overly stringent.

8. Correction of Hg Calibration Gas Concentrations for Moisture

When calibration error tests and linearity checks of SO_2, NO_X, and diluent gas monitors are performed, EPA protocol gases are used. The protocol gases are essentially moisture-free. However, when mercury monitors are calibrated, moisture may be added to the calibration gas. This creates a potential source of error in the calculations, if the Hg monitoring system measures on a dry basis. In view of this, EPA proposes to revise the calibration error procedures in section 6.3.1 of Appendix A, to require that when moisture is added to the Hg calibration gas, the moisture content of the gas must be accounted for if the Hg monitor measures on a dry basis. The proposed revisions would also require the calibration gas concentration to be converted to a dry basis for purposes of the calibration error calculations.

Parallel language would be added to Section 6.2 of Appendix A, in a new paragraph "(h)", to address this issue for the linearity checks and system integrity checks of Hg monitors. The Agency believes that adoption of these proposed revisions will prevent many "false positive" failures of Hg monitor calibration error tests, linearity checks, and system integrity checks.

9. Correction of Cross-References

Today's proposed rule would correct a number of cross-references in Appendix A, Sections 6.2(g), 6.5.6(b)(3) and 6.5.6.3. Regarding the system integrity checks of Hg monitors, Section 6.2(g) of Appendix A incorrectly only refers to Section 2.6 of Appendix B, which only describes weekly, single-level system integrity checks. The proposed revisions would also refer to Sections 2.1.1 and 2.2.1 of Appendix B, which describe the 3-level system integrity checks. Also, the references in Sections 6.5.6(b)(3) and 6.5.6.3 of Appendix A to Section 3.2 of 40 CFR Part 60, Appendix B, Performance Specification No. 2 (PS2) are incorrect. The correct section number in PS2 is 8.1.3, not 3.2.

I. Appendix B

1. 3-Load Flow RATA Frequency and RATA Grace Period

On May 26, 1999, EPA revised Appendix B of Part 75, to reduce the required frequency of 3-load flow RATAs from annually to "at least once every 5 consecutive calendar years". However, as written, the rule actually allows more than five years (20 calendar quarters) to elapse between 3-load flow RATAs. For instance, if a 3-load flow RATA was performed in the1st quarter of 2001 and the next one is done in the 4th quarter of 2006, the rule requirement would be met, but there would be 23 calendar quarters between the successive tests.

In light of this, EPA is proposing to revise Section 2.3.1.3(c)(4) of Appendix B, to require 3-load flow RATAs to be done at least once every 20 calendar quarters. This is consistent with the other 5-year testing requirements in Part 75, *i.e.*, for Appendix E and LME units. It is also consistent with the maximum

allowable interval between successive accuracy tests of Appendix D fuel flowmeters.

EPA is also proposing to revise the RATA grace period provisions in Section 2.3.3. In recent years many new combustion turbines have been built and most of them have NO_X-diluent CEMS. A great number of these turbines have been operated infrequently due to the high price of natural gas. Because of this, a unit may go for a very long period of time without performing a RATA of the NO_X monitoring system because the unit seldom, if ever, has a "QA operating quarter" (so the extended deadline for the next RATA is often 8 calendar quarters from the previous test), and then it may be several quarters or even years before the allowable 720 operating hour grace period expires.

The grace period provisions in Section 2.3.3 were proposed in 1998 and promulgated in May 1999, before the influx of new, infrequently-operated combustion turbines. Consequently, these rule provisions are often very difficult to track and apply to such units. Therefore, EPA proposes to modify the grace period methodology so that it is more understandable and user-friendly, particularly in cases where a unit seldom operates.

Today's proposal would move the requirements for determining the deadline for the next RATA after a grace period test from paragraph (c) of Section 2.3.3 to a new paragraph (d). Paragraph (c) currently addresses both RATA deadlines and the data validation requirements for the case where a RATA is not completed by the end of the 720 operating hour grace period. Creating a new paragraph (d) would make Section 2.3.3 clearer, by treating the RATA deadline requirement as a distinct and separate issue.

Proposed paragraph (d) would change the methodology for determining RATA deadlines without changing the end result. The intent of Section 2.3.3 has always been for the source to return to its original RATA schedule following a grace period test, in order to prevent the grace period provisions from being abused. For instance, if the source did not return to its original RATA schedule, the grace period could be used to extend the interval between successive annual RATAs from four QA operating quarters to five.

The current language in Section 2.3.3 works well enough for base load units that operate most of the time. For these units, the grace period almost invariably begins and ends within one calendar quarter of the RATA deadline, making it easy to return to the original RATA schedule. For instance, suppose that a base load unit is on a 2nd quarter RATA schedule and a grace period RATA is done in the 3rd quarter. If annual frequency is obtained, the deadline for the next RATA is reckoned from the 2nd quarter, when the RATA was due, rather than the 3rd quarter when the grace period test was actually done. Therefore, the next RATA would be required in the 2nd quarter of the following year, *i.e.*, "back on schedule". However, for infrequently operated combustion turbines, the grace period sometimes spans across many calendar quarters, which effectively eliminates the possibility of establishing a meaningful relationship between the original RATA due date and the deadline for the next test.

In view of these considerations, EPA is proposing a simplified methodology for determining RATA deadlines that will work for both base load units and combustion turbines that seldom operate. The deadline for the next RATA following a grace period test would be expressed as a certain number of QA operating quarters after the quarter of the grace period RATA, rather than referring back to the quarter in which the RATA was originally due (which could have been several quarters in the past).

The deadline for the next RATA would be determined by first establishing whether the grace period RATA qualifies for the standard (semiannual) RATA frequency or the reduced (annual) frequency. If the grace period RATA does not qualify for the annual frequency, the deadline for the next RATA would be simply set at two QA operating quarters after the quarter of the grace period test. If the RATA qualifies for the annual frequency then the deadline for the next RATA would be set at three QA operating quarters after the quarter of the grace period test. There would be one exception to these rules. Regardless of the number of QA operating quarters that have elapsed following the grace period test, the interval between a grace period RATA and the deadline for the next required RATA could be no greater than eight calendar quarters. This provision is consistent with Section 2.3.1.1(a) of Appendix B.

Finally, EPA is proposing to amend paragraph (c) of Section 2.3.3, to clarify that when a RATA is performed after the expiration of a grace period, the "clock" is reset, and the next RATA would simply be due in two QA operating quarters (for semiannual frequency) or four QA operating quarters (for annual frequency), not to exceed eight calendar quarters.

EPA believes that the proposed revisions to Section 2.3.3 of Appendix B would greatly simplify implementation of the grace period provisions and would enhance the Agency's ability to track RATA deadlines and to provide meaningful feedback to the affected sources.

2. RATA Requirement for Shared Components

Today's proposed rule would amend paragraph (g) in section 2.3.2 of Appendix B to specify the consequences of a failed RATA, in the case where a particular NO_X pollutant concentration monitor is a component of both a NO_X concentration monitoring system and a NO_X-diluent monitoring system. An example would be a coal-fired source that is subject to both the Acid Rain and NO_X Budget Programs, for which the owner or operator elects to use a NO_X concentration system to quantify NO_X mass emissions, while using the NO_X-diluent system to satisfy the Acid Rain Program requirement to monitor and report NO_X emission rate in lb/mmBtu. In such cases, if the NO_X concentration system RATA is failed, both the NO_X concentration monitoring system and the associated NO_X-diluent monitoring system would be considered out-of-control. Successful RATAs of both monitoring systems would be required to get them back in-control.

3. AETB Requirements

Appendix B would be further revised by adding a new Section, 1.1.4, to require that an Air Emissions Testing Body (AETB) that performs emission testing or RATAs for on-going quality-assurance under Part 75 must conform to ASTM D7036–04.

4. Calibration Error Tests and Linearity Checks—Dual Range Applications

Today's rule would revise Sections 2.1.1, 2.1.1.2, 2.1.5.1 and 2.2.3(e) of Appendix B, to clarify the data validation requirements for daily calibration error tests and linearity checks of gas monitors when two span values and two measurement ranges are required for a particular parameter (*e.g.*, SO_2 or NO_X).

Section 2.1.1 of Appendix B would be revised to require that sufficient calibration error tests be performed on the low and high monitor ranges to validate the data recorded on each range. The provisions of Section 2.1.5 of Appendix B would be used to determine whether "sufficient" calibration error tests have been done. A new paragraph (3) would also be added to Section 2.1.5.1 of Appendix B to clarify how the QA status of the low and high ranges is

determined when: (a) A calibration error test on one of the ranges is failed; or (b) the most recent calibration error test of one of the ranges has expired. In the case where separate analyzers are used for the two ranges, a failed or expired calibration error test on one of the ranges would not affect the QA status of the other range. For a dual-range analyzer (*i.e.*, a single analyzer with two scales), a failed calibration error test on either range would result in an out-of-control period, and data from the monitor would remain invalid until corrective actions are taken, followed by successful "hands-off" calibrations of both ranges. However, if the most recent calibration error test on one range of a dual-range analyzer was successful, but its data validation window has expired, this would have no effect on the QA status of the other range.

In the current rule, Section 2.2.3(e) in Appendix B states that when linearity checks are performed on both scales of a dual-range analyzer, an out-of-control period occurs if either of the two linearity checks is failed or aborted due to a problem with the monitor. However, it is not clear whether only one range or both ranges must be retested to get back in-control. Today's rule would revise Section 2.2.3(e) to require "hands-off" linearity checks of both ranges of a dual-range analyzer whenever a linearity check on either range is failed or aborted (unless, of course, a particular range is exempted from linearity checks under Section 6.2 of Appendix A).

5. Off-Line Calibration Error Tests

Part 75 requires calibration error tests of all CEMS to be done while the unit is combusting fuel (*see* Appendix B, Section 2.1.1 and Appendix A, Sections 6.3.1 and 6.3.2). However, Section 2.1.1.2 of Appendix B allows the owner or operator to make limited use of off-line calibration error tests to validate data if an off-line calibration demonstration test is performed and passed. If the off-line calibration error demonstration is successful, then off-line calibrations may be used to validate up to 26 unit operating hours of data before an on-line calibration error test is required.

The off-line calibration provisions in Appendix B have not been well-understood by many affected sources. Through the years, EPA has received numerous requests for a more detailed explanation and/or examples of how to apply these rule provisions. Today's rule would revise Sections 2.1.1.2 and 2.1.5.1 of Appendix B to clarify the data validation rules for off-line calibration error tests.

The Agency believes that main reason why there have been so many questions about the use of off-line calibration error tests is that paragraph (2) of Section 2.1.1.2 is not clear. Paragraph (2) states that "a successful on-line calibration error test of the monitoring system must be completed no later than 26 unit operating hours after each off-line calibration error test used for data validation." This statement can be easily misinterpreted. It could be understood to mean that a single off-line calibration error test can be used to validate 26 unit operating hours of data, regardless of the number of clock hours it takes to accumulate the 26 unit operating hours. However, this is not the intended meaning because it would directly contradict the statement, in Section 2.1.5 of Appendix B, that the window of data validation from a passed calibration error test extends for only 26 clock hours.

To clarify EPA's intent regarding the use of off-line calibration error tests to validate CEM data, today's rule would revise Sections 2.1.1.2 and 2.1.5.1 of Appendix B. First, paragraph (2) in Section 2.1.1.2 would be revised to state that sources may make limited use of off-line calibrations if the off-line calibration demonstration has been performed and passed. Revised paragraph (2) of Section 2.1.5.1 would explain what "limited use" of off-line calibrations means. Off-line calibrations could be used to validate up to 26 consecutive unit operating hours of data before an on-line test is required. Each individual off-line calibration would be valid only for 26 clock hours, and if the sequence of consecutive operating hours validated by off-line calibrations is broken before reaching the 26th consecutive unit operating hour, data from the monitor would become invalid until an on-line calibration is performed and passed. The sequence of consecutive valid hours would be considered broken whenever a unit operating hour is not contained within the 26 clock hour data validation window of a passed off-line calibration error test.

6. Weekly System Integrity Check—Data Validation

For a Hg CEMS that is equipped with a converter and that uses elemental Hg for daily calibrations, Section 2.6 of Part 75, Appendix B requires a weekly system integrity check, using a NIST-traceable source of oxidized Hg. This "weekly" test is required once every 168 unit operating hours. However, Section 2.6 does not explain the consequences of either failing the test or failing to perform the test on schedule. Today's rule would add data validation rules for the weekly system integrity check to Section 2.6 of Appendix B. If the test is failed, it would trigger an out-of-control period until a subsequent system integrity check is passed. Also, if the test is not performed within 168 unit operating hours of the previous successful system integrity check, data from the CEMS would become invalid, starting with the 169th unit operating hour and continuing until a system integrity check is passed.

Today's rule would also correct a typographical error in Section 2.6 of Appendix B. The performance specification for the weekly system integrity check is incorrectly referenced in the current rule as Section 3.2 (c)(3) of Appendix A. The correct citation is Appendix A, Section 3.2, paragraph (3)(iii).

7. Correction of Hg Units of Measure—Figure 2

Today's rule would correct a minor error in the units of measure for Hg concentration in Figure 2 of Appendix B. The units of micrograms per dry standard cubic meter (µg/dscm) would be changed to micrograms per standard cubic meter (µg/scm). This change is necessary because not all Hg monitoring systems measure Hg concentration on a dry basis.

J. Appendix D

1. Update of Incorporation by Reference

As discussed in Section II.B.1 of this preamble, EPA proposes to update the list of test methods, sampling and analysis procedures, and other items that are incorporated by reference in Part 75. As such, this proposal also includes the necessary updates to the references in Appendix D.

EPA is also proposing to add to Section 2.1.5.1 of Appendix D, the American Petroleum Institute's (API) Manual of Petroleum Measurement Standards Chapter 22—Testing Protocol: Section 2—Differential Pressure Flow Measurement Devices (First Edition, August 2005) as a new standard procedure for verifying flowmeter accuracy.

2. Pipeline Natural Gas—Method of Qualification and Monthly GCV Values

For a unit which combusts a fuel that meets the definition of "pipeline natural gas" (PNG) in § 72.2, Section 2.3.1.1 of Appendix D allows the owner or operator to estimate the unit's SO_2 mass emissions using a default SO_2 emission rate of 0.0006 lb/mmBtu. To qualify to use this SO_2 emission rate, the owner or operator must document in the

monitoring plan for the unit that the natural gas has a total sulfur content of 0.5 grains per 100 standard cubic foot or less. Section 2.3.1.4 describes three ways to initially demonstrate that the gas meets this total sulfur requirement: (1) Based on the gas quality characteristics specified in a purchase contract, tariff sheet, or pipeline transportation contract; or (2) based on historical fuel sampling data from the previous 12 months; or (3) based on at least one representative sample of the gas, if the requirements of (1) or (2) cannot be met. When fuel sampling data are used to qualify, each individual sample result must meet the total sulfur limit. Once a fuel has qualified as pipeline natural gas, Section 2.3.1.4(e) of Appendix D requires annual sampling of the total sulfur content to demonstrate that the fuel still meets the definition of PNG. At least one sample per year must be taken and if multiple samples are taken, each one must meet the 0.5 gr/100 scf total sulfur limit.

The criteria for documenting the total sulfur content of PNG were promulgated on June 12, 2002, and the annual total sulfur requirement became effective on January 1, 2003. Since then, EPA has learned that many suppliers of natural gas regularly sample the total sulfur content of the gas (in many cases, daily) and will provide that data to their customers upon request. Sources desiring to use this data to meet the initial or ongoing total sulfur sampling requirements of Appendix D have approached EPA, asking whether the gas would be disqualified from using the 0.0006 lb/mmBtu SO_2 emission rate if the total sulfur content of one of these daily samples exceeded 0.5 gr/100 scf. Thus far, the Agency has addressed these requests on a case-by-case basis. Generally, in cases where the number of total sulfur samples far exceeds the requirements of Appendix D, EPA has allowed the sources to reduce the data to monthly averages. Then, if all of the monthly averages are below the 0.5 gr/100 scf , the fuel would be allowed to continue using the 0.0006 lb/mmBtu default SO_2 emission rate.

EPA believes that the current rule requirements for documenting the sulfur content of pipeline natural gas are too restrictive and need to be revised. For example, a source that takes only one or perhaps a handful of sulfur samples each year is allowed to use the 0.0006 lb/mmBtu default emission rate without question if all samples have ≤ 0.5 gr/100 scf of total sulfur. However, a source with hundreds of total sulfur sample results could possibly be disqualified from using the default emission rate if one sample exceeded the 0.5 gr/100 scf limit. To correct this inequitable situation, today's rule would revise Sections 2.3.1.4(a)(2) and (e) of Appendix D.

For the initial documentation that the gas meets the 0.5 gr/100 scf total sulfur limit, proposed Section 2.3.1.4(a)(2) would allow sources whose fuel suppliers have provided them with at least 100 daily (or more frequent) total sulfur samples from the previous 12 months to reduce the data to monthly averages. If all monthly averages meet the 0.5 gr/100 scf limit, the fuel would qualify as pipeline natural gas, and the source could use the 0.0006 lb/mmBtu default SO_2 emission rate. Alternatively, if at least 98 percent of the 100 (or more) samples have a total sulfur content of 0.5 gr/100 scf or less, the fuel would qualify as pipeline natural gas.

The revisions to Section 2.3.1.4(e) would allow this same calculation methodology to be used for the annual total sulfur sampling requirement. That is, each year, if at least 100 total sulfur samples from the past 12 months are provided by the fuel supplier, the data could either be reduced to monthly averages, or the percentage of the samples that meet the 0.5 gr/100 scf limit could be determined.

EPA is also proposing to clarify the GCV sampling requirements for pipeline natural gas in Section 2.3.4.1 of Appendix D. The current rule requires monthly GCV sampling for PNG. However, Section 2.3.4.1 refers only to the "monthly sample" (singular), whereas affected sources may collect and analyze multiple GCV samples each month, or may receive the results of multiple GCV samples from the fuel supplier each month. In view of this, revised Section 2.3.4.1 would require that a monthly average GCV value be used for Part 75 reporting, for any month in which multiple samples are taken and analyzed. To implement this provision, whenever Section 2.3.7(c) of Appendix D requires the results of a monthly GCV sample to be applied "starting from the date on which the sample was taken", the owner or operator would apply the monthly average GCV value, starting from the latest date of any of the individual GCV samples used to calculate the monthly average. EPA believes that monthly averaging of the available GCV samples will ensure that representative robust GCV values are used in the Appendix D heat input calculations.

3. Requirement To Split Oil Samples

For affected units that combust fuel oil and use the Appendix D "excepted" methodology to quantify SO_2 mass emissions and/or unit heat input, Section 2.2 of Appendix D requires the owner or operator to perform periodic sampling of the sulfur content, gross calorific value and (if necessary) density of the oil. There are four basic oil sampling options described in Section 2.2: (a) Daily sampling; (b) flow proportional sampling (composite sample, up to 7 days); (c) sampling from a unit's storage tank after each addition of oil to the tank; and (d) sampling of each fuel lot (either upon receipt of the lot or sampling from supplier's storage tank prior to delivery). Regardless of which sampling option is selected, Section 2.2.5 of Appendix D requires each oil sample to be split and a portion (at least 200 cc) of it to be maintained for at least 90 days after the end of the allowance accounting period.

The requirement to split and maintain a portion of each oil sample has been in Appendix D since it was first promulgated on January 11, 1993. At that time, on-site fuel oil sampling was required on every day that the unit combusted oil. Later, on May 17, 1995, an option to sample each shipment upon delivery was added for diesel fuel. Then, on May 26, 1999, the four basic oil sampling options in the current rule were put in place. However, the requirement to split and maintain a portion of each sample has remained unchanged through all of these rulemakings.

EPA believes that the requirement to split and maintain oil samples should only apply to samples that are taken at the affected facility. Today's rule would revise Section 2.2.5 of Appendix D to limit this requirement to samples that are taken on-site. Therefore, sources using the fourth sampling option in Section 2.2 of Appendix D, *i.e.*, sampling from each fuel lot, would no longer be required to split and maintain oil samples in the case where the samples are taken off-site, from the fuel supplier's storage container.

K. Appendix E

1. AETB Requirements

EPA proposes to revise Section 2.1 of Appendix E to require that any Air Emissions Testing Body (AETB) performing emission measurements to develop an Appendix E correlation curve or to derive a default emission rate for an LME unit, would have to conform to ASTM D7036–04.

2. Reporting Data When the Correlation Curve Expires

For oil and gas-fired peaking units using the Appendix E "excepted" methodology to estimate NO_X emissions, the owner or operator is

required, for each fuel type, to perform four-load emission testing for initial certification in order to develop a correlation curve of NO_X emission rate versus heat input rate. Each correlation curve is programmed into the data acquisition and handling system (DAHS), and retesting is required every five years (20 calendar quarters) to develop a new curve.

If the 20 calendar quarter test deadline passes without a retest having been performed, the previous correlation curve expires and is no longer valid. Ordinarily, when data from a Part 75 monitoring system become invalid, missing data substitution procedures are applied. Section 2.5 of Appendix E contains missing data provisions that address the following situations: (a) When the monitored QA parameters are unavailable or invalid; (b) when the measured heat input rate is higher than the highest heat input rate on the correlation curve; (c) when NO_X emission controls are either not operating or not documented to be working properly; and (d) when emergency fuel is burned.

Conspicuously absent from Section 2.5 is a missing data procedure to follow when a correlation curve expires. To address this deficiency, today's rule would add a new Section, 2.5.2.4, to Appendix E, requiring the fuel-specific maximum potential NO_X emission rate (MER) to be reported when a baseline correlation curve expires. The MER would continue to be reported until a new correlation curve is generated.

L. Appendix F

1. NO_X Mass Calculations

EPA proposes to revise the manner in which NO_X mass data are collected under the XML–EDR format that will be required in 2009 as part of EPA's effort to re-engineer the Agency's data collection systems. Under the current reporting requirements, sources are required to report hourly NO_X mass emissions (lb) and then to sum these hourly records and divide by 2000 lb/ton to determine the quarterly NO_X mass emissions (tons). This is inconsistent with the manner in which SO_2 and CO_2 mass emissions data are reported and aggregated. For SO_2 and CO_2, the hourly values are reported as mass emission rates (lb/hr). The quarterly cumulative mass emissions are calculated by multiplying each reported hourly mass emission rate by the corresponding unit or stack operating time, summing these products, and then dividing the sum by 2000 lb/ton to get tons of SO_2 or CO_2.

Today's proposed rule seeks to harmonize the reporting formats by requiring the reporting of hourly NO_X mass emission rate (lb/hr) instead of hourly NO_X mass emission (lb), when the source transition from the current EDR reporting format to the XML–EDR reporting format. As previously discussed, sources may use either the existing EDR format or the new XML–EDR reporting format in 2008, but will be required to use the new XML-reporting format, only, in 2009.

Requiring the reporting of hourly NO_X mass emission rate (lb/hr) necessitates the modification of Equations F–24, and F–27 in Appendix F of Part 75 and the removal of Equation F–26. However, since the current EDR reporting format will continue to be supported through 2008, EPA must retain these equations in the rule until the transition to XML–EDR is complete. Therefore, EPA is proposing to revise Section 8 of Appendix F, by adding Equation F–24a for the reporting of hourly NO_X mass emission rate (lb/hr). Equation F–24a is a modified version of F–24, in which the operating time variable is removed. The use of Equation F–24a would be mandatory in the new XML–EDR format. Likewise, Equation F–27a would be added, which is a modified form of Equation F–27 that includes the operating time variable. In the XML–EDR format, cumulative NO_X mass emissions would be calculated using Equation F–27a.

Since both EDR reporting formats currently in use (*i.e.*, EDR versions 2.1 and 2.2) require reporting of hourly NO_X mass emissions (lb), the current versions of Equations F–24 and F–27 would remain in the rule. However, these equations would no longer be applicable in 2009, when the use of XML–EDR format is required for all affected sources.

Today's proposal also would revise Section 8.2 of Appendix F, by splitting it into two subsections, 8.2.1 and 8.2.2. Section 8.2 of the current rule describes a procedure for calculating the NO_X mass emission rate in lb/hr, when NO_X mass emissions are determined using a NO_X concentration monitoring system and a flow monitor. Section 8.2 cross-references other parts of the rule, rather than showing the actual equations used. Today's proposed rule would add Equation F–26a to proposed subsection 8.2.1 and Equation F–26b to proposed subsection 8.2.2, clearly showing how the NO_X mass emission rate is calculated on a wet and dry basis. Equation F–26 in Section 8.3 would be re-numbered as Equation F–26c. Proposed Equations F–26a and F–26b are currently used by sources to calculate NO_X mass emissions under Subpart H of Part 75. These equations are represented in the EDR reporting instructions, as Equations N–1 and N–2 respectively. EPA believes that it is appropriate to add these equations to the rule at this time.

2. Use of the Diluent Cap

Today's proposed rule would restrict the use of the diluent cap to NO_X emission rate calculations. The original purpose for implementing the diluent cap was to keep calculated NO_X emission rates from approaching infinity during periods of unit startup and shutdown, where the diluent gas (CO_2 or O_2) concentration is close to the level in the ambient air. However, the current rule allows the diluent cap to be used for heat input rate calculations, CO_2 mass emission calculations, and calculation of hourly CO_2 concentration from measured O_2 concentrations, in addition to being used for NO_X emission rate. Sources are also allowed to use the cap value for some of these calculations and not others. This greatly complicates the data collection process. EPA has also found that using the diluent cap for other parameters besides NO_X emission rate always leads to over-reporting of these parameters, which is clearly contrary to the intended purpose of the diluent cap. Therefore, today's proposed rule would remove all of the references in Sections 4 and 5 of Appendix F which allow the diluent cap to be used for other parameters besides NO_X emission rate

3. Negative Emission Values

EPA proposes to provide special reporting instructions to account for situations where the equations prescribed by the rule yield negative values. First, when Equation 19–3 or 19–5 (from EPA Method 19 in 40 CFR Part 60, Appendix A) is used to calculate NO_X emission rate, modified forms of these equations, designated as Equations 19–3D and 19–5D, would be used whenever the diluent cap is applied. Second, for any hour where Equation F–14b results in a negative hourly average CO_2 value, EPA proposes to require 0.0% CO_2 to be reported as the average CO_2 value for that hour. Third, EPA proposes to require a default heat input rate value of 1 mmBtu/hr to be reported for any hour in which Equation F–17 results in a negative hourly heat input rate. These changes would be accomplished by modifying Sections, 3.3.4, 4.4.1, and 5.2.3 of Appendix F.

4. Calculation of Stack Gas Moisture Content

Today's proposed rule would add Equation F–31 to a new Section 10 of Appendix F. This equation is used to calculate stack gas moisture values from wet and dry oxygen measurements, as described in Appendix A, Section 6.5.7(a). The equation is currently represented in the EDR reporting instructions as Equation M–1.

5. Site-Specific F-Factors (Single Fuel)

For units that use CEMS to measure the NO_X emission rate in lb/mmBtu and/or the unit heat input rate in mmBtu/hr, an equation from Appendix F of Part 75 or from Method 19 of 40 CFR Part 60 is required to convert the raw CEMS data into the proper units of measure. Each of these equations contains an F-factor, which represents either the total volume of flue gas or the volume of CO_2 generated per million Btu of heat input. The F-factor is fuel-specific.

Sections 3.3.5 and 3.3.6 of Appendix F allow the owner or operator to use either a default F-factor from Table 1 in Appendix F, or use Equation F–7a or F–7b in Appendix F to calculate a site-specific F-factor, based on the composition of the fuel. However, Appendix F neither specifies how much fuel sampling data is required to develop a site-specific F-factor, nor how often the F-factor must be updated.

To address this issue, today's rule would revise the introductory text of Appendix F, Section 3.3.6 to require each site-specific F-factor to be based on a minimum of 9 samples of the fuel. Fuel samples taken during the 9 runs of an annual RATA would be acceptable for this purpose. Further, re-determination of the F-factor would be required at least annually, and the value from the most recent determination would be used in the emission calculations.

6. Prorated F-Factors

For affected units that co-fire combinations of fossil fuels or fossil fuels and wood residue and that use CEMS to monitor the NO_X emission rate or unit heat input rate, Section 3.3.6.4 of Appendix F requires a prorated F-factor to be used in the emission calculations. The prorated F-factor is calculated using Equation F–8 in Appendix F. In applying Equation F–8, the F-factor for each type of fuel is weighted according to the fraction of the total heat input contributed by the fuel. However, Equation F–8 fails to specify how the total unit heat input and the fraction of the heat input contributed by each fuel are determined. Data from the CEMS cannot be used for this purpose because the prorated F-factor must be known before the unit heat input rate can be calculated.

Through the years, in response to inquiries about this, EPA has advised sources to use the best available auxiliary process data, such as fuel feed rates and measured GCV values, to provide heat input estimates for calculating the prorated F-factor, but no official Agency policy guidance has been issued. To correct this situation, today's rule would revise the definition of "X_i" (the fraction of the total heat input derived from each fuel) in the Equation F–8 nomenclature. The revised definition would require sources to determine X_i from the best available information on the quantity of each fuel combusted and its GCV value over a specified time period. The value of X_i would be updated periodically, either hourly, daily, weekly, or monthly, and the prorated F-factor used in the emission calculations would be derived from the X_i values from the most recent update. The owner or operator would be required to document in the hard copy portion of the monitoring plan the method used to determine the X_i values.

7. Default F-Factors

EPA proposes to add default F-factors for petroleum coke and tire derived fuels to Table 1 in Section 3.3.5 of Appendix F. The proposed values are 9,832 dscf/mmBtu for F_d and 1,853 scf CO_2/mmBtu for F_c for petroleum coke and 10,261 dscf/mmBtu for F_d and 1,803 scf CO_2/mmBtu for F_c for tire derived fuels. These F-factors are needed because petroleum coke and tires are being used as a fuel by a number of units. EPA is also proposing 9,819 dscf/mmBtu for F_d and 1,840 scf CO_2/mmBtu for F_c as F-factors for sub-bituminous coal. These F-factors were calculated using Part 75, Appendix F, Equations F–7a and F–7b and representative composition and gross calorific value (GCV) data for each fuel.

8. Revisions to Equation F–23

Consistent with the proposed changes to § 75.11(e), expanding the applicability of Equation F–23 (which are discussed in detail in Section II.B.4 of this preamble), modifications would be made to Section 7 of Appendix F (introductory text), and to the Equation F–23 nomenclature.

M. Appendix G

Consistent with the changes to other parts of the rule, EPA proposes to update the current ASTM standards listed in Sections 2.1.2, 2.2.1, and 2.2.2, of Appendix G, citing the newer versions.

N. Appendix K

Today's proposed rule addresses several issues regarding the use of sorbent trap monitoring systems for the measurement and reporting of Hg mass emissions. When this monitoring option is selected, the current rule requires the use of paired sorbent traps to measure the effluent Hg concentration. If the two Hg concentrations measured by the paired traps meet the required relative deviation (RD) specification in Appendix K of Part 75, and if each trap individually meets certain other QA requirements of Appendix K, then the two Hg concentrations are averaged arithmetically and the average value is used to determine the Hg mass emissions in each hour of the data collection period. However, in cases where either or both of the traps fails to meet the acceptance criteria, § 75.15(h) and Table K–1 of Appendix K specify consequences of varying severity. As discussed in the following paragraphs, EPA has reconsidered these rule provisions and has concluded that some of the consequences are too lenient while others are unnecessarily harsh. The Agency is therefore proposing to revise them to make them more consistent and equitable.

Section 75.15(h) currently provides a measure of relief to the affected sources whenever one of the paired traps is accidentally lost, damaged, or broken and cannot be analyzed. In such cases, the owner or operator is allowed to use the remaining trap to determine the Hg concentration for the data collection period, provided that the remaining trap meets all of the QA requirements of Appendix K. But the rule does not require any adjustment of the data to compensate for the loss of one of the samples. In view of this, EPA is proposing to revise § 75.15(h) to require that the Hg concentration measured by the remaining valid trap be multiplied by a "single trap adjustment factor" (STAF) of 1.222. The STAF represents the maximum amount by which the Hg concentration from the lost, damaged or broken trap could have exceeded the concentration measured by the valid trap and still met the 10% RD specification.

The Agency is also proposing to revise Table K–1 in Appendix K, to extend the use of the STAF to cases where one of the paired sorbent traps either: (a) Fails a post-test leak check; (b) has excessive breakthrough in the second section; or (c) is unable to meet the required percent recovery of the third section elemental Hg spike. In all

three of these cases, provided that the other trap meets all Appendix K requirements, rather than invalidating the sorbent trap system data for the entire collection period, the Hg concentration measured by the valid trap, multiplied by the STAF, could be used for Part 75 reporting.

Section 7.2.3 of Appendix K requires that for each hour of the data collection period, the ratio of the stack gas flow rate to the sample flow rate through each sorbent trap must be maintained within 25 percent of the initial ratio established in the first hour of the data collection period. However, the current rule does not say what to do if this criterion is not met. Rather, Table K–1 indicates that the appropriate consequences are to be determined on a "case-by-case" basis. EPA has reconsidered this approach and is proposing to revise it, because it opens the door to inconsistent application of the sorbent trap monitoring methodology. Therefore, Table K–1 would be revised to specify that a sample is invalidated if either: (a) More than 5 percent of the hourly ratios; or (b) more than 5 hourly ratios in the data collection period (whichever is less restrictive) fail to meet the ±25 percent acceptance criterion. Further, if only one of the paired traps is able to meet the specification, provided that it also meets the rest of the Appendix K QA criteria, the valid trap could be used for Part 75 reporting, if the single trap adjustment factor of 1.222 is applied to the measured Hg concentration.

Appendix K currently requires that the data from a sorbent trap monitoring system be invalidated whenever the relative deviation between the Hg concentrations measured by the paired traps is greater than 10 percent. EPA proposes to revise this requirement, to allow sources to report the higher of the two Hg concentrations measured by a pair of sorbent traps whenever the RD specification is not met, rather than invalidating the sorbent trap system data for the entire collection period. EPA is also proposing, for consistency with the proposed changes § 75.22(a) (which are discussed in Section II.C.3 of this preamble), to revise Table K–1 to include an alternative relative deviation specification of 20 percent for paired sorbent traps, where low effluent concentrations of Hg (≤ 1 µg/m^3) are encountered.

Today's proposed rule would add two new paragraphs, (k) and (l), to § 75.15. Proposed § 75.15(k) would require that whenever the RATA of a sorbent trap system is performed, the sorbent traps used to collect the RATA run data must be the same size as the traps used for daily operation of the monitoring system. Likewise, the sorbent material must be the same type that is used for daily operation. Proposed § 75.15(l) would require a diagnostic RATA of the sorbent trap system whenever the size of the sorbent traps or the type of sorbent material is changed. Data from the modified sorbent trap system would not be acceptable for Part 75 reporting until the RATA is passed, with one exception, *i.e.*, data collected during a successful diagnostic RATA test period could be reported as quality-assured. EPA is proposing to add these requirements because the relative accuracy and bias of a sorbent trap monitoring system are dependent upon both the trap design and the type of sorbent material used.

Finally, today's proposed rule would revise section 7.2.3 of Appendix K to require that the sample flow rate through a sorbent trap monitoring system must be zero when the unit is not operating. This clarification is needed to prevent the system from sampling ambient air during periods when the combustion unit is off-line. Sampling ambient air when the unit is not in operation would artificially lower the Hg concentrations measured by the sorbent traps, resulting in under-reporting of Hg mass emissions.

II. Administrative Requirements

A. Executive Order 12866—Regulatory Planning and Review

This action is not a "significant regulatory action" under the terms of Executive Order (EO) 12866 (58 FR 51735, October 4, 1993) and is therefore not subject to review under the EO.

B. Paperwork Reduction Act

The information collection requirements in the proposed rule have been submitted for approval to OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 *et seq.* The Information Collection Request (ICR) document prepared by EPA has been assigned EPA ICR number 2203.01. The information requirements are based on the proposed revisions to the monitoring, recordkeeping, and reporting requirements in 40 CFR Part 75, which are mandatory for all sources subject to the Acid Rain Program under Title IV of the Clean Air Act and certain other emissions trading programs administered by EPA. All information submitted to EPA pursuant to the recordkeeping and reporting requirements for which a claim of confidentiality is made is safeguarded according to Agency policies set forth in 40 CFR Part 2, subpart B. The existing Part 75 rule requirements are covered by existing ICRs for the Acid Rain Program (EPA ICR number 1633.13; OMB control number 2060–0258), the NO_x SIP Call (EPA ICR number 1857.03; OMB number 2060–0445), and the Clean Air Interstate Rule (EPA ICR number 2152.01). The separate ICR for the proposed rule revisions addresses the one time costs necessary for sources to review the rule revisions and adapt their recordkeeping and reporting systems to the revised requirements. The EPA believes that the long term implications of the proposed rule revisions will be to reduce the ongoing burdens and costs associated with Part 75 compliance, but those impacts will be addressed as EPA renews the individual program ICRs. The annual monitoring, reporting, and recordkeeping burden for this collection (averaged over the first 3 years after the effective date of the final rule) is estimated to be 124,976 labor hours per year at a total annual cost of $8,581,420. This estimate includes burdens for rule review, recordkeeping and reporting software upgrades, and software debugging activities, as well as the capital costs of upgrading recordkeeping and reporting software.

Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An Agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control numbers for EPA's regulations in 40 CFR are listed in 40 CFR Part 9.

To comment on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including the use of automated collection techniques, EPA has established a public docket for this rule, which includes this ICR, under Docket ID number OAR–2005–0132. Submit any comments related to the ICR for this proposed rule to EPA and OMB.

See **ADDRESSES** section at the beginning of this notice for where to submit comments to EPA. Send comments to OMB at the Office of Information and Regulatory Affairs, Office of Management and Budget, 725 17th Street, NW., Washington, DC 20503, Attention: Desk Office for EPA. Since OMB is required to make a decision concerning the ICR between 30 and 60 days after August 22, 2006, a comment to OMB is best assured of having its full effect if OMB receives it by September 21, 2006. The final rule will respond to any OMB or public comments on the information collection requirements contained in this proposal.

C. Regulatory Flexibility Act

The Regulatory Flexibility Act (RFA) generally requires an agency to prepare a regulatory flexibility analysis of any rule subject to notice and comment rulemaking requirements under the Administrative Procedure Act or any other statute unless the agency certifies that the rule will not have a significant economic impact on a substantial number of small entities. Small entities include small businesses, small organizations, and small governmental jurisdictions.

For purposes of assessing the impacts of today's proposed rule on small entities, small entity is defined as: (1) A small business as defined by the Small Business Administration's (SBA) regulations at 13 CFR 121.201; (2) a small governmental jurisdiction that is a government of a city, county, town, school district or special district with a population of less than 50,000; or (3) a small organization that is any not-for-profit enterprise which is independently owned and operated and is not dominant in its field.

After considering the economic impacts of today's proposed rule on small entities, I certify that this action will not have a significant economic impact on a substantial number of small entities. In determining whether a rule has a significant economic impact on small entities, the impact of concern is any significant adverse economic impact on small entities, since the primary purpose of the regulatory flexibility analysis is to identify and address regulatory alternatives "which minimize any significant economic impact of the rule on small entities." 5 U.S.C. 603 and 604. Thus, an agency may certify that a rule will not have a significant economic impact on a substantial number of small entities if the rule relieves regulatory burden or otherwise has a positive economic effect on all of the small entities subject to the rule. The proposed rule revisions represent minor changes to existing monitoring requirements used in EPA emission trading programs. Although there will be some small level of up front costs to reprogram existing electronic data reporting software used under this program, the long term effects of these proposed revisions is to allow continued efficient electronic data submittals that should act to relieve some of the long term reporting burdens for affected sources, which include some small entities.

We continue to be interested in the potential impacts of the proposed rule on small entities and welcome comments on issues related to such impacts.

D. Unfunded Mandates Reform Act

Title II of the Unfunded Mandates Reform Act of 1995 (UMRA), Public Law 104–4, establishes requirements for Federal agencies to assess the effects of their regulatory actions on State, local, and tribal governments and the private sector. Under Section 202 of the UMRA, EPA generally must prepare a written statement, including a cost-benefit analysis, for proposed and final rules with "Federal mandates" that may result in expenditures to State, local, and tribal governments, in the aggregate, or to the private sector, of $100 million or more in any one year. Before promulgating an EPA rule for which a written statement is needed, Section 205 of the UMRA generally requires EPA to identify and consider a reasonable number of regulatory alternatives and adopt the least costly, most cost-effective, or least burdensome alternative that achieves the objectives of the rule. The provisions of Section 205 do not apply when they are inconsistent with applicable law. Moreover, Section 205 allows EPA to adopt an alternative other than the least costly, most cost-effective, or least burdensome alternative if the Administrator publishes with the final rule an explanation why that alternative was not adopted. Before EPA establishes any regulatory requirements that may significantly or uniquely affect small governments, including tribal governments, it must have developed under Section 203 of the UMRA a small government agency plan. The plan must provide for notifying potentially affected small governments, enabling officials of affected small governments to have meaningful and timely input in the development of EPA regulatory proposals with significant Federal intergovernmental mandates, and informing, educating, and advising small governments on compliance with the regulatory requirements.

EPA has determined that this proposed rule does not contain a Federal mandate that may result in expenditures of $100 million or more for State, local, and tribal governments, in the aggregate, or in the private sector in any one year. Thus, today's proposed rule is not subject to the requirements of Sections 202 and 205 of the UMRA.

EPA has determined that this rule contains no regulatory requirements that might significantly or uniquely affect small governments. The revisions primarily would make certain changes EPA has determined are necessary as part of upgrading the data systems used to manage data submitted under the program and to streamline the methods for sources to report their information. The revisions also would clarify certain issues that have been raised during ongoing implementation of the existing rule and would update the information on various voluntary consensus standards incorporated by reference in the rule. Some States do have programs that rely on the monitoring provisions in 40 CFR Part 75, and States may incur some costs associated with reviewing the proposed modifications to Part 75, but the rule revisions and the impact on the States would not be significant.

E. Executive Order 13132—Federalism

Executive Order 13132, entitled "Federalism" (64 FR 43255, August 10, 1999), requires EPA to develop an accountable process to ensure "meaningful and timely input by State and local officials in the development of regulatory policies that have federalism implications." "Policies that have federalism implications" is defined in the Executive Order to include regulations that have "substantial direct effects on the States, on the relationship between the national government and the States, or on the distribution of power and responsibilities among the various levels of government."

This proposed rule does not have federalism implications. This proposed rule will not have substantial direct effects on the States, on the relationship between the national government and the States, or on the distribution of power and responsibilities among the various levels of government, as specified in Executive Order 13132. These proposed rule revisions represent minor adjustments to existing regulations. The revisions primarily would make certain changes EPA has determined are necessary as part of upgrading the data systems used to manage data submitted under the program and to streamline the methods for sources to report their information. The revisions also would clarify certain

issues that have been raised during ongoing implementation of the existing rule and would update the information on various voluntary consensus standards incorporated by reference in the rule. Some States do have programs that rely on the monitoring provisions in 40 CFR Part 75, and States may incur some costs associated with reviewing the proposed modifications to Part 75, but the rule revisions and the impact on the States would not be significant. Thus, Executive Order 13132 does not apply to this proposed rule. In the spirit of Executive Order 13132, and consistent with EPA policy to promote communications between EPA and State and local governments, EPA specifically solicits comment on this proposed rule from State and local officials.

F. Executive Order 13175—Consultation and Coordination With Indian Tribal Governments

Executive Order 13175, entitled "Consultation and Coordination with Indian Tribal Governments" (65 FR 67249, November 9, 2000), requires EPA to develop an accountable process to ensure "meaningful and timely input by tribal officials in the development of regulatory policies that have tribal implications." This proposed rule does not have tribal implications, as specified in Executive Order 13175. The proposed action makes minor revisions to existing rule requirements. Thus, Executive Order 13175 does not apply to this proposed rule. The EPA specifically solicits additional comment on the proposed rule from tribal officials.

G. Executive Order 13045—Protection of Children From Environmental Health and Safety Risks

Executive Order 13045, "Protection of Children from Environmental Health Risks and Safety Risks" (62 FR 19885, April 23, 1997), applies to any rule that: (1) Is "economically significant" as defined under Executive Order 12866; and (2) concerns an environmental health or safety risk that EPA has reason to believe may have a disproportionate effect on children. If the regulatory action meets both criteria, the Agency must evaluate the environmental health or safety effects of the planned rule on children and explain why the planned regulation is preferable to other potentially effective and reasonably feasible alternatives considered by the Agency.

This proposed rule is not subject to the Executive Order because it is not economically significant as defined in Executive Order 12866, and because the Agency does not have reason to believe the proposed revisions to certain monitoring and reporting requirements implicate any environmental health or safety risks, including any specific risks that present a disproportionate risk to children. The public is invited to submit or identify peer-reviewed studies and data, of which the agency may not be aware, that are relevant to the environmental health or safety risks to children that could be implicated by this proposed action.

H. Executive Order 13211—Actions That Significantly Affect Energy Supply, Distribution, or Use

This proposed rule is not a "significant energy action" as defined in Executive Order 13211, "Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use" (66 FR 28355, May 22, 2001), because it is not likely to have a significant adverse effect on the supply, distribution, or use of energy.

I. National Technology Transfer and Advancement Act

Section 12(d) of the National Technology Transfer and Advancement Act of 1995 ("NTTAA"), Public Law 104–113, 12(d) (15 U.S.C. 272 note), directs EPA to use voluntary consensus standards in its regulatory activities unless to do so would be inconsistent with applicable law or otherwise impractical.

Voluntary consensus standards are technical standards (*e.g.*, materials specifications, test methods, sampling procedures, and business practices) that are developed or adopted by voluntary consensus standards bodies. The NTTAA directs EPA to provide Congress, through OMB, explanations when the Agency decides not to use available and applicable voluntary consensus standards. This proposed rule includes updated information on a number of voluntary consensus standards previously included in 40 CFR Part 75, as well as the proposed addition of certain other voluntary consensus standards. The EPA welcomes comments on this aspect of the proposed rulemaking and specifically invites the public to identify other potentially applicable voluntary consensus standards and to explain why such standards should be used in this regulation.

List of Subjects in 40 CFR Parts 72 and 75

Environmental protection, Acid rain, Administrative practice and procedure, Air pollution control, Carbon dioxide, Electric utilities, Nitrogen oxides, Reporting and recordkeeping requirements, Sulfur oxides.

Dated: August 4, 2006.

Stephen L. Johnson,

Administrator.

For the reasons set forth in the preamble, EPA proposes to amend chapter I of title 40 of the Code of Federal Regulations as follows:

PART 72—PERMITS REGULATION

1. The authority citation for Part 72 continues to read as follows:

Authority: 42 U.S.C. 7601 and 7651, *et seq.*

Subpart A—Acid Rain Program General Provisions

2. Section 72.2 is amended as follows:

a. In the definition of "Capacity factor", by adding the words "(or maximum observed hourly gross load (in MWe/hr) if greater than the nameplate capacity)" after the word "capacity" in paragraph (1), by removing the word "design" and adding in its place the words "rated hourly" in paragraph (2), and by adding the word "rate" after the new phrase "rated hourly heat input" in paragraph (2);

b. In the definition of "Diluent cap", by removing the words ", CO_2 mass emission rate, or heat input rate," after the words "NO_X emission rate";

c. In the definition of "EPA protocol gas", by adding a new sentence to the end of the definition;

d. Revising the definition of "Excepted monitoring system";

e. Adding the new definitions in alphabetical order for "Air Emission Testing Body (AETB)", "EPA Protocol Gas Verification Program", "Long-term cold storage", "Qualified Individual", and "Specialty gas producer"; and

f. Removing the definitions for "Calibration gas", "Gas manufacturer's intermediate standard (GMIS)", "NIST/EPA-approved certified reference material or NIST/EPA-approved CRM", "NIST traceable reference material (NTRM)", "Research gas material (RGM)", "Research gas mixture (RGM)", "Standard reference material or SRM", "Standard reference material-equivalent compressed gas primary reference material (SRM-equivalent PRM)", and "Zero air material".

The revisions and additions read as follows:

§ 72.2 Definitions.

* * * * *

Air Emission Testing Body (AETB) means a company or other entity that conducts Air Emissions Testing as described in ASTM D7036–04.

* * * * *

EPA protocol gas * * * Vendors advertising certification with the EPA

Traceability Protocol *or* distributing gases as "EPA Protocol Gas" must participate in the EPA Protocol Gas Verification Program. Non-participating vendors may not use "EPA" in any form of advertising for these products, unless approved by the Administrator.

* * * * *

EPA Protocol Gas Verification Program means the EPA Protocol Gas audit program described in Section 2.1.10 of the "EPA Traceability Protocol for Assay and Certification of Gaseous Calibration Standards," September 1997, EPA–600/R–97/121 (EPA Protocol Procedure) or such revised procedure as approved by the Administrator.

* * * * *

Excepted monitoring system means a monitoring system that follows the procedures and requirements of § 75.15 of this chapter, § 75.19 of this chapter, § 75.81(b) of this chapter or of appendix D, or E to part 75 for approved exceptions to the use of continuous emission monitoring systems.

* * * * *

Long-term cold storage means the complete shut down of a unit intended to last for an extended period of time (at least two calendar years) where notice for long-term cold storage is provided under § 75.61(a)(7).

* * * * *

Qualified Individual means an individual who meets the requirements as described in ASTM D7036–04.

* * * * *

Specialty gas producer means an organization that prepares and analyzes compressed gas mixtures for use as calibration gases and that offers the mixtures for sale to end users or to third-party vendors for resale to end users.

* * * * *

PART 75—CONTINUOUS EMISSION MONITORING

3. The authority citation for Part 75 continues to read as follows:

Authority: 42 U.S.C. 7601, 7651k, and 7651k note.

Subpart A—General

4. Section 75.4 is amended by revising paragraph (d) to read as follows:

§ 75.4 Compliance dates.

* * * * *

(d) This paragraph, (d), applies to affected units under the Acid Rain Program and to units subject to a State or Federal pollutant mass emissions reduction program that adopts the emission monitoring and reporting provisions of this part. In accordance with § 75.20, for an affected unit which, on the applicable compliance date, is either in long-term cold storage (as defined in § 72.2 of this chapter) or is shutdown as the result of a planned outage or a forced outage, thereby preventing the required continuous monitoring system certification tests from being completed by the compliance date, the owner or operator shall provide notice of such unit storage or outage in accordance with § 75.61(a)(3) or § 75.61(a)(7), as applicable. For the planned and unplanned unit outages described in this paragraph, the owner or operator shall ensure that all of the continuous monitoring systems for SO_2, NO_X, CO_2, Hg, opacity, and volumetric flow rate required under this part (or under the applicable State or Federal mass emissions reduction program) are installed and that all required certification tests are completed no later than 90 unit operating days or 180 calendar days (whichever occurs first) after the date that the unit recommences commercial operation, notice of which date shall be provided under § 75.61(a)(3) or § 75.61(a)(7), as applicable. The owner or operator shall determine and report SO_2 concentration, NO_X emission rate, CO_2 concentration, Hg concentration, and flow rate data (as applicable) for all unit operating hours after the applicable compliance date until all of the required certification tests are successfully completed, using either:

(1) The maximum potential concentration of SO_2 (as defined in section 2.1.1.1 of appendix A to this part), the maximum potential NO_X emission rate, as defined in § 72.2 of this chapter, the maximum potential flow rate, as defined in section 2.1.4.1 of appendix A to this part, the maximum potential Hg concentration, as defined in section 2.1.7.1 of appendix A to this part, or the maximum potential CO_2 concentration, as defined in section 2.1.3.1 of appendix A to this part; or

(2) The conditional data validation provisions of § 75.20(b)(3); or

(3) Reference methods under § 75.22(b); or

(4) Another procedure approved by the Administrator pursuant to a petition under § 75.66.

* * * * *

5. Section 75.6 is amended by:

a. Removing "D129–91" and adding in its place "D129–00", in paragraph (a)(1);

b. Removing "D240–87" and adding in its place "D240–00", in paragraph (a)(2);

c. Removing "D287–82 (Reapproved 1987)" and adding in its place "D287–92 (2000)e1", in paragraph (a)(3);

d. Removing "D388–92" and adding in its place "D388–99e1", in paragraph (a)(4);

e. Removing and reserving paragraph (a)(5);

f. Adding the phrase "(1999)" at the end of "D1072–90", in paragraph (a)(6);

g. Removing "D1217–91" and adding in its place "D1217–93 (1998)", in paragraph (a)(7);

h. Adding the phrase "(1997)e1" at the end of D1250–80, and by removing the phrase "(Reapproved 1990)", in paragraph (a)(8);

i. Removing the phrase "D1298–85 (Reapproved 1990)" and adding in its place "D1298–99", in paragraph (a)(9);

j. Removing "D1480–91" and adding in its place "D1480–93 (1997)", in paragraph (a)(10);

k. Removing "D1481–91" and adding in its place "D1481–93 (1997)", in paragraph (a)(11);

l. Removing "D1552–90" and adding in its place "D1552–01", in paragraph (a)(12);

m. Removing "D1826–88" and adding in its place "D1826–94 (1998)", in paragraph (a)(13);

n. Removing "D1945–91" and adding in its place "D1945–96 (2001)", in paragraph (a)(14);

o. Adding the phrase "(2000)" after "D1946–90", in paragraph (a)(15);

p. Removing and reserving paragraph (a)(16);

q. Removing "D2013–86" and adding in its place "D2013–01", in paragraph (a)(17);

r. Removing and reserving paragraph (a)(18);

s. Removing "D2234–89" and adding in its place "D2234–00e1", in paragraph (a)(19);

t. Removing and reserving paragraph (a)(20);

u. Removing "D2502–87" and adding in its place "D2502–92 (1996)", in paragraph (a)(21);

v. Removing "D2503–82 (Reapproved 1987)" and adding in its place "D2503–92 (1997)", in paragraph (a)(22);

w. Removing "D2622–92" and adding in its place "D2622–98", in paragraph (a)(23);

x. Removing "D3174–89" and adding in its place "D3174–00", in paragraph (a)(24);

y. Adding the phrase "(1997)e1" after "D3176–89", in paragraph (a)(25);

z. Adding the phrase "(1997)" after "D3177–89", in paragraph (a)(26);

aa. Adding the phrase "(1997)" after "D3178–89", in paragraph (a)(27);

bb. Removing "D3238–90" and adding in its place "D3238–95 (2000)e1", in paragraph (a)(28);

cc. Removing "D3246–81 (Reapproved 1987)" and adding in its place "D3246–96", in paragraph (a)(29);

dd. Removing and reserving paragraph (a)(30);

ee. Removing "D3588–91" and adding in its place "D3588–98", in paragraph (a)(31);

ff. Removing "D4052–91" and adding in its place "D4052–96 (2002)e1", in paragraph (a)(32);

gg. Removing "D4057–88" and adding in its place "D4057–95 (2000)", in paragraph (a)(33);

hh. Removing "D4177–82 (Reapproved 1990)" and adding in its place "D4177–95 (2000)", in paragraph (a)(34)

ii. Removing "D4239–85" and adding in its place "D4239–02", in paragraph (a)(35);

jj. Removing "D4294–90" and adding in its place "D4294–98", in paragraph (a)(36);

kk. Removing the phrase "(Reapproved 1989)" and adding in its place the phrase "(2000)", in paragraph (a)(37);

ll. Adding the phrase "(2001)" after "D4891–89", in paragraph (a)(39);

mm. Removing "D5291–92" and adding in its place "D5291–01", in paragraph (a)(40);

nn. Adding the phrase "(1997)" after "D5373–93", in paragraph (a)(41);

oo. Removing "D5504–94" and adding in its place "D5504–01", in paragraph (a)(42);

pp. Adding new paragraphs (a)(45), (a)(46), (a)(47), and (a)(48);

qq. Removing the phrase "with September 1990 Errata" and adding in its place the phrase "(Reaffirmed 1995)", in paragraph (b)(1);

rr. Removing the date "1990" and adding in its place the date "1997" in the parenthetical, in paragraph (b)(2);

ss. Adding the phrase "(Reaffirmed 2001)" after "ASME–MFC–5M–1985", in paragraph (b)(3);

tt. Removing the phrase "1987 with June 1987 Errata" and adding in its placethe number "1998" at the end of "MFC–6M-", in paragraph (b)(4);

uu. Removing the date "1992" and adding in its place the date "2001" in the parenthetical, in paragraph (b)(5);

vv. Removing the phrase "with December 1989 Errata" and adding in its place the phrase "(Reaffirmed 2001)", in paragraph (b)(6);

ww. Removing the number "86" and adding in its place the number "1996" at the end of "GPA Standard 2172-", in paragraph (d)(1);

xx. Removing the number "90" and adding in its place the number "1999" at the end of "GPA Standard 2261-", in paragraph (d)(2);

yy. Adding the phrase "(1st edition)" after the date "December 1994", removing the phrase "April 1992 (reaffirmed January 1997)" and adding in its place the phrase "June 2001", adding the phrase "(Reaffirmed September 2000)" after the date "September 1995", adding the phrase "(1st Edition)" after the date "June 1996", adding the phrase "(1st Edition)" after the date "April 1995", and adding the phrase "(1st Edition)" after the date "March 1997", in paragraph (f)(1);

zz. Adding the phrase "Manual of Measurement Standards, Chapter 4:" after the phrase "(API)", adding the phrase "(Provers Accumulating at Least 10,000 Pulses), Measurement Coordination (Second Edition, March 2001)", after the words "Conventional Pipe Provers", adding the phrase "(First Edition)" after the words "Small Volume Provers", adding the phrase "Measurement Coordination (Second Edition, May 2000)" after the phrase "Master-Meter Provers," and removing the phrase "from Chapter 4 of the Manual of Petroleum Measurement Standards, October 1988 (Reaffirmed 1993)", in paragraph (f)(3); and

aaa. Adding new paragraph (f)(4).

The revisions and additions read as follows:

§ 75.6 Incorporation by reference.

(a) * * *

(45) ASTM D6667–04, Standard Test Method for Determination of Total Volatile Sulfur in Gaseous Hydrocarbons and Liquified Petroleum Gases by Ultraviolet Fluorescence, for appendix D of this part.

(46) ASTM D4809–00, "Standard Test Method for Heat of Combustion of Liquid Hydrocarbon Fuels by Bomb Calorimeter (Precision Method), for appendices D and F of this part.-

(47) ASTM D5865–01ae1, "Standard Test Method for Gross Calorific Value of Coal and Coke", for appendices A, D, and F of this part.

(48) ASTM D7036–04, "Standard Practice for Competence of Air Emission Testing Bodies", for appendices A, B, and E of this part.

* * * * *

(f) * * *

(4) American Petroleum Institute (API) Manual of Petroleum Measurement Standards, Chapter 22—Testing Procedures: Section 2—Differential Pressure Flow Measurement Devices (First Edition, August 2005) for Appendix D to this part.

6. Section 75.11 is amended by:

a. Revising the heading of the section;

b. Adding the phrase "and 14.0% for natural gas (boilers, only)" after the word "wood", in paragraph (b)(1);

c. Revising paragraph (d)(3);

d. Revising paragraph (e) introductory text, (e)(1) and (e)(3) introductory text;

e. Removing and reserving paragraph (e)(2); and

f. Revising paragraph (f).

The revisions and additions read as follows:

§ 75.11 Specific provisions for monitoring SO_2 emissions.

* * * * *

(d) * * *

(3) By using the low mass emissions excepted methodology in § 75.19(c) for estimating hourly SO_2 mass emissions if the affected unit qualifies as a low mass emissions unit under § 75.19(a) and (b). If this option is selected for SO_2, the LME methodology must also be used for NO_X and CO_2 when these parameters are required to be monitored by applicable program(s).

(e) *Special considerations during the combustion of gaseous fuels.* The owner or operator of an affected unit that uses a certified flow monitor and a certified diluent gas (O_2 or CO_2) monitor to measure the unit heat input rate shall, during any hours in which the unit combusts only gaseous fuel, determine SO_2 emissions in accordance with paragraph (e)(1) or (e)(3) of this section, as applicable.

(1) If the gaseous fuel qualifies for a default SO_2 emission rate under Section 2.3.1.1, 2.3.2.1.1, or 2.3.6(b) of appendix D to this part, the owner or operator may determine SO_2 emissions by using Equation F–23 in appendix F to this part. Substitute into Equation F–23 the hourly heat input, calculated using the certified flow monitoring system and the certified diluent monitor (according to the applicable equation in section 5.2 of appendix F to this part), in conjunction with the appropriate default SO_2 emission rate from section 2.3.1.1, 2.3.2.1.1, or 2.3.6(b) of appendix D to this part. When this option is chosen, the owner or operator shall perform the necessary data acquisition and handling system tests under § 75.20(c), and shall meet all quality control and quality assurance requirements in appendix B to this part for the flow monitor and the diluent monitor; or

(2) [Reserved]

(3) The owner or operator may determine SO_2 mass emissions by using a certified SO_2 continuous monitoring system, in conjunction with the certified flow rate monitoring system. However, if the gaseous fuel is very low sulfur fuel (as defined in § 72.2 of this chapter), the SO_2 monitoring system shall meet the following quality assurance provisions

when the very low sulfur fuel is combusted:

* * * * *

(4) The provisions in paragraph (e)(1) of this section, may also be used for the combustion of a solid or liquid fuel that meets the definition of very low sulfur fuel in § 72.2 of this chapter, mixtures of such fuels, or combinations of such fuels with gaseous fuel, if the owner or operator submits a petition under § 75.66 for a default SO_2 emission rate for each fuel, mixture or combination, and if the Administrator approves the petition.

(f) *Other units.* The owner or operator of an affected unit that combusts wood, refuse, or other material in addition to oil or gas shall comply with the monitoring provisions for coal-fired units specified in paragraph (a) of this section, except where the owner or operator has an approved petition to use the provisions of paragraph (e)(1) of this section.

7. Section 75.12 is amended by:

a. Revising the section heading;

b. Removing the word "and" before the number "15.0%", and by adding the phrase "; and 18.0% for natural gas (boilers, only)" after the word "wood", in paragraph (b); and

c. Revising paragraph (e)(3).

The revisions read as follows:

§ 75.12 Specific provisions for monitoring NO_X emission rate.

* * * * *

(e) * * *

(3) Use the low mass emissions excepted methodology in § 75.19(c) for estimating hourly NO_X emission rate and hourly NO_X mass emissions, if applicable under § 75.19(a) and (b). If this option is selected for NO_X, the LME methodology must also be used for SO_2 and CO_2 when these parameters are required to be monitored by applicable program(s).

* * * * *

8. Section 75.13 is amended by revising paragraph (d)(3) to read as follows:

§ 75.13 Specific provisions for monitoring CO_2 emissions.

* * * * *

(d) * * *

(3) Use the low mass emissions excepted methodology in § 75.19(c) for estimating hourly CO_2 mass emissions, if applicable under § 75.19(a) and (b). If this option is selected for CO_2, the LME methodology must also be used for NO_X and SO_2 when these parameters are required to be monitored by applicable program(s).

9. Section 75.15 is amended by:

a. Removing the reference "(j)" and adding the reference "(l)" in its place, in the introductory paragraph;

b. Revising paragraph (h); and

c. Adding paragraphs (k) and (l).

The revisions and additions read as follows:

§ 75.15 Special provisions for measuring Hg mass emissions using the excepted sorbent trap monitoring methodology.

* * * * *

(h) The hourly Hg mass emissions for each collection period are determined using the results of the analyses in conjunction with contemporaneous hourly data recorded by a certified stack flow monitor, corrected for the stack gas moisture content. For each pair of sorbent traps analyzed, the average of the two Hg concentrations shall be used for reporting purposes under § 75.84(f). Notwithstanding this requirement, if, due to circumstances beyond the control of the owner or operator, one of the paired traps is accidentally lost, damaged, or broken and cannot be analyzed, the results of the analysis of the other trap may be used for reporting purposes, provided that:

(1) The other trap has met all of the applicable quality-assurance requirements of this part; and

(2) The Hg concentration measured by the other trap is multiplied by a factor of 1.222.

* * * * *

(k) When a sorbent trap monitoring system is tested for relative accuracy, both the size of the sorbent traps and the type of sorbent material used by the traps shall be the same as for daily operation of the system.

(l) Whenever the size of the sorbent traps or the type of sorbent material used by the traps is changed, the owner or operator shall conduct a diagnostic RATA of the sorbent trap monitoring system. The modified system shall not be used to report Hg emissions under this part until the RATA has been performed and passed. Notwithstanding this requirement, Hg concentrations measured by the modified system during a successful RATA may be reported as quality-assured data under this part.

10. Section 75.16 is amended by:

a. Revising paragraph (b)(1)(ii);

b. Adding the word "rate" after the phrase "report heat input" in the last sentence, in paragraph (e)(1); and

c. Replacing both occurrences of the phrase "steam flow" with the phrase "steam load" and adding the phrase "or mmBtu/hr thermal output" inside the parentheses, after the phrase "in 1000 lb/hr", in paragraph (e)(3).

The revisions read as follows:

§ 75.16 Special provisions for monitoring emissions from common, bypass, and multiple stacks for SO_2 emissions and heat input determinations.

* * * * *

(b) * * *

(1) * * *

(ii) Install, certify, operate, and maintain an SO_2 continuous emission monitoring system and flow monitoring system in the common stack and combine emissions for the affected units for recordkeeping and compliance purposes.

* * * * *

11. Section 75.17 is amended by revising paragraph (d)(2) to read as follows:

§ 75.17 Special provisions for monitoring emissions from common, bypass, and multiple stacks for NO_X emission rate.

* * * * *

(d) * * *

(2) Install, certify, operate, and maintain a NO_X-diluent CEMS only on the main stack. If this option is chosen, it is not necessary to designate the exhaust configuration as a multiple stack configuration in the monitoring plan required under § 75.53, with respect to NO_X or any other parameter that is monitored only at the main stack. For each unit operating hour in which the bypass stack is used and the emissions are either uncontrolled (or the add-on controls are not documented to be operating properly), report the maximum potential NO_X emission rate (as defined in § 72.2 of this chapter). The maximum potential NO_X emission rate may be specific to the type of fuel combusted in the unit during the bypass (*see* § 75.33(c)(8)). Alternatively, for a unit with NO_X add-on emission controls, for each unit operating hour in which the bypass stack is used and the emissions are controlled, the owner or operator may report the maximum controlled NO_X emission rate (MCR) instead of the maximum potential NO_X emission rate provided that the add-on controls are documented to be operating properly, as described in the quality assurance/quality control program for the unit, required by section 1 in appendix B of this part. To provide the necessary documentation, the owner or operator shall record parametric data to verify the proper operation of the NO_X add-on emission controls as described in § 75.34(d). Furthermore, the owner or operator shall calculate the MCR using the procedure described in section 2.1.2.1(b) of Appendix A to this part by replacing the words "maximum potential NO_X emission rate (MER)" with the words "maximum controlled NO_X emission rate (MCR)" in and by

using the NO_X MEC instead of the NO_X MPC.

12. Section 75.19 is amended by:

a. Revising paragraph (a)(1);

b. Revising paragraph (c)(1)(i);

c. Adding the phrase, "that meets the quality assurance requirements of either: this part, or appendix F to part 60 of this chapter, or a comparable State CEM program," after the abbreviation "CEMS", in paragraph (c)(1)(iv)(G);

d. Adding the word "add-on" before the first instance of the phrase "NO_X controls", in paragraph (c)(1)(iv)(H)(*3*);

e. Adding the phrase "(1st Edition)" after the date "December 1994", replacing the phrase "April 1992 (reaffirmed January 1997)" with the date "June 2001" after the phrase "Stationary Tanks by Automatic Tank Gauging,", adding the phrase "(Reaffirmed September 2000)" after the date "September 1995", adding the phrase "(1st Edition)" after the date "June 1996", adding the phrase "(1st Edition)" after the date "April 1995", and adding the phrase "(1st Edition)" after the date "March 1997", in paragraph (c)(3)(ii)(B)(*2*);

f. Removing the words "from Table LM–1 of this section" from the first sentence of paragraph (c)(4)(i)(A);

g. Revising the heading to paragraph (c)(4)(ii); and

h. Adding paragraph (c)(4)(ii)(D).

The revisions and additions read as follows:

§ 75.19 Optional SO_2, NO_X, and CO_2 emissions calculation for low mass emissions units.

* * * * *

(a) * * *

(1) For units that meet the requirements of this paragraph (a)(1) and paragraphs (a)(2) and (b) of this section, the low mass emissions (LME) excepted methodology in paragraph (c) of this section may be used in lieu of continuous emission monitoring systems or, if applicable, in lieu of methods under appendices D, E, and G to this part, for the purpose of determining unit heat input, NO_X, SO_2, and CO_2 mass emissions, and NO_X emission rate under this part. If the owner or operator of a qualifying unit elects to use the LME methodology, it must be used for all parameters that are required to be monitored by the applicable program(s). For example, for an Acid Rain Program LME unit, the methodology must be used to estimate SO_2, NO_X, and CO_2 mass emissions, NO_X emission rate, and unit heat input.

* * * * *

(c) * * *

(1) * * *

(i) If the unit combusts only natural gas and/or fuel oil, use Table LM–1 of this section to determine the appropriate SO_2 emission rate for use in calculating hourly SO_2 mass emissions under this section. Alternatively, for fuel oil combustion, a lower, fuel-specific SO_2 emission factor may be used in lieu of the applicable emission factor from Table LM–1, if a federally enforceable permit condition is in place that limits the sulfur content of the oil. If this alternative is chosen, the fuel-specific SO_2 emission rate in lb/mmBtu shall be calculated by multiplying the fuel sulfur content limit (weight percent sulfur) by 1.01. In addition, the owner or operator shall periodically determine the sulfur content of the oil combusted in the unit, using one of the oil sampling and analysis options described in section 2.2 of Appendix D to this part, and shall keep records of these fuel sampling results in a format suitable for inspection and auditing. If the unit combusts gaseous fuel(s) other than natural gas, the owner or operator shall use the procedures in section 2.3.6 of appendix D to this part to document the total sulfur content of each such fuel and to determine the appropriate default SO_2 emission rate for each such fuel.

* * * * *

(4) * * *

(ii) NO_X mass emissions and NO_X emission rate. * * *

(D) The quarterly and cumulative NO_X emission rate in lb/mmBtu (if required by the applicable program(s)) shall be determined as follows. Calculate the quarterly NO_X emission rate by taking the arithmetic average of all of the hourly EF_{NOx} values. Calculate the cumulative (year-to-date) NO_X emission rate by taking the arithmetic average of the quarterly NO_X emission rates.

* * * * *

13. Section 75.20 is amended by:

a. Adding a new sentence after the third sentence of paragraph (b) introductory text;

b. Revising paragraph (c)(1)(v); and

c. Removing paragraphs (f)(1) and (f)(2).

The revisions and additions read as follows:

§ 75.20 Initial certification and recertification procedures.

* * * * *

(b) * * * The owner or operator shall also recertify the continuous emission monitoring systems for a unit that has recommenced commercial operation following a period of long-term cold storage as defined in § 72.2 of this chapter. * * *

* * * * *

(c) * * *

(1) * * *

(v) A cycle time test, (where, for the NO_X-diluent continuous emission monitoring system, the test is performed separately on the NO_X pollutant concentration monitor and the diluent gas monitor); and

* * * * *

14. Section 75.21 is amended by removing the words "or (e)(2)" at the end of the first sentence of paragraph (a)(4).

15. Section 75.22 is amended by revising paragraphs (a)(5) and (a)(7) to read as follows:

§ 75.22 Reference test methods.

(a) * * *

(5) Methods 6, 6A, 6B or 6C, and 7, 7A, 7C, 7D or 7E, as applicable, are the reference methods for determining SO_2 and NO_X pollutant concentrations. Alternatively, Method 20 may be used as the reference method for relative accuracy test audits of NO_X CEMS installed on combustion turbines. (Methods 6A and 6B may also be used to determine SO_2 emission rate in lb/mmBtu.) Methods 7, 7A, 7C, 7D, or 7E must be used to measure total NO_X emissions, both NO and NO_2, for purposes of this part. The owner or operator shall not use the following exceptions or options of method 7E:

(i) Section 7.1 of the method allowing for use of prepared calibration gas mixtures that are produced in accordance with method 205 in Appendix M of 40 CFR Part 51;

(ii) Paragraph (3) in section 8.4 of the method allowing for the use of a multi-hole probe to satisfy the multipoint traverse requirement of the method;

(iii) Section 8.6 of the method allowing for the use of "Dynamic Spiking" as an alternative to the interference and system bias checks of the method. Dynamic spiking may be conducted (optionally) as an additional quality assurance check.

* * * * *

(7) ASTM D6784–02, "Standard Test Method for Elemental, Oxidized, Particle-Bound, and Total Mercury in Flue Gas Generated from Coal-Fired Stationary Sources" (also known as the Ontario Hydro Method)(incorporated by reference, *see* § 75.6) is the reference method for determining Hg concentration. Alternatively, Method 29 in appendix A–8 to part 60 of this chapter may be used, with these caveats: the procedures for preparation of Hg standards and sample analysis in sections 13.4.1.1 through 13.4.1.3 ASTM D6784–02 shall be followed instead of the procedures in sections 7.5.33 and 11.1.3 of Method 29, and the QA/QC

procedures in section 13.4.2 of ASTM D6784–02 shall be performed instead of the procedures in section 9.2.3 of Method 29. The tester may also opt to use the sample recovery and preparation procedures in ASTM D6784–02 instead of the Method 29 procedures, as follows: sections 8.2.8 and 8.2.9.1 of Method 29 may be replaced with sections 13.2.9.1 through 13.2.9.3 of ASTM D6784–02 ; sections 8.2.9.2 and 8.2.9.3 of Method 29 may be replaced with sections 13.2.10.1 through 13.2.10.4 of ASTM D6784–02; section 8.3.4 of Method 29 may be replaced with section 13.3.4 or 13.3.6 of ASTM D6784–02 (as appropriate); and section 8.3.5 of Method 29 may be replaced with section 13.3.5 or 13.3.6 of ASTM D6784–02 (as appropriate). Whenever ASTM D6784–02 or Method 29 is used, paired sampling trains are required. To validate a RATA run, the relative deviation (RD), calculated according to section 11.7 of appendix K to this part, must not exceed 10 percent, when the average concentration is greater than 1.0 $\mu g/m^3$. If the average concentration is ≤ 1.0 $\mu g/m^3$, the RD must not exceed 20 percent. If the RD criterion is met, use the average Hg concentration measured by the two trains (vapor phase, only) in the relative accuracy calculations. As a second alternative, an instrumental reference method or other suitable reference method capable of measuring total vapor phase Hg may be used, subject to the approval of the Administrator.

* * * * *

16. Section 75.32 is amended by replacing the phrase "need not be calculated during the" with the phrase "shall be calculated for each hour during each", by replacing the word "last" with the word "each", and by removing the phrase "as the monitor availability used" after the words "data period", in paragraph (b).

17. Section 75.33 is amended by:

a. Replacing the word "Whenever" with the word "If", and by replacing the words "each hour of each" with the words "that hour of the", in paragraph (b)(1) introductory text;

b. Replacing the word "Whenever" with the word "If", and by replacing the words "each hour of each" with the words "that hour of the", in paragraph (b)(2) introductory text;

c. Replacing the word "Whenever" with the word "If", and by replacing the word "each" with the words "that hour of the", in paragraphs (b)(3) and (b)(4);

d. Replacing the word "Whenever" with the word "If", and by replacing the words "each hour of each" with the words "that hour of the", in paragraphs (c)(1) introductory text, (c)(2) introductory text, (c)(3), and (c)(4);

e. Revising Tables 1 and 2 in paragraph (c)(8)(iv);

f. Revising Table 3 in paragraph (e)(3); and

h. Replacing the word "Whenever" with the word "If", and by replacing the words "each hour of each" with the words "that hour of the", in paragraphs (d)(1), (d)(2), (d)(3), and (d)(4).

The revisions and additions read as follows:

§ 75.33 Standard missing data procedures for SO_2, NO_X, Hg, and flow rate.

* * * * *

(c) * * *

(8) * * *

(iv) * * *

TABLE 1.—MISSING DATA PROCEDURE FOR SO_2 CEMS, CO_2 CEMS, MOISTURE CEMS, HG CEMS, AND DILUENT (CO_2 OR O_2) MONITORS FOR HEAT INPUT DETERMINATION

Trigger conditions		Calculation routines	
Monitor data availability (percent)	Duration (N) of CEMS outage (hours)[2]	Method	Lookback period
95 or more (90 or more for Hg)	N ≤ 24	Average	HB/HA
	N > 24	For SO_2, CO_2, Hg, and H_2O**, the greater of:	
		Average	HB/HA
		90th percentile	720 hours*
		For O_2 and H_2O^x, the lesser of:	
		10th percentile	HB/HA 720 hours*
90 or more, but below 95 (> 80 but < 90 for Hg).	N ≤ 8	Average	HB/HA
	N > 8	For SO_2, CO_2, Hg, and H_2O**, the greater of:	
		Average	HB/HA
		95th percentile	720 hours*
		For O_2 and H_2O^x, the lesser of:	
		Average	HB/HA
		5th Percentile	720 hours*
80 or more, but below 90 (> 70 but < 80 for Hg).	N > 0	For SO_2, CO_2, Hg, and H_2O**,	
		Maximum value[1]	720 hours*
		For O_2 and H_2O^x:.	
		Minimum value[1]	720 hours*
Below 80 (Below 70 for Hg)	N > 0	Maximum potential concentration[3] or % (for SO_2, CO_2, Hg, and H_2O**) *or.*	
		Minimum potential concentration or % (for O_2 and H_2O^x).	None

HB/HA = hour before and hour after the CEMS outage.

* Quality-assured, monitor operating hours, during unit operation. May be either fuel-specific or non-fuel-specific. For units that report data only for the ozone season, include only quality assured monitor operating hours within the ozone season in the lookback period. Use data from no earlier than 3 years prior to the missing data period.

[1] Where a unit with add-on SO_2 or Hg emission controls can demonstrate that the controls are operating properly, as provided in § 75.34, the unit may, upon approval, use the maximum controlled emission rate from the previous 720 quality-assured monitor operating hours.

[2] During unit operating hours.

[3] Alternatively, where a unit with add-on SO_2 or Hg emission controls can demonstrate that the controls are operating properly, as provided in § 75.34, the unit may report the greater of: (a) The maximum expected SO_2 or Hg concentration or (b) 1.25 times the maximum controlled value from the previous 720 quality-assured monitor operating hours.

x Use this algorithm for moisture except when Equation 19–3, 19–4 or 19–8 in Method 19 in appendix A to part 60 of this chapter is used for NO_X emission rate.

** Use this algorithm for moisture *only* when Equation 19–3, 19–4 or 19–8 in Method 19 in appendix A to part 60 of this chapter is used for NO_X emission rate.

TABLE 2.—LOAD-BASED MISSING DATA PROCEDURE FOR NO_X-DILUENT CEMS, NO_X CONCENTRATION CEMS AND FLOW RATE CEMS

Trigger conditions		Calculation routines		
Monitor data availability (percent)	Duration (N) of CEMS outage (hours) [2]	Method	Lookback period	Load ranges
95 or more	N ≤ 24	Average	2160 hours *	Yes
	N > 24	The greater of:		
		Average	HB/HA	No
		90th percentile	2160 hours *	Yes
90 or more, but below 95	N ≤ 8	Average	2160 hours *	Yes
	N > 8	The greater of:		
		Average	HB/HA	No
		95th percentile	2160 hours *	Yes
80 or more, but below 90	N > 0	Maximum value [1]	2160 hours *	Yes
Below 80	N > 0	Maximum potential NO_X emission rate[3]; or maximum potential NO_X concentration[3]; or maximum potential flow rate..	None	No

HB/HA = hour before and hour after the CEMS outage.

* Quality-assured, monitor operating hours, using data at the corresponding load range ("load bin") for each hour of the missing data period. May be either fuel-specific or non-fuel-specific. For units that report data only for the ozone season, include only quality assured monitor operating hours within the ozone season in the lookback period. Use data from no earlier than three years prior to the missing data period.

[1] Where a unit with add-on NO_X emission controls can demonstrate that the controls are operating properly, as provided in § 75.34, the unit may, upon approval, use the maximum controlled emission rate from the previous 2160 quality-assured monitor operating hours. Alternatively, units with add-on controls that report NO_X mass emissions on a year-round basis under subpart H of this part may use separate ozone season and non-ozone season databases to provide substitute data values, as described in § 75.34 (a)(2).

[2] During unit operating hours.

[3] Alternatively, where a unit with add-on NO_X emission controls can demonstrate that the controls are operating properly, as provided in § 75.34, the unit may report the greater of: (a) The maximum expected NO_X concentration (or maximum controlled NO_X emission rate, as applicable); or (b) 1.25 times the maximum controlled value at the corresponding load bin, from the previous 2160 quality-assured monitor operating hours.

* * * * * (3) * * *

(e) * * *

TABLE 3.—NON-LOAD-BASED MISSING DATA PROCEDURE FOR NO_X-DILUENT CEMS AND NO_X CONCENTRATION CEMS

Trigger conditions		Calculation routines	
Monitor data availability (percent)	Duration (N) of CEMS outage (hours) [1]	Method	Lookback period
95 or more	N ≤ 24	Average	2160 hours *
	N > 24	90th percentile	2160 hours *
90 or more, but below 95	N ≤ 8	Average	2160 hours *
	N > 8	95th percentile	2160 hours *
80 or more, but below 90	N > 0	Maximum value	2160 hours *
Below 80, or operational bin indeterminable.	N > 0	Maximum potential NO_X emission rate [2] or maximum potential NO_X concentration [2].	None

* If operational bins are used, the lookback period is 2,160 quality-assured, monitor operating hours, and data at the corresponding operational bin are used to provide substitute data values. If operational bins are not used, the lookback period is the previous 2,160 quality-assured monitor operating hours. For units that report data only for the ozone season, include only quality-assured monitor operating hours within the ozone season in the lookback period. Use data from no earlier than three years prior to the missing data period.

[1] During unit operation.

[2] Alternatively, where a unit with add-on NO_X emission controls can demonstrate that the controls are operating properly, as provided in § 75.34, the unit may report the greater of: (a) the maximum expected NO_X concentration, (or maximum controlled NO_X emission rate, as applicable); or (b) 1.25 times the maximum controlled value at the corresponding operational bin (if applicable), from the previous 2160 quality-assured monitor operating hours.

* * * * *

18. Section 75.34 is amended by:

a. Revising paragraph (a) introductory text;

b. Amending paragraph (a)(2)(ii) by replacing the words "and (c)(3)" with ", (c)(3) and (c)(5), and § 75.38(c),";

c. Revising paragraph (a)(3);

d. Adding paragraph (a)(5); and

e. Revising paragraph (d) by replacing the words "paragraphs (a)(1) and (a)(3)" with "paragraphs (a)(1), (a)(3) and (a)(5)".

The revisions and additions read as follows:

§ 75.34 Units with add-on emission controls.

(a) The owner or operator of an affected unit equipped with add-on SO_2 and/or NO_X emission controls shall provide substitute data in accordance with paragraphs (a)(1), through (a)(5) of this section for each hour in which quality-assured data from the outlet SO_2 and/or NO_X monitoring system(s) are not obtained.

* * * * *

(3) For each missing data hour in which the percent monitor data availability for SO_2 or NO_X, calculated in accordance with § 75.32, is less than 90.0 percent and is greater than or equal to 80.0 percent; and parametric data establishes that the add-on emission controls were operating properly (*i.e.* within the range of operating parameters provided in the quality assurance/quality control program) during the hour, the owner or operator may:

(i) Replace the maximum SO_2 concentration recorded in the 720 quality-assured monitor operating hours immediately preceding the missing data period, with the maximum controlled SO_2 concentration recorded in the previous 720 quality-assured monitor operating hours; or

(ii) Replace the maximum NO_X concentration(s) or NO_X emission rate(s) from the appropriate load bin(s) (based on a lookback through the 2,160 quality-assured monitor operating hours immediately preceding the missing data period), with the maximum controlled NO_X concentration(s) or emission rate(s) from the appropriate load bin(s) in the same 2,160 quality-assured monitor operating hour lookback period.

* * * * *

(5) For each missing data hour in which the percent monitor data availability for SO_2 or NO_X, calculated in accordance with § 75.32, is below 80.0 percent and parametric data establish that the add-on emission controls were operating properly (*i.e.* within the range of operating parameters provided in the quality assurance/quality control program), in lieu of reporting the maximum potential value, the owner or operator may substitute, as applicable, the greater of:

(i) The maximum expected SO_2 concentration or 1.25 times the maximum hourly controlled SO_2 concentration recorded in the previous 720 quality-assured monitor operating hours;

(ii) The maximum expected NO_X concentration or 1.25 times the maximum hourly controlled NO_X concentration recorded in the previous 2,160 quality-assured monitor operating hours at the corresponding unit load range or operational bin;

(iii) The maximum hourly controlled NO_X emission rate (MCR) or 1.25 times the maximum hourly controlled NO_X emission rate recorded in the previous 2,160 quality-assured monitor operating hours at the corresponding unit load range or operational bin;

(iv) For the purposes of implementing the missing data options in paragraphs (a)(5)(i) through (a)(5)(iii) of this section, the maximum expected SO_2 and NO_X concentrations shall be determined, respectively, according to sections 2.1.1.2 and 2.1.2.2 of appendix A to this part. The MCR shall be calculated according to the basic procedure described in section 2.1.2.1(b) of appendix A to this part, except that the words "maximum potential NO_X emission rate (MER)" shall be replaced with the words "maximum controlled NO_X emission rate (MCR)" and the NO_X MEC shall be used instead of the NO_X MPC.

* * * * *

19. Section 75.38 is amended by revising paragraphs (a) and (c) to read as follows.

§ 75.38 Standard missing data procedures for Hg CEMS.

(a) Once 720 quality assured monitor operating hours of Hg concentration data have been obtained following initial certification, the owner or operator shall provide substitute data for Hg concentration in accordance with the procedures in § 75.33(b)(1) through (b)(4), except that the term "Hg concentration" shall apply rather than "SO_2 concentration," the term "Hg concentration monitoring system" shall apply rather than "SO_2 pollutant concentration monitor," the term "maximum potential Hg concentration, as defined in section 2.1.7 of appendix A to this part" shall apply, rather than "maximum potential SO_2 concentration", and the percent monitor data availability trigger conditions prescribed for Hg in Table 1 of § 75.33 shall apply rather than the trigger conditions prescribed for SO_2.

* * * * *

(c) For units with FGD systems or add-on Hg emission controls, when the percent monitor data availability is less than 80.0 percent and is greater than or equal to 70.0 percent, and a missing data period occurs, consistent with § 75.34(a)(3), for each missing data hour in which the FGD or Hg emission controls are documented to be operating properly, the owner or operator may report the maximum controlled Hg concentration recorded in the previous 720 quality-assured monitor operating hours. In addition, when the percent monitor data availability is less than 70.0 percent and a missing data period occurs, consistent with § 75.34(a)(5), for each missing data hour in which the FGD or Hg emission controls are documented to be operating properly, the owner or operator may report the greater of the maximum expected Hg concentration (MEC) or 1.25 times the maximum controlled Hg concentration recorded in the previous 720 quality-assured monitor operating hours. The MEC shall be determined in accordance with section 2.1.7.1 of appendix A to this part.

20. Section 75.39 is amended by:

a. Revising paragraph (a);

b. Revising paragraph (b);

c. Revising paragraph (c);

d. Revising paragraph (d); and

e. Adding paragraph (f).

The revisions and additions read as follows:

§ 75.39 Missing data procedures for sorbent trap monitoring systems.

(a) If a primary sorbent trap monitoring system has not been certified by the applicable compliance date specified under a State or Federal Hg mass emission reduction program that adopts the requirements of subpart I of this part, and if quality-assured Hg concentration data from a certified backup Hg monitoring system, reference method, or approved alternative monitoring system are unavailable, the owner or operator shall report the maximum potential Hg concentration, as defined in section 2.1.7 of appendix A to this part, until the primary system is certified.

(b) For a certified sorbent trap system, a missing data period will occur in the following circumstances, unless quality-assured Hg concentration data from a certified backup Hg CEMS, sorbent trap system, reference method, or approved alternative monitoring system are available:

(1) A gas sample is not extracted from the stack during unit operation (*e.g.*

during a monitoring system malfunction or when the system undergoes maintenance); or

(2) The results of the Hg analysis for the paired sorbent traps are missing or invalid (as determined using the quality assurance procedures in appendix K to this part). The missing data period begins with the hour in which the paired sorbent traps for which the Hg analysis is missing or invalid were put into service. The missing data period ends at the first hour in which valid Hg concentration data are obtained with another pair of sorbent traps (*i.e.*, the hour at which this pair of traps was placed in service), or with a certified backup Hg CEMS, reference method, or approved alternative monitoring system.

(c) *Initial missing data procedures.* Use the missing data procedures in § 75.31(b) until 720 hours of quality-assured Hg concentration data have been collected with the sorbent trap monitoring system(s), following initial certification.

(d) *Standard missing data procedures.* Once 720 quality-assured hours of data have been obtained with the sorbent trap system(s), begin reporting the percent monitor data availability in accordance with § 75.32 and switch from the initial missing data procedures in paragraph (c) of this section to the standard missing data procedures in § 75.38.

* * * * *

(f) In cases where the owner or operator elects to use a primary Hg CEMS and a redundant backup sorbent trap monitoring system (or vice-versa), when both monitoring systems are out-of-service and quality-assured Hg concentration data from a reference method or approved alternative monitoring system are unavailable, the previous 720 quality-assured monitor operating hours reported in the electronic quarterly report under § 75.64 shall be used for the required missing data lookback, irrespective of whether these data were recorded by the Hg CEMS, the sorbent trap system, a reference method, or an approved alternative monitoring system.

21. Section 75.53 is amended by:

a. Revising paragraph (a)(1);

b. Replacing the phrase "(d) or (f)" with the phrase "(f) or (h)" in the second sentence of paragraph (a)(2);

c. Adding paragraph (e)(1)(xiv); and

d. Adding paragraphs (g) and (h).

The revisions and additions read as follows:

§ 75.53 Monitoring plan.

(a) * * *

(1) The provisions of paragraphs (e) and (f) of this section shall remain in effect through December 31, 2008. The owner or operator shall meet the requirements of paragraphs (a), (b), (e), and (f) of this section through December 31, 2008, except as otherwise provided in paragraph (g) of this section. On and after January 1, 2009, the owner or operator shall meet the requirements of paragraphs (a), (b), (g), and (h) of this section only. In addition, the provisions in paragraphs (g) and (h) of this section that support a regulatory option provided in another section of this part must be followed if the regulatory option is used prior to January 1, 2009.

* * * * *

(e) * * *

(1) * * *

(xiv) For each unit with a flow monitor installed on a rectangular stack or duct, if a wall effects adjustment factor (WAF) is determined and applied to the hourly flow rate data:

(A) Stack or duct width at the test location, ft;

(B) Stack or duct depth at the test location, ft;

(C) Wall effects adjustment factor (WAF), to the nearest 0.0001;

(D) Method of determining the WAF;

(E) WAF Effective date and hour;

(F) WAF no longer effective date and hour (if applicable;

(G) WAF determination date;

(H) Number of WAF test runs;

(I) Number of Method 1 traverse points in the WAF test;

(J) Number of test ports in the WAF test; and

(K) Number of Method 1 traverse points in the reference flow RATA.

* * * * *

(g) *Contents of the monitoring plan.* The requirements of paragraphs (g) and (h) of this section shall be met on and after January 1, 2009. Notwithstanding this requirement, the provisions of paragraphs (g) and (h) of this section may be implemented prior to January 1, 2009, as follows. In 2008, the owner or operator may opt to record and report the monitoring plan information in paragraphs (g) and (h) of this section, in lieu of recording and reporting the information in paragraphs (e) and (f) of this section. Each monitoring plan shall contain the information in paragraph (g)(1) of this section in electronic format and the information in paragraph (g)(2) of this section in hardcopy format. Electronic storage of all monitoring plan information, including the hardcopy portions, is permissible provided that a paper copy of the information can be furnished upon request for audit purposes.

(1) *Electronic.*

(i) The facility ORISPL number developed by the Department of Energy and used in the National Allowance Data Base (or equivalent facility ID number assigned by EPA, if the facility does not have an ORISPL number). Also provide the following information for each unit and (as applicable) for each common stack and/or pipe, and each multiple stack and/or pipe involved in the monitoring plan:

(A) A representation of the exhaust configuration for the units in the monitoring plan. Provide the ID number of each unit and assign a unique ID number to each common stack, common pipe multiple stack and/or multiple pipe associated with the unit(s) represented in the monitoring plan. For common and multiple stacks and/or pipes, provide the activation date and deactivation date (if applicable) of each stack and/or pipe;

(B) Identification of the monitoring system location(s) (*e.g.*, at the unit-level, on the common stack, at each multiple stack, etc.). Provide an indicator ("flag") if the monitoring location is at a bypass stack or in the ductwork (breeching);

(C) The stack exit height (ft) above ground level and ground level elevation above sea level, and the inside cross-sectional area (ft^2) at the flue exit and at the flow monitoring location (for units with flow monitors, only). Also use appropriate codes to indicate the material(s) of construction and the shape(s) of the stack or duct cross-section(s) at the flue exit and (if applicable) at the flow monitor location;

(D) The type(s) of fuel(s) fired by each unit. Indicate the start and (if applicable) end date of combustion for each type of fuel, and whether the fuel is the primary, secondary, emergency, or startup fuel;

(E) The type(s) of emission controls that are used to reduce SO_2, NO_X, Hg, and particulate emissions from each unit. Also provide the installation date, optimization date, and retirement date (if applicable) of the emission controls, and indicate whether the controls are an original installation;

(F) Maximum hourly heat input capacity of each unit; and

(G) A non-load based unit indicator (if applicable) for units that do not produce electrical or thermal output.

(ii) For each monitored parameter (*e.g.*, SO_2, NO_X, flow, etc.) at each monitoring location, specify the monitoring methodology and the missing data approach for the parameter. If the unmonitored bypass stack approach is used for a particular parameter, indicate this by means of an appropriate code. Provide the activation date/hour, and deactivation date/hour (if applicable) for each monitoring

methodology and each missing data approach.

(iii) For each required continuous emission monitoring system, each fuel flowmeter system, each continuous opacity monitoring system, and each sorbent trap monitoring system (as defined in § 72.2 of this chapter), identify and describe the major monitoring components in the monitoring system (*e.g.*, gas analyzer, flow monitor, opacity monitor, moisture sensor, fuel flowmeter, DAHS software, etc.). Other important components in the system (*e.g.*, sample probe, PLC, data logger, etc.) may also be represented in the monitoring plan, if necessary. Provide the following specific information about each component and monitoring system:

(A) For each required monitoring system:

(*1*) Assign a unique, 3-character alphanumeric identification code to the system;

(*2*) Indicate the parameter monitored by the system;

(*3*) Designate the system as a primary, redundant backup, non-redundant backup, data backup, or reference method backup system, as provided in § 75.10(e); and

(*4*) Indicate the system activation date/hour and deactivation date/hour (as applicable).

(B) For each component of each monitoring system represented in the monitoring plan:

(*1*) Assign a unique, 3-character alphanumeric identification code to the component;

(*2*) Indicate the manufacturer, model and serial number;

(*3*) Designate the component type;

(*4*) For dual-span applications, indicate whether the analyzer component ID represents a high measurement scale, a low scale, or a dual range;

(*5*) For gas analyzers, indicate the moisture basis of measurement;

(*6*) Indicate the method of sample acquisition or operation, (*e.g.*, extractive pollutant concentration monitor or thermal flow monitor); and

(*7*) Indicate the component activation date/hour and deactivation date/hour (as applicable).

(iv) Explicit formulas, using the component and system identification codes for the primary monitoring system, and containing all constants and factors required to derive the required mass emissions, emission rates, heat input rates, etc. from the hourly data recorded by the monitoring systems. Formulas using the system and component ID codes for backup monitoring systems are required only if different formulas for the same parameter are used for the primary and backup monitoring systems (*e.g.*, if the primary system measures pollutant concentration on a different moisture basis from the backup system). Provide the equation number or other appropriate code for each emissions formula (*e.g.*, use code F–1 if Equation F–1 in appendix F to this part is used to calculate SO_2 mass emissions). Also identify each emissions formula with a unique three character alphanumeric code. The formula effective start date/hour and inactivation date/hour (as applicable) shall be included for each formula. The owner or operator of a unit for which the optional low mass emissions excepted methodology in § 75.19 is being used is not required to report such formulas.

(v) For each parameter monitored with CEMS, provide the following information:

(A) Measurement scale (high or low);

(B) Maximum potential value (and method of calculation). If NO_X emission rate in lb/mmBtu is monitored, calculate and provide the maximum potential NO_X emission rate in addition to the maximum potential NO_X concentration;

(C) Maximum expected value (if applicable) and method of calculation;

(D) Span value(s) and full-scale measurement range(s);

(E) Daily calibration units of measure;

(F) Effective date/hour, and (if applicable) inactivation date/hour of each span value;

(G) An indication of whether dual spans are required; and

(H) The default high range value (if applicable) and the maximum allowable low-range value for this option;

(vi) If the monitoring system or excepted methodology provides for the use of a constant, assumed, or default value for a parameter under specific circumstances, then include the following information for each such value for each parameter:

(A) Identification of the parameter;

(B) Default, maximum, minimum, or constant value, and units of measure for the value;

(C) Purpose of the value;

(D) Indicator of use, *i.e.*, during controlled hours, uncontrolled hours, or all operating hours;

(E) Type of fuel;

(F) Source of the value;

(G) Value effective date and hour;

(H) Date and hour value is no longer effective (if applicable); and

(I) For units using the excepted methodology under § 75.19, the applicable SO_2 emission factor.

(vii) Unless otherwise specified in section 6.5.2.1 of appendix A to this part, for each unit or common stack on which hardware CEMS are installed:

(A) Maximum hourly gross load (in MW, rounded to the nearest MW, or steam load in 1000 lb/hr (*i.e.*, klb/hr), rounded to the nearest klb/hr, or thermal output in mmBtu/hr, rounded to the nearest mmBtu/hr), for units that produce electrical or thermal output;

(B) The upper and lower boundaries of the range of operation (as defined in section 6.5.2.1 of appendix A to this part), expressed in megawatts, thousands of lb/hr of steam, mmBtu/hr of thermal output, or ft/sec (as applicable);

(C) Except for peaking units, identify the most frequently and second most frequently used load (or operating) levels (*i.e.*, low, mid, or high) in accordance with section 6.5.2.1 of appendix A to this part, expressed in megawatts, thousands of lb/hr of steam, mmBtu/hr of thermal output, or ft/sec (as applicable);

(D) Except for peaking units, an indicator of whether the second most frequently used load (or operating) level is designated as normal in section 6.5.2.1 of appendix A to this part;

(E) The date of the data analysis used to determine the normal load (or operating) level(s) and the two most frequently-used load (or operating) levels (as applicable); and

(F) Activation and deactivation dates and hours, when the maximum hourly gross load, boundaries of the range of operation, normal load (or operating) level(s) or two most frequently-used load (or operating) levels change and are updated.

(viii) For each unit for which CEMS are not installed:

(A) Maximum hourly gross load (in MW, rounded to the nearest MW, or steam load in klb/hr, rounded to the nearest klb/hr, or steam load in mmBtu/hr, rounded to the nearest mmBtu/hr);

(B) The upper and lower boundaries of the range of operation (as defined in section 6.5.2.1 of appendix A to this part), expressed in megawatts, mmBtu/hr of thermal output, or thousands of lb/hr of steam;

(C) Except for peaking units and units using the low mass emissions excepted methodology under § 75.19, identify the load level designated as normal, pursuant to section 6.5.2.1 of appendix A to this part, expressed in megawatts, mmBtu/hr of thermal output, or thousands of lb/hr of steam;

(D) The date of the load analysis used to determine the normal load level (as applicable); and

(E) Activation and deactivation dates and hours, when the maximum hourly gross load, boundaries of the range of

operation, or normal load level change and are updated.

(ix) For each unit with a flow monitor installed on a rectangular stack or duct, if a wall effects adjustment factor (WAF) is determined and applied to the hourly flow rate data:

(A) Stack or duct width at the test location, ft;

(B) Stack or duct depth at the test location, ft;

(C) Wall effects adjustment factor (WAF), to the nearest 0.0001;

(D) Method of determining the WAF;

(E) WAF Effective date and hour;

(F) WAF no longer effective date and hour (if applicable);

(G) WAF determination date;

(H) Number of WAF test runs;

(I) Number of Method 1 traverse points in the WAF test;

(J) Number of test ports in the WAF test; and

(K) Number of Method 1 traverse points in the reference flow RATA.

(2) *Hardcopy.*

(i) Information, including (as applicable): identification of the test strategy; protocol for the relative accuracy test audit; other relevant test information; calibration gas levels (percent of span) for the calibration error test and linearity check; calculations for determining maximum potential concentration, maximum expected concentration (if applicable), maximum potential flow rate, maximum potential NO_X emission rate, and span; and apportionment strategies under §§ 75.10 through 75.18.

(ii) Description of site locations for each monitoring component in the continuous emission or opacity monitoring systems, including schematic diagrams and engineering drawings specified in paragraphs (e)(2)(iv) and (e)(2)(v) of this section and any other documentation that demonstrates each monitor location meets the appropriate siting criteria.

(iii) A data flow diagram denoting the complete information handling path from output signals of CEMS components to final reports.

(iv) For units monitored by a continuous emission or opacity monitoring system, a schematic diagram identifying entire gas handling system from boiler to stack for all affected units, using identification numbers for units, monitoring systems and components, and stacks corresponding to the identification numbers provided in paragraphs (g)(1)(i) and (g)(1)(iii) of this section. The schematic diagram must depict stack height and the height of any monitor locations. Comprehensive and/or separate schematic diagrams shall be used to describe groups of units using a common stack.

(v) For units monitored by a continuous emission or opacity monitoring system, stack and duct engineering diagrams showing the dimensions and location of fans, turning vanes, air preheaters, monitor components, probes, reference method sampling ports, and other equipment that affects the monitoring system location, performance, or quality control checks.

(h) *Contents of monitoring plan for specific situations.* The following additional information shall be included in the monitoring plan for the specific situations described:

(1) For each gas-fired unit or oil-fired unit for which the owner or operator uses the optional protocol in appendix D to this part for estimating heat input and/or SO_2 mass emissions, or for each gas-fired or oil-fired peaking unit for which the owner/operator uses the optional protocol in appendix E to this part for estimating NO_X emission rate (using a fuel flowmeter), the designated representative shall include the following additional information for each fuel flowmeter system in the monitoring plan:

(i) *Electronic.*

(A) Parameter monitored;

(B) Type of fuel measured, maximum fuel flow rate, units of measure, and basis of maximum fuel flow rate (*i.e.,* upper range value or unit maximum) for each fuel flowmeter;

(C) Test method used to check the accuracy of each fuel flowmeter;

(D) Monitoring system identification code;

(E) The method used to demonstrate that the unit qualifies for monthly GCV sampling or for daily or annual fuel sampling for sulfur content, as applicable; and

(F) Activation date/hour and (if applicable) inactivation date/hour for the fuel flowmeter system;

(ii) *Hardcopy.*

(A) A schematic diagram identifying the relationship between the unit, all fuel supply lines, the fuel flowmeter(s), and the stack(s). The schematic diagram must depict the installation location of each fuel flowmeter and the fuel sampling location(s). Comprehensive and/or separate schematic diagrams shall be used to describe groups of units using a common pipe;

(B) For units using the optional default SO_2 emission rate for "pipeline natural gas" or "natural gas" in appendix D to this part, the information on the sulfur content of the gaseous fuel used to demonstrate compliance with either section 2.3.1.4 or 2.3.2.4 of appendix D to this part;

(C) For units using the 720 hour test under 2.3.6 of Appendix D of this part to determine the required sulfur sampling requirements, report the procedures and results of the test; and

(D) For units using the 720 hour test under 2.3.5 of Appendix D of this part to determine the appropriate fuel GCV sampling frequency, report the procedures used and the results of the test.

(2) For each gas-fired peaking unit and oil-fired peaking unit for which the owner or operator uses the optional procedures in appendix E to this part for estimating NO_X emission rate, the designated representative shall include in the monitoring plan:

(i) *Electronic.* Unit operating and capacity factor information demonstrating that the unit qualifies as a peaking unit, as defined in § 72.2 of this chapter for the current calendar year or ozone season, including: capacity factor data for three calendar years (or ozone seasons) as specified in the definition of peaking unit in § 72.2 of this chapter; the method of qualification used; and an indication of whether the data are actual or projected data.

(ii) *Hardcopy.*

(A) A protocol containing methods used to perform the baseline or periodic NO_X emission test; and

(B) Unit operating parameters related to NO_X formation by the unit.

(3) For each gas-fired unit and diesel-fired unit or unit with a wet flue gas pollution control system for which the designated representative claims an opacity monitoring exemption under § 75.14, the designated representative shall include in the hardcopy monitoring plan the information specified under § 75.14(b), (c), or (d), demonstrating that the unit qualifies for the exemption.

(4) For each unit using the low mass emissions excepted methodology under § 75.19 the designated representative shall include the following additional information in the monitoring plan that accompanies the initial certification application:

(i) *Electronic.* For each low mass emissions unit, report the results of the analysis performed to qualify as a low mass emissions unit under § 75.19(c). This report will include either the previous three years actual or projected emissions. The following items should be included:

(A) Current calendar year of application;

(B) Type of qualification;

(C) Years one, two, and three;

(D) Annual and/or ozone season measured, estimated or projected NO_X

mass emissions for years one, two, and three;

(E) Annual measured, estimated or projected SO_2 mass emissions (if applicable) for years one, two, and three; and

(F) Annual or ozone season operating hours for years one, two, and three.

(ii) *Hardcopy.*

(A) A schematic diagram identifying the relationship between the unit, all fuel supply lines and tanks, any fuel flowmeter(s), and the stack(s). Comprehensive and/or separate schematic diagrams shall be used to describe groups of units using a common pipe;

(B) For units which use the long term fuel flow methodology under § 75.19(c)(3), the designated representative must provide a diagram of the fuel flow to each affected unit or group of units and describe in detail the procedures used to determine the long term fuel flow for a unit or group of units for each fuel combusted by the unit or group of units;

(C) A statement that the unit burns only gaseous fuel(s) and/or fuel oil and a list of the fuels that are burned or a statement that the unit is projected to burn only gaseous fuel(s) and/or fuel oil and a list of the fuels that are projected to be burned;

(D) A statement that the unit meets the applicability requirements in §§ 75.19(a) and (b); and

(E) Any unit historical actual, estimated and projected emissions data and calculated emissions data demonstrating that the affected unit qualifies as a low mass emissions unit under §§ 75.19(a) and 75.19(b).

(5) For qualification as a gas-fired unit, as defined in § 72.2 of this part, the designated representative shall include in the monitoring plan, in electronic format, the following: current calendar year, fuel usage data for three calendar years (or ozone seasons) as specified in the definition of gas-fired in § 72.2 of this part, the method of qualification used, and an indication of whether the data are actual or projected data.

(6) For each monitoring location with a stack flow monitor that is exempt from performing 3-load flow RATAs (peaking units, bypass stacks, or by petition) the designated representative shall include in the monitoring plan an indicator of exemption from 3-load flow RATA using the appropriate exemption code.

22. Section 75.57 is amended by:

a. Adding the phrase ", or mmBtu/hr of thermal output, rounded to the nearest mmBtu/hr" after the phrase "rounded to the nearest 1000 lb/hr", in paragraph (b)(3); and

b. Revising Table 4a in paragraph (c)(4)(iv).

The revisions and additions read as follows:

§ 75.57 General recordkeeping provisions.

* * * * *

(c) * * *

(4) * * *

(iv) * * *

TABLE 4A.—CODES FOR METHOD OF EMISSIONS AND FLOW DETERMINATION

Code	Hourly emissions/flow measurement or estimation method
1	Certified primary emission/flow monitoring system.
2	Certified backup emission/flow monitoring system.
3	Approved alternative monitoring system.
4	Reference method: SO_2: Method 6C. Flow: Method 2 or its allowable alternatives under appendix A to part 60 of this chapter. NO_X: Method 7E. CO_2 or O_2: Method 3A.
5	For units with add-on SO_2 and/or NO_X emission controls: SO_2 concentration or NO_X emission rate estimate from Agency preapproved parametric monitoring method.
6	Average of the hourly SO_2 concentrations, CO_2 concentrations, O_2 concentrations, NO_X concentrations, flow rates, moisture percentages or NO_X emission rates for the hour before and the hour following a missing data period.
7	Initial missing data procedures used. Either: (a) The average of the hourly SO_2 concentration, CO_2 concentration, O_2 concentration, or moisture percentage for the hour before and the hour following a missing data period; or (b) the arithmetic average of all NO_X concentration, NO_X emission rate, or flow rate values at the corresponding load range (or a higher load range), or at the corresponding operational bin (non-load-based units, only); or (c) the arithmetic average of all previous NO_X concentration, NO_X emission rate, or flow rate values (non-load-based units, only).
8	90th percentile hourly SO_2 concentration, CO_2 concentration, NO_X concentration, flow rate, moisture percentage, or NO_X emission rate or 10th percentile hourly O_2 concentration or moisture percentage in the applicable lookback period (moisture missing data algorithm depends on which equations are used for emissions and heat input).
9	95th percentile hourly SO_2 concentration, CO_2 concentration, NO_X concentration, flow rate, moisture percentage, or NO_X emission rate or 5th percentile hourly O_2 concentration or moisture percentage in the applicable lookback period (moisture missing data algorithm depends on which equations are used for emissions and heat input).
10	Maximum hourly SO_2 concentration, CO_2 concentration, NO_X concentration, flow rate, moisture percentage, or NO_X emission rate or minimum hourly O_2 concentration or moisture percentage in the applicable lookback period (moisture missing data algorithm depends on which equations are used for emissions and heat input).
11	Average of hourly flow rates, NO_X concentrations or NO_X emission rates in corresponding load range, for the applicable lookback period. For non-load-based units, report either the average flow rate, NO_X concentration or NO_X emission rate in the applicable lookback period, or the average flow rate or NO_X value at the corresponding operational bin (if operational bins are used).
12	Maximum potential concentration of SO_2, maximum potential concentration of CO_2, maximum potential concentration of NO_X maximum potential flow rate, maximum potential NO_X emission rate, maximum potential moisture percentage, minimum potential O_2 concentration or minimum potential moisture percentage, as determined using § 72.2 of this chapter and section 2.1 of appendix A to this part (moisture missing data algorithm depends on which equations are used for emissions and heat input).
13	Maximum expected concentration of SO_2, maximum expected concentration of NO_X, maximum expected Hg concentration, or maximum controlled NO_X emission rate. (*See* § 75.34(a)(5)).
14	Diluent cap value (if the cap is replacing a CO_2 measurement, use 5.0 percent for boilers and 1.0 percent for turbines; if it is replacing an O_2 measurement, use 14.0 percent for boilers and 19.0 percent for turbines).

TABLE 4A.—CODES FOR METHOD OF EMISSIONS AND FLOW DETERMINATION—Continued

Code	Hourly emissions/flow measurement or estimation method
15	1.25 times the maximum hourly controlled SO_2 concentration, Hg concentration, NO_X concentration at the corresponding load or operational bin, or NO_X emission rate at the corresponding load or operational bin, in the applicable lookback period (*See* § 75.34(a)(5)).
16	SO_2 concentration value of 2.0 ppm during hours when only "very low sulfur fuel", as defined in § 72.2 of this chapter, is combusted.
17	Like-kind replacement non-redundant backup analyzer.
19	200 percent of the MPC; default high range value.
20	200 percent of the full-scale range setting (full-scale exceedance of high range).
21	Negative hourly SO_2 concentration, NO_X concentration, percent moisture, or NO_X emission rate replaced with zero.
22	Hourly average SO_2 or NO_X concentration, measured by a certified monitor at the control device inlet (units with add-on emission controls only).
23	Maximum potential SO_2 concentration, NO_X concentration, CO_2 concentration, NO_X emission rate or flow rate, or minimum potential O_2 concentration or moisture percentage, for an hour in which flue gases are discharged through an unmonitored bypass stack.
24	Maximum expected NO_X concentration, or maximum controlled NO_X emission rate for an hour in which flue gases are discharged downstream of the NO_X emission controls through an unmonitored bypass stack, and the add-on NO_X emission controls are confirmed to be operating properly.
25	Maximum potential NO_X emission rate (MER). (Use only when a NO_X concentration full-scale exceedance occurs and the diluent monitor is unavailable.)
26	1.0 mmBtu/hr substituted for Heat Input Rate for an operating hour in which the calculated Heat Input Rate is zero or negative.
32	Hourly Hg concentration determined from analysis of a single trap multiplied by a factor of 1.222 when one of the paired traps is invalidated or damaged (*See* Appendix K § 8).
33	Hourly Hg concentration determined from the trap resulting in the higher Hg concentration when the relative deviation between the paired traps is greater than 10 percent (*See* Appendix K § 8).
54	Other quality assured methodologies approved through petition. These hours are included in missing data lookback and are treated as unavailable hours for percent monitor availability calculations.
55	Other substitute data approved through petition. These hours are not included in missing data lookback and are treated as unavailable hours for percent monitor availability calculations.

* * * * *

23. Section 75.58 is amended by:

a. Revising paragraph (b)(3) introductory text;

b. Removing paragraphs (b)(3)(iii) and (b)(3)(iv);

c. Removing the word "and" from paragraph (c)(1)(xii);

d. Replacing the period with a semicolon and adding the word "and" to the end of the paragraph, in paragraph (c)(1)(xiii);

e. Adding paragraph (c)(1)(xiv);

f. Replacing the period with a semicolon and adding the word "and" to the end of the paragraph, in paragraph (c)(4)(x);

g. Adding paragraph (c)(4)(xi);

h. Replacing the period with a semicolon and adding the word "and" to the end of the paragraph, in paragraph (d)(1)(x);

i. Adding paragraph (d)(1)(xi);

j. Replacing the period with a semicolon and adding the word "and" to the end of the paragraph, in paragraph (d)(2)(x);

k. Adding paragraph (d)(2)(xi);

l. Revising paragraph (f)(1)(iii);

m. Removing the word "and" at the end of paragraph (f)(1)(xi);

n. Replacing the period with a semicolon at the end of paragraph (f)(1)(xii);

o. Adding paragraphs (f)(1)(xiii) and (f)(1)(xiv); and

p. Replacing the word "Component" with the word "Monitoring", in paragraph (f)(2)(x).

The revisions and additions read as follows:

§ 75.58 General recordkeeping provisions for specific situations.

* * * * *

(b) * * *

(3) Except as otherwise provided in § 75.34(d), for units with add-on SO_2 or NO_X emission controls following the provisions of § 75.34(a)(1), (a)(2), (a)(3) or (a)(5), and for units with add-on Hg emission controls, the owner or operator shall record:

* * * * *

(c) * * *

(1) * * *

(xiv) Heat input formula ID and SO_2 Formula ID (required beginning January 1, 2009).

* * * * *

(4) * * *

(xi) Heat input formula ID and SO_2 Formula ID (required beginning January 1, 2009).

* * * * *

(d) * * *

(1) * * *

(xi) Heat input rate formula ID (required beginning January 1, 2009).

(2) * * *

(xi) Heat input rate formula ID (required beginning January 1, 2009).

* * * * *

(f) * * *

(1) * * *

(iii) Fuel type (pipeline natural gas, natural gas, other gaseous fuel, residual oil, or diesel fuel). If more than one type of fuel is combusted in the hour, either:

(A) Indicate the fuel type which results in the highest emission factors for NO_X (this option is in effect through December 31, 2008); or

(B) Indicate the fuel type resulting in the highest emission factor for each parameter (SO_2, NO_X emission rate, and CO_2) separately (this option is required on and after January 1, 2009);

* * * * *

(xiii) Base or peak load indicator (as applicable); and

(xiv) Multiple fuel flag.

* * * * *

24. Section 75.59 is amended by:

a. Adding the phrase "(on and after January 1, 2009, only the component identification code is required)" after the word "code", in paragraph (a)(1)(i);

b. Revising paragraph (a)(1)(viii);

c. Replacing the phrase "For the qualifying test for off-line calibration, the owner or operator shall indicate" with the phrase "Indication of", in paragraph (a)(1)(xi);

d. Adding the phrase "(after January 1, 2009, only the component

identification code is required)" after the word "code", in paragraph (a)(2)(i);

e. Adding the phrase "(on and after January 1, 2009, only the component identification code is required)" after the word "code", in paragraph (a)(3)(i);

f. Adding the phrase "(only span scale is required on and after January 1, 2009)" after the word "scale", in paragraph (a)(3)(ii);

g. Adding the phrase "(on and after January 1, 2009, only the system identification code is required)" after the word "code", in paragraph (a)(4)(i);

h. Removing the word "and" after the semicolon at the end of paragraph (a)(4)(vi)(L);

i. Replacing the period with a semicolon and adding the word "and" at the end of paragraph (a)(4)(vi)(M);

j. Adding paragraph (a)(4)(vi)(N);

k. Removing the word "and" after the semicolon, at the end of paragraph (a)(4)(vii)(K);

l. Replacing the period with a semicolon and adding the word "and" at the end of paragraph (a)(4)(vii)(L);

m. Adding paragraph (a)(4)(vii)(M);

n. Revising paragraph (a)(6) introductory text;

o. Adding the phrase "(on and after January 1, 2009, only the component identification code is required)" after the word "code", in paragraph (a)(6)(i);

p. Replace the phrase "Cycle time result for the entire system" with the phrase "Total cycle time", in paragraph (a)(6)(ix);

q. Adding paragraphs (a)(7)(ix) and (a)(7)(x);

r. Revising paragraph (a)(8);

s. Removing and reserving paragraph (a)(12)(iii);

t. Removing the number "(2)" from the paragraph identifier "§ 75.64(a)(2)" in the second sentence of paragraph (a)(13);

u. Adding the phrase "(on and after January 1, 2009, only the component identification code is required)" after the word "tested", in paragraphs (b)(1)(ii) and (b)(2)(i);

v. Adding the phrase "(on and after January 1, 2009, only the monitoring system identification code is required)" after the word "code", in paragraph (b)(4)(i)(A);

w. Removing the word "and" after the semicolon at the end of paragraph (b)(4)(i)(H);

x. Replacing the period with a semicolon and adding the word "and" at the end of paragraph (b)(4)(i)(I);

y. Adding paragraph (b)(4)(i)(J);

z. Revising paragraphs (b)(4)(ii)(A), (b)(4)(ii)(B), and (b)(4)(ii)(F);

aa. Removing the word "and" after the semicolon at the end of paragraph (b)(4)(ii)(L);

bb. Replacing the period with a semicolon and adding the word "and" at the end of paragraph (b)(4)(ii)(M);

cc. Adding paragraph (b)(4)(ii)(N);

dd. Adding the phrase "(on and after January 1, 2009, component identification codes shall be reported in addition to the monitoring system identification code)" after the second occurrence of the word "system" in paragraphs (b)(5)(i)(B), (b)(5)(ii)(B), and (b)(5)(iii)(B);

ee. Adding the phrase "This requirement remains in effect through December 31, 2008" after the word "run", in paragraph (b)(5)(i)(H);

ff. Adding the phrase "(as applicable). This requirement remains in effect through December 31, 2008" after the word "level", in paragraph (b)(5)(iv)(A);

gg. Removing the word "and" after the semicolon at the end of paragraph (b)(5)(iv)(G);

hh. Replacing the period with a semicolon and adding the word "and" at the end of paragraph (b)(5)(iv)(H);

ii. Adding paragraph (b)(5)(iv)(I);

jj. Removing the word "and" after the semicolon at the end of paragraph (d)(1)(xi);

kk. Replacing the period with a semicolon and adding the word "and" at the end of paragraph (d)(1)(xii);

ll. Adding paragraph (d)(1)(xiii);

mm. Removing the phrase ", multiplied by 1.15, if appropriate" from paragraph (d)(2)(iii);

nn. Removing the word "and" after the semicolon at the end of paragraph (d)(2)(iv);

oo. Replacing the period with a semicolon at the end of paragraph (d)(2)(v); and

pp. Adding paragraphs (d)(2)(vi), (d)(2)(vii), (e) and (f).

The revisions and additions read as follows:

§ 75.59 Certification, quality, assurance, and quality control record provisions.

* * * * *

(a) * * *

(1) * * *

(viii) For 7-day calibration error tests, a test number and reason for test;

* * * * *

(4) * * *

(vi) * * *

(N) Test number.

(vii) * * *

(M) An indicator ("flag") if separate reference ratios are calculated for each multiple stack.

* * * * *

(6) For each SO_2, NO_X, Hg, or CO_2 pollutant concentration monitor, each component of a NO_X-diluent continuous emission monitoring system, and each CO_2 or O_2 monitor used to determine heat input, the owner or operator shall record the following information for the cycle time test:

* * * * *

(7) * * *

(ix) For a unit with a flow monitor installed on a rectangular stack or duct, if a site-specific default or measured wall effects adjustment factor (WAF) is used to correct the stack gas volumetric flow rate data to account for velocity decay near the stack or duct wall, the owner or operator shall keep records of the following for each flow RATA performed with EPA Method 2, subsequent to the WAF determination:

(A) Monitoring system ID;

(B) Test number;

(C) Operating level;

(D) RATA end date and time;

(E) Number of Method 1 traverse points; and

(F) Wall effects adjustment factor (WAF), to the nearest 0.0001.

(x) For each RATA run using Method 29 to determine Hg concentration:

(A) Percent CO_2 and O_2 in the stack gas, dry basis;

(B) Moisture content of the stack gas (percent H_2O);

(C) Average stack gas temperature (°F);

(D) Dry gas volume metered (dscm);

(E) Percent isokinetic;

(F) Particulate Hg collected in the front half of the sampling train, corrected for the front-half blank value (μg); and

(G) Total vapor phase Hg collected in the back half of the sampling train, corrected for the back-half blank value (μg).

(8) For each certified continuous emission monitoring system, continuous opacity monitoring system, excepted monitoring system, or alternative monitoring system, the date and description of each event which requires certification, recertification, or certain diagnostic testing of the system and the date and type of each test performed. If the conditional data validation procedures of § 75.20(b)(3) are to be used to validate and report data prior to the completion of the required certification, recertification, or diagnostic testing, the date and hour of the probationary calibration error test shall be reported to mark the beginning of conditional data validation.

* * * * *

(b) * * *

(4) * * *

(i) * * *

(J) Test number.

(ii) * * *

(A) Completion date and hour of most recent primary element inspection or

test number of the most recent primary element inspection (as applicable); (on and after January 1, 2009, the test number of the most recent primary element inspection is required in lieu of the completion date and hour for the most recent primary element inspection);

(B) Completion date and hour of most recent flow meter of transmitter accuracy test or test number of the most recent flowmeter or transmitter accuracy test (as applicable); (on and after January 1, 2009, the test number of the most recent flowmeter or transmitter accuracy test is required in lieu of the completion date and hour for the most recent flowmeter or transmitter accuracy test);

* * * * *

(F) Average load, in megawatts, 1000 lb/hr of steam, or mmBtu/hr thermal output;

* * * * *

(N) Monitoring system identification code. * * *

* * * * *

(5) * * *

(iv) * * *

(I) Component identification code (required on and after January 1, 2009).

* * * * *

(d) * * *

(1) * * *

(xiii) An indicator ("flag") if the run is used to calculate the highest 3-run average NO_X emission rate at any load level.

(2) * * *

(vi) Indicator of whether the testing was done at base load, peak load or both (if appropriate); and

(vii) The default NO_X emission rate for peak load hours (if applicable).

* * * * *

(e) *Excepted monitoring for Hg low mass emission units under § 75.81(b).* For qualifying coal-fired units using the alternative low mass emission methodology under § 75.81(b), the owner or operator shall record the data elements described in § 75.59(a)(7)(vii), § 75.59(a)(7)(viii), or § 75.59(a)(7)(x), as applicable, for each run of each Hg emission test and re-test required under § 75.81(c)(1) or § 75.81(d)(4)(iii).

(f) *DAHS Verification.* For each DAHS (missing data and formula) verification that is required for initial certification, recertification, or for certain diagnostic testing of a monitoring system, record the date and hour that the DAHS verification is successfully completed. (This requirement only applies to units that report monitoring plan data in accordance with § 75.53(g) and (h).)

* * * * *

25. Section 75.60 is amended by adding paragraph (b)(8) to read as follows:

§ 75.60 General provisions.

* * * * *

(b) * * *

(8) *Routine retest reports for Hg low mass emissions units.* If requested in writing (or by electronic mail) by the applicable EPA Regional Office, appropriate State, and/or appropriate local air pollution control agency, the designated representative shall submit a hardcopy report for a semiannual or annual retest required under § 75.81(d)(4)(iii) for a Hg low mass emissions unit, within 45 days after completing the test or within 15 days of receiving the request, whichever is later. The designated representative shall report, at a minimum, the following hardcopy information to the applicable EPA Regional Office, appropriate State, and/or appropriate local air pollution control agency that requested the hardcopy report: A summary of the test results; the raw reference method data for each test run; the raw data and results of all pretest, post-test, and post-run quality-assurance checks of the reference method; the raw data and results of moisture measurements made during the test runs (if applicable); diagrams illustrating the test and sample point locations; a copy of the test protocol used; calibration certificates for the gas standards or standard solutions used in the testing; laboratory calibrations of the source sampling equipment; and the names of the key personnel involved in the test program, including test team members, plant contact persons, agency representatives and test observers.

* * * * *

26. Section 75.61 is amended by:

a. Revising the first sentence of paragraph (a)(1) introductory text;

b. Revising paragraph (a)(3);

c. Revising the first sentence of paragraph (a)(5) introductory text; and

d. Adding paragraphs (a)(7) and (a)(8)

The revisions and additions read as follows:

§ 75.61 Notifications.

(a) * * *

(1) *Initial certification and recertification test notifications.* The owner or operator or designated representative for an affected unit shall submit written notification of initial certification tests and revised test dates as specified in § 75.20 for continuous emission monitoring systems, for the excepted Hg monitoring methodology under § 75.81(b), for alternative monitoring systems under subpart E of this part, or for excepted monitoring systems under appendix E to this part, except as provided in paragraphs (a)(1)(iii), (a)(1)(iv) and (a)(4) of this section.* * *

* * * * *

(3) *Unit shutdown and recommencement of commercial operation.* For an affected unit that will be shutdown on the relevant compliance date specified in § 75.4 or in a State or Federal pollutant mass emissions reduction program that adopts the monitoring and reporting requirements of this part, if the owner or operator is relying on the provisions in § 75.4(d) to postpone certification testing, the designated representative for the unit shall submit notification of unit shutdown and recommencement of commercial operation as follows:

(i) For planned unit shutdowns (*e.g.*, extended maintenance outages), written notification of the planned shutdown date shall be provided at least 21 days prior to the applicable compliance date, and written notification of the planned date of recommencement of commercial operation shall be provided at least 21 days in advance of unit restart. If the actual shutdown date or the actual date of recommencement of commercial operation differs from the planned date, written notice of the actual date shall be submitted no later than 7 days following the actual date of shutdown or of recommencement of commercial operation, as applicable;

(ii) For unplanned unit shutdowns (*e.g.*, forced outages), written notification of the actual shutdown date shall be provided no more than 7 days after the shutdown, and written notification of the planned date of recommencement of commercial operation shall be provided at least 21 days in advance of unit restart. If the actual date of recommencement of commercial operation differs from the expected date, written notice of the actual date shall be submitted no later than 7 days following the actual date of recommencement of commercial operation.

* * * * *

(5) *Periodic relative accuracy test audits, appendix E retests, and low mass emissions unit retests.* The owner or operator or designated representative of an affected unit shall submit written notice of the date of periodic relative accuracy testing performed under section 2.3.1 of appendix B to this part, of periodic retesting performed under section 2.2 of appendix E to this part, of periodic retesting of low mass emissions units performed under § 75.19(c)(1)(iv)(D), and of periodic

retesting of Hg low mass emissions units performed under § 75.81(d)(4)(iii), no later than 21 days prior to the first scheduled day of testing. * * *

* * * * *

(7) *Long-term cold storage and recommencement of commercial operation.* The designated representative for an affected unit that is placed into long-term cold storage that is relying on the provisions in § 75.4(d) or § 75.64(a), either to postpone certification testing or to discontinue the submittal of quarterly reports during the period of long-term cold storage, shall provide written notification of long-term cold storage status and recommencement of commercial operation as follows:

(i) Whenever an affected unit has been placed into long-term cold storage, written notification of the date and hour that the unit was shutdown and a statement from the designated representative stating that the shutdown is expected to last for at least two years from that date, in accordance with the definition for long-term cold storage of a unit as provided in § 72.2.

(ii) Whenever an affected unit that has been placed into long-term cold storage is expected to resume operation, written notification shall be submitted 45 calendar days prior to the planned date of recommencement of commercial operation. If the actual date of recommencement of commercial operation differs from the expected date, written notice of the actual date shall be submitted no later than 7 days following the actual date of recommencement of commercial operation.

(8) *Certification deadline date for new or newly affected units.* The designated representative of a new or newly affected unit shall provide notification of the date on which the relevant deadline for initial certification is reached, either as provided in § 75.4(b) or § 75.4(c), or as specified in a State or Federal SO_2, NO_X, or Hg mass emission reduction program that incorporates by reference, or otherwise adopts, the monitoring, recordkeeping, and reporting requirements of subpart F, G, H, or I of this part. The notification shall be submitted no later than 7 calendar days after the applicable certification deadline is reached.

* * * * *

27. Section 75.62 is amended by:

a. Revising paragraph (a)(1); and

b. Replacing the number "45" with the number "21" before the phrase "days prior", in paragraph (a)(2).

The revisions and additions read as follows:

§ 75.62 Monitoring plan submittals.

(a) * * *

(1) *Electronic.* Using the format specified in paragraph (c) of this section, the designated representative for an affected unit shall submit a complete, electronic, up-to-date monitoring plan file (except for hardcopy portions identified in paragraph (a)(2) of this section) to the Administrator as follows: no later than 21 days prior to the initial certification tests; at the time of each certification or recertification application submission; and (prior to or concurrent with) the submittal of the electronic quarterly report for a reporting quarter where an update of the electronic monitoring plan information is required, either under § 75.53(b) or elsewhere in this part.

* * * * *

28. Section 75.63 is amended by:

a. Removing the phrase "and a hardcopy certification application form (EPA form 7610–14)" from paragraph (a)(1)(i)(A);

b. Revising paragraph (a)(1)(ii)(A);

c. Adding the phrase "or § 75.53(h)(4)(ii) (as applicable)" after the identifier "§ 75.53(f)(5)(ii)", in paragraph (a)(1)(ii)(B);

d. Removing the phrase "and a hardcopy certification application form (EPA form 7610–14)" after the word "section", in paragraph (a)(2)(i);

e. Revising paragraph (a)(2)(iii);

f. Removing and reserving paragraph (b)(2)(iii);

g. Revising paragraph (b)(2)(iv) by adding the words "certifying the accuracy of the submission" after the word "signature".

The revisions read as follows:

§ 75.63 Initial Certification or Recertification Application.

(a) * * *

(1) * * *

(ii) * * *

(A) To the Administrator, the electronic low mass emission qualification information required by § 75.53(f)(5)(i) or § 75.53(h)(4)(i) (as applicable) and paragraph (b)(1)(i) of this section; and

* * * * *

(2) * * *

(iii) Notwithstanding the requirements of paragraphs (a)(2)(i) and (a)(2)(ii) of this section, for an event for which the Administrator determines that only diagnostic tests (see § 75.20(b)) are required rather than recertification testing, no hardcopy submittal is required; however, the results of all diagnostic test(s) shall be submitted prior to or concurrent with the electronic quarterly report required under § 75.64. Notwithstanding the requirement of § 75.59(e), for DAHS (missing data and formula) verifications, no hardcopy submittal is required; the owner or operator shall keep these test results on-site in a format suitable for inspection.

* * * * *

29. Section 75.64 is amended by:

a. Revising paragraph (a) introductory text;

b. Revising paragraph (a)(2)(xiv);

c. Removing paragraph (a)(8);

d. Redesignating paragraphs (a)(3) through (a)(7) as paragraphs (a)(8) through (a)(12), and redesignating paragraphs (a)(9) through (a)(11) as paragraphs (a)(13) through (a)(15);

e. Adding new paragraphs (a)(3) through (a)(7); and

f. Replacing the citation "§ 75.59", with "§ 75.58(f)(2)" at the end of newly designated paragraph (a)(14).

The revisions and additions read as follows:

§ 75.64 Quarterly reports.

(a) *Electronic submission.* The designated representative for an affected unit shall electronically report the data and information in paragraphs (a), (b), and (c) of this section to the Administrator quarterly, beginning with the data from the earlier of the calendar quarter corresponding to the date of provisional certification or the calendar quarter corresponding to the relevant deadline for initial certification in § 75.4(a), (b), or (c). The initial quarterly report shall contain hourly data beginning with the hour of provisional certification or the hour corresponding to the relevant certification deadline, whichever is earlier. For an affected unit subject to § 75.4(d) that is shutdown on the relevant compliance date in § 75.4(a) or has been placed in long-term cold storage (as defined in § 72.2 of this chapter), quarterly reports are not required. In such cases, the owner or operator shall submit quarterly reports for the unit beginning with the data from the quarter in which the unit recommences commercial operation (where the initial quarterly report contains hourly data beginning with the first hour of recommenced commercial operation of the unit). For units placed into long-term cold storage during a reporting quarter, the exemption from submitting quarterly reports begins with the calendar quarter following the date that the unit is placed into long-term cold storage. For any provisionally-certified monitoring system, § 75.20(a)(3) shall apply for initial certifications, and § 75.20(b)(5) shall apply for recertifications. Each electronic report must be submitted to

the Administrator within 30 days following the end of each calendar quarter. Prior to January 1, 2008, each electronic report shall include for each affected unit (or group of units using a common stack), the information provided in paragraphs (a)(1), (a)(2), and (a)(8) through (a)(15) of this section. During the time period of January 1, 2008 to January 1, 2009, each electronic report shall include either the information provided in paragraphs (a)(1), (a)(2), and (a)(8) through (a)(15) of this section or the information provided in paragraphs (a)(3) through (a)(15). On and after January 1, 2009, the owner or operator shall meet the requirements of paragraphs (a)(3) through (a)(15) of this section only. Each electronic report shall also include the date of report generation.

* * * * *

(2) * * *

(xiii) Supplementary RATA information required under § 75.59(a)(7), except that:

(A) The applicable data elements under § 75.59(a)(7)(ii)(A) through (T) and under § 75.59(a)(7)(iii)(A) through (M) shall be reported for flow RATAs at circular or rectangular stacks (or ducts) in which angular compensation for yaw and/or pitch angles is used (i.e., Method 2F or 2G), with or without wall effects adjustments;

(B) The applicable data elements under § 75.59(a)(7)(ii)(A) through (T) and under § 75.59(a)(7)(iii)(A) through (M) shall be reported for any flow RATA run at a circular stack in which Method 2 is used and a wall effects adjustment factor is determined by direct measurement;

(C) The data under § 75.59(a)(7)(ii)(T) shall be reported for all flow RATAs at circular stacks in which Method 2 is used and a default wall effects adjustment factor is applied; and

(D) The data under § 75.59(a)(7)(ix)(A) through (F) shall be reported for all flow RATAs at rectangular stacks or ducts in which Method 2 is used and a wall effects adjustment factor is applied.

(3) Facility identification information, including:

(i) Facility/ORISPL number;

(ii) Calendar quarter and year for the data contained in the report; and

(iii) Version of the electronic data reporting format used for the report.

(4) In accordance with § 75.62(a)(1), if any monitoring plan information required in § 75.53 requires an update, either under § 75.53(b) or elsewhere in this part, submission of the electronic monitoring plan update shall be completed prior to or concurrent with the submittal of the quarterly electronic data report for the appropriate quarter in which the update is required.

(5) Except for the daily calibration error test data, daily interference check, and off-line calibration demonstration information required in § 75.59(a)(1) and (2), which must always be submitted with the quarterly report, the certification, quality assurance, and quality control information required in § 75.59 shall either be submitted prior to or concurrent with the submittal of the relevant quarterly electronic data report.

(6) The information and hourly data required in §§ 75.57 through 75.59, and daily calibration error test data, daily interference check, and off-line calibration demonstration information required in § 75.59(a)(1) and (2).

(7) Notwithstanding the requirements of paragraphs (a)(4) through (a)(6) of this section, the following information is excluded from electronic reporting:

(i) Descriptions of adjustments, corrective action, and maintenance;

(ii) Information which is incompatible with electronic reporting (e.g., field data sheets, lab analyses, quality control plan);

(iii) Opacity data listed in § 75.57(f), and in § 75.59(a)(8);

(iv) For units with SO_2 or NO_X add-on emission controls that do not elect to use the approved site-specific parametric monitoring procedures for calculation of substitute data, the information in § 75.58(b)(3);

(v) Information required by § 75.57(h) concerning the causes of any missing data periods and the actions taken to cure such causes;

(vi) Hardcopy monitoring plan information required by § 75.53 and hardcopy test data and results required by § 75.59;

(vii) Records of flow monitor and moisture monitoring system polynomial equations, coefficients, or "K" factors required by § 75.59(a)(5)(vi) or § 75.59(a)(5)(vii);

(viii) Daily fuel sampling information required by § 75.58(c)(3)(i) for units using assumed values under appendix D;

(ix) Information required by §§ 75.59(b)(1)(vi), (vii), (viii), (ix), and (xiii), and (b)(2)(iii) and (iv) concerning fuel flowmeter accuracy tests and transmitter/transducer accuracy tests;

(x) Stratification test results required as part of the RATA supplementary records under § 75.59(a)(7);

(xi) Data and results of RATAs that are aborted or invalidated due to problems with the reference method or operational problems with the unit and data and results of linearity checks that are aborted or invalidated due to problems unrelated to monitor performance; and

(xii) Supplementary RATA information required under § 75.59(a)(7)(i) through § 75.59(a)(7)(v), except that:

(A) The applicable data elements under § 75.59(a)(7)(ii)(A) through (T) and under § 75.59(a)(7)(iii)(A) through (M) shall be reported for flow RATAs at circular or rectangular stacks (or ducts) in which angular compensation for yaw and/or pitch angles is used (i.e., Method 2F or 2G), with or without wall effects adjustments;

(B) The applicable data elements under § 75.59(a)(7)(ii)(A) through (T) and under § 75.59(a)(7)(iii)(A) through (M) shall be reported for any flow RATA run at a circular stack in which Method 2 is used and a wall effects adjustment factor is determined by direct measurement;

(C) The data under § 75.59(a)(7)(ii)(T) shall be reported for all flow RATAs at circular stacks in which Method 2 is used and a default wall effects adjustment factor is applied; and

(D) The data under § 75.59(a)(7)(vii)(A) through (F) shall be reported for all flow RATAs at rectangular stacks or ducts in which Method 2 is used and a wall effects adjustment factor is applied.

* * * * *

§ 75.66 [Amended]

30. Section 75.66 is amended by removing and reserving paragraph (f).

31. Section 75.71 is amended by:

a. In paragraph (a)(1), by replacing the second occurrence of the phrase "CO_2 diluent gas monitor" with the phrase "CO_2 diluent gas monitoring system";

b. Replacing the phrase "O_2 or CO_2 diluent gas monitor" with the phrase "O_2 or CO_2 monitoring system", in paragraph (a)(2); and

c. Revising paragraph (e).

The revision reads as follows:

§ 75.71 Specific provisions for monitoring NO_X and heat input for the purpose of calculating NO_X mass emissions.

* * * * *

(e) *Low mass emissions units.* Notwithstanding the requirements of paragraphs (c) and (d) of this section, for an affected unit using the low mass emissions (LME) unit under § 75.19 to estimate hourly NO_X emission rate, heat input and NO_X mass emissions, the owner or operator shall calculate the ozone season NO_X mass emissions by summing all of the estimated hourly NO_X mass emissions in the ozone season, as determined under

§ 75.19(c)(4)(ii)(A), and dividing this sum by 2000 lb/ton.

* * * * *

32. Section 75.72 is amended by:

a. Revising the section heading and the introductory text; and

b. Removing and reserving paragraph (f).

The revisions read as follows:

§ 75.72 Determination of NO_X mass emissions for common stack and multiple stack configurations.

The owner or operator of an affected unit shall either: calculate hourly NO_X mass emissions (in lbs) by multiplying the hourly NO_X emission rate (in lbs/mmBtu) by the hourly heat input rate (in mmBtu/hr) and the unit or stack operating time (as defined in § 72.2); or, as provided in paragraph (e) of this section, calculate hourly NO_X mass emissions from the hourly NO_X concentration (in ppm) and the hourly stack flow rate (in scfh). Only one methodology for determining NO_X mass emissions shall be identified in the monitoring plan for each monitoring location at any given time. The owner or operator shall also calculate quarterly and cumulative year-to-date NO_X mass emissions and cumulative NO_X mass emissions for the ozone season (in tons) by summing the hourly NO_X mass emissions according to the procedures in section 8 of appendix F to this part.

* * * * *

(f) [Reserved]

* * * * *

33. Section 75.73 is amended by:

a. Revising paragraph (c)(3);

b. Replacing the number "45" with the number "21" in paragraphs (e)(1) and (e)(2);

c. Revising paragraph (f)(1) introductory text;

d. Replacing the phrase "paragraph (a)" with the phrase "paragraphs (a) and (b)" in paragraph (f)(1)(ii) introductory text; and

e. Revising paragraph (f)(1)(ii)(K).

The revisions read as follows:

§ 75.73 Recordkeeping and reporting.

* * * * *

(c) * * *

(3) *Contents of the monitoring plan for units not subject to an Acid Rain emissions limitation.* Prior to January 1, 2009, each monitoring plan shall contain the information in § 75.53(e)(1) or § 75.53(g)(1) in electronic format and the information in § 75.53(e)(2) or § 75.53(g)(2) in hardcopy format. On and after January 1, 2009, each monitoring plan shall contain the information in § 75.53(g)(1) in electronic format and the information in § 75.53(g)(2) in hardcopy format, only. In addition, to the extent applicable, prior to January 1, 2009, each monitoring plan shall contain the information in § 75.53(f)(1)(i), (f)(2)(i), and (f)(4) or § 75.53(h)(1)(i), and (h)(2)(i) in electronic format and the information in § 75.53(f)(1)(ii) and (f)(2)(ii) or § 75.53(h)(1)(ii) and (h)(2)(ii) in hardcopy format. On and after January 1, 2009, each monitoring plan shall contain the information in § 75.53(h)(1)(i), and (h)(2)(i) in electronic format and the information in § 75.53(h)(1)(ii) and (h)(2)(ii) in hardcopy format, only. For units using the low mass emissions excepted methodology under § 75.19, prior to January 1, 2009, the monitoring plan shall include the additional information in § 75.53(f)(5)(i) and (f)(5)(ii) or § 75.53(h)(4)(i) and (h)(4)(ii). On and after January 1, 2009, for units using the low mass emissions excepted methodology under § 75.19 the monitoring plan shall include the additional information in § 75.53(h)(4)(i) and (h)(4)(ii), only. Prior to January 1, 2008, the monitoring plan shall also identify, in electronic format, the reporting schedule for the affected unit (ozone season or quarterly), and the beginning and end dates for the reporting schedule. The monitoring plan also shall include a seasonal controls indicator, and an ozone season fuel-switching flag.

* * * * *

(f) * * *

(1) *Electronic submission.* The designated representative for an affected unit shall electronically report the data and information in this paragraph (f)(1) and in paragraphs (f)(2) and (3) of this section to the Administrator quarterly, unless the unit has been placed in long-term cold storage (as defined in § 72.2 of this chapter). For units placed into long-term cold storage during a reporting quarter, the exemption from submitting quarterly reports begins with the calendar quarter following the date that the unit is placed into long-term cold storage. In such cases, the owner or operator shall submit quarterly reports for the unit beginning with the data from the quarter in which the unit recommences operation (where the initial quarterly report contains hourly data beginning with the first hour of recommenced operation of the unit). Each electronic report must be submitted to the Administrator within 30 days following the end of each calendar quarter. Except as otherwise provided in §§ 75.64(a)(4) and (a)(5), each electronic report shall include the information provided in paragraphs (f)(1)(i) through (1)(vi) of this section, and shall also include the date of report generation. Prior to January 1, 2009, each report shall include the facility information provided in paragraphs (f)(1)(i)(A) and (B), for each affected unit or group of units monitored at a common stack. On and after January 1, 2009, only the facility identification information provided in paragraph (f)(1)(i)(A) is required.

* * * * *

(ii) * * *

(K) Supplementary RATA information required under § 75.59(a)(7), except that:

(*1*) The applicable data elements under § 75.59(a)(7)(ii)(A) through (T) and under § 75.59(a)(7)(iii)(A) through (M) shall be reported for flow RATAs at circular or rectangular stacks (or ducts) in which angular compensation for yaw and/or pitch angles is used (i.e., Method 2F or 2G), with or without wall effects adjustments;

(*2*) The applicable data elements under § 75.59(a)(7)(ii)(A) through (T) and under § 75.59(a)(7)(iii)(A) through (M) shall be reported for any flow RATA run at a circular stack in which Method 2 is used and a wall effects adjustment factor is determined by direct measurement;

(*3*) The data under § 75.59(a)(7)(ii)(T) shall be reported for all flow RATAs at circular stacks in which Method 2 is used and a default wall effects adjustment factor is applied; and

(*4*) The data under § 75.59(a)(7)(ix)(A) through (F) shall be reported for all flow RATAs at rectangular stacks or ducts in which Method 2 is used and a wall effects adjustment factor is applied.

* * * * *

34. Section 75.74 is amended by:

a. Replacing the phrase "In the time period to the start of the current ozone season (i.e., in the period extending from October 1 of the previous calendar year through April 30 of the current calendar year), the", with the word "The", in paragraph (c)(2) introductory text;

b. Adding the words "in the second calendar quarter no later than April 30" to the end of paragraph (c)(2)(i) introductory text;

c. Removing the phrase "of the current calendar year" from the first sentence, and removing the last sentence of paragraph (c)(2)(i)(C);

d. Revising paragraph (c)(2)(i)(D);

e. Adding the words "in the first or second calendar quarter, but no later than April 30" to the end of the first sentence, and by removing the second sentence of paragraph (c)(2)(ii) introductory text;

f. Removing the words "of the current calendar year" from paragraph (c)(2)(ii)(E);

g. Revising paragraph (c)(2)(ii)(F);
h. Removing paragraphs (c)(2)(ii)(G) and (c)(2)(ii)(H);
i. Revising paragraph (c)(3)(ii);
j. Removing and reserving paragraphs (c)(3)(vi) through (viii);
k. Replacing all occurrences of the words "§ 75.31, § 75.33, or § 75.37" with the words "§§ 75.31 through 75.37" in paragraphs (c)(3)(xi), (c)(3)(xii)(A), and (c)(3)(xii)(B);
l. Revising paragraph (c)(6)(iii);
m. Replacing the words "October 1 of the previous calendar year" with "January 1" in paragraph (c)(6)(v); and
n. Revising paragraph (c)(11).

The revisions and additions read as follows:

§ 75.74 Annual and ozone season monitoring and reporting requirements.

* * * * *

(c) * * *
(2) * * *
(i) * * *

(D) If the linearity check is not completed by April 30, data validation shall be determined in accordance with paragraph (c)(3)(ii)(E) of this section.

(ii) * * *

(F) *Data Validation.* For each RATA that is performed by April 30, data validation shall be done according to sections 2.3.2(a)–(j) of appendix B to this part. However, if a required RATA is not completed by April 30, data from the monitoring system shall be invalid, beginning with the first unit operating hour on or after May 1. The owner or operator shall continue to invalidate all data from the CEMS until either:

(*1*) The required RATA of the CEMS has been performed and passed; or

(*2*) A probationary calibration error test of the CEMS is passed in accordance with § 75.20(b)(3)(ii). Once the probationary calibration error test has been passed, the owner or operator shall perform the required RATA in accordance with the conditional data validation provisions and within the 720 unit or stack operating hour time frame specified in § 75.20(b)(3) (subject to the restrictions in paragraph (c)(3)(xii) of this section), and the term "quality assurance" shall apply instead of the term "recertification." However, in lieu of the provisions in § 75.20(b)(3)(ix), the owner or operator shall follow the applicable provisions in paragraphs (c)(3)(xi) and (c)(3)(xii) of this section.

(3) * * *

(ii) For each gas monitor required by this subpart, linearity checks shall be performed in the second and third calendar quarters, as follows:

(A) For the second calendar quarter, the pre-ozone season linearity check required under paragraph (c)(2)(i) of this section shall be performed by April 30.

(B) For the third calendar quarter, a linearity check shall be performed and passed no later than July 30.

(C) Conduct each linearity check in accordance with the general procedures in section 6.2 of appendix A to this part, except that the data validation procedures in sections 6.2(a) through (f) of appendix A do not apply.

(D) Each linearity check shall be done "hands-off," as described in section 2.2.3(c) of appendix B to this part.

(E) *Data Validation.* For second and third quarter linearity checks performed by the applicable deadline (*i.e.*, April 30 or July 30), data validation shall be done in accordance with sections 2.2.3(a), (b), (c), (e), and (h) of Appendix B to this part. However, if a required linearity check for the second calendar quarter is not completed by April 30, or if a required linearity check for the third calendar quarter is not completed by July 30, data from the monitoring system (or range) shall be invalid, beginning with the first unit operating hour on or after May 1 or July 31, respectively. The owner or operator shall continue to invalidate all data from the CEMS until either:

(*1*) The required linearity check of the CEMS has been performed and passed; or

(*2*) A probationary calibration error test of the CEMS is passed in accordance with § 75.20(b)(3)(ii). Once the probationary calibration error test has been passed, the owner or operator shall perform the required linearity check in accordance with the conditional data validation provisions and within the 168 unit or stack operating hour time frame specified in § 75.20(b)(3) (subject to the restrictions in paragraph (c)(3)(xii) of this section), and the term "quality assurance" shall apply instead of the term "recertification." However, in lieu of the provisions in § 75.20(b)(3)(ix), the owner or operator shall follow the applicable provisions in paragraphs (c)(3)(xi) and (c)(3)(xii) of this section.

(F) A pre-season linearity check performed and passed in April satisfies the linearity check requirement for the second quarter.

(G) The third quarter linearity check requirement in paragraph (c)(3)(ii)(B) of this section is waived if:

(*1*) Due to infrequent unit operation, the 168 operating hour conditional data validation period associated with a pre-season linearity check extends into the third quarter; and

(*2*) A linearity check is performed and passed within that conditional data validation period.

* * * * *

(6) * * *

(iii) For the time periods described in paragraphs (c)(2)(i)(C) and (c)(2)(ii)(E) of this section, hourly emission data and the results of all daily calibration error tests and flow monitor interference checks shall be recorded. The results of all daily calibration error tests and flow monitor interference checks performed in the time period from April 1 through April 30 shall be reported. The owner or operator shall also report unit operating data recorded in the time period from April 1 through April 30 beginning with the day of the first required daily calibration error test or flow monitor interference check performed whenever the XML reporting format is used. The owner or operator may also report the hourly emission data in the time period from April 1 through April 30. However, only the emission data recorded in the time period from May 1 through September 30 shall be used for NO_X mass compliance determination;

* * * * *

(11) Units may qualify to use the optional NO_X mass emissions estimation protocol for gas-fired and oil-fired peaking units in appendix E to this part on an ozone season basis. In order to be allowed to use this methodology, the unit must meet the definition of "peaking unit" in § 72.2 of this chapter, except that the words "year", "calendar year" and "calendar years" in that definition shall be replaced by the words "ozone season", "ozone season", and "ozone seasons", respectively. In addition, in the definition of the term "capacity factor" in § 72.2 of this chapter, the word "annual" shall be replaced by the words "ozone season" and the number "8,760" shall be replaced by the number "3,672".

35. Section 75.81 is amended by:
a. Revising paragraph (a)(4);
b. Revising paragraph (c)(1);
c. Revising paragraph (c)(2);
c. Removing Eq. 1 from paragraph (d)(1);
d. Revising paragraph (d)(2);
e. Adding paragraph (d)(4)(iv); and
f. Revising paragraphs (d)(5) and (e)(1).

The revisions and additions read as follows:

§ 75.81 Monitoring of Hg mass emissions and heat input at the unit level.

* * * * *

(a) * * *

(4) If heat input is required to be reported under the applicable State or Federal Hg mass emission reduction

program that adopts the requirements of this subpart, the owner or operator must meet the general operating requirements for a flow monitoring system and an O_2 or CO_2 monitoring system to measure heat input rate.

* * * * *

(c) * * *

(1) The owner or operator must perform Hg emission testing one year or less before the compliance date in § 75.80(b), to determine the Hg concentration (*i.e.*, total vapor phase Hg) in the effluent. The testing shall be performed using one of the Hg reference methods listed in § 75.22(a)(7), and shall consist of a minimum of 3 runs at the normal unit operating load, while combusting coal. The coal combusted during the testing must be from the same source of supply as the coal combusted at the start of the Hg mass emissions reduction program. The minimum time per run shall be 1 hour if an instrumental reference method is used. If Method 29 or the Ontario Hydro method is used, paired sampling trains are required for each test run and the run must be long enough to ensure that sufficient Hg is collected to analyze. When Method 29 or the Ontario Hydro method is used, the test results shall be based on the vapor phase Hg collected in the back-half of the sampling trains (*i.e.*, the non-filterable impinger catches). For each Method 29 or Ontario Hydro method test run, the paired trains must meet the percent relative deviation (RD) requirement in § 75.22(a)(7). If the RD specification is met, the results of the two trains shall be averaged arithmetically. If the unit is equipped with flue gas desulfurization or add-on Hg emission controls, the controls must be operating normally during the testing, and, for the purpose of establishing proper operation of the controls, the owner or operator shall record parametric data or SO_2 concentration data in accordance with § 75.58(b)(3)(i).

(2) Based on the results of the emission testing, Equation 1 of this section shall be used to provide a conservative estimate of the annual Hg mass emissions from the unit:

$$E = 8760\ K\ C_{Hg} Q_{max} \qquad \text{(Eq. 1)}$$

Where:

E = Estimated annual Hg mass emissions from the affected unit, (ounces/year)

K = Units conversion constant, 9.978×10^{-10} oz-scm/[mu]g-scf

8760 = Number of hours in a year

CH_g = The highest Hg concentration (µg/scm) from any of the test runs or 0.50 µg/scm, whichever is greater

Qmax = Maximum potential flow rate, determined according to section 2.1.4.1 of appendix A to this part, (scfh)

Equation 1 of this section assumes that the unit operates year-round at its maximum potential flow rate. Also, note that if the highest Hg concentration measured in any test run is less than 0.50 µg/scm, a default value of 0.50 µg/scm must be used in the calculations.

* * * * *

(d) * * *

(2) Following initial certification, the same default Hg concentration value that was used to estimate the unit's annual Hg mass emissions under paragraph (c) of this section shall be reported for each unit operating hour, except as otherwise provided in paragraph (d)(4)(iv) or (d)(6) of this section. The default Hg concentration value shall be updated as appropriate, according to paragraph (d)(5) of this section.

* * * * *

(4) * * *

(iv) An additional retest is required when there is a change in the fuel supply. The retest shall be performed within 720 unit operating hours of the change.

(5) The default Hg concentration used for reporting under § 75.84 shall be updated after each required retest. This includes retests that are required prior to the compliance date in § 75.80(b). The updated value shall either be the highest Hg concentration measured in any of the test runs or 0.50 µg/scm, whichever is greater. The updated value shall be applied beginning with the first unit operating hour in which Hg emissions data are required to be reported after completion of the retest, except as provided in paragraph (d)(4)(iv) of this section, where the need to retest is triggered by a change in the fuel supply. In that case, apply the updated default Hg concentration beginning with the first unit operating hour in which Hg emissions are required to be reported after the date and hour of the fuel switch.

* * * * *

(e) * * *

(1) The methodology may not be used for reporting Hg mass emissions at a common stack unless all of the units using the common stack are affected units and each individual unit is tested to demonstrate that its potential to emit does not exceed 464 ounces of Hg per year, in accordance with paragraphs (c) and (d) of this section. If the units sharing the common stack qualify as a group of identical units in accordance with § 75.19(c)(1)(iv)(B), the owner or operator may test a subset of the units in lieu of testing each unit individually. If this option is selected, the number of units required to be tested shall be determined from Table LM–4 in § 75.19. If the test results demonstrate that the units sharing the common stack qualify as low mass emitters, the default Hg concentration used for reporting Hg mass emissions at the common stack shall either be the highest value obtained in any test run for any of the tested units serving the common stack or 0.50 µg/scm, whichever is greater. Notwithstanding these requirements, the emission testing required under paragraphs (c) and/or (d)(3) of this section may be performed at the common stack in the following circumstances:

(i) The initial certification testing required under paragraph (c) of this section may be performed at the common stack if all of the units using the stack are affected units and if, prior to entering the common stack, the effluent gas streams from the individual units are combined together upstream of an emission control device that reduces the Hg concentration. If this testing option is chosen:

(A) The testing must be done at a combined load corresponding to the designated normal load level (low, mid, or high) for the units sharing the common stack, in accordance with section 6.5.2.1 of appendix A to this part;

(B) All of the units that share the stack must be operating in a normal, stable manner and at typical load levels during the emission testing;

(C) When calculating E, the estimated maximum potential annual Hg mass emissions from the stack, the maximum potential flow rate through the common stack (as defined in the monitoring plan) and the highest concentration from any test run (or 0.50 µg/scm, if greater) shall be substituted into Equation 1;

(D) The calculated value of E shall be divided by the number of units sharing the stack. If the result, when rounded to the nearest ounce, does not exceed 464 ounces, the units qualify to use the low mass emission methodology; and

(E) If the units qualify to use the methodology, the default Hg concentration used for reporting at the common stack shall be the highest value obtained in any test run or 0.50 µg/scm, whichever is greater; or

(ii) For all common stack configurations, the retests required under paragraph (d)(3) of this section may be done at the common stack. If this testing option is chosen, the testing shall be done at a combined load corresponding to the designated normal

load level (low, mid, or high) for the units sharing the common stack, in accordance with section 6.5.2.1 of appendix A to this part. The due date for the next retest shall be determined as follows:

(A) To calculate E, the maximum potential flow rate for the common stack (as defined in the monitoring plan) and the highest Hg concentration from any test run (or 0.50 μg/scm, if greater) shall be substituted into Equation 1;

(B) If the value of E obtained from Equation 1, rounded to the nearest ounce, is greater than 144 times the number of units sharing the common stack, but less than or equal to 464 times the number of units sharing the stack, the next retest is due in two QA operating quarters;

(C) If the value of E obtained from Equation 1, rounded to the nearest ounce, is less than or equal to 144 times the number of units sharing the common stack, the next retest is due in four QA operating quarters.

* * * * *

36. Section 75.82 is amended by adding paragraphs (b)(3), (c)(4), and (d)(3) to read as follows:

§ 75.82 Monitoring of Hg mass emissions and heat input at common and multiple stacks.

* * * * *

(b) * * *

(3) If the monitoring option in paragraph (b)(2) of this section is selected, and if heat input is required to be reported under the applicable State or Federal Hg mass emission reduction program that adopts the requirements of this subpart, the owner or operator shall either:

(i) Apportion the common stack heat input rate to the individual units according to the procedures in § 75.16(e)(3); or

(ii) Install a flow monitoring system and a diluent gas (O_2 or CO_2) monitoring system in the duct leading from each affected unit to the common stack, and measure the heat input rate in each duct, according to section 5.2 of appendix F to this part.

(c) * * *

(4) If the monitoring option in paragraph (c)(1) or (c)(2) of this section is selected, and if heat input is required to be reported under the applicable State or Federal Hg mass emission reduction program that adopts the requirements of this subpart, the owner or operator shall:

(i) Use the installed flow and diluent monitors to determine the hourly heat input rate at each stack (mmBtu/hr), according to section 5.2 of appendix F to this part; and

(ii) Calculate the hourly heat input at each stack (in mmBtu) by multiplying the measured stack heat input rate by the corresponding stack operating time; and

(iii) Determine the hourly unit heat input by summing the hourly stack heat input values.

(d) * * *

(3) If the monitoring option in paragraph (d)(1) or (d)(2) of this section is selected, and if heat input is required to be reported under the applicable State or Federal Hg mass emission reduction program that adopts the requirements of this subpart, the owner or operator shall:

(i) Use the installed flow and diluent monitors to determine the hourly heat input rate at each stack or duct (mmBtu/hr), according to section 5.2 of appendix F to this part; and

(ii) Calculate the hourly heat input at each stack or duct (in mmBtu) by multiplying the measured stack (or duct) heat input rate by the corresponding stack (or duct) operating time; and

(iii) Determine the hourly unit heat input by summing the hourly stack (or duct) heat input values.

37. Section 75.84 is amended by:

a. Removing "§ 75.53(e)(1)" and "§ 75.53(e)(2)" and adding in their place "§ 75.53(g)(1)" and "§ 75.53(g)(2)", respectively, in paragraph (c)(3);

b. Removing the number "45" and adding in its place the number "21" in paragraphs (e)(1) and (e)(2);

c. Revising paragraph (f)(1) introductory text;

d. Removing "§ 75.64(a)(1)" and adding in its place "§ 75.64(a)(3)" in paragraph (f)(1)(i);

e. Replacing the phrase "paragraph (a)" with the phrase "paragraphs (a) and (b)" in paragraph (f)(1)(ii) introductory text;

f. Revising paragraph (f)(1)(ii)(I).

The revisions read as follows:

§ 75.84 Recordkeeping and reporting.

* * * * *

(f) * * *

(1) *Electronic submission.* Electronic quarterly reports shall be submitted, beginning with the calendar quarter containing the compliance date in § 75.80(b), unless otherwise specified in the final rule implementing a State or Federal Hg mass emissions reduction program that adopts the requirements of this subpart. The designated representative for an affected unit shall report the data and information in this paragraph (f)(1) and the applicable compliance certification information in paragraph (f)(2) of this section to the Administrator quarterly, except as otherwise provided in § 75.64(a) for units in long-term cold storage. Each electronic report must be submitted to the Administrator within 30 days following the end of each calendar quarter. Except as otherwise provided in §§ 75.64(a)(4) and (a)(5), each electronic report shall include the date of report generation and the following information for each affected unit or group of units monitored at a common stack:

* * * * *

(ii) * * *

(I) Supplementary RATA information required under § 75.59(a)(7), except that:

(*1*) The applicable data elements under § 75.59(a)(7)(ii)(A) through (T) and under § 75.59(a)(7)(iii)(A) through (M) shall be reported for flow RATAs at circular or rectangular stacks (or ducts) in which angular compensation for yaw and/or pitch angles is used (i.e., Method 2F or 2G), with or without wall effects adjustments;

(*2*) The applicable data elements under § 75.59(a)(7)(ii)(A) through (T) and under § 75.59(a)(7)(iii)(A) through (M) shall be reported for any flow RATA run at a circular stack in which Method 2 is used and a wall effects adjustment factor is determined by direct measurement;

(*3*) The data under § 75.59(a)(7)(ii)(T) shall be reported for all flow RATAs at circular stacks in which Method 2 is used and a default wall effects adjustment factor is applied; and

(*4*) The data under § 75.59(a)(7)(ix)(A) through (F) shall be reported for all flow RATAs at rectangular stacks or ducts in which Method 2 is used and a wall effects adjustment factor is applied.

* * * * *

38. Appendix A to Part 75 is amended by:

a. Revising paragraph (c) of section 2.1.1.1;

b. Revising paragraph (b)(2) of section 2.1.1.5;

c. Revising paragraph (b)(2) of section 2.1.2.5; and

d. Adding a new fourth sentence after the third sentence of section 2.1.3.

e. Revising paragraph (3) of section 3.2;

f. Replacing the phrase "continuous emission monitoring system(s)" with the phrase "monitoring component of a continuous emission monitoring system that is" in section 3.5;

g. Revising section 5.1;

h. Redesignating section 6.1 as section 6.1.1;

i. Adding new sections 6.1 and 6.1.2;

j. Revising the second and third sentences and adding a new fourth sentence to section 6.2, introductory text;

k. Replacing the words "section 2.6" with the words "section 2.2.1", in paragraph (g) of section 6.2;

l. Adding paragraph (h) to section 6.2;

m. Adding a new fourth sentence to section 6.3.1, introductory text;

n. Revising the introductory text of section 6.4;

o. Removing the words "that uses CEMS to account for its emissions and for each unit that uses the optional fuel flow-to-load quality assurance test in section 2.1.7 of appendix D to this part" from paragraph (a) of section 6.5.2.1;

p. Adding the words "or mmBtu/hr" after the words "klb/hr of steam production", and by adding the words "or mmBtu/hr of thermal output" after the words "thousands of lb/hr of steam load" in paragraph (a)(1) of section 6.5.2.1;

q. Adding the words "and units using the low mass emissions (LME) excepted methodology under § 75.19" after the words "(except for peaking units" in the second sentence in paragraph (c) of section 6.5.2.1;

r. Adding the words "and LME units" after the words "For peaking units" in the third sentence of paragraph (d)(1) of section 6.5.2.1;

s. Replacing the words "quarterly report" in the first sentence with the words "monitoring plan", by adding the words "or mmBtu/hr" after the term "lb/hr", by replacing the number "75.64" with the number "75.53", by adding the words "and LME units" after the words "Except for peaking units", and by revising the words "electronic quarterly report (as part of the electronic monitoring plan)" to read "electronic monitoring plan" in paragraph (e) of section 6.5.2.1;

t. Replacing all occurrences of the words "section 3.2" with the words "section 8.1.3" in paragraph (b)(3) of section 6.5.6, paragraph (a) of section 6.5.6.2, and paragraph (a) of section 6.5.6.3;

u. Adding the words "and the same type of sorbent material" after the words "same-size trap" in the third-to-last sentence of section 6.5.7, paragraph (a);

v. Revising section 6.5.10;

w. Adding a sentence at the end of section 7.6.1;

x. Revising the words "scfh/megawatts or scfh/1000 lb/hr of steam" to read "scfh/megawatts, scfh/1000 lb/hr of steam, or scfh/(mmBtu/hr of steam output)" at the end of the R_{ref} variable definition, and by revising the words "megawatts or 1000 lb/hr of steam," to read "megawatts, 1000 lb/hr of steam, or mmBtu/hr thermal output" at the end of the L_{avg} variable definition in paragraph (a) of section 7.7; and

y. Revising the words "Btu/kwh or Btu/lb steam load" to read "Btu/kwh, Btu/lb steam load, or mmBtu heat input/mmBtu steam output" in the $(GHR)_{ref}$ variable definition, and by revising the words "megawatts or 1000 lb/hr of steam" to read "megawatts, 1000 lb/hr of steam, or mmBtu/hr thermal output" at the end of the L_{avg} variable definition, in paragraph (c) of section 7.7.

The revisions and additions read as follows:

Appendix A to Part 75—Specifications and Test Procedures

* * * * *

2. Equipment Specifications

2.1.1.1 Maximum Potential Concentration

* * * * *

(c) When performing fuel sampling to determine the MPC, use ASTM Methods: ASTM D3177–89 (1997), "Standard Test Methods for Total Sulfur in the Analysis Sample of Coal and Coke"; ASTM D4239–02, "Standard Test Methods for Sulfur in the Analysis Sample of Coal and Coke Using High Temperature Tube Furnace Combustion Methods"; ASTM D4294–98, "Standard Test Method for Sulfur in Petroleum Products by Energy-Dispersive X-Ray Fluorescence Spectroscopy"; ASTM D1552–01, "Standard Test Method for Sulfur in Petroleum Products (High Temperature Method)"; ASTM D129–00, "Standard Test Method for Sulfur in Petroleum Products (General Bomb Method)"; ASTM D2622–98, "Standard Test Method for Sulfur in Petroleum Products by X-Ray Spectrometry" for sulfur content of solid or liquid fuels; ASTM D3176–89 (1997)e1, "Standard Practice for Ultimate Analysis of Coal and Coke"; ASTM D240–00 (Reapproved 1991), "Standard Test Method for Heat of Combustion of Liquid Hydrocarbon Fuels by Bomb Calorimeter"; or ASTM D5865–01ae1, "Standard Test Method for Gross Calorific Value of Coal and Coke" (incorporated by reference under § 75.6).

* * * * *

2.1.1.5 * * *

(b) * * *

(2) For units with two SO_2 spans and ranges, if the low range is exceeded, no further action is required, provided that the high range is available and its most recent calibration error test and linearity check have not expired. However, if either of these quality assurance tests has expired and the high range is not able to provide quality assured data at the time of the low range exceedance or at any time during the continuation of the exceedance, report the MPC as the SO_2 concentration until the readings return to the low range or until the high range is able to provide quality assured data (unless the reason that the high-scale range is not able to provide quality assured data is because the high-scale range has been exceeded; if the high-scale range is exceeded follow the procedures in paragraph (b)(1) of this section).

* * * * *

2.1.2.5 * * *

(b) * * *

(2) For units with two NO_X spans and ranges, if the low range is exceeded, no further action is required, provided that the high range is available and its most recent calibration error test and linearity check have not expired. However, if either of these quality assurance tests has expired and the high range is not able to provide quality assured data at the time of the low range exceedance or at any time during the continuation of the exceedance, report the MPC as the NO_X concentration until the readings return to the low range or until the high range is able to provide quality assured data (unless the reason that the high-scale range is not able to provide quality assured data is because the high-scale range has been exceeded; if the high-scale range is exceeded follow the procedures in paragraph (b)(1) of this section).

* * * * *

2.1.3 CO_2 and O_2 Monitors

* * * An alternative CO_2 span value below 6.0 percent may be used if an appropriate technical justification is included in the hardcopy monitoring plan.

* * * * *

3.2 * * *

(3) For the linearity check and the 3-level system integrity check of an Hg monitor, which are required, respectively, under §§ 75.20(c)(1)(ii) and (c)(1)(vi), the measurement error shall not exceed 5.0 percent of the span value at any of the three gas levels. To calculate the measurement error at each level, take the absolute value of the difference between the reference value and mean CEM response, divide the result by the span value, and then multiply by 100. Alternatively, the results at any gas level are acceptable if the absolute value of the difference between the average monitor response and the average reference value, i.e., $|R-A|$ in Equation A–4 of this appendix, does not exceed 0.6 $\mu g/m^3$. The principal and alternative performance specifications in this section also apply to the single-level system integrity check described in section 2.6 of appendix B to this part.

* * * * *

5.1 Reference Gases.

For the purpose of part 75, calibration gases include the following:

5.1.1 EPA Protocol Gases

(a) An EPA Protocol Gas is a calibration gas mixture prepared and analyzed according to Section 2 of the "EPA Traceability Protocol for Assay and Certification of Gaseous Calibration Standards," September 1997, EPA–600/R–97/121 or such revised procedure as approved by the Administrator (EPA Traceability Protocol).

(b) An EPA Protocol Gas must have a specialty gas producer-certified uncertainty (95-percent confidence interval) that must not be greater than 2.0 percent of the certified concentration (tag value) of the gas mixture. The uncertainty must be calculated using the statistical procedures (or equivalent statistical techniques) that are listed in Section 2.1.8 of the EPA Traceability Protocol.

(c) A specialty gas producer advertising calibration gas certification with the EPA Traceability Protocol or distributing calibration gases as "EPA Protocol Gas" must participate in the EPA Protocol Gas Verification Program (PGVP) described in Section 2.1.10 of the EPA Traceability Protocol or it cannot use "EPA" in any form of advertising for these products, unless approved by the Administrator. A specialty gas producer may not certify a calibration gas as an EPA Protocol Gas unless it participates in the PGVP, unless approved by the Administrator.

(d) A copy of EPA–600/R–97/121 is available from the National Technical Information Service, 5285 Port Royal Road, Springfield, VA, 703–605–6585 or *http://www.ntis.gov*, and from *http://www.epa.gov/ttn/emc/news.html* or *http://www.epa.gov/appcdwww/tsb/index.html*.

5.1.2 Mercury Standards

For 7-day calibration error tests of Hg concentration monitors and for daily calibration error tests of Hg monitors, either elemental Hg standards or a NIST-traceable source of oxidized Hg may be used. For linearity checks, elemental Hg standards shall be used. For 3-level and single-point system integrity checks under § 75.20(c)(1)(vi), sections 6.2(g) and 6.3.1 of this appendix, and sections 2.1.1, 2.2.1 and 2.6 of appendix B to this part, a NIST-traceable source of oxidized Hg shall be used. Alternatively, other NIST-traceable standards may be used for the required checks, subject to the approval of the Administrator.

5.1.3 Zero Air Material

(a) A calibration gas certified by the specialty gas producer or vendor not to contain concentrations of SO_2, NO_X, or total hydrocarbons above 0.1 parts per million (ppm), a concentration of CO above 1 ppm, or a concentration of CO_2 above 400 ppm;

(b) Ambient air conditioned and purified by a CEMS for which the CEMS manufacturer or vendor certifies that the particular CEMS model produces conditioned gas that does not contain concentrations of SO_2, NO_X, or total hydrocarbons above 0.1 ppm, a concentration of CO above 1 ppm, or a concentration of CO_2 above 400 ppm;

(c) For dilution-type CEMS, conditioned and purified ambient air provided by a conditioning system concurrently supplying dilution air to the CEMS; or

(d) A multi-component mixture certified by the supplier of the mixture that the concentration of the component being zeroed is less than or equal to the applicable concentration specified in paragraph (a) of this section, and that the mixture's other components do not interfere with the CEM readings.

* * * * *

6.1 General Requirements

* * * * *

6.1.2 Requirements for Air Emission Testing Bodies

(a) Any Air Emission Testing Body (AETB) conducting relative accuracy test audits of CEMS and sorbent trap monitoring systems under this part must conform to the requirements of ASTM D7036–04. This section is not applicable to daily operation, daily calibration error checks, daily flow interference checks, quarterly linearity checks or routine maintenance of CEMS.

(b) The AETB shall provide to the affected source(s) certification that the AETB operates in conformance with, and that data submitted to the Agency has been collected in accordance with, the requirements of ASTM D7036–04. This certification may be provided in the form of:

(1) A certificate of accreditation of relevant scope issued by a recognized, national accreditation body; or

(2) A letter of certification signed by a member of the senior management staff of the AETB.

(c) The AETB shall either provide a Qualified Individual on-site to conduct or shall oversee all relative accuracy testing carried out by the AETB as required in ASTM D7036–04. The Qualified Individual shall provide the affected source(s) with copies of the qualification credentials relevant to the scope of the testing conducted.

* * * * *

6.2 Linearity Check (General Procedures)

* * * Notwithstanding these requirements, if the SO_2 or NO_X span value for a particular monitor range is ≤30 ppm, that range is exempted from the linearity check requirements of this part, both for initial certification and for on-going quality-assurance. For units with two measurement ranges (high and low) for a particular parameter, perform a linearity check on both the low scale (except for SO_2 or NO_X span values ≤30 ppm) and the high scale. Note that for a NO_X-diluent monitoring system with two NO_X measurement ranges, if the low NO_X scale has a span value ≤30 ppm and is exempt from linearity checks, this does not exempt either the diluent monitor or the high NO_X scale (if the span is >30 ppm) from linearity check requirements.

* * * * *

(g) For Hg monitors, follow the guidelines in section 2.2.3 of this appendix in addition to the applicable procedures in section 6.2 when performing the system integrity checks described in § 75.20(c)(1)(vi) and in sections 2.1.1, 2.2.1 and 2.6 of appendix B to this part.

(h) For Hg concentration monitors, if moisture is added to the calibration gas during the required linearity checks or system integrity checks, and if the Hg monitor measures on a dry basis, the moisture content of the calibration gas must be accounted for. Under these circumstances, the dry basis concentration of the calibration gas shall be used to calculate the linearity error or measurement error (as applicable).

* * * * *

6.3.1 Gas Monitor 7-Day Calibration Error Test

* * * Also for Hg monitors, if moisture is added to the calibration gas and the monitoring system measures Hg concentration on a dry basis, the added moisture must be accounted for and the dry-basis concentration of the calibration gas shall be used to calculate the calibration error.

* * * * *

6.4 Cycle Time Test

Perform cycle time tests for each pollutant concentration monitor and continuous emission monitoring system while the unit is operating, according to the following procedures (*see also* Figure 6 at the end of this appendix). Use a zero-level and a high-level calibration gas (as defined in section 5.2 of this appendix) alternately. To determine the upscale elapsed time, inject a zero-level concentration calibration gas into the probe tip (or injection port leading to the calibration cell, for in situ systems with no probe). Record the stable starting gas value and start time, using the data acquisition and handling system (DAHS). Next, allow the monitor to measure the concentration of flue gas emissions until the response stabilizes. Record the stable ending stack emissions value and the end time of the test using the DAHS. Determine the upscale elapsed time as the time it takes for 95.0 percent of the step change to be achieved between the stable starting gas value and the stable ending stack emissions value. Then repeat the procedure, starting by injecting the high-level gas concentration to determine the downscale elapsed time, which is the time it takes for 95.0 percent of the step change to be achieved between the stable starting gas value and the stable ending stack emissions value. End the downscale test by measuring the stable concentration of flue gas emissions. Record the stable starting and ending monitor values, the start and end times, and the downscale elapsed time for the monitor using the DAHS. A stable value is equivalent to a reading with a change of less than 2.0 percent of the span value for 2 minutes, or a reading with a change of less than 6.0 percent from the measured average concentration over 6 minutes. Alternatively, the reading is considered stable if it changes by no more than 0.5 ppm or 0.2% CO_2 or O_2 (as applicable) for two minutes. (Owners or operators of systems which do not record data in 1-minute or 3-minute intervals may petition the Administrator under § 75.66 for alternative stabilization criteria). For monitors or monitoring systems that perform a series of operations (such as purge, sample, and analyze), time the injections of the calibration gases so they will produce the longest possible cycle time. Report the slower of the two elapsed times (upscale or downscale) as the cycle time for the analyzer. (*See* Figure 5 at the end of this appendix.) Prior to January 1, 2009 for the NO_X-diluent continuous emission monitoring system test, either record and report the longer cycle time of the two component analyzers as the system cycle time or record the cycle time for each component analyzer separately (as applicable). On and after January 1, 2009, record the cycle time for each component analyzer separately. For time-shared systems, perform the cycle time tests at each probe locations that will be polled within the same 15-minute period during monitoring system operations. To determine the cycle time for time-shared systems, at each monitoring location, report the sum of the cycle time

observed at that monitoring location plus the sum of the time required for all purge cycles (as determined by the continuous emission monitoring system manufacturer) at each of the probe locations of the time-shared systems. For monitors with dual ranges, report the test results from on the range giving the longer cycle time. Cycle time test results are acceptable for monitor or monitoring system certification, recertification or diagnostic testing if none of the cycle times exceed 15 minutes. The status of emissions data from a monitor prior to and during a cycle time test period shall be determined as follows:

* * * * *

6.5.10 Reference Methods

The following methods from appendix A to part 60 of this chapter or their approved alternatives are the reference methods for performing relative accuracy test audits: Method 1 or 1A for siting; Method 2 or its allowable alternatives in appendix A to part 60 of this chapter (except for Methods 2B and 2E) for stack gas velocity and volumetric flow rate; Methods 3, 3A or 3B for O_2 and CO_2; Method 4 for moisture; Methods 6, 6A or 6C for SO_2; Methods 7, 7A, 7C, 7D or 7E for NO_X, excluding the exceptions of Method 7E identified in § 75.22(a)(5); and either the Ontario Hydro Method, Method 29 in appendix A–8 to part 60 of this chapter, or an approved instrumental method for Hg (see § 75.22).

* * * * *

7.6 Bias Test and Adjustment Factor

* * * * *

7.6.1 * * * To calculate bias for a Hg monitoring system when using the Ontario Hydro Method or Method 29 in appendix A–8 to part 60 of this chapter, "d" is, for each data point, the difference between the average Hg concentration value (in $\mu g/m^3$) from the paired Ontario Hydro or Method 29 sampling trains and the concentration measured by the monitoring system. For sorbent trap monitoring systems, use the average Hg concentration measured by the paired traps in the calculation of "d".

* * * * *

39. Appendix B to Part 75 is amended by:

a. adding section 1.1.4;

b. Revising section 2.1.1;

c. Revising paragraph (2) of section 2.1.1.2;

d. Revising paragraph (2) of section 2.1.5.1;

e. Adding paragraph (3) to section 2.1.5.1;

f. Adding a new fourth sentence to paragraph (e) of section 2.2.3;

g. Revising the words "scfh/megawatts or scfh/1000 lb/hr of steam load" to read "scfh/megawatts, scfh/1000 lb/hr of steam load, or scfh/(mmBtu/hr thermal output)" at the end of the R_h variable definition, and by revising the words "megawatts or 1000 lb/hr of steam" to read "megawatts, 1000 lb/hr of steam, or mmBtu/hr thermal output" in the L_h variable definition, in paragraph (a) of section 2.2.5;

h. Revising the words Btu/kwh or Btu/lb steam load" to read "Btu/kwh, Btu/lb steam load, mmBtu heat input/mmBtu thermal output" in the $(GHR)_h$ variable definition, and by revising the words "megawatts or 1000 lb/hr of steam" to read "megawatts, 1000 lb/hr of steam, or mmBtu/hr thermal output" in the L_h variable definition, in paragraph (a)(2) of section 2.2.5;

i. Replacing the word "five" with the word "twenty", and by replacing the word "years" with the word "quarters", in paragraph (c)(4) of section 2.3.1.3;

j. Revising paragraph (g) of section 2.3.2;

k. Revising paragraphs (a)(2) and (c) of section 2.3.3;

l. Adding paragraph (d) to section 2.3.3;

m. Revising section 2.6; and

n. Replacing the term "dscm" with "scm" in Figure 2.

The revisions and additions read as follows:

Appendix B to Part 75—Quality Assurance and Quality Control Procedures

1. Quality Assurance/Quality Control Program

* * * * *

1.1.4 The requirements in section 6.1.2 of appendix A to this part shall be met by any Air Emissions Testing Body (AETB) performing the semiannual/annual RATAs described in section 2.3 of this appendix and the periodic Hg emission tests described in §§ 75.81(c)(1) and 75.81(d)(4)(iii).

* * * * *

2. Frequency of Testing

* * * * *

2.1.1 Calibration Error Test

Except as provided in section 2.1.1.2 of this appendix, perform the daily calibration error test of each gas monitoring system (including moisture monitoring systems consisting of wet- and dry-basis O_2 analyzers) according to the procedures in section 6.3.1 of appendix A to this part, and perform the daily calibration error test of each flow monitoring system according to the procedure in section 6.3.2 of appendix A to this part. When two measurement ranges (low and high) are required for a particular parameter, perform sufficient calibration error tests on each range to validate the data recorded on that range, according to the criteria in section 2.1.5 of this appendix.

* * * * *

2.1.1.2 * * *

(2) For each monitoring system that has passed the off-line calibration demonstration, off-line calibration error tests may be used on a limited basis to validate data, in accordance with paragraph (2) in section 2.1.5.1 of this appendix.

2.1.5.1 * * *

(2) For a monitor that has passed the off-line calibration demonstration, off-line calibration error tests may be used to validate data from the monitor for up to 26 consecutive unit or stack operating hours, after which data from the monitor become invalid until an on-line calibration error test of the monitor is passed. Once the required on-line calibration error test has been passed, another 26 operating hour cycle of data validation using off-line calibration error tests may begin. Each off-line calibration error test that is used for data validation has a prospective data validation window of 26 clock hours, as described in section 2.1.5 of this appendix. If the sequence of consecutive operating hours validated by off-line calibrations is broken before reaching the 26th consecutive unit or stack operating hour, data from the monitor become invalid and an on-line calibration error test must be passed to re-establish the quality-assured data status. The sequence is considered broken when a unit or stack operating hour is not contained within the 26 clock hour data validation window of a passed off-line calibration error test.

(3) For units with two measurement ranges (low and high) for a particular parameter, when separate analyzers are used for the low and high ranges, a failed or expired calibration on one of the ranges does not affect the quality-assured data status on the other range. For a dual-range analyzer (*i.e.*, a single analyzer with two measurement scales), a failed calibration error test on either the low or high scale results in an out-of-control period for the monitor. Data from the monitor remain invalid until corrective actions are taken and "hands-off" calibration error tests have been passed on both ranges. However, if the most recent calibration error test on the high scale has expired, while the low scale is up-to-date on its calibration error test requirements (or vice-versa), the expired calibration error test does not affect the quality-assured status of the data recorded on the other scale.

* * * * *

2.2.3 * * *

(e) * * * For a dual-range analyzer, "hands-off" linearity checks must be passed on both measurement scales to end the out-of-control period.

* * * * *

2.3.2 * * *

(g) Data validation for failed RATAs for a CO_2 pollutant concentration monitor (or an O_2 monitor used to measure CO_2 emissions), a NO_X pollutant concentration monitor, and a NO_X-diluent monitoring system shall be done according to paragraphs (g)(1) and (g)(2) of this section:

(1) For a CO_2 pollutant concentration monitor (or an O_2 monitor used to measure CO_2 emissions) which also serves as the diluent component in a NO_X-diluent monitoring system, if the CO_2 (or O_2) RATA is failed, then both the O_2 (or O_2) monitor and the associated NO_X-diluent system are considered out-of-control, beginning with the hour of completion of the failed CO_2 (or O_2) monitor RATA, and continuing until the hour of completion of subsequent hands-off RATAs which demonstrate that both systems

have met the applicable relative accuracy specifications in sections 3.3.2 and 3.3.3 of appendix A to this part, unless the option in paragraph (b)(3) of this section to use the data validation procedures and associated timelines in §§ 75.20(b)(3)(ii) through (b)(3)(ix) has been selected, in which case the beginning and end of the out-of-control period shall be determined in accordance with §§ 75.20(b)(3)(vii)(A) and (B).

(2) This paragraph (g)(2) applies only to a NO_X pollutant concentration monitor that serves both as the NO_X component of a NO_X concentration monitoring system (to measure NO_X mass emissions) and as the NO_X component in a NO_X-diluent monitoring system (to measure NO_X emission rate in lb/mmBtu). If the RATA of the NO_X concentration monitoring system is failed, then both the NO_X concentration monitoring system and the associated NO_X-diluent monitoring system are considered out-of-control, beginning with the hour of completion of the failed NO_X concentration RATA, and continuing until the hour of completion of subsequent hands-off RATAs which demonstrate that both systems have met the applicable relative accuracy specifications in sections 3.3.2 and 3.3.7 of appendix A to this part, unless the option in paragraph (b)(3) of this section to use the data validation procedures and associated timelines in §§ 75.20(b)(3)(ii) through (b)(3)(ix) has been selected, in which case the beginning and end of the out-of-control period shall be determined in accordance with §§ 75.20(b)(3)(vii)(A) and (B).

* * * * *

2.3.3 RATA Grace Period

(a) * * *

(2) A required 3-load flow RATA has not been performed by the end of the calendar quarter in which it is due; or

* * * * *

(c) If, at the end of the 720 unit (or stack) operating hour grace period, the RATA has not been completed, data from the monitoring system shall be invalid, beginning with the first unit operating hour following the expiration of the grace period. Data from the CEMS remain invalid until the hour of completion of a subsequent hands-off RATA. The deadline for the next test shall be either two QA operating quarters (if a semiannual RATA frequency is obtained) or four QA operating quarters (if an annual RATA frequency is obtained) after the quarter in which the RATA is completed, not to exceed eight calendar quarters.

* * * * *

(d) When a RATA is done during a grace period in order to satisfy a RATA requirement from a previous quarter, the deadline for the next RATA shall be determined as follows:

(1) If the grace period RATA qualifies for a reduced, (*i.e.*, annual), RATA frequency the deadline for the next RATA shall be set at three QA operating quarters after the quarter in which the grace period test is completed.

(2) If the grace period RATA qualifies for the standard, (*i.e.*, semiannual), RATA frequency the deadline for the next RATA shall be set at two QA operating quarters after the quarter in which the grace period test is completed.

(3) Notwithstanding these requirements, no more than eight successive calendar quarters shall elapse after the quarter in which the grace period test is completed, without a subsequent RATA having been conducted.

* * * * *

2.6 System Integrity Checks for Hg Monitors

For each Hg concentration monitoring system (except for a Hg monitor that does not have a converter), perform a single-point system integrity check weekly, *i.e.*, at least once every 168 unit or stack operating hours, using a NIST-traceable source of oxidized Hg. Perform this check using a mid-or high-level gas concentration, as defined in section 5.2 of appendix A to this part. The performance specifications in paragraph (3) of section 3.2 of appendix A to this part must be met, otherwise the monitoring system is considered out-of-control, from the hour of the failed check until a subsequent system integrity check is passed. If a required system integrity check is not performed and passed within 168 unit or stack operating hours of last successful check, the monitoring system shall also be considered out of control, beginning with the 169th unit or stack operating hour after the last successful check, and continuing until a subsequent system integrity check is passed. This weekly check is not required if the daily calibration assessments in section 2.1.1 of this appendix are performed using a NIST-traceable source of oxidized Hg.

* * * * *

40. Appendix D to Part 75 is amended by:

a. Revising section 2.1.5.1;

b. Removing all "±" symbols from paragraph (c) of section 2.1.6.1;

c. Revising the R_{base} and L_{avg} variable definitions in paragraph (a) of section 2.1.7.1;

d. Revising the words "Btu/kwh or Btu/lb steam load" to read "Btu/kwh, Btu/lb steam load, or mmBtu heat input/mmBtu thermal output" in the $(GHR)_{base}$ variable definition, and by revising the words "megawatts or 1000 lb/hr of steam" to read "megawatts, 1000 lb/hr of steam, or mmBtu/hr thermal output" in the L_{avg} variable definition, in paragraph (c) of section 2.1.7.1;

e. Removing the word "or" and adding the phrase",100 scfh/(mmBtu/hr of steam load), or (lb/hr)/(mmBtu/hr thermal output)" at the end of the R_h variable definition, and by replacing the phrase "megawatts or 1000 lb/hr of steam" with the phrase "megawatts, 1000 lb/hr of steam, or mmBtu /hr thermal output" in the L_h variable definition, in paragraph (a) of section 2.1.7.2;

f. Replacing the phrase the "Btu/kwh or Btu/lb steam load" with the phrase "Btu/kwh, Btu/lb steam load, or mmBtu heat input/mmBtu thermal output" in the $(GHR)_h$ variable definition; and by replacing the phrase "megawatts or 1000 lb/hr of steam" with the phrase "megawatts, 1000 lb/hr of steam, or mmBtu/hr thermal output" in the L_h variable definition, in paragraph (c) of section 2.1.7.2;

g. Replacing "D4177–82 (Reapproved 1990)" with "D4177–95 (2000)", in the first sentence of section 2.2.3;

h. Replacing "D4057–88" with "D4057–95 (2000)", in sections 2.2.4.1 and 2.2.4.2, and in paragraph (c) of section 2.2.4.3;

i. Revising sections 2.2.5, 2.2.6, and 2.2.7;

j. Revising paragraphs (a)(2) and (e) of section 2.3.1.4;

k. Revising section 2.3.3.1.2;

l. Replacing the identifier "D1826–88" with the identifier "D1826–94 (1998)", by replacing the identifier "D3588–91" with the identifier "D3588–98", by adding the number "(2001)" after the identifier "ASTM D4891–89", by replacing the numbers "2172–86" with the numbers "2172–1996", and by replacing the numbers "2261–90" with the numbers "2261–1999", in section 2.3.4;

m. Adding two sentences at the end of section 2.3.4.1;

n. Replacing the phrase "Gas Total Sulfur Content" in the "Parameter" column of Table D–6 with the phrase "Gas Total Sulfur Content*", and adding the following footnote beneath the Table " * Required no later than July 1, 2003"; and

o. Replacing the words "(Reapproved 1990)" with the words "(1997)e1" in section 3.2.2.

The revisions and additions read as follows:

Appendix D to Part 75—Optional SO_2 Emissions Data Protocol for Gas-Fired and Oil-Fired Units.

2. Procedure

* * * * *

2.1.5.1 Use the procedures in the following standards to verify flowmeter accuracy or design, as appropriate to the type of flowmeter: ASME MFC–3M–1989 (Reaffirmed 1995) ("Measurement of Fluid Flow in Pipes Using Orifice, Nozzle, and Venturi"); ASME MFC–4M–1986 (Reaffirmed 1990), "Measurement of Gas Flow by Turbine Meters;" American Gas Association Report No. 3, "Orifice Metering of Natural Gas and Other Related Hydrocarbon Fluids Part 1: General Equations and Uncertainty Guidelines" (October 1990 Edition), Part 2: "Specification and Installation Requirements" (February 1991 Edition), and Part 3: "Natural Gas Applications" (August 1992 edition) (excluding the modified flow-calculation method in part 3); Section 8, Calibration from American Gas Association Transmission Measurement Committee Report No. 7: Measurement of Gas by Turbine Meters (Second Revision, April 1996); ASME

MFC–5M–1985 (Reaffirmed 2001) ("Measurement of Liquid Flow in Closed Conduits Using Transit-Time Ultrasonic Flowmeters"); ASME MFC–6M–1998 ("Measurement of Fluid Flow in Pipes Using Vortex Flow Meters"); ASME MFC–7M–1987 (Reaffirmed 2001), "Measurement of Gas Flow by Means of Critical Flow Venturi Nozzles;" ISO 8316: 1987(E) "Measurement of Liquid Flow in Closed Conduits-Method by Collection of the Liquid in a Volumetric Tank;" American Petroleum Institute (API) Manual of Measurement Standards, Chapter 4: Section 2, "Conventional Pipe Provers" (Provers Accumulating at Least 10,000 Pulses), Measurement Coordination (Second Edition, March 2001), Section 3, "Small Volume Provers" (First Edition), and Section 5, "Master-Meter Provers", Measurement Coordination (Second Edition, May 2000); API Manual of Petroleum Measurement Standards, Chapter 22—Testing Protocol: Section 2—Differential Pressure Flow Measurement Devices (First Edition, August 2005); or ASME MFC–9M–1988 (Reaffirmed 2001) ("Measurement of Liquid Flow in Closed Conduits by Weighing Method"), for all other flowmeter types (incorporated by reference under § 75.6). The Administrator may also approve other procedures that use equipment traceable to National Institute of Standards and Technology standards. Document such procedures, the equipment used, and the accuracy of the procedures in the monitoring plan for the unit, and submit a petition signed by the designated representative under § 75.66(c). If the flowmeter accuracy exceeds 2.0 percent of the upper range value, the flowmeter does not qualify for use under this part.

* * * * *

2.1.7.1(a) * * *

Where:

R_{base} = Value of the fuel flow rate-to-load ratio during the baseline period; 100 scfh/MWe, 100 scfh/klb per hour steam load, or 100 scfh/mmBtu per hour thermal output for gas-firing; (lb/hr)/MWe, (lb/hr)/klb per hour steam load, or (lb/hr)/mmBtu per hour thermal output for oil-firing.

* * * * *

L_{avg} = Arithmetic average unit load during the baseline period, megawatts, 1000 lb/hr of steam, or mmBtu/hr thermal output.

* * * * *

2.2.5 For each oil sample that is taken on-site at the affected facility, split and label the sample and maintain a portion (at least 200 cc) of it throughout the calendar year and in all cases for not less than 90 calendar days after the end of the calendar year allowance accounting period. This requirement does not apply to oil samples taken from the fuel supplier's storage container, as described in section 2.2.4.3 of this appendix. Analyze oil samples for percent sulfur content by weight in accordance with ASTM D129–00, "Standard Test Method for Sulfur in Petroleum Products (General Bomb Method)," ASTM D1552–01, "Standard Test Method for Sulfur in Petroleum Products (High Temperature Method)," ASTM D2622–98, "Standard Test Method for Sulfur in Petroleum Products by X-Ray Spectrometry," or ASTM D4294–98, "Standard Test Method for Sulfur in Petroleum Products by Energy-Dispersive X-Ray Fluorescence Spectroscopy" (incorporated by reference under § 75.6).

2.2.6 Where the flowmeter records volumetric flow rate rather than mass flow rate, analyze oil samples to determine the density or specific gravity of the oil. Determine the density or specific gravity of the oil sample in accordance with ASTM D287–92(2000)e1, "Standard Test Method for API Gravity of Crude Petroleum and Petroleum Products (Hydrometer Method)," ASTM D1217–93(1998), "Standard Test Method for Density and Relative Density (Specific Gravity) of Liquids by Bingham Pycnometer," ASTM D1481–93 (1997), "Standard Test Method for Density and Relative Density (Specific Gravity) of Viscous Materials by Lipkin Bicapillary," ASTM D1480–93 (1997), "Standard Test Method for Density and Relative Density (Specific Gravity) of Viscous Materials by Bingham Pycnometer," ASTM D1298–99, "Standard Practice for Density, Relative Density (Specific Gravity) or API Gravity of Crude Petroleum and Liquid Petroleum Products by Hydrometer Method," or ASTM D4052–96 (2002)e1, "Standard Test Method for Density and Relative Density of Liquids by Digital Density Meter" (incorporated by reference under § 75.6).

2.2.7 Analyze oil samples to determine the heat content of the fuel. Determine oil heat content in accordance with ASTM D240–00 (Reapproved 1991), "Standard Test Method for Heat of Combustion of Liquid Hydrocarbon Fuels by Bomb Calorimeter," ASTM D4809–00, "Standard Test Method for Heat of Combustion of Liquid Hydrocarbon Fuels by Bomb Calorimeter (Precision Method)," or ASTM D5865–01ae1, "Standard Test Method for Gross Calorific Value of Coal and Coke" (incorporated by reference under § 75.6) or any other procedures listed in section 5.5 of appendix F of this part.

* * * * *

2.3.1.4 * * *

(a) * * *

(2) Historical fuel sampling data for the previous 12 months, documenting the total sulfur content of the fuel and the GCV and/or percentage by volume of methane. The results of all sample analyses obtained by or provided to the owner or operator in the previous 12 months shall be used in the demonstration, and each sample result must meet the definition of pipeline natural gas in § 72.2 of this chapter, except where the results of at least 100 daily (or more frequent) total sulfur samples are provided by the fuel supplier. In that case you may convert these data to monthly averages and then if, for each month, the average total sulfur content is 0.5 grains/100 scf or less, and if the GCV or percent methane requirement is also met, the fuel qualifies as pipeline natural gas. Alternatively, the fuel qualifies as pipeline natural gas if the GCV or percent methane requirement is met and if ≥ 98 percent of the 100 (or more) samples have a total sulfur content of 0.5 grains/100 scf or less; or

* * * * *

(e) If a fuel qualifies as pipeline natural gas based on the specifications in a fuel contract or tariff sheet, no additional, on-going sampling of the fuel's total sulfur content is required, provided that the contract or tariff sheet is current, valid and representative of the fuel combusted in the unit. If the fuel qualifies as pipeline natural gas based on fuel sampling and analysis, on-going sampling of the fuel's sulfur content is required annually and whenever the fuel supply source changes. For the purposes of this paragraph, (e), sampling "annually" means that at least one sample is taken in each calendar year. If the results of at least 100 daily (or more frequent) total sulfur samples have been provided by the fuel supplier since the last annual assessment of the fuel's sulfur content, the data may be used to satisfy the annual sampling requirement for the current year. If this option is chosen, all of the data provided by the fuel supplier shall be used. First, convert the data to monthly averages. Then, if, for each month, the average total sulfur content is 0.5 grains/100 scf or less, and if the GCV or percent methane requirement is also met, the fuel qualifies as pipeline natural gas. Alternatively, the fuel qualifies as pipeline natural gas if the GCV or percent methane requirement is met and if the analysis of the 100 (or more) total sulfur samples since the last annual assessment shows that > 98 percent of the samples have a total sulfur content of 0.5 grains/100 scf or less. The effective date of the annual total sulfur sampling requirement is January 1, 2003.

* * * * *

2.3.3.1.2 Use one of the following methods when using manual sampling (as applicable to the type of gas combusted) to determine the sulfur content of the fuel: ASTM D1072–90(1999), "Standard Test Method for Total Sulfur in Fuel Gases," ASTM D4468–85 (2000) "Standard Test Method for Total Sulfur in Gaseous Fuels by Hydrogenolysis and Radiometric Colorimetry," ASTM D5504–01 "Standard Test Method for Determination of Sulfur Compounds in Natural Gas and Gaseous Fuels by Gas Chromatography and Chemiluminescence," ASTM D6667–04 "Standard Test Method for Determination of Total Volatile Sulfur in Gaseous Hydrocarbons and Liquified Petroleum Gases by Ultraviolet Fluorescence," or ASTM D3246–96 "Standard Test Method for Sulfur in Petroleum Gas By Oxidative Microcoulometry" (incorporated by reference under § 75.6).

* * * * *

2.3.4.1 GCV of Pipeline Natural Gas

* * * If multiple GCV samples are taken and analyzed in a particular month, the GCV values from all samples shall be averaged arithmetically to obtain the monthly GCV. Then, for the purposes of implementing paragraph (c) in section 2.3.7 of this appendix, consider the latest date of any of the individual GCV samples used in the monthly average to be the "date on which the sample was taken".

* * * * *

41. Appendix E to Part 75 is amended by:

a. Adding a new sentence to the end of section 2.1;

b. Replacing the words "section 5.1" with the words "section 8.3.1" in section 2.1.2.1;

c. Replacing the phrase "(MWge or steam load in 1000 lb/hr)" with the phrase "(MWge or steam load in 1000 lb/hr, or mmBtu/hr thermal output)", in section 2.4.1;

d. Revising section 2.5.2; and

e. Adding section 2.5.2.4.

The revisions and additions read as follows:

Appendix E to Part 75—Optional NO_X Emissions Estimation Protocol for Gas-Fired Peaking Units and Oil-Fired Peaking Units.

* * * * *

2.1 Initial Performance Testing

* * * The requirements in section 6.1.2 of appendix A to this part shall be met by any Air Emissions Testing Body (AETB) performing O_2 and NO_X concentration measurements under this appendix, either for units using the excepted methodology in this appendix or for units using the low mass emissions excepted methodology in § 75.19.

* * * * *

2.5.2 Substitute missing NO_X emission rate data using the highest NO_X emission rate tabulated during the most recent set of baseline correlation tests for the same fuel or, if applicable, combination of fuels, except as provided in sections 2.5.2.1, 2.5.2.2, 2.5.2.3, and 2.5.2.4 of this section.

* * * * *

2.5.2.4 Whenever 20 full calendar quarters have elapsed following the quarter of the last baseline correlation test for a particular type of fuel (or fuel mixture), without a subsequent baseline correlation test being done for that type of fuel (or fuel mixture), substitute the fuel-specific NO_X MER (as defined in § 72.2 of this chapter) for each hour in which that fuel (or mixture) is combusted until a new baseline correlation test for that fuel (or mixture) has been successfully completed. For fuel mixtures, report the highest of the individual MER values for the components of the mixture.

42. Appendix F to Part 75 is amended by:

a. Removing the second and third sentences from the introductory text of section 2;

b. Replacing the phrase "method 19 in appendix A of part 60 of this chapter" with the phrase "Method 19 in appendix A–7 to part 60 of this chapter", in the last sentence of section 3.1 and in the last sentence of section 3.2;

c. Adding the phrase ", or (if applicable) in the equations in Method 19 in appendix A–7 to part 60 of this chapter" after the words "of this appendix", in section 3.3;

d. Removing the second and third sentences from section 3.3.4;

e. Adding sections 3.3.4.1 and 3.3.4.2;

f. Revising Table 1;

g. Revising the text preceding Equation F–7a, in section 3.3.6;

h. Adding "(1997)e1" after the identifier "D3176–89", by replacing the identifier "D5291–92" with the identifier "D5291–01", by replacing the identifier "D1945–91" with the identifier "D1945–96 (2001)", and by adding the number "(2000)" after the identifier "D1946–90", in section 3.3.6.1;

i. Revising section 3.3.6.2;

j. Revising the definition of "X_i" under Equation F–8 in section 3.3.6.4;

k. Adding the words "either measured directly with a CO_2 monitor or calculated from wet-basis O_2 data using Equation F–14b," after the words "wet basis," in the first sentence of the C_h variable definition, and by removing the second and third sentences from the C_h variable definition, in section 4.1;

l. Revising section 4.4.1;

m. Removing the second and third sentences from the $\%CO_{2w}$ variable definition in 5.2.1;

n. Removing the second and third sentences from the $\%CO_{2d}$ variable definition in 5.2.2;

o. Removing the second and third sentences from the $\%O_{2w}$ variable definition, and by adding a new sentence at the end of the paragraph, in section 5.2.3;

p. Removing the second and third sentences from the $\%O_{2d}$ variable definition, in section 5.2.4;

q. Replacing the identifier "D240–87" with the identifier "D240–00", by replacing the identifier "D2015–91" with the identifier "D5865–01ae1", and by replacing the identifier "D2382–88" with the identifier "D4809–00" in the GCV_O variable definition, in section 5.5.1;

r. Replacing the identifier "D1826–88" with the identifier "D1826–94 (1998)", by replacing the identifier "D3588–91" with the identifier "D3588–98", by adding the number "(2001)" after the identifier "D4891–89", by replacing the numbers "2172–86" with the numbers "2172–1996", and by replacing the numbers "2261–90" with the numbers "2261–1999" in the GCV_g variable definition, in section 5.5.2;

s. Replacing each identifier "D2234–89" with the identifier "D2234–00e1", in section 5.5.3.1;

t. Revising section 5.5.3.2;

u. Revising the words "as measured by ASTM D3176–89, D1989–92, D3286–91a, or D2015–91, Btu/lb" to read "as measured by ASTM D3176–89 (1997)e1, or D5865ae1, Btu/lb." in the definition of the GCV_c variable in Equation F–21;

v. Revising the word "lb/hr" to read "lb/hr, or mmBtu/hr" in the definition of the SF variable in Equation F–21b;

w. Revising the title and text of section 7;

x. Adding the words "of this appendix" after the words "section 8.1, 8.2, or 8.3" and after the words "section 8.4" in the introductory text for section 8;

y. Revising sections 8.1 and 8.1.1;

z. Revising section 8.2;

aa. Adding sections 8.2.1 and 8.2.2;

bb. Revising section 8.3;

cc. Revising section 8.4; and

dd. Adding section 10.

The revisions and additions read as follows:

Appendix F to Part 75—Conversion Procedures

* * * * *

3.3.4 * * *

3.3.4.1 For boilers, a minimum concentration of 5.0 percent CO_2 or a maximum concentration of 14.0 percent O_2 may be substituted for the measured diluent gas concentration value for any operating hour in which the hourly average CO_2 concentration is <5.0 percent CO_2 or the hourly average O_2 concentration is >14.0 percent O_2. For stationary gas turbines, a minimum concentration of 1.0 percent CO_2 or a maximum concentration of 19.0 percent O_2 may be substituted for measured diluent gas concentration values for any operating hour in which the hourly average CO_2 concentration is <1.0 percent CO_2 or the hourly average O_2 concentration is >19.0 percent O_2.

3.3.4.2 If NO_X emission rate is calculated using either Equation 19–3 or 19–5 in Method 19 in appendix A–7 to part 60 of this chapter, a variant of the equation shall be used whenever the diluent cap is applied. The modified equations shall be designated as Equations 19–3D and 19–5D, respectively. Equation 19–3D is structurally the same as Equation 19–3, except that the term "$\%O_{2w}$" in the denominator is replaced with the term "$\%O_{2dc} \times [(100 - \% H_2O)/100]$", where $\%O_{2dc}$ is the diluent cap value. The numerator of Equation 19–5D is the same as Equation 19–5; however, the denominator of Equation 19–5D is simply "$20.9 - \%O_{2dc}$", where $\%O_{2dc}$ is the diluent cap value.

* * * * *

TABLE 1.—F AND F_C-FACTORS [1]

Fuel	F-factor (dscf/mmBtu)	F_C-factor (scf CO_2/mmBtu)
Coal (as defined by ASTM D388–99e1):		
Anthracite	10,100	1,970
Bituminous	9,780	1,800
Sub-bituminous	9,819	1,840
Lignite	9,860	1,910
Petroleum Coke	9,832	1,853
Tire Derived Fuel 1	10,261	1,803
Oil	9,190	1,420
Gas:		
Natural gas	8,710	1,040
Propane	8,710	1,190
Butane	8,710	1,250
Wood:		
Bark	9,600	1,920
Wood residue	9,240	1,830

[1] Determined at standard conditions: 20 °C (68 °F) and 29.92 inches of mercury.

* * * * *

3.3.6 Equations F–7a and F–7b may be used in lieu of the F or F_c factors specified in Section 3.3.5 of this appendix to calculate a site-specific dry-basis F factor (dscf/mmBtu) or a site-specific F_c factor (scf CO_2/mmBtu), on either a dry or wet basis. At a minimum, the site-specific F or F_c factor must be based on 9 samples of the fuel. Fuel samples taken during each run of a RATA are acceptable for this purpose. The site-specific F or F_c factor must be re-determined at least annually, and the value from the most recent determination must be used in the emission calculations. Alternatively, the previous F or F_c value may continue to be used if it is higher than the value obtained in the most recent determination. The owner or operator shall keep records of all site-specific F or F_c determinations, active for at least 3 years. (Calculate all F- and F_c factors at standard conditions of 20 °C (68 °F) and 29.92 inches of mercury).

* * * * *

3.3.6.2 GCV is the gross calorific value (Btu/lb) of the fuel combusted determined by ASTM D5865–01ae1 "Standard Test Method for Gross Calorific Value of Coal and Coke", and ASTM D240–00 "Standard Test Method for Heat of Combustion of Liquid Hydrocarbon Fuels by Bomb Calorimeter", or ASTM D4809–00, "Standard Test Method for Heat of Combustion of Liquid Hydrocarbon Fuels by Bomb Calorimeter (Precision Method) for oil; and ASTM D3588–98 "Standard Practice for Calculating Heat Value, Compressibility Factor, and Relative Density (Specific Gravity) of Gaseous Fuels," ASTM D4891–89 (2001) "Standard Test Method for Heating Value of Gases in Natural Gas Range by Stoichiometric Combustion," GPA Standard 2172–1996 "Calculation of Gross Heating Value, Relative Density and Compressibility Factor for Natural Gas Mixtures from Compositional Analysis," GPA Standard 2261–1999 "Analysis for Natural Gas and Similar Gaseous Mixtures by Gas Chromatography," or ASTM D1826–94 (1998), "Standard Test Method for Calorific (Heating) Value of Gases in Natural Gas Range by Continuous Recording Calorimeter" for gaseous fuels, as applicable. (These methods are incorporated by reference under § 75.6).

* * * * *

3.3.6.4 * * *

X_i = Fraction of total heat input derived from each type of fuel (*e.g.*, natural gas, bituminous coal, wood). Each X_i value shall be determined from the best available information on the quantity of fuel combusted and the GCV value, over a specified time period. The owner or operator shall explain the method used to calculate X_i in the hardcopy portion of the monitoring plan for the unit. The X_i values may be determined and updated either hourly, daily, weekly, or monthly. In all cases, the prorated F-factor used in the emission calculations shall be determined using the X_i values from the most recent update.

* * * * *

4. Procedure for CO_2 Mass Emissions

* * * * *

4.4.1 If the owner or operator elects to use data from an O_2 monitor to calculate CO_2 concentration, the appropriate F and F_C factors from section 3.3.5 of this appendix shall be used in one of the following equations (as applicable) to determine hourly average CO_2 concentration of flue gases (in percent by volume) from the measured hourly average O_2 concentration:

$$CO_{2d} = 100 \frac{F_c}{F} \frac{20.9 - O_{2d}}{20.9} \qquad \text{(Eq. F-14a)}$$

Where:

CO_{2d} = Hourly average CO_2 concentration during unit operation, percent by volume, dry basis.

F, F_C = F-factor or carbon-based F_c-factor from section 3.3.5 of this appendix.

20.9 = Percentage of O_2 in ambient air.

O_{2d} = Hourly average O_2 concentration during unit operation, percent by volume, dry basis.

$$CO_{2w} = \frac{100}{20.9} \frac{F_c}{F} \left[20.9 \left(\frac{100 - \%H_2O}{100} \right) - O_{2w} \right] \qquad \text{(Eq. F-14b)}$$

Where:

CO_{2w} = Hourly average CO_2 concentration during unit operation, percent by volume, wet basis.

O_{2w} = Hourly average O_2 concentration during unit operation, percent by volume, wet basis.

F, F_c = F-factor or carbon-based F_C-factor from section 3.3.5 of this appendix.
20.9 = Percentage of O_2 in ambient air.
$\%H_2O$ = Moisture content of gas in the stack, percent.

For any hour where Equation F–14b results in a negative hourly average CO_2 value, 0.0% CO_{2w} shall be recorded as the average CO_2 value for that hour.

* * * * *

5. Procedures for Heat Input

* * * * *

5.2.3 * * *

For any hour where Equation F–17 results in a negative hourly heat input rate, 1.0 mmBtu/hr shall be recorded and reported as the heat input rate for that hour.

* * * * *

5.5.3.2 Use ASTM D2013–01, "Standard Method of Preparing Coal Samples for Analysis," for preparation of a daily coal sample and analyze each daily coal sample for gross calorific value using ASTM D5865–01ae1, "Standard Test Method for Gross Calorific Value of Coal and Coke" (All ASTM methods are incorporated by reference under § 75.6 of this part.)

On-line coal analysis may also be used if the on-line analytical instrument has been demonstrated to be equivalent to the applicable ASTM methods under §§ 75.23 and 75.66.

* * * * *

7. Procedures for SO_2 Mass Emissions, Using Default SO_2 Emission Rates and Heat Input Measured by CEMS

The owner or operator shall use Equation F–23 to calculate hourly SO_2 mass emissions in accordance with § 75.11(e)(1) during the combustion of gaseous fuel, for a unit that uses a flow monitor and a diluent gas monitor to measure heat input, and that qualifies to use a default SO_2 emission rate under section 2.3.1.1, 2.3.2.1.1, or 2.3.6(b) of appendix D to this part. Equation F–23 may also be applied to the combustion of solid or liquid fuel that meets the definition of very low sulfur fuel in § 72.2 of this chapter, combinations of such fuels, or mixtures of such fuels with gaseous fuel, if the owner or operator has received approval from the Administrator under § 75.66 to use a site-specific default SO_2 emission rate for the fuel or mixture of fuels.

$$E_h = (ER)(HI) \qquad \text{(Eq. F-23)}$$

Where:

E_h = Hourly SO_2 mass emission rate, lb/hr.
ER = Applicable SO_2 default emission rate for gaseous fuel combustion, from section 2.3.1.1, 2.3.2.1.1, or 2.3.6(b) of appendix D to this part, or other default SO_2 emission rate for the combustion of very low sulfur liquid or solid fuel, combinations of such fuels, or mixtures of such fuels with gaseous fuel, as approved by the Administrator under § 75.66, lb/mmBtu.
HI = Hourly heat input rate, determined using the procedures in section 5.2 of this appendix, mmBtu/hr.

* * * * *

8. Procedures for NO_X Mass Emissions

* * * * *

8.1 The owner or operator may use the hourly NO_X emission rate and the hourly heat input rate to calculate the NO_X mass emissions in pounds or the NO_X mass emission rate in pounds per hour, (as required by the applicable reporting format), for each unit or stack operating hour, as follows:

8.1.1 If both NO_X emission rate and heat input rate are monitored at the same unit or stack level (*e.g.*, the NO_X emission rate value and the heat input rate value both represent all of the units exhausting to the common stack), then (as required by the applicable reporting format) either:

(a) Use Equation F–24 to calculate the hourly NO_X mass emissions (lb)

$$M_{(NO_X)_h} = ER_{(NO_X)_h} HI_h t_h \qquad \text{(Eq. F-24)}$$

Where:

$M_{(NOx)h}$ = NO_X mass emissions in lbs for the hour.
$ER_{(NOx)h}$ = Hourly average NO_X emission rate for hour h, lb/mmBtu, from section 3 of this appendix, from method 19 of appendix A to part 60 of this chapter, or from section 3.3 of appendix E to this part. (Include bias-adjusted NO_X emission rate values, where the bias-test procedures in appendix A to this part shows a bias-adjustment factor is necessary.)
HI_h = Hourly average heat input rate for hour h, mmBtu/hr. (Include bias-adjusted flow rate values, where the bias-test procedures in appendix A to this part shows a bias-adjustment factor is necessary.)
t_h = Monitoring location operating time for hour h, in hours or fraction of an hour (in equal increments that can range from one hundredth to one quarter of an hour, at the option of the owner or operator). If the combined NO_X emission rate and heat input are monitored for all of the units in a common stack, the monitoring location operating time is equal to the total time when any of those units was exhausting through the common stack; or

(b) Use Equation F–24a to calculate the hourly NO_X mass emission rate (lb/hr).

$$E_{(NO_X)h} = ER_{(NO_X)_h} HI_h \qquad \text{(Eq. F-24a)}$$

Where:

$E_{(NOx)h}$ = NO_X mass emissions rate in lbs/hr for the hour.
$ER_{(NOx)h}$ = Hourly average NO_X emission rate for hour h, lb/mmBtu, from section 3 of this appendix, from method 19 of appendix A to part 60 of this chapter, or from section 3.3 of appendix E to this part. (Include bias-adjusted NO_X emission rate values, where the bias-test procedures in appendix A to this part shows a bias-adjustment factor is necessary.)
HI_h = Hourly average heat input rate for hour h, mmBtu/hr. (Include bias-adjusted flow rate values, where the bias-test procedures in appendix A to this part shows a bias-adjustment factor is necessary.)

* * * * *

8.2 Alternatively, the owner or operator may use the hourly NO_X concentration (as measured by a NO_X concentration monitoring system) and the hourly stack gas volumetric flow rate to calculate the NO_X mass emission rate (lb/hr) for each unit or stack operating hour, in accordance with section 8.2.1 or 8.2.2 of this appendix (as applicable). If the hourly NO_X mass emissions are to be reported in lb, Equation F–26c in section 8.3 of this appendix shall be used to convert the hourly NO_X mass emission rates to hourly NO_X mass emissions (lb).

8.2.1 When the NO_X concentration monitoring system measures on a wet basis, first calculate the hourly NO_X mass emission rate (in lb/hr) during unit (or stack) operation, using Equation F–26a. (Include bias-adjusted flow rate or NO_X concentration values, where the bias-test procedures in appendix A to this part shows a bias-adjustment factor is necessary.)

$$E_{(NO_X)_h} = K\, C_{hw} Q_h \qquad \text{(Eq. F-26a)}$$

Where:

$E_{(NOx)h}$ = NO_X mass emissions rate in lb/hr.
$K = 1.194 \times 10^{-7}$ for NO_X, (lb/scf)/ppm.
C_{hw} = Hourly average NO_X concentration during unit operation, wet basis, ppm.
Q_h = Hourly average volumetric flow rate during unit operation, wet basis, scfh.

8.2.2 When NO_X mass emissions are determined using a dry basis NO_X concentration monitoring system and a wet basis flow monitoring system, first calculate hourly NO_X mass emission rate (in lb/hr) during unit (or stack) operation, using Equation F–26b. (Include bias-adjusted flow rate or NO_X concentration values, where the bias-test procedures in appendix A to this part shows a bias-adjustment factor is necessary.)

$$E_{(NO_X)_h} = K\, C_{hd} Q_h \frac{(100 - \%H_2O)}{(100)} \qquad \text{(Eq. F-26b)}$$

Where:

$E_{(NOx)h}$ = NO_X mass emissions rate, lb/hr.
$K = 1.194 \times 10^{-7}$ for NO_X, (lb/scf)/ppm.
C_{hd} = Hourly average NO_X concentration during unit operation, dry basis, ppm.
Q_h = Hourly average volumetric flow rate during unit operation, wet basis, scfh

$\%H_2O$ = Hourly average stack moisture content during unit operation, percent by volume.

8.3 When hourly NO_X mass emissions are reported in pounds and are determined using a NO_X concentration monitoring system and a flow monitoring system, calculate NO_X mass emissions (lb) for each unit or stack operating hour by multiplying the hourly NO_X mass emission rate (lb/hr) by the unit operating time for the hour, as follows:

$$M_{(NO_X)_h} = E_h t_h \qquad \text{(Eq. F-26c)}$$

Where:

$M_{(NO_X)h}$ = NO_X mass emissions for the hour, lb.

E_h = Hourly NO_X mass emission rate during unit (or stack) operation from Equation F–26a in section 8.2.1 of this appendix or Equation F–26b in section 8.2.2 of this appendix (as applicable), lb/hr.

t_h = Unit operating time or stack operating time (as defined in § 72.2 of this chapter) for hour "h", in hours or fraction of an hour (in equal increments that can range from one hundredth to one quarter of an hour, at the option of the owner or operator).

8.4 Use the following procedures to calculate quarterly, cumulative ozone season, and cumulative yearly NO_X mass emissions, in tons:

(a) When hourly NO_X mass emissions are reported in lb, use Eq. F–27.

$$M_{(NO_X)_{time\ period}} = \frac{\sum_{h=1}^{p} M_{(NO_X)_h}}{2000} \qquad \text{(Eq. F-27)}$$

Where:

$M_{(NOX)time\ period}$ = NO_X mass emissions in tons for the given time period (quarter, cumulative ozone season, cumulative year-to-date).

$M_{(NOX)h}$ = NO_X mass emissions in lb for the hour.

p = The number of hours in the given time period (quarter, cumulative ozone season, cumulative year-to-date).

(b) When hourly NO_X mass emission rate is reported in lb/hr, use Eq. F–27a.

$$M_{(NO_X)_{time\ period}} = \frac{\sum_{h=1}^{p} E_{(NO_X)_h} t_h}{2000} \qquad \text{(Eq. F-27a)}$$

Where:

$M_{(NOX)time\ period}$ = NO_X mass emissions in tons for the given time period (quarter, cumulative ozone season, cumulative year-to-date).

$E_{(NOX)h}$ = NO_X mass emission rate in lb/hr for the hour.

p = The number of hours in the given time period (quarter, cumulative ozone season, cumulative year-to-date).

t_h = Monitoring location operating time for hour h, in hours or fraction of an hour (in equal increments that can range from one hundredth to one quarter of an hour, at the option of the owner or operator).

* * * * *

10. Moisture Determination from Wet and Dry O_2 Readings

If a correction for the stack gas moisture content is required in any of the emissions or heat input calculations described in this appendix, and if the hourly moisture content is determined from wet- and dry-basis O_2 readings, use Equation F–31 to calculate the percent moisture, unless a "K" factor or other mathematical algorithm is developed as described in section 6.5.7(a) of appendix A to this part:

$$\%H_2O = \frac{(O_{2d} - O_{2w})}{O_{2d}} \times 100 \qquad \text{(Eq. F-31)}$$

Where:

% H_2O = Hourly average stack gas moisture content, percent H_2O

O_{2d} = Dry-basis hourly average oxygen concentration, percent O_2

O_{2w} = Wet-basis hourly average oxygen concentration, percent O_2

* * * * *

43. Appendix G to Part 75—is amended by:

a. Revising section 2.1.2;

b. Replacing the identifier "D3174–89" with the identifier "D3174–00" in section 2.2.1; and

c. Adding the number "(1997)" after the identifier "D3178–89" in section 2.2.2.

The revisions and additions read as follows:

Appendix G to Part 75—Determination of CO_2 Emissions

* * * * *

2.1.2 Determine the carbon content of each fuel sample using one of the following methods: ASTM D3178–89 (1997) or ASTM 5373–93 for coal; ASTM D5291–01 "Standard Test Methods for Instrumental Determination of Carbon, Hydrogen, and Nitrogen in Petroleum Products and Lubricants," ultimate analysis of oil, or computations based upon ASTM D3238–95 (2000)e1 and either ASTM D2502–92 (1996) or ASTM D2503–92 (1997) for oil; and computations based on ASTM D1945–96 (2001) or ASTM D1946–90 (2000) for gas.

* * * * *

44. Appendix K to Part 75 is amended by:

a. Adding a sentence to the end of section 7.2.3; and

b. Revising Table K–1 of section 8.

c. Adding the number "2" after the words "sections 1 and" in the definition of the variable M* in Equation K–5.

The revisions and additions read as follows:

Appendix K to Part 75—Quality Assurance and Operating Procedures for Sorbent Trap Monitoring Systems

* * * * *

7.2.3 * * * The sample flow rate through a sorbent trap monitoring system during any hour (or portion of an hour) in which the unit is not operating shall be zero.

* * * * *

TABLE K–1.—QUALITY ASSURANCE/QUALITY CONTROL CRITERIA FOR SORBENT TRAP MONITORING SYSTEMS

QA/QC test or specification	Acceptance criteria	Frequency	Consequences if not met
Pre-test leak check	≤4% of target sampling rate	Prior to sampling	Sampling shall not commence until the lead check is passed.
Post-test leak check	≤4% of average sampling rate	After sampling	Sample invalidated.**
Ratio of stack gas flow rate to sample flow rate.	Maintain within ± 25% of initial ratio from first hour of data collection period.	Every hour throughout data collection period.	Sample invalidated if more than 5% of the hourly ratios or 5 hourly ratios (whichever is less restrictive) are not maintained within the acceptance criteria.**
Sorbent trap section 2 breakthrough.	≤5% of Section 1 Hg mass	Every sample	Sample invalidated.**
Paired sorbent trap agreement	≤10% Relative Deviation (RD) if the average concentration is >1.0 μg/m^3, and ≤20% RD if the average concentration is ≤1.0 μg/m^3.	Every sample	Either invalidate the data from the paired traps or report the results from the trap resulting in the higher Hg concentration.
Spike Recovery Study	Average recovery between 85% and 115% for each of the 3 spike concentration levels.	Prior to analyzing field samples and prior to use of new sorbent media.	Field samples shall not be analyzed until the percent recovery criteria has been met.
Multipoint analyzer calibration	Each analyzer reading within ±10% of true value and $r^2 \geq 0.99$.	On the day of analysis, before analyzing any samples.	Recalibrate until successful.
Analysis of independent calibration standard.	Within ±10% of true value	Following daily calibration, prior to analyzing field samples.	Recalibrate and repeat independent standard analysis until successful.
Spike recovery from section 3 of sorbent trap.	75–125% of spike amount	Every sample	Sample invalidated.**
RATA	RA ≤20.0% *or* Mean difference ≤1.0 μg/dscm for low emitters.	For initial certification and annually thereafter.	Data from the system are invalidated until a RATA is passed.
Dry gas meter calibration (At 3 orifice initially, and 1 setting thereafter).	Calibration factor (Y) within ±5% of average value from the initial (3-point) calibration.	Prior to initial use and at least quarterly thereafter.	Recalibrate the meter at three orifice settings to determine a new value of Y.
Temperature sensor calibration	Absolute temperature measured by sensor within ±1.5% of a reference sensor.	Prior to initial use and at least quarterly thereafter.	Recalibrate. Sensor may not be used until specification is met.
Barometer calibration	Absolute pressure measured by instrument within ±10 mm Hg of reading with a mercury barometer.	Prior to initial use and at least quarterly thereafter.	Recalibrate. Instrument may not be used until specification is met.

** However, if only one of the paired samples fails to meet this specification and the other sample meets all of the applicable QA criteria, the results of the valid sample may be used for reporting under this part, provided that the measured Hg concentration is multiplied by a factor of 1.222. If both samples are invalidated and quality-assured data from a certified backup monitoring system, reference method, or approved alternative monitoring system are unavailable, substitute data must be used.

[FR Doc. 06–6819 Filed 8–21–06; 8:45 am]

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OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION

Privacy Act; implementation; comments due by 8-28-06; published 7-28-06 [FR E6-12124]

PERSONNEL MANAGEMENT OFFICE

Allowances and differentials:

LIST OF PUBLIC LAWS

This is a continuing list of public bills from the current session of Congress which have become Federal laws. It may be used in conjunction with "PLUS" (Public Laws Update Service) on 202–741–6043. This list is also available online at *http://www.archives.gov/federal-register/laws.html.*

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H.R. 4646/P.L. 109–273

To designate the facility of the United States Postal Service located at 7320 Reseda Boulevard in Reseda, California, as the "Coach John Wooden Post Office Building". (Aug. 17, 2006; 120 Stat. 773)

H.R. 4811/P.L. 109–274

To designate the facility of the United States Postal Service located at 215 West Industrial Park Road in Harrison, Arkansas, as the "John Paul Hammerschmidt Post Office Building". (Aug. 17, 2006; 120 Stat. 774)

H.R. 4962/P.L. 109–275

To designate the facility of the United States Postal Service located at 100 Pitcher Street in Utica, New York, as the "Captain George A. Wood Post Office Building". (Aug. 17, 2006; 120 Stat. 775)

H.R. 5104/P.L. 109–276

To designate the facility of the United States Postal Service located at 1750 16th Street South in St. Petersburg, Florida, as the "Morris W. Milton Post Office". (Aug. 17, 2006; 120 Stat. 776)

H.R. 5107/P.L. 109–277

To designate the facility of the United States Postal Service located at 1400 West Jordan Street in Pensacola, Florida, as the "Earl D. Hutto Post Office Building". (Aug. 17, 2006; 120 Stat. 777)

H.R. 5169/P.L. 109–278

To designate the facility of the United States Postal Service located at 1310 Highway 64 NW. in Ramsey, Indiana, as the "Wilfred Edward 'Cousin Willie' Sieg, Sr. Post Office". (Aug. 17, 2006; 120 Stat. 778)

H.R. 5540/P.L. 109–279

To designate the facility of the United States Postal Service located at 217 Southeast 2nd Street in Dimmitt, Texas, as the "Sergeant Jacob Dan Dones Post Office". (Aug. 17, 2006; 120 Stat. 779)

H.R. 4/P.L. 109–280

Pension Protection Act of 2006 (Aug. 17, 2006; 120 Stat. 780)

Last List August 17, 2006

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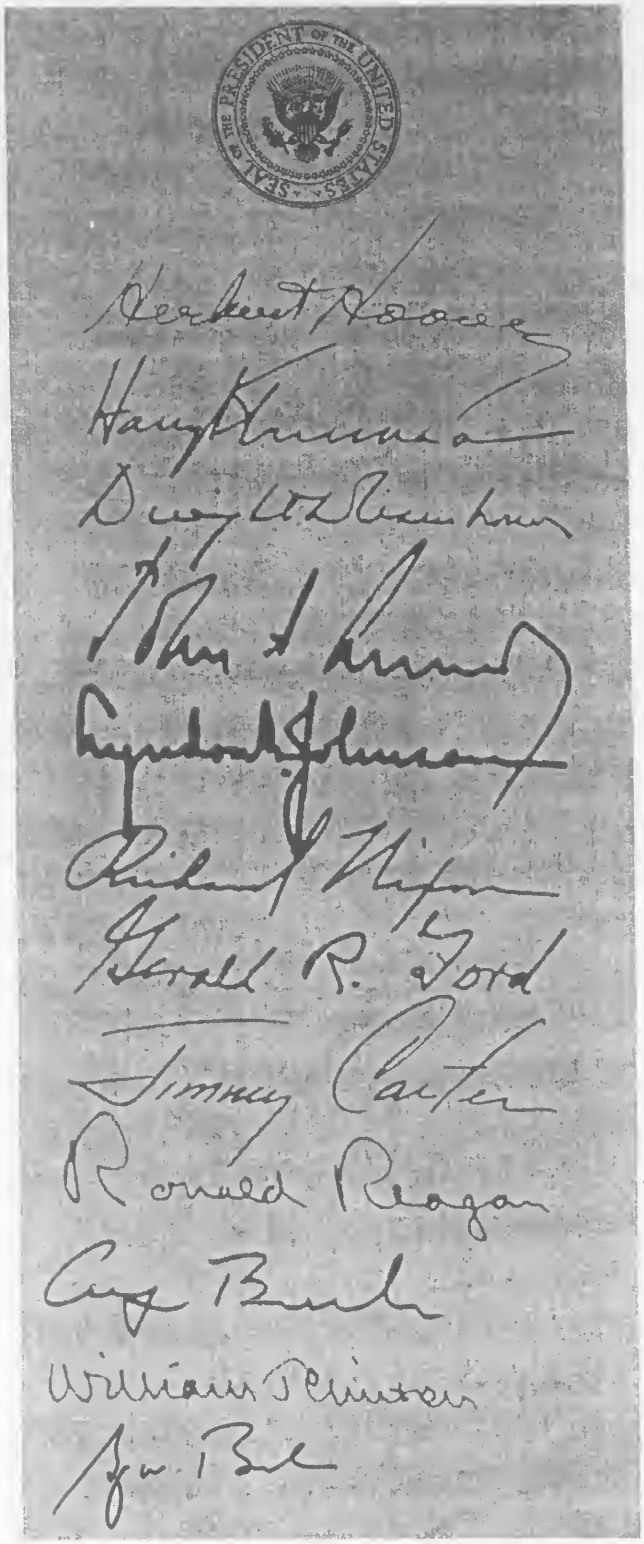

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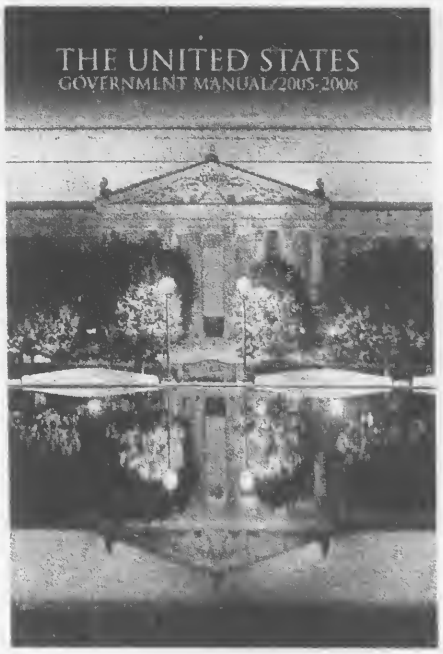

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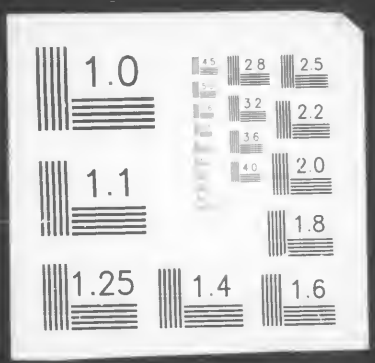
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