this 1-year authorization are unlikely to result in measureable cumulative effects. However, this will be a subject for future review as commercial payload launches from Vandenberg increase over the next few years.

Comment 4. NMFS requires a report only at the end of the authorization period. The MMC recommends at a minimum the Air Force should report killed and injured animals immediately and that the authorization should be rescinded if a marine mammal is killed or injured as a result of the authorization.

Response. NMFS will require as part of the authorization that the Air Force submit a monitoring report, no later than 90 days after each Delta II launch. Because no humans are allowed on the coastline adjacent to the launch pad during launches, launch effect observations are limited to time-lapse photography. This limits the cause and effect criterion necessary to revoke an authorization. If there are indications that more than harassment takings are occurring, NMFS will review the evidence to determine appropriate action.

Comment 5. The MMC recommends that NMFS consult with the Air Force to determine whether a 5-year authorization under section 101(a)(5)(A) would be more appropriate.

Response. NMFS agrees with this recommendation and several months ago discussed this option with the Air Force. The Air Force's 5-year authorization, which expires on September 23, 1996, is limited to Titan IV launches. We anticipate they will apply for a new 5-year authorization late this year or early next year, which should include all planned launches at Vandenberg. In the interim, while this new authorization request is being prepared and new regulations proposed, the Air Force will continue to apply for incidental harassment authorizations for launches.

Conclusion

Based upon the information provided in the proposed authorization, NMFS has determined that the short-term impact of the launching of Delta II rockets is expected to result at worst, in a temporary reduction in utilization of the haulout as seals or sea lions leave the beach for the safety of the water. These launchings are not expected to result in any reduction in the number of pinnipeds, and they are expected to continue to occupy the same area. In addition, there will not be any impact on the habitat itself. Based upon studies conducted for previous space vehicle launches at Vandenberg, significant long-term impacts on pinnipeds at Vandenberg and the northern Channel Islands are unlikely.

Therefore, since NMFS is assured that the taking will not result in more than the harassment (as defined by the MMPA Amendments of 1994) of a small number of harbor seals, California sea lions, and northern elephant seals; would have only a negligible impact on the species, and would result in the least practicable impact on the stock, NMFS determined that the requirements of section 101(a)(5)(D) had been met and the incidental harassment authorization was issued.

Dated: Ocotober 2, 1995.

Patricia A. Montanio,

Acting Director, Office of Protected Resources, National Marine Fisheries Service.

[FR Doc. 95–25001 Filed 10–6–95; 8:45 am]

BILLING CODE 3510–22–F

Patent and Trademark Office

[Docket No. 95053144–5144–01]

Request for Comments on Proposed Examination Guidelines for Computer-Implemented Inventions; Comment Period Extension

AGENCY: Patent and Trademark Office, Commerce.

ACTION: Notice of extension of comment period and document availability.

SUMMARY: This notice announces the availability of the legal analysis referred to in the Request for Comments on Proposed Examination Guidelines for Computer-Implemented Inventions and extends the comment period of the notice until November 13, 1995.

DATES: Written comments must be received on or before November 13, 1995.

ADDRESSES: Written comments should be addressed to Box 8, Commissioner of Patents and Trademarks, Washington, DC 20231, marked to the attention of Nancy J. Linck, Solicitor. Comments may also be submitted by telefax at (730) 305–9373 or by electronic mail through the INTERNET to ''comments-software@uspto.gov.''

FOR FURTHER INFORMATION CONTACT: Karen A. Buchanan, Associate Solicitor, by telephone at (703) 305–9035, by telefax at 703–305–9373, or by mail to her attention addressed to Box 8, Commissioner of Patents and Trademarks, Washington, DC 20231.

The legal analysis may be obtained from Karen A. Buchanan. In addition, the legal analysis is available through anonymous file transfer protocol (ftp) via the Internet (address: ftp://ftp.uspto.gov/pub/software/) and through the World Wide Web (address: http://www.uspto.gov/web/software/).

SUPPLEMENTARY INFORMATION: On June 2, 1995 (60 FR 28778), the PTO published its Request for Comments on Proposed Examination Guidelines for Computer-Implemented Inventions. This notice reported that a legal analysis supporting the guidelines was being prepared. The legal analysis is now available and may be obtained from Karen A. Buchanan, who can be reached using the information indicated above.

The Patent and Trademark Office is also extending the comment period until November 13, 1995, in order to give the public an opportunity to include comments on the guidelines in light of the legal analysis which is now being made available.

Dated: October 4, 1995.

Philip G. Hampton, II,

Acting Assistant Secretary of Commerce and Acting Commissioner of Patents and Trademarks.

[FR Doc. 95–25041 Filed 10–6–95; 8:45 am]

BILLING CODE 3510–16–M

DEPARTMENT OF DEFENSE

Office of the Secretary

Medical and Dental Reimbursement Rates for Fiscal Year 1996

Notice is hereby given that the Deputy Chief Financial Officer in a memorandum dated September 22, 1995, established the following reimbursement rates for inpatient and outpatient medical care to be provided in FY 1996. These rates are effective October 1, 1995.

INPATIENT OUTPATIENT AND OTHER RATES AND CHARGES

Per inpatient day	International military education and training (IMET)	Inter-agency and other Federal agency sponsored patients	Other
I. Inpatient Rates [1 2]			
A. Burn Center .	$1,871	$3,564	$3,794

INPATIENT OUTPATIENT AND OTHER RATES AND CHARGES—Continued

Per inpatient day	International military education and training (IMET)	Interagency and other Federal agency sponsored patients	Other
B. Surgical Care Services (Cosmetic Surgery)	773	1,472	1,567
C. All Other Inpatient Services (Based on Diagnosis Related Groups (DRG) Charges [3])			

1. FY 1996 Direct Care Inpatient Reimbursement Rates

Adjusted standard amount	IMET	Interagency	Other (full) 3rd party
Large Urban	$2,387	$4,452	$4,713
Other Urban/Rural .	2,284	4,450	4,745
Overseas ..	2,316	5,707	6,038

2. Overview

The FY 1996 inpatient rates are based on the cost per DRG which is the inpatient full reimbursement rate per hospital discharge, weighted to reflect the intensity of the principal diagnosis involved. The average costs per Relative Weighted Product (RWP) for large urban, other urban/rural and overseas facilities will be published annually as an inpatient standardized amount. (See item 1 above). A ''relative weighted product'' for each DRG case to apply to the standardized amount will be determined from the DRG weights published annually for hospital reimbursement rates under the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) pursuant to 32 CFR 199.14(a)(1) with adjustments for outliers. Standardized amounts will be adjusted for area wage differences and indirect medical education. An example of how to apply DoD costs to a DRG standardized weight to arrive at DoD costs is contained in part 3 of Section I.C., below.

3. Example of Adjusted Standardized Amounts for Procedures Performed

Large Urban Area—Example

a. The cost to be recovered is DoD's cost for medical services provided in a large urban area. Billings will be at the third party rate.

b. DRG 020: Nervous System infection except viral meningitis. Relative Weighted Product for an inlier case is the CHAMPUS weight of 2.0327.

c. The DoD adjusted standardized amount to be recovered is $4,713 (i.e., the third party rate as shown in the table).

d. DoD cost to be recovered at a non-teaching hospital with area wage index of 1.0 is the RWP factor (2.0327) in item 3.b., above, times the amount ($4,713) in 3.c., above.

Cost to be recovered is $9,580.

Meprs code [4]	Per visit clinical services	International military education and training (IMET)	Interagency and other Federal agency sponsored patients	Other
	II. Outpatient Rates [1 2]			
A. Medical Care:				
BAA	Internal Medicine	$79	$154	$163
BAB	Allergy	27	53	56
BAC	Cardiology	56	109	116
BAE	Diabetes	34	66	70
BAF	Endocrinology	73	143	152
BAG	Gastroenterology	92	179	190
BAH	Hematology	130	253	269
BAI	Hypertension	29	57	60
BAJ	Nephrology	111	216	230
BAK	Neurology	86	166	177
BAL	Nutrition	24	47	51
BAM	Oncology	76	148	157
BAN	Pulmonary Disease	99	193	205
BAO	Rheumatology	71	139	147
BAP	Dermatology	48	94	100
BAQ	Infectious Disease	67	130	139
BAR	Physical Medicine	64	124	132
B. Surgical Care:				
BBA	General Surgery	93	181	193
BBB	Cardiovascular/Thoracic Surgery	89	172	183
BBC	Neurosurgery	110	215	228
BBD	Ophthalmology	64	123	131
BBE	Organ Transplant	127	246	262
BBF	Otolaryngology	73	141	150
BBG	Plastic Surgery	82	159	170
BBH	Proctology	77	150	159
BBI	Urology	84	164	174
BBJ	Pediatric Surgery	61	118	125

Meprs code [4]	Per visit clinical services	International military education and training (IMET)	Interagency and other Federal agency sponsored patients	Other
C. Obstetrical and Gynecological (OB–GYN):				
BCA	Family Planning	42	82	87
BCB	Gynecology	57	111	118
BCC	Obstetrics	55	106	113
D. Pediatric Care:				
BDA	Pediatric	43	83	88
BDB	Adolescent	42	81	86
BDC	Well Baby	31	60	64
E. Orthopaedic Care:				
BEA	Orthopaedic	79	154	163
BEB	Cast Clinic	33	65	69
BEC	Hand Surgery	33	65	69
BEE	Orthopaedic Appliance	54	105	112
BEF	Podiatry	38	74	79
BEZ	Chiropractic Clinic	24	46	49
F. Psychiatric and/or Mental Health Care:				
BFA	Psychiatry	80	155	165
BFB	Psychology	65	127	135
BFC	Child Guidance	27	53	56
BFD	Mental Health	57	112	119
BFE	Social Work	62	121	129
BFF	Substance Abuse Rehabilitation	48	93	98
G. Primary Medical Care:				
BGA	Family Practice	51	99	105
BHA	Primary Care	50	96	102
BHB	Medical Examination	45	88	93
BHC	Optometry	35	67	71
BHD	Audiology Clinic	28	54	57
BHE	Speech Pathology	42	82	88
BHF	Community Health	39	76	80
BHG	Occupational Health	41	79	84
BHI	Immediate Care Clinic	67	131	139
H. Emergency Medical Care: BIA	Emergency Care Clinic	79	153	163
I. Flight Medicine Clinic: BJA	Flight Medicine	73	142	151
J. Underseas Medicine Care: BKA	Underseas Medicine Clinic	32	61	65
K. Rehabilitative Services:				
BLA	Physical Therapy	24	46	49
BLB	Occupational Therapy	47	91	96
BLC	Neuromuscularskeletal Screening	18	35	37
L. Same Day Surgery		378	721	767

III. Other Rates and Charges

	A. Immunizations	9	17	18
	B. Hyperbaric Services			
	1–60 minutes	113	219	233
	61–120 minutes	221	430	452
	121–180 minutes	330	640	671
	181–240 minutes	438	851	889
	Each Additional Hour	113	219	233

(Note: Charges may be prorated based on usage)

	C. Family Member Rate (formerly Military Dependents Rate)	9.70		
	D. Third Party Drug Reimbursement Rates [5]			

The FY 1996 third party drug reimbursement rates are for prescriptions requested by external providers and obtained at the Military Treatment Facility. The third party drug reimbursement rates are too voluminous to include in this notice. A complete listing of these rates, however, is available on request from the OASD (Health Affairs) action officer, LCDR Pat Kelly [(703) 756–8910].

	E. High Cost Services Requested by External Providers [6]			

Meprs code [4]	Per visit clinical services	International military education and training (IMET)	Interagency and other Federal agency sponsored patients	Other
The FY 1996 high cost services requested by external providers are too voluminous to include in this notice. A complete listing of these rates, however, is available on request from the OASD (Health Affairs) action officer, LCDR Part Kelly [(703) 756–8910].				
	F. Elective Cosmetic Surgery Procedures and Rates			

Cosmetic surgery procedure	International classification diseases (ICD–9)	Current procedural terminology (CPT) [7]	FY 1996 charge [8]	Amount of charge
Mammaplasty	85.50	19325	Surgical Care Services or	(a)
	85.32	19324	Same Day Surgery	(b)
	85.31	19318		
Mastopexy	85.60	19316	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Facial Rhytidectomy	86.82	15824	Surgical Care Services or	(a)
	86.22		Same Day Surgery	(b)
Blepharoplasty	08.70	15820	Surgical Care Services or	(a)
	08.44	15821	Same Day Surgery	(b)
		15822		
		15823		
Metoplasty (Augmentation Reduction)	76.68	21208	Surgical Care Services or	(a)
	76.67	21209	Same Day Surgery	(b)
Abdominoplasty	86.83	15831	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Lipectomy, suction per region [9]	86.83	15876	Surgical Care Services or	(a)
		15877	Same Day Surgery	(b)
		15878		
		15879		
Rhinoplasty	21.87	30400	Surgical Care Services or	(a)
	21.86	30410	Same Day Surgery	(b)
Scar revisions beyond CHAMPUS	86.84	1578	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Mandibular or Maxillary Repositioning	76.41	21194	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Minor Skin Lesions [10]	86.30	1578	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Dermabrasion	86.25	15780	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Hair Restoration	86.64	15775	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Removing Tatoos	86.25	15780	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Chemical Peel	86.24	15790	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Arm/Thigh Dermolipectomy	86.83	1583	Surgical Care Services or	(a)
			Same Day Surgery	(b)
Brow Lift	86.3	15839	Surgical Care Services or	(a)
			Same Day Surgery	(b)

Meprs code [4]	Per visit clinical services	International military education and training (IMET)	Interagency and other Federal agency sponsored patients	Other
	G. Dental Rate			
N/A	Dental Services	$14	$27	$29
Dental service charges are based on a Composite Time Value. Provider should calculate the charges based on the time value of the procedure times the CTV rate.				
	H. Ambulance Rate			
N/A	Ambulance Service	35	68	72
Ambulance charges are based on hours of service. Provider should calculate the charges based on the number of hours (or fraction thereof) that the ambulance is logged out on a patient run.				

Notes on Cosmetic Surgery Changes

[a] Charges for Surgical Care Services contained in Section I.B. (See Notes 8 through 10 on reimbursable rates for further details.)

[b] Charges for Same Day Surgery are contained in Section II.L. (See Notes 8 through 10 on reimbursable rates for further details.)

Notes on Reimbursable Rates

[1] Percentages are applied to both inpatient and outpatient services provided when billing third party payers (e.g., insurance companies). Pursuant to the provisions of 10 U.S.C. 1095, the inpatient Diagnosis Related Groups are 96 percent hospital and 4 percent professional fee. The outpatient per visit percentages are 58 percent hospital, 29 percent ancillary and 13 percent professional

[2] DoD civilian employees located in overseas areas shall be render a bill when services are performed. Payment is due 60 days from the date of the bill.

[3] The cost of DRG (Diagnosis Related Groups) is based on the inpatient full reimbursement rate per hospital discharge, weighted to reflect the intensity of the principal diagnosis involved. The adjusted standardized amounts (ASA) per Relative Weighted Product (RWP) for use in the Direct Care System will be comparable to procedures utilized by Health Care Financing Administration (HFCA) and the Civilian Health and Medical Program for the Uniformed Services (CHAMPUS). These expenses include all direct care expenses associated with direct patient care. The average cost per relative weight product for large urban, other urban/rural, and overseas will be published annually as an inpatient standardized amount and will include the cost of inpatient professional services. The DRG rates will apply to reimbursement from all sources, not just third party payers.

[4] The Medical Expense and Performance Reporting System (MEPRS) code is a three digit code which defines the summary account and the subaccount within a functional category in the DoD medical system. An example of this hierarchical arrangement is as follows:

Outpaitnet Care (Functional Category)	Meprs code
Medical Care (Summary Account)	BA
Internal Medicine (Subaccount)	BAA

MEPRS codes are used to ensure that consistent expense and operating performance data is reported in the DoD military medical system.

[5] High Cost prescription services requested by external providers (Physicians, Dentists, etc.) are only relevant to the Third Party Collection Program. Third party payers (such as insurance companies) shall be billed for high cost prescriptions in those instances in which dependents who have medical insurance, seen by provides external to a Military Medical Treatment Facility (MTF), obtain the prescribed medication from an MTF. Eligible beneficiaries (family members or retirees with medical insurance) are not personally liable for this cost and shall not be billed by the MTF. A third party payer may be billed if the total prescription costs in a day exceed $25.00 when bundled together. The standard cost of high cost medications include the cost of the drugs plus a dispensing fee, per prescription. The prescription cost is calculated by multiplying the number of units (tablets, capsules, etc.) times the unit cost and adding a $7.00 dispensing fee per prescription.

[6] Charges for high cost services requested by external providers (Physicians, Dentists, etc.) are only relevant to the Third Party Collection Program. Third party payers (such as insurance companies) shall be billed for high cost services in those instances in which dependents who have medical insurance, seen by provides external to a Military Medical Treatment Facility (MTF), obtain the prescribed service from an MTF. Eligible beneficiaries (family members or retirees with medical insurance) are not personally liable for this cost and shall not be billed by the MTF. A third party payer may be billed if the total ancillary services costs in a day exceed $25,00 when bundled together.

[7] The attending physical is to complete the Physicians' Current Procedural Terminology code to indicate the appropriate procedure followed during cosmetic surgery. The appropriate rate will be applied depending on the admission type of the patient, e.g., outpatient surgical, same day/ambulatory surgery, or surgical care services.

[8] Family members of active duty personnel, retirees and their family members, and survivors will be charged cosmetic surgery rates. The patient shall be charged the rate as specified in the FY 1996 reimbursable rates for an episode of care. The charges for elective cosmetic surgery are at the full reimbursement rate (designated as the ''Other'' rate) for Surgical Care Services in Section I.B., or Same Day Surgery as contained in Section II.L. of this attachment. The patient will be responsible for both the cost of the implant(s) in addition to the prescribed cosmetic surgery rates.

Note: The implants and procedures used for the augmentation mammaplasty are in compliance with Federal Drug Administration Guidelines.

[9] Each regional lipectomy will carry a separate charge. Regions include head and neck, abdomen, flanks, and hips.

[10] These procedures are inclusive in the minor skin lesions. However, CHAMPUS separates them as noted here. All charges are for the entire treatment regardless of the number of visits required.

Dated: October 2, 1995.

L.M. Bynum,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 95–24950 Filed 10–6–95; 8:45 am]

BILLING CODE 5000–04–M

Defense Partnership Council Meeting

AGENCY: Department of Defense.

ACTION: Notice of meeting.

SUMMARY: The Department of Defense (DoD) announces a meeting of the Defense Partnership Council. Notice of this meeting is required under the Federal Advisory Committee Act. This meeting is open to the public. The topics to be covered are partnership successes within DoD and action items related to the Defense Partnership Council Plan of Action.

DATES: The meeting is to be held Wednesday, November 1, 1995, in room 1E801, Conference Room 7, the Pentagon, from 1:00 p.m. until 3:00 p.m. Comments should be received by October 27, 1995, in order to be considered at the November 1 meeting.

ADDRESSES: We invite interested persons and organizations to submit written comments or recommendations. Mail or deliver your comments or recommendations to Mr. Kenneth Oprisko at the address shown below. Seating is limited and available on a first-come, first-served basis. Individuals wishing to attend who do not possess an appropriate Pentagon building pass should call the below listed telephone number to obtain instructions for entry into the Pentagon. Handicapped individuals wishing to attend should also call the below listed telephone number to obtain appropriate accommodations.

FOR FURTHER INFORMATION CONTACT: Mr. Kenneth Oprisko, Chief, Labor Relations Branch, Field Advisory Services Division, Defense Civilian Personnel Management Service, 1400 Key Blvd, Suite B–200, Arlington, VA 22209–5144, (703) 696–6301, ext. 704.

Dated: October 3, 1995.

L.M. Bynum,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 95–24948 Filed 10–6–95; 8:45 am]

BILLING CODE 5000–04–M

Strategic Environmental Research and Development Program, Scientific Advisory Board; Meetings

ACTION: Notice.

In accordance with Section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), announcement is made of the following Committee meeting:

Date of Meeting: October 24–25, 1995 from 0830 to approximately 1730.

Place: Federal Highway Administration Conference Room, 901 N. Stuart Street, Suite 304, Arlington, VA.

Matters to be Considered: Research and Development proposals and continuing projects requesting Strategic Environmental Research and Development Program funds in excess of $1M will be reviewed.