sample size, the expected response rate, methods for assessing potential nonresponse bias, the protocols for data collection, and any testing procedures that were or will be undertaken prior to fielding the study. Depending on the degree of influence the results are likely to have, such collections may still be eligible for submission for other generic mechanisms that are designed to yield quantitative results. As a general matter, information collections will not result in any new system of records containing privacy information and will not ask questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private.

Description of Respondents:
Individuals and Households, Businesses and Organizations, State, Local or Tribal Government.

Average Expected Annual Number of Activities: 15.
Average Number of Respondents per Activities: 713.
Annual Responses: 10,700.
Frequency of Response: Once per Request.
Average Minutes per Response: 20.
Annual Burden: 3,032.

Comments: Comments should refer to the docket number that appears at the top of this document. Written comments may be submitted to the Docket Clerk, U.S. DOT Dockets, Room W12–140, 1200 New Jersey Avenue SE., Washington, DC 20590. Comments may also be submitted by electronic means via the Internet at http://regulations.gov. Specifically address whether this information collection is necessary for proper performance of the functions of the agency and will have practical utility, accuracy of the burden estimates, ways to minimize this burden, and ways to enhance the quality, utility, and clarity of the information to be collected. All comments received will be available for examination at the above address between 10 a.m. and 5 p.m. EDT (or EST), Monday through Friday, except Federal Holidays. An electronic version of this document is available on the World Wide Web at http://regulations.gov.

Privacy Act: Anyone is able to search the electronic form of all comments received into any of our dockets by the name of the individual submitting the comment (or signing the comment, if submitted on behalf of an association, business, labor union, etc.). You may review DOT’s complete Privacy Act Statement in the Federal Register published on April 11, 2000 (Volume 65, Number 70; Pages 19477–78) or you may visit http://regulations.gov.

Authority: 49 CFR 1.66.
By Order of the Maritime Administrator.
Dated: December 6, 2012.

Julie P. Agarwal,
Secretary, Maritime Administration.
[FR Doc. 2012–30334 Filed 12–19–12; 8:45 am]
BILLING CODE 4910–81–P

DEPARTMENT OF VETERANS AFFAIRS

Privacy Act of 1974: Computer Matching Program

AGENCY: Department of Veterans Affairs.
ACTION: Notice of Computer Matching Program.

SUMMARY: Notice is hereby given that the Department of Veterans Affairs (VA) intends to conduct a recurring computer matching program. This will match personnel records of the Department of Defense (DoD) with VA records of benefit recipients under the Montgomery GI Bill and Post-9/11 GI Bill.

The goal of these matches is to identify the eligibility status of veterans, servicemembers, and reservists who have applied for or who are receiving education benefit payments under the Montgomery GI Bill and Post-9/11 GI Bill. The purpose of the match is to enable VA to verify that individuals meet the conditions of military service and eligibility criteria for payment of benefits determined by VA under the Montgomery GI Bill and Post-9/11 GI Bill.

The authority to conduct this match is found in 38 U.S.C. 3684A(a)(1). The records covered include eligibility records extracted from DoD personnel files and benefit records that VA establishes for all individuals who have applied for and/or are receiving, or have received education benefit payments under the Montgomery GI Bill and Post-9/11 GI Bill. These benefit records are contained in a VA system of records identified as 58VA21/22/28 entitled: Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records—VA, first published in the Federal Register at 74 FR 9294 (March 3, 1978), and last amended at 74 FR 29275 (June 19, 2009), with other amendments as cited therein.

DATES: Effective Date: This match will commence on or about January 22, 2013 or 40 days after the Office of Management and Budget (OMB) review period, whichever is later, and continue in effect for 18 months. At the expiration of 18 months after the commencing date, the Departments may renew the agreement for another 12 months.

ADDRESSES: Written comments may be submitted through www.Regulations.gov; by mail or hand-delivery to the Director, Regulations Management (02REG), Department of Veterans Affairs, 810 Vermont Avenue NW., Room 1068, Washington, DC 20420; or fax to (202) 273–9026. Copies of comments received will be available for public inspection in the Office of Regulation Policy and Management, Room 1063B, between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday (except holidays). Please call (202) 461–4902 for an appointment. In addition, during the comment period, comments may be viewed online through the Federal Docket Management System (FDMS) at www.Regulations.gov.

FOR FURTHER INFORMATION CONTACT: Eric Patterson, Strategy and Legislative Development Team Leader, Education Service (225B), Veterans Benefits Administration, Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (202) 461–9830.

SUPPLEMENTARY INFORMATION: This information is required by paragraph 6c of the “Guidelines on the Conduct of Matching Programs” issued by OMB (54 FR 25818), as amended by OMB Circular A–130, 65 FR 77677 (2000). A copy of the notice has been provided to both Houses of Congress and OMB. The matching program is subject to their review.

Approved: December 3, 2012.

John R. Gingrich,
Chief of Staff, Department of Veterans Affairs.
[FR Doc. 2012–30572 Filed 12–19–12; 8:45 am]
BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

Reasonable Charges for Medical Care or Services; V3.12, 2013 Calendar Year Update and National Average Administrative Prescription Drug Charge Update

AGENCY: Department of Veterans Affairs.
ACTION: Notice.

SUMMARY: This Department of Veterans Affairs (VA) notice informs the public of the updated data for calculating the “Reasonable Charges” collected or recovered by VA for medical care or services and of the updated “National Average Administrative Costs” for purposes of calculating VA’s charges for prescription drugs that were not administered during treatment but
provided or furnished by VA to a veteran for: a nonservice-connected disability for which the veteran is entitled to care (or the payment of expenses for care) under a health plan contract; a nonservice-connected disability incurred incident to the veteran’s employment and covered under a worker’s compensation law or plan that provides reimbursement or indemnification for such care and services; or a nonservice-connected disability incurred as a result of a motor vehicle accident in a State that requires automobile accident reparations insurance. The charge tables and supplemental tables that are applicable to this notice can be viewed on the Veterans Health Administration Chief Business Office’s Internet Web site. These changes are effective January 1, 2013.

FOR FURTHER INFORMATION CONTACT: Romona Greene, Chief Business Office (10NB6), Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (202) 461–1595. This is not a toll free number.

SUPPLEMENTARY INFORMATION: Section 17.101 of title 38, United States Code of Federal Regulations (CFR), sets forth VA’s medical regulations concerning “Reasonable Charges” for medical care or services provided or furnished by VA to a veteran for: (1) A nonservice-connected disability for which the veteran is entitled to care (or the payment of expenses for care) under a health plan contract; (2) a nonservice-connected disability incurred incident to the veteran’s employment and covered under a worker’s compensation law or plan that provides reimbursement or indemnification for such care and services; or (3) a nonservice-connected disability incurred as a result of a motor vehicle accident in a State that requires automobile accident reparations insurance.

The regulation includes methodologies for establishing billed amounts for the following types of charges: Acute inpatient facility charges; skilled nursing facility and sub-acute inpatient facility charges; partial hospitalization facility charges; outpatient facility charges; physician and other professional charges, including professional charges for anesthesia services and dental services; pathology and laboratory charges; observation care facility charges; ambulance and other emergency transportation charges; and charges for durable medical equipment, drugs, injectables, and other medical services, items, and supplies identified by Healthcare Common Procedure Coding System (HCPCS) Level II codes. In cases where charges for medical care or services provided or furnished at VA expense (by either VA or non-VA providers) have not been established under other provisions or regulations, the method for determining VA’s charges is set forth at 38 CFR 17.101(a)(8).

The regulation provides that the actual charge amounts at individual VA facilities based on these methodologies and the data sources used for calculating those actual charge amounts will either be published as a notice in the Federal Register or will be posted on the Internet site of the Veterans Health Administration Chief Business Office. Certain charges are hereby updated as described below, effective January 1, 2013.

Based on the methodologies set forth in 38 CFR 17.101, this document provides an update to charges for 2013 HCPCS Level II and Technology codes. Charges are also being updated based on more recent versions of data sources for the following charge types: Partial hospitalization facility charges; outpatient facility charges; physician and other professional charges, including professional charges for anesthesia services and dental services; pathology and laboratory charges; observation care facility charges; ambulance and other emergency transportation charges; and charges for durable medical equipment, drugs, injectables, and other medical services, items, and supplies identified by HCPCS Level II codes. These updated charges are effective January 1, 2013. As of the date of this notice, the actual charge amounts at individual VA facilities based on the methodologies in the regulation will be posted at http://www1.va.gov/CBO/apps/rates/index.asp under the heading “Reasonable Charges Data Tables” and identified as “V3.12 Data Tables (Outpatient and Professional).”

The list of data sources used for calculating the actual charge amounts listed above also will be posted at http://www1.va.gov/CBO/apps/rate/index.asp under the heading “Reasonable Charges Data Sources” and identified as “Reasonable Charges V3.12 Data Sources (Inpatient)”.

As provided in 38 CFR 17.101(m), when VA provides or furnishes prescription drugs not administered during treatment, “charges billed separately for such prescription drugs will consist of the amount that equals the total of the actual cost to VA for the drugs and the national average of VA administrative costs associated with dispensing the drugs for each prescription.”

Section 17.101(m) includes the methodology for calculating the national average administrative cost for prescription drug charges not administered during treatment. The administrative cost is determined annually using VA’s managerial cost accounting system. Under this accounting system, the national average administrative cost is determined by adding the total VA national drug general overhead costs (such as costs of buildings and maintenance, utilities, billing, and collections) to the total VA national drug dispensing costs (such as costs of the labor of the pharmacy department, packaging, and mailing) with the sum divided by the actual number of VA prescriptions filled nationally. The labor cost also includes cost for the professional activity of reviewing and dispensing a prescription.

Based on the accounting system, VA will determine the amount of the
national average administrative cost annually for the prior fiscal year (October through September) and then apply the charge at the start of the next calendar year. The national average administrative cost for the calendar year 2013 is $13.18. This change is effective on January 1, 2013, and will be posted at http://www1.va.gov/CBO/payerinfo.asp and identified as “CY 2013 Average Administrative Cost For Prescriptions.”

Consistent with the regulations, the national average administrative cost, the updated data tables, and the supplementary tables containing the changes described in this notice will be posted online as indicated in this notice. This notice will be posted at http://www1.va.gov/CBO/apps/rates/index.asp under the heading “Federal Registers, Rules, and Notices” and identified as, “V3.12 Federal Register Notice 01/01/13 (Outpatient and Professional), and National Administrative Cost (PDF).” The national average administrative cost, updated data tables, and the supplementary tables containing the changes described will be effective until changed by a subsequent Federal Register notice.

Approved: December 14, 2012.
John R. Gingrich,
Chief of Staff, Department of Veterans Affairs.