

calendar year 1977 to (b) the average daily rate for such services in 1966. The amount so determined is rounded to the nearest multiple of \$4. The average daily rates are determined by the Secretary, based on the amounts paid on behalf of insured persons to hospitals participating in the Medicare program, plus the amounts withheld because of the deductible and coinsurance provisions.

October 13, 1978, Vol. 43, No. 199, pp. 47474-47477

Sanctions on health practitioners and providers of health care services. The Health Care Financing Administration is proposing regulations that would establish procedures under which the Department of Health, Education, and Welfare will invoke sanctions against a practitioner or provider who furnishes or orders items or services that (a) are not medically necessary, (b) do not meet professionally recognized standards, or (c) are not properly documented as to the medical necessity or quality of the services. The regulations would also explain the role in this process of the Medicaid State agency and establish the rights and responsibilities of the practitioner or provider, the Professional Standards Review Organization, the Statewide Professional Standards Review Council, and the Health Care Financing Administration.

The regulations would implement section 1160 of the Social Security Act and apply to health care services for which payment may be made under that act. The purpose of the sanction process is to discipline providers and practitioners and protect the public.

October 16, 1978, Vol. 43, No. 200, pp. 47694-47697

Programs in family medicine. The Public Health Service has published interim-final regulations setting forth the requirements for grants to schools of medicine or osteopathy, hospitals, and other public or private nonprofit entities to plan, develop, and operate or participate in predoctoral, graduate, or faculty training programs in family medicine. This new Subpart O of title 42 of the Code of Federal Regulations, part 57, will implement the new statutory authority under section 786(a) of Public Law 94-484. Furthermore, guidelines have been published to provide public guidance as to the minimum standards and criteria that officials of the Department of Health, Education, and Welfare consider desirable for improving the resources available for family medicine education.

October 18, 1978, Vol. 43, No. 202, pp. 47983-47985

Uniform alcoholism and intoxication

treatment act. The Public Health Service has proposed regulations that would implement the provisions of the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation Act of 1970 as amended. This act as amended authorizes a special grant program to assist States that have adopted the basic provisions of the Uniform Alcoholism and Intoxication Treatment Act. The Uniform Alcoholism and Intoxication Treatment Act has been approved by the National Conference of Commissioners on Uniform State Laws and recommended for enactment in all States. The act requires that alcoholism be viewed as an illness to be treated by community health and social services agencies and that public intoxication be approached as a public health problem rather than a crime.

October 25, 1978, Vol. 43, No. 207, pp. 49954

Provision of uncompensated services and community services by health facilities assisted by Hill-Burton funds. The Department of Health, Education, and Welfare is proposing rules requiring that health care facilities assisted under titles VI and XVI of the Public Health Service Act fulfill assurances given in their applications for Federal assistance that they would provide a community health service and a reasonable volume of services to persons unable to pay for them. The Department has become increasingly concerned that the regulations currently in effect do not adequately assure compliance with the law. Although the proposed regulations continue many of the present rules, they also include a number of policy changes that, in the Department's judgment, will improve the effectiveness of the assurance program.

October 31, 1978, Vol. 43, No. 211, p. 50717

Strengthening Medicare and Medicaid regulations. The Health Care Financing Administration proposes three regulations to improve Medicare and Medicaid programs—each classified by the Department of Health, Education, and Welfare as a "policy significant regulation."

One of the three regulations would clarify the due process procedures that must be followed when payment to providers, physicians, and suppliers of services under the Medicare program (title XVIII of the Social Security Act) are withheld because of suspected fraud or willful misrepresentation. The intent is to assure that due process procedures are adequate and clear.

In another vein, the Department is amending regulations so as to require all States to implement a written verifi-

cation of service programs involving Medicaid recipients. At present, only States with a Medicaid management information system are required to do so. States would be permitted to initiate the program on a sample basis if the sample was sufficient to provide information regarding the extent and types of possible aberrant practices by Medicaid providers. The amended regulations would require that in the verification notification, the services claimed be summarized, a response be requested, and a means be provided for the recipient to answer at no cost. The intent is to improve the capability to detect fraud and abuse.

Still another proposed regulation would set requirements for States to establish in their State plans mechanisms for the recovery of overpayments or for withholding payments when there is evidence of fraud and for suspending or excluding providers who defraud or abuse the Medicaid program. The intent is to ensure that States have the authority to take administrative action when there is evidence of provider fraud or abuse.

November 3, 1978, Vol. 43, No. 214, pp. 51532-51544

Emergency medical services. The Department of Health, Education, and Welfare has issued final rules to amend the regulations governing the program of grant assistance for emergency medical services systems authorized by title XII of the Public Health Service Act. The rules are being adopted in order to implement recent amendments to title XII. These amendments are primarily technical, for example, bringing the definitions in line with provisions of Public Law 93-641. However, there are some substantive changes, such as providing added authority for grants to States to enable them to update their plans for a State emergency medical services system to improve the delivery of such services to rural and medically underserved populations.

ERRATUM

In the article entitled "Leprosy in the United States, 1967-76," that appeared in the September-October 1978 issue of *Public Health Reports*, the name of the second author was inadvertently misspelled. The correct spelling is Robert R. Jacobson. The journal regrets the error.