730-7401 at least 72 hours prior to the hearing so appropriate arrangements can be made.

TRD-201903341
Karen Ray
Chief Counsel
Texas Health and Human Services Commission
Filed: September 17, 2019

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Proposed Medicaid Payment Rate for the Truman W. Smith Pediatric Care Facility

Hearing. The Texas Health and Human Services Commission (HHSC) will conduct a public hearing October 2, 2019, at 9:00 a.m., to receive comment on Proposed Medicaid Payment Rate for the Truman W. Smith Pediatric Care Facility.

The public hearing will be held in the Brown-Heatly Building Public Hearing Room, located at 4900 North Lamar Boulevard, Austin, Texas, 78751. Entry is through security at the main entrance of the building, which faces Lamar Boulevard. HHSC will broadcast the public hearing. Persons watching remotely can submit written comments. The broadcast can be accessed at https://hhs.texas.gov/about-hhs/communications-events/live-archived-meetings, and it will be archived for access on demand at the same website. The public hearing will be held in compliance with Texas Human Resources Code §32.0282, which requires public notice of and hearings on proposed Medicaid reimbursements.

Proposal. HHSC proposes to increase the daily payment rate for all pediatric care facility special reimbursement class services to $296.63, effective retroactive to September 1, 2019. The current payment rate is $291.17 per day.

Methodology and Justification. The proposed payment rate was calculated in accordance with Title 1 of the Texas Administrative Code §355.307(c), which addresses the reimbursement methodology for the pediatric care facility special reimbursement class.

Briefing Package. A briefing package describing the proposed payment rate will be available at http://rad.hhs.texas.gov/rate-packets on September 20, 2019. Interested parties may obtain a copy of the briefing package before the hearing by contacting the HHSC Rate Analysis Department by telephone at (512) 424-6637; by fax at (512) 730-7475; or by e-mail at RAD-LTSS@hhsc.state.tx.us. The briefing package will also will be available at the public hearing.

Written Comments. Written comments regarding the proposed payment rate may be submitted in lieu of, or in addition to, oral testimony until 5:00 p.m. the day of the hearing. Written comments may be sent by U.S. mail to the Texas Health and Human Services Commission, Attention: Rate Analysis, Mail Code H-400, P.O. Box 149030, Austin, Texas 78714-9030; by fax to Rate Analysis at (512) 730-7475; or by e-mail to RAD-LTSS@hhsc.state.tx.us. In addition, written comments may be sent by overnight mail or hand delivered to Texas Health and Human Services Commission, Attention: Rate Analysis, Mail Code H-400, Brown-Heatly Building, 4900 North Lamar Blvd., Austin, Texas 78751.

Persons with disabilities who wish to attend the hearing and require auxiliary aids or services should contact Rate Analysis at (512) 424-6637 at least 72 hours prior to the hearing so that appropriate arrangements can be made.

TRD-201903348
Karen Ray
Chief Counsel
Texas Health and Human Services Commission
Filed: September 17, 2019

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Public Notice: Value-Based Supplemental Rebate Agreements

The Texas Health and Human Services Commission (HHSC) announces its intent to submit transmittal number 19-0025 to the Texas State Plan for Medical Assistance, under Title XIX of the Social Security Act. The proposed amendment is effective October 1, 2019.

This amendment proposes to revise the Texas State plan to authorize the state to negotiate supplemental rebate agreements for pharmaceuticals involving value-based purchasing arrangements with drug manufacturers. There is no fiscal impact.

To obtain copies of the proposed amendment, interested parties may contact Courtney Pool, State Plan Specialist, by mail at the Health and Human Services Commission, P.O. Box 13247, Mail Code H-600, Austin, Texas 78711; by telephone at (512) 424-6889; by facsimile at (512) 730-7472; or by email at Medicaid_Chip_SPA_Inquiries@hhsc.state.tx.us. Copies of the proposal will also be made available for public review at the local offices of the Texas Health and Human Services Commission.

TRD-201903227
Karen Ray
Chief Counsel
Texas Health and Human Services Commission
Filed: September 12, 2019

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Department of State Health Services

Amendment Adding a Separate Listing for Noroxymorphone in Schedule II

The Drug Enforcement Administration issued a rule amending the Code of Federal Regulations (CFR), specifically section 1308.12(b)(1), by adding a separate listing for noroxymorphone. Noroxymorphone already is included as a Schedule II controlled substance because 21 CFR 1308.12(b)(1) controls any salt, compound, derivative, or preparation of opium and opiates. Accordingly, noroxymorphone has been controlled as a derivative of the listed substances and this rule will not result in adding any new substances into the schedules. Listing noroxymorphone does not alter its status as a Schedule II controlled substance. This rule was published in the *Federal Register,* Volume 84, Number 159, pages 41913-41914. The effective date of the rules is August 16, 2019. This action is taken for the following reason:

-DEA is amending the CFR to reflect the current practice of using the DEA Controlled Substances Code Number 9668 for noroxymorphone.

Pursuant to Section 481.034(g), as amended by the 75th legislature, of the Texas Controlled Substances Act, Health and Safety Code, Chapter 481, at least thirty-one days have expired since notice of the above referenced actions were published in the *Federal Register.* In the capacity as Commissioner of the Texas Department of State Health Services, John Hellerstedt, M.D., does hereby order that noroxymorphone be listed separately from other substances in Schedule II.

-Schedule II substances, vegetable origin or chemical synthesis

The following substances, however produced, except those narcotic drugs listed in other schedules:

(1) Opium and opiate, and a salt, compound, derivative, or preparation of opium or opiate, other than thebaine-derived butorphanol, nalademedine, naloxegol, naloxone and its salts, naltrexone and its salts, and nalmefene and its salts, but including:

(1-1) Codeine;

(1-2) Dihydroetorphine;

(1-3) Ethylmorphine;

(1-4) Etorphine hydrochloride;

(1-5) Granulated opium;

(1-6) Hydrocodone;

(1-7) Hydromorphone;

(1-8) Metopon;

(1-9) Morphine;

*(1-10) Noroxymorphone;

(1-11) Opium extracts;

(1-12) Opium fluid extracts;

(1-13) Oripavine;

(1-14) Oxycodone;

(1-15) Oxymorphone;

(1-16) Powdered opium;

(1-17) Raw opium;

(1-18) Thebaine; and,

(1-19) Tincture of opium.

(2) A salt, compound, isomer, derivative, or preparation of a substance that is chemically equivalent or identical to a substance described by Paragraph (1) of Schedule II substances, vegetable origin or chemical synthesis, other than the isoquinoline alkaloids of opium;

(3) Opium poppy and poppy straw;

(4) Cocaine, including:

(4-1) its salts, its optical, position, and geometric isomers, and the salts of those isomers;

(4-2) coca leaves and any salt, compound, derivative, or preparation of coca leaves and ecgonine and their salts, isomers, derivatives and salts of isomers and derivatives and any salt, compound derivative or preparation thereof which is chemically equivalent or identical to a substance described by this paragraph, except that the substances shall not include:

(4-2-1) decocainized coca leaves or extractions of coca leaves which extractions do not that do not contain cocaine or ecgonine; or

(4-2-2) ioflupane.

(5) Concentrate of poppy straw, meaning the crude extract of poppy straw in liquid, solid, or powder form that contains the phenanthrene alkaloids of the opium poppy.

Changes indicated by an *

TRD-201903360
Barbara L. Klein
General Counsel
Department of State Health Services
Filed: September 18, 2019

Licensing Actions for Radioactive Materials