

§ 176.40 [Amended]

6. Newly redesignated 176.40(a) introductory text is amended by revising § 92.35(b) to read “§ 176.35(b)”.

§ 176.45 [Amended]

7. Newly redesignated 176.45 is amended in paragraph (b) by revising “§ 92.40(c)” to read “§ 176.40(c)” and paragraph (c) by revising “§ 92.35(c) and § 92.40(d)” to read “§ 176.35(d) and § 176.40(d)”.

Dated: October 28, 1996.

L.M. Bynum,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 96-28299 Filed 11-4-96; 8:45 am]

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DEPARTMENT OF VETERANS AFFAIRS
38 CFR Part 17

RIN 2900-AH77

Contract Program for Veterans With Alcohol and Drug Dependence Disorders

AGENCY: Department of Veterans Affairs.

ACTION: Final rule.

SUMMARY: This document amends 38 CFR part 17 by adopting as a final rule the proposal to modify eligibility criteria for veterans participating by contract in the Department of Veterans Affairs' program of alcohol and drug dependence or abuse treatment and rehabilitation in residential and nonresidential facilities. Previous regulations stipulated that, prior to participation in contract care under this program, veterans were to be provided hospital care in facilities over which the Secretary has direct jurisdiction. It was proposed to change the regulations to stipulate that, prior to participation in contract care, veterans must have been or must be receiving care (regardless of whether it was or is hospital care) by professional staff over whom the Secretary has jurisdiction (regardless of whether it is direct jurisdiction). The elimination of the requirement of “hospital care” is necessary to address changed clinical practices and continue the intended program. In the past, substance abuse treatment generally was provided in a hospital setting. Now, much substance abuse treatment also is provided in an ambulatory care or residential setting. Further, this document changes “direct jurisdiction of the Secretary” to “jurisdiction of the Secretary” to allow for continuation of any cases in which VA has had

involvement (including, among other things, fee basis care) and thereby help ensure that a complete course of treatment is provided.

EFFECTIVE DATE: November 5, 1996.

FOR FURTHER INFORMATION CONTACT:

Richard T. Suchinsky, M.D., Associate Director for Addictive Disorders and Psychiatric Rehabilitation (111C1B), Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420; (202) 273-8436. (This is not a toll-free number).

SUPPLEMENTARY INFORMATION: This final rule is based on a proposed rule published in the Federal Register on May 21, 1996 (61 FR 25428). We requested that comments to the proposed rule be submitted on or before July 22, 1996. We received no comments. For reasons set forth in the proposed rule and this document, the proposed rule is adopted as a final rule.

The Secretary hereby certifies that the provisions of the final rule would not have a significant economic impact on a substantial number of small entities as they are defined in the Regulatory Flexibility Act, 5 U.S.C. 601-612. There does not appear to be a basis for considering special provisions for small entities since, in all likelihood, only entities that are small entities would conduct activities affected by this rule. Also, because of budgetary constraints and the high utilization of this program, we anticipate no change in the total number of bed days of care paid by VA to participating small entities. Therefore, pursuant to 5 U.S.C. 605(b), this final rule is exempt from the initial and final regulatory flexibility analyses requirements of sections 603 and 604.

The Catalog of Federal Domestic Assistance number is 64.019.

List of Subjects in 38 CFR Part 17

Administrative practice and procedure, Alcohol abuse, Alcoholism, Claims, Day care, Dental health, Drug abuse, Foreign relations, Government contracts, Grant programs—veterans, Health care, Health facilities, Health professions, Health records, Homeless, Medical and dental schools, Medical devices, Medical research, Mental health programs, Nursing homes, Philippines, Reporting and recordkeeping requirements, Scholarships and fellowships, Travel and transportation expenses, Veterans.

Approved: September 17, 1996.

Jesse Brown,

Secretary of Veterans Affairs.

For the reasons set out in the preamble, 38 CFR part 17 is amended as set forth below:

PART 17—MEDICAL

1. The authority citation for part 17 continues to read as follows:

Authority: 38 U.S.C. 501, 1721, unless otherwise noted.

2. In section 17.80, paragraph (a)(1) is revised to read as follows:

§ 17.80 Alcohol and drug dependence or abuse treatment and rehabilitation in residential and nonresidential facilities by contract.

(a) * * *

(1) Veterans who have been or are being furnished care by professional staff over which the Secretary has jurisdiction and such transitional care is reasonably necessary to continue treatment.

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[FR Doc. 96-28324 Filed 11-4-96; 8:45 am]

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ENVIRONMENTAL PROTECTION AGENCY
40 CFR Part 52

[Region 2 Docket NJ24-1a-158; FRL-5643-2]

Clean Air Act Attainment Extension for the New York-Northern New Jersey-Long Island Consolidated Metropolitan Statistical Carbon Monoxide Nonattainment Area

AGENCY: Environmental Protection Agency (EPA).

ACTION: Direct final rule.

SUMMARY: This action grants a one (1) year attainment date extension for the New York-Northern New Jersey-Long Island Consolidated Metropolitan Statistical Carbon Monoxide nonattainment area (NYCMSA) which also includes parts of two counties in southwestern Connecticut. The NYCMSA failed to attain the National Ambient Air Quality Standard (NAAQS) for carbon monoxide (CO) by the December 31, 1995 deadline contained in the Clean Air Act as amended in 1990 (CAA). However, section 186(a)(4) of the CAA provides for a one year extension of the CO attainment date if specific requirements are met. Since the NYCMSA has met these requirements, EPA is granting the one year extension.