

review of an initial claim determination by telephone in addition to the current writing procedure. A telephone review is the first level of appeal for Part B claims and is performed by carrier staff who had no part in making the initial claim determination in accordance with current MCM instructions. A telephone review is considered to be less costly to all parties and is a more expeditious way of handling appeals than a written review.

Also, section 1102(b)(2) of the Act requires us to prepare a regulatory impact analysis for any final rule that may have a significant impact on the operations of a substantial number of small rural hospitals. Such an analysis must conform to the provisions of section 604 of the RFA. For purposes of section 1102(b) of the Act, we define a small rural hospital as a hospital that is located outside a Metropolitan Statistical Area and has fewer than 50 beds.

We are not preparing analyses for either the RFA or section 1102(b)(2) of the Act because we have determined and certify that this final rule will not have a significant economic impact on a substantial number of small entities or a significant impact on the operations of a substantial number of small rural hospitals.

In accordance with the provisions of Executive Order 12866, this final rule was reviewed by the Office of Management and Budget.

We have reviewed this notice under the threshold criteria of Executive Order 12612, Federalism. We have determined that it does not significantly affect the States rights, roles, and responsibilities.

List of Subjects in 42 CFR Part 405

Administrative practice and procedure, Health facilities, Health professions, Kidney diseases, Medicare, Reporting and recordkeeping requirements, Rural areas, X-rays.

For the reasons set forth in the preamble, 42 CFR chapter IV is amended as set forth below:

PART 405—FEDERAL HEALTH INSURANCE FOR THE AGED AND DISABLED

Subpart H—Appeals Under the Medicare Part B Program

1. The authority citation for part 405, subpart H is revised to read as follows:

Authority: Secs. 1102, 1842(b)(3)(C), 1869(b), and 1871 of the Social Security Act (42 U.S.C. 1302, 1395u(b)(3)(C), 1395ff(b), and 1395hh).

2. Section 405.805 is revised to read as follows:

§ 405.805 Parties to the initial determination.

The parties to the initial determination (see § 405.803) may be any party described in § 405.802.

3. Section 405.807 is revised to read as follows:

§ 405.807 Request for review of initial determination.

(a) *General.* A party to an initial determination by a carrier, that is dissatisfied with the initial determination and wants to appeal the matter, may request that the carrier review the determination. The request for review by the party to an initial determination must clearly indicate that he or she is dissatisfied with the initial determination and wants to appeal the matter. The request for review does not constitute a waiver of the party's right to a hearing (under § 405.815) after the review.

(b) *Place and method of filing a request.* A request by a party for a carrier to review the initial determination may be made in one of the following ways:

(1) In writing and filed at an office of the carrier, SSA, or HCFA.

(2) By telephone to the telephone number designated by the carrier as the appropriate number for the receipt of requests for review.

(c) *Time of filing request.* (1) The carrier must provide a period of 6 months after the date of the notice of the initial determination within which the party to the initial determination may request a review.

(2) The carrier may, upon request by the party, extend the period for requesting the review of the initial determination.

(Catalog of Federal Domestic Assistance Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: October 6, 1998.

Nancy-Ann Min DeParle,
Administrator, Health Care Financing Administration.

Dated: February 22, 1999.

Donna E. Shalala,
Secretary.

Editorial Note: This document was received at the Office of the Federal Register September 27, 1999.

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DEPARTMENT OF DEFENSE

48 CFR Part 204

[DFARS Case 99-D011/98-D017]

Defense Federal Acquisition Regulation Supplement; Fiscal Year 2000 Contract Action Reporting Requirements; Correction

AGENCY: Department of Defense, (DoD).

ACTION: Correction to the final rule.

SUMMARY: DoD is issuing a correction to the final rule published at 64 FR 45197-45207 on August 19, 1999. The correction reflects the change in name of the "Defense Fuel Supply Center" to the "Defense Energy Support Center".

EFFECTIVE DATE: October 1, 1999.

FOR FURTHER INFORMATION CONTACT: Ms. Michele Peterson, (703) 602-0311.

Correction

In the issue of Thursday, August 19, 1999, on page 45198, in the first column, in 204.670-2(c)(7)(ii), in the first line, remove the words "Fuel Supply" and add in their place the words "Energy Support".

Michele P. Peterson,

Executive Editor, Defense Acquisition Regulations Council.

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DEPARTMENT OF DEFENSE

48 CFR Parts 205, 206, 217, 219, 225, 226, 236, 252, and 253

[DFARS Case 98-D007]

Defense Federal Acquisition Regulation Supplement; Reform of Affirmative Action in Federal Procurement

AGENCY: Department of Defense (DoD).

ACTION: Final rule.

SUMMARY: The Director of Defense Procurement is adopting as final, with changes, an interim rule amending the Defense Federal Acquisition Regulation Supplement (DFARS) policy concerning programs for small disadvantaged business (SDB) concerns. The amendments conform to a Department of Justice (DoJ) proposal to reform affirmative action in Federal procurement, and are consistent with the changes made to the Federal Acquisition Regulation (FAR) in Federal Acquisition Circulars (FACs) 97-06 and 97-13. DoJ's proposal is designed to ensure compliance with the constitutional standards established by the Supreme Court in *Adarand*