

§ 1.11 Engineering services.

(a) *Federal participation.* Costs of engineering services performed by the State highway department or any instrumentality or entity referred to in paragraph (b) of this section may be eligible for Federal participation only to the extent that such costs are directly attributable and properly allocable to specific projects.

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[FR Doc. 01-29258 Filed 11-21-01; 8:45 am]

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ENVIRONMENTAL PROTECTION AGENCY**40 CFR Part 52**

[FRL-7105-5]

Approval and Promulgation of Implementation Plans; Texas; Revisions to General Rules and Regulations for Control of Air Pollution by Permits for New Sources and Modifications; Withdrawal of Direct Final Rule

AGENCY: Environmental Protection Agency (EPA).

ACTION: Withdrawal of direct final rule.

SUMMARY: Due to receipt of adverse comments, EPA is withdrawing the direct final rule to approve revisions to Texas General Rules and Regulations for Control of Air Pollution by Permits for New Sources and Modifications. In the direct final rule published September 24, 2001 (66 FR 48796), we stated that if we received adverse comment by October 24, 2001, the direct final rule would be withdrawn and would not take effect. The EPA will address all public comments in a subsequent final rule based on the proposed rule also published on September 24, 2001 (66 FR 48850). The EPA subsequently received adverse comments on the direct final rule from Public Citizen and from Lowerre & Kelly, Attorneys at Law.

DATES: The Direct final is withdrawn as of November 23, 2001.

ADDRESSES: Copies of documents relevant to this action are available for public inspection during normal business hours at the following locations. Anyone wanting to examine these documents should make an appointment with the appropriate office at least two working days in advance.

EPA, Region 6, Air Permits Section (6PD-R), 1445 Ross Avenue, Dallas, Texas 75202-2733
TNRCC, Office of Air Quality, 12124 Park 35 Circle, Austin, Texas 78753

FOR FURTHER INFORMATION CONTACT: Stanley M. Spruiell, Air Permits Section at (214) 665-7212 or at spruiell.stanley@epa.gov.

List of Subjects in 40 CFR Part 52

Environmental protection, Air pollution control, Carbon Monoxide, Hydrocarbons, Intergovernmental relations, Lead, Nitrogen oxides, Ozone, Particulate matter, Reporting and recordkeeping requirements, Sulfur oxides, Volatile organic compounds.

Dated: November 7, 2001.

Lawrence E. Starfield,

Acting Deputy Regional Administrator, Region 6.

Accordingly, the amendments to the table in § 52.2270(c) published in the **Federal Register** September 24, 2001 (66 FR 48796) is withdrawn as of November 23, 2001.

[FR Doc. 01-29100 Filed 11-21-01; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**42 CFR Part 130**

RIN 0906-AA56

Ricky Ray Hemophilia Relief Fund Program

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Adoption of interim final rule as final rule with amendments.

SUMMARY: This document adopts the Ricky Ray Hemophilia Relief Fund Program interim final rule as a final rule with amendments. This final rule facilitates the petitioning process where health care history can be certified by physician assistants as well as by physicians or nurse practitioners; details the procedures by which the Secretary may resolve issues of eligibility or payment raised by a petition; ensures that payments made for the benefit of minors and other individuals who do not have the legal capacity to receive the payments are used for their benefit; and allows additional time for petitioners who are having difficulty obtaining needed medical or legal documentation to complete their petitions.

DATES: The regulations published on May 31, 2000 (65 FR 34860), were effective on July 31, 2000, and the amendments made in this final rule are effective November 23, 2001.

FOR FURTHER INFORMATION CONTACT: Paul T. Clark, Program Director, Bureau of Health Professions, Health Resources

and Services Administration, (301) 443-2330.

SUPPLEMENTARY INFORMATION:**Background**

The Ricky Ray Hemophilia Relief Fund Act of 1998 (Public Law 105-369) established the Ricky Ray Hemophilia Relief Fund Program to provide compassionate payments to certain individuals with blood-clotting disorders, such as hemophilia, who were treated with antihemophilic factor between July 1, 1982, and December 31, 1987 and contracted HIV. The Act also provides for payments to certain persons who contracted HIV from the foregoing individuals. The spouse or former spouse of such an individual, who acquired HIV from that individual is eligible for payment, as are children who acquired HIV through perinatal transmission from an eligible parent. In addition to these individuals, certain survivors also are eligible. A lawful spouse is eligible for the payment; if there is no surviving spouse, the payment is to be made in equal shares to all children of the eligible individual. If there are no surviving spouse or children, the parents of the eligible individual will receive the payment. If none of these individuals is living, the money will remain in the Fund. There is no provision for payment to be made to an estate or to any individual beyond those explicitly mentioned in the Act.

In order to receive a payment, either the eligible individual, or someone on behalf of the eligible individual, must file a petition for payment with sufficient documentation to prove that he or she meets the requirements of the statute.

Congress appropriated \$75 million to support the Ricky Ray Hemophilia Relief Fund Program during Fiscal Year (FY) 2000. As a result, we began issuing compassionate payments to eligible individuals in August 2000, in accordance with the procedures prescribed in the interim final rule. Congress has now passed an omnibus appropriations bill for FY 2001 that includes \$580 million for the Ricky Ray Program. The Department anticipates that the combined total of \$655 million for FY 2000 and 2001 is sufficient to make compassionate payments on all eligible petitions.

An interim final rule was published in the **Federal Register** on May 31, 2000 (65 FR 34860), to establish procedures and requirements for medical/legal documentation required to prove eligibility for individuals, a mechanism for providing compassionate payments to eligible individuals under the statute,