Reporting and recordkeeping requirements, Volatile organic compounds.

William Rice,
Acting Regional Administrator, Region 7.

Chapter I, Title 40 of the Code of Federal Regulations is amended as follows:

PART 52—[AMENDED]

PART 52—[AMENDED]

1. The authority citation for part 52 continues to read as follows:

Authority: 42 U.S.C. 7401 et seq.

Subpart AA—Missouri

2. In §52.1320 the table in paragraph (c) is amended by revising the entry for

EPA-APPROVED MISSOURI REGULATIONS

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<th>Missouri citation</th>
<th>Title</th>
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<th>Explanation</th>
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<td>9/30/07</td>
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

42 CFR Parts 411 and 424

[CMS–1810–CN2]

RIN 0938–AK67

Medicare Program, Physicians’ Referrals to Health Care Entities With Which They Have Financial Relationships (Phase III), Correction

AGENCY: Centers for Medicare & Medicaid Services, HHS.

ACTION: Correction of final rule.

SUMMARY: This document corrects technical and typographical errors that appeared in the final rule published in the Federal Register on September 5, 2007 entitled “Medicare Program, Physicians” Referrals to Health Care Entities With Which They Have Financial Relationships (Phase III).”

DATES: Effective Date: December 4, 2007.

FOR FURTHER INFORMATION CONTACT: Lisa Ohrin, (410) 786–4565.

SUPPLEMENTARY INFORMATION:

I. Background

In FR Doc. 07–4252 of September 5, 2007 (72 FR 51012), there were a
II. Correction of Errors

In FR Doc. 07–4252 of September 5, 2007 (72 FR 51012), make the following corrections:

A. Corrections to the Preamble

1. On page 51016, 3rd column, 2nd full paragraph, lines 18 and 19, the phrase “productivity bonus or profit share consistent with the special rules” is corrected to read “productivity bonus consistent with the special rules”.

2. On page 51018, 1st column, 3rd full paragraph, line 11, the phrase “other entity.” is corrected to read “other entity”.

3. On page 51019, a. First column, 1st partial paragraph, (1) Line 6, the phrase “proposed rulemaking” is corrected to read “proposed rulemaking (72 FR 42628)”, we proposed to”. (2) Line 11, the phrase “services, “is corrected to read “services,”.

4. On page 51021, 2nd column, 1st partial paragraph, line 2, the phrase “requirements of a consultation are not” is corrected to read “requirements of a consultation is not”.

5. On page 51024, 3rd column, 1st partial paragraph, line 46, the phrase “every 3-years” is corrected to read “every 3 years”.

6. On page 51025, 2nd column, 2nd full paragraph, lines 13 and 14, the phrase “current 90-days” is corrected to read “current 90 days”.

7. On page 51028, 1st column, a. First full paragraph, lines 21 and 22, the phrase “such arrangements would have been analyzed under the as” is corrected to read “such arrangements would have been analyzed as”.

b. Second full paragraph, line 24, the phrase “market value arrangement” under” is corrected to read “market value compensation arrangement” under”.

8. On page 51032, 3rd column, a. First full paragraph, line 3, the phrase “at least 8 hour” is corrected to read “at least 8 hours”.

b. Fifth paragraph, lines 8 and 9, the phrase “The in-office ancillary exception” is corrected to read “The in-office ancillary services exception”.

9. On page 51033, 2nd column, 1st full paragraph, lines 11 and 12, the phrase “ordering, or by a member of the group practice when furnished,” with “ordering the DHS, or by a member of the group practice when the DHS is furnished,”.

10. On page 51035, 1st column, 4th paragraph, line 14, the phrase “group practice; or by an entity that is” is corrected to read “group practice; or an entity that is”.

11. On page 51037, 1st column, 1st partial paragraph, lines 4 and 5, the phrase “furnished by the academic medical center” is corrected to read “furnished by the academic medical center as the result of a referral from that physician”.

12. On page 51043, 1st column, 3rd full paragraph, lines 4 and 5, the citation “(69 FR 16084–81605)” is corrected to read “(69 FR 16084–16085)”.

13. On page 51050, 3rd column, 2nd full paragraph, lines 4 through 7, the phrase “people reside in the “hole” zip code, the hospital may recruit a physician to establish a practice into the “hole” zip code.” is corrected to read “people reside in the “hole” zip code, the hospital may recruit a physician to establish a practice in the “hole” zip code”.

14. On page 51055, 1st column, 1st partial paragraph, line 23, the phrase “within 6-months” is corrected to read “within 6 months”.

15. On page 51058, a. First column, 4th paragraph, (1) Line 13, the figure “CY–2005” is corrected to read “CY 2005”.


b. Third column, 1st full paragraph, line 2, the figure “CY–2007)” is corrected to read “CY 2007)”.

16. On page 51062, 3rd column, 1st full paragraph, a. Lines 26 through 32, the phrase “created by virtue of the ownership interest that does not meet an ownership exception (which, thus, creates a compensation arrangement), in the chain of relationships that runs: hospital-radiology venture-physicians.” is corrected to read “created by virtue of the chain of relationships that runs: hospital-venturers a radiology venture (owned by) physicians.”

b. Lines 36 through 38, the phrase “With respect to the second indirect compensation arrangement, the inquiry would be whether the compensation” is corrected to read “The inquiry would be whether the compensation”.

B. Corrections to the Regulations Text

1. On page 51067, 3rd column, 3rd full paragraph, lines 8 through 11, the phrase “For purposes of applying the exceptions in § 411.355 and § 411.357 to arrangements described in paragraphs (c)(1)(i) and (c)(2)(i),” is corrected to read “For purposes of applying the exceptions in § 411.355 and § 411.357 to arrangements in which a physician stands in the shoes of his or her physician organization.”.

2. On page 51091, 1st column, 9th full paragraph, line 5, the phrase “claims submission,” is corrected to read “claims submission.”

3. On page 51093, 2nd column, 9th full paragraph, lines 2 through 4, the phrase “paragraph (e)(1) is also signed by the party to whom the payments are directly made,” is corrected to read “paragraph (e)(1) is also signed by the physician practice.”

4. On page 51094, 2nd column, 8th full paragraph, line 5, the phrase “specifically addressed by another” is corrected to read “specifically excepted by another”.

5. On page 51096, 2nd column, a. Eleventh paragraph, 1st line, the phrase “(C) A certification that the future” is corrected to read “(C) A statement that the future”.

b. Twelfth paragraph, line 2, the phrase “anticipates relocating his or medical” is corrected to read “anticipates relocating his or her medical”.
II. Waiver of Proposed Rulemaking and 30-Day Delay in the Effective Date

We ordinarily publish a notice of proposed rulemaking in the Federal Register to provide a period for public comment before the provisions of a rule take effect in accordance with section 553(b) of the Administrative Procedure Act (APA) (5 U.S.C. 553(b)). However, we can waive this notice and comment procedure if the Secretary finds, for good cause, that the notice and comment process is impracticable, unnecessary, or contrary to the public interest, and incorporates a statement of the finding and the reasons therefore in the notice.

Section 553(d) of the APA ordinarily requires a 30-day delay in effective date of final rules after the date of their publication in the Federal Register. This 30-day delay in effective date can be waived, however, if an agency finds for good cause that the delay is impracticable, unnecessary, or contrary to the public interest, and the agency incorporates a statement of the findings and its reasons in the rule issued.

Therefore, for reasons noted below, we find good cause to waive proposed rulemaking and the 30-day delayed effective date for the corrections in this notice. This notice merely corrects typographical and technical errors in the preamble and regulations text of the September 5, 2007 final rule and does not make substantive changes to the policies that were adopted in the final rule. Therefore, we find that undertaking further notice and comment procedures to incorporate these corrections into the final rule and delaying the effective date of these changes is unnecessary and contrary to the public interest.

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance, and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)


Ann C. Agnew,
Executive Secretary to the Department.

[FR Doc. 07–5905 Filed 11–30–07; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

42 CFR Parts 431, 440, and 441

[CMS–2237–IFC]

RIN 0938–AO50

Medicaid Program; Optional State Plan Case Management Services

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Interim final rule with comment period.

SUMMARY: This interim final rule with comment period revises current Medicaid regulations to incorporate changes made by section 6052 of the Deficit Reduction Act of 2005. In addition, it incorporates provisions of the Consolidated Omnibus Budget Reconciliation Act of 1985, the Omnibus Budget Reconciliation Act of 1986, the Tax Reform Act of 1986, the Omnibus Budget Reconciliation Act of 1987, and the Technical and Miscellaneous Revenue Act of 1988, concerning case management and targeted case management services. This interim final rule with comment period will provide for optional coverage of case management services or targeted case management services furnished according to section 1905(a)(19) and section 1915(g) of the Social Security Act. This interim final rule with comment period clarifies the situations in which Medicaid will pay for case management activities and also clarifies when payment will not be consistent with proper and efficient operation of the Medicaid program, and is not available.

DATES: Effective Date: The effective date of this rule is March 3, 2008.

Comment date: To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on February 4, 2008.

ADDRESSES: In commenting, please refer to file code CMS–2237–IFC. Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission.

You may submit comments in one of four ways (no duplicates, please):

1. Electronically. You may submit electronic comments on specific issues in this regulation to http://www.cms.hhs.gov/eRulemaking. Click on the link “Submit electronic comments on CMS regulations with an open comment period.” (Attachments should be in Microsoft Word, WordPerfect, or Excel; however, we prefer Microsoft Word.)

2. By regular mail. You may mail written comments (one original and two copies) to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS–2237–IFC, P.O. Box 8016, Baltimore, MD 21244–8016.

Please allow sufficient time for mailed comments to be received before the close of the comment period.

3. By express or overnight mail. You may send written comments (one original and two copies) to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS–2237–IFC, Mail Stop C4–26–05, 7500 Security Boulevard, Baltimore, MD 21244–1850.

4. By hand or courier. If you prefer, you may deliver (by hand or courier) your written comments (one original and two copies) before the close of the comment period to one of the following addresses. If you intend to deliver your comments to the Baltimore address, please call telephone number (410) 786–7195 in advance to schedule your arrival with one of our staff members. Room 445–G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201; or 7500 Security Boulevard, Baltimore, MD 21244–1850.

(Because access to the interior of the HHH Building is not readily available to persons without Federal Government identification, commenters are encouraged to leave their comments in the CMS drop slots located in the main lobby of the building. A stamp–in clock is available for persons wishing to retain a proof of filing by stamping in and retaining an extra copy of the comments being filed.)

Comments mailed to the addresses indicated as appropriate for hand or courier delivery may be delayed and received after the comment period.

For information on viewing public comments, see the beginning of the SUPPLEMENTARY INFORMATION section.

FOR FURTHER INFORMATION CONTACT: Jean Close, (410) 786–5831.

SUPPLEMENTARY INFORMATION:

Submitting Comments: We welcome comments from the public on all issues set forth in this rule to assist us in fully considering issues and developing policies. You can assist us by referencing the file code CMS–2237–IFC and the specific “issue identifier” that precedes the section on which you choose to comment.