

four other states and recommends that CBP should utilize other resources, apparently from the surrounding states, to better support Indianapolis.

Response: CBP is seeking to establish definitive geographic port limits to make the boundaries more easily identifiable to the public and to allow for uniform and continuous service to the extended area of Indianapolis, Indiana. This is a no-cost administrative measure and CBP will not need additional resources to implement the proposed boundary changes. As specified in the NPRM, the proposed changes will not result in changes to the workload or staffing levels at the port.

III. Conclusion

For the reasons discussed in the NPRM, CBP is extending the geographical limits of the port of entry of Indianapolis, Indiana, to include all the territory within the boundaries of Marion County, Indiana, as well as portions of the neighboring counties of Boone, Hendricks, and Johnson. The port of entry description of Indianapolis, Indiana, will be revised as proposed in the NPRM and set forth in the map included in the docket as “Attachment: Port of Entry of Indianapolis—Proposed Limits.” The revised port of entry description is also included in Section IV of this document. The description of the port limits of Indianapolis, Indiana in 19 CFR 101.3 will be revised to refer to this document, CBP Dec. 13–13.

IV. Port Description of Indianapolis, Indiana

The new port limits of Indianapolis, Indiana, are as follows:

In the State of Indiana, all of Marion County; that part of Boone County which is west of Interstate Route 65 and east of State Route 39; that part of Hendricks County which is east of State Route 39; and that part of Johnson County which is east of State Route 37, north of State Route 144, and west of Interstate Route 65.

V. Statutory and Regulatory Reviews

A. Executive Orders 12866 and 13563

DHS does not consider this rule to be a “significant regulatory action” under section 3(f) of Executive Order 12866, Regulatory Planning and Review, as supplemented by Executive Order 13563. The change is intended to expand the geographical boundaries of the Indianapolis, Indiana, port of entry and make the boundaries more easily identifiable to the public. There are no new costs to the public associated with this rule, and the rule does not

otherwise implicate the factors set forth in section 3(f) of Executive Order 12866. Accordingly, this rule has not been submitted to the Office of Management and Budget for review.

B. Regulatory Flexibility Act

The Regulatory Flexibility Act (5 U.S.C. 601 *et seq.*) requires federal agencies to examine the impact a rule would have on small entities. A small entity may be a small business (defined as any independently owned and operated business not dominant in its field that qualifies as a small business per the Small Business Act); a small not-for-profit organization; or a small governmental jurisdiction (locality with fewer than 50,000 people).

This rule merely expands the limits of an existing port of entry and does not impose any new costs on the public. Accordingly, we certify that this rule will not have a significant economic impact on a substantial number of small entities.

VI. Signing Authority

The signing authority for this document falls under 19 CFR 0.2(a) because the extension of port limits is not within the bounds of those regulations for which the Secretary of the Treasury has retained sole authority. Accordingly, this final rule is signed by the Secretary of Homeland Security.

List of Subjects in 19 CFR Part 101

Customs duties and inspection, Customs ports of entry, Exports, Imports, Organization and functions (Government agencies).

Amendment to the Regulations

For the reasons set forth in the NPRM and the preamble, part 101 of title 19 of the Code of Federal Regulations is amended as set forth below.

PART 101—GENERAL PROVISIONS

■ 1. The general authority citation for part 101 is revised and the specific authority citation for section 101.3 continues to read as follows:

Authority: 5 U.S.C. 301; 6 U.S.C. 203; 19 U.S.C. 2 & note, 66, 1202 (General Note 3(i), Harmonized Tariff Schedule of the United States), 1623, 1624, 1646a.

Sections 101.3 and 101.4 also issued under 19 U.S.C. 1 and 58b;

* * * * *

§ 101.3 [Amended]

■ 2. In § 101.3(b)(1) in the list of ports of entry under the State of Indiana, add “CBP Dec. 13–13” in the “Limits of port” column adjacent to the listing of Indianapolis.

Dated: September 3, 2013.

Janet Napolitano,

Secretary of Homeland Security.

[FR Doc. 2013–21772 Filed 9–5–13; 8:45 am]

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SOCIAL SECURITY ADMINISTRATION

20 CFR Part 404

[Docket No. SSA–2013–0039]

RIN 0960–AH60

Extension of Expiration Dates for Two Body System Listings

AGENCY: Social Security Administration.
ACTION: Final rule.

SUMMARY: We are extending the expiration dates of the following body systems in the Listing of Impairments (listings) in our regulations: Genitourinary Impairments and Hematological Disorders. We are making no other revisions to these body systems in this final rule. These extensions will ensure that we continue to have the criteria we need to evaluate impairments in the affected body systems at step three of the sequential evaluation processes for initial claims and continuing disability reviews.

DATES: This final rule is effective on September 6, 2013.

FOR FURTHER INFORMATION CONTACT: Cheryl A. Williams, Director, Office of Medical Listings Improvement, 6401 Security Boulevard, Baltimore, MD 21235–6401, (410) 965–1020. For information on eligibility or filing for benefits, call our national toll-free number, 1–800–772–1213, or TTY 1–800–325–0778, or visit our Internet site, Social Security Online, at <http://www.socialsecurity.gov>.

SUPPLEMENTARY INFORMATION:

Background

We use the listings in appendix 1 to subpart P of part 404 of 20 CFR at the third step of the sequential evaluation process to evaluate claims filed by adults and children for benefits based on disability under the title II and title XVI programs.¹ 20 CFR 404.1520(d), 416.920(d). The listings are in two parts: Part A has listings criteria for adults and Part B has listings criteria for children. If you are age 18 or over, we apply the listings criteria in part A when we assess your impairment or combination of impairments. If you are under age 18,

¹ We also use the listings in the sequential evaluation processes we use to determine whether a beneficiary’s disability continues. See 20 CFR 404.1594, 416.994, and 416.994a.

we first use the criteria in part B of the listings when we assess your impairment(s). If the criteria in part B do not apply, we may use the criteria in part A when those criteria give appropriate consideration to the effects

of your impairment(s). 20 CFR 404.1525(b), 416.925(b).

Explanation of Changes

In this final rule, we are extending the dates on which the listings for the

following two body systems will no longer be effective as set out in the following chart:

Listing	Current expiration date	Extended expiration date
Genitourinary Impairments 6.00 and 106.00	September 6, 2013	January 30, 2015.
Hematological Disorders 7.00 and 107.00	January 2, 2014	July 31, 2015.

We continue to revise and update the listings on a regular basis, including those body systems not affected by this final rule.² We intend to update the two listings affected by this final rule as quickly as possible, but may not be able to publish final rules revising these listings by the current expiration dates. Therefore, we are extending the expiration dates listed above.

Regulatory Procedures

Justification for Final Rule

We follow the Administrative Procedure Act (APA) rulemaking procedures specified in 5 U.S.C. 553 in promulgating regulations. Section 702(a)(5) of the Social Security Act, 42 U.S.C. 902(a)(5). Generally, the APA requires that an agency provide prior notice and opportunity for public comment before issuing a final regulation. The APA provides exceptions to the notice-and-comment requirements when an agency finds there is good cause for dispensing with such procedures because they are impracticable, unnecessary, or contrary to the public interest.

We determined that good cause exists for dispensing with the notice and public comment procedures. 5 U.S.C. 553(b)(B). This final rule only extends the date on which two body system listings will no longer be effective. It makes no substantive changes to our rules. Our current regulations³ provide that we may extend, revise, or promulgate the body system listings again. Therefore, we have determined that opportunity for prior comment is

unnecessary, and we are issuing this regulation as a final rule.

In addition, for the reasons cited above, we find good cause for dispensing with the 30-day delay in the effective date of this final rule. 5 U.S.C. 553(d)(3). We are not making any substantive changes to the listings in these body systems. Without an extension of the expiration dates for these listings, we will not have the criteria we need to assess medical impairments in these two body systems at step three of the sequential evaluation processes. We therefore find it is in the public interest to make this final rule effective on the publication date.

Executive Order 12866, as Supplemented by Executive Order 13563

We consulted with the Office of Management and Budget (OMB) and determined that this final rule does not meet the requirements for a significant regulatory action under Executive Order 12866, as supplemented by Executive Order 13563. Therefore, OMB did not review it. We also determined that this final rule meets the plain language requirement of Executive Order 12866.

Regulatory Flexibility Act

We certify that this final rule does not have a significant economic impact on a substantial number of small entities because it affects only individuals. Therefore, a regulatory flexibility analysis is not required under the Regulatory Flexibility Act, as amended.

Paperwork Reduction Act

This rule does not create any new or affect any existing collections, and therefore does not require OMB approval under the Paperwork Reduction Act.

(Catalog of Federal Domestic Assistance Program Nos. 96.001, Social Security-Disability Insurance; 96.002, Social Security-Retirement Insurance; 96.004, Social Security-Survivors Insurance; 96.006, Supplemental Security Income)

List of Subjects in 20 CFR Part 404

Administrative practice and procedure, Blind, Disability benefits, Old-Age, Survivors and Disability Insurance, Reporting and recordkeeping requirements, Social Security.

Dated: August 30, 2013.

Carolyn W. Colvin,

Acting Commissioner of Social Security.

For the reasons set out in the preamble, we are amending appendix 1 to subpart P of part 404 of chapter III of title 20 of the Code of Federal Regulations as set forth below.

PART 404—FEDERAL OLD-AGE, SURVIVORS AND DISABILITY INSURANCE (1950—)

Subpart P—[Amended]

■ 1. The authority citation for subpart P of part 404 continues to read as follows:

Authority: Secs. 202, 205(a)–(b) and (d)–(h), 216(i), 221(a), (i), and (j), 222(c), 223, 225, and 702(a)(5) of the Social Security Act (42 U.S.C. 402, 405(a)–(b) and (d)–(h), 416(i), 421(a), (i), and (j), 422(c), 423, 425, and 902(a)(5)); sec. 211(b), Pub. L. 104–193, 110 Stat. 2105, 2189; sec. 202, Pub. L. 108–203, 118 Stat. 509 (42 U.S.C. 902 note).

■ 2. Amend appendix 1 to subpart P of part 404 by revising items 7 and 8 of the introductory text before Part A to read as follows:

Appendix 1 to Subpart P of Part 404—Listing of Impairments

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7. Genitourinary Impairments (6.00 and 106.00): January 30, 2015.

8. Hematological Disorders (7.00 and 107.00): July 31, 2015.

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² Since we last extended the expiration date of some of the listings in June 2012 (77 FR 35264 (2012)), we have published final rules revising the medical criteria for evaluating congenital disorders that affect multiple body systems (78 FR 7659 (2013)), and the medical criteria for evaluating visual disorders in the special senses and speech body system (78 FR 18837 (2013)). We have also published proposed rules that would revise the medical criteria genitourinary disorders (78 FR 7695) (2013) and respiratory system disorders (78 FR 7968 (2013)), and revised listings for growth disorders and weight loss in children (78 FR 30249 (2013)).

³ See the first sentence of appendix 1 to subpart P of part 404 of 20 CFR.