certified Woodstock Soapstone stove and two EPA-certified stoves produced by another manufacturer show particulate emission rates (g/hr) using cord wood that are equal to or less than the corresponding test data using crib wood for all burn rates. The EPA asks for comments on these data and how they may influence the final rule.

3. Details of Cord Wood Testing by Brookhaven National Laboratory (BNL), under Contract to the EPA, of an EPA-certified Noncatalytic Wood Stove. Numerous comments on the February 3, 2014, proposal suggest that manufacturers tune their stoves to the EPA crib wood certification test method and that they would need to re-tune their stoves for the proposed Step 2 cord wood certification test method. We believe this is true and that manufacturers will soon adjust the combustion air flows, directions and proportions to better match the change in hydrocarbon volatilization rate due to the difference in surface area to volume ratio for crib wood versus cord wood. However, numerous non-catalytic stove manufacturers have indicated that they are waiting for the proposed NSPS revisions to become final before they undergo the expense of such testing. At this time, no manufacturer has submitted particulate matter emissions test data for non-catalytic wood stoves tuned to burn cord wood during tests similar to the EPA certification tests or the ASTM (formerly known as the American Society for Testing and Materials) draft cord wood test method.

In June 2014, BNL (under an EPA contract) conducted new emissions testing of a popular non-catalytic EPA-certified wood stove using cord wood. Existing EPA certification test data for crib wood based on the current EPA Test Method 5G (*http://www.epa.gov/ttnemc01/promgate/m-05g.pdf*) were compared to the new test data for using cord wood (with no stove design changes). Use of existing crib wood data were used for the comparison in order to minimize the cost of the additional testing. We note that this raises the question whether new crib wood testing would have produced similar results as the previous crib wood testing. Also, we note that the new cord wood testing was conducted with Method 5H, whereas the previous certification testing was conducted with Method 5G. The results of the test show:

a. For a popular, current model non-catalytic stove that was not adjusted by the manufacturer for burning cord wood instead of crib wood during the certification test, the emission test results can be significantly higher than the crib emission test results. As discussed above, the proposed Step 2 reasonably anticipates that the manufacturers would adjust the combustion air flows, directions and proportions to better match the change in hydrocarbon volatilization rate due to the difference in surface area to volume ratio for cribs versus cord wood. However, that was not done for this new test series.

b. Repeatability of cord wood test method results can sometimes be very good. For example, the results for three replicate tests for burn rate Category 4 (the maximum burn rate) were within 15 percent of each other.

c. Higher moisture content of the fuel can increase particulate matter emissions.

The complete BNL test report and summary have been added to the docket for the proposed rule at*: http://www.regulations.gov/#!docketDetail;D=EPA-HQ-OAR-2009-0734.* The EPA asks for comments on these data and how they may influence the final rule.

List of Subjects in 40 CFR Part 60

Environmental protection, Administrative practice and procedure, Air pollution control, Carbon monoxide, Hazardous substances, Intergovernmental relations, Particulate matter, Reporting and recordkeeping requirements.

Dated: June 24, 2014.

Mary E. Henigin,

Acting Director, Office of Air Quality Planning and Standards.

[FR Doc. 2014–15469 Filed 6–30–14; 8:45 am]

BILLING CODE 6560–50–P

ENVIRONMENTAL PROTECTION AGENCY

40 CFR Part 272

[EPA–R06–RCRA–2013–0461; FRL 9911–75–Region 6]

Oklahoma: Incorporation by Reference of State Hazardous Waste Management Program

AGENCY: Environmental Protection Agency (EPA).

ACTION: Proposed rule.

SUMMARY: The Environmental Protection Agency (EPA) proposes to codify in the regulations entitled ''Approved State Hazardous Waste Management Programs'', Oklahoma's authorized hazardous waste program. The EPA will incorporate by reference into the Code of Federal Regulations (CFR) those provisions of the State regulations that are authorized and that the EPA will enforce under the Solid Waste Disposal Act, commonly referred to as the Resource Conversation and Recovery Act (RCRA).

DATES: Send written comments by July 31, 2014.

ADDRESSES: Send written comments to Alima Patterson, Region 6 Regional Authorization Coordinator, or Julia Banks Codification Coordinator, State/Tribal Oversight Section (6PD–O), Multimedia Planning and Permitting Division, EPA Region 6, 1445 Ross Avenue, Dallas, Texas 75202–2733, Phone number: (214) 665–8533 or (214) 665–8178. You may also submit comments electronically or through hand delivery/courier; please follow the detailed instructions in the **ADDRESSES** section of the immediate final rule which is located in the Rules section of this **Federal Register**.

FOR FURTHER INFORMATION CONTACT: Alima Patterson, (214) 665–8533.

SUPPLEMENTARY INFORMATION: In the ''Rules and Regulations'' section of this **Federal Register** (FR), the EPA is codifying and incorporating by reference the State's hazardous waste program as direct final rule. The EPA did not make a proposal prior to the direct final rule because we believe these actions are not controversial and do not expect comments that oppose them. We have explained the reasons for this codification and incorporation by reference in the preamble to the direct final rule. Therefore, the purpose of this FR document is to codify Oklahoma's base hazardous waste management program and its program revisions through RCRA Cluster XXI (see 78 FR 32161) May 29, 2013. The EPA provided notices and opportunity for comments on the Agency's decisions to authorize the Oklahoma program, and the EPA is not now reopening the decisions, nor requesting comments, on the Oklahoma authorizations as published in the FR notices specified in Section B of the direct final rule FR document.

This document incorporates by reference Oklahoma's hazardous waste statutes and regulations and clarifies which of these provisions are included in the authorized and federally enforceable program. By codifying Oklahoma's authorized program and by amending the Code of Federal Regulations, the public will be more easily able to discern the status of federally approved requirements of the Oklahoma hazardous waste management program.

Dated: May 22, 2014.

Ron Curry,

Regional Administrator, EPA Region 6.

[FR Doc. 2014–15268 Filed 6–30–14; 8:45 am]

BILLING CODE 6560–50–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

45 CFR Parts 155 and 156

[CMS–9941–P]

RIN 0938–AS32

Patient Protection and Affordable Care Act; Annual Eligibility Redeterminations for Exchange Participation and Insurance Affordability Programs; Health Insurance Issuer Standards Under the Affordable Care Act, Including Standards Related to Exchanges

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

ACTION: Proposed rule.

SUMMARY: This proposed rule would specify additional options for annual eligibility redeterminations and renewal and re-enrollment notice requirements for qualified health plans offered through the Exchange, beginning with annual redeterminations for coverage for plan year 2015. In particular, this proposed rule would provide additional flexibility for Marketplaces, including the ability for Marketplaces to propose unique approaches that meet the specific needs of their State, while streamlining the consumer experience.

DATES: To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on July 28, 2014.

ADDRESSES: In commenting, please refer to file code CMS–9941–P. Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission.

You may submit comments in one of four ways (please choose only one of the ways listed):

1. *Electronically.* You may submit electronic comments on this regulation to *http://www.regulations.gov.* Follow the ''Submit a comment'' instructions.

2. *By regular mail.* You may mail written comments to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS–9941–P, P.O. Box 8010, Baltimore, MD 21244–8010.

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 to the following address only: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS–9941–P, Mail Stop C4–26–05, 7500 Security Boulevard, Baltimore, MD 21244–1850.

4. *By hand or courier.* Alternatively, you may deliver (by hand or courier) your written comments only to the following addresses prior to the close of the comment period:

a. For delivery in Washington, DC—Centers for Medicare & Medicaid Services, Department of Health and Human Services, Room 445–G, Hubert H. Humphrey Building, 200 Independence Avenue SW., Washington, DC 20201.

(Because access to the interior of the Hubert H. Humphrey 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.)

b. For delivery in Baltimore, MD—Centers for Medicare & Medicaid Services, Department of Health and Human Services, 7500 Security Boulevard, Baltimore, MD 21244–1850.

If you intend to deliver your comments to the Baltimore address, call telephone number (410) 786–7195 in advance to schedule your arrival with one of our staff members.

Comments erroneously 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: Benjamin Walker, (301) 492–4430.

SUPPLEMENTARY INFORMATION:

Inspection of Public Comments: All comments received before the close of the comment period are available for viewing by the public, including any personally identifiable or confidential business information that is included in a comment. We post all comments received before the close of the comment period on the following Web site as soon as possible after they have been received: *http://www.regulations.gov.* Follow the search instructions on that Web site to view public comments.

Comments received timely will also be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of a document, at the headquarters of the Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore, Maryland 21244, Monday through Friday of each week from 8:30 a.m. to 4 p.m. To schedule an appointment to view public comments, phone 1–800–743–3951.

Electronic Access

This **Federal Register** document is also available from the **Federal Register** online database through *Federal Digital System (FDsys),* a service of the U.S. Government Printing Office. This database can be accessed via the internet at *http://www.gpo.gov/fdsys.*

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I. Background

A. Legislative Overview

The Patient Protection and Affordable Care Act (Pub. L. 111–148) was enacted on March 23, 2010. The Health Care and Education Reconciliation Act of 2010 (Pub. L. 111–152), which amended and revised several provisions of the Patient Protection and Affordable Care Act, was enacted on March 30, 2010. In this proposed rule, we refer to the two statutes collectively as the ''Affordable Care Act.'' Subtitles A and C of Title I of the Affordable Care Act reorganized, amended, and added to the provisions of part A of Title XXVII of the Public Health Service Act (PHS Act) relating to group health plans and health insurance issuers in the group and individual markets.

Starting on October 1, 2013 for coverage starting as soon as January 1, 2014, qualified individuals and qualified employers have been able to purchase qualified health plans (QHPs)—private health insurance that has been certified as meeting certain standards—through competitive