We continue to revise and update the listings on a regular basis, including those body systems not affected by this final rule. We intend to update the three listings affected by this final rule as necessary based on medical advances 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 the three body system listings will no longer be effective. It makes no substantive changes to our rules. Our current regulations provide that we may extend, revise, or promulgate the body system listings again. Therefore, we 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 the three 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

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**Footnotes:**

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.

2 We last extended the expiration dates of the Special Senses and Speech and Congenital Disorders that Affect Multiple Body Systems body system listings on April 2, 2018 (83 FR 13862) and 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 the three 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.

**Background**

We use the listings in appendix 1 to part 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. 20 CFR 404.1520(d), 416.920(d), 416.924(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, 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 consider the effects of your impairment(s). 20 CFR 404.1525(b), 416.925(b).
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.

Executive Order 13771

This regulation does not impose novel costs on the public and as such is considered an exempt regulatory action under E.O. 13771.

Paperwork Reduction Act

This final rule only extends the date for the medical listings cited above, but does not create any new or affect any existing collections, or otherwise change any content of the currently published rules. Accordingly, it does not impose any burdens under the Paperwork Reduction Act, and does not require further OMB approval.

(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.

Andrew Saul,
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) and (b)–(f), 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) and (b)–(f), 422(c), 423, 425, and 902(a)(5)); sec. 211(b), Pub. L. 104–193, 110 Stat. 2305; 118 Stat. 239; 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 3, 8, and 11 of the introductory text to read as follows:

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

Special Senses and Speech (2.00 and 102.00): June 3, 2022.

8. Hematological Disorders (7.00 and 107.00): June 3, 2022.


[BFR Doc. 2020–03243 Filed 2–21–20; 8:45 am]

BILLING CODE 4191–02–P

PENSION BENEFIT GUARANTY CORPORATION

29 CFR Part 4003

RIN 1212–AB35

Administrative Review of Agency Decisions

AGENCY: Pension Benefit Guaranty Corporation.

ACTION: Final rule.

SUMMARY: This final rule amends PBGC’s regulation on Rules for Administrative Review of Agency Decisions. It clarifies and changes the review process for certain agency determinations and the procedures for requesting administrative review.

DATES: Effective date: This rule is effective March 25, 2020.

Applicability date: The amendments subjecting all coverage determinations to the appeals process under §4003.1(e)(1) of this final rule apply to initial determinations that are subject to this part and issued on or after March 25, 2020.

FOR FURTHER INFORMATION CONTACT: Karen B. Levin (levin.karen@pbgc.gov), Attorney, Regulatory Affairs Division, Office of the General Counsel, Pension Benefit Guaranty Corporation, 1200 K Street NW, Washington, DC 20005–4026; 202–229–3559. (TTY users may call the Federal Relay Service toll-free at 800–877–8339 and ask to be connected to 202–229–3559.)

SUPPLEMENTARY INFORMATION:

Purpose and Authority

This final rule amends PBGC’s regulation on rules for administrative review of agency decisions to clarify, simplify, and make other editorial changes to the language, and codify PBGC practices.

Legal authority for this action comes from section 4002(b)(3) of the Employee Retirement Income Security Act of 1974 (ERISA), which authorizes PBGC to issue regulations to carry out the purposes of title IV of ERISA.

Major Provisions

This final rule:

- Subjects all coverage determinations to appeal.
- Subjects all determinations concerning the distribution of a trusteed plan’s assets upon plan termination to appeal, except for determinations concerning the distribution of residual assets, which remain subject to reconsideration.
- Clarifies that, consistent with PBGC’s long-standing practice, when PBGC makes an initial determination effective on the date of issuance, a person aggrieved by the initial determination has no right to request reconsideration or appeal of the determination.
- Clarifies where to send requests for extensions on appeals and extensions for reconsideration.
- Clarifies that persons seeking administrative review may request information in PBGC’s possession by using PBGC’s procedures for requests under the Freedom of Information Act and the Privacy Act.

Background

The Pension Benefit Guaranty Corporation (PBGC) administers two insurance programs for private-sector defined benefit pension plans under title IV of the Employee Retirement Income Security Act of 1974 (ERISA): A single-employer plan termination insurance program and a multiemployer plan insolvency insurance program. This final rule applies only to plans covered by the single-employer plan termination insurance program.

PBGC is committed to the ongoing retrospective review of its regulations. This practice ensures that PBGC provides clear and helpful guidance, minimizes burdens and maximizes benefits, and addresses ineffective and outdated rules. In the course of PBGC’s regulatory review, PBGC identified opportunities to improve its regulation on Rules for Administrative Review of Agency Decisions (29 CFR part 4003) by making it more transparent, simplifying language, and codifying policies.

On October 4, 2019 (84 FR 53084), PBGC published a proposed rule to amend PBGC’s administrative review regulation. PBGC received no comments.