

§ 36.4315 [Amended]

■ 3. Amend § 36.4315(a) by removing “written” and adding in its place “a documented”.

§ 36.4316 [Amended]

■ 4. Amend § 36.4316 by:

- a. Removing “documented” in paragraphs (b)(2), (3), and (4); and
- b. Removing “written” in paragraph (b)(6).

■ 5. Amend § 36.4317 by:

- a. Removing “agreement” in paragraph (c)(18);
- b. Removing “Compromise sale” and “compromise sale” and adding “Short sale” and “short sale”, respectively, in paragraph (c)(21); and
- c. Revising paragraphs (c)(30) and (31).

The revisions read as follows:

§ 36.4317 Servicer reporting requirements.

* * * * *

(c) * * *

(30) Basic claim information—when the servicer files a claim under guaranty. The servicer shall report this event within 365 calendar days of loan termination for non-VA purchase claims, and within 60 calendar days of the approval date for VA purchase claims.

(31) VA purchase settlement—when VA purchases a loan and the servicer reports the tax and insurance information. The servicer shall report this event within 60 calendar days of the VA purchase approval date.

* * * * *

§ 36.4319 [Amended]

■ 6. Amend § 36.4319 by:

- a. Removing “special forbearance agreements” and “compromise sales” and adding in their place “special forbearances” and “short sales”, respectively, in paragraph (a);
- b. Removing “Compromise Sale” and adding in its place “Short Sale” in the table in paragraph (b);
- c. Removing “compromise sale” and adding in its place “short sale” in paragraph (c)(4).

§ 36.4320 [Amended]

■ 7. Amend § 36.4320 by:

- a. Removing “Refunding” and adding in its place “VA purchase” in the heading;
- b. Removing “refund” and adding in its place “purchase” in paragraph (c); and
- c. Removing “2900–0362” and adding in its place “2900–0021” in the parenthesis at the end of the section.

§ 36.4322 [Amended]

■ 8. Amend §§ 36.4322(e)(1), (1)(ii), (2), and (f)(1)(iii) by removing “compromise sale” each place it appears and adding “short sale” in its place.

[FR Doc. 2024–07113 Filed 4–9–24; 8:45 am]

BILLING CODE 8320–01–P

ENVIRONMENTAL PROTECTION AGENCY

40 CFR Part 81

Designation of Areas for Air Quality Planning Purposes

CFR Correction

This rule is being published by the Office of the Federal Register to correct an editorial or technical error that appeared in the most recent annual revision of the Code of Federal Regulations.

■ In title 40 of the Code of Federal Regulations, Part 81, revised as of July 1, 2023, in § 81.350, in the table titled “Wisconsin—2010 Sulfur Dioxide NAAQS [Primary]”, the entry for “Outagamie County (part)” is removed.

[FR Doc. 2024–07673 Filed 4–9–24; 8:45 am]

BILLING CODE 0099–10–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

42 CFR Parts 411, 413, 488, and 489

[CMS–1779–F2]

RIN 0938–AV02

Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities; Updates to the Quality Reporting Program and Value-Based Purchasing Program for Federal Fiscal Year 2024; Corrections

AGENCY: Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS).

ACTION: Final rule; correction.

SUMMARY: This document corrects technical errors in the final rule that appeared in the August 7, 2023 **Federal Register**, entitled “Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities; Updates to the Quality Reporting Program and Value-Based Purchasing Program for Federal Fiscal Year 2024”. The effective date was October 1, 2023.

DATES: This correcting document is effective April 10, 2024, and is applicable beginning October 1, 2023. **FOR FURTHER INFORMATION CONTACT:** John Kane, (410) 786–0557, for information related to the SNF PPS.

SUPPLEMENTARY INFORMATION:

I. Background

In FR Doc. 2023–16249 of August 7, 2023 (88 FR 53200), there were technical errors that are identified and corrected in this correcting document. These corrections are applicable as if they had been included in the final rule entitled “Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities; Updates to the Quality Reporting Program and Value-Based Purchasing Program for Federal Fiscal Year 2024” (hereinafter referred to as the FY 2024 SNF PPS final rule), which was effective October 1, 2023.

II. Summary of Errors

A. Summary of Errors in the Preamble

On page 53221 of the FY 2024 SNF PPS final rule (88 FR 53200), we discussed our proposal to add the surgical option that allows a subset of subcategory 42.2—codes for displaced fractures to be eligible for one of two orthopedic surgery categories. Additionally, we stated that we would add this surgical option to the subcategory of M84.5—codes for pathological fractures to certain weight bearing bones to be eligible for one of two orthopedic surgery categories. In the final rule, we inadvertently stated that this proposal applied to 45 of the codes within the subcategory S42.2 codes and to 46 of the codes within the subcategory M84.5 codes. However, these numbers were inadvertently swapped, meaning that the proposal applied to 46 of the codes within the subcategory S42.2 codes and to 45 of the codes within the subcategory M84.5 codes. We are correcting these errors.

B. Summary and Corrections of Errors to Tables Posted on the CMS Website for the PDPM ICD–10 Mappings

We are correcting the following errors to the FY 2024 Patient Driven Payment Model (PDPM) ICD–10–CM mappings (hereinafter referred to as PDPM ICD–10 code mappings) that were made available on the CMS website at <https://www.cms.gov/medicare/medicare-fee-for-service-payment/snfpps/pdpm> in conjunction with the release of the FY 2024 SNF PPS final rule, as corrected by the correction notification that appeared in the October 4, 2023 **Federal Register**, entitled “Medicare Program; Prospective

Payment System and Consolidated Billing for Skilled Nursing Facilities; Updates to the Quality Reporting Program and Value-Based Purchasing Program for Federal Fiscal Year 2024; Correction” (88 FR 68486). The FY 2024 PDPM ICD–10 code mappings file may be accessed from the list of items under the “PDPM Resources” section of the website with an effective date of “10–01–2023”.

The first table in the FY 2024 PDPM ICD–10 code mappings file displays the list of ICD–10 codes that are recorded in Item I0020B ICD Code of the Minimum Data Set (MDS) assessment to determine a patient’s clinical category assignment under PDPM. First, we are correcting errors in the clinical category assignment of 2 codes, B99.8 (Other infectious disease) and B99.9 (Unspecified infectious disease) (lines

1071 and 1072 of the Excel spreadsheet) to reinstate their prior year’s assignments from the FY 2023 SNF PPS final rule, as we proposed no changes in clinical categories in this code range in the FY 2024 SNF PPS proposed rule nor finalized them in the FY 2024 SNF PPS final rule. As such, the clinical category mapping for these two codes will be corrected to be “Medical Management”.

Second, we are correcting errors in the clinical category assignments of codes within the S42.2 subcategory of ICD–10 codes (lines 32154 *et seq.*) and the M84.5 subcategory of ICD–10 codes (lines 17229 *et seq.*). As discussed in the FY 2024 SNF PPS final rule (88 FR 53221), we had proposed to add the surgical option that allows a subset of subcategory 42.2—codes for displaced fractures to be eligible for one of two orthopedic surgery categories.

Additionally, we stated that we would add this surgical option to the subcategory of M84.5—codes for pathological fractures to certain weight bearing bones to be eligible for one of two orthopedic surgery categories. However, when updating the PDPM ICD–10 mapping for FY 2024 to reflect these changes, we inadvertently added the surgical option to a selection of ICD–10 codes for which we did not propose any changes. Further, we inadvertently did not add the surgical option for a selection of ICD–10 codes for which we did propose to do so.

Table 1 displays the list of affected ICD–10 codes for which we are correcting the clinical category assignments by adding the surgical option.

TABLE 1—AFFECTED CODES FROM THE MAPPING OF THE ICD–10–CM RECORDED IN ITEM I0020B OF THE MDS ASSESSMENT TO PDPM CLINICAL CATEGORIES ADDING SURGICAL OPTION

ICD–10–CM code	ICD–10–CM code description
M84550A	Pathological fracture in neoplastic disease, pelvis, initial encounter for fracture.
M84550D	Pathological fracture in neoplastic disease, pelvis, subsequent encounter for fracture with routine healing.
M84550G	Pathological fracture in neoplastic disease, pelvis, subsequent encounter for fracture with delayed healing.
M84550K	Pathological fracture in neoplastic disease, pelvis, subsequent encounter for fracture with nonunion.
M84550P	Pathological fracture in neoplastic disease, pelvis, subsequent encounter for fracture with malunion.
M84561A	Pathological fracture in neoplastic disease, right tibia, initial encounter for fracture.
M84561D	Pathological fracture in neoplastic disease, right tibia, subsequent encounter for fracture with routine healing.
M84561G	Pathological fracture in neoplastic disease, right tibia, subsequent encounter for fracture with delayed healing.
M84561K	Pathological fracture in neoplastic disease, right tibia, subsequent encounter for fracture with nonunion.
M84561P	Pathological fracture in neoplastic disease, right tibia, subsequent encounter for fracture with malunion.
M84562A	Pathological fracture in neoplastic disease, left tibia, initial encounter for fracture.
M84562D	Pathological fracture in neoplastic disease, left tibia, subsequent encounter for fracture with routine healing.
M84562G	Pathological fracture in neoplastic disease, left tibia, subsequent encounter for fracture with delayed healing.
M84562K	Pathological fracture in neoplastic disease, left tibia, subsequent encounter for fracture with nonunion.
M84562P	Pathological fracture in neoplastic disease, left tibia, subsequent encounter for fracture with malunion.
M84563A	Pathological fracture in neoplastic disease, right fibula, initial encounter for fracture.
M84563D	Pathological fracture in neoplastic disease, right fibula, subsequent encounter for fracture with routine healing.
M84563G	Pathological fracture in neoplastic disease, right fibula, subsequent encounter for fracture with delayed healing.
M84563K	Pathological fracture in neoplastic disease, right fibula, subsequent encounter for fracture with nonunion.
M84563P	Pathological fracture in neoplastic disease, right fibula, subsequent encounter for fracture with malunion.
M84564A	Pathological fracture in neoplastic disease, left fibula, initial encounter for fracture.
M84564D	Pathological fracture in neoplastic disease, left fibula, subsequent encounter for fracture with routine healing.
M84564G	Pathological fracture in neoplastic disease, left fibula, subsequent encounter for fracture with delayed healing.
M84564K	Pathological fracture in neoplastic disease, left fibula, subsequent encounter for fracture with nonunion.
M84564P	Pathological fracture in neoplastic disease, left fibula, subsequent encounter for fracture with malunion.
M84571A	Pathological fracture in neoplastic disease, right ankle, initial encounter for fracture.
M84571D	Pathological fracture in neoplastic disease, right ankle, subsequent encounter for fracture with routine healing.
M84571G	Pathological fracture in neoplastic disease, right ankle, subsequent encounter for fracture with delayed healing.
M84571K	Pathological fracture in neoplastic disease, right ankle, subsequent encounter for fracture with nonunion.
M84571P	Pathological fracture in neoplastic disease, right ankle, subsequent encounter for fracture with malunion.
M84572A	Pathological fracture in neoplastic disease, left ankle, initial encounter for fracture.
M84572D	Pathological fracture in neoplastic disease, left ankle, subsequent encounter for fracture with routine healing.
M84572G	Pathological fracture in neoplastic disease, left ankle, subsequent encounter for fracture with delayed healing.
M84572K	Pathological fracture in neoplastic disease, left ankle, subsequent encounter for fracture with nonunion.
M84572P	Pathological fracture in neoplastic disease, left ankle, subsequent encounter for fracture with malunion.

Table 2 displays the list of affected ICD–10 codes for which we are

correcting the clinical category

assignments by removing the surgical option.

TABLE 2—AFFECTED CODES FROM THE MAPPING OF THE ICD-10-CM RECORDED IN ITEM I0020B OF THE MDS ASSESSMENT TO PDPM CLINICAL CATEGORIES REMOVING SURGICAL OPTION

ICD-10-CM code	ICD-10-CM code description
M84551S	Pathological fracture in neoplastic disease, right femur, sequela.
M84552S	Pathological fracture in neoplastic disease, left femur, sequela.
S42201A	Unspecified fracture of upper end of right humerus, initial encounter for closed fracture.
S42201D	Unspecified fracture of upper end of right humerus, subsequent encounter for fracture with routine healing.
S42201G	Unspecified fracture of upper end of right humerus, subsequent encounter for fracture with delayed healing.
S42201K	Unspecified fracture of upper end of right humerus, subsequent encounter for fracture with nonunion.
S42201P	Unspecified fracture of upper end of right humerus, subsequent encounter for fracture with malunion.
S42202A	Unspecified fracture of upper end of left humerus, initial encounter for closed fracture.
S42202D	Unspecified fracture of upper end of left humerus, subsequent encounter for fracture with routine healing.
S42202G	Unspecified fracture of upper end of left humerus, subsequent encounter for fracture with delayed healing.
S42202K	Unspecified fracture of upper end of left humerus, subsequent encounter for fracture with nonunion.
S42202P	Unspecified fracture of upper end of left humerus, subsequent encounter for fracture with malunion.
S42214A	Unspecified nondisplaced fracture of surgical neck of right humerus, initial encounter for closed fracture.
S42214D	Unspecified nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing.
S42214G	Unspecified nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with delayed healing.
S42214K	Unspecified nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with nonunion.
S42214P	Unspecified nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with malunion.
S42215A	Unspecified nondisplaced fracture of surgical neck of left humerus, initial encounter for closed fracture.
S42215D	Unspecified nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing.
S42215G	Unspecified nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with delayed healing.
S42215K	Unspecified nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with nonunion.
S42215P	Unspecified nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with malunion.
S42224D	2-part nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing.
S42224K	2-part nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with nonunion.
S42224P	2-part nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with malunion.
S42225D	2-part nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing.
S42225K	2-part nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with nonunion.
S42225P	2-part nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with malunion.
S42231D	3-part fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing.
S42231K	3-part fracture of surgical neck of right humerus, subsequent encounter for fracture with nonunion.
S42231P	3-part fracture of surgical neck of right humerus, subsequent encounter for fracture with malunion.
S42232D	3-part fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing.
S42232K	3-part fracture of surgical neck of left humerus, subsequent encounter for fracture with nonunion.
S42232P	3-part fracture of surgical neck of left humerus, subsequent encounter for fracture with malunion.
S42241D	4-part fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing.
S42241K	4-part fracture of surgical neck of right humerus, subsequent encounter for fracture with nonunion.
S42241P	4-part fracture of surgical neck of right humerus, subsequent encounter for fracture with malunion.
S42242D	4-part fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing.
S42242K	4-part fracture of surgical neck of left humerus, subsequent encounter for fracture with nonunion.
S42242P	4-part fracture of surgical neck of left humerus, subsequent encounter for fracture with malunion.
S42254A	Nondisplaced fracture of greater tuberosity of right humerus, initial encounter for closed fracture.
S42254D	Nondisplaced fracture of greater tuberosity of right humerus, subsequent encounter for fracture with routine healing.
S42254G	Nondisplaced fracture of greater tuberosity of right humerus, subsequent encounter for fracture with delayed healing.
S42254K	Nondisplaced fracture of greater tuberosity of right humerus, subsequent encounter for fracture with nonunion.
S42254P	Nondisplaced fracture of greater tuberosity of right humerus, subsequent encounter for fracture with malunion.
S42255A	Nondisplaced fracture of greater tuberosity of left humerus, initial encounter for closed fracture.
S42255D	Nondisplaced fracture of greater tuberosity of left humerus, subsequent encounter for fracture with routine healing.
S42255G	Nondisplaced fracture of greater tuberosity of left humerus, subsequent encounter for fracture with delayed healing.
S42255K	Nondisplaced fracture of greater tuberosity of left humerus, subsequent encounter for fracture with nonunion.
S42255P	Nondisplaced fracture of greater tuberosity of left humerus, subsequent encounter for fracture with malunion.
S42264A	Nondisplaced fracture of lesser tuberosity of right humerus, initial encounter for closed fracture.
S42264D	Nondisplaced fracture of lesser tuberosity of right humerus, subsequent encounter for fracture with routine healing.
S42264G	Nondisplaced fracture of lesser tuberosity of right humerus, subsequent encounter for fracture with delayed healing.
S42264K	Nondisplaced fracture of lesser tuberosity of right humerus, subsequent encounter for fracture with nonunion.
S42264P	Nondisplaced fracture of lesser tuberosity of right humerus, subsequent encounter for fracture with malunion.
S42265A	Nondisplaced fracture of lesser tuberosity of left humerus, initial encounter for closed fracture.
S42265D	Nondisplaced fracture of lesser tuberosity of left humerus, subsequent encounter for fracture with routine healing.
S42265G	Nondisplaced fracture of lesser tuberosity of left humerus, subsequent encounter for fracture with delayed healing.
S42265K	Nondisplaced fracture of lesser tuberosity of left humerus, subsequent encounter for fracture with nonunion.
S42265P	Nondisplaced fracture of lesser tuberosity of left humerus, subsequent encounter for fracture with malunion.
S42271A	Torus fracture of upper end of right humerus, initial encounter for closed fracture.
S42271D	Torus fracture of upper end of right humerus, subsequent encounter for fracture with routine healing.
S42271G	Torus fracture of upper end of right humerus, subsequent encounter for fracture with delayed healing.
S42271K	Torus fracture of upper end of right humerus, subsequent encounter for fracture with nonunion.
S42271P	Torus fracture of upper end of right humerus, subsequent encounter for fracture with malunion.
S42272A	Torus fracture of upper end of left humerus, initial encounter for closed fracture.
S42272D	Torus fracture of upper end of left humerus, subsequent encounter for fracture with routine healing.
S42272G	Torus fracture of upper end of left humerus, subsequent encounter for fracture with delayed healing.
S42272K	Torus fracture of upper end of left humerus, subsequent encounter for fracture with nonunion.
S42272P	Torus fracture of upper end of left humerus, subsequent encounter for fracture with malunion.

TABLE 2—AFFECTED CODES FROM THE MAPPING OF THE ICD-10-CM RECORDED IN ITEM I0020B OF THE MDS ASSESSMENT TO PDPM CLINICAL CATEGORIES REMOVING SURGICAL OPTION—Continued

ICD-10-CM code	ICD-10-CM code description
S42294A	Other nondisplaced fracture of upper end of right humerus, initial encounter for closed fracture.
S42294D	Other nondisplaced fracture of upper end of right humerus, subsequent encounter for fracture with routine healing.
S42294G	Other nondisplaced fracture of upper end of right humerus, subsequent encounter for fracture with delayed healing.
S42294K	Other nondisplaced fracture of upper end of right humerus, subsequent encounter for fracture with nonunion.
S42294P	Other nondisplaced fracture of upper end of right humerus, subsequent encounter for fracture with malunion.
S42295A	Other nondisplaced fracture of upper end of left humerus, initial encounter for closed fracture.
S42295D	Other nondisplaced fracture of upper end of left humerus, subsequent encounter for fracture with routine healing.
S42295G	Other nondisplaced fracture of upper end of left humerus, subsequent encounter for fracture with delayed healing.
S42295K	Other nondisplaced fracture of upper end of left humerus, subsequent encounter for fracture with nonunion.
S42295P	Other nondisplaced fracture of upper end of left humerus, subsequent encounter for fracture with malunion.

Given these errors, we are republishing the PDPM ICD-10 code mappings accordingly on the CMS website at <https://www.cms.gov/medicare/medicare-fee-for-service-payment/snfpps/pdpm>, applicable to October 1, 2023.

III. Waiver of Proposed Rulemaking

Under section 553(b) of the Administrative Procedure Act (the APA) (5 U.S.C. 553(b)), the agency is required to publish a notice of proposed rulemaking in the **Federal Register** before the provisions of a rule take effect. Similarly, section 1871(b)(1) of the Social Security Act (the Act) requires the Secretary to provide for notice of the proposed rule in the **Federal Register** and provide a period of not less than 60 days for public comment. In addition, section 553(d) of the APA and section 1871(e)(1)(B)(i) of the Act mandate a 30-day delay in effective date after issuance or publication of a rule. Sections 553(b)(B) and 553(d)(3) of the APA provide for exceptions from the APA notice and comment, and delay in effective date requirements; in cases in which these exceptions apply, sections 1871(b)(2)(C) and 1871(e)(1)(B)(ii) of the Act provide exceptions from the notice and 60-day comment period and delay in effective date requirements of the Act as well. Section 553(b)(B) of the APA and section 1871(b)(2)(C) of the Act authorize an agency to dispense with normal notice and comment rulemaking procedures for good cause if the agency makes a finding that the notice and comment process is impracticable, unnecessary, or contrary to the public interest, and includes a statement of the finding and the reasons for it in the rule. In addition, section 553(d)(3) of the APA and section 1871(e)(1)(B)(ii) allow the agency to avoid the 30-day delay in effective date where such delay is contrary to the public interest and the

agency includes in the rule a statement of the finding and the reasons for it.

In our view, this correcting document does not constitute a rulemaking that would be subject to notice and comment requirements. This document merely corrects technical errors in the FY 2024 SNF PPS final rule and in the tables referenced in the final rule. The corrections contained in this document are consistent with, and do not make substantive changes to, the policies and payment methodologies that were proposed, subject to notice and comment procedures, and adopted in the FY 2024 SNF PPS final rule. As a result, the corrections made through this correcting document are intended to resolve inadvertent errors so that the rule accurately reflects the policies adopted in the final rule. Even if this were a rulemaking to which the notice and comment and delayed effective date requirements applied, we find that there is good cause to waive such requirements. It is in the public interest for providers to receive appropriate payments in as timely a manner as possible, and to ensure that the FY 2024 SNF PPS final rule and the tables referenced in the final rule accurately reflect our methodologies, payment rates, and policies. This correcting document ensures that the FY 2024 SNF PPS final rule and the tables referenced in the final rule accurately reflect these methodologies and policies. Therefore, we believe we have good cause to waive the notice and comment and effective date requirements.

IV. Correction of Errors in the Preamble

In FR Doc. 2023-16249 of August 7, 2023 (88 FR 53200), make the following corrections:

1. On page 53221, second column, third full paragraph:

a. Second sentence that reads, “We proposed adding the surgical option that allows 45 subcategory S42.2—codes for displaced fractures to be eligible for one of two orthopedic surgery categories.” is

corrected to read, “We proposed adding the surgical option that allows 46 subcategory S42.2—codes for displaced fractures to be eligible for one of two orthopedic surgery categories.”

b. Fourth sentence that reads, “We also proposed adding the surgical option to subcategory 46 M84.5—codes for pathological fractures to certain major weight-bearing bones to be eligible for one of two orthopedic surgery categories.” is corrected to read, “We also proposed adding the surgical option to subcategory 45 M84.5—codes for pathological fractures to certain major weight-bearing bones to be eligible for one of two orthopedic surgery categories.”

Elizabeth J. Gramling,

Executive Secretary to the Department, Department of Health and Human Services.

[FR Doc. 2024-07522 Filed 4-9-24; 8:45 am]

BILLING CODE 4120-01-P

FEDERAL COMMUNICATIONS COMMISSION

47 CFR Parts 36, 51, and 54

[WC Docket Nos. 10-90, 23-328, 14-58, 09-197; WT Docket No. 10-208; FCC 23-87; FR ID 204795]

Connect America Fund, Alaska Connect Fund, ETC Annual Reports and Certifications, Telecommunications Carriers Eligible To Receive Universal Service Support, Universal Service Reform—Mobility Fund

AGENCY: Federal Communications Commission.

ACTION: Final rule.

SUMMARY: In this document, the Federal Communications Commission (FCC or Commission) adopts a Report and Order (Order) amending existing rules and requirements governing the management and administration of the