

no longer meets the criteria for approving the waiver. If the waiver is rescinded, the agency has 6 months from the date of the rescission notice to meet the requirement that had been waived.

4. Section 433.139 is amended by revising paragraphs (b), (d)(1), (d)(2), and (e) to read as follows:

§ 433.139 Payment of claims.

* * * * *

(b) *Probable liability is established at the time claim is filed.* Except as provided in paragraph (e) of this section—

(1) If the agency has established the probable existence of third party liability at the time the claim is filed, the agency must reject the claim and return it to the provider for a determination of the amount of liability. The establishment of third party liability takes place when the agency receives confirmation from the provider or a third party resource indicating the extent of third party liability. When the amount of liability is determined, the agency must then pay the claim to the extent that payment allowed under the agency's payment schedule exceeds the amount of the third party's payment.

(2) The agency may pay the full amount allowed under the agency's payment schedule for the claim and then seek reimbursement from any liable third party to the limit of legal liability if the claim is for labor and delivery and postpartum care. (Costs associated with the inpatient hospital stay for labor and delivery and postpartum care must be cost-avoided.)

* * * * *

(d) *Recovery of reimbursement.* (1) If the agency has an approved waiver under paragraph (e) of this section to pay a claim in which the probable existence of third party liability has been established and then seek reimbursement, the agency must seek recovery of reimbursement from the third party to the limit of legal liability within 60 days after the end of the month in which payment is made unless the agency has a waiver of the 60-day requirement under paragraph (e) of this section.

(2) Except as provided in paragraph (e) of this section, if the agency learns of the existence of a liable third party after a claim is paid, or benefits become available from a third party after a claim is paid, the agency must seek recovery of reimbursement within 60 days after the end of the month it learns of the existence of the liable third party or benefits become available.

* * * * *

(e) *Waiver of requirements.* (1) The agency may request initial and continuing waiver of the requirements in paragraphs (b)(1), (d)(1), and (d)(2) of this section, if it determines that the requirement is not cost-effective. An activity would not be cost-effective if the cost of the required activity exceeds the third party liability recoupment and the required activity accomplishes, at the same or at a higher cost, the same objective as another activity that is being performed by the State.

(i) The agency must submit a request for waiver of the requirement in writing to the HCFA regional office.

(ii) The request must contain adequate documentation to establish that to meet a requirement specified by the agency is not cost-effective. Examples of documentation are costs associated with billing, claims recovery data, and a State analysis documenting a cost-effective alternative that accomplishes the same task.

(iii) The agency must agree, if a waiver is granted, to notify HCFA of any event that occurs that changes the conditions upon which the waiver was approved.

(2) HCFA will review a State's request to have a requirement specified under paragraph (e)(1) of this section waived and will request additional information from the State, if necessary. HCFA will notify the State of its approval or disapproval determination within 30 days of receipt of a properly documented request.

(3) HCFA may rescind the waiver at any time that it determines that the State no longer meets the criteria for approving the waiver. If the waiver is rescinded, the agency has 6 months from the date of the rescission notice to meet the requirement that had been waived.

(4) An agency requesting a waiver of the requirements specifically concerning either the 60-day limit in paragraph (d)(1) or (d)(2) of this section must submit documentation of written agreement between the agency and the third party, including Medicare fiscal intermediaries and carriers, that extension of the billing requirement is agreeable to all parties.

(Catalog of Federal Domestic Assistance Program No. 93.778—Medical Assistance Program)

Dated: June 28, 1995.

Bruce C. Vladeck,
Administrator, Health Care Financing
Administration.

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FEDERAL COMMUNICATIONS COMMISSION

47 CFR Part 0

[FCC 95-213]

Changes in the Delegated Authority of Various Bureaus

AGENCY: Federal Communications Commission.

ACTION: Final rule.

SUMMARY: This Order amends Part 0 of the Commission's rules to reflect the establishment of the Wireless Telecommunications Bureau (WTB) and changes to the delegated authority of the various Bureaus. Changes to Part 0 include authority delegated to the WTB, Common Carrier Bureau (CCB) and International Bureau (IB) to resolve common carrier forfeiture proceedings involving \$80,000 or less and authority delegated to the WTB, IB, Mass Media Bureau and Cable Services Bureau to issue subpoenas. A conforming edit is also made to the Compliance and Information Bureau's subpoena power. This Order is intended to create a more effective organization in which to consolidate and administer the Commission's policies.

EFFECTIVE DATE: July 10, 1995.

FOR FURTHER INFORMATION CONTACT: Kathleen O'Brien Ham, Wireless Telecommunications Bureau, (202) 418-0660.

SUPPLEMENTARY INFORMATION: This is a synopsis of the Commission's Order adopted May 30, 1995 and released June 9, 1995. The full text of Commission decisions are available for inspection and copying during normal business hours in the FCC Docket Branch (Room 230), 1919 M Street, NW., Washington, DC. The complete text of this decision may also be purchased from the Commission's copy contractor, International Transcription Service, Inc., (202) 857-3800, 2100 M Street, NW., Washington, DC 20037.

Synopsis of the Order

1. In order to create an effective organization in which to consolidate and administer the Commission's policies, programs and rules governing domestic wireless telecommunications, the Commission recently established the new Wireless Telecommunications Bureau. Specifically, the Commission merged the Private Radio Bureau and a portion of the Common Carrier Bureau to create the Wireless Telecommunications Bureau. The rule amendments contained in this Order make changes to Part 0 of the