

1995, EPA does not expect significant any economic impact at any level of business enterprise if mevinphos tolerances are revoked on May 31, 1996; especially since all use of mevinphos will have ended 6 months before this date. Accordingly, I certify that this regulatory action does not require a separate regulatory flexibility analysis under the Regulatory Flexibility Act.

C. Paperwork Reduction Act

This proposed regulatory action does not contain any information collection requirements subject to review by the Office of Management and Budget under the Paperwork Reduction Act of 1980, 44 U.S.C. 3501 et seq. (Sec. 408(m) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 346 a(m))).

List of Subjects in Parts 180 and 185

Environmental protection, Administrative practice and procedure, Agricultural commodities, Food additives, Pesticides and pests, Reporting and recordkeeping requirements.

Dated: July 25, 1995.

Losi Rossi,

Director, Special Review and Reregistration Division, Office of Pesticide Programs.

Therefore, it is proposed that 40 CFR parts 180 and 185 be amended to read as follows:

1. In Part 180:

PART 180—AMENDED

a. The authority citation for part 180 would continue to read as follows:

Authority: 21 U.S.C. 346a and 371.

§ 180.157 [Removed]

b. Section 180.157 is removed.

2. In Part 185:

a. The authority citation for part 185 would continue to read as follows:

Authority: 21 U.S.C. 346a and 348.

§ 185.4200 [Removed]

b. Section 185.4200 is removed.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

42 CFR Parts 412, 413, 424, 485, and 489

[BPD-825-CN]

RIN 0938-AG95

Medicare Program; Changes to the Hospital Inpatient Prospective Payment Systems and Fiscal Year 1996 Rates; Correction

AGENCY: Health Care Financing Administration (HCFA), HHS.
ACTION: Proposed rule; correction.

SUMMARY: In the June 2, 1995, issue of the **Federal Register** (60 FR 29202), we published a proposed rule addressing revisions to the Medicare hospital inpatient prospective payment systems for operating costs and capital-related costs to implement necessary changes arising from our continuing experience with the system.

Additionally, in the addendum to that proposed rule, we described proposed changes in the amounts and factors necessary to determine prospective payment rates for Medicare hospital inpatient services for operating costs and capital-related costs. The changes would be applicable to discharges occurring on or after October 1, 1995. We also set proposed rate-of-increase limits as well as proposing policy changes for hospitals and hospital units excluded from the prospective payment systems. This document corrects errors made in the proposed rule.

FOR FURTHER INFORMATION CONTACT: Nancy Edwards (410) 966-4532.

SUPPLEMENTARY INFORMATION: In our June 2, 1995, proposed rule (60 FR 29202), we stated that we were including as Appendix C the report to Congress on our initial recommendation on the update factors for prospective payment hospitals and hospitals

excluded from the prospective payment system (60 FR 29258). The report consists of letters to the President of the Senate and the Speaker of the House of Representatives. Subsequently, we discovered that the incorrect report was inadvertently printed in the proposed rule.

In addition to publishing the proper report to Congress, we are making several other corrections to the June 2, 1995 proposed rule.

The proposed rule (FR Doc 95-13183) published June 2, 1995 (60 FR 29202) is corrected as follows:

1. On page 29250, beginning at the bottom of the second column, section VIII.B.9 of the preamble is deleted and replaced with the following: 9. PPS Payment Impact File

This file contains data used to estimate FY 1996 payments under Medicare's prospective payment systems for hospitals' operating and capital-related costs. The data are taken from various sources, including the Provider-Specific File, the PPS-IX and PPS-X Minimum Data Sets, and prior impact files. The data set is abstracted from an internal file used for the impact analysis of the changes to the prospective payment system published in the **Federal Register**. This file is available for release one month after publication of the proposed rule in the **Federal Register**, with an updated version available one month after publication of the final rule.

Media: Diskette

File Cost: \$145.00

Periods Available: FY 1996 PPS Update

§ 412.23 [Corrected]

2. On page 29251, second column, in § 412.23(e)(2)(i), at the end of the fifth line, add the word "or".

3. On page 29329, Table 6c—Invalid Diagnosis Codes is corrected and new Table 6d—Invalid Procedure Codes is added to read as follows:

TABLE 6C.—INVALID DIAGNOSIS CODES

Diagnosis code	Description	CC	MDC	DRG
005.8	Other bacterial food poisoning	N	6	182, 183, 184.
278.0	Obesity	N	10	296, 297, 298.
415.1	Pulmonary embolism and infarction	Y	4	78
			15	387, 389.
569.6	Colostomy and enterostomy malfunction	Y	6	188, 189, 190.
690	Erythematous squamous dermatosis	N	9	283, 284.
787.9	Other symptoms involving digestive system	N	6	182, 183, 184.
989.8	Toxic effect of other substances, chiefly nonmedicinal as to source	N	21	449, 450, 451.
997.0	Central nervous system complications	Y	1	34, 35
			15	387, 389.
997.9	Complications affecting other specified body systems, not elsewhere classified	Y	21	452, 453.
V12.5	Personal history of diseases of circulatory system	N	23	467.