Sections in 42 CFR that contain collections of information	Current OMB control Nos.
489.24	0938—0334 0938—0663 and
489.102 491.9, 491.10 493.35, 493.37, 493.39, 493.43, 493.45, 493.47,	0938—0667 0938—0610 0938—0334
493.49, 493.51, 493.53, 493.55, 493.60, 493.61, 493.62, 493.63	0938—0612 0938—0607
493.1709, 493.1711, 493.1713, 493.1715, 493.1717, 493.1719, 493.1721, 493.1775, 493.1776, 493.1777, 493.1780, 493.2001	0938—0612
494.52, 494.54, 494.56,	0936—0012
494.58, 494.64 498.22, 498.40, 498.58,	0938—0608
498.82	0938—0508
1004.40, 1004.50, 1004.60, 1004.70	0938—0444

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; Program No. 93.774, Medicare— Supplementary Medical Insurance Program, Program No. 93.778, Medical Assistance Program)

Dated: September 22, 1995.

Bruce C. Vladeck,

Administrator, Health Care Financing Administration.

[FR Doc. 95–24383 Filed 9–28–95; 8:45 am] BILLING CODE 4120–01–P

# 42 CFR Parts 485 and 486 [BPD-836-FC]

# Medicare Program—Providers and Suppliers of Specialized Services: Technical Amendments

**AGENCY:** Health Care Financing Administration (HCFA), HHS.

**ACTION:** Final rule with comment period.

**SUMMARY:** This rule makes editorial and clarifying changes in the regulations that pertain to providers and suppliers of specialized services. It also adds a new subpart A to those that pertain to suppliers. These changes are purely technical and have no substantive effect on the Medicare program.

DATES: Effective date: This rule is effective as of September 27, 1991. Comment date: We will consider comments received by November 28, 1995.

ADDRESSES: Please mail original and 3 copies of your comments to the following address: Health Care

Financing Administration, Department of Health and Human Services, Attention: BPD–836–FC, P.O. Box 26676, Baltimore, MD 21207.

If you prefer, you may deliver original and 3 copies of your comments to either of the following addresses:

Room 309–G, 200 Independence Avenue, SW, Washington, DC 20201 Room C5–09–26, 7500 Security Boulevard, Baltimore, MD 21244– 1850

Due to staffing and resource limitations, we cannot accept comments by facsimile (FAX) transmission. In commenting, please refer to file code BPD-836-FC.

Written comments received timely will be available for public inspection as they are received, generally beginning approximately three weeks after publication of the document, in room 309G of the Department's offices at 200 Independence Avenue, SW, Washington, DC, Monday through Friday, from 8:30 a.m. to 5 p.m. (Phone: (202) 690–7890).

FOR FURTHER INFORMATION CONTACT: Luisa V. Iglesias, (202) 690-6383. SUPPLEMENTARY INFORMATION: On January 9, 1995, we published a technical regulation identified as BPD-798-FC (at 60 FR 2325) to reorganize the HCFA regulations that pertain to specialized services. The rules that pertain to specialized services furnished by providers were redesignated under part 485, and the rules that pertain to specialized services furnished by suppliers were redesignated under a new part 486. As explained in the preamble to BPD-798-FC, regulations on organ procurement organizations (OPOs) and on screening mammographies were not relocated to part 486 because they were in the process of undergoing substantive changes.

No comments were received on the January 9 publication. However, for reasons indicated below, we need to make changes in parts 485 and 486.

The final rules on OPOs have been delayed. To ensure that in the October 1, 1995 edition of the Code of Federal Regulations the current rules on OPOs (which are not providers) appear in the appropriate part, we are redesignating them as subpart G of part 486.

The rules on mammographies have been redesignated under § 410.34 of the HCFA regulations and that section specifies that certain Food and Drug Administration rules also apply.

We are adding a new "Basis and scope" section to part 486. One purpose of the new section is to inform the reader of where the conditions for

coverage for other specialized services furnished by suppliers are to be found.

This rule also—

- Clarifies and simplifies 3 definitions in part 485;
- Provides uniform heading format for all sections of redesignated subpart G and revises some of those headings;
  and
- Corrects internal cross-references as required by the redesignations.

# Collection of Information Requirements

This rule contains no new 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.*).

Waiver of Proposed Rulemaking and Delayed Effective Date

The changes made by this rule are purely technical and editorial and have no substantive impact. Accordingly, we find that there is good cause to waive proposed rulemaking procedures as unnecessary.

In addition, it is important, for the convenience of the public, that these changes be effective as of October 1, 1995, so that they will appear in the 1995 edition of the Code of Federal Regulations on which the public relies. Accordingly, we find that there is also good cause to waive the usual 30-day delay in the effective date.

#### Response to Comments

Although this is a final rule, we will consider timely comments from anyone who believes that, in making the technical and editorial changes, we have unintentionally changed the substance of the regulations. Although we cannot respond to comments individually, if we revise this rule as a result of comments, we will discuss all timely comments in the preamble to the revised rule.

# Regulatory Impact Statement

Consistent with the Regulatory Flexibility Act (RFA) and section 1102(b) of the Social Security Act, we prepare a regulatory flexibility analysis for each rule unless we can certify that the particular rule will not have a significant economic impact on a substantial number of small entities or a significant impact on the operation of a substantial number of small rural hospitals.

The RFA defines "small entity" as a small business, a nonprofit enterprise, or a governmental jurisdiction (such as a county, city, or township) with a population of less than 50,000. We also