(4) No secondary financing at closing, except grants, forgivable loans or soft loans made by a not-for-profit organization or government agency in order to assist in the loan refinancing or restructuring or that provided down payment or closing cost assistance for the original purchase of the home; and

(5) No characteristics of a nontraditional or subprime loan.

(B) Prohibited fees. Members shall not charge the household fees on the new AHP-assisted refinanced or restructured loan, including origination fees, and discount points that increase the yield above the Freddie Mac Primary Mortgage Market Survey weekly national average 30-year fixed-rate mortgage rate.

(10) Repayment of AHP subsidy in event of foreclosure. If, during the AHP five-year retention period, the member, an affiliate of the member, or any other entity forecloses on, or accepts a deed in lieu of foreclosure on, a loan restructured or refinanced pursuant to this paragraph (f), the member shall repay the Bank a pro rata share of the AHP direct subsidy, reduced for every year prior to the foreclosure or deed in lieu, for the five-year period.

(11) Sunset. The requirements contained in this paragraph (f) shall expire on June 30, 2011, and the Bank may not commit AHP subsidy to households under its program established pursuant to this paragraph (f) after that date.

3. Amend § 951.7 by:

a. In paragraph (b)(1)(i), adding "and § 951.6(f)(6)" after "\$ 951.6(c)(2)";

b. In paragraph (b)(1)(ii), adding "and § 951.6(f)" after "§ 951.6(c)"; and

c. In paragraph (b)(2)(i), adding "and § 951.6(f)" after "§ 951.6(c)".

Dated: April 9, 2008.

By the Board of Directors of the Federal Housing Finance Board.

### Ronald A. Rosenfeld.

Chairman.

[FR Doc. E8–7949 Filed 4–15–08; 8:45 am] BILLING CODE 6725–01–P

## SOCIAL SECURITY ADMINISTRATION

### 20 CFR Parts 404 and 416

[Docket No. SSA 2007-0102]

RIN 0960-AG74

# Revised Medical Criteria for Evaluating Cardiovascular Disorders

**AGENCY:** Social Security Administration. **ACTION:** Advance notice of proposed rulemaking.

**SUMMARY:** We are requesting your comments on whether and how we should update and revise the criteria we use to evaluate claims involving cardiovascular disorders in adults and children. These criteria are found in sections 4.00 and 104.00 of the Listing of Impairments in appendix 1 to subpart P of part 404 of our regulations (the listings). We are requesting your comments as part of our ongoing effort to ensure that the listings are up-to-date.

After we have considered your comments and suggestions, other information about advances in medical knowledge, treatment, and methods of evaluating cardiovascular disorders, and our program experience using the current listings, we will determine whether we should revise any of the cardiovascular listings. If we propose specific revisions to the listings, we will publish a Notice of Proposed Rulemaking (NPRM) in the Federal Register.

**DATES:** To be sure that your comments are considered, we must receive them no later than June 16, 2008.

ADDRESSES: You may submit comments by one of four methods—Internet, facsimile, regular mail, or handdelivery. Please do not submit the same comments multiple times or by more than one method. Regardless of which of the following methods you choose, please state that your comments refer to Docket No. SSA-2007-0102 to ensure that we can associate your comments with the correct regulation:

1. Federal eRulemaking portal at http://www.regulations.gov. (This is the most expedient method for submitting your comments, and we strongly urge you to use it.) In the Comment or Submission section of the webpage, type "SSA-2007-0102", select "Go", and then click "Send a Comment or Submission." The Federal eRulemaking portal issues you a tracking number when you submit a comment.

2. Telefax to (410) 966-2830.

3. Letter to the Commissioner of Social Security, P.O. Box 17703, Baltimore, Maryland 21235–7703.

4. Deliver your comments to the Office of Regulations, Social Security Administration, 922 Altmeyer Building, 6401 Security Boulevard, Baltimore, Maryland 21235–6401, between 8 a.m. and 4:30 p.m. on regular business days.

All comments are posted on the Federal eRulemaking portal, although they may not appear for several days after receipt of the comment. You may also inspect the comments on regular business days by making arrangements with the contact person shown in this preamble.

Caution: Our policy for comments we receive from members of the public is to make them available for public viewing in their entirety on the Federal eRulemaking portal at <a href="http://www.regulations.gov">http://www.regulations.gov</a>. Therefore, you should be careful to include in your comments only information that you wish to make publicly available on the Internet. We strongly urge you not to include any personal information, such as your Social Security number or medical information, in your comments.

# medical information, in your comments. FOR FURTHER INFORMATION CONTACT: Diane Braunstein, Director, Office of Compassionate Allowances and Listings Improvement, Social Security Administration, 4468 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235–6401, (410) 965–1020, for information about this notice. For information on eligibility or filing for benefits, call our national toll-free number 1–800–772–1213 or TTY 1–800–325–0778, or visit our Internet site,

### SUPPLEMENTARY INFORMATION:

www.socialsecurity.gov.

Social Security Online, at http://

### **Electronic Version**

The electronic file of this document is available on the date of publication in the **Federal Register** at http://www.gpoaccess.gov/fr/index.html.

### What is the purpose of this ANPRM?

The purpose of this ANPRM is to give you an opportunity to send us comments and suggestions on whether and how we might update and revise listings 4.00 and 104.00 for evaluating cardiovascular disorders. We last published final rules revising the criteria that we use to evaluate cardiovascular disorders in the Federal Register on January 13, 2006 (71 FR 2311). We are publishing this ANPRM as part of our ongoing effort to ensure that our criteria are effective and reflect the latest advances in medicine.

# On which rules are we inviting comments?

We are interested in any comments and suggestions you have on whether and how we might revise, update, and clarify sections 4.00 and 104.00 of the listings. You can find the current rules for these listings on the Internet at the following locations:

- Sections 4.00 and 104.00 are in the Listing of Impairments in appendix 1 to subpart P of part 404 of our regulations at http://www.ssa.gov/OP\_Home/cfr20/404/404-ap10.htm.
- Section 4.00 of the listings is also available at http://www.ssa.gov/disability/professionals/bluebook/4.00-Cardiovascular-Adult.htm.

• Section 104.00 of the listings is also available at http://www.ssa.gov/disability/professionals/bluebook/104.00-Cardiovascular-Childhood.htm.

If you do not have Internet access, you can find the Code of Federal Regulations in some public libraries, Federal depository libraries, and public law libraries.

# Who should send us comments and suggestions?

We invite comments and suggestions from anyone who has an interest in the rules we use to evaluate claims for benefits filed by people who have cardiovascular disorders. We are interested in getting comments and suggestions from people who apply for or receive benefits from us, members of the general public, advocates and organizations who represent people who have cardiovascular disorders, State agencies that make disability determinations for us, experts in the evaluation of cardiovascular disorders, and researchers.

### What should you comment about?

We are interested in any comments and suggestions you have on how we might update and revise sections 4.00 and 104.00 of our listings. For example, with regard to our listings, we are interested in knowing if:

 You have concerns about any of the provisions in the current cardiovascular listings, such as whether you think we should change any of our criteria or whether you think a listing is difficult to use or to understand.

- You would like to see our cardiovascular listings include something that they do not include now, such as other cardiovascular disorders, additional medical technologies, specific laboratory studies, or new medical criteria.
- You think our cardiovascular listings should include additional functional criteria and, if so, what those criteria should be.
- You think there are cardiac diseases or conditions, however rare, that have such a devastating effect on patients that we should presume that they are unable to work.
- You think new imaging techniques can provide new standards for allowing us to presume disability for certain advanced diseases and conditions.

# Will we respond to your comments from this notice?

We will not respond directly to comments you send us in response to this ANPRM. However, after we consider your comments along with other information, such as medical research and other information about advances in medical knowledge, treatment, methods of evaluating cardiovascular disease, and our program experience, we will decide whether and how to revise the listings we use to evaluate cardiovascular disorders. If we propose revisions to these listings, we will publish an NPRM in the Federal

Register. In accordance with the usual rulemaking procedures we follow, if we publish an NPRM, you will have a chance to comment on the revisions we propose, and we will summarize and respond to the significant comments on the NPRM in the preamble to any final rules.

### Other Information

Who can get disability benefits?

Under title II of the Social Security Act (the Act), we provide for the payment of disability benefits if you are disabled and belong to one of the following three groups:

- Workers insured under the Act,
- Children of insured workers, and
- Widows, widowers, and surviving divorced spouses (see § 404.336) of insured workers.

Under title XVI of the Act, we provide for Supplemental Security Income (SSI) payments on the basis of disability if you are disabled and have limited income and resources.

How do we define disability?

Under both the title II and title XVI programs, disability must be the result of any medically determinable physical or mental impairment or combination of impairments that is expected to result in death or which has lasted or can be expected to last for a continuous period of at least 12 months. Our definitions of disability are shown in the following table:

If you file a claim under	And you are	Disability means you have a medically determinable impairment(s) as described above that results in
title XVI	an individual age 18 or older	the inability to do any substantial gainful activity (SGA). the inability to do any SGA. marked and severe functional limitations.

How do we decide whether you are disabled?

If you are applying for benefits under title II of the Act, or if you are an adult applying for payments under title XVI of the Act, we use a five-step "sequential evaluation process" to decide whether you are disabled. We describe this five-step process in our regulations at §§ 404.1520 and 416.920. We follow the five steps in order and stop as soon as we can make a determination or decision. The steps are:

1. Are you working, and is the work you are doing SGA? If you are working and the work you are doing is SGA, we will find that you are not disabled, regardless of your medical condition or your age, education, and work

experience. If you are not, we will go on to step 2.

- 2. Do you have a "severe" impairment? If you do not have an impairment or combination of impairments that significantly limits your physical or mental ability to do basic work activities, we will find that you are not disabled. If you do, we will go on to step 3.
- 3. Do you have an impairment(s) that meets or medically equals the severity of an impairment in the listings? If you do, and the impairment(s) meets the duration requirement, we will find that you are disabled. If you do not, we will go on to step 4.
- 4. Do you have the residual functional capacity (RFC) to do your past relevant work? If you do, we will find that you

are not disabled. If you do not, we will go on to step 5.

5. Does your impairment(s) prevent you from doing any other work that exists in significant numbers in the national economy, considering your RFC, age, education, and work experience? If it does, and it meets the duration requirement, we will find that you are disabled. If it does not, we will find that you are not disabled.

We use a different sequential evaluation process for children who apply for payments based on disability under title XVI of the Act. See § 416.924 of our regulations. If you are already receiving benefits, we also use a different sequential evaluation process when we decide whether your disability continues. See §§ 404.1594, 416.924, 416.994, and 416.994a of our

regulations. However, all of these processes include steps at which we consider whether your impairment(s) meets or medically equals one of our listings.

What are the listings?

The listings are examples of impairments that we consider severe enough to prevent you as an adult from doing any gainful activity. If you are a child seeking SSI payments under title XVI of the Act, the listings describe impairments that we consider severe enough to result in marked and severe functional limitations. Although the listings are contained only in appendix 1 to subpart P of part 404 of our regulations, we incorporate them by reference in the SSI program in § 416.925 of our regulations and apply them to claims under both title II and title XVI of the Act.

How do we use the listings?

The listings are in two parts. There are listings for adults (part A) and for children (part B). If you are an individual age 18 or over, we apply the listings in part A when we assess your claim, and we never use the listings in part B.

If you are an individual under age 18, we first use the criteria in part B of the listings. Part B contains criteria that apply only to individuals who are under age 18. If the criteria in part B do not apply, we may use the criteria in part A when those criteria give appropriate consideration to the effects of the impairment(s) in children. (See §§ 404.1525 and 416.925.)

If your impairment(s) does not meet any listing, we will also consider whether it medically equals any listing; that is, whether it is as medically severe as an impairment in the listings. (See §§ 404.1526 and 416.926.)

What if you do not have an impairment(s) that meets or medically equals a listing?

We use the listings only to decide that you are disabled or that you are still disabled. We will not deny your claim or decide that you no longer qualify for benefits because your impairment(s) does not meet or medically equal a listing. If you have a severe impairment(s) that does not meet or medically equal any listing, we may still find you disabled based on other rules in the sequential evaluation process. Likewise, we will not decide that your disability has ended only because your impairment(s) no longer meets or medically equals a listing.

### **List of Subjects**

20 CFR Part 404

Administrative practice and procedure, Blind, Disability benefits, Old-Age, Survivors and Disability Insurance, Reporting and recordkeeping requirements, Social Security.

20 CFR Part 416

Administrative practice and procedure, Aged, Blind, Disability benefits, Public assistance programs, Reporting and recordkeeping requirements, Supplemental Security Income (SSI).

Dated: March 20, 2008.

### Michael J. Astrue,

Commissioner of Social Security. [FR Doc. E8–8111 Filed 4–15–08; 8:45 am] BILLING CODE 4191–02–P

# DEPARTMENT OF VETERANS AFFAIRS

### 38 CFR Part 3

RIN 2900-AM74

# Definition of Service in the Republic of Vietnam

**AGENCY:** Department of Veterans Affairs. **ACTION:** Proposed rule.

SUMMARY: The Department of Veterans Affairs (VA) proposes to amend its adjudication regulations regarding the definition of service in the Republic of Vietnam. We state that service in the Republic of Vietnam for the purposes of applying the presumption of exposure to herbicide agents includes service on land and on inland waterways in Vietnam. The amendments clarify existing regulatory provisions and ensure the proper administration of VA policy.

**DATES:** Comments must be received by VA on or before June 16, 2008.

ADDRESSES: Written comments may be submitted through http:// www.Regulations.gov; by mail or handdelivery to the Director, Regulations Management (00REG), Department of Veterans Affairs, 810 Vermont Ave., NW., Room 1068, Washington, DC 20420; or by fax to (202) 273-9026. (This is not a toll-free number.) Comments should indicate that they are submitted in response to "RIN 2900-AM74-Definition of Service in the Republic of Vietnam." Copies of comments received will be available for public inspection in the Office of Regulation Policy and Management, Room 1063B, between the hours of 8 a.m. and 4:30 p.m. Monday through

Friday (except holidays). Please call (202) 461–4902 for an appointment. (This is not a toll-free number.) In addition, during the comment period, comments may be viewed online through the Federal Docket Management System (FDMS) at http://www.Regulations.gov.

### FOR FURTHER INFORMATION CONTACT:

Rhonda F. Ford, Chief, Regulations Staff (211D), Compensation and Pension Service, Veterans Benefits
Administration, Department of Veterans Affairs, 810 Vermont Avenue, NW.,
Washington, DC 20420, (202) 461–9739.
(This is not a toll-free number.)

**SUPPLEMENTARY INFORMATION:** This rulemaking is necessitated by the recent decision rendered by the U. S. Court of Appeals for Veterans Claims (CAVC) in *Haas* v. *Nicholson*, 20 Vet. App. 257 (2006).

In the *Haas* case, the CAVC addressed what it perceived to be ambiguity in VA's regulatory definitions of the term "service in the Republic of Vietnam." Mr. Haas, a veteran of the U.S. Navy, filed a claim for VA disability compensation based on diabetes that he alleged had resulted from "exposure to Agent Orange/radioactive materials' during his service in Vietnam. Haas, 20 Vet. App. at 260. VA denied his claim, concluding that 38 CFR 3.307(a)(6)(iii) does not provide a presumption of herbicide exposure to a Vietnam Era veteran who never set foot on land in the Republic of Vietnam and did not serve on its inland waterways. Additionally, VA interpreted the language in § 3.307(a)(6)(iii) that presumes herbicide exposure for veterans who had "service in the waters offshore and service in other locations if the conditions of service involved duty or visitation in Vietnam" to require that "the ship must have come to port in the [Republic of Vietnam] and you disembarked.'" Haas, 20 Vet. App. at 260 (quoting a letter from a VA regional office). Mr. Haas contended that "service in the Republic of Vietnam" as defined by 38 CFR 3.307(a)(6)(iii) must be read to include service in the offshore waters, regardless of whether the veteran set foot on land.

The issue in *Haas* was whether VA's interpretation of "service in the Republic of Vietnam" in § 3.307(a)(6)(iii) is a permissible interpretation of that regulation and the authorizing statute, 38 U.S.C. 1116(f). The CAVC held that the statute is not clear on its face concerning whether the phrase "service in the Republic of Vietnam" refers only to service on land or encompasses some forms of offshore service. *Haas*, 20 Vet. App. at 265.