

\* \* \* \* \*

[FR Doc. 05-16929 Filed 8-25-05; 8:45 am]

BILLING CODE 6560-50-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Medicare & Medicaid Services****42 CFR Part 405**

[CMS-4064-IFC3]

RIN-0938-AM73

**Medicare Program; Changes to the Medicare Claims Appeal Procedures: Correcting Amendment to a Correcting Amendment****AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS.**ACTION:** Correcting amendment.

**SUMMARY:** This correcting amendment corrects a technical error in the correcting amendment that appeared in the **Federal Register**, entitled "Medicare Program; Changes to the Medicare Claims Appeal Procedures: Correcting Amendment to an Interim Final Rule."

**DATES:** *Effective Date:* This correcting amendment is effective September 26, 2005.

**FOR FURTHER INFORMATION CONTACT:** Arrah Tabe-Bedward, (410) 786-7129.

**SUPPLEMENTARY INFORMATION:****I. Background**

We have identified a technical error that appeared in a correcting amendment entitled "Medicare Program; Changes to the Medicare Claims Appeal Procedures: Correcting Amendment to an Interim Final Rule." (70 FR 37700, June 30, 2005) In this correcting amendment, we are correcting that technical error.

**II. Correction of Error***A. Technical Correction to the Regulations Text*

In § 405.1020 of the regulation text, we incorrectly stated the section's title as "Time frames for deciding an appeal for a hearing before an ALJ." It should have read, "Time and place for a hearing before an ALJ." We correct this technical error in section B of this correcting amendment.

**III. Waiver of Proposed Rulemaking**

We ordinarily publish a notice of proposed rulemaking in the **Federal Register** to provide a period for public comment before the provisions of a rule take effect. However, we can waive this

procedure if we find good cause for doing so, and incorporate a statement of this finding and the reasons for it into the rule. A finding that a notice and comment period is impracticable, unnecessary, or contrary to the public interest constitutes good cause for waiving this procedure.

We believe that it is unnecessary to seek public comment on the correction of this editorial error. Further, it is in the public's interest to correct this editorial error because it makes the section more understandable to parties pursuing Medicare appeals under these procedures. Therefore, we find good cause to waive notice and comment procedures.

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

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

*Correction of Regulation Text Error*

■ Accordingly, 42 CFR chapter IV is corrected by making the following correction to part 405:

**PART 405—[CORRECTED]**

■ 1. The authority citation for part 405 continues to read as follows:

**Authority:** Secs. 205(a), 1102, 1861, 1862(a), 1869, 1871, 1874, 1881, and 1886(k) of the Social Security Act (42 U.S.C. 405(a), 1302, 1395x, 1395y(a), 1395ff, 1395hh, 1395kk, 1395rr and 1395ww(k)) and Sec. 353 of the Public Health Service Act (42 U.S.C. 263a).

**§ 405.1020 [Corrected]**

■ 2. Section 405.1020 is amended by revising the section title to read as follows:

**§ 405.1020 Time and place for a hearing before an ALJ.**

\* \* \* \* \*

Dated: August 16, 2005.

**Ann C. Agnew,**

*Executive Secretary to the Department.*

[FR Doc. 05-16711 Filed 8-25-05; 8:45 am]

BILLING CODE 4120-01-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Medicare & Medicaid Services****42 CFR Part 433**

[CMS-2210-IFC]

RIN 0938-AO04

**Medicaid Program; State Allotments for Payment of Medicare Part B Premiums for Qualifying Individuals: Federal Fiscal Year 2005****AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS.**ACTION:** Interim final rule with comment period.

**SUMMARY:** This interim final rule with comment period sets forth the methodology used to compute State allotments that are available to pay Medicare Part B premiums for qualifying individuals, allows changes to the State allotments and describes the methodology used to determine the changes to each State's allotment.

**DATES:** *Effective date:* These regulations are effective August 26, 2005 for allotments for payment of Medicare Part B premiums from the allocation for fiscal year 2005.

*Comment date:* To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on October 25, 2005.

**ADDRESSES:** In commenting, please refer to file code CMS-2210-IFC. Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission.

You may submit comments in one of three ways (no duplicates, please):

1. *Electronically.* You may submit electronic comments on specific issues in this regulation to <http://www.cms.hhs.gov/regulations/ecomments>. (Attachments should be in Microsoft Word, WordPerfect, or Excel; however, we prefer Microsoft Word.)

2. *By regular mail.* You may mail written comments (one original and two copies) to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-2210-IFC, P.O. Box 8011, Baltimore, MD 21244-8011.

Please allow sufficient time for mailed comments to be received before the close of the comment period.

3. *By express or overnight mail.* You may send written comments (one original and two copies) to the following address ONLY: Centers for Medicare &