

**PART 70—[AMENDED]**

1. The authority citation for part 70 continues to read as follows:

**Authority:** 42 U.S.C. 7401, *et seq.*

2. Appendix A to part 70 is amended by adding paragraph (d) to the entry for Missouri to read as follows:

**Appendix A to Part 70—Approval Status of State and Local Operating Permit Programs**

\* \* \* \* \*

Missouri

\* \* \* \* \*

(d) The Missouri Department of Natural Resources submitted on May 28, 1998, revisions to Missouri Rules 10 CSR 10–6.020, “Definitions and Common Reference Tables,” and 10 CSR 10–6.065, “Operating Permits.” Effective date was April 30, 1998.

\* \* \* \* \*

[FR Doc. 99–31964 Filed 12–17–99; 8:45 am]

**BILLING CODE 6560–50–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of the Secretary**

**Office of Inspector General**

**45 CFR Part 61**

**RIN 0906–AA46**

**Health Care Fraud and Abuse Data Collection Program: Reporting of Final Adverse Actions; Correction**

**AGENCY:** Office of Inspector General (OIG), HHS.

**ACTION:** Final rule; correction amendment.

**SUMMARY:** This document contains a correction to the final regulations which were published in the **Federal Register** on Tuesday, October 26, 1999 (64 FR 57740). These regulations established a national health care fraud and abuse data collection program for the reporting and disclosing of certain final adverse actions taken against health care providers, suppliers and practitioners, and for maintaining a data base of final adverse actions taken against health care providers, suppliers and practitioners. An inadvertent error appeared in the text of the regulations concerning when the subject of a report, or a designated representative, may dispute the accuracy of the report. As a result, we are making a correction to 42 CFR 61.15(a) to assure the technical correctness of these regulations.

**EFFECTIVE DATE:** December 20, 1999.

**FOR FURTHER INFORMATION CONTACT:** Joel Schaer, (202) 619–0089, OIG Regulations Officer.

**SUPPLEMENTARY INFORMATION:** The HHS Office of Inspector General (OIG) issued final regulations on October 26, 1999 (64 FR 57740) that established a national health care fraud and abuse data collection program—the Healthcare Integrity and Protection Data Bank (HIPDB)—for the reporting and disclosing of certain final adverse actions taken against health care providers, suppliers and practitioners, and for maintaining a data base of final adverse actions taken against health care providers, suppliers and practitioners. The final rule established a new 45 CFR part 61 to implement the requirements for reporting of specific data elements to, and procedures for obtaining information from, the HIPDB. In that final rule, an inadvertent error appeared in § 61.15 of the regulations and is now being corrected.

In § 61.15, addressing how to dispute the accuracy of HIPDB information, the regulatory language incorrectly indicated that the subject of a report, or his/her or its designated representative, was limited to 60 calendar days from receipt of the report to dispute the report’s accuracy. The intent of this correction is to clarify that the subject or designated representative may amend the report at any period in time. As indicated in the preamble of the final rule that outlined the procedures for obtaining access to a report, submitting a statement, filing a dispute and revising disputed information, the Secretary is exempting the HIPDB from the Department’s Privacy Act regulation requirements (45 CFR part 5b) in order to establish a more comprehensive and generous notification, access and correction procedure. The inadvertent language did not appear in the preamble or in other provisions of the regulations text. To be consistent with the preamble and the regulatory provisions of the final rule, we are correcting an inadvertent error that appeared in § 61.15(a). In addition, we are also clarifying § 61.15(a) by making cross-reference to the access rights afforded the subject of a report as set forth in § 61.12(a)(3).

**List of Subjects in 45 CFR Part 61**

Billing and transportation services, Durable medical equipment suppliers and manufacturers, Health care insurers, Health maintenance organizations, Health professions, Home health care agencies, Hospitals, Penalties, Pharmaceutical suppliers and manufacturers, Privacy, Reporting and

recordkeeping requirements, Skilled nursing facilities.

Accordingly, 45 CFR part 61 is corrected by making the following correcting amendment:

**PART 61—HEALTHCARE INTEGRITY AND PROTECTION DATA BANK FOR FINAL ADVERSE INFORMATION ON HEALTH CARE PROVIDERS, SUPPLIERS AND PRACTITIONERS**

1. The authority citation for part 61 continues to read as follows:

**Authority:** 42 U.S.C. 1320a–7e.

2. Section 61.15 is amended by revising paragraph (a) to read as follows:

**§ 61.15 How to dispute the accuracy of Healthcare Integrity and Protection Data Bank information.**

(a) *Who may dispute the HIPDB information.* The HIPDB will routinely mail or transmit electronically to the subject a copy of the report filed in the HIPDB. In addition, as indicated in § 61.12(a)(3), the subject may also request a copy of such report. The subject of the report or a designated representative may dispute the accuracy of a report concerning himself, herself or itself as set forth in paragraph (b) of this section.

\* \* \* \* \*

Dated: December 14, 1999.

**Joel Schaer,**

*OIG Regulations Officer.*

[FR Doc. 99–32792 Filed 12–17–99; 8:45 am]

**BILLING CODE 4152–01–P**

**FEDERAL COMMUNICATIONS COMMISSION**

**47 CFR Part 73**

**[DA 99–2687; MM Docket No. 98–194; RM–9360]**

**Radio Broadcasting Services; Jewett and Windham, NY**

**AGENCY:** Federal Communications Commission.

**ACTION:** Final rule.

**SUMMARY:** The Commission, at the request of Ridgefield Broadcasting Corporation, reallots Channel 250A from Jewett, NY, to Windham, NY, as the community’s first local aural service, and modifies Station WAXK’s construction permit to specify Windham as its community of license. See 63 FR 64941, November 24, 1998. Channel 250A can be allotted to Windham in compliance with the Commission’s minimum distance separation requirements with a site restriction of 3.6 kilometers (2.3 miles) northwest, at