site within 30 minutes to operate the bridge.

(6) During closing of the span, the channel traffic lights would change from flashing green to flashing red, the horn will sound twice, and an audio voice warning device will announce bridge movement, then two repeat blasts of the horn until the bridge is seated and locked down. When the bridge is seated and locked down to vessels, the channel traffic lights will flash red.

(7) During the open span movement, the channel traffic lights would flash red, the horn will sound twice, followed by a pause, and then five repeat blasts of the horn until the bridge is in the full open position to vessels. In the full open position to vessels, the bridge channel traffic lights will turn from flashing red to flashing green then an audio warning device will announce bridge movement by stating "Security, security, security, the Norfolk Southern #7 Railroad Bridge at mile 5.8 is open for river traffic".

(8) Operational information will be provided 24 hours a day on marine channel 13 and via telephone (757) 924– 5320.

\* \* \* \* \*

Dated: August 18, 2004,

## Ben R. Thomason, III,

Captain, U. S. Coast Guard, Acting Commander, Fifth Coast Guard District. [FR Doc. 04–19564 Filed 8–26–04; 8:45 am] BILLING CODE 4910–15–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

## 42 CFR Part 402

[CMS-6146-CN]

RIN 0938-AL53

## Medicare Program; Revised Civil Money Penalties, Assessments, Exclusions, and Related Appeals Procedures

**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS. **ACTION:** Correction of proposed rule.

**SUMMARY:** This document corrects a technical error that appeared in the proposed rule published in the **Federal Register** on July 23, 2004 entitled "Medicare Program; Revised Civil Money Penalties, Assessments, Exclusions, and Related Appeals Procedures."

FOR FURTHER INFORMATION CONTACT: Joel Cohen, (410) 786–3349.

## SUPPLEMENTARY INFORMATION:

#### I. Background

In FR Doc. 04–16791 of July 23, 2004 (69 FR 43956), there was a technical error that is identified and corrected in the Correction of Errors section below.

We inadvertently omitted the correct **ADDRESSES** section, which included the e-mail address for electronic comments. We are correcting this error by republishing the **ADDRESSES** section of the proposed rule.

#### **II. Correction of Errors**

In FR Doc. 04–16791 of July 23, 2004 (69 FR 43956), make the following correction:

1. On page 43956, in the third column; in the second paragraph, replace the **ADDRESSES** section with the following:

**ADDRESSES:** In commenting, please refer to file code CMS–6146–P. 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 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– 6146–P, P.O. Box 8013, Baltimore, MD 21244–8013.

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

3. *By hand or courier*. If you prefer, you may deliver (by hand or courier) your written comments (one original and two copies) before the close of the comment period to one of the following addresses. If you intend to deliver your comments to the Baltimore address, please call telephone number (410) 786–7197 in advance to schedule your arrival with one of our staff members. Room 445–G, Hubert H. Humphrey

Building, 200 Independence Avenue, SW., Washington, DC 20201; or 7500 Security Boulevard, Baltimore, MD 21244–1850.

(Because access to the interior of the HHH Building is not readily available to persons without Federal Government identification, commenters are encouraged to leave their comments in the CMS drop slots located in the main lobby of the building. A stamp-in clock is available for persons wishing to retain a proof of filing by stamping in and retaining an extra copy of the comments being filed.)

Comments mailed to the addresses indicated as appropriate for hand or courier delivery may be delayed and received after the comment period.

## 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 notice take effect. We can waive this procedure, however, if we find good cause that notice and comment procedure is impracticable, unnecessary, or contrary to the public interest and incorporate a statement of the finding and the reasons for it into the notice issued.

We find it unnecessary to undertake notice and comment rulemaking because this notice merely provides a technical correction to the regulation. Therefore, we find good cause to waive notice and comment procedures.

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

Dated: August 16, 2004.

### Ann C. Agnew,

Executive Secretary to the Department. [FR Doc. 04–19257 Filed 8–26–04; 8:45 am] BILLING CODE 4120–01–P

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Medicare & Medicaid Services

42 CFR Parts 431 and 457

[CMS-6026-P]

RIN 0938-AM86

#### Medicaid Program and State Children's Health Insurance Program (SCHIP): Payment Error Rate Measurement

**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS. **ACTION:** Proposed rule.

**SUMMARY:** This proposed rule would require State agencies to estimate improper payments in the Medicaid program and SCHIP program. The Improper Payments Information Act of 2002 requires Federal agencies to annually review and identify those programs and activities that may be susceptible to significant erroneous