

organizations, rural health clinics, Federally qualified health centers, community mental health centers, and end-stage renal disease facilities must submit a hard copy of the completed cost report forms in addition to the electronic file. The following statement must immediately precede the dated signature of the provider's administrator or chief financial officer:

I hereby certify that I have read the above certification statement and that I have examined the accompanying electronically filed or manually submitted cost report and the Balance Sheet Statement of Revenue and Expenses prepared by _____ (Provider Name(s) and Number(s)) for the cost reporting period beginning _____ and ending _____ and that to the best of my knowledge and belief, this report and statement are true, correct, complete and prepared from the books and records of the provider in accordance with applicable instructions, except as noted. I further certify that I am familiar with the laws and regulations regarding the provision of health care services, and that the services identified in this cost report were provided in compliance with such laws and regulations.

(v) A provider may request a delay or waiver of the electronic submission requirement in paragraph (f)(4)(ii) of this section if this requirement would cause a financial hardship or if the provider qualifies as a low or no Medicare utilization provider. The provider must submit a written request for delay or waiver with necessary supporting documentation to its intermediary no later than 30 days after the end of its cost reporting period. The intermediary reviews the request and forwards it, with a recommendation for approval or denial, to CMS central office within 30 days of receipt of the request. CMS central office either approves or denies the request and notifies the intermediary within 60 days of receipt of the request.

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

Dated: February 21, 2003.

Thomas A. Scully,

Administrator, Centers for Medicare & Medicaid Services.

Approved: April 24, 2003.

Tommy G. Thompson,

Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

Centers for Disease Control and Prevention

42 CFR Part 493

[CMS–2226–CN]

RIN 0938–AK24

Medicare, Medicaid, and CLIA Programs; Laboratory Requirements Relating to Quality Systems and Certain Personnel Qualifications; Correction

AGENCY: Centers for Disease Control and Prevention (CDC) and Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Final rule; correction.

SUMMARY: This document corrects technical errors that appeared in the final rule published in the **Federal Register** on January 24, 2003, entitled “Medicare, Medicaid and CLIA Programs; Laboratory Requirements Relating to Quality Systems and Certain Personnel Qualifications.” This document is a supplement to the January 24, 2003 final rule.

EFFECTIVE DATE: September 22, 2003.

FOR FURTHER INFORMATION CONTACT:

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SUPPLEMENTARY INFORMATION:

I. Background

In FR Doc. 03–1230 of January 24, 2003 (68 FR 3640), there were several technical errors that are identified and corrected in the “Correction of Errors” section below. The corrections described below are effective September 22, 2003.

Specifically, this document corrects errors of omission, clarifies ambiguities, and corrects erroneous references and typographical errors. We would ordinarily publish these changes in a notice of proposed rulemaking in the **Federal Register** and invite public comment on the proposed rule. This notice and comment rulemaking procedure can be waived, however, if an agency finds good cause to do so (that is, notice-and-comment procedure is impracticable, unnecessary, or contrary to the public interest) and it incorporates a statement of the finding and its reasons therefore in the final rule. We find good cause to waive notice and comment procedures for the

corrections contained in this final rule for the reasons set forth in section III of this notice.

II. Correction of Errors

A. Preamble Corrections

■ In the final rule published on January 24, 2003 (68 FR 3640), make the following corrections:

■ On page 3641, in column three, in line seven from the bottom of the page, “Establish” is corrected to read “establish”.

■ On page 3642, in column two, in the first paragraph carried over from column one, in lines 13 and 14, the words “the National Registry for Clinical Chemistry” are corrected to read “the National Registry of Certified Chemists (formerly known as the National Registry in Clinical Chemistry)”.

■ On page 3643, in column two of the Table, in lines 18, 21, and 24, “systems” is corrected to read “system”.

■ On page 3648, in column three of the Table, in line 14, “§§ 493.1274(e)(1)(i) through (e)(1)(v), and (e)(2)” is corrected to read “§§ 493.1274(e)(1)(i) through (e)(1)(iii), and (e)(2)”.

■ On page 3650, in column two of the Table, in lines 2, 4, 5, 7, 9, 10, 12, 13, 14, 15, 16, 17, 19, 20, 22, 23, 24, 25, 28, 32, 38, 40, 42, 44, 45, 46, 47, 48, and 50 (twice), add the word “quality” before “assessment”.

■ On page 3650, in column three of the Table, in line 18, “§§ 493.1230; 493.1236(a)(1); 493.1239(a) and (b)” is corrected to read “§§ 493.1230; 493.1236(a); 493.1239(a) and (b)”.

■ On page 3671, in column two, in the first paragraph of the response, “the American Board of Medical Immunology” is corrected to read “the American Board of Medical Laboratory Immunology.”

■ On page 3671, in column two, in the first paragraph of the response, “the National Registry for Clinical Chemistry” is corrected to read “the National Registry of Certified Chemists (formerly known as the National Registry in Clinical Chemistry)”.

■ On page 3673, in column three, in the first paragraph of the response, in line 16, “quality systems include” is corrected to read “a quality system includes”.

■ On page 3674, in column two, in Subpart A—General Provisions (Definitions), in the first bullet point under that heading, add the words “nonwaived test” and “waived test” in alphabetical order.

■ On page 3674, in column two, in Subpart A—General Provisions (Definitions), add, above the third bullet, a new bullet with the words “We revised