

TABLE I.—IMPACT ANALYSIS OF FINAL CHANGES FOR FY 2004 OPERATING PROSPECTIVE PAYMENT SYSTEM—Continued
(Percent changes in payments per case)

	Published new wage data) ⁴	Corrected new wage data) ⁴	Published all FY 2004 changes ¹⁰	Corrected all FY 2004 changes ¹⁰
	(4)	(4)	(10)	(10)
Both	0.0	0.6	5.4	5.4
Rural Nonreclassified Hospitals	−0.3	0.0	6.2	6.2
Other Reclassified Hospitals (Section 1886(D)(8)(B))	0.0	−0.3	3.0	3.5

⁴ This column displays the impact of updating the wage index with wage data from hospitals' FY 2000 cost reports.

¹⁰ This column shows changes in payments from FY 2003 to FY 2004. It incorporates all of the changes displayed in columns 2, 3, and 8 of the final rule (the changes displayed in columns 4, 5, and 6 are included in column 8). It also reflects the impact of the FY 2004 update, changes in hospitals' reclassification status in FY 2004 compared to FY 2003, and the difference in outlier payments from FY 2003 to FY 2004. The sum of these impacts may be different from the percentage changes shown here due to rounding and interactive effect.

48. On page 45662, in Table I—Impact Analysis of Final Changes for FY 2004 Operating Prospective Payment System (Percent of Changes in Payments per Case), line 39 (All Reclassified Hospitals—Standardized Amount Only), column 10 the figure “−4.6” is corrected to read “4.6”.

49. On page 45664, bottom half of the page,

a. First column, second full paragraph, line 13, the figure “1.005522” is corrected to read “1.002588”.

b. Second column, second full paragraph, lines 8 and 9, the figure “\$ 4.4 million” is corrected to read “2.2 million”; and

c. Third column, first partial paragraph, line 1, the figure “1.005522” is corrected to read “1.002588”.

50. On page 45670, first column, first paragraph, fourth bulleted item,

a. Line 4, the figure “1.0059” is corrected to read “1.0026”; and

b. Line 5, the figure “0.9522” is corrected to read “0.9523”.

III. Waiver of Proposed Rulemaking and Delay in Effective Date

We ordinarily publish a notice of proposed rulemaking in the **Federal Register** to provide a period for public comment before the provisions of a document take effect. However, we can waive this procedure, 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 can also waive the 30-day delayed effective date of the Administrative Procedure Act (5 U.S.C. 553(d)) when there is good cause to do so and we publish in the rule an explanation of our good cause.

In this document, we are correcting an error related to our discussion of DRG 525, and the assignment of procedure code 37.62. In light of the much lower

charges associated with code 37.62, we are removing all cases with code 37.62 from DRG 525 and reassigning them to DRGs 104 and 105. This correction is necessary to ensure adequate payment for this procedure and for the other procedures that will continue to be assigned to DRG 525. Especially because these are frequently life-saving procedures, it is important that the Medicare payment amount better reflect hospitals' true costs in performing these procedures. We are concerned that, without this correction, payments for the other procedures in DRG 525, particularly procedure code 37.66, will be inadequate. As a result, Medicare beneficiaries' access to these important procedures could be limited. Accordingly, we believe there is a compelling public interest to waive notice and comment rulemaking, as well as the 30-day delay in effective date, for this correction.

We also find it unnecessary to undertake notice and comment rulemaking with respect to the other corrections contained in this document because the remainder of this document merely provides technical corrections to the final rule. We are merely correcting computational or technical errors and making a variety of typographical and grammatical corrections. We are not making changes to payment methodology or payment policy. For example, our changes to the hospital wage index and budget neutrality factor are based upon computational methodologies for which we previously provided notice and received comments. By correcting these data we are not announcing new computational methodologies, but merely ensuring that the data used in the calculations are correct. Similarly, our changes to the add-on payment for InFUSE merely incorporate the correct data into our previously published methodologies for calculating add-on payments. Thus, because the public has already had the

opportunity to comment on the payment methodology used in IPPS, additional comment would be unnecessary.

In addition, we believe it is impracticable at this point in time to solicit additional comments or to delay the effective date of these corrections beyond October 1, 2003. The Social Security Act, in section 1886(d)(3), requires a national adjusted DRG prospective payment rate to be in place at the beginning of the fiscal year. Because the fiscal year begins on October 1, 2003, it is imperative that we ensure that the correct rates are in place by October 1, 2003, and it would not have been possible to publish a notice and receive comments on it in the brief period of time between discovering our errors and the October 1, 2003 effective date for the updated IPPS rates.

Finally, we believe that engaging in notice and comment prior to making these corrections or delaying the effective date beyond October 1, 2003 would be contrary to the public interest. As a matter of good public policy, the rates used in the IPPS should not be based on miscalculations or inappropriate data. The public interest is served by ensuring that the rates used in the IPPS are correct. Thus, it would be contrary to the public interest to delay implementing such corrected rates in order either to engage in notice and comment rulemaking or to provide for a 30-day delay in effective date. Therefore, we find good cause to waive notice and comment procedures, as well as the 30-day delay in effective date.

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

Dated: September 30, 2003.

Ann C. Agnew,

Executive Secretary to the Department.

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