governments. This proposed action does not involve or impose any requirements that directly affect Indian tribes. Under EPA's tribal authority rule, tribes are not required to implement CAA programs but, instead, have the opportunity to do so. Accordingly, the requirements of section 3(b) of Executive Order 13084 do not apply to this rule.

H. Paperwork Reduction Act

This proposal does not contain any information collection requirements which require OMB approval under the Paperwork Reduction Act (44 U.S.C. 3501 *et seq.*).

I. Executive Order 12898: Environmental Justice

Under Executive Order 12898, each Federal agency must make achieving environmental justice part of its mission by identifying and addressing, as appropriate, disproportionately high and adverse human health or environmental effects of its programs, policies, and activities on minorities and low-income populations. Today's proposal to reinstate the applicability of the 1-hour standard in certain areas does not adversely affect minorities and low-income populations.

J. National Technology Transfer and Advancement Act

Section 12 of the National Technology Transfer and Advancement Act (NTTAA) of 1995 requires Federal agencies to evaluate existing technical standards when developing new regulations. To comply with NTTAA, the EPA must consider and use ''voluntary consensus standards'' (VCS) if available and applicable when developing programs and policies unless doing so would be inconsistent with applicable law or otherwise impractical.

The EPA believes that VCS are inapplicable to this proposed action. Today's proposed action does not require the public to perform activities conducive to the use of VCS.

List of Subjects in 40 CFR Part 50

Environmental protection, Air pollution control, Carbon monoxide, Lead, Nitrogen dioxide, Ozone, Particulate matter, Sulfur oxides.

Dated: October 20, 1999.

Carol M. Browner,

Administrator.

For the reasons stated in the preamble, chapter I, title 40 of the Code of Federal Regulations is proposed to be amended as follows:

PART 50—[AMENDED]

1. The authority citation for part 50 continues to read as follows:

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

2. Section 50.9 is amended by revising paragraph (b) to read as follows:

§ 50.9 National 1-hour primary and secondary ambient air quality standards for ozone.

* * * * *

(b) The 1-hour standards set forth in this section will remain applicable to all areas notwithstanding the promulgation of 8-hour ozone standards under § 50.10. In addition, after the 8-hour standard has become fully enforceable under part D of title I of the CAA and subject to no further legal challenge, the 1-hour standards set forth in this section will no longer apply to an area once EPA determines that the area has air quality meeting the 1-hour standard. Area designations and classifications with respect to the 1-hour standards are codified in 40 CFR part 81.

[FR Doc. 99–27878 Filed 10–22–99; 8:45 am]

BILLING CODE 6560–50–P

ENVIRONMENTAL PROTECTION AGENCY

40 CFR Parts 144 and 146

[FRL–6462–4]

Notice of Availability of Class V Injection Well Study

AGENCY: Environmental Protection Agency (EPA).

ACTION: Notice of availability.

SUMMARY: EPA and the Sierra Club entered into a modified consent decree on January 28, 1997. In accordance with the second action required by this decree, EPA has completed a study of all Class V wells not included in the July 29, 1998 proposed rulemaking (63 FR 40586).

ADDRESSES: The study is available on the EPA, Office of Ground Water and Drinking Water, Underground Injection Control web site: *http://www.epa.gov/OGWDW/uic/cl5study.html* or in the Water Docket, U.S. Environmental Protection Agency; 401 M Street, SW, East Tower Basement, Washington, D.C. 20460.

FOR FURTHER INFORMATION CONTACT: For general information, contact the Safe Drinking Water Hotline, toll-free 800–426–4791. The Safe Drinking Water Hotline is open Monday through Friday, excluding federal holidays, from 9:00 a.m. to 5:30 p.m. Eastern Standard Time. For technical inquiries, contact Amber Moreen, Underground Injection Control Program, Office of Ground Water and Drinking Water (mail code 4606), EPA, 401 M Street, SW, Washington, D.C., 20460. Phone: 202–260–4891. E-mail: moreen.amber@epa.gov.

SUPPLEMENTARY INFORMATION: The study of Class V underground injection wells required by a 1997 consent decree with the Sierra Club (*Sierra Club* v. *Browner,* D.D.C. No. 93–2644 NHJ) has been completed. The consent decree required EPA to complete a study of all Class V wells not included in an initial rulemaking (63 FR 40586). This initial rulemaking, also required by the consent decree, was proposed on July 29, 1998 and covers Class V wells determined by EPA to be the highest risk and for which additional study was not necessary. The Class V study provides background information for EPA to use in evaluating the risk that approximately 20 types of Class V wells pose to underground sources of drinking water. Information collected for each well type includes: inventory, injectate constituents, contamination incidents, and current State regulations.

EPA coordinated extensive peer and EPA workgroup reviews of each well-specific draft report to ensure technical accuracy and completeness of the documents. Technical experts were located through the Ground Water Protection Council, three **Federal Register** notices seeking peer reviewers (64 FR 1007–1008), the UIC technical workgroup, the Internet, and EPA. More detailed explanations of the well-types and the components of the study can be found in 64 FR 37803.

The information in the Study will be used to aid EPA in determining if additional federal regulations for these well types are warranted. According to the modified consent decree, no later than April 30, 2001, EPA must propose a decision regarding whether further rulemaking for each Class V well not included in the initial rulemaking is necessary and, if so, how each well should be regulated. A final rule or rules must be signed by the Administrator by May 31, 2002. Before these decisions are made, EPA plans to seek comment from the public. EPA plans to consider comments received at that time in deciding the most appropriate manner of ensuring that the remaining Class V wells are not endangering underground sources of drinking water.

Dated: October 12, 1999.

Cynthia C. Dougherty,

Director, Office of Ground Water and Drinking Water.

[FR Doc. 99–27545 Filed 10–22–99; 8:45 am]

BILLING CODE 6560–50–U

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

42 CFR Part 405

[HCFA–6003–P]

RIN 0938–AI49

Medicare Program; Appeals of Carrier Determinations That a Supplier Fails to Meet the Requirements for Medicare Billing Privileges

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Proposed rule.

SUMMARY: This proposed rule would extend appeal rights to all suppliers whose enrollment applications for Medicare billing privileges are disallowed by a carrier or whose Medicare billing privileges are revoked, except for those suppliers covered under other existing appeals provisions of our regulations. In addition, we propose to revise certain appeal provisions to correspond with the existing appeal provisions in those other sections of our regulations. We also would extend appeal rights to all suppliers not covered by existing regulations to ensure they have a full and fair opportunity to be heard. Although we are not required by the Administrative Procedure Act to publish this rule as a proposed rule (see 5 U.S.C. section 553(b)(3)(A), we are doing so in order to allow interested parties the opportunity for prior notice and comment.

DATES: Written comments will be considered if we receive them at the appropriate address, as provided below, no later than 5 p.m. Eastern time on December 27, 1999.

ADDRESSES: Mail written comments (1 original and 3 copies) to the following address: Health Care Financing Administration, Department of Health and Human Services, Attention: HCFA–6003–P, P.O. Box 26688, Baltimore, MD 21207–0488.

If you prefer, you may deliver your written comments (1 original and 3 copies) to one of the following addresses:

Room 443–G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201–0001, or

Room C5–16–03, Central Building, 7500 Security Boulevard, Baltimore, MD 21244–1850.

Because of staffing and resource limitations, we cannot accept comments by facsimile (FAX) transmission. In commenting, please refer to file code HCFA–6003–P. Written comments received timely will be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of a document, in Room 443–G of the Department's offices at 200 Independence Avenue, SW., Washington DC, on Monday through Friday of each week from 8:30 a.m. to 5 p.m. Eastern time (phone: (202) 690–7890).

FOR FURTHER INFORMATION CONTACT: Charles Waldhauser, (410) 786–6140.

SUPPLEMENTARY INFORMATION:

I. Background

A Medicare beneficiary generally may obtain covered Medicare services from any person, agency or institution that is qualified to participate in the Medicare program and that undertakes to furnish those services. Various provisions of the statutes and regulations establish conditions of participation or standards that a health care supplier or provider must meet in order to receive Medicare payment. These standards differ depending on the type of provider or supplier involved and whether the services are furnished under parts A, B, or C of the Medicare statute. There are also differences in qualifications between providers and suppliers of services, and differences among the various types of suppliers, in how they are enrolled in the Medicare program. For some classifications of providers and suppliers, an on-site survey is required. For other individuals or entities, a determination can be made based largely on the information provided by the applicant.

The Medicare regulations in Part 498 provide appeal rights for certain suppliers that have been found to not meet certain conditions of participation or established standards. For the purposes of part 498, these suppliers include independent laboratories; suppliers of portable x-ray services; rural health clinics; federally qualified health centers; ambulatory surgical centers; organ procurement organizations; end-stage renal disease treatment facilities; and chiropractors and physical therapists in independent practice.

In addition, our regulations at § 405.874 provide an appeals process for Durable Medical Equipment, Prosthetics and Orthotics and Supplies (DMEPOS) suppliers that wish to contest a disallowance of an application for a billing number or the revocation of an existing billing number. The § 405.874 appeals process afforded DMEPOS suppliers includes the right to a carrier hearing before a carrier official who was not involved in the original determination, and the right to seek a review before a HCFA official designated by the HCFA Administrator.

The purpose of this proposed rule would be to establish an administrative appeals process for certain other suppliers, such as physicians or physician assistants, who have had an application for billing privileges disallowed or existing billing privileges revoked, but who are not specifically included under either the Part 498 or § 405.874 appeals processes. Because the adverse determinations with respect to these other suppliers are similar to those described above for DMEPOS suppliers, we are proposing to amend the existing appeals process at § 405.874 to include appeal rights for these other suppliers.

In December, 1998, we issued HCFA Ruling 98–1, regarding the appeals process Medicare carriers must provide to physicians, non-physician practitioners, and to certain entities that receive reassigned benefits from physicians and non-physician practitioners. HCFA Rulings are decisions of the Administrator that serve as precedent final opinions and orders and statements of policy and interpretation. They provide clarification and interpretation of complex or ambiguous provisions of law or regulations relating to Medicare, Medicaid, Utilization and Quality Control Peer Review, private health insurance, and related matters. HCFA Rulings are binding on all HCFA components, Medicare contractors, the Provider Reimbursement Review Board, the Medicare Geographic Classification Review Board, the Departmental Appeals Board, and Administrative Law Judges (ALJs) who hear Medicare appeals. These Rulings promote consistency in interpretation of policy and adjudication of disputes. This proposed rule is very similar to HCFA Ruling 98–1, but expands the types of suppliers covered.

II. Provisions of the Proposed Rule

We are proposing to revise the scope of § 405.874 (''Appeals of carrier decisions that supplier standards are not met.'') to extend appeal rights to all