

delete a chemical to or from the list described in subsection (c) of section 313 of Title III on the basis of the criteria in subparagraph (A) or (B) of subsection (d)(2) and (d)(3) of section 313 of Title III. Within 180 days after receipt of a petition, the Administrator shall take one of the following actions:

(i) Initiate a rulemaking to add or delete the chemical to or from the list, in accordance with subsection (d)(2) or (d)(3) of section 313 of Title III.

(ii) Publish an explanation of why the petition is denied.

(2) *State and Tribal petitions.* A State Governor, or a Tribal chairperson or equivalent elected official, may petition the Administrator to add or delete a chemical to or from the list described in subsection (c) of section 313 of Title III on the basis of the criteria in subparagraph (A), (B), or (C) of subsection (d)(2) of section 313 of Title III. In the case of such a petition from a State Governor, or a Tribal Chairperson or equivalent elected official, to delete a chemical, the petition shall be treated in the same manner as a petition received under paragraph (b)(1) of this section. In the case of such a petition from a State Governor, or a Tribal Chairperson or equivalent elected official, to add a chemical, the chemical will be added to the list within 180 days after receipt of the petition, unless the Administrator:

(i) Initiates a rulemaking to add the chemical to the list, in accordance with section (d)(2) of section 313 of Title III, or

(ii) Publishes an explanation of why the Administrator believes the petition does not meet the requirement of subsection (d)(2) of section 313 of Title III for adding a chemical to the list.

4. In § 372.27, paragraph (d) is revised to read as follows:

**§ 372.27. Alternate threshold and certification.**

\* \* \* \* \*

(d) Each certification statement under this section for activities involving a toxic chemical that occurred during a calendar year at a facility must be submitted to EPA and to the State in which the facility is located on or before July 1 of the next year. If the covered facility is located in Indian country, the facility shall submit the certification statement as described above to EPA and to the official designated by the Tribal Chairperson or equivalent elected official of the relevant Indian Tribe, instead of to the State.

\* \* \* \* \*

5. In § 372.30(a), paragraph (a) is revised to read as follows:

**§ 372.30 Reporting requirements and schedule for reporting.**

(a) For each toxic chemical known by the owner or operator to be manufactured (including imported), processed, or otherwise used in excess of an applicable threshold quantity in § 372.25, § 372.27, or § 372.28 at its covered facility described in § 372.22 for a calendar year, the owner or operator must submit to EPA and to the State in which the facility is located a completed EPA Form R (EPA Form 9350-1), EPA Form A (EPA Form 9350-2), and, for the dioxin and dioxin-like compounds category, EPA Form R Schedule 1 (EPA Form 9350-3) in accordance with the instructions referred to in subpart E of this part. If the covered facility is located in Indian country, the facility shall submit (to the extent applicable) a completed EPA Form R, Form A, and Form R Schedule 1 as described above to EPA and to the official designated by the Tribal Chairperson or equivalent elected official of the relevant Indian Tribe, instead of to the State.

\* \* \* \* \*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**45 CFR Parts 153, 155 and 156**

[CMS-9989-N2]

**Patient Protection and Affordable Care Act; Establishment of Exchanges and Qualified Health Plans, and Standards Related to Reinsurance, Risk Corridors and Risk Adjustment; Extension of Comment Period**

**AGENCY:** Department of Health and Human Services.

**ACTION:** Proposed rule; extension of comment period.

**SUMMARY:** This document extends the comment period for two proposed rules published in the **Federal Register** on July 15, 2011. One proposed rule would implement the new Affordable Insurance Exchanges (“Exchanges”), consistent with Title I of the Patient Protection and Affordable Care Act of 2010 as amended by the Health Care and Education Reconciliation Act of 2010, referred to collectively as the Affordable Care Act. The other proposed rule would implement standards for States related to reinsurance and risk adjustment, and for health insurance issuers related to reinsurance, risk corridors, and risk adjustment consistent with Title I of the Affordable Care Act. The comment period for both

proposed rules, which would have ended on September 28, 2011, is extended to October 31, 2011.

**DATES:** The comment period for two proposed rules published in the **Federal Register** on July 15, 2011 (76 FR 41866 and 76 FR 41930, respectively), is extended from 5 p.m. Eastern Standard Time on September 28, 2011, to 5 p.m. Eastern Standard Time on October 31, 2011.

**ADDRESSES:** In commenting, please refer to file code CMS-9989-N2. Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission.

You may submit comments in one of four ways (please choose only one of the ways listed):

1. *Electronically.* You may submit electronic comments on this regulation to <http://www.regulations.gov>. Follow the instructions under the “More Search Options” tab.

2. *By regular mail.* You may mail written comments to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-9989-N2, P.O. Box 8010, Baltimore, MD 21244-8010.

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

3. *By express or overnight mail.* You may send written comments to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-9989-N2, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850.

4. *By hand or courier.* If you prefer, you may deliver (by hand or courier) your written comments before the close of the comment period to either of the following addresses:

a. For delivery in Washington, DC—Centers for Medicare & Medicaid Services, Department of Health and Human Services, Room 445-G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201.

(Because access to the interior of the Hubert H. Humphrey 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.)

b. For delivery in Baltimore, MD—Centers for Medicare & Medicaid

Services, Department of Health and Human Services, 7500 Security Boulevard, Baltimore, MD 21244-1850.

If you intend to deliver your comments to the Baltimore address, please call telephone number (410) 786-9994 in advance to schedule your arrival with one of our staff members.

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

**FOR FURTHER INFORMATION CONTACT:**

Sharon Arnold, (301) 492-4415 for general information and matters related to reinsurance, risk adjustment, and risk corridors.  
Laurie McWright, (301) 492-4372 for general information and matters related to Exchanges and qualified health plans.  
Alissa DeBoy, (301) 492-4428 for general information and matters related to Exchanges and qualified health plans.

**SUPPLEMENTARY INFORMATION:** On July 15, 2011, we published two proposed rules in the **Federal Register** (76 FR 41866 through 41927 and 76 FR 41930 through 41956, respectively).

The first rule would implement the new Affordable Insurance Exchanges (“Exchanges”), consistent with Title I of the Patient Protection and Affordable Care Act of 2010 (Pub. L. 111-148) as amended by the Health Care and Education Reconciliation Act of 2010 (Pub. L. 111-152), referred to collectively as the Affordable Care Act. The Exchanges would provide competitive marketplaces for individuals and small employers to directly compare available private health insurance options on the basis of price, quality, and other factors. The Exchanges, which would become operational by January 1, 2014, would help enhance competition in the health insurance market, improve choice of affordable health insurance, and give small businesses the same purchasing clout as large businesses. This proposed rule, “Patient Protection and Affordable Care Act; Establishment of Exchanges and Qualified Health Plans,” is significant in that it proposes—(1) Federal requirements that States must meet if they elect to establish and operate an Exchange; (2) minimum requirements that health insurance issuers must meet to participate in an Exchange and offer qualified health plans (QHPs); and (3) basic standards that employers must meet to participate in the Small Business Health Options Program (SHOP).

The second proposed rule would implement standards for States related

to reinsurance and risk adjustment, and for health insurance issuers related to reinsurance, risk adjustment, and risk corridors consistent with Title I of the Affordable Care Act. Collectively, these programs would mitigate the impact of potential adverse selection and stabilize premiums in the individual and small group markets as insurance reforms and the Exchanges are implemented. These programs are significant in that—(1) The transitional reinsurance program would serve to reduce uncertainty of insurance risk in the individual market by making payments to health plan issuers for high-cost cases; (2) the temporary risk corridor program would serve to protect against uncertainty by limiting the extent of health plan issuer losses and gains; and (3) the permanent risk adjustment program, on an on-going basis, is intended to provide adequate payments to health insurance issuers that attract high-risk populations, such as individuals with chronic conditions.

We believe that rules proposed by HHS and the Treasury on August 17, 2011 (76 FR 51148, 76 FR 51202, and 76 FR 50931, respectively), about eligibility determinations by an Exchange, generate additional insight on the issues raised by the July 15, 2011 proposed rules. Based on this reason, we are extending the comment period for the July 15, 2011 proposed rules to October 31, 2011.

Dated: September 26, 2011.

**Donald M. Berwick,**

*Administrator, Centers for Medicare & Medicaid Services.*

Dated: September 26, 2011.

**Kathleen Sebelius,**

*Secretary.*

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## FEDERAL COMMUNICATIONS COMMISSION

### 47 CFR Part 52

[WC Docket No. 07-244, CC Docket No. 95-116; DA 11-1558]

#### Local Number Portability Porting Interval and Validation Requirements; Telephone Number Portability

**AGENCY:** Federal Communications Commission.

**ACTION:** Proposed rule; comments requested.

**SUMMARY:** In this document, the Commission seeks comment on a submission by the North American Numbering Council (NANC) recommending a set of standard

thresholds and intervals for non-simple ports and “projects”—port requests that involve a large quantity of telephone numbers. Specifically, the Commission seeks comment on whether the thresholds and processing timelines for non-simple ports and projects are appropriate and whether the Commission should adopt the recommendation as a rule.

**DATES:** Comments must be filed on or before October 31, 2011 and reply comments on or before November 29, 2011.

**ADDRESSES:** Interested parties may submit comments, identified by WC Docket No. 07-244 and CC Docket No. 95-116, by any of the following methods:

- *Federal eRulemaking Portal:* <http://www.regulations.gov>. Follow the instructions for submitting comments.

- *Federal Communications Commission's Web Site:* <http://www.fcc.gov/cgb/ecfs/>. Follow the instructions for submitting comments.

- *E-mail:* [ecfs@fcc.gov](mailto:ecfs@fcc.gov), and include the following words in the body of the message, “get form.” A sample form and directions will be sent in response. Include the docket number(s) in the subject line of the message.

- *Mail:* Secretary, Federal Communications Commission, 445 12th Street, SW., Washington, DC 20554.

- *Hand Delivery/Courier:* FCC Headquarters building located at 445 12th Street, SW., Room TW-A325, Washington, DC 20554.

- *People with Disabilities:* Contact the FCC to request reasonable accommodations (accessible format documents, sign language interpreters, CART, etc.) by e-mail: [FCC504@fcc.gov](mailto:FCC504@fcc.gov) or phone: 202-418-0530 or TTY: 202-418-0432.

All submissions received must include the agency name and WC Docket No. 07-244 and CC Docket No. 95-116. All comments received will be posted without change to <http://www.fcc.gov/cgb/ecfs>. For detailed instructions for submitting comments and additional information on the rulemaking process, see the **SUPPLEMENTARY INFORMATION** section of this document.

**FOR FURTHER INFORMATION CONTACT:** Marilyn Jones, [marilyn.jones@fcc.gov](mailto:marilyn.jones@fcc.gov) or Melissa Kirkel, [melissa.kirkel@fcc.gov](mailto:melissa.kirkel@fcc.gov), of the Competition Policy Division, Wireline Competition Bureau, at (202) 418-1580.

**SUPPLEMENTARY INFORMATION:** This is a summary of the Commission's Public Notice, DA 11-1558, released September 15, 2011. The full text of this document is available for public