

§ 721.11489 Titanium (4+) hydroxyl-alkylcarboxylate salt complex (generic).

(a) *Chemical substance and significant new uses subject to reporting.*

(1) The chemical substance identified generically as titanium (4+) hydroxyl-alkylcarboxylate salt complex (PMN P-19-159) is subject to reporting under this section for the significant new uses described in paragraph (a)(2) of this section. The requirements of this section do not apply to quantities of the substance after they have been completely reacted (cured).

(2) The significant new uses are:

(i) *Industrial, commercial, and consumer activities.* It is a significant new use to manufacture, process, or use the PMN substance in any manner or method that generates inhalation exposure.

(ii) *Release to water.* Requirements as specified in § 721.90(a)(4), (b)(4) and (c)(4) where N = 1.

(b) *Specific requirements.* The provision of subpart A of this part apply to this section except as modified by this paragraph (b).

(1) *Recordkeeping.* Recordkeeping requirements as specified in § 721.125(a) through (c), (i), and (k) are applicable to manufacturers and processors of this substance.

(2) *Limitations or revocation of certain notification requirements.* The provisions of § 721.185 apply to this section.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Medicare & Medicaid Services****42 CFR Part 414**

[CMS-5533-N]

Medicare Program; Alternative Payment Model (APM) Incentive Payment Advisory for Clinicians—Request for Current Billing Information for Qualifying APM Participants

AGENCY: Centers for Medicare & Medicaid Services (CMS), Health and Human Services (HHS).

ACTION: Payment advisory.

SUMMARY: This advisory is to alert certain clinicians who are Qualifying APM participants (QPs) and eligible to receive an Alternative Payment Model (APM) Incentive Payment that CMS does not have the current billing information needed to disburse the

payment. This advisory provides information to these clinicians on how to update their billing information to receive this payment.

DATES: This advisory is effective on September 14, 2020.

FOR FURTHER INFORMATION CONTACT: Tanya Dorm, (410) 786-2206.

SUPPLEMENTARY INFORMATION:**I. Background**

Under the Medicare Quality Payment Program, an eligible clinician who participates in an Advanced Alternative Payment Model (APM) and meets the applicable payment amount or patient count thresholds for a performance year is a Qualifying APM Participant (QP) for that year. An eligible clinician who is a QP for a year based on their performance in a QP Performance Period earns a 5 percent lump sum APM Incentive Payment that is paid in a payment year that occurs 2 years after the QP Performance Period. The amount of the APM Incentive Payment is equal to 5 percent of the estimated aggregate payments for covered professional services furnished by the QP during the calendar year immediately preceding the payment year.

II. Provisions of the Advisory

The Centers for Medicare & Medicaid Services (CMS) has identified those eligible clinicians who earned an APM Incentive Payment in CY 2020 based on their CY 2018 QP status.

When CMS disbursed the CY 2020 APM Incentive Payments, CMS was unable to verify current Medicare billing information for some QPs and was therefore unable to issue payment. In order to successfully disburse the APM Incentive Payment, CMS is requesting assistance in identifying current Medicare billing information for these QPs.

CMS has compiled a list of QPs we have identified as having unverified billing information. These QPs, and any others who anticipated receiving an APM Incentive Payment but have not, should follow the instructions to provide CMS with updated billing information at the following web address: <https://qpp-cm-prod-content.s3.amazonaws.com/uploads/1112/2020%20APM%20Incentive%20Payment%20Notice.pdf>.

If you have any questions concerning submission of information through the website, please contact the QPP Help Desk at 1-866-288-8292.

All submissions must be received no later than November 13, 2020.

The Administrator of the Centers for Medicare & Medicaid Services (CMS),

Seema Verma, having reviewed and approved this document, authorizes Vanessa Garcia, who is the **Federal Register Liaison**, to electronically sign this document for purposes of publication in the **Federal Register**.

Vanessa Garcia,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

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FEDERAL COMMUNICATIONS COMMISSION**47 CFR Parts 1, 2, 25, 27 and 101**

[GN Docket No. 18-122; FCC 20-22; FRS 17048]

Expanding Flexible Use of the 3.7 to 4.2 GHz Band

AGENCY: Federal Communications Commission.

ACTION: Final rule; corrections and announcement of compliance date.

SUMMARY: In this document, the Commission corrects a typographical error in the *3.7 GHz Report and Order*, FCC 20-22, published on April 23, 2020, and announces that the Office of Management and Budget has approved the information collection requirements associated with the rules adopted in the Federal Communications Commission's *3.7 GHz Report and Order*, requiring the Relocation Payment Clearinghouse and the Relocation Coordinator to each make real-time, public disclosures of the content and timing of and the parties to communications, if any, from or to applicants in the Commission's auction for overlay licenses in the 3.7 GHz Service, and that compliance with the new rules is now required. This document is consistent with the *3.7 GHz Report and Order*, which states that the Commission will publish a document in the **Federal Register** announcing a compliance date for the new rule sections.

DATES: *Effective date:* The corrections are effective September 17, 2020.

Compliance date: Compliance with 47 CFR 27.1413(c)(6) and 27.1414(b)(4)(i), published at 85 FR 22804 on April 23, 2020, is required on September 17, 2020.

FOR FURTHER INFORMATION CONTACT: Anna Gentry, Mobility Division, Wireless Telecommunications Bureau, at (202) 418-7769 or Anna.Gentry@fcc.gov.

SUPPLEMENTARY INFORMATION: This document corrects a typographical error