changes to the Mental Disorders listings. We received comments from 2,243 public commenters. We are drafting a final rule for the listings in this body system that responds to the significant suggestions and concerns raised by the commenters. Many of the claims for disability that we receive involve mental disorders, and a large number of people would be affected by any changes we make to the Mental Disorders listings. We are carefully considering the changes necessary to update these listings before we publish a final rule. Therefore, we are extending the current expiration date for the Mental Disorders body system listings.

Regulatory Procedures

Justification for Final Rule

We follow the Administrative Procedure Act (APA) rulemaking procedures specified in 5 U.S.C. 553 in promulgating regulations. Section 702(a)(5) of the Social Security Act, 42 U.S.C. 902(a)(5). Generally, the APA requires that an agency provide prior notice and opportunity for public comment before issuing a final regulation. The APA provides exceptions to the notice-and-comment requirements when an agency finds there is good cause for dispensing with such procedures because they are impracticable, unnecessary, or contrary to the public interest.

We determined that good cause exists for dispensing with the notice and public comment procedures. 5 U.S.C. 553(b)(B). This final rule only extends the date on which the mental disorders body system listings will no longer be effective. It makes no substantive changes to our rules. Our current regulations provide that we may extend, revise, or promulgate the body system listings again. Therefore, we have determined that opportunity for prior comment is unnecessary, and we are issuing this regulation as a final rule.

In addition, for the reasons cited above, we find good cause for dispensing with the 30-day delay in the effective date of this final rule. 5 U.S.C. 553(d)(3). We are not making any substantive changes to the listings in this body system. Without an extension of the expiration date for these listings, we will not have the criteria we need to assess medical impairments in the mental disorder body system at step three of the sequential evaluation processes. We therefore find it is in the public interest to make this final rule effective on the publication date.

Executive Order 12866, as Supplemented by Executive Order 13563

We consulted with the Office of Management and Budget (OMB) and determined that this final rule does not meet the requirements for a significant regulatory action under Executive Order 12866, as supplemented by Executive Order 13563. Therefore, OMB did not review it. We also determined that this final rule meets the plain language requirement of Executive Order 12866.

Regulatory Flexibility Act

We certify that this final rule does not have a significant economic impact on a substantial number of small entities because it affects only individuals. Therefore, a regulatory flexibility analysis is not required under the Regulatory Flexibility Act, as amended.

Paperwork Reduction Act

This rule does not create any new or affect any existing collections, and therefore does not require OMB approval under the Paperwork Reduction Act.

List of Subjects in 20 CFR Part 404

Administrative practice and procedure, Blind, Disability benefits, Old-Age, Survivors and Disability Insurance, Reporting and recordkeeping requirements, Social Security.

Dated: November 22, 2013.

Carolyn W. Colvin,
Acting Commissioner of Social Security.

For the reasons set out in the preamble, we are amending appendix 1 to subpart P of part 404 of chapter III of title 20 of the Code of Federal Regulations as set forth below.

PART 404—FEDERAL OLD-AGE, SURVIVORS AND DISABILITY INSURANCE (1950–)

Subpart P—[Amended]

1. The authority citation for subpart P of part 404 continues to read as follows:
Authority: Secs. 202, 205(a)–(b) and (d)–(h), 216(i), 221(a), (i), and (j), 222(c), 223, 225, and 702(a)(5) of the Social Security Act (42 U.S.C. 402, 405(a)–(b) and (d)–(h), 416(i), 421(a), (i), and (j), 422(c), 423, 425, and 902(a)(5)); sec. 211(b), Pub. L. 104–193, 110 Stat. 2105, 2189; sec. 202, Pub. L. 108–203, 118 Stat. 509 (42 U.S.C. 402 note).

2. Amend appendix 1 to subpart P of part 404 by revising item 13 of the introductory text before Part A to read as follows:

Appendix 1 to Subpart P of Part 404—Listing of Impairments

13. Mental Disorders (12.00 and 112.00):

[FR Doc. 2013–28836 Filed 12–2–13; 8:45 am]

BILLING CODE 4191–02–P

DEPARTMENT OF DEFENSE

Office of the Secretary

32 CFR Part 158


RIN 0790–AI48

Operational Contract Support

AGENCY: Department of Defense (DoD).

ACTION: Final rule.

SUMMARY: This rule establishes policy, assigns responsibilities, and provides procedures for operational contract support (OCS), including OCS program management, contract support integration, and integration of defense contractor personnel into contingency operations outside the United States. This rule was published as an interim final rule on December 29, 2011, to procedurally close gaps and ensure the correct planning, oversight and management of DoD contractors supporting contingency operations, by updating the existing outdated policy. The then existing policies were causing significant confusion, as they did not reflect current practices and legislative mandates. The inconsistencies between local Geographic Command guidance and the DoD-wide policies and the Defense Federal Acquisition Regulations Supplement were confusing for those in the field—in particular, with regard to policy on accountability and visibility requirements.

DATES: This rule is effective January 2, 2014.

FOR FURTHER INFORMATION CONTACT: Shanna Poole, Director, Operational Contract Support Policy, Office of the Deputy Assistant Secretary of Defense (Program Support), (703) 692–3032.

SUPPLEMENTARY INFORMATION: Executive Summary

I. Purpose and Authority of the Regulatory Action

a. Purpose: This rule incorporates the latest changes and lessons learned into policy and procedures for OCS,
including OCS program management, contract support integration, and the integration of DoD contractor personnel into contingency operations outside the United States. It was required to procedurally close gaps and ensure the correct planning, oversight and management of DoD contractors supporting contingency operations, by updating outdated policy.


II. Summary of the Major Provisions of the Regulatory Action

The revised policies include:

(1) Incorporation of lessons learned from current operations;
(2) requirements for the development of contractor oversight plans;
(3) requirements for adequate military personnel necessary to execute contract oversight; and,
(4) standards of medical care for deployed contractors.

III. Cost and Benefits

This rule establishes policies and procedures for the oversight and management of contractors supporting contingency operations outside the United States; therefore, there is no cost to the public. Updated and refined policy regarding contractors supporting contingency operations will result in improved management, oversight and efficiency.

Public Comments

On December 29, 2011 (76 FR 81807), the Department published an interim final rule and public comments were solicited. At the end of the comment period, we received comments from two respondents. Neither comment questioned the content of the rule. One commented in part that "I am happy that your rules would treat contractors with the same respect as other military personnel who are serving in our country’s military" and the other stated "I agree that this is a necessary rule especially facing our country’s current war status." Based on these comments, no changes were necessary to the rule itself.

Regulatory Procedures

Executive Order 12866, "Regulatory Planning and Review" and Executive Order 13563, "Improving Regulation and Regulatory Review"

It has been certified that 32 CFR part 158 does not:

(1) Have an annual effect on the economy of $100 million or more or adversely affect in a material way the economy; a section of the economy; productivity; competition; jobs; the environment; public health or safety; or State, local, or tribal governments or communities;
(2) Create a serious inconsistency or otherwise interfere with an action taken or planned by another Agency;
(3) Materially alter the budgetary impact of entitlements, grants, user fees, or loan programs, or the rights and obligations of recipients thereof; or
(4) Raise novel legal or policy issues arising out of legal mandates, the President’s priorities, or the principles set forth in these Executive Orders.

Section 202, Pub. L. 104–4, “Unfunded Mandates Reform Act”

It has been certified that 32 CFR part 158 does not contain a Federal mandate that may result in expenditure by State, local and tribal governments, in aggregate, or by the private sector, of $100 million or more in any one year.

Public Law 96–354, "Regulatory Flexibility Act" (5 U.S.C. 601)

It has been certified that 32 CFR part 158 is not subject to the Regulatory Flexibility Act (5 U.S.C. 601) because it would not, if promulgated, have a significant economic impact on a substantial number of small entities.

Public Law 96–511, “Paperwork Reduction Act” (44 U.S.C. Chapter 35)

It has been certified that 32 CFR part 158 does impose reporting or recordkeeping requirements under the Paperwork Reduction Act of 1995. These reporting requirements have been approved by OMB under OMB Control Number 0704–0460, Synchronized Predeployment and Operational Tracker (SPOT) System.

Executive Order 13132, “Federalism”

It has been certified that 32 CFR part 158 does not have federalism implications, as set forth in Executive Order 13132. This rule does not have substantial direct effects on:

(1) The States;
(2) The relationship between the National Government and the States; or
(3) The distribution of power and responsibilities among the various levels of Government.

List of Subjects in 32 CFR Part 158

Armed forces, Government contracts, Health and safety, Military personnel, National defense, Passports and visas, Recordkeeping, Security measures.

For reasons discussed in the preamble, the Department of Defense adopts the interim final rule which was published December 29, 2011 (76 FR 81807), as final without change.

Dated: November 18, 2013.

Aaron Siegel.

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 2013–28867 Filed 12–2–13; 8:45 am]

BILLING CODE 5001–06–P

DEPARTMENT OF VETERANS AFFAIRS

38 CFR Part 3

RIN 2900–AO84

Specially Adapted Housing Eligibility for Amyotrophic Lateral Sclerosis Beneficiaries

AGENCY: Department of Veterans Affairs.

ACTION: Interim final rule.

SUMMARY: The Department of Veterans Affairs (VA) is amending its adjudication regulation regarding specially adapted housing (SAH). The amendment authorizes automatic issuance of a certificate of eligibility for SAH to all veterans and active servicemembers with service-connected amyotrophic lateral sclerosis (ALS) rated totally disabling under the VA Schedule for Rating Disabilities. The intent and effect of this amendment are to establish eligibility for SAH for all persons who have service-connected ALS. VA previously amended its Schedule for Rating Disabilities to assign a 100-percent disability evaluation for any veteran who has service-connected ALS based on the recognition that ALS is a rapidly progressive, totally debilitating, and irreversible motor neuron disease that results in muscle weakness leading to a wide range of serious disabilities, including problems with mobility. Because individuals with ALS quickly reach a level of total disability, the change was designed to eliminate the need to repeatedly reevaluate veterans suffering from ALS over a short period of time as symptoms worsen.

Based on that same rationale, this amendment addresses the corresponding eligibility for SAH benefits for veterans and servicemembers with service-connected ALS. The overall SAH grant approval and oversight process is complex and lengthy, with many parts beyond VA’s control. This rulemaking streamlines one aspect of the process within VA’s control, by establishing SAH eligibility for all veterans or servicemembers with service-connected, totally disabling ALS. By shortening the first stage of the SAH process, this regulatory change will assist veterans and servicemembers suffering from ALS in adapting their...