

f. Bottom of the page, the table titled “TABLE 27: ESTIMATED IMPACTS FOR THE FY 2031 SNF QRP” is corrected to read as follows:

TABLE 27: ESTIMATED IMPACTS FOR THE FY 2031 SNF QRP

	Per SNF		All SNFs	
	Estimated Change in Annual Burden Hours	Estimated Change in Annual Cost	Estimated Change in Annual Burden Hours	Estimated Change in Annual Cost
Estimated Impacts for the FY2031 SNF QRP				
Estimated Change in Burden Associated with Collection and Submission of Two MDS Items at Admission and Discharge and One MDS Item at Discharge Beginning with the FY 2031 SNF QRP	+2.56	+\$191.87	+38,117.75	+\$2,857,687.72
Estimated Change in Burden Associated with Proposed Collection and Submission of MDS Data on All Residents Admitted for Covered Skilled Care Beginning with the FY 2031 SNF QRP	+64.70	+\$5,607.96	+963,601.65	+\$83,524,991.02
Total Estimated Change in Burden Beginning with the FY 2031 SNF QRP	+67.26	+\$5,799.83	+1,001,719.40	+\$86,382,678.74

17. Page 48652, bottom of the page, CLASSIFICATION OF ESTIMATED FY 2028 SNF QRP” is corrected to read as follows:
 a. The table titled “TABLE 32: ACCOUNTING STATEMENT: CLASSIFICATION OF ESTIMATED SAVINGS FOR THE CHANGES TO THE FY 2028 SNF QRP” is corrected to read as follows:

TABLE 32: ACCOUNTING STATEMENT: CLASSIFICATION OF ESTIMATED SAVINGS FOR THE CHANGES TO THE FY 2028 SNF QRP

Category	Costs
Estimated Savings to SNFs for Proposed Changes to the FY 2028 QRP	-\$8.2 million

b. The table titled “TABLE 33: ACCOUNTING STATEMENT: CLASSIFICATION OF ESTIMATED EXPENDITURES FOR THE CHANGES TO THE FY 2031 SNF QRP” is corrected to read as follows:

TABLE 33: ACCOUNTING STATEMENT: CLASSIFICATION OF ESTIMATED EXPENDITURES FOR THE CHANGES TO THE FY 2031 SNF QRP

Category	Costs
Estimated Costs to SNFs for Proposed Changes to the FY 2031 QRP	\$86.0 million

Liesl I. Fowler,
Executive Secretary to the Department,
Department of Health and Human Services.
 [FR Doc. 2026–19959 Filed 9–29–26; 8:45 am]
BILLING CODE 4169–69–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

42 CFR Part 418

[CMS–1851–CN]

RIN 0938–AV78

Medicare Program; FY 2027 Hospice Wage Index and Payment Rate Update and Hospice Quality Reporting Program Requirements; Correction

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

ACTION: Final rule; correction.

SUMMARY: This document corrects technical errors in the final rule that appeared in the August 3, 2026 **Federal**

Register titled “Medicare Program; FY 2027 Hospice Wage Index and Payment Rate Update and Hospice Quality Reporting Program Requirements”.

DATES: This correction is effective October 1, 2026.

FOR FURTHER INFORMATION CONTACT: For questions regarding the hospice wage index, contact Chantelle Caldwell, (410) 786–8743. For general questions about hospice payment policy, send your inquiry via email to: hospicepolicy@cms.hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background

In FR Doc. 2026–15686 of August 3, 2026 (91 FR 49118), there were a number of technical errors that are identified and corrected in this correcting document. The provisions in this correction document are effective as

if they had been included in the final rule that appeared in the August 3, 2026 **Federal Register**. Accordingly, the corrections are effective October 1, 2026.

II. Summary of Errors

A. Summary of Errors in the Preamble

As discussed in the fiscal year (FY) 2027 hospice final rule (91 FR 49122 through 49123), in developing the hospice wage index, we used the FY 2027 Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals (IPPS) pre-floor, pre-reclassified wage index for hospital cost reporting periods beginning on or after October 1, 2022 and before October 1, 2023 (FY 2023 cost report data).

We made an inadvertent technical error when calculating the FY 2027 pre-floor, pre-reclassified IPPS wage index. Under our methodologies as finalized in the FY 2027 IPPS/Long Term Care Hospitals (LTCH) PPS final rule, we exclude rural emergency hospitals (REHs), including hospitals that subsequently became REHs after the period from which the data were taken, from certain data and calculations used in the IPPS rate setting, including the development of the Medicare Severity Diagnosis-Related Group (MS-DRG) relative weights for FY 2027 (91 FR 49672) and the calculation of the standardized amount (91 FR 50370). In addition, we stated that any hospital that is designated as an REH by 7 days prior to the publication of the preliminary wage index public use file is excluded from the calculation of the wage index (91 FR 49791). We inadvertently treated a current IPPS hospital (CMS Certification Number 250078) as a hospital that had converted to REH status, thereby erroneously excluding its data from the MS-DRG relative weight calculation and the wage index. Therefore, we restored the applicable data for this hospital and recalculated the FY 2027 IPPS pre-floor, pre-reclassified hospital wage index.

As the result of this technical error that affected the FY 2027 IPPS pre-floor, pre-reclassified wage index, we have recalculated the FY 2027 hospice wage index values for all Core-Based Statistical Areas (CBSAs) and rural areas, the wage index standardization factors and subsequently the national payment rates for each level of hospice care as well as our impact analysis. Therefore, we made conforming changes to the following:

On page 49122, the wage index values listed for CBSA 25980, Hinesville, Georgia and rural North Dakota.

On page 49127, Tables 1 and 2 titled “Final FY 2027 Hospice RHC Payment Rates” and “Final FY 2027 Hospice, CHC, IRC, and GIP Payment Rates”.

On page 49128, Tables 3 and 4 titled “Final FY 2027 Hospice RHC Payment Rates for Hospices That *DO NOT* Submit the Required Quality Data” and “Final FY 2027 Hospice, CHC, IRC, and GIP Payment Rates for Hospices That *DO NOT* Submit the Required Quality Data”.

On page 49170, Table 22 titled “Impact to Hospices for FY 2027”.

On page 49175, the impact percentage for hospices with greater than 20,000 RHC days.

B. Summary of Errors and Corrections Posted on the CMS website

As discussed in section II.A. of this document, a hospital was inadvertently omitted from the FY 2027 IPPS pre-floor, pre-reclassified hospital wage index which necessitated the recalculation of the FY 2027 hospice wage index. That error was subsequently included in the FY 2027 Hospice Wage Index file exclusively on the CMS website. Given the error, we have recalculated the FY 2027 final hospice wage index and are republishing the FY 2027 Hospice Wage Index file accordingly on the CMS website at <https://www.cms.gov/medicare/payment/fee-for-service-providers/hospice/hospice-wage-index> and <https://www.cms.gov/medicare/payment/fee-for-service-providers/hospice/hospice-regulations-and-notices/cms-1851-f>.

III. Waiver of Proposed Rulemaking and Delay in Effective Date

Section 1871(b)(1) of the Social Security Act (the Act) requires the Secretary to provide for notice of a proposed rule in the **Federal Register** and provide a period of not less than 60 days for public comment. In addition, section 1871(e)(1)(B)(i) of the Act mandates a 30-day delay in effective date after issuance or publication of a rule. Section 1871(b)(2)(C) of the Act provides an exception from the notice and 60-day comment period and delay in effective date requirements of the Act, under the good cause standard set forth in 5 U.S.C. 553(b)(B). Section 1871(e)(1)(B)(ii) of the Act provides an exception from the delay in effective date requirements of the Act as well. Section 553(b)(B) authorizes an agency to dispense with normal notice and comment rulemaking procedures for good cause if the agency makes a finding that the notice and comment process is impracticable, unnecessary, or contrary to the public interest, and

includes a statement of the finding and the reasons for it in the rule. In addition, section 1871(e)(1)(B)(ii) of the Act allows the agency to avoid the 30-day delay in effective date where the waiver is necessary to comply with statutory requirements or such delay is contrary to the public interest and the agency includes in the rule a statement of the finding and the reasons for it.

In our view, this correcting document does not constitute a rulemaking that would be subject to these requirements. This document merely corrects technical errors in the FY 2027 hospice wage index that required updates to the preamble, payment rates, and tables included or referenced in the FY 2027 Hospice final rule. The corrections contained in this document are consistent with, and do not make substantive changes to, the policies and payment methodologies that were proposed, subject to notice and comment procedures, and adopted in the FY 2027 Hospice final rule. As a result, the corrections made through this document are intended to resolve inadvertent errors so that the FY 2027 Hospice final rule accurately reflects the policies adopted therein.

In addition, even if this were a rule to which the notice and comment procedures and delayed effective date requirements applied, we find that there is good cause to waive such requirements. Undertaking further notice and comment procedures to incorporate the corrections in this document into the final rule or delaying the effective date would be contrary to the public interest because it is in the public's interest for providers to receive appropriate payments in as timely a manner as possible, and to ensure that the FY 2027 Hospice final rule accurately reflects our policies. Furthermore, such procedures would be unnecessary, as we are not altering our payment methodologies or policies, but rather, we are simply implementing correctly the methodologies and policies that we previously proposed, requested comment on, and subsequently finalized. This final rule correction is intended solely to ensure that the FY 2027 Hospice final rule accurately reflects these payment methodologies and policies. Therefore, we believe we have good cause to waive the notice and comment and effective date requirements.

IV. Correction of Errors

In FR Doc. 2026–15686 of August 3, 2026 (91 FR 49118), make the following corrections:

1. On page 49122,

a. Second column, second full paragraph, last line, the figure “0.8915” is corrected to read “0.8916”.

b. Third column, first partial paragraph, last line, the figure “0.8297” is corrected to read “0.8298”.

2. On page 49127, middle of the page,

a. Table 1 titled “Final FY 2027 Hospice RHC Payment Rates” is corrected to read as follows:

TABLE 1—FINAL FY 2027 HOSPICE RHC PAYMENT RATES

Code	Description	FY 2026 payment rates	SIA budget neutrality factor	Wage index standardization factor	FY 2027 hospice payment update	FY 2027 payment rates
651	Routine Home Care (days 1–60)	\$230.83	0.9999	1.0009	1.023	\$236.33
651	Routine Home Care (days 61+)	181.94	0.9999	1.0012	1.023	186.33

b. Table 2 titled “Final FY 2027 Hospice, CHC, IRC, and GIP Payment Rates” is corrected to read as follows:

TABLE 2—FINAL FY 2027 HOSPICE, CHC, IRC, AND GIP PAYMENT RATES

Code	Description	FY 2026 payment rates	Wage index standardization factor	FY 2027 hospice payment update	FY 2027 payment rates
652	Continuous Home Care Full Rate = 24 hours of care.	\$1,674.29	1.0078	1.023	\$1,726.16 (\$71.92 per hour).
655	Inpatient Respite Care	532.48	1.0022	1.023	\$545.93.
656	General Inpatient Care	1,199.86	1.0033	1.023	\$1,231.51.

3. On page 49128, middle of the page, Hospices That *DO NOT* Submit the
a. Table 3 titled “Final FY 2027 Hospice RHC Payment Rates for

Required Quality Data” is corrected to read as follows:

TABLE 3—FINAL FY 2027 HOSPICE RHC PAYMENT RATES FOR HOSPICES THAT DO NOT SUBMIT THE REQUIRED QUALITY DATA

Code	Description	FY 2026 Payment Rates	SIA Budget Neutrality Factor	Wage Index Standardization Factor	FY 2027 hospice payment update of 2.3% – 4 percentage points = – 1.7%	
651	Routine Home Care (days 1–60)	\$230.83	0.9999	1.0009	0.983	\$227.09
651	Routine Home Care (days 61+)	181.94	0.9999	1.0012	0.983	179.04

b. Table 4 titled “Final FY 2027 Hospice, CHC, IRC, and GIP Payment Rates for Hospices That *DO NOT*

Submit the Required Quality Data” is corrected to read as follows:

TABLE 4—FINAL FY 2027 HOSPICE, CHC, IRC, AND GIP PAYMENT RATES FOR HOSPICES THAT DO NOT SUBMIT THE REQUIRED QUALITY DATA

Code	Description	FY 2026 Payment Rates	Wage Index Standardization factor	FY 2027 hospice payment update of 2.3% – 4 percentage points = – 1.7%	FY 2027 payment rates
652	Continuous Home Care Full Rate = 24 hours of care.	\$1,674.29	1.0078	0.983	\$1,658.66 (\$69.11 per hour).
655	Inpatient Respite Care	532.48	1.0022	0.983	524.58
656	General Inpatient Care	1,199.86	1.0033	0.983	1,183.35

4. On page 49170, Table 22 titled “Impact to Hospices for FY 2027” is corrected to read as follows:

TABLE 22—IMPACT TO HOSPICES FOR FY 2027

Hospice subgroup	Hospices	FY 2027 updated wage data (%)	FY 2027 hospice payment update (%)	Overall Total Impact for FY 2027 (%)
All Hospices	6,673	0.0	2.3	2.3
Hospice Type and Control:				
Freestanding/Non-Profit	782	0.0	2.3	2.3
Freestanding/For-Profit	4,856	0.0	2.3	2.3
Freestanding/Government	34	0.6	2.3	2.9
Freestanding/Other	0	0.0	2.3	2.3
Facility/HHA Based/Non-Profit	258	0.0	2.3	2.3
Facility/HHA Based/For-Profit	3	1.2	2.3	3.5
Facility/HHA Based/Government	94	1.0	2.3	3.3
Facility/HHA Based/Other	0	0.0	2.3	2.3
Subtotal: Freestanding Facility Type	5,672	0.0	2.3	2.3
Subtotal: Facility/HHA Based Facility Type	355	0.2	2.3	2.5
Subtotal: Non-Profit	1,050	0.0	2.3	2.3
Subtotal: For Profit	5,172	0.0	2.3	2.3
Subtotal: Government	128	0.9	2.3	3.2
Subtotal: Other	6	0.7	2.3	3.0
Hospice Type and Control: Rural:				
Freestanding/Non-Profit	203	0.9	2.3	3.2
Freestanding/For-Profit	408	0.4	2.3	2.7
Freestanding/Government	22	0.6	2.3	2.9
Freestanding/Other	0	0.0	2.3	2.3
Facility/HHA Based/Non-Profit	108	0.7	2.3	3.0
Facility/HHA Based/For-Profit	0	0.0	2.3	2.3
Facility/HHA Based/Government	68	1.1	2.3	3.4
Facility/HHA Based/Other	0	0.0	2.3	2.3
Hospice Type and Control: Urban:				
Freestanding/Non-Profit	579	−0.1	2.3	2.2
Freestanding/For-Profit	4,448	−0.1	2.3	2.2
Freestanding/Government	12	0.7	2.3	3.0
Freestanding/Other	0	0.0	2.3	2.3
Facility/HHA Based/Non-Profit	150	−0.1	2.3	2.2
Facility/HHA Based/For-Profit	3	1.2	2.3	3.5
Facility/HHA Based/Government	26	1.0	2.3	3.3
Facility/HHA Based/Other	0	0.0	2.3	2.3
Hospice Location: Urban or Rural:				
Rural	857	0.6	2.3	2.9
Urban	5,816	−0.1	2.3	2.2
Hospice Location: Region of the Country (Census Division):				
New England	162	0.8	2.3	3.1
Middle Atlantic	282	0.6	2.3	2.9
South Atlantic	653	−0.1	2.3	2.2
East North Central	661	−0.2	2.3	2.1
East South Central	252	−0.3	2.3	2.0
West North Central	446	0.4	2.3	2.7
West South Central	1,302	−0.4	2.3	1.9
Mountain	697	−0.2	2.3	2.1
Pacific	2,137	0.2	2.3	2.5
Outlying	81	1.1	2.3	3.4
Hospice Size:				
0–3,499 RHC Days (Small)	1,611	0.2	2.3	2.5
3,500–19,999 RHC Days (Medium)	2,984	0.2	2.3	2.5
20,000+ RHC Days (Large)	2,078	−0.1	2.3	2.2

5. On page 49175, first column, first paragraph, line 17, the figure “2.3 percent” is corrected to read “2.2 percent”.

Liesl I. Fowler,

*Executive Secretary to the Department,
Department of Health and Human Services.*

[FR Doc. 2026–20067 Filed 9–29–26; 8:45 am]

BILLING CODE 4169–69–P

FEDERAL COMMUNICATIONS COMMISSION

47 CFR Part 73

[MB Docket No. 26–29; RM–12016; DA 26–1023; FR ID 370045]

Television Broadcasting Services Norwell, Massachusetts

AGENCY: Federal Communications Commission.

ACTION: Final rule.

SUMMARY: This document amends the Table of TV Allotments (table) of the Federal Communications Commission’s (Commission) rules by substituting channel 10 for channel 36 at Norwell, Massachusetts in response to a Petition for Rulemaking filed by RNN Boston License Co., LLC (RNN), the licensee of WWDP(TV) (WWDP or Station), Norwell, Massachusetts. In support of its channel substitution request, RNN filed comments reaffirming its interest in the proposed channel substitution and stating that it will promptly file an application seeking continued operation on channel 10 at Norwell. The staff engineering analysis finds that the proposal is in compliance with the Commission’s principal community coverage and technical requirements, including the interference protection requirements. The substitution of channel 10 for channel 36 in the Table will allow the Station to continue to operate on its licensed channel and provide uninterrupted service to viewers.

DATES: Effective September 30, 2026.

FOR FURTHER INFORMATION CONTACT: Emily Harrison, Media Bureau, at Emily.Harrison@fcc.gov, (202) 418–1665; or Mark Colombo, Media Bureau, at Mark.Colombo@fcc.gov, (202) 418–7611.

SUPPLEMENTARY INFORMATION: This is a synopsis of the Commission’s *Report and Order*, MB Docket No. 26–29; RM–12016; DA 26–1023, adopted September 22, 2026, and released September 22, 2026. The proposed rule was published at 91 FR 5881 on February 10, 2026. The full text of this document is available online at <https://www.fcc.gov/edocs>.

This document does not contain information collection requirements subject to the Paperwork Reduction Act of 1995, Public Law 104–13. In addition, therefore, it does not contain any proposed information collection burden “for small business concerns with fewer than 25 employees,” pursuant to the Small Business Paperwork Relief Act of 2002, Public Law 107–198, *see* 44 U.S.C. 3506(c)(4). Provisions of the Regulatory Flexibility Act of 1980, 5 U.S.C. 601–612, do not apply to this proceeding.

The Commission will send a copy of this *Report and Order* in a report to be sent to Congress and the Government Accountability Office pursuant to the Congressional Review Act, *see* 5 U.S.C. 801(a)(1)(A).

List of Subjects in 47 CFR Part 73

Television.

Federal Communications Commission.

Thomas Horan,

Chief of Staff, Media Bureau.

Final Rule

For the reasons discussed in the preamble, the Federal Communications Commission amends 47 CFR part 73 as follows:

PART 73—RADIO BROADCAST SERVICES

- 1. The authority citation for part 73 continues to read as follows:

Authority: 47 U.S.C. 154, 155, 301, 303, 307, 309, 310, 334, 336, 339.

- 2. In § 73.622, in the table in paragraph (j), under Massachusetts, revise the entry for “Norwell” to read as follows:

§ 73.622 Digital television table of allotments.

*	*	*	*	*
(j) * * *				
Community				Channel No.
*	*	*	*	*
Massachusetts				
*	*	*	*	*
Norwell				10
*	*	*	*	*
*	*	*	*	*

[FR Doc. 2026–20039 Filed 9–29–26; 8:45 am]

BILLING CODE 6712–01–P

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

50 CFR Part 679

[Docket No. 260305–0066; RTID 0648–XF997]

Fisheries of the Exclusive Economic Zone Off Alaska; Groundfish Reserves in the Bering Sea and Aleutian Islands Management Area

AGENCY: National Marine Fisheries Service (NMFS), National Oceanic and Atmospheric Administration (NOAA), Commerce.

ACTION: Temporary rule; apportionment of reserves; request for comments.

SUMMARY: NMFS apportions amounts of the non-specified reserve to the initial total allowable catch (ITAC) of Bering Sea (BS) Pacific ocean perch, Bering Sea and Aleutian Islands (BSAI) northern rockfish, and BSAI “other flatfish.” This action is necessary to allow the fisheries to continue operating. It is intended to promote the goals and objectives of the fishery management plan for the BSAI management area.

DATES: Effective October 30, 2026, through 2400 hours, Alaska local time, December 31, 2026. Comments must be received at the following address no later than 4:30 p.m., Alaska local time, October 15, 2026.

ADDRESSES: You may submit comments on this document, identified by docket number NOAA–NMFS–2025–1098, by any of the following methods:

Electronic Submission: Submit all electronic public comments via the Federal e- Rulemaking Portal. Visit <https://www.regulations.gov> and type NOAA–NMFS–2025–1098 in the Search box. Click on the “Comment” icon, complete the required fields, and enter or attach your comments.

Mail: Submit written comments to Gretchen Harrington, Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region NMFS. Mail comments to P.O. Box 21668, Juneau, AK 99802–1668.

Instructions: Comments sent by any other method, to any other address or individual, or received after the end of the comment period may not be considered by NMFS. All comments received are a part of the public record and will generally be posted for public viewing on <https://www.regulations.gov> without change. All personal identifying information (e.g., name, address, etc.), confidential business information, or otherwise sensitive information submitted voluntarily by the sender will