

effect on State, local, and tribal governments, or on the private sector.

**Catalog of Federal Domestic Assistance Numbers and Titles**

The Catalog of Federal Domestic Assistance numbers and titles for the programs affected by this document are 64.009, Veterans Medical Care Benefits; 64.010, Veterans Nursing Home Care; and 64.011, Veterans Dental Care.

**List of Subjects in 38 CFR Part 1**

Administrative practice and procedure, Archives and records, Cemeteries, Claims, Courts, Crime, Flags, Freedom of information, Government contracts, Government employees, Government property, Infants and children, Inventions and patents, Parking, Penalties, Privacy, Reporting and recordkeeping requirements, Seals and insignia, Security measures, Wages.

Approved: September 30, 2008.

**Gordon H. Mansfield,**  
*Deputy Secretary of Veterans Affairs.*

■ For the reasons set out in the preamble, the interim final rule amending 38 CFR part 1, which was published at 72 FR 48239 on August 23, 2007, is adopted as a final rule with the following changes:

**PART 1—GENERAL PROVISIONS**

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

**Authority:** 38 U.S.C. 501(a), and as noted in specific sections.

■ 2. In § 1.460, revise the definitions for “Near death” and “Procurement organization” in alphabetical order to read as follows:

**§ 1.460 Definitions.**

\* \* \* \* \*

*Near death.* The term “near death” means that in the clinical judgment of the patient’s health care provider based on defined clinical triggers, the patient’s death is imminent.

\* \* \* \* \*

*Procurement organization.* The term “procurement organization” means an organ procurement organization, eye bank, and/or tissue bank as defined in this section.

\* \* \* \* \*

■ 3. Revise § 1.485a(d), to read as follows:

**§ 1.485a Eye, organ and tissue donation.**

\* \* \* \* \*

(d) The VHA health care facility has confirmed with HHS that it has certified or recertified the organ procurement organization as provided in the

applicable HHS regulations. VA medical centers must verify annually in January of each calendar year with the Food and Drug Administration (FDA) that an eye bank or tissue bank has complied with the FDA registration requirements of 21 CFR part 1271 and that the registration status is active before permitting an eye bank or tissue bank to receive protected health information.

(Authority: 38 U.S.C. 5701(k), 7332(b)(2)(E))

■ 4. Revise § 1.514b(d), to read as follows:

**§ 1.514b Disclosures to procurement organizations.**

\* \* \* \* \*

(d) The VHA health care facility has confirmed with HHS that it has certified or recertified the organ procurement organization as provided in the applicable HHS regulations. VA medical centers must verify annually in January of each calendar year with FDA that an eye bank or tissue bank has complied with the FDA registration requirements of 21 CFR Part 1271 and that the registration status is active before permitting an eye bank or tissue bank to receive protected health information.

(Authority: 38 U.S.C. 5701(k), 7332(b)(2)(E))

[FR Doc. E8–26172 Filed 10–31–08; 8:45 am]

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**DEPARTMENT OF VETERANS AFFAIRS**

**38 CFR Part 17**

**RIN 2900–AM59**

**Elimination of Co-Payment for Weight Management Counseling**

**AGENCY:** Department of Veterans Affairs.

**ACTION:** Direct final rule; confirmation of effective date.

**SUMMARY:** The Department of Veterans Affairs (VA) published a direct final rule amending our medical regulations to designate weight management counseling (individual and group sessions) as a service that is not subject to VA’s co-payment requirements. VA received no significant adverse comments concerning this rule or its companion substantially identical proposed rule published on the same date. This document confirms that the direct final rule became effective on June 16, 2008. In a companion document in this issue of the **Federal Register**, we are withdrawing as unnecessary that proposed rule.

**DATES:** *Effective date:* June 16, 2008.

**FOR FURTHER INFORMATION CONTACT:** Tony Guagliardo, Director, Business

Policy, Chief Business Office (16), Veterans Health Administration, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 461–1591 (this is not a toll-free number).

**SUPPLEMENTARY INFORMATION:** In a direct final rule published in the **Federal Register** on April 16, 2008 (73 FR 20530), VA amended the medical regulations set forth at 38 CFR part 17 to eliminate co-payments for weight management counseling (individual and group sessions). VA published a companion substantially identical proposed rule (RIN 2900–AM81; 73 FR 20579) on the same date to serve as a proposal for the provisions in the direct final rule in case significant adverse comments were received. The direct final rule and proposed rule each provided a 30-day comment period that ended May 16, 2008. No adverse comments were received. Two public comments were received, both of which supported the proposed rule.

Under the direct final rule procedures that we described in those documents, because no significant adverse comment was received within the comment period, the regulation became effective on the date specified in the direct final rule, June 16, 2008. In a companion document in this issue of the **Federal Register**, VA is withdrawing the proposed rule (RIN 2900–AM81) published at 73 FR 20579 as unnecessary.

Approved: October 27, 2008.

**Gordon H. Mansfield,**  
*Deputy Secretary of Veterans Affairs.*

[FR Doc. E8–26177 Filed 10–31–08; 8:45 am]

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**DEPARTMENT OF VETERANS AFFAIRS**

**38 CFR Part 21**

**RIN 2900–AM45**

**Increase in Rates Payable Under the Montgomery GI Bill—Active Duty and Other Miscellaneous Issues**

**AGENCY:** Department of Veterans Affairs.

**ACTION:** Final rule.

**SUMMARY:** This document amends regulations governing education programs the Department of Veterans Affairs (VA) administers. In accordance with statutory requirements and previously established formulas, it amends the regulations to show increases in the monthly rates of basic educational assistance payable under the Montgomery GI Bill—Active Duty program, an increase in the percentage