

Deletion

The following service is proposed for deletion from the Procurement List:

Service

Service Type/Location: CSS/Custodial/
Warehousing Service, Commissary
ANGB, 99 Pesch Circle, Building 420,
Bangor, ME.

NPA: Pathways, Inc., Auburn, ME

Contracting Activity: Defense Commissary
Agency (DECA) Fort Lee, VA

Barry S. Lineback,

Director, Business Operations.

[FR Doc. 2013-06031 Filed 3-14-13; 8:45 am]

BILLING CODE 6353-01-P

**COMMITTEE FOR PURCHASE FROM
PEOPLE WHO ARE BLIND OR
SEVERELY DISABLED**
Procurement List Additions

AGENCY: Committee for Purchase From
People Who Are Blind or Severely
Disabled.

ACTION: Additions to the Procurement
List.

SUMMARY: This action adds a product
and service to the Procurement List that
will be furnished by nonprofit agencies
employing persons who are blind or
have other severe disabilities.

DATES: *Effective Date:* 4/15/2013.

ADDRESSES: Committee for Purchase
From People Who Are Blind or Severely
Disabled, 1401 S. Clark Street, Suite
10800, Arlington, Virginia 22202.

FOR FURTHER INFORMATION CONTACT:
Barry S. Lineback, Telephone: (703)
603-7740, Fax: (703) 603-0655, or email
CMTEFedReg@AbilityOne.gov.

SUPPLEMENTARY INFORMATION:**Additions**

On 1/18/2013 (78 FR 4133-4134), the
Committee for Purchase From People
Who Are Blind or Severely Disabled
published notice of proposed additions
to the Procurement List.

After consideration of the material
presented to it concerning capability of
qualified nonprofit agencies to provide
the product and service and impact of
the additions on the current or most
recent contractors, the Committee has
determined that the product and service
listed below are suitable for
procurement by the Federal Government
under 41 U.S.C. 8501-8506 and 41 CFR
51-2.4.

Regulatory Flexibility Act Certification

I certify that the following action will
not have a significant impact on a
substantial number of small entities.

The major factors considered for this
certification were:

1. The action will not result in any
additional reporting, recordkeeping or
other compliance requirements for small
entities other than the small
organizations that will furnish the
product and service to the Government.

2. The action will result in
authorizing small entities to furnish the
product and service to the Government.

3. There are no known regulatory
alternatives which would accomplish
the objectives of the Javits-Wagner-
O'Day Act (41 U.S.C. 8501-8506) in
connection with the product and service
proposed for addition to the
Procurement List.

End of Certification

Accordingly, the following product
and service are added to the
Procurement List:

Product

NSN: MR 1145—Server, Gravy Boat.

NPA: Winston-Salem Industries for the
Blind, Inc., Winston-Salem, NC.

Contracting Activity: Defense Commissary
Agency, Fort Lee, VA.

Coverage: C-List for the requirements of
military commissaries and exchanges as
aggregated by the Defense Commissary
Agency.

Service

Service Type/Location: Mess Attendant
Service McConnell Air Force Base, KS.

NPA: Training, Rehabilitation, &
Development Institute, Inc., San Antonio,
TX.

Contracting Activity: Dept Of The Air
Force, FA4621 22 CONS LGC, McConnell
AFB, KS.

Barry S. Lineback,

Director, Business Operations.

[FR Doc. 2013-06032 Filed 3-14-13; 8:45 am]

BILLING CODE 6353-01-P

**CONSUMER PRODUCT SAFETY
COMMISSION**
Sunshine Act Meeting Notice

TIME AND DATE: Wednesday, March 20,
2013, 10:00 a.m.–11:00 a.m.

PLACE: Room 420, Bethesda Towers,
4330 East West Highway, Bethesda,
Maryland.

STATUS: Commission Meeting—Open to
the Public.

MATTERS TO BE CONSIDERED:

Briefing Matter: Soft Infant Carriers.
A live Webcast of the Meeting can be
viewed at www.cpsc.gov/Webcast.

For a recorded message containing the
latest agenda information, call (301)
504-7948.

CONTACT PERSON FOR MORE INFORMATION:
Todd A. Stevenson, Office of the

Secretary, U.S. Consumer Product
Safety Commission, 4330 East West
Highway, Bethesda, MD 20814, (301)
504-7923.

Dated: March 13, 2013.

Todd A. Stevenson,

Secretary.

[FR Doc. 2013-06195 Filed 3-13-13; 4:15 pm]

BILLING CODE 6355-01-P

DEPARTMENT OF DEFENSE
Office of the Secretary
**Notice for Termination of a Disease
Management Demonstration Project
for TRICARE Standard Beneficiaries**

AGENCY: Office of the Secretary of
Defense, (Health Affairs)/TRICARE
Management Activity, DoD.

ACTION: Notice for termination of a
Disease Management Demonstration
Project for TRICARE Standard
Beneficiaries.

SUMMARY: This notice is to advise
interested parties of the termination of
a Military Health System (MHS)
demonstration project entitled "Disease
Management Demonstration Project for
TRICARE Standard Beneficiaries." The
demonstration provided disease
management (DM) services to TRICARE
Standard beneficiaries who are not
eligible to receive some DM-like
services under the basic benefit
regulations. TRICARE began the
demonstration project in March 2007 for
Standard beneficiaries and this
demonstration project has enabled the
MHS to evaluate the programs and
identify ways to improve the provision
of effective services by detecting
strengths and weaknesses of the
programs, as well as evidence of best
practices. As the TRICARE Management
Activity (TMA) chose a phased
approach, the demonstration was
extended twice, on March 16, 2009 (74
FR 11089-11090), and again on March
4, 2011 (76 FR 12081-12082), to allow
time for all program evaluations. TMA
intends to continue to provide DM
services to eligible TRICARE
beneficiaries through strategies based on
evidence-based best practices,
beneficiary's needs, plan category, and
location of health care provision.

DATES: *Effective date:* March 31, 2013.

ADDRESSES: TRICARE Management
Activity (TMA), 7700 Arlington
Boulevard, Suite 5101, Falls Church, VA
22042-5101.

FOR FURTHER INFORMATION CONTACT:
Robin Marzullo, TRICARE Management

Activity, Office of the Chief Medical Officer (703) 681-6173.

SUPPLEMENTARY INFORMATION: As a result of Section 734 Of the 2007 National Defense Authorization Act, the MHS implemented uniform policies and practices for DM throughout the TRICARE network. To include the Standard beneficiaries, who could not receive many of the services that are the cornerstone of DM per the Basic Benefit Regulations, a two year demonstration notice was published June 13 2007 (72 FR 32628-32629). The demonstration project provided for measuring the effectiveness of the DM programs in improving the health of TRICARE beneficiaries with chronic conditions. In addition, it allowed the MHS to identify best practices for improving the care management services for individuals with chronic conditions. The demonstration was extended twice. On March 16, 2009 a notice (74 FR 11089-11090) was published that extended the demonstration through March 31, 2011 and on March 4, 2011 (76 FR 12081-12082) further extended the demonstration through March 31, 2013. For several years, TRICARE has been evaluating the best way to provide assistance to people with certain chronic medical conditions. Based on TRICARE's evaluation of best health care practices, we found that chronic medical conditions are best managed as a routine part of good medical practice, and when structured to fit the individual beneficiary's circumstances and their specific health plan. Multiple analyses of the DM program were conducted, and in that same time period other studies for similar programs were piloted nationally that provided additional insight. The results of these analyses and literature reviews provided identification of evidence-based best practices that support the future direction of the MHS disease and chronic condition management programs. These best practices include team based—provider directed care, care coordination, self-management education and transitional care services that target at risk populations, have access to timely data, close interactions with care coordinators and primary care physicians, face-to-face contact with individuals involved in their own care, and supported by practices predominantly staffed by registered nurses.

Given the focus with the primary care provider in moving forward with disease and chronic care management, and the lack of a defined provider for the Standard beneficiaries, TMA has determined that the best course is for

the Standard beneficiaries to receive disease and chronic care management direction from the provider of their choosing. TMA envisions the following scenarios related to the distinct structures of the health care benefit within TRICARE (Direct Care through the Military Treatment Facilities, Private Sector Care through contracted and non-contracted network providers, the US Family Health Plans etc.), chronic care management based on the above mentioned best-practices will be available to beneficiaries and adapted based on these factors. The DM services will also take into consideration the different benefit plans available (Prime, which operates like an HMO and requires enrollment with a primary care provider, vs. Standard which functions as a fee-for-service plan), and will modify the chronic care services provided to best match that plan. For example, Prime beneficiaries enrolled at an MTF would receive their services through a Patient-Centered Medical Home (where available). A Prime beneficiary enrolled to the network would receive DM services provided through the Managed Care Support Contractor's program. A Standard beneficiary not enrolled to a primary care provider, would receive disease and chronic care management from their chosen provider inside or outside the network, and would have access to disease specific educational information through the regional contractor Web sites or TRICARE online. Since the standard beneficiaries are not required to enroll with a primary care provider, and there is no visibility to the services they receive outside the network, it is not practicable to determine if they are receiving the recommended best-practices, and in turn to measure outcomes and determine effectiveness of care. As a result, it has been determined that Standard beneficiaries are best served being care-managed by the provider of their choosing; the provider being familiar with the Standard beneficiaries gaps in care and on-going needs.

TMA has developed a strategic plan for the on-going provision of disease and chronic care management services, based on the evidence-based best practices noted above, and have determined that the need for this demonstration has ceased. It is important to note that the end of this demonstration does not change the basic benefit for the Standard beneficiaries; they will continue to have access to all the services identified in 32 CFR 199.4.

Dated: March 12, 2013.

Aaron Siegel,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 2013-06022 Filed 3-14-13; 8:45 am]

BILLING CODE 5001-06-P

DEPARTMENT OF DEFENSE

Department of the Army

[Docket ID: USA-2013-0002]

Privacy Act of 1974; System of Records

AGENCY: Department of the Army, DoD.

ACTION: Notice to reinstate a System of Records.

SUMMARY: The Department of the Army proposes to reinstate a systems of records in its inventory of record systems to the Privacy Act of 1974 (5 U.S.C. 552a), as amended.

After review, it has been determined that the records covered under these previously deleted notices (see 77 FR 13571-13573, March 7, 2012) are still being maintained and are active; therefore this notice is being reinstated.

DATES: This proposed action will be effective on April 15, 2013 unless comments are received which result in a contrary determination. Comments will be accepted on or before April 15, 2013.

ADDRESSES: You may submit comments, identified by docket number and title, by any of the following methods:

* *Federal Rulemaking Portal:* <http://www.regulations.gov>.

Follow the instructions for submitting comments.

* *Mail:* Federal Docket Management System Office, 4800 Mark Center Drive, East Tower, 2nd Floor, Suite 02G09, Alexandria, VA 22350-3100.

Instructions: All submissions received must include the agency name and docket number or Regulatory Information Number (RIN) for this **Federal Register** document. The general policy for comments and other submissions from members of the public is of make these submissions available for public viewing on the Internet at <http://www.regulations.gov> as they are received without change, including any personal identifiers or contact information.

FOR FURTHER INFORMATION CONTACT: Mr. Leroy Jones, Jr., Department of the Army, Privacy Office, U.S. Army Records Management and Declassification Agency, 7701 Telegraph Road, Casey Building, Suite 144, Alexandria, VA 22315-3827 or by phone at 703-428-6185.