

collected to help determine the extent to which RTT reduces reliance on TRS or alternatively the extent to which the introduction of RTT increases TRS use among some consumers because it has enhanced the ability of TRS to provide functionally equivalent telephone service.

Steps Taken To Minimize Significant Economic Impact on Small Entities, and Significant Alternatives Considered

21. The RFA requires an agency to describe any significant, specifically small business, alternatives that it has considered in reaching its proposed approach, which may include the following four alternatives (among others): “(1) the establishment of differing compliance or reporting requirements or timetables that take into account the resources available to small entities; (2) the clarification, consolidation, or simplification of compliance or reporting requirements under the rule for small entities; (3) the use of performance, rather than design, standards; and (4) an exemption from coverage of the rule, or any part thereof, for small entities.”

22. In document FCC 16–169, the Commission seeks comment on the type of data and metrics that can be used to monitor the availability, adoption, and acceptance of RTT services and devices. This information is intended to help the Commission determine when TTY users have transitioned to RTT to a point that would warrant elimination of the requirement for RTT to be backward compatible with TTY. While the collection of data may initially burden small businesses, the eventual sunset of the obligation to ensure that RTT is backward compatible with TTY will in the long run reduce the burden for small entities and emergency call centers to maintain TTY technology and backward compatibility capability.

23. The Commission also seeks comments on the costs, benefits, feasibility, and appropriate timeline for requiring IP-based TRS providers to incorporate RTT capability into the provision of their services. The information requested will inform the Commission of concerns with the transition and appropriate timelines for all entities, which will allow the Commission to consider rules and implementation deadlines that minimize burdens and relieve possible adverse economic impact on small entities. The Commission’s gathering of information to determine the effect of RTT on TRS services and the TRS Fund will allow the Commission to consider changes to the rules that may minimize

burdens and relieve possible adverse economic impact on small entities.

24. In document FCC 16–169, the Commission also seeks comment on identifying certain RTT features or functional capabilities, such as compatibility with refreshable braille displays and block mode transmission, that are necessary to meet the communication needs of individuals who are deaf-blind, people with cognitive disabilities, or other specific segments of the disability community. In seeking comments on feasibility, the Commission seeks to integrate flexibility into the requirements to take into consideration the limitations of small businesses. Because the Commission will require implementation of these features only if achievable, the Commission anticipates that there will be little to no impact on small entities that would claim the requirement is not achievable.

Federal Rules That May Duplicate, Overlap, or Conflict With the Commission’s Proposals

25. None.

Ordering Clauses

Pursuant to sections 4(i), 225, 255, 301, 303(r), 316, 403, 715, and 716 of the Communications Act of 1934, as amended, and section 106 of the CVAA, 47 U.S.C. 154(i), 225, 255, 301, 303(r), 316, 403, 615c, 616, 617, document FCC 16–169 is adopted.

The Commission’s Consumer Information Bureau, Reference Information Center, shall send a copy of document FCC 16–169, including the Initial Regulatory Flexibility Analysis, to the Chief Counsel for Advocacy of the Small Business Administration.

Federal Communications Commission.

Katura Howard,

Federal Register Liaison Officer, Office of the Secretary.

[FR Doc. 2017–01382 Filed 1–19–17; 8:45 am]

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DEPARTMENT OF DEFENSE

GENERAL SERVICES ADMINISTRATION

NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

48 CFR Part 1

[FAR Case 2016–005; Docket No. 2016–0005; Sequence No. 1]

RIN 9000–AN29

Federal Acquisition Regulation; Effective Communication Between Government and Industry; Extension of Time for Comments

AGENCY: Department of Defense (DoD), General Services Administration (GSA), and National Aeronautics and Space Administration (NASA).

ACTION: Proposed rule; extension of comment period.

SUMMARY: DoD, GSA, and NASA issued a proposed rule (FAR Case 2016–005) on November 29, 2016, amending the Federal Acquisition Regulation (FAR) to implement a section of the National Defense Authorization Act for Fiscal Year 2016. This rule clarifies that agency acquisition personnel are permitted and encouraged to engage in responsible and constructive exchanges with industry, so long as those exchanges are consistent with existing law and regulation and do not promote an unfair competitive advantage to particular firms. The deadline for submitting comments is being extended from January 30, 2017 to March 2, 2017 to provide additional time for interested parties to provide comments on the FAR case.

DATES: For the proposed rule published on November 29, 2016 (81 FR 85914), submit comments by March 2, 2017.

ADDRESSES: Submit comments in response to FAR Case 2016–005 by any of the following methods:

- *Regulations.gov:* <http://www.regulations.gov>. Submit comments via the Federal eRulemaking portal by searching for “FAR Case 2016–005”. Select the link “Comment Now” that corresponds with “FAR Case 2016–005.” Follow the instructions provided at the “Comment Now” screen. Please include your name, company name (if any), and “FAR Case 2016–005” on your attached document.

- *Mail:* General Services Administration, Regulatory Secretariat Division (MVCB), ATTN: Ms. Flowers, 1800 F Street NW., 2nd Floor, Washington, DC 20405.

Instructions: Please submit comments only and cite FAR Case 2016–005, in all

correspondence related to this case. All comments received will be posted without change to <http://www.regulations.gov>, including any personal and/or business confidential information provided.

FOR FURTHER INFORMATION CONTACT: Mr. Michael O. Jackson, Procurement Analyst, at 202–208–4949, for clarification of content. For information pertaining to status or publication schedules, contact the Regulatory Secretariat Division at 202–501–4755. Please cite FAR Case 2016–005.

SUPPLEMENTARY INFORMATION:

I. Background

DoD, GSA, and NASA published a proposed rule in the **Federal Register** at 81 FR 85914, on November 29, 2016. The comment period is extended to provide additional time for interested parties to submit comments on the FAR case until March 2, 2017.

List of Subjects in 48 CFR Part 1

Government procurement.

Dated: January 17, 2017.

William F. Clark,

Director, Office of Governmentwide Acquisition Policy, Office of Acquisition Policy, Office of Governmentwide Policy.

[FR Doc. 2017–01405 Filed 1–19–17; 8:45 am]

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DEPARTMENT OF TRANSPORTATION

Office of the Secretary

49 CFR Part 40

[Docket DOT–OST–2016–0189]

RIN 2105–AE58

Procedures for Transportation Workplace Drug and Alcohol Testing Programs: Addition of Certain Schedule II Drugs to the Department of Transportation's Drug-Testing Panel and Certain Minor Amendments

AGENCY: Office of the Secretary of Transportation (OST), U.S. Department of Transportation (DOT).

ACTION: Notice of proposed rulemaking.

SUMMARY: The Department of Transportation is proposing to amend its drug-testing program regulation to add four opioids (hydrocodone, hydromorphone, oxycodone, and oxycodone) to its drug-testing panel; add methylenedioxyamphetamine (MDA) as an initial test analyte; and remove methylenedioxyethylamphetamine, (MDEA) as a confirmatory test analyte.

The proposed revision of the drug-testing panel is intended to harmonize with the revised Mandatory Guidelines established by the U.S. Department of Health and Human Services for Federal drug-testing programs for urine testing. This proposal also adds clarification to certain drug-testing program provisions where necessary, removes outdated information in the regulations that is no longer needed, and proposes to remove the requirement for employers and Consortium/Third Party Administrators to submit blind specimens.

DATES: Comments to the notice of proposed rulemaking should be submitted by March 24, 2017. Late-filed comments will be considered to the extent practicable.

ADDRESSES: To ensure that you do not duplicate your docket submissions, please submit them by only one of the following means:

- *Federal eRulemaking Portal:* Go to <http://www.regulations.gov> and follow the online instructions for submitting comments.
- *Mail:* Docket Management Facility, U.S. Department of Transportation, 1200 New Jersey Ave. SE., West Building Ground Floor Room W12–140, Washington, DC 20590–0001.
- *Hand delivery:* West Building Ground Floor, Room W–12–140, 1200 New Jersey Ave. SE., between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. The telephone number is 202–366–9329.

Instructions: To ensure proper docketing of your comment, please include the agency name and docket number DOT–OST–2016–0189 or the Regulatory Identification Number (RIN), 2105–AE58, for the rulemaking at the beginning of your comments. All comments received will be posted without change to <http://www.regulations.gov>, including any personal information provided.

FOR FURTHER INFORMATION CONTACT: Patrice M. Kelly, Acting Director, Office of Drug and Alcohol Policy and Compliance, 1200 New Jersey Avenue SE., Washington, DC 20590; telephone number 202–366–3784; ODAPCWebMail@dot.gov.

SUPPLEMENTARY INFORMATION:

I. Purpose

The Department of Transportation (DOT or the Department) is issuing this notice of proposed rulemaking (NPRM) to revise Part 40 of Title 49 of the Code of Federal Regulations to harmonize with the revised Department of Health and Human Services (HHS) Mandatory Guidelines for Federal Workplace Drug Testing Programs using Urine (HHS

Mandatory Guidelines) published on January 23, 2017, effective October 1, 2017. DOT currently requires urine testing for safety-sensitive transportation industry employees subject to drug testing under Part 40.

There are two changes to the HHS Mandatory Guidelines to which this notice proposes to harmonize Part 40. First, the revised HHS Mandatory Guidelines, in part, allow Federal agencies with drug-testing responsibilities to test for four additional Schedule II (of the Controlled Substances Act) prescription medications: Hydrocodone, hydromorphone, oxycodone, and oxycodone. Second, the HHS Mandatory Guidelines remove methylenedioxyethylamphetamine, (MDEA) as a confirmatory test analyte from the existing drug-testing panel and add methylenedioxyamphetamine (MDA) as an initial test analyte.

In addition to harmonizing with pertinent sections of the HHS Mandatory Guidelines for urine testing, we also propose in this NPRM to modify (for clarification) certain existing Part 40 provisions that cover the handling of urine specimens; to remove provisions that no longer are necessary (such as obsolete compliance dates); and to add clarifying language to other provisions (such as updated definitions and web links where necessary.) The Department also proposes to remove existing Part 40 requirements related to blind specimen testing.

II. Authority for This Rulemaking

This rulemaking is promulgated pursuant to the Omnibus Transportation Employee Testing Act (OTETA) of 1991 (Pub. L. 102–143, tit. V, 105 Stat. 952). OTETA sets forth DOT reliance on the HHS Mandatory Guidelines for scientific testing issues. Section 503 of the Supplemental Appropriations Act, 1987 (Pub. L. 100–71, 101 Stat 391, 468), 5 U.S.C. 7301, and Executive Order 12564 establish HHS as the agency that directs scientific and technical guidelines for Federal workplace drug-testing programs and standards for certification of laboratories engaged in such drug testing. While DOT has discretion concerning many aspects of the regulations governing testing in the transportation industries' regulated programs, we must follow the HHS Mandatory Guidelines for the categories of drugs for which we will require testing.