proposals for physician-focused payment models (PFPMs) submitted by individuals and stakeholder entities. All meetings are open to the public.

DATES: The 2019 PTAC meetings will occur on the following dates:

- Monday–Tuesday, March 11–12, 2019, from 9:00 a.m. to 5:00 p.m. ET
- Monday–Tuesday, June 17–18, 2019, from 9:00 a.m. to 5:00 p.m. ET
- Monday–Tuesday, September 16–17, 2019, from 9:00 a.m. to 5:00 p.m. ET
- Monday–Tuesday, December 9–10, 2019, from 9:00 a.m. to 5:00 p.m. ET

Please note that times are subject to change. If the times change, registrants will be notified directly via email.

ADDRESSES: All PTAC meetings will be held in the Great Hall of the Hubert H. Humphrey Building, 200 Independence Avenue SW, Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: Sarah Selenich, Designated Federal Officer, (202) 690–6870.

SUPPLEMENTARY INFORMATION:

Agenda and Comments. PTAC will hear presentations on proposed PFPMs that have been submitted by individuals and stakeholder entities. Following each presentation, PTAC will deliberate on the proposed PFPM. If PTAC completes its deliberation, PTAC will vote on the extent to which the proposed PFPM meets criteria established by the Secretary of Health and Human Services and on an overall recommendation to the Secretary. Time will be allocated for public comments. The agenda and other documents will be posted on the PTAC section of the ASPE website, *https://aspe.hhs.gov/ptac-physician-focused-payment-model-technical-advisory-committee,* prior to the meeting. The agenda is subject to change. If the agenda does change, registrants will be notified directly via email, the website will be updated, and notification will be sent out through the PTAC email listserv (go to *https://list.nih.gov/cgi-bin/wa.exe?A0=PTAC* to subscribe).

Meeting Attendance. These meetings are open to the public. The public may attend in person, via conference call, or view the meeting via livestream at *www.hhs.gov/live.* The conference call dial-in information will be sent to registrants prior to the meeting. Space may be limited, and registration is preferred. Registration may be completed online at*http://www.cvent.com/d/gbq2tg.* Name, organization name, and email address are submitted when registering. Registrants will receive a confirmation email shortly after completing the registration process.

Special Accommodations. If sign language interpretation or other reasonable accommodation for a disability is needed, please contact Angela Tejeda, no later than two weeks prior to the scheduled meeting. Please submit your requests by email to *Angela.Tejeda@hhs.gov* or by calling 202–205–8327.

Authority. 42 U.S.C. 1395(ee); Section 101(e)(1) of the Medicare Access and CHIP Reauthorization Act of 2015; Section 51003(b) of the Bipartisan Budget Act of 2018. PTAC is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), which sets forth standards for the formation and use of federal advisory committees.

Dated: December 19, 2018.

Brenda Destro,

Deputy Assistant Secretary for Planning and Evaluation (HSP).

[FR Doc. 2018–28402 Filed 12–28–18; 8:45 am]

BILLING CODE 4150–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Request for Public Comments on the Pain Management Best Practices Inter-Agency Task Force Draft Report on Pain Management Best Practices: Updates, Gaps, Inconsistencies, and Recommendations

AGENCY: Office of the Assistant Secretary for Health, Office of the Secretary, U.S. Department of Health and Human Services (HHS).

ACTION: Notice of request for public comments on the Draft Report on Pain Management Best Practices: Updates, Gaps, Inconsistencies, and Recommendations, which proposes updates to best practices and recommendations for pain management, including chronic and acute pain.

SUMMARY: The Comprehensive Addiction and Recovery Act of 2016 (CARA), requires that the public be given at least ninety (90) days to submit comments on any proposed updates and recommendations developed by the Pain Management Best Practices Inter-Agency Task Force (Task Force). The Task Force is requesting comments on the Draft Report on Pain Management Best Practices: Updates, Gaps, Inconsistencies, and Recommendations (hereinafter referred to as Draft Report). Section 101 of the CARA authorized the creation of the Task Force to identify gaps or inconsistencies, and propose updates to best practices and recommendations for pain management, including chronic and acute pain. The Secretary of HHS convened the Task Force in cooperation with the Secretary of Veterans Affairs and Secretary of Defense. On September 26, 2018, the Task Force voted on the proposed updates and recommendations that would be provided to the public for comment, which are included in the Draft Report. Once the ninety (90) day comment period concludes, the Task Force will consider comments received and compile a Final Report with its proposed updates and recommendations.

DATES: Comments for consideration by the Task Force should be received no later than 5:00 p.m. Eastern Time (ET) on April 1, 2019.

ADDRESSES: The Draft Report is available at *https://www.hhs.gov/ash/advisory-committees/pain/index.html.* Written comments may be submitted by any of the following three methods: (1) Submit through the Federal eRulemaking Portal at *http://www.regulations.gov,* Docket Number: HHS–OS–2018–0027, (2) Email to: *paintaskforce@hhs.gov,* or (3) Mail written comments to the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Health, 200 Independence Avenue SW, Room 736E, Attn: Alicia Richmond Scott, Pain Management Best Practices Inter-Agency Task Force Designated Federal Officer, Washington, DC 20201. For more detailed instructions on submitting comments, see the ''Instructions for Commenters'' section of REQUEST FOR COMMENTS.

FOR FURTHER INFORMATION CONTACT: Alicia Richmond Scott, Designated Federal Officer, Pain Management Best Practices Inter-Agency Task Force, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Health, 200 Independence Avenue SW, Room 736E, Washington, DC 20201. Phone: 240–453–2816. Email: *paintaskforce@hhs.gov.*

SUPPLEMENTARY INFORMATION: The Comprehensive Addiction and Recovery Act of 2016 (CARA), Public Law 114–198, required the Secretary of Health and Human Services, in cooperation with the Secretaries of Defense and Veterans Affairs, to convene the Task Force no later than two years after the CARA enactment. The Task Force is required to propose updates on best practices and recommendations to address gaps or inconsistencies for pain management, including chronic and acute pain, and submit such updates and recommendations to relevant Federal agencies and the general public. The duties of the Task Force are to:

- Identify, review, determine, and propose updates to gaps or inconsistencies between best practices

for pain management, taking into consideration:

—Existing pain management research and other relevant research;
—Recommendations from relevant conferences and existing evidence-based guidelines;
—Ongoing efforts at the state and local level and by medical professional organizations to develop improved pain management strategies;
—The management of high-risk populations who receive opioids in the course of medical care, other than for pain management;
—The 2016 Guideline for Prescribing Opioids for Chronic Pain issued by the CDC; and
—Private sector, State, and local government efforts related to pain management and prescribing pain medication.

• Provide the public with at least ninety (90) days to submit comments on any proposed updates and recommendations.

• Develop a strategy for dissemination of information on best practices for pain management to stakeholders, if appropriate.

The Draft Report highlights the progress made towards identifying, reviewing, and determining whether there are gaps in or inconsistencies between best practices for pain management (including chronic and acute pain) developed or adopted by Federal agencies. It includes the Task Force's proposed updates to best practices and recommendations on addressing gaps or inconsistencies. On September 26, 2018, the Task Force voted on the proposed updates and recommendations that would be provided to the public for comment. The proposed updates and recommendations are included in the Draft Report. Once the ninety (90) day comment period concludes, the Task Force will consider comments received and compile a Final Recommendations Report with its proposed updates and recommendations.

Request for Comment: The goal of this Request for Comment is to solicit feedback on the Draft Report, which includes the Task Force's proposed updates and recommendations. The Task Force invites comment on the full range of issues that may be relevant to the proposed updates and recommendations.

Instructions for Commenters: Written comments should not exceed three pages in length. To assist with the review of public comments, the public should cite a specific section, gap and/or recommendation of the report (*e.g.,* acute pain, gap 2 or recommendation 2b) for which the comments are related. Comments that contain references to studies, research, and other empirical data that are not widely available should include copies of the referenced materials with the submitted comments. Comments submitted by email should be machine-readable and should not be copy-protected. Responders are encouraged to include the name of the person or organization filing the comment, in case follow-up is needed, as well as a page number on each page of their submission(s).

Written comments may be submitted by any of the following three methods: (1) Submit through the Federal eRulemaking Portal at *http://www.regulations.gov,* Docket Number: HHS–OS–2018–0027, (2) Email to: *paintaskforce@hhs.gov,* or (3) Mail written comments to the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Health, 200 Independence Avenue SW, Room 736E, Attn: Alicia Richmond Scott, Pain Management Task Force Designated Federal Officer, Washington, DC 20201.

Dated: December 11, 2018.

Vanila M. Singh,

Chief Medical Officer, Office of the Assistant Secretary for Health.

[FR Doc. 2018–28403 Filed 12–28–18; 8:45 am]

BILLING CODE 4150–28–P

INTERNATIONAL TRADE COMMISSION

[Investigation No. 337–TA–1105]

Certain Programmable Logic Controller (PLCs), Components Thereof, and Products Containing Same; Commission Determination Not To Review an Initial Determination Terminating the Investigation in Its Entirety; Termination of Investigation

AGENCY: U.S. International Trade Commission.

ACTION: Notice.

SUMMARY: Notice is hereby given that the U.S. International Trade Commission has determined not to review an initial determination (''ID'') (Order No. 24) granting a motion by Complainant Radwell International, Inc., of Willingboro, New Jersey (''Radwell'') to terminate the above-captioned investigation in its entirety by reason of withdrawal of its complaint. The investigation is hereby terminated.

FOR FURTHER INFORMATION CONTACT: Carl P. Bretscher, Office of the General Counsel, U.S. International Trade Commission, 500 E Street SW, Washington, DC 20436, telephone 202–205–2382. Copies of non-confidential documents filed in connection with this investigation are or will be available for inspection during official business hours (8:45 a.m. to 5:15 p.m.) in the Office of the Secretary, U.S. International Trade Commission, 500 E Street SW, Washington, DC 20436, telephone 202–205–2000. General information concerning the Commission may also be obtained by accessing its internet server (*https://www.usitc.gov*). The public record for this investigation may be viewed on the Commission's electronic docket (EDIS) at *https://edis.usitc.gov.* Hearing-impaired persons are advised that information on this matter can be obtained by contacting the Commission's TDD terminal on 202–205–1810.

SUPPLEMENTARY INFORMATION: The Commission instituted this investigation on March 29, 2018, based on a Complaint filed by Radwell. 83 FR 13515–16 (Mar. 29, 2018). The Complaint alleges violations of Section 337 of the Tariff Act of 1930, as amended, 19 U.S.C. 1337, in the importation into the United States, sale for importation, and sale within the United States after importation of certain programmable logic controllers (''PLCs''), components thereof, and products containing same by reason of: (1) A conspiracy to fix resale prices in violation of Section 1 of the Sherman Act; (2) a conspiracy to boycott resellers in violation of Section 1 of the Sherman Act; and (3) monopolization in violation of Section 2 of the Sherman Act, the threat or effect of which is to destroy or substantially injure a domestic industry in the United States, or to restrain or monopolize trade and commerce in the United States. *Id.* The notice of investigation names Rockwell Automation, Inc. (''Rockwell'') of Milwaukee, Wisconsin as Respondent. *Id.* The Office of Unfair Import Investigations (''OUII'') was also named as a party to the investigation. *Id.* Non-party North Coast Electric Company was later added as an intervenor. Comm'n Notice (July 27, 2018) (*aff'g* Order No. 10 (July 9, 2018)), 83 FR 37516 (Aug. 1, 2018).

On November 8, 2018, Radwell filed an opposed motion to terminate the investigation in its entirety by withdrawal of its complaint, pursuant to Commission Rule 210.21(a)(1), 19 CFR 210.21(a)(1). On November 19, 2018, Rockwell filed an opposition to the motion. On the same date, OUII filed a response supporting Radwell's motion.