substantial support 5 for a causal relationship between 9/11 exposures and the health condition in 9/11-exposed populations. If the evidence assessment provides only modest support 6 for a causal relationship between 9/11 exposures and the health condition, the Administrator may then evaluate additional published, peer-reviewed epidemiologic studies, conducted among non-9/11-exposed populations, evaluating associations between the health condition of interest and 9/11 agents. 7 If that additional assessment establishes substantial support for a causal relationship between a 9/11 agent or agents and the health condition, the health condition may be added to the List.

In accordance with §3312(a)(6)(B) of the PHS Act, 42 CFR 88.17, and the methodology for the addition of non-cancer health conditions to the List, the Administrator reviewed the evidence presented in Petition 007. Although the petitioner specifically requested the addition of certain autoimmune diseases such as rheumatoid arthritis and connective tissue diseases, the Administrator determined that the scope of the petition properly includes all of the autoimmune diseases identified in Webber et al. Accordingly, the ADS conducted a systematic literature search of the published scientific and medical literature for evidence of a causal relationship between 9/11 exposures and the autoimmune disorders described in Webber et al.8 Those autoimmune disorders include: Systemic lupus erythematosus, antiphospholipid syndrome, systemic sclerosis, inflammatory myositis, Sjögren’s syndrome, rheumatoid arthritis, spondyloarthritis, granulomatosis with polyangiitis (Wegener’s), and eosinophilic granulomatosis with polyangiitis (Churg-Strauss).

Other than the Webber study, the literature search yielded no relevant epidemiologic studies, and no direct observational studies.9 In accordance with the methodology described above, the ADS assessed Webber et al. for quality and found significant limitations. Those limitations include low statistical power (due to the small number of cases); lack of information about other key confounders (e.g., family history of autoimmune diseases, history of viral infections or vaccination preceding diagnosis of the autoimmune disease, use of pharmaceutical agents and non-WTC-related exposures, both work-related and recreational); and potential for measurement error of chronic exposure (i.e., because a month of 9/11-related exposures was represented by at least 1 day spent at the WTC site, the duration variable did not differentiate between those with one day and those with many days of exposure in a given month; however, this measurement approach was non-differential between the cases and controls). Finally, participants were from the Fire Department of New York cohort only and predominantly a white male population which raises concern for generalizability to other 9/11-exposed groups, including female responders and survivors. Thus, the ADS concluded that the available information did not have the potential to form the basis for a decision on whether to propose adding the following conditions to the List of WTC-Related Health Conditions: Systemic lupus erythematosus, antiphospholipid syndrome, systemic sclerosis, inflammatory myositis, Sjögren’s syndrome, rheumatoid arthritis, spondyloarthritis, granulomatosis with polyangiitis (Wegener’s), and eosinophilic granulomatosis with polyangiitis (Churg-Strauss).

The findings described above led the Administrator to determine that insufficient evidence exists to take further action, including either proposing the addition of the autoimmune diseases identified above to the List (pursuant to PHS Act, §3312(a)(6)(B)(ii) and 42 CFR 88.17(a)(2)(iii)) or publishing a determination not to publish a proposed rule in the Federal Register (pursuant to PHS Act, §3312(a)(6)(B)(iii) and 42 CFR 88.17(a)(2)(iii)). The Administrator has also determined that requesting a recommendation from the STAC (pursuant to PHS Act, §3312(a)(6)(B)(ii) and 42 CFR 88.17(a)(2)(ii)) is unwarranted.
DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
44 CFR Part 67
Proposed Flood Elevation Determinations

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Proposed rule; correction.

SUMMARY: On October 7, 2010, and June 13, 2014, FEMA published in the Federal Register a proposed rule and a proposed rule correction, respectively, that contained erroneous information. This notice provides corrections to the table as amended by the proposed rule correction, to be used in lieu of the information published at 75 FR 62062–62063 and 79 FR 33878–33879. The table provided here represents the flooding sources, location of referenced elevations, effective and modified elevations, and communities affected for Clay County, Arkansas, and Incorporated Areas. Specifically, it addresses the following flooding sources: Cypress Creek Ditch and Sugar Creek and Tributary 2.

DATES: Comments are to be submitted on or before September 8, 2015.


SUPPLEMENTARY INFORMATION: The Federal Emergency Management Agency (FEMA) publishes proposed determinations of Base (1% annual-chance) Flood Elevations (BFEs) and modified BFEs for communities participating in the National Flood Insurance Program (NFIP), in accordance with section 110 of the Flood Disaster Protection Act of 1973, 42 U.S.C. 4104, and 44 CFR 67.4(a).

These proposed BFEs and modified BFEs, together with the floodplain management criteria required by 44 CFR 60.3, are minimum requirements. They should not be construed to mean that the community must change any existing ordinances that are more stringent in their floodplain management requirements. The community may at any time enact stricter requirements of its own or pursuant to policies established by other Federal, State, or regional entities. These proposed elevations are used to meet the floodplain management requirements of the NFIP and also are used to calculate the appropriate flood insurance premium rates for new buildings built after these elevations are made final, and for the contents in those buildings.

In the proposed rule published at 75 FR 62062–62063, in the October 7, 2010, issue of the Federal Register, FEMA published a table under the authority of 44 CFR 67.4. That table was amended by the proposed rule correction published at 79 FR 33878–33879, in the June 13, 2014, issue of the Federal Register. In this document, FEMA is publishing a table containing the accurate information, to address previous inaccuracies. The information provided below should be used in lieu of that previously published.

Correction
This proposed rule provides corrections to the table as amended by the proposed rule correction, to be used in lieu of the information previously published. Correct the Clay County, Arkansas table as follows.

(Catalog of Federal Domestic Assistance No. 97.022, “Flood Insurance.”)

Dated: May 21, 2015.

Roy E. Wright,