

The 2016 Webber study then looked to the REP comparison group to provide age- and sex-specific incidence rates during a similar time period as reviewed for the FDNY cases. Incidence rates for the REP comparison group were only available, however, for a limited subset of five autoimmune conditions: Rheumatoid arthritis, psoriatic arthritis, ankylosing spondylitis, SLE, and scleroderma. By applying the REP incidence rates to the FDNY cohort, the study authors were able to generate age-specific expected numbers of cases for the FDNY cohort. The observed incidence rates in the FDNY cohort were then compared with the expected numbers of cases for the FDNY cohort derived from the REP rates. Standardized ratios, which are the ratios of the observed number of cases in the FDNY cohort to the expected number of cases (based on the REP rates) were then calculated. Overall, FDNY rates for the five types of autoimmune disease compared were not significantly different from expected rates (SIR, 0.97; 95% CI, 0.77–1.21). Only SLE had a standardized incidence ratio that was statistically significantly greater among the entire FDNY cohort. Other ratios were either reduced or not statistically significant.

Limitations similar to those found in the 2015 Webber study, discussed above, were seen in the 2016 Webber study, including the lack of information on potential confounders such as family history of autoimmune disease and both work-related and recreational non-9/11-related exposures, and poor generalizability to other 9/11-exposed groups. The 2016 Webber study did not include new or additional information or controls that would avoid or mitigate the limitations found in the 2015 study. Consistent with the assessment of Petition 007,²⁰ the ADS disagreed with the method for measuring chronic exposure with a duration variable that did not differentiate between those with one day versus many days of exposure in a given month. Furthermore, the lack of information about occupational history and other potential confounders among the REP cohort calls into question the applicability and comparability of the rates used in the 2016 Webber study.

D. Administrator's Determination on Petition 011

The Administrator has established a policy for evaluating whether to propose the addition of non-cancer health conditions to the List of WTC-Related

Health Conditions.²¹ Petition 011 requested the addition of autoimmune diseases which were previously reviewed by the Administrator for Petition 007, and neither the references included in the petition nor the studies found in the literature review conducted by the ADS presented evidence of a causal association between 9/11 exposures and autoimmune diseases, lupus, and/or rheumatoid arthritis. The Administrator initially reviewed the findings presented in the 2015 Webber study in response to Petition 007, which also requested the addition of autoimmune diseases, including rheumatoid arthritis and connective tissue diseases. In that review, due to limitations in the 2015 Webber study, the Administrator determined that insufficient evidence existed to take any of the following actions: propose the addition of autoimmune diseases to the List (pursuant to PHS Act, sec. 3312(a)(6)(B)(ii) and 42 CFR 88.17(a)(2)(ii)); publish a determination not to publish a proposed rule in the **Federal Register** (pursuant to PHS Act, sec. 3312(a)(6)(B)(iii) and 42 CFR 88.17(a)(2)(iii)); or request a recommendation from the STAC (pursuant to PHS Act, sec. 3312(a)(6)(B)(i) and 42 CFR 88.17(a)(2)(i)). The 2015 Webber study was also presented as evidence to support Petition 008 regarding autoimmune disorders, specifically encephalitis of the brain, as well as Petition 009 regarding the autoimmune disorder multiple sclerosis.

In reviewing the 2016 Webber study for potential support for Petition 011, the ADS concluded that similar inadequacies existed for the 2016 study as those seen in the 2015 Webber study. Taken together, the two Webber studies, while meeting the relevance threshold of being published, peer-reviewed epidemiologic studies of autoimmune disease, including lupus and rheumatoid arthritis, in 9/11-exposed populations, were found to exhibit significant limitations and were thus insufficient to provide a potential basis for a decision on whether to propose adding the requested health conditions to the List.

Accordingly, with regard to Petition 011, the Administrator has determined that insufficient evidence exists to take further action at this time, including either proposing the addition of autoimmune diseases to the List

(pursuant to PHS Act, sec. 3312(a)(6)(B)(ii) and 42 CFR 88.17(a)(2)(ii)) or publishing a determination not to publish a proposed rule in the **Federal Register** (pursuant to PHS Act, sec. 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, sec. 3312(a)(6)(B)(i) and 42 CFR 88.17(a)(2)(i)) is unwarranted.

For the reasons discussed above, the request made in Petition 011 to add autoimmune disease, lupus, and rheumatoid arthritis to the List of WTC-Related Health Conditions is denied.

The Administrator will continue to monitor the scientific literature for publication of the results of the ongoing WTC Health Registry study discussed above (reference 7 in the petition) and any other studies that address autoimmune diseases among 9/11-exposed populations.

Dated: April 20, 2016.

John Howard,

Administrator, World Trade Center Health Program and Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, Department of Health and Human Services.

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FEDERAL COMMUNICATIONS COMMISSION

47 CFR Part 76

[MB Docket No. 16–126; DA 16–407]

Petition for Declaratory Ruling Filed by National Cable & Telecommunications Association and American Cable Association

AGENCY: Federal Communications Commission.

ACTION: Petition for declaratory ruling; request for comments.

SUMMARY: This document seeks comment on a petition for declaratory ruling filed by the National Cable & Telecommunications Association and American Cable Association seeking a declaratory ruling clarifying the “written information” requirement of section 76.1602(b) of the Commission’s rules. Specifically, NCTA and ACA “seek a ruling that electronic dissemination by email to subscribers for whom a cable operator has a confirmed email address, by the provision of appropriately-noticed links to Web sites, or by other electronic measures reasonably calculated to reach

²¹ John Howard, Administrator of the WTC Health Program, *Policy and Procedures for Adding Non-Cancer Conditions to the List of WTC-Related Health Conditions*, Oct. 21, 2014. http://www.cdc.gov/wtc/pdfs/WTCHP_PP_Adding_NonCancers_21_Oct_2014.pdf.

²⁰ See 80 FR 32333 at 32334.

individual customers, satisfies the requirement if the information is also available in print upon customer request.”

DATES: Comments are due on or before May 26, 2016; reply comments are due on or before June 10, 2016.

ADDRESSES: You may submit comments, identified by MB Docket No. 16–126, by any of the following methods:

- *Electronic Filers:* Comments may be filed electronically using the Internet by accessing the ECFS: <http://apps.fcc.gov/ecfs/>.

- *Paper Filers:* Parties who choose to file by paper must file an original and one copy of each filing. Filings can be sent by hand or messenger delivery, by commercial overnight courier, or by first-class or overnight U.S. Postal Service mail. All filings must be addressed to the Commission’s Secretary, Office of the Secretary, Federal Communications Commission.

- All hand-delivered or messenger-delivered paper filings for the Commission’s Secretary must be delivered to FCC Headquarters at 445 12th St. SW., Room TW–A325, Washington, DC 20554. The filing hours are 8:00 a.m. to 7:00 p.m. All hand deliveries must be held together with rubber bands or fasteners. Any envelopes and boxes must be disposed of before entering the building.

- Commercial overnight mail (other than U.S. Postal Service Express Mail and Priority Mail) must be sent to 9300 East Hampton Drive, Capitol Heights, MD 20743.

- U.S. Postal Service first-class, Express, and Priority mail must be addressed to 445 12th Street SW., Washington, DC 20554.

- *People with Disabilities:* To request materials in accessible formats for people with disabilities (braille, large print, electronic files, audio format), send an email to fcc504@fcc.gov or call

the Consumer & Governmental Affairs Bureau at 202–418–0530 (voice), 202–418–0432 (tty).

FOR FURTHER INFORMATION CONTACT: For additional information on this proceeding, contact Katie Costello of the Policy Division, Media Bureau at (202) 418–2233 or Katie.Costello@fcc.gov.

SUPPLEMENTARY INFORMATION: This is a summary of the Public Notice dated April 14, 2016, DA 16–407, *Media Bureau Seeks Comment on Petition for Declaratory Ruling filed by National Cable & Telecommunications Association and American Cable Association*, MB Docket No. 16–126. The full text of the Public Notice is available for public inspection and copying during regular business hours in the FCC Reference Center, Federal Communications Commission, 445 12th Street SW., Room CY–A257, Washington, DC 20554. This document will also be available via ECFS at <http://apps.fcc.gov/ecfs/>. Documents will be available electronically in ASCII, Microsoft Word, and/or Adobe Acrobat. The complete text may be purchased from the Commission’s copy contractor, 445 12th Street SW., Room CY–B402, Washington, DC 20554. Alternative formats are available for people with disabilities (Braille, large print, electronic files, audio format), by sending an email to fcc504@fcc.gov or calling the Commission’s Consumer and Governmental Affairs Bureau at (202) 418–0530 (voice), (202) 418–0432 (TTY).

Synopsis

On March 7, 2016, National Cable & Telecommunications Association (“NCTA”) and the American Cable Association (“ACA”) jointly filed a Petition for Declaratory Ruling (“Petition”) in which it seeks clarification of the “written information” requirement of Section

76.1602(b) of the Commission’s rules. Specifically, NCTA and ACA “seek a ruling that electronic dissemination by email to subscribers for whom a cable operator has a confirmed email address, by the provision of appropriately-noticed links to Web sites, or by other electronic measures reasonably calculated to reach individual customers, satisfies the requirement if the information is also available in print upon customer request.” The Commission issue this Public Notice pursuant to section 1.2 of the Commission’s rules to seek comment on NCTA and ACA’s Petition. The Petition is available electronically through the Commission’s ECFS under MB Docket No. 16–126, which may be accessed on the Commission’s Internet Web site at <http://apps.fcc.gov/ecfs/>. All filings concerning the matters referenced in this Public Notice should refer to the above-referenced docket number. Comments may be filed by May 26, 2016. Reply comments may be filed by June 10, 2016. The proceeding this Notice initiates shall be treated as a “permit-but-disclose” proceeding in accordance with the Commission’s *ex parte* rules, Section 1.1200 through 1.1216 of the Commission’s rules. Participants in this proceeding should familiarize themselves with the Commission’s *ex parte* rules. Written *ex parte* presentations and memoranda summarizing oral *ex parte* presentations, and all attachments thereto, must be filed through the electronic comment filing system available for that proceeding, and must be filed in their native format (e.g., .doc, .xml, .ppt, searchable .pdf).

Federal Communications Commission.

Thomas Horan,

Chief of Staff, Media Bureau.

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