

in data collection, compilation, analysis, use, and dissemination, as well as data science, information technology, cybersecurity, and privacy.

2. Members will be selected from the business, academic, non-profit, and state and local government communities.

3. Reasonable efforts will be made to ensure members represent the entire spectrum of Federal data interests including demographic, economic, trade, health, scientific, patent, environmental, geospatial, security, and transactional data. Collectively, their knowledge will include all types of data the Federal Government collects, compiles, analyzes, uses, and disseminates.

4. Nominees should have established records of distinguished service. The field of expertise in which the candidate is qualified should be specified in the nomination letter. Nominations for a particular field should come from organizations or individuals within that field. A summary of the candidate's qualifications should be included with the nomination, including (where applicable) current or former service on federal advisory boards and federal employment. In addition, each nomination letter should state that the person agrees to the nomination, acknowledges the responsibilities of serving on the board, and will actively participate in good faith in the tasks of the NTIS Advisory Board.

5. The Department of Commerce is committed to equal opportunity in the workplace and seeks a broad-based and diverse NTIS Advisory Board membership.

Dated: December 29, 2017.

**Gregory S. Capella,**  
Deputy Director.

[FR Doc. 2017-28502 Filed 1-4-18; 8:45 am]

**BILLING CODE 3510-04-P**

## COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED

### Procurement List; Deletions

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

**ACTION:** Deletions from the Procurement List.

**SUMMARY:** The Committee is proposing to delete products from the Procurement List that were previously furnished by nonprofit agencies employing persons who are blind or have other severe disabilities.

**DATES:** Date deleted from the Procurement List: February 4, 2018.

**ADDRESSES:** Committee for Purchase From People Who Are Blind or Severely Disabled, 1401 S. Clark Street, Suite 715, Arlington, Virginia 22202-4149.

**FOR FURTHER INFORMATION CONTACT:** Amy B. Jensen, Telephone: (703) 603-7740, Fax: (703) 603-0655, or email [CMTEFedReg@AbilityOne.gov](mailto:CMTEFedReg@AbilityOne.gov).

### SUPPLEMENTARY INFORMATION:

#### Deletions

On 11/27/2017 (82 FR 226), the Committee for Purchase From People Who Are Blind or Severely Disabled published notice of proposed deletions from the Procurement List.

After consideration of the relevant matter presented, the Committee has determined that the products listed below are no longer 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 additional reporting, recordkeeping or other compliance requirements for small entities.

2. The action may result in authorizing small entities to furnish the products 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 products deleted from the Procurement List.

#### End of Certification

Accordingly, the following products are deleted from the Procurement List:

#### Products

**NSN(s)—Product Name(s):**  
9905-02-000-8089—Holder, Label, Brass  
9905-02-000-8698—Holder, Label, Brass  
**Mandatory Source(s) of Supply:** CW

Resources, Inc., New Britain, CT  
**Contracting Activity:** U.S. Postal Service, Eagan, Eagan, MN

**NSN—Product Name:**  
3920-02-000-1915—Bar Assembly, Door  
**Mandatory Source of Supply:** Rauch, Inc., New Albany, IN

**Contracting Activity:** USPS, Topeka Purchasing Center, Topeka, KS

**NSNs—Product Names:**  
7510-01-600-7561—Wall Calendar, Dated 2017, Wire Bound w/hanger, 15.5" × 22"  
7510-01-600-7564—Monthly Wall Calendar, Dated 2017, Jan-Dec, 8-1/2" × 11"  
7530-01-600-7578—Daily Desk Planner, Dated 2017, Wire bound, Non-refillable,

Black Cover  
7530-01-600-7592—Weekly Desk Planner, Dated 2017, Wire Bound, Non-refillable, Black Cover

7530-01-600-7600—Weekly Planner Book, Dated 2017, 5" × 8", Digital Camouflage  
7530-01-600-7611—Monthly Desk Planner, Dated 2017, Wire Bound, Non-refillable, Black Cover

7510-01-600-7622—Wall Calendar, Dated 2017, Wire Bound w/Hanger, 12" × 17"

**Mandatory Source of Supply:** Chicago Lighthouse Industries, Chicago, IL  
**Contracting Activity:** General Services Administration, New York, NY

**Amy B. Jensen,**

Director, Business Operations.

[FR Doc. 2018-00011 Filed 1-4-18; 8:45 am]

**BILLING CODE 6353-01-P**

## COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED

### Procurement List; Proposed Deletions

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

**ACTION:** Proposed Deletions from the Procurement List.

**SUMMARY:** The Committee is proposing to delete products from the Procurement List that were previously furnished by nonprofit agencies employing persons who are blind or have other severe disabilities.

**DATES:** Comments must be received on or before February 4, 2018.

**ADDRESSES:** Committee for Purchase From People Who Are Blind or Severely Disabled, 1401 S. Clark Street, Suite 715, Arlington, Virginia, 22202-4149.

**FOR FURTHER INFORMATION CONTACT:** For further information or to submit comments contact: Amy B. Jensen, Telephone: (703) 603-7740, Fax: (703) 603-0655, or email [CMTEFedReg@AbilityOne.gov](mailto:CMTEFedReg@AbilityOne.gov).

**SUPPLEMENTARY INFORMATION:** This notice is published pursuant to 41 U.S.C. 8503 (a)(2) and 41 CFR 51-2.3. Its purpose is to provide interested persons an opportunity to submit comments on the proposed actions.

#### Deletions

The following products are proposed for deletion from the Procurement List:

#### Products

**NSN—Product Name:**  
3920-00-000-8908—Shelf Assembly, Top  
**Mandatory Source of Supply:** Rauch, Inc., New Albany, IN

**Contracting Activity:** USPS, Topeka Purchasing Center

**NSN(s)—Product Name(s):**

8455-00-NSH-0001—Logo, BDU Coat and Shirt

8455-00-NSH-0002—Logo, BDU Coat and Shirt

*Mandatory Source of Supply:* Southeastern Kentucky Rehabilitation Industries, Inc., Corbin, KY

*Contracting Activity:* Defense Logistics Agency Troop Support

**Amy B. Jensen,**

*Director, Business Operations.*

[FR Doc. 2018-00010 Filed 1-4-18; 8:45 am]

**BILLING CODE 6353-01-P**

## DEPARTMENT OF DEFENSE

### Office of the Secretary

[Docket ID: DOD-2017-HA-0065]

#### Proposed Collection; Comment Request

**AGENCY:** Office of the Assistant Secretary of Defense for Health Affairs, DoD.

**ACTION:** 60-Day information collection notice.

**SUMMARY:** In compliance with the *Paperwork Reduction Act of 1995*, the Office of the Assistant Secretary of Defense for Health Affairs announces a proposed public information collection and seeks public comment on the provisions thereof. Comments are invited on: Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; the accuracy of the agency's estimate of the burden of the proposed information collection; ways to enhance the quality, utility, and clarity of the information to be collected; and ways to minimize the burden of the information collection on respondents, including through the use of automated collection techniques or other forms of information technology.

**DATES:** Consideration will be given to all comments received by March 6, 2018.

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

- *Federal eRulemaking Portal:* <http://www.regulations.gov>. Follow the instructions for submitting comments.
- *Mail:* Department of Defense, Office of the Deputy Chief Management Officer, Directorate for Oversight and Compliance, Regulatory and Advisory Committee Division, 4800 Mark Center Drive, Mailbox #24, Suite 08D09B, Alexandria, VA 22350-1700.

*Instructions:* All submissions received must include the agency name, docket

number and title for this **Federal Register** document. The general policy for comments and other submissions from members of the public is to 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.

Any associated form(s) for this collection may be located within this same electronic docket and downloaded for review/testing. Follow the instructions at <http://www.regulations.gov> for submitting comments. Please submit comments on any given form identified by docket number, form number, and title.

**FOR FURTHER INFORMATION CONTACT:** To request more information on this proposed information collection or to obtain a copy of the proposal and associated collection instruments, please contact Defense Health Agency, TRICARE Health Plan (J-10), ATTN: Mark Ellis, 7700 Arlington Boulevard, Falls Church, VA 22042, or call the TRICARE Health Plan, 703-681-0039.

#### SUPPLEMENTARY INFORMATION:

*Title; Associated Form; and OMB Number:* TRICARE Select Enrollment, Disenrollment, and Change Form; DD Form 3043; OMB Control Number 0720-0061.

*Needs and Uses:* The information collection requirement is necessary to obtain each non-active duty TRICARE beneficiary's personal information needed to: (1) Complete his/her enrollment into the TRICARE Select health plan option, (2) dis-enroll a beneficiary, or (3) change a beneficiary's enrollment information (*e.g.*, address, add a dependent, report other health insurance). This information is required to ensure the beneficiary's TRICARE benefits and claims are administered based on their TRICARE plan of choice. Without this new enrollment form, each non-active duty TRICARE beneficiary is automatically defaulted into direct care, limiting their health care options to military hospitals and clinics. These beneficiaries would have no TRICARE coverage when using the TRICARE network of providers for services not available at their local military hospital or clinic.

*Affected Public:* Individuals or Households.

*Annual Burden Hours:* 24,825.

*Number of Respondents:* 99,300.

*Responses per Respondent:* 1.

*Annual Responses:* 99,300.

*Average Burden per Response:* 15

minutes.

*Frequency:* On occasion.

Respondents could be any non-active duty TRICARE beneficiary who is not eligible for Medicare. These beneficiaries have the option of enrolling into either the TRICARE Prime or TRICARE Select plan option starting January 1, 2018. Those choosing to enroll in TRICARE Select can do so by submitting the DD Form 3043, using the BWE portal, or calling their Regional Contractor. If they choose to use the DD Form 3043, they must complete the appropriate page(s) of the form and mail the form to their Regional Contractor. No other form is required to enroll, dis-enroll, or change an enrollment. Respondents can download the form from the DoD Forms Management Program website, or click on the link to the form on the *TRICARE.mil* website or their Regional Contractor's website, or obtain a copy from their local military hospital or clinic. The mailing address and toll-free customer service number for their Regional Contractor are included on the DD Form 3043. If using either website option, the respondent can type in the information on the form prior to printing it or handwrite the information after printing the blank form.

Dated: January 2, 2018.

**Aaron Siegel,**

*Alternate OSD Federal Register Liaison Officer, Department of Defense.*

[FR Doc. 2018-00007 Filed 1-4-18; 8:45 am]

**BILLING CODE 5001-06-P**

## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### TRICARE; Notice of TRICARE Prime and TRICARE Select Plan Information for Calendar Year 2018

**AGENCY:** Office of the Secretary of Defense, Department of Defense.

**ACTION:** TRICARE Prime and TRICARE Select Plan Information for Calendar Year 2018.

**SUMMARY:** This notice provides a notice of TRICARE Prime and TRICARE Plan Information for Calendar Year 2018.

**DATES:** TRICARE health plan information in this notice is valid for services during calendar year 2018 (January 1, 2018–December 31, 2018).

**ADDRESSES:** Defense Health Agency, TRICARE Health Plan, 7700 Arlington Boulevard, Suite 5101, Falls Church, Virginia 22042-5101.

**FOR FURTHER INFORMATION CONTACT:** Mr. Mark A. Ellis, (703) 681-0039.

**SUPPLEMENTARY INFORMATION:** An interim final rule published in the