concentrations of 1,1,2-trichloroethane, and the use of personal protective equipment (PPE) and controls relevant to this OES.

- Whether 350 operating days per site-year is an appropriate default for EPA to use for the number of operating days for a manufacturing facility and also comment on the other default values that EPA uses for operating days for the other OES assessed (See Table 3–4).
- Information on worker schedules and exposures, including shift hours, working days per week, and working years, for any of the COUs and OESs assessed by EPA in this draft risk evaluation.
- Containers and method of transport for how 1,1,2-trichloroethane is distributed to COUs that were not reported through Chemical Data Reporting such as adhesives and sealants, use as a laboratory chemical, and for cleaning and degreasing applications such as vapor degreasing and cold cleaning.
- Information on process descriptions for how 1,1,2-trichloroethane is used in adhesives and sealants (Use of Adhesives and Sealants OES), as a laboratory chemical (Commercial Use of a Laboratory Chemical OES), and in cleaning and degreasing applications such as vapor degreasing and cold cleaning (Use of Cleaning and Degreasing Solvents OES).
- Whether there are current uses of 1,1,2-trichloroethane for the OES of Use of Cleaning and Degreasing Solvents.
- Process description and worker activity information for remediation processes involving 1,1,2-trichloroethane including information on whether the remediation OES is representative of the disposal COU.
- Additional worker inhalation monitoring data for any of the COUs and OESs assessed by EPA in the draft risk evaluation, as well as specific information on respiratory protection usage (*e.g.,* what type of respirator and for what tasks, how respirators are selected and assigned, etc) for all COUs.
- Information which may be useful to EPA related to existing dermal protections including specifications from the manufacturers or suppliers that demonstrate an impervious barrier to 1,1,2-trichloroethane during expected durations of use and normal conditions of exposure within the workplace, including any information which accounts for potential chemical permeation, penetration, or breakthrough times.
- EPA provided additional discussion of the available information on dermal PPE usage and existing controls for the Manufacturing as a Byproduct OES in the risk determination (see Section 6.1.3 of the draft risk evaluation). EPA welcomes additional information on how dermal protection is selected, applied, and utilized for this OES.
- Additional data on environmental releases for any of the COUs and OESs assessed by EPA in the draft risk evaluation.
- As described in Section 4.3.2.1.3 of the draft risk evaluation, EPA relied on conservative assumptions to estimate facility throughput that is utilized in the occupational exposure model for the OES of Repackaging for Laboratory Chemical Use. EPA seeks additional information to inform the use of these conservative assumptions, or to further refine the assumptions utilized in this exposure model.

VI. Next Steps

After consideration of comments received from the public on the draft risk evaluation and input from the Scientific Advisory Committee on Chemicals (SACC) peer review, EPA will issue a final risk evaluation for 1,1,2-trichloroethane. Under TSCA section 6, EPA must use the final risk evaluation as a basis to determine, based on the weight of scientific evidence, whether the chemical presents an unreasonable risk to human health or the environment under the chemical's COUs. This includes risks to subpopulations who may be at greater risks than the general population, such as children and workers. TSCA prohibits EPA from considering non-risk factors (*e.g.,* costs/benefits) during risk evaluation.

For more information about the TSCA risk evaluation process for existing chemicals, go to *https://www.epa.gov/assessing-and-managing-chemicals-under-tsca.*

Authority: 15 U.S.C. 2601 *et seq.*

Dated: July 24, 2026.

Douglas M. Troutman,

Assistant Administrator, Office of Chemical Safety and Pollution Prevention.

[FR Doc. 2026–15267 Filed 7–28–26; 8:45 am]

BILLING CODE 6560–50–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award of a Sole Source Cooperative Agreement To Fund the Public Health Foundation

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces the award of approximately $1.5 million for Year 1 funding to the Public Health Foundation. The award will support the modernization and enhancement of CDC TRAIN and the TRAIN Learning Network overall; capacity building and training to improve the skills and competence of the public health workforce; performance management, quality improvement, and innovation in governmental public health; and expanded collaborations between health departments and academic institutions. Funding amounts for years 2–5 will be set at continuation.

DATES: The period for this award will be September 1, 2026, through August 31, 2031.

FOR FURTHER INFORMATION CONTACT: Cindi Melanson, National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce, Centers for Disease Control and Prevention, Telephone: 800–232–4636, email: *train@cdc.gov.*

SUPPLEMENTARY INFORMATION: The sole source award will ensure that state, tribal, local, and territorial (STLT) public health and healthcare professionals have the knowledge and skills to serve their communities well. This will be achieved by the following: (1) enhancing and expanding the TRAIN Learning Network, an existing learning management system (LMS) focused on upskilling the public health and healthcare workforce and (2) strengthening public health workforce services through support for advancing performance management and quality improvement, public health workforce competencies, academic health departments, and other cross-sector collaborations.

Public Health Foundation (PHF) is the only entity that can carry out this work, as it owns and manages the TRAIN Learning Network (Learning Management System, LMS). CDC has partnered with the TRAIN Learning

Network (CDC TRAIN) since 2010. There are now more than two million CDC TRAIN learner accounts. PHF also manages the Council on Linkages Between Academic and Public Health Practice, which is the steward of the Core Competencies for Public Health Professionals, the Academic Health Department (AHD) Learning Community, and the Retention and Recruitment Learning Community. Finally, PHF is a field-recognized lead in unique public health tools and training for performance management and quality improvement provided to state, tribal, local, and territorial health departments.

Summary of the Award

Recipient: Public Health Foundation.

Purpose of the award: The purpose of this award is to ensure that state, tribal, local, and territorial (STLT) public health and healthcare professionals have the knowledge and skills to best serve their communities. This will be achieved by the following: (1) enhancing and expanding the TRAIN Learning Network, an existing learning management system (LMS) focused on upskilling the public health and healthcare workforce and (2) strengthening public health workforce services through support for advancing performance management and quality improvement, public health workforce competencies, academic health departments, and other cross-sector collaborations.

Amount of award: The approximate year 1 funding amount will be $1.5 million in Federal Fiscal Year 2026 funds, subject to the availability of funds. Funding amounts for years 2–5 will be set at continuation.

Authority: This program is authorized under the Public Health Service Act: Section 1703 (a)(2) and (3) (42 U.S.C. 300u–2(a)(2) and (3)); Section 1704 (42 U.S.C. 300u–3); and Section 317(k)(2) (42 U.S.C. 247(b)(k)(2)).

Period of performance: September 1, 2026, through August 31, 2031.

Jamie Legier,

Director, Office of Grants Services, Centers for Disease Control and Prevention.

[FR Doc. 2026–15315 Filed 7–28–26; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

Privacy Act of 1974; Matching Program

AGENCY: Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS).

ACTION: Notice of a new matching program.

SUMMARY: In accordance with the Privacy Act of 1974, as amended, the Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS) is providing notice of the re-establishment of a matching program between CMS and the Office of Personnel Management, ''Verification of Eligibility for Minimum Essential Coverage Under the Patient Protection and Affordable Care Act through an Office of Personnel Management Health Benefit Plan''. The matching program provides CMS and State Administering Entities with the Office of Personnel Management (OPM) data to use in determining individuals' eligibility to enroll in a qualified health plan through an exchange established under the ACA; for insurance affordability programs, certifications of exemption, and to make eligibility redeterminations and renewals, including appeal determinations.

DATES: Comments on the matching program must be received by August 28, 2026. The matching program will be effective, and matching activity may commence, 30 days after this notice is published in the **Federal Register**. The matching program conducted for an initial term of 18 months, and within 3 months of expiration may be renewed for up to one additional year if the parties make no change to the matching program and certify that the program has been conducted in compliance with the matching agreement.

ADDRESSES: Interested parties may submit comments on this notice to the CMS Privacy Act Officer by mail at: Division of Security, Privacy Policy & Governance, Information Security & Privacy Group, Office of Information Technology, Centers for Medicare & Medicaid Services, Location: N1–14–56, 7500 Security Blvd., Baltimore, MD 21244–1850 or by email at *Barbara.Demopulos@cms.hhs.gov*.

FOR FURTHER INFORMATION CONTACT: If you have questions about the matching program, you may contact Terrence Kane, Director, Division of Automated Verifications and SEP Policy, Marketplace Eligibility and Enrollment Group, Center for Consumer Information and Insurance Oversight, Centers for Medicare & Medicaid Services, at (301) 492–4449, by email at *Terrence.kane@cms.hhs.gov,* or by mail at 7501 Wisconsin Avenue, Bethesda, MD 20814.

SUPPLEMENTARY INFORMATION: The Privacy Act of 1974, as amended (5 U.S.C. 552a) provides certain protections for individuals applying for and receiving federal benefits. The law governs the use of computer matching by federal agencies when records in a system of records (meaning, federal agency records about individuals retrieved by name or other personal identifier) are matched with records of other federal or non-federal agencies. The Privacy Act requires agencies involved in a matching program to:

1. Enter into a written agreement, which must be prepared in accordance with the Privacy Act, approved by the Data Integrity Board of each source and recipient Federal agency, provided to Congress and the Office of Management and Budget (OMB), and made available to the public, as required by 5 U.S.C. 552a(o), (u)(3)(A), and (u)(4).

2. Notify the individuals whose information will be used in the matching program that the information they provide is subject to verification through matching, as required by 5 U.S.C. 552a(o)(1)(D).

3. Verify match findings before suspending, terminating, reducing, or making a final denial of an individual's benefits or payments or taking other adverse action against the individual, as required by 5 U.S.C. 552a(p).

4. Report the matching program to Congress and the OMB, in advance and annually, as required by 5 U.S.C. 552a(o) (2)(A)(i), (r), and (u)(3)(D).

5. Publish advance notice of the matching program in the **Federal Register** as required by 5 U.S.C. 552a(e)(12).

This matching program meets these requirements.

Barbara Demopulos,

Privacy Act Officer, Division of Security, Privacy Policy and Governance, Office of Information Technology, Centers for Medicare & Medicaid Services.

Participating Agencies: Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS), and the Office of Personnel Management (OPM).

Authority for Conducting the Matching Program: The principal authority for the matching program is 42 U.S.C. 18001, *et seq.*

Purpose(s): The matching program will enable CMS to make initial