#### IV. The Proposed Consent Agreement

The proposed Consent Agreement remedies the anticompetitive concerns in both local markets. The proposed Consent Agreement would maintain competition in the Gadsden Area by requiring CHS to divest Riverview and its associated operations and businesses. Similarly, the proposed Consent Agreement would fully maintain competition in the Darlington County Area by requiring CHS to divest Carolina Pines and its associated operations and businesses. Any potential buyer for either hospital is subject to the prior approval of the Commission.

The proposed Consent Agreement also requires CHS to provide transitional services to the approved acquirers for one year, as needed, to assist the acquirers with operating the divested assets as viable and ongoing businesses. Until the divestitures are completed, CHS is required to hold Riverview and Carolina Pines separate, subject to the standard terms of the Order to Hold Separate and Maintain Assets. The proposed order also appoints Curtis Lane, the senior managing director of MTS Health Partners, LP, as Hold Separate Monitor to oversee CHS's compliance with the Order to Hold Separate and Maintain Assets. Finally, the proposed order contains a ten-year prior notice requirement for acquisitions of GAC services providers in the Gadsden, Alabama Metropolitan Statistical Area or in the Florence, South Carolina Metropolitan Statistical Area, as well as compliance reporting requirements.

The hospitals to be divested are each stand-alone businesses and include all of the assets and real property necessary for a Commission-approved buyer to compete immediately and effectively in each relevant market. In addition to divestiture of the actual facilities at issue, CHS has agreed to divest the rights to all intellectual property, including the facility names, and all provider and health plan contracts associated with the facilities. Although the competitive concerns relate to GAC services to commercially insured patients only, the proposed order contemplates divestiture of all services and operations that are affiliated with the facility or facilities to be divested that are necessary to be a viable business. Specifically, CHS will divest all outpatient operations and businesses, including outpatient physician practices, associated with each hospital. This requirement is consistent with similar divestitures in prior Commission actions.

The sole purpose of this analysis is to facilitate public comment on the Consent Agreement. This analysis does not constitute an official interpretation of the Consent Agreement or modify its terms in any way.

By direction of the Commission.

#### Donald S. Clark,

Secretary.

[FR Doc. 2014-01942 Filed 1-30-14; 8:45 am]

BILLING CODE 6750-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

Request for Comments on the Ethical Considerations of Neuroscience Research and the Application of Neuroscience Research Findings

**AGENCY:** Department of Health and Human Services, Office of the Secretary, Presidential Commission for the Study of Bioethical Issues.

**ACTION:** Notice.

**SUMMARY:** The Presidential Commission for the Study of Bioethical Issues is requesting public comment on the ethical considerations of neuroscience research and the application of neuroscience research findings.

**DATES:** To ensure consideration, comments must be received by April 1, 2014. Comments received after this date will be considered only as time permits.

ADDRESSES: Individuals, groups, and organizations interested in commenting on this topic may submit comments by email to *info@bioethics.gov* or by mail to the following address: Public Commentary, Presidential Commission for the Study of Bioethical Issues, 1425 New York Ave. NW., Suite C–100, Washington, DC 20005.

#### FOR FURTHER INFORMATION CONTACT:

Hillary Wicai Viers, Communications Director, Presidential Commission for the Study of Bioethical Issues.
Telephone: 202–233–3960. E-Mail: hillary.viers@bioethics.gov. Additional information may be obtained at http://www.bioethics.gov.

SUPPLEMENTARY INFORMATION: On November 24, 2009, the President established the Presidential Commission for the Study of Bioethical Issues (the Commission) to advise him on bioethical issues generated by novel and emerging research in biomedicine and related areas of science and technology. The Commission is charged with identifying and promoting policies and practices that ensure ethically responsible conduct of scientific research and health care delivery. Undertaking these duties, the

Commission seeks to identify and examine specific bioethical, legal, and social issues related to potential scientific and technological advances; examine diverse perspectives and possibilities for international collaboration on these issues; and recommend legal, regulatory, or policy actions as appropriate.

The Commission is considering the conduct and implications of neuroscience research. On July 1, 2013, the President asked the Commission to "identify proactively a set of core ethical standards—both to guide neuroscience research and to address some of the ethical dilemmas that may be raised by the application of neuroscience research findings." The President requested that the Commission seek input from "scientists, ethicists, legal scholars, and members of the public" to inform its deliberations.

The Commission is interested in receiving comments from individuals, groups, and professional communities regarding the ethical considerations of neuroscience research and the application of neuroscience research findings. The Commission is particularly interested in receiving public commentary regarding:

- The diversity and scope of ethical considerations related to neuroscience as a field:
- core ethical standards that guide neuroscience research, including consistency (or lack thereof) across disciplines, and potential tension among the guiding standards;
- advances in neuroscience research that raise novel ethical issues or heighten existing ethical tensions;
- whether emphasis on particular aspects of the Common Rule (or other research ethics regulations) is needed given the particular implications of some neuroscience research or whether any part of the Common Rule needs clarification in order to adequately protect participants in neuroscience research specifically:
- potential implications of discoveries that might flow from studies of the brain and questions that might arise from neuroscience research findings and their applications, including questions about the potential implications for privacy, personal agency, and moral responsibility for one's actions; stigmatization and discrimination; and the appropriate use of neuroscience in the justice system;
- strategies for integrating from a project's inception ethical considerations into neuroscience research, technological development, and scientific research generally; and

 ethical considerations concerning communication about neuroscience research and neuroscience research applications by scientists, journalists, and others.

To this end, the Commission is inviting interested parties to provide input and advice through written comments.

Comments will be publicly available, including any personally identifiable or confidential business information that they contain. Trade secrets should not be submitted.

Dated: January 17, 2014.

#### Lisa M. Lee,

Executive Director, Presidential Commission for the Study of Bioethical Issues.

[FR Doc. 2014–02072 Filed 1–30–14; 8:45 am]

BILLING CODE 4154-06-P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# National Committee on Vital and Health Statistics: Meeting Standards Subcommittee

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting.

*Name:* National Committee on Vital and Health Statistics (NCVHS) Subcommittee on Standards.

Time and Date: February 19, 2014 9:00 p.m.-5:00 p.m. EST.

Place: Hubert H. Humphrey Building; 200 Independence Avenue SW., Room 705A, Washington, DC 20201. Public attendees should call (202) 690–7100 for admission to the meeting room on the day of the meeting.

Status: Open. Purpose: The purpose of this hearing is to gather industry input on the status of selected administrative simplification topics that are a priority for 2014, including the status of development of Operating Rules for all remaining HÎPAA transactions (Claims, Enrollment, Premium Payment, Prior Authorization, Claims Attachments). The meeting will also include a discussion of: the status of initial implementation of Operating Rules for Electronic Funds Transfer and Electronic Remittance Advice, which began January 1, 2014; the ICD-10 transition, in particular, the use of ICD-10 by property/ casualty and workers' compensation programs; plans for adoption and use of Health Plan ID; and a review of recommendations from the Designated Standards Maintenance Organizations (DSMO) regarding the Pharmacy Prior Authorization Standard.

Contact Person For More Information: Debbie M. Jackson, Acting Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 2339 Toledo Road, Room 2402, Hyattsville, Maryland 20782, telephone (301) 458–4614 or Kamahanahokulani Farrar, Centers for Medicare and Medicaid Services, Office of E-Health Standards and Services, 7500 Security Boulevard, Baltimore, Maryland, 21244, telephone (410) 786–6711. Program information as well as summaries of meetings and a roster of committee members are available on the NCVHS home page of the HHS Web site: http://www.ncvhs.hhs.gov/, where further information including an agenda will be posted when available.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on (301) 458–4EEO (4336) as soon as possible.

Dated: January 24, 2014.

#### James Scanlon,

Deputy Assistant Secretary for Planning and Evaluation (Science and Data Policy), Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 2014–02067 Filed 1–30–14; 8:45 am] BILLING CODE 4151–05–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## National Committee on Vital and Health Statistics: Meeting Full Committee

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting.

Name: National Committee on Vital and Health Statistics (NCVHS), Full Committee Meeting.

Time and Date: February 20, 2014 9:00 a.m.-5:30 p.m. EDT. February 21, 2014 8:00 a.m.-12:00 p.m. EDT.

Place: Hubert H. Humphrey Building, 200 Independence Avenue SW., Room 705A, Washington, DC 20201. Public attendees should call (202) 690–7100 for admission to the meeting room on the day of the meeting.

Status: Open.

Purpose: The purpose of this meeting is to review NCVHS Status of Activities, to strategically plan for 2014 objectives and deliverables, and review and approve three action items: (1) The Committee's HIPAA Report to Congress; (2) a recommendation letter on population health data standards; and, (3) a recommendation letter on capacity submitted by the Working Group on Data Access and Use. The Committee will also be briefed on a presentation given to the HHS Data Council on the Committee's strategic plans to Support Communities as Learning Health Systems. The Working Group on HHS Data Access and Use will continue strategic discussions on community data issues.

The times shown above are for the full Committee meeting. Subcommittee issues will be included as part of the Full Committee schedule and identified as "blocks" on the afternoon of the first day and morning the second day. Agendas for these block sessions will be developed later and posted on the NCVHS Web site (URL below) when available.

Contact Person For More Information: Substantive program information may be obtained from Debbie M. Jackson, Acting Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 2339 Toledo Road, Room 2402, Hyattsville, Maryland 20782, telephone (301) 458-4614 or Kamahanahokulani Farrar, Centers for Medicare and Medicaid Services, Office of E-Health Standards and Services, 7500 Security Boulevard, Baltimore, Maryland, 21244, telephone (410) 786-6711. Summaries of meetings and a roster of committee members are available on the NCVHS home page of the HHS Web site: http://www.ncvhs.hhs.gov/, where further information including an agenda will be posted when available.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on (301) 458–4EEO (4336) as soon as possible.

Dated: January 24, 2014.

#### James Scanlon,

Deputy Assistant Secretary for Planning and Evaluation (Science and Data Policy), Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 2014–02070 Filed 1–30–14; 8:45 am] BILLING CODE 4151–05–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[30Day-14-14BE]

## Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call (404) 639–7570 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

#### **Proposed Project**

CDC Worksite Health Scorecard— New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) is establishing the Worksite Health Scorecard, an online organizational assessment tool, to enable employers to assess the number of evidence-based health promotion