mine dust consist of interstitial and obstructive pulmonary diseases (79 FR 24819). Interstitial lung diseases, like coal workers' pneumoconiosis (CWP) and silicosis, have a significant latency period between exposure and disease. The health effects from exposure to respirable coal mine dust may not be realized for a decade or more until the disease becomes clinically apparent. In addition, the chronic effects of interstitial lung diseases, such as CWP and silicosis, may progress or worsen even after miners are no longer exposed to respirable coal mine dust. Thus, miners' exposure to respirable coal mine dust before final implementation of the Dust rule on August 1, 2016, may continue to contribute to the development of lung diseases in coal miners. New miners hired after August 1, 2016, are the only cohort of coal miners who are unaffected by exposures that occurred before full implementation of the Dust rule.

In the preamble to the Dust rule, MSHA stated its intent to take the lead in conducting a retrospective study beginning February 1, 2017 (79 FR 24867), with an unspecified completion date. Since the Dust rule went into effect, MSHA has analyzed more than 250,000 respirable dust samples taken by mine operators who use the CPDM and by MSHA inspectors who use the gravimetric sampler. MSHA's analysis shows that more than 99 percent of the samples were in compliance with the MSHA respirable coal mine dust standards.

The sample data allow MSHA to evaluate the effectiveness of dust controls in mines and whether the rule results in reduced levels of respirable coal dust. However, due to the latency between exposure and disease, MSHA likely will not be able to evaluate fully the health effects of the rule for a decade or more.

While the Agency continues to evaluate the respirable dust samples, MSHA also is seeking comments, data, and information from stakeholders to assist the Agency in developing a framework to assess the health effects of the Dust rule and its impact on the health protections provided to coal miners going forward. With respect to suggested elements for a framework, commenters should be specific and include detailed rationales and supporting documentation, if any. Throughout the comment period, MSHA will continue to consult with interested parties and the Department of Health and Human Services' National Institute for Occupational Safety and Health (NIOSH), as it collects and evaluates all available information, comments in response to this RFI, respirable coal mine dust sampling data, and compliance rates for controlling exposure to coal mine dust.

III. Engineering Controls and Best Practices

As mentioned, since the Dust rule's publication and implementation, MSHA has continually evaluated respirable dust controls and best practices for compliance with the rule's requirements. The Agency has met with mine operators and miners to provide mine-specific compliance and technical assistance. MSHA also held a MSHA/NIOSH-sponsored meeting on engineering controls and best practices on December 6, 2016. Technical assistance materials and other materials from the meeting are available on MSHA's website at *https://www.msha.gov.*

MSHA intends to continue its consultations and will continue to offer technical assistance on best practices for controlling coal mine dust and quartz exposures. MSHA is interested in the engineering controls and best practices that mine operators find most effective to achieve and maintain the required respirable coal mine dust and quartz levels—particularly those practices that can be replicated throughout coal mines nationwide to achieve similar results.

IV. Data Request

The purpose of this RFI is to solicit comments, data, and information from industry, labor, NIOSH, and other stakeholders to assist MSHA in developing the framework for a study to assess the health effects of the Dust rule. Commenters should be specific about any recommendations they offer, including detailed rationales and supporting documentation.

V. National Academy of Sciences Study

MSHA notes that in the Explanatory Statement to the 2016 Consolidated Appropriations Act (Pub. L. 114–113), Congress directed NIOSH to charter a National Academy of Sciences (NAS) study to examine and describe: Current monitoring and sampling protocols and requirements to understand miners' occupational exposure to respirable coal mine dust in the United States and other industrialized countries; coal mine dust composition and application procedures, including the impact of new rock dust mixtures and regulatory requirements; monitoring and sampling technologies, along with sampling protocols and frequency; and the efficacy of those technologies and protocols in aiding decisions regarding the control of respirable coal mine dust and mine worker exposure. Congress directed MSHA to provide assistance and necessary data to NAS for its study, which the Agency has done and continues to do when requested. MSHA will evaluate the results of the NAS study after the report is final.

David G. Zatezalo,

Assistant Secretary of Labor for Mine Safety and Health.

[FR Doc. 2018–14536 Filed 7–6–18; 8:45 am]

BILLING CODE 4520–43–P

DEPARTMENT OF VETERANS AFFAIRS

38 CFR Part 17

Exclusion of Gender Alterations From the Medical Benefits Package

AGENCY: Department of Veterans Affairs.

ACTION: Petition for Rulemaking and request for comments.

SUMMARY: On May 9, 2016, the Department of Veterans Affairs (VA) received a Petition for Rulemaking petitioning VA to amend its medical regulations by removing a provision that excludes ''gender alterations'' from its medical benefits package. The effect of the amendment sought by the petitioners would be to authorize gender alteration surgery as part of VA care when medically necessary. VA seeks comments on the petition to assist in determining whether to amend the medical benefits package and eliminate the exclusion of gender alteration from VA's medical benefits package.

DATES: Comments must be received/submitted on or before September 7, 2018.

ADDRESSES: Written comments may be submitted through *http://www.regulations.gov;* or by mail or hand delivery to Director, Office of Regulation Policy and Management (00REG), Department of Veterans Affairs, 810 Vermont Ave. NW, Room 1063B, Washington, DC 20420; or by fax to (202) 273–9026. Comments should indicate that they are submitted in response to ''Notice of Petition for Rulemaking and request for comments—Exclusion of Gender Alterations from the Medical Benefits Package.'' Copies of comments received will be available for public inspection in the Office of Regulation Policy and Management, Room 1063B, between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday (except holidays). Please call (202) 461–4902 for an appointment. (This is not a toll-free number.) During the comment period, comments may

also be viewed online through the Federal Docket Management System (FDMS) at *http://www.regulations.gov.*

FOR FURTHER INFORMATION CONTACT: Michael Shores, Director, Office of Regulation Policy and Management, Office of the Secretary, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington DC, 20420; (202) 461–4921.

SUPPLEMENTARY INFORMATION: Section 1710 of title 38 United States Code (U.S.C.) requires VA to ''furnish hospital care and medical services which the Secretary determines to be needed'' for eligible veterans. In 1999, VA promulgated 38 CFR 17.38, establishing the Department's medical benefits package for veterans enrolled in VA's health care system. 64 FR 54207 (Oct. 6, 1999). The regulation describes the types of medical care and services available for such veterans. Care referred to in the medical benefits package is provided to individuals only if it is determined by appropriate healthcare professionals that the care is needed to promote, preserve, or restore the health of the individual and is in accord with generally accepted standards of medical practice. 38 CFR 17.38(b). Paragraph (c) of that section provides a list of medical services the medical benefits package does not include. Paragraph (c)(4) explicitly excludes ''gender alterations'' from the medical benefits package.

On May 9, 2016, VA received a Petition for Rulemaking petitioning VA to amend its medical regulations by removing the exclusion of ''gender alterations'' from its medical benefits package. The petition asks VA to remove 38 CFR 17.38(c)(4), allowing VA to provide gender alteration surgeries.

As part of its ongoing consideration of the petition, VA now seeks public comment on the petition and on whether ''gender alterations'' should be included in the medical benefits package. On February 22, 2018, the Department of Defense issued a report that considered the efficacy of gender alteration surgery as treatment for gender dysphoria. That report noted considerable scientific uncertainty and overall lack of high quality scientific evidence demonstrating the extent to which transition-related treatments such as sex reassignment surgery remedy the multifaceted mental health problems associated with gender dysphoria.

Commenters are specifically invited to address the following questions:

What evidence is available about the safety and effectiveness of gender alterations for the treatment of gender dysphoria and how reliable is that evidence?

Given the challenge of the high rates of Veteran suicide, what does the evidence, including peer-reviewed evidence, suggest about the impact of gender alterations on the rates of suicide and suicide ideation among those suffering from gender dysphoria?

Given that any addition to the medical benefits package will have an associated cost and burden on existing specialists, especially urological and vascular surgeons and other highly trained specialists who are already in shorty supply nationwide, what is the potential impact of adding ''gender alterations'' on Veterans' access to care, particularly for Veterans facing life-threatening medical conditions waiting to see surgical specialists?

We are providing a 60-day period from the date of publication of this **Federal Register** Notice for the public to submit comments on this subject. VA will consider the comments received, and then determine whether to propose a regulatory change in response to the Petition for Rulemaking. VA will announce any action it takes in the **Federal Register**.

Signing Authority

The Secretary of Veterans Affairs, or designee, approved this document and authorized the undersigned to sign and submit the document to the Office of the Federal Register for publication electronically as an official document of the Department of Veterans Affairs. Jacquelyn Hayes-Byrd, Acting Chief of Staff, Department of Veterans Affairs, approved this document on June 19, 2018, for publication.

Michael Shores,

Director, Office of Regulation Policy & Management, Office of the Secretary, Department of Veterans Affairs.

[FR Doc. 2018–14629 Filed 7–6–18; 8:45 am]

BILLING CODE 8320–01–P

POSTAL SERVICE

39 CFR Part 111

New Mailing Standards for Mailpieces Containing Liquids

AGENCY: Postal Service™.

ACTION: Proposed rule.

SUMMARY: The Postal Service is proposing to revise *Mailing Standards of the United States Postal Service,* Domestic Mail Manual (DMM) section 601.3.4 to provide for more rigorous packaging requirements for mailpieces containing liquids.

DATES: Submit comments on or before August 8, 2018.

ADDRESSES: Mail or deliver written comments to the manager, Product Classification, U.S. Postal Service, 475 L'Enfant Plaza SW, Room 4446, Washington, DC 20260–5015. If sending comments by email, include the name and address of the commenter and send to *ProductClassification@usps.gov* with a subject line of ''New Standards for Liquids''. Faxed comments are not accepted. You may inspect and photocopy all written comments, by appointment only, at USPS Headquarters Library, 475 L'Enfant Plaza SW, 11th Floor North, Washington, DC 20260. These records are available for review Monday through Friday, 9 a.m.–4 p.m., by calling 202–268–2906.

FOR FURTHER INFORMATION CONTACT: Direct questions to Wm. Kevin Gunther at *wkgunther@uspis.gov* or phone at (202) 268–7208, or Michelle Lassiter at *michelle.d.lassiter@usps.gov* or phone at (202) 268–2914.

SUPPLEMENTARY INFORMATION: The Postal Service and United States Postal Inspection Service (USPIS) have observed an increased frequency of incidents involving containers of liquids rupturing while in Postal Service networks. A typical result of these incidents is damage to surrounding mailpieces and to Postal Service equipment.

When responding to incidents involving liquid spills, Postal Service employees frequently note that mailpieces containing liquids are often not marked on the outer mailing container as required by DMM 601.3.4. Many of these leaking mailpieces contain plastic primary receptacles. Mailers often do not consider plastic primary receptacles to be breakable, and therefore do not cushion these primary receptacles with absorbent material or include secondary containers, as specified by DMM 601.3.4.

The Postal Service and USPIS have also observed that spills of non-hazardous materials in relatively small quantities can result in damage to surrounding mailpieces and cause temporary equipment shutdowns. This is especially true with viscous or oily substances, such as oils and lotions. These materials are often mailed by First-Class Package Service®. When ruptured, they will frequently leak onto other lightweight mailpieces containing photographs and documents.

This proposed revision would require mailers of all liquids in nonmetal containers, regardless of volume, to provide triple packaging, including