

New Jersey Avenue SE, Room PL-401, Washington, DC 20590-0001.

• *Instructions:* All submissions must include the agency name and docket numbers.

FOR FURTHER INFORMATION CONTACT:

Jordan Katz, Community Planner, U.S. DOT Volpe Center, Telephone (617) 494-3783 or email rdtplan@dot.gov.

SUPPLEMENTARY INFORMATION: 49 U.S.C. Section 6503 requires that the Secretary of Transportation develop a 5-year transportation research and development strategic plan to guide future Federal transportation research and development activities. The statute states that the strategic plan shall describe how the plan furthers the primary purpose of the transportation research and development program.

49 U.S.C. Chapter 65 outlines the following primary purposes of transportation research:

- Promoting safety
- Improving mobility of people and goods
- Reducing congestion
- Improving the durability and extending the life of transportation infrastructure
- Preserving the existing transportation system
- Preserving the environment
- Reducing transportation cybersecurity risks

DOT is in the process of updating its strategic plan for FY 2022-2026 and released a Draft Strategic Framework in December 2021, which outlined the following six draft DOT Strategic Goals:

- Safety
- Economic strength and global competitiveness
- Equity
- Climate and sustainability
- Transformation
- Organizational excellence

The Draft Strategic Framework can be accessed at <https://www.transportation.gov/dot-strategic-plan>.

In order to align its research strategy and programs with the Department's goals, DOT is developing a new Research, Development, and Technology (RD&T) Strategic Plan for FY2022-2026.

OST-R invites the public to provide comments to inform the development of the 5-year strategic plan for transportation RD&T. Comments should regard appropriate RD&T activities to meet the purposes and considerations listed above and/or emerging RD&T challenges, opportunities, and priorities that DOT RD&T should address over the next five years. In particular, comments may respond to any or all of the following questions:

1. How should DOT prioritize and invest in research activities over the next five years? Over the next 30 years?

2. What types of research activities should DOT undertake to meet its strategic goals?

3. What key social, demographic, economic, technological, and/or other trends influence transportation today and into the future?

4. What emerging challenges or opportunities or knowledge gaps in transportation warrant additional Federal RD&T activities or investments?

5. How can DOT best lead and coordinate its RD&T activities with Federal, State, local, tribal, private sector, non-profit institutions, and international partners?

6. What activities should DOT adopt to facilitate deployment of DOT research results into the U.S. transportation system?

7. Is there anything else you want to share or say regarding DOT's research portfolio and activities?

Issued on December 23, 2021.

Jordan Wainer Katz,
Community Planner.

[FR Doc. 2021-28283 Filed 12-29-21; 8:45 am]

BILLING CODE 4910-9X-P

DEPARTMENT OF THE TREASURY

Internal Revenue Service

Proposed Collection; Requesting Comments on Notice 2021-57

AGENCY: Internal Revenue Service (IRS), Treasury.

ACTION: Notice and request for comments.

SUMMARY: The Internal Revenue Service, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995. The IRS is soliciting comments concerning Notice 2021-57, Funding relief for multiemployer defined benefit pension plans under the American Rescue Plan Act of 2021.

DATES: Written comments should be received on or before February 28, 2022 to be assured of consideration.

ADDRESSES: Direct all written comments to Andres Garcia, Internal Revenue Service, Room 6526, 1111 Constitution Avenue NW, Washington, DC 20224. You must reference the information collection's title, form number, reporting or record-keeping requirement

number, and OMB number in your comment.

FOR FURTHER INFORMATION CONTACT:

Requests for additional information or copies of the notice should be directed to Jon Callahan, (737) 800-7639, at Internal Revenue Service, Room 6526, 1111 Constitution Avenue NW, Washington, DC 20224, or through the internet at jon.r.callahan@irs.gov.

SUPPLEMENTARY INFORMATION:

The IRS is currently seeking comments concerning the following information collection tools, reporting, and record-keeping requirements:

Title: Funding relief for multiemployer defined benefit pension plans under the American Rescue Plan Act of 2021.

OMB Number: 1545-2300.

Notice Number: 2021-57.

Abstract: The American Rescue Plan Act of 2021 (ARP), P.L. 117-2, sections 9701, 9702, and 9703 provide elective funding relief for multiemployer defined benefit pension plans to address the continued impact of COVID-19. This notice provides guidance for sponsors of multiemployer defined benefit pension plans on the elections under sections 9701 and 9702 of the ARP Act, and the relief provided under section 9703 of the ARP Act, relating to Internal Revenue Code (IRC) sections 431 and 432.

Current Actions: There is no change to the existing collection.

Type of Review: Extension of a currently approved collection.

Affected Public: Business or other for-profit organizations, and not-for-profit institutions.

Estimated Number of Responses: 937.

Estimated Time per Respondent: 58 minutes.

Estimated Total Annual Burden Hours: 896.

The following paragraph applies to all of the collections of information covered by this notice:

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection of information displays a valid OMB control number. Books or records relating to a collection of information must be retained as long as their contents may become material in the administration of any internal revenue law. Generally, tax returns and tax return information are confidential, as required by 26 U.S.C. 6103.

Request for comments: Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on:

(a) Whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Approved: December 27, 2021.

Jon R. Callahan,

Tax Analyst.

[FR Doc. 2021-28372 Filed 12-29-21; 8:45 am]

BILLING CODE 4830-01-P

DEPARTMENT OF VETERANS AFFAIRS

Tiered Pharmacy Copayments for Medications; Calendar Year 2022 Update

AGENCY: Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: This Department of Veterans Affairs (VA) notice updates the information on Tier 1 medications.

FOR FURTHER INFORMATION CONTACT: Mr. Joseph Duran, Director of Policy and Planning, Office of Community Care (13BOA1), Veterans Health Administration, 3773 Cherry Creek North Drive, Denver, CO 80209, 303-370-1637. This is not a toll-free telephone number.

SUPPLEMENTARY INFORMATION: Section 17.110 of title 38, CFR, governs copayments for medications that VA provides to Veterans. Section 17.110 provides the methodologies for establishing the copayment amount for each 30-day or fewer supply of medication provided by VA on an outpatient basis (other than medication administered during treatment).

Tier 1 medication means a multi-source medication that has been identified using the process described in paragraph (b)(2) of this section. Not less than once per year, VA will identify a subset of multi-source medications as Tier 1 medications. Only medications that meet all of the criteria in 38 CFR 17.110(b)(2)(i), (ii) and (iii) will be eligible to be considered Tier 1 medications, and only those medications that meet all of the criteria in paragraph (b)(2)(i) of this section will be assessed using the criteria in paragraphs (b)(2)(ii) and (iii).

Based on the methodologies set forth in § 17.110, this notice updates the list of Tier 1 medications for Calendar Year 2022. The Tier 1 medication list is posted on VA's Community Care website at the following link: https://www.va.gov/COMMUNITYCARE/revenue_ops/copays.asp under the heading "Tier 1 Copay Medication List."

The following table is the Tier 1 Copay Medication List that is effective January 1, 2022, and will remain in effect until December 31, 2022.

Condition	VA product name
Arthritis and Pain	Aspirin Buffered Tablet. Aspirin Chewable Tablet. Aspirin Enteric-Coated (EC) Tablet. Allopurinol Tablet. Celecoxib Capsule. Diclofenac Tablet. Ibuprofen Tablet. Meloxicam Tablet. Naproxen Tablet.
Blood Thinners and	Clopidogrel Bisulfate Tablet.
Platelet Inhibitors	Warfarin Sodium Tablet.
Cholesterol	Atorvastatin Tablet. Ezetimibe Tablet. Pravastatin Tablet. Rosuvastatin Calcium tablet. Simvastatin Tablet.
Dementia	Donepezil Tablet.
Diabetes	Glimepiride Tablet. Glipizide Tablet. Metformin Hydrochloride (HCL) Tablet. Metformin HCL 24-Hour Sustained Action (SA) Tablet. Pioglitazone HCL Tablet.
Electrolyte Supplement	Potassium SA Tablet. Potassium SA Dispersible Tablet.
Gastrointestinal Health	Famotidine Tablet. Omeprazole EC Capsule. Pantoprazole Sodium EC Capsule. Psyllium Mucilloid.
Glaucoma and Eye Care	Diclofenac Solution. Dorzolamide 2%/Timolol 0.5% Solution. Latanoprost 0.005% Solution. Carboxymethylcellulose Sodium Solution.
Heart Health and Blood Pressure	Amlodipine Tablet. Aspirin (see Arthritis & Pain). Atenolol Tablet. Carvedilol Tablet. Chlorthalidone Tablet. Clonidine Tablet. Digoxin Tablet. Diltiazem 24-Hour Capsule. Diltiazem HCL Tablet.