

2. How could this document better identify and characterize the health hazards of exposures to wildland fire smoke based on the available scientific literature in Chapter 3? Is there additional scientific information to be considered regarding the adverse health endpoints associated with exposure to wildland fire smoke? Please provide scientific references to support your response as necessary.

3. What additional information should NIOSH consider adding or how should NIOSH modify the discussion of exposure assessment methods for wildland fire smoke (based on PM<sub>2.5</sub> airborne concentration, and when desired, other airborne exposures) to measure outdoor worker exposures in Chapter 4? What are the barriers to employers to implement these recommended methods? Please provide scientific evidence to support your response as necessary.

4. How can the recommendation in Chapter 4 to use the air quality index (AQI) for PM<sub>2.5</sub> to define exposure control categories be better explained and supported from both a scientific and health communications standpoint? Please provide scientific evidence to support your response as necessary.

5. What additional information should NIOSH consider to improve the strategies identified in Chapter 5 for controlling exposure to wildland fire smoke (e.g., engineering controls, work practices, personal protective equipment) to make them more effective and reduce barriers to implementation? What additional controls could be considered to protect outdoor workers from wildland fire smoke? Please provide scientific evidence to support your response as necessary.

6. Do the recommendations in Chapter 5 adequately address the protection of potentially disadvantaged or at-risk outdoor workers, such as persons with pre-existing health conditions (e.g., asthma, cardiovascular disease), migrant workers, persons of lower socioeconomic status, and elderly or minor workers? If not, how could the recommendations be changed to better protect these populations? Are there additional recommendations to consider to protect these at-risk workers?

7. How could the recommendations in Chapter 5 better address accessibility and feasibility for outdoor workers and employers?

8. What are the potential barriers to the understandability of the recommendations in Chapter 5 for outdoor workers and employers? When developing supplementary educational materials to support the implementation

of these recommendations, how can NIOSH best address those barriers?

9. What other research needs should be considered in addition to those included in Chapter 6, Research Needs? Please provide a scientific justification for additional research needs.

The draft Hazard Review was developed to provide the scientific rationale for characterizing hazards of exposure to wildland fire smoke for outdoor workers. The draft Hazard Review also provides recommendations and guidance for minimizing exposures and potential health effects associated with wildland fire smoke for outdoor workers.

After the comments received on the draft Hazard Review are considered and addressed, the final Hazard Review will be posted on the NIOSH website.

**Background:** The purpose of the Hazard Review document is to provide an overview of the relevant health effects literature and present evidence-based recommendations to protect outdoor workers, including farm workers, construction workers, oil and gas workers, park rangers, emergency responders, and others from the adverse health effects of occupational exposure to wildland fire smoke. On March 14, 2024, CDC/NIOSH published a Request for Information (RFI) in the **Federal Register** (89 FR 18638). The **Federal Register** notice announced plans to develop a Hazard Review document that summarizes the scientific literature about the health effects from exposures to wildland fire smoke and provides recommendations to protect outdoor workers [NIOSH 2024]. In response to the RFI, NIOSH received 10 comment submissions, all of which were reviewed and considered during the development of this draft Hazard Review. The RFI and comments received are accessible in the docket (CDC-2024-0019, NIOSH-352). In addition to requesting information from the public, the Hazard Review development process involved review and assessment of the scientific literature about exposures to wildland fire smoke, potential health effects, outdoor worker populations at risk, and development or update of recommendations to protect outdoor workers. The information presented in this draft Hazard Review represents the scientific rationale and the current methodology about approaches to assess and control the hazards of wildland fire smoke to outdoor workers. Scientific information related to wildland fire smoke presented in the draft Hazard Review covers the following topics:

- Background on wildland fire smoke

- History of NIOSH and other government organizations' related activity
- Chemical and physical properties of the smoke
- Population of outdoor workers with potential exposure
- Routes of worker exposure
- Health equity
- Health effects of exposure
- Exposure assessment
- Controlling workplace exposures
- Medical surveillance and medical monitoring
- Research needs

#### Reference

NIOSH [2024]. National Institute for Occupational Safety and Health; Outdoor workers exposed to wildland fire smoke; Request for information. 89 FR 18638. <https://www.federalregister.gov/documents/2024/03/14/2024-05403/national-institute-for-occupational-safety-and-health-outdoor-workers-exposed-to-wildland-fire-smoke>.

Dated: September 9, 2024.

**John J. Howard,**

*Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, Department of Health and Human Services.*

[FR Doc. 2024-20763 Filed 9-12-24; 8:45 am]

**BILLING CODE 4163-18-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Notice of Award of a Sole Source Cooperative Agreement To Fund Northwestern Provincial Health Office in Zambia

**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 \$4,450,000, for Year 1 funding to Northwestern Provincial Health Office (NWPHO) in Zambia. The award will provide NWPHO with CDC Technical Assistance and financial support to maintain and sustain the province's overall oversight and quality assurance for the implementation of high-impact HIV combination prevention, treatment, and support services, including clinical, surveillance, and laboratory services as well as to identify and mitigate emerging disease threats for people

living with HIV (PLHIV). Funding amounts for years 2–5 will be set at continuation.

**DATES:** The period for this award will be January 1, 2025, through September 29, 2029.

**FOR FURTHER INFORMATION CONTACT:**

Vance Brown, Global Health Center, Centers for Disease Control and Prevention, 351 Independence Avenue, P.O. Box 320065, Lusaka, Zambia, Telephone: +260-761-428-720, email: [vhu7@cdc.gov](mailto:vhu7@cdc.gov).

**SUPPLEMENTARY INFORMATION:** The sole source award will support the Zambian Ministry of Health (MOH) to achieve and sustain HIV epidemic control gains by providing programmatic oversight, coordination, and direct service delivery in the provision of comprehensive HIV/TB prevention, treatment, and support services, while strengthening health systems for sustainability.

NWPHO is the only entity that can carry out this work, as it is the sole government institution with the mandate to support the health service delivery through capacity building, systems strengthening and oversight for HIV program implementation for the population of the Northwestern Province (NWP) of Zambia by the National Public Health Act of Zambia. NWPHO has been actively implementing PEPFAR programs through support provided by USG-awarded implementing partners funded by USAID. The government-to-government award is only possible to be executed with NWPHO as the registered sub-national provincial health authority in NWP Zambia.

**Summary of the Award**

*Recipient:* Northwestern Provincial Health Office (NWPHO).

*Purpose of the Award:* The purpose of this award is to provide NWPHO with CDC Technical Assistance and financial support to maintain and sustain the province's overall oversight and quality assurance for the implementation of high-impact HIV combination prevention, treatment, and support services, including clinical, surveillance, and laboratory services as well as to identify and mitigate emerging disease threats for PLHIV. The award aims to strengthen capacity development activities, while providing optimal health systems strengthening in support of continued and sustainable HIV epidemic control in Zambia.

*Amount of Award:* The approximate year 1 funding amount will be \$4,450,000 in Federal Fiscal Year (FFY) 2025 funds, subject to the availability of

funds. Funding amounts for years 2–5 will be set at continuation.

*Authority:* This program is authorized under Public Law 108–25 (the United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003) [22 U.S.C. 7601, *et seq.*] and Public Law 110–293 (the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008), and Public Law 113–56 (PEPFAR Stewardship and Oversight Act of 2013).

*Period of Performance:* January 1, 2025, through September 29, 2029.

Dated: September 4, 2024.

**Terrance Perry,**

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

[FR Doc. 2024–20790 Filed 9–12–24; 8:45 am]

**BILLING CODE 4163–18–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Medicare & Medicaid Services**

[CMS–1822–N]

**Medicare Program; Town Hall Meeting on the Fiscal Year 2026 Applications for New Medical Services and Technologies Add-On Payments**

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

**ACTION:** Notice of meeting.

**SUMMARY:** This notice announces a town hall meeting in accordance with the Social Security Act (the Act) to discuss fiscal year (FY) 2026 applications for add-on payments for new medical services and technologies under the hospital inpatient prospective payment system (IPPS). Interested parties are invited to this virtual meeting to present their comments, recommendations, and data regarding whether the FY 2026 new medical services and technologies applications meet the substantial clinical improvement criterion.

**DATES:**

*Meeting Dates:* The New Technology Town Hall meeting announced in this notice will be held virtually on Wednesday, December 11, 2024, and Thursday, December 12, 2024 (the number of presentations will determine if a second day for the meeting is necessary; see the **SUPPLEMENTARY INFORMATION** section for details regarding the second day of the meeting and the posting of the final schedule). The New Technology Town Hall meeting will begin each day at 9 a.m.

eastern standard time (EST) and check-in via online platform will begin at 8:30 a.m. EST.

*Deadline for Registration of Presenters at the New Technology Town Hall Meeting:* The deadline to register to present at the New Technology Town Hall meeting is 5 p.m., EST on Monday, November 4, 2024.

*Deadline for Submission of Agenda Item(s) or Written Comments for the New Technology Town Hall Meeting:* Written comments and agenda items (public comments to be delivered at the New Technology Town Hall meeting) for discussion at the New Technology Town Hall meeting, including agenda items by presenters (presentation slide decks), must be received by 5 p.m. EST on Tuesday, November 12, 2024.

*Deadline for Requesting Special Accommodations:* The deadline to submit requests for special accommodations is 5 p.m., EST on Tuesday, November 12, 2024.

*Deadline for Submission of Written Comments after the New Technology Town Hall Meeting for Consideration in the Fiscal Year (FY) 2026 Hospital Inpatient Prospective Payment System/ Long Term Care PPS (IPPS/LTCH PPS) Proposed Rule:* Individuals may submit written comments after the New Technology Town Hall meeting, as specified in the **ADDRESSES** section of this notice, on whether the service or technology represents a substantial clinical improvement. These comments must be received by 5 p.m. EST on Monday, December 16, 2024, to ensure consideration in the FY 2026 IPPS/LTCH PPS proposed rule.

**ADDRESSES:**

*Meeting Location:* The New Technology Town Hall meeting will be held virtually via live stream technology or webinar and listen-only via toll-free teleconference. Live stream or webinar and teleconference dial-in information will be provided through an upcoming listserv/email notice and will appear on the final meeting agenda, which will be posted on the New Technology website when available at: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/newtech.html>. Continue to check the website for updates.

*Registration and Special Accommodations:* Individuals wishing to present at the meeting must follow the instructions located in section III. of this notice. Individuals who need special accommodations should send an email to [newtech@cms.hhs.gov](mailto:newtech@cms.hhs.gov).

*Submission of Agenda Item(s) or Written Comments for the New Technology Town Hall Meeting:* Each