Dated: February 1, 2013.

#### Patricia L. Toppings,

OSD Federal Register Liaison Officer, Department of Defense.

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#### **DEPARTMENT OF DEFENSE**

### Defense Acquisition Regulations System

#### Waiver for Certain Defense Items Produced in the United Kingdom

**AGENCY:** Defense Acquisition Regulations System, Department of

Defense (DoD).

ACTION: Notice.

SUMMARY: The Under Secretary of Defense (Acquisition, Technology, and Logistics) is waiving the statutory limitation of 10 U.S.C. 2534 for certain defense items produced in the United Kingdom (UK). The law limits DoD procurement of certain items to sources in the national technology and industrial base. The waiver will permit procurement of enumerated items from sources in the UK, unless otherwise restricted by statute.

**DATES:** This waiver is effective beginning March 1, 2013 until February 28, 2014.

# FOR FURTHER INFORMATION CONTACT: Ms. Patricia Foley, OUSD (AT&L) Director, Office of the Defense Procurement and Acquisition Policy, Contract Policy and International Contracting, Room 5E621, 3060 Defense Pentagon, Washington, DC 20301–3060, telephone (703) 693–1145.

#### SUPPLEMENTARY INFORMATION:

Subsection (a) of 10 U.S.C. 2534 provides that the Secretary of Defense may procure the items listed in that subsection only if the manufacturer of the item is part of the national technology and industrial base. Subsection (i) of 10 U.S.C. 2534 authorizes the Secretary of Defense to exercise the waiver authority in subsection (d), on the basis of the applicability of paragraph (2) or (3) of that subsection, only if the waiver is made for a particular item listed in subsection (a) and for a particular foreign country. Subsection (d) authorizes a waiver if the Secretary determines that application of the limitation "would impede the reciprocal procurement of defense items under a memorandum of understanding providing for reciprocal procurement of defense items" and if he determines that "that country does not discriminate against defense items produced in the United States to a greater degree than

the United States discriminates against defense items produced in that country." The Secretary of Defense has delegated the waiver authority of 10 U.S.C. 2534(d) to the Under Secretary of Defense (Acquisition, Technology, and Logistics).

DoD has had a Reciprocal Defense Procurement Memorandum of Understanding (MOU) with the UK since 1975, most recently renewed on December 16, 2004.

The Under Secretary of Defense (Acquisition, Technology, and Logistics) finds that the UK does not discriminate against defense items produced in the United States to a greater degree than the United States discriminates against defense items produced in the UK, and also finds that application of the limitation in 10 U.S.C. 2534 against defense items produced in the UK would impede the reciprocal procurement of defense items under the MOU.

Under the authority of 10 U.S.C. 2534, the Under Secretary of Defense (Acquisition, Technology, and Logistics) has determined that application of the limitation of 10 U.S.C. 2534(a) to the procurement of any defense item produced in the UK that is listed below would impede the reciprocal procurement of defense items under the MOU with the UK.

On the basis of the foregoing, the Under Secretary of Defense (Acquisition, Technology, and Logistics) is waiving the limitation in 10 U.S.C. 2534(a) for procurements of any defense item listed below that is produced in the UK. This waiver applies only to the limitations in 10 U.S.C. 2534(a). This waiver applies to procurements under solicitations issued during the period from March 1, 2013 to February 28, 2014. Similar waivers have been granted since 1998, most recently in 2012 (77 FR 2278, January 17, 2012).

## List of Items to Which This Waiver Applies

- 1. Air circuit breakers.
- 2. Gyrocompasses.
- 3. Electronic navigation chart systems.
- 4. Steering controls.
- 5. Pumps.
- 6. Propulsion and machinery control systems.
  - 7. Totally enclosed lifeboats.

#### Manuel Quinones,

Editor, Defense Acquisition Regulations System.

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#### **DEPARTMENT OF DEFENSE**

#### Office of the Secretary

TRICARE; Demonstration Project for Participation in Maryland Multi-Payer Patient Centered Medical Home Program (MMPCMHP) Demonstration

**AGENCY:** Department of Defense (DoD). **ACTION:** Notice of Demonstration Project.

summary: This notice advises interested parties of a Military Health System (MHS) Demonstration project under the authority of Title 10, United States Code, Section 1092, entitled Department of Defense (DoD) Enhanced Access to Patient Centered Medical Home (PCMH): Participation in Maryland Multi-payer Patient Centered Medical Home Program (MMPCMHP).

**DATES:** The demonstration program will be effective 30 days after publication in the **Federal Register** and have a two year duration.

ADDRESSES: TRICARE Management Activity (TMA), TRICARE Regional Office North, 1700 North Moore Street, Suite 1200, Arlington, VA 22209.

FOR FURTHER INFORMATION CONTACT: Capt. John O'Boyle, TMA, TRICARE Regional Office—North, telephone (703) 588–1831.

**SUPPLEMENTARY INFORMATION:** The MHS has adopted the PCMH concept as the strategy of choice for the direct care system and is now using this demonstration to evaluate and provide a PCMH model in the purchased care portion of the TRICARE program.

The MHS defines PCMH as a model of care adopted by the American Academy of Family Physicians, the American Academy of Pediatrics, the American College of Physicians, and the American Osteopathic Association that seeks to strengthen the provider-patient relationship by replacing episodic care with coordinated care and a long-term healing relationship. In PCMH practices, each patient has an ongoing relationship with a personal provider who leads a team that takes collective responsibility for patient care. The provider-led care team is responsible for providing all the patient's health care needs and, when required, arranging for appropriate care with other qualified providers.

A particular challenge in implementing the PCMH concept in the purchased care portion of the TRICARE program has been the inability to distinguish and employ reimbursement methodologies which encourage network providers to accept TRICARE beneficiaries under a Medical Home model. Current contractual incentives encourage network discounts which