most recent fiscal year. Regardless of whether this proposed enforcement policy is adopted in any form, the EAS program contains certain statutory protections that an adversely impacted EAS community may invoke. First, in the event that DOT determines that a community is ineligible because it exceeds the $200 subsidy cap provision in a given fiscal year, the community may petition the Secretary of DOT for a waiver pursuant to Pubic Law 112–97, Sec. 426(e) (c) (Feb. 14, 2012). Under this provision, ''[s]ubject to the availability of funds, the Secretary may waive, on a case-by-case basis, the subsidy-per-passenger cap.'' The law further provides: ''A waiver . . . shall remain in effect for a limited period of time, as determined by the Secretary.'' Second, a community that is deemed ineligible based on the $200 subsidy cap and removed from the program may petition the Secretary for reinstatement into the program in a subsequent year if the community can demonstrate that it will be able to comply with the $200 subsidy cap on an annual basis going forward.

The Department seeks comments from all interested parties regarding this proposed enforcement policy.

Issued in Washington, DC, on April 23, 2014.

Brandon M. Belford,

Deputy Assistant Secretary for Aviation and International Affairs.

[FR Doc. 2014–09830 Filed 4–30–14; 8:45 am]

BILLING CODE 4910–9X–P

SOCIAL SECURITY ADMINISTRATION

20 CFR Part 404

[Docket No. SSA–2006–0140]

RIN 0960–AF35

Revised Medical Criteria for Evaluating Neurological Disorders; Reopening of the Comment Period

AGENCY: Social Security Administration.

ACTION: Proposed rule; reopening of the comment period.

SUMMARY: On February 25, 2014, we published in the **Federal Register** a notice of proposed rulemaking (NPRM) regarding Revised Medical Criteria for Evaluating Neurological Disorders and solicited public comments. We provided a 60-day comment period ending on April 28, 2014. We are reopening the comment period for 30 days.

DATES: The comment period for the notice of proposed rulemaking published on February 25, 2014 (79 FR 10636), is reopened. To ensure that your written comments are considered, we must receive them no later than June 2, 2014.

ADDRESSES: You may submit comments by any one of three methods—Internet, fax, or mail. Do not submit the same comments multiple times or by more than one method. Regardless of which method you choose, please state that your comments refer to Docket No. SSA–2006–0140 so that we may associate your comments with the correct regulation.

CAUTION: You should be careful to include in your comments only information that you wish to make publicly available. We strongly urge you not to include in your comments any personal information, such as Social Security numbers or medical information.

1. *Internet:* We strongly recommend that you submit your comments via the Internet. Please visit the Federal eRulemaking portal at *http://www.regulations.gov*. Use the *Search* function to find docket number SSA–2006–0140. The system will issue you a tracking number to confirm your submission. You will not be able to view your comment immediately because we must post each comment manually. It may take up to a week for your comment to be viewable.

2. *Fax:* Fax comments to (410) 966–2830.

3. *Mail:* Address your comments to the Office of Regulations and Reports Clearance, Social Security Administration, 3100 West High Rise, 6401 Security Boulevard, Baltimore, Maryland 21235–6401.

Comments are available for public viewing on the Federal eRulemaking portal at *http://www.regulations.gov* or in person, during regular business hours, by arranging with the contact person identified below.

FOR FURTHER INFORMATION CONTACT: Cheryl Williams, Office of Medical Policy, Social Security Administration, 6401 Security Boulevard, Baltimore, Maryland 21235–6401, (410) 965–1020. For information on eligibility or filing for benefits, call our national toll-free number, 1–800–772–1213, or TTY 1–800–325–0778, or visit our Internet site, Social Security Online, at *http://www.socialsecurity.gov*.

SUPPLEMENTARY INFORMATION: This document reopens to June 2, 2014, the comment period for the notice of proposed rulemaking that we published on February 25, 2014. We are reopening the comment period in light of the comments that we have received on the proposed rules. If you have already provided comments on the proposed rules, we will consider your comments and you do not need to resubmit them.

Dated: April 25, 2014.

Carolyn W. Colvin,

Acting Commissioner of Social Security.

[FR Doc. 2014–09951 Filed 4–30–14; 8:45 am]

BILLING CODE 4191–02–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

21 CFR Part 884

[Docket No. FDA–2014–N–0297]

Reclassification of Surgical Mesh for Transvaginal Pelvic Organ Prolapse Repair and Surgical Instrumentation for Urogynecologic Surgical Mesh Procedures; Designation of Special Controls for Urogynecologic Surgical Mesh Instrumentation

AGENCY: Food and Drug Administration, HHS.

ACTION: Proposed order.

SUMMARY: The Food and Drug Administration (FDA or the Agency) is proposing to reclassify surgical mesh for transvaginal pelvic organ prolapse (POP) repair from class II to class III. FDA is proposing this reclassification based on the tentative determination that general controls and special controls together are not sufficient to provide reasonable assurance of safety and effectiveness for this device. In addition, FDA is proposing to reclassify urogynecologic surgical mesh instrumentation from class I to class II. The Agency is also proposing to establish special controls for surgical instrumentation for use with urogynecologic surgical mesh. FDA is proposing this action, based on the tentative determination that general controls by themselves are insufficient to provide reasonable assurance of the safety and effectiveness of these devices, and there is sufficient information to establish special controls to provide such assurance. The Agency is reclassifying both the surgical mesh for transvaginal repair and the urogynecologic surgical mesh instrumentation on its own initiative based on new information.

DATES: Submit either electronic or written comments on this proposed order by July 30, 2014. Please see section XIII for the proposed effective date of any final order that may publish based on this proposal.