participation in this Study by any interested GPS/GNSS device manufacturers or other parties whose products incorporate GPS/GNSS devices.

Privacy Act: Anyone can search the electronic form of comments received into any of our dockets by the name of the individual submitting the comment (or signing the comment, if submitted on behalf of an association, business, labor union, etc.). You may review a Privacy Act system of records notice regarding our public dockets in the January 17, 2008 issue of the **Federal Register** (73 FR 3316).

Discussion at the DOT public meetings highlighted the importance of conducting GPS/GNSS receiver acquisition testing which had always been planned as part of the DOT GPS Adjacent Band Compatibility Assessment, but was not feasible due to time constraints during the radiated test conducted at WSMR in April. The goal of the additional lab testing to be conducted at Zeta Associates in Fairfax, Virginia and MITRE Corporation in Bedford, Massachusetts, is:

(1) Receiver characterization for comparison with results obtained in April at the anechoic chamber at the U.S. Army Research Laboratory;

(2) Evaluation of Out Of Band Emission (OOBE) interference at prescribed and proposed levels with Long Term Evolution (LTE) uplink and downlink signals;

(3) GPS/GNSS signal acquisition characterization.

The same instrumentation will be used for these conducted tests at the Zeta Associates laboratory as for the radiated test at the U.S. Army Research Laboratory at WSMR, utilizing the same GNSS playback system and interference generation equipment with modifications to support OOBE and acquisition test requirements;

(4) Antenna characterizations.

The acquisition test will be conducted using 10 MHz LTE signals at four frequencies:

- Base station frequencies of 1525 MHz and 1550 MHz
- Hand-set frequencies of 1620 MHz and 1645 MHz

Information referenced in this Notice and further background can be viewed at: http://www.gps.gov/spectrum/ABC/.

Issued in Washington, DC, on June 29, 2016.

Gregory D. Winfree,

Assistant Secretary for Research and Technology.

[FR Doc. 2016–16136 Filed 7–6–16; 8:45 am] BILLING CODE 4910–9X–P

DEPARTMENT OF THE TREASURY

Fiscal Service

Surety Companies Acceptable on Federal Bonds—Non-Renewal: Greenwich Insurance Company

AGENCY: Bureau of the Fiscal Service, Fiscal Service, Department of the Treasury. **ACTION:** Notice.

SUMMARY: This is Supplement No. 11 to the Treasury Department Circular 570, 2015 Revision, published July 1, 2015, at 80 FR 37735.

FOR FURTHER INFORMATION CONTACT: Surety Bond Section at (202) 874–6850. SUPPLEMENTARY INFORMATION: Notice is hereby given that the Certificate of Authority issued by the Treasury to the above-named company under 31 U.S.C. 9305 to qualify as an acceptable surety on Federal bonds will not be renewed, effective June 30, 2016. Federal bondapproving officials should annotate their reference copies of the Treasury Department Circular 570 ("Circular"), 2015 Revision, to reflect this change.

With respect to any bonds currently in force with the company, bondapproving officers may let such bonds run to expiration and need not secure new bonds. However, no new bonds should be accepted from the company, and bonds that are continuous in nature should not be renewed.

The Circular may be viewed and downloaded through the Internet at www.fiscal.treasury.gov/fsreports/ref/ suretyBnd/c570.htm.

Questions concerning this notice may be directed to the U.S. Department of the Treasury, Bureau of the Fiscal Service, Financial Accounting and Services Division, Surety Bond Section, 3700 East-West Highway, Room 6D22, Hyattsville, MD 20782.

Dated: June 30, 2016.

Melvin Saunders,

Acting Manager, Financial Accounting and Services Branch.

[FR Doc. 2016–15999 Filed 7–6–16; 8:45 am] BILLING CODE 4810–35–P

DEPARTMENT OF VETERANS AFFAIRS

Research Advisory Committee on Gulf War Veterans' Illnesses; Notice of Meeting

The Department of Veterans Affairs (VA) gives notice under the Federal Advisory Committee Act, 5 U.S.C., App. 2, that the Research Advisory Committee on Gulf War Veterans' Illnesses will meet on August 8–9, 2016, in the auditorium of Building 7 at the San Francisco VA Medical Center, 4150 Clement Street, San Francisco, CA, from 9:00 a.m. until 4:15 p.m. (Pacific) on August 8 and from 8:30 a.m. to 1:00 p.m. on August 9. All sessions will be open to the public, and for interested parties who cannot attend in person, there is a toll-free telephone number (800) 767–1750; access code 56978#.

The purpose of the Committee is to provide advice and make recommendations to the Secretary of Veterans Affairs on proposed research studies, research plans, and research strategies relating to the health consequences of military service in the Southwest Asia theater of operations during the Gulf War in 1990–1991.

The Committee will review VA program activities related to Gulf War Veterans' illnesses, and updates on relevant scientific research published since the last Committee meeting. Presentations will include updates on the VA Gulf War Research Program, along with presentations describing new areas of research that can be applied to the health problems of Gulf War Veterans. Also, there will be a discussion of Committee business and activities.

The meeting will include time reserved for public comments each afternoon. A sign-up sheet for 5-minute comments will be available at the meeting. Individuals who wish to address the Committee may submit a 1-2 page summary of their comments for inclusion in the official meeting record. Members of the public may also submit written statements for the Committee's review to Dr. Victor Kalasinsky via email at Victor.Kalasinsky@va.gov. Any member of the public seeking additional information should contact Dr. Kalasinsky, Designated Federal Officer, at (202) 443-5600.

Dated: July 1, 2016.

Jelessa Burney,

Federal Advisory Committee Management Officer.

[FR Doc. 2016–16115 Filed 7–6–16; 8:45 am] BILLING CODE P

DEPARTMENT OF VETERANS AFFAIRS

Cost-Based and Inter-Agency Billing Rates for Medical Care or Services Provided by the Department of Veterans Affairs

AGENCY: Department of Veterans Affairs. **ACTION:** Notice.

SUMMARY: This document updates the Cost-Based and Inter-Agency billing rates for medical care or services provided by the Department of Veterans Affairs (VA) that apply in certain circumstances.

DATES: The rates set forth herein are effective July 7, 2016 and until further notice.

FOR FURTHER INFORMATION CONTACT:

Romona Greene, Chief Business Office (10NB), Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (202) 382–2521. (This is not a toll free number.)

SUPPLEMENTARY INFORMATION: VA's methodology for computing Cost-Based and Inter-Agency billing rates for medical care or services provided by VA is set forth in 38 CFR 17.102(h). Two sets of rates are obtained by applying this methodology, Cost-Based rates and Inter-Agency rates. Cost-Based rates apply to medical care and services that are provided by VA:

(a) In error or based on tentative eligibility;

(b) In a medical emergency;

(c) To pensioners of allied nations; and

(d) For research purposes in circumstances under which the VA Medical Services appropriation is to be reimbursed by the VA Research appropriation.

Inter-Agency rates apply to medical care and services that are provided by VA to beneficiaries of the Department of Defense (DoD) or other Federal agencies, when the care or services provided is not covered by an applicable sharing agreement. The Inter-Agency rates contained in this notice do not apply to sharing agreements between VA and DoD, unless otherwise stated. The calculations for the Cost-Based and Inter-Agency rates are the same with two exceptions. Inter-Agency rates are all-inclusive, and are not broken down into three components (Physician; Ancillary; and Nursing, Room and

Board), and Inter-Agency rates do not include standard fringe benefit costs that cover government employee retirement, disability costs, and return on fixed assets. When VA pays for medical care or services from a non-VA source under circumstances in which the Cost-Based or Inter-Agency Rates would apply if the care or services had been provided by VA, the charge for such care or services will be the actual amount paid by VA for the care or services. Inpatient charges will be at the per diem rates shown for the type of bed section or discrete treatment unit providing the care.

The following table depicts the Cost-Based and Inter-Agency Rates that are effective upon publication of this notice and will remain in effect until the next **Federal Register** notice is published. These rates supersede those established by the **Federal Register** notice published on November 4, 2014, at 79 FR 65479.

	Cost-based rates	Inter-agency rates
A. Hospital Care per inpatient day:		
General Medicine:		
All Inclusive Rate	\$3,720	\$3,553
Physician	445	
Ancillary	969	
Nursing Room and Board	2,306	
Neurology:	_,000	
All Inclusive Rate	3.564	3.401
Physician	522	0,401
Ancillary	941	
Nursing Room and Board	2,101	
Rehabilitation Medicine:	2,101	••••••
All Inclusive Rate	2,477	2,354
	,	,
Physician	281	••••••
Ancillary	757	
Nursing Room and Board	1,439	•••••
Blind Rehabilitation:		
All Inclusive Rate	1,741	1,653
Physician	140	
Ancillary	865	
Nursing Room and Board	736	
Spinal Cord Injury:		
All Inclusive Rate	2,631	2,502
Physician	326	
Ancillary	662	
Nursing Room and Board	1,643	
Surgery:	,	
All Inclusive Rate	5,910	5,642
Physician	651	
Ancillary	1,793	
Nursing Room and Board	3,466	
General Psychiatry:	0,400	
All Inclusive Rate	1,771	1.679
Physician	167	1,079
	279	
Ancillary		
Nursing Room and Board	1,325	
Substance Abuse (Alcohol and Drug Treatment):	4 004	4 705
All Inclusive Rate	1,861	1,765
Physician	178	
Ancillary	431	
Nursing Room and Board	1,252	
Psychosocial Residential Rehabilitation Program:		
All Inclusive Rate	695	662

	Cost-based rates	Inter-agency rates
Physician	44	
Ancillary	73	
Nursing Room and Board	578	
Intermediate Medicine:		
All Inclusive Rate	2,233	2,126
Physician	110	
Ancillary	328	
Nursing Room and Board	1,795	
Poly-trauma Inpatient:		
All Inclusive Rate	3,227	3,057
Physician	367	
Ancillary	986	
Nursing Room and Board	1,874	
B. Nursing Home Care, Per Day:	-	
All Inclusive Rate	1,197	1,138
Physician	37	,
Ancillary	162	
Nursing Room and Board	998	
C. Outpatient Medical Treatments:		
Outpatient Visit (to include Ineligible Dental Care)	335	319
Outpatient Physical Medicine & Rehabilitation Service Visit	212	199
Outpatient Poly-trauma/Traumatic Brain Injury	537	510

Note: Outpatient Prescriptions will be billed at Drug Cost plus Administrative Fee.

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. Gina S. Farrisee, Deputy Chief of Staff, Department of Veterans Affairs, approved this document on June 30, 2016, for publication. Dated: June 30, 2016.

Jeffrey Martin,

Office Program Manager, Office of Regulation Policy & Management, Office of the Secretary, Department of Veterans Affairs. [FR Doc. 2016–15956 Filed 7–6–16; 8:45 am] BILLING CODE 8320–01–P