NON-PROBABILITY SAMPLE

Category of respondent/activity	Number of respondents	Participation time (minutes)	Burden hours
Read Invitation Email	461,540 431,540 60,000	0.5 0.25 ** 5.5	3,846 1,798 5,500
Total Burden Hours			11,144

^{*}The estimate for the Reminder emails is based on the assumption that 50% of the needed respondents will complete the survey online in time to not receive the Reminder email.

** Participant time is based on mean completion time for non-probability panel members during pilot survey fielding.

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. Comments will be 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 has 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 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: April 8, 2019.

Laurie Brimmer,

Senior Tax Analyst.

[FR Doc. 2019-07228 Filed 4-11-19; 8:45 am]

BILLING CODE 4830-01-P

DEPARTMENT OF THE TREASURY

Internal Revenue Service

Proposed Collection; Comment Request for Regulation Project

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 continuing information collections, as required by the Paperwork Reduction Act of 1995. The IRS is soliciting comments concerning annual registration statement identifying separated participants with deferred vested benefits

DATES: Written comments should be received on or before June 11, 2019 to be assured of consideration.

ADDRESSES: Direct all written comments to Laurie Brimmer, Internal Revenue Service, Room 6529, 1111 Constitution Avenue NW, Washington, DC 20224.

FOR FURTHER INFORMATION CONTACT:

Requests for additional information or copies of the form should be directed to Kerry Dennis, at (202) 317–5751 or Internal Revenue Service, Room 6529, 1111 Constitution Avenue NW, Washington DC 20224, or through the internet, at *Kerry Dennis@irs.gov*.

SUPPLEMENTARY INFORMATION:

Title: Annual Registration Statement Identifying Separated Participants with Deferred Vested Benefits.

OMB Number: 1545–2187. Form Number: Form 8955–SSA.

Abstract: Form 8955–SSA, the designated successor to Schedule SSA (Form 5500), is used to satisfy the reporting requirements of Internal Revenue Code section 6057(a). Plan administrators of employee benefit plans subject to the vesting standards of ERISA section 203 use the form to report information about separated participants with deferred vested benefits under the plan. The information is generally given to the Social Security Administration (SSA), which provides the reported information to separated participants

when they file for social security benefits.

Current Actions: There is no change to this form.

Type of Review: Extension of a currently approved collection.

Affected Public: Businesses and other for-profit organizations.

Estimated Number of Respondents: 200,000.

Estimated Time per Respondent: 50 minutes.

Estimated Total Annual Burden Hours: 166,000.

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: April 8, 2019.

Laurie Brimmer,

Senior Tax Analyst.

[FR Doc. 2019-07230 Filed 4-11-19; 8:45 am]

BILLING CODE 4830-01-P

DEPARTMENT OF VETERANS AFFAIRS

Tiered Pharmacy Copayments for Medications 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: Joseph Duran, Director of Policy and Planning, Office of Community Care, Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420; email: *Joseph.Duran2@va.gov*; telephone: (303) 372–4629 (this is not a toll-free 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 less supply of medication provided by VA on an outpatient basis (other than medication administered during treatment).

Section 17.110 provides a list of Tier 1 medications that will be published as a Notice in the **Federal Register** and will be posted on VA's website (www.va.gov/health) at least once per year. Tier 1 medication means a multisource medication that has been identified using the process described in Section 17.110(b)(2). 38 CFR Section 17.110(b)(1)(iv)(B). Based on the

methodologies set forth in Section 17.110, this Notice updates the list of Tier 1 medications.

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 paragraphs (b)(2)(i), (ii), and (iii) of Section 17.110 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). As of the date of this Notice, the Tier 1 medication list based on the methodologies in Section 17.110 will be posted on VA's website (www.va.gov/ health) under the heading "Tier 1 Copay Medication List."

The following table is the Tier 1 Copay Medication List that is effective January 1, 2019, and will remain in effect until December 31, 2019.

Condition	VA product name	
Arthritis and Pain	Aspirin Buffered Tablet, Aspirin Chewable Tablet, Aspirin Enteric Coated Tablet, Allopurinol Tablet, Ibuprofen Tablet, Meloxicam Tablet, Naproxen Tablet.	
Blood Thinners and Platelet Inhibitors	Clopidogrel Bisulfate Tablet, Warfarin Sodium Tablet.	
Bone Health	Alendronate Tablet.	
Cholesterol	Atorvastatin Tablet, Gemfibrozil Tablet, Lovastatin Tablet, Niacin (Slo-Niacin) Tablet, Pravastatin Tablet, Rosuvastatin Calcium Tablet, Simvastatin Tablet.	
Dementia	Donepezil Tablet, Memantine Hydrochloride (HCL) Tablet.	
Diabetes	Glipizide Tablet, Metformin HCL Tablet, Metformin HCL 24-hour (HR) Sustained Action (SA) Tablet, Pioglitazone HCL Tablet.	
Electrolyte Supplement	Potassium SA Tablet, Potassium SA Dispersible Tablet.	
Gastrointestinal Health	Omeprazole Enteric Coated (EC) Capsule, Pantoprazole Sodium EC Capsule, Ranitidine Tablet.	
Glaucoma and Eye Care	Brimonidine 0.2% Solution, Dorzolamide 2%/Timolol 0.5% Solution, Latanoprost 0.005% Solution, Timolol Maleate 0.25% Solution, Timolol Maleate 0.5% Solution.	
Heart Health and Blood Pressure	Amlodipine Tablet, Amiodarone HCL Tablet, Aspirin (see Arthritis and Pain), Atenolol Tablet, Carvedilol Tablet, Chlorthalidone Tablet, Clonidine Tablet, Diltiazem 24-Hour Capsule, Diltiazem HCL Tablet, Enalapril Maleate Tablet, Furosemide Tablet, Hydrochlorothiazide Capsule/Tablet, Hydrochlorothiazide/Lisinopril Tablet, Hydrochlorothiazide/Triamteren Capsule/Tablet, Isosorbide Mononitrate SA Tablet, Lisinopril Tablet, Losartan Tablet, Metoprolol Succinate SA Tablet, Metoprolol Tartrate Tablet, Nifedipine SA Capsule, Nitroglycerin Sublingual Tablet, Prazosin HCL Capsule, Propranolol HCL Tablet, Spironolactone Tablet, Valsartan Tablet, Verapamil HCL Tablet, Verapamil HCL SA Tablet.	
Mental Health	Amitriptyline HCL Tablet, Bupropion HCL Tablet, Bupropion HCL SA (12–HR Sustained Release) Tablet, Bupropion HCL SA (24–HR Extended Release XL) Tablet, Buspirone HCL Tablet, Citalopram Hydrobromide Tablet, Duloxetine HCL EC Capsule, Escitalopram Oxalate Tablet, Fluoxetine Capsule/Tablet, Lithium Carbonate Capsule/Tablet, Mirtazapine Tablet, Paroxetine HCL Tablet, Sertraline HCL Tablet, Trazodone Tablet, Venlafaxine HCL SA Tablet/Capsule.	
Respiratory Condition	Montelukast NA Tablet.	
Seizures	Gabapentin Capsule, Lamotrigine Tablet, Topiramate Tablet.	
Thyroid Conditions	Levothyroxine Sodium Tablet.	
Urologic (Bladder and Prostate) Health	Alfuzosin HCL SA Tablet, Doxazosin Mesylate Tablet, Finasteride Tablet, Oxybutynin Chloride Tablet, Oxybutynin Chloride SA Tablet, Tamsulosin HCL Capsule, Terazosin HCL Capsule.	

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. Robert L. Wilkie, Secretary, Department

of Veterans Affairs, approved this document on March 14, 2019, for publication.

Dated: April 9, 2019.

Luvenia Potts,

Program Specialist, Office of Regulation Policy & Management, Office of the Secretary, Department of Veterans Affairs.

[FR Doc. 2019-07336 Filed 4-11-19; 8:45 am]

BILLING CODE 8320-01-P