

*Orders*, see the Issues and Decisions Memorandum.<sup>9</sup>

### Analysis of Comments Received

A complete discussion of all issues raised in these sunset reviews, including the likelihood of continuation or recurrence of dumping in the event of revocation of the *Orders* and the magnitude of the margins likely to prevail if the *Orders* were to be revoked, is provided in the Issues and Decision Memorandum.<sup>10</sup> A list of the topics discussed in the Issues and Decision Memorandum is attached in the appendix to this notice. The Issues and Decision Memorandum is a public document and is on file electronically via Enforcement and Compliance's Antidumping and Countervailing Duty Centralized Electronic Service System (ACCESS), which is available to registered users at <https://access.trade.gov>. In addition, a complete version of the Issues and Decision Memorandum can be directly accessed at <https://access.trade.gov/frnotices>.

### Final Results of Sunset Reviews

Pursuant to sections 751(c)(1), 752(c)(1) and (3) of the Act, Commerce determines that revocation of the *Orders* would be likely to lead to continuation or recurrence of dumping, and that the magnitude of the dumping margins likely to prevail would be weighted-average dumping margins up to 21.41 percent for Bosnia and Herzegovina, 47.54 percent for Iceland, and 12.27 percent for Malaysia.

### Notification Regarding Administrative Protective Order (APO)

This notice also serves as the only reminder to parties subject to an APO of their responsibility concerning the return or destruction of proprietary information disclosed under APO in accordance with 19 CFR 351.305. Timely notification of the return or destruction of APO materials, or conversion to judicial protective, orders is hereby requested. Failure to comply with the regulations and terms of an APO is a violation which is subject to sanction.

### Notification to Interested Parties

We are issuing and publishing these final results in accordance with sections 751(c), 752(c), and 777(i)(1) of the Act,

<sup>9</sup> See Memorandum, "Issues and Decision Memorandum for the Final Results of the Expedited First Sunset Reviews of the Antidumping Duty Order on Silicon Metal from Bosnia and Herzegovina, Iceland and Malaysia," dated concurrently with, and hereby adopted by, this notice (Issues and Decision Memorandum).

<sup>10</sup> *Id.*

and 19 CFR 351.218 and 19 CFR 351.221(c)(5)(ii).

Dated: June 30, 2026.

**Scot Fullerton,**

*Acting Deputy Assistant Secretary for Antidumping and Countervailing Duty Operations.*

### Appendix

#### List of Topics Discussed in the Issues and Decision Memorandum

- I. Summary
- II. Background
- III. Scope of the *Orders*
- IV. History of the *Orders*
- V. Legal Framework
- VI. Discussion of the Issues
  1. Likelihood of Continuation or Recurrence of Dumping
  2. Magnitude of the Margins of Dumping Likely to Prevail
- VII. Final Results of Sunset Reviews
- VIII. Recommendation

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## DEPARTMENT OF COMMERCE

### National Oceanic and Atmospheric Administration

#### Agency Information Collection Activities; Submission to the Office of Management and Budget (OMB) for Review and Approval; Comment Request; Wage Mariner Hiring Portal

The Department of Commerce will submit the following information collection request to the Office of Management and Budget (OMB) for review and clearance in accordance with the Paperwork Reduction Act of 1995, on or after the date of publication of this notice. We invite the general public and other Federal agencies to comment on proposed, and continuing information collections, which helps us assess the impact of our information collection requirements and minimize the public's reporting burden. Public comments were previously requested via the **Federal Register** on May 1, 2026, during a 60-day comment period. This notice allows for an additional 30 days for public comments.

*Agency:* National Oceanic and Atmospheric Administration, Commerce.

*Title:* Wage Mariner Hiring Portal.

*OMB Control Number:* 0648-0790.

*Form Number(s):* None.

*Type of Request:* Regular submission [extension of a current information collection].

*Number of Respondents:* 1,000.

*Average Hours Per Response:* 60 minutes: 5 minutes to fill our applicant's first and last name and

contact mobile and or home number and email address; 5 minutes to fill out wage mariner license specific information; 40 minutes to enter wage mariner certifications and relevant past work history; and 10 minutes to fill out relevant educational history.

*Total Annual Burden Hours:* 1,000. *Needs and Uses:* This is a request for extension of an existing information collection.

The Wage Mariner Hiring Portal (WMHP) is an internet-based system (website) that is designed to allow an applicant to apply for a "wage mariner" position within the National Oceanic and Atmospheric Administration (NOAA) fleet of maritime vessels. The WMHP system collects basic user information, wage mariner licensing, certifications, and relevant current and or past work history. The Department of Commerce (DOC), through NOAA, Office of Marine and Aviation Operations (OMAO) has special hiring authority under Code of Federal Regulations (CFR), Title 5, Chapter 1, Subchapter A, Part 3, § 3.2 and under the DOC Department Administrative Order (DAO) 202-302 Section 2, Subsection .02a. specific to the hiring of federal wage mariner employees. The regulations allow OMAO to hire wage mariners into excepted service positions within the NOAA fleet of ocean-going vessels in order to maintain adequate operations, maintenance, and safe staffing of the maritime ships.

No physical forms are used in this collection, it is all online. Applicants fill out basic personal, licensure, and work history information into a profile resume. Once their basic profile is complete, applicants can submit this resume to available wage mariner positions as shown on the WMHP website. The application information received is used to determine if the applicant meets the basic job qualification. The applicant's information is then passed on to the hiring official or it is placed in a pool of prospective candidates for future openings. Application information includes: first and last name, contact number and email address, wage mariner licenses and certifications, relevant work history.

*Affected Public:* Individuals or households.

*Frequency:* Once.

*Respondent's Obligation:* Required to Obtain or Retain Benefits.

*Legal Authority:* Code of Federal Regulations (CFR), Title 5, Chapter 1, Subchapter A, Part 3, § 3.2.

This information collection request may be viewed at [www.reginfo.gov](http://www.reginfo.gov). Follow the instructions to view the

Department of Commerce collections currently under review by OMB.

Written comments and recommendations for the proposed information collection should be submitted within 30 days of the publication of this notice on the following website [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function and entering either the title of the collection or the OMB Control Number 0648–0790.

**Sheleen Dumas,**

*Departmental PRA Compliance Officer, Office of the Under Secretary for Economic Affairs, Commerce Department.*

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## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### **TRICARE Demonstration Project for TRICARE Ambulance Add-On Reimbursement for Pre-Hospital Blood Transfusion**

**AGENCY:** Defense Health Agency, Department of Defense (DoD).

**ACTION:** Notice of demonstration project.

**SUMMARY:** The DoD (referred to herein as “the Department”, “Department of War” or “DoW”) is announcing a new demonstration project under the TRICARE program, titled the “TRICARE Demonstration Project for Pre-Hospital Blood Transfusion Ambulance Add-On Reimbursement,” also called “The TRICARE PHBT Demonstration” or “PHBTD”. This five-year demonstration will test the effectiveness of providing separate, unbundled add-on reimbursement to the TRICARE ambulance fee schedule for the cost of medically necessary blood products and professional services administered by authorized ambulance providers in a pre-hospital (ambulance, air or ground) setting. The goal is to evaluate whether this payment modification improves health outcomes for trauma patients, impacts total cost of care, enhances beneficiary access to care and network adequacy, and is a feasible and advisable permanent change to the TRICARE reimbursement methodology for ambulance services.

**DATES:** This demonstration project will be effective January 1, 2027.

*Demonstration Duration:* The demonstration will run for a period of five years, concluding on December 31, 2031. Defense Health Agency (DHA)

may extend the demonstration to allow for further data collection and analysis; extensions will be published in the implementing instructions (TRICARE Manuals). The Director, DHA, may also terminate the demonstration early or make modifications to the demonstration, as described in the **SUPPLEMENTARY INFORMATION.**

**FOR FURTHER INFORMATION CONTACT:** Ms. Elan Green, (303) 676–3907, [elan.p.green.civ@health.mil](mailto:elan.p.green.civ@health.mil).

#### **SUPPLEMENTARY INFORMATION:**

##### **A. Background**

###### *1. Need for Demonstration*

The administration of blood products in the pre-hospital environment, a practice pioneered by military medicine, is a critical, life-saving intervention that stabilizes patients and improves survival rates. As a result of its proven success, civilian Emergency Medical Services (EMS) agencies are increasingly seeking to adopt PHBT protocols. When medically necessary, pre-hospital blood transfusions are extremely important and there is extensive literature that discusses the life-saving effects of receiving PHBT. Despite the potential health benefits of receiving PHBT, not all TRICARE beneficiaries have access to PHBT.

This demonstration is prompted by recent Federal action and significant stakeholder feedback regarding reimbursement for pre-hospital blood. The Centers for Medicare & Medicaid Services recently finalized a rule that expands the definition of Advanced Life Support, Level 2 (ALS2) to include PHBT, and bundles the payment into the existing ALS2 rate. Key stakeholder groups, including America’s Blood Centers, the Association for the Advancement of Blood & Biotherapies, and the Prehospital Blood Transfusion Initiative Coalition, argued that this bundled payment is financially unsustainable for most EMS agencies. These groups highlight that the bundled rate fails to cover the high costs of blood products, initial equipment, and annual program maintenance. This financial barrier may prevent the widespread adoption of PHBT, limiting access for all patients, including TRICARE beneficiaries.

The Agency’s initial analysis suggests that PHBT may not be adequately reimbursed by the ALS2 rate. Under the Outpatient Prospective Payment System (OPPS), Medicare and TRICARE reimburse hospital outpatient departments approximately \$225 (as of October 1, 2025) for a unit of blood using Healthcare Common Procedure Coding System (HCPCS) code P9010.

This is likely a lower-bound estimate of the overall cost of providing blood in an ambulance for two major reasons: first, although \$225 is a reasonable cost for packed red blood cells, the blood delivered in ambulances is typically low titer O positive whole blood (LTOPWB), which is more expensive. The costs of PHBT in an ambulance may also be higher because of the overhead costs associated with maintaining a blood supply. One researcher reports that the cost of PHBT is approximately \$925 per patient due to both factors. Another researcher found that in 2024, of the EMS agencies that responded to a survey, over 70 percent reported costs over \$500 per unit of blood and that over one-third of those who responded had costs above \$800 (Hurson, 2025). If one bases the cost of a unit of blood on the OPPS allowed amount (\$225), the difference between ALS1 and ALS2 reimbursement (\$237) is more than the cost of the blood. For more expensive blood products that are typically used in an ambulance (such as LTOPWB) the costs of blood alone exceed the \$237 difference.

Even if the additional amount received by ambulance providers for an ALS2 transport relative to an ALS1 (\$237) exceeds the costs of a unit of blood, it does not necessarily mean that there is not a gap in reimbursement because the ALS2 differential also must cover the other costly services that ALS2 patients receive relative to ALS1 patients. To qualify for reimbursement as an ALS2 transport in 2025, an ambulance must provide at least three separate intravenous (IV) administrations of medications or provide at least one of the following eight services: (1) manual defibrillation; (2) endotracheal intubation; (3) a central venous line; (4) cardiac pacing; (5) chest decompression; (6) a surgical airway; (7) an intraosseous line; or (8) PHBT.

###### *2. Current TRICARE Reimbursement for PHBT in Relation to the Cost*

By law, TRICARE reimburses both ground and air ambulance services according to the Medicare Ambulance Fee Schedule (AFS), which bundles the cost of all medical supplies into a single base rate payment. Under the AFS, Medicare and TRICARE pay a base fee and a separate mileage fee for each emergency transport. The level of the base payment for ground ambulances is a function of the type of care provided. For example, in 2025, the Medicare/TRICARE base reimbursement amount for Basic Life Support Emergency transport was \$446.37 while the base payment for ALS1 Emergency transport was \$530.06. Although Medicare does