

Amy McNulty,  
Acting Director, Division of the Executive  
Secretariat.  
[FR Doc. 2018-06432 Filed 3-29-18; 8:45 am]  
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**DEPARTMENT OF HEALTH AND  
HUMAN SERVICES**

**Health Resources and Services  
Administration**

**Agency Information Collection  
Activities: Submission to OMB for  
Review and Approval; Public Comment  
Request; Rural Health Care Services  
Outreach Program Performance  
Improvement and Measurement  
Systems Measures, OMB No. 0915-  
0009—Revision**

**AGENCY:** Health Resources and Services  
Administration (HRSA), Department of  
Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** In compliance with the  
Paperwork Reduction Act of 1995,  
HRSA has submitted an Information  
Collection Request (ICR) to the Office of  
Management and Budget (OMB) for  
review and approval. Comments  
submitted during the first public review  
of this ICR will be provided to OMB.  
OMB will accept further comments from  
the public during the review and  
approval period. This proposed  
information collection was previously  
published in the **Federal Register** on  
November 27, 2017, and allowed 60-  
days for public comment. No public  
comments were received.

**DATES:** Comments on this ICR should be  
received no later than April 30, 2018.

**ADDRESSES:** Submit your comments,  
including the ICR Title, to the desk  
officer for HRSA, either by email to  
*OIRA\_submission@omb.eop.gov* or by  
fax to 202-395-5806.

**FOR FURTHER INFORMATION CONTACT:** To  
request a copy of the clearance requests  
submitted to OMB for review, email Lisa  
Wright-Solomon, the HRSA Information  
Collection Clearance Officer at  
*paperwork@hrsa.gov* or call (301) 443-  
1984.

**SUPPLEMENTARY INFORMATION:**

*Information Collection Request Title:*  
Rural Health Care Services Outreach  
Program Performance Improvement and  
Measurement Systems (PIMS) Measures.

*OMB No.:* 0915-0009—Revision.  
*Abstract:* The Rural Health Care  
Services Outreach (Outreach) Program is  
authorized by Section 330A(e) of the  
Public Health Service (PHS) Act (42  
U.S.C. 254c(e)), as amended, to  
“promote rural health care services  
outreach by expanding the delivery of  
health care services to include new and  
enhanced services in rural areas.” The  
goals for the Outreach Program are as  
follows: (1) Expand the delivery of  
health care services in rural  
communities; (2) deliver health care  
services through a strong consortium, in  
which every consortium member  
organization is actively involved and  
engaged in the planning and delivery of  
services; (3) utilize and/or adapt an  
evidence-based or promising practice  
model(s) in the delivery of health care  
services; and (4) improve population  
health, demonstrate health outcomes  
and sustainability.

*Need and Proposed Use of the  
Information:* The PIMS measures for the  
Outreach Program enable HRSA and the  
Federal Office of Rural Health Policy to  
capture awardee-level and aggregate  
data that illustrate the impact and scope  
of federal funding. The collection of this  
information helps further inform and  
substantiate the focus and objectives of  
the grant program. The measures  
encompass the following topics: (a)  
Access to care; (b) population  
demographics; (c) consortium/network;

(d) sustainability; and (f) project specific  
domains.

There are proposed revisions to the  
previously approved Outreach Program  
PIMS measures. The proposed Outreach  
PIMS measures reflect a reduced  
number of measures including the  
following: 16 process measures  
applicable to all awardees (previously  
22), consolidation of the project-specific  
measures (currently 7, previously 8),  
and 8 clinical measures (previously 9).  
In addition, the proposed measures  
include the addition of two Centers for  
Disease Control and Prevention (CDC)  
calculators: The CDC Heart Age  
calculator and the CDC BMI Percentile  
Calculator for Child and Teen. Data for  
both calculators will be collected on an  
aggregate level and only from awardees  
with applicable projects; the CDC Heart  
Age calculator is specific to awardees  
participating in the Health Improvement  
Special Project while the CDC BMI  
calculator is for projects focusing on  
childhood obesity.

*Likely Respondents:* The respondents  
would be award recipients of the Rural  
Health Care Services Outreach Program.

*Burden Statement:* Burden in this  
context means the time expended by  
persons to generate, maintain, retain,  
disclose or provide the information  
requested. This includes the time  
needed to review instructions; to  
develop, acquire, install and utilize  
technology and systems for the purpose  
of collecting, validating and verifying  
information, processing and  
maintaining information, and disclosing  
and providing information; to train  
personnel and to be able to respond to  
a collection of information; to search  
data sources; to complete and review  
the collection of information; and to  
transmit or otherwise disclose the  
information. The total annual burden  
hours estimated for this ICR are  
summarized in the table below.

**TOTAL ESTIMATED ANNUALIZED BURDEN HOURS**

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Rural Health Care Services Outreach Program Performance Improvement and Measurement Systems (PIMS) Measures .....	25	1	25	3.5	87.5
Total .....	25	.....	25	.....	87.5

Amy McNulty,  
Acting Director, Division of the Executive  
Secretariat.  
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**DEPARTMENT OF HEALTH AND  
HUMAN SERVICES**

**Indian Health Service**

**Request for Public Comment: 60 Day  
Proposed Information Collection:  
Indian Health Service Purchased/  
Referred Care Proof of Residency**

**AGENCY:** Indian Health Service, HHS.  
**ACTION:** Notice and request for  
comments.

**SUMMARY:** In compliance with the  
Paperwork Reduction Act (PRA) of  
1995, which requires 60 days for public  
comment on proposed information  
collection projects, the Indian Health  
Service (IHS) invites the general public  
to take this opportunity to comment on  
the information collection Office of  
Management and Budget (OMB) Control  
Number 0917-XXXX, titled, Purchased/  
Referred Care (PRC) Proof of Residency.  
The purpose of this notice is to allow 60  
days for public comment to be  
submitted directly to OMB. A copy of  
the draft supporting statement is

available at [www.regulations.gov](http://www.regulations.gov) (see  
Docket ID IHS\_FRDOC\_0001).  
**SUPPLEMENTARY INFORMATION:** The IHS  
Office of Resource Access and  
Partnerships Division of Contract Care is  
submitting the proposed information  
collection to OMB for review, as  
required by the PRA. This notice is  
soliciting comments from members of  
the public and affected agencies  
concerning the proposed collection of  
information to: (1) Evaluate whether the  
proposed collection of information is  
necessary for the proper performance of  
the functions of the agency, including  
whether the information will have  
practical utility; (2) Evaluate the  
accuracy of the agency's estimate of the  
burden of the proposed collection of  
information; (3) Enhance the quality,  
utility, and clarity of the information to  
be collected; and (4) Minimize the  
burden of the collection of information  
on those who are to respond; including  
through the use of appropriate  
automated collection techniques of  
other forms of information technology,  
e.g., permitting electronic submission of  
responses.  
*Proposed Collection Title:* 0917-  
XXXX, "Indian Health Service  
Purchased/Referred Care Proof of  
Residency."  
*Type of Information Collection  
Request:* This is a new information

request for a three year approval of this  
new information collection, 0917-  
XXXX.  
*Forms:* Purchase/Referred Care Proof  
of Residency.  
*Title of Proposal:* Purchased/Referred  
Care Program.  
*OMB Control Number:* To be assigned.  
*Need and Use of Information  
Collection:* The IHS PRC Program needs  
this information to certify that health  
care services requested and authorized  
by the IHS have been provided to  
individuals who have provided  
documentation that meets the eligibility  
requirements to receive medical services  
from PRC provider(s); and to serve as a  
legal document for health and medical  
care authorized by the IHS and rendered  
by health care providers under contract  
with the IHS.  
*Agency Form Number:* IHS-XXX (A  
form number will be assigned after  
approval).  
*Members of Affected Public:* Patients.  
*Status of the Proposed Information  
Collection:* New request.  
*Type of Respondents:* Individuals.  
The table below provides: Types of  
data collection instruments, estimation  
to number of respondents, number of  
responses per respondent, annual  
number of responses, average burden  
hour per response, and total annual  
burden hours.

Data collection instrument(s)	Estimated number of respondents	Responses per respondent	Annual number of responses	Average burden hour per response*	Total annual burden hours
Individual Patient Count .....	77,185	1	77,185	3	3,859.25
Total .....	77,185	1	77,185	3	3,859.25

\* For ease of understanding, average burden hours are provided in actual minutes.

There are no direct costs, to  
respondents to report.  
*For Comments:* Submit comments,  
requests for more information on the  
collection, or requests to obtain a copy  
of the data collection instrument and  
instruction to Ms. Evonne Bennett-  
Barnes by one of the following methods:  
• *Mail:* Ms. Evonne Bennett-Barnes,  
Information Collection Clearance  
Officer, Indian Health Service, 5600  
Fishers Lane, STOP 09E70, Rockville,  
MD 20857.  
• *Phone:* (301) 443-4750.  
• *Email:* [Evonne.Bennett-Barnes@ihs.gov](mailto:Evonne.Bennett-Barnes@ihs.gov).  
• *Fax:* 301-594-0899.  
*Comment Due Date:* Your comments  
regarding this information collection are  
best assured of having full effect if  
received within 60 days of the date of  
this publication.

Dated: March 20, 2018.  
**Michael D. Weahkee,**  
*Assistant Surgeon General, U.S. Public Health  
Service, Acting Director, Indian Health  
Service.*  
[FR Doc. 2018-06521 Filed 3-29-18; 8:45 am]  
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**DEPARTMENT OF HEALTH AND  
HUMAN SERVICES**

**National Institutes of Health**

**Center for Scientific Review; Notice of  
Closed Meetings**

Pursuant to section 10(d) of the  
Federal Advisory Committee Act, as  
amended, notice is hereby given of the  
following meetings.  
The meetings will be closed to the  
public in accordance with the  
provisions set forth in sections

552b(c)(4) and 552b(c)(6), Title 5 U.S.C.,  
as amended. The grant applications and  
the discussions could disclose  
confidential trade secrets or commercial  
property such as patentable material,  
and personal information concerning  
individuals associated with the grant  
applications, the disclosure of which  
would constitute a clearly unwarranted  
invasion of personal privacy.  
*Name of Committee:* Center for Scientific  
Review Special Emphasis Panel; Anxiety,  
Depression, and Synaptic Plasticity.  
*Date:* April 9, 2018.  
*Time:* 2:00 p.m. to 3:30 p.m.  
*Agenda:* To review and evaluate grant  
applications.  
*Place:* National Institutes of Health, 6701  
Rockledge Drive, Bethesda, MD 20892  
(Telephone Conference Call).  
*Contact Person:* Brian H. Scott, Ph.D.,  
Scientific Review Officer, National Institutes  
of Health, Center for Scientific Review, 6701