

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 (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.

- *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.*

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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