

A nomination package should include the following information for each nominee:

(1) A letter of nomination from an employer, a colleague, or a professional organization stating the name, affiliation, and contact information for the nominee, the basis for the nomination (*i.e.*, what specific attributes, perspectives, and/or skills does the individual possess that would benefit the workings of the COGME, and the nominee's field(s) of expertise);

(2) A letter of self-interest stating the reasons the nominee would like to serve on COGME;

(3) A biographical sketch of the nominee and a copy of his/her curriculum vitae; and

(4) The name, address, daytime telephone number, and email address at which the nominator can be contacted.

Nominations will be considered as vacancies occur on COGME.

Nominations should be updated and resubmitted every 3 years to continue to be considered for committee vacancies.

HHS strives to ensure that the membership of HHS federal advisory committees is balanced in terms of points of view represented and the committee's function. The Department encourages nominations of qualified candidates from all groups and locations. Appointment to COGME shall be made without discrimination on the basis of age, race, ethnicity, gender, sexual orientation, disability, and cultural, religious, or socioeconomic status.

Jason E. Bennett,

Director, Division of the Executive Secretariat.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Availability of the Department of Health and Human Services FY 2015 Service Contract Inventory

AGENCY: Department of Health and Human Services.

ACTION: Notice of public availability of FY 2015 Service Contract Inventories.

SUMMARY: In accordance with Section 743 of Division C of the Consolidated Appropriations Act of 2010 (Pub. L. 111-117), Department of Health and Human Services (HHS) is publishing this notice to advise the public of the availability of its FY 2015 Service Contract Inventory. This inventory provides information on service contract actions over \$25,000 that was awarded in FY 2015. The information is

organized by function to show how contracted resources are distributed throughout the agency. The inventory has been developed in accordance with guidance issued on November 5, 2010 and December 19, 2011 by the Office of Management and Budget's Office of Federal Procurement Policy (OFPP). OFPP's guidance is available at <http://www.whitehouse.gov/sites/default/files/omb/procurement/memo/service-contract-inventories-guidance-11052010.pdf>. HHS has posted its inventory and a summary of the inventory on the HHS homepage at the following link: <http://www.hhs.gov/grants/contracts/get-ready-to-do-business/service-contract-inventory/index.html>.

FOR FURTHER INFORMATION CONTACT:

Questions regarding the service contract inventory should be directed to Dr. Angela Billups, Associate Deputy Assistant Secretary for Acquisition, Senior Procurement Executive HHS/ Office of the Secretary, Assistant Secretary for Financial Resources at 202-260-6187 or Angela.Billups@hhs.gov.

Angela Billups,

Associate Deputy Assistant Secretary for Acquisition, Senior Procurement Executive, Assistant Secretary for Financial Resources, Office of the Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Office of Direct Service and Contracting Tribes; National Indian Health Outreach and Education, Policy/Budget/Diabetes

Announcement Type: Limited New and Competing Continuation.

Funding Announcement Number: HHS-2016-IHS-NIHOE-1-PBD-0001.

Catalog of Federal Domestic Assistance Number: 93.933.

Key Dates

Application Deadline Date: August 15, 2016.

Review Date: August 22, 2016.

Earliest Anticipated Start Date: September 15, 2016.

Proof of Non-Profit Status Due Date: August 15, 2016.

I. Funding Opportunity Description

Statutory Authority

The Indian Health Service (IHS) is accepting competitive cooperative

agreement applications for the National Indian Health Outreach and Education, Policy/Budget/Diabetes (NIHOE-I) limited competition cooperative agreement program. This award includes the following four components, as described in this announcement: "Line Item 128 Health Education and Outreach funds," "Health Care Policy Analysis and Review," "Budget Formulation," and "Tribal Leaders Diabetes Committee" (TLDC). This program is authorized under the Snyder Act, codified at 25 U.S.C. 13. The TLDC component is authorized by section 330C of the Public Health Service Act, codified at 42 U.S.C. 254c-3. This program is described in the Catalog of Federal Domestic Assistance under 93.933.

Background

The NIHOE-I program carries out health program objectives in American Indian and Alaska Native (AI/AN) communities in the interest of improving Indian health care for all 567 Federally-recognized Tribes, including Tribal governments operating their own health care delivery systems through self-determination contracts with the IHS and Tribes that continue to receive health care directly from the IHS. This program addresses health policy and health program issues and disseminates educational information to all AI/AN Tribes and villages. This program requires that public forums be held at Tribal educational consumer conferences to disseminate changes and updates in the latest health care information. This program also requires that regional and national meetings be coordinated for information dissemination as well as the inclusion of planning and technical assistance and health care recommendations on behalf of participating Tribes to ultimately inform IHS based on Tribal input through a broad based consumer network.

Purpose

The purpose of this IHS cooperative agreement is to further IHS's mission and goals related to providing quality health care to the AI/AN community through outreach and education efforts with the sole outcome of improving Indian health care. This award includes the following four health services components: Line Item 128 Health Education and Outreach funds, Health Care Policy Analysis and Review, Budget Formulation, and TLDC.

Limited Competition Justification

Competition for the award included in this announcement is limited to