

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Solicitation of Nominations for Appointment to the World Trade Center Health Program Scientific/Technical Advisory Committee (WTCHP-STAC)

ACTION: Notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC), in accordance with provisions of the James Zadroga 9/11 Health and Compensation Act of 2010 (42 U.S.C. 300mm-1(a)(2)), is seeking nominations for membership on the World Trade Center (WTC) Health Program Scientific/Technical Advisory Committee (WTCHP-STAC). The WTCHP-STAC consists of 17 members including experts in fields associated with occupational medicine, pulmonary medicine, environmental medicine, environmental health, industrial hygiene, epidemiology, toxicology, and mental health, and representatives of WTC responders as well as representatives of certified-eligible WTC survivors.

DATES: Nominations for membership on the WTCHP-STAC must be received no later than November 14, 2022. Packages received after this time will not be considered for the current membership cycle.

ADDRESSES: All nominations should be mailed to NIOSH Docket 229-J, c/o Mia Wallace, Committee Management Specialist, National Institute for Occupational Safety and Health (NIOSH), CDC, 1600 Clifton Road NE, Mailstop V24-4, Atlanta, Georgia 30329-4027, or emailed (recommended) to nioshdocket@cdc.gov.

FOR FURTHER INFORMATION CONTACT: Tania Carreón-Valencia, Ph.D., MS, Designated Federal Officer, WTCHP-STAC, CDC, 1600 Clifton Road NE, Mailstop R-12, Atlanta, Georgia 30329-4027; Telephone: (513) 841-4515 (this is not a toll-free number); Email: TCarreonValencia@cdc.gov.

SUPPLEMENTARY INFORMATION: The WTCHP-STAC reviews scientific and medical evidence and makes recommendations to the Administrator of the WTC Health Program on additional Program eligibility criteria and additional WTC-related health conditions, reviews and evaluates policies and procedures used to determine whether sufficient evidence exists to support adding a health condition to the List of WTC-Related Health Conditions, makes

recommendations regarding individuals to conduct independent peer reviews of the scientific and technical evidence underlying a final rule adding a condition to the List of WTC-Related Health Conditions, and provides consultation on research regarding certain health conditions related to the September 11, 2001, terrorist attacks.

Nominations are being sought for individuals who have expertise and qualifications necessary to contribute to accomplishing the Committee's objectives. The Administrator of the WTC Health Program is seeking nominations for members fulfilling the following categories:

- Occupational physician;
- Environmental medicine or environmental health professional; and
- Representative of WTC responders.

Members may be invited to serve for four-year terms. Selection of members is based on candidates' qualifications to contribute to the accomplishment of WTCHP-STAC objectives. More information on the Committee is available at <https://www.cdc.gov/wtc/stac.html>.

The U.S. Department of Health and Human Services (HHS) policy stipulates that committee membership be balanced in terms of points of view represented and the Committee's function. Appointments shall be made without discrimination on the basis of age, race, ethnicity, gender, sexual orientation, gender identity, HIV status, disability, and cultural, religious, or socioeconomic status. Nominees must be U.S. citizens. Current participation on federal workgroups or prior experience serving on a federal advisory committee does not disqualify a candidate; however, HHS policy is to avoid excessive individual service on advisory committees and multiple committee memberships. Committee members are Special Government Employees, requiring the filing of financial disclosure reports at the beginning and annually during their terms. NIOSH identifies potential candidates and provides a slate of nominees for consideration to the Director of CDC for WTCHP-STAC membership each year; CDC reviews the proposed slate of candidates and provides a slate of nominees for consideration to HHS for final selection. HHS notifies CDC; CDC notifies NIOSH; and NIOSH notifies the candidates of their appointments as soon as the HHS selection process is completed. Note that the need for different expertise varies from year to year and a candidate who is not selected in one year may be reconsidered in a subsequent year.

Candidates should submit the following items:

- Current curriculum vitae, including complete contact information (telephone numbers, mailing address, email address);
- The category of membership (environmental medicine or environmental health specialist, occupational physician, pulmonary physician, representative of WTC responders, certified-eligible WTC survivor representative, industrial hygienist, toxicologist, epidemiologist, or mental health professional) that the candidate is qualified to represent;
- A summary of the background, experience, and qualifications that demonstrates the candidate's suitability for the nominated membership category; and
- At least one letter of recommendation from person(s) not employed by the U.S. Department of Health and Human Services. Candidates may submit letter(s) from current HHS employees if they wish, but at least one letter must be submitted by a person not employed by an HHS agency (e.g., CDC, NIH, FDA).

Nominations may be submitted by the candidate him- or herself, or by the person/organization recommending the candidate.

The Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Kalwant Smagh,

Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2022-22212 Filed 10-12-22; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0945-0003-60D]

Agency Information Collection Request; 60-Day Public Comment Request

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health

and Human Services, is publishing the following summary of a proposed collection for public comment.

DATES: Comments on the ICR must be received on or before December 12, 2022.

ADDRESSES: Submit your comments to Sherrette.Funn@hhs.gov or by calling (202) 264-0041.

FOR FURTHER INFORMATION CONTACT:

When submitting comments or requesting information, please include the document identifier OS-0945-0003-60D and project title for reference, to Sherrette A. Funn, email:

Sherrette.Funn@hhs.gov, or call (202) 264-0041 the Reports Clearance Officer.

SUPPLEMENTARY INFORMATION: Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the

following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Title of the Collection: HIPAA Privacy, Security, and Breach Notification Rules, and Supporting Regulations Contained in 45 CFR parts 160 and 164.

Type of Collection: Extension.

OMB No. 0945-0003: Office for Civil Rights (OCR)—Health Information Privacy Division.

Abstract: Office for Civil Rights (OCR) requests approval to extend this existing, approved collection without

changing any collection requirements. In 2021, OCR published a Notice of Proposed Rulemaking (NPRM) proposing modifications to the HIPAA Rules that would affect the hourly burdens associated with the HIPAA Rules. 86 FR 6446. OCR is reviewing public comment received on the NPRM about existing burdens associated with compliance with the HIPAA Rules, available at https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202011-0945-001, and on changes in burden that could result from the modifications proposed in the NPRM. OCR will update this ICR to reflect the input we receive on this notice and through the rulemaking process.

Likely Respondents: HIPAA covered entities, business associates, individuals, and professional and trade associations of covered entities and business associates.

ANNUALIZED BURDEN HOUR TABLE

Section	Type of respondent	Number of respondents	Number of responses per respondent	Average burden hours per response [1]	Total burden hours
160.204	Process for Requesting Exception Determinations (states or persons).	1	1	16	16
164.308	Risk Analysis—Documentation [2]	1,700,000	1	10	17,000,000
164.308	Information System Activity Review—Documentation.	1,700,000	12	0.75	15,300,000
164.308	Security Reminders—Periodic Updates	1,700,000	12	1	20,400,000
164.308	Security Incidents (other than breaches)—Documentation.	1,700,000	52	5	442,000,000
164.308	Contingency Plan—Testing and Revision	1,700,000	1	8	13,600,000
164.308	Contingency Plan—Criticality Analysis	1,700,000	1	4	6,800,000
164.310	Maintenance Records	1,700,000	12	6	122,400,000
164.314	Security Incidents—Business Associate reporting of incidents (other than breach) to Covered Entities.	1,000,000	12	20	240,000,000
164.316	Documentation—Review and Update [3]	1,700,000	1	6	10,200,000
164.404	Individual Notice—Written and Email Notice (drafting) [4].	58,482	1	0.5	29,241
164.404	Individual Notice—Written and Email Notice (preparing and documenting notification).	58,482	1	0.5	29,241
164.404	Individual Notice—Written and Email Notice (processing and sending) [5].	58,482	1,941	0.008	908,108
164.404	Individual Notice—Substitute Notice (posting or publishing) [6].	2,746	1	1	2,746
164.404	Individual Notice—Substitute Notice (staffing toll-free number) [7].	2,746	1	3.42	9,391
164.404	Individual Notice—Substitute Notice (individuals' voluntary burden to call toll-free number for information) [8], [9].	113,264	1	0.125	14,158
164.406	Media Notice [10]	267	1	1.25	334
164.408	Notice to Secretary (notice for breaches affecting 500 or more individuals).	267	1	1.25	334
164.408	Notice to Secretary (notice for breaches affecting fewer than 500 individuals) [11].	58,215	1	1	58,215
164.410	Business Associate notice to Covered Entity—500 or more individuals affected.	20	1	50	1,000
164.410	Business Associate notice to Covered Entity—Less than 500 individuals affected.	1,165	1	8	9,320
164.414	500 or More Affected Individuals (investigating and documenting breach).	267	1	50	13,350
164.414	Less than 500 Affected Individuals (investigating and documenting breach)—affecting 10–499.	2,479	1	8	19,832
164.414	Less than 500 Affected Individuals (investigating and documenting breach)—affecting <10.	55,736	1	4	222,944

ANNUALIZED BURDEN HOUR TABLE—Continued

Section	Type of respondent	Number of respondents	Number of responses per respondent	Average burden hours per response [1]	Total burden hours
164.504	Uses and Disclosures—Organizational Requirements.	700,000	1	0.083333333	58,333
164.508	Uses and Disclosures for Which Individual authorization is required.	700,000	1	1	700,000
164.512	Uses and Disclosures for Research Purposes [12].	113,524	1	0.083333333	9,460
164.520	Notice of Privacy Practices for Protected Health Information (health plans—periodic distribution of NPPs by paper mail) [13], [18].	100,000,000	1	0.004166667	416,667
164.520	Notice of Privacy Practices for Protected Health Information (health plans—periodic distribution of NPPs by electronic mail) [19].	100,000,000	1	0.002783333	278,333
164.520	Notice of Privacy Practices for Protected Health Information (health care providers—dissemination and acknowledgement) [14].	613,000,000	1	0.05	30,650,000
164.522	Rights to Request Privacy Protection for Protected Health Information [15].	20,000	1	0.05	1,000
164.524	Access of Individuals to Protected Health Information (disclosures) [16].	200,000	1	0.05	10,000
164.526	Amendment of Protected Health Information (requests).	150,000	1	0.083333333	12,500
164.526	Amendment of Protected Health Information (denials).	50,000	1	0.083333333	4,167
164.528	Accounting for Disclosures of Protected Health Information [17].	5,000	1	0.05	250
	Total	2,070	921,158,940

Sherrette A. Funn,

Paperwork Reduction Act Reports Clearance Officer, Office of the Secretary.

[FR Doc. 2022–22204 Filed 10–12–22; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Biomedical Advanced Research and Development Authority Industry Day 2022

AGENCY: Administration for Strategic Preparedness and Response (ASPR), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Biomedical Advanced Research and Development Authority (BARDA) annually hosts BARDA Industry Day (BID), a two-day conference with our industry and government partners to share BARDA's goals and objectives, increase awareness of U.S. government medical countermeasure (MCM) priorities, and facilitate coordination and collaboration between public and private sectors within the health security space.

DATES: BID 2022 will be held virtually from Tuesday, November 15–Wednesday, November 16, 2022. The

meeting will begin each day at 9 a.m. Eastern Standard Time.

ADDRESSES: *Procedures for Public Participation:* This meeting is open to the public. Register here: <https://www.medicalcountermeasures.gov/barda/barda-industry-day-2022/>.

FOR FURTHER INFORMATION CONTACT: Ezinne N. Ebi, Biomedical Advanced Research & Development Authority (BARDA), ezinne.ebi@hhs.gov, (202) 989–5539.

SUPPLEMENTARY INFORMATION: This year, BARDA plans to discuss the organization's new five-year strategic plan, which focuses on strengthening the health security of the nation, embracing lessons learned from the COVID–19 pandemic, incorporating new avenues of promising research and development, and addressing the imperative for MCMs that are safe, effective, and widely accessible to all Americans. BID 2022 will be an exciting opportunity to explore how the field of MCMs is on the cutting edge of innovation, and how we can work together to prepare for 21st century health security threats.

Dawn O'Connell,

Assistant Secretary for Preparedness and Response.

[FR Doc. 2022–22169 Filed 10–12–22; 8:45 am]

BILLING CODE 4150–37–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Human Genome Research Institute; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of a meeting of the Board of Scientific Counselors, National Human Genome Research Institute.

The meeting will be closed to the public as indicated below in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended for the review, discussion, and evaluation of individual intramural programs and projects conducted by the NATIONAL HUMAN GENOME RESEARCH INSTITUTE, including consideration of personnel qualifications and performance, and the competence of individual investigators, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Board of Scientific Counselors, National Human Genome Research Institute.

Date: November 16–17, 2022.

Time: 2:20 p.m. to 2:45 p.m.

Agenda: To review and evaluate personnel qualifications and performance, and competence of individual investigators.