provide rapid and flexible support to Zanzibar to accelerate evidence-based, person-centered HIV prevention and treatment program implementation at both facility and community levels, align HSS strengthening activities towards epidemic control, and ensure a comprehensive, coordinated, and strategic approach to the HIV response by organizing policies and interventions supported by reliable epidemiologic and program data. Funding amounts for years 2–5 will be set at continuation.

DATES: The period for this award will be September 30, 2023, through September 29, 2028.

FOR FURTHER INFORMATION CONTACT: Angela Schaad, Center for Global Health, Centers for Disease Control and Prevention, 2448 Albert Luthuli Rd, NIMR Complex | P.O. Box 9123 Dar es Salaam, Tanzania, Telephone: 255 677 680 051, Email: *kin7@cdc.gov.*

SUPPLEMENTARY INFORMATION: The single-source award will enhance collaboration between PEPFAR and the MOHZ to scale up HIV/TB services and improve quality of service delivery by reducing barriers to access.

The MOHZ is in a unique position to conduct this work in terms of its mandate and existing infrastructure to address the HIV strategy throughout Zanzibar.

Summary of the Award

Recipient: Ministry of Health Zanzibar (MOHZ).

Purpose of the Award: The purpose of this award is to provide rapid and flexible support to Zanzibar to accelerate evidence-based, person-centered HIV prevention and treatment program implementation at both facility and community levels, align HSS strengthening activities towards epidemic control, and ensure a comprehensive, coordinated, and strategic approach to the HIV response by organizing policies and interventions supported by reliable epidemiologic and program data.

Amount of Award: The approximate year 1 funding amount will be $5,000,000 in Federal Fiscal Year (FYY) 2023 funds, subject to the availability of funds. Funding amounts for years 2–5 will be set at continuation.

Authority: This program is authorized under Public Law 108–25 (the United States Leadership Against HIV AIDS, Tuberculosis and Malaria Act of 2003).

Period of Performance: September 30, 2023 through September 29, 2028.

Dated: March 9, 2023.

Terrance Perry,

Chief Grants Management Officer, Centers for Disease Control and Prevention.

[FR Doc. 2023–05252 Filed 3–14–23; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Biodefense Science Board Public Meeting

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

ACTION: Notice.

SUMMARY: The National Biodefense Science Board (NBSB or the Board), authorized under the Public Health Service (PHS) Act, as added by the Pandemic and All-Hazards Preparedness Act of 2006 and amended by the Pandemic and All-Hazards Preparedness Reauthorization Act, will hold a virtual, public meeting on May 4, 2023, at 2:00 p.m. ET. The NBSB, managed and operated by the ASPR, provides expert advice and guidance to the Secretary of HHS regarding current and future chemical, biological, radiological, and nuclear threats, and other disaster preparedness and response matters. A detailed agenda and Zoom registration instructions will be available on the ASPR/NBSB public meeting web page at least 10 days in advance of the meeting.

FOR FURTHER INFORMATION CONTACT: CAPT Christopher Perdue, NBSB Designated Federal Official, via email message to *NBSB@hhs.gov* or (202) 480–7226.

SUPPLEMENTARY INFORMATION:

Procedures for Public Participation: The link to pre-register for the public meeting will be posted on the meeting website. The online meeting will use a webinar format and include American Sign Language interpretation and live captioning.

Members of the public may provide written comments or submit questions to the NBSB at any time via email to *NBSB@hhs.gov* and are encouraged to provide comments related to the draft recommendations when those are posted. Additionally, the NBSB invites stakeholders to request up to seven minutes to address the Board in-person during the meeting. The Board wishes to hear from experts from relevant biomedical, biodefense, or health industries; faculty or researchers at academic institutions; health professionals, health system experts, or those who work in health care consumer organizations; or experts in state, Tribal, territorial, or local government agencies. Requests to provide remarks to the NBSB during the public meeting must be sent to *NBSB@hhs.gov* by April 21, 2023. In that request, please provide the speaker's name, title, position, and organization, with a brief description of the topic they will address. Requests to speak to the Board will be approved in consultation with the Board Chairperson and based on time available during the meeting.

Dawn O'Connell,

Assistant Secretary for Preparedness and Response.

[FR Doc. 2023–05274 Filed 3–14–23; 8:45 am]

BILLING CODE 4150–37–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276–0361.

Project: Mandatory Guidelines for Federal Workplace Drug Testing Programs (OMB No. 0930–0158)—Extension

SAMHSA will request OMB approval for extension of the Federal Drug Testing Custody and Control Form (CCF) for federal agency and federally regulated drug testing programs which must comply with the HHS Mandatory Guidelines for Federal Workplace Drug Testing Programs using Urine (UrMG) dated January 23, 2017 (82 FR 7920) and using Oral Fluid (OFMG) dated October 25, 2019, and OMB approval for information provided by test facilities (laboratories and Instrumented Initial Test Facilities, IITFs) for the National Laboratory Certification Program (NLCP).

The CCF is used by all federal agencies and employers regulated by the Department of Transportation (DOT) and the Nuclear Regulatory Commission (NRC) to document the collection and chain of custody of urine specimens at the collection site, for HHS-certified test facilities to report results, and for

Medical Review Officers (MROs) to document and report a verified result. SAMHSA allows the use of the CCF as a paper or electronic form.

Laboratories and IITFs seeking HHS certification under the NLCP must complete and submit the NLCP application form. The NLCP application form remains without change. Prior to an inspection, an HHS-certified laboratory or IITF is required to submit specific information regarding its procedures. Collecting this information prior to an inspection allows the inspectors to thoroughly review and understand the testing procedures before arriving for the onsite inspection. The NLCP information checklist is without change.

The current OMB-approved CCF has an August 31, 2023 expiration date. SAMHSA plans to submit the CCF without content revisions for OMB approval.

The annual total burden estimates for the CCF, the NLCP application, the NLCP information checklist, and the NLCP recordkeeping requirements are shown in the following table.

Form/respondent	Number of respondents	Responses per respondent	Total number of responses	Burden per response (hours)	Annual burden (hours)	Hourly wage rate ($)	Total cost ($) [3]
Custody and Control Form: [1]							
Donor	6,726,610	1	6,726,610	0.08	538,129	25	13,453,225
Collector	6,726,610	1	6,726,610	0.07	470,683	15	7,060,245
Laboratory	6,726,610	1	6,726,610	0.05	336,331	35	11,771,585
IITF	1	0	0	0.05	0	35	0
Medical Review Officer	6,726,610	1	6,726,610	0.05	336,331	150	50,449,650
NLCP Application Form: [2]							
Laboratory	10	1	10	3	30	35	1.050
IITF	0	0	0	3	0	35	0
Sections B and C—NLCP Information Checklist:							
Laboratory	24	1	24	1	24	35	840
IITF	1	1	1	1	1	35	35
Record Keeping:							
Laboratory	24	1	24	250	6,000	35	210,000
IITF	0	0	0	250	0	35	0
Total	6,726,669		26,906,499		1,687,529		82,946,625

[1] **Note:** The time it takes each respondent (*i.e.,* donor, collector, laboratory, IITF, and MRO) to complete the Federal CCF is based on an average estimated number of minutes it would take each respondent to complete their designated section of the form or regulated entities (*e.g.,* HHS, DOT, and NRC).

[1] **Note:** The above number of responses is based on an estimate of the total number of specimens collected annually (approximately 150,000 federal agency specimens; 6,500,000 DOT regulated specimens, and 145,000 NRC regulated specimens).

[2] **Note:** The estimate of 10 applications per year is based on requests for a laboratory application (urine or oral fluid) in the past year (*i.e.,* at the time of these calculations) and only 1 IITF application submitted after October 1, 2010.

[2] **Note:** The estimate of three burden hours to complete the application has not changed.

[3] **Note:** At the time of these calculations, there were 20 certified laboratories and one certified IITF undergoing 2 maintenance inspections each year, and 4 applicant laboratories.

[3] **Note:** The wage rates listed for each respondent are based on estimated average hourly wages for the individuals performing these tasks.

Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to *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.

Alicia Broadus,

Public Health Advisor.

[FR Doc. 2023–05308 Filed 3–14–23; 8:45 am]

BILLING CODE 4162–20–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276–0361.

Project: Projects for Assistance in Transition From Homelessness (PATH) Program Annual Report Manual (OMB No. 0930–0205)—Revision

SAMHSA awards PATH grants each fiscal year to states, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands (hereafter referred to as ''states''), from allotments authorized under the PATH program established by Public Law 101–645, 42 U.S.C. 290cc–21 *et seq.,* the Stewart B. McKinney Homeless Assistance Amendments Act of 1990 [Section 521 *et seq.* of the Public Health Service (PHS) Act and the 21st Century Cures Act (Pub. L. 114–255), hereafter referred to as ''the Act'']. Section 522 of the Act specifies that states must expend their payments