

Diana Espinosa,
Acting Administrator.

[FR Doc. 2021–28377 Filed 12–30–21; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection

Activities: Proposed Collection: Public Comment Request Rural Health Clinic COVID–19 Reporting Portal, OMB No. 0906–0056—Revision

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

ACTION: Notice.

SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on this ICR should be received no later than March 4, 2022.

ADDRESSES: Submit your comments to paperwork@hrsa.gov or by mail to the HRSA Information Collection Clearance Officer, Room 14N136B, 5600 Fishers Lane, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email paperwork@hrsa.gov or call Samantha Miller, the acting HRSA Information Collection Clearance Officer at (301) 443–9094.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the information collection request title for reference.

Information Collection Request Title: Rural Health Clinic COVID–19 (RHC

COVID–19) Reporting Portal OMB No. 0906–0056—Revision.

Abstract: In October 2020, HRSA created a monthly, aggregate data report to collect information on COVID–19 testing and related expenses conducted by funded organizations participating in the RHC COVID–19 Testing (RHCCT) Program funded through the Paycheck Protection Program and Health Care Enhancement Act (Pub. L. 116–139). HRSA is expanding this data report to collect information on COVID–19 testing, COVID–19 mitigation, and related expenses conducted by funded organizations participating in the RHC COVID–19 Testing and Mitigation (RHCCTM) Program funded through the American Rescue Plan Act (Pub. L. 117–2). Funded organizations were identified by Tax Identification Number (TIN), and a TIN organization may operate one or more RHC sites which were identified by unique Centers for Medicare and Medicaid Services Certification Numbers. Respondents are TIN organizations who received funding for COVID–19 testing, COVID–19 mitigation, and related expenses. HRSA issued RHCCTM funding as one-time payments to 2,301 TIN organizations based on the number of certified RHC sites they operate, providing \$100,000 per clinic site (4,459 RHC sites total across the country). Data report information is needed to comply with federal requirements to monitor funds distributed under the Paycheck Protection Program and Health Care Enhancement Act and the American Rescue Plan Act.

Need and Proposed Use of the Information: The RHC COVID–19 Reporting Portal collects information from RHC-funded providers who use RHCCT Program funding and RHCCTM Program funding to support COVID–19 testing, expand access to testing in rural communities, and other related expenses. The RHC COVID–19 Reporting Portal also collects information from RHC-funded providers who use RHCCTM Program funding to support COVID–19 mitigation and other related expenses. These data are critical to meet HRSA requirements to monitor and report on how federal funding is

being used and to measure the effectiveness of the RHCCT Program and RHCCTM Program. Revisions include a confirmation page for TIN organization self-certification following completion of each program after the period of availability. Specifically, data will be used to assess the following:

- Whether program funds are being spent for their intended purposes;
- COVID–19 testing or testing related use(s) of RHCCTM funds;
- COVID–19 mitigation or mitigation related use(s) of RHCCTM funds;
- Where COVID–19 testing supported by these funds is occurring;
- Number of at-home (*i.e.* home collection, direct-to-consumer, over-the-counter) COVID–19 tests distributed (optional);
- Number of COVID–19 tests;
- Number of positive COVID–19 tests;
- TIN organizations self-certification of complete expenditure of RHCCT Program funds and/or full or partial return of RHCCT Program funds; and
- TIN organizations self-certification of complete expenditure of RHCCTM Program funds and/or full or partial return of RHCCTM Program funds.

Likely Respondents: Respondents are TIN organizations who own or operate one or more RHC who received funding for COVID–19 testing, COVID–19 mitigation, and related expenses.

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
RHC COVID–19 Reporting Portal	2,301	19	43,719	0.33	14,427
Total	2,301	43,719	14,427

HRSA specifically requests comments on: (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.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2021-28414 Filed 12-30-21; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Advisory Council on Alzheimer's Research, Care, and Services; Meeting

AGENCY: Assistant Secretary for Planning and Evaluation, HHS.

ACTION: Notice of meeting.

SUMMARY: This notice announces the public meeting of the Advisory Council on Alzheimer's Research, Care, and Services (Advisory Council). The Advisory Council provides advice on how to prevent or reduce the burden of Alzheimer's disease and related dementias on people with the disease and their caregivers. During the January 24, 2022 meeting the Advisory Council will hear about the National Plan to Address Alzheimer's Disease: 2021 Update, as well as update from federal agencies. The Advisory Council will also hear presentations about dementia risk reduction for veterans and research on the potential relationship between COVID-19 and dementia. The Advisory Council will also hear about a recent report on the current capacity of the dementia care workforce. A panel will present on dementia assessment tools for special populations, such as individuals with intellectual and developmental disabilities. Finally, the Advisory Council will hear from a panel on the inclusion of caregivers in clinical care settings, including those in rural communities.

DATES: The meeting will be held on January 24, 2022 from 12:00 p.m. to 4:30 p.m. EST.

ADDRESSES: The meeting will be virtual, streaming live at www.hhs.gov/live.

Comments: Time is allocated on the agenda to hear public comments from 4:00 p.m. to 4:30 p.m. The time for oral comments will be limited to two (2) minutes per individual. In order to provide a public comment, please

register by emailing your name to napa@hhs.gov by Thursday, January 20. On Friday, January 21, registered commenters will receive both a dial-in number and a link to join the meeting virtually; individuals will have the choice to either join virtually via the link, or to call in only by using the dial-in number. Note: There may be a 30-45 second delay in the livestream video presentation of the conference. For this reason, if you have pre-registered to submit a public comment, it is important to connect to the meeting by 3:45 p.m. to ensure that you do not miss your name and allotted time when called. If you miss your name and allotted time to speak, you may not be able to make your public comment. All participant audio lines will be muted for the duration of the meeting and only unmuted by the Host at the time of the participant's public comment. Should you have questions during the session email napa@hhs.gov and someone will respond to your message as quickly as possible.

In order to ensure accuracy, please submit a written copy of oral comments for the record by emailing napa@hhs.gov by Tuesday, January 25. These comments will be shared on the website and reflected in the meeting minutes.

In lieu of oral comments, formal written comments may be submitted for the record by Tuesday, January 25 to Helen Lamont, Ph.D., OASPE, 200 Independence Avenue SW, Room 424E, Washington, DC 20201. Comments may also be sent to napa@hhs.gov. Those submitting written comments should identify themselves and any relevant organizational affiliations.

FOR FURTHER INFORMATION CONTACT:

Helen Lamont, 202-260-6075, helen.lamont@hhs.gov. Note: The meeting will be available to the public live at www.hhs.gov/live.

SUPPLEMENTARY INFORMATION: Notice of these meetings is given under the Federal Advisory Committee Act (5 U.S.C. App. 2, section 10(a)(1) and (a)(2)). Topics of the Meeting: Long-term services and supports workforce, caregiving.

Procedure and Agenda: The meeting will be webcast at www.hhs.gov/live and video recordings will be added to the National Alzheimer's Project Act website when available, after the meeting.

Authority: 42 U.S.C. 11225; Section 2(e)(3) of the National Alzheimer's Project Act. The panel is governed by provisions of Public Law 92-463, as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

Dated: December 22, 2021.

Benjamin Sommers,

Deputy Assistant Secretary for Planning and Evaluation Acting on Behalf of Rebecca Haffajee, Acting Assistant Secretary for Planning and Evaluation.

[FR Doc. 2021-28412 Filed 12-30-21; 8:45 am]

BILLING CODE 4150-05-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Aging; 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: National Institute on Aging Special Emphasis Panel; Genetic Variant-based Drug Development for Healthy Aging.

Date: March 2, 2022.

Time: 11:30 a.m. to 3:30 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institute on Aging, Gateway Building, 7201 Wisconsin Avenue, Bethesda, MD 20892 (Video Meeting).

Contact Person: Alexander Parsadanian, Ph.D., Scientific Review Officer, Scientific Review Branch, National Institute on Aging, National Institutes of Health, Gateway Building 2C/212, 7201 Wisconsin Avenue, Bethesda, MD 20892, 301-496-9666, parsadaniana@nia.nih.gov.

Name of Committee: National Institute on Aging Special Emphasis Panel; Glial Pathology in Brain Aging.

Date: March 11, 2022.

Time: 12:00 p.m. to 4:30 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institute on Aging, Gateway Building, 7201 Wisconsin Avenue, Bethesda, MD 20892 (Video Meeting).

Contact Person: Alexander Parsadanian, Ph.D., Scientific Review Officer, Scientific Review Branch, National Institute on Aging, National Institutes of Health, Gateway Building 2C/212, 7201 Wisconsin Avenue, Bethesda, MD 20892, 301-496-9666, parsadaniana@nia.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.866, Aging Research, National Institutes of Health, HHS)