DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection
Activities: Proposed Collection: Public
Comment Request; Information
Collection Request Title: Evaluation of
the Maternal and Child Health Bureau
Pediatric Mental Health Care Access
(PMHCA) Program and the Maternal
and Child Health Bureau Screening
and Treatment for Maternal Depression
and Related Behavioral Disorders
Program, OMB No. 0906-xxxx, New

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

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, 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 December 16, 2019.

ADDRESSES: Submit your comments to paperwork@hrsa.gov or mail the HRSA Information Collection Clearance Officer, Room 14N136B, 5600 Fishers Lane, Rockville, Maryland 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 Lisa Wright-Solomon, the HRSA Information Collection Clearance Officer at (301) 443–1984.

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

Information Collection Request Title: Evaluation of Maternal and Child Health

Bureau Pediatric Mental Health Care Access Program and the Maternal and Child Health Bureau Screening and Treatment for Maternal Depression and Related Behavioral Disorders Program, OMB No. 0906–xxxx—New.

Abstract: HRSA's Maternal and Child Health Bureau Pediatric Mental Health Care Access (PMHCA) and Maternal Depression and Related Behavioral Disorders (MDRBD) programs aim to increase identification of behavioral health conditions by screening specified populations (e.g., children, adolescents, young adults, and pregnant and postpartum women, especially those living in rural, isolated, and underserved areas); providing clinical behavioral health consultation; care coordination support (e.g., communication/collaboration, accessing resources, referral services) and training to health care providers; and increasing access to clinical interventions including by telehealth. Provider education and training will support the knowledge and skills acquisition needed to accomplish this goal. PMHCA program is authorized by the Public Health Service Act, § 330M (42 U.S.C. 254c-19), as amended. The MDRBD program is authorized by the Public Health Service Act, § 317L-1 (42 U.S.C. 247b–13a), as amended. In order to evaluate progress made toward the programs' goals, this data collection will use four instruments: Health Care Provider (HCP) Survey, Practice-Level Survey, Program Implementation Survey, and Program Implementation Semi-Structured Interview.

Need and Proposed Use of the *Information:* This information is needed to evaluate the PMHCA and MDRBD Programs by providing HRSA with the necessary information to guide future policy decisions regarding increasing health care providers capacity to address patient's behavioral health and access to behavioral health services. Specifically, data collected for the evaluation will be used to study the efforts of awardee programs to achieve key awardee outcomes (e.g., increase in access to behavioral health services; providers trained; available communitybased resources, including counselors or family service providers) and to

measure whether and to what extent awardee programs are associated with changes in these key awardee outcomes. The evaluation will also examine changes over time, within a state and/ or across the PMCHA and MDRBD programs, with regard to (1) enrolled providers/practices related to screening, referral, and care coordination for behavioral health conditions; (2) provision of behavioral health services for mental health conditions in primary care settings by enrolled health care providers; (3) use of consultative services; and (4) facilitation of access to behavioral health services for mental health conditions.

Likely Respondents: Both HCP and Practice-Level Survey responses will be collected from health care providers and practices that are participating in the PMCHA and MDRBD programs. Likely respondents include:

- HCP Surveys: Physicians, nurse practitioners, physician assistants, nurse midwives (for MDBRD), other health care professionals (e.g., behavioral health providers, case coordinators, nurses, social workers)
- Practice-Level Surveys: Practice managers (e.g., office managers, office leadership, nurse champions)
- Program Implementation Surveys and Semi-Structured Interviews: PMHCA and MDRBD cooperative agreementfunded Project Directors/Principal Investigators

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)	Tota burden hours
Health Care Provider Survey Practice-Level Survey Program Implementation Survey	13,035 4,165 28	3 3	39,105 12,495 84	0.17 0.25 0.50	6,648 3,124 42

Average Number of Tota Number of Total burden per Form name responses per burden respondents responses response respondent hours (in hours) 1 Program Implementation Semi-Structured Interview 28 28 1.00 28 17,256 51,712 9.842 Total

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS—Continued

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. 2019–22636 Filed 10–16–19; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Center for Advancing Translational Sciences; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting 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 Center for Advancing Translational Sciences Special Emphasis Panel; Platform Delivery Technologies for Nucleic Acid Therapeutics. Date: November 13–14, 2019.

Time: 8:30 a.m. to 5:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, One Democracy Plaza, 6701 Democracy Boulevard, Bethesda, MD 20892, (Virtual Meeting). Contact Person: Jing Chen, Ph.D., Scientific Review Officer, Office of Scientific Review, National Center for Advancing Translational Sciences (NCATS), National Institutes of Health, 6701 Democracy Blvd., Democracy 1, Room 1080, Bethesda, MD 20892–4874, chenjing@mail.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.859, Pharmacology, Physiology, and Biological Chemistry Research; 93.350, B—Cooperative Agreements; 93.859, Biomedical Research and Research Training, National Institutes of Health, HHS)

Dated: October 10, 2019.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2019-22572 Filed 10-16-19; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director, National Institutes of Health; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the Office of AIDS Research Advisory Council, November 7, 2019 from 8:30 a.m. to 4:30 p.m., National Institutes of Health, 5601 Fishers Lane, Room 1D13, Rockville, MD 20852 which was published in the **Federal Register** on February 15, 2019, 84 FR 4495.

This meeting notice is amended to change the meeting date from November 7, 2019 to October 28, 2019 at the National Institutes of Health, 5601 Fishers Lane, Room 1D13, Rockville, MD 20852. The meeting is open to the public.

Dated: October 10, 2019.

Tyeshia M. Roberson,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2019–22571 Filed 10–16–19; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Eye Institute; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting 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 Eye Institute Special Emphasis Panel; NEI Genetic Epidemiology and Secondary Data Analysis Applications.

Date: November 4-5, 2019.

 $Time: 8:00 \ a.m. \ to \ 5:00 \ p.m.$

Agenda: To review and evaluate grant applications.

Place: National Eye Institute, National Institutes of Health, 6700 B Rockledge Drive, Suite 3400, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Brian Hoshaw, Ph.D., Acting Review Chief, National Eye Institute, National Institutes of Health, Division of Extramural Research, 6700 B Rockledge Drive, Suite 3400, Rockville, MD 20892, (301) 451–2020, hoshawb@mail.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.867, Vision Research, National Institutes of Health, HHS)

Dated: October 10, 2019.

Miguelina Perez,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2019–22573 Filed 10–16–19; 8:45 am]

BILLING CODE 4140-01-P