based reports and public comments obtained through this notice.

Maria G. Button,

Director, Executive Secretariat. [FR Doc. 2025–15432 Filed 8–13–25; 8:45 am] BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice With Request for Comment: Consideration of Adding Duchenne Muscular Dystrophy to the Recommended Uniform Screening Panel

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

ACTION: Notice with request for public comment.

SUMMARY: HRSA is considering recommending to the Secretary the addition of Duchenne Muscular Dystrophy (DMD) to the Recommended Uniform Screening Panel (RUSP). HRSA is providing notice and requesting comments from the public on this potential recommendation. Conditions listed on the RUSP are part of the evidence-informed preventive health guidelines supported by HRSA for infants and children. Non-grandfathered health plans are required to cover screenings included in the HRSAsupported comprehensive guidelines without cost-sharing (e.g., co-payment, co-insurance, etc.). HRSA is particularly interested in comments that address the potential benefit of early screening of DMD within the newborn period, the ability of state newborn screening programs to screen for DMD, and the availability of effective treatments for DMD. In deciding whether to provide recommendations to the Secretary supporting the addition of DMD to the RUSP, HRSA will consider public comments, including evidence-based reports, obtained through this notice.

DATES: Submit comments no later than September 15, 2025.

ADDRESSES: Responses must be submitted electronically to CDR Leticia Manning, MPH, at: *NBSPrograms@hrsa.gov.*

FOR FURTHER INFORMATION CONTACT: CDR Leticia Manning, MPH, Newborn Screening Team Lead, Division of Services for Children with Special Health Needs, Maternal and Child Health Bureau, HRSA, 5600 Fishers Lane, Rockville, Maryland 20857 or NBSPrograms@hrsa.gov.

SUPPLEMENTARY INFORMATION: The information obtained through this notice may help inform HRSA on the benefits of screening for DMD and adding this condition to the RUSP. Of the 56 newborn screening programs in the United States, all states and Puerto Rico currently screen for at least 31 of the 37 core conditions on the RUSP. Some states also screen for additional disorders. Conditions listed on the RUSP are part of the evidence-informed preventive health guidelines supported by HRSA for infants and children. Nongrandfathered health plans are required to cover screenings included in the HRSA-supported comprehensive guidelines without cost-sharing. The Advisory Committee on Heritable Disorders in Newborns and Children (ACHDNC), now terminated, was tasked with reviewing available scientific evidence and then making recommendations to the Secretary regarding what conditions should be on the RUSP. When a condition is nominated, ACHDNC determines whether there is sufficient evidence available for early screening and refers it to ACHDNC's Evidence Review Group (ERG). The ERG is responsible for identifying and assessing all available evidence and summarizing for ACHDNC the strength and effectiveness of the evidence found on the net benefit of screening, the ability of states to screen for the condition, and the availability of effective treatments. The ERG completed an evidence review for DMD. ACHDNC was terminated following the completion of the evidence review for DMD, but prior to making a recommendation on its inclusion in the RUSP or issuing a recommendation to the Secretary.

When drafting responses, consider the data and other information described on the ERG's report summary, and provide input on the suitability of states screening for DMD within the newborn period. The evidence-based review summary for DMD can be found at https://www.hrsa.gov/advisory-committees/heritable-disorders.

Special Note to Commenters

This notice is not inviting nominations for other conditions to be

added to the RUSP. HRSA is considering potential ways to continue supporting the RUSP and the overall system of newborn screening. In deciding whether to provide a recommendation to the Secretary supporting the addition of DMD to the RUSP, HRSA will consider evidence-based reports and public comments obtained through this notice.

Maria G. Button,

Director, Executive Secretariat. [FR Doc. 2025–15433 Filed 8–13–25; 8:45 am] BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice of Supplemental Award; Infant-Toddler Court Program—State Awards

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

ACTION: Notice of supplemental funding.

SUMMARY: HRSA is providing additional award funds to the 12 current Infant Toddler Court Program (ITCP)—State Awards recipients previously funded under HRSA–22–73 to support the continuation and expansion of existing activities to build state and local capacity and implement the infant-toddler court approach in federal fiscal year (FY) 2025.

FOR FURTHER INFORMATION CONTACT: Ekaterina Zoubak, Early Childhood

Ekaterina Zoubak, Early Childhood Systems Analyst, Division of Home Visiting and Early Childhood Systems, HRSA, at *ezoubak@hrsa.gov* or 240– 475–8014.

SUPPLEMENTARY INFORMATION:

Intended Recipient(s) of the Award: All 12 current recipients of ITCP—State Awards, as listed in Table I.

Amount of Non-Competitive Awards: 12 awards for \$2,798,847 total (up to \$233,237 each).

Project Period: September 30, 2022,–September 29, 2027.

Assistance Listing Number: 93.110. Award Instrument: Non-competitive supplemental funding to the existing Cooperative Agreement.

Authority: 42 U.S.C. 701(a)(2) (Title V, § 501(a)(2) of the Social Security Act)

Grant No.	Award recipient name		Award amount
U2ZMC46643	Prevent Child Abuse Arizona	AZ	\$233,237
U2ZMC529755	Illuminate Colorado	co	233,237
U2ZMC46638	Georgia State University Research Foundation, Inc	GA	233,237
U2ZMC46644	Iowa Department of Public Health	IA	233,237
U2ZMC46639	Michigan Department of Health and Human Services	MI	233,237
U2ZMC46636	Nevada Division of Child & Family Services	NV	233,237
U2ZMC46642	Passaic County Court Appointed Special Advocates, A New Jersey Non-profit Corporation.	NJ	233,237
U2ZMC46640	Justice Innovation Inc. d/b/a Center for Court Innovation	NY	233,237
U2ZMC46637	Educational Service Center of Cuyahoga County	OH	233,237
U2ZMC46641	Oklahoma Department of Mental Health and Substance Abuse Services	OK	233,237
U2ZMC46635	Children's Center	UT	233,237
U27MC46634	Children and Youth Justice Center	WA	233,237

TABLE 1—RECIPIENT(S) AND AWARD AMOUNT(S)

Justification: In FY 2022, under the authority for Special Projects of Regional and National Significance (42 U.S.C. 701(a)(2) (Title V, § 501(a)(2) of the Social Security Act)), HRSA awarded ITCP State awards to 12 recipients (HRSA–22–073). This award included expectations for the recipient to continue and expand research-based infant-toddler court teams to change child welfare practices and improve the early developmental health and wellbeing of infants, toddlers, and their families.

A Congressional Report accompanying the Further Consolidated Appropriations Act, 2024 (P.L. 118-47), included funding to "to continue and expand research-based Infant-Toddler Court Teams to change child welfare practices to improve well-being for infants, toddlers, and their families," (Senate Report 118-84). In addition, the Joint Explanatory Statement accompanying the FY 2024 appropriations act directed HRSA to "allocate funding to ensure continuation of existing grantees, technical assistance, and other activities." In FY 2024, HRSA provided a supplement of \$2,700,000 in Special Projects of Regional and National Significance funding, through its Maternal and Child Health Bureau, to ITCP—State Award Program recipients noted in Table 1.

Consistent with previous Congressional intent, HRSA will provide \$2,798,847 in FY 2025 in supplemental funding to the same recipients outlined in Table 1. This supplement will be used for project activities within the scope of the current ITCP—State Awards funding opportunity (HRSA–22–073) and improve access to evidence-based child welfare practices and improve the early developmental health and well-being of infants, toddlers, and their families.

Thomas J. Engels,

Administrator.

[FR Doc. 2025–15469 Filed 8–13–25; 8:45 am]

BILLING CODE 4615-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Health Center Program Performance Period Extensions; Correction

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

ACTION: Notice of the extension of the standard performance period for health center grantees from 3 to 4 years and request for information from current recipients; Correction.

SUMMARY: HRSA is extending health center grantees' performance periods to a total of 4 years. The change from a 3-year performance period to a 4-year performance period will provide current health centers additional time to serve their service area before they apply for a new award and will provide a funding

amount consistent with what would have been made available through the Service Area Competition (SAC). The extended performance period supports HRSA's commitment to continuity in access to comprehensive primary care and will not impact HRSA's ability to ensure that health centers comply with Health Center Program requirements. This update will not change the statutory requirement that health centers that fail to comply with Health Center Program requirements will receive a 1-year performance period if a new project period is awarded.

FOR FURTHER INFORMATION CONTACT: Matt Kozar, Division Director, Office of Program and Policy Development, Bureau of Primary Care, HRSA, at *mkozar@hrsa.gov* and 301–443–1034.

SUPPLEMENTARY INFORMATION:

Correction

The 192 health center awardees, as listed in the table below, will receive a 1-year Extension with Funds for a total 4-year performance period.

- Amount of Award(s): 192 non-competitive awards for approximately \$828 million.
- *Project Period:* January 1, 2023, to December 31, 2026; February 1, 2023, to January 31, 2027.
 - Assistance Listing Number: 93.224.
- Award Instrument: Grant—Non-competing Continuation.
- Authority: Section 330 of the Public Health Service Act, as amended (42 U.S.C. 254b, as amended).

TABLE 1—RECIPIENTS AND AWARD AMOUNTS

Grant #	Budget period start	Name	City	State	Est award amount
H80CS04434 H80CS01130	Jan Jan	Bethel Family Clinic	Cordova	AK AK	\$1,840,427 1,840,661 3,141,641 5,127,920