

Diversity Management and Civil Rights Office by April 14, 2021 at 202–354–7260 or 1–888–646–8369 (TTY)

**FOR FURTHER INFORMATION CONTACT:** Jennifer Warren, United States Mint Liaison to the CCAC; 801 9th Street NW, Washington, DC 20220; or call 202–354–7208.

**Authority:** 31 U.S.C. 5135(b)(8)(C).

**Eric Anderson,**

*Executive Secretary, United States Mint.*

[FR Doc. 2021–06720 Filed 3–31–21; 8:45 am]

**BILLING CODE P**

## DEPARTMENT OF VETERANS AFFAIRS

### Documentation Required for Identification of Veterans Who Are Members of an Indian Tribe

**AGENCY:** Department of Veterans Affairs.

**ACTION:** Notice of Tribal Consultation session.

**SUMMARY:** The Department of Veterans Affairs (VA), Veterans Health Administration (VHA) will facilitate a tribal consultation session to receive attendees' feedback regarding the information and documentation that VA may utilize for identification of veterans who are members of an Indian tribe.

**DATES:** VA will hold the virtual tribal consultation session on Thursday, April 29, 2021, from 1:00–3:00 p.m. (Eastern Time).

**ADDRESSES:** Participants can access the presentation by logging into the following link: <https://vacctraining.adobeconnect.com/occ-tribal-consultation/>; for audio, please dial 1–800–767–1750, extension 52908. Participants will interact by submitting written comments and/or questions using the chat function during the presentation. Written comments may also be submitted before May 29, 2021, by any of the following methods:

- **Federal Rulemaking Portal:** Go to <http://www.regulations.gov>. Follow the online instructions for submitting comments;

- **Email:** [tribalgovernmentconsultation@va.gov](mailto:tribalgovernmentconsultation@va.gov); or

- **Mail to:** Department of Veterans Affairs, Suite 915L, 810 Vermont Avenue NW, Washington, DC 20420.

**FOR FURTHER INFORMATION CONTACT:** Please email Mr. Joseph Duran, Director for Policy, VA Office of Community Care, at [Joseph.Duran2@va.gov](mailto:Joseph.Duran2@va.gov), or contact by telephone at 303–370–1637. (This is not a toll-free number.)

**SUPPLEMENTARY INFORMATION:** Section 3002 of Public Law 116–315, *Johnny*

*Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020* (the “Act”), amended 38 U.S.C. 1730A by prohibiting VA from collecting copayments from covered Veterans for the receipt of hospital care or medical services under laws administered by VA. Pursuant to the Act, covered Veteran means a Veteran who is catastrophically disabled, as defined by VA, or an Indian or urban Indian (as defined in section 4 of the *Indian Health Care Improvement Act* (25 U.S.C. 1603)). Catastrophically-disabled Veterans have been exempt from certain copayments pursuant to section 1730A, since 2010, and this exemption is further implemented in VA's copayment regulations at §§ 17.108, 17.110 and 17.111 of title 38, Code of Federal Regulations. Veterans who are Indians or urban Indians will not be eligible for copayment exemption until January 5, 2022, as section 3002 of the Act does not take effect until 1 year from the date of enactment of the Act. In order to implement section 3002 of the Act, VA must be able to identify Indian and urban Indian Veterans in VA's system of enrollment during the registration process to assist with downstream applications for copayment billing determinations. This will be a new business process to collect official information to recognize Veterans who are Indians or urban Indians. This tribal consultation session is seeking input from tribal governments, Indians and urban Indians regarding documentation that can be used by VA's health care system to identify those Veterans who are Indians or urban Indians (as defined in 25 U.S.C. 1603). Input received during the tribal consultation session will be evaluated and as appropriate, incorporated into any rulemaking and/or policy for copayment exemptions under 38 U.S.C. 1730A.

### Tribal Consultation Topics

VA seeks responses to the following questions:

1. In determining whether a Veteran is a member of an Indian tribe, could any or all of the following documentation from the Veteran provide sufficient documentation?

- Tribal Enrollment Card;
- Certificate of Degree of Indian; or
- Certificate of Indian Blood from an American Indian/Alaska Native Tribe.

2. What other information and/or documentation are available for determining if a Veteran is a member of an Indian tribe? To the extent possible, please indicate the source of the information and/or how the information and/or documentation would assist VA

in determining if a Veteran is a member of an Indian tribe.

3. How should VA determine whether a Veteran is a member of an Indian tribe? In making this determination, should VA:

- Require documentation be provided by the Veteran;
- Require that the Veteran self-certify that they meet the definition; or
- Should this determination be made in some other manner?

**Signing Authority:**

Denis McDonough, Secretary of Veterans Affairs, approved this document on March 29, 2021, and authorized the undersigned to sign and submit the document to the Office of the Federal Register for publication electronically as an official document of the Department of Veterans Affairs.

**Jeffrey M. Martin,**

*Assistant Director, Office of Regulation Policy & Management, Office of the Secretary, Department of Veterans Affairs.*

[FR Doc. 2021–06735 Filed 3–31–21; 8:45 am]

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## DEPARTMENT OF VETERANS AFFAIRS

### National Research Advisory Council; Notice of Meeting

The Department of Veterans Affairs (VA) gives notice under the Federal Advisory Committee Act, 5 U.S.C. App. 2, that the National Research Advisory Council will hold a virtual meeting on Wednesday, June 2, 2021, by WebEx. The teleconference number is 1–404–397–1596, conference ID 199 017 8011# or the meeting link is <https://veteransaffairs.webex.com/veteransaffairs/j.php?MTID=mc1e9b14087e6f88db874e991d6a969ca>. The meeting will convene at 11 a.m. and end at 2 p.m. EDT. This meeting is open to the public.

The purpose of the National Research Advisory Council is to advise the Secretary on research conducted by the Veterans Health Administration, including policies and programs targeting the high priority of Veterans' health care needs.

On June 2, 2021, the agenda will include a follow up discussion of diversity, equity, and inclusion activities in response to the NRAC recommendations; alternative strategies for funding research—MVP Mind and other opportunities; and lessons learned from COVID research activities. No time will be allocated at this meeting for receiving oral presentations from the public. Members of the public wanting to attend, have questions or

presentations to present may contact Dr. Marisue Cody, Designated Federal Officer, Office of Research and Development (14RD), Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420, at 202-443-5681, or [Marisue.Cody@va.gov](mailto:Marisue.Cody@va.gov) no later than close of business on May 28, 2021. All questions and presentations will be presented during the public comment section of the meeting. Any member of the public seeking additional information should contact Dr. Cody at the above phone number or email address noted above.

Dated: March 26, 2021.

**LaTonya L. Small,**

*Federal Advisory Committee Management Officer.*

[FR Doc. 2021-06682 Filed 3-31-21; 8:45 am]

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## DEPARTMENT OF VETERANS AFFAIRS

### AR16—Notice of Request for Information on the Department of Veterans Affairs' Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program

**AGENCY:** Department of Veterans Affairs.

**ACTION:** Request for information.

**SUMMARY:** The Department of Veterans Affairs (VA) is requesting information to assist in implementing the requirements of section 201 of the Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019. The Act mandates VA to establish the Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program (SSG Fox SPGP) to reduce veteran suicide through a three-year community-based grant program that would provide financial assistance to eligible entities to provide or coordinate providing suicide prevention services to eligible veterans and their families. VA is required to consult with certain entities related to administering this new grant program, and through this request for information, VA seeks comments on various topics to help inform VA's development of the SSG Fox SPGP and its implementing regulations.

**DATES:** Comments are due on or before April 22, 2021.

**ADDRESSES:** Comments must be submitted through [www.Regulations.gov](http://www.Regulations.gov) and will be available for public viewing, inspection or copies.

**FOR FURTHER INFORMATION CONTACT:** Juliana Hallows, Associate Director for Policy and Planning—Suicide Prevention Program, Office of Mental

Health and Suicide Prevention (OMHSP), 11MHSP, 810 Vermont Avenue NW, Washington, DC 20420, 202-266-4653 (This is not a toll-free telephone number).

#### SUPPLEMENTARY INFORMATION:

##### Background

Section 201 of the Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019 (the Act), Public Law 116-171, enacted on October 17, 2020, created a new community-based suicide prevention grant program to reduce veteran suicide. Section 201 authorizes the award of grants for no more than \$750,000 per grantee per fiscal year to eligible entities to provide or coordinate providing suicide prevention services to eligible individuals and their families. An eligible individual is a person at risk of suicide who is a veteran as defined in 38 U.S.C. 101, an individual described in 38 U.S.C. 1720I(b), or an individual described in 38 U.S.C. 1712A(a)(1)(C)(i)–(iv).

The Secretary is required to implement the SSG Fox SPGP in coordination with the President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS) Task Force and in consultation with VA's OMHSP.

##### Consultation With Interested Parties

In administering the SSG Fox SPGP, VA is required to consult with certain entities to:

1. Establish the criteria for selecting eligible entities that have submitted applications;
2. Develop a framework for collecting and sharing information about eligible entities receiving grants; and
3. Develop the measures and metrics eligible entities receiving grants will use to determine the effectiveness of programming provided to improve mental health status, well-being and reduce suicide risk and deaths by suicide.

VA is also required to consult with entities in developing a plan for the design and implementing the provision of grants, including criteria for awarding such grants, and on non-traditional and innovative approaches and treatment practices. The Act requires VA to specifically consult with the following entities: (1) Veterans Service Organizations; (2) National organizations representing potential community partners in providing supportive services to address the needs of veterans and their families, including national organizations that advocate for the needs of individuals with or at risk of behavioral health conditions;

represent mayors, unions, first responders, chiefs of police and sheriffs, governors, a territory of the United States or represent a Tribal alliance; (3) National organizations representing members of the Armed Forces; (4) National organizations that represent counties; (5) Organizations with which VA has a current memorandum of agreement or understanding related to mental health or suicide prevention; (6) State Departments of Veterans Affairs; (7) National organizations representing members of the Reserve Components of the Armed Forces; (8) National organizations representing members of the Coast Guard; (9) Organizations, including institutions of higher education, with experience in creating measurement tools for purposes of advising the Secretary on the most appropriate existing measurement tool or protocol for VA to utilize; (10) The National Alliance on Mental Illness; (11) a labor organization (as such term is defined in 5 U.S.C. 7103(a)(4)); (12) The Centers for Disease Control and Prevention (CDC), the Substance Abuse and Mental Health Services Administration and PREVENTS; and such other organizations as the Secretary deems appropriate.

This request for information, described in more detail below, serves as VA's consultation as required by the Act. Responses to this request for information will be used to inform developing the SSG Fox SPGP and its implementing regulations. This notice and request for information has a comment period of 21 days, during which VA invites individuals, groups and entities to reply to the questions presented below. VA believes that 21 days is sufficient to provide comments, as the individuals, groups and entities interested in this program likely have information and opinions readily available or can quickly compile and submit such information. Commenters are encouraged to provide complete but concise responses to the questions outlined below. Please note that VA will not respond to comments or other questions regarding policy plans, decisions or issues regarding this notice. Comments received in response to this notice will be evaluated and, as appropriate, incorporated into a proposed rulemaking for grants under this law.

VA will also be holding virtual public listening sessions to provide these groups and entities an opportunity to share additional information. VA will publish information for these listening sessions in a future notice in the **Federal Register**.