industry and investment industry in order to increase innovation and investment in the healthcare sector?

2. How the workgroup should be convened and structured, including what subsectors of the healthcare economy should be invited to participate, and the most effective size. How should the agency structure meetings or other engagements in order to best facilitate the exchange of information and the presentation of attendees' individual perspectives? The Department seeks comment on how suitable attendees should be identified and selected to attend and engage in an exchange of ideas about the Department's goals of increasing innovation and investment in the healthcare sector.

3. HHS also seeks comment more broadly on opportunities for increased engagement and dialogue between HHS and those focused on innovating and investing in the healthcare industry, including alternatives to the workgroup structure discussed in this request for information. The Department is interested in comments that propose alternatives for developing a durable and consistent approach to increase innovation and investment in the healthcare sector to improve the public health and wellbeing of Americans.

This is a request for information only. Respondents are encouraged to provide complete but concise responses to any or all of the questions outlined above. This request for information is issued solely for information and planning purposes; it does not constitute a notice of proposed rulemaking or request for proposals, applications, proposal abstracts, or quotations, nor does it suggest that the Department will undertake any particular action in response to comments. This request for information does not commit the United States Government (''Government'') to contract for any supplies or services or make a grant award. Further, HHS is not seeking proposals through this request for information and will not accept unsolicited proposals. Respondents are advised that the Government will not pay for any information or administrative costs incurred in response to this request for information; all costs associated with responding to this request for information will be solely at the interested party's expense. Not responding to this request for information does not preclude participation in any future rulemaking or procurement, if conducted. It is the responsibility of the potential responders to monitor this request for information announcement for additional information pertaining to this request. We also note that HHS will not respond to questions about the policy issues raised in this request for information. HHS may or may not choose to contact individual responders. Such communications would only serve to further clarify written responses. Contractor support personnel may be used to review the responses submitted under this request for information. Responses to this notice are not offers and cannot be accepted by the Government to form a binding contract or issue a grant. Information obtained in response to this request for information may be used by the Government for program planning on a non-attribution basis. Respondents should not include any information that might be considered proprietary or confidential. This request for information should not be construed as a commitment or authorization to incur cost for which reimbursement would be required or sought. All submissions become Government property and will not be returned. HHS may publicly post the comments received, or a summary thereof. While responses to this request for information do not bind HHS to any further actions related to the response, all comments may be posted online on *http://www.regulations.gov.*

III. Collection of Information

This document does not impose information collection requirements; that is, reporting, recordkeeping or third-party disclosure requirements. This request for information constitutes a general solicitation of comments. In accordance with the implementing regulations of the Paperwork Reduction Act of 1995 (PRA) at 5 CFR 1320.3(h)(4), information subject to the PRA does not generally include ''facts or opinions submitted in response to general solicitations of comments from the public, published in the **Federal Register** or other publications, regardless of the form or format thereof, provided that no person is required to supply specific information pertaining to the commenter, other than that necessary for self-identification, as a condition of the agency's full consideration of the comment.'' Consequently, this document need not be reviewed by the Office of Management and Budget under the authority of the PRA (44 U.S.C. 3501 *et seq.*).

Authority: 42 U.S.C. 3501.

Dated: June 1, 2018.

Eric D. Hargan,

Deputy Secretary, Department of Health and Human Services.

[FR Doc. 2018–12234 Filed 6–6–18; 8:45 am]

BILLING CODE 4150–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Arthritis and Musculoskeletal and Skin Diseases; 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: Arthritis and Musculoskeletal and Skin Diseases Initial Review Group; Arthritis and Musculoskeletal and Skin Diseases Special Grants Review Committee.

Date: June 13–14, 2018.

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

Agenda: To review and evaluate grant applications.

Place: Embassy Suites, Chevy Chase Pavilion, 4300 Military Rd. NW, Washington, DC 20015.

Contact Person: Helen Lin, Ph.D., Scientific Review Officer, NIH/NIAMS/RB, 6701 Democracy Blvd., Suite 800, Plaza One, Bethesda, MD 20817, 301–594–4952, *linh1@mail.nih.gov*.

Name of Committee: Arthritis and Musculoskeletal and Skin Diseases Initial Review Group; Arthritis and Musculoskeletal and Skin Diseases Clinical Trials Review Committee.

Date: June 19, 2018.

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

Agenda: To review and evaluate grant applications.

Place: Hyatt Regency Bethesda, 1 Bethesda Metro Center, Bethesda, MD 20814.

Contact Person: Nakia C Brown, Ph.D., Scientific Review Officer, 6701 Democracy Blvd., RM 816, Bethesda, MD 20892, 301–827–4905, *brownnac@mail.nih.gov*.

(Catalogue of Federal Domestic Assistance Program Nos. 93.846, Arthritis, Musculoskeletal and Skin Diseases Research, National Institutes of Health, HHS)

Dated: June 1, 2018.

Sylvia L. Neal,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2018–12175 Filed 6–6–18; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of an Exclusive Patent License: The Development of an Anti-BCMA Immunotoxin for the Treatment of Human Cancer

AGENCY: National Institutes of Health, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The National Cancer Institute, an institute of the National Institutes of Health, Department of Health and Human Services, is contemplating the grant of an Exclusive Patent License to practice the inventions embodied in the Patents and Patent Applications listed in the **SUPPLEMENTARY INFORMATION** section of this notice to BEORO Therapeutics, GmbH. (''Beoro'') located in Seefeld, Germany.

DATES: Only written comments and/or complete applications for a license which are received by the National Cancer Institute's Technology Transfer Center on or before June 22, 2018 will be considered.

ADDRESSES: Requests for copies of the patent application, inquiries, and comments relating to the contemplated an Exclusive Patent License should be directed to: David A. Lambertson, Ph.D., Senior Technology Transfer Manager, NCI Technology Transfer Center, 9609 Medical Center Drive, RM 1E530 MSC 9702, Bethesda, MD 20892–9702 (for business mail), Rockville, MD 20850–9702 Telephone: (240)–276–5530; Facsimile: (240)–276–5504 Email: *david.lambertson@nih.gov*.

SUPPLEMENTARY INFORMATION:

Intellectual Property

The following represents the intellectual property to be licensed under the prospective agreement:

U.S. Patent Application 62/255,255 (HHS reference E–010–2016–0–US–01), U.S. Patent Application 62/257,493 (HHS reference E–010–2016–1–US–01), and PCT Patent Application PCT/US2016/061320 (HHS reference E–010–2016–2–PCT–01);

U.S. Patent Application 61/887,418 (HHS reference E–771–2013–0–US–01), U.S. Patent Application 61/908,464 (HHS reference E–771–2013–1–US–01), U.S. Patent Application 61/982,051 (HHS reference E–771–2013–2–US–01), U.S. Patent Application 61/052,665 (HHS reference E–771–2013–3–US–01), PCT Application PCT/US2014/058941 (HHS reference E–771–2013–4–PCT–01), U.S. Patent 9,388,222 (HHS reference E–771–2013–4–US–02), Australian Patent Application 2014329437 (HHS reference E–771–2013–4–AU–08), Canadian Patent Application 2926215 (HHS reference E–771–2013–4–CA–09), Chinese Patent Application 201480062185.7 (HHS Reference E–771–2013–4–CN–10), European Patent Application 14789449.7 (HHS reference E–771–2013–4–EP–11), Indian Patent Application 201647015226 (HHS reference E–771–2013–4–IN–12), Russian Patent Application 2016114406 (HHS reference E–771–2013–4–RU–13), Japanese Patent Application (HHS reference E–771–2013–4–JP–14), and U.S. Patent Application 15/191,392 (HHS reference E–771–2013–4–US–15);

U.S. Patent Application 61/535,668 (HHS reference E–263–2011–0–US–01), PCT Application PCT/US2012/055034 (HHS reference E–263–2011–0–PCT–02), Australian Patent 2012308591 (HHS reference E–263–2011–0–AU–03), Canadian Patent Application 2846608 (HHS reference E–263–2011–0–CA–04), European Patent 2755993 (HHS reference E–263–2011–0–EP–05), U.S. Patent 9,206,240 (HHS reference E–263–2011–0–US–06), Hong Kong Patent Application 14111650.2 (HHS reference E–263–2011–0–HK–07), U.S. Patent 9,657,066 (HHS reference E–263–2011–0–US–08), U.S. Patent Application 15/488,898 (HHS reference E–263–2011–0–US–09) and European Patent Application 14/927,645 (HHS reference E–263–2011–0–EP–18);

U.S. Patent Application 61/495,085 (HHS reference E–174–2011–0–US–01), PCT Application PCT/US2012/041234 (HHS reference E–174–2011–0–PCT–02), Australian Patent 2012268013 (HHS reference E–174–2011–0–AU–03), Brazilian Patent Application 112013031262–9 (HHS reference E–174–2011–0–BR–04), Canadian Patent Application 2838013 (HHS reference E–174–2011–0–CA–05), Chinese Patent Application 201280039071.1 (HHS reference E–174–2011–0–CN–06), European Patent 2718308 (HHS reference E–174–2011–0–EP–07) as validated in Germany, Spain, France, the United Kingdom, and Italy, Hong Kong Patent Application 14105911.9 (HHS reference E–174–2011–0–HK–08), Japanese Patent 6100764 (HHS reference E–174–2011–0–JP–09), South Korean Patent Application 2013–7032402 (HHS reference E–174–2011–0–KR–10), Mexican Patent Application MX/a/2013/014388 (HHS reference E–174–2011–0–MX–11), Russian Patent 2627216 (HHS reference E–174–2011–0–RU–12), U.S. Patent 9,346,859 (HHS reference E–174–2011–0–US–13), Hong Kong Patent Application 14106689.7 (HHS reference E–174–2011–0–HK–14), U.S. Patent 9,765,123 (HHS reference E–174–2011–0–US–15), Australian Patent Application 2017200541 (HHS reference E–174–2011–0–AU–16), European Patent Application 17163568.3 (HHS reference E–174–2011–0–EP–17), Japanese Patent Application 2017–031283 (HHS reference E–174–2011–0–JP–18), and U.S. Patent Application 15/693,705 (HHS reference E–174–2011/0–US–24);

U.S. Patent Application 61/241,620 (HHS reference E–269–2009–0–US–01), PCT Application PCT/US2010/048504 (HHS reference E–269–2009–0–PCT–02), Australian Patent 2010292069 (HHS reference E–269–2009–0–AU–03), Canadian Patent 2773665 (HHS reference E–269–2009–0–CA–04), Chinese Patent 201080049559.3 (HHS reference E–269–2009–0–CN–05), European Patent 2475398 (HHS reference E–269–2009–0–EP–06), as validated in France, Germany, Italy, Spain and the United Kingdom, Indian Patent Application 3197/CHENP/2012 (HHS reference E–269–2009–0–IN–07), Japanese Patent 5795765 (HHS reference E–269–2009–0–JP–08), Russian Patent Application 2012114005 (HHS reference E–269–2009–0–RU–09), and U.S. Patent 8,936,792 (HHS reference E–269–2009–0–US–10);

U.S. Patent Application 60/969,929 (HHS reference E–292–2007–0–US–01), PCT Application PCT/US2008/075296 (HHS reference E–292–2007–0–PCT–02), Australian Patent 2008296194 (HHS reference E–292–2007–0–AU–03), Canadian Patent 2698357 (HHS reference E–292–2007–0–CA–04), European Patent 2197903 (HHS reference E–292–2007–0–EP–05) as validated in Austria, Belgium, Bulgaria, Switzerland, Cyprus, Germany, Denmark, Estonia, Spain, Finland, France, the United Kingdom, Greece, Croatia, Hungary, Ireland, Italy, Lithuania, Luxembourg, Latvia, Monaco, Malta, the Netherlands, Norway, Poland, Portugal, Romania, Slovenia, Slovakia, and Turkey, U.S. Patent 8,871,906 (HHS reference E–292–2007–0–US–06), European Patent 2570425 (HHS reference E–292–2007–0–EP–07) as validated in France, Germany, the United Kingdom, Italy and Spain, and Hong Kong Patent Application 13106628.2 (HHS reference E–292–2007–0–HK–08);