

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours ³
Authorized Agent Attestation	350	1	350	1	350
Health Center Attestation	650	1	650	1	650
Hospital Attestation	3,250	1	3,250	1	3,250
Medical Malpractice, Peer Review Organization, or Private Accreditation Organization Attestation	250	1	250	1	250
Other Eligible Entity Attestation	7,100	1	7,100	1	7,100
• Agencies administering federal programs, including contract entities. • Federal law enforcement officials and agencies (including DEA, HHS OIG, and federal prosecutors). • Federal licensing or certification agencies. • Health Plans. • Other health care entities with formal peer review. • Other Health care service providers. • Professional Societies with formal peer review. • State agencies administering or supervising state programs. • State law or fraud enforcement agencies (including Medicaid fraud control units & state prosecutors).					
Total	11,600		11,600		11,600

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.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Meeting of the National Advisory Council on the National Health Service Corps

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

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, this notice announces that the Secretary's National Advisory Council on the National Health Service Corps (NACNHSC) will hold public meetings for the 2020 calendar year (CY). Information about NACNHSC, agendas, and materials for these meetings can be found on the NACNHSC website at: <https://nhsc.hrsa.gov/nac/meetings.html>.

DATES:

- January 14, 2020, 9:00 a.m.–5:00 p.m.; January 15, 2020, 9:00 a.m.–2:00 p.m. Eastern Time (E.T.)—In-Person and Webinar;
- March 10, 2020, 9:00 a.m.–5:00 p.m.; March 11, 2020, 9:00 a.m.–2:00 p.m. E.T.—Webinar;
- June 16, 2020, 9:00 a.m.–5:00 p.m.; June 17, 2020, 9:00 a.m.–2:00 p.m. E.T.—In-Person and Webinar;
- November 5, 2020, 9:00 a.m.–5:00 p.m.; November 6, 2020, 9:00 a.m.–2:00 p.m. E.T.—In-Person and Webinar.

ADDRESSES: Meetings may be held in-person, by teleconference, and/or Adobe Connect webinar. In-person NACNHSC meetings will be held at 5600 Fishers Lane, Rockville, Maryland 20857. Instructions for joining the meetings either in person or remotely will be posted on the NACNHSC website 30 business days before the date of the meeting. For meeting information updates, go to the NACNHSC website meeting page at <https://nhsc.hrsa.gov/nac/meetings.html>.

FOR FURTHER INFORMATION CONTACT: Diane Fabiyi-King, Designated Federal

Official (DFO), Division of National Health Service Corps, HRSA. Address: 5600 Fishers Lane, Room 14N110, Rockville, Maryland 20857; phone (301) 443-3609; or BHWNACNHSC@hrsa.gov.

SUPPLEMENTARY INFORMATION: The NACNHSC consults, advises, and makes annual recommendations to the Secretary of HHS and the Administrator of HRSA with respect to their NHSC related responsibilities under Subpart II, Part D of Title III of the Public Health Service Act (42 U.S.C. 254d–254k), as amended, to designate areas of the United States with health professional shortages and assign National Health Service Corps clinicians to improve the delivery of health services in health professional shortage areas. Since priorities dictate meeting times, be advised that times and agenda items are subject to change. CY 2020 meetings and agenda items may include, but are not limited to, the identification of NHSC priorities for future program issues and concerns; proposed policy changes by using the varying levels of expertise represented on NACNHSC to advise on specific program areas; updates from clinician workforce experts; and education and practice improvement in the training development of primary care clinicians. More general items may include presentations and discussions on the current and emerging needs of health workforce; public health priorities; healthcare access and evaluation; NHSC-approved sites; HRSA priorities and other federal health workforce and education programs that impact the NHSC.

³ There are approximately 700 authorized agents; 1,300 health centers; 6,500 hospitals; 500 medical malpractice payers, peer review organizations, and private accreditation organizations; and 14,200 other eligible entities, for an estimated total of 23,200 registered entities currently in attestation or scheduled for attestation with the NPDB. However, the reporting entities may include multiple sites that are registered independently in the system, thereby increasing the total number of respondents. Given that entities will only be required to complete attestation biennially, these estimates are divided in half for the annualized burden hours.

Refer to the NACNHSC website listed above for all current and updated information concerning the CY 2020 NACNHSC meetings, including draft agendas and meeting materials that will be posted 14 calendar days before each meeting. Members of the public will have the opportunity to provide comments. Public participants may submit written statements in advance of the scheduled meeting(s). Oral comments will be honored in the order they are requested and may be limited as time allows.

Requests to submit a written statement or make oral comments to the NACNHSC should be sent to Diane Fabiyi-King via email at BHWNACNHSC@hrsa.gov at least 5 business days before the meeting date(s). Individuals who need special assistance or another reasonable accommodation should notify Diane Fabiyi-King using the contact information listed above at least 10 business days before the meeting(s) they wish to attend. Since all in-person meetings occur in a federal government building, attendees must go through a security check to enter the building. Non-U.S. Citizen attendees must notify HRSA of their planned attendance at least 20 business days prior to the meeting in order to facilitate their entry into the building. All attendees are required to present government-issued identification prior to entry.

Maria G. Button,

Director, Executive Secretariat.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Solicitation of Nominations for Membership To Serve on the Centers for Disease Control and Prevention (CDC)/Health Resources and Services Administration (HRSA) Advisory Committee on HIV, Viral Hepatitis and Sexually Transmitted Disease (STD) Prevention and Treatment

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

ACTION: Request for nominations.

SUMMARY: HRSA is seeking nominations of qualified candidates for consideration for appointment as members of the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHACHSPT). CHACHSPT advises the HHS Secretary,

the CDC Director, and the HRSA Administrator on objectives, strategies, policies, and priorities for HIV, viral hepatitis, and STD prevention and treatment efforts. These include surveillance of HIV infection, viral hepatitis, other STDs, and related behaviors; epidemiologic, behavioral, health services, and laboratory research on HIV, viral hepatitis, and other STDs; identification of policy issues related to HIV/viral hepatitis/STD professional education, patient healthcare delivery, and prevention services; agency policies about prevention, treatment, healthcare delivery, and research and training relating to HIV, viral hepatitis and other STDs; strategic issues influencing the ability of CDC and HRSA to fulfill their missions of providing prevention and treatment services; programmatic efforts to prevent and treat HIV, viral hepatitis, and other STDs; and support to the agencies in their development of responses to emerging health needs related to HIV, viral hepatitis, and other STDs.

DATES: HRSA will receive written nominations for CHACHSPT on a continuous basis.

ADDRESSES: Nomination packages must be submitted via email at CHACAdvisoryComm@hrsa.gov.

FOR FURTHER INFORMATION CONTACT: Email chacadvisorycomm@hrsa.gov. A copy of the CHACHSPT charter and list of the current membership may be obtained by accessing the CHACHSPT website at <https://www.cdc.gov/maso/facm/facmchachspt.html>.

SUPPLEMENTARY INFORMATION: The Secretary of HHS, and by delegation, the CDC Director and the HRSA Administrator, are authorized by the PHS Act to: (1) Conduct, encourage, cooperate with, and assist other appropriate public health authorities, scientific institutions, and scientists in the conduct of research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases, and other impairments; (2) assist states and their political subdivisions in preventing, suppressing, and treating communicable diseases and other preventable conditions and in promoting health and well-being; (3) assist public and non-profit private entities in preventing, controlling and treating STDs, including HIV; (4) improve health and achieve health equity through access to quality services and a skilled health workforce and innovative programs; (5) support healthcare services to persons living with or at risk for HIV, viral hepatitis, and other STDs; and (6) advance the

education of health professionals and the public about HIV, viral hepatitis, and other STDs.

CHACHSPT meets two times each calendar year, or at the discretion of the Designated Federal Officer in consultation with the CHACHSPT co-chairs.

Nominations: HRSA is requesting nominations for voting members to serve as Special Government Employees (SGEs) on CHACHSPT. The Secretary of HHS appoints CHACHSPT members with the expertise needed to fulfill the duties of the Advisory Committee. Nominees are sought to provide a balance of diverse experiences and expertise. The Secretary of HHS or his designee shall select members of the CHACHSPT with knowledge in the fields of public health; epidemiology; laboratory practice; immunology; infectious diseases; behavioral health and science including, but not limited, to opioid use and related expertise; health education; healthcare delivery; state health programs; clinical care; preventive health; medical education; health services and clinical research; and healthcare financing. In addition, people with HIV and affected populations, as well as state and local health and education agencies, HIV/viral hepatitis/STD community-based organizations, and the ethics or religious community are encouraged to submit nomination packages for consideration. Current federal employees will not be considered. Interested applicants may self-nominate or be nominated by another individual or organization.

Individuals selected for appointment to CHACHSPT will be invited to serve for up to 4 years. Members appointed as SGEs receive a stipend and reimbursement for per diem and travel expenses incurred for attending CHACHSPT meetings and/or conducting other business on behalf of the CHACHSPT as authorized by 5 U.S.C. 5703 of the Federal Travel Regulation for persons employed intermittently in government service.

The following information must be included in the package of materials submitted for each individual nominated for consideration:

- A letter of interest or personal statement from the nominee stating how their expertise would inform the work of CHACHSPT;
- A biographical sketch of the nominee (500 words or fewer);
- A copy of the nominee's resume or curriculum vitae; and
- The nominee's contact information (address, daytime telephone number, and email address).