TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

| Form name | Number of respondents | Number of responses per respondent | Total responses | Average burden per response (in hours) | Total burden hours |
|----------------|-----------------------|------------------------------------|--------------------|---|-----------------------|
| Grantee Report | 54 54 | 1 1 | 54 54 | 6 81 | 324 4,374 |
| Total | * 54 | | 54 | | 4,698 |

^{*}The same respondents complete the Grantee Report and the Client-level Report.

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.

Jason E. Bennett,

Director, Division of the Executive Secretariat.
[FR Doc. 2017–08197 Filed 4–21–17; 8:45 am]
BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND

HUMAN SERVICES

Health Resources and Services Administration

Advisory Committee on Heritable Disorders in Newborns and Children

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

ACTION: Notice of meeting.

SUMMARY: In accordance with the Federal Advisory Committee Act, notice is hereby given of the following meeting for the Advisory Committee on Heritable Disorders in Newborns and Children (ACHDNC). The meeting will be open to the public but advance registration is required. The online registration deadline is Thursday, May 4, 2017, 5:00 p.m. Eastern Time. Please check the Web site for additional guidance and registration information. The registration link is http:// www.achdncmeetings.org/. Information about the agenda for this meeting can be obtained by accessing the following Web site: http://www.hrsa.gov/ advisorycommittees/mchbadvisory/ heritabledisorders.

DATES: The meeting will be held on May 11, 2017, 9:00 a.m. to 5:00 p.m. and May 12, 2017, 9:00 a.m. to 3:00 p.m.

ADDRESSES: This meeting will be held in-person and by webcast. The address for the meeting is 5600 Fishers Lane, 5th Floor Pavilion, Rockville, MD 20857. Webcast information will be emailed to you after you register.

FOR FURTHER INFORMATION CONTACT:

Anyone requesting information regarding the ACHDNC should contact Ann Ferrero, Maternal and Child Health Bureau (MCHB), HRSA, in one of three ways: (1) Send a request to Ann Ferrero, MCHB, HRSA 5600 Fishers Lane, Room 18N100C, Rockville, Maryland 20857; (2) call 301–443–3999 or (3) send an email to: *AFerrero@hrsa.gov*. More information on the Advisory Committee is available at the Advisory Committee's Web site, provided above.

SUPPLEMENTARY INFORMATION: The ACHDNC, as authorized by Public Health Service Act, Title XI, § 1111 (42 U.S.C. 300b–10), provides advice to the Secretary of HHS on the development of newborn screening activities, technologies, policies, guidelines, and programs for effectively reducing morbidity and mortality in newborns and children having, or at risk for, heritable disorders. In addition. ACHDNC's recommendations regarding inclusion of additional conditions and inherited disorders for screening which have been adopted by the Secretary are then included in the Recommended Uniform Screening Panel (RUSP). Conditions listed on the RUSP constitute part of the comprehensive guidelines supported by HRSA for infants, children, and adolescents. Pursuant to section 2713 of the Public Health Service Act, codified at 42 U.S.C. 300gg-13, non-grandfathered health plans and health insurance issuers are required to cover screenings included in the HRSA-supported comprehensive guidelines without charging a copayment, co-insurance, or deductible for plan years (i.e., policy years) beginning on or after the date that is one year from the Secretary's adoption of the condition for screening, the meeting will include: (1) Presentations and discussion on the process of identifying and following up on out of range

newborn screening results; (2) a presentation on newborn screening quality assurance programs; (3) presentations on the clinical and public health impact of Critical Congenital Heart Defects screening; (4) discussion and possible vote on a report on Medical Foods for Inborn Errors of Metabolism; (5) a presentation, discussion, and possible vote on whether to move a nomination forward to evidence review for spinal muscular atrophy (SMA); and (6) updates from the Laboratory Standards and Procedures workgroup, Follow-up and Treatment workgroup, and Education and Training workgroup.

The Committee will not be voting on a proposed addition of a condition to the RUSP. The final meeting agenda will be available two (2) days prior to the meeting on the Committee's Web site: http://www.hrsa.gov/advisorycommittees/mchbadvisory/heritabledisorders.

Members of the public may submit written and/or present oral comments at the meeting. All comments are part of the official Committee record. Advance registration is required to submit written comments and/or present oral comments. Written comments must be submitted by April 28, 2017, 12:00 p.m. Eastern Time to be included in the May meeting briefing book. Written comments should identify the individual's name, address, email, telephone number, professional or organization affiliation, background or area of expertise (i.e., parent, family member, researcher, clinician, public health, etc.) and the topic/subject matter.

Individuals who wish to provide oral comments must register by Thursday, May 4, 2017, 5:00 p.m. Eastern Time. To ensure that all individuals who have registered to make oral comments can be accommodated, the allocated time may be limited. Individuals who are associated with groups or have similar interests may be requested to combine their comments and present them through a single representative. No audiovisual presentations are permitted.

For additional information or questions on public comments, please contact Ann Ferrero, MCHB, HRSA; email: *AFerrero@hrsa.gov.*

The 5600 Fishers Lane building requires a security screening on entry. To facilitate your access to the building, please contact Ann Ferrero at 301–443–3999. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify Ann Ferrero, MCHB, HRSA; email: *AFerrero@hrsa.gov*, at least 10 days prior to the meeting.

Jason E. Bennett,

Director, Division of the Executive Secretariat. [FR Doc. 2017–08220 Filed 4–21–17; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier: 0955-New-30D]

Agency Information Collection Activities; Submission to OMB for Review and Approval; Public Comment Request

AGENCY: Office of the Secretary, HHS. **ACTION:** Notice.

SUMMARY: In compliance with section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, has submitted an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB) for

review and approval. The ICR is for a new collection. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public on this ICR during the review and approval period.

DATES: Comments on the ICR must be received on or before May 24, 2017.

ADDRESSES: Submit your comments to *OIRA_submission@omb.eop.gov* or via facsimile to (202) 395–5806.

FOR FURTHER INFORMATION CONTACT: Information Collection Clearance staff, Information.CollectionClearance@ hhs.gov or (202) 795–7714.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the Information Collection Request Title and document identifier 0955–New–30D for reference.

Information Collection Request Title: National Council for Behavioral Health's Information Technology Survey.

Abstract: The Office of the National Coordinator for Health IT (ONC) in coordination with Substance Abuse and Mental Health Services Administration (SAMHSA) seeks to conduct a survey in 2017 of SAMSHA to examine the adoption and use of health IT as well as interoperability across community behavioral health care settings. Data from the survey will help ONC and SAMSHA monitor progress and enhance programs and policy to improve the use of health IT and expand interoperability across these settings. In 2015, ONC outlined a strategy by which both private and public stakeholders would work together to improve

interoperability. This strategy called for measuring and reporting on the state of interoperability across the care continuum, including for behavioral health care providers; however, there are no recent national data available for this care setting. Addressing this gap is critical in order to also determine these providers' readiness to serve as partners in delivery system reform efforts that are underway and that will be expanded with the implementation of Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). Although behavioral health care providers won't be participating in the MACRA initiative at the outset, the Secretary of Health and Human Services may include behavioral health providers, such as psychologists and social workers to participate in value-based payment initiatives such as the Merit-Based Incentive Payment System (MIPs) in the future.

Need and Proposed Use of the Information: This data collection effort will allow for us to assess health IT adoption and interoperability progress since 2015, enable comparisons to physician and hospital settings and contribute to strategic efforts to improve behavioral healthcare providers' adoption and use of health IT.

Likely Respondents: The respondents will include mid-level and executive level staff (IT Directors, CIO, and CEOs) of behavioral healthcare organizations that are involved in the management and maintenance of their organization's health IT infrastructure.

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 | Average burden per response (in hours) | Total burden hours |
|--|-----------------------|------------------------------------|---|-----------------------|
| National Council for Behavioral Health's Information Technology Survey | 533 | 1 | 20/60 | 178 |
| Total | 533 | 1 | 20/60 | 178 |

Terry S. Clark,

Asst Information Collection Clearance Officer.

[FR Doc. 2017-08188 Filed 4-21-17; 8:45 am]

BILLING CODE 4150-45-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier: 0990-0452-30D]

Agency Information Collection Activities; Submission to OMB for Review and Approval; Public Comment Request

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: In compliance with section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, has submitted an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB) for review and approval. The ICR is for revision of the approved information collection assigned OMB control number 0990–0452, scheduled to expire on January 31, 2020. Comments