

performance measures. HRSA developed separate performance measures for RCORP's new Overdose Response, Behavioral Health, and Neonatal Abstinence Syndrome grants and seeks OMB approval for the new performance measures.

*Need and Proposed Use of the Information:* Due to the growth in the number of grant initiatives included within RCORP, as well as emerging SUD and other behavioral health trends in rural communities, HRSA is submitting a revised ICR that includes measures for RCORP's new Overdose Response, Child and Adolescent Behavioral Health, and Neonatal Abstinence Syndrome grants.

For this program, performance measures were developed to provide data on each RCORP initiative and to enable HRSA to provide aggregate program data required by Congress under the Government Performance and

Results Act of 1993. These measures cover the principal topic areas of interest to HRSA's Federal Office of Rural Health Policy, including: (a) provision of, and referral to, rural behavioral health care services, including SUD prevention, treatment and recovery support services; (b) behavioral health care, including SUD prevention, treatment, and recovery, process and outcomes; (c) education of health care providers and community members; (d) emerging trends in rural behavioral health care needs and areas of concern; and (e) consortium strength and sustainability. All measures will speak to the progress on meeting the set goals of the Federal Office of Rural Health Policy.

*Likely Respondents:* The respondents will be the recipients of the RCORP grants.

*Burden Statement:* Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. 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	Total responses	Average burden per response (in hours)	Total burden hours
RCORP—Implementation .....	290	2	580	1.24	719.20
RCORP—Psychostimulant Support .....	15	1	15	1.30	19.50
RCORP—Medication Assisted Treatment Access .....	11	1	11	1.95	21.45
RCORP—Behavioral Health Care Support .....	58	1	58	2.02	117.16
Rural Communities Opioid Response—Overdose Response (NEW) .....	47	3	141	0.56	78.96
RCORP—Child and Adolescent Behavioral Health (NEW) .....	9	2	18	0.48	8.64
RCORP—Neonatal Abstinence Syndrome (NEW) .....	41	4	164	2.31	378.84
<b>Total .....</b>	<b>471</b>	<b>.....</b>	<b>987</b>	<b>.....</b>	<b>1,343.75</b>

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**

**National Institutes of Health**

**National Heart, Lung, and Blood Institute; Notice of Closed Meeting**

Pursuant to section 1009 of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting 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:* Heart, Lung, and Blood Initial Review Group; NHLBI Mentored Clinical and Basic Science Study Section.

*Date:* June 27-28, 2024.

*Time:* 9:00 a.m. to 6:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* The Bethesda Hotel, Tapestry Collection by Hilton, 8120 Wisconsin Ave, Bethesda, MD 20814 (Hybrid Meeting).

*Contact Person:* Manoj Kumar Valiyaveetil, Ph.D., Scientific Review Officer, Office of Scientific Review/DERA, National Heart, Lung, and Blood Institute, National Institutes of Health, 6705 Rockledge Drive, Room 208-R, Bethesda, MD 20817, (301) 402-1616, [manoj.valiyaveetil@nih.gov](mailto:manoj.valiyaveetil@nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.233, National Center for Sleep Disorders Research; 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; 93.839, Blood Diseases and Resources Research, National Institutes of Health, HHS)

Dated: May 1, 2024.

**Melanie J. Pantoja,**

*Program Analyst, Office of Federal Advisory Committee Policy.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Institute of Dental and Craniofacial Research; Notice of Closed Meeting**

Pursuant to section 1009 of the Federal Advisory Committee Act, as amended, notice is hereby given of a meeting of the Board of Scientific Counselors, National Institute of Dental and Craniofacial Research.