

Catalog of Federal Domestic Assistance Number: 93.224.

Background: The National Health Care for the Homeless Council (NHCHC) is a cooperative agreement grantee that provides training and technical assistance support to health centers that serve homeless individuals and families.

The NHCHC requires supplemental funding to provide, through expanded regional and national training activities, a broader and enriched menu of support for HRSA grantees, including Health Care for the Homeless (HCH) administrators, clinicians, and members of HCH Boards of Directors and consumer advisory groups.

Amount: The amount of the award is \$225,000.

Project Period: July 1, 2006, to June 30, 2008.

Budget Period Supplemented: July 1, 2007, to June 30, 2008.

Justification for The Exception to Competition: Given the recent growth of the HCH component of HRSA's Health Center program, it is critical that expanded regional and national training be provided in as timely a manner as possible. This supplemental request is being awarded noncompetitively because, at this time, there are no other organizations with the expertise to complete these activities, and no other organization is prepared to provide these services within the timeframe in which they are needed. Due to the emerging and urgent needs of the HCH program, this supplemental request and the activities proposed are essential to ensuring successful delivery of health care to the target population.

FOR FURTHER INFORMATION CONTACT: Jean L. Hochron, M.P.H., Director, Office of Minority and Special Populations, Bureau of Primary Health Care, Health Resources and Services Administration, 5600 Fishers Lane, Room 16-105, Rockville, MD 20857; *phone:* 301-594-4437, *FAX* 301-443-0248, *e-mail* jhochron@hrsa.gov.

Dated: January 8, 2008.

Elizabeth M. Duke,
Administrator.

[FR Doc. E8-582 Filed 1-14-08; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Advisory Council on Migrant Health; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), notice is hereby given of the following meeting:

Name: National Advisory Council on Migrant Health.

Dates and Times: February 5, 2008, 8:30 a.m. to 5 p.m., February 6, 2008, 8:30 a.m. to 5 p.m.

Place: 5600 Fishers Lane, Room 17-05, Rockville, Maryland 20857, **Telephone:** (301) 594-0367, **Fax:** (301) 443-0248.

Status: The meeting will be open to the public.

Purpose: The purpose of the meeting is to discuss services and issues related to the health of migrant and seasonal farmworkers and their families and to formulate recommendations for the Secretary of Health and Human Services.

Agenda: The agenda includes an overview of the Council's general business activities. The Council will also hear presentations from experts on farmworker issues, including the status of farmworker health at the local and national levels.

Agenda items are subject to change as priorities indicate.

For Further Information Contact: Gladys Cate, Office of Minority and Special Populations, Bureau of Primary Health Care, Health Resources and Services Administration, 5600 Fishers Lane, Maryland 20857; *telephone* (301) 594-0367.

Dated: January 8, 2008.

Alexandra Huttinger,

Acting Director, Division of Policy Review and Coordination.

[FR Doc. E8-526 Filed 1-14-08; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

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

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), notice is hereby given of the following meeting:

Name: National Advisory Council on the National Health Service Corps.

Dates and Times: February 28, 2008, 3 p.m.-5 p.m.; February 29, 2008, 8:30 a.m.-5 p.m.; and March 1, 2008, 9 a.m.-5 p.m.

Place: Hilton Washington DC/Rockville Executive Meeting Center, 1750 Rockville Pike, Rockville, Maryland, United States

20852-1699, *Tel:* 1-301-468-1100 *Fax:* 1-301-468-0308.

Status: The meeting will be open to the public.

Agenda: The program staff will be presenting information relative to the reorganization of the Bureau of Clinician Recruitment and Service and how the new structure will impact the implementation of the National Health Service Corps Program.

For Further Information Contact: Tira Patterson, Bureau of Clinician Recruitment and Service, Health Resources and Services Administration, Parklawn Building, Room 8A-55, 5600 Fishers Lane, Rockville, MD 20857; *e-mail:* TPatterson@hrsa.gov; *telephone:* (301) 594-4140.

Dated: January 9, 2008.

Alexandra Huttinger,

Acting Director, Division of Policy Review and Coordination.

[FR Doc. E8-581 Filed 1-14-08; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Small Rural Hospital Improvement Grant Program

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice for public comment.

SUMMARY: The Health Resources and Services Administration (HRSA) is seeking comments from the public on its plan to institute a permanent deviation from a policy in the Department of Health and Human Services (HHS), Grants Policy Directive (GPD) 3.01 governing indirect cost recovery for one of its grant programs. The GPD states "HHS considers activities conducted by grantees that result in indirect charges a necessary and appropriate part of HHS grants, and HHS awarding offices must reimburse their share of these costs." Although HRSA typically reimburses grantees for their full share of administrative overhead represented in approved indirect cost rates (which can be up to 50 percent or higher), the Agency believes, in the case of its Small Rural Hospital Improvement Grant Program (SHIP), that full recovery of overhead expenditures would be detrimental to the ability to adequately conduct the activities mandated in the authorizing legislation.

The purpose of the SHIP grant program is to assist eligible small rural hospitals in implementing Prospective Payments Systems (PPS), compliance with the Health Insurance Portability and Accountability Act (HIPAA) regulations, and to reduce medical