

- Are there any specific barriers or gaps to achieving success?
- Are there any critical steps or milestones necessary to successfully implement the proposed framework?
  - How do state, tribal, local, and territorial partners, non-governmental organizations, academic institutions, private sector partners, and other partners want to engage with federal collaborators to advance implementation of this framework?

- What additional One Health issues should be prioritized in the future?
- What information or

recommendations are needed to ensure the guiding principles of health equity, sustainability, stewardship, and a multisectoral approach are adequately addressed in the framework? How can these guiding principles be elevated during follow-up development and drafting of implementation plans?

Organizations should submit a single response reflective of the views of the organization/membership when possible. Please note that comments received, including attachments and other supporting materials, are part of the public record and are subject to public disclosure. Comments will be posted on <https://www.regulations.gov>. Therefore, do not include any information in your comment or supporting materials that you consider confidential or inappropriate for public disclosure. If you include your name, contact information, or other information that identifies you in the body of your comments, that information will be on public display. CDC will review all submissions and may choose to redact, or withhold, submissions containing private or proprietary information, such as Social Security numbers, medical information, inappropriate language or images, or duplicate/near duplicate examples of a mass-mail campaign.

### Background

Previous multisectoral work has identified a need for a national One Health framework to address zoonotic diseases and advance public health preparedness in the United States. In 2017, CDC, DOI, and USDA organized a One Health Zoonotic Disease Prioritization (OHZDP) workshop for the United States. Participants included 30 government officials from federal and state agencies who work to address zoonotic diseases in the public health, animal health, and environment sectors. The workshop used a One Health approach to identify and prioritize endemic and emerging zoonotic diseases of greatest national concern for the United States that should be jointly

addressed by federal zoonotic disease programs. Participants also developed plans for implementing and strengthening One Health approaches to address these diseases in the United States. The development of the NOHF-Zoonoses responds to one of the recommendations from the OHZDP workshop. In addition, Congress directed CDC, in partnership with other departments and agencies, to develop a One Health framework to address zoonotic diseases and advance public health preparedness in both the House Appropriations Committee report accompanying the 2021 omnibus appropriations bill<sup>1</sup> and the 2023 Consolidated Appropriations Act.<sup>2</sup>

The draft NOHF-Zoonoses, found in the Supporting Materials tab of the docket, is focused on coordinated federal activities in the United States and describes a common vision, mission, and goals for key federal partners involved in implementing a One Health approach to address zoonotic diseases. Successful federal One Health collaboration is contingent on continued strong partnerships and coordination with public health, agriculture, wildlife, plant, environment, and other relevant authorities at state, tribal, local, and territorial levels. One Health partnerships to address zoonotic diseases cross federal, state, tribal, local, and territorial government jurisdictions and involve non-governmental, academic, and private sector partners. All relevant sectors are encouraged to collaborate for effective and consistent One Health outcomes.

Although this framework focuses primarily on zoonotic diseases and does not address other issues of One Health importance, the resulting partnerships, systems, and lessons will inform future One Health work and strengthen the nation's ability to address other threats and promote health, safety, security, and resilience at the human-animal-plant-environment interface.

Additional background information can be found on the following websites.

<sup>1</sup> H. Rept. 116–450—Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Bill, 2021, H. Rept. 116–450, 116th Cong. (2023), Title II—Department of Health and Human Services: pages 67–68 <https://www.congress.gov/congressional-report/116th-congress/house-report/450>.

<sup>2</sup> H.R. 2617, Public Law 117–328, “Consolidated Appropriations Act, 2023,” Division FF—Health and Human Services, Title II—Preparing for and Responding to Existing Viruses, Emerging New Threats, and Pandemics, Sec. 2235, pages 1297–1298 (Dec. 29, 2022), <https://www.congress.gov/117/bills/hr/2617/BILLS-117hr2617enr.pdf>.

- Federal One Health Coordination: <https://www.cdc.gov/onehealth/what-we-do/federal-coordination.html>.

- United States Joint External Evaluation: <https://www.who.int/publications/i/item/WHO-WHE-CPI-2017.13>.

- United States One Health Zoonotic Disease Prioritization Report: <https://www.cdc.gov/onehealth/pdfs/us-ohzdp-report-508.pdf>.

CDC, USDA, and DOI will be offering three webinars to answer questions concerning the draft NOHF-Zoonoses. The time, date, and links to these webinars will be provided in a separate **Federal Register** notice.

Dated: September 15, 2023.

**Tiffany Brown,**

*Executive Secretary, Centers for Disease Control and Prevention.*

[FR Doc. 2023–20338 Filed 9–19–23; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS–0990–0438]

### Agency Information Collection Request; 30-Day Public Comment Request

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

**ACTION:** Notice.

**SUMMARY:** In compliance with the requirement of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment.

**DATES:** Comments on the ICR must be received on or before October 20, 2023.

**ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function.

**FOR FURTHER INFORMATION CONTACT:** Sherrette Funn, [Sherrette.Funn@hhs.gov](mailto:Sherrette.Funn@hhs.gov) or (202) 795–7714. When submitting comments or requesting information, please include the document identifier 0990–0438–30D and project title for reference.

**SUPPLEMENTARY INFORMATION:** Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the

following subjects: (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.

**Title of the Collection**

*Type of Collection:* Reinstatement without change.

*OMB No.:* 0990-0438.

*Abstract:* The Office of Population Affairs (OPA), in the Office of the Assistant Secretary for Health (OASH), U.S. Department of Health and Human Services (HHS), requests clearance for the collection of performance measures specifically for FY2020 Teen Pregnancy Prevention (TPP) Program grantees. Collection of performance measures is a

requirement of all TPP awards and is included in the NOFOs. The data collection will allow OPA to comply with federal accountability and performance requirements, inform stakeholders of grantee progress in meeting TPP program goals, provide OPA with metrics for monitoring TPP grantees, and facilitate individual grantees' continuous quality improvement efforts within their projects. OPA requests clearance for one year to cover reporting during the no-cost extension period of the awards.

**ESTIMATED ANNUALIZED BURDEN TABLE**

Form	Type of respondent	Number of respondents	Number responses per respondent	Average burden per response (in hours)	Total burden hours
Partners and sustainability .....	All TPP grantees .....	90	2	15/60	45
Training .....	All TPP Grantees .....	90	2	15/60	45
Dissemination .....	All TPP Grantees .....	90	2	30/60	90
Stakeholder Engagement .....	All TPP Grantees .....	90	2	15/60	45
Reach and Demographics .....	Tier 1 and Tier 2 Phase II Grantees	64	2	3	384
Dosage .....	Tier 1 and Tier 2 Phase II Grantees	64	2	2	256
Fidelity and Quality .....	Tier 1 and Tier 2 Phase II Grantees	64	2	2	256
Tier 2 Innovation Network .....	Tier 2 Innovation Network Grantees	14	2	15/60	7
Supportive Services (Tier 1) .....	Tier 1 Grantees .....	54	2	15/60	27
<b>Total</b> .....	.....	.....	2	.....	1155

**Sherrette A. Funn,**  
*Paperwork Reduction Act Reports Clearance Officer, Office of the Secretary.*  
 [FR Doc. 2023-20290 Filed 9-19-23; 8:45 am]  
**BILLING CODE 4150-34-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Indian Health Service**

**Request for Public Comment: 30-Day Information Collection: Indian Health Service Forms To Implement the Privacy Rule**

**AGENCY:** Indian Health Service, HHS.

**ACTION:** Notice and request for comments; request for extension of approval.

**SUMMARY:** In compliance with the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) invites the general public to comment on the information collection titled, "IHS Forms to Implement the Privacy Rule" Office of Management and Budget (OMB) Control Number 0917-0030. This notice announces the IHS intent to submit the collection, which expires September 30, 2023, to OMB for approval of an extension with modifications, and to solicit comments

on specific aspects of the information collection.

**DATES:** *Comment Due Date:* October 20, 2023. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication.

**ADDRESSES:** Send your comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS.

**FOR FURTHER INFORMATION CONTACT:** To request additional information, please contact Evonne Bennett, Information Collection Clearance Officer, by email: *Evonne.Bennett@ihs.gov* or (240) 472-1996.

**SUPPLEMENTARY INFORMATION:** The IHS published a notice on this previously approved information collection in the **Federal Register** (88 FR 42726) on July 3, 2023, and allowed 60 days for public comment. No public comment was received in response to the notice. The purpose of this notice is to allow 30 days for public comment to be submitted to OMB. A copy of the supporting statement is available at

*www.regulations.gov* (see Docket ID IHS\_FRDOC\_0001).

*Title of Collection:* 0917-0030, IHS Forms to Implement the Privacy Rule (45 CFR parts 160 & 164). *Type of Information Collection Request:* Extension of the currently approved information collection, with modifications 0917-0030, IHS Forms to Implement the Privacy Rule (45 CFR parts 160 & 164). *Form(s):* IHS-810, IHS-912-1, IHS-912-2, IHS-913, IHS-917, IHS-982, and IHS-963. *Need and Use of Information Collection:* This collection of information is made necessary by the Department of Health and Human Services Rule entitled "Standards for Privacy of Individually Identifiable Health Information" (Privacy Rule) (45 CFR parts 160 and 164). The Privacy Rule implements the privacy requirements of the Administrative Simplification subtitle of the Health Insurance Portability and Accountability Act of 1996, creates national standards to protect an individual's personal health information, and gives patients increased access to their medical records. 45 CFR 164.508, 164.520, 164.522, 164.526 and 164.528 of the Rule require the collection of information to implement these protection standards and access requirements. The IHS will use the