

ACTION: Notice of supplemental award.

SUMMARY: HRSA's HIV/AIDS Bureau will award \$100,000 in supplemental funding to the University of Washington. This award is to support the Ryan White HIV/AIDS Program Part F AIDS Education and Training Centers (AETC) Enhancement and Update of the National HIV Curriculum e-Learning Platform project in Fiscal Year (FY) 2020 and in each succeeding year of their periods of performance, pending the availability of funds. This supplemental funding will enable the University of Washington to make critical content enhancements to the National HIV Curriculum e-Learning Platform that respond to the specific training and technical assistance needs of HIV treatment professionals located in the jurisdictions targeted by the Ending the HIV Epidemic: A Plan for America (EHE) initiative. Further, it will ensure that more health professionals in EHE jurisdictions have access to the most up-to-date HIV treatment interventions and protocols, thus increasing their competency to provide high-quality care for people with HIV and in so doing, advance the goals of the EHE.

FOR FURTHER INFORMATION CONTACT:

Sherrilyn Crooks, Chief, HIV Education Branch, Office of Training and Capacity Development, HRSA, 5600 Fishers Lane, Room 9N110, Rockville, MD 20857, by email at scrooks@hrsa.gov or by phone at (301) 443-7662.

SUPPLEMENTARY INFORMATION:

Intended Recipient of the Award: The University of Washington, AETC Enhancement and Update of the National HIV Curriculum e-Learning Platform project.

Amount of Award: \$100,000 available in FY 2020.

Project Period: March 1, 2020–August 31, 2022.

CFDA Number: 93.145.

Authority: 42 U.S.C. 300ff–111(a) (section 2692(a) of the Public Health Service (PHS) Act), 42 U.S.C. 300ff–121 (section 2693 of the PHS Act), and Further Consolidated Appropriations Act, 2020 (Pub. L. 116–94).

Justification: The University of Washington currently manages the AETC's web-based National HIV Curriculum-e-Learning Platform. The National HIV Curriculum e-Learning Platform provides virtual state of the art training and resources to HIV treatment and care professionals. The recipient will use this supplement award to enhance the quality and relevance of the of training and technical assistance resources offered through the National HIV Curriculum e-Learning Platform

and expand its focus to include the specific educational needs of HIV care and treatment providers in EHE designated areas. The supplemental funds will enable the University of Washington to deploy more robust outreach efforts that target EHE jurisdictions to ensure that they are aware of and can use this valuable web-based resource. Engaging new and experienced HIV providers and health professions training institutions in EHE regions will allow the University of Washington to better discern and directly respond to any training needs or gaps these providers and institutions may identify. Expanding the availability of state-of-the-art HIV care and treatment training resources will help prepare for the projected increase in demand for well-trained HIV care professionals as a result of the EHE rollout. This award recipient has the demonstrated expertise and scalable experience required to address these time-sensitive technical and training assistance.

Thomas J. Engels,
Administrator.

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BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; AIDS Drug Assistance Program Data Report ADR, OMB No. 0915–0345—Revision

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

ACTION: Notice.

SUMMARY: In compliance with of the Paperwork Reduction Act of 1995, HRSA has submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period.

DATES: Comments on this ICR should be received no later than May 7, 2020.

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. 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: To request a copy of the clearance requests submitted to OMB for review, email Lisa Wright-Solomon, the HRSA Information Collection Clearance Officer at paperwork@hrsa.gov or call (301) 443–1984.

SUPPLEMENTARY INFORMATION:

Information Collection Request Title: AIDS Drug Assistance Program Data Report (ADAP) OMB No. 0915–0345—Revisions.

Abstract: HRSA's Ryan White HIV/AIDS Program AIDS Drug Assistance Program (RWHAP ADAP) is authorized under Part B of the RWHAP legislation, codified in sections 2611 *et seq.* of the Public Health Service Act, which provides grants to U.S. states and territories. HRSA's RWHAP ADAP is a state and territory-administered program that provides Food and Drug Administration-approved medications to low-income people with HIV who have limited or no health coverage from private insurance, Medicaid, or Medicare. HRSA's RWHAP ADAP funds may also be used to purchase health insurance for eligible clients and for services that enhance access, adherence, and monitoring of drug treatments.

All 50 states, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, and the five U.S. Pacific Territories or Associated Jurisdictions receive RWHAP Part B grant awards including funds for RWHAP ADAP. RWHAP Part B reporting requirements include the annual submission of an ADAP Data Report (ADR), including a Recipient Report and a Client Report. The Recipient Report is a collection of basic information about grant recipient characteristics and policies including program administration, purchasing mechanisms, funding, and expenditures. The Client Report is a collection of client-level records (one record for each client enrolled in the RWHAP ADAP), which includes the client's encrypted unique identifier, basic demographic data, enrollment information, services received and clinical data.

HRSA is proposing several changes to the ADR Recipient and Client Reports to improve question clarity, delete obsolete data elements, combine related data elements, add new data elements, and improve response options to reflect program practices and support HRSA's analysis and understanding of program impact. In addition, a new initiative,

Ending the HIV Epidemic: A Plan for America (EHE), began in Fiscal Year 2020 and some of its data collection requirements will be incorporated in existing annual data collections, including the ADR, in order to limit recipient burden. Specifically, the Recipient Report includes the following proposed changes:

- Addition of two new “Yes/No” questions
- addition of one new follow-up question that requests the number of new clients enrolled
- addition of one question on funding to monitor the use of funds provided to ADAPs for the EHE initiative
- clarification on two existing questions
- revision to one existing question that requests program income and manufacturer rebates reinvested in ADAP, and
- deletion of six obsolete data elements.

The Client Report includes the following proposed changes:

- Revision to reporting of RWHAP ADAP-funded medications to include all medications rather than a subset of medications;
- revision to one existing question that requests reporting of all RWHAP ADAP-funded medications using the

National Drug Code from the Drug Identification Code (d-codes);

- revision to reporting of clinical data for clients to include all clients rather than a subset of clients; and
- deletion of three data elements that were combined with other existing data elements.

New and revised data elements require reporting of information that should already be collected by recipients to meet legislative or programmatic requirements for the proper oversight and administration of the program.

A 60-day notice was published in the **Federal Register** on December 3, 2019, vol. 84, No. 232; pp. 66202–03. There were two public comments. Both comments were requests to clarify the data reporting changes, which included requests for a copy of the ADR instrument.

Need and Proposed Use of the Information: HRSA’s RWHAP requires the submission of annual reports by the Secretary of Department of Health and Human Services to the appropriate committees of Congress. HRSA uses the ADR to evaluate the national impact of the HRSA RWHAP ADAP by providing client-level data on individuals being served, services being delivered, and costs associated with these services. The

client-level data is used to monitor health outcomes of people with HIV receiving care and treatment through the HRSA RWHAP ADAP, to monitor the use of HRSA RWHAP ADAP funds in addressing the HIV epidemic and its impact on vulnerable communities, and to track progress toward achieving the goals identified in the National HIV/AIDS Strategy.

Likely Respondents: State ADAPs of RWHAP Part B recipients.

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
Recipient Report	54	1	54	6	324
Client-Level Report	54	1	54	81	4,374
Total	* 54	54	4,698

Maria G. Button,

Director, Executive Secretariat.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Dental & Craniofacial Research; Notice of Closed Meeting

Pursuant to section 10(d) 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: National Institute of Dental and Craniofacial Research Special Emphasis Panel NIDCR Secondary and Genomic Data Analysis Application Review Meeting.

Date: July 1, 2020.

Time: 12:00 p.m. to 5:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institute of Dental and Craniofacial Research, National Institutes of

Health, 6701 Democracy Boulevard, Suite 668, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Nisan Bhattacharyya, Ph.D., Scientific Review Officer, Scientific Review Branch, National Institute of Dental and Craniofacial Research, National Institutes of Health, 6701 Democracy Boulevard, Suite 668, Bethesda, MD 20892, 301–451–2405, nisan_bhattacharyya@nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.121, Oral Diseases and Disorders Research, National Institutes of Health, HHS)

Dated: April 1, 2020.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2020–07192 Filed 4–6–20; 8:45 am]

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