

*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](mailto: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.*

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