

Advisory Group on Prevention, Health Promotion, and Integrative and Public Health (the "Advisory Group"). The meeting will be open to the public. Information about the Advisory Group and the agenda for this meeting can be obtained by accessing the following Web site: <http://www.surgeongeneral.gov/initiatives/prevention/advisorygrp/index.html>

**DATES:** The meeting will be held on March 28–29, 2013. Exact start and end times will be published closer to the meeting date at: <http://www.surgeongeneral.gov/initiatives/prevention/advisorygrp/index.html>.

**ADDRESSES:** 200 Independence Ave., SW., Room 505A, Washington, DC 20201.

**FOR FURTHER INFORMATION CONTACT:**

Office of the Surgeon General, 200 Independence Ave., SW.; Hubert H. Humphrey Building, Room 701H; Washington, DC 20201; 202–205–9517; [prevention.council@hhs.gov](mailto:prevention.council@hhs.gov).

**SUPPLEMENTARY INFORMATION:** On June 10, 2010, the President issued Executive Order 13544 to comply with the statutes under Section 4001 of the Patient Protection and Affordable Care Act, Public Law 111–148. This legislation mandated that the Advisory Group was to be established within the Department of Health and Human Services. The charter for the Advisory Group was approved by the Secretary of Health and Human Services on June 23, 2010; the charter was filed with the appropriate Congressional committees and the Library of Congress on June 24, 2010. The Advisory Group was established as a non-discretionary federal advisory committee. The Advisory Group was authorized to operate until June 10, 2012. Because the Advisory Group had been established by Presidential directive, it was necessary for appropriate action to be taken by the President or agency head to give authorization for the Advisory Group to be continued. The President issued Executive Order 13591, dated November 23, 2011, to give authorization for the Advisory Group to continue to operate until September 30, 2012. No action was taken to continue the Advisory Group after the designated date. Therefore, the Advisory Group was terminated on September 30, 2012. On December 7, 2012, the President issued Executive Order 13631 to re-establish the Advisory Group. A charter was developed for this purpose. The charter was approved by the Secretary of Health and Human Services and filed with the appropriate Congressional committees, the Library of Congress, and the Committee

Management Secretariat under the General Services Administration on February 6, 2013. The Advisory Group has been re-established as a non-discretionary federal advisory committee.

Under Executive Order 13631, authorization is given for the Advisory Group to continue to operate as if the Committee had not been terminated on September 30, 2012. The Advisory Group will continue to provide recommendations and advice to the National Prevention, Health Promotion and Public Health Council (the "Council"). The Advisory Group will continue to provide assistance to the Council in carrying out its mission. Under the existing directive, the Advisory Group is authorized to continue to operate until September 30, 2013.

The Advisory Group membership shall consist of not more than 25 non-federal members to be appointed by the President. The membership shall include a diverse group of licensed health professionals, including integrative health practitioners who have expertise in (1) Worksite health promotion; (2) community services, including community health centers; (3) preventive medicine; (4) health coaching; (5) public health education; (6) geriatrics; and (7) rehabilitation medicine. There are currently 22 members of the Advisory Group appointed by the President. This will be the seventh meeting of the Advisory Group.

Public attendance at the meeting is limited to the space available. Members of the public who wish to attend must register by 12:00 p.m. EST on March 18, 2013. Individuals should register for public attendance at [prevention.council@hhs.gov](mailto:prevention.council@hhs.gov) by providing your full name and affiliation. Individuals who plan to attend the meeting and need special assistance and/or accommodations, i.e., sign language interpretation or other reasonable accommodations, should indicate so when they register. The public will have the opportunity to provide comments to the Advisory Group on March 29, 2013; public comment will be limited to 3 minutes per speaker. Registration through the designated contact for the public comment session is also required. Any member of the public who wishes to have printed materials distributed to the Advisory Group for this scheduled meeting should submit material to the designated point of contact no later than 12:00 p.m. EST on March 18, 2013.

Dated: February 20, 2013.

**Corinne M. Graffunder,**

*Designated Federal Officer, Advisory Group on Prevention, Health Promotion, and Integrative and Public Health, Office of the Surgeon General.*

[FR Doc. 2013–05212 Filed 3–6–13; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Solicitation of Nominations to the Presidential Advisory Council on HIV/AIDS

**AGENCY:** Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice.

**AUTHORITY:** Executive Order 12963, dated June 14, 1995, as amended by Executive Order 13009, dated June 14, 1996; and Section 222 of the Public Health Service Act (42 U.S.C. 217a). The Presidential Advisory Council on HIV/AIDS (referred to as PACHA and/or the Council) is governed by provisions of Public Law 92–463, as amended (5 U.S.C. App.), which sets forth standards for the formation and use of advisory committees.

**SUMMARY:** The Office of the Assistant Secretary for Health (OASH) is seeking nominations of qualified individuals to be considered for appointment as members of the Presidential Advisory Council on HIV/AIDS (PACHA). The PACHA is a federal advisory committee within the Department of Health and Human Services (HHS). Management support for the activities of the Council is the responsibility of the OASH. The qualified individuals will be nominated to the Secretary of Health and Human Services for consideration for appointment as members of the PACHA. Members of the Council, including the Chair, are appointed by the Secretary. Members are invited to serve on the Council for up to four-year terms. The Council was established to provide advice, information, and recommendations to the Secretary regarding programs and policies intended to promote effective prevention of HIV disease and AIDS. The functions of the Council are solely advisory in nature.

**DATES:** All nominations must be received no later than 5:00 p.m. EDT on April 1, 2013 at the address listed below.

**ADDRESSES:** All nominations should be mailed or delivered to Ms. B. Kaye Hayes, Executive Director, PACHA,

Department of Health and Human Services, Office of HIV/AIDS and Infectious Disease Policy, 200 Independence Avenue SW, Room 443–H, Washington, DC 20201.

**FOR FURTHER INFORMATION CONTACT:** Ms. Caroline Talev, Public Health Assistant, PACHA, Department of Health and Human Services, 200 Independence Avenue SW, Room 443–H, Washington, DC 20201; (202) 205–1178. More detailed information about PACHA can be obtained by accessing the Council’s Web site [www.aids.gov/pacha](http://www.aids.gov/pacha).

**SUPPLEMENTARY INFORMATION:** The PACHA was established to provide advice, information, and recommendations to the Secretary regarding programs and policies intended to promote effective prevention of HIV disease and AIDS. The functions of the Council are solely advisory in nature.

The Council consists of not more than 25 members. Council members are selected from prominent community leaders with particular expertise in, or knowledge of, matters concerning HIV and AIDS, public health, global health, philanthropy, marketing or business, as well as other national leaders held in high esteem from other sectors of society. Council members are appointed by the Secretary or designee, in consultation with the White House Office on National AIDS Policy. Pursuant to advance written agreement, Council members shall receive no stipend for the advisory service they render as members of PACHA. However, as authorized by law and in accordance with federal travel regulations, PACHA members may receive per diem and reimbursement for travel expenses incurred in relation to performing duties for the Council.

This announcement is to solicit nominations of qualified candidates to fill current vacancies on the PACHA.

**Nominations**

In accordance with the PACHA charter, persons nominated for appointment as members of the PACHA

should be among prominent community leaders and authorities with particular expertise in, or knowledge of, matters concerning HIV and AIDS, public health, global health, philanthropy, marketing or business, as well as other national leaders held in high esteem from other sectors of society. The following information should be included in the package of material submitted for each individual being nominated for consideration of appointment:

- a. The name, return address, daytime telephone number, and affiliation(s) of the individual being nominated, the basis for the individual’s nomination, and a statement bearing an original signature of the nominated individual that, if appointed, he or she is willing to serve as a member of the Council;
- b. the name, return address, and daytime telephone number at which the nominator may be contacted. Organizational nominators must identify a principal contact person; and
- c. a copy of a current resume or curriculum vitae for the nominated individual.

Individuals can nominate themselves for consideration of appointment to the Council. All nominations must include the required information. Incomplete nominations will not be processed for consideration. The letter from the nominator and certification of the nominated individual must bear original signatures; reproduced copies of these signatures are not acceptable.

The Department is legally required to ensure that the membership of HHS federal advisory committees is fairly balanced in terms of points of view represented and the functions to be performed by the advisory committee. Every effort is made to ensure that the views of women, all ethnic and racial groups, and people with disabilities are represented on HHS federal advisory committees and, therefore, the Department encourages nominations of qualified candidates from these groups. The Department also encourages geographic diversity in the composition of the Council. Appointment to the

Council shall be made without discrimination on the basis of age, race, ethnicity, gender, sexual orientation, disability, and cultural, religious, or socioeconomic status. The Standards of Ethical Conduct for Employees of the Executive Branch are applicable to individuals who are appointed as members of the Council.

Dated: February 22, 2013.

**B. Kaye Hayes,**  
*Executive Director, Presidential Advisory Council on HIV/AIDS.*

[FR Doc. 2013–05218 Filed 3–6–13; 8:45 am]

**BILLING CODE 4150–43–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* Community Services Block Grant (CSBG) Program Model Plan Application.

*OMB No.:* 0970–0382.

*Description:* Sections 676 and 677 of the Community Services Block Grant Act require States, including the District of Columbia and the Commonwealth of Puerto Rico, Tribes, Tribal organizations and U.S. territories applying for Community Services Block Grant (CSBG) funds to submit an application and plan (Model Application Plan). The application plan must meet statutory requirements prior to being funded with CSBG funds. Applicants have the option to submit a detailed application annually or biannually. Entities that submit a biannual application must provide an abbreviated application the following year if substantial changes to the initial application will occur. OMB approval is being sought.

*Respondents:* State Governments, including the District of Columbia and the Commonwealth of Puerto Rico, Tribal Governments, Tribal Organizations, and U.S. territories.

**ANNUAL BURDEN ESTIMATES**

| Instrument  | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|---|-----------------------|------------------------------------|-----------------------------------|--------------------|
| Model State CSBG Application .....                                | 56                    | 1                                  | 10                                | 560                |
| Model Indian Tribes & Tribal Organizations CSBG Application ..... | 30                    | 1                                  | 10                                | 300                |

Estimated Total Annual Burden Hours: 860.

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for

Children and Families, Office of Planning, Research and Evaluation, 370 L’Enfant Promenade SW., Washington,