

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
Title V Health Care Services Budget Survey	52	1	52	36	1,872
Total	52	1	52	36	1,872

Dated: August 1, 2013.

Bahar Niakan,

Director, Division of Policy and Information Coordination.

[FR Doc. 2013–19124 Filed 8–7–13; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Service Administration

Advisory Committee on Training in Primary Care Medicine and Dentistry; 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: Advisory Committee on Training in Primary Care Medicine and Dentistry (ACTPCMD).

Date and Time: August 29, 2013, 9:00 a.m.—5:00 p.m. (Eastern Standard Time).

Place: Webinar Format.

Status: The meeting will be open to the public.

Purpose: The ACTPCMD provides advice and recommendations on a broad range of issues relating to grant programs authorized by sections 222 and 749 of the Public Health Service Act, as amended by section 5103(d) and re-designated by section 5303 of the Patient Protection and Affordable Care Act of 2010.

At this meeting the ACTPCMD will review the latest draft of their 11th Report to Congress. The members will also receive presentations from experts on the subject of integrating oral health into primary care and on health literacy. The ACTPCMD's reports are submitted to the Secretary of the Department of Health and Human Services; the Committee on Health, Education, Labor, and Pensions of the Senate; and the Committee on Energy and Commerce of the House of Representatives.

Agenda: The webinar meeting on Thursday, August 29, 2013, will begin with opening comments from HRSA senior officials. The ACTPCMD agenda includes an overview of the Committee's general business activities, presentations by and dialogue with experts, and discussions pertinent to work related to their upcoming 11th report.

The official agenda will be available two days prior to the meeting on the HRSA Web site (<http://www.hrsa.gov/advisorycommittees/bhpradvisory/actpcmd/>

[index.html](#)). Agenda items are subject to change as priorities dictate.

SUPPLEMENTARY INFORMATION:

Information on accessing the webinar will be available via the following Web site two days prior to the meeting date: <http://www.hrsa.gov/advisorycommittees/bhpradvisory/actpcmd/index.html>.

The audio portion of the meeting will be computer-based. Therefore anyone wishing to make a public comment should use the Question & Answer Pod anytime during the meeting. The questions will be collected and as many as possible will be addressed during the time provided at the end of the meeting. Anyone wishing further information on the webinar aspects of the meeting should contact Iwona Grodecki at (301) 443–8379.

FOR FURTHER INFORMATION CONTACT:

Anyone requesting information regarding the ACTPCMD should contact Mr. Shane Rogers, Designated Federal Official within the Bureau of Health Professions, Health Resources and Services Administration, in any one of the following three ways: (1) Send a request to the following address: Shane Rogers, Designated Federal Official, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 9A–27, 5600 Fishers Lane, Rockville, Maryland 20857; (2) call (301) 443–5260; or (3) send an email to srogers@hrsa.gov.

Dated: August 1, 2013.

Bahar Niakan,

Director, Division of Policy and Information Coordination.

[FR Doc. 2013–19115 Filed 8–7–13; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Advisory Committee on Organ Transplantation; 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: Advisory Committee on Organ Transplantation (ACOT).

Date and Time: September 4, 2013, 10:00 a.m. to 4:00 p.m. (Eastern Standard Time).

Place: The meeting will be via audio conference call and Adobe Connect Pro.

Status: The meeting will be open to the public.

Purpose: Under the authority of 42 U.S.C. 217a, Section 222 of the Public Health Service Act, as amended, and 42 CFR 121.12 (2000), ACOT was established to assist the Secretary in enhancing organ donation, ensuring that the system of organ transplantation is grounded in the best available medical science, and assuring the public that the system is as effective and equitable as possible, thereby increasing public confidence in the integrity and effectiveness of the transplantation system. ACOT is composed of up to 25 members including the Chair. Members serve as Special Government Employees and have diverse backgrounds in fields such as organ donation, health care public policy, transplantation medicine and surgery, critical care medicine and other medical specialties involved in the identification and referral of donors, non-physician transplant professions, nursing, epidemiology, immunology, law and bioethics, behavioral sciences, and economics and statistics; as well as being representatives of transplant candidates, transplant recipients, organ donors, and family members.

Agenda: The Committee will hear presentations, including those from the following ACOT Work Groups: Kidney Paired Donation; Research Barriers; and Alignment of CMS Regulatory Requirements with Organ Procurement and Transplantation Network and the Health Resources and Services Administration. Agenda items are subject to change as priorities dictate.

After Committee discussions, members of the public will have an opportunity to comment. Because of the Committee's full agenda and timeframe in which to cover the agenda topics, public comment will be limited. All public comments will be included in the record of the ACOT meeting. Meeting summary notes will be posted on the Department's donation Web site at <http://www.organdonor.gov/legislation/advisory.html#meetings>.

The draft meeting agenda will be posted on <http://www.blsmmeetings.net/ACOT/>. Those participating in this meeting should register by visiting <http://www.blsmmeetings.net/ACOT/>. The deadline to register for this meeting is Tuesday, September 3, 2013. For all logistical questions and concerns, please contact Sydney Vranna, Conference Planner, at svranne@seamoncorporation.com (or by phone at (301) 577–0244, extension 2800).

The public can join the meeting by:

1. (Audio Portion) Calling the Conference Phone Number (800-857-9638) and providing the Participant Code (75841); and

2. (Visual Portion) Connecting to the ACOT Adobe Connect Pro Meeting using the following URL and entering as GUEST:

https://hrsa.connectsolutions.com/advcmnt_orgtrans/ (copy and paste the link into your browser if it does not work directly, and enter as a guest). Participants should call and connect 15 minutes prior to the meeting for logistics to be set up. If you have never attended an Adobe Connect meeting, please test your connection using the following URL: https://hrsa.connectsolutions.com/common/help/en/support/meeting_test.htm and get a quick overview by following URL: http://www.adobe.com/go/connectpro_overview. Call (301) 443-0437 or send an email to ptongele@hrsa.gov if you are having trouble connecting to the meeting site.

Public Comment: It is preferred that persons interested in providing an oral presentation submit a written request, along with a copy of their presentation to: Passy Tongele, MBA, Division of Transplantation, Healthcare Systems Bureau, Health Resources and Services Administration, Room 12C-06, 5600 Fishers Lane, Rockville, Maryland 20857 or email at ptongele@hrsa.gov. Requests should contain name, address, telephone number, email address, and any business or professional affiliation of the person desiring to make an oral presentation. Groups having similar interests are requested to combine their comments and present them through a single representative.

The allocation of time may be adjusted to accommodate the level of expressed interest. Persons who do not file an advance request for a presentation, but desire to make an oral statement, may request it during the public comment period. Public participation and ability to comment will be limited to time as it permits.

FOR FURTHER INFORMATION CONTACT:

Patricia Stroup, MBA, MPA, Executive Secretary, Healthcare Systems Bureau, Health Resources and Services Administration, 5600 Fishers Lane, Room 12C-06, Rockville, Maryland 20857; telephone (301) 443-1127.

Dated: August 1, 2013.

Bahar Niakan,

Director, Division of Policy and Information Coordination.

[FR Doc. 2013-19112 Filed 8-7-13; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Office of Urban Indian Health Programs Proposed Single Source Grant With Native American Lifelines, Inc.

Funding Announcement Number: HHS-2013-IHS-UIHP-0002.

Catalogue of Federal Domestic Assistance Number: 93.193.

Key Dates

Application Deadline Date: August 26, 2013.

Review Period: August 28, 2013.

Earliest Anticipated Start Date: September 1, 2013.

I. Funding Opportunity Description

Statutory Authority

The Indian Health Service (IHS), Office of Urban Indian Health Programs (OUIHP), announces the FY 2013 single source competing grant for operation support for the 4-in-1 Title V grant to make health care services more accessible for American Indians and Alaska Natives (AI/AN) residing in the Boston metropolitan area. This program is authorized under the authority of the Snyder Act, 25 U.S.C. 13, and the Indian Health Care Improvement Act (IHCIA), as amended, 25 U.S.C. 1652, 1653, 1660a. This program is described at 93.193 in the Catalog of Federal Domestic Assistance (CFDA).

Purpose

Under this grant opportunity, the IHS proposes to award a single source grant to Native American Lifelines, Inc., which is an urban Indian organization that has an existing IHS contract, in accordance with 25 U.S.C. 1653(c)-(f), 1660a, in the Boston metropolitan area. This grant announcement seeks to ensure the highest possible health status for urban Indians. Funding will be used to establish the urban Indian organization's successful implementation of the priorities of the Department of Health and Human Services (HHS), Strategic Plan Fiscal Years 2010-2015, Healthy People 2020, and the IHS Strategic Plan 2006-2011. Additionally, funding will be utilized to meet objectives for Government Performance Rating Act (GPRA) reporting, collaborative activities with the Veterans Health Administration (VA), and four health programs that make health services more accessible to urban Indians. The four health services programs are: (1) Health Promotion/Disease Prevention (HP/DP) services, (2) Immunizations, (3) Behavioral Health Services consisting of Alcohol/Substance Abuse services, and (4) Mental Health Prevention and Treatment services. These programs are integral components of the IHS improvement in patient care initiative and the strategic objectives focused on improving safety, quality, affordability, and accessibility of health care.

Single Source Justification

Native American Lifelines, Inc. is identified as the single source for this award, based on the following criteria:

1. As required by law, the grants authorized by 25 U.S.C. 1653(c)-(f), 1660a may only be awarded to those urban Indian organizations that have a current contract with the IHS to provide health care to urban Indians, in the urban center identified in the contract.

2. Native American Lifelines is the urban Indian organization IHS currently contracts with to provide health care and referral services to urban Indians residing in the Boston area.

Native American Lifelines, Inc. is uniquely qualified to receive this award and provide the identified program activities based on their history with the urban Indian health programs, and their knowledge of urban Indian health and the Boston target population. The program is licensed by the state as a behavioral health provider; all of the staff operating at the facility are licensed and credential in their respective fields (specifically behavioral health); and they use evidence-based behavioral health assessment and treatment strategies with success. The program successfully uses targeted outreach and comprehensive case management services for clients in the community. Through this outreach and case management, the program has expanded offering to include on-site dental service and transportation. Also, the program has been successful in entering into collaborative agreements with community health resources for the provision of quality and comprehensive health care for clients. In support of these successful activities, the Board of Directors is active in the program and committed to bringing quality health care to the urban Indians of the Boston metropolitan area.

II. Award Information

Type of Awards

Grant.

Estimated Funds Available

The total amount of funding identified for the current fiscal year (FY) 2013 is \$153,126. Any awards issued under this announcement are subject to the availability of funds. In the absence of funding, the Agency is under no obligation to make awards funded under this announcement.

Anticipated Number of Awards

One single source award will be issued under this program announcement.