Insurance Marketplace, and "Marketplace"). In order to effectively implement and administer these changes, we must provide information to consumers, providers, and other stakeholders through education and outreach programs regarding how existing programs will change and the expanded range of health coverage options available, including private health insurance coverage through the Marketplace. The APOE (the Panel) allows us to consider a broad range of views and information from interested audiences in connection with this effort and to identify opportunities to enhance the effectiveness of education strategies concerning the Affordable Care Act.

The scope of this panel also includes advising on issues pertaining to the education of providers and stakeholders with respect to the Affordable Care Act and certain provisions of the Health Information Technology for Economic and Clinical Health (HITECH) Act enacted as part of the American Recovery and Reinvestment Act of 2009 (ARRA).

On January 21, 2011, the Panel's charter was renewed and the Panel was renamed the Advisory Panel for Outreach and Education. The Panel's charter was most recently renewed on January 21, 2015, and will terminate on January 21, 2017 unless renewed by appropriate action.

Under the current charter, the APOE will advise the Secretary and the Administrator on optimal strategies for the following:

• Developing and implementing education and outreach programs for individuals enrolled in, or eligible for, Medicare, Medicaid, and the Children's Health Insurance Program (CHIP), or coverage available through the Health Insurance Marketplace.

• Enhancing the federal government's effectiveness in informing Health Insurance Marketplace, Medicare, Medicaid, and CHIP consumers, issuers, providers, and stakeholders, through education and outreach programs, on issues regarding these programs, including the appropriate use of public-private partnerships to leverage the resources of the private sector in educating beneficiaries, providers, and stakeholders.

• Expanding outreach to vulnerable and underserved communities, including racial and ethnic minorities, in the context of Health Insurance Marketplace, Medicare, Medicaid, and CHIP education programs.

• Assembling and sharing an information base of "best practices" for helping consumers evaluate health coverage options.

• Building and leveraging existing community infrastructures for information, counseling, and assistance.

• Drawing the program link between outreach and education, promoting consumer understanding of health care coverage choices, and facilitating consumer selection/enrollment, which in turn support the overarching goal of improved access to quality care, including prevention services, envisioned under the Affordable Care Act.

The current members of the Panel are: Samantha Artiga, Principal Policy Analyst, Kaiser Family Foundation; Joseph Baker, President, Medicare Rights Center; Kellan Baker, Senior Fellow, Center for American Progress: Philip Bergquist, Manager, Health Center Operations, Children's Health Insurance Program Reauthorization Act (CHIPRA) Outreach & Enrollment Project and Director, Michigan Primary Care Association; Marjorie Cadogan, Executive Deputy Commissioner, Department of Social Services; Barbara Ferrer, Chief Strategy Officer, W. K. Kellogg Foundation; Shelby Gonzales, Senior Health Outreach Associate, Center on Budget & Policy Priorities; Jan Henning, Benefits Counseling & Special Projects Coordinator, North Central Texas Council of Governments' Area Agency on Aging; Louise Knight, Director, The Sidney Kimmel **Comprehensive Cancer Center at Johns** Hopkins; Miriam Mobley-Smith, Dean, Chicago State University, College of Pharmacy; Ana Natale-Pereira, M.D., Associate Professor of Medicine, Rutgers-New Jersey Medical School: Roanne Osborne-Gaskin, M.D., Associate Medical Director, Neighborhood Health Plan of Rhode Island; Megan Padden, Vice President, Sentara Health Plans; Jeanne Ryer, **Director**, New Hampshire Citizens Health Initiative, University of New Hampshire; Carla Smith, Executive Vice President, Healthcare Information and Management Systems Society (HIMSS); Winston Wong, Medical Director, Community Benefit Director, Kaiser Permanente and Darlene Yee-Melichar, Professor & Coordinator, San Francisco State University.

II. Provisions of This Notice

In the May 29, 2015 **Federal Register** (80 FR 30684), in accordance with section 10(a) of the FACA, we published a notice announcing a June 25, 2015 meeting of the APOE. In this notice, we are notifying interested parties we are rescheduling the meeting to July 22, 2015. The agenda for the July 22, 2015 meeting will include the following:

• Welcome and listening session with CMS leadership

• Recap of the previous (March 19, 2015) meeting

- Affordable Care Act initiatives
- An opportunity for public commentMeeting summary, review of

recommendations, and next steps

Individuals or organizations that wish to make a 5-minute oral presentation on an agenda topic should submit a written copy of the oral presentation to the DFO at the address listed in the **ADDRESSES** section of this notice by the date listed in the **DATES** section of this notice. The number of oral presentations may be limited by the time available. Individuals not wishing to make an oral presentation may submit written comments to the DFO at the address listed in the **ADDRESSES** section of this notice by the date listed in the **DATES** section of this notice.

Authority: Sec. 222 of the Public Health Service Act (42 U.S.C. 217a) and sec. 10(a) of Pub. L. 92–463 (5 U.S.C. App. 2, sec. 10(a) and 41 CFR 102–3).

Dated: June 16, 2015.

Andrew M. Slavitt,

Acting Administrator Centers for Medicare & Medicaid Services.

[FR Doc. 2015–15263 Filed 6–17–15; 4:15 pm] BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND

HUMAN SERVICES Administration for Children and

Families

Statement of Organization, Functions, and Delegations of Authority

AGENCY: Office of Legislative Affairs and Budget, Administration for Children and Families, HHS. **ACTION:** Notice.

SUMMARY: Statement of Organizations, Functions, and Delegations of Authority. The Administration for Children and Families (ACF) has realigned the Office of Legislative Affairs and Budget (OLAB). This realignment will permit the office to serve as the ACF liaison to the Government Accountability Office (GAO) and to the Office of Inspector General (OIG) for OIG engagements relating to the management of ACF programs.

FOR FURTHER INFORMATION CONTACT: Matthew McKearn, Office of Legislative Affairs and Budget, 901 D Street SW., Washington, DC 20447, 202–401–9222.

This notice amends Part K of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services, Administration for Children and Families (ACF), as follows: Chapter KT, as last amended, 65 FR 30413–14, May 11, 2000.

I. Under Chapter KT, Office of Legislative Affairs and Budget, delete KT.00 Mission in its entirety and replace with the following:

KT.00 MISSION. The Office of Legislative Affairs and Budget (OLAB) provides leadership in the development of legislation, budget, and policy, ensuring consistency in these areas among ACF program and staff offices, and with ACF and the Department's vision and goals. It advises the Assistant Secretary for Children and Families on all policy and programmatic matters that substantially impact the agency's legislative program, budget development, budget execution, and regulatory agenda. The Office serves as the primary contact for the Department, the Executive Branch, and the Congress on all legislative, budget development and execution, and regulatory activities. The Office serves as the ACF liaison to the Government Accountability Office and to the Office of Inspector General (OIG) for OIG engagements relating to the management of ACF programs.

II. Under Chapter KT, Office of Legislative Affairs and Budget, delete KT.20, Functions, Paragraph B, in its entirety and replace with the following:

B. The Division of Legislative and Regulatory Affairs serves as the focal point for congressional liaison in ACF; provides guidance to the Assistant Secretary for Children and Families and senior ACF staff on congressional activities and relations; manages the preparation of testimony and briefings for programmatic and budget-related hearings; negotiates clearance of testimony; monitors hearings and other congressional activities that affect ACF programs; and responds to congressional inquiries.

The Division manages the ACF legislative planning cycle and the development of Reports to Congress; reviews and analyzes a wide range of congressional policy documents including: legislative proposals, pending legislation, and bill reports; solicits and synthesizes internal ACF comments on such documents; negotiates legislative policy positions with the Department and the Executive Branch; and reviews other policy significant documents to ensure consistency with statutory and congressional intent and the agency legislative agenda.

The Division manages the ACF regulatory development process;

negotiates regulatory policy positions with the Department and the Executive Branch; and provides guidance to ACF program and staff components on policy and programmatic matters related to the regulatory development process.

The Division manages all Government Accountability Office (GAO) engagements with ACF; coordinates entrance and exit conferences within ACF; ensures GAO requests for information are fulfilled; and coordinates ACF comments on GAO draft reports and Statements of Action on GAO's recommendations.

The Division facilitates OIG engagements relating to the management of ACF programs, to include, but not be limited to, audits to determine whether an ACF program office met its statutory requirements; audits to determine whether an ACF program office complied with internal policies and procedures; evaluations of an ACF program for efficiency and effectiveness; and evaluation of both ACF management and selected grantees' management of their grants.

III. Continuation of Policy. Except as inconsistent with this realignment, all statements of policy and interpretations with respect to organizational components affected by this notice within ACF, heretofore issued and in effect on this date of this realignment are continued in full force and effect.

IV. Delegation of Authority. All delegations and redelegations of authority made to officials and employees of affected organizational components will continue in them or their successors pending further redelegations, provided they are consistent with this realignment.

V. Funds, Personnel, and Equipment. Transfer of organizations and functions affected by this realignment shall be accompanied in each instance by direct and support funds, positions, personnel, records, equipment, supplies, and other resources.

This realignment will be effective upon date of signature.

Dated: June 12, 2015.

Mark H. Greenberg,

Acting Assistant Secretary for Children and Families.

[FR Doc. 2015–15237 Filed 6–19–15; 8:45 am] BILLING CODE 4184–34–P DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA-2015-N-0097]

Mirwaiss Aminzada: Debarment Order

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is issuing an order under the Federal Food, Drug, and Cosmetic Act (the FD&C Act) permanently debarring Mirwaiss Aminzada from providing services in any capacity to a person that has an approved or pending drug product application. FDA bases this order on a finding that Mr. Aminzada was convicted of a felony under Federal law for conduct relating to the regulation of a drug product. Mr. Aminzada was given notice of the proposed permanent debarment and an opportunity to request a hearing within the timeframe prescribed by regulation. Mr. Aminzada failed to request a hearing. Mr. Aminzada's failure to request a hearing constitutes a waiver of his right to a hearing concerning this action. DATES: This order is effective June 22, 2015.

ADDRESSES: Submit applications for termination of debarment to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852.

FOR FURTHER INFORMATION CONTACT: Kenny Shade (ELEM–4144), Office of Regulatory Affairs, Food and Drug Administration, 12420 Parklawn Drive, Rockville, MD 20857, 301–796–4640. SUPPLEMENTARY INFORMATION:

SOFFLEMENTART INFORMATIC

I. Background

Section 306(a)(2)(B) of the FD&C Act (21 U.S.C. 335a(a)(2)(B)) requires debarment of an individual if FDA finds that the individual has been convicted of a felony under Federal law for conduct relating to the regulation of any drug product under the FD&C Act.

On June 10, 2014, the U.S. District Court for the Eastern District of Virginia entered judgment against Mr. Aminzada for one count of introducing misbranded drugs into interstate commerce with intent to defraud or mislead, in violation of sections 301(a) and 303(a)(2) of the FD&C Act (21 U.S.C. 331(a) and 333(a)(2)).

FDA's finding that debarment is appropriate is based on the felony conviction referenced herein. The