

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Service Administration

Advisory Committee on Interdisciplinary, Community-Based Linkages

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

ACTION: Notice of Advisory Committee meeting.

SUMMARY: In accordance with the Federal Advisory Committee Act, this notice announces that the Advisory Committee on Interdisciplinary, Community-Based Linkages (ACICBL) will hold a public meeting.

DATES AND TIMES: Wednesday, June 6, 2018, from 8:30 a.m. to 5:00 p.m. and Thursday, June 7, 2018, from 8:30 a.m. to 2:00 p.m. ET.

ADDRESSES: This is an in-person meeting and will offer virtual access through teleconference and webinar. The address for the meeting is 5600 Fishers Lane, Rockville, Maryland 20857. The conference call-in number is 1-800-619-2521; passcode: 9271697. The webinar link is <https://hrsa.connectsolutions.com/acicbl>.

FOR FURTHER INFORMATION CONTACT: Joan Weiss, Ph.D., RN, CRNP, FAAN, Senior Advisor and Designated Federal Official, Division of Medicine and Dentistry, HRSA, 5600 Fishers Lane, Room 15N39, Rockville, Maryland 20857; phone (301) 443-0430; email jweiss@hrsa.gov.

SUPPLEMENTARY INFORMATION:

Background: ACICBL provides advice and recommendations to the Secretary of HHS and to Congress on a broad range of issues relating to grant programs authorized by sections 750–760, Title VII, Part D of the Public Health Service Act. ACICBL submits reports to the Secretary of HHS; the Committee on Health, Education, Labor, and Pensions of the Senate; and the Committee on Energy and Commerce of the House of Representatives.

Agenda: ACICBL members will discuss preparing the current and future healthcare workforce to practice in age-friendly health systems within the context of the quadruple aim: Improving the patient experience, population health, provider well-being, and reducing health care costs. An agenda will be posted on the ACICBL website prior to the meeting. Please note that agenda items are subject to change as priorities dictate.

Public Participation: Members of the public will have the opportunity to provide comments. Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to make oral comments or provide written comments should be sent to Dr. Weiss. The building at 5600 Fishers Lane, Rockville, MD 20857, requires a security screening for entry. To facilitate access to the building, individuals interested in attending the meeting should notify Dr. Weiss at the contact information listed above at least three business days prior to the meeting. Individuals who plan to participate and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify Dr. Weiss, using the address and phone number above at least 10 business days prior to the meeting.

Amy P. McNulty,

Acting Director, Division of the Executive Secretariat.

[FR Doc. 2018–11464 Filed 5–25–18; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Solicitation of Nominations for Membership to Serve on the Advisory Committee on Infant Mortality

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

ACTION: Request for nominations.

SUMMARY: HRSA is seeking nominations of qualified candidates for consideration for appointment as members of the Advisory Committee on Infant Mortality (ACIM). ACIM provides advice to the Secretary of HHS on Department activities and programs directed at reducing infant mortality and improving the health status of pregnant women and infants.

DATES: Written nominations for membership on the Committee must be received on or before Tuesday, June 26, 2018.

ADDRESSES: Nomination packages must be submitted electronically as email attachments to Dr. David de la Cruz, the Committee's Designated Federal Official, at dcruz@hrsa.gov.

FOR FURTHER INFORMATION CONTACT: David de la Cruz, Ph.D., MPH. Address: Maternal and Child Health Bureau, HRSA, 5600 Fishers Lane, Room 18N25, Rockville, MD 20857; phone number:

(301) 443-0543; email: dcruz@hrsa.gov. A copy of the current ACIM charter, membership, and reports are available on the ACIM website, <https://www.hrsa.gov/advisory-committees/Infant-Mortality/index.html>.

SUPPLEMENTARY INFORMATION: ACIM provides a public and private partnership at the highest level to provide guidance and helps focus attention on the policies and resources required to address the reduction of infant mortality and perinatal health disparities. ACIM also provides advice on how best to coordinate the myriad of federal, state, local, and private programs and efforts designed to deal with the health and social problems affecting infant mortality.

The Committee advises the Secretary of HHS and the Administrator of HRSA on HHS programs and activities related to infant mortality, including implementation of the Healthy Start program and infant mortality objectives from Healthy People 2020: National Health Promotion and Disease Prevention Objectives.

Nominations: HRSA is requesting nominations for voting members of ACIM to include representatives of all qualified individuals within the areas of subject matter expertise noted above. Interested applicants may self-nominate or be nominated by another individual or organization. Nominees must reside in the United States.

Individuals selected for appointment to the Committee will be invited to serve for up to 4 years. Members are appointed as special government employees and receive a stipend and reimbursement for per diem and travel expenses incurred for attending meetings and/or conducting other business on behalf of the Committee, as authorized by Section 5 U.S.C. 5703 for persons employed intermittently in government service.

To evaluate possible conflicts of interest, individuals selected for consideration for appointment will be required to provide detailed information regarding their financial holdings, consultancies, and research grants or contracts. The selected candidates must fill out the U.S. Office of Government Ethics (OGE) Confidential Financial Disclosure Report, *OGE Form 450*. Disclosure of this information is necessary to determine if the selected candidate is involved in any activity that may pose a potential conflict with their official duties as a member of the Committee.

A nomination package should include the following information for each nominee: (1) The name and affiliation of

the nominee and a clear statement regarding the basis for the nomination, including the area(s) of expertise that may qualify a nominee for service on the Committee, as described above; (2) confirmation the nominee is willing to serve as a member of the Committee; (3) the nominee's contact information (please include home address, work address, daytime telephone number, and an email address); and (4) a current copy of the nominee's curriculum vitae. Nomination packages may be submitted directly by the individual being nominated or by the person/organization recommending the candidate.

HHS strives to ensure a balance of ACIM membership in terms of points of view presented and the committee's function. Therefore, we encourage nominations of qualified candidates from these groups and endeavor to make appointments to ACIM without discrimination on the basis of age, race, ethnicity, gender, sexual orientation, disability, and cultural, religious, or socioeconomic status.

Authority

ACIM was established under provisions of section 222 of the Public Health Service Act (42 U.S.C. 217a), as amended. The Committee is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), as well as 41 CFR part 102-3, which set forth standards for the formation and use of Advisory Committees.

Amy P. McNulty,

Acting Director, Division of the Executive Secretariat.

[FR Doc. 2018-11465 Filed 5-25-18; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Vaccine Injury Compensation Program; List of Petitions Received

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

ACTION: Notice.

SUMMARY: HRSA is publishing this notice of petitions received under the National Vaccine Injury Compensation Program (the program), as required by Section 2112(b)(2) of the Public Health Service (PHS) Act, as amended. While the Secretary of HHS is named as the respondent in all proceedings brought

by the filing of petitions for compensation under the Program, the United States Court of Federal Claims is charged by statute with responsibility for considering and acting upon the petitions.

FOR FURTHER INFORMATION CONTACT: For information about requirements for filing petitions and the Program in general, contact Lisa L. Reyes, Clerk of Court, United States Court of Federal Claims, 717 Madison Place NW, Washington, DC 20005, (202) 357-6400. For information on HRSA's role in the Program, contact the Director, National Vaccine Injury Compensation Program, 5600 Fishers Lane, Room 08N146B, Rockville, MD 20857; (301) 443-6593, or visit our website at: <http://www.hrsa.gov/vaccinecompensation/index.html>.

SUPPLEMENTARY INFORMATION: The program provides a system of no-fault compensation for certain individuals who have been injured by specified childhood vaccines. Subtitle 2 of Title XXI of the PHS Act, 42 U.S.C. 300aa-10 *et seq.*, provides that those seeking compensation are to file a petition with the U.S. Court of Federal Claims and to serve a copy of the petition on the Secretary of HHS, who is named as the respondent in each proceeding. The Secretary has delegated this responsibility under the program to HRSA. The Court is directed by statute to appoint special masters who take evidence, conduct hearings as appropriate, and make initial decisions as to eligibility for, and amount of, compensation.

A petition may be filed with respect to injuries, disabilities, illnesses, conditions, and deaths resulting from vaccines described in the Vaccine Injury Table (the table) set forth at 42 CFR 100.3. This table lists for each covered childhood vaccine the conditions that may lead to compensation and, for each condition, the time period for occurrence of the first symptom or manifestation of onset or of significant aggravation after vaccine administration. Compensation may also be awarded for conditions not listed in the table and for conditions that are manifested outside the time periods specified in the table, but only if the petitioner shows that the condition was caused by one of the listed vaccines.

Section 2112(b)(2) of the PHS Act, 42 U.S.C. 300aa-12(b)(2), requires that "[w]ithin 30 days after the Secretary receives service of any petition filed under section 2111 the Secretary shall publish notice of such petition in the **Federal Register**." Set forth below is a list of petitions received by HRSA on

April 1, 2018, through April 30, 2018. This list provides the name of petitioner, city and state of vaccination (if unknown then city and state of person or attorney filing claim), and case number. In cases where the Court has redacted the name of a petitioner and/or the case number, the list reflects such redaction.

Section 2112(b)(2) also provides that the special master "shall afford all interested persons an opportunity to submit relevant, written information" relating to the following:

1. The existence of evidence "that there is not a preponderance of the evidence that the illness, disability, injury, condition, or death described in the petition is due to factors unrelated to the administration of the vaccine described in the petition," and

2. Any allegation in a petition that the petitioner either:

a. "[S]ustained, or had significantly aggravated, any illness, disability, injury, or condition not set forth in the Vaccine Injury Table but which was caused by" one of the vaccines referred to in the Table, or

b. "[S]ustained, or had significantly aggravated, any illness, disability, injury, or condition set forth in the Vaccine Injury Table the first symptom or manifestation of the onset or significant aggravation of which did not occur within the time period set forth in the table but which was caused by a vaccine" referred to in the table.

In accordance with Section 2112(b)(2), all interested persons may submit written information relevant to the issues described above in the case of the petitions listed below. Any person choosing to do so should file an original and three (3) copies of the information with the Clerk of the United States Court of Federal Claims at the address listed above (under the heading **FOR FURTHER INFORMATION CONTACT**), with a copy to HRSA addressed to Director, Division of Injury Compensation Programs, Healthcare Systems Bureau, 5600 Fishers Lane, 08N146B, Rockville, MD 20857. The Court's caption (Petitioner's Name v. Secretary of HHS) and the docket number assigned to the petition should be used as the caption for the written submission. Chapter 35 of title 44, United States Code, related to paperwork reduction, does not apply to information required for purposes of carrying out the program.