

total estimated hour burden per respondent for the proposed DD Council PPR will increase from the 138 hours

estimated in 2015 to 172 burden hours per response. The number of hours is multiplied by 56 State Council

programs, resulting in a total estimated hour aggregate burden of 9,632.

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Annual burden hours
State Councils on Developmental Disabilities/Program Performance Report	56	1	172	9632
Total	56	1	172	9632

Dated: June 7, 2018.  
**Lance Robertson,**  
*Administrator and Assistant Secretary for Aging.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Community Living**

**Notice of Intent To Award a Single-Source Supplement**

**ACTION:** Intent To Award a Single-Source Supplement for the Amputee Coalition of America, Inc. for the National Limb Loss Resource Center Cooperative Agreement.

The Administration for Community Living (ACL) announces the intent to award a single-source supplement to the current cooperative agreement held by the Amputee Coalition of America, Inc. for the National Limb Loss Resource Center (NLLRC). The purpose of this project is to expand on current grant activities, such as increasing activities and programs that promote health, wellness, and the adoption of healthy behaviors with the objective of preventing and/or reducing chronic conditions associated with limb loss and increase partnerships and collaborations with ACL programs that will benefit all people living with limb loss or limb differences. The administrative supplement for FY 2018 will be in the amount of \$669,905, bringing the total award for FY 2018 to \$3,697,142.

The additional funding will not be used to begin new projects. The funding will be used to enhance and expand existing programs that can serve an increased number of veterans and people living with limb loss and limb differences by providing increased technical assistance activities; promoting health and wellness programs; promoting the adoption of healthy behaviors with the objective of preventing and/or reducing chronic

conditions associated with limb loss; increasing partnerships and collaborations with ACL programs that will benefit all people living with limb loss or limb differences; enhancing and expanding the evaluation activities currently under way; and enhancing website capacities for improved information dissemination.

*Program Name:* National Limb Loss Resource Center.

*Recipient:* The Amputee Coalition of America, Inc.

*Period of Performance:* The supplement award will be issued for the third year of the three-year project period of April 1, 2016, through March 29, 2019.

*Total Award Amount:* \$669,905 in FY 2018.

*Award Type:* Cooperative Agreement Supplement.

*Statutory Authority:* This program is authorized under Section 317 of the Public Health Service Act (42 U.S.C. 247(b-4)); Consolidated and Further Continuing Appropriations Act, 2015, Public Law 113-235 (Dec. 16, 2014).

*Basis for Award:* The Amputee Coalition of America, Inc. is currently funded to carry out the objectives of this program, entitled *The National Limb Loss Resource Center* for the period of April 1, 2016, through March 29, 2019. Since the program transferred from CDC to ACL in late 2015, the grantee has accomplished a great deal. The supplement will enable the grantee to carry their work even further, serving more people living with limb loss and/or limb differences and providing even more comprehensive training and technical assistance in the development of LTSS supportive services. The additional funding will not be used to begin new projects or activities. The NLLRC will enhance and expand currently funded activities such as conducting national outreach for the development and dissemination of patient education materials, programs, and services; providing technical support and assistance to community based limb loss support groups; and raising awareness about the limb loss and limb differences communities.

Establishing an entirely new grant project at this time would be potentially disruptive to the current work already well under way. More importantly, the people living with limb loss and limb differences currently being served by this program could be negatively impacted by a service disruption, thus posing the risk of not being able to find the right resources that could negatively impact on health and wellbeing. If this supplement were not provided, the project would be less able to address the significant unmet needs of additional limb loss survivors. Similarly, the project would be unable to expand its current technical assistance and training efforts in NLLRC concepts and approaches, let alone reach beyond traditional providers of services to this population to train more “mainstream” providers of disability services.

*For More Information Contact:* For further information or comments regarding this program supplement, contact Elizabeth Leef, U.S. Department of Health and Human Services, Administration for Community Living, Administration on Disabilities, Independent Living Administration: telephone (202) 475-2486; email [Elizabeth.leef@acl.hhs.gov](mailto:Elizabeth.leef@acl.hhs.gov).

Dated: June 6, 2018.  
**Lance Robertson,**  
*Administrator and Assistant Secretary for Aging.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. FDA-2018-D-1788]

**Intravascular Catheters, Wires, and Delivery Systems With Lubricious Coatings—Labeling Considerations; Draft Guidance for Industry and Food and Drug Administration Staff; Availability**

**AGENCY:** Food and Drug Administration, HHS.