until the new IC is approved and ready for usage.

The Older Americans Act (OAA) requires annual program performance reports from States, the District of Columbia, and Territories. In compliance with this OAA provision, ACL developed a SPR in 1996 as part of its National Aging Program Information System (NAPIS). The SPR collects information about how State Agencies on Aging expend their OAA funds as well as funding from other sources for OAA authorized supportive services. The SPR also collects information on the demographic and functional status of the recipients, and is a key source for ACL performance measurement. The information submitted by Title III grantees is AoA's principle source for data and information on programs and services funded under the Older Americans Act (OAA). The SPR serves as the Program Performance Report for the state grantees to meet their annual grantee reporting requirements and includes the data required by the OAA be reported in the AoA Annual Report to Congress. This IC is summary data of services for seniors provided or managed by State Units on Aging (SUA) and Area Agencies on Aging (AAA). Data is submitted annually by the 50 states, four Territories (American Samoa, Guam, Puerto Rico, and Virgin Islands), and Washington, DC. The SPR includes information on the number of people served, the number of units of specific services, Title III expenditures, total expenditures, number of state and local staff, number of providers, and major accomplishments.

Data from the SPR are the primary source for performance measures in the Congressional budget justification, the HHS Annual Performance Plan and Report as well as the Annual Report to Congress.

AoA also uses the data to respond to inquiries from stakeholders, the public, press, program and policy decision makers. Information from the most recent SPR is available on-line on the Aging Integrated Database (AGID). Results are available annually.

The proposed FY 2020 version posts on the ACL website link entitled *Proposed State Program Report (SPR) Form 2020 Revision* available at *https://acl.gov/programs/performance-older-americans-act-programs*

For review and comment on this proposed information collection request, please visit the ACL website *https://www.acl.gov/about-acl/public-input.*

**Estimated Program Burden**

ACL estimates the burden associated with this collection of information as follows: 2,750 annual burden hours.

| Respondent/data collection activity | Number of respondents | Responses per respondent | Hours per response | Annual burden hours |
|---|---|---|---|---|
| SPR | 55 | 1 | 50 | 2,750 |
| Total | 55 | 1 | 50 | 2,750 |

Dated: August 20, 2019.

**Mary Lazare,**

*Principal Deputy Administrator.*

[FR Doc. 2019–18842 Filed 8–29–19; 8:45 am]

**BILLING CODE 4154–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

**[Docket No. FDA–2017–D–2991]**

### Pediatric Rare Diseases—A Collaborative Approach for Drug Development Using Gaucher Disease as a Model; Draft Guidance for Industry; Availability; Correction

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

**ACTION:** Notice; correction.

**SUMMARY:** The Food and Drug Administration is correcting a notice entitled ''Pediatric Rare Diseases—A Collaborative Approach for Drug Development Using Gaucher Disease as a Model; Draft Guidance for Industry; Availability'' that appeared in the **Federal Register** of December 7, 2017. The document announced the availability of a draft guidance focusing on drug development for pediatric patients with Gaucher disease. The document was published with the incorrect docket number. This document corrects that error.

**FOR FURTHER INFORMATION CONTACT:** Lisa Granger, Office of Policy, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 32, Rm. 3330, Silver Spring, MD 20993–0002, 301–796–9115.

**SUPPLEMENTARY INFORMATION:** In the **Federal Register** of Thursday, December 7, 2017 (82 FR 57759), in FR Doc. 2017–26357, the following correction is made:

On page 57759, in the first column, in the document heading and in the third column under *Instructions,* the docket number ''FDA–2017–N–6476'' is corrected to read ''FDA–2017–D–2991''.

Dated: August 26, 2019.

**Lowell J. Schiller,**

*Principal Associate Commissioner for Policy.*

[FR Doc. 2019–18730 Filed 8–29–19; 8:45 am]

**BILLING CODE 4164–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

**[Docket Nos. FDA–2018–E–0699 and FDA–2018–E–0705]**

### Determination of Regulatory Review Period for Purposes of Patent Extension; NERLYNX

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

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA or the Agency) has determined the regulatory review period for NERLYNX and is publishing this notice of that determination as required by law. FDA has made the determination because of the submission of applications to the Director of the U.S. Patent and Trademark Office (USPTO), Department of Commerce, for the extension of a patent which claims that human drug product.

**DATES:** Anyone with knowledge that any of the dates as published (see the **SUPPLEMENTARY INFORMATION** section) are incorrect may submit either electronic or written comments and ask for a redetermination by October 29, 2019. Furthermore, any interested person may