

dnpaio/state-local-programs/reach/index.htm or <https://www.challenge.gov>. On these sites,

applicants will find the guidelines for participating. Applying will require applicants to provide a free-text written statement of 500 words or less that describes the unique and innovative approach that led to reduced health disparities in chronic disease.

Amount of the Prize

A maximum of one (1) Applicant (individual or team) will receive a plaque (“Winner”). While the winner may be invited to meetings by CDC or non-federal individuals/organizations from outside the agency, attendance at such events is not required as a condition of accepting the Prize. No cash prize will be awarded. The selected applicant will receive a plaque and recognition.

Basis Upon Which Winner Will Be Selected

CDC- or non-federal individuals from outside the agency will facilitate a panel of three to five experts consisting of CDC staff and other national experts to review the applications and select a winning entry from all eligible entries based on the following judging criteria:

- The extent to which the applicant’s work shows alignment with CDC Office of Minority Health and Health Equity (OMHHE) health equity goals to decrease health disparities, address social determinants of health, and promote access to high quality preventive healthcare. (20 points)

- The extent to which the applicant’s work addressed health issues, including hypertension, heart disease, Type 2 diabetes, and/or obesity, and/or addressed the following preventable risk behaviors: Tobacco use, poor nutrition, or physical inactivity. (20 points)

- The extent to which the applicant’s work demonstrated success in systems improvement that impacted health outcomes in one or more of the following areas: Access to quality care, education, employment, income, community environment, housing, and public safety. (20 points)

- The extent to which the applicant’s work provided a unique or innovative solution to improving outcomes for groups most affected by health disparities, specifically, African Americans/Blacks, American Indians/Alaska Natives, Asian Americans, Hispanic Americans, and Native Hawaiian/Pacific Islanders. (20 points)

- The extent to which the applicant engaged members of the community across different sectors and successfully demonstrated the development and/or

implementation and/or evaluation of the work within the community related to groups most affected by health disparities. (20 points)

Judges will use a point system out of 100 to select the winner putting equal emphasis on the bases discussed above. In addition to the 500 word or less free-text written statement, applicants can also submit evidence that demonstrates that the criteria were met through publications, links to online content, and other forms of written material.

After the selection process has been completed, up to 9 applicants (inclusive of the winner) may be asked to participate in a post-challenge telephone discussion about the interventions used by the individual or team to successfully promote health equity and reduce health disparities. Themes from these discussions may be shared publicly to provide additional information to promote innovative and unique interventions that led to reduced health disparities.

Additional Information

The challenge website may post the number of applications received but will not include confidential or proprietary information about individual applicants. The information submitted by applicants will not be posted on the website. Information collected from applicants will include general details, such as the business name, address, and contact information of the nominee. This type of information is generally publicly available.

Information for the Winner, such as the name of the individual or team, location, priority population, and health outcomes will be shared through press releases, the challenge website, and Division of Nutrition, Physical Activity, and Obesity and CDC Resources. Details regarding the Winner and its application may be shared with the public as part of a success story.

The award is named in honor of Lark Galloway-Gilliam, the founding Executive Director of Community Health Councils, Inc. (CHC). CHC began in 1992 to support planning, resource development, and policy education in response to the growing health crisis in the South Los Angeles area and other under-resourced and marginalized communities throughout LA County. Lark led the CHC team to engage communities and strengthen the connections among organizations in order to improve health, eliminate disparities, and achieve health equity. Under Lark’s leadership, CHC became an expert in health equity in Los Angeles, across California, and the country. Lark also served in several

leadership roles, including the first president of the National REACH Coalition, the MLK Medical center Advisory Board, and the IP3 Board of Directors for Community Commons.

Compliance With Rules and Contacting Challenge Winners

Applicants and the Challenge Winner (and all members of the team, if a team is selected as the Winner) must comply with all terms and conditions of these Official Rules, and winning is contingent upon fulfilling all requirements herein. The Winner will be notified by email, telephone, or mail after the date of the judging.

Privacy

If applicants choose to provide HHS/CDC with personal information by registering or filling out the submission form through the *Challenge.gov* website, that information is used to respond to Contestants in matters regarding their submission, announcements of entrants, finalists, and winners of the Contest. Information is not collected for commercial marketing. Winners are permitted to cite that they won this contest.

General Conditions

HHS/CDC reserves the right to cancel, suspend, and/or modify the Challenge, or any part of it, for any reason, at HHS/CDC’s sole discretion.

Participation in this Challenge constitutes an applicants’ full and unconditional agreement to abide by the Challenge’s Official Rules found at www.Challenge.gov.

Authority: 15 U.S.C. 3719.

Dated: September 12, 2019.

Sandra Cashman,

Executive Secretary, Centers for Disease Control and Prevention.

[FR Doc. 2019–20162 Filed 9–17–19; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Clinical Laboratory Improvement Advisory Committee (CLIAC); Correction

Notice is hereby given of a change in the meeting of the Clinical Laboratory Improvement Advisory Committee (CLIAC); November 6, 2019, 8:30 a.m. to 5:00 p.m., EST and November 7, 2019, 8:30 a.m. to 12:00 p.m., EST which was published in the **Federal Register** on

August 30, 2019, Volume 84, Number 169, pages 45765–45766.

The *MATTERS TO BE CONSIDERED* should read as follows: The agenda will include agency updates from CDC, the Centers for Medicare and Medicaid Services (CMS); and the Food and Drug Administration (FDA). Presentations and discussions will focus on a follow up on CLIA recommendations; an update on the clinical laboratory workforce; improving integration of laboratory information systems with electronic health records; and future CLIA topics. There will be an extended public comment session focusing on emerging technologies and the clinical laboratory. Agenda items are subject to change as priorities dictate.

FOR FURTHER INFORMATION CONTACT: Nancy Anderson, MMSc, MT(ASCP), Senior Advisor for Clinical Laboratories, Division of Laboratory Systems, Center for Surveillance, Epidemiology and Laboratory Services, Office of Public Health Scientific Services, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop V24–3, Atlanta, Georgia 30329–4027, telephone (404) 498–2741; NAnderson@cdc.gov.

The Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Kalwant Smagh,

Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2019–20180 Filed 9–17–19; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2019–N–4187]

A New Era of Smarter Food Safety; Public Meeting, Request for Comments

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of public meeting; request for comments.

SUMMARY: The Food and Drug Administration (FDA, the Agency, or we) is announcing the following public meeting entitled “A New Era of Smarter Food Safety” to get input from a broad

cross-section of stakeholders on a modern approach the Agency is taking to strengthen its protection of the food supply. The purpose of this meeting is to foster a dialogue with our domestic and international regulatory and public health partners, industry, consumers, academia, and others. The input received at this meeting, and in comments submitted to the docket, will be used to shape an FDA Blueprint for a New Era of Smarter Food Safety. This Blueprint will outline how this modern approach will address public health challenges, ranging from being able to trace sources of contaminated foods, to using new predictive analytics tools like artificial intelligence to assess risks, and help prioritize the Agency’s work and resources.

DATES: The public meeting will be held on October 21, 2019, from 8:30 a.m. to 5 p.m. Submit either electronic or written comments on this public meeting by November 20, 2019. See the **SUPPLEMENTARY INFORMATION** section for registration date and information.

ADDRESSES: The public meeting will be held at the Hilton Washington DC/ Rockville Hotel and Executive Meeting Center, 1750 Rockville Pike, Rockville, MD 20852. For more information on the hotel see <https://www.fda.gov/food/news-events-cfsan/workshops-meetings-webinars-food-and-dietary-supplements>.

You may submit comments as follows. Please note that late, untimely filed comments will not be considered. Electronic comments must be submitted on or before November 20, 2019. The <https://www.regulations.gov> electronic filing system will accept comments until 11:59 p.m. Eastern Time at the end of November 20, 2019. Comments received by mail/hand delivery/courier (for written/paper submissions) will be considered timely if they are postmarked or the delivery service acceptance receipt is on or before that date.

Electronic Submissions

Submit electronic comments in the following way:

- **Federal eRulemaking Portal:** <https://www.regulations.gov>. Follow the instructions for submitting comments. Comments submitted electronically, including attachments, to <https://www.regulations.gov> will be posted to the docket unchanged. Because your comment will be made public, you are solely responsible for ensuring that your comment does not include any confidential information that you or a third party may not wish to be posted, such as medical information, your or anyone else’s Social Security number, or

confidential business information, such as a manufacturing process. Please note that if you include your name, contact information, or other information that identifies you in the body of your comments, that information will be posted on <https://www.regulations.gov>.

- If you want to submit a comment with confidential information that you do not wish to be made available to the public, submit the comment as a written/paper submission and in the manner detailed (see “Written/Paper Submissions” and “Instructions”).

Written/Paper Submissions

Submit written/paper submissions as follows:

- **Mail/Hand Delivery/Courier (for written/paper submissions):** Dockets Management Staff (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852.

- For written/paper comments submitted to the Dockets Management Staff, FDA will post your comment, as well as any attachments, except for information submitted, marked and identified, as confidential, if submitted as detailed in “Instructions.”

Instructions: All submissions received must include the Docket No. FDA–2019–N–4187 for “A New Era of Smarter Food Safety.” Received comments, those filed in a timely manner (see **ADDRESSES**), will be placed in the docket and, except for those submitted as “Confidential Submissions,” publicly viewable at <https://www.regulations.gov> or at the Dockets Management Staff between 9 a.m. and 4 p.m., Monday through Friday.

- **Confidential Submissions—**To submit a comment with confidential information that you do not wish to be made publicly available, submit your comments only as a written/paper submission. You should submit two copies total. One copy will include the information you claim to be confidential with a heading or cover note that states “THIS DOCUMENT CONTAINS CONFIDENTIAL INFORMATION.” The Agency will review this copy, including the claimed confidential information, in its consideration of comments. The second copy, which will have the claimed confidential information redacted/blacked out, will be available for public viewing and posted on <https://www.regulations.gov>. Submit both copies to the Dockets Management Staff. If you do not wish your name and contact information to be made publicly available, you can provide this information on the cover sheet and not in the body of your comments and you must identify this information as “confidential.” Any information marked