

2020 POVERTY GUIDELINES FOR  
ALASKA—Continued

| Persons in family/household | Poverty guideline |
|-----------------------------|-------------------|
| 6 .....                     | 43,950            |
| 7 .....                     | 49,550            |
| 8 .....                     | 55,150            |

For families/households with more than 8 persons, add \$5,600 for each additional person.

2020 POVERTY GUIDELINES FOR  
HAWAII

| Persons in family/household | Poverty guideline |
|-----------------------------|-------------------|
| 1 .....                     | \$14,680          |
| 2 .....                     | 19,830            |
| 3 .....                     | 24,980            |
| 4 .....                     | 30,130            |
| 5 .....                     | 35,280            |
| 6 .....                     | 40,430            |
| 7 .....                     | 45,580            |
| 8 .....                     | 50,730            |

For families/households with more than 8 persons, add \$5,150 for each additional person.

Separate poverty guideline figures for Alaska and Hawaii reflect Office of Economic Opportunity administrative practice beginning in the 1966–1970 period. (Note that the Census Bureau poverty thresholds—the version of the poverty measure used for statistical purposes—have never had separate figures for Alaska and Hawaii.) The poverty guidelines are not defined for Puerto Rico or other outlying jurisdictions. In cases in which a Federal program using the poverty guidelines serves any of those jurisdictions, the Federal office that administers the program is generally responsible for deciding whether to use the contiguous-states-and-DC guidelines for those jurisdictions or to follow some other procedure.

Due to confusing legislative language dating back to 1972, the poverty guidelines sometimes have been mistakenly referred to as the “OMB” (Office of Management and Budget) poverty guidelines or poverty line. In fact, OMB has never issued the guidelines; the guidelines are issued each year by the Department of Health and Human Services. The poverty guidelines may be formally referenced as “the poverty guidelines updated

periodically in the **Federal Register** by the U.S. Department of Health and Human Services under the authority of 42 U.S.C. 9902(2).”

Some Federal programs use a percentage multiple of the guidelines (for example, 125 percent or 185 percent of the guidelines), as noted in relevant authorizing legislation or program regulations. Non-Federal organizations that use the poverty guidelines under their own authority in non-federally-funded activities also may choose to use a percentage multiple of the guidelines.

The poverty guidelines do not make a distinction between farm and non-farm families, or between aged and non-aged units. (Only the Census Bureau poverty thresholds have separate figures for aged and non-aged one-person and two-person units.)

This notice does not provide definitions of such terms as “income” or “family” as there is considerable variation of these terms among programs that use the poverty guidelines. The legislation or regulations governing each program define these terms and determine how the program applies the poverty guidelines. In cases where legislation or regulations do not establish these definitions, the entity that administers or funds the program is responsible to define such terms as “income” and “family.” Therefore questions such as net or gross income, counted or excluded income, or household size should be directed to the entity that administers or funds the program.

Dated: January 14, 2020.

**Alex M. Azar II,**

*Secretary, Department of Health and Human Services.*

[FR Doc. 2020–00858 Filed 1–15–20; 4:15 pm]

**BILLING CODE 4150–05–P**

**DEPARTMENT OF HEALTH AND  
HUMAN SERVICES**

**[Document Identifier: OS–0990–0001]**

**Agency Information Collection  
Request; 30-Day Public Comment  
Request**

**AGENCY:** Office of the Secretary, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with the requirement of the Paperwork Reduction Act of 1995, the Office of the

Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment.

**DATES:** Comments on the ICR must be received on or before February 18, 2020.

**ADDRESSES:** Submit your comments to [OIRA\\_submission@omb.eop.gov](mailto:OIRA_submission@omb.eop.gov) or via facsimile to (202) 395–5806.

**FOR FURTHER INFORMATION CONTACT:** Sherrette Funn, [Sherrette.Funn@hhs.gov](mailto:Sherrette.Funn@hhs.gov) or (202) 795–7714. When submitting comments or requesting information, please include the document identifier 0990–0001–30D and project title for reference.

**SUPPLEMENTARY INFORMATION:** Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency’s functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

*Information Collection Request Title:* Application for waiver of the two- year foreign residence requirement of the Exchange Visitor Program.

*OMB No.:* 0990–0001.

*Abstract:* The HHS program deals with both research and clinical care waivers. Applicant institutions apply to this Department to request a waiver on behalf of research scientists or foreign medical graduates to work as clinicians in HHS designated health shortage areas doing primary care in medical facilities. The instructions request a copy of Form G–28 from applicant institutions represented by legal counsel outside of the applying institution. United States Department of Justice Form G–28 ascertains that legal counsel represents both the applicant organization and the exchange visitor.

*Need and Proposed Use of the Information:* Required as part of the application process to collect basic information such as name, address, family status, sponsor and current visa information.

*Likely Respondents:* Research scientists and research facilities.

## TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

| Type of respondent                                    | Form name     | Number of respondents | Number of responses per respondent | Average burden per response (in hours) | Total burden hours |
|-------------------------------------------------------|---------------|-----------------------|------------------------------------|----------------------------------------|--------------------|
| Application Waiver/Supplemental A Research .....      | HHS 426 ..... | 45                    | 1                                  | 10                                     | 450                |
| Application Waiver/Supplemental B Clinical Care ..... | HHS 426 ..... | 35                    | 1                                  | 10                                     | 350                |
| Total .....                                           | .....         | .....                 | .....                              | .....                                  | 800                |

**Terry Clark,**

*Office of the Secretary, Asst Paperwork  
Reduction Act Reports Clearance Officer.*

[FR Doc. 2020–00717 Filed 1–16–20; 8:45 am]

**BILLING CODE 4150–38–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Institute of Mental Health; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Institute of Mental Health Special Emphasis Panel; Early Phase Clinical Trials for Psychosocial Interventions.

*Date:* February 11, 2020.

*Time:* 9:00 a.m. to 5:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Hyatt Regency Bethesda, One Bethesda Metro Center, 7400 Wisconsin Avenue, Bethesda, MD 20814.

*Contact Person:* David I. Sommers, Ph.D., Scientific Review Officer, Division of Extramural Activities, National Institute of Mental Health, National Institutes of Health, 6001 Executive Blvd., Room 6154, MSC 9606, Bethesda, MD 20892, 301–443–7861, [dsommers@mail.nih.gov](mailto:dsommers@mail.nih.gov).

*Name of Committee:* National Institute of Mental Health Special Emphasis Panel; Early Phase Clinical Trials—Pharma/Device.

*Date:* February 20, 2020.

*Time:* 11:30 a.m. to 5:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Neuroscience Center Building (NSC), 6001

Executive Boulevard, Rockville, MD 20852 (Telephone Conference Call).

*Contact Person:* David I. Sommers, Ph.D., Scientific Review Officer, Division of Extramural Activities, National Institute of Mental Health, National Institutes of Health, 6001 Executive Blvd., Room 6154, MSC 9606, Bethesda, MD 20892, 301–443–7861, [dsommers@mail.nih.gov](mailto:dsommers@mail.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.242, Mental Health Research Grants, National Institutes of Health, HHS)

Dated: January 13, 2020.

**Melanie J. Pantoja,**

*Program Analyst, Office of Federal Advisory Committee Policy.*

[FR Doc. 2020–00688 Filed 1–16–20; 8:45 am]

**BILLING CODE 4140–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Prospective Grant of Exclusive Patent License: Development of Regulatory T-Cell Therapies for the Treatment of Hemophilia A (HA)

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

**SUMMARY:** The National Institute of Allergy and Infectious Diseases, an institute of the National Institutes of Health, Department of Health and Human Services, is contemplating the grant of an Exclusive Patent License to practice the inventions embodied in the Patents and Patent Applications listed in the **SUPPLEMENTARY INFORMATION** section of this notice to TeraImmune, Inc. (“TeraImmune”) located in Rockville, Maryland.

**DATES:** Only written comments and/or applications for a license which are received by the National Institute of Allergy and Infectious Diseases’ Technology Transfer and Intellectual Property Office on or before February 3, 2020 will be considered.

**ADDRESSES:** Requests for copies of the patent application, inquiries, and comments relating to the contemplated Exclusive Patent License should be directed to: Dr. Yogikala Prabhu,

Technology Transfer and Patent Specialist, Technology Transfer and Intellectual Property Office, National Institute of Allergy and Infectious Diseases, 5601 Fishers Lane, Suite 6D, MSC9804, Rockville, MD 20852–9804; Telephone: (301) 496–2644; Facsimile: (240) 627–3117; Email: [prabhuyo@niaid.nih.gov](mailto:prabhuyo@niaid.nih.gov).

### SUPPLEMENTARY INFORMATION:

#### Intellectual Property

- U.S. Patent 9,481,866—issued November 1, 2016, entitled “Methods of Producing T Cell Populations Enriched for Stable Regulatory T-Cells” [HHS Reference No. E–279–2011/0–US–02]
- U.S. Divisional Application No.15/284,840—filed October 4, 2016, entitled “Methods of Producing T Cell Populations Enriched for Stable Regulatory T-Cells”. [HHS Reference No. E–279–2011/0–US–03]

The patent rights in these inventions have been assigned to the government of the United States of America.

The prospective exclusive license territory will be the United States and the field of use will be limited to: “Human cell-based therapeutics for the treatment of Hemophilia A in patients that have inhibitory Factor VIII antibodies.”

The technology is directed to a method for producing or growing cell populations that are enriched for stable, highly suppressive regulatory T cells (Tregs). Tregs are critical in regulating immune system processes that maintain tolerance to self-antigens and prevent immune mediated diseases. The method takes a population of cells comprising stable, regulatory T cells and enriched for specific CD markers, cultures these cells in the presence of interleukin-2, an anti-CD3 antibody, an anti-CD28 antibody, and oligodeoxynucleotides of specified length having a phosphorothioate backbone, and yields the expansion of the initial population of regulatory T-cells. The expanded Tregs may then be used for the treatment of immune-mediated diseases.

This notice is made in accordance with 35 U.S.C. 209 and 37 CFR part 404.