

submitting written public comment. Persons who wish to provide public comment should review instructions at <https://cms-drupal-hhs-ohrp-prod.cloud.hhs.gov/ohrp/sachrp-committee/meetings/index.html> and respond by midnight Wednesday, March 4, 2020, ET. Individuals submitting written statements as public comment should submit their comments to SACHRP at SACHRP@hhs.gov. Verbal comments will be limited to three minutes each.

Time will be allotted for public comment on both days. Note that public comment must be relevant to topics currently being addressed by the SACHRP.

Dated: February 6, 2020.

Julia G. Gorey,

Executive Director, Secretary's Advisory Committee on Human Research Protections.

[FR Doc. 2020-03695 Filed 2-24-20; 8:45 am]

BILLING CODE 4150-36-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0937-0198]

Agency Information Collection Request. 60-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 April 27, 2020.

ADDRESSES: Submit your comments to Sherrette.Funn@hhs.gov or by calling (202) 795-7714.

FOR FURTHER INFORMATION CONTACT:

When submitting comments or requesting information, please include the document identifier 0937-0198-60D, and project title for reference, to Sherrette Funn, the Reports Clearance Officer, Sherrette.funn@hhs.gov, or call 202-795-7714.

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.

Title of the Collection

Type of Collection: Public Health Service Polices on Research Misconduct (42 CFR part 93)—OMB No. 0937-0198—Extension—Office of Research Integrity.

Abstract: The Office of Research Integrity is requesting an extension on a currently approved collection. The purpose of the Institutional Assurance and Annual Report on Possible Research

Misconduct form PHS-6349 is to provide data on the amount of research misconduct activity occurring in institutions conducting PHS-supported research. The purpose of the Assurance of Compliance by Sub-Award Recipients form PHS-6315 is to establish an assurance of compliance for a sub-awardee institution. Forms PHS 6349 and PHS-6315 are also used to provide an annual assurance that the institution has established and will follow administrative policies and procedures for responding to allegations of research misconduct that comply with the Public Health Service (PHS) Policies on Research Misconduct (42 CFR part 93). Research misconduct is defined as receipt of an allegation of research misconduct and/or the conduct of an inquiry and/or investigation into such allegations. These data enable the ORI to monitor institutional compliance with the PHS regulation.

Need and Proposed Use: The information is needed to fulfill section 493 of the Public Health Service Act (42 U.S.C. 289b), which requires assurances from institutions that apply for financial assistance under the Public Health Service Act for any project or program that involves the conduct of biomedical or behavioral research. In addition, the information is also required to fulfill the assurance and annual reporting requirements of 42 CFR part 93. ORI uses the information to monitor institutional compliance with the regulation. Lastly, the information may be used to respond to congressional requests for information to prevent misuse of Federal funds and to protect the public interest.

ESTIMATED ANNUALIZED BURDEN HOUR TABLE

Forms (if necessary)	Respondents (if necessary)	Number of respondents	Number of responses per respondents	Average burden per response	Total burden hours
PHS-6349	Awardee Institutions	5,748	1	11/60	1054
PHS-6315	Sub-award Institution's	110	1	5/60	9
Total	2	1063

Dated: February 19, 2020.

Terry Clark,

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

[FR Doc. 2020-03717 Filed 2-24-20; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Request for Public Comment: 30-Day Information Collection: Indian Self-Determination and Education Assistance Act Contracts

AGENCY: Indian Health Service, HHS.

ACTION: Notice and request for comments. Request for extension of approval.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995 (PRA), the Indian Health Service (IHS) invites the general public to comment on the information collection titled, "Indian Self-Determination and Education Assistance Act Contracts," Office of Management and Budget (OMB) Control Number 0917-0037. IHS

is requesting OMB to approve an extension for this collection, which expires on February 29, 2020. This proposed information collection project was previously published in the **Federal Register** (84 FR 70982) on December 26, 2019, and allowed 60 days for public comment, as required by the PRA. The IHS received no comments regarding this collection. The purpose of this notice is to allow 30 days for public comment to be submitted directly to OMB.

DATES:

Comment Due Date: March 26, 2020. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication.

Direct Your Comments to OMB: Send your comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS.

SUPPLEMENTARY INFORMATION: This previously approved information collection project was last published in the **Federal Register** (84 FR 70982) on December 26, 2019. No public comment was received in response to the notice. The purpose of this notice is to allow 30 days for public comment to be submitted directly to OMB. A copy of the supporting statement is available at www.regulations.gov (see Docket ID IHS-2016-0003).

Information Collection Title: “Indian Self-Determination and Education Assistance Act Contracts, 25 CFR part 900.”

OMB Control Number: 0917-0037.

Title: Indian Self-Determination and Education Assistance Act Contracts.

Brief Description of Collection: An Indian Tribe or Tribal Organization is required to submit certain information when it proposes to contract with the IHS under the ISDEAA. Each response may vary in its length. In addition, each Subpart of 25 CFR part 900 concerns different parts of the contracting process. For example, Subpart C relates to provisions of the contents for the initial contract proposal. The respondents do not incur the burden associated with Subpart C when contracts are renewed. Subpart F describes minimum standards for management systems used by Indian Tribes or Tribal Organizations under these contracts. Subpart G addresses the negotiability of all reporting and data

requirements in the contracts. Responses are required to obtain or retain a benefit.

Type of Review: Extension of currently approved collection.

Respondents: Federally recognized Indian Tribes and Tribal Organizations.

Number of Respondents: 275 Title I contractors.

Estimated Number of Responses: On average, IHS receives 10 proposals for new or expanded Title I agreements each fiscal year, plus there are 265 existing Title I contracts and associated annual funding agreements, which must be negotiated each year = 275 responses.

Estimated Time per Response: Average of 70 hours for the new/expanded; average of 35 hours for the existing.

Frequency of Response: Each time programs, functions, services or activities are contracted from the IHS under the ISDEAA.

Estimated Total Annual Hour Burden: 700 [70 × 10] for new/expanded + 9,275 [35 × 265] for existing = 9,975.

Requests for Comments: Your written comments and/or suggestions are invited on one or more of the following points: (a) The necessity of this information collection for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) the accuracy of the agency’s estimate of the burden (hours and cost) of the collection of information, including the validity of the methodology and assumptions used; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of the information on the respondents.

Michael D. Weahkee,

Assistant Surgeon General, U.S. Public Health Service, Principal Deputy Director, Indian Health Service.

[FR Doc. 2020-03660 Filed 2-24-20; 8:45 am]

BILLING CODE 4165-16-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Request for Public Comment: 30-Day Information Collection: Indian Health Service Medical Staff Credentials

AGENCY: Indian Health Service, HHS.

ACTION: Notice and request for comments. Request for revision to a collection.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995

(PRA), the Indian Health Service (IHS) invites the general public to comment on the information collection titled, “Indian Health Service Medical Staff Credentials,” OMB Control Number 0917-0009, that expires February 29, 2020. This proposed information collection project was previously published in the **Federal Register** (84 FR 70197) on December 20, 2019, and allowed 60 days for public comment, as required by the PRA. The IHS received one comment regarding this collection. The purpose of this notice is to allow 30 days for public comment to be submitted directly to OMB.

DATES: *Comment Due Date:* March 26, 2020. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication.

Direct Your Comments to OMB: Send your comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington DC 20503, Attention: Desk Officer for IHS.

Summary of Comment: The IHS received one comment. The commenter asked: Any reason why PAs and NPs are not included as part of the requirement to be medical staff members? Non-physician providers are credentialed in the same manner to be able to provide high quality medical care to IHS beneficiaries.

The IHS response to the comment:

The **Federal Register** notice makes reference to IHS policy noting “IHS policy specifically requires physicians and dentists to be members of the health care facility medical staff where they practice.” This notice is only making reference to existing IHS policy (not establishing policy in and of itself) as found in Indian Health Manual, Part 3, Chapter 1 which notes “The medical staff shall include physicians (medical doctors and doctors of osteopathy) and dentists, and other categories of providers as determined by the local medical staff and its governing body, and defined in its policies and procedures manual and bylaws.”

SUPPLEMENTARY INFORMATION: This notice announces the IHS intent to revise the collection already approved by OMB, and to solicit comments on specific aspects of the information collection. The purpose of this notice is to allow 30 days for public comment to be submitted to OMB. A copy of the supporting statement is available at