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.

Dated: April 6, 2020.

Mary Lazare,

Administrator and Assistant Secretary for Aging.

[FR Doc. 2020–07665 Filed 4–10–20; 8:45 am]

BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Proposed Collection; Comment Request; Outcome Evaluation of the Long-Term Care Ombudsman Program (LTCOP); OMB#0985–XXXX

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish a notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on the proposed new information collection requirements related to an outcome evaluation for ACL's Long-term Ombudsman Program (LTCOP).

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by June 12, 2020.

ADDRESSES: Submit electronic comments on the collection of information to: Susan Jenkins, Ph.D. Submit written comments on the collection of information to Administration for Community Living, Washington, DC 20201, Attention: Susan Jenkins, Ph.D.

FOR FURTHER INFORMATION CONTACT: Susan Jenkins, Ph.D., Administration for Community Living, Washington, DC 20201, 202.795.7369; *Susan.Jenkins@acl.hhs.gov.*

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. A ''Collection of information'' is defined as and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. The PRA requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, ACL is publishing a notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, ACL invites comments on our burden estimates or any other aspect of this collection of information, including:

(1) Whether the proposed collection of information is necessary for the proper performance of ACL's functions, including whether the information will have practical utility;

(2) the accuracy of ACL's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used to determine burden estimates;

(3) ways to enhance the quality, utility, and clarity of the information to be collected; and

(4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques when appropriate, and other forms of information technology.

The mission of the Administration for Community Living (ACL) [1] is to maximize the independence, well-being, and health of older adults, people with disabilities across the lifespan, and their families and caregivers. The Long-Term Care Ombudsman Program serves individuals living in long-term care facilities (nursing homes, residential care communities, such as assisted living and similar settings) and works to resolve resident problems related to poor care, violation of rights, and quality of life. Ombudsman programs also advocate at the local, state and national levels to promote policies and consumer protections to improve residents' care and quality of life.

This data collection is part of an outcome evaluation of the Long-term Care Ombudsman Program (LTCOP) designed to determine the efficacy of LTCOP in carrying out core functions as described in the Older Americans Act, the long-term impacts of the LTCOP's for various stakeholders, what system advocacy among Ombudsman programs looks like, and effective or promising Ombudsman program practices. The efficacy of LTCOP in carrying out core functions as described in the Older Americans Act. ACL is interested in learning:

1. Are the critical functions, including federally mandated responsibilities, of the LTCOP at the state, and local levels, carried out effectively and efficiently?

2. How effective is the LTCOP in ensuring Ombudsman services for the full range of residents of long-term care facilities, including individuals with the greatest economic and social needs?

3. How cost-effective LTCOP strategies are, for example, the cost effectiveness of services offered through consultations, referrals, complaint handling, and via education and outreach activities.

4. What impact do LTCOPs have on long-term care practices, programs, and policies?

5. What impact do LTCOPs have on residents' health, safety, welfare, well-being, and rights?

Act (OAA) programs such as Title VII Long-Term Care Ombudsman Program (LTCOP), ACL/AoA seeks increased understanding of how these programs are operationalized at the State and local levels and their progress towards their goals and mission. This information will enable ACL/AoA to

[1] In April 2012, a new Operating Division was created within the US Department of Health and Human Services named the Administration for Community Living (ACL). This Operating Division contains the Administration on Aging (AoA). This document consistently refer to the federal agency as ''ACL/AoA.''

effectively report its results to the President, to Congress, to the Department of Health and Human Services and to the public.

The information will also aid in program refinement and continuous improvement. The more productive ACL/AoA's programs, the greater the number of older adults have access to a higher quality of life. Therefore, in addition to the legislative mandate under the OAA, it is important for program integrity and function to evaluate the LTCOP.

To comment and review the proposed data collection please visit the ACL website at *https://www.acl.gov/about-acl/public-input.*

Estimated Program Burden

ACL estimates the burden associated with this collection of information as follows:

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Annual burden hours
Focus Group—Facility staff including participant information	16	1	0.33	5.3
Focus Group—Residents/family including participant information	24	1	1	24
Interview—Stakeholders	40	1	1	40
Survey—Facility Administrator	1840	1	0.33	607.2
Survey—Former Ombudsmen	12	1	1	12
Survey—SUA director	53	1	0.5	26.5
Total:	1985		4.16	715

Dated: April 6, 2020.

Mary Lazare,

Principal Deputy Administrator.

[FR Doc. 2020–07668 Filed 4–10–20; 8:45 am]

BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Allergy and Infectious Diseases; Notice of Closed Meeting

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

The meeting 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 contract proposals and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the contract proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Allergy and Infectious Diseases Special Emphasis Panel; Statistical and Data Coordinating Center (SDCC) for Clinical Research in Infectious Diseases.

Date: May 11, 2020.

Time: 12:00 p.m. to 3:30 p.m.

Agenda: To review and evaluate contract proposals.

Place: National Institute of Allergy and Infectious Diseases, National Institutes of Health, 5601 Fishers Lane, Room 3E71, Rockville, MD 20892 (Telephone Conference Call).

Contact Person: Lee G. Klinkenberg, Ph.D., Scientific Review Program, Division of Extramural Activities, National Institute of Allergy and Infectious Diseases, National Institutes of Health, 5601 Fishers Lane, Room 3E71 Bethesda, MD 20892–9834, 301–761–7749, *lee.klinkenberg@nih.gov.*

(Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology, and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS)

Dated: April 7, 2020.

Tyeshia M. Roberson,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2020–07709 Filed 4–10–20; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of an Exclusive Patent License: Interinstitutional Agreement—Institution Lead: Graphene Oxide-Polycarbonate Track-Etched Nanosieve Platform for Sensitive Detection of Human Immunodeficiency Virus Envelope Glycoprotein

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Cancer Institute, 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 Indian Patent Applications listed in the Supplementary Information section of this notice to Chaudhary Charan Singh Haryana Agricultural University (CCSHAU) located in Hisar, India.

DATES: Only written comments and/or applications for a license which are received by the National Cancer Institute's Technology Transfer Center on or before April 28, 2020 will be considered.

ADDRESSES: Requests for copies of the patent application, inquiries, and comments relating to the contemplated an Exclusive Patent License should be directed to: Jasmine J. Yang, Ph.D., (Senior) Licensing and Patenting Manager, NCI Technology Transfer Center, 9609 Medical Center Drive, RM 1E530 MSC 9702, Bethesda, MD 20892–9702 (for business mail), Rockville, MD 20850–9702 Telephone: (240)-276–5530; Facsimile: (240)-276–5504 Email: *jasmine.yang@nih.gov.*

SUPPLEMENTARY INFORMATION:

Intellectual Property

Indian Patent Application Serial No. 201711002764, filed February 24, 2017 entitled ''Graphene oxide-polycarbonate track-etched nanosieve platform for sensitive detection of human immunodeficiency virus envelope glycoprotein.''

The patent rights in these inventions have been assigned and/or exclusively licensed to the CCS Haryana Agricultural University and Government of the United States of America as represented by the Secretary, Department of Health & Human Services.

The prospective patent license will be for the purpose of consolidating the patent rights to CCSHAU, the co-owners of said rights, for commercial development and marketing. Consolidation of these co-owned rights is intended to expedite development of the invention, consistent with the goals