

announces the following advisory committee meeting.

*Name:* National Committee on Vital and Health Statistics (NCVHS), Hearing of the Subcommittee on Privacy, Confidentiality, and Security.

*Dates and Times:* Monday, September 14, 2020: 9:30 a.m.–5:30 p.m.

*Place:* U.S. Department of Health and Human Services Virtual.

*Status:* Open.

*Purpose:* At the September 14, 2020, hearing, the National Committee on Vital and Health Statistics (NCVHS), Subcommittee on Privacy, Confidentiality, and Security, will explore the privacy, confidentiality, and security considerations for data collection and use during a public health emergency, in light of the nationwide COVID-19 pandemic.

The Subcommittee will hear from invited experts and review written testimony received in advance from interested individuals, organizations, and stakeholders.

At the hearing, NCVHS will receive input from public health practitioners, academics, advocates, representatives of industry, and other experts about data stewardship principles designed to guide the privacy and security of individually identifiable health information when new technologies are deployed for public health surveillance during an emergency. These are expected to touch on new uses of medical, geolocation, proximity, or adjacency data; social media; contact tracing applications; privacy and security guardrails essential to responsible use of data when creating and employing new tools; and future use and lifecycle management of individually identifiable health data. The Committee will also consider concerns raised by privacy, civil rights, and public interest advocates about the potential for discrimination and harm when information intended to protect the public is repurposed for other uses, such as law enforcement, immigration, or unrelated research or commercial enterprise.

The Committee will use this input to inform development and dissemination of best practices for safeguarding individually identifiable health data collected, used, and shared during a pandemic or long-term nationwide public health emergency.

The Committee requests comments from the public to inform its deliberations in advance and will consider them together with the input of subject matter experts at the hearing. The Committee has developed specific questions to ensure comments address

key issues under consideration, available at: <https://ncvhs.hhs.gov/Sept-2020-PCS-Subcommittee-Hearing-Public-Comment-Questions>. Please submit comments using the questions provided at this link to [NCVHSmail@cdc.gov](mailto:NCVHSmail@cdc.gov) by close of business Wednesday, September 9, 2020.

There will be a public comment period at the meeting. The meeting times and topics are subject to change. Please refer to the NCVHS website for information and agenda updates.

*Contact Person for More Information:*

Substantive program information may be obtained from Rebecca Hines, MHS, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Hyattsville, Maryland 20782, telephone (301) 458-4715. Summaries of meetings and a roster of Committee members are available on the home page of the NCVHS website: <https://ncvhs.hhs.gov/>. Further information, including an agenda and instructions to access the broadcast of the meeting, will be posted on the NCVHS website.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on (770) 488-3210 as soon as possible.

**Sharon Arnold,**

*Associate Deputy Assistant Secretary for Planning and Evaluation, Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation.*

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**BILLING CODE 4150-05-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Substance Abuse and Mental Health Services Administration**

**Agency Information Collection Activities: Submission for OMB Review; Comment Request**

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276-0361.

**Proposed Project: National Substance Use and Mental Health Services Survey (N-SUMHSS) (OMB No. 0930-)**

Historically SAMHSA collected information on substance use and mental health treatment facilities

through two (2) separate data collections: The National Survey of Substance Abuse Treatment Services (N-SSATS; OMB No. 0930-0106) and the National Mental Health Services Survey (N-MHSS; OMB No. 0930-0119). SAMHSA also maintain as part of the N-SSATS data collection approval, an inventory of treatment facility, named the Inventory of Behavioral Health Services (I-BHS) (N-SSATS; OMB No. 0930-0106).

Some of the content and questions in the N-SSATS and N-MHSS data collection surveys are similar and represented an additional burden to approximately 14 percent of facilities that received both surveys. SAMHSA recognizes the need to have data collections that are less burdensome to these facilities that provide these services. To help reduce respondent burden, increase efficiency, and better manage resources, SAMHSA goal is to combine these two surveys into the National Substance Use and Mental Health Services Survey (N-SUMHSS).

The N-SUMHSS, will include the facility characteristics and services questions currently asked in the N-SSATS and the N-MHSS. The survey will also collect, on an annual basis, client counts on those individuals receiving services at these facilities. Historically, client count information was collected every other year; however there is an increasing need to collect and maintain data on current and accurate numbers of clients in treatment at the local level for community to assess capacity and estimate resource requirements. This information on substance use and mental health services has assisted with communities to better respond to life changing events, (*i.e.* hurricane) and plan for service demands in the event of a natural disaster, (*i.e.* earthquakes).

SAMHSA requests is for approval of the N-SUMHSS data collection and the extension of the I-BHS data collection. The N-SUMHSS survey will provide data on the numbers and types of patients treated and the characteristics of facilities providing substance use and mental health treatment services. The extension of the duration of the I-BHS survey, which is current authorized as part of N-SSATS (OMB No. 0930-0106), aligns it to the same period as the N-SUMHSS. These surveys are conducted under the authority of Section 505 of the Public Health Service Act (42 U.S.C. 290aa-4) to meet the specific mandates for annual information about public and private substance use/mental health treatment providers and the clients they serve.

This request includes:

- N–SUMHSS, an annual census of substance use and mental health treatment facilities which collects descriptive data on the location, scope of services provided, and operational characteristics of all known substance use and mental health treatment facilities in the United States and jurisdictions, and on utilization of services by means of a single-day count of clients in treatment; and
- I–BHS data collection activities associated with updating the inventory

of both mental health treatment facilities and substance use treatment facilities.

The information in N–SUMHSS and I–BHS is needed to assess the nature and extent of these resources, to identify gaps in services, and to provide a database for treatment referrals.

The request for OMB approval will include a request to conduct the N–SUMHSS survey which includes facility characteristics and services and one-day client counts and to update the I–BHS

facility listing on a continuous basis in 2021, 2022 and 2023. Also included in this request is the Between Cycle N–SUMHSS data collection (N–SUMHSS BC), to be conducted between annual surveys to collect information on new facilities for inclusion in the Treatment Locator. N–SUMHSS BC use is an abbreviated N–SUMHSS survey questionnaire.

The estimated annual burden for the I–BHS and BHSIS activities is as follows:

Type of respondent and activity	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours	Wage rate	Total hour cost
States: I–BHS Online <sup>1</sup> .....	56	75	4,200	0.08	336	\$23	\$7,728
State Subtotal .....	56	.....	4,200	.....	336	.....	7,728
Facilities:							
I–BHS application <sup>2</sup> .....	800	1	800	0.08	64	19.40	1,242
Augmentation screener	1,300	1	1,300	0.08	104	19.40	2,018
N–SUMHSS questionnaire (either SU or MH) .....	32,000	1	32,000	0.67	21,333	47.95	1,022,917
N–SUMHSS (both SU and MH) .....	5,000	1	5,000	1.17	5,833	47.95	279,692
N–SUMHSS BC .....	1,000	1	1,000	0.58	580	47.95	27,811
Facility Subtotal .....	40,100	.....	40,100	.....	27,914	.....	1,333,680
Total .....	40,156	.....	44,300	.....	28,250	.....	1,341,408

<sup>1</sup> States use the I–BHS Online system to submit information on newly licensed/approved facilities and on changes in facility name, address, status, etc.

<sup>2</sup> New facilities complete and submit the online I–BHS application form in order to get listed on the Inventory.

Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function.

Carlos Graham,  
Social Science Analyst.

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**DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT**

[Docket No. FR–6218–N–01]

**Notice of Program Rules, Waivers, and Alternative Requirements Under the CARES Act for Community Development Block Grant Program Coronavirus Response Grants, Fiscal Year 2019 and 2020 Community Development Block Grants, and for Other Formula Programs**

**AGENCY:** Office of the Assistant Secretary for Community Planning and Development, HUD.

**ACTION:** Notice.

**SUMMARY:** This notice describes the program rules, statutory and regulatory waivers, and alternative requirements applicable to supplemental Community Development Block Grant (CDBG) funds made available to prevent, prepare for, and respond to coronavirus (CDBG–CV funds) and to annual formula CDBG grants awarded in fiscal years 2019 and 2020. Except as otherwise described in this notice and the CARES Act, the statutory and regulatory provisions governing the CDBG program apply to

CDBG–CV and CDBG grants. This notice also describes conforming waivers and alternative requirements for other formula programs included in the consolidated planning regulations in 24 CFR part 91.

**DATES:** *Applicable:* August 7, 2020.

**FOR FURTHER INFORMATION CONTACT:** Jessie Handforth Kome, Director, Office of Block Grant Assistance, Office of Community Planning and Development, Department of Housing and Urban Development, 451 7th Street SW, Room 7282, Washington, DC 20410, telephone number 202–708–3587. Persons with hearing or speech impairments may access this number via TTY by calling the Federal Relay Service at 800–877–8339. Facsimile inquiries may be sent to Ms. Kome at 202–708–0033. Except for the “800” number, these telephone numbers are not toll-free. Questions regarding the CDBG–CV program may be submitted to [CPDQuestionsAnswered@hud.gov](mailto:CPDQuestionsAnswered@hud.gov). Interested parties may also visit HUD’s website at [https://www.hud.gov/program\\_offices/comm\\_planning](https://www.hud.gov/program_offices/comm_planning) for updated information and resources.

**SUPPLEMENTARY INFORMATION:**