

contract. If a subcontractor refuses to accept terms affording the Government those rights, the contractor shall notify the contracting officer of the refusal.

- FAR 52.227–21, *Technical Data Declaration, Revision, and Withholding of Payment—Major Systems*. This clause requires major systems contractors to certify that the data delivered under the contract is complete, accurate, and compliant with the requirements of the contract.

- FAR 52.227–23, *Rights to Proposal Data (Technical)*. This clause allows the Government to identify pages of a proposal that would not be subject to unlimited rights in the technical data.

C. Annual Burden

Respondents/Recordkeepers: 2,106.
Total Annual Responses: 5,999.
Total Burden Hours: 5,999. (1,403 reporting hours + 4,596 recordkeeping hours).

D. Public Comment

A 60-day notice was published in the **Federal Register** at 85 FR 45637, on July 29, 2020. No comments were received.

Obtaining Copies: Requesters may obtain a copy of the information collection documents from the GSA Regulatory Secretariat Division by calling 202–501–4755 or emailing GSARegSec@gsa.gov. Please cite OMB Control No. 9000–0090, Rights in Data and Copyrights.

William F. Clark,

Director, Office of Government-wide Acquisition Policy, Office of Acquisition Policy, Office of Government-wide Policy.

[FR Doc. 2020–22675 Filed 10–13–20; 8:45 am]

BILLING CODE 6820–EP–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS–0990–0025]

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 November 13, 2020.

ADDRESSES: 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. Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function.

FOR FURTHER INFORMATION CONTACT: Sherrette Funn, Sherrette.Funn@hhs.gov or (202) 795–7714. When submitting comments or requesting information, please include the document identifier 0990–0025–30D 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.

Title of the Collection: Commissioned Corps of the U.S. Public Health Service Application.

Type of Collection: Revision.

OMB No. 0990–0025—Commissioned Corps Headquarters.

Abstract: The principal purpose of this revision is a result of the Coronavirus Aid, Relief, and Economic Security (CARES) Act that was signed into law on March 27, 2020. The Public Health Service Act was amended to provide for a Ready Reserve corps in times of public health emergencies, in addition to national emergencies. Collecting the information is to permit HHS to determine eligibility for appointment of applicants into the Regular Corps and Ready Reserve Corps of the Commissioned Corps of the U.S. Public Health Service Corps (Corps). The Corps is one of the seven Uniformed Services of the United States (37 U.S.C. 101(3)), and appointments in the Corps are made pursuant to 42 U.S.C. 204 *et seq.* and 42 CFR 21.58.

Type of respondent: Candidates/Applicants to the Regular and Ready Reserve Corps of the Commissioned Corps of the U.S. Public Health Service.

ANNUALIZED BURDEN HOUR TABLE

Type of respondent	Form name	Number of regular corps respondents	Number of reserve corps respondents	Number response per respondent	Average burden per responses (in hours)	Total burden hours
Interested Health Professionals.	Prequalification Questionnaire.	6,000	1,000	1	10/60	1,167
Health Professionals	Form PHS–50	3,000	500	1	15/60	875
References (college professors/teachers).	Form PHS–1813	3,000	500	1	15/60	875
Health Professionals	Addendum: Commissioned Corps Personal Statement.	3,000	500	1	15/60	875
Total						3,792

Dated: October 8, 2020.

Sherrette A Funn,

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

[FR Doc. 2020–22703 Filed 10–13–20; 8:45 am]

BILLING CODE 4150–49–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Performance Review Board Members

Title 5, U.S.C. Section 4314(c)(4) of the Civil Service Reform Act of 1978,

Public Law 95–454, requires that the appointment of Performance Review Board Members be published in the **Federal Register**. The following persons may be named to serve on the Department of Health and Human

Services' (HHS) Performance Review Boards (PRB) from 2020 through 2021. The PRB provides performance rating and rating-based compensation recommendations to the HHS Secretary based on the individual performance appraisals for Senior Executive Service, Senior Level/Senior Technical, and Title 42 executive equivalent employees and the organizational assessments of the Operating and Staff Divisions in which they serve.

Last name	First name
BARRON	PAMELA
BARRY	DANIEL
BERGERON	DEBORAH
BRATCHER BOW- MAN.	NIKKI
BURNSZYNSKI	JENNIFER
BUSH	LAINA
CULPEPPER	MICHAEL
DUNCAN	JAMES BLAIR
HOLLAND	HOWARD
KERR	LAWRENCE
KRETSCHMAIER	MICHON
MCDANIEL	EILEEN
NIAKAN	BAHAR
NICHOLLS	RICHARD J.
POSNACK	STEVEN
SCHUHAM	AARON
TOBIAS	CONSTANCE
TOVEN	JEFFREY
WILLIAMS	RASHEED

Dated: October 7, 2020.

Kia K. Williams,

Program Manager, Executive Performance Management and Compensation on behalf of:

Michelle Monroe,

Director, Executive Resources.

[FR Doc. 2020-22551 Filed 10-9-20; 4:15 pm]

BILLING CODE 4151-17-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Notice of Purchased/Referred Care Delivery Area Redesignation for the Minnesota Chippewa Tribe, Minnesota, Mille Lacs Band of Ojibwe

AGENCY: Indian Health Service, HHS.

ACTION: Notice.

SUMMARY: This Notice advises the public that the Indian Health Service (IHS) proposes to expand the geographic boundaries of the Purchased/Referred Care Delivery Area (PRCDA) for the Mille Lacs Band of Ojibwe in the State of Minnesota to include the Minnesota counties of Crow Wing and Morrison in the State of Minnesota. The current PRCDA for the Mille Lacs Band of Ojibwe includes the Minnesota counties

of Aitkin, Kanebec, Mille Lacs, and Pine. Mille Lacs Band of Ojibwe members residing outside of the PRCDA are eligible for direct care services, however, they are not eligible for Purchased/Referred Care (PRC) services. The sole purpose of this expansion would be to authorize additional Mille Lacs Band of Ojibwe members and beneficiaries to receive PRC services.

DATES: Comments must be submitted November 13, 2020.

ADDRESSES: Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission. You may submit comments in one of four ways (please choose only one of the ways listed):

1. *Electronically.* You may submit electronic comments on this regulation to <http://www.regulations.gov>. Follow the "Submit a Comment" instructions.

2. *By regular mail.* You may mail written comments to the following address ONLY: Evonne Bennett, Acting Director, Division of Regulatory and Policy Coordination, Indian Health Service, 5600 Fishers Lane, Mail Stop: 09E70, Rockville, Maryland 20857. Please allow sufficient time for mailed comments to be received before the close of the comment period.

3. *By express or overnight mail.* You may send written comments to the above address.

4. *By hand or courier.* If you prefer, you may deliver (by hand or courier) your written comments before the close of the comment period to the address above.

If you intend to deliver your comments to the Rockville address, please call telephone number (301) 443-1116 in advance to schedule your arrival with a staff member.

SUPPLEMENTARY INFORMATION: *Inspection of Public Comments:* All comments received before the close of the comment period are available for viewing by the public, including any personally identifiable or confidential business information that is included in a comment.

FOR FURTHER INFORMATION CONTACT:

CAPT John Rael, Director, Office of Resource Access and Partnerships, Indian Health Service, 5600 Fishers Lane, Mail Stop: 10E85C, Rockville, Maryland 20857. Telephone 301/443-0969 (This is not a toll free number).

SUPPLEMENTARY INFORMATION:

Background: The IHS provides services under regulations in effect as of September 15, 1987, and republished at 42 CFR part 136, subparts A-C. Subpart C defines a Contract Health Service Delivery Area (CHSDA), now referred to as a PRCDA, as the geographic area

within which PRC will be made available by the IHS to members of an identified Indian community who reside in the PRCDA. Residence within a PRCDA by a person who is within the scope of the Indian health program, as set forth in 42 CFR 136.12, creates no legal entitlement to PRC but only potential eligibility for services. Services needed, but not available at an IHS/Tribal facility, are provided under the PRC program depending on the availability of funds, the person's relative medical priority, and the actual availability and accessibility of alternate resources in accordance with the regulations.

The regulations at 42 CFR part 136, subpart C provide that, unless otherwise designated, a PRCDA shall consist of a county which includes all or part of a reservation and any county or counties which have a common boundary with the reservation. 42 CFR 136.22(a)(6). The regulations also provide that after consultation with the Tribal governing body or bodies on those reservations included within the PRCDA, the Secretary may from time to time, redesignate areas within the United States for inclusion in or exclusion from a PRCDA. The regulations require that certain criteria must be considered before any redesignation is made. The criteria are as follows:

(1) The number of Indians residing in the area proposed to be so included or excluded;

(2) Whether the Tribal governing body has determined that Indians residing in the area near the reservation are socially and economically affiliated with the Tribe;

(3) The geographic proximity to the reservation of the area whose inclusion or exclusion is being considered; and

(4) The level of funding which would be available for the provision of PRC.

Additionally, the regulations require that any redesignation of a PRCDA must be made in accordance with the procedures of the Administrative Procedure Act (5 U.S.C. 553). In compliance with this requirement, IHS is publishing this Notice and requesting public comments.

The Minnesota Chippewa Tribe, Minnesota, Mille Lacs Band of Ojibwe Tribe's Reservation boundaries were established by the 1855 Treaty between the Chippewa and the United States. While the Mille Lacs Band of Ojibwe's PRCDA currently consists of Aitkin, Kanebec, Mille Lacs, and Pine counties in the State of Minnesota, the Mille Lacs Band of Ojibwe attests by Tribal Resolution that many Mille Lacs Band of Ojibwe members reside in the nearby Minnesota counties of Crow Wing and