

Final regulations (42 CFR part 5) were published on November 17, 1980 (45 FR 75996) that include the criteria for designating HPSAs. Criteria were defined for seven health professional types: primary medical care, dental, psychiatric, vision care, podiatric, pharmacy, and veterinary care. The criteria for correctional facility HPSAs were published on October 29, 1987 (52 FR 41594) and revised March 2, 1989 (54 FR 8735). The criteria for psychiatric HPSAs were expanded to mental health HPSAs on January 22, 1992 (57 FR 2473). Currently funded PHS Act programs use the primary medical care, mental health, or dental HPSA or relevant sub-score designations such as Maternity Care Target Areas.

HPSA designation offers access to potential federal assistance. Public or private nonprofit entities are eligible to apply for assignment of National Health Service Corps personnel to provide primary medical care, mental health, or dental health services in or to these HPSAs. National Health Service Corps health professionals enter into service agreements to serve in federally designated HPSAs. Entities with clinical training sites located in HPSAs are eligible to receive priority for certain residency training program grants administered by HRSA's Bureau of Health Workforce (BHW). Other federal programs also utilize HPSA designations. For example, under authorities administered by the Centers for Medicare & Medicaid Services, certain qualified providers in geographic area HPSAs are eligible for increased levels of Medicare reimbursement.

#### Content and Format of Lists

The three lists of designated HPSAs are available on the HRSA Data Warehouse shortage area topic web page, including those proposed for withdraw, and include a snapshot of all geographic areas, population groups, and facilities that were designated HPSAs as of April 15, 2024. This notice incorporates the most recent annual reviews of designated HPSAs and supersedes the HPSA lists published in the **Federal Register** on January 2, 2024 (FR/Vol. 89, No. 1, Tuesday, January 2, 2024/Document Number 2023-28844). The proposed for withdraw HPSAs will remain in that status until the lists are finalized this fall. States have the opportunity to provide additional information as part of the review of proposed for withdraw HPSAs prior to the lists being finalized this fall.

In addition, all Indian Tribes that meet the definition of such Tribes in the Indian Health Care Improvement Act of

1976, 25 U.S.C. 1603, are automatically designated as population groups with primary medical care and dental health professional shortages. Further, the Health Care Safety Net Amendments of 2002 provides eligibility for automatic facility HPSA designations for all federally qualified health centers (FQHCs) and rural health clinics that offer services regardless of ability to pay. Specifically, these entities include FQHCs funded under section 330 of the PHS Act, FQHC Look-Alikes, and Tribal and urban Indian clinics operating under the Indian Self-Determination and Education Act of 1975 (25 U.S.C. 450) or the Indian Health Care Improvement Act. Many, but not all, of these entities are included on this listing. Absence from this list does not exclude them from HPSA designation; facilities eligible for automatic designation are included in the database when they are identified.

Each list of designated HPSAs is arranged by state. Within each state, the list is presented by county. If only a portion (or portions) of a county is (are) designated, a county is part of a larger designated service area, or a population group residing in a county or a facility located in the county has been designated, the name of the service area, population group, or facility involved is listed under the county name. A county that has a whole county geographic or population group HPSA is indicated by the phrase "County" following the county name.

#### Development of the Designation and Withdrawal Lists

Requests for designation or withdrawal of a particular geographic area, population group, or facility as a HPSA are received continuously by BHW. Under a Cooperative Agreement between HRSA and the 54 state and territorial Primary Care Offices (PCOs), PCOs conduct needs assessments and submit applications to HRSA to designate areas as HPSAs. BHW refers requests that come from other sources to PCOs for review. In addition, interested parties, including Governors, state Primary Care Associations, and state professional associations, are notified of requests so that they may submit their comments and recommendations.

BHW reviews each recommendation for possible addition, continuation, revision, or withdrawal. Following review, BHW notifies the appropriate agency, individuals, and interested organizations of each designation of a HPSA, rejection of recommendation for HPSA designation, revision of a HPSA designation, and/or advance notice of pending withdrawals from the HPSA

list. Designations (or revisions of designations) are effective as of the date on the notification from BHW and are updated daily on the HRSA Data Warehouse website. The effective date of a withdrawal will be the next publication of a notice regarding the list of designated HPSAs in the **Federal Register**.

**Carole Johnson,**  
*Administrator.*

[FR Doc. 2024-14477 Filed 6-28-24; 8:45 am]

**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Request for Information (RFI): Inviting Comments and Suggestions on an ODS Strategic Plan 2025-2029: A Blueprint for a Coordinated Dietary Supplement Research Agenda at NIH

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

**ACTION:** Request for information.

**SUMMARY:** The National Institutes of Health (NIH), Office of Dietary Supplements (ODS) is continuing to use a structured planning process to develop its five-year strategic plans. After a new director joined ODS in July 2023 a new strategic plan for 2025-2029 was developed titled "A Blueprint for a Coordinated Dietary Supplement Research Agenda at NIH." ODS is committed to engaging its partners and other interested parties including representatives of the scientific community, industry, other federal agencies, policymakers, and the public in the strategic planning process by soliciting their comments on the draft ODS Strategic Plan for Fiscal Years (CY) 2025-2029.

**DATES:** The RFI is open for public comment for a period of 60 days. To ensure consideration, comments must be submitted by August 30, 2024.

**ADDRESSES:** All comments must be submitted electronically to *ODSplan@od.nih.gov*. You will receive an electronic confirmation acknowledging receipt of your response.

**FOR FURTHER INFORMATION CONTACT:** Barbara Cohen, Ph.D., at *ODSplan@od.nih.gov* or (301) 435-2920.

**SUPPLEMENTARY INFORMATION:** This notice is in accordance with the 21st Century Cures Act, wherein NIH institutes are required to regularly update their strategic plans. The purpose of the CY 2025-2029 ODS Strategic Plan (<https://ods.od.nih.gov/>)

*About/StrategicPlan.aspx*) is to communicate how ODS will advance its mission to coordinate cutting-edge dietary supplement research across NIH Institutes, Centers, and Offices (ICOs) and other federal agencies to foster knowledge and optimize health across the lifespan. The plan articulates ODS' priorities as follows:

- To coordinate and support dietary supplement research focused on biological, population, and product sciences.
- To develop NIH dietary supplement initiatives that incorporate rigorous dietary supplement research methods and make best use of available NIH funding mechanisms.
- To support ODS programs and develop and disseminate dietary supplement research findings and research resources to ODS audiences.

ODS has completed a draft of its Five-Year Strategic Plan for CY 2025–2029 (<https://ods.od.nih.gov/About/StrategicPlan.aspx>) and is interested in receiving feedback from all interested parties on the following:

- Any additional emerging public health issues or knowledge gaps that ODS can help address.
- Partnerships NIH should pursue, both inside and outside of government, to advance research on dietary supplements.

ODS encourages organizations to submit a single response reflective of the views of the organization as a whole.

Responses to this RFI are voluntary and may be submitted anonymously. Please do not include any personally identifiable information or any information that you do not wish to make public. Proprietary, classified, confidential, or sensitive information should not be included in your response. NIH will use the information submitted in response to this Request for Information (RFI) at its discretion. NIH reserves the right to use any submitted information on public websites, in reports, in summaries of the state of the science, in any possible resultant solicitation(s), grant(s), or cooperative agreement(s), or in the development of future funding opportunity announcements. This RFI is for informational and planning purposes only and is not a solicitation for applications or an obligation on the part of the Government to provide support for any ideas identified in response to it. Please note that the Government will not pay for the preparation of any information submitted or for the use of that information.

No basis for claims against the U.S. Government shall arise as a result of a response to this RFI or from the

Government's use of such information. Additionally, the Government cannot guarantee the confidentiality of the information provided.

Dated: June 20, 2024.

**Lawrence A. Tabak,**

*Principal Deputy Director, National Institutes of Health.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Center For Scientific Review; Notice of Closed Meetings

Pursuant to section 1009 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:* Center for Scientific Review Special Emphasis Panel; PAR–23–110: Biomedical Technology Optimization and Dissemination Center (BTOD).

*Date:* July 24, 2024.

*Time:* 9:00 a.m. to 7:30 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

*Meeting Format:* Virtual Meeting.

*Contact Person:* Jingwu Xie, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 594–8625, [jingwu.xie@nih.gov](mailto:jingwu.xie@nih.gov).

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Member Conflict: Topics in Disease Control and Applied Immunology.

*Date:* July 29, 2024.

*Time:* 12:00 p.m. to 6:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

*Meeting Format:* Virtual Meeting.

*Contact Person:* Emily Foley, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 402–3016, [emily.foley@nih.gov](mailto:emily.foley@nih.gov).

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Member Conflict: Cardiovascular and Vascular Sciences.

*Date:* July 30, 2024.

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

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

*Meeting Format:* Virtual Meeting.

*Contact Person:* Courtney Elaine Watkins, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 496–3093, [courtney.watkins2@nih.gov](mailto:courtney.watkins2@nih.gov).

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Member Conflict: Topics on HIV Virology, Immunopathogenesis, Drug and Vaccine Development.

*Date:* July 31, 2024.

*Time:* 10:00 a.m. to 7:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

*Meeting Format:* Virtual Meeting.

*Contact Person:* Kumud Singh, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 761–7830, [kumud.singh@nih.gov](mailto:kumud.singh@nih.gov).

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Fellowships: Physiology and Pathobiology of Cardiovascular and Respiratory Systems.

*Date:* July 31–August 1, 2024.

*Time:* 10:00 a.m. to 9:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

*Meeting Format:* Virtual Meeting.

*Contact Person:* Heidi B Friedman, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 907–H, Bethesda, MD 20892, (301) 379–5632, [hfriedman@csr.nih.gov](mailto:hfriedman@csr.nih.gov).

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Fellowships: HIV/AIDS Behavioral Panel.

*Date:* August 2, 2024.

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

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

*Meeting Format:* Virtual Meeting.

*Contact Person:* Mark P Rubert, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5218, MSC 7852, Bethesda, MD 20892, 301–806–6596, [rubertm@csr.nih.gov](mailto:rubertm@csr.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333,