

as a PHS employee. The FTCA application form for free clinics has been updated to improve clarity and thereby improve applicants' and deemed individuals' compliance with applicable requirements.

**Likely Respondents:** Respondents include free clinics seeking deemed PHS employee status on behalf of their sponsored individuals for purposes of

liability protections, including FTCA coverage.

**Burden Statement:** Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating, and verifying

information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

#### TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

| Form name                                   | Number of respondents | Number of responses per respondent | Total responses | Average burden per response (in hours) | Total burden hours |
|---|-----------------------|------------------------------------|-----------------|--|--------------------|
| FTCA Free Clinics Program Application ..... | 374                   | 3                                  | 1,122           | 2                                      | 2,244              |
| Total .....                                 | 374                   | .....                              | 1,122           | .....                                  | 2,244              |

HRSA specifically requests comments on (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.

**Maria G. Button,**

*Director, Executive Secretariat.*

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**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Meeting of the National Vaccine Advisory Committee

**AGENCY:** Office of Infectious Disease and HIV/AIDS Policy, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) will hold a virtual meeting. The meeting will be open to the public and public comment will be heard during the meeting.

**DATES:** The meeting will be held September 23-24, 2020. The confirmed meeting times and agenda will be posted on the NVAC website at <http://www.hhs.gov/nvpo/nvac/meetings/>

*index.html* as soon as they become available.

**ADDRESSES:** Instructions regarding attending this meeting will be posted online at: <http://www.hhs.gov/nvpo/nvac/meetings/index.html> at least one week prior to the meeting. Pre-registration is required for those who wish to attend the meeting or participate in public comment. Please register at <http://www.hhs.gov/nvpo/nvac/meetings/index.html>.

**FOR FURTHER INFORMATION CONTACT:** Ann Aikin, Acting Designated Federal Officer, at the Office of Infectious Disease and HIV/AIDS Policy, U.S. Department of Health and Human Services, Mary E. Switzer Building, Room L618, 330 C Street SW, Washington, DC 20024. Phone: (202) 695-9742; email [nvac@hhs.gov](mailto:nvac@hhs.gov).

**SUPPLEMENTARY INFORMATION:** Pursuant to Section 2101 of the Public Health Service Act (42 U.S.C. 300aa-1), the Secretary of HHS was mandated to establish the National Vaccine Program to achieve optimal prevention of human infectious diseases through immunization and to achieve optimal prevention against adverse reactions to vaccines. The NVAC was established to provide advice and make recommendations to the Director of the National Vaccine Program on matters related to the Program's responsibilities. The Assistant Secretary for Health serves as Director of the National Vaccine Program.

During the September 2020 NVAC meeting, sessions will focus on future coronavirus vaccines, the upcoming flu season, immunization equity, and routine vaccination. Please note that agenda items are subject to change, as priorities dictate. Information on the final meeting agenda will be posted

prior to the meeting on the NVAC website: <http://www.hhs.gov/nvpo/nvac/index.html>.

Members of the public will have the opportunity to provide comment at the NVAC meeting during the public comment period designated on the agenda. Public comments made during the meeting will be limited to three minutes per person to ensure time is allotted for all those wishing to speak. Individuals are also welcome to submit written comments. Written comments should not exceed three pages in length. Individuals submitting written comments should email their comments to [nvac@hhs.gov](mailto:nvac@hhs.gov) at least five business days prior to the meeting.

Dated: July 14, 2020.

**Ann Aikin,**

*Acting Designated Federal Official, Office of the Assistant Secretary for Health.*

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**BILLING CODE 4150-44-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Notice of Listing of Members of the National Institutes of Health's Senior Executive Service 2020 Performance Review Board (PRB)

**AGENCY:** National Institutes of Health, Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** The National Institutes of Health (NIH) announces the persons who will serve on the National Institutes of Health's Senior Executive Service 2020 Performance Review Board.

**FOR FURTHER INFORMATION CONTACT:** For further information about the NIH Performance Review Board, contact Mr. Kha Nguyen, Director, Division of Senior and Scientific Executive Management, Office of Human Resources, National Institutes of Health, Building 31, Room 1C31P, Bethesda, Maryland 20892, telephone 301.594.3022 (not a toll-free number), email [kha.nguyen@nih.gov](mailto:kha.nguyen@nih.gov).

**SUPPLEMENTARY INFORMATION:** This action is being taken in accordance with Title 5, U.S.C., Section 4314(c)(4), which requires that members of performance review boards be appointed in a manner to ensure consistency, stability, and objectivity in performance appraisals and requires that notice of the appointment of an individual to serve as a member be published in the **Federal Register**.

The following persons will serve on the NIH Performance Review Board, which oversees the evaluation of performance appraisals of NIH Senior Executive Service (SES) members:

Alfred Johnson, Chair  
Courtney Billet  
Maureen Gormley  
Michael Gottesman  
Michael Lauer  
Sally Lee  
Patrick Shirdon  
Lawrence Tabak  
Daniel Wheeland

Dated: July 30, 2020.

**Lawrence A. Tabak,**  
*Principal Deputy Director, National Institutes of Health.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### **Proposed Collection; 60-Day Comment Request; Identifying Experts in Prevention Science Methods To Include on NIH Review Panels, (Office of the Director, Office of Disease Prevention)**

**AGENCY:** National Institutes of Health, Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** In compliance with the requirements of the Paperwork Reduction Act of 1995 to provide opportunity for public comment on

proposed data collection projects, the National Institutes of Health (NIH), Office of Disease Prevention (ODP) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

**DATES:** Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

**FOR FURTHER INFORMATION CONTACT:** To obtain a copy of the data collection plans and instruments, submit comments in writing, or request more information on the proposed project, contact: Ms. Kat Schwartz, Communications Specialist, NIH Office of Disease Prevention, 6100 Executive Blvd., Room 2B03, Bethesda, MD 20892 or call (301) 827-6514 or email your request, including your address, to [prevention@mail.nih.gov](mailto:prevention@mail.nih.gov). Formal requests for additional plans and instruments must be requested in writing.

**SUPPLEMENTARY INFORMATION:** Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 requires: written comments and/or suggestions from the public and affected agencies are invited to address one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (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 those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

*Proposed Collection Title:* Identifying Experts in Prevention Science Methods to Include on NIH Review Panels, OMB# 0925-0728—EXTENSION, exp. 11/30/2020, Office of Disease Prevention (ODP), National Institutes of Health (NIH).

*Need and Use of Information Collection:* The Office of Disease Prevention (ODP) is the lead Office at the National Institutes of Health (NIH)

responsible for assessing, facilitating, and stimulating research in disease prevention and health promotion, and disseminating the results of this research to improve public health. Prevention is preferable to treatment, and research on disease prevention is an important part of the NIH's mission. The knowledge gained from this research leads to stronger clinical practice, health policy, and community health programs. The ODP collaborates with the NIH, other Department of Health and Human Services (DHHS) agencies, and other public and private partners to achieve the Office's mission and goals. One of ODP's priorities is to promote the use of the best available methods in prevention research and support the development of better study designs and research methods. One of our strategies is to help NIH Institutes, Centers, and Offices identify experts in prevention science methods to include on their peer review panels. This strengthens the panels and improves the quality of the prevention-related research supported by the NIH. To identify experts in prevention science methods, we have developed online software that allows us to collect scientists' names, contact information, and resumes, as well as to have those scientists identify their level of expertise in a variety of prevention science methods and content areas. The data are used to populate a web-based tool that NIH staff can use to identify scientists with prevention-related research expertise in specific research methods and study designs for invitation to serve as a reviewer on an NIH study section. This system is also shared with other DHHS agency's review staff, to use in the same way. This OMB extension is for the continued collection of data using the existing procedures, format, and online software platform for the Prevention Research Expertise Survey (PRES). The purpose of the survey is to maintain a current directory of experts in prevention science research methods, study designs, and scientific content topics, as well as the geographic region, setting, and income category of the region/country in which investigator's/respondent's research is performed.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 417.