

approved under OMB control number 0910–0338. The collections of information pertaining to submission of a biologics license application under section 351(k) of the Public Health Service Act (42 U.S.C. 262(k)) have been approved under OMB control number 0910–0718. The collections of information in 21 CFR part 50 for protection of human subjects have been approved under OMB control number 0910–0130. The collections of information pertaining to the Q-Submission program for medical devices have been approved under OMB control number 0910–0756.

Dated: July 15, 2024.

Lauren K. Roth,

Associate Commissioner for Policy.

[FR Doc. 2024–15988 Filed 7–19–24; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket Nos. FDA–2023–E–3130 and FDA–2023–E–3135]

Determination of Regulatory Review Period for Purposes of Patent Extension; XENPOZYME; Correction

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; correction.

SUMMARY: The Food and Drug Administration (FDA or the Agency) is correcting a notice that appeared in the *Federal Register* of July 2, 2024. The document announced the determination of the regulatory review period for XENPOZYME (olipudase alfa-rpcp) for purposes of patent extension. The document was published with an incorrect patent number. This notice corrects the patent number.

FOR FURTHER INFORMATION CONTACT: Beverly Friedman, Office of Regulatory Policy, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 51, Rm. 6250, Silver Spring, MD 20993, 301–796–3600.

SUPPLEMENTARY INFORMATION: In the *Federal Register* of Tuesday, July 2, 2024 (89 FR 54829), appearing on pg. 54830, in the first paragraph of the third column, under Section I. Background of the **SUPPLEMENTARY INFORMATION** section, the patent numbers are corrected to read “U.S. Patent Nos. 8,349,319 and 8,658,162.”

Dated: July 16, 2024.

Lauren K. Roth,

Associate Commissioner for Policy.

[FR Doc. 2024–15998 Filed 7–19–24; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Charter Renewal/for the Advisory Commission on Childhood Vaccines

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act (FACA), the Department of Health and Human Services is hereby giving notice that the charter for the Advisory Commission on Childhood Vaccines (ACCV) has been renewed. The effective date of the renewed charter is July 21, 2024.

FOR FURTHER INFORMATION CONTACT: Pita Gomez, Principal Staff Liaison, Division of Injury Compensation Programs, HRSA, 5600 Fishers Lane, 8W–25A, Rockville, MD 20857; 800–338–2382; or ACCV@hrsa.gov.

SUPPLEMENTARY INFORMATION: ACCV provides advice and recommendations to the Secretary of Health and Human Services (Secretary) on policy, program development, and other matters of significance concerning the activities under 2119 of the Public Health Service Act (the Act) (42 U.S.C. 300aa–19), as enacted by Public Law 99–660, and as subsequently amended. ACCV advises the Secretary on issues related to the implementation of the National Vaccine Injury Compensation Program. Other activities of ACCV include: recommending changes in the Vaccine Injury Table at its own initiative or as the result of the filing of a petition; advising the Secretary in implementing section 2127 of the Act regarding the need for childhood vaccination products that result in fewer or no significant adverse reactions; surveying federal, state, and local programs and activities related to gathering information on injuries associated with the administration of childhood vaccines, including the adverse reaction reporting requirements of section 2125(b) of the Act; advising the Secretary on the methods of obtaining, compiling, publishing, and using credible data related to the frequency and severity of adverse reactions

associated with childhood vaccines; consulting on the development or revision of Vaccine Information Statements; and recommending to the Director of the National Vaccine Program research related to vaccine injuries which should be conducted to carry out the National Vaccine Injury Compensation Program.

The recharter for ACCV was approved on July 8, 2024. Renewal of the ACCV charter gives authorization for the Commission to operate until July 21, 2026.

A copy of the ACCV charter is available on the ACCV website at <https://www.hrsa.gov/advisory-committees/vaccines/index.html>. A copy of the charter also can be obtained by accessing the FACA database that is maintained by the Committee Management Secretariat under the General Services Administration. The website address for the FACA database is <http://www.facadatabase.gov/>.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2024–16025 Filed 7–19–24; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS–0990–new]

Agency Information Collection Request; 60-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 September 20, 2024.

ADDRESSES: Submit your comments to Sherrette.Funn@hhs.gov or by calling (202) 795–7714.

FOR FURTHER INFORMATION CONTACT: When submitting comments or requesting information, please include the document identifier 0990–New–60D and project title for reference, to Sherrette A. Funn, email: Sherrette.Funn@hhs.gov, or call (202) 795–7714 the Reports Clearance Officer.

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: Evaluation of the Certified Community Behavioral Health Clinic Demonstration in Accordance with the Bipartisan Safer Communities Act.

Type of Collection: New.

OMB No.: 0990–XXXX.

Abstract: The Office of the Assistant Secretary for Planning and Evaluation (ASPE) at the U.S. Department of Health and Human Services (HHS) is requesting Office of Management and Budget (OMB) approval for new data collection activities to support its evaluation of the Certified Community Behavioral Health Clinic (CCBHC) demonstration program in accordance

with the Bipartisan Safer Communities Act.

Section 223 of the Protecting Access to Medicare Act (Pub. L. 113–93; PAMA) authorized the Certified Community Behavioral Health Clinic (CCBHC) demonstration to allow states to test a different strategy for delivering and reimbursing a comprehensive array of services provided in community behavioral health clinics. The demonstration aims to improve the availability, quality, and outcomes of outpatient services provided in these clinics by establishing a standard definition for CCBHCs and develops a new Medicaid prospective payment system (PPS) in each state that accounts for the total cost of providing nine types of services to all people who seek care. The PPS in each state is designed to provide CCBHCs with the financial support and stability necessary to deliver these required services. The demonstration also aims to incentivize quality through quality bonus payments to clinics and requires CCBHCs to report quality measures and costs. The demonstration was originally authorized for two years.

Need and Proposed Use of the Information: PAMA mandates that HHS submit reports to Congress about the Section 223 demonstration that assess (1) access to community-based mental health services under Medicaid in the area or areas of a state targeted by a demonstration program as compared to other areas of the state, (2) the quality and scope of services provided by certified community behavioral health clinics as compared to community-based mental health services provided in states not participating in a demonstration program and in areas of a demonstration state that are not participating in the demonstration, and (3) the impact of the demonstration on the federal and state costs of a full range of mental health services (including inpatient, emergency, and ambulatory services). The ability of ASPE to provide this information to Congress requires a rigorously designed and independent evaluation of the CCBHC demonstration.

The total annual burden hours estimated for this information collection request are summarized in the table below.

ANNUALIZED BURDEN HOUR TABLE

Forms (if necessary)	Respondents (if necessary)	Number of respondents	Number of responses per respondent	Average burden per response	Total burden hours
Interviews	State officials	75	1	1.5	113
Interviews	CCBHC staff	20	1	1.5	30
Survey	CCBHC staff	231	1	4	924
Focus groups	CCBHC clients	8	1	1.5	12
Total	334	1	1,079

Sherrette A. Funn,

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

[FR Doc. 2024–16005 Filed 7–19–24; 8:45 am]

BILLING CODE 4151–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS 4040–0018]

Agency Information Collection Request; 60-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 September 20, 2024.

ADDRESSES: Submit your comments to Narmada.Dacherla@hhs.gov

FOR FURTHER INFORMATION CONTACT:

When submitting comments or requesting information, please include the document identifier 4040–0018–60D and project title for reference to Narmada Dacherla, the Reports Clearance Officer, at Narmada.Dacherla@hhs.gov, or call (202) 430–1710.

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: SF–428 Tangible Personal Property Report.

Type of Collection: Extension.

OMB No.: 4040–0018.

Abstract: Reporting on the status of Federally-owned property, including disposition, is necessitated in 2 CFR part 215, the “Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations”, and the “Uniform Administrative Requirements for Grants and Agreements with State and Local Governments”, Additionally, Public Law 106–107, the Federal Financial Assistance Management Improvement Act requires that agencies “simplify Federal financial assistance application