SUPPLEMENTARY INFORMATION:

Intended Recipient of Award: University of Nebraska Medical Center/ Board of Regents of the University of Nebraska.

Amount of Non-Competitive Award: \$700,000.

Period of Supplemental Funding: 05/01/2019–04/30/2020.

CFDA Number: 93.110.

Authority: Social Security Act, Title V, § 501(a)(2) (42 U.S.C. 701(a)(2)).

Justification: The purpose of the Partnership for Urban MCH Leadership Community Cooperative Agreement program is to support urban MCH leaders as they work to improve public health programs and the delivery of MCH services, and to assure optimal alignment with the Title V MCH Services Block Grant program. This program focuses on the following three goals:

1. Assisting urban MCH leaders in achieving collective impact to respond to the MCH challenges faced by urban communities by performing an environmental scan, planning and convening a series of three learning collaborative for urban MCH leaders, and developing and disseminating a collective impact toolkit and compendium;

- 2. Strengthening local and State MCH analytic capacity through epidemiology training opportunities; and
- 3. Serving as an effective voice in communicating urban MCH issues and in developing strong partnerships and collaborations with State Title V programs and other national partners to advance urban MCH priorities.

The purpose of the supplement from HRSA is to give the University of Nebraska Medical Center/Board of Regents of the University of Nebraska for the Partnership for Urban MCH Leadership Community Cooperative Agreement, the opportunity to collect impact data for an additional year in support of goal one of this project. An additional year will allow the recipient to mature the current projects, continue collecting data from teams, and begin to assess the impact that this collective impact work has had on urban outcomes, as well as any impact at the State Title V National Performance Measure level. The recipient also will have the opportunity for more extensive data analysis to assess effective strategies that impact urban outcomes, and to identify lessons learned for potential future collective impact initiatives. With an extra year, the recipient will be able to assess

penetration of collective impact into broader communities, and plan for providing technical assistance regarding replication of these learning collaborative in new urban areas.

This cooperative agreement also supports epidemiology training (Goal 2) and enables the award recipient to serve as a voice for advancing urban MCH priorities (Goal 3), which are ongoing needs. This supplement will maintain HRSA's investment in strengthening local and State MCH analytic capacity through epidemiology training opportunities, as provided by Goal 2, to assure optimal capacity to respond to MCH emerging and priority issues at the state and local level, such as opioids and neonatal abstinence syndrome. In addition, assuring that a national partner is continuing to communicate urban MCH issues, as addressed by Goal 3, is a foundational need of the stateurban MCH partnership, and is essential for optimizing Title V MCH Block Grant outcomes.

FOR FURTHER INFORMATION CONTACT: Kate Marcell, Division of State and Community Health, Maternal and Child Health Bureau, HRSA, 5600 Fishers Lane, Room 18N104D, Rockville, MD 20857, Phone: 301–443–4656, Email: KMarcell@hrsa.gov.

Grantee/organization name	Grant No.	State	FY 2018 Authorized funding level	FY 2019 Proposed funding level
University of Nebraska Medical Center/Board of Regents of the University of Nebraska.	U01MC17261	NE	\$700,000	Up to \$700,000.

Dated: April 26, 2019.

George Sigounas,

Administrator.

[FR Doc. 2019–08876 Filed 5–1–19; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Biodefense Science Board: In-Person Meeting

AGENCY: Office of the Assistant Secretary for Preparedness and Response (ASPR), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The HHS Office of the Secretary is hosting the National Biodefense Science Board (NBSB) at an In-Person Meeting in Washington, DC, on June 10–11, 2019. The purpose of the NBSB In-Person Meeting is to gather expert advice provided by NBSB and

guidance to the Secretary on scientific, technical, and other matters of special interest to HHS regarding current and future chemical, biological, nuclear, and radiological agents, whether naturally occurring, accidental, or deliberate.

DATES: The NBSB In-Person Meeting is being held on June 10–11, 2019, from 9:00 a.m. to 5:00 p.m. Eastern Daylight Time (EDT).

ADDRESSES: Please visit the NBSB website (https://www.phe.gov/nbsb) for all additional information regarding NBSB or the In-Person Meeting.

FOR FURTHER INFORMATION CONTACT: CDR Christopher Perdue, MD, MPH, Designated Federal Official, NBSB, ASPR, HHS; 202–401–5837; christopher.perdue@hhs.gov.

SUPPLEMENTARY INFORMATION: Pursuant to section 319M of the Public Health Service Act, HHS has established the NBSB to provide expert advice and guidance to the Secretary on scientific, technical, and other matters of special

interest to HHS regarding current and future chemical, biological, nuclear, and radiological agents, whether naturally occurring, accidental, or deliberate.

Availability of Materials: Participants are encouraged to visit the NBSB website (http://www.phe.gov/nbsb) for information about the meeting, including the agenda.

Procedures for Providing Public Input: Members of the public are encouraged to go to the NBSB website (http://www.phe.gov/nbsb) for instructions about the submission of written comments.

Dated: April 25, 2019.

Robert P. Kadlec,

Assistant Secretary for Preparedness and Response.

[FR Doc. 2019–08943 Filed 5–1–19; 8:45 am]

BILLING CODE 4150-37-P