Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to the desk officer for HRSA, either by email to OIRA_submission@omb.eop.gov or by fax to 202–395–5806. Please direct all correspondence to the “attention of the desk officer for HRSA.”

Dated: August 6, 2012.

Wendy Ponton,
Director, Office of Management.

[FR Doc. 2012–19653 Filed 8–9–12; 8:45 am]
BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Secretary’s Advisory Committee on Heritable Disorders in Newborns and Children; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463, codified at 5 U.S.C. App. 2), notice is hereby given of the following meeting:

Name: Secretary’s Advisory Committee on Heritable Disorders in Newborns and Children.

Dates and Times: September 13, 2012, 8:30 a.m. to 6:00 p.m., September 14, 2012, 8:30 a.m. to 2:30 p.m.

Place: Hubert H. Humphrey Building, 200 Independence Avenue SW., Room 800, Washington, DC 20201.

Status: The meeting is open to the public, but seating will be limited by the space available. Security at the Humphrey building has requested that the public register for the meeting by September 11, 2012. See http://www.hhs.gov/about/hhmap.html.

Purpose: The Secretary’s Advisory Committee on Heritable Disorders in Newborns and Children (SACHDNC), as authorized by Public Law 106–310, which added section 1111 of the Public Health Service Act, codified at 42 U.S.C. 300b–10, was established by Congress to advise the Secretary of the Department of Health and Human Services with the development of newborn screening activities, technologies, policies, guidelines, and programs for effectively reducing morbidity and mortality in newborns and children having, or at risk for, heritable disorders. The SACHDNC’s recommendations regarding additional conditions/inherited disorders for screening that have been adopted by the Secretary are included in the Recommended Uniform Screening Panel (RUSP) that constitutes part of the comprehensive guidelines supported by the Health Resources and Services Administration. Pursuant to section 2713 of the Public Health Service Act, codified at 42 U.S.C. 300gg–13, non-grandfathered health plans are required to cover screenings included in the comprehensive guidelines without charging a co-payment, co-insurance, or deductible for plan years (i.e., policy years) beginning on or after the date that is one year from the Secretary’s adoption of the screening. The SACHDNC also provides advice and recommendations concerning grants and projects authorized under section 1109 of the Public Health Service Act (42 U.S.C. 300b–8).

Agenda: The meeting will include: (1) Updates on newborn screening case definitions and newborn screening quality indicators; (2) updates from the Nomination and Prioritization Workgroup and the Condition Review Workgroup regarding the final condition review matrix; Adrenoleukodystrophy, and Pompe Disease; (3) presentations on the National Institutes for Health’s Ethical, Legal, and Social Implications Research Program, HRSA-funded prenatal family history project, and the Institute of Medicine meeting summary on assessing the genetics of genomic medicine; (4) reports on the continued work of the Advisory Committee’s subcommittees on Laboratory Standards and Procedures, Follow-up and Treatment, and Education and Training; (5) workgroup reports on the second screening study, and carrier screening; and (6) CDC’s Morbidity and Mortality Weekly Report on laboratory practices for genetic testing and newborn screening. Tentatively, the SACHDNC is expected to review and/or vote on the following items, none of which currently involve votes to add conditions to the RUSP: (1) Adrenoleukodystrophy—Nomination and Prioritization Report; (2) Condition Review Matrix; (3) Second Screen Study from CDC; and (4) the Morbidity and Mortality Weekly Report on Good Laboratory Practices for Biochemical Genetic Testing and Newborn Screening for Inherited Metabolic Disorder. Proposed agenda items are subject to change as priorities dictate. The agenda, Committee Roster, Chart, presentations, and meeting materials are located at the homepage of the Advisory Committee’s Web site at http://www.hrsa.gov/advisorycommittees/mchbadvisory/heritabledisorders.

Public Comments: Members of the public can submit written comments and/or present oral comments during the public comment periods of the meeting. All comments, whether oral or written, are part of the official Committee record and will be available for public inspection and copying. Written comments should be emailed or received by Thursday, September 6, 2012 to Debi Sarkar, Maternal and Child Health Bureau, Health Resources and Services Administration, Parklawn Building, 5600 Fishers Lane, Room 18A–19, Rockville, Maryland 20857; email: dsarkar@hrsa.gov. Comments may also be faxed to 301–480–1312. Those individuals who want to make oral comments are required to notify Debi Sarkar via email or regular mail by 5 p.m. Eastern Daylight Time, Thursday, September 6, 2012. Notification is required in order to present oral comments. Oral comments will be heard on September 13, 2012. All written and oral comments should contain the name, address, telephone number, professional or business affiliation of the author, and topic of comment. Presentations of oral comments may be limited depending on the number of presenters. Individuals who are associated with groups having similar interests are requested to combine their comments and present them through a single representative. No audiovisual presentations are permitted, to ensure that all individuals who provided notification to make oral comments have an opportunity to present their comments.

Contact Person: Anyone interested in obtaining other relevant information or attendance that will require special accommodations should contact Debi Sarkar, Maternal and Child Health Bureau, Health Resources and Services Administration, Room 18A–19, Parklawn Building, 5600 Fishers Lane, Room 18A–19, Rockville, Maryland 20857; telephone: 301–443–1080; email: dsarkar@hrsa.gov. More information on the Advisory Committee is available at http://www.hrsa.gov/advisorycommittees/mchbadvisory/heritabledisorders.

Dated: August 6, 2012.

Reva Harris,
Acting Director, Division of Policy and Information Coordination.

[FR Doc. 2012–19654 Filed 8–9–12; 8:45 am]
BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of General Medical Sciences; Notice of Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is
would constitute a clearly unwarranted invasion of personal privacy.

**Name of Committee:** National Advisory General Medical Sciences Council.

**Date:** September 6–7, 2012.

**Closed:** September 6, 2012, 8:30 a.m. to 5 p.m.

**Agenda:** To review and evaluate grant applications.

**Place:** National Institutes of Health, Natcher Building, Conference Rooms E1 & E2, 45 Center Drive, Bethesda, MD 20892.

**Open:** September 7, 2012, 8:30 a.m. to adjournment.

**Contact Person:** Ann A. Hagan, Ph.D., Associate Director for Extramural Activities, NIGMS, NIH, DHHS, 45 Center Drive, Room 2AN24H, MSC 6200, Bethesda, MD 20892, (301) 594–4499, hagan@nigms.nih.gov.

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number, and when applicable, the business or professional affiliation of the interested person.

In the interest of security, NIH has instituted stringent procedures for entrance onto the NIH campus. All visitor vehicles, including taxicabs, hotel, and airport shuttles will be inspected before being allowed on campus. Visitors will be asked to show one form of identification (for example, a government-issued photo ID, driver’s license, or passport) and to state the purpose of their visit. Information is also available on the Institute’s/Center’s home page: http://www.nigms.nih.gov/About/Council/ where an agenda and any additional information for the meeting will be posted when available.

(Department of Health and Human Services)

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**Office of The Director, National Institutes of Health; Notice of Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of a meeting of the Council of Directors.

The meeting will be open 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:** Council of Councils.

**Date:** September 5, 2012.

**Open:** 8:30 a.m. to 1:35 p.m.

**Agenda:** DPCPSI and NIH Updates, Comparative Medicine Research Training Opportunities and Update on Working Group on Chimpanzees in NIH-Supported Research.

**Place:** National Institutes of Health, Building 31, 31 Center Drive, Conference Room 6, Bethesda, MD 20892.

**Closed:** 1:35 p.m. to 3:15 p.m.

**Agenda:** Research Projects Involving Chimpanzees and Second-Level Review of Grant Applications.

**Place:** National Institutes of Health, Building 31, 31 Center Drive, Conference Room 6, Bethesda, MD 20892.

**Open:** 3:15 p.m. to 5 p.m.

**Agenda:** Updates on Tobacco Control Regulatory Science & Portfolio Analysis and Business of the Council.

**Place:** National Institutes of Health, Building 31, 31 Center Drive, Conference Room 6, Bethesda, MD 20892.

**Contact Person:** Robin Kawazoe, Executive Secretary, Division of Program Coordination, Planning, and Strategic Initiatives, Office of The Director, NIH, Building 1, Room 260B, Bethesda, MD 20892, KAWAZOER@MAIL.NIH.GOV.

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

Information is also available on the Council of Council’s home page at http://dpcpsi.nih.gov/council/. Where an agenda and proposals to be discussed will be posted before the meeting date.

In the interest of security, NIH has instituted stringent procedures for entrance onto the NIH campus. All visitor vehicles, including taxicabs, hotel, and airport shuttles will be inspected before being allowed on campus. Visitors will be asked to show one form of identification (for example, a government-issued photo ID, driver’s license, or passport) and to state the purpose of their visit.

(Catalogue of Federal Domestic Assistance Program Nos. 93.14, Intramural Research Training Award; 93.22, Clinical Research Loan Repayment Program for Individuals from Disadvantaged Backgrounds; 93.232, Loan Repayment Program for Research Generally; 93.39, Academic Research Enhancement Award; 93.936, NIH Acquired Immunodeficiency Syndrome Research Loan Repayment Program; 93.187, Undergraduate Scholarship Program for Individuals from Disadvantaged Backgrounds, National Institutes of Health, HHS)


Jennifer S. Spaeth,
Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2012–19712 Filed 8–9–12; 8:45 am]

BILLING CODE 4140–01–P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Heart, Lung, and Blood Institute; Notice of Closed Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in section 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.

(Department of Health and Human Services)