services proposed in the RVCP grant application, particularly in the location it plans to serve and/or to veterans and their families.

(2) Need for pilot project (maximum 10 points). Applicant demonstrates the need for the pilot project among veterans and their families in the proposed project location, and provides evidence of the applicant’s understanding of the unique needs of veterans and their families in the location to be served.

(3) Pilot project concept, innovation, and ability to meet VA’s objectives (maximum 40 points). Application shows appropriate concept, size, and scope of the project; provides realistic estimates of time, staffing, and material needs to implement the project; and details the project’s ability to enhance the overall services provided, while presenting realistic plans to reduce duplication of benefits and services already in place. Application must describe a comprehensive and well-developed plan to meet one or more of the permissible uses set out in §64.6.

(4) Pilot project evaluation and monitoring (maximum 10 points). Self-evaluation and monitoring strategy provided in application is reasonable and expected to meet requirements of §64.10(b)(5).

(5) Organizational finances (maximum 10 points). Applicant provides documentation that it is financially stable, has not defaulted on financial obligations, has adequate financial and operational controls in place to assure the proper use of RVCP grants, and presents a plan for using RVCP grants that is cost effective and efficient.

(6) Pilot project location (maximum 20 points). Applicant documents how the proposed project location meets the definition of rural or underserved communities in this part.

(b) Selection of grantees. All complete applications will be scored using the criteria in paragraph (a) and ranked in order from highest to lowest total score. VA will rank all applications that receive at least the minimum number of points indicated in the NOFA. VA will award one RVCP grant to the highest scoring application. VA will award RVCP grants to each successive application, ranked by total score, provided the applicant has not been awarded an RVCP grant for a higher scoring application and the proposed project is not in the same project location as any previously awarded RVCP grant.

§64.14 RVCP grant agreement.

(a) VA will draft an RVCP grant agreement to be executed by VA and the grantee.

(b) The RVCP grant agreement will provide that the grantee agrees to:

1. Operate the project in accordance with this part and the terms of the agreement;
2. Comply with such other terms and conditions, including recordkeeping and reporting requirements for project monitoring and evaluation purposes, as VA may establish for purposes of carrying out the RVCP in an effective and efficient manner and as described in the NOFA; and
3. Provide any necessary additional information that is requested by VA in the manner and timeframe specified by VA.

§64.15 Evaluation and monitoring.

(a) Quarterly reports. All grantees must submit to VA quarterly reports based on the Federal fiscal year, which include the following information:

1. Record of time and resources expended in outreach activities, and the methods used;
2. The number of participants served, including demographics of this population;
3. Types of assistance provided;
4. A full accounting of RVCP grant funds received from VA and used or unused during the quarter; and
5. Results of routine monitoring and any project variations.

(b) Submission of reports. Reports must be submitted to VA no later than 15 calendar days after the close of each Federal fiscal quarter.

(c) Additional reports. VA may request additional reports to allow VA to fully assess project accountability and effectiveness.

§64.16 Recovery of funds.

(a) Recovery of funds. VA may terminate a grant agreement with any RVCP grantee that does not comply with the terms of the RVCP agreement. VA may recover from the grantee any funds that are not used in accordance with a RVCP agreement. If VA decides to recover funds, VA will issue to the grantee a notice of intent to recover RVCP grant funds, and the grantee will then have 30 days beginning from the date of the notice to submit documentation demonstrating why the RVCP grant funds should not be recovered. If the RVCP grantee does not respond or if the grantee responds but VA determines the documentation is insufficient to establish compliance, VA will make a final determination as to whether action to recover the RVCP grant funds will be taken.

(b) Prohibition of further grants. When VA determines action will be taken to recover grant funds from a grantee, the grantee will be prohibited from receiving any further RVCP grant funds for the duration of the pilot program.

FOR FURTHER INFORMATION CONTACT: For questions concerning this notice: Ashley A. Marrone, JD, Centers for Disease Control and Prevention (CDC) within the Department of Health and Human Services (HHS) is publishing this document to confirm the effective date of the Direct Final Rule (DFR), published on December 26, 2012 (77 FR 75880).


DEPARTMENT OF HEALTH AND HUMAN SERVICES

42 CFR Part 70

[Docket No. CDC–2012–0016]

RIN 0920–AA22

Control of Communicable Diseases: Interstate; Scope and Definitions

AGENCY: Centers for Disease Control and Prevention (HHS/CDC), Department of Health and Human Services (HHS).

ACTION: Confirmation of effective date of Direct Final Rule.

SUMMARY: The Centers for Disease Control and Prevention (CDC) within the Department of Health and Human Services (HHS) is publishing this document to confirm the effective date of the Direct Final Rule (DFR), published on December 26, 2012 (77 FR 75880).


FOR FURTHER INFORMATION CONTACT: For questions concerning this notice: Ashley A. Marrone, JD, Centers for Disease...
Control and Prevention, 1600 Clifton Road NE., Mailstop E–03, Atlanta, Georgia 30333; telephone 404–498–1600.

SUPPLEMENTARY INFORMATION: On December 26, 2012, HHS/CDC published a Direct Final Rule (DFR) amending 42 CFR part 70 to update the Scope and Definitions for that part (77 FR 75880). On the same date, HHS/CDC simultaneously published a companion Notice of Proposed Rulemaking (NPRM) that proposed identical updates to the Scope and Definitions (77 FR 75936). In both documents, HHS/CDC indicated that if we did not receive any significant adverse comments on the direct final rule by January 25, 2013, we would publish a document in the Federal Register withdrawing the NPRM and confirming the effective date of the direct final rule within 30 days after the end of the comment period. HHS/CDC received one public comment that was not a significant, adverse comment, but rather, was in support of the companion NPRM. Because HHS/CDC did not receive any significant adverse comments to the NPRM within the specified comment period, we have published a document to withdraw the NPRM in this issue of the Federal Register. Therefore, consistent with the Direct Final Rule, the amendments to 42 CFR part 70 become effective on February 25, 2013 (77 FR 75880).


Kathleen Sebelius, Secretary, Department of Health and Human Services.