

30 days after the close of every calendar quarter to the Division of Payment Management, HHS at: <http://www.dpm.psc.gov>. It is recommended that you also send a copy of your FFR (SF-425) report to your Grants Management Specialist. Failure to submit timely reports may cause a disruption in timely payments to your organization.

Grantees are responsible and accountable for accurate information being reported on all required reports: The Progress Reports and Federal Financial Report.

#### C. Federal Subaward Reporting System (FSRS)

This award may be subject to the Transparency Act subaward and executive compensation reporting requirements of 2 CFR part 170.

The Transparency Act requires the OMB to establish a single searchable database, accessible to the public, with information on financial assistance awards made by Federal agencies. The Transparency Act also includes a requirement for recipients of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards.

IHS has implemented a Term of Award into all IHS Standard Terms and Conditions, NoAs and funding announcements regarding the FSRS reporting requirement. This IHS Term of Award is applicable to all IHS grant and cooperative agreements issued on or after October 1, 2010, with a \$25,000 subaward obligation dollar threshold met for any specific reporting period. Additionally, all new (discretionary) IHS awards where the project period is made up of more than one budget period and where: (1) The project period start date was October 1, 2010 or after and (2) the primary awardee will have a \$25,000 subaward obligation dollar threshold during any specific reporting period will be required to address the FSRS reporting. For the full IHS award term implementing this requirement and additional award applicability information, visit the Grants Management Grants Policy Web site at: [https://www.ihs.gov/dgm/index.cfm?module=dsp\\_dgm\\_policy\\_topics](https://www.ihs.gov/dgm/index.cfm?module=dsp_dgm_policy_topics).

Telecommunication for the hearing impaired is available at: TTY (301) 443-6394.

#### VII. Agency Contacts

1. Questions on the programmatic issues may be directed to: Ms. Patricia Spotted Horse, Program Analyst, Office of Direct Service and Contracting Tribes,

Indian Health Service, 801 Thompson Avenue, Suite 220, Rockville, MD 20852-1609, Telephone: (301) 443-1104, Fax: (301) 443-4666, Email: [Patricia.SpottedHorse@ihs.gov](mailto:Patricia.SpottedHorse@ihs.gov).

2. Questions on grants management and fiscal matters may be directed to: Mr. Pallop Chareonvootitam, Grants Management Specialist, Division of Grants Management, Office of Management Services, Indian Health Service, 801 Thompson Avenue, TMP Suite 360, Rockville, MD 20852-1609, Telephone: (301) 443-5204, Fax: (301) 443-9602, Email:

[Pallop.Chareonvootitam@ihs.gov](mailto:Pallop.Chareonvootitam@ihs.gov).

3. Questions on systems matters may be directed to: Mr. Paul Gettys, Grant Systems Coordinator, 801 Thompson Avenue, TMP Suite 360, Rockville, MD 20852, Phone: 301-443-2114; or the DGM main line 301-443-5204, Fax: 301-443-9602, E-Mail: [Paul.Gettys@ihs.gov](mailto:Paul.Gettys@ihs.gov).

#### VIII. Other Information

The Public Health Service strongly encourages all cooperative agreement and contract recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of the facility) in which regular or routine education, library, day care, health care, or early childhood development services are provided to children. This is consistent with the HHS mission to protect and advance the physical and mental health of the American people.

Dated: April 16, 2013.

**Yvette Roubideaux,**

*Director, Indian Health Service.*

[FR Doc. 2013-09674 Filed 4-23-13; 8:45 am]

**BILLING CODE 4165-16-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Submission for OMB Review; 30-Day Comment Request: Women's Health Initiative Observational Study

**SUMMARY:** Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Heart, Lung, and Blood Institute (NHLBI), 0020the National Institutes of Health, has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the **Federal**

**Register** on February 5, 2013 on pages 8152-8153 and allowed 60-days for public comment. One comment was received and an appropriate response was made. The purpose of this notice is to allow an additional 30 days for public comment. The NHLBI, National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

**Direct Comments to OMB:** Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, [OIRA\\_submission@omb.eop.gov](mailto:OIRA_submission@omb.eop.gov) or by fax to 202-395-6974, Attention: NIH Desk Officer.

**Comment Due Date:** Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

**FOR FURTHER INFORMATION CONTACT:** To obtain a copy of the data collection plans and instruments, or request more information on the proposed project contact: Shari Eason Ludlam, Project Officer, Women's Health Initiative Program Office, 6701 Rockledge Drive, 2 Rockledge Centre, Room 9188, MSC 7913, Bethesda, MD 20892-7936, or call (301) 402-2900 or Email your request, including your address to: [ludlams@mail.nih.gov](mailto:ludlams@mail.nih.gov). Formal requests for additional plans and instruments must be requested in writing.

**Proposed Collection:** Women's Health Initiative Observational Study. Revision—OMB No. 0925-0414, Expiration Date: 07/31/2013. National Heart, Lung, and Blood Institute (NHLBI), National Institutes of Health (NIH).

**Need and Use of Information Collection:** This study will be used by the NIH to evaluate risk factors for chronic disease among older women by developing and following a large cohort of postmenopausal women and relating subsequent disease development to baseline assessments of historical, physical, psychosocial, and physiologic characteristics. In addition, the observational study will complement the clinical trial (which has received clinical exemption) and provide additional information on the common causes of frailty, disability and death for postmenopausal women, namely, coronary heart disease, breast and

colorectal cancer, and osteoporotic fractures. Continuation of follow-up years for ascertainment of medical history update forms will provide

essential data for outcomes assessment for this population of aging women. OMB approval is requested for 3 years. There are no costs to respondents

other than their time, which is estimated at \$308,218 for all respondents. The total estimated annualized burden hours are 14,022.

Type of respondent*	Number of respondents	Number of responses per response	Average burden per response (in hours)	Total annual burden hours
OS Participants .....	41,495	1	20/60	13,929
Next of kin .....	936	1	.6/60	92
Physician/Office Staff .....	17	1	5/60	1

\* Annual burden is placed on health care providers and respondent relatives/informants through requests for information which will help in the compilation of the number and nature of new fatal and nonfatal events.

Dated: April 9, 2013.

**Michael S. Lauer,**

*Director, Division of Cardiovascular Sciences, NHLBI, National Institutes of Health.*

Dated: April 11, 2013.

**Lynn W. Susulske,**

*Government Information Specialist, Freedom of Information and Privacy Act Branch, NHLBI, National Institutes of Health.*

[FR Doc. 2013-09730 Filed 4-23-13; 8:45 am]

**BILLING CODE 4140-01-P**

(Catalogue of Federal Domestic Assistance Program No. 93.879, Medical Library Assistance, National Institutes of Health, HHS)

Dated: April 18, 2013.

**Michelle Trout,**

*Program Analyst, Office of the Federal Advisory Committee Policy.*

[FR Doc. 2013-09594 Filed 4-23-13; 8:45 am]

**BILLING CODE 4140-01-P**

Assistance, National Institutes of Health, HHS)

Dated: April 18, 2013.

**Michelle Trout,**

*Program Analyst, Office of the Federal Advisory Committee Policy.*

[FR Doc. 2013-09593 Filed 4-23-13; 8:45 am]

**BILLING CODE 4140-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Library of Medicine; 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 sections 552b(c)(4) and 552b(c)(6), Title 5 USC, as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable materials, 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:* National Library of Medicine Special Emphasis Panel; Scholarly Works G13.

*Date:* July 11, 2013.

*Time:* 9:00 a.m. to 6:30 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Library of Medicine, 6705 Rockledge Drive, Suite 301, Bethesda, MD 20817, (Telephone Conference Call).

*Contact Person:* Zoe E. Huang, MD, Scientific Review Officer, Extramural Programs, National Library of Medicine, NIH, 6705 Rockledge Drive, Suite 301, Bethesda, MD 20892-7968, 301-594-4937, [huangz@mail.nih.gov](mailto:huangz@mail.nih.gov).

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Library of Medicine; Notice of Closed Meeting

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*Name of Committee:* National Library of Medicine Special Emphasis Panel Conflicts.

*Date:* June 26, 2013.

*Time:* 12:00 p.m. to 2:30 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Library of Medicine, 6705 Rockledge Drive, Suite 301, Bethesda, MD 20817, (Telephone Conference Call).

*Contact Person:* Zoe E. Huang, MD, Scientific Review Officer, Extramural Programs, National Library of Medicine, NIH, 6705 Rockledge Drive, Suite 301, Bethesda, MD 20892-7968, 301-594-4937, [huangz@mail.nih.gov](mailto:huangz@mail.nih.gov).

(Catalogue of Federal Domestic Assistance Program No. 93.879, Medical Library

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Institute of Neurological Disorders and Stroke

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of an Interagency Pain Research Coordinating Committee (IPRCC) meeting.

The meeting will feature invited speakers and discussions of Committee business items including the Federally-funded pain research portfolio, NIH peer review, new opportunities for pain research and partnerships in pain research, and an update on the development of a comprehensive population health level strategy for pain prevention, treatment, management, and research.

The meeting will be open to the public and accessible by live webcast and conference call.

*Name of Committee:* Interagency Pain Research Coordinating Committee.

*Type of meeting:* Open Meeting.

*Date:* June 3, 2013.

*Time:* 8:30 a.m. to 5:00 p.m. \*Eastern Time\*—Approximate end time.

*Agenda:* The meeting will feature invited speakers and discussions of Committee business items including the Federally-funded pain research portfolio, NIH peer review, new opportunities for pain research and partnerships in pain research, and an update on the development of a comprehensive population health level strategy for pain prevention, treatment, management, and research.