

The annual estimate of burden is as follows:

Form name	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Medicare Rural Hospital Flexibility Grant Program	45	1	45	216	9,720
Total	45	1	45	216	9,720

ADDRESSES: Submit your comments 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.”

Deadline: Comments on this ICR should be received within 30 days of this notice.

Dated: April 22, 2013.

Bahar Niakan,

Director, Division of Policy and Information Coordination.

[FR Doc. 2013-09946 Filed 4-25-13; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Health Center Program

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of Noncompetitive Replacement Award to Genesee Health System.

SUMMARY: The Health Resources and Services Administration (HRSA) will be transferring Health Center Program (section 330 of the Public Health Service Act) funds originally awarded to the County of Genesee to ensure the provision of critical primary health care services to underserved populations in Genesee County, Michigan.

SUPPLEMENTARY INFORMATION:

Former Grantee of Record: County of Genesee.

Original Period of Grant Support: June 1, 2012, to April 30, 2014.

Replacement Awardee: Genesee Health System.

Amount of Replacement Award: The original award to the County of Genesee was issued as a result of a New Access Point application. The County of Genesee and Genesee Health System have agreed that the funds to be transferred will be the remaining amount in the account as of the date of this transfer.

Period of Replacement Award: The period of support for the replacement award is May 1, 2013, to April 30, 2014.

Authority: Sections 330 of the Public Health Service Act, 42 U.S.C. 245b. CFDA Number: 93.224.

Justification for the Exception to Competition: The former grantee, the County of Genesee, has requested that HRSA transfer a Health Center Program section 330 grant to Genesee Health System to implement and carry out grant activities originally proposed under the County of Genesee’s funded section 330 grant application. Genesee County Community Mental Health (GCCMH)—now Genesee Health System—was formerly a department of the County of Genesee and has continued to carry out the operations of the grant program since its award in June 2012. On January 1, 2013, the State of Michigan approved GCCMH’s independence as a separate public governmental entity, and GCCMH was legally renamed the Genesee Health System. The Genesee Health System is directly engaged in the delivery of primary health care services on the County of Genesee’s behalf and has indicated an ability to continue operations without a disruption of services.

Genesee Health System is currently providing primary health care services on behalf of the County of Genesee to the original target population and is located in the same geographical area. This underserved target population has an immediate need for vital primary health care services and would be negatively impacted by any delay or disruption of services caused by a competition. As a result, in order to ensure that critical primary health care services remain available to the original target population without disruption, this replacement award will not be competed.

FOR FURTHER INFORMATION CONTACT: Kirsten Argueta, Senior Advisor, North Central Division, Bureau of Primary Health Care, Health Resources and Services Administration, 5600 Fishers Lane, Rockville, MD 20857, via email at *KArgueta@hrsa.gov* or (301) 594-1055.

Dated: April 19, 2013.

Mary K. Wakefield,
Administrator.

[FR Doc. 2013-09942 Filed 4-25-13; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, Public Health Service, HHS.

ACTION: Notice.

SUMMARY: The inventions listed below are owned by an agency of the U.S. Government and are available for licensing in the U.S. in accordance with 35 U.S.C. 207 to achieve expeditious commercialization of results of federally-funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

FOR FURTHER INFORMATION CONTACT: Licensing information and copies of the U.S. patent applications listed below may be obtained by writing to the indicated licensing contact at the Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852-3804; telephone: 301-496-7057; fax: 301-402-0220. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications.

Zirconium-89 PET Imaging Agent for Cancer

Description of Technology: This technology is a new generation of rationally designed chelating agents which improve the complexation of Zirconium-89 for PET imaging of cancers. The technology uses cyclic or acyclic chelators made of 4 hydroxamate donors groups for improved stability compared to the currently used natural product siderophore desferrioxamine B (DFB), a