

report must be developed by, or in consultation with, the state MCH Health agency.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This estimate includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and

maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

In fiscal year (FY) 2019 and FY 2020, states will submit an application/annual report without the 5-year needs

assessment summary for a total annual estimated burden of 7,080 hours. In FY 2021, states will submit an application/annual report with the 5-year needs assessment summary for a total estimated burden of 11,151 hours. As a result of the proposed revisions, average annual burden is projected to be reduced by approximately 700 hours.

Total Estimated Annualized Burden Hours:

Form name	Number of respondents	Number of responses per respondent	Total responses	Burden per response (in hours)	Total burden hours
Application and Annual Report without 5-Year Needs Assessment Summary	59	1	59	120	7,080
Application and Annual Report with 5-Year Needs Assessment Summary	59	1	59	189	11,151
Average Total Annual Burden	59	59	* 8,437

* Reflects the average of one Application/Annual Report with Needs Assessment Summary and two Application/Annual Reports without Needs Assessment Summary

HRSA specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency's functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Jason E. Bennett,

Director, Division of the Executive Secretariat.

[FR Doc. 2017-12003 Filed 6-8-17; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Tribal Management Grant Program; Extension of Due Dates

AGENCY: Indian Health Service, HHS.

ACTION: Notice; extension of due dates.

SUMMARY: The Indian Health Service published a document in the **Federal Register** (FR) on May 1, 2017, for the Fiscal Year 2017 Tribal Management Grant Program. Several Key Dates have been modified.

FOR FURTHER INFORMATION CONTACT: Roselyn Tso, Acting Director, Office of Direct Service and Contracting Tribes, Indian Health Service, 5600 Fishers Lane, Mail Stop 08E17, Rockville, MD 20857, telephone: (301) 443-1104. (This is not a toll-free number.)

Correction

In the **Federal Register** of May 1, 2017, in FR Doc. 2017-08775, the following corrections are made:

On page 20353, in the first column, under the heading *Key Dates*, the correct *Application Deadline Date* should read as: “*Application Deadline Date:* June 30, 2017.”

On page 20353, in the first column, under the heading *Key Dates*, the correct *Review Date* should read as: “*Review Date:* July 24–28, 2017.”

On page 20353, in the first column, under the heading *Key Dates*, the correct *Signed Tribal Resolutions Due Date* should read as: “*Signed Tribal Resolutions Due Date:* June 30, 2017.”

On page 20353, in the first column, under the heading *Key Dates*, the correct *Proof of Non-Profit Status Due Date* should read as: “*Proof of Non-Profit Status Due Date:* June 30, 2017.”

Dated: June 2, 2017.

Chris Buchanan,

RADM, Assistant Surgeon General, USPHS, Acting Director, Indian Health Service.

[FR Doc. 2017-12010 Filed 6-8-17; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Aging; 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 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: National Institute on Aging Special Emphasis Panel; Health Care and Behavioral Economics.

Date: June 30, 2017.

Time: 11:30 a.m. to 1:30 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institute on Aging, Gateway Building, Suite 2W200, 7201 Wisconsin Ave., Bethesda, MD 20892 (Telephone Conference Call).

Contact Person: Isis S. Mikhail, MD, MPH, DRPH, National Institute on Aging, Gateway Building, 7201 Wisconsin Avenue, Suite 2C212, Bethesda, MD 20892, 301-402-7704, MIKHAILI@MAIL.NIH.GOV.

(Catalogue of Federal Domestic Assistance Program Nos. 93.866, Aging Research, National Institutes of Health, HHS)

Dated: June 5, 2017.

David Clary,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2017-11945 Filed 6-8-17; 8:45 am]

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