The review panel will make selections based upon the following criteria:

Phase 1

Accessibility

• Is the proposed intervention easily utilized by families of diverse economic, social, and cultural backgrounds? Is it functional across disciplines/users?

Measurability

• How easily will the proposed intervention be evaluated in order to determine its efficacy (in both lab testing and in the real world)? Is the proposed intervention measurable among various audiences?

Sustainability

• Does the proposed intervention compel users to utilize the technology often and/or for long periods of time? Does it fit into daily life? Is it fun to use?

Impact

• Does the applicant present a theory or explanation of how the proposed intervention would result in concrete change?

Phase 2

Impact

• How did the intervention impact outcomes for providers and patients? What did data show?

Evidence Base

• Is the intervention grounded in existing science related to improving health care and related services for pregnant women?

Sustainability

• Was the intervention compelling to users and did it encourage users to use the technology often? Did users want to continuously engage with the technology?

Implementation

• How feasible is the intervention? How much support for implementation will the intervention require (estimated financial and time commitment)?

Phase 3

Impact

• How effective was the intervention when implemented at scale? Did the impacts on users from Phase 2 remain consistent?

Implementation

• How feasible was the intervention on a larger scale? How much support for implementation did the model require (financial and time commitment)? How challenging was the actual program implementation?

Scalability

• How costly was the intervention in a real-world setting? How likely are cost efficiencies for program delivery at greater scale? Can the technology be used in existing platforms?

Additional Information

General Conditions:

• HRSA reserves the right to cancel, suspend, and/or modify the contest, or any part of it, for any reason, at HRSA's sole discretion.

• The interventions submitted across all phases should not use the HHS or HRSA logos or official seals in the submission, and must not claim endorsement.

Intellectual Property

• Each entrant retains full ownership and title in and to their submission. Entrants expressly reserve all intellectual property rights not expressly granted under the challenge agreement.

• By participating in the challenge, each entrant hereby irrevocably grants to HRSA a limited, non-exclusive, royalty-free, worldwide license and right to reproduce, publically perform, publically display, and use the submission for internal HHS business and to the extent necessary to administer the challenge, and to publically perform and publically display the submission, including, without limitation, for advertising and promotional purposes relating to the challenge.

• Record Retention and FOIA: All materials submitted to HRSA as part of a submission become HRSA records and cannot be returned. Any confidential commercial information contained in a submission should be designated at the time of submission. Participants will be notified of any Freedom of Information Act requests for their submissions in accordance with 45 CFR 5.65.

Dated: September 19, 2017.

George Sigounas,

Administrator.

[FR Doc. 2017–20539 Filed 9–25–17; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice of Non-Competitive, Supplemental Funding Award for Ryan White HIV/AIDS Program, Special Projects of National Significance

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: Notice.

SUMMARY: This non-competitive award will provide Secretary's Minority AIDS Initiative Fund (SMAIF) supplemental funding to the Jurisdictional Approach to Curing Hepatitis C among HIV/HCV Coinfected People of Color—Evaluation and Technical Assistance Center (ETAC), RAND Corporation. This supplemental funding will allow RAND Corporation to provide evaluation and technical assistance to cooperative agreement recipients and subrecipient clinical sites under HRSA–17–047 *Curing Hepatitis C among People of Color Living with HIV.*

SUPPLEMENTARY INFORMATION:

Intended Recipient of the Award: RAND Corporation (U90HA30519).

Amount of Non-Competitive Award: Up to $250,000 per year for 3 years (pending availability of future year funding).

Period of Funding: September 30, 2017, through September 29, 2020.

CFDA Number: No. 93.928.

Authority: The Consolidated Appropriations Act, 2017 (Pub. L. 115–31), Division H, Title II.

Justification: In fiscal year (FY) 2016, the SMAIF Curing Hepatitis C among People of Color Living with HIV initiative was launched through three funding opportunities: (1) *Jurisdictional Approach to Curing Hepatitis C among HIV/HCV Co-infected People of Color—Jurisdictional Sites* (HRSA–16–189) and (2) *Jurisdictional Approach to Curing Hepatitis C among HIV/HCV Coinfected People of Color—State Health Departments Coordinating Center* (HRSA–16–195) to provide HIV primary medical care to low income, uninsured, and underserved people living with both HIV and hepatitis C virus (HCV); and (3) *Jurisdictional Approach to Curing Hepatitis C among HIV/HCV Coinfected People of Color—ETAC* (HRSA–16–188) to provide evaluation and technical assistance to the funded sites. In FY17, HRSA–17–047 was announced to improve HCV prevention and care; improve coordination to linkage and retention in care; and enhance capacity of health department

surveillance systems to monitor HIV/HCV coinfections among low-income or underinsured, racial and ethnic minority populations. HRSA–17–047 recipients and subrecipients will require similar evaluation and technical assistance in order to meet the program's goals and objectives. Supplemental funding to the existing ETAC is a cost effective and efficient solution that will leverage RAND Corporation's currently funded infrastructure to include the additional sites funded under HRSA–17–047. Further, this supplemental funding will leverage RAND's current work by combining and comparing evaluation results across all jurisdictions from both initiatives and facilitate the streamlining and integration of processes and technical assistance. Supplemental funding will also provide opportunities for RAND Corporation to create joint learning networks and build on lessons learned from the initial cohort of jurisdictional sites currently in the second year of implementation. Not issuing this award would result in a lack of evaluation and technical assistance for HRSA–17–047 recipients and subrecipients, which is critical to achieving the initiative's goal to cure HCV among HIV/HCV coinfected people of color.

FOR FURTHER INFORMATION CONTACT: Mr. Adan Cajina, Chief, Demonstration Evaluation Branch, Office of Training and Capacity Development, Division of HIV Domestic Programs, HIV/AIDS Bureau, HRSA, 5600 Fishers Lane, 09N108, Rockville, MD 20857, Phone: (301) 443–3180, Email: *acajina@hrsa.gov.*

Dated: September 19, 2017.

George Sigounas,

Administrator.

[FR Doc. 2017–20544 Filed 9–25–17; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of a meeting of the Frederick National Laboratory Advisory Committee to the National Cancer Institute.

The meeting will be open to the public, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting. The meeting will also be videocast and can be accessed from the NIH Videocasting and Podcasting Web site (*http://videocast.nih.gov/*).

Name of Committee: Frederick National Laboratory Advisory Committee to the National Cancer Institute

Date: October 30, 2017.

Time: 9:00 a.m. to 5:00 p.m.

Agenda: Ongoing and new activities at the Frederick National Laboratory for Cancer Research.

Place: National Institutes of Health, 31 Center Drive, Building 31, Wing C; 6th Floor, Conference Room 10, Bethesda, MD 20892.

Contact Person: Caron A. Lyman, Ph.D. Executive Secretary, National Cancer Institute, National Institutes of Health, 9609 Medical Center Drive, Room 7W–126, Bethesda, MD 20892, 240–276–6348 *lymanc@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.

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://deainfo.nci.nih.gov/advisory/fac/fac.htm,* where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: September 20, 2017.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2017–20487 Filed 9–25–17; 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, notice is hereby given of a meeting of the NHLBI Special Emphasis Panel.

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 Heart, Lung, and Blood Institute Special Emphasis Panel; Grant Review for NHLBI K Award Recipients.

Date: October 17, 2017.

Time: 12:00 p.m. to 4:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Suite 7202, Bethesda, MD 20892 (Telephone Conference Call).

Contact Person: Melissa E Nagelin, Ph.D., Scientific Review Officer, Office of Scientific Review/DERA, National Heart, Lung, and Blood Institute, 6701 Rockledge Drive, Room 7202, Bethesda, MD 20892, 301–435–0297, *nagelinmh2@nhlbi.nih.gov.*

(Catalogue of Federal Domestic Assistance Program Nos. 93.233, National Center for Sleep Disorders Research; 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; 93.839, Blood Diseases and Resources Research, National Institutes of Health, HHS)

Dated: September 20, 2017.

Michelle Trout,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2017–20489 Filed 9–25–17; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Center for Scientific Review; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the