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Dated: March 9, 2018.

**Leslie Kux,**

*Associate Commissioner for Policy.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**Health Center Program**

**AGENCY:** Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

**ACTION:** Announcing Budget Period Extensions with Funding for the Health Center Program.

**SUMMARY:** HRSA provided additional grant funds during extended budget periods to prevent interruptions in the provision of critical health care services for funded service areas until new awards could be made to eligible Service Area Competition (SAC) applicants or HRSA could conduct an orderly phase-out of Health Center Program activities by the current award recipients.

**SUPPLEMENTARY INFORMATION:**

*Recipients of the Award:* Health Center Program award recipients for service areas that were threatened with a lapse in services due to service area re-announcement or transitioning award recipients, as listed in Table 1.

*Amount of Non-Competitive Awards:* 33 awards for \$17,248,966.

*Period of Supplemental Funding:* Fiscal years 2016 and 2017.

*CFDA Number:* 93.224

**Authority:** Section 330 of the Public Health Service Act, as amended (42 U.S.C. 254b, as amended).

*Justification:* Targeting the nation’s high need populations and geographic areas, the Health Center Program currently funds nearly 1,400 health centers that operate more than 11,000 service delivery sites in every state, the District of Columbia, Puerto Rico, the Virgin Islands, and the Pacific Basin.

Nearly 26 million people received accessible, affordable, quality primary health care services through the Health Center Program award recipients in 2016.

Approximately one-third of Health Center Program award recipients’ service areas are competed each year, and each competition has the potential to result in a change in award recipient. SACs are also held prior to the current grant’s project period end date when (1) a grant is voluntarily relinquished, or (2) a program noncompliance enforcement action taken by HRSA terminates the grant. If the SAC draws no fundable applications, HRSA may extend the current award recipient’s budget period to ensure primary health care services remain available while a new competition is conducted for the service area.

The amount of additional grant funds is calculated by pro-rating HRSA’s annual funding commitment to the service area. Approximately 6 months is required to announce and conduct a SAC and select a new award recipient. In all cases, current fiscal year funds are used to extend the award recipient’s existing budget period award. Through these actions, award recipients receive consistent levels of funding to support uninterrupted primary health care services to the nation’s underserved populations and communities during service area award recipient transition.

TABLE 1—RECIPIENTS AND AWARD AMOUNTS

| Grant number | Award recipient name                                      | Extension award date | Award amount (\$) |
|--------------|---|----------------------|-------------------|
| H80CS06641   | Ko’olauloa Community Health and Wellness Center, Inc      | 12/01/15             | 235,116           |
| H80CS26606   | Horizon Health and Wellness, Inc                          | 12/23/15             | 182,771           |
| H80CS26604   | Neighborhood Outreach Access to Health                    | 12/23/15             | 192,815           |
| H80CS00851   | Duval County Health Department                            | 01/11/16             | 480,066           |
| H80CS26560   | East Central Missouri Behavioral Health Services, Inc.    | 01/15/16             | 281,845           |
| H80CS00048   | Santa Cruz County   | 01/15/16             | 672,655           |
| H80CS00001   | City of Springfield, Massachusetts                        | 01/15/16             | 606,761           |
| H80CS00384   | Monroe County Health Center                               | 01/15/16             | 640,737           |
| H80CS26631   | La Casa de Salud, Inc                                     | 01/15/16             | 563,753           |
| H80CS00400   | Circle Family Healthcare Network, Inc                     | 01/22/16             | 501,296           |
| H80CS00013   | Covenant House (Under 21)                                 | 02/03/16             | 279,116           |
| H80CS26632   | Whitman-Walker Clinic, Inc                                | 02/06/16             | 423,273           |
| H80CS00054   | Metropolitan Development Council                          | 02/06/16             | 457,843           |
| H80CS00055   | White Bird Clinic   | 02/10/16             | 412,985           |
| H80CS26587   | Saint Hope Foundation                                     | 02/10/16             | 229,491           |
| H80CS26620   | Korean Health, Education, Information and Research Center | 02/12/16             | 504,386           |
| H80CS26513   | FirstMed Health and Wellness Center                       | 02/12/16             | 596,025           |
| H80CS08770   | Health Center of Southeast Texas                          | 02/12/16             | 737,066           |
| H80CS00872   | Madison County Community Health Center                    | 03/01/16             | 467,855           |
| H80CS00622   | The Hunter Health Clinic, Inc                             | 03/08/16             | 450,569           |
| H80CS10606   | St. Vincent de Paul Village, Inc                          | 04/06/16             | 334,418           |
| H80CS06078   | Yakima Neighborhood Health Services                       | 04/06/16             | 1,025,892         |
| H80CS17251   | Upper Room Aids Ministry, Inc. Health Care Center         | 04/06/16             | 738,043           |
| H80CS00722   | Community Clinic of Maui, Inc                             | 04/06/16             | 570,042           |
| H80CS01443   | Lane County   | 05/15/16             | 649,218           |
| H80CS00054   | Metropolitan Development Council                          | 06/14/16             | 228,922           |
| H80CS00299   | Brazos Valley Community Action Agency, Inc                | 01/17/17             | 1,520,645         |
| H80CS00814   | Kalihi-Palama Health Center                               | 01/17/17             | 1,105,506         |

TABLE 1—RECIPIENTS AND AWARD AMOUNTS—Continued

| Grant number     | Award recipient name                                     | Extension award date | Award amount (\$) |
|------------------|--|----------------------|-------------------|
| H80CS00802 ..... | Harrington Family Health Center .....                    | 02/22/17             | 294,843           |
| H80CS00436 ..... | Family Health Centers of Baltimore .....                 | 02/27/17             | 743,058           |
| H80CS00283 ..... | Oakland Primary Health Services, Inc .....               | 03/03/17             | 466,752           |
| H80CS00291 ..... | The University of Pittsburgh .....                       | 05/02/17             | 116,417           |
| H80CS06445 ..... | Fourth Ward d.b.a. Good Neighbor Healthcare Center ..... | 05/30/17             | 538,786           |

**FOR FURTHER INFORMATION CONTACT:** Matt Kozar, Strategic Initiatives and Planning Division Director, Office of Policy and Program Development, Bureau of Primary Health Care, Health Resources and Services Administration, at [mkozar@hrsa.gov](mailto:mkozar@hrsa.gov) or 301-443-1034.

Dated: March 8, 2018.

**George Sigounas,**  
Administrator.

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Solicitation of Nominations for Appointment to the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria

**AGENCY:** Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** The U.S. Department of Health and Human Services (HHS) is soliciting nominations of individuals who are interested in being considered a voting member for appointment to the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (Advisory Council). Nominations from qualified individuals who wish to be considered for appointment to this member category of the Advisory Council are currently being accepted.

**DATES:** Nominations must be received no later than 5:00 p.m. ET on April 30, 2018.

**ADDRESSES:** Information on how to submit a nomination is on the Advisory Council website, <http://www.hhs.gov/ash/carb/>.

**FOR FURTHER INFORMATION CONTACT:** Jomana Musmar, MS, Ph.D., Acting Designated Federal Officer, Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria, Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services, Room 715H, Hubert H. Humphrey Building, 200 Independence Avenue SW, Washington, DC 20201.

Phone: (202) 690-5566; email: [CARB@hhs.gov](mailto:CARB@hhs.gov). The Advisory Council charter may be accessed online at <http://www.hhs.gov/ash/carb/>. The charter includes detailed information about the Advisory Council's purpose, function, and structure.

**SUPPLEMENTARY INFORMATION:** Under Executive Order 13676, dated September 18, 2014, authority was given to the Secretary of HHS to establish the Advisory Council, in consultation with the Secretaries of Defense and Agriculture. Activities of the Advisory Council are governed by the provisions of Public Law 92-463, as amended (5 U.S.C. App.), which sets forth standards for the formation and use of federal advisory committees. The Advisory Council will provide advice, information, and recommendations to the Secretary of HHS regarding programs and policies intended to: preserve the effectiveness of antibiotics by optimizing their use; advance research to develop improved methods for combating antibiotic resistance and conducting antibiotic stewardship; strengthen surveillance of antibiotic-resistant bacterial infections; prevent the transmission of antibiotic-resistant bacterial infections; advance the development of rapid point-of-care and agricultural diagnostics; further research on new treatments for bacterial infections; develop alternatives to antibiotics for agricultural purposes; maximize the dissemination of up-to-date information on the appropriate and proper use of antibiotics to the general public and human and animal healthcare providers; and improve international coordination of efforts to combat antibiotic resistance.

The Advisory Council is authorized to consist of not more than 30 members, including the voting and non-voting members and the Chair and Vice Chair. The current composition of the Advisory Council consists of 15 voting members, including the Chair and Vice Chair, five non-voting liaison representative members, and 10 non-voting *ex-officio* members.

This announcement is to solicit nominations to fill seven positions that are scheduled to be vacated during the

2018 calendar year in the voting member category. Voting members are appointed to serve three or four year terms.

The seven public voting members sought for this solicitation will be selected from individuals who are engaged in: Research on, or implementation of, interventions regarding efforts to preserve the effectiveness of antibiotics by optimizing their use; advancing research to develop improved methods for combating antibiotic resistance and conducting antibiotic stewardship; strengthening surveillance of antibiotic-resistant bacterial infections; preventing the transmission of antibiotic-resistant bacterial infections; advancing the development of rapid point-of-care and agricultural diagnostics; furthering research on new treatments for bacterial infections; developing alternatives to antibiotics for agricultural purposes; maximizing the dissemination of up-to-date information on the appropriate and proper use of antibiotics to the general public and human and animal health care providers; and improving international coordination of efforts to combat antibiotic resistance.

The public voting members will represent balanced points of view from human biomedical, public health, and agricultural fields to include surveillance of antibiotic-resistant infections, prevention and/or interruption of the spread of antibiotic-resistant threats, or development of rapid diagnostics and novel treatments. The public voting members may be physicians, veterinarians, epidemiologists, microbiologists, or other health care professionals (*e.g.*, nurses, pharmacists, others); individuals who have expertise and experience as consumer or patient advocates concerned with antibiotic resistance, or in the fields of agriculture and pharmaceuticals; and they also may be from state or local health agencies or public health organizations. The voting public members will be appointed by the Secretary, in consultation with the Secretaries of Defense and Agriculture. All public voting members will be