

**SUPPLEMENTARY INFORMATION:**

*Intended Recipient of Award:*  
University of Nebraska Medical Center/  
Board of Regents of the University of  
Nebraska.

*Amount of Non-Competitive Award:*  
\$700,000.

*Period of Supplemental Funding:* 05/  
01/2019–04/30/2020.

*CFDA Number:* 93.110.

*Authority:* Social Security Act, Title  
V, § 501(a)(2) (42 U.S.C. 701(a)(2)).

*Justification:* The purpose of the  
Partnership for Urban MCH Leadership  
Community Cooperative Agreement  
program is to support urban MCH  
leaders as they work to improve public  
health programs and the delivery of  
MCH services, and to assure optimal  
alignment with the Title V MCH  
Services Block Grant program. This  
program focuses on the following three  
goals:

1. Assisting urban MCH leaders in  
achieving collective impact to respond  
to the MCH challenges faced by urban  
communities by performing an  
environmental scan, planning and  
convening a series of three learning  
collaborative for urban MCH leaders,  
and developing and disseminating a  
collective impact toolkit and  
compendium;

2. Strengthening local and State MCH  
analytic capacity through epidemiology  
training opportunities; and

3. Serving as an effective voice in  
communicating urban MCH issues and  
in developing strong partnerships and  
collaborations with State Title V  
programs and other national partners to  
advance urban MCH priorities.

The purpose of the supplement from  
HRSA is to give the University of  
Nebraska Medical Center/Board of  
Regents of the University of Nebraska  
for the Partnership for Urban MCH  
Leadership Community Cooperative  
Agreement, the opportunity to collect  
impact data for an additional year in  
support of goal one of this project. An  
additional year will allow the recipient  
to mature the current projects, continue  
collecting data from teams, and begin to  
assess the impact that this collective  
impact work has had on urban  
outcomes, as well as any impact at the  
State Title V National Performance  
Measure level. The recipient also will  
have the opportunity for more extensive  
data analysis to assess effective  
strategies that impact urban outcomes,  
and to identify lessons learned for  
potential future collective impact  
initiatives. With an extra year, the  
recipient will be able to assess

penetration of collective impact into  
broader communities, and plan for  
providing technical assistance regarding  
replication of these learning  
collaborative in new urban areas.

This cooperative agreement also  
supports epidemiology training (Goal 2)  
and enables the award recipient to serve  
as a voice for advancing urban MCH  
priorities (Goal 3), which are ongoing  
needs. This supplement will maintain  
HRSA’s investment in strengthening  
local and State MCH analytic capacity  
through epidemiology training  
opportunities, as provided by Goal 2, to  
assure optimal capacity to respond to  
MCH emerging and priority issues at the  
state and local level, such as opioids  
and neonatal abstinence syndrome. In  
addition, assuring that a national  
partner is continuing to communicate  
urban MCH issues, as addressed by Goal  
3, is a foundational need of the state-  
urban MCH partnership, and is essential  
for optimizing Title V MCH Block Grant  
outcomes.

**FOR FURTHER INFORMATION CONTACT:** Kate  
Marcell, Division of State and  
Community Health, Maternal and Child  
Health Bureau, HRSA, 5600 Fishers  
Lane, Room 18N104D, Rockville, MD  
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*KMarcell@hrsa.gov*.

Grantee/organization name	Grant No.	State	FY 2018 Authorized funding level	FY 2019 Proposed funding level
University of Nebraska Medical Center/Board of Regents of the University of Nebraska.	U01MC17261	NE	\$700,000	Up to \$700,000.

Dated: April 26, 2019.

**George Sigounas,**  
*Administrator.*

[FR Doc. 2019–08876 Filed 5–1–19; 8:45 am]

**BILLING CODE 4165–15–P**

**DEPARTMENT OF HEALTH AND  
HUMAN SERVICES**

**National Biodefense Science Board: In-  
Person Meeting**

**AGENCY:** Office of the Assistant  
Secretary for Preparedness and  
Response (ASPR), Department of Health  
and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** The HHS Office of the  
Secretary is hosting the National  
Biodefense Science Board (NBSB) at an  
In-Person Meeting in Washington, DC,  
on June 10–11, 2019. The purpose of the  
NBSB In-Person Meeting is to gather  
expert advice provided by NBSB and

guidance to the Secretary on scientific,  
technical, and other matters of special  
interest to HHS regarding current and  
future chemical, biological, nuclear, and  
radiological agents, whether naturally  
occurring, accidental, or deliberate.

**DATES:** The NBSB In-Person Meeting is  
being held on June 10–11, 2019, from  
9:00 a.m. to 5:00 p.m. Eastern Daylight  
Time (EDT).

**ADDRESSES:** Please visit the NBSB  
website (<https://www.phe.gov/nbsb>) for  
all additional information regarding  
NBSB or the In-Person Meeting.

**FOR FURTHER INFORMATION CONTACT:** CDR  
Christopher Perdue, MD, MPH,  
Designated Federal Official, NBSB,  
ASPR, HHS; 202–401–5837;  
*christopher.perdue@hhs.gov*.

**SUPPLEMENTARY INFORMATION:** Pursuant  
to section 319M of the Public Health  
Service Act, HHS has established the  
NBSB to provide expert advice and  
guidance to the Secretary on scientific,  
technical, and other matters of special

interest to HHS regarding current and  
future chemical, biological, nuclear, and  
radiological agents, whether naturally  
occurring, accidental, or deliberate.

*Availability of Materials:* Participants  
are encouraged to visit the NBSB  
website (<http://www.phe.gov/nbsb>) for  
information about the meeting,  
including the agenda.

*Procedures for Providing Public Input:*  
Members of the public are encouraged  
to go to the NBSB website (<http://www.phe.gov/nbsb>) for instructions  
about the submission of written  
comments.

Dated: April 25, 2019.

**Robert P. Kadlec,**

*Assistant Secretary for Preparedness and  
Response.*

[FR Doc. 2019–08943 Filed 5–1–19; 8:45 am]

**BILLING CODE 4150–37–P**