Abstract: More than just a job search portal, the goal of the Health Workforce Connector (HWC) is to help connect skilled professionals to communities in need by allowing approved Site Points of Contact (POCs), including National Health Service Corps (NHSC) and Nurse Corps, to post available opportunities and update site profiles. The HWC provides a central platform to connect participants, including those in both the NHSC and Nurse Corps programs, and facilities that are approved for performance of their NHSC or Nurse Corps service obligation. The HWC has become a resource that engages any health care professional or student interested in providing primary care services in underserved communities and with facilities in need of health care providers. The Health Workforce Connector also allows users to create a profile, search for NHSC and Nurse Corps sites, find job and training opportunities, search for other clinicians who are similarly interested in working with underserved populations, and be searchable by Site POCs. Individuals can use the Health Workforce Connector’s search capability with Google Maps.

The initial estimates of burden, as provided in the previous notice, were developed prior to the deployment of the HWC. Those estimates were accurate, as brand new users created accounts and published profiles. Because the HWC is now in a steady state, actual numbers from the last year allow for projections of comparable numbers for the upcoming year. A more recent data query yielded an estimated burden that is significantly lower due to the total number of users who are estimated to create accounts and publish profiles.

A 60-day notice published in the Federal Register on August 12, 2020, vol. 85, No. 156; pp. 48708–09. There was one public comment.

Need and Proposed Use of the Information: Information will be collected from users in the following two ways:

1. Account Creation: Creating an account is optional, but to create an account the user will be required to enter their first name, last name, and email address. Those are the only mandatory fields in the profile account creation process and will be used to send an automated email allowing the user to validate their login credentials. This information will also be used to validate any users who already exist within the Bureau of Health Workforce Management Information Systems Solution (BMISS) database and allow an initial import of existing data at the request of the user.

2. Profile Completion: Users may fill out a profile, but this function will be completely optional and will include fields such as location, discipline, specialty, and languages spoken. The information collected, if ‘published’ by the user, will allow internal BMISS Site POCs the ability to search for anyone who may be a potential candidate for health care job opportunities at the site. Users also have the ability to make their profiles searchable by other end users through a security and privacy setting and can make their profiles private at any time. All information collected will be stored within existing secure BMISS databases and will be used internally for report generation on an as-needed basis.

Likely Respondents: Potential users will include individuals searching for a health care job opportunity or an NHSC or Nurse Corps health care facility, and health care facilities searching for potential candidates to fill open health care job opportunities at their sites.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This 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.

Total Estimated Annualized burden hours:

<table>
<thead>
<tr>
<th>Form name</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Total responses</th>
<th>Average burden per response (in hours)</th>
<th>Total burden hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Account Creation</td>
<td>5,008</td>
<td>1</td>
<td>5,008</td>
<td>.08</td>
<td>400.64</td>
</tr>
<tr>
<td>Complete Profile</td>
<td>4,164</td>
<td>1</td>
<td>4,164</td>
<td>1.00</td>
<td>4,164.00</td>
</tr>
<tr>
<td>Total</td>
<td>9,172</td>
<td></td>
<td>9,172</td>
<td></td>
<td>4,564.64</td>
</tr>
</tbody>
</table>

¹ The 4,164 respondents who complete their profiles are a subset of the 5,008 respondents who create accounts.

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.

Maria G. Button,  
Director, Executive Secretariat.  
[FR Doc. 2020–22067 Filed 10–5–20; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

HRSA-Initiated Supplemental Funding to U13 Grant Program Award Recipient

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

ACTION: Notice of a supplemental award.

SUMMARY: HRSA is providing approximately $4,900,000 in supplemental funding to the University of Kansas, Medical Center Research Institute, Inc. (U13HS33878), the sole award recipient under the Reimbursement of Travel and Subsistence Expenses toward Living Organ Donation Program, to provide increased financial support to living organ donors during the period of September 1, 2020, to August 31, 2021.

FOR FURTHER INFORMATION CONTACT: Please send all written comments to Frank Holloman, Director, Division of Transplantation, Healthcare Systems Bureau, HRSA, 5600 Fishers Lane, Room 08W53A, Rockville, Maryland 20857; telephone (301) 443–7577; or email: donation@hrsa.gov.

SUPPLEMENTARY INFORMATION:
Justification: The Reimbursement of Travel and Subsistence Expenses toward Living Organ Donation Program is authorized by section 377 of the Public Health Service (PHS) Act, as amended (42 U.S.C. 274f). The purpose of the program is to provide means-tested reimbursement to living organ donors for travel and subsistence expenses and other incidental nonmedical expenses related to the transplant that the Secretary of HHS may authorize. HRSA currently administers this reimbursement program via a cooperative agreement with the University of Kansas, Medical Center Research Institute, Inc. On July 10, 2019, the President issued an Executive Order on Advancing American Kidney Health that provides increased support for living organ donors to further the goal of significantly increasing the supply of transplantable kidneys. In the Executive Order, the President directed HHS to propose a regulation to allow living donors to be reimbursed for related lost wages, child-care expenses, and elder-care expenses through HRSA’s reimbursement program, and further directed HHS to raise the limit on the income of living donors eligible for reimbursement under the program. HRSA has taken the following actions pursuant to the Executive Order: • On December 20, 2019, HRSA published a notice of proposed rulemaking in the Federal Register to amend 42 CFR part 121, the regulation that implements the reimbursement program. If finalized as proposed, HRSA’s rule would expand the scope of reimbursable expenses for living organ donors to include lost wages, and child-care and elder-care expenses. HRSA expects to publish a final rule no later than November 2020. • On March 31, 2020, HRSA published a Federal Register notice requesting public comment on proposed revisions to the Program’s eligibility guidelines, including an increase in the income eligibility threshold from 300 to 350 percent of the HHS Poverty Guidelines for eligible participants. The additional funding to the award recipient will support HRSA’s initiatives to implement the President’s Executive Order, which will ultimately allow for an increased number of potential donors to receive financial support while also increasing the number of transplantable organs. Activities funded under this supplement are consistent with the previously awarded funding opportunity (HRSA–19–047). In addition to continuing to provide reimbursement of travel and subsistence expenses to qualified living organ donors, as required under the existing award, the award recipient will implement the reimbursement for these additional incidental non-medical expenses that the Secretary has authorized by regulation as also required under the existing award. Rather than conducting a new competition for the newly expanded program, HRSA has opted to supplement the existing award to expedite the expanded support of living organ donors and increase the number of transplant candidates who benefit from living organ donation. HRSA believes that it is more efficient and effective to have the Reimbursement Program administered by one awardee. Thomas J. Engels, Administrator. [FR Doc. 2020–21992 Filed 10–5–20; 8:45 am] DEPARTMENT OF HEALTH AND HUMAN SERVICES
Health Resources and Services Administration
Agency Information Collection Activities: Proposed Collection: Public Comment Request Information
Collection Request Title: Faculty Loan Repayment Program OMB No. 0915–0150—Revision
AGENCY: Health Resources and Services Administration, (HRSA), Department of Health and Human Services.
ACTION: Notice.
SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.
DATES: Comments on this ICR should be received no later than December 7, 2020.