

(3) Two oral public comment sessions: One session will be open to any newborn screening related topic. The other public comment period will specifically address the Committee's review of the evidence review process (e.g., nomination form, consumer-friendly guidance materials, review of conditions on the RUSP). Please note, if you wish to register to submit oral public comments on the review of the Committee's evidence review process we request that you also submit a written version of your remarks;

(4) Committee discussion of Continuity of Operations Planning and COVID-19; and,

(5) Newborn screening data sources.

The agenda for this meeting does not include any plans for recommending a condition for inclusion in the RUSP. However, as noted in the agenda items, the Committee may hold a vote on whether or not to recommend a nominated condition (MPS II) to full evidence review, which may lead to such a recommendation at a future time. Agenda items are subject to change as priorities dictate. Information about the ACHDNC, including a roster of members and past meeting summaries, is also available on the ACHDNC website previously listed.

As noted above, members of the public will have the opportunity to provide comments. Public participants providing general oral comments may submit written statements in advance of the scheduled meeting. We specifically request that public participants providing oral comment on the review of the Committee's evidence review process also submit a written version of their remarks. Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to provide a written statement or make oral comments to the ACHDNC must be submitted via the registration website by 10:00 a.m. ET on Monday, May 10, 2021.

Individuals who need special assistance or another reasonable accommodation should notify Alaina Harris at the address and phone number listed above at least 10 business days prior to the meeting.

**Maria G. Button,**

*Director, Executive Secretariat.*

[FR Doc. 2021-06940 Filed 4-2-21; 8:45 am]

**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Cancer Institute; Notice of Closed Meeting

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

The meetings 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 purpose of this meeting is to evaluate requests for preclinical development resources for potential new therapeutics for the treatment of cancer. The outcome of the evaluation will provide information to internal NCI committees that will decide whether NCI should support requests and make available contract resources for development of the potential therapeutic to improve the treatment of various forms of cancer. The research proposals and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the proposed research projects, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Cancer Institute Special Emphasis Panel; FEB2021 Cycle 37 NExT SEP Committee Meeting.

*Date:* April 21, 2021.

*Time:* 9:00 a.m. to 3:00 p.m.

*Agenda:* To evaluate the NCI Experimental Therapeutics Program Portfolio.

*Place:* National Institutes of Health, 9000 Rockville Pike, Building 31, Room 3A44, Bethesda, Maryland 20892 (WebEx Meeting).

*Contact Persons:* Barbara Mroczkowski, Ph.D. Executive Secretary, Discovery Experimental Therapeutics Program, National Cancer Institute, NIH, 31 Center Drive, Room 3A44, Bethesda, MD 20817, (301) 496-4291, [mroczkoskib@mail.nih.gov](mailto:mroczkoskib@mail.nih.gov).

Toby Hecht, Ph.D., Executive Secretary, Development Experimental Therapeutics Program, National Cancer Institute, NIH, 9609 Medical Center Drive, Room 3W110, Rockville, MD 20850, (240) 276-5683, [toby.hecht2@nih.gov](mailto:toby.hecht2@nih.gov).

(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: March 30, 2021.

**Melanie J. Pantoja,**

*Program Analyst, Office of Federal Advisory Committee Policy.*

[FR Doc. 2021-06890 Filed 4-2-21; 8:45 am]

**BILLING CODE 4140-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276-0361.

Comments are invited on: (a) Whether the proposed collections of information are necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

#### Proposed Project: 2022 National Survey on Drug Use and Health (OMB No. 0930-0110)

The National Survey on Drug Use and Health (NSDUH) is a survey of the U.S. civilian, non-institutionalized population aged 12 years old or older. The data are used to determine the prevalence of use of tobacco products, alcohol, illicit substances, and illicit use of prescription drugs. The results are used by SAMHSA, the Office of National Drug Control Policy (ONDCP), federal government agencies, and other organizations and researchers to establish policy, direct program activities, and better allocate resources.

As certain parts of the United States reduce COVID-19 restrictions, NSDUH in-person data collection will proceed where possible. However, to ensure

sufficient data are collected to produce nationally representative estimates for the 2022 survey, NSDUH will continue to employ a mix of in-person and web-based modes of administration to allow those respondents living in areas with COVID-19 restrictions the opportunity to participate. If the COVID-19 pandemic subsides to such levels to allow in-person data collection to resume nationwide, SAMHSA may reassess that multimode data collection model as part of the 2022 NSDUH.

In those areas where in-person data collection is permitted, NSDUH protocols, processes, and materials will continue to reflect the need to ensure the safety of respondents and field interviewers with respect to COVID-19—after initial implementation of such measures beginning in October 2020—which include equipping field interviewers with masks, gloves,

disinfecting wipes, and hand sanitizer for use during data collection and providing a COVID-19 risk information form to all respondents.

In addition, the NSDUH questionnaire must be updated periodically to reflect changing substance use and mental health issues and to continue producing current data. For the 2022 NSDUH, the following questionnaire updates are planned: (1) Replacing the tobacco module with a redesigned nicotine module that includes questions about vaping, removes low priority items to reduce respondent burden and eliminates outdated terminology; (2) revising the marijuana module to include questions about the use of CBD, update questions on the mode of administration and eliminate outdated terminology and includes changes to the market information for marijuana questions; (3) redesigning the adult and

youth mental health services utilization modules into one Mental Health Service Utilization model to remove questions with outdated terminology and include questions about newer treatments with recent increases in popularity; and (4) replacing the drug treatment module with a redesigned alcohol and drug treatment module that includes questions about newer treatments and those that have increased in popularity, as well as eliminating outdated terminology and reducing respondent burden.

As with all NSDUH/NHSDA<sup>1</sup> surveys conducted since 1999, the sample size of the NSDUH main study for 2022 will be sufficient to permit prevalence estimates for each of the fifty states and the District of Columbia. The total annual burden estimate for the NSDUH main study is shown below in Table 1.

TABLE 1—ANNUALIZED ESTIMATED BURDEN FOR 2022 NSDUH

Instrument	Number of respondents	Responses per respondent	Total number of responses	Hours per response	Total burden hours
Household Screening .....	168,674	1	168,674	0.083	14,000
Interview .....	67,507	1	67,507	1.000	67,507
Screening Verification .....	5,060	1	5,060	0.067	339
Interview Verification .....	10,126	1	10,126	0.067	678
<b>Total .....</b>	<b>168,674</b>	<b>.....</b>	<b>251,367</b>	<b>.....</b>	<b>82,524</b>

Send comments to Carlos Graham, SAMHSA Reports Clearance Officer, 5600 Fisher Lane, Room 15E57A, Rockville, MD 20852 OR email him a copy at [carlos.graham@samhsa.hhs.gov](mailto:carlos.graham@samhsa.hhs.gov). Written comments should be received by June 4, 2021.

**Carlos Graham,**  
Social Science Analyst.  
[FR Doc. 2021-06887 Filed 4-2-21; 8:45 am]  
BILLING CODE 4162-20-P

**DEPARTMENT OF HOMELAND SECURITY**

**Coast Guard**

[Docket No. USCG-2020-0042]

**Consolidation of Redundant Coast Guard Boat Stations—Decision; Correction**

**AGENCY:** Coast Guard, DHS.  
**ACTION:** Notice; correction to docket number.

**SUMMARY:** The Coast Guard published a document in the **Federal Register** on March 30, 2021, concerning a notice of a decision on a consolidation of Coast Guard boat stations. The document contained an incorrect docket number. **DATES:** This correction is effective April 5, 2021.

**FOR FURTHER INFORMATION CONTACT:** For information about this document call or email Todd Aikins, Coast Guard Office of Boat Forces; telephone 202-372-2463, email [todd.r.aikins@uscg.mil](mailto:todd.r.aikins@uscg.mil).

**SUPPLEMENTARY INFORMATION:**

**Correction**

In the **Federal Register** of March 30, 2021, in FR Doc. 2021-06461, on page 16604, in the second column, in the heading, the docket number, “USCG-2021-0178”, is corrected to read “USCG-2020-0042”. This corrects the error in the docket number and will ensure that this decision notice will be placed in the same docket as the notice soliciting comments regarding these boat stations (85 FR 8601, February 14, 2020).

Dated: March 30, 2021.  
**J.E. McLeod,**  
Acting Office Chief, Office of Regulations and Administrative Law.  
[FR Doc. 2021-06876 Filed 4-2-21; 8:45 am]  
BILLING CODE 9110-04-P

**DEPARTMENT OF HOMELAND SECURITY**

**Federal Emergency Management Agency**

[Docket ID: FEMA-2020-0039; OMB No. 1660-0006]

**Agency Information Collection Activities: Submission for OMB Review; Comment Request; National Flood Insurance Program Policy Forms**

**AGENCY:** Federal Emergency Management Agency, Department of Homeland Security.  
**ACTION:** 30 Day Notice of Reinstatement and request for comments.

**SUMMARY:** The Federal Emergency Management Agency (FEMA), as part of

<sup>1</sup> Prior to 2002, the NSDUH was referred to as the National Household Survey on Drug Abuse (NHSDA).