Their Family Caregivers for the period of September 1, 2020 through August 31, 2025. Since project implementation began in late 2020, the grantee has accomplished a great deal. This supplement will enable the grantee to carry their work even further, serving more Holocaust survivors, other older adults with histories of trauma, family caregivers and to train more professionals in the principles of PCTI. The additional funding will not be used to begin new projects or activities.

The JFNA is uniquely positioned to complete the work called for under this project. JFNA's partners on this project include the National Indian Council on Aging, the Japanese American Service Committee, the National Caucus and Center on Black Aging, Inc., the New Jersey Office for Refugees International Rescue Committee, the Asociacion Nacional Pro Personas Mayores (a pioneering organization in the field of Hispanic/minority aging); SAGE (the nation's leading organization devoted to aging in the lesbian, gay, bisexual, and transgender community); and HIAS (which works around the world to protect refugees). Additional project partners include, the Caregiver Center at the Veterans Affairs Medical Center at the University of Tennessee; the Community Care Corps Program, funded by the Administration for Community Living and led by the Oasis Institute; the Caregiver Action Network, and USAging; LeadingAge, an association of 6,000 not for profit organizations across the continuum of aging services; the Center for Health Care Strategies, Inc., which advances models for organizing and financing health care delivery; and the Campaign for Trauma-Informed Policy and Practice, which promotes the building of trauma-informed communities.

Establishing an entirely new grant project at this time would be potentially disruptive to the current work already well under way. More importantly, the Holocaust survivors and other older adults currently being served by this project could be negatively impacted by a service disruption, thus posing the risk of re-traumatization and further negative impacts on health and wellbeing. If this supplement is not provided, the project would be less able to address the significant unmet health and social support needs of additional Holocaust survivors and other older adults with histories of trauma. Similarly, the project would be unable to expand its current technical assistance and training efforts in PCTI concepts and approaches, let alone reach beyond traditional providers of services to this population to train more ''mainstream'' providers of aging services. Finally, providing this supplement to JFNA will allow for the greater realization of Congress' intent in section 411(14)(A) of the Older Americans Act, as amended, which calls for the establishment of a national resource center to provide training, technical assistance and sub-grants in this area.

Dated: February 25, 2023.

Alison Barkoff,

Acting Administrator and Assistant Secretary for Aging.

[FR Doc. 2023–04250 Filed 3–1–23; 8:45 am]

BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Submission for OMB Review; Public Comment Request; the Analysis of Senior Medicare Patrol Grantees' Program Implementation OMB Control Number 0985–New

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under the Paperwork Reduction Act of 1995. This 30-Day notice collects comments on the information collection requirements related to the analysis of Senior Medicare Patrol Grantees' Program Implementation.

DATES: Submit written comments on the collection of information by April 3, 2023.

ADDRESSES: Submit written comments and recommendations for the proposed information collection within 30 days of publication of this notice to *www.reginfo.gov/public/do/PRAMain.* Find the information collection by selecting ''Currently under 30-day Review—Open for Public Comments'' or by using the search function. By mail to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW, Rm. 10235, Washington, DC 20503, Attn: OMB Desk Officer for ACL.

FOR FURTHER INFORMATION CONTACT: Kristen Robinson, *Kristen.Robinson@acl.hhs.gov,* 202–795–7428.

SUPPLEMENTARY INFORMATION: In compliance with 44 U.S.C. 3507, The Administration for Community Living (ACL) has submitted the following proposed collection of information to OMB for review and clearance. ACL is requesting approval to collect data for the Under ACL's Office of Healthcare Information and Counseling, the Senior Medicare Patrol (SMP) programs recruit and train a national network of staff and volunteers to help ''prevent, detect, and report Medicare fraud, errors, and abuse.'' [1] The SMP supports programs in every state, the District of Columbia, and in U.S. territories through grants. Additionally, the SMP Resource Center, established in 2003, assists SMP grantees in networking and provides tools, training, and technical assistance to SMPs. To promote and advance equity in its programming, ACL is conducting interviews with SMP program directors or their designee to better understand their activities and their experiences in program implementation and in reaching low-income and rural Medicare beneficiaries.

Specifically, this IC will allow ACL to understand (1) how SMP grantees conceive of program priorities; (2) successes and challenges SMP grantees experience in implementing activities and in reaching low-income and rural Medicare beneficiaries; and (3) which programs need clarification on programmatic priority expectations or additional support to conduct their activities.

Up to 54 SMP grantee representatives and one SMP Resource Center representative will be invited to participate in a 75-minute web-based interview. Findings from the interviews will inform ACL's strategy to support SMP grantees in achieving program priorities and to promote equitable access to SMP activities for low-income and rural Medicare beneficiaries.

Comments in Response to the 60-Day Federal Register Notice

A notice published in the **Federal Register** 87 FR 77849 on 12/20/2022. No comments were received during the 60-day FRN.

Estimated Program Burden: ACL estimates the burden of this collection of information as follows:

A maximum of 54 SMP grantee project directors or their designees and one representative from the SMP Resource Center are expected to

[1] Administration for Community Living. (2022, November 8). *Senior Medicare Patrol (SMP).* Available at *https://acl.gov/programs/protecting-rights-and-preventing-abuse/senior-medicare-patrol-smp.*

participate in interviews over videoconferencing. The approximate burden for participation in interviews is 1.25 hours per respondent for a total estimate of 68.75 hours.

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Annual burden hours	Cost per hour	Annual burden cost
Interviews with grantees and SMP Resource Center	54	1	1.25	67.5	[1]$26.12	$1,763.10
Interview with SMP Resource Center	1	1	1.25	1.25	[2]36.92	46.15
Total	55			68.75		1,809.25

Dated: February 25, 2023.

Alison Barkoff,

Acting Administrator and Assistant Secretary for Aging.

[FR Doc. 2023–04249 Filed 3–1–23; 8:45 am]

BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2022–N–2174]

Oncologic Drugs Advisory Committee; Notice of Meeting; Establishment of a Public Docket; Request for Comments

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; establishment of a public docket; request for comments.

SUMMARY: The Food and Drug Administration (FDA) announces a forthcoming public advisory committee meeting of the Oncologic Drugs Advisory Committee. The general function of the committee is to provide advice and recommendations to FDA on regulatory issues. The meeting will be open to the public. FDA is establishing a docket for public comment on this document.

DATES: The meeting will be held virtually on April 28, 2023, from 11 a.m. to 4:30 p.m. Eastern Time.

ADDRESSES: Please note that due to the impact of the COVID–19 pandemic, all meeting participants will be joining this advisory committee meeting via an online teleconferencing platform. Answers to commonly asked questions about FDA advisory committee meetings may be accessed at: *https://www.fda.gov/AdvisoryCommittees/AboutAdvisoryCommittees/ucm408555.htm.*

FDA is establishing a docket for public comment on this meeting. The docket number is FDA–2022–N–2174. Please note that late, untimely filed comments will not be considered. The docket will close on April 27, 2023. The *https://www.regulations.gov* electronic filing system will accept comments until 11:59 p.m. Eastern Time at the end of April 27, 2023. Comments received by mail/hand delivery/courier (for written/paper submissions) will be considered timely if they are received on or before that date.

Comments received on or before April 14, 2023, will be provided to the committee. Comments received after that date will be taken into consideration by FDA. In the event that the meeting is cancelled, FDA will continue to evaluate any relevant applications or information, and consider any comments submitted to the docket, as appropriate.

You may submit comments as follows:

Electronic Submissions

Submit electronic comments in the following way:

- *Federal eRulemaking Portal: https://www.regulations.gov.* Follow the instructions for submitting comments. Comments submitted electronically, including attachments, to *https://www.regulations.gov* will be posted to the docket unchanged. Because your comment will be made public, you are solely responsible for ensuring that your comment does not include any confidential information that you or a third party may not wish to be posted, such as medical information, your or anyone else's Social Security number, or confidential business information, such as a manufacturing process. Please note that if you include your name, contact information, or other information that identifies you in the body of your comments, that information will be posted on *https://www.regulations.gov.*
- If you want to submit a comment with confidential information that you do not wish to be made available to the public, submit the comment as a written/paper submission and in the manner detailed (see ''Written/Paper Submissions'' and ''Instructions'').

Written/Paper Submissions

Submit written/paper submissions as follows:

- *Mail/Hand Delivery/Courier (for Written/Paper Submissions):* Dockets Management Staff (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852.
- For written/paper comments submitted to the Dockets Management Staff, FDA will post your comment, as well as any attachments, except for information submitted, marked and identified, as confidential, if submitted as detailed in ''Instructions.''

Instructions: All submissions received must include the Docket No. FDA–2022–N–2174 for ''Oncologic Drugs Advisory Committee; Notice of Meeting; Establishment of a Public Docket; Request for Comments.'' Received comments, those filed in a timely manner (see **ADDRESSES**), will be placed in the docket and, except for those submitted as ''Confidential Submissions,'' publicly viewable at *https://www.regulations.gov* or at the Dockets Management Staff between 9 a.m. and 4 p.m., Monday through Friday, 240–402–7500.

- Confidential Submissions—To submit a comment with confidential information that you do not wish to be made publicly available, submit your comments only as a written/paper submission. You should submit two copies total. One copy will include the information you claim to be confidential with a heading or cover note that states ''THIS DOCUMENT CONTAINS CONFIDENTIAL INFORMATION.'' FDA will review this copy, including the claimed confidential information, in its consideration of comments. The second copy, which will have the claimed confidential information redacted/blacked out, will be available for public viewing and posted on *https://www.regulations.gov.* Submit both copies to the Dockets Management Staff. If you do not wish your name and contact information be made publicly available, you can provide this information on the cover sheet and not