

operates at three existing Court facilities: the Abraham A. Ribicoff Federal Building and Courthouse (Ribicoff Courthouse) in Hartford, the Richard C. Lee U.S. Courthouse in New Haven, and the Brien McMahon Federal Building and U.S. Courthouse in Bridgeport. Long-range facilities planning for the Court and the Court Project Priorities process determined that Court operations in Hartford are projected to increase, and that Court headquarters would relocate from New Haven to Hartford.

The Ribicoff Courthouse, constructed in 1963, does not have the space, functionality, security, and building systems to meet the current and projected needs of the Court. The facility also presents numerous functional challenges related to circulation, prisoner movement, and operational and safety needs of the Judiciary.

GSA conducted feasibility studies to determine a suitable alternative that established the budget, site considerations, and basis for a project designed to provide long-term solutions to the Court's projected space requirements. The results from the feasibility studies led to GSA's decision to locate the Court's judicial operations at a new Federal Courthouse in Hartford, CT.

### Alternatives Under Consideration

The EIS will consider three "action" alternatives and one "no action" alternative. Under the action alternatives, GSA would acquire a site of at least two acres of land in Hartford, CT for the design and construction of a new Federal Courthouse. The no action alternative assumes that site acquisition and subsequent design and construction of a new Federal Courthouse would not occur. The Judiciary would continue to operate under current conditions at the Ribicoff Courthouse, and at the courthouses in New Haven and Bridgeport.

A new Federal Courthouse would have the following features:

- Total building gross square footage of approximately 281,000;
- 11 courtrooms and 18 Judge chambers;
- Offices for various Federal agency tenants; and
- 66 secure parking spaces.

GSA has identified three potential sites for the project, each corresponding to an action alternative (listed north to south):

- **Woodland Site**—encompasses one land parcel and is 10.10 acres. The property lies in Hartford's Asylum Hill neighborhood, a block south of Saint

Francis Hospital. It is bounded by Asylum Ave. to the north, the North Branch of Park River to the west, healthcare-related buildings along its southern perimeter, and Woodland St. to the east. It is currently utilized as a State of Connecticut office building.

- **Allyn Site**—encompasses 10 land parcels and is 2.19 acres. The property lies downtown, two blocks north of Bushnell Park. It is bounded by Church St. to the north, High St. to the west, Allyn St. to the south, and mixed-use buildings along its eastern perimeter. It is currently utilized as a surface parking lot.

- **Hudson Site**—encompasses six land parcels and is 2.54 acres. The property lies downtown, two blocks south of Bushnell Park. The parcels are separated by Hudson St., with the larger property (2.24 acres) to the west of Hudson St. and the smaller property (0.3 acres) to the east of Hudson St. The larger property is bounded by Capitol Ave. to the north, West St. to the west, and Buckingham St. to the south. It is currently utilized as a surface parking lot and an auto detailing shop. The smaller property is bounded by Buckingham St. to the south and mixed-use buildings along its northern and eastern perimeters. It is currently utilized as a surface parking lot.

### Public Involvement and Scoping Meeting

The views and comments of the public are necessary to help determine the scope and content of the environmental analysis. Interested parties are encouraged to participate in the public scoping meeting and provide written comments regarding the scope of the EIS.

There will be a project presentation at 6:00 p.m. with a public comment period to follow. An American Sign language translator and a Spanish language interpreter will be available. After the meeting, GSA will post the following items at the Project website, <http://gsa.gov/hartfordcourthouse>:

- Meeting handouts in English and Spanish
- Presentation slide deck in English and Spanish
- Meeting transcript in English
- Audio/video of the meeting with closed captions

Further information about the project can be viewed at: <http://gsa.gov/hartfordcourthouse>.

**Surran D. Dilks,**

*Director, Design & Construction Division, PBS New England Region.*

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**BILLING CODE 6820-RB-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

#### Notice of Meeting

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), HHS.

**ACTION:** Notice.

**SUMMARY:** The Agency for Healthcare Research and Quality (AHRQ) announces a Special Emphasis Panel (SEP) meeting on "Dissemination and Implementation of Equity-Focused Evidence-Based Interventions in Healthcare Delivery Systems (R18)". This SEP meeting will be closed to the public.

**DATES:** July 11–12, 2023.

**ADDRESSES:** Agency for Healthcare Research and Quality, (Video Assisted Review), 5600 Fishers Lane, Rockville, Maryland 20857.

**FOR FURTHER INFORMATION CONTACT:** Jenny Griffith, Committee Management Officer, Office of Extramural Research, Education and Priority Populations, Agency for Healthcare Research and Quality, (AHRQ), 5600 Fishers Lane, Rockville, Maryland 20857, Telephone: (301) 427-1557.

**SUPPLEMENTARY INFORMATION:** A Special Emphasis Panel is a group of experts in fields related to health care research who are invited by AHRQ, and agree to be available, to conduct on an as needed basis, scientific reviews of applications for AHRQ support. Individual members of the Panel do not attend regularly scheduled meetings and do not serve for fixed terms or a long period of time. Rather, they are asked to participate in particular review meetings which require their type of expertise.

The SEP meeting referenced above will be closed to the public in accordance with the provisions set forth in 5 U.S.C. 1009(d), 5 U.S.C. 552b(c)(4), and 5 U.S.C. 552b(c)(6). Grant applications for "Dissemination and Implementation of Equity-Focused Evidence-Based Interventions in Healthcare Delivery Systems (R18)" are to be reviewed and discussed at this meeting. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Agenda items for this meeting are subject to change as priorities dictate.

Dated: May 22, 2023.

**Marquita Cullom,**  
Associate Director.

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

#### Supplemental Evidence and Data Request on Measures for Primary Healthcare Spending

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), HHS.

**ACTION:** Request for supplemental evidence and data submissions.

**SUMMARY:** The Agency for Healthcare Research and Quality (AHRQ) is seeking scientific information submissions from the public. Scientific information is being solicited to inform our review on *Measures for Primary Healthcare Spending*, which is currently being conducted by the AHRQ's Evidence-based Practice Centers (EPC) Program. Access to published and unpublished pertinent scientific information will improve the quality of this review.

**DATES:** Submission Deadline on or before June 26, 2023.

#### ADDRESSES:

Email submissions: [epc@ahrq.hhs.gov](mailto:epc@ahrq.hhs.gov).

Print submissions:

Mailing Address: Center for Evidence and Practice Improvement, Agency for Healthcare Research and Quality, ATTN: EPC SEADs Coordinator, 5600 Fishers Lane, Mail Stop 06E53A, Rockville, MD 20857.

Shipping Address (FedEx, UPS, etc.): Center for Evidence and Practice Improvement, Agency for Healthcare Research and Quality, ATTN: EPC SEADs Coordinator, 5600 Fishers Lane, Mail Stop 06E53A, Rockville, MD 20857.

#### FOR FURTHER INFORMATION CONTACT:

Kelly Carper, Telephone: 301–427–1656 or Email: [epc@ahrq.hhs.gov](mailto:epc@ahrq.hhs.gov).

**SUPPLEMENTARY INFORMATION:** The Agency for Healthcare Research and Quality has commissioned the Evidence-based Practice Centers (EPC) Program to complete a review of the evidence for *Measures for Primary Healthcare Spending*. AHRQ is conducting this *technical brief* pursuant to Section 902 of the Public Health Service Act, 42 U.S.C. 299a.

The EPC Program is dedicated to identifying as many studies as possible

that are relevant to the questions for each of its reviews. In order to do so, we are supplementing the usual manual and electronic database searches of the literature by requesting information from the public (e.g., details of studies conducted). We are looking for studies that report on *Measures for Primary Healthcare Spending*, including those that describe adverse events. The entire research protocol is available online at: <https://effectivehealthcare.ahrq.gov/products/primary-healthcare-spending>.

This is to notify the public that the EPC Program would find the following information on Measures for Primary Healthcare Spending helpful:

- A list of completed studies that your organization has sponsored for this indication. In the list, please *indicate whether results are available on ClinicalTrials.gov along with the ClinicalTrials.gov trial number.*

- *For completed studies that do not have results on ClinicalTrials.gov*, a summary, including the following elements: study number, study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, primary and secondary outcomes, baseline characteristics, number of patients screened/eligible/enrolled/lost to follow-up/withdrawn/analyzed, effectiveness/efficacy, and safety results.

- *A list of ongoing studies that your organization has sponsored for this indication.* In the list, please provide the ClinicalTrials.gov trial number or, if the trial is not registered, the protocol for the study including a study number, the study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, and primary and secondary outcomes.

- Description of whether the above studies constitute *ALL Phase II and above clinical trials* sponsored by your organization for this indication and an index outlining the relevant information in each submitted file.

Your contribution is very beneficial to the Program. Materials submitted must be publicly available or able to be made public. Materials that are considered confidential; marketing materials; or information on indications not included in the review cannot be used by the EPC Program. This is a voluntary request for information, and all costs for complying with this request must be borne by the submitter.

The draft of this review will be posted on AHRQ's EPC Program website and available for public comment for a period of 4 weeks. If you would like to be notified when the draft is posted, please sign up for the email list at:

<https://www.effectivehealthcare.ahrq.gov/email-updates>.

*The technical brief will answer the following questions. This information is provided as background. AHRQ is not requesting that the public provide answers to these questions.*

#### Guiding Questions

The five questions below guide our work in synthesizing a description of research, ongoing efforts, and directions in measuring primary care spending.

1. What are the definitions, data sources, and methodologies used to estimate primary care spending in published reports?

a. How do these various primary care spending estimation methods vary by:

- i. Relative pros and cons of each estimation method
- ii. Administrative burden
- iii. Range of spending estimates
- iv. Sensitivity analyses

b. What is the evidence of the relationship between different primary care spending estimation methods and the absolute and relative levels of primary care spending and health outcomes including morbidity, mortality, quality of life, and health equity?

2. What are the research gaps in understanding primary care spending estimation methods based on the findings of the evidence map?

3. What are considerations for developing valid and standardized estimation of primary care spending?

4. What are approaches that health economists, health services researchers, payers, health systems, and policymakers can employ to develop and implement a standardized measure of primary care spending and to assess spending over time, across payers/populations, and across states?

5. Contextual Questions:

a. Is there any emerging consensus among experts in the field toward a standard or preferred method for assessment of primary care spending?

b. How have policymakers and other decision makers used primary care spending measures?

Dated: May 22, 2023.

**Marquita Cullom,**  
Associate Director.

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