Senior Executive Service and Senior Level members; and (2) making recommendations on other performance management issues, such as pay adjustments, bonuses, and Presidential Rank Awards. The names, position titles, and appointment types of each member of the PRB are set forth below:

1. Sylvia Rosabal, Director, Office of Cuba Broadcasting, Non-Career SES
2. Grant Turner, Chief Financial Officer, Career SES
3. David Kotz, Chief Management Officer, Career SES

Dated: November 27, 2023.

Armanda Matthews,

Program Support Specialist, U.S. Agency for Global Media.

[FR Doc. 2023–26476 Filed 11–30–23; 8:45 am]

BILLING CODE 8610–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Board of Scientific Counselors, Office of Readiness and Response; (Formerly Known as the Board of Scientific Counselors, Center for Preparedness and Response); Notice of Charter Renewal

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of charter renewal.

SUMMARY: The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), announces the renewal of the charter of the Board of Scientific Counselors, Office of Readiness and Response (BSC, ORR); (formerly known as the Board of Scientific Counselors, Center for Preparedness and Response (BSC, CPR)).

FOR FURTHER INFORMATION CONTACT: Ian Williams, Ph.D., M.S., Designated Federal Officer, Board of Scientific Counselors, Office of Readiness and Response, Centers for Disease Control and Prevention, Department of Health and Human Services, 1600 Clifton Road NE, Mailstop H21–5, Atlanta, Georgia 30329–4027. Telephone: (404) 639–2210; Email: *IWilliams@cdc.gov.*

SUPPLEMENTARY INFORMATION: CDC is providing notice under 5 U.S.C. 1001–1014 of the renewal of the charter of the Board of Scientific Counselors, Office of Readiness and Response (formerly known as the Board of Scientific Counselors, Center for Preparedness and Response), Centers for Disease Control and Prevention, Department of Health and Human Services. This charter has been renewed for a two-year period through November 5, 2025.

The Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Kalwant Smagh,

Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2023–26420 Filed 11–30–23; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC–2022–0116]

CDC Recommendations for Hepatitis C Testing Among Perinatally Exposed Infants and Children—United States, 2023

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: General notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), announces the availability of the final *CDC Recommendations for Hepatitis C Testing Among Perinatally Exposed Infants and Children—United States, 2023.*

DATES: The final document was published as an MMWR Reports & Recommendations on November 3, 2023.

ADDRESSES: The document may be found in the docket at *www.regulations.gov,* Docket No. CDC–2022–0116 and at *https://www.cdc.gov/mmwr/volumes/72/rr/rr7204a1.htm?s_cid=rr7204a1_w.*

FOR FURTHER INFORMATION CONTACT: Lakshmi Panagiotakopoulos, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop U12–3, Atlanta, GA 30329. Telephone: 404–639–8000; Email: *DVHpolicy@cdc.gov.*

SUPPLEMENTARY INFORMATION: In 2021, CDC determined that *Recommendations for Hepatitis C Testing Among Perinatally Exposed Infants and Children—United States, 2023* constituted influential scientific information (ISI) that will have a clear and substantial impact on important public policies and private sector decisions. As such, the recommendations underwent peer review as required by Part II Section D of the HHS Information Quality Guidelines (*https://aspe.hhs.gov/hhs-guidelines-ensuring-maximizing-disseminated-information*). HHS developed these guidelines in accordance with the OMB issued Guidelines for Ensuring and Maximizing the Quality, Objectivity, Utility, and Integrity of lnformation Disseminated by Federal Agencies, 67 FR 8452 (Feb. 22, 2002) and the Information Quality Act Public Law 106–554, 515(a) (2000). CDC elected to use specialists in the field who were not involved in the development of the recommendations. CDC solicited nominations for reviewers from the American Academy of Family Physicians, American Academy of Pediatrics, American Association for the Study of Liver Diseases, American College of Obstetricians and Gynecologists, and the North American Society for Pediatric Gastroenterology, Hepatology & Nutrition. Six clinicians with expertise in hepatology, gastroenterology, internal medicine, infectious diseases, and/or pediatrics provided structured peer reviews. Specifically, CDC asked reviewers to focus their reviews on the following criteria:

- Methodology (studies included in the evidence review, methods used to assess the evidence, clarity of evidence findings, identification of limitations or uncertainties)
- Recommendations (reviewer agreement with CDC's conclusions, suggestions for clarifying recommendations)
- Potential impact and implementation (whether implementing recommendations would improve health outcomes, any resources or tools that would facilitate implementation)
- Other comments for CDC consideration

A list of peer reviewers and CDC's responses to peer review comments are available at CDC's Viral Hepatitis Influential Scientific Information web page at *https://www.cdc.gov/hepatitis/policy/isireview/index.htm.*

In addition, on November 22, 2022, CDC published a notice in the **Federal Register** (87 FR 71330) to obtain public

comment on the draft recommendations for hepatitis B screening and testing. The comment period closed on January 27, 2023. CDC received 22 comments pertaining to the draft recommendations document. Public comments were received from the general public, health care providers, advocacy groups, industry, medical professional associations, thinktanks and a public health department.

Twelve of the comments expressed full support for the recommendations. Two comments were critical of the approach and recommended keeping the current recommendation of HCV antibody testing at age ≥18 months. CDC also received comments about: testing infants and children when maternal HCV status is unknown; follow up after receiving test results; testing siblings of perinatally infected infants; stigma and harms of HCV testing; suggested scientific content and implementation guidance; and editorial comments. CDC addressed these comments by correcting, clarifying, or updating content in the final recommendations. A summary of public comments and CDC's response can be found in the Documents tab of the docket, as well as CDC Stacks at *https://stacks.cdc.gov/view/cdc/134020.*

Tiffany Brown,

Executive Secretary, Centers for Disease Control and Prevention.

[FR Doc. 2023–26422 Filed 11–30–23; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–24–24BG; Docket No. CDC–2023–0095]

Proposed Data Collection Submitted for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled National Center for Chronic Disease Prevention and Health Promotion: Work Plans, Progress Monitoring, and Evaluation Reporting (NCCDPHP WPPMER). The NCCDPHP WWPMER ICR is intended to be a Generic collection mechanism for cooperative agreement awardee work plans, evaluation plans, progress reports and evaluation reports, and will enable the accurate, reliable, uniform and timely submission to NCCDPHP of each awardee's work plans, progress reports, and evaluation reports, including strategies and activities, evaluation plans, progress and performance measures, and outcomes and success stories.

DATES: CDC must receive written comments on or before January 30, 2024.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2023–0095 by either of the following methods:

- *Federal eRulemaking Portal: www.regulations.gov.* Follow the instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to *www.regulations.gov.*

Please note: Submit all comments through the Federal eRulemaking portal (*www.regulations.gov*) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329; phone: 404–639–7118; Email: *omb@cdc.gov.*

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
3. Enhance the quality, utility, and clarity of the information to be collected;
4. Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.,* permitting electronic submissions of responses; and
5. Assess information collection costs.

Proposed Project

National Center for Chronic Disease Prevention and Health Promotion: Work Plans, Progress Monitoring, and Evaluation Reporting (NCCDPHP WPPMER)—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Each year, more than 80% of the budget for the Centers for Disease Control and Prevention (CDC) and the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) is distributed to awardees such as state health departments, universities, and other organizations, primarily through cooperative agreements. The structure of cooperative agreements is such that awardees and CDC project officers, subject matter experts, and technical monitors work together on designing projects intended to improve public health.

Currently there is no single information collection mechanism that encompasses all collection needs for cooperative agreements. NCCDPHP seeks OMB approval to use Generic Information Collection Request (ICR) templates to collect work plan, monitoring, and/or evaluation information from cooperative agreement awardees. The proposed Generic ICR will allow the creation of individualized templates or forms for each phase of each award.