

Chief Artificial Intelligence Officer, and Office of the HHS Chief Data Officer will no longer be part of ONC.

Part A, Office of the Secretary, Statement of Organization, Functions, and Delegations of Authority for the Department of Health and Human Services, Chapter AR, Office of the National Coordinator for Health Information Technology (ONC), as last amended at 89 FR 60903 (July 29, 2024), 83 FR 19289 (May 2, 2018), 79 FR 31941 (June 3, 2014), 77 FR 29349–50 (May 17, 2012), 76 FR 65196 (Oct. 20, 2011), 76 FR 6795 (Feb. 8, 2011), 75 FR 49494 (Aug. 13, 2010), 74 FR 62785–86 (Dec. 1, 2009), 70 FR 48718–03 (Aug. 19, 2005) is amended.

The prior **Federal Register** Notice is amended as follows:

I. Under AR.10, Organization, delete all of components and replace with the following:

- A. Immediate Office of the National Coordinator (ARA)
- B. Office of Programs and Implementation (ARI)
- C. Office of Standards, Certification, and Analysis (ARC)

II. Delete AR.20, Functions, in its entirety and replace with the following:

Section AR.20, Functions

A. Immediate Office of the National Coordinator: The Immediate Office (IO) is headed by the National Coordinator for Health Information Technology (henceforth referred to as the National Coordinator), who provides leadership and executive and strategic direction for the Office of the National Coordinator for Health Information Technology. The National Coordinator is responsible for carrying out ONC's mission and implementing the functions of the organization. The IO: (1) advances the interoperability of health information as central and foundational to the core mission of HHS to enhance and protect the health and well-being of all Americans; (2) ensures that health information technology (IT) initiatives for health and human services are coordinated across HHS programs, including aligning health information technology investments; (3) ensures that the health IT policy and programs of HHS are coordinated with those of relevant executive branch agencies (including Federal commissions and advisory committees) with a goal of avoiding duplication of effort and of helping to ensure that each agency undertakes activities primarily within the areas of its greatest expertise and technical capability; (4) leads the efforts to promulgate health IT regulations that advance interoperability across the entire health care sector, including

across behavioral health, human services, and public health sectors; (5) leads Federal and industry efforts to advance the access, exchange, and use of health information across the healthcare sector. The Principal Deputy National Coordinator, a part of the IO, works with and reports directly to the National Coordinator and is responsible for supporting the National Coordinator in day-to-day programmatic operations and strategy for ONC, and programmatic staff management of the organization. The Principal Deputy National Coordinator is a career senior executive service position that, in conjunction with the National Coordinator, provides executive oversight for the activities of ONC offices.

The Deputy National Coordinator for Operations/Chief Operating Officer (henceforth referred to as the Chief Operating Officer) works with and reports directly to the National Coordinator. The Chief Operating Officer is a career senior executive service position. The Chief Operating Officer manages enterprise risk and formulates solutions to ensure ONC has the resources to achieve its mission and goals, ensures fiscal integrity and adherence to federal laws and regulations; and leads agency-wide strategy and services that are operational in nature.

B. Office of Programs and Implementation: The Office of Programs and Implementation is headed by a Deputy National Coordinator who serves as the Executive Director. The Deputy National Coordinator/Executive Director of the Office of Programs and Implementation is a career senior executive service position. This office is responsible for: (1) policy and rulemaking activities, including implementation of provisions included in the Health Information Technology for Economic and Clinical Health Act (HITECH Act) and the 21st Century Cures Act; (2) ONC's domestic and global health IT initiatives; (3) coordination with executive branch agencies, Federal commissions, advisory committees, and external partners; (4) advanced analysis and the establishment of health IT policies for ONC and HHS to support health and human services initiatives, including in the areas of behavioral health, care transformation, health IT investment alignment, human services, information blocking, interoperability, privacy and security, and quality improvement; and (5) operational support for the Health Information Technology Advisory Committee established in the 21st Century Cures Act.

C. Office of Standards, Certification, and Analysis: The Office of Standards, Certification, and Analysis is headed by a Deputy National Coordinator who serves as the Executive Director. The Deputy National Coordinator/Executive Director of the Office of Standards, Certification, and Analysis is a career senior executive service position. This office is responsible for: (1) executing provisions included in the HITECH Act and the 21st Century Cures Act; (2) providing technical leadership and coordination within the health IT community to identify, evaluate, and influence the development of standards, implementation guidance, and best practices to advance nationwide interoperability for health and human services initiatives; (3) coordinating with Federal agencies and other public and private partners to implement and advance interoperability nationwide for health and human services initiatives; (4) leading the development of electronic testing tools, resources, and data to achieve interoperability, enhanced usability, and aid in the optimization of health IT; (5) administering the ONC Health IT Certification Program, including the Certified Health IT Product List; (6) and leading ONC's technical interoperability interests and investments to advance the development of innovative solutions for interoperability.

III. Delegation of Authority.

Pending further delegation, directives, or orders by the Secretary or by the National Coordinator all delegations and redelegations of authority made to officials and employees of affected organizational components will continue in them or their successors pending further redelegations, provided they are consistent with this reorganization.

Robert F. Kennedy, Jr.,

Secretary, U.S. Department of Health and Human Services.

[FR Doc. 2026-06284 Filed 3-31-26; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of an Exclusive Patent License: Pigment Epithelium-Derived Factor (PEDF) Peptides and Use for Treating Retinal Degeneration

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Eye Institute, an institute of the National Institutes of Health, United States Department of Health and Human Services, is contemplating the grant of an Exclusive Patent License to practice the inventions embodied in the patent applications listed in the **SUPPLEMENTARY INFORMATION** section of this notice to Perpetual Biosciences, Inc., a company located in New York, NY.

DATES: Only written comments and/or applications for a license which are received by the National Cancer Institute's Technology Transfer Center, representing the National Eye Institute, on or before April 16, 2026 will be considered.

ADDRESSES: Requests for copies of the patent application, inquiries, and comments relating to the contemplated an Exclusive Patent License should be directed to: Geoffrey E. Ravilious, Ph.D., NCI Technology Transfer Center, Telephone: 240-276-6391; Email: geoffrey.ravilious@nih.gov.

SUPPLEMENTARY INFORMATION:

Intellectual Property

1. United States Provisional Patent Application No. 63/430,251 filed December 5, 2022, entitled "PIGMENT EPITHELIUM-DERIVED FACTOR PEPTIDES AND USE FOR TREATING RETINAL DEGENERATION" [HHS Reference No. E-028-2023-0-US-01];

2. International Patent Application PCT/US2024/064947 filed March 24, 2023, entitled "PIGMENT EPITHELIUM-DERIVED FACTOR PEPTIDES AND USE FOR TREATING RETINAL DEGENERATION" [HHS Reference No. E-028-2023-0-PCT-01]; and

3. Australian Patent No. 2023390868 issued June 5, 2025, entitled "PIGMENT EPITHELIUM-DERIVED FACTOR PEPTIDES AND USE FOR TREATING RETINAL DEGENERATION" [HHS Reference No. E-028-2023-0-AU-01];

4. Canadian Patent Application No. 3,275,801 effective filing date of June 3, 2025, entitled "PIGMENT EPITHELIUM-DERIVED FACTOR PEPTIDES AND USE FOR TREATING RETINAL DEGENERATION" [HHS Reference No. E-028-2023-0-CA-01];

5. European Patent Application No. 23720018.3 filed July 1, 2025, entitled "PIGMENT EPITHELIUM-DERIVED FACTOR PEPTIDES AND USE FOR TREATING RETINAL DEGENERATION" [HHS Reference No. E-028-2023-0-EP-01];

6. Japanese Patent Application No. 2025-555099 effective filing date of June 4, 20125, entitled "PIGMENT EPITHELIUM-DERIVED FACTOR

PEPTIDES AND USE FOR TREATING RETINAL DEGENERATION" [HHS Reference No. E-028-2023-0-JP-01];

7. United States Patent No. 19/135,668, entitled "PIGMENT EPITHELIUM-DERIVED FACTOR PEPTIDES AND USE FOR TREATING RETINAL DEGENERATION" [HHS Reference No. E-028-2023-0-US-02].

8. United States Provisional Patent Application No. 63/604,026 filed November 29, 2023, entitled "MODIFIED PIGMENT EPITHELIUM-DERIVED FACTOR PEPTIDES AND METHODS OF USE" [HHS Reference No. E-028-2023-0-US-01]; and

9. PCT Patent Application No. PCT/US2024/057784 filed November 27, 2024, entitled "MODIFIED PIGMENT EPITHELIUM-DERIVED FACTOR PEPTIDES AND METHODS OF USE" [HHS Reference No. E-028-2023-0-PCT-01];

10. any and all other U.S. and ex-U.S. patents and patent applications claiming priority to any one of the foregoing, now or in the future.

The patent rights in these inventions have been assigned to the Government of the United States of America.

The prospective exclusive license territory may be worldwide and the field of use may be limited to the following:

"Peptide therapeutics for human ophthalmological diseases that may include but not be limited to retinitis pigmentosa, glaucoma, or age-related macular degeneration."

This technology describes chemically synthesized peptide fragments derived from PEDF, a naturally occurring neurotrophic factor that is produced by retinal pigment epithelia. The biological roles of PEDF suggest that peptide fragments of PEDF have the potential to treat multiple diseases that fall within the Field of Use. Efforts to utilize native PEDF for therapeutic effect, as well as many invasive gene therapy approaches, have had minimal effect on outcomes for patients with ophthalmic diseases that result from neurodegeneration or retinal cell death. The subject invention potentially addresses the limited efficacy of approved therapeutic treatments for ophthalmic diseases that result from neurodegenerative pathologies and/or retinal cell death.

This Notice is made in accordance with 35 U.S.C. 209 and 37 CFR part 404. The prospective exclusive license will be royalty bearing, and the prospective exclusive license may be granted unless within fifteen (15) days from the date of this published notice, the National Eye Institute, receives written evidence and argument that establishes that the grant of the license would not be consistent

with the requirements of 35 U.S.C. 209 and 37 CFR part 404.

Complete applications for a license that are timely filed in response to this notice will be treated as objections to the grant of the contemplated exclusive patent license. In response to this Notice, the public may file comments or objections. Comments and objections, other than those in the form of a license application, will not be treated confidentially, and may be made publicly available.

License applications submitted in response to this Notice will be presumed to contain business confidential information and any release of information in these license applications will be made only as required and upon a request under the Freedom of Information Act, 5 U.S.C. 552.

Dated: March 30, 2026.

Richard U. Rodriguez,

Associate Director, Technology Transfer Center, National Cancer Institute.

[FR Doc. 2026-06283 Filed 3-31-26; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection: 30-Day Comment Request; NCI Genomic Data Commons (GDC) Data Submission Request Form (National Cancer Institute)

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995 to provide an opportunity for public comment on proposed data collection projects, the National Institutes of Health, National Cancer Institute (NCI) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

DATES: Comments regarding this information collection are best assured of having their full effect if received by May 1, 2026.

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.