

INTENDED RECIPIENT OF THE AWARD: CURRENT OUTREACH GRANTEES (QUANTITY: 69)—Continued

Grant No.	Grantee name	City	State	Amount
D04RH23621	Spectrum Health Hospitals	Greenville	MI	Not to exceed \$25,000.
D04RH23622	Sterling Area Health Center	Sterling	MI	Not to exceed \$25,000.
D04RH23623	Upper Great Lakes Family Health Center	Gwinn	MI	Not to exceed \$25,000.
D04RH23624	Western Upper Peninsula District Health Department.	Hancock	MI	Not to exceed \$25,000.
D04RH23568	County of Koochiching	International Falls	MN	Not to exceed \$25,000.
D04RH23601	Mississippi Headwaters Area Dental Health Center.	Bemidji	MN	Not to exceed \$25,000.
D04RH23566	Citizens Memorial Hospital District	Bolivar	MO	Not to exceed \$25,000.
D04RH23574	Freeman Neosho Hospital	Neosho	MO	Not to exceed \$25,000.
D04RH23579	Health Care Coalition of Lafayette County	Lexington	MO	Not to exceed \$25,000.
D04RH23608	Northeast Missouri Health Council, Inc	Kirksville	MO	Not to exceed \$25,000.
D04RH23563	Central Mississippi Residential Center	Newton	MS	Not to exceed \$25,000.
D04RH23562	Butte Silver Bow Primary Health Care Clinic, Inc AKA Butte Community Health Center.	Butte	MT	Not to exceed \$25,000.
D04RH23578	Granite County Medical Center	Philipsburg	MT	Not to exceed \$25,000.
D04RH23594	Madison Valley Hospital Association, Inc	Ennis	MT	Not to exceed \$25,000.
D04RH23602	Seely Swan Hospital District	Seeley Lake	MT	Not to exceed \$25,000.
D04RH25707	Partnership for Children of the Foothills	Forest City	NC	Not to exceed \$25,000.
D04RH23605	Nebraska Association of Local Health Directors	Kearney	NE	Not to exceed \$25,000.
D04RH23610	Public Health Solutions	Crete	NE	Not to exceed \$25,000.
D04RH23597	Mary Hitchcock Memorial Hospital/Dartmouth-Hitchcock Medical Center.	Lebanon	NH	Not to exceed \$25,000.
D04RH23600	Mid-State Health Center	Plymouth	NH	Not to exceed \$25,000.
D04RH23607	North Country Health Consortium Inc	Littleton	NH	Not to exceed \$25,000.
D04RH23559	Ben Archer Health Center	Hatch	NM	Not to exceed \$25,000.
D04RH23581	Hidalgo Medical Services	Lordsburg	NM	Not to exceed \$25,000.
D04RH23564	Chautauqua County Health Network, Inc	Jamestown	NY	Not to exceed \$25,000.
D04RH23565	Chautauqua Opportunities, Inc	Dunkirk	NY	Not to exceed \$25,000.
D04RH23573	Fostoria Community Hospital	Fostoria	OH	Not to exceed \$25,000.
D04RH23617	Trinity Hospital Twin City	Dennison	OH	Not to exceed \$25,000.
D04RH23587	La Clinica Del Carino	Hood River	OR	Not to exceed \$25,000.
D04RH23613	Samaritan North Lincoln Hospital	Lincoln City	OR	Not to exceed \$25,000.
D04RH23557	Armstrong-Indiana Drug and Alcohol Commission, Inc.	Shelocta	PA	Not to exceed \$25,000.
D04RH26834	Community Guidance Center	Indiana	PA	Not to exceed \$25,000.
D04RH23570	Delta Dental Plan of South Dakota	Pierre	SD	Not to exceed \$25,000.
D04RH23612	Sacred Heart Health Service	Yankton	SD	Not to exceed \$25,000.
D04RH23619	University of South Dakota	Vermillion	SD	Not to exceed \$25,000.
D04RH23561	Buffalo Valley, Inc	Hohenwald	TN	Not to exceed \$25,000.
D04RH23593	Madison County	Madisonville	TX	Not to exceed \$25,000.
D04RH23577	Giles Free Clinic	Pearisburg	VA	Not to exceed \$25,000.
D04RH23558	Behavioral Health Network of Vermont	Montpelier	VT	Not to exceed \$25,000.
D04RH23560	Bi-State Primary Care Association	Montpelier	VT	Not to exceed \$25,000.
D04RH23555	ABC for Rural Health, Inc	Balsam Lake	WI	Not to exceed \$25,000.
D04RH23575	Future Generations	Circleville	WV	Not to exceed \$25,000.

Amount of Non-Competitive Awards: \$25,000/award

Period of Supplemental Funding: To be used in the current fiscal year (FY) 2014 budget period

CFDA Number: 93.912

Authority: Public Health Service Act, Section 330A (e) (42 U.S.C. 254(c)), as amended.

Justification: A greater proportion of rural residents lack health insurance in comparison to urban residents. With millions still uninsured, this supplemental funding will allow current Outreach grantees an opportunity to specifically employ and tailor ACA outreach and enrollment efforts to the uninsured population in rural communities for the upcoming Health Insurance Marketplace open

enrollment period (November 15, 2014–February 15, 2015). Additionally, Outreach grantees will be able help educate the newly insured rural Americans about the health insurance coverage and care to which they now have access.

**FOR FURTHER INFORMATION CONTACT:**

Linda Kwon, MPH, Community Based Division, Office of Rural Health Policy, Health Resources and Services Administration, 5600 Fishers Lane, Room 17W29C, Rockville, MD 20857, phone: (301) 594–4205, or email: [Lkwon@hrsa.gov](mailto:Lkwon@hrsa.gov).

Dated: August 7, 2014.

**Mary K. Wakefield,**  
Administrator.

[FR Doc. 2014–19200 Filed 8–13–14; 8:45 am]

**BILLING CODE 4165–15-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Substance Abuse and Mental Health Services Administration**

**Center for Mental Health Services; Notice of Meeting**

Pursuant to Public Law 92–463, notice is hereby given that the Substance Abuse and Mental Health Services Administration’s (SAMHSA) Center for Mental Health Services (CMHS) National Advisory Council will meet August 26, 2014, 1:00 p.m. to 5:00 p.m., Eastern Daylight Time (EDT).

The meeting will include discussion and evaluation of grant applications reviewed by Initial Review Groups, and involve an examination of confidential

financial and business information as well as personal information concerning the applicants. Therefore, the meeting will be closed to the public from 1:00 p.m. to 3:00 p.m. as determined by the SAMHSA Administrator, in accordance with Title 5 U.S.C. 552b(c)(4) and (6) and (c)(9)(B) and 5 U.S.C. App. 2, Section 10(d). The remainder of the meeting is open and will include discussion of SAMHSA's Common Data Platform and program developments.

Substantive program information, a summary of the meeting and a roster of Council members may be obtained as soon as possible after the meeting, by accessing the SAMHSA Committee Web site at <https://nac.samhsa.gov/CMHScouncil/Index.aspx>, or by contacting the CMHS National Advisory Council's Designated Federal Official, Ms. Deborah DeMasse-Snell (see contact information below).

**Committee Name:** SAMHSA'S Center for Mental Health Services National Advisory Council.

**Date/Time/Type:** August 26, 2014, 1:00 p.m. to 3:00 p.m. (EDT) CLOSED, August 26, 2014, 3:00 p.m. to 5:00 p.m. (EDT) OPEN.

**Place:** SAMHSA Building, 1 Choke Cherry Road, Conference Room 6-1060, Rockville, Maryland 20857.

**Contact:** Deborah DeMasse-Snell, M.A. (Than), Designated Federal Official, SAMHSA CMHS National Advisory Council, 1 Choke Cherry Road, Room 6-1084, Telephone: (240) 276-1861, Fax: (240) 276-1850, E-Mail: [Deborah.DeMasse-Snell@samhsa.hhs.gov](mailto:Deborah.DeMasse-Snell@samhsa.hhs.gov).

**Cathy J. Friedman,**

*Public Health Analyst, SAMHSA.*

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## DEPARTMENT OF HOMELAND SECURITY

[Docket Number DHS-2014-0042]

### Environmental Planning and Historic Preservation Program

**AGENCY:** Department of Homeland Security.

**ACTION:** Notice of Programmatic Environmental Assessment and Finding of No Significant Impact for departmental actions to address the increased influx of unaccompanied children and families across the southwest border of the United States.

**SUMMARY:** Notice is hereby given that the Department of Homeland Security (DHS or Department) has prepared a Programmatic Environmental

Assessment (PEA) and Finding of No Significant Impact (FONSI) for actions to address the influx of unaccompanied alien children and families across the southwest border of the United States. The PEA was prepared pursuant to the National Environmental Policy Act (NEPA) of 1969 (42 U.S.C. 4321 et seq.), the Council on Environmental Quality Regulations for implementing the procedural provisions of NEPA (40 CFR Parts 1500-1508), and the Department's NEPA procedures (Directive 023-01, Environmental Planning Program).

**DATES:** The Programmatic Environmental Assessment and Finding of No Significant Impact documents are being made available for public inspection for thirty (30) days.

**FOR FURTHER INFORMATION CONTACT:** For NEPA-related inquiries, contact: Dr. Teresa R. Pohlman, Director, Sustainability and Environmental Programs, Office of the Chief Readiness Support Officer, Management Directorate, Department of Homeland Security by any of the following means: By mail to 245 Murray Lane SW., Mail Stop 0075, Washington, DC 20528-0075; by calling 202-343-4051; or by emailing [SEP-EPHP@hq.dhs.gov](mailto:SEP-EPHP@hq.dhs.gov). Media inquiries regarding the DHS response to and operations regarding the influx of unaccompanied alien children and families may be emailed to the DHS Office of Public Affairs at [mediainquiry@dhs.gov](mailto:mediainquiry@dhs.gov). For further information on the DHS response to the humanitarian situation, visit [www.dhs.gov/uac](http://www.dhs.gov/uac).

**SUPPLEMENTARY INFORMATION:** The June 2, 2014, Presidential Memorandum *Response to the Influx of Unaccompanied Alien Children Across the Southwest Border* directed the Secretary of the Department of Homeland Security to establish an interagency Unified Coordination Group to ensure unity of effort across the executive branch in responding to the humanitarian aspects of the situation, consistent with the Homeland Security Act of 2002 and Homeland Security Presidential Directive-5 (Management of Domestic Incidents), including coordination with State, local, and other nonfederal entities. In addition to the influx of unaccompanied alien children, there is also an increase in the number of family units entering the United States.

The Department of Homeland Security (DHS) is responsible for the apprehension, processing, detention, and removal of such persons crossing the southwest border into the United States without authorization. The increased influx in the number of

apprehended persons has the potential to fill or exceed the capacity of the DHS support resources and infrastructure (real property for processing and housing apprehended persons, services including medical care, transportation, utilities, meals, hygiene, recreation, etc.) currently available.

The purpose of the Proposed Action is to implement the DHS response to the influx of unaccompanied alien children and family units entering the United States across the southwest border, and to identify a process for efficient and effective environmental review for action(s) subject to NEPA.

The need for the Proposed Action is based on the existing and expected increase in the number of apprehended persons being processed that may exceed the then current capacity of the DHS support resources and infrastructure. In addition, the need for the proposed action is to meet the requirements in the June 2, 2014 Presidential Memorandum to address the humanitarian situation.

The PEA evaluated two alternatives: the No Action Alternative and the Proposed Action Alternative. Under the Proposed Action Alternative, DHS proposes to increase, in accelerated fashion, its capacity for managing unaccompanied alien children and family units crossing the southwest border of the United States until said persons can have their status determined or, in the case of unaccompanied alien children, can be transferred to the Department of Health and Human Services. Increased DHS capacity is needed in the following areas: temporary detention space and housing, transportation, childcare, and medical care.

Under the No Action Alternative, no additional facilities and services would be acquired in an accelerated fashion. Unaccompanied alien children and family units would be detained in custody for unacceptable lengths of time in overcrowded and potentially unsafe and unhealthy conditions which do not meet standards acceptable to the United States. Because of the potential for adverse impacts to human health and safety if there is no accelerated increase in facilities and services to address the influx of unaccompanied alien children and family units, the No-Action Alternative is not viable.

The PEA and FONSI are available on the internet at [www.dhs.gov/nepa](http://www.dhs.gov/nepa) and [www.regulations.gov](http://www.regulations.gov) (Docket Number DHS-2014-0042).