

comment received on the Notice of Proposed Rulemaking on Federal Policy for the Protection of Human Subjects. The Subpart A Subcommittee (SAS) will then present their draft work products, including considerations for single IRB review and minimal risk informed consent models. On Thursday, May 19, the Subcommittee on Harmonization (SOH) will present revisions to their recommendations on clustered randomized trials, the return of individual research results, and benchmarking.

SAS was established by SACHRP in October 2006 and is charged with developing recommendations for consideration by SACHRP regarding the application of subpart A of 45 CFR part 46 in the current research environment.

SOH was established by SACHRP at its July 2009 meeting and charged with identifying and prioritizing areas in which regulations and/or guidelines for human subjects research adopted by various agencies or offices within HHS would benefit from harmonization, consistency, clarity, simplification and/or coordination.

The meeting will adjourn at 4:30 p.m. May 19, 2016. Time for public comment sessions will be allotted both days.

Public attendance at the meeting is limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify one of the designated SACHRP points of contact at the address/phone number listed above at least one week prior to the meeting. Registration is required for participation in the on-site public comment session; individuals may register on the day of the meeting. Individuals who would like to submit written statements as public comment should email or fax their comments to SACHRP at SACHRP@hhs.gov at least five business days prior to the meeting. Note that public comment should be relevant to agenda topics.

Dated: April 21, 2016.

Julia Gorey,

Executive Secretary, Secretary's Advisory Committee on Human Research Protections, Office for Human Research Protections.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the Chronic Fatigue Syndrome Advisory Committee

AGENCY: Office of the Secretary, Office of the Assistant Secretary for Health,

Department of Health and Human Services.

ACTION: Notice.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Services (DHHS) is hereby giving notice that a meeting of the Chronic Fatigue Syndrome Advisory Committee (CFSAC) will take place via webinar and will be open to the public.

DATES: The CFSAC webinar will be held on Tuesday, May 17, 2016 and Wednesday, May 18, 2016, from 12:00 p.m. until 5:00 p.m. (ET).

ADDRESSES: The meeting will be conducted via webinar. This will not be an in-person meeting.

FOR FURTHER INFORMATION CONTACT:

Nancy C. Lee, M.D., Designated Federal Officer, Chronic Fatigue Syndrome Advisory Committee, Department of Health and Human Services, 200 Independence Avenue SW., Room 712E, Washington, DC 20201. Please direct all inquiries to cfsac@hhs.gov.

SUPPLEMENTARY INFORMATION: The CFSAC is authorized under 42 U.S.C. 217a, Section 222 of the Public Health Service Act, as amended. The purpose of the CFSAC is to provide advice and recommendations to the Secretary of Health and Human Services (HHS), through the Assistant Secretary for Health (ASH), on issues related to myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS). The issues can include factors affecting access and care for persons with ME/CFS; the science and definition of ME/CFS; and broader public health, clinical, research, and educational issues related to ME/CFS.

The agenda for this meeting and call-in information will be posted on the CFSAC Web site <http://www.hhs.gov/advcomcfs/index.html>.

Thirty minutes of public comment via telephone will be scheduled for each day of the webinar. Individuals will have three minutes to present their comments. Priority will be given to individuals who have not provided public comment within the previous year. We are unable to place international calls for public comments. To request a time slot for public comment, please send an email to cfsac@hhs.gov by May 9, 2016. The email should contain the speaker's name and the phone number that will be used for public comment.

Individuals who would like for their testimony to be provided to the Committee members should submit a copy of the testimony prior to the meeting. It is preferred that the

submitted testimony be prepared in digital format and typed using a 12-pitch typeface. It must not exceed 5 single-space pages and is preferred that the document be prepared in the MS Word format. Please note that PDF files, handwritten notes, charts, and photographs cannot be accepted. Materials submitted should not include sensitive personal information, such as social security number, birthdates, driver's license number, passport number, financial account number, or credit or debit card number. If you wish to remain anonymous the document must specify this. The Committee welcomes input on any topic related to ME/CFS.

Dated: April 21, 2016.

Nancy C. Lee,

Designated Federal Officer, Chronic Fatigue Syndrome Advisory Committee.

[FR Doc. 2016-09840 Filed 4-26-16; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Notice of Interest Rate on Overdue Debts

Section 30.18 of the Department of Health and Human Services' claims collection regulations (45 CFR part 30) provides that the Secretary shall charge an annual rate of interest, which is determined and fixed by the Secretary of the Treasury after considering private consumer rates of interest on the date that the Department of Health and Human Services becomes entitled to recovery. The rate cannot be lower than the Department of Treasury's current value of funds rate or the applicable rate determined from the "Schedule of Certified Interest Rates with Range of Maturities" unless the Secretary waives interest in whole or part, or a different rate is prescribed by statute, contract, or repayment agreement. The Secretary of the Treasury may revise this rate quarterly. The Department of Health and Human Services publishes this rate in the **Federal Register**.

The current rate of 10.00%, as fixed by the Secretary of the Treasury, is certified for the quarter ended March 31, 2016. This rate is based on the Interest Rates for Specific Legislation, "National Health Services Corps Scholarship Program (42 U.S.C. 254o(b)(1)(A))" and "National Research Service Award Program (42 U.S.C. 288(c)(4)(B))." This interest rate will be applied to overdue debt until the Department of Health and Human Services publishes a revision.

Dated: April 15, 2016.

David C. Horn,

Director, Office of Financial Policy and Reporting.

[FR Doc. 2016-09758 Filed 4-26-16; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Office of Human Resources; Medical Professionals Recruitment and Continuing Education Programs

Announcement Type: New Limited

Competition Cooperative Agreement

Funding Announcement Number: HHS-2016-IHS-HPR-0001

Catalog of Federal Domestic Assistance Number: 93.970

Key Dates

Application Deadline Date: June 27, 2016

Review Date: July 5–8, 2016

Earliest Anticipated Start Date: July 15, 2016

Proof of Non-Profit Status Due Date: June 27, 2016

I. Funding Opportunity Description

Statutory Authority

The Indian Health Service (IHS) is accepting competitive cooperative agreement applications for the Medical Professionals Recruitment and Continuing Education Program. This program is authorized under: The Snyder Act, 25 U.S.C. 13. This program is described in the Catalog of Federal Domestic Assistance (CFDA) under 93.970.

Background

The mission of the IHS is to raise the physical, mental, social and spiritual health of American Indians and Alaska Natives (AI/AN) to the highest level. The IHS, an agency within the Department of Health and Human Services (HHS), is responsible for providing Federal health services to AI/AN. The provision of health services to members of Federally-recognized Tribes grew out of the special government-to-government relationship between the Federal Government and Indian Tribes. The IHS is the principal Federal health care provider and health advocate for Indian people and its mission is to raise their health status to the highest possible level. The IHS provides a comprehensive health service delivery system for approximately 2.3 million AI/AN who belong to 567 Federally recognized Tribes in 35 states.

Purpose

The purpose of this IHS cooperative agreement is to enhance medical professional recruitment and continuing education programs, services and activities for AI/AN people. The agency wants to facilitate continuing medical education for AI/AN physicians, through annual meetings and other venues that are culturally competent and sensitive. Another purpose is to recruit AI/AN health professionals to pursue jobs that serve AI/AN people and improve the health care delivery system. A third purpose is to provide opportunities for AI/AN youth to learn about the various Federal agencies and possible careers within the Federal Government that will result in a national mentoring program and creation of a pipeline for AI/AN youth into health careers. IHS will provide funds in the amount of \$105,000 in the first year (Fiscal Year 2016 only) to be used to complete the following Fiscal Year 2016 activities:

- To support a national Native American youth conference, designed to expose high school students to health care careers, as well as prepare them for college with the goal of becoming health care providers.
- To offer freshman and sophomore undergraduate students educational workshops to help them explore and prepare them for health education and careers in health care and/or research.
- To offer junior and senior undergraduate students, preparing to apply for medical and health professions schools, educational opportunities designed to provide guidance regarding personal statement reviews, mock interviews, and mentorship on the admission process.

The purpose of the activities listed above is to increase the number of AI/AN youth pursuing careers in the health professions, thereby increasing the number of AI/AN medical professionals available to manage the chronic health challenges of AI/AN patients, including diabetes, hypertension, heart disease, and obesity.

Limited Competition Justification

Competition is limited to organizations with expertise in advancing the health of AI/AN people. This limitation is necessary in order for IHS to ensure that the training, education, and outreach provided through this award are provided in a culturally competent manner. Additionally, applicants must have experience hosting healthcare forums and meetings combining modern medicine and traditional health

practices to enhance health care delivery to AI/AN communities. Through such experience, applicants should have existing relationships with stakeholders that will encourage attendance at the meeting funded through this award. Applicants must offer educational programs, services and activities specifically tailored to motivating AI/AN students to remain in the academic pipeline and to pursue a career in the health professions and/or biomedical research. Finally, applicants must have experience in providing leadership and programs in various care arenas affecting AI/AN, such as diabetes mellitus, human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), domestic violence, and methamphetamine use, in order to address the most pressing healthcare needs of AI/AN communities.

Pre-Conference Grant Requirements: The awardee is required to comply with the "HHS Policy on Promoting Efficient Spending: Use of Appropriated Funds for Conferences and Meeting Space, Food, Promotional Items, and Printing and Publications," dated December 16, 2013 ("Policy"), as applicable to conferences funded by grants and cooperative agreements. The Policy is available at <http://www.hhs.gov/grants/contracts/contract-policies-regulations/conference-spending/>

The awardee is required to:

Provide a separate detailed budget justification and narrative for each conference anticipated. The cost categories to be addressed are as follows: (1) Contract/Planner, (2) Meeting Space/Venue, (3) Registration Web site, (4) Audio Visual, (5) Speakers Fees, (6) Non-Federal Attendee Travel, (7) Registration Fees, (8) Other (explain in detail and cost breakdown). For additional questions please contact Nannette Bellini on 301-443-0049 or email at Nannette.bellini@ihs.gov

II. Award Information

Type of Award

Cooperative Agreement.

Estimated Funds Available

The total amount of funding identified for the current fiscal year (FY) 2016 is approximately \$105,000. Individual award amounts are anticipated to be between \$25,000 and \$105,000. The amount of funding available for competing and continuation awards issued under this announcement are subject to the availability of appropriations and budgetary priorities of the Agency. The