

information and program focus, are regularly available online as tribal Web sites are not updated frequently. Therefore, the survey will enable the collection of the most accurate information possible.

The respondents include 424 LTSS programs run by AI/AN tribes. Once the survey has been conducted, CMS will feature the survey data, specifically a list of AI/AN managed LTSS programs, online on *CMS.gov*. The dissemination of survey data on *CMS.gov* will allow tribal communities and the general public to access this important data. Documentation of these programs will support sharing of LTSS best practices and innovative models employed in Indian Country. CMS will use the survey data to generate further content on LTSS in Indian Country, including literature reviews and reports on best practices.

Form Number: CMS-10651 (OMB control number: 0938-TBD); **Frequency:** Yearly; **Affected Public:** State, Local, or Tribal Governments; **Number of Respondents:** 425; **Total Annual Responses:** 425; **Total Annual Hours:** 106. (For policy questions regarding this collection contact John Johns at 410-786-7253).

Dated: June 29, 2017.

William N. Parham, III,

Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2017-14109 Filed 7-5-17; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Advisory Council on Alzheimer's Research, Care, and Services; Meeting

AGENCY: Assistant Secretary for Planning and Evaluation, HHS.

ACTION: Notice of meeting.

SUMMARY: This notice announces the public meeting of the Advisory Council on Alzheimer's Research, Care, and Services (Advisory Council). The Advisory Council provides advice on how to prevent or reduce the burden of Alzheimer's disease and related dementias on people with the disease and their caregivers. The Advisory Council will spend the morning discussing information gaps across the three areas of research, clinical care, and long term services and supports. There will also be a presentation on the recently released National Academy of Sciences, Engineering, and Medicine (NASEM) report on preventing cognitive decline. Additional presentations in the

afternoon will include a presentation on planning and progress towards the October Care and Services Summit and federal workgroup updates.

DATES: The meeting will be held on Friday, July 28, 2017 from 9:00 a.m. to 5:00 p.m. EDT.

ADDRESSES: The meeting will be held in Room 800 in the Hubert H. Humphrey Building, 200 Independence Avenue SW., Washington, DC 20201.

Comments: Time is allocated on the agenda in the afternoon to hear public comments. The time for oral comments will be limited to two (2) minutes per individual. In lieu of oral comments, formal written comments may be submitted for the record to Rohini Khillan, ASPE, 200 Independence Avenue SW., Room 424E, Washington, DC 20201. All comments should be submitted to napa@hhs.gov for the record and to share with the Advisory Council by July 21, 2017. Those submitting comments should identify themselves and any relevant organizational affiliations.

FOR FURTHER INFORMATION CONTACT:

Rohini Khillan (202) 690-5932, rohini.khillan@hhs.gov. Note: Seating may be limited. Those wishing to attend the meeting must send an email to napa@hhs.gov and put "July 28 Meeting Attendance" in the Subject line by Tuesday, July 18, 2017 so that their names may be put on a list of expected attendees and forwarded to the security officers the Humphrey Building. Any interested member of the public who is a non-U.S. citizen should include this information at the time of registration to ensure that the appropriate security procedure to gain entry to the building is carried out. Although the meeting is open to the public, procedures governing security and the entrance to federal buildings may change without notice. If you wish to make a public comment, you must note that within your email.

SUPPLEMENTARY INFORMATION: Notice of these meetings is given under the Federal Advisory Committee Act (5 U.S.C. App. 2, section 10(a)(1) and (a)(2)). Topics of the Meeting: The Advisory Council will spend the morning discussing information gaps across the three areas of research, clinical care, and long term services and supports. There will also be a presentation on the recently released National Academy of Sciences, Engineering, and Medicine (NASEM) report on preventing cognitive decline. Additional presentations in the afternoon will include a presentation on planning and progress towards the

October Care and Services Summit and federal workgroup updates.

Procedure and Agenda: This meeting is open to the public. Please allow 45 minutes to go through security and walk to the meeting room. The meeting will also be webcast at www.hhs.gov/live.

Authority: 42 U.S.C. 11225; Section 2(e)(3) of the National Alzheimer's Project Act. The panel is governed by provisions of Public Law 92-463, as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

Dated: June 27, 2017.

John R. Graham,

Acting Assistant Secretary for Planning and Evaluation.

[FR Doc. 2017-14156 Filed 7-5-17; 8:45 am]

BILLING CODE 4150-05-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier 0990-0421-30D]

Agency Information Collection Activities; Submission to OMB for Review and Approval; Public Comment Request

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, has submitted an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB) for review and approval. The ICR is for revision of the approved information collection assigned OMB control number 0990-0421, scheduled to expire on July 31, 2017. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public on this ICR during the review and approval period.

DATES: Comments on the ICR must be received on or before August 7, 2017.

ADDRESSES: Submit your comments to OIRA_submission@omb.eop.gov or via facsimile to (202) 395-5806.

FOR FURTHER INFORMATION CONTACT: Sherrette Funn, Sherette.Funn@hhs.gov or (202) 795-7714.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the document identifier 0990-0421-30D for reference.

Information Collection Request Title: ASPE Generic Clearance for the

Collection of Qualitative Research and Assessment.

OMB No.: 0990–0421.

Abstract: The Office of the Assistant Secretary for Planning and Evaluation (ASPE) is requesting an extension for their generic clearance for purposes of conducting qualitative research. ASPE conducts qualitative research to gain a better understanding of emerging health and human services policy issues, develop future intramural and extramural research projects, and to ensure HHS leadership, agencies and offices have recent data and information to inform program and policy decision-making. ASPE is requesting approval for at least four types of qualitative research which include, but are not limited to: (a) Interviews, (b) focus groups, (c) questionnaires, and (d) other qualitative methods.

ASPE’s mission is to advise the Secretary of the Department of Health and Human Services on policy development in health, disability, human services, data, and science, and provides advice and analysis on economic policy. ASPE leads special initiatives, coordinates the Department’s evaluation, research and demonstration activities, and manages cross-Department planning activities such as

strategic planning, legislative planning, and review of regulations. Integral to this role, ASPE will use this mechanism to conduct qualitative research, evaluation, or assessment, conduct analyses, and understand needs, barriers, or facilitators for HHS-related programs.

ASPE is requesting comment on the burden for qualitative research aimed at understanding emerging health and human services policy issues. The goal of developing these activities is to identify emerging issues and research gaps to ensure the successful implementation of HHS programs. The participants may include health and human services experts; national, state, and local health or human services representatives; public health, human services, or healthcare providers; and representatives of other health or human services organizations. The increase in burden from 747 in 2014 to 1,500 respondents in 2017 reflects an increase in the number of research projects conducted over the estimate in 2014.

Need and Proposed Use of the Information: The information collected for qualitative policy research and assessment will be used by ASPE to develop future intramural and extramural research projects and to

shape emerging health and human services policy issues for HHS leadership, agencies, and offices. The end purpose is to obtain broad and diverse perspectives on public health, human service, and health care issues to understand emerging issues, promising practices by innovative programs or organizations funded by HHS, or examining health or human service policy issues that have as yet gone unanswered or need further examination. Additionally, ASPE will collect, analyze, and interpret information gathered through this generic clearance to identify strengths and weaknesses of current programs, policies, and services.

Likely Respondents: Respondents have typically been stakeholders from the health and human services fields such as state health officers, human service professionals, groups that represent health or human services interests or populations, individual experts in the fields of health, human services, science, data, or other relevant professions, and other individuals and groups relevant to the work conducted by ASPE and HHS.

The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Health or Human Services Stakeholder	2,000	1	1	2,000
Total	2,000	1	1	2,000

Terry S. Clark,
Asst. Information Collection Clearance Officer.
[FR Doc. 2017–14211 Filed 7–5–17; 8:45 am]
BILLING CODE 4150–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Findings of Research Misconduct

AGENCY: Office of the Secretary, HHS.
ACTION: Notice.

Notice is hereby given that on June 22, 2017, the Department of Health and Human Services (HHS) took final action in the following case:

Frank Sauer, Ph.D., University of California, Riverside: Based on evidence and findings of an investigation

conducted by the University of California, Riverside (UCR), the Office of Research Integrity’s (ORI’s) review of UCR’s Research Misconduct Investigation Report, the Report of Investigation by the National Science Foundation (NSF) Office of Inspector General, additional evidence obtained by ORI during its oversight review of UCR’s investigation, and independent analyses conducted as part of ORI’s oversight review, ORI found that Dr. Frank Sauer, former Associate Professor of Biochemistry, UCR, committed research misconduct in research supported by the following National Institute of General Medical Sciences (NIGMS), National Institutes of Health (NIH) grants:

- R01 GM073776
- R01 GM066204

Images that were falsified and/or fabricated were presented in the

following publications and grant applications.

- Gou, D., Rubalcava, M., Sauer, S., Mora-Bermúdez, F., Erdjument-Bromage, H., Tempst, P., Kremmer, E., & Sauer, F. “SETDB1 is involved in postembryonic DNA methylation and gene silencing in *Drosophila*.” *PLoS One* 5(5):e10581, 2010 (hereafter referred to as “*PLoS One* 2010”).
- Sanchez-Elsner, T., Gou, D., Kremmer, E., & Sauer, F. “Noncoding RNAs of trithorax response elements recruit *Drosophila* Ash1 to Ultrabithorax.” *Science* 311(5764):1118–1123, 2006 (hereafter referred to as “*Science* 2006”).
- Maile, T., Kwoczynski, S., Katzenberger, R.J., Wassarman, D.A., & Sauer, F. “TAF1 activates transcription by phosphorylation of serine 33 in histone H2B.” *Science* 304(5673):1010–