

medicine, osteopathic medicine, physician assistant, or dentistry are encouraged to apply.

In making such appointments, the Secretary shall ensure a fair balance between the health professions, that at least 75 percent of the members of the ACTPCMD are health professionals, a broad geographic representation of members, and a balance between urban and rural members. Members shall be appointed based on their competence, interest, and knowledge of the mission of the profession involved. As required by PHS Act section 749(b)(3), the Secretary will also ensure the adequate representation of women and minorities.

HHS will consider nominations of all qualified individuals with the areas of subject matter expertise noted above. Individuals may nominate themselves or other individuals. Professional associations and organizations may nominate one or more qualified persons for membership. Nominations shall state that the nominee is willing to serve as a member of the ACTPCMD and appears to have no conflict of interest that would preclude the ACTPCMD membership. Potential candidates will be asked to provide detailed information concerning financial interests, consultancies, research grants, and/or contracts that might be affected by recommendations of the ACTPCMD to permit evaluation of possible sources of conflicts of interest.

A nomination package should include the following information for each nominee:

- (1) A letter of nomination from an employer, a colleague, or a professional organization stating the name, affiliation, and contact information for the nominee, the basis for the nomination (*i.e.*, what specific attributes, perspectives, and/or skills does the individual possess that would benefit the workings of the ACTPCMD, and the nominee's field(s) of expertise);
- (2) A letter of interest from the nominee stating the reasons they would like to serve on the ACTPCMD;
- (3) A biographical sketch of the nominee, a copy of his/her curriculum vitae, and his/her contact information (address, daytime telephone number, and email address); and
- (4) The name, address, daytime telephone number, and email address at which the nominator can be contacted.

Nominations will be considered as vacancies occur on the ACTPCMD. If you submitted a nomination more than three years ago, please resubmit an updated nomination to be considered for committee vacancies.

HHS strives to ensure that the membership of HHS federal advisory committees are balanced in terms of points of view represented and the committee's function. The Department encourages nominations of qualified candidates from all groups and locations. Appointment to the ACTPCMD shall be made without discrimination on the basis of age, race, ethnicity, gender, sexual orientation, disability, and cultural, religious, or socioeconomic status.

**Amy P. McNulty,**

*Acting Director, Division of the Executive Secretariat.*

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**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Request for Nominations for the National Advisory Council on Nurse Education and Practice

**AGENCY:** Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

**ACTION:** Notice of request for nominations.

**SUMMARY:** HRSA is requesting nominations to fill vacancies on the National Advisory Council on Nurse Education and Practice (NACNEP). The NACNEP is authorized by Section 851 of the Public Health Service (PHS) Act, as amended. The Advisory Council is governed by the provisions of the Federal Advisory Committee Act (FACA), as amended, which sets forth standards for the formation and use of advisory committees, and applies to the extent that the provisions of FACA do not conflict with the requirements of PHS Act Section 851.

**DATES:** HRSA will receive nominations on a continuous basis.

**ADDRESSES:** Written nominations for membership can be submitted to Advisory Council Operations, Bureau of Health Workforce, HRSA, 5600 Fishers Lane, Room 11W45C, Rockville, Maryland 20857 or sent by email to [BHWAdvisoryCouncil@hrsa.gov](mailto:BHWAdvisoryCouncil@hrsa.gov).

**FOR FURTHER INFORMATION CONTACT:** Tracy L. Gray, MBA, MS, RN, Designated Federal Official, NACNEP, by phone at 301-443-3346 or by email at [TGray1@hrsa.gov](mailto:TGray1@hrsa.gov). A copy of the current committee membership, charter, and reports can be obtained by accessing the NACNEP website at <https://www.hrsa.gov/advisory-committees/nursing/index.html>.

**SUPPLEMENTARY INFORMATION:** The NACNEP provides advice and recommendations to the Secretary of the Department of Health and Human Services (Secretary), the Senate Committee on Health, Education, Labor and Pensions, and the House of Representatives Committee on Energy and Commerce concerning policy matters arising in the administration of the activities under Title VIII of the PHS Act, as amended, including the range of issues related to the nurse workforce, nursing education, and nursing practice improvement. The Council annually prepares and submits a report describing the activities of the Advisory Council including its findings and recommendations made by the council concerning the activities under this title. Meetings are held twice a year.

Specifically, HRSA is requesting nominations for voting members of the NACNEP representing leading authorities in the various fields of nursing, higher and secondary education, and associate degree schools of nursing; representatives of advanced education nursing groups (such as nurse practitioners, nurse midwives, and nurse anesthetists); hospitals and other institutions and organizations which provide nursing services; practicing professional nurses; the general public; and full-time students enrolled in schools of nursing.

In making such appointments, the Secretary shall ensure a fair balance between the nursing professions, a broad geographic representation of members, and a balance between urban and rural members. Members shall be appointed based on their competence, interest, and knowledge of the mission of the profession involved. As required by PHS Act section 851(b)(3), the Secretary shall ensure the adequate representation of minorities. The majority of the NACNEP members shall be nurses.

HHS will consider nominations of all qualified individuals with the areas of subject matter expertise noted above. Individuals may nominate themselves or other individuals. Professional associations and organizations may nominate one or more qualified persons for membership. Nominations shall state that the nominee is willing to serve as a member of the NACNEP and appears to have no conflict of interest that would preclude the NACNEP membership. Potential candidates will be asked to provide detailed information concerning financial interests, consultancies, research grants, and/or contracts that might be affected by recommendations of the NACNEP to

permit evaluation of possible sources of conflicts of interest.

A nomination package should include the following information for each nominee:

(1) A letter of nomination from an employer, a colleague, or a professional organization stating the name, affiliation, and contact information for the nominee, the basis for the nomination (*i.e.*, what specific attributes, perspectives, and/or skills does the individual possess that would benefit the workings of the NACNEP, and the nominee's field(s) of expertise);

(2) A letter of interest from the nominee stating the reasons they would like to serve on the NACNEP;

(3) A biographical sketch of the nominee, a copy of his/her curriculum vitae, and his/her contact information (address, daytime telephone number, and email address); and

(4) The name, address, daytime telephone number, and email address at which the nominator can be contacted.

Nominations will be considered as vacancies occur on the NACNEP. If you submitted a nomination more than four years ago, please resubmit an updated nomination to be considered for council vacancies.

HHS strives to ensure that the membership of HHS federal advisory committees are balanced in terms of points of view represented and the committee's function. The Department encourages nominations of qualified candidates from all groups and locations. Appointment to the NACNEP shall be made without discrimination on the basis of age, race, ethnicity, gender, sexual orientation, disability, and cultural, religious, or socioeconomic status.

**Amy P. McNulty,**

*Acting Director, Division of Executive Secretariat.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Request for Information Regarding the 21st Century Cures Act Electronic Health Record Reporting Program

**AGENCY:** Office of the National Coordinator for Health Information Technology (ONC), HHS.

**ACTION:** Request for information.

**SUMMARY:** This request for information (RFI) seeks input from the public regarding the Electronic Health Record (EHR) Reporting Program established as Section 4002 of the 21st Century Cures

Act (Cures Act) codified Section 3009A in Title XXX of the Public Health Service Act (PHSA). This RFI is a first step toward implementing the statute. Its responses will be used to inform subsequent discussions among stakeholders and future work toward the development of reporting criteria under the EHR Reporting Program.

**DATES:** To be assured consideration, written or electronic comments must be received at one of the addresses provided below, no later than 5 p.m. on October 17, 2018.

**ADDRESSES:** The public should address written comments on the proposed system of records to <http://www.regulations.gov> or to the HHS Office of Security and Strategic Information (OSSI), 200 Independence Avenue SW, Washington, DC 20201.

- *Federal eRulemaking Portal:* Follow the instructions for submitting comments. Attachments should be in Microsoft Word, Microsoft Excel, or Adobe PDF; however, we prefer Microsoft Word.

- *Regular, Express, or Overnight Mail:* Department of Health and Human Services, Office of the National Coordinator for Health Information Technology, Attention: EHR Reporting Program Request for Information, Mary E. Switzer Building, Mail Stop: 7033A, 330 C Street SW, Washington, DC 20201. Please submit one original and two copies.

- *Hand Delivery or Courier:* Office of the National Coordinator for Health Information Technology, Attention: EHR Reporting Program Request for Information, Mary E. Switzer Building, Mail Stop: 7033A, 330 C Street SW, Washington, DC 20201. Please submit one original and two copies. (Because access to the interior of the Mary E. Switzer Building is not readily available to persons without federal government identification, commenters are encouraged to leave their comments in the mail drop slots located in the main lobby of the building.)

*Enhancing the Public Comment Experience:* To facilitate public comment on this RFI, a copy will be made available in Microsoft Word format on ONC's website (<http://www.healthit.gov>).

*Inspection of Public Comments:* All comments received before the close of the comment period will be available for public inspection, including any personally identifiable or confidential business information that is included in a comment. Please do not include anything in your comment submission that you do not wish to share with the general public. Such information

includes, but is not limited to: A person's social security number; date of birth; driver's license number; state identification number or foreign country equivalent; passport number; financial account number; credit or debit card number; any personal health information; or any business information that could be considered proprietary. We will post all comments that are received before the close of the comment period at <http://www.regulations.gov>.

Comments received timely will also be available for public inspection, generally beginning approximately 3 weeks after publication of a document at Office of the National Coordinator for Health Information Technology, 330 C Street SW, Room 7033A, Washington, DC 20201. Contact Michael Wittie, listed below, to arrange for inspection.

*Docket:* For access to the docket to read background documents or comments received, go to <http://www.regulations.gov> or the Department of Health and Human Services, Office of the National Coordinator for Health Information Technology, Mary E. Switzer Building, Mail Stop: 7033A, 330 C Street SW, Washington, DC 20201 (call ahead to the contact listed below to arrange for inspection).

**FOR FURTHER INFORMATION CONTACT:** Michael Wittie, Office of Policy, Office of the National Coordinator for Health Information Technology, 202-690-7151, [Michael.Wittie@hhs.gov](mailto:Michael.Wittie@hhs.gov) or Lauren Richie, Office of Policy, Office of the National Coordinator for Health Information Technology, 202-690-7151, [Lauren.Richie@hhs.gov](mailto:Lauren.Richie@hhs.gov).

#### SUPPLEMENTARY INFORMATION:

##### I. Background

The Secretary has delegated authority to the Office of the National Coordinator for Health Information Technology (ONC) to carry out the provisions of sections 4002(a) and 4002(c) of the Cures Act. Section 4002(a) creates PHSA section 3001(c)(5)(D) and instructs the Secretary to "require, as a condition of certification and maintenance of certification" that health IT developers satisfy certain requirements, including submitting "reporting criteria in accordance with section 3009A(b)." Section 4002(c) creates PHSA Section 3009A and requires the Secretary to develop an "Electronic Health Record Reporting Program" (EHR Reporting Program or Program). Section 3009A also calls on the Secretary to lead a public, transparent process to establish the "reporting criteria" associated with the EHR Reporting Program. Section 3009A directs the Secretary to award