- 46. Brenda K. Barbee, Raleigh, North Carolina, Court of Federal Claims No: 15–0761V
- 47. Tina Lazicki, Philadelphia, Pennsylvania, Court of Federal Claims No: 15–0762V
- 48. Mary Jo Maleport, Kentwood, Michigan, Court of Federal Claims No: 15–0763V
- 49. Dawn Kelly, Midway, Georgia, Court of Federal Claims No: 15–0765V
- 50. John M. Robinson, Napa, California, Court of Federal Claims No: 15– 0766V
- 51. Shawn Shorkey, Dallas, Texas, Court of Federal Claims No: 15–0768V
- 52. Michael Purcell, Rochester, New York, Court of Federal Claims No: 15–0770V
- 53. Carrie Payne, Beaver, Pennsylvania, Court of Federal Claims No: 15– 0771V
- 54. Hannah Marie Robinson, Moore, Oklahoma, Court of Federal Claims No: 15–0772V
- 55. Brynn Contino on behalf of G. C., New Market, Maryland, Court of Federal Claims No: 15–0773V
- Melissa Jones, Lexington, Kentucky, Court of Federal Claims No: 15– 0774V
- 57. Jane K. Baker, Lewisburg, Pennsylvania, Court of Federal Claims No: 15–0775V
- 58. Heather Caron on behalf of A. C., Waterville, Maine, Court of Federal Claims No: 15–0777V
- 59. Thomas Dyroff, Devon, Pennsylvania, Court of Federal Claims No: 15–0780V
- 60. Kelly Dillon, Leesburg, Virginia, Court of Federal Claims No: 15– 0781V
- 61. Brenda Benjamin, Dublin, California, Court of Federal Claims No: 15–0782V
- 62. Teresa Cook, Rochester, New York, Court of Federal Claims No: 15– 0783V
- 63. Cheri Fox, Bonney Lake, Washington, Court of Federal Claims No: 15–0784V
- 64. Christina Nolen on behalf of Nicholas Nolan, Louisa, Virginia, Court of Federal Claims No: 15– 0787V
- 65. Lindey Martin and Raynard Martin on behalf of I.R.M., Deceased, Powell, Ohio, Court of Federal Claims No: 15–0789V
- 66. Heathe Heller and Jenna Heller on behalf of H. H., Decatur, Texas, Court of Federal Claims No: 15– 0792V
- 67. Sherry Harrison, Mount Pleasant, Pennsylvania, Court of Federal Claims No: 15–0795V
- 68. Amy Uscher on behalf of M. U., Phoenix, Arizona, Court of Federal Claims No: 15–0798V

- 69. Christina Brethauer, Monroeville, Pennsylvania, Court of Federal Claims No: 15–0800V
- 70. Jennifer Cirillo, Tucson, Arizona, Court of Federal Claims No: 15– 0801V
- Asharam Tamang, Albany, California, Court of Federal Claims No: 15–0802V
- 72. Samuel Webb, Phoenix, Arizona, Court of Federal Claims No: 15– 0803V
- 73. Jeff Curran, Denver, Colorado, Court of Federal Claims No: 15–0804V
- 74. Melissa Lee Madsen, Hopewell, New Jersey, Court of Federal Claims No: 15–0807V
- 75. Karl Zimmerman, Sandwich, Illinois, Court of Federal Claims No: 15–0809V
- George Hendrickson on behalf of E. H., Sioux Falls, South Dakota, Court of Federal Claims No: 15–0812V
- Jean Mann, New York, New York, Court of Federal Claims No: 15– 0813V
- Christi Canada on behalf of L. C., Beverly Hills, California, Court of Federal Claims No: 15–0814V
- James Wright, Beverly Hills, California, Court of Federal Claims No: 15–0815V
- 80. Jennifer Toole, San Antonio, Texas, Court of Federal Claims No: 15– 0816V
- 81. Shanna Molina, Providence, Rhode Island, Court of Federal Claims No: 15–0817V
- 82. Kevin Sanford, Wyomissing, Pennsylvania, Court of Federal Claims No: 15–0818V
- 83. Dorothy Linginfelter, Knoxville, Tennessee, Court of Federal Claims No: 15–0819V

[FR Doc. 2015–20944 Filed 8–24–15; 8:45 am] BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

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

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice.

SUMMARY: In compliance with Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Health Resources and Services Administration (HRSA) has submitted an Information Collection Request (ICR) to the Office of

Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period.

DATES: Comments on this ICR should be received no later than September 24, 2015.

ADDRESSES: Submit your comments, including the Information Collection Request Title, to the desk officer for HRSA, either by email to *OIRA_submission@omb.eop.gov* or by fax to 202–395–5806.

FOR FURTHER INFORMATION CONTACT: To request a copy of the clearance requests submitted to OMB for review, email the HRSA Information Collection Clearance Officer at *paperwork@hrsa.gov* or call (301) 443–1984.

SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Rural Outreach Benefits Counseling Program Measures OMB No. 0915– XXXX—NEW.

Abstract: The Rural Outreach Benefits Counseling Program (Benefits Counseling Program) is authorized by Section 330A(e) of the Public Health Service (PHS) Act (42 U.S.C. 254c(e)), Public Law 113-76 as amended to "promote rural health care services outreach by expanding the delivery of health care services to include new and enhanced services in rural areas." The purpose of the 3-year Benefits Counseling Program is to expand outreach, education and enrollment efforts to eligible uninsured individuals and families, and newly insured individuals and families in rural communities.

The overarching goal of this grant program is to coordinate and conduct innovative outreach activities through a strong consortium in order to: (1) Identify and enroll uninsured individuals and families who are eligible for public health insurance such as Medicare, Medicaid, and Children's Health Insurance Program; qualified health plans offered through Health Insurance Marketplaces; and/or private health insurance plans in rural communities; and (2) educate the newly insured individuals in rural communities about their health insurance benefits, help connect them to primary care and preventive services to which they now have access, and help them retain their health insurance coverage.

Need and Proposed Use of the Information: For this program, performance measures were drafted to provide data to the program and to enable HRSA to provide aggregate program data required by Congress under the Government Performance and Results Act (GPRA) of 1993. These measures cover the principal topic areas of interest to the Federal Office of Rural Health Policy (FORHP), including: (a) Access to care; (b) population demographics; (c) staffing; (d) consortium/network; (e) sustainability; and (f) benefits counseling process and outcomes. Several measures will be used for the Benefits Counseling Program. All measures will speak to

FORHP's progress toward meeting the goals set.

A 60-day **Federal Register** Notice was published in the **Federal Register** on June 1, 2015 (80 FR 31051). There were no comments.

Likely Respondents: The respondents would be recipients of the Rural Outreach Benefits Counseling grant funding.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time

needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. 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	Total responses	Average burden per response (in hours)	Total burden hours
Rural Outreach Benefits Counseling Grant Program Measures	10	1	10	2	20
Total	10	1	10	2	20

Jackie Painter,

Director, Division of the Executive Secretariat.
[FR Doc. 2015–21009 Filed 8–24–15; 8:45 am]
BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the National Vaccine Advisory Committee

AGENCY: National Vaccine Program Office, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) will hold a meeting September 9-10, 2015. The meeting is open to the public. However, preregistration is required for both public attendance and public comment. Individuals who wish to attend the meeting and/or participate in the public comment session should register at http://www.hhs.gov/nvpo/nvac/ meetings/upcomingmeetings/. Participants may also register by emailing nvpo@hhs.gov or by calling 202-690-5566 and providing their name, organization, and email address. DATES: The meeting will be held on September 9–10, 2015. The meeting times and agenda will be posted on the

NVAC Web site at http://www.hhs.gov/ nvpo/nvac/meetings/ upcomingmeetings/ as soon as they become available.

ADDRESSES: U.S. Department of Health and Human Services, Hubert H. Humphrey Building, the Great Hall, 200 Independence Avenue SW., Washington, DC 20201.

The meeting can also be accessed through a live webcast the day of the meeting. For more information, visit http://www.hhs.gov/nvpo/nvac/meetings/upcomingmeetings/.

FOR FURTHER INFORMATION CONTACT: National Vaccine Program Office, U.S. Department of Health and Human Services, Room 715, H. Hubert H.

Services, Room 715–H, Hubert H. Humphrey Building, 200 Independence Avenue SW., Washington, DC 20201. Phone: (202) 690–5566; email: nvpo@ hhs.gov.

SUPPLEMENTARY INFORMATION: Pursuant to Section 2101 of the Public Health Service Act (42 U.S.C. 300aa-1), the Secretary of Health and Human Services was mandated to establish the National Vaccine Program to achieve optimal prevention of human infectious diseases through immunization and to achieve optimal prevention against adverse reactions to vaccines. The NVAC was established to provide advice and make recommendations to the Director of the National Vaccine Program on matters related to the Program's responsibilities. The Assistant Secretary for Health serves as Director of the National Vaccine Program.

During the September NVAC meeting, the Committee will hear updates on a number of Departmental and stakeholder activities that are working to strengthen our national immunization system. The Committee will hear an update on progress towards the Healthy People 2020 immunization goals, followed by presentations specifically examining progress towards the Healthy People 2020 goal to achieve 90% influenza vaccination coverage among healthcare personnel. In particular, the Committee will look at challenges and opportunities for helping improve influenza vaccination among healthcare personnel in long-term care settings.

The Committee also will hear about efforts to support global immunization including an introduction to a number of global immunization strategies currently under development such as an update to the CDC's Global Immunization Strategic Framework, the newly established USAID Immunization Blueprint for Action, and the Pan American Health Organization's proposed Regional Plan of Action on Immunization. In addition, the NVAC will hear a brief overview describing the success of efforts to develop the first Ebola vaccine.

The Committee will be presented with information on how data on state exemption laws is collected and used to inform studies on vaccination coverage and vaccine acceptance in specific populations. NVAC will also host a session continuing their discussions on vaccine confidence that will include