Contents
This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection’s supporting statement and associated materials (see ADDRESSES).

CMS–2540–10 Skilled Nursing Facility and Skilled Nursing Facility Cost Report
Under the PRA (44 U.S.C. 3501–3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term “collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA requires federal agencies to publish a 60-day notice in the Federal Register concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice.

Information Collection
1. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Skilled Nursing Facility and Skilled Nursing Facility Cost Report; Use: Providers of services participating in the Medicare program are required under sections 1815(a), 1833(e) and 1861(v)(1)(A) of the Social Security Act (42 U.S.C. 1395g) to submit annual information to achieve settlement of costs for health care services rendered to Medicare beneficiaries. In addition, regulations at 42 CFR 413.20 and 413.24 require adequate cost data and cost reports from providers on an annual basis. The Form CMS–2540–10 cost report is needed to determine a provider’s reasonable cost incurred in furnishing medical services to Medicare beneficiaries and reimbursement due to or from a provider. Reimbursement outside of the PPS may be for payment of Medicare reimbursable bad debt. Form Number: CMS–2540–10 (OMB control number: 0938–0463); Frequency: Yearly; Affected Public: Private Sector; Not-for-profit institutions, Businesses or other for-profits; Number of Respondents: 14,486; Total Annual Responses: 14,486; Total Annual Hours: 2,926,172. (For policy questions regarding this collection contact Julie Stankivic at 410–786–5725.)

William N. Parham, III,
Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Community Living
Announcing the Intent To Award a Single-Source Supplement for the Advancing Person-Centered, Trauma-Infused Supportive Services for Holocaust Survivors Program
The Administration for Community Living (ACL) announces the intent to award a single-source supplement to the current cooperative agreement held by the Jewish Federations of North America for the project Advancing Person-Centered, Trauma-Infused Supportive Services for Holocaust Survivors. The purpose of this project is to, (1) advance the development and expansion of person-centered, trauma-infused (PCTI) supportive services for Holocaust survivors living in the U.S. and, (2) improve the nation’s overall capacity to deliver PCTI health and human services for this population and to any older adult with a history of trauma. The administrative supplement for FY 2018 will be in the amount of $2,467,000, bringing the total award for FY 2018 to $4,935,000.
The additional funding will not be used to begin new projects, but to serve more Holocaust survivors with vital supports such as legal assistance, case management, transportation, medication management, social engagement activities designed to reduce isolation, loneliness and depression, and supports for family caregivers, all of which will employ PCTI approaches. The additional funds will also be used to expand existing technical assistance activities, under the second objective, in a variety of ways, including replicating and translating proven models of PCTI developed under this grant; developing new training materials, curricula and partnerships to aid in the replication of PCTI practices; enhance and expand the evaluation activities currently under way; and enhance website capacities for improved information dissemination.
Program Name: Advancing Person-Centered, Trauma-Infused (PCTI) Supportive Services for Holocaust Survivors.
Recipient: The Jewish Federations of North America.
Period of Performance: The supplement award will be issued for the fourth year of the five-year project period of September 30, 2015 through September 29, 2020.
Total Award Amount: $4,935,000 in FY 2018.
Award Type: Cooperative Agreement Supplement.
Statutory Authority: The Older Americans Act (OAA) of 1965, as amended, Public Law 109–365—Title 4, Section 411.
Basis for Award: The Jewish Federations of North America (JFNA) is currently funded to carry out the objectives of this project, entitled Advancing PCTI Supportive Services for Holocaust Survivors, for the period of September 30, 2015 through September 29, 2020. Since project implementation began in late 2015, the grantee has accomplished a great deal. The supplement will enable the grantee to carry their work even further, serving more Holocaust survivors and providing even more comprehensive training and technical assistance in the development of PCTI supportive services. The additional funding will not be used to begin new projects or activities.
The JFNA is uniquely positioned to complete the work called for under this project. JFNA and its project partners, including the Network of Jewish Human Services Agencies (NJHSA), and the Conference on Material Claims Against Germany (Claims Conference), have the cultural competence and long history of serving and advocating for Holocaust survivors. Additionally, JFNA is already working in collaboration with numerous partners representing a broad cross section of the Jewish human services network (e.g., Selfhelp Community Services, Bet Tzedek, The Blue Card, and the Orthodox Union of America) and the "mainstream aging services network," (e.g., Meals on Wheels of America (MoWA), the National Association of Area Agencies on Aging (n4a), the National Council on Aging (NCOA), Leading Age and other members of the Leadership Council of Aging Organizations (LCAO)). Establishing an entirely new grant project at this time would be potentially disruptive to the current work already well under way. More importantly, the Holocaust survivors currently being served by this project could be negatively impacted by a service disruption, thus posing the risk of re-traumatization and further negative impacts on health and wellbeing. If this
supplement were not provided, the project would be less able to address the significant unmet needs of additional Holocaust survivors. Similarly, the project would be unable to expand its current technical assistance and training efforts in PCTI concepts and approaches, let alone reach beyond traditional providers of services to this population to train more “mainstream” providers of aging services.

For More Information Contact: For further information or comments regarding this program supplement, contact Greg Link, U.S. Department of Health and Human Services, Administration on Aging, Office of Supportive and Caregiver Services; telephone (202)–795–7386; email greg.link@acl.hhs.gov.

Dated: April 18, 2018.

Mary Lazare,
Principal Deputy Administrator.

[For FR Doc. 2018–08708 Filed 4–25–18; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2018–N–1489]

Vaccines and Related Biological Products Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) announces a forthcoming public advisory committee meeting of the Vaccines and Related Biological Products Advisory Committee (VRBPAC). The general function of the committee is to provide advice and recommendations to the Agency on FDA’s regulatory issues. At least one portion of the meeting will be closed to the public.

DATES: The meeting will be held on May 17, 2018, from 8 a.m. to 4:45 p.m.

ADDRESSES: FDA White Oak Campus, 10903 New Hampshire Ave., Bldg. 31 Conference Center, the Great Room (Rm. 1503), Silver Spring, MD 20993–0002.

For those unable to attend in person, the meeting will also be webcast and will be available at the following link: https://collaboration.fda.gov/vrbpac2018/.

FOR FURTHER INFORMATION CONTACT: Serina Hunter-Thomas or Rosanna Harvey, Center for Biologics Evaluation and Research, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 71, Rm. 6338, Silver Spring, MD 20993–0002, 240–402–5771, serina.hunter-thomas@fda.hhs.gov and 240–402–8072, rosanna.harvey@fda.hhs.gov, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area). A notice in the Federal Register about last minute modifications that impact a previously announced advisory committee meeting cannot always be published quickly enough to provide timely notice. Therefore, you should always check the Agency’s website at https://www.fda.gov/AdvisoryCommittees/default.htm and scroll down to the appropriate advisory committee meeting link, or call the advisory committee information line to learn about possible modifications before coming to the meeting.

SUPPLEMENTARY INFORMATION:

Agenda: On May 17, 2018, under Topic I, the Center for Biologics Evaluation and Research’s (CBER) VRBPAC will meet in open session to discuss approaches for demonstrating effectiveness of group B streptococcus (GBS) vaccines intended for use in pregnant women to protect the newborn infant. Also on May 17, 2018, under Topic II, the committee will meet in open session to hear an overview of the research program in the Laboratory of Respiratory Viral Diseases (LRVD), Division of Viral Products, Office of Vaccines Research and Review, CBER, FDA.

FDA intends to make background material available to the public no later than 2 business days before the meeting. If FDA is unable to post the background material on its website prior to the meeting, the background material will be made publicly available at the location of the advisory committee meeting, and the background material will be posted on FDA’s website after the meeting. Background material is available at https://www.fda.gov/AdvisoryCommittees/Calendar/default.htm. Scroll down to the appropriate advisory committee meeting link.

Procedure: On May 17, 2018, from 8 a.m. to 4:10 p.m., the meeting is open to the public. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person on or before May 10, 2018. Oral presentations from the public will be scheduled between approximately 12:35 p.m. to 1:20 p.m. for the GBS vaccine portion of the meeting, and 3:50 p.m. to 4:05 p.m. for the overview portion of the LRVD Site Visit. Those individuals interested in making formal oral presentations should notify the contact person and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation on or before May 2, 2018. Time allotted for each presentation may be limited. If the number of registrants requesting to speak is greater than can be reasonably accommodated during the scheduled open public hearing session, FDA may conduct a lottery to determine the speakers for the scheduled open public hearing session. The contact person will notify interested persons regarding their request to speak by May 3, 2018.

Closed Committee Deliberations: On May 17, 2018, from 4:10 p.m. to 4:45 p.m., the meeting will be closed to permit discussion where disclosure would constitute a clearly unwarranted invasion of personal privacy (5 U.S.C. 552b(c)(6)). The recommendations of the advisory committee regarding the progress of the investigator’s research will, along with other information, be used in making personnel and staffing decisions regarding individual scientists.

We believe that public discussion of these recommendations on individual scientists would constitute an unwarranted invasion of personal privacy.

Persons attending FDA’s advisory committee meetings are advised that the Agency is not responsible for providing access to electrical outlets.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with disabilities. If you require accommodations due to a disability, please contact Serina Hunter-Thomas at least 7 days in advance of the meeting (see, FOR FURTHER INFORMATION CONTACT).

FDA is committed to the orderly conduct of its advisory committee meetings. Please visit our website at: https://www.fda.gov/AdvisoryCommittees/AboutAdvisoryCommittees/ucm111462.htm for