

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**Center For Scientific Review; Notice of Closed Meetings**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* Center for Scientific Review Special Emphasis Panel, Member Conflict: Psychiatric Disorders and Addiction.

*Date:* December 13, 2016.

*Time:* 1:00 p.m. to 3:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Samuel C Edwards, Ph.D., IRG Chief, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5210, MSC 7846, Bethesda, MD 20892, (301) 435-1246, [edwardss@csr.nih.gov](mailto:edwardss@csr.nih.gov).

*Name of Committee:* Center for Scientific Review Special Emphasis Panel, Member Conflict: Neurovirology, Neuroimmunology, Neurodevelopmental Disorders, and Anticancer Drugs.

*Date:* December 15, 2016.

*Time:* 1:00 p.m. to 3:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Samuel C. Edwards, Ph.D., IRG Chief, Center for Scientific Review, National Institutes of Health, 6701 Rockledge

Drive, Room 5210, MSC 7846, Bethesda, MD 20892, (301) 435-1246, [edwardss@csr.nih.gov](mailto:edwardss@csr.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393-93.396, 93.837-93.844, 93.846-93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: November 21, 2016.

**Sylvia L. Neal,**

*Program Analyst, Office of Federal Advisory Committee Policy.*

[FR Doc. 2016-28415 Filed 11-25-16; 8:45 am]

**BILLING CODE 4140-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Substance Abuse and Mental Health Services Administration**

**Agency Information Collection Activities Under Emergency Review by the Office of Management and Budget**

The Substance Abuse and Mental Health Services Administration (SAMHSA) has submitted the following request (see below) for emergency OMB review under the Paperwork Reduction Act (44 U.S.C. Chapter 35). OMB approval has been requested by January 12, 2017. A copy of the information collection plans may be obtained by calling the SAMHSA Reports Clearance Officer at (240) 276-1243.

*Title:* Notification of Intent to Use Schedule III, IV, or V Opioid Drugs for the Maintenance and Detoxification Treatment of Opiate Addiction by a “Qualifying Other Practitioner”—NEW.  
*OMB Number:* 0930—New.

*Frequency:* On Going.

*Affected public:* Nurse Practitioners and Physician Assistants.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is requesting an emergency Office of Management and Budget (OMB) review and approval of the Notification of Intent to Use Schedule III, IV, or V Opioid Drugs for the

Maintenance and Detoxification Treatment of Opiate Addiction by a “Qualifying Other Practitioner. The Notification of Intent would allow SAMHSA to determine whether other practitioners are eligible to prescribe certain approved narcotic treatment medications for the maintenance or detoxification treatment of opioid addiction.

This Notification of Intent is a result of the Comprehensive Addiction and Recovery Act (Pub. L. 114-198), which was signed into law on July 22, 2016. The law establishes criteria for nurse practitioners (NPs) and physician assistants (PAs) to qualify for a waiver to prescribe covered medications. To be eligible for a waiver, the NP or PA must: be licensed under State law to prescribe schedule III, IV, or V medications for the treatment of pain; fulfill qualification requirements in the law for training and experience; and fulfill qualification requirements in the law for appropriate supervision by a qualifying physician. SAMHSA has the responsibility to receive, review, approve, or deny waiver requests.

Practitioners who meet the statutory requirements will be eligible to prescribe only those opioid treatment medications that are controlled in Schedules III, IV, or V, under the Controlled Substance Act (CSA), that are specifically approved by the Food and Drug Administration (FDA) for the treatment of opioid addiction, and are not the subject of an “adverse determination.” The only medications that currently fulfill these requirements are ones that contain the active ingredient buprenorphine.

Given the severity of the opioid epidemic, SAMHSA is requesting an emergency OMB approval. Emergency OMB approval will enable NPs and PAs to dramatically increase access to buprenorphine among individuals with opioid use disorder.

The following table is the estimated hour burden:

Purpose of submission	Number of respondents	Responses/ respondent	Burden hours	Total burden hours
Notification of Intent for Qualifying Other Practitioner to Use Schedule III, IV, or V Opioid Drugs for the Maintenance and Detoxification Treatment of Opiate Addiction by a “Qualifying Other Practitioner” under 21 USC § 823(g)(2)—Nurse Practitioners .....	816	1	.066	54
Notification of Intent for Qualifying Other Practitioner to Use Schedule III, IV, or V Opioid Drugs for the Maintenance and Detoxification Treatment of Opiate Addiction by a “Qualifying Other Practitioner” under 21 USC § 823(g)(2)—Physician Assistants .....	590	1	.066	39
<b>Total .....</b>	<b>1,406</b>	<b>.....</b>	<b>.....</b>	<b>93</b>

Written comments and recommendations concerning the proposed information collection should be sent by January 12, 2017 to the SAMHSA Desk Officer at the Office of Information and Regulatory Affairs, OMB. To ensure timely receipt of comments, and to avoid potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, commenters are encouraged to submit their comments to OMB via email to: *OIRA\_Submission@omb.eop.gov*. Although commenters are encouraged to send their comments via email, commenters may also fax their comments to: 202-395-5806. Commenters may also mail them to: Office of Management and Budget, Office of Information and Regulatory Affairs, New Executive Office Building, Room 10102, Washington, DC 20503.

**Summer King,**  
Statistician.

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Substance Abuse and Mental Health Services Administration**

**Agency Information Collection Activities: Submission for OMB Review; Comment Request**

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276-1243.

**Project: National Mental Health Services Survey (N-MHSS) (OMB No. 0930-0119)—Revision**

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Behavioral Health Statistics and Quality (CBHSQ) is requesting a revision to the National Mental Health Services Survey (N-MHSS) (OMB No. 0930-0119), which expires on February 28, 2017. The N-MHSS provides annual national and state-level data on the number and characteristics of mental health treatment facilities in the United States and biennial national and state-level data on the number and characteristics of persons treated in these facilities.

The N-MHSS will provide updated information about facilities for SAMHSA's online Behavioral Health Treatment Services Locator (see: *https://findtreatment.samhsa.gov*), which was last updated with information from the abbreviated N-MHSS (N-MHSS-Locator Survey) in 2015. An abbreviated N-MHSS (N-MHSS-Locator Survey) will be conducted in 2017 and 2019 to update the information about facilities in the online Locator. A full-scale N-MHSS will be conducted in 2018 to collect (1) information about facilities needed for updating the online Locator, such as the facility name and address, specific services offered, and special client groups served and (2) additional information about client counts and the demographics of persons treated in these facilities. Three small surveys are proposed for adding new facilities to the online Locator as they become known to SAMHSA. Both the 2017 N-MHSS-Locator Survey and the addition of new facilities to the online Locator will use the same N-MHSS-Locator Survey instrument.

This request for a revision seeks to change the content of the currently approved abbreviated N-MHSS (*i.e.*, N-MHSS-Locator) survey instrument, and the previously approved 2014 and 2016 full-scale N-MHSS (OMB No. 0930-0119) to accommodate two related N-MHSS activities:

(1) collection of information from the total N-MHSS universe of mental health treatment facilities during 2017, 2018, and 2019; and

(2) collection of information on newly identified facilities throughout the year as they are identified so that new facilities can quickly be added to the online Locator.

The survey mode for both data collection activities will be web with telephone follow-up. A paper questionnaire will also be available to facilities who request one.

The database resulting from the N-MHSS will be used to update SAMHSA's online Behavioral Health Treatment Services Locator and to produce an electronic version of a national directory of mental health facilities, for use by the general public, behavioral health professionals, and treatment service providers. In addition, a data file derived from the survey will be used to produce a summary report providing national and state-level outcomes. The summary report and a public-use data file will be used by researchers, mental health professionals, State governments, the U.S. Congress, and the general public.

The request for OMB approval will include a request to conduct an abbreviated N-MHSS-Locator survey in 2017 and 2019, and the full-scale N-MHSS in 2018.

The following table summarizes the estimated annual response burden for the N-MHSS:

ESTIMATED ANNUAL RESPONSE BURDEN FOR THE N-MHSS

Type of respondent	Number of respondents	Responses per respondent	Average hours per response	Total burden hours
Facilities in N-MHSS-Locator Survey universe in 2017 and 2019 .....	17,000	1	0.42	7,140
Newly identified facilities in Between-Survey Update in 2017, 2018, and 2019 <sup>1</sup> .....	1,700	1	0.42	714
Facilities in full-scale N-MHSS universe in 2018 .....	17,000	1	0.75	12,750
<b>Average Annual Total</b> .....	<b>18,700</b>	<b>1</b>	<b>0.62</b>	<b>9,724</b>

<sup>1</sup> Collection of information on newly identified facilities throughout the year, as they are identified, so that new facilities can quickly be added to the Locator.

Written comments and recommendations concerning the proposed information collection should be sent by December 28, 2016 to the SAMHSA Desk Officer at the Office of

Information and Regulatory Affairs, Office of Management and Budget (OMB). To ensure timely receipt of comments, and to avoid potential delays in OMB's receipt and processing of mail

sent through the U.S. Postal Service, commenters are encouraged to submit their comments to OMB via email to: *OIRA\_Submission@omb.eop.gov*. Although commenters are encouraged to