strategy of pre-exposure prophylaxis (PrEP) for HIV-negative MSM who are at high risk of contracting HIV. For maximum efficacy, health communications about HIV prevention and control should be delivered to MSM according to their HIV serostatus and risk category.

The National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention is requesting approval to evaluate the efficacy of a smartphone-based HIV prevention intervention for MSM, known as M$^3$(M-Cubed) that has been designed to deliver targeted messages in six intervention domains: HIV testing, sexually transmitted infection (STI) testing, PrEP, antiretroviral (ARV) treatment, Condoms, and Engagement in Care. The smartphone and tablet application includes 36 core messages and 12 videos that were developed based on CDC-sponsored iterative formative research (OMB No. 0920–0840) and a review of HIV health communications literature. Messages will be delivered to each participant's device. The proposed study will assess whether exposure to the message-delivery platform results in improvements in participants' self-reported sexual health and HIV prevention behaviors, beliefs and attitudes. Information will be collected at baseline and 3-month, 6-month, and 9-month follow-ups.

The study population will include 1,206 adult MSM living in Atlanta, GA, Detroit, MI and New York City, NY. These study sites were selected not only because they have high rates of HIV, but also because significant disparities in HIV among men who have sex with men (MSM) have been observed by race/ethnicity and age. Study participants will be sexually active MSM at least 18 years in age who own and use and Android and iOS smartphone. Study participants will be stratified by risk category: HIV positive (one third) and HIV negative (one third each: condomless anal sex in past three months; no condomless anal sex past three months). Across the three sites, we will ensure that at least 40% of participants are people of color (non-white or Hispanic) by quota sampling. Participants will be recruited to the study through a combination of approaches, including online advertisement, traditional print advertisement, referral, in-person outreach, and through word of mouth. Participants will be randomly assigned to an intervention group or a waitlist control group. The control group will receive the intervention after the study has been completed.

A quantitative assessment questionnaire will be administered online at four points in time. The assessment will be used to measure changes in condom use behavior, number of sex partners, HIV testing, sexually transmitted disease (STD) testing, health care engagement, pre-exposure prophylaxis uptake and adherence, and antiretroviral therapy uptake and adherence following completion of the intervention. Participants will complete the assessment in-person at baseline and 9-months, using a computer in a private location, and remotely via their personal computer or tablet device at the 3-month and 6-month follow-ups. The same information will be collected from all participants. The burden per response for each assessment is 1.5 hours.

It is expected that 50% of men screened will meet study eligibility and provide contact information, that 75 percent will schedule and show up for an in-person appointment, and that 95 percent of these men will remain eligible after reverification. We expect the initial screening to take approximately four minutes to complete, that providing contact information will take 1 minute, and the rescreening prior to study enrollment to take another four minutes.

OMB approval is requested for two years. Participation is voluntary and there are no costs to the respondents other than their time. The total estimated annual burden is 3,787 hours.

ESTIMATED ANNUALIZED BURDEN HOURS

| Type of respondent | Form name | Number of respondents | Number of responses per respondent | Average burden per response (in hours) |
|---|---|---|---|---|
| Men ≥ 18 Years of Age Who Have Sex With Men. | Participant Screening (Eligibility) | 1,693 | 1 | 4/60 |
| | Contact Information Form | 847 | 1 | 1/60 |
| | Participant Screening (Verification) | 635 | 1 | 4/60 |
| | Assessment | 603 | 4 | 1.5 |

**Leroy A. Richardson,**

*Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.*

[FR Doc. 2017–06577 Filed 4–3–17; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

### Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Initial Review

In accordance with Section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces a meeting for the initial review of applications in response to Funding Opportunity Announcement (FOA) DP17–001, Community Characteristics Associated with Geographic Disparities in Diabetes and Cardiometabolic Health.

*Times and Dates:*

10:00 a.m.–6:00 p.m., EDT, April 25, 2017 (Closed)

10:00 a.m.–6:00 p.m., EDT, April 26, 2017 (Closed)

*Place:* Teleconference.

*Status:* The meeting will be closed to the public in accordance with provisions set forth in Section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92–463.

*Matters for Discussion:* The meeting will include the initial review,

discussion, and evaluation of applications received in response to ''Community Characteristics Associated with Geographic Disparities in Diabetes and Cardiometabolic Health'', DP17–001.

*Contact Person for More Information:* Jaya Raman Ph.D., Scientific Review Officer, CDC, 4770 Buford Highway, Mailstop F80, Atlanta, Georgia 30341, Telephone: (770) 488–6511, *kva5@cdc.gov.*

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

**Elaine L. Baker,**

*Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.*

[FR Doc. 2017–06536 Filed 4–3–17; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

### National Institute on Aging; 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:* National Institute on Aging Initial Review Group, Biological Aging Review Committee.

*Date:* May 30–31, 2017.

*Time:* 2:00 p.m. to 2:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Torrance Marriott Redondo Beach, 3635 Fashion Way, Torrance, CA 90503.

*Contact Person:* Bita Nakhai, Ph.D., Scientific Review Branch, National Institute on Aging, Gateway Bldg., 2C212, 7201 Wisconsin Avenue, Bethesda, MD 20814, 301–402–7701, *nakhaib@nia.nih.gov.*

*Name of Committee:* National Institute on Aging Initial Review Group, Neuroscience of Aging Review Committee,

*Date:* June 1–2, 2017.

*Time:* 2:00 p.m. to 2:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Torrance Marriott Redondo Beach, 3635 Fashion Way, Torrance, CA 90503.

*Contact Person:* Jeannette L. Johnson, Ph.D., Deputy Review Branch Chief, National Institutes of Health, National Institute on Aging, Gateway Building, Bethesda, MD 20892, 301–402–7705, *johnsonj9@nia.nih.gov.*

*Name of Committee:* National Institute on Aging Initial Review Group, Clinical Aging Review Committee.

*Date:* June 1–2, 2017.

*Time:* 2:00 p.m. to 2:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Torrance Marriott Redondo Beach, 3635 Fashion Way, Torrance, CA 90503.

*Contact Person:* Alicja L. Markowska, Ph.D., Dsc., National Institute on Aging, National Institutes of Health, Gateway Building 2C212, 7201 Wisconsin Avenue, Bethesda, MD 20892, 301–496–9666, *markowsa@nia.nih.gov.*

(Catalogue of Federal Domestic Assistance Program Nos. 93.866, Aging Research, National Institutes of Health, HHS)

Dated: March 29, 2017.

**Melanie J. Pantoja,**

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

[FR Doc. 2017–06553 Filed 4–3–17; 8:45 am]

**BILLING CODE 4140–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

### Prospective Grant of Exclusive Patent License: Development and Commercialization of Peptides Promoting Lipid Efflux for the Treatment of Hypertriglyceridemia, With or Without Concomitant Metabolic Syndrome

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

**SUMMARY:** The National Heart, Lung, and Blood Institute (NHLBI), an institute of the National Institutes of Health; an agency within the Department of Health and Human Services, is contemplating the grant of an exclusive patent license to commercialize the invention(s) embodied in the intellectual property estate stated in the Summary Information section of this notice to Corvidia Therapeutics Inc. (Corvidia) located in Waltham, MA and incorporated under the laws of Delaware.

**DATES:** Only written comments and/or applications for a license which are received by the NHLBI Office of Technology Transfer and Development on or before April 19, 2017 will be considered.

**ADDRESSES:** Requests for copies of the patent application, inquiries, and comments relating to the contemplated exclusive license should be directed to: Cristina Thalhammer-Reyero, Ph.D., MBA, Senior Licensing and Patenting Manager, NHLBI Office of Technology Transfer and Development, 31 Center Drive Room 4A29, MSC2479, Bethesda, MD 20892–2479; Telephone: +1–301–435–4507; Fax: +1–301–594–3080; Email: *thalhamc@mail.nih.gov.*

**SUPPLEMENTARY INFORMATION:** The following represents the intellectual property to be licensed under the prospective agreement:

U.S. Provisional Patent Application Serial No. 61/045,213, filed 04/15/2008; PCT Application No. PCT/US2009/040560, filed 04/14/2009; U.S. Patent Application Serial No.12/937,974, issued as 8,936,787 on 01/20/2015; Titled ''Peptides Promoting Lipid Efflux'' (NIH Reference No. E–138–2008/0).

With respect to persons who have an obligation to assign their right, title and interest to the Government of the United States of America, the patent rights in these inventions have been assigned to the Government of the United States of America.

The prospective exclusive license territory may be worldwide and the field of use may be limited to: ''Treatment of Hypertriglyceridemia, with or without concomitant metabolic syndrome''.

The invention pertains to compositions and methods of use of ApoC–II mimetic peptides with multiple amphipathic alpha helical domains that have the dual ability to promote lipid efflux from cells and stimulate lipoprotein lipase activity, without inducing toxicity. This notice is made in accordance with 35 U.S.C. 209 and 37 CFR part 404. The prospective Exclusive Patent License will be royalty bearing and may be granted unless within fifteen (15) days from the date of this published notice, the NHLBI Office of Technology Transfer and Development receives written evidence and argument that establishes that the grant of the license would not be consistent with the requirements of 35 U.S.C. 209 and 37 CFR part 404.

Complete applications for a license in the prospective field of use that are timely filed in response to this notice will be treated as objections to the grant