conditions/rare-pediatric-disease-rpd-designation-and-voucher-programs. For further information about GENGLYCOS (parisglasgene brecaparvovec-opnr), go to the Center for Biologics Evaluation and Research's Approved Cellular and Gene Therapy Products website at *https://www.fda.gov/vaccines-blood-biologics/cellular-gene-therapy-products/approved-cellular-and-gene-therapy-products.*

Grace R. Graham,

Deputy Commissioner for Policy, Legislation, and International Affairs.

[FR Doc. 2026–17932 Filed 9–1–26; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Privacy Act of 1974; Matching Program

AGENCY: Department of Health and Human Services.

ACTION: Notice of a new matching program.

SUMMARY: In accordance with the Privacy Act of 1974, as amended, and Office of Management and Budget (OMB) guidance on computer matching, the Department of Health and Human Services (HHS) is providing notice of the establishment of a new matching program. Pursuant to the Payment Integrity Information Act of 2019, HHS, including its component divisions and program offices, is establishing a new matching program consisting of the computerized comparison of an HHS system of records with the Do Not Pay (DNP) Working System, which is administered by Treasury's Bureau of the Fiscal Service. This matching program will enable HHS to compare records maintained in an HHS system of records covering HHS grantees and grant payments with records maintained in the DNP Working System for the purposes of identifying and preventing improper payments and conducting any related recovery activities.

DATES: Submit comments on or before October 2, 2026. This new matching program will be effective 30 days after publication of this notice through September 10, 2029.

ADDRESSES: Written comments on this notice may be submitted electronically through the Federal government eRulemaking portal at *http://www.regulations.gov;* docket number 2026–0364. Electronic submission of comments allows the commenter maximum time to prepare and submit a comment, ensures timely receipt, and enables HHS to make the comments available to the public. Please note that comments submitted through *https://www.regulations.gov* will be made available for viewing by the public.

Comments on this proposed matching program may also be addressed to U.S. Department of Health and Human Services, Attention: Hye J. (Sheri) Min, Director, Payment Management Services, 5600 Fishers Lane, Room 08N25, Rockville, MD 20852, or by email: *Hye.Min@psc.hhs.gov.*

FOR FURTHER INFORMATION CONTACT: Interested parties may submit written comments on this notice to the HHS Privacy Act Office by mail at: HHS Privacy Act Officer, 200 Independence Ave SW, Washington, DC 20201, or by email: *HHSPrivacyActOffice@hhs.gov.*

SUPPLEMENTARY INFORMATION: The Computer Matching and Privacy Protection Act of 1988 (Pub. L. 100–503) amended the Privacy Act of 1974 (5 U.S.C. 552a) by establishing procedural safeguards related to agencies' use of records when performing certain types of computerized matching. Section 7201 of the Omnibus Budget Reconciliation Act of 1990 (Pub. L. 101– 508) further amended the Privacy Act regarding protections for individuals when agencies perform these functions.

Additionally, the Payment Integrity Information Act of 2019 (31 U.S.C. 3351 *et seq.*) provides the head of the agency operating the DNP Working System with the authority, in consultation with OMB, to waive the requirements in 5 U.S.C. 552a(o) in any case or class of cases for matching activities conducted under the DNP Initiative (31 U.S.C. 3354). Pursuant to this authority, the Secretary of the Treasury, after consulting with the OMB Director, authorized the issuance of a four-year waiver of the requirement for entering into a matching agreement under 5 U.S.C. 552a(o) for the class of matching programs that meet all of the criteria defined in OMB Memorandum M–25–32, *Preventing Improper Payments and Protecting Privacy through Do Not Pay.*

HHS has determined that the DNP matching program described in this notice is eligible for the waiver described in OMB Memorandum M–25–32, which is effective from September 10, 2025, through September 10, 2029.

For purposes of this notice, matches between HHS PMS and the DNP Working System constitute a single agency-wide matching program implementing DNP for all HHS grant payments.

Participating Agencies: HHS will match all HHS grantees it pays through the Payment Management System (PMS) with the DNP Working System, which is maintained by the Bureau of the Fiscal Service at the U.S. Department of the Treasury.

Authority for Conducting the Matching Program: The Payment Integrity Information Act of 2019 (31 U.S.C. 3351 *et seq.*) establishes the DNP Initiative and requires, for the purposes of identifying and preventing improper payments, each executive agency to have access to, and use of, the relevant databases in DNP to verify payment or award eligibility. Additional applicable authorities for this matching program include Executive Order 13520, *Reducing Improper Payments* (74 FR 62201); Executive Order 14249, *Protecting America's Bank Account Against Fraud, Waste, and Abuse* (90 FR 14011); and OMB Memorandum M–25–32, *Preventing Improper Payments and Protecting Privacy Through Do Not Pay.* Additional information regarding the statutory authorities for the collection and maintenance of information for HHS PMS is contained within the system of records notice listed below.

Purpose(s): The purpose of the matching program is to review payment eligibility to prevent, or identify and recoup, improper payments. Data elements that are necessary for payment eligibility determinations or recoupment for a relevant grant that are contained in records from an HHS system of records will be compared with records in the DNP Working System. When there is a match between a record provided by the HHS system and a record in the DNP Working System, the DNP Working System will notify the submitting HHS system of a potentially matching record and will identify the database(s) that contain(s) the potentially matching record(s). The grantor agency will then review the information to determine whether additional action is needed. If no matches are identified, the DNP Working System will provide a no-match response to the submitting HHS system.

Categories of Individuals: Recipients of HHS grant funds disbursed through HHS PMS.

Categories of Records: Information described in the Do Not Pay SORN will be used in concert with information described in HHS's Financial Management SORN to detect payees potentially ineligible for payment. Data will be matched across the two systems of records using identifiers that may include, as applicable, name (individual name and/or business/trading name); Taxpayer Identification Number (TIN, meaning Social Security Number (SSN), Employer Identification Number (EIN), or Individual Taxpayer Identification Number (ITIN)); Unique Entity Identifier

(UEI); National Provider Identifier (NPI); address(es); date of birth; sex; and telephone number(s); email address(es); bank account information (including account number and financial institution routing and transit number); and tracking numbers used to locate payment information.

System(s) of Records: The records contained within the DNP Working System are maintained in the system of records known as Department of the Treasury, Bureau of the Fiscal Service .017—Do Not Pay Payment Verification Records (85 FR 11776). This system of records includes those databases designated to be included in the DNP Working System by the Payment Integrity Information Act of 2019 as well as other databases designated for inclusion by the Director of the Office of Management and Budget, or the designee of the Director, in consultation with executive agencies.

The records contained within HHS PMS are maintained in the system of records known as Department of Health and Human Services System of Records Notice (SORN) 09–90–0024, the HHS Financial Management System of Records, last published in full at 80 FR 67767 (11/3/15) and updated at 83 FR 6591 (2/14/18) and 91 FR 12200 (3/12/26). This system of records includes databases maintained in PMS and covers records retrieved by personal identifier about individuals who receive or are entitled to a payment from HHS and individuals who pay or owe money to HHS.

Hye Min,

Director, Payment Management System, Program Support Center.

[FR Doc. 2026–17907 Filed 9–1–26; 8:45 am]

BILLING CODE 4150–28–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of an Exclusive Patent License: Development and Commercialization of Mifepristone and Analogues To Treat Hypercortisolism-Related Insulin Resistance Disorders

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Institute of Diabetes and Digestive and Kidney Diseases, an institute of the National Institutes of Health, Department of Health and Human Services, is contemplating the grant of an Exclusive Patent License to practice the invention embodied in the patents and patent applications listed in the **SUPPLEMENTARY INFORMATION** section of this notice to Nulyn Science (''Nulyn''), a company located in Paris, France.

DATES: Only written comments and/or applications for a license which are received by the National Institute of Diabetes and Digestive and Kidney Diseases' Technology Advancement Office on or before September 17, 2026 will be considered.

ADDRESSES: Inquiries and comments relating to the contemplated Exclusive Patent License should be directed to: Betty B. Tong, Ph.D., Senior Licensing and Patenting Manager, NIDDK Technology Advancement Office, Telephone: (301)-451–7836; Email: *tongb@mail.nih.gov.*

SUPPLEMENTARY INFORMATION:

Intellectual Property

1. Australian Patent Application No. 2020239920 filed March 9, 2020, entitled ''Method for Improving Insulin Sensitivity'' [HHS Reference No. E–081–2019–0–AU–01];

2. South Korean Patent Application No. 10–2021–7033113 filed March 9, 2020, entitled ''Method for Improving Insulin Sensitivity'' [HHS Reference No. E–81–2019–0–KR–01];

3. New Zealand Patent Application No. 781109 filed October 7, 2020, entitled ''Method for Improving Insulin Sensitivity'' [HHS Reference No. E–081–2019–0–NZ–01];

4. United States Patent Application No. 17/438, 580 filed September 13, 2021, entitled ''Method for Improving Insulin Sensitivity'' [HHS Reference No. E–081–2019–0–US–02];

5. United States Patent Application No. 18/831,326 filed November 19, 2024, entitled ''Method for Improving Insulin Sensitivity'' [HHS Reference No. E–081–2019–0–US–03];

6. European Patent 3941460, issued October 15, 2025, entitled ''Method for Improving Insulin Sensitivity'' [HHS Reference No. E–81–2019–0–EP–01].

The patent rights in the invention 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 the following:

''Commercial development of mifepristone and analogues for treatment of hypercortisolism-related insulin resistance disorders in humans''

The subject technology describes a method of treating or ameliorating insulin sensitivity disorders using glucocorticoid receptor antagonist (GRA), like mifepristone, to block the metabolic side effects of cortisol, which is a key driver of hepatic and adipose insulin resistance. The invention relates to a specific dosing approach that restricts dosage to avoid over-activating the hypothalamic-pituitary-adrenal (HPA) axis and ensure cortisol safety levels.

This Notice is made in accordance with 35 U.S.C. 209 and 37 CFR part 404. The prospective exclusive license will be royalty bearing, and the prospective exclusive license may be granted unless within fifteen (15) days from the date of this published notice, the National Institute of Diabetes and Digestive and Kidney Diseases 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 that are timely filed in response to this notice will be treated as objections to the grant of the contemplated exclusive patent license. In response to this Notice, the public may file comments or objections. Comments and objections, other than those in the form of a license application, will not be treated confidentially, and may be made publicly available.

License applications submitted in response to this Notice will be presumed to contain confidential business information and any release of information in these license applications will be made only as required and upon a request under the Freedom of Information Act, 5 U.S.C. 552.

Dated: August 28, 2026.

Charles D. Niebylski,

Director, Technology Advancement Office, National Institute of Diabetes and Digestive and Kidney Diseases.

[FR Doc. 2026–17991 Filed 9–1–26; 8:45 am]

BILLING CODE 4167–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; 60-Day Comment Request; Assurance (Interinstitutional, Foreign, and Domestic) and Annual Report (Office of the Director)

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995 to provide opportunity for public comment on proposed data collection projects, the