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Dated: March 9, 2018.

Leslie Kux,

Associate Commissioner for Policy.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Health Center Program

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

ACTION: Announcing Budget Period Extensions with Funding for the Health Center Program.

SUMMARY: HRSA provided additional grant funds during extended budget periods to prevent interruptions in the provision of critical health care services for funded service areas until new awards could be made to eligible Service Area Competition (SAC) applicants or HRSA could conduct an orderly phase-out of Health Center Program activities by the current award recipients.

SUPPLEMENTARY INFORMATION:

Recipients of the Award: Health Center Program award recipients for service areas that were threatened with a lapse in services due to service area re-announcement or transitioning award recipients, as listed in Table 1.

Amount of Non-Competitive Awards: 33 awards for \$17,248,966.

Period of Supplemental Funding: Fiscal years 2016 and 2017.

CFDA Number: 93.224

Authority: Section 330 of the Public Health Service Act, as amended (42 U.S.C. 254b, as amended).

Justification: Targeting the nation's high need populations and geographic areas, the Health Center Program currently funds nearly 1,400 health centers that operate more than 11,000 service delivery sites in every state, the District of Columbia, Puerto Rico, the Virgin Islands, and the Pacific Basin.

Nearly 26 million people received accessible, affordable, quality primary health care services through the Health Center Program award recipients in 2016.

Approximately one-third of Health Center Program award recipients' service areas are competed each year, and each competition has the potential to result in a change in award recipient. SACs are also held prior to the current grant's project period end date when (1) a grant is voluntarily relinquished, or (2) a program noncompliance enforcement action taken by HRSA terminates the grant. If the SAC draws no fundable applications, HRSA may extend the current award recipient's budget period to ensure primary health care services remain available while a new competition is conducted for the service area.

The amount of additional grant funds is calculated by pro-rating HRSA's annual funding commitment to the service area. Approximately 6 months is required to announce and conduct a SAC and select a new award recipient. In all cases, current fiscal year funds are used to extend the award recipient's existing budget period award. Through these actions, award recipients receive consistent levels of funding to support uninterrupted primary health care services to the nation's underserved populations and communities during service area award recipient transition.

TABLE 1—RECIPIENTS AND AWARD AMOUNTS

Grant number	Award recipient name	Extension award date	Award amount (\$)
H80CS06641	Ko'olauloa Community Health and Wellness Center, Inc	12/01/15	235,116
H80CS26606	Horizon Health and Wellness, Inc	12/23/15	182,771
H80CS26604	Neighborhood Outreach Access to Health	12/23/15	192,815
H80CS00851	Duval County Health Department	01/11/16	480,066
H80CS26560	East Central Missouri Behavioral Health Services, Inc.	01/15/16	281,845
H80CS00048	Santa Cruz County	01/15/16	672,655
H80CS00001	City of Springfield, Massachusetts	01/15/16	606,761
H80CS00384	Monroe County Health Center	01/15/16	640,737
H80CS26631	La Casa de Salud, Inc	01/15/16	563,753
H80CS00400	Circle Family Healthcare Network, Inc	01/22/16	501,296
H80CS00013	Covenant House (Under 21)	02/03/16	279,116
H80CS26632	Whitman-Walker Clinic, Inc	02/06/16	423,273
H80CS00054	Metropolitan Development Council	02/06/16	457,843
H80CS00055	White Bird Clinic	02/10/16	412,985
H80CS26587	Saint Hope Foundation	02/10/16	229,491
H80CS26620	Korean Health, Education, Information and Research Center	02/12/16	504,386
H80CS26513	FirstMed Health and Wellness Center	02/12/16	596,025
H80CS00870	Health Center of Southeast Texas	02/12/16	737,066
H80CS00872	Madison County Community Health Center	03/01/16	467,855
H80CS00622	The Hunter Health Clinic, Inc	03/08/16	450,569
H80CS10606	St. Vincent de Paul Village, Inc	04/06/16	334,418
H80CS06078	Yakima Neighborhood Health Services	04/06/16	1,025,892
H80CS17251	Upper Room Aids Ministry, Inc. Health Care Center	04/06/16	738,043
H80CS00722	Community Clinic of Maui, Inc	04/06/16	570,042
H80CS01443	Lane County	05/15/16	649,218
H80CS00054	Metropolitan Development Council	06/14/16	228,922
H80CS00299	Brazos Valley Community Action Agency, Inc	01/17/17	1,520,645
H80CS00814	Kalihi-Palama Health Center	01/17/17	1,105,506

TABLE 1—RECIPIENTS AND AWARD AMOUNTS—Continued

Grant number	Award recipient name	Extension award date	Award amount (\$)
H80CS00802	Harrington Family Health Center	02/22/17	294,843
H80CS00436	Family Health Centers of Baltimore	02/27/17	743,058
H80CS00283	Oakland Primary Health Services, Inc	03/03/17	466,752
H80CS00291	The University of Pittsburgh	05/02/17	116,417
H80CS06445	Fourth Ward d.b.a. Good Neighbor Healthcare Center	05/30/17	538,786

FOR FURTHER INFORMATION CONTACT: Matt Kozar, Strategic Initiatives and Planning Division Director, Office of Policy and Program Development, Bureau of Primary Health Care, Health Resources and Services Administration, at mkozar@hrsa.gov or 301-443-1034.

Dated: March 8, 2018.

George Sigounas,
Administrator.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Solicitation of Nominations for Appointment to the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria

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

ACTION: Notice.

SUMMARY: The U.S. Department of Health and Human Services (HHS) is soliciting nominations of individuals who are interested in being considered a voting member for appointment to the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (Advisory Council). Nominations from qualified individuals who wish to be considered for appointment to this member category of the Advisory Council are currently being accepted.

DATES: Nominations must be received no later than 5:00 p.m. ET on April 30, 2018.

ADDRESSES: Information on how to submit a nomination is on the Advisory Council website, <http://www.hhs.gov/ash/carb/>.

FOR FURTHER INFORMATION CONTACT: Jomana Musmar, MS, Ph.D., Acting Designated Federal Officer, Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria, Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services, Room 715H, Hubert H. Humphrey Building, 200 Independence Avenue SW, Washington, DC 20201.

Phone: (202) 690-5566; email: CARB@hhs.gov. The Advisory Council charter may be accessed online at <http://www.hhs.gov/ash/carb/>. The charter includes detailed information about the Advisory Council's purpose, function, and structure.

SUPPLEMENTARY INFORMATION: Under Executive Order 13676, dated September 18, 2014, authority was given to the Secretary of HHS to establish the Advisory Council, in consultation with the Secretaries of Defense and Agriculture. Activities of the Advisory Council are governed by the provisions of Public Law 92-463, as amended (5 U.S.C. App.), which sets forth standards for the formation and use of federal advisory committees. The Advisory Council will provide advice, information, and recommendations to the Secretary of HHS regarding programs and policies intended to: preserve the effectiveness of antibiotics by optimizing their use; advance research to develop improved methods for combating antibiotic resistance and conducting antibiotic stewardship; strengthen surveillance of antibiotic-resistant bacterial infections; prevent the transmission of antibiotic-resistant bacterial infections; advance the development of rapid point-of-care and agricultural diagnostics; further research on new treatments for bacterial infections; develop alternatives to antibiotics for agricultural purposes; maximize the dissemination of up-to-date information on the appropriate and proper use of antibiotics to the general public and human and animal healthcare providers; and improve international coordination of efforts to combat antibiotic resistance.

The Advisory Council is authorized to consist of not more than 30 members, including the voting and non-voting members and the Chair and Vice Chair. The current composition of the Advisory Council consists of 15 voting members, including the Chair and Vice Chair, five non-voting liaison representative members, and 10 non-voting *ex-officio* members.

This announcement is to solicit nominations to fill seven positions that are scheduled to be vacated during the

2018 calendar year in the voting member category. Voting members are appointed to serve three or four year terms.

The seven public voting members sought for this solicitation will be selected from individuals who are engaged in: Research on, or implementation of, interventions regarding efforts to preserve the effectiveness of antibiotics by optimizing their use; advancing research to develop improved methods for combating antibiotic resistance and conducting antibiotic stewardship; strengthening surveillance of antibiotic-resistant bacterial infections; preventing the transmission of antibiotic-resistant bacterial infections; advancing the development of rapid point-of-care and agricultural diagnostics; furthering research on new treatments for bacterial infections; developing alternatives to antibiotics for agricultural purposes; maximizing the dissemination of up-to-date information on the appropriate and proper use of antibiotics to the general public and human and animal health care providers; and improving international coordination of efforts to combat antibiotic resistance.

The public voting members will represent balanced points of view from human biomedical, public health, and agricultural fields to include surveillance of antibiotic-resistant infections, prevention and/or interruption of the spread of antibiotic-resistant threats, or development of rapid diagnostics and novel treatments. The public voting members may be physicians, veterinarians, epidemiologists, microbiologists, or other health care professionals (e.g., nurses, pharmacists, others); individuals who have expertise and experience as consumer or patient advocates concerned with antibiotic resistance, or in the fields of agriculture and pharmaceuticals; and they also may be from state or local health agencies or public health organizations. The voting public members will be appointed by the Secretary, in consultation with the Secretaries of Defense and Agriculture. All public voting members will be