Jackie Painter,

Director, Division of the Executive Secretariat.

[FR Doc. 2015–09079 Filed 4–20–15; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Request for Comments on Deliberation and Bioethics Education

AGENCY: Department of Health and Human Services, Office of the Secretary, Presidential Commission for the Study of Bioethical Issues.

ACTION: Notice.

SUMMARY: The Presidential Commission for the Study of Bioethical Issues is requesting public comment on deliberation and bioethics education.

DATES: To ensure consideration, comments must be received by July 20, 2015. Comments received after this date will be considered only as time permits.

ADDRESSES: Individuals, groups, and organizations interested in commenting on this topic may submit comments by email to *info@bioethics.gov* or by mail to the following address: Public Commentary, Presidential Commission for the Study of Bioethical Issues, 1425 New York Ave. NW., Suite C–100, Washington, DC 20005.

FOR FURTHER INFORMATION CONTACT: Hillary Wicai Viers, Communications Director, Presidential Commission for the Study of Bioethical Issues. Telephone: 202–233–3960. Email: *hillary.viers@bioethics.gov.* Additional information may be obtained at *http://www.bioethics.gov.*

SUPPLEMENTARY INFORMATION: On November 24, 2009, the President established the Presidential Commission for the Study of Bioethical Issues (Bioethics Commission) to advise him on bioethical issues generated by novel and emerging research in biomedicine and related areas of science and technology. The Commission is charged with identifying and promoting policies and practices that ensure ethically responsible conduct of scientific research and health care delivery. Undertaking these duties, the Commission seeks to identify and examine specific bioethical, legal, and social issues related to potential scientific and technological advances; examine diverse perspectives and possibilities for international collaboration on these issues; and recommend legal, regulatory, or policy actions as appropriate.

The Bioethics Commission is considering two overarching themes of its work, deliberation and education, focusing on their symbiotic relationship as twin pillars of public bioethics. Democratic deliberation has been a guiding ethical principle in the Commission's work, informing both its processes and its recommendations. The Commission also is committed to supporting bioethics education at all levels and across disciplines, through its own pedagogical materials and its recommendations for improving and integrating ethics education in a range of settings. This new project will explore the relationship between deliberation and bioethics education and the importance of public engagement in the bioethics conversation. For example, the Commission's deliberations not only advise the U.S. federal government, but also play a vital role in civic education. Bioethics education fosters the scientific and ethical literacy that supports public deliberation about science, medicine, public health, and bioethics, and helps to prepare students for their role as citizens in understanding different perspectives on complex issues that are often the subject of public policy debates.

At its meeting on November 6, 2014, the Commission heard from scholars in education, medical ethics, and political philosophy, and began its consideration of the relationship between deliberation and bioethics education and its own role in promoting both of these to advance public understanding of and engagement with bioethical debates. For example, in its most recent report, *Ethics and Ebola: Public Health Planning and Response,* the Commission made recommendations regarding the importance of public education and deliberation in preparing for public health emergencies. The ethical challenges that emerged in the U.S. response to the ongoing Ebola epidemic in western Africa underscore the need for appropriate forums for public engagement and debate on the ethical dimensions of public health decision making.

The Commission is interested in receiving comments from individuals, groups, and professional communities regarding deliberation and education in bioethics. The Commission is particularly interested in receiving public commentary regarding:

- The role of deliberation and deliberative methods to engage the public and inform debate in bioethics;
- Approaches to integrating public dialogue into the bioethics conversation;
- Bioethics education as a forum for fostering deliberative skills and preparing students to participate in public dialogue in bioethics;
- Goals of bioethics education (*e.g.,* empirical training, normative foundations, clinical ethics), and the competencies and skills bioethics education seeks to foster;
- Methods and goals of designing bioethics education and training programs at different levels (*e.g.,* undergraduate foci, master's degree programs, terminal degree programs, and professional certification);
- Potential training in bioethics across the lifespan at different educational levels and settings (*e.g.,* primary/secondary education, community education, continuing professional education), and the role of education in laying the foundation for constructive public deliberation and debate in bioethics;
- The appropriate role of professional standards for bioethicists, including core competencies for bioethicists, and potential accreditation of bioethics training or education programs;
- Integrating bioethics education across different professional contexts, and establishing ''dual competency'' through reciprocal training in bioethics and a home or primary discipline (*e.g.,* engineering and bioethics, medicine and bioethics, law and bioethics).

To this end, the Commission is inviting interested parties to provide input and advice through written comments. Comments will be publicly available, including any personally identifiable or confidential business information that they contain. Trade secrets should not be submitted.

Dated: April 13, 2015.

Lisa M. Lee,

Executive Director, Presidential Commission for the Study of Bioethical Issues.

[FR Doc. 2015–09172 Filed 4–20–15; 8:45 am]

BILLING CODE 4154–06–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Committee on Vital and Health Statistics: Meeting; Privacy, Security & Confidentiality Subcommittee

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting.

Name: National Committee on Vital and Health Statistics (NCVHS) Subcommittee on Privacy, Confidentiality & Security.

Time And Date: May 6, 2015 9:00 a.m.–5:00 p.m. EST, May 7, 2015 9:00 a.m.–12:00 p.m. EST.

Place: U.S. Department of Health and Human Services, Centers for Disease

Control and Prevention, National Center for Health Statistics, 3311 Toledo Road, Auditorium B and C, Hyattsville, Maryland 20782, (301) 458–4125.

Status: Open.

Purpose: Section 1179 of the Health Insurance Portability and Accountability Act (HIPAA) creates an exemption from compliance with HIPAA and accompanying rules when a financial institution is ''engaged in authorizing, processing, clearing, settling, billing, transferring or collecting payments.'' The purpose of this meeting is to learn how banking and other financial service businesses are using personal health data as their services evolve in support of the health industry.

The objectives of this hearing are as follows:

Increase awareness of current and anticipated financial services involving personal health data, understand section 1179 in light of these practices, and identify areas where outreach, education, technical assistance, or guidance may be useful.

Contact Person For More Information: Debbie M. Jackson, Acting Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Room 2339, Hyattsville, Maryland 20782, telephone (301) 458–4614 or Maya Bernstein, ASPE/OSDP, Room 436E, Department of Health and Human Services, 200 Independence Avenue SW., Washington, DC 20201, Phone: (202) 690–5896. Program information as well as summaries of meetings and a roster of committee members are available on the NCVHS home page of the HHS Web site: *http://www.ncvhs.hhs.gov/,* where further information including an agenda will be posted when available.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on 770–488–3204 as soon as possible.

Dated: April 15, 2015.

James Scanlon,

Deputy Assistant Secretary for Planning and Evaluation, Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation .

[FR Doc. 2015–09187 Filed 4–20–15; 8:45 am]

BILLING CODE 4151–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; 30-Day Comment Request; Assessing an Online Process To Study the Prevalence of Drugged Driving in the U.S.: Development of the Drugged Driving Reporting System (NIDA)

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the **Federal Register** on November 24, 2014, page 69864 and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institute on Drug Abuse (NIDA), the National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, *OIRA_submission@omb.eop.gov* or by fax to 202–395–6974, Attention: NIH Desk Officer.

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received within 30-days of the date of this publication.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact the NIDA Contract Officer's Representative (COR) Harold Perl, Ph.D., Chief, Prevention Research Branch, Division of Epidemiology, Services & Prevention Research, NIDA, 6001 Executive Blvd., Rockville, MD 20852 or call this non-toll-free number (301) 443–6504 or email your request, including your address to: *hperl@nida.nih.gov.* Formal requests for additional plans and instruments must be requested in writing.

Proposed Collection: Assessing an Online Process to Study the Prevalence of Drugged Driving in the U.S: Development of the Drugged Driving Reporting System, 0925–New, National Institute on Drug Abuse (NIDA), National Institutes of Health (NIH).

Need and Use of Information Collection: The study seeks to provide an improved understanding of the prevalence of drugged driving among adult drivers in the U.S and will assess the effectiveness of the online survey implementation process. The primary objectives of the study are to: (a) To provide comprehensive data on drugged driving; (b) determine if the Drugged Driving Survey Instrument (DDS) is an effective and accurate measure of drugged driving among licensed U.S. Drivers aged 18 and older. and, (c) to assess the effectiveness of the survey implementation process, including various levels of incentives for participation to determine the appropriate/optimal incentive amount needed to obtain the desired number of total survey respondents within the timeframe within which survey data will be collected. The findings will provide valuable information concerning various aspects of substance use and driving behavior, including: (1) Demographic information about drivers who do and do not drive while impaired by medication and/or drugs (*e.g.* age, zip code, type of driver's license); (2) which drugs/medications are most likely to be used while driving; (3) drivers' beliefs and attitudes toward drugged driving.

OMB approval is requested for 2 years. There are no costs to respondents other than their time. The total annualized estimated burden hours are 750.

ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Type of respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hours
Drugged Driving Survey	Adults	3,750	1	12/60	750