pharmacy benefit managers, to integrate or avoid duplicating their educational programs or requirements? What other steps might FDA consider to make implementation less burdensome and more effective?

IV. Additional Matters for Consideration

1. What other steps should FDA take to operationalize the above described goals?

2. Are there additional policy steps FDA should consider relating to the OPSC that are not identified in this notice?

We invite interested parties to review these questions and submit comments to the docket for the OPSC to consider. In addition, we invite interested parties to submit additional policy considerations or recommendations for actions that FDA could or should undertake to help the Agency better address the opioid addiction crisis.

V. References

1. Gottlieb, Scott and J. Woodcock. ''Marshaling FDA Benefit-Risk Expertise to Address the Current Opioid Abuse Epidemic.'' *Journal of the American Medical Association.* 2017;318(5):421–422. Doi:10.1001/jama.2017.9205. Available at *http://jamanetwork.com/journals/jama/fullarticle/2643333.* Accessed August 2017.

2. National Academies of Sciences, Engineering, and Medicine. ''Pain Management and the Opioid Epidemic: Balancing Societal and Individual Benefits and Risks of Prescription Opioid Use (2017), Consensus Study Report.'' Richard J. Bonnie, Morgan A. Ford, and Jonathan K. Phillips (eds.). Available at *https://www.nap.edu/catalog/24781/pain-management-and-the-opioid-epidemic-balancing-societal-and-individual.* Accessed August 2017.

3. Dowell, D., T. M. Haegerich, and R. Chou. ''CDC Guideline for Prescribing Opioids for Chronic Pain—United States, 2016.'' Item 6 in ''Determining When to Initiate or Continue Opioids for Chronic Pain.'' *Morbidity and Mortality Weekly Report Recommendations and Reports* 2016;65(No. RR–1):1–49. DOI: *http://dx.doi.org/10.15585/mmwr.rr6501e1.* Accessed August 2017.

4. Bicket, M. C., J. J. Long, P. J. Pronovost, et al. ''Prescription Opioid Analgesics Commonly Unused After Surgery, A Systematic Review.'' *JAMA Surgery.* Published online August 2, 2017. DOI:10.1001/jamasurg.2017.0831. Available at *http://jamanetwork.com/journals/jamasurgery/fullarticle/2644905.* Accessed August 2017.

5. New York State Department of Health, Mandatory Prescriber Education. Available at *https://www.health.ny.gov/professionals/narcotic/mandatory_prescriber_education/.* Accessed August 2017.

Dated: September 26, 2017.

Anna K. Abram,

Deputy Commissioner for Policy, Planning, Legislation, and Analysis.

[FR Doc. 2017–20905 Filed 9–28–17; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[HHS–OS–0990–0281–60D]

Agency Generic Information Collection Activities; Proposed Collection; Public Comment Request

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment.

DATES: Comments on the ICR must be received on or before November 28, 2017.

ADDRESSES: Submit your comments to *Sherrette.Funn@hhs.gov* or by calling (202) 795–7714.

FOR FURTHER INFORMATION CONTACT: When submitting comments or requesting information, please include the document identifier 0990–0281–60D and project title for reference, to the Report Clearance Officer, Sherrette Funn.

SUPPLEMENTARY INFORMATION: Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Information Collection Request Title: Prevention Communication Formative Research—Revision—OMB No. 0990–0281.

Abstract: The Office of Disease Prevention and Health Promotion (ODPHP) is focused on developing and disseminating health information to the public. ODPHP faces an increasingly urgent interest in finding effective ways to communicate health information to America's diverse population. ODPHP strives to be responsive to the needs of America's diverse audiences while simultaneously serving all Americans across a range of channels, from print to new communication technologies. To carry out prevention information efforts, ODPHP is committed to conducting formative and usability research to provide guidance on the development and implementation of their communication and education efforts. The information collected will be used to improve communication, products, and services that support key office activities including: Healthy People, Dietary Guidelines for Americans, Physical Activity Guidelines for Americans, *healthfinder.gov*, and increasing health care quality and patient safety. ODPHP communicates through its Web sites (*www.healthfinder.gov, www.HealthyPeople.gov, www.health.gov*) and through other channels including social media, print materials, interactive training modules, and reports. Data collection will be qualitative and quantitative and may include in-depth interviews, focus groups, web-based surveys, omnibus surveys, card sorting, and various forms of usability testing of materials and interactive tools to assess the public's understanding of disease prevention and health promotion content, responses to prototype materials, and barriers to effective use.

The program is requesting a 3-year clearance.

Likely Respondents: Respondents are likely to be either consumers or health professionals.

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Data collection task	Instrument/form name	Number of respondents	Number responses/ respondent	Average burden/ response (in hours)	Total response burden (in hours)
In-depth interviews	Screener	1,500	1	10/60	250
	Interview	500	1	1.00	500
Focus groups	Screener	2,925	1	10/60	487.5

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Data collection task	Instrument/form name	Number of respondents	Number responses/ respondent	Average burden/ response (in hours)	Total response burden (in hours)
	Focus Group	975	1	1.50	1,462.5
Intercept interviews	Interview	5,250	1	5/60	437.50
Cognitive testing of instruments.	Screener	150	1	10/60	25
	Cognitive Test	50	1	2.00	100
Web-based surveys	Screener	30,000	1	5/60	2,500
	Survey	10,000	1	15/60	2,500
Omnibus surveys	Survey	2,100	1	10/60	350
Gatekeeper reviews	Review	325	1	30/60	162.5
Card sorting	Screener	600	1	10/60	100
	Card Sort	200	1	1.00	200
Usability and prototype testing of materials (print and web).	Screener	1,800	1	10/60	300
	Usability Test	600	1	1.00	600
Total					9,975.00

Darius Taylor,

Paperwork Reduction Act Reports Clearance Officer, Department of Health and Human Services.

[FR Doc. 2017–20901 Filed 9–28–17; 8:45 am]

BILLING CODE 4150–32–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of General Medical Sciences; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting 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 of General Medical Sciences Special Emphasis Panel; Review of Support of Competitive Research (SCORE) Award Applications.

Date: October 18, 2017.

Time: 2:00 p.m. to 4:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Natcher Building, Room 3AN 18, 45 Center Drive, Bethesda, MD 20892.

Contact Person: Rebecca H. Johnson, Scientific Review Officer, Office of Scientific Review, National Institute of General Medical Sciences, National Institutes of Health, Natcher Building, Room 3AN18C, Bethesda, MD 20892, 301–594–2771, *johnsonrh@nigms.nih.gov*.

(Catalogue of Federal Domestic Assistance Program Nos. 93.375, Minority Biomedical Research Support; 93.821, Cell Biology and Biophysics Research; 93.859, Pharmacology, Physiology, and Biological Chemistry Research; 93.862, Genetics and Developmental Biology Research; 93.88, Minority Access to Research Careers; 93.96, Special Minority Initiatives; 93.859, Biomedical Research and Research Training, National Institutes of Health, HHS)

Dated: September 25, 2017.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2017–20858 Filed 9–28–17; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Biomedical Imaging and Bioengineering; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of a meeting of the National Institute of Biomedical Imaging and Bioengineering Special Emphasis Panel.

The meeting 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 of Biomedical Imaging and Bioengineering Special Emphasis Panel; P41 BTRC Application Review (2018/01).

Date: November 15–17, 2017.

Time: 6:00 p.m. to 1:00 p.m.

Agenda: To review and evaluate grant applications.

Place: Boston Hotel Buckminster, 645 Beacon Street, Boston, MA 02215.

Contact Person: John P. Holden, Ph.D., Scientific Review Officer, National Institutes of Health, National Institute of Biomedical Imaging, and Bioengineering, Bethesda, MD 20892, (301) 496–8947, *john.holden@nih.gov*.

Dated: September 25, 2017.

David Clary,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2017–20856 Filed 9–28–17; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Minority Health and Health Disparities; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting 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 materials, and personal information concerning individuals associated with the grant