

FOR FURTHER INFORMATION CONTACT:

Lillian A. Sparks Robinson, Commissioner, Administration for Native Americans at 202-401-5590, by email at Lillian.sparks@acf.hhs.gov, or by mail at 370 L'Enfant Promenade SW., 2 West, Washington, DC 20447.

SUPPLEMENTARY INFORMATION: On November 5, 2009, President Obama signed the "Memorandum for the Heads of Executive Departments and Agencies on Tribal Consultation." The President stated that his Administration is committed to regular and meaningful consultation and collaboration with tribal officials in policy decisions that have tribal implications, including, as an initial step, through complete and consistent implementation of Executive Order 13175.

The United States has a unique legal and political relationship with Indian tribal governments, established through and confirmed by the Constitution of the United States, treaties, statutes, executive orders, and judicial decisions. In recognition of that special relationship, pursuant to Executive Order 13175 of November 6, 2000, executive departments and agencies are charged with engaging in regular and meaningful consultation and collaboration with tribal officials in the development of federal policies that have tribal implications and are responsible for strengthening the government-to-government relationship between the United States and Indian tribes.

HHS has taken its responsibility to comply with Executive Order 13175 very seriously over the past decade, including the initial implementation of a Department-wide policy on tribal consultation and coordination in 1997, and through multiple evaluations and revisions of that policy, most recently in 2010. ACF has developed its own agency-specific consultation policy that complements the Department-wide efforts.

The ACF Tribal Consultation Session will begin the morning of May 21, 2015, and continue throughout the day until all discussions have been completed. To help all participants to prepare for this consultation, planning teleconference calls will be held on:

Wednesday, April 29, 2015, 3:00 p.m.–4:00 p.m. Eastern Time

Wednesday, May 6, 2015, 3:00 p.m.–4:00 p.m. Eastern Time

Wednesday, May 13, 2015, 3:00 p.m.–4:00 p.m. Eastern Time

The call-in number is: 866-769-9393. The passcode is: 4449449#.

The purpose of the planning calls will be to identify individuals who will

provide testimony to ACF, solicit for tribal moderators, and identify specific topics of interest so we can ensure that all appropriate individuals are present.

Testimonies are to be submitted no later than May 15, 2015, to: Lillian Sparks Robinson, Commissioner, Administration for Native Americans, 370 L'Enfant Promenade SW., Washington, DC 20447, anacommissioner@acf.hhs.gov.

To register for the Consultation, please visit: <https://www.surveymonkey.com/s/2015ACFTribalConsultation>.

Dated: April 3, 2015.

Mark H. Greenberg,

Acting Assistant Secretary for Children and Families.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Advisory Council on Migrant Health; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), notice is hereby given of the following meeting:

Name: National Advisory Council on Migrant Health

Dates and Times: May 4, 2015, 9:30 a.m. to 4:30 p.m.; May 5, 2015, 8:00 a.m. to 5:00 p.m.

Place: Riverwalk Plaza Hotel and Suites, 100 Villita Street, San Antonio, Texas 78205, Telephone: 210-225-1234

Status: The meeting will be open to the public.

Purpose: The purpose of the meeting is to discuss services and issues related to the health of migratory and seasonal agricultural workers and their families and to formulate recommendations for the Secretary of Health and Human Services.

Agenda: The agenda includes an overview of the Council's general business activities. The Council will also hear presentations from experts on agricultural worker issues, including the status of agricultural worker health at the local and national levels.

Agenda items are subject to change as priorities indicate.

FOR FURTHER INFORMATION CONTACT: CDR Jacqueline Rodrigue, M.S.W., Office of Quality Improvement, Bureau of Primary Health Care, Health Resources and Services Administration, 5600

Fishers Lane, Room 15-74, Maryland 20857; telephone (301) 443-2339.

Jackie Painter,

Director, Division of the Executive Secretariat.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Advisory Committee on Heritable Disorders in Newborns and Children; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463, codified at 5 U.S.C. App.), notice is hereby given of the following meeting:

Name: Advisory Committee on Heritable Disorders in Newborns and Children.

Dates and Times: May 11, 2015, 8:30 a.m. to 5 p.m., May 12, 2015, 8:30 a.m. to 4 p.m.

Place: Webinar.

Status: The meeting will be open to the public. For more information on registration and webinar details, please visit the Advisory Committee's Web site: <http://www.hrsa.gov/advisorycommittees/mchbadvisory/heritabledisorders>. The registration deadline is Monday, April 27, 2015, 11:59 p.m. Eastern Time.

Purpose: The Advisory Committee on Heritable Disorders in Newborns and Children (Committee), as authorized by the Public Health Service Act (PHS), Title XI, § 1111 (42 U.S.C. 300b-10), was established to advise the Secretary of the Department of Health and Human Services about the development of newborn screening activities, technologies, policies, guidelines, and programs for effectively reducing morbidity and mortality in newborns and children having, or at risk for, heritable disorders. In addition, the Committee's recommendations regarding additional conditions/ inherited disorders for screening that have been adopted by the Secretary are included in the Recommended Uniform Screening Panel (RUSP) and constitute part of the comprehensive guidelines supported by the Health Resources and Services Administration (HRSA). Pursuant to section 2713 of the Public Health Service Act, codified at 42 U.S.C. 300gg-13, non-grandfathered health plans are required to cover screenings included in the HRSA-supported comprehensive guidelines without charging a co-payment, co-insurance, or