

of automated collection techniques, when appropriate, and other forms of information technology.

**Voluntary Qualified Importer Program**

OMB Control Number 0910-0840—  
Extension

This information collection supports implementation of FDA’s Voluntary Qualified Importer Program (VQIP), a voluntary fee-based program that provides expedited review and import entry of human and animal foods into the United States. Program participants may import products to the United States with greater speed and predictability, avoiding unexpected delays at the point of import entry. Importers interested in applying can start their application by submitting a notice of intent to participate after setting up an account through the FDA Industry Systems (FIS) website at <https://www.access.fda.gov>, which includes a VQIP Portal User Guide. To participate, importers must meet

eligibility criteria and pay a user fee that covers costs associated with FDA’s administration of the program. Consistent with section 743(b)(1) of the Federal Food, Drug, and Cosmetic Act (FD&C Act) (21 U.S.C. 379j-31(b)(1)), FDA will publish in the **Federal Register** a schedule of fees applicable to VQIP.

Respondents to the information collection are persons that bring food, or cause food to be brought, from a foreign country into the customs territory of the United States (section 806 of the FD&C Act (21 U.S.C. 384b)) as a VQIP importer. A VQIP importer can be located outside the United States. Persons who may be a VQIP importer include the manufacturer, owner, consignee, and importer of record of a food, provided that the importer can meet all the criteria for participation. To assist respondents with the information collection, we developed the guidance document entitled, “FDA’s Voluntary Qualified Importer Program” (issued November 2016, finalized March 2022),

available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/guidance-industry-fdas-voluntary-qualified-importer-program>. The guidance document is prepared in a question-and-answer format and discusses eligibility criteria; includes instruction for completing a VQIP application; explains conditions that may result in revocation of participation as well as criteria for reinstatement; and communicates benefits VQIP importers can expect to receive under the program. The guidance also discusses preparation of the “Quality Assurance Program (QAP),” a compilation of written policies and procedures used to ensure adequate control over the safety and security of foods being imported. The guidance document was developed and issued consistent with FDA Good Guidance Practice regulations in 21 CFR part 10.115, which provides for public comment at any time.

We estimate the burden of this collection of information as follows:

TABLE 1—ESTIMATED ANNUAL REPORTING BURDEN <sup>1</sup>

Reporting using FIS VQIP portal	Number of respondents	Number of responses per respondent	Total annual responses	Average burden per response	Total hours
Initial VQIP application .....	5	1	5	180	900
Application Renewals—subsequent year .....	6	1	6	20	120
Requests for reinstatement .....	2	1	2	10	20
<b>Total .....</b>			<b>13</b>		<b>1040</b>

<sup>1</sup> There are no capital costs or operating and maintenance costs associated with this collection of information.

TABLE 2—ESTIMATED ANNUAL RECORDKEEPING BURDEN <sup>1</sup>

VQIP Participant Records Consistent with Implementing Guidance	Number of respondents	Number of responses per respondent	Total annual responses	Average burden per response	Total hours
Quality Assurance Program (QAP) preparation .....	5	1	5	160	800
QAP maintenance and updates .....	6	1	6	16	96
<b>Total .....</b>			<b>11</b>		<b>896</b>

<sup>1</sup> There are no capital costs or operating and maintenance costs associated with this collection of information.

Since our last request for OMB approval of the information collection, we have adjusted our estimate of the number of respondents based on actual participation in the program. We assume the average burden required for the respective reporting and recordkeeping activities for both initial and continued participation in the program remain constant, however we invite comment in this regard.

Dated: May 8, 2023.  
**Lauren K. Roth,**  
Associate Commissioner for Policy.  
[FR Doc. 2023-10053 Filed 5-10-23; 8:45 am]  
BILLING CODE 4164-01-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)**

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

**ACTION:** Notice.

**SUMMARY:** In accordance with the Federal Advisory Committee Act, this notice announces that the Advisory Committee on Infant and Maternal Mortality (ACIMM or Committee) has scheduled a public meeting. Information about ACIMM and the agenda for this meeting can be found on the ACIMM website at <https://www.hrsa.gov/advisory-committees/infant-mortality/index.html>.

**DATES:** June 13, 2023, 10:00 a.m. to 5:00 p.m. Eastern Time and June 14, 2023, 9:30 a.m. to 2:00 p.m. Eastern Time.

**ADDRESSES:** This meeting will be conducted in-person at HRSA Headquarters, 5600 Fishers Lane, Conference Room 5N54, Rockville, MD 20857. The meeting will also be held via webinar. The webinar link and log-in information will be available at ACIMM's website before the meeting: <https://www.hrsa.gov/advisory-committees/infant-mortality/index.html>.

**FOR FURTHER INFORMATION CONTACT:** Vanessa Lee, MPH, Designated Federal Official, Maternal and Child Health Bureau, HRSA, 5600 Fishers Lane, Room 18N84, Rockville, Maryland 20857; 301-443-0543; or [SACIM@hrsa.gov](mailto:SACIM@hrsa.gov).

**SUPPLEMENTARY INFORMATION:** ACIMM is authorized by section 222 of the Public Health Service Act (42 U.S.C. 217a), as amended and governed by provisions of Public Law 92-463, as amended (5 U.S.C. 10), which sets forth standards for the formation and use of Advisory Committees.

ACIMM advises the Secretary of Health and Human Services (Secretary) on department activities, partnerships, policies, and programs directed at reducing infant mortality, maternal mortality and severe maternal morbidity, and improving the health status of infants and women before, during, and after pregnancy. The Committee provides advice on how to coordinate federal, state, local, tribal, and territorial governmental efforts designed to improve infant mortality, related adverse birth outcomes, maternal health, as well as influence similar efforts in the private and voluntary sectors. The Committee provides guidance and recommendations on the policies, programs, and resources required to address the disparities and inequities in infant mortality, related adverse birth outcomes and maternal health outcomes, including maternal mortality and severe maternal morbidity. With its focus on underlying causes of the disparities and inequities seen in birth outcomes for women and infants,

ACIMM advises the Secretary on the health, social, economic, and environmental factors contributing to the inequities and proposes structural, policy, and/or systems level changes.

The agenda for the June 13-14, 2023, meeting is being finalized and may include the following topics: an update on the recommendations submitted to the Secretary on improving birth outcomes among American Indian and Alaska Native mothers and infants; further discussion to determine new and continuing priority areas for the Committee, including data and information related to social determinants of health and infant health equity; federal updates; and Committee operations. Agenda items are subject to change as priorities dictate. Refer to the ACIMM website listed above for any updated information concerning the meeting.

Members of the public will have the opportunity to provide written or oral comments. Requests to submit a written statement or make oral comments to ACIMM should be sent to Vanessa Lee, using the email address above at least 3 business days prior to the meeting. Public participants may submit written statements in advance of the scheduled meeting by emailing [SACIM@hrsa.gov](mailto:SACIM@hrsa.gov). Oral comments will be honored in the order they are requested and may be limited as time allows.

Individuals who plan to attend and need special assistance or a reasonable accommodation should notify Vanessa Lee at the contact information listed above at least 10 business days prior to the meeting. Since this meeting occurs in a federal government building, attendees must go through a security check to enter the building. Non-U.S. Citizen attendees must notify HRSA of their planned attendance at least 20 business days prior to the meeting in order to facilitate their entry into the building. All attendees are required to present government-issued identification prior to entry.

**Maria G. Button,**  
*Director, Executive Secretariat.*

[FR Doc. 2023-10069 Filed 5-10-23; 8:45 am]

**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the Secretary

#### Notice of Interest Rate on Overdue Debts

Section 30.18 of the Department of Health and Human Services' claims collection regulations (45 CFR part 30)

provides that the Secretary shall charge an annual rate of interest, which is determined and fixed by the Secretary of the Treasury after considering private consumer rates of interest on the date that the Department of Health and Human Services becomes entitled to recovery. The rate cannot be lower than the Department of Treasury's current value of funds rate or the applicable rate determined from the "Schedule of Certified Interest Rates with Range of Maturities" unless the Secretary waives interest in whole or part, or a different rate is prescribed by statute, contract, or repayment agreement. The Secretary of the Treasury may revise this rate quarterly. The Department of Health and Human Services publishes this rate in the **Federal Register**.

The current rate of 11½%, as fixed by the Secretary of the Treasury, is certified for the quarter ended March 31, 2023. This rate is based on the Interest Rates for Specific Legislation, "National Health Services Corps Scholarship Program (42 U.S.C. 254o(b)(1)(A))" and "National Research Service Award Program (42 U.S.C. 288(c)(4)(B))." This interest rate will be applied to overdue debt until the Department of Health and Human Services publishes a revision.

**David C. Horn,**  
*Director, Office of Financial Policy and Reporting.*

[FR Doc. 2023-10025 Filed 5-10-23; 8:45 am]

**BILLING CODE 4150-04-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

#### Request for Public Comment: 60-Day Information Collection: Indian Health Service Medical Staff Credentials Application

**AGENCY:** Indian Health Service, HHS.

**ACTION:** Notice and request for comments. Request for revision to a collection.

**SUMMARY:** In compliance with the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) invites the general public to comment on the information collection titled, "Indian Health Service Medical Staff Credentials Application," OMB Control Number 0917-0009, which expires August 31, 2023.

**DATES:** *Comment Due Date:* July 10, 2023. Your comments regarding this information collection are best assured of having full effect if received within 60 days of the date of this publication.