DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Announcing the Intent To Award a Single-Source Supplement To Continue Operating the Centers for Independent Living (CILs) Training and Technical Assistance (T&TA) Center

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) announces the intent to award a single-source supplemental to the current grant held by Independent Living Research Utilization (ILRU) for technical assistance (TA) to Centers for Independent Living (CILs). The administrative supplement for FY 2023 will be for \$1,103,545, which will be the total award for FY 2023.

FOR FURTHER INFORMATION CONTACT: For further information or comments regarding this program supplement, contact Peter Nye, U.S. Department of Health and Human Services, Administration for Community Living, Administration on Disabilities, Office of Independent Living Programs; telephone (202) 795–7606; email peter.nye@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: ACL is required by statute (section 721) to annually set aside 1.8-2% of program funds to provide TA to CILs. For more than 30 years, ILRU continues to receive ACL funding for TA as they are the only national TA center that provides TA to CILs in every state and territory, in both rural and urban areas. In partnership with the National Council on Independent Living (NCIL), the Association of Programs for Rural Independent Living (APRIL), and the University of Montana Rural Institute, ILRU's TA center called "IL-NET" is committed to providing training and technical assistance for CILs to enhance their overall efficiency and effectiveness. Their current funding from OILP is set to expire September 29,

The IL—NET is the only national center for information, training, research, and technical assistance in independent living, targeting both urban and rural areas. It is a program of TIRR Memorial Hermann, a nationally recognized medical rehabilitation facility for persons with disabilities. The IL—NET's mission as the T&TA provider for CILs is to provide training and technical assistance that supports CILs to (1) operate effective organizations; (2) fulfill their role in developing state plans for independent living; (3)

monitor, review, and evaluate the implementation of completed plans; and (4) develop partnerships with designated state entities and other agencies to foster effective independent living programs.

Program Name: Centers for Independent Living (CILs) Training and Technical Assistance Center.

Recipient: Independent Living Research Utilization (ILRU).

Period of Performance: The award will be issued for the current project period of September 30, 2023 through September 29, 2024.

Total Award Amount: \$1,103,545 in FY 2023.

Award Type: Grant Supplement. Statutory Authority: The statutory authority is contained in the Rehabilitation Act of 1973, as amended.

Basis for Award: ACL is completing a year-long funded evaluation project conducted by RTI that determines the efficacy of current TA approaches used by the Office of Independent Living Programs. The research includes recommendations as to what should be included in future statements of work. That project will end late September: the findings will inform the scope of work for next year. To that end, the goal of the one-year extension supplement is to continue to meet statutory requirements and provide timely, efficient, and responsive expertise in training and technical assistance for CILs, while allowing ACL to draw from the results of the evaluation research. This continued support to the CIL network will ensure there is no lapse in TA support and help them to improve their outcomes, operations, and governance. It also meets the statutory requirement that 1.8% of Part C funds must be set aside for technical assistance. The part C program received an increase this year, which informs the increase allocation to ILRU.

Dated: August 4, 2023.

Richard Nicholls,

Chief of Staff.

[FR Doc. 2023-17053 Filed 8-8-23; 8:45 am]

BILLING CODE 4154-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Announcing the Intent To Award a One-Year Supplement To Continue Operating the Statewide Independent Living Councils (SILCs) Training and Technical Assistance (T&TA) Center

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) announces the intent to award a one-year supplemental to the current grant held by Independent Living Research Utilization (ILRU) for technical assistance (TA) to Statewide Independent Living Councils (SILCs). The purpose of this grant is to provide TA to SILCs that supports them to operate effective organizations; fulfill their role in developing state plans for independent living; monitor, review, and evaluate the implementation of completed plans; and develop partnerships with designated state entities and other agencies to foster effective independent living programs. The administrative supplement for FY 2023 will be for \$246,296, which will be the total award for FY 2023.

FOR FURTHER INFORMATION CONTACT: For further information or comments regarding this program supplement, contact Peter Nye, U.S. Department of Health and Human Services, Administration for Community Living, Administration on Disabilities, Office of Independent Living Programs; telephone (202) 795–7606; email peter.nye@acl.hhs.gov.

SUPPLEMENTARY INFORMATION:

ACL is required by statute to annually set aside 1.8-2% of program funds to provide TA to SILCs. For more than 30 years, ILRU continues to receive ACL funding for TA as they are the only national TA center that provides TA to SILCs in every state and territory. In partnership with the National Council on Independent Living (NCIL), the Association of Programs for Rural Independent Living (APRIL), and the University of Montana Rural Institute, ILRU's TA center, called "IL-NET" is committed to providing training and technical assistance for SILCs to enhance their overall efficiency and effectiveness. Their current funding runs through September 29, 2023.

The IL-NET is the only national center for information, training, research, and technical assistance in independent living, targeting both urban and rural areas. It is a program of TIRR Memorial Hermann, a nationally recognized medical rehabilitation facility for persons with disabilities. The IL–NET's mission as the T&TA provider for SILCs is to provide training and technical assistance that supports SILCs to (1) operate effective organizations; (2) fulfill their role in developing state plans for independent living; (3) monitor, review, and evaluate the implementation of completed plans; and (4) develop partnerships with designated state entities and other

agencies to foster effective independent living programs.

Program Name: Statewide Independent Living Councils (SILCs) Training and Technical Assistance Center.

Recipient: Independent Living Research Utilization (ILRU).

Period of Performance: The award will be issued for the current project period of September 30, 2023 through September 29, 2024.

Total Award Amount: \$246,296 in FY 2023.

Award Type: Grant Supplement. Statutory Authority: The statutory authority is contained in the Rehabilitation Act of 1973, as amended.

Basis for Award: ACL is completing a year-long funded evaluation project conducted by RTI that determines the efficacy of current TA approaches used by the Office of Independent Living Programs. The research includes recommendations as to what should be included in future statements of work. That project will end late September 2023; the findings will inform the competition for TA providers next year. The goal of the one-year extension supplement is to continue to meet statutory requirements and provide timely, efficient, and responsive expertise in training and technical assistance for SILCs, while allowing ACL to compete out the TA center for the following year, drawing from the results of the evaluation research. This continued support to the SILC network will ensure there is no lapse in TA support and help them to improve their outcomes, operations, and governance.

Dated: August 4, 2023.

Richard Nicholls,

Chief of Staff.

[FR Doc. 2023-17054 Filed 8-8-23; 8:45 am]

BILLING CODE 4154-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Notice of Purchased/Referred Care Delivery Area Redesignation for the Spokane Tribe of Indians in the State of Washington

AGENCY: Indian Health Service, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: This Notice advises the public that the Indian Health Service (IHS) proposes to expand the geographic boundaries of the Purchased/Referred Care Delivery Area (PRCDA) for the

Spokane Tribe of the Spokane Reservation to include the counties of Spokane and Whitman in the State of Washington. The current PRCDA for the Spokane Tribe of the Spokane Reservation includes the Washington counties of Ferry, Lincoln, and Stevens. Spokane Tribal members residing outside of the PRCDA are eligible for direct care services, however, they are not eligible for Purchased/Referred Care (PRC) services. The sole purpose of this expansion would be to authorize additional Spokane Tribal members and beneficiaries to receive PRC services. **DATES:** Comments must be submitted

September 8, 2023.

ADDRESSES: Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission. You may submit comments in one of four ways:

- 1. Electronically. You may submit electronic comments on this regulation to http://www.regulations.gov. Follow the "Submit a Comment" instructions.
- 2. By regular mail. You may mail written comments to the following address ONLY: Carl Mitchell, Director, Division of Regulatory and Policy Coordination, Indian Health Service, 5600 Fishers Lane, Mail Stop: 09E70, Rockville, Maryland 20857. Please allow sufficient time for mailed comments to be received before the close of the comment period.
- 3. By express or overnight mail. You may send written comments to the above address.
- 4. By hand or courier. If you prefer, you may deliver (by hand or courier) your written comments before the close of the comment period to the address above.

If you intend to deliver your comments to the Rockville address, please call telephone number (301) 443-1116 in advance to schedule your arrival with a staff member.

FOR FURTHER INFORMATION CONTACT:

CAPT John Rael, Director, Office of Resource Access and Partnerships, Indian Health Service, 5600 Fishers Lane, Mail Stop: 10E85C, Rockville, Maryland 20857. Telephone (301) 443-0969 (This is not a toll free number).

SUPPLEMENTARY INFORMATION:

Inspection of Public Comments: All comments received before the close of the comment period are available for viewing by the public, including any personally identifiable or confidential business information that is included in a comment.

Background: The IHS provides services under regulations in effect as of September 15, 1987, and republished at 42 CFR part 136, subparts A-C. Subpart

C defines a Contract Health Service Delivery Area (CHSDA), now referred to as a PRCDA, as the geographic area within which PRC will be made available by the IHS to members of an identified Indian community who reside in the PRCDA. Residence within a PRCDA by a person who is within the scope of the Indian health program, as set forth in 42 CFR 136.12, creates no legal entitlement to PRC but only potential eligibility for services. Services needed, but not available at an IHS/Tribal facility, are provided under the PRC program depending on the availability of funds, the person's relative medical priority, and the actual availability and accessibility of alternate resources in accordance with the regulations.

The regulations at 42 CFR part 136, subpart C provide that, unless otherwise designated, a PRCDA shall consist of a county which includes all or part of a reservation and any county or counties which have a common boundary with the reservation, 42 CFR 136.22(a)(6). The regulations also provide that after consultation with the Tribal governing body or bodies on those reservations included within the PRCDA, the Secretary may from time to time, redesignate areas within the United States for inclusion in or exclusion from a PRCDA, 42 CFR 136.22(b). The regulations require that certain criteria must be considered before any redesignation is made. The criteria are as follows:

(1) The number of Indians residing in the area proposed to be so included or excluded;

(2) Whether the Tribal governing body has determined that Indians residing in the area near the reservation are socially and economically affiliated with the

(3) The geographic proximity to the reservation of the area whose inclusion or exclusion is being considered; and

(4) The level of funding which would be available for the provision of PRC.

Additionally, the regulations require that any redesignation of a PRCDA must be made in accordance with the procedures of the Administrative Procedure Act (5 U.S.C. 553), 42 CFR 136.22(c). In compliance with this requirement, the IHS is publishing this Notice and requesting public comments.

The Spokane Tribe of the Spokane Reservation is located in the Northeastern part of Washington State. The Tribe is located on an approximately 157,000 acre reservation that is located in Stevens, Lincoln, and Spokane Counties.

The PRC Program is operated as a Federal program through the Wellpinit