

| Regulation citation | Form name | Number of respondents | Number of responses per respondent | Total responses | Average burden per response (in hours) | Total burden hours (rounded up) |
|---------------------|-------------------------------------|-----------------------|------------------------------------|-----------------|--|---------------------------------|
| | Missing Report From Query Form | 10 | 1 | 10 | .0800 | 1 |
| | Total | 8,114,604 | | 8,114,604 | | 374,268 |

HRSA specifically requests comments on: (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.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2023–17987 Filed 8–21–23; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Supplemental Award; Infant-Toddler Court Program—National Resource Center

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

ACTION: Notice of a HRSA-initiated supplemental award.

SUMMARY: HRSA is providing approximately \$1.91 million in supplemental award funds under HRSA–22–074 in fiscal year 2023 to the recipient of the Infant-Toddler Court Program (ITCP)—National Resource Center (NRC) award, to support state and local capacity to implement the ITC approach at sites that previously received funding under HRSA–18–123 but that do not currently receive HRSA funding under HRSA–22–073 or HRSA–22–074. It is also providing approximately \$650,000 in

supplemental award funds under this notice of funding opportunity (NOFO) to support ITC sites with high need and capacity to provide Medicaid redetermination navigation support to families.

FOR FURTHER INFORMATION CONTACT:

Kateryna Zoubak, Early Childhood Systems Analyst, Division of Home Visiting and Early Childhood Systems, Maternal and Child Health Bureau, Health Resources and Services Administration, at ezoubak@hrsa.gov or 240–475–8014.

SUPPLEMENTARY INFORMATION:

Intended Recipient of the Award: ZERO TO THREE National Center for Infant, Toddler and Families, Inc.

Amount of Non-Competitive Award(s): One award of approximately \$2.56 million.

Project Period: September 30, 2023, to September 29, 2024.

Assistance Listing (CFDA) Number: 93.110.

Award Instrument: Cooperative Agreement.

Authority: 42 U.S.C. 701(a)(2) (Social Security Act, title V, section 501(a)(2)).

TABLE 1—RECIPIENTS AND AWARD AMOUNTS

| Grant No. | Award recipient name | City, State | Award amount |
|------------------|---|-------------|-----------------------------|
| U2DMC32394 | ZERO TO THREE National Center for Infant, Toddler and Families, Inc | DC | \$2.56 million (estimated). |

Justification: The Consolidated Appropriations Act, 2023, included additional funds that are being used to support ITCs. HRSA understands guidance provided in House Report 117–403 to support the award of additional funds for the NRC to provide implementation support and subject matter expertise to ITC teams and to advance national-level reach and impact of the program, including via subaward funds to local ITC teams who previously received financial support and technical assistance under HRSA–18–123, which was in place in 2022. Both of these objectives will be accomplished through a supplement to the NRC.

The planned supplemental award to the ITCP NRC aligns with the most recent funding opportunity (HRSA–22–074) and program purpose outlined in the NOFO, which is “to continue and

expand research-based infant-toddler court teams to change child welfare practices and improve the early developmental health and well-being of infants, toddlers, and their families,” with primary goals to (1) build the capacity of state/territorial/tribal and local teams to implement the ITC approach and lead aligned community-driven efforts to prevent and respond to child maltreatment; and (2) advance the evidence and national reach, impact, and sustainability of the ITC approach. Additional expectations of the NRC in HRSA–22–074 include that it will “lead and coordinate improvements nationwide to policy and practice in child welfare and early childhood systems” and “provide a range of tailored supports to states and local sites that implement the ITC approach” that “build upon previously-funded ITCP

efforts” (e.g., funding awards under HRSA–18–123). Additionally, under the NOFO, the NRC advances the objective of increasing the spread, scale, and coordination of local ITC sites across States, Territories, jurisdictions, and Tribal nations.

HRSA will award approximately \$1.91 million to the current ITCP NRC recipient. This funding will enhance resource development, provision of subject matter expertise, the building of capacity to implement the ITC approach, further develop national-level partnerships, and provide subawards to local court teams that were previously funded under HRSA–18–123 (but not under HRSA–22–074/073), which will advance the national reach, impact, and sustainability of ITC teams. In addition, HRSA will provide a supplement of approximately \$650,000 to enable

subawards to local ITC sites with high need and capacity to provide Medicaid redetermination navigation support to families. It will support core objectives related to timely service access and program expectations in the NOFO.

Carole Johnson,
Administrator.

[FR Doc. 2023–18051 Filed 8–21–23; 8:45 am]

BILLING CODE 4615–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Vaccine Injury Compensation Program; List of Petitions Received

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

ACTION: Notice.

SUMMARY: HRSA is publishing this notice of petitions received under the National Vaccine Injury Compensation Program (the Program), as required by the Public Health Service (PHS) Act, as amended. While the Secretary of HHS is named as the respondent in all proceedings brought by the filing of petitions for compensation under the Program, the United States Court of Federal Claims is charged by statute with responsibility for considering and acting upon the petitions.

FOR FURTHER INFORMATION CONTACT: For information about requirements for filing petitions, and the Program in general, contact Lisa L. Reyes, Clerk of Court, United States Court of Federal Claims, 717 Madison Place NW, Washington, DC 20005, (202) 357–6400. For information on HRSA’s role in the Program, contact the Director, National Vaccine Injury Compensation Program, 5600 Fishers Lane, Room 08N146B, Rockville, Maryland 20857; (301) 443–6593, or visit our website at: <http://www.hrsa.gov/vaccinecompensation/index.html>.

SUPPLEMENTARY INFORMATION: The Program provides a system of no-fault compensation for certain individuals who have been injured by specified childhood vaccines. Subtitle 2 of Title XXI of the PHS Act, 42 U.S.C. 300aa-10 *et seq.*, provides that those seeking compensation are to file a petition with the United States Court of Federal Claims and to serve a copy of the petition to the Secretary of HHS, who is named as the respondent in each proceeding. The Secretary has delegated this responsibility under the Program to

HRSA. The Court is directed by statute to appoint special masters who take evidence, conduct hearings as appropriate, and make initial decisions as to eligibility for, and amount of, compensation.

A petition may be filed with respect to injuries, disabilities, illnesses, conditions, and deaths resulting from vaccines described in the Vaccine Injury Table (the Table) set forth at 42 CFR 100.3. This Table lists for each covered childhood vaccine the conditions that may lead to compensation and, for each condition, the time period for occurrence of the first symptom or manifestation of onset or of significant aggravation after vaccine administration. Compensation may also be awarded for conditions not listed in the Table and for conditions that are manifested outside the time periods specified in the Table, but only if the petitioner shows that the condition was caused by one of the listed vaccines.

Section 2112(b)(2) of the PHS Act, 42 U.S.C. 300aa-12(b)(2), requires that “[w]ithin 30 days after the Secretary receives service of any petition filed under section 2111 the Secretary shall publish notice of such petition in the **Federal Register.**” Set forth below is a list of petitions received by HRSA on July 1, 2023, through July 31, 2023. This list provides the name of the petitioner, city, and state of vaccination (if unknown then the city and state of the person or attorney filing the claim), and case number. In cases where the Court has redacted the name of a petitioner and/or the case number, the list reflects such redaction.

Section 2112(b)(2) also provides that the special master “shall afford all interested persons an opportunity to submit relevant, written information” relating to the following:

1. The existence of evidence “that there is not a preponderance of the evidence that the illness, disability, injury, condition, or death described in the petition is due to factors unrelated to the administration of the vaccine described in the petition,” and
2. Any allegation in a petition that the petitioner either:
 - a. “[S]ustained, or had significantly aggravated, any illness, disability, injury, or condition not set forth in the Vaccine Injury Table but which was caused by” one of the vaccines referred to in the Table, or
 - b. “[S]ustained, or had significantly aggravated, any illness, disability, injury, or condition set forth in the Vaccine Injury Table the first symptom or manifestation of the onset or significant aggravation of which did not occur within the time period set forth in

the Table but which was caused by a vaccine” referred to in the Table.

In accordance with section 2112(b)(2), all interested persons may submit written information relevant to the issues described above in the case of the petitions listed below. Any person choosing to do so should file an original and three (3) copies of the information with the Clerk of the United States Court of Federal Claims at the address listed above (under the heading “**FOR FURTHER INFORMATION CONTACT**”), with a copy to HRSA addressed to Director, Division of Injury Compensation Programs, Health Systems Bureau, 5600 Fishers Lane, 08N146B, Rockville, Maryland 20857. The Court’s caption (*Petitioner’s Name v. Secretary of HHS*) and the docket number assigned to the petition should be used as the caption for the written submission. Chapter 35 of title 44, United States Code, related to paperwork reduction, does not apply to information required for purposes of carrying out the Program.

Carole Johnson,
Administrator.

List of Petitions Filed

1. Nicole Martelli on behalf of S.M., Sturbridge, Massachusetts, Court of Federal Claims No: 23–1015V
2. Jeannette Alvarez, Lakewood, Colorado, Court of Federal Claims No: 23–1024V
3. Jason Olszanicky, San Marcos, California, Court of Federal Claims No: 23–1026V
4. William Woods, Boston, Massachusetts, Court of Federal Claims No: 23–1037V
5. Angela Walker, St. Paul, Minnesota, Court of Federal Claims No: 23–1038V
6. Kelly Dziuban, Chadwicks, New York, Court of Federal Claims No: 23–1049V
7. Sandra Meneses Hernandez, Alexandria, Virginia, Court of Federal Claims No: 23–1050V
8. Sonia Borgelt, West Linn, Oregon, Court of Federal Claims No: 23–1051V
9. Mary Ditzian, Mount Joy, Pennsylvania, Court of Federal Claims No: 23–1052V
10. Faustina F. Ankomah, The Woodlands, Texas, Court of Federal Claims No: 23–1053V
11. Mikkel Prim, Phoenix, Arizona, Court of Federal Claims No: 23–1055V
12. Emily Mendez, South Miami, Florida, Court of Federal Claims No: 23–1056V
13. Steven S. Cohen, Atlanta, Georgia, Court of Federal Claims No: 23–1060V
14. Victoria Cramer and Clayton Huff on behalf of N.H., Boston, Massachusetts, Court of Federal Claims No: 23–1062V
15. Benjamin Riley, New York, New York, Court of Federal Claims No: 23–1063V
16. Aaron Woodard, Washington, District of Columbia, Court of Federal Claims No: 23–1065V
17. Alicia Sawyer on behalf of G.S., Woodstock, Georgia, Court of Federal Claims No: 23–1067V
18. John Hauck, Boston, Massachusetts, Court of Federal Claims No: 23–1069V