time to clear security. Security measures include the following:

- Presentation of a government-issued photographic identification to the Federal Protective Service or Guard Service personnel.
- Inspection, via metal detector or other applicable means, of all persons entering the building. We note that all items brought into the HHH Building, whether personal or for the purpose of presentation or to support a presentation, are subject to inspection. We cannot assume responsibility for coordinating the receipt, transfer, transport, storage, set up, safety, or timely arrival of any personal belongings or items used for presentation or to support a presentation.

Note: Individuals who are not registered in advance will not be permitted to enter the building and will be unable to attend the meeting.

V. Collection of Information

This document does not impose information collection requirements, that is, reporting, recordkeeping, or third-party disclosure requirements. Consequently, there is no need for review by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35).

The Administrator of the Centers for Medicare & Medicaid Services (CMS), Chiquita Brooks-LaSure, having reviewed and approved this document, authorizes Chyana Woodyard, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Chyana Woodyard,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2024–18691 Filed 8–20–24; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice of Supplemental Award; Pediatric Mental Health Care Access Program

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

ACTION: Notice of supplemental award.

summary: HRSA is announcing supplemental funding to expand existing Pediatric Mental Health Care Access Program (PMHCA) activities. The recipients of the supplemental awards will enhance workforce capacity in pediatric primary care, school settings, and emergency departments to address growing behavioral health needs among children and adolescents.

FOR FURTHER INFORMATION CONTACT: Lauren Ramos, Maternal and Child Health Bureau, HRSA, at *LRamos@ hrsa.gov* or 301–443–6091.

SUPPLEMENTARY INFORMATION:

Intended Recipient(s) of the Awards: Fifty-four PMHCA award recipients will receive supplemental funding awards to continue to address behavioral health needs of children and adolescents. Funds are provided from the Bipartisan Safer Communities Act (BSCA) (Pub. L. 117-159) and PMHCA program annual appropriations. HRSA is providing supplemental funding for all PMHCA current award recipients in a manner that will ensure that, as a result of all PMHCA funding provided over the past two fiscal years (FY), all award recipients will be offered consistent funding over a consistent timeframe.

Number of Award Recipients, Project Periods, and Amount of Non-Competitive Award Offered:

- FY 2021 and FY 2022 awards (HRSA– 21–122 and HRSA–22–121) have 29 award recipients:
 - FY 2021 award project period:
 September 30, 2021, to September

- 29, 2026
- FY 2022 award project period: September 30, 2022, to September 29, 2026
- \$4,582,000 supplemental budget offered (U4A grant numbers). This is \$158,000 for each of the 29 award recipients. The project period will be July 31, 2024, to September 29, 2025.
- FY 2023 awards (HRSA-23-081) have 25 award recipients:
 - FY 2023 award project period:
 September 30, 2023, to September 29, 2026
 - \$3,950,000 supplemental budget offered (U4C grant numbers). This is \$158,000 for each award recipient. Funds will be awarded on or before September 30, 2024.
- FY 2021 and FY 2022 awards (HRSA– 21–122 and HRSA–22–121) have 19 award recipients:
 - FY 2021 award project period:
 September 30, 2021, to September 29, 2026
 - FY 2022 award project period: September 30, 2022, to September 29, 2026
 - \$4,845,000 supplemental budget offered (U4A grant numbers). This is \$255,000 for each award recipient that did not receive these supplemental funds in FY 2023. The project period will be July 31, 2024, to September 29, 2025.

Supplemental funding for similar activities may be considered in future years, subject to the availability of funding for the activity and the satisfactory performance of the recipient. A statutory requirement at 42 U.S.C. 254c–19(f) (§ 330M(f) of the Public Health Service Act) requires that PMHCA award recipients match federal funding with a 20 percent non-federal match.

Assistance Listing (CFDA) Number: 93.110.

Award Instrument: Supplements for Services.

Authority: 42 U.S.C. 254c–19 (§ 330M of the Public Health Service Act).

TABLE 1—ACTION 1: 29 U4A RECIPIENTS AND SUPPLEMENTAL AWARD AMOUNT

Original Award No. (supplements will be issued on new awards)	Organization name	Supplement/increase to base for all 29 U4A PMHCA awardees
U4AMC45817	My Health Resources of Tarrant County	\$158,000
U4AMC44236	Government of the District of Columbia	158,000
U4AMC44241	Kentucky Cabinet for Health & Family Services	158,000
U4AMC44256	West Virginia Department of Health and Human Resources	158,000
U4AMC44237	Florida Department of Health	158,000
U4AMC44247	New Mexico Department of Health	158.000
U4AMC44240	Indiana Family and Social Services Administration	158,000
U4AMC44246	Republic Of Palau	158,000
U4AMC44234	Regents of the University of California, San Francisco	158,000
U4AMC44235	Connecticut Department of Children and Families	158.000

TABLE 1—ACTION 1: 29 U4A RECIPIENTS AND SUPPLEMENTAL AWARD AMOUNT—Continued

Original Award No. (supplements will be issued on new awards)	Organization name	Supplement/increase to base for all 29 U4A PMHCA awardees
U4AMC44248	Health Research, Inc	158,000
U4AMC44245	Red Lake Band of Chippewa Indians	158,000
U4AMC44253	Virgin Islands Department of Health Group	158,000
U4AMC45819	University of Arkansas System	158,000
U4AMC45818	Illinois Department of Public Health	158,000
U4AMC45815	Commonwealth Healthcare Corporation	158,000
U4AMC44255	Washington State Department of Health	158,000
U4AMC44250	Oklahoma Department of Mental Health and Substance Abuse Services	158,000
U4AMC44244	Minnesota Department of Health	158.000
U4AMC44243	Massachusetts Department of Public Health	158,000
U4AMC44239	Hawaii Department of Health	158.000
U4AMC44249	Chickasaw Nation	158,000
U4AMC44254	Vermont Agency of Human Services	158,000
U4AMC44251	South Carolina Department of Mental Health	158,000
U4AMC44252	Tennessee Department of Health	158,000
U4AMC44242	Louisiana Department of Health	158,000
U4AMC44257	Wyoming Department of Health	158,000
U4AMC44238	Department of Behavioral Health and Developmental Disabilities (GA)	158,000
U4AMC45816	FSM Department of Health and Social Affairs	158,000

TABLE 2—ACTION 2: 25 U4C RECIPIENTS AND SUPPLEMENTAL AWARD AMOUNT

Award No.	Organization name	Proposed supplement/ increase to base for all 25 U4C PMHCA awardees
U4CMC32321	Michigan Department of Health and Human Services	\$158,000
U4CMC49928	Department of Public Health & Social Services (Guam)	158,000
U4CMC49929	Executive Office of the Governor of Delaware	158,000
U4CMC32323	Alaska Department of Health and Social Services	158,000
U4CMC32320	Virginia Department of Health	158,000
U4CMC32911	Kansas Department of Health and Environment	158,000
U4CMC49933	University of South Dakota	158,000
U4CMC49944	University of Utah	158,000
U4CMC32312	Alabama Department of Mental Health	158,000
U4CMC49931	Ohio Department of Health	158,000
U4CMC32329	lowa Department of Public Health	158,000
U4CMC32316	New Hampshire Department of Health and Human Services	158,000
U4CMC32912	Maine Department of Health and Human Services	158,000
U4CMC49927	Board of Regents of Nevada	158,000
U4CMC49932	University of Maryland, Baltimore	158,000
U4CMC32314	Mississippi Department of Mental Health	158,000
U4CMC32322	Nebraska Department of Health and Human Services	158,000
U4CMC32326	Missouri Department of Mental Health	158,000
U4CMC49930	North Dakota Department of Human Services	158,000
U4CMC32327	Colorado Department of Public Health and Environment	158,000
U4CMC32319	Rhode Island Department of Health	158,000
U4CMC32324	Wisconsin Department of Health Services	158,000
U4CMC32317	New Jersey Department of Health	158,000
U4CMC32328	Montana Department of Public Health and Human Services	158,000
U4CMC32315	North Carolina Department of Health & Human Services	158,000

TABLE 3—ACTION 3: 19 U4A RECIPIENTS AND SUPPLEMENTAL AWARD AMOUNT

Original award No. (supplements will be issued on new awards issued in the first action)	Organization name	Supplement/ increase to base for 19 U4A PMHCA awardees
U4AMC44241 U4AMC44256 U4AMC44247 U4AMC44240	My Health Resources of Tarrant County	\$255,000 255,000 255,000 255,000 255,000 255,000
U4AMC44245	Red Lake Band of Chippewa Indians	255,000 255,000 255,000

Original award No. (supplements will be issued on new awards issued in the first action)	Organization name	Supplement/ increase to base for 19 U4A PMHCA awardees
U4AMC45818	Illinois Department of Public Health	255,000
U4AMC45815	Commonwealth Healthcare Corporation	255,000
U4AMC44250	Oklahoma Department of Mental Health and Substance Abuse Services	255,000
U4AMC44244	Minnesota Department of Health	255,000
U4AMC44249	Chickasaw Nation	255,000
U4AMC44254	Vermont Agency of Human Services	255,000
U4AMC44251	South Carolina Department of Mental Health	255,000
U4AMC44252	Tennessee Department of Health	255,000
U4AMC44242	Louisiana Department of Health	255,000
U4AMC44257	Wyoming Department of Health	255,000
U4AMC45816	FSM Department of Health and Social Affairs	255,000

TABLE 3—ACTION 3: 19 U4A RECIPIENTS AND SUPPLEMENTAL AWARD AMOUNT—Continued

Justification: HRSA is issuing noncompetitive supplemental funds in FY 2024 for all PMHCA award recipients to continue to address behavioral health needs among children and adolescents. HRSA will offer supplemental funding for all 54 PMHCA current award recipients in a manner that will ensure that, as a result of all PMHCA funding provided over the past two fiscal years, all award recipients will be offered consistent funding over a consistent timeframe. If PMHCA current award recipients decline supplemental funding, that declined funding will be distributed among remaining recipients as allowable. Supplemental funding will be awarded through three consecutive

- First Action: Offer supplemental funding of \$158,000 to 29 PMHCA recipients who will then be tracked with new U4A grant numbers; these award recipients will continue to be tracked separately for their ARP (Pub. L. 117–2) funding.
- Second Action: Offer supplemental funding of \$158,000 to 25 PMHCA recipients who are already tracked with U4C grant numbers.
- Third Action: Offer supplemental funding of \$255,000 to the 19 PMHCA recipients that did not receive these supplemental funds in FY 2023, who are tracked under the new U4A grant numbers issued in the First Action.

PMHCA program award recipients will continue to expand the reach and capacity of PMHCA programs started in FY 2022 to provide training and teleconsult support to pediatric primary care providers as well as to providers in other settings, including emergency departments and educational agencies and schools.

The above activities are within the original scope of the PMHCA program

(HRSA–23–081, HRSA–22–121, and HRSA–21–122).

Carole Johnson,

Administrator.

[FR Doc. 2024-18720 Filed 8-20-24; 8:45 am]

BILLING CODE 4165-15-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 8W–25A, 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