maintained by the Committee Management Secretariat under the General Services Administration. The website address for the FACA database is *https://www.facadatabase.gov/.*

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2024–28087 Filed 11–29–24; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Meeting of the Advisory Committee on Infant and Maternal 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: January 7, 2025, from 12:00 p.m. to 5:00 p.m. Eastern Time and January 8, 2025, from 12:00 p.m. to 5:00 p.m. Eastern Time.

ADDRESSES: This meeting will be held by webinar. *The webinar link and log-in information will be available at the ACIMM 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, Rockville, Maryland, 20857; 301–443–0543; or *SACIM@hrsa.gov.*

SUPPLEMENTARY INFORMATION: ACIMM is authorized by section 222 of the Public Health Service Act (42 U.S.C. 217a), as amended. The Committee is governed by provisions of the Federal Advisory Committee Act (5 U.S.C. Chapter 10), as amended.

ACIMM advises the Secretary of Health and Human Services 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; and 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, the Committee advises the Secretary of Health and Human Services 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 January 7–8, 2025, meeting is being finalized and may include the following topics: federal updates; Committee operations updates; discussion of draft recommendations for the Secretary on achieving optimal maternal health and overall birth outcomes for underserved populations, including Black/African-American families; and a vote on whether to send the draft recommendations forward. 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. Public participants may submit written statements in advance of the scheduled meeting by emailing *SACIM@hrsa.gov.* Oral comments will be presented in the order they are requested and may be limited as time allows. Requests to submit a written statement or make oral comments to ACIMM should be sent to Vanessa Lee, Designated Federal Official, using the email address above, at least 3 business days prior to the meeting.

Individuals who plan to attend and need special assistance or another reasonable accommodation should notify Vanessa Lee at the contact information listed above at least 10 business days prior to the meeting.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2024–28155 Filed 11–29–24; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the Advisory Committee on Minority Health

AGENCY: Office of Minority Health, Office of the Secretary, U.S. Department of Health and Human Services.

ACTION: Notice of meeting.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Services (HHS) is hereby giving notice that the Advisory Committee on Minority Health (ACMH) will hold a meeting conducted as a webcast on December 16, 2024. This virtual meeting will be open to the public. Registration is required for the public to attend the meeting, provide comment, and/or distribute material(s) to ACMH members.

DATES: The virtual ACMH meeting will be held on December 16, 2024, from 2 p.m. to 3:30 p.m. eastern standard time (EST). If the Committee completes its work before 3:30 p.m. EST, the meeting will adjourn early.

ADDRESSES: The meeting will be held virtually and will be accessible by webcast. Instructions regarding webcast access and providing written public comments will be given after meeting registration occurs.

Any individual who wishes to participate in the virtual meeting should register using the Zoom registration link provided below by 5 p.m. EST on December 12, 2024. Instructions regarding participating in the call and providing written or verbal public comments will be provided after meeting registration occurs. Information about the meeting will be posted on the HHS Office of Minority Health (OMH) website: *www.minorityhealth.hhs.gov.* Information about ACMH activities can be found on the OMH website under the heading *About OMH, Committees and Working Groups.*

FOR FURTHER INFORMATION CONTACT: Violet Woo, Designated Federal Officer, Advisory Committee on Minority Health, OMH, HHS, Tower Building, 1101 Wootton Parkway, Suite 100, Rockville, Maryland 20852. Phone: 240–453–6816; email: *OMH-ACMH@hhs.gov.*

SUPPLEMENTARY INFORMATION: In accordance with Public Law 105–392, the ACMH was established to provide advice to the Deputy Assistant Secretary for Minority Health on the development of goals and program activities related to OMH's duties.

The topics to be discussed during the virtual meeting include finalizing: (1)

meeting notes of the November 14–15, 2024 ACMH open meeting; and (2) recommendations on the implementation of the updated Office of Management and Budget (OMB) Federal race and ethnicity data collection standards (SPD 15) that is focused on opportunities for engagement with racial, ethnic, and Tribal community level organizations to support increased awareness of OMB SPD 15 and their intended goals within their communities. The final recommendations will be given to the Deputy Assistant Secretary for Minority Health to inform efforts related to engagement with racial, ethnic, and Tribal community level organizations to support increased awareness of OMB SPD 15 and their intended goals within their communities.

Any individual who wishes to attend the meeting must register via the Zoom registration link, *https://www.zoomgov.com/webinar/register/WN_iZGnp8BWRQORITiqVcThzA,* by 5 p.m. EST on December 12, 2024. Each registrant should provide their name, affiliation, phone number, email address, if they plan to provide either written or verbal comment, and whether they have requests for special accommodations, including sign language interpretation. After registering, registrants will receive an automated email response with the meeting connection link. The meeting connection link is unique to each registrant and should not be shared.

Members of the public will have an opportunity to provide comments at the meeting. Individuals should indicate during registration whether they intend to provide written or verbal comment. Public comments will be limited to two minutes per speaker during the time allotted. Individuals of the public may also submit and distribute electronic or printed statements or material(s) related to this meeting's topic. Written statements or material(s) should be double-spaced with one-inch margins and not exceed two pages in length. Any content beyond the two-page limit will not be presented to the Committee. Registered members of the public who plan to submit electronic and distribute electronic or printed public statements or material(s) related to the meeting's topic should email the material to *OMH-ACMH@hhs.gov* at least two (2) business days prior to the meeting.

Violet Woo,

Designated Federal Officer, Advisory Committee on Minority Health.

[FR Doc. 2024–28167 Filed 11–29–24; 8:45 am]

BILLING CODE 4150–29–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of an Exclusive Patent License: Vaccine Augmented Tumor Infiltrating Lymphocytes for the Treatment of Cancer

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Cancer Institute, an institute of the National Institutes of Health, Department of Health and Human Services, is contemplating the grant of an Exclusive Patent License to practice the inventions embodied in the Patents and Patent Applications listed in the Supplementary Information section of this Notice to Iovance Biotherapeutics, Inc. (''Iovance''), headquartered in San Carlos, CA.

DATES: Only written comments and/or applications for a license which are received by the National Cancer Institute's Technology Transfer Center on or before December 17, 2024 will be considered.

ADDRESSES: Requests for copies of the patent applications, inquiries, and comments relating to the contemplated Exclusive Patent License should be directed to: Andrew Burke, Ph.D., Senior Technology Transfer Manager, NCI Technology Transfer Center, Telephone: (240)–276–5484; Email: *andy.burke@nih.gov.*

SUPPLEMENTARY INFORMATION:

Intellectual Property

1. United States Provisional Patent Application No. 63/295,762 filed December 31, 2021, entitled ''T Cell Therapy with Vaccination as a Combination Immunotherapy Against Cancer'' [HHS Reference No. E–046–2022–0–US–01];

2. International Patent Application No. PCT/US2022/082579 filed December 29, 2022, entitled ''T Cell Therapy with Vaccination as a Combination Immunotherapy Against Cancer'' [HHS Reference No. E–046–2022–0–PCT–02];

3. Australian Patent Application No. 2022425620 filed June 25, 2024, entitled ''T Cell Therapy with Vaccination as a Combination Immunotherapy Against Cancer'' [HHS Reference No. E–046–2022–0–AU–01];

4. Canadian Patent Application No. 3241588 filed June 18, 2024, entitled ''T Cell Therapy with Vaccination as a Combination Immunotherapy Against Cancer'' [HHS Reference No. E–046–2022–0–CA–01];

5. Chinese Patent Application No. 202280092973.5 filed August 30, 2024, entitled ''T Cell Therapy with Vaccination as a Combination Immunotherapy Against Cancer'' [HHS Reference No. E–046–2022–0–CN–01];

6. European Patent Application No. 22854399.7 filed June 25, 2024, entitled ''T Cell Therapy with Vaccination as a Combination Immunotherapy Against Cancer'' [HHS Reference No. E–046–2022–0–EP–01];

7. Japanese Patent Application No. 2024–539628 filed June 28, 2024, entitled ''T Cell Therapy with Vaccination as a Combination Immunotherapy Against Cancer'' [HHS Reference No. E–046–2022–0–JP–01]; and

8. United States Patent Application No. 18/720,347 filed June 14, 2024, entitled ''T Cell Therapy with Vaccination as a Combination Immunotherapy Against Cancer'' [HHS Reference No. E–046–2022–0–US–02].

The patent rights in these inventions have been assigned and/or exclusively licensed to the Government of the United States of America.

The prospective exclusive license territory may be ''worldwide'', and the field of use may be limited to the following:

''Development, manufacture and commercialization of combination immunotherapies for the treatment of cancer in humans, comprising at least the following elements:

1. An autologous tumor infiltrating lymphocyte (TIL) T cell product; and

2. A neoantigen cancer vaccine.''

The E–046–2022 patent family is primarily directed to a combination immunotherapy comprising a population of antigen-specific immune cells (*e.g.,* T cells) and a vaccine targeting the same antigen(s). In oncology, many adoptive cell therapies rely on antigen-specific T cells isolated from the patient in need of treatment. However, these cells often exist in a terminally differentiated and exhausted state and are unable to mount a robust immune response following reinfusion. Recent evidence suggests that administration of a vaccine in parallel with the T cell product can ameliorate this performance defect when the vaccine targets antigen(s) recognized by the T cells. This two-part approach may enhance treatment efficacy.

It is noted that the exclusive field of use which may be granted to Iovance applies to only certain autologous T cell products and vaccination strategies and does not include, for example, any non-TIL-based applications. Accordingly, the scope of rights which may be conveyed under the proposed license