NCUIH REGULATIONS TRACKER: Active Comments and Events updated 4/19/2024

Document Category	Agency Title	Citation	Published Date	Ageny Action	Summary	Additional Information
DTLL	HHS	N/A	3/27/2024	The Deputy Assistant Secretary for Human Services Policy with the HHS writes to invite Tribal leaders to discuss the HHS' Equity Action Plan.	The Equity Action Plan is part of the HHS' efforts to implement the President's Executive Order on "Further Advancing Racial Equity and Support for Underserved Communities Through The Federal Government," which reaffirmed the Administration's commitment to deliver equity and build an America in which all can participate, prosper, and reach their full potential. HHS is inviting Tribes to share feedback on the Plan's priority areas and to hear Tribal leaders' thoughts and concerns.	The virtual Tribal Consultation will take place on April 29, 2023, from 2:30 to 4 PM Eastern. To help plan, HHs invites written questions or comment comments to consultation@hhs.gov. A 30-day written comment period will be available after the virtual consultation. https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/b3f9388d-7781-4201-adec-c007df80bd7e.pdf
DTLL/DULL	IHS	N/A	1/18/2024	The IHS Director writes to invite Tribal and UIO leaders to join a series of four Tribal Consultations and Urban Confer session in calendar year 2024 on Health IT Modernization.	IHS is holding the meetings to ask questions and receive feedback from Tribal and UIO leaders. During the second event scheduled for May 9, the IHS provide information on and received feedback concerning deployment and cohort planning.	The Tribal Consultation and Urban Confer sessions are virutal from 1:30 PM to 3 PM Eastern on May 8, 2024. Please email your comments and recommendations on Health IT Modernization within 30 days following each session to consultation@ihs.gov line "Health IT Modernization." https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_011824.pdf
DTLL	DOI, HHS, DOJ	N/A	4/17/2024	DOI, HHS, and DOJ write to invite Tribal leaders to provide input on the ICWA and steps the agencies cant ake to promote federal protections for Indian children and their parents and caregivers.	This will be the final consultation and comment period on the jointagency efforts to Strengthen ICWA. The Agencies are seeking input on the following: • What additional supports would Tribal leaders find helpful to build their Tribe's capacity to exercise their rights and responsibilities under ICWA? • Are there specific supports you believe the Federal government could provide to help state courts and child welfare agencies meet their obligations under ICWA? In your experience, are there specific aspects or requirements of ICWA where state courts and agencies need to build greater understanding or capacity? • Are there existing State-Tribe collaborative partnerships or processes that you believe have helped support effective implementation of ICWA?	The virtual and in-person Tribal Consultation will be May 14, 2024, from 2 to 4 PM CDT. Written comments are due to consultation@bia.gov by 1 https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/46b85045-1d5a-4fd4-80bb-45a041426de5.pdf
DULL	VA	N/A	Published 3/27/2024	The Veterans Health Administration (VHA) and the Indian Health Service (IHS) are writing to request your recommendations on the Draft Annual Operational Plan for fiscal year (FY) 2024 and to share the completed FY 2023 VHA-IHS Memorandum of Understanding (MOU) Operational Plan. This updated plan was based on collective input from a series of Tribal Consultation and Urban Confer sessions held in September and October 2022.	The next round of Tribal Consultation and Urban Confer will be held in the spring of FY 2024. We will convene a joint in-person Tribal Consultation and Urban Confer session that will be held on Monday, April 15, 2024, during the Tribal Self-Governance Conference at the Gila River Indian Community's Wildhorse Pass Resort in Chandler, Arizona. https://content.govdelivery.com/attachments/USVAOTGR/2024/03/27/file_attachments/2828705/64834-1%20%20Enclosure%20--DRAFT%20VHA%20IHS%20MOU%20Operational%20Plan%203-27-24%20%28002%29.pdf	Please send your written comments and recommendations on the VHA-IHS MOU Operational Plan for FY 2024 no later than April 30, 2024. https://content.govdelivery.com/attachments/USVAOTGR/2024/03/27/file_attachments/2828688/64834-1%20DTLL%20DUIOLL%20Joint%20With
DTLL	HUD	N/A	Published 3/29/2024	Tribes, Tribally Designated Housing Entities and Tribal Housing Authorities Public Engagement Listening Session on HUD's Draft 2024-2028 Environmental Justice Strategic Plan	The U.S. Department of Housing and Urban Development (HUD) is in the process of developing its 2024-2028 Environmental Justice Strategic Plan. The Department is inviting Tribal leaders and representatives to participate in the Department's upcoming public engagement listening session on the development of the Strategic Plan. This is an opportunity for tribal representatives to hear specifics from HUD officials regarding the development of the Environmental Justice Strategic Plan and to provide feedback on the priorities HUD should consider in the development of this strategic document. During this listening session, HUD will provide an update on the development of the strategy and engage with tribal representatives regarding the desired outcomes of the strategic plan. HUD will also ask open-ended questions so as to hear from those who attend on their specific feedback, opportunities, and concerns related to environmental justice within Tribal communities that may improve the strategic outcomes of the document and its priorities.	HUD will host a virtual public engagement listening session specific to Tribes, Tribally Designated Housing Entities, and Tribal Housing Authorities w webinar begins at 2:00 p.m. Eastern Daylight Time (you may join the conference 10 minutes prior). Environmental Justice Strategic Plan Listening Session I: Tribes, Tribally Designated Housing Entities and Tribal Housing Authorities – April 30, 2024, https://www.zoomgov.com/meeting/register/vJIsd--trjoiH_RQ2Kz10rGVhyoxFgAS6ko https://acrobat.adobe.com/id/urn:aaid:sc:VA6C2:afe9c0ef-909b-4f82-9299-2a7274a0ca6a
Executive Order	White House	3/21/2024	Published 3/21/2024	Executive Order 14120 Advancing Women's Health Research and Innovation	President Biden signed a new Executive Order that will direct the most comprehensive set of executive actions ever taken to expand and improve research on women's health. These directives will ensure women's health is integrated and prioritized across the federal research portfolio and budget, and will galvanize new research on a wide range of topics, including women's midlife health.	Federal Register :: Advancing Women's Health Research and Innovation
DULL	VA	N/A	Published 3/20/2024	The Department of Veteran Affairs (VA) would like to invite facility Leaders (or their representative designee) to an Urban Confer regarding VA's Reimbursement Agreement Program (RAP).	The VA would like to enhance the current UIO RAP and is proposing the adoption of a revised Agreement template. The revisions seek to expand the scope of reimbursable services, remove the VA's quality oversight, lengthen timely filing, and generally streamline the Agreement.	*In addition to in person participation, stakeholders are encouraged to submit written comments to tribalgovernmentconsultation@va.gov b regarding this effort, please contact the VA Reimbursement Agreement Program Office at tribal.agreements@va.gov.* *DULL: https://acrobat.adobe.com/id/urn:aaid:sc:VA6C2:264eb8b8-0d51-4f90-bf07-05cf34a7b80f* *Revised RAP Draft: https://acrobat.adobe.com/id/urn:aaid:sc:VA6C2:31742ec0-fee3-4f1a-b649-397575a8db9c*
DTLL	IHS	N/A	Published 3/4/2024	The IHS Director writes to Tribal Leaders to update on Agency-wide consolidation of human resources (HR) offices, an initiative that we are referencing as "One HR."	One HR moves the IHS towards a cohesive, integrated approach to delivering HR services. This bold move underscores my commitment to enhancing an area identified for improvement at every level of our organization. IHS' vision for One HR is to consolidate various HR administrative systems to maximize IHS resources and cultivate a stronger HR workforce more closely aligned with the IHS mission.	The IHS Director writes to Tribal Leaders to update you on our Agency-wide consolidation of human resources (HR) offices, an initiative that we
DULL	IHS	N/A	Published 3/5/2024	The IHS Director writes to Urban Indian Organization Leaders to provide the fiscal year 2024 allocation, eligibility requirements, and procedures to access the Urban Emergency Fund (UEF).	The UEF is a limited, discretionary allocation fund managed by the IHS Office of Urban Indian Health Programs (OUIHP) to address some of the costs incurred during one-time, non-recurring emergencies and disaster relief efforts involving Urban Indian Organizations (as defined by 25 U.S.C. § 1603(29)). Each fiscal year, the OUIHP allocates up to $200,000 to the UEF. Funding is not guaranteed and is subject to the availability of appropriations.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DUIOLL_030524.pdf
Notice	BIA	88 FR 14679	Published 2/28/2024	Indian Child Welfare Act; Designated Tribal Agents for Service of Notice	The regulations implementing the Indian Child Welfare Act provide that Federally recognized Indian Tribes may designate an agent other than the Tribal chairman for service of notice of proceedings under the Act. This notice includes the current list of designated Tribal agents for service of notice.	Federal Register :: Indian Child Welfare Act; Designated Tribal Agents for Service of Notice
Notice	ACF	88 FR 14505	Published 2/27/2024	Submission for Office of Management and Budget Review; Tribal Child Support Enforcement Direct Funding Requests; (Office of Management and Budget #0970-0218)	The Office of Child Support Services (OCSS), Administration for Children and Families (ACF) is requesting to extend approval of revisions to an approved information collection the Tribal Child Support Enforcement Direct Funding Requests (Office of Management and Budget (OMB) #0970–0218). These revisions were approved under an emergency approval for 6-months and included a new requirement for Tribes or Tribal organizations to provide that charging fees and recovering costs will not be permitted.	*Comments due within 30 days of publication.* OMB must make a decision about the collection of information between 30 and 60 days after p **Register** . Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. *https://www.federalregister.gov/documents/2024/02/27/2024-03968/submission-for-office-of-management-and-budget-review-tribal-child-s direct?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov*
DTLL	HHS	N/A	Published 2/21/2024	26 th U.S. Department of Health and Human Services (HHS) Annual Tribal Budget Consultation (ATBC)	Annual Tribal Budget Consultation (ATBC) will take place in-person on April 9-10, 2024, at the Hubert H. Humphrey Building at 200 Independence Avenue, SW, Washington, DC.	fd9ae327-49f5-4240-a18e-abc8f3b2049a.pdf (hhs.gov)
Proposed Rule	ACF	88 FR 13652	Published 2/23/2024	Adoption and Foster Care Analysis and Reporting System	ACF proposes to amend the Adoption and Foster Care Analysis and Reporting System (AFCARS) regulations that require title IV–E agencies to collect and report data to ACF on children who enter out-of-home care, their providers, and children who have a title IV–E adoption or guardianship assistance agreement to collect additional data related to Indian children.	In order to be considered, we must receive written comments on or before April 23, 2024. https://www.federalregister.gov/documents/2024/02/23/2024-03373/adoption-and-foster-care-analysis-and-reporting-system

NCUIH REGULATIONS TRACKER: Comprehensive List

Last Live Update: 4/5/2024

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Corrected Rule	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System	85 FR 78748/ CMS HHS	Effective 12/01/2020	Corrected	Technical and typo errors are corrected from this September 18, 2020 final rule.	N/A
2	Request for Comment	All Data Use Agreements with CMS	85 FR 78855/ CMS	Due 2/5/2021 published 12/7/2020	Pending	Opportunity for the public to comment on CMS' intention to collect information from the public.. All Data Use Agreements are required to complete a questionnaire as a part of the data request packet. Comments will close February 5, 2021.	For further info: William Parrian (410) 786-4669
3	DULL	Listening Session on the Modernization of IHS HIT	N/A	Published 12/10/2021 Listening Sessions 12/17/2020 & 1/14/2021	Listening Sessions	In an effort to support the modernization of technology, two listening sessions will be conducted. Comprehensive project deliverables can be viewed at https://www.ihs.gov/cto/initiatives/public: health-innovation/indian-health-service-health-it-modernization/index.html.	The options outlined in the proposed project scope evaluate in detail four broad options for modernization of IHS health IT: Stabilize the Resource and Patient Management System (RPMS); Renew RPMS; Selective Replacement; and Full Replacement December 17, 2020, 2:00-3:30 p.m., Eastern Time https://kauffmaninc.zoom.us/j/99639526346?pwd=cEF4Q3lrT0dloVHp2JCGVgxM3RR2c09 Meeting ID: 996 3952 6346 Passcode: 461608 January 14, 2021, 2:00-3:30 p.m., Eastern Time https://kauffmaninc.zoom.us/j/93981311999?pwd=VTNOUmVEcm1SRE8ZT1S24TZNUQIT09 Meeting ID: 939 8131 1999 Passcode: 026367
4	Payment Advisory	Medicare Program; Alternative Payment Model (APM) Incentive Payment Advisory for Clinicians—	85 FR 78770	Respond by 12/13/2020	Published	Allow clinicians to detail information of their billing information by December 13, 2020 in order to receive Alternate Payment Model incentive payment.	List of Qualified Medicare Participants that owe current billing information.
5	DULL	Urban Confer on allocation of $1 billion in COVID-19 resources included in the Coronavirus Response and Relief Supplemental Appropriations Act of 2021	N/A	Published 12/29/2020	Urban Confer	Funds for IHS are appropriated in the Centers for Disease Control and Prevention Agency-Wide Activities and Program Support account, and the Public Health and Social Services Emergency Fund. Both appropriations include bill language directing the funds to be transferred to the IHS. Both appropriations also include specific language directing that any funds transferred through Indian Self-Determination and Education Assistance Act funding agreements are provided on a one-time, non-recurring basis, and that they may only be used for the purposes identified in the statute.	The bill provides appropriations for costs related to vaccination & testing related activities. Urban Confer will be January 4, 2021from 2-3 pm EST ihs.cosocloud.com/v42c87qo6jnd/ (888) 831-8976 Code: 6142767
6	Rule	Good Guidance Practices proposed rule	85 FR 78770/ Secretary HHS	Effective 1/6/2021	Final Rule	The rule details good guidance practices that agencies can use to ensure the public obtains accurate notice of new guidance and that guidance documents do not specify obligations to parties that have already been specified in other statutes.	One component of Department's regulatory reform initiative. See link https://www.hhs.gov/about/budget/fy2020/performance/regulatory-reform/index.html
7	Notice	Information Collection Activities	85 FR 78853/ CMS HHS	Due 1/6/2021	Notice	On three information collection requests. The first details the "mandatory insurer reporting requirement of Section 111 of the Medicare, Medicaid and State Children's Health Insurance Plans (SCHIP) Act of 2007." Specifically, this notice is regarding Medicare Secondary Payer (MSP) reporting.	For further info: William Parrian (410) 786-4669
8	Rule	National Vaccine Injury Compensations Program; Revisions to the Vaccine Injury Table; Delay of Effective Date	86 FR 10835/ pp.10835-10837	Published 1/21/2021	Final Rule; effective date delay	HHS delayed for 60 days the effective date on the final rule "National Vaccine Injury Compensation Program: Revision to the Vaccine Injury Table" after taking comments in a public hearing. The final notice effective date is delayed due to the "Regulatory Freeze Pending Review." The final rule will now be in effect on April 23, 2021.	There are rare reactions to COVID-19 vaccines or other injuries (e.g. shoulder injury) that might occur at the time the vaccine is administered. Final rule on this $4 billion fund compensation program is complete, while delayed due to regulatory freeze by the Biden Administration. https://www.federalregister.gov/documents/2021/02/23/2021-03747/national-vaccine-injury-compensation-program-revisions-to-the-vaccine-injury-table-delay-of
9	Comments (IRC)	Federal Office of Rural Health Policy	85 FR 76585/ HRSA	Due 1/29/2021	Notice	HRSA published a notice on the performance measures drawn for the principle topics of interest to the Federal Office of Rural Health Policy, such as access to care, population demographics, staffing consortium network, project specific domains and sustainability.	https://www.federalregister.gov/documents/2020/11/30/2020-26254/agency-information-collection-activities-proposed-collection-public-comment-request-information
10	Directive to FEMA	Memorandum on Maximizing Assistance from FEMA	Presidential Action - TBD	Issued 2/2/2021	To Publish in Federal Register	Presidential Directive states FEMA shall provide 100% federal cost share for all work eligible for assistance under Public Assistance Category B (emergency assistance to states/tribes) and extends use of the National Guard during Covid-19 pandemic.	https://www.whitehouse.gov/briefing-room/presidential-actions/2021/02/02/memorandum-on-maximizing-assistance-from-the-federal-emergency-management-agency/
11	DULL	Urban Confer to complement a joint Tribal Consultation with the Veterans Health Administration	N/A	Published 2/5/2021	Virtual Listening Session and Comment Submission	IHS extended the comment submission deadline to March 2, 2021. The virtual listening session will be held February 17, 2021 from 3-4 pm EDT. Input will be gathered on the drafted revised memorandum of understanding between IHS and VHA.	The listening session can be viewed at https://veteransaffairs.webex.com/webappng/sites/veteransaffairs/meeting/download/932143eb85c149318046d8fadf903b4a39?siteurl=veteransaffairs&MTID=m6e2a043803566c705916cffdb38454a2 or by phone at 1-404-397-1596 Code: 199-799-8876 Written Comments: VA-IHS MOU urbanconfer@ihs.gov Ms. Elizabeth Fowler Acting Director Indian Health Service 5600 Fishers Lane 08E86 Rockville, MD 20857
12	Request for Comment	Wireline Competition Bureau (WCB) Seeks Comment on Emergency Broadband Connectivity Fund Assistance	Docket/RM: 20-445	Due 2/16/2021	Pending	On Jan.4, 2021, the Federal Communications Commission's WCB issued request for comments on how best to administer a new $3.2 billion Emergency Broadband Benefit Program.	The Consolidated Appropriations Act of 2021 directed the FCC to create the program, which would reimburse participating companies for providing discounted broadband service and connected devices to eligible households during the COVID-19 pandemic. NCUIH replied with comments to extend similar benefits in Tribal Lifeline program to Urban Indians. For status update contact Eric Wu at (202) 418-1543, email: Eric.Wu@fcc.gov
13	Amendment	Sixth Amendment to Declaration under PREP Act against COVID-19	86 FR 9516/ pp. 9516-9520	Published 2/16/2021	Notice	To add additional categories of Qualified Persons authorized to prescribe, dispense, and administer covered countermeasures for COVID-19 (including Vax).	https://www.federalregister.gov/d/2021-03106
14	Notice	Agency Information Collection Activities: Proposed Collection; Comment Request	86 FR 10084/ pp.10084-10085	Published 2/18/2021	Comments Due	CMS and HHS released a joint notice on information collection request titled "Electronic Submission of Medicare Graduate Medical Education Affiliation Agreements." This is a reinstatement without change of a currently approved collection, to be used for residents to form a Medicare Graduate Medical Education affiliated group who are in similar urban or rural areas. In turn, this group will provide flexibility to hospitals in structuring rotations under the full time equivalent resident cap when they share residents.	Comments Due 4/19/2021 This is a Workforce issue dealing with GME agreements to share rotations in urban/rural hospitals. Impact on urban Indian health is minimal or unknown at this time; Not usually tracked by UIO leaders. https://www.federalregister.gov/documents/2021/02/18/2021-03257/agency-information-collection-activities-proposed-collection-comment-request
15	Rule	Fraud And Abuse; Removal of Safe Harbor Protection for Rebates Involving Prescription Pharmaceuticals and Creation of New Safe Harbor Protection for Certain Point-of-Sale Reductions in Price on Prescription Pharmaceuticals and Certain Pharmacy Benefit Manager Service Fees; Delayed Effective Date	86 FR 10181/ pp.10181	Published 2/19/2021	Final Rule	Background/Summary: After a court-ordered delay of effective date on a final rule by HHS. This final rule detailed regulatory safe harbors to the Federal anti-kickback statute. On January 12, 2021, a lawsuit was filed to challenge this final rule and on January 30, 2021 the court ordered a postponement of the effective date of the provisions. The effective date of the amendments to paragraph 42 CFR 1001.952 (hi)(5) to the final rule are now effective on January 1, 2023.	This is a final notice with no comment period. WATCH for further developments... https://www.federalregister.gov/documents/2021/02/19/2021-03147/fraud-and-abuse-removal-of-safe-harbor-protection-for-rebates-involving-prescription-pharmaceuticals Point-of-Sale Reductions in Price on Prescription Pharmaceuticals and Certain Pharmacy Benefit Manager Service Fees; Delayed Effective Date
16	Notice	Agency Information Collection Request: 60-Day Public Comment Request	86 FR 10587/ pp. 10587-10588	Published 2/22/2021	Notice	HHS published notice on an information request revision to the Appellant Climate Survey. This survey is for Medicare beneficiaries, providers, suppliers, and others who participated in a hearing before the Administrative Law Judge from the Office of Medicare Appeals.	Comments due by 4/23/2012 This is a recurring request for information on satisfaction survey at remote interest to single Medicare beneficiaries who appeal their case. Not a large enough impact for UIOs, given the small size of potential group.. Moving forward, the Federal Relations team opted not to track Requests for Information Collection. Federal Register :: Agency Information Collection Request: 60-Day Public Comment Request
17	Notice	Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)	86 FR 11780/ pp. 11780-11781	Published 2/26/2021	Notice	CMS published an information collection request to support the implementation of the Consumer Assessment of Healthcare Providers (CAHPS) for Merit-Based Incentive Payment Systems (MIPS) survey. In order to address stakeholders and the increased use of telehealth services due to the PHE for COVID-19, a question is being added to integrate one telehealth item to assess the patient-reported usage of telehealth services (for example, phone or video visit).	Comments Close on 4/9/2021 This is a recurring request for information on satisfaction survey at remote interest to single Medicare beneficiaries who appeal their case. Not a large enough impact for UIOs, given the small size of potential group.. Moving forward, the Federal Relations team opted not to track Requests for Information Collection. Federal Register :: Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)
18	DULL	Urban Confer on allocation of $6 billion under consideration with the American Rescue Plan Act	N/A	Published 3/8/21 Virtual Urban Confer 3/15/21	Notice of Urban Confer	ARPA has allocated $6 billion, currently under consideration by Congress. Urban Confer will be held on March 15th, 2021 to seek rapid input. Approved funds will be available to support eligible expenses dating back to January 31, 2020.	Urban Leaders are urged to join in the Tribal Confer process and provide input. March 15th, 2021 1-800-857-6561 code:1709562 ihs.cosocloud.com/rp79n2pbnxqg/ code:ihs123 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DUIOLL_03082021.pdf
19	Proposed Rule	Modifications to the HIPAA Privacy Rule to Support, and Remove Barriers to, Coordinated Care and Individual Engagement	86 FR 13683/ pp. 13683-13684	Published 3/10/2021	Proposed Rule; extension of comment period	HHS published modifications to a proposed rule and an extension of a comment period. This proposed rule details the specific standard for the privacy of individually identifiable health information under the Health Insurance Portability and Accountability Act (HIPAA). Comments on this proposed rule should include topics centered around an individual's engagement in their health care, barriers in their coordinated care, and the regulatory burdens these standards may impose on the healthcare industry.	Unsure of substantial impact on urban Indian health; in discussions with NIHB partner. Comments close 5/6/2021. Federal Register :: Modifications to the HIPAA Privacy Rule to Support, and Remove Barriers to, Coordinated Care and Individual Engagement
20	Notice	National Vaccine Injury Compensation Program; Revisions to the Vaccine Injury Table	86 FR 14567/ pp. 14567-14570	Published 3/17/2021	Notice of proposed withdrawal	On 3/17/21, HHS backtracked on previous notice making changes to the "Injury Table" for COVID-19 vaccines. The final rule titled "National Vaccine Injury Compensation Program: Revisions to the Vaccine Injury Table" is proposed to be withdrawn. No change until another round of public comment and consultation by HHS is concluded. If the HHS chooses to proceed with removing SIRVA (shoulder injury), vasovagal syncope, and the new vaccines category from the Table, it will do so with sufficient time to carefully review the science and the law regarding these items.	NCUIH should support withdrawal/rescission, in light of efforts to increase vaccination efforts. However, surprise reversal by HHS did not give sufficient time to re-engage. Recommendation: WATCH. If any changes to the Injury Table are proposed again, submit Comment. Comments close on 6/16/2021 Federal Register :: National Vaccine Injury Compensation Program: Revisions to the Vaccine Injury Table
21	Directive	MEMORANDUM FOR THE HEADS OF EXECUTIVE DEPARTMENTS AND AGENCIES	WH M-21-20	Published 3/19/2021	Implementation of the American Rescue Plan Act and Stewardship of the Taxpayer Resources	The Administration is committed to effective implementation and stewardship of ARP funds. The Administration will foster accountability and public trust by delivering effective and equitable relief, while implementing sound financial management of the resources funding that relief. This includes working with the Pandemic Response Accountability Committee (PRAC) and agency Inspector Generals to strengthen payment integrity to minimize the risk of waste, fraud, and abuse; and improving the overall award and administration of financial assistance programs with an increased focus on human-centered program and service design to achieve more equitable results. The Administration will also work with executive departments and agencies to identify ARP programs that—given the nature of the program's goals and design and the program's potential impacts on equitable outcomes—require additional attention (beyond the overarching financial tracking and reporting requirements herein) to program design, tracking, and reporting to support agency, Administration, and public understanding of measures such as trust, equity, and experience that are critical to ensuring the achievement of intended program outcomes and positive impact for the American public..	In carrying out this Memorandum, agencies will use existing financial transparency and accountability mechanisms established by OMB Memorandum M-20-21 Implementation Guidance for Supplemental Funding Provided in Response to the Coronavirus Disease 2019 (COVID-19) (Apr. 10, 2020). As such, agencies must report monthly, including award outlays, to USAspending.gov for all funding in the ARP and follow existing Government-wide reporting requirements on USAspending.gov as established by the Federal Funding Accountability and Transparency Act (FFATA), as amended by the Digital Accountability & Transparency Act (DATA Act). Agencies are required to ensure that all data required by M-20-21 are reported to USAspending.gov. Additionally, agencies are also reminded of the direction in M-20-21 to incorporate reporting of organizational performance on COVID-19 related relief funding into their established mission performance plans and reports, and review progress regularly as part of their performance, evidence-building and enterprise risk management routines https://www.whitehouse.gov/wp-content/uploads/2021/03/M_21_20.pdf
22	Notice	Advisory Committee on Immunization Practices (ACIP)	86 FR 17606/ pp 17606	Published 4/5/2021	Notice of meeting and request for comment	CDC and HHS announce a meeting of the Advisory Committee on Immunization Practices (ACIP). This is a public comment session and will be held on June 23-24 from 9am to 5:30 pm, EDT. Comments close on 6/24/21 and can be submitted through the Federal eRulemaking Portal at www.regulations.gov or by mail at CDC 1600 Clifton Rd NE, MS H24-8, Atlanta Georgia 30329-4027 ATTN: June ACIP Meeting	Federal Register :: Advisory Committee on Immunization Practices (ACIP)
23	DULL	Urban Confer on FY 2021 Appropriations (IHS)	IHS Newsroom/ 2021 Letters/March 31, 2021	Delivered 3/31/2021 Learning Session 4/7/2021 Urban Confer Sessions 4/20/2021 and 4/21/2021	Learning Session & Urban Confer	Urban Confer on the use of (1) $5 million from the Fiscal Year (FY) 2021 appropriations that the IHS has allocated to address Alzheimer's disease; and (2) the use of $5 million in funding for Ending the HIV Epidemic. IHS Office of Clinical and Preventive Services will host a virtual learning session and Urban Confer sessions.	Virtual Learning Session: April 7th, 2021 from 1-2 p.m. EDT (877-801-1365 code 6488559 or his.cosocloud.com/ihsdccs/ and using code ihs123 Urban Confer Session: April 20, 2021 (Alzheimer's Disease) & April 21, 2021 (Ending the HIV Epidemic) from 1-2:30 p.m. EDT (877-801-1365 code 6488559 or his.cosocloud.com/ihsdccs/ and using code ihs123 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DUIOLL_03312021.pdf

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
24	DUILL	Modernization Initiative: Urban Confer for IHS HIT and retirement of RPMS	IHS Newsroom/ 2021 Letters/ April 1, 2023	RFI Published 3/17/2021 Response Deadline: 4/19/2021	RFI Solicitation	In December 2020 & January 2021, IHS held two listening sessions to gather input on appropriate, realistic, and sustainable options for the HIT modernization. Written comments ended on January 24, 2021. Sessions represented more than 300 of the 574 federally recognized tribes and more than 20% of UIOs. The option selected was option 4: full replacement of the current RPMS solution. Currently, an RFI is open for vendors to respond.	Recording of the listening sessions can be reviewed at www.ihs.gov/hit/project-updates/ RFI for vendors is open through April 19th, 2021 https://beta.sam.gov/opp/16bd89f9ef98b482bd934835710953a4/view?keywords=%22indian%20health%20service%22&sort=-modifiedDate&index=&is_active=true&page=1 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DILL_DUIOLL_04012021.pdf
25	Notice of Information	Reissuance of PAR-1-324, "Testing Interventions for Health-Enhancing Physical Activity" as a Notice of Special Interest	NOT-OD-21-086	Published 4/9/2021	N/A	This Notice is to inform the research community that the Office of Disease Prevention and participating NIH Institutes and Offices have reissued the Funding Opportunity Announcement (FOA): PAR-18-324 "Testing Interventions for Health Enhancing Physical Activity (R01 - Clinical Trial Optional)" as NOT-OD-21-087 - "Notice of Special Interest (NOSI): Developing and Testing Multilevel Physical Activity Interventions to Improve Health and Well-Being." The published NOSI includes new and revised research priorities. This Notice is being published to inform prospective applicants of this action	Related announcements: PAR-18-324 - Testing Interventions for Health-Enhancing Physical Activity (R01 Clinical Trial Optional) NOT-OD-21-087 - Notice of Special Interest (NOSI): Developing and Testing Multilevel Physical Activity Interventions to Improve Health and Well-Being NOT-AA-21-015 - Notice of NIAAA Participation in NOT-OD-21-086
26	Proposed Rule	Medicare Program; FY 2022 Inpatient Psychiatric Facilities Prospective Payment System and Quality Reporting Updates for Fiscal Year Beginning October 1, 2021	86 FR 19480/ pp. 19480-19529	Published 4/13/2021	Comment Solicitation- Due by June 7, 2021	This proposed rule would update the prospective payment rates, the outlier threshold, and the wage index for Medicare inpatient hospital services provided by Inpatient Psychiatric Facilities (IPF), which include psychiatric hospitals and excluded psychiatric units of an Inpatient Prospective Payment System (IPPS) hospital or critical access hospital. This rule also proposes to update and clarify the IPF teaching policy with respect to IPF hospital closures and displaced residents and proposes a technical change to the 2016-based IPF market basket price proxies. In addition, this proposed rule would update quality measures and reporting requirements under the Inpatient Psychiatric Facilities Quality Reporting (IPFQR) Program. These changes would be effective for IPF discharges occurring during the Fiscal Year (FY) beginning October 1, 2021 through September 30, 2022 (FY 2022).	In commenting, please refer to file code CMS-1750-P. Comments, including mass comment submissions, must be submitted in one of the following three ways (please choose only one of the ways listed): 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: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1750-P, P.O. Box 8010, Baltimore, MD 21244-8016. 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 following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1750-P, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850. https://www.federalregister.gov/documents/2021/04/13/2021-07433/medicare-program-fy-2022-inpatient-psychiatric-facilities-prospective-payment-system-and-quality?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov>
27	DUILL	Allocation Decisions for Approximately $4.3 billion; Appropriated to the IHS in the American Rescue Plan Act	2021, Pub. L. No 117-2, Div. XI (ARPA)	Published 4/16/2021	Allocation of Funding	Approximately $4.3 billion in new resources appropriated to the IHS in the American Rescue Plan Act, 2021, Pub. L. No 117-2, Div. XI (ARPA). These funds are one-time, non-recurring, and can only be used for the purposes specified in the statute. They may also cover costs that were incurred to prevent, prepare for, and respond to COVID-19 during the period beginning January 31, 2020, through March 11, 2021. Tribal Health Programs will receive these one-time, non-recurring funds through unilateral modifications and/or amendments to their existing ISDEAA agreements. As noted above, these funds must be used for the purposes for which they are appropriated, and must be used consistent with the conditions established by law and the modifications/amendments. Urban Indian Organizations will receive these one-time, non-recurring funds through existing IHCIA contracts. These funds must be used for the purposes for which they are appropriated, consistent with a modified scope of work, budget, and bilateral modification for each IHCIA contract.	The IHS will provide $80 million to support UIOs. Urban Indian Organizations that bill for reimbursements will receive a one-time, equal payment amount, and an additional one-time payment based on their UIO's total number of Urban Indian users. The IHS will provide $20 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users. The IHS will provide $84 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users. The IHS will provide $3 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users. The IHS will provide $24 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users. The IHS will provide $40 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users.
28	Notice of Information	Flexibilities Guidance for Applicants and Recipients of Federal Financial Assistance Affected by COVID-19	M-21-20	Published 4/19/2021	No approval or action needed by CDC	On March 19, 2021, the Office of Management and Budget (OMB) issued Memorandum M-21-20pdf icon external icon, which addresses administrative relief for applicants and recipients of COVID-19 related federal financial assistance and those applicants and recipients affected by the COVID-19 pandemic. The memorandum identifies administrative flexibilities to help manage administrative, financial management, and audit requirements under 2 CFR Part 200. This guidance will reference the parallel sections found in the Department of Health and Human Services (HHS) grant regulations of 45 CFR Part 75, which are applicable to CDC recipients CDC has released flexibilities from M-21-20 and apply not only to COVID-19 related assistance but also those not related to COVID-19.	Flexibilities with: **SAM Registration-** CDC has relaxed the requirement for active System for Award Management (SAM) registration at time of application in order to expeditiously issue funding **Waiver for Notice of Funding Opportunities (NOFOs) Publication-** CDC will make every effort to provide applicants with adequate time to submit quality applications, should additional funding become available for COVID-19 competitive NOFOs. However, applicants should be aware that CDC may publish emergency and competitive NOFOs for less than 30 days if CDC needs to expedite the process. Applicants may search for applicable funding opportunities at www.Grants.gov **Pre-award costs-** If within the scope of the award, CDC may allow necessary pre-award costs that are incurred (i) from March 15, 2021, through the Public Health Emergency Period and (ii) prior to the effective date of a federal award. **No-cost extensions on expiring awards-** CDC may extend awards that were active as of March 31, 2021, and scheduled to expire prior or up to December 31, 2021, automatically at no cost for a period of up to 12 months. **Abbreviated non-competitive continuation requests-** CDC may accept a brief statement from recipients for non-competitive continuation requests scheduled to come in from April 1, 2021, to December 31, 2021, for projects with planned future support. CDC programs will post any specific instructions in their continuation guidance. **Waivers from prior approval requirements-** CDC may waive prior approval requirements as necessary to effectively address the response. All costs charged to federal awards must be consistent with federal cost policy guidelines and the terms of the award, except where specified in Memorandum M-21-20. **Exemption of certain procurement requirements-** CDC waives the procurement requirements contained in 45 CFR § 75.328(b) regarding geographical preferences and 45 CFR § 75.330 regarding contracting with small and minority businesses, women's business enterprises, and labor surplus area firms. This exemption is limited to these specific procurement requirements **Extension of financial and other reporting-** CDC may allow recipients to delay submission of financial or other reports up to 3 months beyond the normal due date **Extension of single audit submission-** CDC recipients and subrecipients that have not yet filed their single audits with the Federal Audit Clearinghouse as of the date of the Issuance of OMB Memorandum M-21-20pdf icon external icon that have fiscal year ends through June 30, 2021, may delay the completion and submission of the Single Audit reporting package to 6 months beyond the normal due date. **Flexibilities with application deadlines-** When a delay occurs because the applicant or recipient is directly impacted by COVID-19, CDC will consider extending the application due date beyond the date specified in the Notice of Funding Opportunity (NOFO) on a case-by-case basis **Extension of closeout-** On a case-by-case basis, CDC may allow the recipient to delay submission of any pending financial, performance, or other reports required by the terms of the award for the closeout of expired projects, provided that proper notice about the reporting delay is given by the recipient to the agency **Management Requirement related to Physical Inventories-** On a case-by-case basis, CDC may provide recipients up to a 12-month extension for the biennial physical inventory of equipment purchased under a federal award. https://www.cdc.gov/grants/public-health-emergencies/covid-19/flexibilities-available-applicants-recipients/index.html
29	Notice	Advisory Committee on Immunization Practices (ACIP)	86 FR 20497/ PP 20497-20498	Published 4/20/2021 Comments Due 4/23/2021	Notice of public meeting and request for comment	In accordance with the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC), announces the following meeting of the Advisory Committee on Immunization Practices (ACIP). This meeting is open to the public. The meeting will be webcast live via the World Wide Web.	The meeting will be held on April 23, 2021, from 11:00 a.m. to 5:00 p.m., EDT (dates and times subject to change; see the ACIP website for updates: http://www.cdc.gov/vaccines/acip/index.html). The public may submit comments from April 20, 2021 through April 23, 2021. For more information on ACIP please visit the ACIP website: http://www.cdc.gov/vaccines/acip/index.html. You may submit comments, identified by Docket No. CDC-2021-0046 by any of the following methods: Federal eRulemaking Portal: http://www.regulations.gov . Follow the instructions for submitting comments. Mail: Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H24-8, Atlanta, GA 30329-4027, Attn: April 23, 2021 ACIP Meeting. https://www.federalregister.gov/documents/2021/04/20/2021-08073/advisory-committee-on-immunization-practices-acip?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
30	Tribal Feedback	TIAC GWE Subcommittee Solicits Tribal Feedback on Draft Report	N/A	Input Deadline: 4/23/2021	Treasury Tribal Advisory Committee Request for Input	TIAC Subcommittee on General Welfare Exclusion (GWE Subcommittee) is soliciting input from Tribal governments on its draft report prior to making final recommendations to the TIAC on guidance under Tribal General Welfare Exclusion Act (TGWEA) and the Internal Revenue Code Section 139E.	Input should be submitted, by April 23, 2021 at 5 pm, to the GWE Subcommittee technical advisor. Ellie Beckett, ellie@indfoa.org Nicholas Courtney, ncourtney@ncai.org https://files.constantcontact.com/c239f427001/65fbb937-d77a-48d1-a09b-9acd70521ad6.pdf
31	Tribal Consultation	The Department of the Interior (DOI) Consultation on Climate Crisis	N/A	Consultation: 4/27/2021 and 4/29/2021	Tribal Consultation and Request for Input	The Department of the Interior (DOI) is conducting two Tribal Consultations on Tuesday, April 27, 2021 and Thursday, April 29, 2021 in reference to Executive Order 14008, Tackling the Climate Crisis at Home and Abroad. The Executive Order directs the Secretary of the Interior to "engage with tribal authorities regarding the development and management of renewable and conventional energy resources on Tribal lands." DOI is requesting input on: 1. How can the Department help Tribal Nations access capital for development of renewable energy resources? 2. How can the Department improve processes and policies that affect tribal development of renewable energy resources, including facilitating greater communication and support among Federal agencies? 3. What steps can Federal agencies take to ensure that Tribal Nations have greater control over the development of energy projects on tribal lands? 4. What additional barriers do Tribal governments face when attempting to develop resources within reservation lands?	Consultation Details: Tuesday, April 27, 2021 1:00 - 3:00 p.m. EDT Call in Number: 800-857-5055 Passcode: 6951606 Thursday, April 29, 2021 1:00 - 3:00 p.m. EDT Call in Number: 800-857-5055 Passcode 6951606 Written comments are recommended and will be accepted at consultation@bia.gov until 11:59 p.m. EDT on April 16, 2021. NCAI Contact: Darren Modzelewski, Policy Counsel, dmodzelewski@ncai.org
32	Notice	Agency Information Collection Activities; Submission for OMB Review; Comment Request	86 FR 21321/ PP 21321-21322	Published 4/22/2021 Comments Due 5/24/2021	Comments on the collection of information must be received by the OMB desk officer by May 24, 2021	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	*Type of Information Collection Request:* Reinstatement without change of a previously approved collection; *Title of Information Collection:* Generic Clearance for Evaluation of Stakeholder Training—Health Insurance Marketplace and Market Stabilization Programs; *Use:* CMS is strongly committed to providing appropriate education and technical outreach to States, issuers, self-insured group health plans and third-party administrators (TPA) participating in the Marketplace and/or market stabilization programs mandated by the ACA. CMS continues to engage with stakeholders in the Marketplace to obtain input through Satisfaction Surveys following Stakeholder Training events. The survey results will help to determine stakeholders' level of satisfaction with trainings, identify any issues with training and technical assistance delivery, clarify stakeholders' needs and preferences, and define best practices for training and technical assistance. https://www.federalregister.gov/documents/2021/04/22/2021-08377/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
33	Comments	Federal Tort Claims Act Coverage for Urban Indian Organizations- Q&A	N/A	Published 4/23/2021	N/A	"The information in this document is for informational purposes only and is not intended to provide legal advice to any Urban Indian Organization (UIO) or individual. Whether a health care provider is covered under the Federal Tort Claims Act (FTCA) is a complex matter. We urge you to consult with your own legal advisor before taking any action. It is important to keep in mind as you read the frequently asked questions (FAQs) below that the Department of Health and Human Services (HHS) does not determine the scope of coverage under the FTCA. Whether the FTCA applies in any particular case is decided on an individual case-by-case basis by the United States Department of Justice (DOJ) and subsequently by the Federal Courts. The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled National Learning Community for HIV CBO Leadership Evaluation. The purpose of this data collection is to evaluate the National Learning Community for HIV CBO Leadership which is a component of cooperative agreement CDC-RFA-PS19-1904: Capacity Building Assistance (CBA) for High Impact HIV Prevention Program Integration."	UIO FTCA QA 4-23-2021 FINAL (003)
34	Notice	Proposed Data Collection Submitted for Public Comment and Recommendations	86 FR 22052/ pp 22052-22053	Published 4/26/2021 Comments Due 6/25/2021	CDC must receive written comment on or before June 25, 2021	The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled "Drug Overdose Surveillance and Epidemiology"	Highlighted the urgent need to rapidly establish and enhance timely surveillance of suspected drug, opioid, heroin, and stimulant overdoses. These data are critical to inform timely local, state, and regional response, especially to acute and/or widespread multi-state outbreaks https://www.federalregister.gov/documents/2021/04/26/2021-08576/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list Submit all comments through the Federal eRulemaking portal (regulations.gov) or Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-D74, Atlanta, Georgia 30329.
35	Notice	Proposed Data Collection Submitted for Public Comment and Recommendations	86 FR 22053/ pp 22053-22055	Published 4/26/2021 Comments Due 6/25/2021	CDC must receive written comment on or before June 25, 2021	The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled National Learning Community for HIV CBO Leadership Evaluation. The purpose of this data collection is to evaluate the National Learning Community for HIV CBO Leadership which is a component of cooperative agreement CDC-RFA-PS19-1904: Capacity Building Assistance (CBA) for High Impact HIV Prevention Program Integration.	Submit comments, identified by Docket No. CDC-2021-0041 by any of the following methods: Federal eRulemaking Portal: Regulations.gov. Follow the instructions for submitting comments. Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-D74, Atlanta, Georgia 30329. Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to Regulations.gov. https://www.federalregister.gov/documents/2021/04/26/2021-08578/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
36	DULL	The Acting Director writes to Urban Indian Organization Leaders to initiate Urban Confer to seek input and recommendations to improve the Indian Health Service Policy on Conferring with Urban Indian Organizations. (PDF - 366 KB)	N/A	Published 4/27/2024	Initiate Urban Confer to seek your input and recommendations to improve the Indian Health Service (IHS) Policy on Conferring with Urban Indian Organizations (UIOs).	In 2010, as part of the Patient Protection and Affordable Care Act, Congress reauthorized and amended the Indian Health Care Improvement Act (IHCIA). During the amendment process, Congress added a new requirement that the IHS "confer," to the maximum extent practicable, with Urban Indian Organizations (UIOs) in carrying out the IHCIA. Later in 2014, in the Indian Health Manual (IHM) The Indian Health Service (IHS) established the Policy on "Conferring with Urban Indian Organizations.". The IHS Urban Confer Policy provides guidance when seeking input from UIO Leaders as it pertains to Urban Indian health. Such processes ensure that Urban Indian health care needs are understood and identified at the local, state, and national levels, when implementing and carrying out the IHCIA. Currently, IHS is the only federal agency with an Urban Confer Policy that engages in community feedback. The Urban Confer Policy and process is distinct from Tribal Consultation and fulfills a critical need in furtherance of meeting the federal trust obligation. Urban Indian health spans across 22 states and 41 UIOs; where services are provided in a network of 77 facilities. The lack of a current vehicle for dialogue between other federal agencies and UIOs has dire consequences, which imposes barriers on UIOs response to general health and public health emergencies, such as COVID-19.	Wednesday, June 9, 2021, for a virtual Urban Confer session, Urban Indian Organization Leaders are encouraged to provide comments and recommendations on how to improve the Urban Confer Policy and process. URBAN CONFER SESSION IHS URBAN CONFER POLICY AND PROCESS DATE: Wednesday, June 9, 2021 TIME: 2:00 p.m. – 3:30 p.m. ET ZOOM INFORMATION: (833) 568-8864 https://www.zoomgov.com/j/1619982193 Zoom Meeting ID: 161 998 2193
37	Notice	Medicare and Medicaid Programs; Quarterly Listing of Program Issuances-January Through March 2021	86 FR 23373/ pp 23370-23384	Published 5/3/2021	This quarterly notice provides only the specific updates that have occurred in the 3-month period along with a hyperlink to the full listing that is available on the CMS website or the appropriate data registries that are used.	Quarterly notice lists CMS manual instructions, substantive and interpretive regulations, and other **Federal Register** notices that were published from January through March 2021, relating to the Medicare and Medicaid programs and other programs administered by CMS.	This quarterly notice lists CMS manual instructions, substantive and interpretive regulations, and other Federal Register notices that were published from January through March 2021, relating to the Medicare and Medicaid programs and other programs administered by CMS. https://www.federalregister.gov/documents/2021/05/03/2021-09081/medicare-and-medicaid-programs-quarterly-listing-of-program-issuances-january-through-march-2021
38	Notice	Medicare Program; Public Meeting on June 24, 2021 Regarding New and Reconsidered Clinical Diagnostic Laboratory Test Codes for the Clinical Laboratory Fee Schedule for Calendar Year 2022	86 FR 23386/ pp 23386-23359	Published 5/3/2021	CLFS Annual Public Meeting Date: The virtual meeting is scheduled for Thursday, June 24, 2021 from 9 a.m. to 5 p.m., E.D.T.	This notice announces a public meeting to receive comments and recommendations (including data on which recommendations are based) on the appropriate basis for establishing payment amounts for new or substantially revised Healthcare Common Procedure Coding System codes being considered for Medicare payment under the Clinical Laboratory Fee Schedule (CLFS) for calendar year (CY) 2022. This meeting also provides a forum for those who submitted certain reconsideration requests regarding final determinations made last year on new test codes and for the public to provide comment on the requests.	CLFS Annual Public Meeting Date: The virtual meeting is scheduled for Thursday, June 24, 2021 from 9 a.m. to 5 p.m., E.D.T. Deadline for Submission of Presentations and Written Comments: All presenters for the CLFS Annual Public Meeting must register and submit their presentations electronically to our CLFS dedicated email box, CLFS_Annual_Public_Meeting@cms.hhs.gov, by June 3, 2021 at 5 p.m. E.D.T. All written comments (non-presenter comments) must also be submitted electronically to our CLFS dedicated email box, CLFS_Annual_Public_Meeting@cms.hhs.gov, by June 3, 2021, at 5 p.m., E.D.T. Any presentations or written comments received after that date and time will not be included in the meeting and will not be reviewed. Deadline for Submitting Requests for Special Accommodations: Requests for special accommodations must be received no later than June 3, 2021 at 5 p.m. E.D.T. Publication of Proposed Determinations: We intend to publish our proposed determinations for new test codes and our preliminary determinations for reconsidered codes (as described later in section II "Format" of this notice) for CY 2022 by early September 2021. Deadline for Submission of Written Comments Related to Proposed Determinations: Comments in response to the preliminary determinations will be due by early October 2021. https://www.federalregister.gov/documents/2021/05/03/2021-09260/medicare-program-public-meeting-on-june-24-2021-regarding-new-andreconsidered-clinical-diagnostic
39	Information Bullet	Extension of the Spousal Impoverishment Rules for Married Applicants and Recipients of Home and Community-Based Services	SMDL #15-001 ("Affordable Care Act's Amendments to the Spousal Impoverishment Statute," available at https://www.medicaid.gov/federal-policy-guidance/downloads/smd30715.pdf)	Dispersed 5/4/2021	"Extension of the Spousal Impoverishment Rules for Married Applicants and Recipients of Home and Community-Based Services," through the Consolidated Appropriations Act of 202. Applicable through September 30, 2023.	The Consolidated Appropriations Act, 2021 provides a temporary extension of the ACA's spousal impoverishment-related provision, which initially was set to expire on December 31, 2018, but has been extended several times through subsequent legislation.	As CMS has noted with regard to previous extensions, states should continue to follow the guidance CMS published in SMDL #15-001 ("Affordable Care Act's Amendments to the Spousal Impoverishment Statute," available at http://www.medicaid.gov/federal-policy-guidance/downloads/smd30715.pdf) relating to the application of the ACA's spousal impoverishment-related provision so long as section 2404 of the ACA is in effect. https://www.medicaid.gov/federal-policy-guidance/downloads/clib050421.pdf
40	Notice	Privacy Act of 1974; Matching Program	86 FR 23728/ pp 23728-23729	Published 5/4/2021	Notice of a new matching program.	In accordance with the Privacy Act of 1974, as amended, the Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS) is providing notice of the re-establishment of a computer matching program between CMS and the Office of Personnel Management (OPM), "Verification of Eligibility of Minimum Essential Coverage Under the Patient Protection and Affordable Care Act through an Office of Personnel Management Health Benefit Plan." There is minimal impact to the Indian health care system.	The deadline for comments on this notice is June 3, 2021. The re-established matching program will commence not sooner than 30 days after publication of this notice, provided no comments are received that warrant a change to this notice. The matching program will be conducted for an initial term of 18 months (from approximately June 8, 2021 to December 7, 2022) and within three months of expiration may be renewed for one additional year if the parties make no change to the matching program and certify that the program has been conducted in compliance with the matching agreement. Interested parties may submit comments: 1. Electronically. You may send your comments electronically to http://www.regulations.gov. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments. 2. By Regular Mail. You may mail written comments to the following address: Centers for Medicare & Medicaid Services, Division of Security, Privacy Policy & Governance, Information Security & Privacy Group, Office of Information Technology, Location: N1-14-56, 7500 Security Blvd., Baltimore, MD 21244-1850. https://www.federalregister.gov/documents/2021/05/04/2021-09292/privacy-act-of-1974-matching-program
41	Notice	Eleventh Meeting of the National Clinical Care Commission	86 FR 23731	Published 5/4/2021	The two-day meeting will take place May 19 and June 1, 2021 from 1 p.m. to approximately 6 p.m. Eastern Time (ET).	The National Clinical Care Commission (the Commission) will conduct its eleventh meeting virtually on May 19 and June 1, 2021. The Commission is charged to evaluate and make recommendations to the U.S. Department of Health and Human Services (HHS) Secretary and Congress regarding improvements to the coordination and leveraging of federal programs related to diabetes and its complications.	The eleventh meeting will be held virtually, and each subcommittee will present a summary of stakeholder calls and all draft recommendations. This will be followed by a discussion of the recommendations. The final meeting agenda will be available prior to the meeting at https://health.gov/our-work/health-care-quality/national-clinical-care-commission/meetings. Public Participation at Meeting: The Commission invites public comment on issues related to the Commission's charge. There will be an opportunity for limited oral comments (each no more than 3 minutes in length) at this virtual meeting. Virtual attendees who plan to provide oral comments at the Commission meeting during a designated time must register prior to the meeting at https://kauffmaninc.adobeconnect.com/nccomeeting11/event/event_info.html. Written comments are welcome throughout the entire development process of the Commission's work and may be emailed to OHQ@hhs.gov. Written comments should not exceed three pages in length. Individuals who need special assistance, such as sign language interpretation or other reasonable accommodations, should indicate the special accommodation when registering online or by notifying Jennifer Gillissen at jennifer.gillissen@kauffmaninc.com by May 10, 2021. https://www.federalregister.gov/documents/2021/05/04/2021-09277/eleventh-meeting-of-the-national-clinical-care-commission
42	Final Rule	Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2022 and Pharmacy Benefit Manager Standards	86 FR 24140/ pp 24140-24295	Published 5/5/2021 These regulations are effective on July 6, 2021, with the exception of the amendments to §§ 155.320(c) and 158.237(b) which are effective May 5, 2021.	Revises the regulation requiring the reporting of certain prescription drug information by qualified health plans or their pharmacy benefit managers.	This final rule sets forth payment parameters and provisions related to the risk adjustment program and cost-sharing parameters. It includes changes related to special enrollment periods; direct enrollment entities; the administrative appeals processes with respect to health insurance issuers and non-federal governmental group health plans; the medical loss ratio program; income verification by Exchanges; and other related topics. It also revises the regulation requiring the reporting of certain prescription drug information by qualified health plans or their pharmacy benefit managers.	On January 28, 2021, President Biden issued Executive Order 14009, "Strengthening Medicaid and the Affordable Care Act," [1] directing HHS, and the heads of all other executive departments and agencies with authorities and responsibilities related to the ACA, to review all existing regulations, orders, guidance documents, policies, and any other similar agency actions to determine whether such agency actions are inconsistent with this Administration's policy to protect and strengthen the ACA and to make high-quality health care accessible and affordable for every American. As part of this review, HHS examined policies and requirements under the proposed 2022 Payment Notice and the January 19, 2021 final 2022 Payment Notice to analyze whether the policies under these rulemakings might undermine the Health Benefits Exchanges or the health insurance markets, and whether they may present unnecessary barriers to individuals and families attempting to access health coverage. HHS also considered whether to suspend, revise, or rescind any such actions through appropriate administrative action. https://www.federalregister.gov/documents/2021/05/05/2021-09102/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2022-and

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
43	Notice and Comment Request	120 Day Proposed Information Collection; Tribal Investment in Commercial Electronic Health Records	86 FR 26923/ pp 26923-26924	Published 5/8/2021	Compliance with the Paperwork Reduction Act of 1995	In compliance with the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) takes this opportunity to provide information on a new Office of Management and Budget (OMB) information collection, Control Number 0917-XXXX, titled, "Tribal Investment in Commercial Electronic Health Records." This proposed information collection project has been granted an emergent review by OMB. The purpose of this notice is to provide the public a notice of the information sent directly to OMB.	The IHS has requested emergency review of this information collection by OMB, as authorized by section 3507(j) of the Paperwork Reduction Act of 1995. The Agency gathers comments concerning: (a) The necessity of this information collection for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) the accuracy of the agency's estimate of the burden (hours and cost) of the collection of information, including the validity of the methodology and assumptions used; (c) ways we could enhance the quality, utility, and clarity of the information to be collected; and (d) ways we could minimize the burden of the collection of the information on the respondents. Direct Your Comments to OMB: Send your comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS https://www.federalregister.gov/documents/2021/05/18/2021-10409/120-day-proposed-information-collection-tribal-investment-in-commercial-electronic-health-records?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
44	DULL	Developing the Strategy, ONDCP seeks to consult with a broad range of partners and stakeholders to develop a comprehensive and well-coordinated strategy to guide the Federal Government's activities in addressing the Nation's drug issue	agency's authorization statute (21 U.S.C. § 1701 et seq)	Published 5/11/2021 Feedback due 7/9/2021	The Office of National Drug Control Policy (ONDCP) develops and submits to Congress the Administration's National Drug Control Strategy (Strategy) on a biennial basis, as required under the agency's authorization statute (21 U.S.C. § 1701 et seq). The 2022 Strategy will build off the drug policy priorities that the Biden-Harris Administration issued on April 1.	ONDCP is requesting any relevant input or advice you have about the Strategy, including the data collection plan under 21 U.S.C. § 1705(c)(1)(M), the Southwest Border Counternarcotic Strategy, the Northern Border Counternarcotic Strategy, and the Caribbean Border Counternarcotic Strategy.	Input will be vital in developing a Strategy that will help to reduce drug use and its consequences in Indian Country. Please email your comments directly to Strategy@ondcp.eop.gov. Feedback is requested, no later than Friday, July 9, 2021. https://mcusercontent.com/fe20288bb41dd81ffc715ef4d/files/dbee69f6-c738-eab9-a8fd-489ccc142192/ONDCP_Tribal_Letter_Request_for_Comment.pdf
45	Notice	Medicaid and Children's Health Insurance Program (CHIP) Generic Information Collection Activities: Proposed Collection; Comment Request	86 FR 26042/ pp26042-26043	Published 5/12/2021	Notice seeks public comment on one or more of our collection of information requests. Comments must be received by May 26, 2021.	On May 28, 2010, the Office of Management and Budget (OMB) issued Paperwork Reduction Act (PRA) guidance (1) related to the "generic" clearance process. Generally, this is an expedited process by which agencies may obtain OMB's approval of collection of information requests that are "usually voluntary, low-burden, and uncontroversial collections." do not raise any substantive or policy issues, and do not require policy or methodological review. The process requires the submission of an overarching plan that defines the scope of the individual collections that would fall under its umbrella. On October 23, 2011, OMB approved our initial request to use the generic clearance process under control number 0938-1148 (CMS-10398). It was last approved on April 26, 2021, via the standard PRA process which included the publication of 60- and 30-day Federal Register notices.	To be assured consideration, comments and recommendations must be submitted in any one of the following ways: 1. Electronically. You may send your comments electronically to http://www.regulations.gov. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments. 2. By regular mail. You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: CMS-10398 (837)/OMB control number: 0938-1148, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may access CMS' website at https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html. https://www.federalregister.gov/documents/2021/05/12/2021-10050/medicaid-and-childrens-health-insurance-program-chip-generic-information-collection-activities?utm_campaign=subscription%20mailing%20list&utm_source=federalregister.gov&utm_medium=email
46	Notice	DC Draft 2021 Update to the HIV Preexposure Prophylaxis Clinical Practice Guideline and Supplement: Webinars	86 FR 26229/ pp26223	Published 5/13/2021	Webinars for open comments. CDC will consider comments given prior to drafting the finalized HIV Preexposure Prophylaxis Clinical Practice Guideline: 2021 Update	The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces webinars that will be held on two dates to receive comments on the draft 2021 update to the HIV Preexposure Prophylaxis (PrEP) Clinical Practice Guideline and Providers Supplement. The webinars are an opportunity for all interested parties to ask questions and provide feedback, but are specifically directed toward clinicians, such as medical doctors, nurse practitioners, physician's assistants, and pharmacists.	The webinars will be held on the following two dates: May 24, 2021 from 1 p.m. to 2:30 p.m. EDT, and May 25, 2021 from 1 p.m. to 2:30 p.m. EDT. Registration is not required. The webinars can be accessed at https://cdc.zoomgov.com/j/1602789792?pwd=NVhQbWpDMXKzaS1Urb9T4TWJnbEJCZz09. Meeting ID: 160 278 9792. Passcode: 7!8vSw29 or by phone at 1-551-285-1373. Please refer to the draft guideline documents that will be posted for ten days beginning on May 17, 2021 at https://www.cdc.gov/hiv/pdf/risk/prep/cdc-hiv-prep-guidelines-2021.pdf and https://www.cdc.gov/hiv/pdf/risk/prep-cdc-hiv-prep-provider-supplement-2021.pdf. A recording of each of the two webinars and accompanying transcripts will be available on the website listed in the paragraph above by June 15, 2021. In addition, CDC's responses to questions from the webinars will also be available June 30, 2021 at https://www.cdc.gov/hiv/program resources/planning.html. Comments will be received only during the webinars. There will be no written comment period. https://www.federalregister.gov/documents/2021/05/13/2021-10094/cdc-draft-2021-update-to-the-hiv-preexposure-prophylaxis-clinical-practice-guideline-and-supplement?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
47	Communications	Implementation of American Rescue Plan Act of 2021 Section 9817: Additional Support for Medicaid Home and Community-Based Services during the COVID-19 Emergency	SMD# 21-003	Published 5/13/2021	Demonstrate compliance with section 9817 of the ARP, beginning April 1	Section 9817 of the ARP provides qualifying states with a temporary 10 percentage point increase to the federal medical assistance percentage (FMAP) for certain Medicaid expenditures for home and community-based services (HCBS). States must use the federal funds attributable to the increased FMAP to supplement, not supplant, existing state funds expended for Medicaid HCBS in effect as of April 1, 2021, and states must use state funds equivalent to the amount of federal funds attributable to the increased FMAP to implement or supplement the implementation of one or more activities to enhance, expand, or strengthen HCBS under the Medicaid program	CMS issued a 26-pg long Medicaid letter on HCBS, it has yet to issue a State Health Official (SHO) letter to provide guidance on the FMAP temporary increase for UIOs. The purpose of this letter is to provide guidance to states on the implementation of section 9817 of the ARP, as well as to describe opportunities for states to strengthen the HCBS system in response to the COVID-19 Public Health Emergency (PHE), increase access to HCBS for Medicaid beneficiaries, adequately protect the HCBS workforce, safeguard financial stability for HCBS providers, and accelerate long-term services and supports (LTSS) reform under section 9817 of the ARP. This increased federal funding can help states increase community-living options for people with disabilities, in accordance with Title II of the Americans with Disabilities Act, 42 U.S.C. §§ 12131–12134, as interpreted by the Supreme Court in Olmstead v. L.C., 527 U.S. 581 (1999), which requires public entities to administer services to individuals with disabilities in the most integrated setting appropriate to their needs. In addition, this letter updates Medicaid retainer payment policy for HCBS providers during the COVID-19 PHE. https://www.medicaid.gov/federal-policy-guidance/downloads/smd21003.pdf
48	DULL	The Acting Director writes to Tribal Leaders and Urban Indian Organization Leaders to request your participation in an Electronic Health Record data call.	N/A	Published 5/14/2021	Collection of de-identified information regarding invested cost for commercial HIT solutions.	Last December and in January of this year, the Indian Health Service held a series of Listening Sessions related to modernizing our Health Information Technology (HIT) infrastructure through full replacement of the Resource and Patient Management System (RPMS) Electronic Health Record (EHR). During and after those sessions, a number of you commented on investments that you have already made in commercial HIT solutions, and inquired about the potential for reimbursement of those costs. The Consolidated Appropriations Act, 2021, included language requiring the IHS "to report back within 120 days of enactment of this Act with a list of Tribes that currently maintain their own non-RPMS EHR systems along with cost estimates required for those Tribes to implement, maintain, and make any necessary upgrades to these systems."	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DILL_DULOLL_05142021.pdf To help the IHS respond to this Congressional mandate and improve our understanding of Tribal and Urban Indian Organization investment in HIT, it is asked that those complete the enclosed EHR Data Call Template by June 4, 2021, and return it to ihsmodernization@ihs.gov. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/Enclosure-DILL-DULOLL-05142021.pdf
49	Webinar	What's the Price of Privacy? 2020 Census Disclosure Avoidance System Impacts on Tribal Nation Census Data	NCAI Policy Research Center	Released 5/18/2021 Webinar 5/19/2021	The webinar will provide a brief overview of the new privacy system planned by the U.S. Census Bureau for the 2020 Census data products. The webinar will also cover the latest demonstrated impacts of these privacy protections on Tribal Nations.	This webinar aims to provide background and education for tribal leaders, tribal staff, community members, and researchers in preparation for the U.S. Census Bureau Tribal Consultation Webinar scheduled for Wednesday, May 19, 2021.	Register for the webinar here: https://bit.ly/33NfTRT View resource materials to prepare for the U.S. Census Bureau tribal consultation webinar: https://bit.ly/2N11CND Federal register notice for U.S. Census Bureau Tribal Consultation Webinar: https://bit.ly/3fnUcNp NCAI Contact: Gwynne Evans-Lomayesva, Researcher, NCAI Policy Research Center, gevans-lomayesva@ncai.org
50	Notice of Tribal Consultation	Notice of Tribal Consultation on the Department of Veterans Affairs' State Home Programs	86 FR 27145/ pp 27145-27146	Published 5/19/2021 Comments Close 7/3/2021	VA is required to consult with Indian tribes to determine if any legislative or administrative action is necessary to modify these state home programs to function efficiently in support of state Veterans homes operated by Indian tribes pursuant to the amendments made by section 3004 of the Act.	The Department of Veterans Affairs (VA) is seeking Tribal consultation to assist VA in implementing the requirements of section 3004 of the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020 (the Act). The Act amended the statutory authorities of two VA programs (the State Veterans Home Construction Grant Program and the State Home Per Diem Program) so that Indian tribes were included in definitions for "state" and "state home." VA is required to consult with Indian tribes to determine if any legislative or administrative action is necessary to modify these state home programs to function efficiently in support of state Veterans homes operated by Indian tribes pursuant to the amendments made by section 3004 of the Act. VA seeks input on the legislative, regulatory and administrative modifications that may be necessary to support State Veterans Homes operated by American Indian and Alaska Native tribes in response to these amendments.	Written comments may be submitted by any of the following methods: Federal Rulemaking Portal at http://www.regulations.gov . Follow the online instructions for submitting comments. Email to tribalgovernmentconsultation@va.gov. By mail to U.S. Department of Veterans Affairs, Office of Geriatrics and Extended Care (172EEC), 810 Vermont Avenue NW, Washington, DC 20420. Comments should indicate that the submission is in response to "Notice of Tribal Consultation State Veterans Homes." https://www.federalregister.gov/documents/2021/05/19/2021-10556/notice-of-tribal-consultation-on-the-department-of-veterans-affairs-state-home-programs?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
51	Final Notice	Notice of Purchased/Referred Care Delivery Area Redesignation for the Northwestern Band of the Shoshone Nation	86 FR 27451/ pp 27451-27458	Published 5/20/2021	The IHS currently provides services under regulations in effect on September 15, 1987, and republished in the Code of Federal Regulations (CFR) at 42 CFR part 136, subparts A-C. Subpart C defines a Contract Health Service Delivery Area (CHSDA), now referred to as a Purchased/Referred Care delivery area (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 area.	Notice is hereby given that the Indian Health Service has decided to expand the geographic boundaries of the Purchased/Referred Care (PRC) Delivery Area for the Northwestern Band of the Shoshone Nation (NWBSN) in the State of Utah to include the Utah counties of Davis, Salt Lake, and Weber. The final PRC delivery area for the NWBSN is Box Elder County, Davis, Salt Lake, and Weber counties in the State of Utah. The sole purpose of this expansion is to authorize NWBSN to cover additional Tribal members and beneficiaries to receive PRC services.	This notice can be found at https://www.federalregister.gov. Written requests for information should be delivered to: CAPT John Rael, Director, Office of Resource Access and Partnerships, Indian Health Service, 5600 Fishers Lane, Mail Stop 10E85C, Rockville, MD 20857, (301) 443-0609 (This is not a toll-free number). As applicable to the Tribes, these regulations 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 (U.S.) for inclusion in or exclusion from a PRCDA. The regulations require that certain criteria must be considered before any redesignation is made.
52	Proposed Rule	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Proposed Policy Changes and Fiscal Year 2022 Rates; Quality Programs and Medicare Promoting Interoperability Program Requirements for Eligible Hospitals and Critical Access Hospitals; Proposed Changes to Medicaid Provider Enrollment; and Proposed Changes to the Medicare Shared Savings Program	86 FR 25070/ pp 25070-25790	Published 5/10/2021 Comments Close 6/28/2021	Proposing to revise the Medicare hospital inpatient prospective payment systems (IPPS) for operating and capital-related costs of acute care hospitals to implement changes arising from our continuing experience with these systems for FY 2022 and to implement certain recent legislation.	Establish new requirements and revise existing requirements for eligible hospitals and critical access hospitals (CAHs) participating in the Medicare Promoting Interoperability Program. We are also providing estimated and newly established performance standards for the Hospital Value-Based Purchasing (VBP) Program, and proposing updated policies for the Hospital Readmissions Reduction Program, Hospital Inpatient Quality Reporting (IQR) Program, Hospital VBP Program, Hospital-Acquired Condition (HAC) Reduction Program, and the PPS-Exempt Cancer Hospital Reporting (PCHQR) Program, and the Long-Term Care Hospital Quality Reporting Program (LTCH QRP). Additionally, due to the impact of the COVID-19 PHE on measure data used in our value-based purchasing programs, we are proposing to suspress several measures in the Hospital VBP, HAC Reduction, and Hospital Readmissions Reduction Programs.	Comments must be submitted in one of the following three ways (please choose only one of the ways listed): 1. Electronically. You may (and we encourage you to) submit electronic comments on this regulation to http://www.regulations.gov. Follow the instructions under the "submit a comment" tab. 2. By regular mail. You may mail written comments to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1752-P, P.O. Box 8013, Baltimore, MD 21244-1850. 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 via express or overnight mail to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1752-P, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850. https://www.federalregister.gov/documents/2021/05/10/2021-08888/medicare-program-hospital-inpatient-prospective-payment-systems-for-acute-care-hospitals-and-the
53	Notice	Agency Information Collection Activities; Submission for OMB Review; Public Comment Request: State Performance Report (OMB #0985-New)	86 FR 27625/ pp 27625-27626	Published 5/21/2021 Comments Close 6/21/2021	The purpose of this data collection is to fulfill requirements of the Older Americans Act and the Government Performance and Results Modernization Act (GPRA Modernization Act) of 2010 and related program performance activities.	The Administration for Community Living is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under section 506(c)(2)(A) of the Paperwork Reduction Act of 1995. This 30-Day notice collects comments on the information collection requirements related to the State Performance Report. This notice solicits comments on the new information collection requirements relating to the State Performance Report.	Submit written comments and recommendations for the proposed information collection within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function. By mail to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW, Rm. 10235, Washington, DC 20503, Attn: OMB Desk Officer for ACL.

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
54	Notice	Proposed Data Collection Submitted for Public Comment and Recommendations	86 FR 28354/ pp 28354-28355	Published 5/26/2021 Comments Close 7/26/2021	Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires Federal agencies to provide a 60-day notice in the Federal Register concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection	The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Health Message Testing System (HMTS). The Health Message Testing System (HMTS), a generic information collection, enables programs across CDC to collect the information they require regarding testing of messages in a timely manner.	You may submit comments, identified by Docket No. CDC-2012-0052 by any of the following methods: Federal eRulemaking Portal: Regulations.gov . Follow the instructions for submitting comments. Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-D74, Atlanta, Georgia 30329. Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to Regulations.gov. Please note: Submit all comments through the Federal eRulemaking portal (regulations.gov) or by U.S. mail to the address listed above. https://www.federalregister.gov/documents/2021/05/26/2021-11096/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
55	DULL	Urban Indian Organizational Leaders to Participate in Agency-sponsored Listening Sessions; Share and Solicit input on next steps for IHS HIT Modernization	IHS DULL	Published 5/26/2021	Indian Health Service (IHS) Health Information Technology (HIT) Modernization project will host two identical Listening Sessions on June 15, 2021, and June 17, 2021.	Following the announcement of the IHS decision for the full replacement of the Resource and Patient Management System, As the HIT Modernization project continues, the IHS is committed to meaningful Tribal Consultation, Urban Center, and engagement. IHS will share information at the sessions about the draft HIT Modernization Statement of Objectives (SOO) and obtain feedback. The SOO will survey the business objectives, applicable scope, and constraints for IHS HIT infrastructure and acquisition.	IHS Health IT Modernization Next Steps Listening Sessions Tuesday, June 15, 2021, 1:00-4:00 p.m., Eastern Time https://miite.zoomgov.com/j/1604137691?pwd=L2d3UXhDMkt4yQjc1MVAwSmpRMzBzB09 Thursday, June 17, 2021, 1:00-4:00 p.m., Eastern Time https://miite.zoomgov.com/j/1604753351?pwd=RknSYGSkcIAyRXh1ld0NsbGJMMzhoQT09
56	DULL	Best Practices and Strategies of Protecting the Native American Vote	Tribal Consultation	Published 5/28/2021	On March 7, 2021, the President issued an Executive Order on Promoting Access to Voting. The EO established an Interagency Steering Group on Native American Voting Rights (Steering Group). The charge of the Steering Group includes studying best practices for protecting voting rights of Native Americans and producing a report within 1 year of the date of this order outlining recommendations for providing such protection, consistent with applicable law. The Steering Group will engage in meaningful and robust consultation with Tribal Nations and Native leaders during this process and will include tribal recommendations in this report.	tribal input is critical in this effort. Therefore, the Steering Group will be engaging in several consultations across the country, both virtually and in-person, as allowable, over the coming months. Please see attached for the schedule of the proposed consultations	PDF_Tribal_Consultation_on_Native_American_Voting_Rights.pdf (mcusercontent.com) https://mcusercontent.com/fa20088bb41dd81f9c71fef4a/files/cba0c5f1-1e57-39ee-4ce2-a0c1059747ab/PDF_2021_05_10_FINAL_Tribal_Consultation_Schedule.pdf
57	Proposed Rule	Medicaid Program; Establishing Minimum Standards in Medicaid State Drug Utilization Review (DUR) and Supporting Value-Based Purchasing (VBP) for Drugs Covered in Medicaid, Revising Medicaid Drug Rebate and Third Party Liability (TPL) Requirements; Delay of Effective Date for Provision Relating to Manufacturer Reporting of Multiple Best Prices Connected to a Value Based Purchasing Arrangement; Delay of Inclusion of Territories in Definition of States and United States	86 FR 28742/ pp 28742-28746	Published 5/28/2021 Comments Close 6/28/2021	This proposed rule proposes to delay for 6 months the January 1, 2022 effective date for amendatory instruction 10.a., which addresses the reporting by manufacturers of multiple best prices connected to a value based purchasing arrangement, of the final rule entitled, "Medicaid Program; Establishing Minimum Standards in Medicaid State Drug Utilization Review (DUR) and Supporting Value-Based Purchasing (VBP) for Drugs Covered in Medicaid, Revising Medicaid Drug Rebate and Third Party Liability (TPL) Requirements", published in the December 31, 2020 **Federal Register.** This proposed rule also proposes to delay for 2 years the April 1, 2022 effective date of inclusion (inclusion date) for U.S. territories (American Samoa, Northern Mariana Islands, Guam, Puerto Rico, and the Virgin Islands) in the amended regulatory definitions of "States" and "United States" for purposes of the Medicaid Drug Rebate Program (MDRP), adopted in the interim final rule with comment period entitled, "Medicaid Program; Covered Outpatient Drugs; Further Delay of Inclusion of Territories in Definitions of States and United States", published in the November 25, 2019 **Federal Register** to April 1, 2024.	In the alternative, the proposal is to finalize an inclusion date that may be earlier than April 1, 2024, but not before January 1, 2023, based on public comments received.	Comments, including mass comment submissions, must be submitted in one of the following three ways (please choose only one of the ways listed): 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: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-2482-P2, P.O. Box 8016, Baltimore, MD 21244-8016. 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 following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-2482-P2, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850.
58	Notice of Tribal Consultation	VA's Indian Health Service/Tribal Health Program Reimbursement Agreements Program-Pharmacy Reimbursement Rate for the Lower 48 States	86 FR 29882/ pp 29882	Published 6/3/2021 Comments Close 7/5/2021	IHS and Tribal health care providers have created the IHS/TRIP Reimbursement Agreements Program. This program provides a means for IHS and TRIP health facilities to receive reimbursement from VA for direct care services, including pharmaceutics, provided to eligible American Indian/Alaska Native (AI/AN) Veterans. Currently, reimbursement agreements under this program state that VA will reimburse "actual costs" for pharmaceuticals. In implementing this requirement, VA has realized that this term, "actual costs," may be ambiguous and has led to difficulties in administering the agreements in compliance with applicable laws. VA is considering replacing the term "actual cost" with a more recognizable and easily calculated rate.	VA, Veterans Health Administration (VHA) will facilitate a tribal consultation regarding VA's Indian Health Service/Tribal Health Program (IHS/TRIP) Reimbursement Agreements Program. VA is seeking input on adopting a pharmacy reimbursement rate for the lower 48 states.	Comments must be received by VA on or before July 5, 2021 Comments may be submitted to tribalgovernmentconsultation@va.gov or by mail at Department of Veterans Affairs, Suite 915L, 810 Vermont Avenue NW, Washington, DC 20420. https://www.federalregister.gov/documents/2021/06/03/2021-11624/va-indian-health-service/tribal-health-program-reimbursement-agreements-program-pharmacy?utm_campaign=subscription%20mailing%20list&utm_source=federalregister.gov&utm_medium=email
59	Notice	Solicitation of Nominations for Appointment to the Advisory Committee on Tribal and Indian Affairs, Amended	86 FR 29884/ pp 29884-29885	Published 6/3/2021	The Committee was established in accordance with section 7002 of Public Law 116-315 (H.R. 7105—Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020). In accordance with Public Law 116-315, the Committee provides advice and guidance to the Secretary of Veterans Affairs on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations and Native American Veterans. The Committee serves in an advisory capacity and advises the Secretary on ways the Department can improve the programs and services of the Department to better serve Native American Veterans. Committee members make recommendations to the Secretary regarding such activities.	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs ("the Committee").	All nomination packages (Application, should be mailed to the Office of Tribal Government Relations, 810 Vermont Ave., NW., Suite 915H (075), Washington, DC 20420 or email us at tribalgovernmentconsultation@va.gov. https://www.federalregister.gov/documents/2021/06/03/2021-11669/solicitation-of-nominations-for-appointment-to-the-advisory-committee-on-tribal-and-indian-affairs?utm_campaign=subscription%20mailing%20list&utm_source=federalregister.gov&utm_medium=email
60	Request for Comment	Submission for OMB Review; Head Start Family and Child Experiences Survey (FACES) (OMB #0970-0151)	86 FR 30463/ pp 30463-30465	Published 6/8/2021	The Office of Planning, Research, and Evaluation (OPRE), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is proposing to collect data for a new wave of the Head Start Family and Child Experiences Survey (FACES).	The purpose of the FACES data collection is to support the 2007 reauthorization of the Head Start program (Pub. L. 110-134), which calls for periodic assessments of Head Start's quality and effectiveness. FACES 2019 focuses on Head Start Regions I through X (which are geographically based); AIAN (American Indian and Alaska Native) FACES 2019 focuses on Region XI (which funds Head Start programs that serve federally recognized American Indian and Alaska Native tribes). Both studies will provide data on a set of key indicators for Head Start programs, information about the Head Start program recruitment and center selection processes and on the fall 2019 and spring 2020 data collection activities for both FACES and AIAN FACES can be found here: https://www.reginfo.gov/public/do/PRAView?ICRref_nbr=202005-0970-009	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function. https://www.federalregister.gov/documents/2021/06/08/2021-11935/submission-for-omb-review-head-start-family-and-child-experiences-survey-faces-omb-0970-0151?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
61	Notice	HHS Issues Revised Notice of Reporting Requirements and Reporting Timeline for Recipients of Provider Relief Fund Payments	N/A	Published 6/11/2021	U.S. Department of Health and Human Services, through the Health Resources and Services Administration (HRSA) is releasing revised reporting requirements for recipients of Provider Relief Fund (PRF) payments.	Revised reporting requirements for HRSA Provider Relief Fund (PRF) payments. PRF recipients who have received one or more payments exceeding $10,000 during a Payment Received Period are required to report within the Reporting Time Period. Specifically, these revisions include changes to the period of availability of funds that are now based on the date the payment was received, a 90 day turn around pay period to complete reporting and the inclusion of Skilled Nursing Facilities/Nursing Home Infection Control Distributions. Providers are encouraged to sign up for the PRF Reporting Portal which will be available starting July 1, 2021.	The revised requirements and more information on these requirements can be found here: https://www.hhs.gov/sites/default/files/provider-post-payment-notice-of-reporting-requirements-june-2021.pdf To register and establish a provider PRF Reporting Portal account please follow this link: https://urldefense.proofpoint.com/v2/url?u=https-3A__links.gd_1_eyJhbGciOiJIUzI1NiJ9.eyJdIWxZXRpbPhzIW5jKDQzIHVzdGl4ImJwMjgibGljbzIsIm1bGxldGluZGkjojoMjAyMTA2MTcxMzE0LCJ1cmwiOiJodHRwczovL3B_vJnJcOHyaSUyScnHfLmdv-dB8QJYqNvfB4-2DQpHnpE4HU7f5FHRufoAk83Iu-20vSGv1Rf_z_91D0B41_br_1078063958B-2D0&s=DwMFAAc-evGZbIcdTDkvimBtB07Ywvg0F-v5A_C0pgrVfIIMM.&r=j8i_1tjsD9Z_HLtVNsDFCc1NBFkQJBXJBTBTESop0&m=D2wYCOjmRgcL0QeAAZTqEESGJKxY_dwSsyCZfL01Q&s=Qep8_DuEOc8nLcoTCXMHPbEKOBfmpHjbmCuH-p2-H3u&e= https://www.hhs.gov/about/news/2021/06/11/hhs-issues-revised-reporting-requirements-timeline-for-provider-relief-fund-recipients.html
62	Notice	Agency Information Collection Activities: Proposed Collection; Comment Request	86 FR 31506/ pp 31506	Published 6/14/2021	Under the PRA (44 U.S.C. 3501-3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term "collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party.	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments	When commenting, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways: I. Electronically. You may send your comments electronically to http://www.regulations.gov . Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments. 2. By regular mail. You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number: ____; Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following: 1. Access CMS' website address at website address at https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html. https://www.federalregister.gov/documents/2021/06/14/2021-12365/agency-information-collection-activities-proposed-collection-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
63	HHS Press Release	HHS Awards $125 Million in Workforce Grants for Community-Based Efforts to Bolster COVID-19 Vaccinations in Underserved Communities	N/A	Published 6/14/2021	US Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA) awarded $125 million to support 14 nonprofit private or public organizations to reach underserved communities in all 50 states plus the District of Columbia, Puerto Rico, Guam and the Freely Associated States to develop and support a community-based workforce that will engage in locally tailored efforts to build vaccine confidence and bolster COVID-19 vaccinations in underserved communities.	These awards reflect the first of two funding opportunities announced by President Biden last month for community-based efforts to hire and mobilize community outreach workers, community health workers, social support specialists, and others to increase vaccine access for the hardest-hit and highest-risk communities through high-touch, on-the-ground outreach to educate and assist individuals in getting the information they need about vaccinations. The workers supported with this funding will answer individual questions, help make vaccine appointments, and assist with transportation and other needs. Award recipients will collaborate with regional and local partners to ensure a broad geographic reach with the goal of getting as many people vaccinated as possible.	For a list of awards recipients, see www.hrsa.gov/coronavirus/community-based-workforce. HRSA has also released a second notice of funding opportunity targeting smaller community-based organizations, with awards expected to be released in July 2021. Contact CBOVaccineOutreach@hrsa.gov with any questions.
64	Request for Comment	Proposed Information Collection Activity; Tribal Maternal, Infant, and Early Childhood Home Visiting Program; Guidance for Submitting an Annual Report to the Secretary (OMB #0970-0409)	86 FR 31719/ pp 31719-31720	Published 6/15/2021	The Administration for Children and Families (ACF), Office of Child Care (OCC) is requesting a 3-year extension of the Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program; Guidance for Submitting an Annual Report to the Secretary (OMB #0970-0409; expiration 9/30/2021). There are minor updates to the annual guidance which reflects a change in timing for the due date of the final report.	Section 511(e)(8)(A) of Title V of the Social Security Act requires that grantees under the MIECHV program for states and jurisdictions submit an annual report to the Secretary of Health and Human Services regarding the program and activities carried out under the program, including such data and information as the Secretary shall require. Section 511(h)(2)(A) further Start Printed Page 31720states that the requirements for the MIECHV grants to tribes, tribal organizations, and urban Indian organizations are to be consistent, to the greatest extent practicable, with the requirements for grantees under the MIECHV program for states and jurisdictions.	Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing infocollection@acf.hhs.gov . Alternatively, copies can also be obtained by writing to the Administration for Children and Families, Office of Planning, Research, and Evaluation (OPRE), 330 C Street SW, Washington, DC 20201, Attn: ACF Reports Clearance Officer. All requests, emailed or written, should be identified by the title of the information collection. https://www.federalregister.gov/documents/2021/06/15/2021-12464/proposed-information-collection-activity-tribal-maternal-infant-and-early-childhood-home-visiting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
65	Notice & Request for Comment	Advisory Committee on Immunization Practices (ACIP)	86 FR 31716/ pp 31716-31717	Published 6/15/2021	In accordance with the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC), announces the following meeting of the Advisory Committee on Immunization Practices (ACIP). This meeting is open to the public. The meeting will be webcast live via the World Wide Web. Time will be available for public comment.	The committee is charged with advising the Director, CDC, on the use of immunizing agents. In addition, under 42 U.S.C. 1396s, the committee is mandated to establish and periodically review and, as appropriate, revise the list of vaccines for administration to vaccine-eligible children through the Vaccines for Children (VFC) program, along with schedules regarding dosing interval, dosage, and contraindications to administration of vaccines. Further, under provisions of the Affordable Care Act, section 2713 of the Public Health Service Act, immunization recommendations of the ACIP that have been approved by the Director of the Centers for Disease Control and Prevention and appear on CDC immunization schedules must be covered by applicable health plans.	The meeting will be held on June 18, 2021, from 11:00 a.m. to 5:00 p.m., EDT (dates and times subject to change); see the ACIP website for updates: http://www.cdc.gov/vaccines/acip/index.html. The public may submit written comments from June 15, 2021 through June 18, 2021. You may submit comments, identified by Docket No. CDC-2021-0060 by any of the following methods: Federal eRulemaking Portal: https://www.regulations.gov . Follow the instructions for submitting comments. Mail: Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-H24-8, Atlanta, Georgia 30329-4027, Attn: June 18, 2021 ACIP Meeting. Instructions: All submissions received must include the Agency name and Docket Number. All relevant comments received in conformance with the https://www.regulations.gov suitability policy will be posted without change to https://www.regulations.gov , including any personal information provided. For access to the docket to read background documents or comments received, go to https://www.regulations.gov .

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
66	HHS Press Release	HHS Announces $80 million in American Rescue Plan Funding to Strengthen U.S. Public Health IT, Improve COVID-19 Data Collection, and Bolster Representation of Underrepresented Communities in Public Health IT Workforce	N/A	Published 6/17/2021	U.S. Department of Health and Human Services' (HHS) Office of the National Coordinator for Health Information Technology (ONC) is announcing the establishment of an $80 million Public Health Informatics & Technology Workforce Development Program (PHIT Workforce Program) to strengthen U.S. public health informatics and data science. As part of this launch, ONC is inviting college and universities—particularly Historically Black Colleges and Universities (HBCUs), Tribal Colleges and Universities (TCUs), Hispanic Serving Institutions (HSIs), Asian American and Native American Pacific Islander-Serving Institutions (AANAPISIs), and other minority-serving institutions (MSIs)—to apply for funding through a consortium that will develop the curriculum, recruit and train participants, secure paid internship opportunities, and assist in career placement at public health agencies, public health-focused non-profits or public health-focused private sector or clinical settings.	Supports the Administration's efforts to root out pervasive health and socioeconomic inequities that have been exacerbated by the pandemic and ensure our health care system is better equipped for the next public health emergency. Currently, we have learned through the pandemic that there are gaps in our public health, including reporting and data analysis, particularly around race and ethnicity-specific data. Differences can be attributed to inconsistent technology infrastructures and chronic underfunding to support the staffing needs around public health data reporting at the state and local levels. "Federal efforts to center equity in the COVID-19 response and future public health responses will be improved by robust data collection and reporting around infection, hospitalization, and mortality rates, as well as underlying health and social vulnerabilities, that is disaggregated by race and ethnicity, age, gender, and other key variables."	ONC will host an information session about this funding opportunity on June 23, 2021 at 2:00 pm ET. View the notice of funding opportunity: https://www.healthit.gov/topic/onc-funding-opportunities/funding-announcements
67	HRSA Press Release	HRSA Announces Coverage of Over Five Million Claims for COVID-19 Vaccinations for Uninsured Individuals	N/A	Published 6/17/2021	Health Resources and Services Administration (HRSA) is announcing that the HRSA COVID-19 Claims Reimbursement to Health Care Providers and Facilities for Testing, Treatment, and Vaccine Administration for the Uninsured (Uninsured Program) has paid over 5 million claims to health care providers for administering COVID-19 vaccines to uninsured individuals.	There are approximately 29 million uninsured individuals living in the United States. In an effort to aid in treatment, testing, prevention, and vaccine administration for those uninsured HRSA has launched the Coverage Assistance Fund. The Uninsured Program allows anyone without health insurance, to receive their COVID-19 vaccines for free by reimbursing providers for the cost of administering the vaccine. In addition, the program will also cover COVID-19 testing and treatment claims for individuals without health insurance.	The Covid-19 assistance fund may be viewed at: https://www.hrsa.gov/covid19-coverage-assistance
68	DULL	Allocation decisions for approximately $1.8 billion in resources appropriated to the IHS in the American Rescue Plan Act	N/A	Published 6/22/2021	These funds are one-time, non-recurring, and can only be used for the purposes specified in the statute. They may also cover obligations for purposes specified in the statute that were incurred to prevent, prepare for, and respond to COVID-19 during the period beginning January 31, 2020, through March 11, 2021.	On March 15, 2021, Tribal Consultation conference call was held with Tribal Leaders and an Urban Confer conference call with Urban Indian Organization Leaders to seek rapid input regarding the allocation of $6.094 billion in ARPA resources. The IHS also received written comments. On April 16, 2021, an initial announcement of the allocation of approximately $4.3 billion from the ARPA. The allocation decisions for the remaining distribution of approximately $1.8 billion from the ARPA: $240 million for Public Health Workforce Activities $400 million for Mental Health and Substance Abuse Prevention and Treatment $500 million to Detect, Diagnose, Trace, Monitor, and Mitigate COVID-19 Infections $600 million for COVID-19-Related Facilities Activities $10 million for Potable Water Delivery Through Tribal Consultation and Urban Confer, the IHS identified areas important to Tribal leaders when distributing these funds: supporting flexibility of these funds rapid distribution using existing distribution methods for allocation.	The DULL may be read at https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DULL_DUIOLL_062221.pdf
69	Notice	Needs and Challenges in Personal Protective Equipment (PPE) Use for Underserved User Populations	86 FR 33296	Published 6/28/2021	National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS) requests information on the Needs and Challenges in Personal Protective Equipment (PPE) Use for Underserved User Populations.	The NIOSH National Personal Protective Technology Laboratory (NPPTL) is expanding its portfolio to include activities that consider the needs of U.S. worker populations who are underserved related to personal protective equipment (PPE) use, availability, accessibility, acceptability, or knowledge. Underserved PPE user populations may include, but are not limited to, workers who are of an atypical size; who are members of a gender, racial, ethnic, or linguistic minority group; who conduct non-traditional worker activities; or who are members of sub-disciplines that are not the primary focus of the current PPE activities within their larger field.	Informational submissions in response to this Notice are due no later than August 23, 2021. Interested parties should submit information to: NIOSH, Attn: Sherri Diana, National Institute for Occupational Safety and Health, NIOSH Docket Office, 1090 Tusculum Avenue, MS C-34, Cincinnati, Ohio 45226-1998, Email address: npeconcerns@cdc.gov. Detailed information on submission content can be viewed at https://www.federalregister.gov/documents/2021/06/24/2021-13263/needs-and-challenges-in-personal-protective-equipment-ppe-use-for-underserved-user-populations?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
70	Tribal Consultation	Tribal Consultation: feedback on the President's Fiscal Year (FY) 2022 Budget	N/A	Published 7/1/2021	Office of Management and Budget (OMB), I am writing to invite you to a Tribal consultation to provide your feedback on the President's Fiscal Year (FY) 2022 Budget. While your feedback on the FY 2022 Budget will help to guide the formulation of the President's FY 2023 Budget, please note that OMB intends to hold a separate Tribal consultation later this year specifically to inform the FY 2023 Budget formulation process.	Tribal leaders and their designees are invited to provide comments and recommendations on the following: •The FY 2022 President's Budget proposals to reclassify Contract Support Costs, Indian Self Determination and Education Assistance Act Section 105(l) Leases costs, and enacted Indian Water Rights Settlements payments as mandatory beginning in FY 2023. •Other feedback on the FY 2022 President's Budget for programs and activities serving and benefitting Tribal governments, organizations, and communities. •Ensuring adequate and stable funding by considering options for a potential mandatory funding proposal for the Department of Health and Human Services' Indian Health Service in future President's Budgets. OMB will conduct another consultation on the President's FY 2023 Budget, which will include this topic, in2021, but this July session can start the process of seeking Tribal Leaders' views on some of the major questions around developing such a proposal. •How OMB can improve Tribal funding transparency, such as through changes toOMB's annual Native American Funding Crosscut.	This tribal consultation on the President's FY2022 Budget will be held via teleconference on: •Thursday, July 15, 2021 (1:00 p.m. – 3:00 p.m. ET) registration link: https://ernst9.intellor.com?do=register&t=1&p=902398
71	Tribal Consultation	Center for State, Tribal, Local, and Territorial Support (CSTLTS), CDC/ATSDR Tribal Consultation Session	86 FR 35298/ pp 35298-35299	Published 7/2/2021	The Centers for Disease Control and Prevention (CDC)/Agency for Toxic Substances and Disease Registry (ATSDR), announces the 2021 CDC/ATSDR Tribal Consultation Session. CDC/ATSDR will host American Indian and Alaska Native (AI/AN) Federally Recognized Tribes for the virtual tribal consultation session. The proceedings will be open to the public.	The purpose of the consultation meeting is to advance CDC/ATSDR support for and collaboration with AI/AN tribal nations and to improve the health of AI/AN tribal nations by pursuing goals that include assisting in eliminating the health disparities faced by AI/AN tribal nations. CDC/ATSDR is hosting this meeting to hold a consultation with federally recognized tribal nations to receive input and guidance on improving the current CDC/ATSDR Tribal Consultation Policy. CDC/ATSDR is seeking feedback on how the agency can improve its policies and practices to better engage with Indian Country through meaningful consultation.	The tribal consultation will be held on August 5, 2021, from 3:15 p.m. to 5:00 p.m., EDT. Written tribal testimony is due by 5:00 p.m., EDT, on September 7, 2021. Zoom Virtual Tribal Consultation. To register, see CDC web page https://cdc.zoomgov.com/meeting/register/vJIsfu-gqDgrGD1Ir9e7HPjbKyIF3v5Sp4. All elected tribal officials are encouraged to submit written tribal testimony to the contact person and mailing address listed below or by email at Tribalsupport@cdc.gov. https://www.federalregister.gov/documents/2021/07/02/2021-14205/center-for-state-tribal-local-and-territorial-support-cstlts-cdcatsdr-tribal-consultation-session?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
72	Notice	Lists of Designated Primary Medical Care, Mental Health, and Dental Health Professional Shortage Areas	86 FR 35808/ pp 35808-35809	Published 7/7/2021	Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS released notice informing the public of the availability of the complete lists of all geographic areas, population groups, and facilities designated as primary medical care, dental health, and mental health professional shortage areas (HPSAs) as of April 30, 2021.	Each list of designated HPSAs is arranged by state. Within each state, the list is presented by county. If only a portion (or portions) of a county is (are) designated, a county is part of a larger designated service area, or a population group residing in a county or a facility located in the county has been designated, the name of the service area, population group, or facility involved is listed under the county name. All Indian Tribes that meet the definition of such Tribes in the Indian Health Care Improvement Act of 1976, 25 U.S.C. 1603, are automatically designated as population groups with primary medical care and dental health professional shortages. Further, the Health Care Safety Net Amendments of 2002 provides eligibility for automatic facility HPSA designations for all federally qualified health centers (FQHCs) and rural health clinics that offer services regardless of ability to pay. Specifically, these entities include FQHCs funded under section 330 of the PHS Act, FQHC Look-Alikes, and Tribal and urban Indian clinics operating under the Indian Self-Determination and Education Act of 1975 (25 U.S.C. 450) or the Indian Health Care Improvement Act. Many, but not all, of these entities are included on this listing. Absence from this list does not exclude them from HPSA designation; facilities eligible for automatic designation are included in the database when they are identified.	Complete lists of HPSAs designated as of April 30, 2021, are available on the website at https://data.hrsa.gov/topics/health-workforce/shortage-areas. Frequently updated information on HPSAs is available at https://data.hrsa.gov/tools/shortage-area. Information on shortage designations is available at https://bhw.hrsa.gov/workforce-shortage-areas/shortage-designation. https://www.federalregister.gov/documents/2021/07/07/2021-14408/lists-of-designated-primary-medical-care-mental-health-and-dental-health-professional-shortage-areas?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
73	Final Methodology	Basic Health Program; Federal Funding Methodology for Program Year 2022	86 FR 35615/ pp 35615-35631	Published 7/7/2021	Centers for Medicare & Medicaid Services (CMS), HHS, finalized the methodology and data sources necessary to determine federal payment amounts to be made for program year 2022 to states that elect to establish a Basic Health Program under the Patient Protection and Affordable Care Act to offer health benefits coverage to low-income individuals otherwise eligible to purchase coverage through Health Insurance Exchanges, and incorporates the effects on such payment amounts the American Rescue Plan Act of 2021 (ARP).	Effective on January 1, 2022, in the states that elect to operate a Basic Health Plan (BHP), the BHP will make affordable health benefits coverage available for individuals under age 65 with household incomes between 133 percent and 200 percent of the federal poverty level (FPL) who are not otherwise eligible for Medicaid, the Children's Health Insurance Program (CHIP), or affordable employer-sponsored coverage, or for individuals whose income is below these levels but are lawfully present non-citizens ineligible for Medicaid. For those states that have expanded Medicaid coverage under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (the Act), the lower income threshold for BHP eligibility is effectively 138 percent due to the application of a required 5 percent income disregard in determining the upper limits of Medicaid income eligibility (section 1902(e)(14)(I) of the Act). A BHP is another option for states to provide affordable health benefits to individuals with incomes in the ranges described above. States may find a BHP a useful option for several reasons, including the ability to potentially coordinate standard health plans in the BHP with their Medicaid managed care plans, or to potentially reduce the costs to individuals by lowering premiums or cost-sharing requirements.	A state that is approved to implement a BHP must provide data showing quarterly enrollment of eligible individuals in the various federal BHP payment rate cells. Such data must include the following: Personal identifier; Date of birth; County of residence; Indian status; Family size; Household income; Number of persons in household enrolled in BHP; Family identifier; Months of coverage; Plan information; and Any other data required by CMS to properly calculate the payment. Full details on the formulas and comments can be viewed at https://www.federalregister.gov/documents/2021/07/07/2021-14393/basic-health-program-federal-funding-methodology-for-program-year-2022?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
74	Notice of Meeting	Meeting of the Presidential Advisory Council on HIV/AIDS	86 FR 36144	Published 7/8/2021	As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will be holding the 71st full Council meeting utilizing virtual technology	Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will be holding the 71st full Council meeting utilizing virtual technology on Tuesday, August 3-Wednesday, August 4, 2021 from 1:00-5:00 p.m. (ET) on both days. The meeting will be open to the public; a public comment session will be held during the meeting. Pre-registration is required to provide public comment during the meeting. To pre-register to attend or to provide public comment, please send an email to PACHA@hhs.gov and include your name, organization, and title by close of business Monday, July 26, 2021. If you decide you would like to provide public comment but do not pre-register, you may submit your written statement by emailing PACHA@hhs.gov by close of business Wednesday, August 11, 2021. The meeting agenda will be posted on the PACHA page on HIV.gov at https://www.hiv.gov/federal-response/pacha/about-pacha prior to the meeting.	Instructions on attending this meeting virtually will be posted one week prior to the meeting at: https://www.hiv.gov/federal-response/pacha/about-pacha.

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
75	DRLL	Indian Health Service (IHS) Circular No. 21-02, Contract Support Costs Advisory Group – Charter	N/A	Published 7/13/2021	Seeking nominations for Tribal members to serve on the Contract Support Costs Advisory Group (CSCAG).	A copy of the CSCAG Charter is available on the IHS Web site at: https://www.ihs.gov/ihm/circulars/2021/contract-support-costs-advisory-group-charter/. The purpose of the CSCAG is to serve as a resource for information and advice to the IHS. The CSCAG is also tasked with providing recommendations for a uniform and equitable system of determining, paying, and reconciling Contract Support Costs (CSC) funds for new, expanded, and ongoing Indian Self-Determination and Education Assistance Act contracts and compacts	Nominations for CSCAG members to your respective IHS Area Director by Wednesday, August 11, 2021. The membership of the CSCAG is comprised of Federal and Tribal officials. Tribal membership must comply with Federal Advisory Committee Act Intergovernmental exemption requirements (2 U.S.C. § 1534b(j)). Tribal membership will consist of two (2) elected Tribal Leaders from each IHS Area. In addition, both the Tribal Self-Governance Advisory Committee and the Direct Service Tribes Advisory Committee will select an elected Tribal Leader, representing his or her Tribe, to serve on the CSCAG. The first scheduled meeting of the CSCAG will be held virtually on September 2, 2021. A meeting announcement will be sent to members of the CSCAG with additional details once appointments are made
76	DULL	Urban Confer	N/A	Published 7/15/2021	$1,000,000 is provided to conduct an infrastructure study for facilities run by UIOs. The infrastructure study will be a first step towards creating a comprehensive action plan to address the most critical challenges faced by UIOs	The December 27, 2020-enacted Consolidated Appropriations Act, 2021 (Pub. L. No. 116-260) (the Act), provides the IHS with a total fiscal year (FY) 2021 appropriation of $6.4 billion. The Act's Joint Explanatory Statement for Division G provides appropriations for the Department of the Interior, the IHS, Environmental Protection Agency, the Forest Service, and related agencies for FY 2021. Specifically, $1,000,000 is provided to conduct an infrastructure study for facilities run by UIOs	Urban Confer session on Thursday, July 22, 2021. Urban Indian Organization Leaders are encouraged to provide comments on the scope of the IHS Urban Indian Organization Infrastructure Study. Thursday, July 22, 2021- 4-5 PM EST Access Zoom by Telephone: (833) 568-8864 Zoom Meeting ID: 161 963 5644 https://www.zoomgov.com/j/1619635644 4Fpwd=QW7INENSEFpOHE4tzVaa11 oQzNVK1TZ09 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DULOLL_07162021.pdf
77	DULL	Urban Confer	N/A	Published 7/16/2021	The IHS is currently researching the feasibility of calculating an All-Inclusive Rate for UIOs.	Urban Confer to seek your input on the calculation of an All-Inclusive Rate for Urban Indian Organizations (UIOs).	Urban Confer session on Monday, July 26, 2021. Urban Indian Organization Leaders are encouraged to provide comments on the calculation of an All-Inclusive Rate for UIOs Monday, July 26, 2021- 2-3 PM EST Access Zoom by Telephone: (833) 568-8864 Zoom Meeting ID: 161 333 5777 https://www.zoomgov.com/j/1613 335777?pwd=bmJCQWh0dStLQI Y5M3BGOU9xM1VwUT09 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DULOLL_07162021-2.pdf
78	A Proposed Rule	Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; Provider and Supplier Prepayment and Post-Payment Medical Review Requirements.	86 FR 39104/ pp 39104-39907	Published 7/23/2021	Centers for Medicare & Medicaid Services (CMS) and Health and Human Services (HHS), major proposed rule addresses: Changes to the physician fee schedule (PFS); other changes to Medicare Part B payment policies to ensure that payment systems are updated to reflect changes in medical practice, relative value of services, and changes in the statute	Based on these provisions, the following three types of organizations that are eligible to enroll in Medicare as FQHCs: Health Center Program grantees: Organizations receiving grants under section 330 of the PHS Act (42 U.S.C. 254b). Health Center Program "lookalikes": Organizations that have been identified by the Health Resources and Services Administration as meeting the requirements to receive a grant under section 330 of the PHS Act, but which do not receive section 330 grant funding. Outpatient health programs or facilities operated by a Tribe or tribal organization under the ISDEAA, or by an urban Indian organization receiving funds under Title V of the IHCIA. The American Recovery and Reinvestment Act of 2009 section 5006(e)(1), which became effective July 1, 2009, mandates that TIAG shall be maintained within CMS and added two new representative's positions: A representative and alternate from a national urban Indian health organization (National Council of Urban Indian Health) and a representative and alternate from the IHS.	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on September 13, 2021. In commenting, please refer to file code CMS-1751-P. Comments, including mass comment submissions, must be submitted in one of the following three ways (please choose only one of the ways listed): 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: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1751-P, P.O. Box 8016, Baltimore, MD 21244-8016. 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 following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1751-P, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850. https://www.federalregister.gov/documents/2021/07/23/2021-14973/medicare-program-cy-2022-payment-policies-under-the-physician-fee-schedule-and-other-changes-to-part-b?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
79	Tribal Consultation	Tribal Consultation: Native American Voting Rights	White House Tribal Affairs	Published 7/26/2021	The Native American Voting Rights Steering Group will be holding the next consultation on July 28th from 2-4 pm.	This steering group will cover the Southern, Eastern, Rocky Mountain, Eastern Oklahoma, and Midwest Regions. Secretary Haaland will be join the consultation. There will be additional consultations, details will be forthcoming.	Registration can be found at: https://pitc.zoomgov.com/webinar/register/WN_ofcbkisaS8KYAv-PU-an6Aw
80	Notice: New and Competing Continuation	Epidemiology Program for American Indian/Alaska Native Tribes and Urban Indian Communities	86 FR 41058/ pp 41058-41073	Published 7/30/2021	Indian Health Service is accepting application for a cooperative agreement for Tribal Epidemiology Centers (TECs) servicing AI/AN Tribes and Urban Indian communities.	This program is authorized under: The Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act (IHCIA), as amended, 25 U.S.C. 1621m. This program is described in the Assistance Listings located at https://beta.sam.gov (formerly known as Catalog of Federal Domestic Assistance) under 93.231. The TEC program was authorized by Congress in 1996 as a way to provide public health support to multiple Tribes and Urban Indian communities in each of the IHS Administrative Areas. The funding opportunity announcement is open to currently funded TECs	Application Deadline Date: September 1, 2021. Earliest Anticipated Start Date: September 30, 2021 https://www.federalregister.gov/documents/2021/07/30/2021-16281/epidemiology-program-for-american-indianalaska-native-tribes-and-urban-indian-communities?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
81	Notice	Community Health Aide Program: Tribal Planning & Implementation	86 FR 41044/ pp41044-41051	Published 7/30/2021	The Indian Health Service (IHS) is accepting applications for grants for the Community Health Aide Program (CHAP) Tribal Planning and Implementation (TPI) program	The CHAP is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1616l. This grant program is described in the Assistance Listings located at https://beta.sam.gov (formerly known as Catalog of Federal Domestic Assistance) under 93.382. The national CHAP will provide a network of health aides trained to support licensed health professionals while providing direct health care, health promotion, and disease prevention services. These providers will work within a referral relationship under the supervision of licensed clinical providers that includes clinics, service units, and hospitals. The program will increase access to direct health services, including inpatient and outpatient visits.	Application Deadline Date: September 1, 2021. Earliest Anticipated Start Date: September 30, 2021. https://www.federalregister.gov/documents/2021/07/30/2021-16283/community-health-aide-program-tribal-planning-and-implementation?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
82	Notice	AR27-Notice of Request for Information on the Department of Veterans Affairs' Eligibility Considerations for the Veterans Cemetery Grants Program	86 FR 41162/ pp 41162-41163	Published 7/30/2021	Through this request for information, VA seeks comments to help inform VA's understanding of issues affecting States and Tribal Organizations in meeting burial and other needs of their National Guard and Reserve/ st populations with respect to burial in VA grant-funded cemeteries.	State and Tribal veterans' cemetery grant applicants that seek to participate in the Department of Veterans Affairs (VA) Veterans Cemetery Grants Program (VCGP) must, to qualify for a grant, solely inter and memorialize eligible persons, which includes Veterans and certain family members. VA seeks stakeholder input to improve our understanding of issues impacting States and Tribal Organizations (as those terms are defined in 38 CFR 39.2) in serving their National Guard servicemembers and Reservists. The Secretary seeks information on the questions listed below. Commenters do not need to address each question and should focus on those that relate to their expertise or perspectives. To the extent possible, please clearly indicate which questions you address in your response.	Comments must be submitted through www.Regulations.gov and will be available for public viewing, inspection or copies. Comments are due by August 30, 2021. George Eisenbach, Director, Veterans Cemetery Grants Program, National Cemetery Administration (43), Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420, (202) 632-7269 (this is not a toll-free telephone number). https://www.federalregister.gov/documents/2021/07/30/2021-16291/ar27-notice-of-request-for-information-on-the-department-of-veterans-affairs-eligibility?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
83	DULL	Ongoing Tribal Consultation and Urban Confer concerning modernization of the Health Information Technology (HIT) infrastructure supported by the Indian Health Service (IHS).	N/A	Published 8/9/2021	On May 21, 2021, the IHS hosted a virtual Industry Day event. We convened two Listening Sessions on this topic for Tribal and Urban Indian Organization leadership on June 15, 2021, and June 17, 2021. We have also released a Request for Information for interested vendors. As a next step, the IHS is following established Federal contracting processes by posting draft acquisition documents for review and comment by HIT vendors. Contracting staff posted a draft Statement of Objectives https://sam.gov/opp/1c9247a64fc4406e82a1e7e01d8cc50/view on July 29, 2021. The Statement of Objectives will be the focus of the upcoming Request for Proposals. The Statement of Objectives describes the business objectives and applicable scope and constraints for IHS HIT modernization, and offers vendors greater flexibility to respond with solutions that will meet those objectives.	To ensure that you have an opportunity to review and comment on these documents. Feel free to share the draft documents posted. Comments and recommendations can be sent to ihsmodernization@mitre.org. Responses due by September 6, 2021. Feedback from vendors on these documents will help the IHS refine and improve our solicitation. Release should be planned for in the first quarter of fiscal year 2022.	Dear Tribal and Indian Organization Leader Letter August 9, 2021 (ihs.gov) If you have questions or concerns about this process, please contact Mr. Mitchell Thornburgh, Chief Information Officer, IHS, by telephone at (240) 620-3117, or by e-mail at mitchell.thornburgh@ihs.gov.
84	Notice	Notice of Final Issuance on the Administration for Native Americans Program Policies and Procedures	86 FR 43663/ pp 43663-43665	Published 8/10/2021	Pursuant to section 814 of the Native American Programs Act of 1974 (NAPA), as amended, ANA is required to provide members of the public an opportunity to comment on proposed changes in interpretive rules and general statements of policy and to give notice of the proposed changes no less than 30 days before such changes become effective. On February 19, 2021, ANA published a Notice of Public Comment (NOPC) in the **Federal Register** regarding its proposed interpretive rules and general statements of policy relative to its six FY 2021 Funding Opportunity Announcements (FOAs)	The FY 2021 FOAs have been published, and these FOAs serve as the final notice of ANA's proposed changes. Environmental Regulatory Enhancement (HHS-2021-ACF-ANA-NR-1907); Native American Language Preservation and Maintenance—Esther Martinez Immersion (HHS-2021-ACF-ANA-NB-1958); Native American Language Preservation and Maintenance (HHS-2021-ACF-ANA-NL-1924); Social and Economic Development Strategies (HHS-2021-ACF-ANA-NA-1906); Social and Economic Development Strategies—Alaska (HHS-2021-ACF-ANA-NK-1902); and Social and Economic Strategies—Growing Organizations (HHS-2021-ACF-ANA-NN-1918).	Pursuant to section 814 of NAPA, as amended, ANA is required to provide members of the public an opportunity to comment on proposed changes in interpretive rules and general statements of policy and to give notice of the proposed changes no less than 30 days before such changes become effective. ANA published a NOPC (86 FR 10283) on February 19, 2021, with proposed policy and program clarifications, modifications, and activities for the FY 2021 FOAs. The NOPC provided proposed clarifications, modifications, and new text for six FY 2021 FOAs. During the 30-day comment period, ANA received three responses to the NOPC. https://www.federalregister.gov/documents/2021/08/10/2021-16959/notice-of-final-issuance-on-the-administration-for-native-americans-program-policies-and-procedures?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
85	DULL	Initiate Urban Confer for input and recommendation on mandatory funding approaches at the IHS	N/A	Published 8/13/2021	The fiscal year (FY) 2022 President's Budget commits to conducting robust Tribal Consultation and Urban Confer to evaluate options, including mandatory funding, to provide adequate, stable, and predictable funding for the IHS in the future. To help facilitate your input and recommendations regarding mandatory funding approaches, the IHS would like your input	Input will be around the following discussion points: What is the appropriate funding level for a mandatory funding proposal? What is the appropriate growth pattern for a mandatory funding proposal? What is the appropriate appropriations structure for a mandatory funding proposal?	Urban confer will be held: Monday, August 30th, 2021 2-4 p.m. (EDT) (833) 568-8864 Toll-free Meeting ID: 161 104 8863 Passcode: 961455 Join the ZoomGov Meeting at: https://www.zoomgov.com/j/1611048863?pwd= ynr2Rk3dRZKFdVdTRZVmNrdUhdz09
86	Notice	Emergency Use Authorizations for Vaccine- CPT Codes	N/A	Published 8/17/2021	The Food and Drug Administration (FDA) released new emergency use authorizations for both the Pfizer and Moderna vaccine. The CPT code 0003A will now be used for the Pfizer vaccine and the CPT code 0013A for the Moderna vaccine. .	These new codes are effective August 12, 2021. CMS has authorized payment for administration of additional doses of the COVID-19 vaccine which has recently been cleared by the FDA for immnocompromised people. These additional doses will be reimbursed at $40	For more information on Medicare COVID-19 codes click here- https://www.cms.gov/medicare/medicare-part-b-drug-av erage-sales-price/covid-19-vaccines-and-monoclonal-antibodies For more information on Medicare COVID-19 payments click here- https://www.cms.gov/medicare/covid-19/medicare-covid-19-vaccine-shot-payment
87	Directive	Native American Voting Rights Steering Group	N/A	Published 8/17/2021	The Native American Voting Rights Steering Group will be holding regional consultations.	Wednesday September 15th 2021- Southern Plains and Great Plains Regions Register: https://pitc.zoomgov.com/webinar/register/WN_e64eKtouQ7y62qIiGX0U2Q Wednesday September 22nd 2021- Alaska Register: https://pitc.zoomgov.com/webinar/register/WN_BPT_NzDTQeCwQWMhcBIXng	https://mcusercontent.com/162028bbb41dd81f9c715ef4d/files/a83d0a1d-3120-4691-62b2-eaf752917d7b/SEPT_DTLL_Voting_Rights_Consultations.01.pdf https://mcusercontent.com/162028bbb41dd81f9c715ef4d/files/c89de3e-89aa-5127-3f5b-123992452c1c/Tribal_Voting_Rights_Consultation_Schedule.pdf
88	HRC Press Release	Human Rights Campaign Foundation, Center for Community Practice	N/A	Published 8/19/2021	HRC Foundation, in partnership with Us Helping Us, launched the nations first national in-home HIV testing program centered around reaching communities disproportionately impacted by HIV	The in-home testing kit aims to empower people to learn their status and take control of their sexual health without having to visit a medical provider. HRC will be providing a direct-to-door service to the LGBTQ+ community by pledging to administer a minimum of 5,000 free in-home testing kits for HIV over one year. The service fits under the My Body My Health public education campaign.	Human Rights Campaign Foundation Launches the Country's First National In-Home HIV Testing Program (urccp.org)

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
89	DTLL	Tribal Consultation with the Council on Environmental Quality (CEQ)	N/A	Published 8/30/2021	This consultation will inform CEQ's ongoing review of its NEPA regulations, which CEQ intends to pursue through a two phased rulemaking process. This first phase will propose a few, targeted amendments to fix critical problems created by regulations finalized in 2020. The second phase will take a broader, longer-term look at how the federal government's environmental review process can be done smarter, more efficiently, and in a way that better responds to the needs and voices of affected communities, including Tribal Nations.	During the consultation input will be collected on how NEPA affects Tribes & what is working well about the NEPA regulations, and what can be improved. This input is invaluable to CEQ's overall approach to reviewing and considering revisions to the NEPA regulations. There is planned engagement with Tribal consultation throughout the rulemaking process. NEPA applies to a wide variety of Federal agency actions of interest to Tribes. CEQ anticipates holding additional Tribal consultations later in the fall. Information about future consultation meetings or other Tribal engagement opportunities will be posted at https://ceq.doe.gov/.	September 30, 2021 from 2:00-4:00 pm EST Zoom Access Link: https://pitc.zoomgov.com/j/1617773334?pwd=2mVqSHRqbG1UNDRZERVzWh4czfDZd09 Phone Only Dial-in Information (for higher quality, dial a number based on your current location): (669) 254-5252 or (551) 285-1373 or (646) 828-7666 or (669) 216-1590 Webinar ID: 161 777 3334 Passcode: 557760 https://rmcusercontent.com/1620288bb41dd81f9c715e14d/files/54105bcc-5757-2464-98d6-be8c7ae46b60/CEQ_NEPA_Regulations_Tribal_Consultation_Letter.pdf
90	Rule	**Access to Federal Employees Health Benefits (FEHB) for Employees of Certain Tribally Controlled Schools**	86 FR 49461/ pp 49461-49466	Published 9/3/2021	The Office of Personnel Management (OPM) is issuing an interim final rule to expand eligibility for enrollment in the Federal Employees Health Benefits (FEHB) Program to additional tribal employees. The Consolidated Appropriations Act, 2021 (P.L. 116-260) amended section 409 of the Indian Health Care Improvement Act and expanded entitlement to Indian tribes or tribal organizations carrying out programs under the Tribally Controlled Schools Act of 1988 (TCSA) to purchase coverage, rights, and benefits under the FEHB Program for their employees.	Accordingly, under 25 U.S.C. 1647b, tribally controlled schools include both TCSA grant schools and schools operating under the SDEAA (Pub. L. 93-638) or a "638 contract." Tribes or tribal organizations operating schools under 638 contracts were already entitled to purchase FEHB since the extension of FEHB to tribal employers in 2012. Currently, there are 128 tribally controlled schools with approximately 4,533 employees. Three of these tribally controlled schools operate under 638 contracts schools, and the remainder are TCSA grant schools. Tribal employees, as defined at 5 CFR 890.1402, across the 125 TCSA grant schools are now eligible for FEHB.	Effective date: This rule is effective on September 3, 2021. Comment date: OPM must receive comments on or before November 2, 2021 You may submit comments, identified by docket number and/or Regulatory Information Number (RIN) and title, by the following method: Federal Rulemaking Portal: http://www.regulations.gov. Follow the instructions for submitting comments. All submissions received must include the agency name and docket number or RIN https://www.federalregister.gov/documents/2021/09/03/2021-19042/access-to-federal-employees-health-benefits-fehb-for-employees-of-certain-tribally-controlled
91	DTLL	Office of Management and Budget: Tribal Consultation	N/A	Published 9/3/2021	Tribal leaders and their designees are invited to provide comments and recommendations on how the FY 2023 President's Budget can effectively support American Indian and Alaska Native governments, organizations, communities and individuals.	•Specific feedback on the highest priority programs and activities recommended for investment in the FY 2023 budget, including associated funding levels. Tribal leaders' feedback on the treatment of these programs and activities in the FY 2023 President's Budget in the context of those included in the Infrastructure Investment and Jobs Act and the Budget Reconciliation process will be particularly helpful to OMB. •Specific technical assistance needs to support the effective use of existing resources, such as through the American Rescue Plan Act, as well as future resources, such as those included in the Infrastructure Investment and Jobs Act and the Budget Reconciliation process. •Options for a potential mandatory funding proposal for the Department of Health and Human Services' Indian Health Service (IHS), including input on the analytical considerations in setting the level for mandatory funding and how this funding should grow in subsequent years. •Barriers to improvement of water infrastructure for IHS and other tribal and Federal facilities.	This Tribal consultation on the President's FY 2023 Budget will be held via teleconference on: Thursday, September 23, 2021 (2:00 p.m. – 4:00 p.m. ET)registration Link: https://ems9.intelior.com/Ido=registerR&t=1&p=902466
92	Tribal Consultation	Office of Management and Budget: Tribal Consultation	N/A	Published 9/3/2021	Tribal consultation on the FY 2023 Budget next Thursday, September 23.	Provide comments and recommendations on how the FY 2023 President's Budget can effectively support AI/AN governments, organizations, communities, and individuals	please use the link below to register to participate in the Tribal consultation. When registering, you will be asked to provide your name, email, title and Tribal leadership position, and tribal affiliation. You will receive the call-in number and a unique participant code following registration. •Thursday, September 23, 2021 (2:00 p.m. – 4:00 p.m. ET) □Registration Link: https://ems9.intelior.com/Ido=register&t=1&p=902466
93	Notice	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	86 FR 50138	Published 9/7/2021	As required by the Federal Advisory Committee Act, the U.S. Department of Health and Human Services (HHS) is hereby giving notice that the COVID-19 Health Equity Task Force (Task Force) will hold a virtual meeting on September 30, 2021. The purpose of this meeting is to present and vote on the final recommendations for mitigating inequities caused or exacerbated by the COVID-19 pandemic and for preventing such inequities in the future.	The Task Force meeting will be held on Thursday, September 30, 2021, from 2 p.m. to approximately 6 p.m. ET (date and time are tentative and subject to change). The confirmed time and agenda will be posted on the COVID-19 Health Equity Task Force web page: www.minorityhealth.hhs.gov/HealthEquity taskforce/ when this information becomes available.	This meeting is open to the public and will be live-streamed at www./hhs.gov/live/. Information about the meeting will be posted on the HHS Office of Minority Health website: www.minorityhealth.hhs.gov/HealthEquity taskforce/ prior to the meeting. https://www.federalregister.gov/documents/2021/09/07/2021-19222/meeting-of-the-covid-19-health-equity-task-force
94	Rule	**Medicare and Medicaid Programs; Adjustment of Civil Monetary Penalties for Inflation; Continuation of Effectiveness and Extension of Timeline for Publication of the Final Rule**	86 FR 50263	Published 9/8/2021	Continuation of effectiveness and extension of timeline for publication of the final rule.	This document announces the continuation of, effectiveness of, and the extension of the timeline for publication of a final rule. We are issuing this document in accordance with the Social Security Act (the Act), which allows an interim final rule to remain in effect after the expiration of the timeline specified in the Act if the Secretary publishes a notice of continuation explaining why we did not comply with the regular publication timeline. This regulation changes the timeline for publication of this final rule to be extended to September 6, 2022.	Federal Register :: Medicare and Medicaid Programs; Adjustment of Civil Monetary Penalties for Inflation; Continuation of Effectiveness and Extension of Timeline for Publication of the Final Rule
95	Tribal Consultation	The White House Council on Environmental Quality	N/A	Published 9/10/2021	The White House Council on Environmental Quality is hosting a Tribal consultation on CEQ's NEPA Regulations on September 30, 2021 at 2:00 pm EST.	Hear from tribal leaders on how NEPA affects your Tribe, what is working well currently with the NEPA regulations, and what can be improved. We also welcome other members of your Tribe to participate in the session, as well.	Please register for this event through the link below. When: Sep 30, 2021 02:00 PM Eastern Time (US and Canada) Topic: Tribal Consultation on CEQ NEPA Regulations Revision Registration Link: https://pitc.zoomgov.com/webinar/register/WN_1-8JxgCDQ3-767MzePfbQ
96	DTLL	Department of Health and Human Services	N/A	Published 9/10/2021	Department of Health and Human Services (HHS) in collaboration with the Health Resources and Services Administration (HRSA) released a Dear Tribal Leader Letter (DTLL) on HRSA's Annual Tribal Consultation.	Consultation will be held virtually during the National Indian Health Board's (NIHB) 2021 National Tribal Health Conference (NTHC) on October 8, 2021, from 11:00AM to 1:00PM ET.	
97	HHS Press	Department of Health and Human Services	N/A	Published 9/10/2021	Department of Health and Human Services (HHS) released an announcement on applications to apply for American Rescue Plan (ARP) rural funding and Provider Relief Fund (PRF) funding for Phase 4. Applications will open on September 29, 2021. Overall, $8.5 billion in ARP funding and $17 billion in PRF funding will be distributed to rural health providers who serve Medicaid, the Children's Health Care Insurance Program (CHIP) and Medicare patients	HHS has also included in this announcement a final 60-day grace period to help providers come into compliance with PRF reporting requirements if they are unable to meet the September 30, 2021, deadline of the first PRF reporting period.	HHS Announces the Availability of $25.5 Billion in COVID-19 Provider Funding	HHS.gov
98	HHS Press	Department of Health and Human Services	N/A	Published 9/10/2021	The U.S. Department of Health and Human Services (HHS), through the Centers for Medicare & Medicaid Services (CMS), is awarding $20 million in American Rescue Plan (ARP) grant funding to State-based Marketplaces (SBMs) to increase consumer access to affordable, comprehensive health insurance coverage.	The grants will be used by 21 SBMs to modernize IT systems and/or conduct targeted consumer outreach activities to help make health care coverage enrollment smoother. As a result, consumers will have access to increased financial assistance and eligibility determinations will be made faster. The 21 SBMs that received the ARP grant funding include the District of Columbia and the following states: Arkansas, California, Colorado, Connecticut, Idaho, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Nevada, New Jersey, New Mexico, New York, Oregon, Pennsylvania, Rhode Island, Vermont, Virginia, and Washington. States with a Federally-Facilitated Marketplace (FFM) were not eligible for this funding opportunity. Grant award amounts range from $500,000 to $1,107,392, and are based on the SBM model and number of successful applicants. The period of performance is from September 10, 2021 through September 9, 2022.	For more information on the 21 SBMs that received the funding and use of the funds, please visit: https://www.cms.gov/ccilio/resources/funding-opportunities#Health Insurance Marketplaces.
99	DTLL	White House Tribal Nations Summit	N/A	Published 9/21/2021	The 2021 White House Tribal Nations Summit will take place on November 15th and 16th 2021. This year the Summit will take place virtually.	President Biden and the Administration look forward to hosting a robust and meaningful dialogue with Tribal leaders on key issues, policy initiatives, and goals for Indian Country.	Please submit your registration by Friday, November 5, 2021. If you have already submitted your registration for the Summit, you do not need to re-register. Registration can be accessed here: https://4eeap.force.com/Surveys/survey/runtimeApp.appl?invitationId=0KI100000007DbP&surveyName=X2021_tribal_nations_summit&JUID=a04c1a73-f2ed-4336-8913-a130651387d3 If you have any questions, please reach out to TNS@who.eap.gov . https://mailchi.mp/who.eap.gov/announcing-official-dates-for-the-white-house-tribal-nations-summit?e=6e40e5f88c
100	Notice	Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS)	86 FR 53070	Published 9/24/2021	In accordance with the Federal Advisory Committee Act, this notice announces that the Secretary's Centers for Disease Control and Prevention (CDC)/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHAC) has scheduled a public meeting.	CHAC provides advice and recommendations to the Secretary of HHS (Secretary) on policy, program development, and other matters of significance concerning the activities under Section 222 of the Public Health Service (PHS) Act, 42 U.S.C. 217a. The purpose of CHAC is to advise the Secretary of HHS, the Director of CDC, and the HRSA Administrator regarding objectives, strategies, policies, and priorities for HIV, viral hepatitis, and other STDs; prevention and treatment efforts, including surveillance of HIV infection, viral hepatitis, and other STDs, and related behaviors; epidemiologic, behavioral, health services, and laboratory research on HIV, viral hepatitis, and other STDs; identification of policy issues related to HIV/viral hepatitis/STD professional education, patient health care delivery, and prevention services; agency policies about prevention of HIV, viral hepatitis and other STDs; treatment, health care delivery, and research and training; strategic issues influencing the ability of CDC and HRSA to fulfill their missions of providing prevention and treatment services; programmatic efforts to prevent and treat HIV, viral hepatitis, and other STDs; and support to the CDC and HRSA in their development of responses to emerging health needs related to HIV, viral hepatitis, and other STDs. During the November 3-4, 2021 meeting, CHAC will discuss issues related to engagement in care among people living with HIV using telemedicine; improving STI screenings in people with HIV through the Ryan White HIV/AIDS program; providing housing services at the intersection of substance use disorder, mental health Start Printed Page 53071 and HIV; and patient-centered, integrated care with emphasis on quality of life and emotional well-being, along with issues related to pending committee reports.	Information about CHAC and the agenda for this meeting can be found on the CHAC website at https://www.cdc.gov/maso/facm/facmCHACHSPT.html and the meeting website at https://www.chacfall2021.org/ . This meeting will be held virtually by webinar. Advance registration is required to attend. Please visit the meeting website above to register. The registration deadline is Friday, October 29, 2021, at 12:00 p.m. Prior to the meeting, each individual registrant will receive a registration confirmation along with an access link to the virtual meeting location. https://www.federalregister.gov/documents/2021/09/24/2021-20646/meeting-of-the-cdc/hrsa-advisory-committee-on-hiv-viral-hepatitis-and-std-prevention-and-treatment
101	Final Rule	Centers for Medicare & Medicaid Services (CMS), HHS; Monetary Offices, Department of the Treasury	86 FR 53412	Published 9/27/2021	This final rule sets forth revised 2022 user fee rates for issuers offering qualified health plans (QHPs) through federally-facilitated Exchanges and State-based Exchanges on the Federal platform	repeals separate billing requirements related to the collection of separate payments for the portion of QHP premiums attributable to coverage for certain abortion services; expands the annual open enrollment period and Navigator duties; implements a new monthly special enrollment period for qualified individuals or enrollees, or the dependents of a qualified individual or enrollee, who are eligible for advance payments of the premium tax credit (APTC) and whose household income does not exceed 150% of the Federal poverty level, available during periods of time during which APTC benefits are available such that certain applicable taxpayers' applicable percentage is set at zero, such as during tax years 2021 and 2022 under the section 9661 of the American Rescue Plan Act of 2021; repeals the recent establishment of a Direct Enrollment option for Exchanges; and modifies regulations and policies related to section 1332 waivers.	Final rule is effective on November 26, 2021.
102	Notice	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	86 FR 54223	Published 9/30/2021	As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will be holding the 72nd full Council meeting utilizing virtual technology on Monday, November, 15 and Wednesday, November, 17, 2021 from 1:00-5:00 p.m. (ET) on both days.	PACHA was established by Executive Order 12963, dated June 14, 1995, as amended by Executive Order 13009, dated June 14, 1996 and is currently operating under the authority given in Executive Order 13889, dated September 27, 2019. The Council was established to provide advice, information, and recommendations to the Secretary regarding programs and policies intended to promote effective prevention and care of HIV infection and AIDS. The functions of the Council are solely advisory in nature. The Council consists of not more than 25 members. Council members are selected from prominent community leaders with particular expertise in, or knowledge of, matters concerning HIV and AIDS, public health, global health, philanthropy, marketing or business, as well as other national leaders held in high esteem from other sectors of society. Council members are appointed by the Secretary or designee, in consultation with the White House.	Instructions on attending this meeting virtually will be posted one week prior to the meeting at: https://www.hiv.gov/federal-response/pacha/about-pacha. https://www.federalregister.gov/documents/2021/09/30/2021-21275/meeting-of-the-presidential-advisory-council-on-hiv-aids

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
103	Final Rule	Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS)	86 FR 54390	Published 10/1/2021	HHS is rescinding the final rule entitled "Implementation of Executive Order on Access to Affordable Life-Saving Medications," published in the December 23, 2020 FR (2020 Rule). HHS is rescinding the 2020 Rule due to the excessive administrative costs and burdens that implementation would have imposed on health centers.	On June 16, 2021, after careful reassessment of the comments submitted in response to the proposed rule and consideration of the comments received on the proposed rule to delay the effective date published, HHS published the 2021 NPRM to rescind the 2020 Rule. The 2021 NPRM cited significant concerns regarding health centers needing to divert vital resources to implement the 2020 Rule. HHS is rescinding the 2020 Rule and therefore deleting the associated revision to the regulations codified at 42 CFR 51c.303(w). 42 CFR 51c.303(w) stated: "To the extent that an applicant for funding under Section 330(e) of the Public Health Service Act (42 U.S.C. 254b(e)) has indicated that it plans to distribute, either directly, or through a written agreement, drugs purchased through the 340B Drug Pricing Program (42 U.S.C. 256b), and to the extent that such applicant plans to make insulin and/or injectable epinephrine available to its patients, the applicant shall provide an assurance that it has established practices to provide insulin and injectable epinephrine at or below the discounted price paid by the health center grantee or subgrantee under the 340B Drug Pricing Program to health center patients with low incomes, as determined by the Secretary, who have a high cost sharing requirement for either insulin or injectable epinephrine; have a high unmet deductible; or have no health insurance." As HHS has issued this final rule prior to the issuance of such awards, this program term has not been placed on Health Center Program awards.	This Final Rule is effective November 1, 2021 https://www.federalregister.gov/documents/2021/10/01/2021-21457/implementation-of-executive-order-on-access-to-affordable-life-saving-medications-rescission-of
104	Notice	Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).	86 FR 54458	Published 10/1/2021	The Ryan White HIV/AIDS Program (RWHAP) statute of the Public Health Services Act requires that RWHAP Part A, B, and C recipients expend not less than 75 percent of Parts A, B, and C grant funds on core medical services for individuals with HIV/AIDS identified and eligible under the statute, after reserving statutory permissible amounts for administrative and clinical quality management (CQM) costs. The statute also grants the Secretary of HHS authority to waive this requirement if certain requirements are met. HRSA has simplified the process for RWHAP Part A, B, and C recipients to request a waiver of the core medical services expenditure amount requirement by replacing HRSA Policy Number 13-07, "Uniform Standard for Waiver of Core Medical Services Requirement for Grantees Under Parts, A, B, and C" with Policy Notice 21-01, "Waiver of the Ryan White HIV/AIDS Program Core Medical Services Expenditure Requirement."	The RWHAP statute also grants the Secretary of HHS authority to waive this requirement for RWHAP Parts A, B, or C recipients if a number of requirements are met and a waiver request is submitted to HRSA for approval. RWHAP Part A, B, and C core medical services waiver requests—if approved—are effective for a 1-year budget period, and apply to funds awarded under the Minority AIDS Initiative. Currently, for a core medical services waiver request to be approved, (1) core medical services must be available and accessible to all individuals identified and eligible for the RWHAP in the recipient's service area within 30 days, without regard to payer source; (2) there cannot be any AIDS Drug Assistance Program (ADAP) waiting lists in the recipient's service area; and (3) a public process to obtain input on the waiver request from impacted communities, including clients and RWHAP-funded core medical services providers, on the availability of core medical services and the decision to request the waiver must have occurred.	The final policy is effective on October 1, 2021. https://www.federalregister.gov/documents/2021/10/01/2021-21241/final-policy-updates-to-uniform-standard-for-waiver-of-the-ryan-white-hiv-aids-program-core-medical#utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
105	Strategic Plan Draft	Environmental Protection Agency (EPA), FY 2022-2026 EPA Strategic Plan Draft	N/A	Published 10/01/2021	EPA's FY 2022-2026 Strategic Plan communicates the Agency's priorities and provides the roadmap for achieving its mission to protect human health and the environment. Building on work already begun under President Biden's Executive Orders (E.O.s) 13985: Advancing Racial Equity and Support for Underserved Communities Through the Federal Government and 14008: Tackling the Climate Crisis at Home and Abroad, and in alignment with the Administration's whole-of-government approach, we are charting a course in this Strategic Plan where tackling climate change and advancing environmental justice and civil rights are integral to all we do in carrying out EPA's mission.	Strategy 4: Strengthen Tribal, State, and Local Partnerships and Enhance Engagement Strengthening the Nation-to-Nation Relationship with Sovereign Tribal Partners: In accordance with Executive Order 13175: Memorandum on Tribal Consultation and Strengthening Nation-to-Nation Relationships, and in light of the disproportionate impact of environmental pollution on Native Americans, EPA is committed to strengthening its nation-to-nation relationship with American Indian and Alaska Native Tribal Nations. In keeping with the Federal Trust Responsibility, the Agency will endeavor to protect the environmental interests of Indian Tribes when carrying out its responsibilities that may affect Indian country	fy-2022-2026-epa-draft-strategic-plan.pdf
106	IHS DULL	IHS, Department of Health and Human Services	N/A	Published 10/05/2021	IHS providing an updated on their position related to the eligibility of the Seminole Freedmen of the Seminole Nation to receive health services from the IHS or by a Tribal health program (THP) or an Urban Indian Organization (UIO)	The IHS has reviewed the eligibility status of the Seminole Freedmen in accordance with IHS eligibility requirements and has determined that the Seminole Freedmen are eligible for health care services.	any questions, please contact CAPT John Roel, Director, Office of Resource Access and Partnerships, IHS, by telephone at (301) 443-0969, or by e-mail at john.roel@ihs.gov.
107	Final Rule	Office of Head Start (OHS), Administration for Children and Families (ACF), Department of Health and Human Services (HHS).	86 FR 55509	Published 10/6/2021	This rule adopts as final the provision to the Head Start Program Performance Standards (HSPPS) to establish parameters by which ACF may make designation renewal determinations during a federally declared major disaster, emergency, or public health emergency (PHE) and in the absence of all normally required data.	The Improving Head Start for School Readiness Act of 2007 (the 2007 Reauthorization) of the Head Start Act (the Act) required ACF to establish a system for determining whether Head Start (including Early Head Start) grantees are delivering high-quality and comprehensive services to the children and families they serve. In 2011, ACF issued a regulation (76 FR 70009) to establish the Designation Renewal System (DRS) to meet this requirement. Under the DRS, all Head Start grants were transitioned from indefinite to 5-year grant periods, and any grant that meets one or more of seven specified conditions during the 5-year project period is subject to an open competition for continued funding. Any Head Start grant that does not meet one of the seven DRS conditions becomes eligible for a new noncompetitive 5-year grant. The Act lays out the types of data that must be considered as part of these DRS determinations. Three of the seven conditions of the DRS were revised through a final rule published on August 28, 2020 (85 FR 53189). Due to the ongoing 2019 Novel Coronavirus (COVID-19) pandemic, the ability of ACF to collect all data on grants required for making determinations under the DRS has been severely impaired. This issue is described further in the following paragraph. Furthermore, there may be major disasters, emergencies, or PHEs in the future that similarly impact ACF's ability to collect all information required for making DRS determinations.+G105	ACF conducts an average of five tribal consultations each year for those tribes operating Head Start and Early Head Start. The consultations are held in four geographic areas across the country: Southwest, Northwest, Midwest (Northern and Southern), and Eastern. The consultations are often held in conjunction with other tribal meetings or conferences, to ensure the opportunity for most of the 150 tribes that operate Head Start and Early Head Start programs to be able to attend and voice their concerns about issues regarding service delivery. ACF completes a report after each consultation and then compiles a final report that summarizes the consultations and submits the report to the Secretary at the end of the year. Effective October 6, 2021, the interim final rule published December 7, 2020, at 85 FR 78792, is adopted as final. https://www.federalregister.gov/documents/2021/10/06/2021-19786/flexibility-for-head-start-designation-renewals-in-certain-emergencies#utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
108	Notice of Meeting	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).	86 FR 55615	Published 10/6/2021	In accordance with the Federal Advisory Committee Act, the CDC announces the following meeting for the Healthcare Infection Control Practices Advisory Committee (HICPAC). Purpose: The Committee is charged with providing advice and guidance to the Director, Division of Healthcare Quality Promotion (DHQP), the Director, National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), the Director, CDC, the Secretary, Health and Human Services regarding (1) the practice of healthcare infection prevention and control; (2) strategies for surveillance, prevention, and control of infections, antimicrobial resistance, and related events in settings where healthcare is provided; and (3) periodic updating of CDC guidelines and other policy statements regarding prevention of healthcare-associated infections and healthcare-related conditions. Matters To Be Considered: The agenda will include the following updates: The Division Healthcare Quality Promotion; the Healthcare Personnel Guideline Workgroup	Procedures for Comment: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. FDA is establishing a docket for public comment on this meeting (docket number: FDA-2021-N-1088). The docket will close on October 25, 2021. Late, untimely filed comments will not be considered. Electronic Comments: must be submitted on or before October 25, 2021. Comments received by mail/hand delivery/courier will be considered timely if they are postmarked or the delivery service acceptance receipt is on or before that date. Comments received on or before October 21, 2021, will be provided to the committee. Comments received after October 21, 2021, and by October 25, 2021, will be taken into consideration. On October 26, 2021, oral presentations from the public will be scheduled between approximately 12:45 p.m. and 1:45 p.m. Eastern Time. Those individuals interested in making formal oral presentations should notify CBERVRBPAC@fda.hhs.gov and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation on or before October 19, 2021. Time allotted for each presentation may be limited. If the number of registrants requesting to speak is greater than can be reasonably accommodated during the scheduled open public hearing session, FDA+G105	This virtual meeting is open to the public, limited only by audio and web conference lines (300 audio and web conference lines are available). Registration is required. To register for this web conference, please go to: www.cdc.gov/hicpac. All registered participants will receive the meeting link and instructions shortly before the meeting. The meeting will be held on October 28, 2021, from 12:00 p.m. to 1:30 p.m., EDT. Please click the link below to join the webinar: https://cdc.zoomgov.com/j/1609325980?pwd=TmFGbWNLUHKOEVoakpucXpkdDNSUT09 . Meeting ID: 160 932 5980. Passcode: b7Gr.rXEG. https://www.federalregister.gov/documents/2021/10/06/2021-21806/healthcare-infection-control-practices-advisory-committee-hicpac?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
109	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).	86 FR55615	Published 10/6/2021	The CDC announced the following meeting for the Healthcare Infection Control Practices Advisory Committee (HICPAC).	This virtual meeting is open to the public, limited only by audio and web conference lines (300 audio and web conference lines are available).	The meeting will be held on October 28, 2021 from 12:00 p.m. to 1:30 p.m. EST. Registration can be accessed here: www.cdc.gov/hicpac. All registered participants will receive the meeting link and instructions shortly before the meeting. https://www.federalregister.gov/documents/2021/10/06/2021-21806/healthcare-infection-control-practices-advisory-committee-hicpac?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
110	Rule	Office of Personnel Management, Internal Revenue Service, Department of the Treasury; Employee Benefits Security Administration, Department of Labor; Centers for Medicare & Medicaid Services, Department of Health and Human Services	86 FR 55980	Published 10/7/2021	sets forth interim final rules implementing certain provisions of the No Surprises Act, which was enacted as part of the Consolidated Appropriations Act, 2021.	The Department of Health and Human Services (HHS), the Department of Labor (DOL), and the Department of the Treasury (collectively, the Departments) are issuing these interim final rules with largely parallel provisions that apply to group health plans and health insurance issuers offering group or individual health insurance coverage and certified IDR entities, providers, facilities, and providers of air ambulance services. In addition to the interim final rules issued jointly by the Departments, this document also includes interim final rules issued by the Office of Personnel Management (OPM) to clarify how certain No Surprises Act provisions apply to health benefits plans offered by carriers under the Federal Employees Health Benefits (FEHB) Act. In addition to the interim final rules issued jointly by the Departments and OPM, this document includes interim final rules issued by HHS that address good faith estimates of health care items and services for uninsured or self-pay individuals and the associated patient-provider dispute resolution process. The HHS-only interim final rules apply to selected dispute resolution (SDR) entities, providers, facilities, and providers of air ambulance services.	These regulations are effective on October 7, 2021 https://www.federalregister.gov/documents/2021/10/07/2021-21441/requirements-related-to-surprise-billing-part-ii
111	Final Rule	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	86 FR 56144	Published 10/7/2021	The Office of Population Affairs (OPA) in the Office of the Assistant Secretary for Health issues this final rule to revise the regulations that govern the Title X family planning program by readopting the 2000 regulations, with several revisions to ensure access to equitable, affordable, client-centered, quality family planning services for clients, especially low-income clients.	The effect of this 2021 final rule is to revoke the requirements of the 2019 regulations, including removing restrictions on nondirective options counseling and referrals for abortion services and eliminating requirements for strict physical and financial separation between abortion-related activities and Title X project activities, thereby reversing the several revisions to the 2000 regulations.	This rule is effective November 8, 2021 https://www.federalregister.gov/documents/2021/10/07/2021-21542/ensuring-access-to-equitable-affordable-client-centered-quality-family-planning-services
112	Notice of Meeting	U.S. Food and Drug Administration (FDA)	FDA-2021-N-1088	Published 10/12/2021	Food and Drug Administration has scheduled a public meeting regarding requests to amend Pfizer-BioNTech's Emergency Use Authorization (EUA) for administration of their COVID-19 mRNA vaccine to children 5 - 11 years old.	Procedures for Comment: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. FDA is establishing a docket for public comment on this meeting (docket number: FDA-2021-N-1088). The docket will close on October 25, 2021. Late, untimely filed comments will not be considered. Electronic Comments: must be submitted on or before October 25, 2021. Comments received by mail/hand delivery/courier will be considered timely if they are postmarked or the delivery service acceptance receipt is on or before that date. Comments received on or before October 21, 2021, will be provided to the committee. Comments received after October 21, 2021, and by October 25, 2021, will be taken into consideration. On October 26, 2021, oral presentations from the public will be scheduled between approximately 12:45 p.m. and 1:45 p.m. Eastern Time. Those individuals interested in making formal oral presentations should notify CBERVRBPAC@fda.hhs.gov and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation on or before October 19, 2021. Time allotted for each presentation may be limited. If the number of registrants requesting to speak is greater than can be reasonably accommodated during the scheduled open public hearing session, FDA may conduct a lottery to determine the speakers for the scheduled open public hearing session. The contact person will notify interested persons regarding their request to speak by October 20, 2021.	All meeting participants will be joining this advisory committee meeting via an online teleconferencing platform. The online web conference meeting will be available at the following: YouTube: https://youtu.be/iaaLD_xKrmA Yorkcast: https://fda.yorkcast.com/webcast/Play/6ff3dee6ad834df8954fa9eb08c2e0911d

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
113	Notice of Availability	Food and Drug Administration, Department of Health and Human Services	86 FR 57156	Published 10/13/2021	The FDA is announcing the availability of a final guidance for industry entitled "Voluntary Sodium Reduction Goals: Target Mean and Upper Bound Concentrations for Sodium in Commercially Processed, Packaged, and Prepared Foods."	The guidance describes the FDA's views on voluntary short-term (2.5-year) goals for sodium reduction in a variety of identified categories of foods that are commercially processed, packaged, or prepared. These goals are intended to address the excessive intake of sodium in the current population and promote improvements in public health.	You may submit either electronic or written comments on FDA guidance at any time. All submissions received must include the Docket No. FDA-2014-D-0055 for "Voluntary Sodium Reduction Goals: Target Mean and Upper Bound Concentrations for Sodium in Commercially Processed, Packaged, and Prepared Foods." Received comments will be placed in the docket and, except for those submitted as "Confidential Submissions," publicly viewable at https://www.regulations.gov or at the Dockets Management Staff between 9 a.m. and 4 p.m., Monday through Friday, 240-402-7500. https://www.federalregister.gov/documents/2021/10/14/2021-22453/voluntary-sodium-reduction-goals-target-mean-and-upper-bound-concentrations-for-sodium-in
114	Proclamation	Executive Office of the President	86 FR 57307	Published 10/14/2021	President of the United States of America, proclaimed October 11, 2021, as Indigenous Peoples' Day. The Executive Office called upon the people of the United States to observe this day with appropriate ceremonies and activities. Executive Office also directed that the flag of the United States be displayed on all public buildings on the appointed day in honor of our diverse history and the Indigenous peoples who contribute to shaping this Nation.	The Federal Government has a solemn obligation to lift up and invest in the future of Indigenous people and empower Tribal Nations to govern their own communities and make their own decisions.	https://www.federalregister.gov/documents/2021/10/14/2021-22583/indigenous-peoples-day-2021
115	Executive Order	Executive Office of the President	86 FR 57313	Published 10/14/2021	White House Initiative of Advancing Educational Equity, Excellence, and Economic Opportunity for Native Americans and Strengthening Tribal Colleges and Universities The Federal Government is committed to protecting the rights and ensuring the well-being of Tribal Nations while respecting Tribal sovereignty and inherent rights of self-determination.	Executive departments and agencies (agencies) must help advance educational equity, excellence, and economic opportunity for Native American students, whether they attend public schools in urban, suburban, or rural communities; are homeschooled; attend primary and secondary schools operated or funded by the Bureau of Indian Education (BIE) of the Department of the Interior; or attend postsecondary educational institutions, including Tribal Colleges and Universities (TCUs).	https://www.federalregister.gov/documents/2021/10/14/2021-22588/white-house-initiative-on-advancing-educational-equity-excellence-and-economic-opportunity-for
116	Notice	Administration for Children and Families (ACF); HHS; Office of Child Support Enforcement	86 FR 57433	Published 10/15/2021	The Office of Child Support Enforcement (OCSE), Administration for Children and Families (ACF), is requesting approval for a 3-year extension of the Child Support Annual Data Report and Instructions (OCSE-157) with revisions. The current Office of Management and Budget (OMB) approval expires on March 31, 2022.	The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing infocollection@acf.hhs.gov. All requests should be identified by the title of the information collection.
117	DTLL	HHS, Department of Health and Human Services	N/A	Published 10/21/2021	Veterans Health Administration (VHA) and the U.S. Department of Health and Human Services Indian Health Service (IHS) have signed a new memorandum of understanding (MOU) aimed at improving the health status of American Indian and Alaska Native (AI/AN) Veterans.	The MOU establishes a framework for coordination and partnering between the VHA and the IHS to leverage and share resources and investments in support of each organization's mutual goals. Now that they have executed a new MOU, they will begin the process of creating a new operational plan that will identify operational goals and performance metrics. Annual Tribal Consultation and Urban Center on the newly developed operational plan will be essential to ensuring ongoing involvement by Tribal Leaders and Urban Indian Organization Leaders with the MOU.	Dear Tribal Leader and Urban Indian Organization Leader: MOU with VHA (ihs.gov)
118	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	86 FR 58663	Published 10/22/2021	In accordance with the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC) announces the following meeting of the Advisory Committee on Immunization Practices (ACIP).	The committee is charged with advising the Director, CDC, on the use of immunizing agents. In addition, under 42 U.S.C. 139b, the committee is mandated to establish and periodically review and, as appropriate, revise the list of vaccines for administration to vaccine-eligible children through the Vaccines for Children program, along with schedules regarding dosing interval, dosage, and contraindications to administration of vaccines. Further, under provisions of the Affordable Care Act, section 2713 of the Public Health Service Act, immunization recommendations of the ACIP that have been approved by the CDC Director and appear on CDC immunization schedules must be covered by applicable health plans. The agenda will include discussions on adult immunization schedule, child/adolescent immunization schedule, Ebola vaccine, hepatitis vaccines, Orthopoxviruses vaccine and COVID vaccines. Recommendation votes on adult immunization schedule, child/adolescent immunization schedule, hepatitis vaccine, Orthopoxviruses vaccine, Ebola vaccine and COVID vaccines are scheduled. No Vaccines for Children votes are scheduled. Agenda items are subject to change as priorities dictate. For more information on the meeting agenda visit https://www.cdc.gov/vaccines/acip/meetings/meetings-info.html.	This meeting is open to the public, time will be available for public comment. The meeting will be webcast live via the World Wide Web; for more information on ACIP please visit the ACIP website: http://www.cdc.gov/vaccines/acip/index.html. The meeting will be held on November 2-3, 2021, from 10:00 a.m. to 5:00 p.m. EDT (times subject to change). The public may submit written comments from October 22, 2021 through November 3, 2021. You may submit comments identified by Docket No. CDC-2021-0112 by any of the following methods: • Federal eRulemaking Portal: https://www.regulations.gov. Follow the instructions for submitting comments. https://www.federalregister.gov/documents/2021/10/22/2021-23222/advisory-committee-on-immunization-practices-acip?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
119	White House Briefing/ Event Invite	White House Office of Intergovernmental Affairs	N/A	Published 10/22/2021	At the White House Tribal Nations Summit on November 15 and 16, the White House will provide an update on what happened at COP26 and how Tribal Nations and Native Americans can play a role in combatting climate change	You are invited to join a White House Tribal briefing with the Office of the Special Presidential Envoy for Climate about the upcoming UN climate change conference known as the Conference of Parties. This year's Conference of Parties (COP 26) will take place in Glasgow, Scotland between Oct 31-Nov 12, 2021. President Biden plans to attend COP26 and will be bringing a number of Cabinet members and senior administration officials.	To sign up for White House Tribal Affairs: https://mailchi.mp/who.eop.gov/tribal-affairs Additional informational links: •Learn more about the COP26: https://ukcop26.org/uk-presidency/what-is-a-cop/ • Learn more about President Biden's Whole-of-Government effort to tackle the climate crises: https://www.whitehouse.gov/climate/
120	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	86 FR 58912	Published 10/25/2021	The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies to take this opportunity to comment on proposed information collections, as required by the Paperwork Reduction Act of 1995. This notice invites comment on the Research Data Center (RDC) Proposal for Access to Confidential Data for the National Center for Health Statistics (NCHS). The proposed collection will be used to assess researcher's requests for access to confidential NCHS data for their research projects.	You may submit comments, identified by Docket No. CDC-2021-0113 by any of the following methods: - Federal eRulemaking Portal: Relations.gov - Mail: Jeffery M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 16000 Clifton Road NW, MS H21-8, Atlanta, Georgia 30329 - Instructions: All submissions received must include the agency name and Docket Number. All relevant comments received will be posted without change to Regulations.gov , including any personal information provided. For access to the docket to read background documents or comments received, go to Regulations.gov .	Written comments must be received on or before December 27, 2021 https://www.federalregister.gov/documents/2021/10/25/2021-23186/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
121	Notice	Office of Community Services, Administration for Children and Families, HHS	86 FR 59166	Published 10/26/2021	The Departments are requesting expedited review of an information collection request from the Office of Management and Budget (OMB) and inviting public comment on the proposed collection. The proposed forms are necessary to provide data to the Administration and Congress in its oversight of recipients' performance in administering the Low Income Household Water Assistance Program (LIHWAP) program. The information collection is essential to the mission of the agency for this emergency assistance effort and the use of normal clearance procedures is reasonably likely to disrupt and prevent the collection of information	The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.	Consideration will be given to comments and suggestions submitted within 60 days of this publication. Comments will be considered and any necessary updates to materials made prior to, and responses provided in, the submission to OMB that will follow this public comment period. https://www.federalregister.gov/documents/2021/10/26/2021-23271/expedited-omb-review-and-public-comment-office-of-community-services-data-collection-for-the-low?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
122	Notice and Request for Information (RFI)	Office of Minority Health, Office of the Secretary, Department of Health and Human Services	86 FR 59168	Published 10/26/2021	The Center is tasked with supporting education, service and policy development, and research related to advancing sustainable solutions, to address health disparities and advance health equity among NHPI and American Indian/Alaska Native (AI/AN) populations. This is NOT a solicitation for proposals or proposal abstracts. In efforts to advance health equity, the Departments seek input from Native Hawaiian and Pacific Islander communities, NHPI-serving organizations, and other interested parties regarding their efforts of the new Center for Indigenous Innovation and Health Equity Center.	This RFI and notice of a listening session is for planning purposes only. It is not a notice for a proposal and does not commit the federal government to issue a solicitation, make an award, or pay any costs associated with responding to this announcement.	The virtual listening session will be held on Tuesday, November 2, 2021, from 3:30 p.m.-4:30 p.m. EDT. To register for the listening session, visithttps://www.zoomgov.com/meeting/register/vJsc-6qpj4GrQwQa2vdmoUtM2mRWKZNDs. Written comments also may be submitted All comments should be emailed to CAPT Samuel Wu at Samuel.Wu@ihs.gov . Please use the subject line "OMH RFI: CTIHE NHPI". https://www.federalregister.gov/documents/2021/10/26/2021-23200/request-for-information-and-notice-of-listening-session-on-efforts-to-advance-health-equity-among?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
123	Notice	Centers for Medicare & Medicaid Services (CMS), Health and Human Services (HHS)	86 FR 59165	Published 10/26/2021	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice.	Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments on the collection(s) of information must be received by the OMB desk officer by November 26, 2021. To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following: 1. Access CMS' website address at website address at: https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html . FOR FURTHER INFORMATION CONTACT: William Parham at (410) 786-4669.
124	Government Accountability Office (GAO)	GAO Office of Public Affairs, Missing or Murdered Indigenous Women	GAO-22-104045	Published 10/28/2021	Research shows that violence against American Indian and Alaska Native women in the U.S. is a crisis. Cases of missing or murdered Indigenous women persist nationwide, but without more comprehensive case data in federal databases, the full extent of the problem is unknown. Two laws, Savanna's Act and the Not Invisible Act—enacted in October 2020—present opportunities to increase and improve data on the number of missing or murdered Indians, including American Indian and Alaska Native women. However, the Department of Justice and the Department of the Interior have not implemented certain requirements to increase intergovernmental coordination and data collection, which remain unfulfilled past their statutory deadlines.	Savanna's Act: Requires the Attorney General, in coordination with the Secretary of the Interior, to confer with tribal organizations and **urban Indian organizations** on how to further improve American Indian and Alaska Native (AI/AN) data relevance and access to databases; Requires the Attorney General to conduct specific outreach to Indian tribes, tribal organizations, and urban Indian organizations regarding the ability to publicly enter information regarding missing persons through NamUs or other non-law-enforcement-sensitive portal. Recommendations for Executive Action: The Attorney General should develop a plan, including milestone dates, to conduct specific outreach to Indian tribes, tribal organizations, and **urban Indian organizations** regarding the ability to publicly enter information regarding missing persons through NamUs or other non-law enforcement sensitive portal Tribal organization officials noted that they would like victim services providers and law enforcement agencies, including at the federal levels, to provide education and other resources to help educate tribal members about their potential vulnerability to certain crimes. Specifically, tribal organization officials noted that AI/AN individuals who leave rural villages to move to urban, nontribal areas are at higher risk of becoming victims of violent crimes.	Please contact Gretta L. Goodwin at goodwingl@gao.gov ; or Anna Maria Ortiz at ortiza@gao.gov if you are interested in learning more about this report. https://www.gao.gov/assets/gao-22-104045.pdf
125	Notice	Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS)	86 FR 59741	Published 10/28/2021	This notice seeks comments on two updated draft recommendations for (1) providing contraception and (2) screening for human immunodeficiency virus (HIV) infection, as part of the HRSA-supported Women's Preventive Services Guidelines (Guidelines). These updated draft recommendations have been developed through a national cooperative agreement, the Women's Preventive Services Initiative (WPSI), by the American College of Obstetricians and Gynecologists (ACOG).	Under applicable law, non-grandfathered group health plans and health insurance issuers offering non-grandfathered group and individual health insurance coverage must include coverage, without cost sharing, for certain preventive services, including those provided for in the HRSA-supported Women's Preventive Services Guidelines (Guidelines). The Departments of Labor (DOL), Health and Human Services (HHS), and the Treasury have previously issued regulations, which describe how group health plans and health insurance issuers apply the coverage requirements, including the use of reasonable medical management.	Members of the public are invited to provide written comments no later than November 29, 2021. All comments received on or before this date will be reviewed and considered by the WPSI Multidisciplinary Steering Committee. https://www.federalregister.gov/documents/2021/10/28/2021-23498/updated-hrsa-supported-womens-preventive-services-guidelines-contraception-and-screening-for-hiv
126	Notice and Request for Comments	Indian Health Services (IHS), HHS; Loan Repayment Program (LRP)	86 FR 60055	Published 10/29/2021	the Indian Health Service (IHS) invites the general public to take this opportunity to comment on the information collection Office of Management and Budget (OMB) Control Number 0917-0014, titled, "IHS Loan Repayment Program (LRP)." The IHS is requesting OMB to approve an extension for this collection, which expires on November 30, 2021. Notice regarding the information collection was last published in the Federal Register (86 FR 43257) on August 6, 2021, and allowed 60 days for public comment. The purpose of this notice is to announce the IHS' intent to submit this collection to OMB and to allow 30 days for public comment to be submitted directly to OMB.	Consideration will be given to all comments received by November 29, 2021. Direct Your Comments To OMB: Send your comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS.	Comments close : 11/29/2021 https://www.federalregister.gov/documents/2021/10/29/2021-23629/request-for-public-comment-30-day-notice-for-extension-of-the-indian-health-service-loan-repayment

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
127	IHS DULL	IHS, Department of Health and Human Services	N/A	Published 10/29/2021	the Office of Urban Indian Health Programs (OUIHP) Strategic Plan provides recommendations to improve financial transparency and accountability regarding the Agency's budget for Urban Indian health.1 The FY 2020 Report meets this goal and identifies the funds distribution by the OUIHP and IHS Area Offices, including program administration, information technology, initiatives promoting quality improvement, and contract and grant awards	The FY 2020 Report also aligns with the IHS's goal to improve communication with Urban Indian Organizations (UIOs) and other stakeholders, including the public	If you have any questions, please contact Rose Weahkee, Ph.D., Director, OUIHP, IHS, by telephone at (301) 443-1555 or by e-mail at rose.weahkee@ihs.gov . https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DUIOLL_10292021.pdf
128	Notice	Centers for Medicare & Medicaid Services (CMS), HHS	86 FR 60244	Published 11/01/2021	CMS is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.	Comments on the collection(s) of information must be received by the OMB desk officer by December 1, 2021. https://www.federalregister.gov/documents/2021/11/01/2021-23779/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
129	Notice	Department of Health and Human Services (HHS), Administration for Children and Families (ACF)	N/A	Published 11/01/2021	the Department of Health and Human Services (HHS) along with the Administration for Children and Families (ACF) released $3.3 billion to help individuals and families with heating costs this winter. This initiative will also aid in covering unpaid utility bills. In addition, the Biden administration will work with state, localities, tribes, and energy providers to deploy American Rescue Plan funds and other resources to address these costs	The LIHEAP allocation is timed to make energy assistance funds available to states, the District of Columbia, territories, and tribes ahead of the winter heating season. LIHEAP grantees will be able to use the funding appropriated by Congress through the Extending Government Funding and Delivering Emergency Assistance Act (Public Law 117-43), along with funding made available through the American Rescue Plan Act, to assist more than 5 million households this winter.	Individuals interested in applying for energy assistance should contact their local, state, territory, or tribal LIHEAP agency or call the National Energy Assistance Referral (NEAR) hotline toll-free at: 1-866-674-6327. Individuals can also search for a local intake center near them by clicking here: https://hhs-acf.maps.arcgis.com/apps/opsdashboard/index.html#/683ba3b0c206449fb4a60fc04644a1ea
130	Notice with Comment Period	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	86 FR 60463	Published 11/2/2021	CDC, as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995.	This notice invites comment on a proposed information collection project titled National HIV Behavioral Surveillance among Transgender Women (NHBS-Trans). CDC is requesting approval to continue collecting standardized HIV-related behavioral data from transgender women at risk for HIV. The purpose of this data collection is to monitor behaviors of transgender women at high risk for infection that are related to Human Immunodeficiency Virus (HIV) transmission and prevention in the United States. This includes recruiting, interviewing and providing HIV testing and referral to services (as needed) following CDC protocol.	CDC must receive written comments on or before January 3, 2022. You may submit comments, identified by Docket No. CDC-2021-0111 by any of the following methods: • Federal eRulemaking Portal: Regulations.gov . Follow the instructions for submitting comments. • Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30329. Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to Regulations.gov . Please note: Submit all comments through the Federal eRulemaking portal (regulations.gov) or by U.S. mail to the address listed above. https://www.federalregister.gov/documents/2021/11/02/2021-23872/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
131	Notice	HHS, IHS (Behavioral Health Integration Initiative)	86 FR 60867	Published 11/4/2021	IHS is accepting applications for grants for the Behavioral Health Integration Initiative (BHGI) to plan, develop, implement, and evaluate behavioral health integration with primary care, community-based settings, and/or integrating primary care, nutrition, diabetes care, and chronic disease management with behavioral health.	The purpose of the BHGI program is to improve the physical and mental health status of people with behavioral health issues by developing an integrated and coordinated system of care. This effort supports the IHS mission to raise the physical, mental, social, and spiritual health of AI/AN individuals to the highest level. Increasing capacity among Tribal and Urban Indian Organization (UIO) health facilities to implement an integrative approach in the delivery of behavioral health services, including trauma-informed care, nutrition, exercise, social, spiritual, cultural, and primary care services, will improve morbidity and mortality outcomes among the AI/AN population. The total funding identified for fiscal year (FY) 2022 is approximately $6,000,000. Individual award amounts for the first budget year are anticipated to be between $300,000 and $400,000.	The application package and detailed instructions for this announcement are available at https://www.Grants.gov . Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204 https://www.federalregister.gov/documents/2021/11/04/2021-24040/behavioral-health-integration-initiative
132	Notice	HHS, IHS (Domestic Violence Prevention)	86 FR 60875	Published 11/4/2021	IHS is accepting applications for grants for the Domestic Violence Prevention (DVP) program, formerly known as the Domestic Violence Prevention Initiative (DVPI)	The purpose of this IHS grant is to support the development and/or expansion of a DVP program by incorporating prevention efforts addressing social, spiritual, physical, and emotional well-being of victims through the integration of culturally appropriate practices and trauma-informed services for tribes, tribal organizations, and Urban Indian organizations (UIO) serving the AI/AN population. This IHS program aims to promote prevention efforts that address domestic and sexual violence, including sexual exploitation/human trafficking, Missing and Murdered AI/AN people, and child maltreatment. Total funding identified for fiscal year (FY) 2022 is approximately $7,890,000. Individual award amounts for the first budget year are anticipated to be between $100,000 and $200,000. Approximately 39 awards will be issued under this program announcement. At least one award will be made in each IHS Area from which applications are received, and a set aside of **up to five awards will be made to eligible Urban Indian organizations.**	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. Applications must be submitted through Grants.gov by 11:59 p.m, Eastern Time on the Application Deadline Date. Any application received after the application deadline will not be accepted for review. https://www.federalregister.gov/documents/2021/11/04/2021-24023/domestic-violence-prevention-program?utm_source=federalregister.gov &utm_medium=email&utm_campaign=subscription+mailing+list
133	Notice	HHS, IHS (Suicide Prevention, Intervention, and Postvention)	86 FR 60859	Published 11/4/2021	IHS is accepting applications for a component of the Substance Abuse and Suicide Prevention (SASP) Program: Suicide Prevention, Intervention, and Postvention (SPIP).	The primary purpose of this program is to reduce the prevalence of suicide among American Indian and Alaska Native (AI/AN) populations. Approximately 35 awards will be issued under this program announcement. Up to five awards will be set aside for eligible Urban Indian organizations. The total funding identified for FY 2022 is approximately $14,000,000. Individual award amounts for the first budget year are anticipated to be from $300,000 to $400,000. Approximately 35 awards will be issued under this program announcement	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. The application package and detailed instructions for this announcement are available at https://www.Grants.gov . Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204. https://www.federalregister.gov/documents/2021/11/04/2021-24022/substance-abuse-and-suicide-prevention-program-suicide-prevention-intervention-and-postvention?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
134	Notice	HHS, IHS (Substance Abuse Prevention, Treatment, and Aftercare)	86 FR 60850	Published 11/4/2021	IHS is accepting applications for a component of the Substance Abuse and Suicide Prevention (SASP) Program: Substance Abuse Prevention, Treatment, and Aftercare (SAPTA).	The purpose of this program is to reduce the prevalence of substance abuse and decrease the overall use of addicting and illicit substances among American Indian and Alaska Native (AI/AN) populations. Total funding identified for FY 2022 is approximately $14,000,000. Individual award amounts for the first budget year are anticipated to be between $300,000 and $400,000. Approximately 35 awards will be issued under this program announcement. **Up to five awards will be set aside for eligible UIOs**	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. The application package and detailed instructions for this announcement are available at https://www.Grants.gov . Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204. https://www.federalregister.gov/documents/2021/11/04/2021-24020/substance-abuse-and-suicide-prevention-program-substance-abuse-prevention-treatment-and-aftercare?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
135	Notice	HHS, IHS (Zero Suicide Initiative)	86 FR 60883	Published 11/4/2021	IHS is accepting applications for a cooperative agreement for the Zero Suicide Initiative (ZSI).	The purpose of this program is to improve the system of care for those at risk for suicide by implementing a comprehensive, culturally informed, multi-setting approach to suicide prevention in Indian health systems. This award represents a continuation of the IHS effort to implement the Zero Suicide approach in Indian Country. The intent of this announcement is to initiate a new, or build upon the previous, Zero Suicide initiative efforts. Existing efforts have focused on foundational learning of the key concepts of the Zero Suicide framework, technical assistance, and consultation for several AI/AN Zero Suicide communities. The total funding identified for fiscal year (FY) 2022 is approximately $2,000,000. Individual award amounts for the first budget year are anticipated to be between $200,000 and $300,000. Approximately 8-10 awards will be issued under this program announcement, with a set aside of **up to two awards issued to eligible UIOs.**	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. The application package and detailed instructions for this announcement are available at https://www.Grants.gov . Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204. https://www.federalregister.gov/documents/2021/11/04/2021-24039/zero-suicide-initiative?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
136	Notice, Request for Information	Department of Veteran Affairs (VA)	86 FR 60970	Published 11/4/2021	VA is requesting information from the public to inform VA's review of access standards for furnishing hospital care, medical services and extended care services to covered veterans, for purposes of the Veterans Community Care Program (VCCP).	VA requests information regarding access standards, including but not limited to, information regarding health plans on the use of access standards for the design of health plan provider networks; referrals from network providers to out-of-network providers; the appeals process for exemptions from benefit limits to out-of-network providers; and the measurement of performance against Federal or State regulatory standards. Further, VA is requesting input on Veterans' experience with the access standards established in 2019.	Comments must be received on or before December 6, 2021. Comments may be submitted through www.regulations.gov . Comments should indicate that they are submitted in response to "Notice of Request for Information Regarding Health Care Access Standards." For further information contact: Natalie Frey, Management Analyst, Office of the Assistant Under Secretary for Health, Office of Community Care, Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420; 720-429-9171. https://www.federalregister.gov/documents/2021/11/04/2021-24041/notice-of-request-for-information-regarding-health-care-access-standards?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
137	Notice	HHS, IHS (Domestic Violence Prevention; Forensic Healthcare Services)	86 FR 60843	Published 11/4/2021	IHS is accepting applications for grants that will develop and/or expand Forensic Healthcare (FHC) services. This program was first established by the Omnibus Appropriations Act of 2009, Public Law 111-8, 123 Stat. 524, 735, as a component of the Domestic Violence Prevention Initiative, and continued in the annual appropriations acts since that time.	The purpose of this IHS grant is to provide access to treatment for AI/AN victims of domestic and sexual violence by supporting the development of and/or expansion of FHC services that are culturally appropriate and trauma-informed. The intent is to impact FHC services in each IHS Area (provided by Tribes, Tribal organizations and **Urban Indian organizations**). This also includes promoting treatment, intervention, and prevention efforts for the social, spiritual, and emotional well-being of victims, including victims of child maltreatment. To address domestic and sexual violence, including victims of sexual exploitation/human trafficking, applicants are encouraged to use Multidisciplinary Team (MDT) and Sexual Assault Response Team (SART) approaches. Using these types of team approaches is crucial—especially among local, state, and Federal agencies that includes health care providers, law enforcement, child protective services, social services, legal services, domestic violence coalitions, behavioral health services, and victim advocacy. The MDT/SART are community-based approaches in responding to sexual assault, intimate partner violence, and sexual abuse victims. Without the advantage of a team approach method, a program's more likely to fail. Improving collaboration through formal inter-agency agreements can improve the response time for sexual assault victims.	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. The application package and detailed instructions for this announcement are available at https://www.Grants.gov . Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204. The total funding identified for fiscal year (FY) 2022 is approximately $2,500,000. Individual award amounts for the first budget year are anticipated to be $250,000 Approximately 10 awards will be issued under this program announcement with **up to one award set aside for an eligible Urban Indian organization.**
138	Dear Urban Indian Organization Leader	Department of Health and Human Services(HHS) response to comments shared during Urban Confer	N/A	Published 11/4/2021	The 1996 MOA between the Health Care Financing Administration (then HCFA, now CMS) and the IHS, which was referenced during the Urban Confer session, does not provide HHS with authority to require that state Medicaid programs adopt the IHS All-Inclusive Rate as a Medicaid provider payment rate for UIOs. The MOA explains that CMS would provide 100 percent Federal match for state expenditures on Medicaid services received through certain health care facilities owned and operated by Tribes and Tribal Organizations pursuant to the Indian Self-Determination and Education Assistance Act (ISDEAA). By its terms, the MOA does not include Urban Indian Organization facilities. The ARP has authorized a temporary 100 percent Federal match for state Medicaid expenditures on services received through certain UIOs. However, nothing in the ARP, IHS authorities, or the 1996 MOA supports a conclusion that states must adopt the IHS All-Inclusive Rate as the Medicaid provider payment rate for UIOs.	IHS will continue to engage in discussions within HHS regarding the possible calculation of an Urban Indian Organization-specific All-Inclusive Rate. We will seek additional input from Urban Indian Organization Leaders on whether and how to calculate an AIR for UIOs. I	If you have questions, please contact Mr. Rick Mueller, Deputy Director, Office of Urban Indian Health Programs, IHS, by telephone at (301) 443-3787, or by e-mail at rick.mueller@ihs.gov . https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DUIOLL_11042021.pdf

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
139	Notice	Department of Health and Human Services (HHS)	86 FR 61279	Published 11/05/2021	the Health and Human Services Department (HHS) released a notice on the delegation of authority to several heads of federal health care agencies to conduct international health activities such as HIV/AIDs, chronic and environmental disease, and other health activities abroad.	The authority delegated herein includes the authority to determine the necessity of negotiating, executing, and performing such contracts without regard to statutory provisions as related to the negotiation, making, and performance of contracts and performance of work in the United States. This authority is immediately revoked in the event that any subsequent fiscal year HHS appropriations act does not contain the provision currently in section 212(l) or substantially similar authority.	Federal Register :: Assistant Secretary for Administration; Delegation of Authority
140	Interim Final Rule	Centers for Medicare & Medicaid Services (CMS), HHS	86 FR 61555	Published 11/05/2021	This interim final rule with comment period revises the requirements that most Medicare- and Medicaid-certified providers and suppliers must meet to participate in the Medicare and Medicaid programs. These changes are necessary to help protect the health and safety of residents, clients, patients, PACE participants, and staff, and reflect lessons learned to date as a result of the COVID-19 public health emergency. The revisions to the requirements establish COVID-19 vaccination requirements for staff at the included Medicare- and Medicaid-certified providers and suppliers.	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. We post all comments received before the close of the comment period on the following website as soon as possible after they have been received: http://www.regulations.gov. Follow the search instructions on that website to view public comments. CMS will not post on Regulations.gov public comments that make threats to individuals or institutions or suggest that the individual will take actions to harm the individual. CMS continues to encourage individuals not to submit duplicative comments. We will post acceptable comments from multiple unique commenters even if the content is identical or nearly identical to other comments.	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on January 4, 2022. https://www.federalregister.gov/documents/2021/11/05/2021-23831/medicare-and-medicaid-programs-omnibus-covid-19-health-care-staff-vaccination
141	Final Rule	Centers for Medicare & Medicaid Services (CMS), HHS	86 FR 61874	Published 11/8/2021	This final rule updates the End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) for calendar year (CY) 2022. This rule also updates the payment rate for renal dialysis services furnished by an ESRD facility to individuals with acute kidney injury (AKI). In addition, this rule updates requirements for the ESRD Quality Incentive Program (QIP), including a measure suppression policy for the duration of the coronavirus disease 2019 (COVID-19) public health emergency (PHE) as well as suppression of individual ESRD QIP measures for Payment Year (PY) 2022 under the measure suppression policy.	This rule also finalizes that CMS will not score facilities or reduce payment to any facility under the ESRD QIP in PY 2022. Further, this rule finalizes changes to the ESRD Treatment Choices (ETC) model, which is a mandatory payment model that is focused on encouraging greater use of home dialysis and kidney transplants, to reduce Medicare expenditures while preserving or enhancing the quality of care furnished to Medicare beneficiaries.	These regulations are effective on January 1, 2022. https://www.federalregister.gov/documents/2021/11/08/2021-23907/medicare-program-end-stage-renal-disease-prospective-payment-system-payment-for-renal-dialysis
142	Notice	Substance Abuse and Mental Health Services Administration (SAMSA), HHS	86 FR 61771	Published 11/8/2021	https://www.federalregister.gov/	The ISMICC will make specific recommendations for actions that agencies can take to better coordinate the administration of mental health services for adults with SMI or children with SED. Not later than one (1) year after the date of enactment of the 21st Century Cures Act, and five (5) years after such date of enactment, the ISMICC shall submit a report to Congress and any other relevant federal department or agency.	Agenda with call-in information will be posted on SAMHSA's website prior to the meeting at: https://www.samhsa.gov/about-us/advisory-councils/meetings. The meeting will provide information on federal efforts related to serious mental illness (SMI) and serious emotional disturbance (SED). DATES: December 16, 2021, 1:00 p.m.-4:00 p.m. (EDT)/Open.
143	HHS Press	HHS, As Vaccinations are Approved for Children Across the Country, U.S. Surgeon General Releases New Community Toolkit for Addressing Health Misinformation	N/A	Published 11/9/2021	As a new phase of the COVID-19 vaccination campaign begins for children ages 5 to 11 years old, U.S. Surgeon General Dr. Vivek Murthy releases a Community Toolkit for Addressing Health Misinformation - PDF to help Americans navigate the serious threat of health misinformation, especially online. Earlier this year, Dr. Murthy issued the first Surgeon General's Advisory of this administration warning people about the urgent threat of health misinformation and calling for a whole-of-society approach to address it.	The Surgeon General's Community Toolkit for Addressing Health Misinformation provides specific guidance to individuals, health care professionals and administrators, teachers, school administrators, librarians, and faith leaders to understand, identify, and stop the spread of health misinformation in their communities. The toolkit comes at a critical time when Americans are learning more about the role technology companies play in the spread of health misinformation.	Health Misinformation Reports and Publications | HHS.gov https://www.hhs.gov/about/news/2021/11/09/as-vaccinations-approved-for-children-across-country-us-surgeon-general-releases-new-community-toolkit-for-addressing-health-misinformation.html
144	Final Rule	Centers for Medicare & Medicaid Services (CMS), HHS	86 FR 62240	Published 11/9/2021	This final rule updates the home health and home infusion therapy services payment rates for calendar year (CY) 2022 in accordance with existing statutory and regulatory requirements. This rule also finalizes recalibration of the case-mix weights and updates the functional impairment levels, and comorbidity adjustment subgroups while maintaining the current low utilization payment adjustment (LUPA) thresholds for CY2022. Additionally, this rule finalizes a policy to utilize the physical therapy LUPA add-on factor to establish the occupational therapy add-on factor for the LUPA add-on payment amounts and makes conforming regulations text changes to reflect that allowed practitioners are able to establish and review the plan of care.	It also finalizes proposed changes to the Home Health Quality Reporting Program (QRP) including finalizing proposed measure removals and adoptions, public reporting, and modification of effective dates. It also finalizes proposed modifications to the effective date for the reporting of measures and certain standardized patient assessment data in the Inpatient Rehabilitation Facility (IRF) QRP and Long-Term Care Hospital (LTCH) QRP. In addition, this final rule codifies certain Medicare provider and supplier enrollment policies. It also makes permanent selected regulatory blanket waivers related to home health aide supervision that were issued to Medicare participating home health agencies during the COVID-19 public health emergency (PHE), and updates the home health conditions of participation regarding occupational therapists assessment completion to implement provisions of the Consolidated Appropriations Act, 2021 (CAA 2021). This final rule also finalizes proposals to expand the Home Health Value-Based Purchasing (HHVBP) Model and to end the original HHVBP Model one year early. Lastly, it establishes survey and enforcement requirements for hospice programs as set forth in the CAA 2021; and finalizes revisions to the infection control requirements for long-term care (LTC) facilities (Medicaid nursing facilities and Medicare skilled nursing facilities, also collectively known as "nursing homes") that will extend the mandatory COVID-19 reporting requirements beyond the current COVID-19 PHE until December 31, 2024.	These regulations are effective on January 1, 2022. FOR FURTHER INFORMATION CONTACT: Brian Slater, (410) 786-5229, for home health and home infusion therapy payment inquiries. For general information about home infusion payment, send your inquiry via email to HomeInfusionPolicy@cms.hhs.gov https://www.federalregister.gov/documents/2021/11/09/2021-23993/medicare-and-medicaid-programs-cy-2022-home-health-prospective-payment-system-rate-update-home?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
145	Rule	Department of Veteran Affairs (VA)	86 FR 62482	Published 11/10/2021	The Department of Veterans Affairs (VA) is amending its regulations that govern the Supportive Services for Veteran Families (SSVF) Program. This interim final rule will provide a more effective subsidy to veterans in high-cost rental markets; increase the cap on General Housing Assistance to reflect increased costs; and extend the ability of SSVF grantees to provide emergency housing for the most vulnerable, unsheltered veterans and their families.	Comments may be submitted through www.Regulations.gov . Comments should indicate that they are submitted in response to "RIN 2900-AR15—Supportive Services for Veterans Families." Comments received will be available at regulations.gov for public viewing, inspection or copies.	This interim final rule is effective November 10, 2021 FOR FURTHER INFORMATION CONTACT: John Kuhn, National Director, Supportive Services for Veteran Families, 810 Vermont Avenue NW, Washington, DC 20420, (202) 632-8596 (this is not a toll-free telephone number).
146	HHS Press	HHS Announces $143.5 Million to Expand Community-Based Efforts to Address Barriers to COVID-19 Vaccination	N/A	Published 11/10/2021	The U.S Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), today announced $143.5 million in American Rescue Plan funding to expand community-based efforts to conduct tailored local outreach about vaccines, build vaccine confidence and address barriers to vaccination in their communities.	These awards build on previous HRSA funding for community-based organizations to hire and mobilize community outreach workers to increase vaccine access for the hardest-hit and highest-risk communities. HRSA awarded $125 million in June 2021 to support 14 nonprofit private or public organizations to reach underserved communities in all 50 states. Then in July 2021, HRSA provided even more localized support by awarding another $121 million to 127 local community-based organizations.	To apply for the Community-Based Workforce to Build COVID-19 Vaccine Confidence Funding Opportunity, visit Grants.gov . Applications are due December 10, 2021. Applicants should contact CBOVaccineOutreach@hrsa.gov with any questions. https://www.hhs.gov/about/news/2021/11/10/hhs-announces-143-million-to-expand-community-based-covid-19-vaccination-efforts.html
147	New and Competing Continuation	Indian Health Services (IHS), HHS	86 FR 62546	Published 11/10/2021	The Indian Health Service (IHS) is accepting applications for grants for the 4-in-1 Grant Program. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and Title V of the Indian Health Care Improvement Act(IHCIA), at 25 U.S.C. 1653(c) (a) (authorizing grants for Health Promotion and Disease Prevention (HP/DP) services, Immunization services, and Mental Health services), and 1660a (authorizing grants for Alcohol and Substance Abuse related services). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as Catalog of Federal Domestic Assistance) under 93.193.	The purpose of this program is to ensure the highest possible health status for Urban Indians. Funding will be used to support the 4-in-1 health program objectives. These programs are integral components of the IHS health care delivery system. Funds from this effort will ensure that comprehensive, culturally acceptable personal and public health services are available and accessible to Urban Indians.	All applications must be submitted via Grants.gov . Please use the https://www.Grants.gov website to submit an application. Find the application by selecting the "Search Grants" link on the homepage. Follow the instructions for submitting an application under the Package tab. No other method of application submission is acceptable. If the applicant cannot submit an application through Grants.gov , a waiver must be requested. Prior approval must be requested and obtained from Mr. Paul Gettys, Acting Director, DGM. A written waiver request must be sent to GrantsPolicy@ihs.gov with a copy to Paul.Gettys@ihs.gov. The waiver request must: (1) Be documented in writing (emails are acceptable) before submitting an application by some other method; and (2) include clear justification for the need to deviate from the required application submission process. https://www.bgov.com/us_regulation/federal_register_document/70288798733589545 14 https://www.federalregister.gov/documents/2021/11/10/2021-24577/4-in-1-grant-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
148	Notice	IHS, Department of Health and Human Services	86 FR 62820	Published 11/12/2021	Tribal Self-Governance Planning Cooperative Agreement Program The Indian Health Service (IHS) is accepting applications for Planning Cooperative Agreements for the Tribal Self-Governance Program (TSGP). This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and Title V of the Indian Self-Determination and Education Assistance Act (ISDEAA), 25 U.S.C. 5383(e). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as Catalog of Federal Domestic Assistance) under 93.444.	The purpose of this Planning Cooperative Agreement is to provide resources to Tribes interested in entering the TSGP and to existing Self-Governance Tribes interested in assuming new or expanded PSFAs. Title V of the ISDEAA requires a Tribe or Tribal organization (T/TO) to complete a planning phase to the satisfaction of the Tribe. The planning phase must include legal and budgetary research and internal Tribal government planning and organizational preparation relating to the administration of health care programs. See 25 U.S.C. 5383(d).	Application Deadline Date: February 10, 2022. Earliest Anticipated Start Date: March 28, 2022. https://www.federalregister.gov/documents/2021/11/12/2021-24675/tribal-self-governance-planning-cooperative-e-agreement-program
149	Notice	IHS, Department of Health and Human Services	86 FR 62826	Published 11/12/2021	Tribal Self-Governance Negotiation Cooperative Agreement Program The Indian Health Service (IHS) is accepting applications for Negotiation Cooperative Agreements for the Tribal Self-Governance Program (TSGP). This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and Title V of the Indian Self-Determination and Education Assistance Act (ISDEAA), 25 U.S.C. 5383(e). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as Catalog of Federal Domestic Assistance) under 93.444.	The purpose of this Negotiation Cooperative Agreement is to provide Tribes with resources to help defray the costs associated with preparing for and engaging in TSGP negotiations. TSGP negotiations are a dynamic, evolving, and tribally-driven process that requires careful planning, preparation, and sharing of precise, up-to-date information by both Tribal and Federal parties. Because each tribal situation is unique, a Tribe's successful transition into the TSGP, or expansion of their current program, requires focused discussions between the Federal and Tribal negotiation teams about the Tribe's specific health care concerns and plans. One of the hallmarks of the TSGP is the collaborative nature of the negotiations process, which is designed to: (1) Enable a Tribe to set its own priorities when assuming responsibility for IHS PSFAs; (2) observe and respect the government-to-government relationship between the U.S. and each Tribe; and (3) involve the active participation of both Tribal and IHS representatives, including the OTSG. Negotiations are a method of determining and agreeing upon the terms and provisions of a Tribe's Compact and FA, the implementation documents required for the Tribe to enter into the TSGP. The Compact sets forth the general terms of the government-to-government relationship between the Tribe and the Secretary of the U.S. Department of Health and Human Services (HHS). The FA: (1) Describes the length of the agreement (whether it will be annual or multi-year); (2) identifies the PSFAs, or portions thereof, the Tribe will assume; (3) specifies the amount of funding associated with the Tribal assumption; and (4) includes terms required by Federal statutes and other terms agreed to by the parties. Both documents are required to participate in the TSGP and they are mutually negotiated agreements that become legally binding and mutually enforceable after both parties sign the documents. Either document can be renegotiated at the request of the Tribe.	Application Deadline Date: February 10, 2022. Earliest Anticipated Start Date: March 28, 2022. https://www.federalregister.gov/documents/2021/11/12/2021-24679/tribal-self-governance-negotiation-cooperative-e-agreement-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
150	DULL	IHS, Department of Health and Human Services	N/A	Published 11/15/2021	Indian Health Service (IHS) released a Dear Tribal Leader Letter on an update on the Special Diabetes Program for Indians. Specifically, this letter details the upcoming changes for fiscal year 2022.	Beginning in FY 2022, a mandatory sequester reduces the SDPI funding level from $150 million to $147 million each year. This reflects a required 2 percent reduction, which will continue through FY 2023 under current law.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DTL_DULCKL_11112021.pdf
151	Notice	Office of Assistant Secretary for Public and Indian Housing, Department of Housing and Urban Development (HUD)	86FR 63051	Published 11/15/2021	This notice announces HUD's intention to form the Department's first standing Tribal advisory committee. The committee will be called the "Tribal Intergovernmental Advisory Committee" (TIAC). This notice also solicits comments and recommendations regarding the establishment and structure of the TIAC. The TIAC will be made up of a diverse group of duly elected Tribal leaders representing small, medium, and large federally recognized Tribes. The TIAC is intended to further communications between HUD and federally recognized Tribes on HUD programs, make recommendations to HUD regarding current program regulations, provide advice in the development of HUD's American Indian and Alaska Native (AIAN) housing priorities, and encourage peer learning and capacity building among Tribes and non-Tribal entities. Consistent with HUD's Tribal Government-to-Government Consultation Policy, this notice solicits input on the proposed structure of the TIAC.	The purposes of the TIAC are: (1) To further facilitate intergovernmental communication between HUD and Tribal leaders of federally recognized Tribes on all HUD programs; (2) To make recommendations to HUD regarding current program regulations that may require revision, as well as suggest rulemaking methods to develop such changes. The TIAC will not, however, negotiate any changes to regulations that are subject to negotiated rulemaking under Section 106 of the Native American Housing Assistance and Self-Determination Act (NAHASDA) and will not serve in place of any future negotiated rulemaking committee established by HUD; and (3) To advise in the development of HUD's AIAN housing priorities.	Comments on the proposed structure of the TIAC are due on or before: January 14, 2022. Interested persons are invited to submit comments on the structure of the TIAC. Comments may be submitted to HUD electronically. All submissions must refer to the above docket number and title. Electronic Submission of Comments. Interested persons may submit comments electronically through the Federal eRulemaking Portal at www.regulations.gov.

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
152	Notice	Health Resources and Services Administration (HRSA), HHS	86 FR 63404	Published 11/16/2021	In compliance with of the Paperwork Reduction Act of 1995, HRSA is submitting an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA's ICR only after the 30-day comment period for this Notice has closed. Information Collection Request Title: Ryan White HIV/AIDS Program Client-Level Data Reporting System, OMB No. 0906-0039—Extension. Abstract: The Ryan White HIV/AIDS Program (RWHAP), authorized under Title XXVI of the Public Health Service Act, is administered by the HIV/AIDS Bureau within HRSA. HRSA awards funding to recipients in areas of the greatest need to respond effectively to the changing HIV epidemic, with an emphasis on providing life-saving and life-extending medical care, treatment and support services for people living with HIV in the United States.	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.	Comments on this ICR should be received no later than December 16, 2021 https://www.federalregister.gov/documents/2021/11/16/2021-24922/agency-information-collection-activities-submission-to-omb-for-review-and-approval-public-comment?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
153	Notice	Department of Veteran Affairs (VA)	86 FR 63454	Published 11/16/2021	On December 7, the Committee will receive briefings and updates from the Center for Minority Veterans, National Cemetery Administration, Veterans Experience Office, National Center for Veterans Analysis and Statistics, Office of Tribal Government Relations, and Veterans Benefits Administration. On December 8, the Committee will receive briefings and updates from the Board of Veterans Appeals, Veterans Health Administration, Center for Women Veterans, Mental Health, Inclusion, Diversity, Equity and Access (IDEA) Task Force, Office of Rural Health and Office of Health Equity. On December 9, the Committee will receive briefings and updates on Office of Diversity & Inclusion, Senior Advisor for Pacific Strategies and ex officio updates. The Committee will then hold a leadership exit briefing with Veterans Benefits Administration, Veterans Health Administration and National Cemetery Administration. The Committee will receive public comments from 1:00 p.m. to 1:15 p.m. The Committee will conduct an after-action review	The purposes of the Committee are to: Advise the Secretary on the administration of VA benefits and services to minority Veterans; assess the needs of minority Veterans; and evaluate whether VA compensation, medical and rehabilitation services, outreach, and other programs are meeting those needs. The Committee makes recommendations to the Secretary regarding such activities.	Individuals who wish to provide public comment are invited to submit a 1-2-page summary of their comments no later than November 29, 2021 for inclusion in the official meeting record. Members of the public may also submit written statements for the Committee's review to Ms. Juanita Mullen. at Juanita.Mullen@va.gov . Any member of the public seeking additional information should contact Ms. Juanita Mullen or Mr. Dwayne Campbell at (202) 461-6191. https://www.federalregister.gov/documents/2021/11/16/2021-24909/advisory-committee-on-minority-veterans-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
154	Notice	Substance Abuse and Mental Health Services Administration (SAMSA), HHS	86 FR 64222	Published 11/17/2021	This notice is to inform the public that the Substance Abuse and Mental Health Services Administration (SAMHSA) intends to award $152,000,000 (total costs) for up to two years to Vibrant Emotional Health for the 988 National Suicide Prevention Lifeline Expansion for Behavioral Health Crisis Response (Lifeline Expansion). Under this cooperative agreement, Vibrant Emotional Health will improve and expand the national Lifeline backup centers, text/chat centers, and Spanish language crisis centers to: (1) Respond, intervene, and provide follow-up to individuals experiencing a behavioral health crisis by recruiting and training additional behavioral health staff; (2) support and expand services for populations at high risk of suicide; and (3) develop the infrastructure needed to meet the increased service demand requirements anticipated with the FCC's national launch of 988 in July 2022.	It is expected that this program will: (1) Increase response rates for national Lifeline backup centers, text/chat centers, and Spanish language crisis centers; (2) increase the workforce capacity of the national Lifeline backup centers, text/chat centers, and Spanish language crisis centers; and (3) improve the oversight and standardization of outcomes of the Lifeline.	FOR FURTHER INFORMATION CONTACT: James Wright, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Rockville, MD 20857; telephone: (240) 276-1615; email: james.wright@samhsa.hhs.gov. https://www.federalregister.gov/documents/2021/11/17/2021-25035/fiscal-year-fy-2022-funding-opportunity?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
155	Executive Order; Office of the President (EO)	E.O. 14053 Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People	86 FR 64337	Published 11/18/2021	The safety and well-being of all Native Americans is a top priority for the Biden Administration. This Administration will work hand in hand with Tribal Nations and Tribal partners to build safe and healthy Tribal communities and to support comprehensive law enforcement, prevention, intervention, and support services.	Given that approximately 70 percent of American Indian and Alaska Natives live in urban areas and part of this epidemic of violence is against Native American people in urban areas, we must continue that work on Tribal lands but also build on existing strategies to identify solutions directed toward the particular needs of urban Native Americans. The Secretary of HHS, in consultation with the Secretary of the Interior and Tribal Nations and after conferring with other agencies, researchers, and community-based organizations supporting Indigenous wellbeing, including Urban Indian Organizations, as appropriate, shall develop a comprehensive plan to support prevention efforts that reduce risk factors for victimization of Native Americans and increase protective factors, including by enhancing the delivery of services for Native American victims and survivors, as well as their families and advocates.	EO Signed on 11/15/2021 during the White House Tribal Nation's Summit https://www.federalregister.gov/documents/2021/11/18/2021-25287/improving-public-safety-and-criminal-justice-for-native-americans-and-addressing-the-crisis-of?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
156	Notice	Office of Minority Health, Office of the Secretary, Department of Health and Human Services	86 FR 64951	Published 11/19/2021	Notice of solicitation of nominations for delegates for the Center for Indigenous Innovation and Health Equity Tribal Advisory Committee.	On October 1, 2021, the U.S. Department of Health and Human Services (HHS) Office of Minority Health (OMH) published a notice in the Federal Register inviting nominations of qualified candidates to serve as primary and alternate delegates for the Center for Indigenous Innovation and Health Equity Tribal Advisory Committee (CIIHE TAC), including a submission deadline of October 29, 2021. This notice extends the deadline date for submission of nominations to January 7, 2022 at 11:59 p.m. EST.	Nomination letters for the CIIHE TAC must be sent to the address noted below no later than 11:59 p.m. EST on January 7, 2022. ADDRESSES: All nominations should be emailed to: Violet Woo, Designated Federal Officer for the CIIHE TAC, at Violet.Woo@hhs.gov. Please use the subject line "OMH CIIHE Tribal Advisory Committee". https://www.federalregister.gov/documents/2021/11/19/2021-25292/extension-of-the-deadline-for-nomination-of-delegates-center-for-indigenous-innovation-and-health?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
157	Publication	Bloomberg.Gov, U.S. House of Representatives	N/A	Published 11/22/2021	The Build Back Better Act (BBB) narrowly passed the House on November 19th, 2021. It next moves on to what is expected to be a tumultuous time in the Senate because of the major policy differences that remain, as well as the special procedures governing the Senate's reconciliation process that would guide the debate.	BBB would also extend through March 2025 the special 100 percent federal medical assistance funding formula to support state Medicaid expenditures, first authorized under the American Rescue Plan, for health care services provided by Native Hawaiian Health Care Systems and Urban Indian Health Systems.	https://www.healthaffairs.org/do/10.1377/hblog20211121.674613/full/
158	DULL	IHS, Department of Health and Human Services	N/A	Published 11/22/2021	On November 22, the Indian Health Service (IHS) released a Dear Tribal Leader Letter on initiating Tribal consultation on the allocation of $210 million from the American Rescue Plan Act, $3.5 billion from the Infrastructure Investment and Jobs Act, and $2.35 billion already in the process of appropriation by the Build Back Better Act. This Tribal consultation will take place on December 14, 2021, from 1PM to 3PM EST. Written comments are due December 23, 2021	NCUIH will be holding a prep call on Wednesday, December 15, 2021 from 12:00 p.m. – 1:00 p.m. (EST). Join NCUIH's prep call here. During this meeting, we will review potential talking points and provide a shareable document prior to the IHS Urban Confer Session.	Tribal Leader Letter_Nov 22, 2021 (ihs.gov) https://ihs-gov.zoomgov.com/j/1608027268
159	Notice	Office of Child Care, Administration for Children and Families, HHS	86 FR 66314	Published 11/22/2021	The Administration for Children and Families (ACF), Office of Child Care (OCC) is requesting a 3-year extension of the Tribal Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program's Form 1: Demographic and Service Utilization Data (OMB #0970-0389; expiration 6/30/2022). There are minor updates to the existing Form 1.	The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Comments due within 60 days of publication. In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above. https://www.federalregister.gov/documents/2021/11/22/2021-25408/proposed-information-collection-activity-tribal-maternal-infant-and-early-childhood-home-visiting?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
160	Press Release	HHS, HRSA	N/A	Published 11/22/2021	HHS Announces Record Health Care Workforce Awards in Rural and Underserved Communities Biden-Harris Administration has awarded the largest field strength in history for its health workforce loan repayment and scholarship programs thanks to a new $1.5 billion investment, including $1 billion in supplemental American Rescue Plan (ARP) funding and other mandatory and annual appropriations. More than 22,700 primary care clinicians now serve in the nation's underserved tribal, rural and urban communities, including nearly 20,000 National Health Service Corps (NHSC) members, more than 2,500 Nurse Corps nurses, and approximately 250 awardees under a new program, the Substance Use Disorder Treatment and Recovery Loan Repayment Program.	The U.S. Department of Health and Human Services' (HHS) Health Resources and Services Administration (HRSA) oversees these critical programs.	HHS Announces Record Health Care Workforce Awards in Rural and Underserved Communities	HHS.gov
161	Notice	Department of Veteran Affairs (VA)	86 FR 66389	Published 11/22/2021	The Department of Veterans Affairs (VA) is announcing the availability of funds for supportive services grants under the Supportive Services for Veteran Families (SSVF) Program. This Notice of Funding Opportunity (NOFO) contains information concerning the SSVF Program, the renewal and new applicant supportive services grant application processes, and the amount of funding available. Awards made for supportive services grants will fund operations beginning October 1, 2022.	The SSVF Program's purpose is to provide supportive services grants to private non-profit organizations and consumer cooperatives, who will coordinate or provide supportive services to very low-income veteran families who: (i) Are residing in permanent housing and at risk of becoming homeless; (ii) are homeless and scheduled to become residents of permanent housing within a specified time period; or (iii) after exiting permanent housing within a specified time period, are seeking other housing that is responsive to such very low-income veteran family's needs and preferences. SSVF prioritizes the delivery of rapid re-housing services to homeless veteran households. Any applicant proposing to serve an Indian tribal area is strongly encouraged to provide a letter of support from the relevant Indian tribal government.	Applications for supportive services grants under the SSVF Program must be received by the SSVF Program Office by 4:00 p.m. Eastern Time on February 7, 2022 Applicants must submit applications electronically following instructions found at www.va.gov/homeless/ssvf. Applications may not be mailed, hand carried or sent by facsimile (FAX). Applications must be received in the SSVF Program Office by 4:00 p.m. Eastern Time on the application deadline date. https://www.federalregister.gov/documents/2021/11/22/2021-25463/funding-opportunity-under-supportive-services-for-veteran-families-program?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
162	Notice	HHS	N/A	Published 11/23/2021	HHS Announces $35 Million for Telehealth in the Title X Family Planning Program	On November 23, the Department of Health and Human Services (HHS) published an announcement on "$35 Million for Telehealth in the Title X Family Planning Program." This funding is being made available through the American Rescue Plan and aims to expand telehealth infrastructure and capacity to Title X family planning providers.	https://www.hhs.gov/about/news/2021/11/23/hhs-announces-35-million-telehealth-title-x-family-planning-program.html More information about the Title X family planning program is available at https://opa.hhs.gov/grant-programs/title-x-service-grants.
163	Press Release	HHS	N/A	Published 11/23/2021	Biden-Harris Administration Begins Distributing American Rescue Plan Rural Funding to Support Providers Impacted by Pandemic	The U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), began distributing $7.5 billion in American Rescue Plan (ARP) Rural payments to providers and suppliers who serve rural Medicaid, Children's Health Insurance Program (CHIP), and Medicare beneficiaries. The Biden-Harris Administration is committed to providing much-needed relief to rural providers who historically operate on thin margins and have had their financial challenges further exacerbated during the pandemic. The average payment being announced today is approximately $170,700, with payments ranging from $500 to approximately $43 million. More than 40,000 providers in all 50 states, Washington, D.C., and six territories will receive ARP Rural payments.	Biden-Harris Administration Begins Distributing American Rescue Plan Rural Funding to Support Providers Impacted by Pandemic	HHS.gov
164	Interim Final Rule	Office of Personnel Management; Internal Revenue Service, Department of the Treasury; Employee Benefits Security Administration, Department of Labor; Centers for Medicare & Medicaid Services, Department of Health and Human Services.	86 FR 66662	Published 11/23/2021	This document sets forth interim final rules implementing provisions of the Internal Revenue Code (the Code), the Employee Retirement Income Security Act (ERISA), and the Public Health Service Act (PHS Act), as enacted by the Consolidated Appropriations Act, 2021 (CAA).	The Department of Health and Human Services (HHS) released an interim final rule on changes to prescription drug and health care spending. This rule will be applicable to all group health plans and health insurance issuers offering group or individual health insurance coverage. This rule aims to increase transparency by requiring these groups to submit information pertaining to prescription drug costs and health care spending.	These changes are effective on December 23, 2021, and comments on this rule are due January 24, 2022 https://www.federalregister.gov/documents/2021/11/23/2021-25183/prescription-drug-and-health-care-spending
165	CMCS Informational Bulletin	CMS	N/A	Published 11/23/2021	Updates to Intake Process for State Submissions to CMS	the Centers for Medicare, and Medicaid Services (CMS) released an information bulletin on new updates to the intake process for states to submit to CMS. Specifically, this bulletin details a new process for state Medicaid and Children's Health Insurance Programs (CHIP) to submit items such as Medicaid state plan amendments (SPAs), CHIP SPAs, 1915 (b) waiver actions and Appendix K 1915(c) waiver amendments. These changes will take effect on February 1, 2022, for all states.	If you have any questions or need additional information, please contact Adrienne Delozier, Senior Technical Advisor, Disabled and Elderly Health Programs Group, Adrienne.Delozier@cms.hhs.gov and Kaitlin Devine, Director, Division of Information Systems, Kaitlin.Devine@cms.hhs.gov

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
166	Rule	HHS	86 FR 67351	Published 11/26/2021	The U.S. District Court for the District of Columbia in Facing Foster Care et al. v. HHS, 21-cv-00308 (D.D.C. Feb. 2, 2021), has postponed the effectiveness of portions of the final rule making amendments to the Uniform Administrative Requirements, promulgated on January 12, 2021. Those provisions are now effective January 17, 2022.	Specifically, the rule amended paragraph (c), which previously provided that it is a public policy requirement of HHS that no person otherwise eligible will be excluded from participation in, denied the benefits of, or subjected to discrimination in the administration of HHS programs and services based on non-merit factors such as age, disability, sex, race, color, national origin, religion, gender identity, or sexual orientation. Recipients must comply with the public policy requirement in the administration of programs supported by HHS awards. The rule amended paragraph (c) to provide that it is a public policy requirement of HHS that no person otherwise eligible will be excluded from participation in, denied the benefits of, or subjected to discrimination in the administration of HHS programs and services, to the extent doing so is prohibited by federal statute.	Federal Register :: Grants Regulation; Removal of Non-Discrimination Provisions and Repromulgation of Administrative Provisions Under the Uniform Grant Regulation
167	Notice	Centers for Medicare & Medicaid Services (CMS), Health and Human Services (HHS)	86 FR 67473	Published 11/26/2021	CMS is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action.	Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments must be received by January 25, 2022 https://www.federalregister.gov/documents/2021/11/26/2021-25816/agency-information-collection-activities-proposed-collection-comment-request?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
168	Notice	Office of the Secretary, HHS	86 FR 67479	Published 11/26/2021	The Federal Medical Assistance Percentages (FMAP), Enhanced Federal Medical Assistance Percentages (eFMAP), and disaster-recovery FMAP adjustments for Fiscal Year 2023 have been calculated pursuant to the Social Security Act (the Act). These percentages will be effective from October 1, 2022 through September 30, 2023.	This notice announces the calculated FMAP rates, in accordance with sections 1101(a)(8) and 1905(b) of the Act, that the U.S. Department of Health and Human Services (HHS) will use in determining the amount of federal matching for state medical assistance (Medicaid), Temporary Assistance for Needy Families (TANF) Contingency Funds, Child Support Enforcement collections, Child Care Mandatory and Matching Funds of the Child Care and Development Fund, Title IV-E Foster Care Maintenance payments, Adoption Assistance payments and Kinship Guardianship	Ann Conny, Office of Health Policy, Office of the Assistant Secretary for Planning and Evaluation, Room 447D—Hubert H. Humphrey Building, 200 Independence Avenue SW, Washington, DC 20201, (202) 690-6870. https://www.federalregister.gov/documents/2021/11/26/2021-25798/federal-financial-participation-in-state-assistance-expenditures-federal-matching-shares-for?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
169	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	86 FR 67949	Published 11/30/2021	The National Institute for Occupational Safety and Health (NIOSH), within the Centers for Disease Control and Prevention (CDC) announces a CDC Tribal Consultation Session. CDC will host American Indian and Alaska Native (AI/AN) Federally Recognized Tribes for a virtual tribal consultation session on the NIOSH draft strategic plan entitled American Indian and Alaska Native Worker Safety and	The purpose of the consultation meeting is to advance NIOSH's support for, and collaboration with, federally recognized American Indian and Alaska Native (AI/AN) tribes, and to improve the health of AI/AN tribal nations by pursuing research and outreach activities to prevent injuries, illnesses, and fatalities to AI/AN workers. To advance these goals, CDC conducts government-to-government consultations with Indian Tribes represented by the Tribal President, Tribal Chair, or Tribal Governor, or an elected or appointed Tribal Leader, or their authorized representative(s) to the extent practicable and permitted by law before CDC takes any action that will significantly affect Indian Tribes. Consultation is an enhanced form of communication that emphasizes trust, respect, and shared responsibility. It is an open and free exchange of information and opinion among parties that leads to mutual understanding.	The tribal consultation will be held February 3, 2022, from 4:15 p.m. to 6:00 p.m., EST. Zoom Virtual Tribal Consultation. If you wish to attend the virtual consultation session, please register by accessing the CDC web page at: https://cdc.zoomgov.com/meeting/register/vJIsdeipqz4GpMXRWjL6nOHtvWos3dggw . https://www.federalregister.gov/documents/2021/11/30/2021-26016/national-institute-for-occupational-safety-and-health-tribal-consultation-session?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
170	Notice	Department of Veteran Affairs (VA), VHA	86 FR 68048	Published 11/30/2021	Veterans Health Administration, Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and it includes the actual data collection instrument.	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function. Refer to "OMB Control No. 2900-0609.	FOR FURTHER INFORMATION CONTACT: Maribel Aponte, Office of Enterprise and Integration, Data Governance Analytics (008), 1717 H Street NW, Washington, DC 20006, (202) 266-4688 or email maribel.aponte@va.gov . Please refer to "OMB Control No. 2900-0609" in any correspondence. https://www.federalregister.gov/documents/2021/11/30/2021-25961/agency-information-collection-activity-under-omb-review-survey-of-veteran-enrollees-health-and-use?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
171	Notice	Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary of Health, Office of the Secretary, Department of Health and Human Services.	86 FR 68677	Published 12/03/2021	The U.S. Department of Health and Human Services (HHS) solicits written comments on three new objectives proposed to be added to Healthy People 2030 since its launch in August 2020; written comments from the public proposing additional new core, developmental, or research objectives to be included in Healthy People 2030; and evidence-based information regarding the relationship between voter participation and health status as a measure of civic engagement.	HHS will provide opportunities for public input periodically throughout the decade to ensure Healthy People 2030 reflects current public health priorities and public input. The updated set of Healthy People 2030 objectives will be incorporated on www.health.gov/HealthyPeople2030. This updated set will reflect further review and deliberation by federal Healthy People topic area workgroups, the Federal Interagency Workgroup on Healthy People 2030, and other federal subject matter experts.	Written comments and evidence-based information will be accepted through 11:59 p.m. ET, January 10, 2022. https://www.federalregister.gov/documents/2021/12/03/2021-26184/announcement-of-solicitation-of-written-comments-on-proposed-healthy-people-2030-objectives-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
172	Notice	Administration for Native Americans, Administration for Children and Families, Department of HHS	86 FR 68672	Published 12/03/2021	Pursuant to Section 814 of the Native American Programs Act of 1974 (NAPA), as amended, the Administration for Native Americans (ANA) is required to provide members of the public an opportunity to comment on proposed changes in interpretive rules and general statements of policy and to give notice of the proposed changes no less than 30 days before such changes become effective.	Comments are due by January 3, 2022. If ANA does not receive any significant comments within the 30-day comment period, ANA will proceed with the proposed changes in the respective published NOFOs. The NOFOs will serve as the final notice of these proposed changes.	Comments may be submitted to: Carmelia Strickland, Director of Program Operations, Administration for Native Americans, 330 C Street SW, Washington, DC 20201 or via email to: ANAComments@acf.hhs.gov . https://www.federalregister.gov/documents/2021/12/03/2021-26271/notice-for-public-comment-on-administration-for-native-americans-program-policies-and-procedures?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
173	Notice	CMS	86 FR 69058	Published 12/06/2021	CMS is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice.	Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments on the collection(s) of information must be received by the OMB desk officer by January 5, 2022. https://www.federalregister.gov/documents/2021/12/06/2021-26414/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
174	Notice	CMS	86 FR 69059	Published 12/06/2021	CMS is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action.	Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments must be received by February 4, 2022 https://www.federalregister.gov/documents/2021/12/06/2021-26413/agency-information-collection-activities-proposed-collection-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
175	Notice	Administration for Children and Families (ACF); HHS	86 FR 69062	Published 12/06/2021	Proposed Information Collection Activity; Tribal Child Support Enforcement Annual Data Report (OMB #0970-0320)	The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Comments due within 60 days of publication. In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection. https://www.federalregister.gov/documents/2021/12/06/2021-26323/proposed-information-collection-activity-tribal-child-support-enforcement-annual-data-report-omb?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
176	Proposed Rule	Administration for Children and Families (ACF); Administration for Native Americans (ANA); HHS	86 FR 69215	Published 12/07/2021	This notice of proposed rulemaking proposes changes to ANA regulations to allow grant recipients to apply for an emergency waiver of part or all of their proposed non-Federal shares (NFS) due to emergency circumstances	Current regulations (45 CFR 1336.50) state that grant recipients can only apply for a waiver for NFS at the time of application or while applying for a non-competitive continuation award. The on-going public health emergency has greatly impacted our recipients. The pandemic has greatly increased the risk of language and cultural decline among Native communities with many Elders dying from the COVID-19 virus. As tribes began closing their revenue generating businesses and other gov-ernmental operations due to the COVID-19 pandemic, they lost income they needed to fund Federal projects requiring a NFS. In addition, planned sources of income, such as use of tribal-owned facilities from which to operate the project, as part of the NFS also diminished. NAPA requires a 20 percent cost-share and match requirement. ANA's current cost-share waiver does not allow for a process to address a recipient's inability to meet the cost-share due to an emergency in the middle of a budget period. The proposed revisions to the regulations (45 CFR 1336.50(b)(2)(i)) add a provision allowing grant recipients to apply for an emergency waiver within the current budget period in order to remedy this burden.	In order to be considered, written comments on this proposed rule must be received on or before February 7, 2022. https://www.federalregister.gov/documents/2021/12/07/2021-25906/native-american-programs?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
177	Press Release	Centers for Disease Control (CDC)	N/A	Published 12/09/2021	CDC is strengthening its booster recommendations and encouraging everyone 16 and older to receive a booster shot.	At this time, only the Pfizer-BioNTech COVID-19 vaccine is authorized and recommended for adolescents aged 16 and 17. More information will be available on CDC's website soon.	CDC Expands COVID-19 Booster Recommendations to 16-and-17-year-olds | CDC Online Newsroom | CDC
178	Rule	Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS)	86 FR 70412	Published 12/10/2021	This notification is to inform the public that CMS is exercising its discretion in how it enforces the payer-to-payer data exchange provisions. As a matter of enforcement discretion, CMS does not expect to take action to enforce compliance with these specific provisions until we are able to address certain implementation challenges.	The decision to exercise enforcement discretion for the payer-to-payer policy until future rulemaking is finalized does not affect any other existing regulatory requirements and implementation timelines finalized in the CMS Interoperability and Patient Access rule finalized on May 1, 2020.	Federal Register :: Medicare and Medicaid Programs; Patient Protection and Affordable Care Act; Interoperability and Patient Access for Medicare Advantage Organizations and Medicaid Managed Care Plans, State Medicaid Agencies, CHIP Agencies and CHIP Managed Care Entities, Issuers of Qualified Health Plans on the Federally-Facilitated Exchanges, and Health Care Providers
179	Notice	Indian Health Service (IHS), HHS	86 FR 70853	Published 12/13/2021	In compliance with the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) invites the general public to take this opportunity to comment on the information collection titled, " Addendum to Declaration for Federal Employment, Child Care and Indian Child Care Worker Positions," Office of Management and Budget (OMB) Control Number 0917-0028. A copy of the supporting statement is available at www.regulations.gov	Requests for Comments: Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the agency processes the information collected in a useful and timely fashion; (c) The accuracy of the public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimates are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.	February 11, 2022. Your comments regarding this information collection are best assured of having full effect if received within 60 days of the date of this publication.
180	Notice	Administration for Native Americans, Administration for Children and Families, Department of HHS	86 FR 70845	Published 12/13/2021	The Administration for Children and Families (ACF), Office of Child Care (OCC) is requesting a 2-year extension to the following information collection: Annual Data Report (ADR) (OMB #0970-0475; expiration date: 2/28/2022). There are no changes requested to the form.	Comments: The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Comments are due on February 28, 2022 https://www.federalregister.gov/documents/2021/12/13/2021-26912/proposed-information-collection-activity-administration-for-native-americans-annual-data-report-adr?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
181	Notice for Public Comment	Administration for Children and Families, HHS	86 FR 71504	Published 12/16/2021	Submission for OMB Review; Low Income Home Energy Assistance Program (LIHEAP) Performance Data Form (OMB #0970-0449) The Administration for Children and Families (ACF) is requesting reinstatement of the Low Income Home Energy Assistance Program (LIHEAP) Performance Data Form (Office of Management and Budget (OMB) #0970-0449, expiration date March 31, 2021) with changes. Changes include additional reporting items to collect Module 2 (Performance Measures) data on the impacts of supplemental federal LIHEAP funds, and other minor changes to the most recent version of this form.	Comments due within 30 days of publication. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the Federal Register . Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.	https://www.federalregister.gov/documents/2021/12/16/2021-27777/submission-for-omb-review-low-income-home-energy-assistance-program-liheap-performance-data-form-omb?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
182	Notice	Administration for Community Living, HHS	86 FR 71506	Published 12/16/20121	Agency Information Collection Activities; Submission for OMB Review; Public Comment Request: National Center on Law and Elder Rights-Resource Support and User Satisfaction; OMB# 0985-0060	The Administration for Community Living (ACL) is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under section 506(c)(2)(A) of the Paperwork Reduction Act of 1995. This 30-Day notice collects comments on the information collection requirements related to the information collection requirements for the National Center on Law and Elder Rights-Resource Support and User Satisfaction (OMB# 0985-0060).	Submit written comments on the collection of information by January 18, 2022. https://www.federalregister.gov/documents/2021/12/16/2021-27258/agency-information-collection-activities-submission-for-omb-review-public-comment-request-national?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
183	Notice	Health Resource and Service Administration (HRSA), HHS	86 FR 71508	Published 12/16/2021	Meeting of the Advisory Committee on Training and Primary Care Medicine and Dentistry; In accordance with the Federal Advisory Committee Act, this notice announces that the Advisory Committee on Training and Primary Care Medicine and Dentistry (ACTPCMD) will hold public meetings for the 2022 calendar year (CY). Information about ACTPCMD, agendas, and materials for these meetings can be found on the ACTPCMD website at https://www.hrsa.gov/advisory-committees/primary care-dentist/index.html.	Members of the public will have the opportunity to provide comments. Public participants may submit written statements in advance of the scheduled meeting(s). Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to submit a written statement or make oral comments to the ACTPCMD should be sent to Shane Rogers using the contact information above at least 5 business days before the meeting date(s). Individuals who need special assistance or another reasonable accommodation should notify Shane Rogers using the contact information listed above at least 10 business days before the meeting(s) they wish to attend.	ACTPCMD meetings will be held on: February 17, 2022, 10:00 a.m.-5:00 p.m. Eastern Time (ET) and February 18, 2022, 10:00 a.m.-2:00 p.m. ET; and August 2, 2022, 10:00 a.m.-5:00 p.m. ET Shane Rogers, Designated Federal Official, Division of Medicine and Dentistry, Bureau of Health Workforce, HRSA, 5600 Fishers Lane, Room 15N142, Rockville, Maryland 20857; 301-443-5260; or SRogers@hrsa.gov . https://www.federalregister.gov/documents/2021/12/16/2021-27262/meeting-of-the-advisory-committee-on-training-and-primary-care-medicine-and-dentistry?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
184	Executive Order	Executive Office of the President	86 FR 71357	Published 12/16/2021	Transforming Federal Customer Experience and Service Delivery To Rebuild Trust in Government	Purpose. Our Government must recommit to being "of the people, by the people, [and] for the people" in order to solve the complex 21st century challenges our Nation faces. Government must be held accountable for designing and delivering services with a focus on the actual experience of the people whom it is meant to serve. Government must also work to deliver services more equitably and effectively, especially for those who have been historically underserved. Strengthening the democratic process requires providing direct lines of feedback and mechanisms for engaging the American people in the design and improvement of Federal Government programs, processes, and services.	Federal Register :: Transforming Federal Customer Experience and Service Delivery To Rebuild Trust in Government
185	Notice	Department of Veteran Affairs (VA)	86 FR 72687	Published 12/22/2021	Advisory Committee on Tribal and Indian Affairs will virtually meet on January 25, 26, and 27, 2022 to advise the Secretary on all matters relating to Indian Tribes, Tribal organizations, Native Hawaiian Organizations, and Native American Veterans.	This includes advising the Secretary on the administration of healthcare services and benefits to American Indians and Alaska Native Veterans; thereby assessing those needs and whether VA is meeting them. The Advisory Committee on Tribal and Indian Affairs is a newly formed FACA Committee. The Committee provides advice and guidance to the Secretary of Veterans Affairs on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans.	These meeting sessions are open to the public. To access the meetings, please use the following registration link: https://www.zoomgov.com/meeting/register/vJItcOZhpzMsGRdbmWEES3GwBmE2tJMryBU . Participants need to register for the meeting then will receive a link to access it each day. January 25, 2022:1:00 p.m.-5:00 p.m. Eastern Standard Time (EST). January 26, 2022:1:00 p.m.-5:00 p.m. EST. January 27, 2022:1:00 p.m.-5:00 p.m. EST. https://www.federalregister.gov/documents/2021/12/22/2021-27640/advisory-committee-on-tribal-and-indian-affairs-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
186	Rule	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	86 FR 72531	Published 12/22/2021	Medicare and Medicaid Programs; CY 2022 Home Health Prospective Payment System Rate Update; Home Health Value-Based Purchasing Model Requirements and Model Expansion; Home Health and Other Quality Reporting Program Requirements; Home Infusion Therapy Services Requirements; Survey and Enforcement Requirements for Hospice Programs; Medicare Provider Enrollment Requirements; and COVID-19 Reporting Requirements for Long-Term Care Facilities; Correction	This document corrects technical and typographical errors that appeared in the final rule published in the Federal Register on November 9, 2021 titled "Medicare and Medicaid Programs; CY 2022 Home Health Prospective Payment System Rate Update; Home Health Value-Based Purchasing Model Requirements and Model Expansion; Home Health and Other Quality Reporting Program Requirements; Home Infusion Therapy Services Requirements; Survey and Enforcement Requirements for Hospice Programs; Medicare Provider Enrollment Requirements; and COVID-19 Reporting Requirements for Long-Term Care Facilities".	This correcting document is effective January 1, 2022. https://www.federalregister.gov/documents/2021/12/22/2021-27568/medicare-and-medicaid-programs-cy-2022-home-health-prospective-payment-system-rate-update-home?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
187	Notice, correction	IHS, Department of Health and Human Services	86 FR 72985	Published 12/23/2021	Substance abuse and suicide prevention program; suicide prevention, intervention, and postvention; correction	The Indian Health Service published a Notice of Funding Opportunity in the Federal Register of November 4, 2021, for the Suicide Prevention, Intervention, and Postvention grant program. The notice was missing a section in the description of the required Project Narrative that applicants must submit with their application. The Project Narrative will have a fourth section added, Statement of Need, and the page limit for the Project Narrative will increase from 15 to 17 pages.	Federal Register :: Substance Abuse and Suicide Prevention Program; Suicide Prevention, Intervention, and Postvention; Correction
188	Notice, correction	IHS, Department of Health and Human Services	86 FR 72986	Published 12/23/2021	Substance Abuse and Suicide Prevention Program; Substance Abuse Prevention, Treatment, and Aftercare; Correction	The Indian Health Service published a Notice of Funding Opportunity in the Federal Register of November 4, 2021, for the Substance Abuse Prevention, Treatment, and Aftercare grant program. The notice was missing a section in the description of the required Project Narrative that applicants must submit with their application. The Project Narrative will have a fourth section added, Statement of Need, and the page limit for the Project Narrative increased from 15 to 17 pages.	Federal Register :: Substance Abuse and Suicide Prevention Program; Substance Abuse Prevention, Treatment, and Aftercare; Correction
189	Notice	Department of Veteran Affairs (VA)	86 FR 73412	Published 12/27/2021	Reimbursement for Caskets and Urns for Burial of Unclaimed Remains in a National Cemetery or a VA-Funded State or Tribal Veterans' Cemetery	The Department of Veterans Affairs (VA) is updating the monetary reimbursement rates for caskets and urns purchased for interment in a VA national cemetery or a VA-funded state or tribal veterans' cemetery of veterans who die with no known next of kin and where there are insufficient resources for furnishing a burial container. The purpose of this notice is to notify interested parties of the rates that will apply to reimbursement claims that occur during calendar year (CY) 2022.	This notice is effective January 1, 2022. https://www.federalregister.gov/documents/2021/12/27/2021-27947/reimbursement-for-caskets-and-urns-for-burial-of-unclaimed-remains-in-a-national-cemetery-or-a?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
190	Rule	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	86 FR 73157	Published 12/27/2021	Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; Provider and Supplier Prepayment and Post-Payment Medical Review Requirements; Correction	This document corrects technical errors that appeared in the final rule published in the Federal Register on November 19, 2021 entitled "Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; and Provider and Supplier Prepayment and Post-Payment Medical Review Requirements" (referred to hereafter as the "CY 2022 PFS final rule"). The effective date of the CY 2022 PFS final rule is January 1, 2022.	This correction is effective January 1, 2022. https://www.federalregister.gov/documents/2021/12/27/2021-27853/medicare-program-cy-2022-payment-policies-under-the-physician-fee-schedule-and-other-changes-to-part?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
191	Notice	Bureau of Indian Education, Interior	86 FR 73799	Published 12/28/2022	Agency Information Collection Activities; Tribal Colleges and Universities CARES Act and CRRSA Act Report	Invite the public and other Federal agencies to comment on new, proposed, revised, and continuing collections of information. This helps us assess the impact of our information collection requirements and minimize the public's reporting burden. It also helps the public understand our information collection requirements and provide the requested data in the desired format. We are especially interested in public comment addressing the following: (1) Whether or not the collection of information is necessary for the proper performance of the functions of the agency, including whether or not the information will have practical utility; (2) The accuracy of our estimate of the burden for this collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) How might the agency minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of response.	Interested persons are invited to submit comments on or before February 28, 2022. Send your comments on this information collection request (ICR) by mail to Steven Mullen, Information Collection Clearance Officer, Office of Regulatory Affairs and Collaborative Action—Indian Affairs, U.S. Department of the Interior, 1001 Indian School Road NW, Suite 229, Albuquerque, New Mexico 87104; or by email to comments@bia.gov. Please reference OMB Control Number 1076-NEW in the subject line of your comments. https://www.federalregister.gov/documents/2021/12/28/2021-28113/agency-information-collection-activities-tribal-colleges-and-universities-cares-act-and-crrsa-act?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
192	Notice	Centers for Disease Control and Prevention, HHS	86 FR 74417	Published 12/30/2021	National Committee on Vital and Health Statistics will be holding an advisory committee meeting.	As outlined in its Charter, the National Committee on Vital and Health Statistics assists and advises the Secretary of HHS on health data, data standards, statistics, privacy, national health information policy, and the Department's strategy to best address those issues. This includes the adoption and implementation of transaction standards, unique identifiers, operating rules and code sets adopted under the Health Insurance and Portability Act of this meeting, the Committee will receive updates from HHS officials, hold discussions on current health data policy topics, and discuss its work plan for the upcoming period.	This meeting will be held Monday, January 24, 2022 at 10:30 am - 5:30 pm EST and Tuesday, January 25, 2022 at 10:00 am - 4:30 pm EST The public is welcome to obtain the link to attend this meeting by following the instructions that will be posted on the website prior to the meeting at: https://ncvhs.hhs.gov/ https://www.federalregister.gov/documents/2021/12/30/2021-28341/national-committee-on-vital-and-health-statistics?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
193	Proposed Rule	CMS, HHS	87 FR 584	Published 01/05/2022	Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2023 Request for Comments	This proposed rule includes proposed payment parameters and provisions related to the risk adjustment and risk adjustment data validation programs, as well as proposed 2023 user fee rates for issuers offering qualified health plans (QHPs) through federally-facilitated Exchanges and State-based Exchanges on the Federal platform. This proposed rule also proposes requirements related to prohibiting discrimination based on sexual orientation and gender identity; guaranteed availability; the offering of QHP standardized options through Exchanges on the Federal platform; requirements for agents, brokers, web-brokers, and issuers assisting consumers with enrollment through Exchanges that use the Federal platform; verification standards related to employer sponsored coverage; Exchange eligibility determinations during a benefit year; special enrollment period verification; cost-sharing requirements; Essential Health Benefits (EHBs); Actuarial Value (AV); QHP issuer quality improvement strategies; accounting for quality improvement activity (QIA) expenses and provider incentives for medical loss ratio (MLR) reporting and rebate calculation purposes; re-enrollment, and requirements related to a new State Exchange improper payment measurement program. This proposed rule also seeks comment on how HHS can advance health equity through QHP certification standards and otherwise in the individual and group health insurance markets, and how HHS might address plan choice overload in the Exchanges	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on January 27, 2022. https://www.federalregister.gov/documents/2022/01/05/2021-28317/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2023?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
194	Notice	Office of Assistant Secretary for Public and Indian Housing, Department of Housing and Urban Development (HUD)	87 FR 473	Published 01/05/2022	Regulatory and Administrative Requirement Flexibilities Available to Native American Programs During CY 2022 and CY 2023 to Tribal Grantees To Assist With Recovery and Relief Efforts on Behalf of Families Affected by Presidentially Declared Disasters	This notification advises the public of waivers and flexibilities from HUD requirements for its Indian Housing Block Grant (IHBG), Indian Community Development Block Grant (ICDBG), and Native Hawaiian Housing Block Grant (NHHBG) grantees located in areas that are covered by Presidentially Declared Disasters (PDDs). A PDD is a major disaster or emergency declared under the Robert T. Stafford Disaster Relief and Emergency Assistance Act that activates an array of federal programs to assist.	Federal Register :: Regulatory and Administrative Requirement Flexibilities Available to Native American Programs During CY 2022 and CY 2023 to Tribal Grantees To Assist With Recovery and Relief Efforts on Behalf of Families Affected by Presidentially Declared Disasters
195	Notice	Office of Assistant Secretary for Public and Indian Housing, Department of Housing and Urban Development (HUD)	87 FR 469	Published 01/05/2022	Regulatory and Administrative Requirement Waivers and Flexibilities Available to HUD Public Housing and Section 8 During CY 2022 and CY 2023 to Public Housing Agencies To Assist With Recovery and Relief Efforts on Behalf of Families Affected by Presidentially Declared Disasters	This notification advises the public of HUD's expedited process for waivers and flexibilities from HUD regulatory and administrative requirements ("HUD requirements") during Presidentially Declared Disasters (PDDs). To respond to PDDs, this notice establishes an expedited process for the review of waiver requests and flexibilities for calendar years (CY) 2022 and 2023, for Public Housing Agencies (PHAs) located within PDDs (PDD PHAs). PDD PHAs may make such requests utilizing the expedited process set forth in this notification.	Federal Register :: Regulatory and Administrative Requirement Waivers and Flexibilities Available to HUD Public Housing and Section 8 During CY 2022 and CY 2023 to Public Housing Agencies To Assist With Recovery and Relief Efforts on Behalf of Families Affected by Presidentially Declared Disasters

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
196	Bill	Tribal Medical Supplies Stockpile Access Act	N/A	Published 01/04/2022	Sen. Warren and Reps. Gallego and Cole Reintroduce Bicameral Bill to Guarantee Tribal Health Authorities Access to the Strategic National Stockpile Indian Health Service and other tribal health organizations currently lack guaranteed, direct access to federal repository of drugs and medical supplies for emergencies; Legislation would allow the Indian Health Service, tribal health authorities, and urban Indian organizations to access the Strategic National Stockpile and help combat the coronavirus crisis	United States Senator Elizabeth Warren (D-Mass.) and Representatives Ruben Gallego (D-Ariz.) and Tom Cole (R-Okla.) today reintroduced the Tribal Medical Supplies Stockpile Access Act, legislation originally introduced in 2020 that would guarantee that the Indian Health Service (IHS), tribal health authorities, and urban Indian organizations have access to the Strategic National Stockpile (SNS), a federal repository of drugs and medical supplies that can be tapped if a public health emergency could exhaust local supplies. The Tribal Medical Supplies Stockpile Access Act is supported by the National Indian Health Board, the National Congress of American Indians, the National Council of Urban Indian Health, United South and Eastern Tribes Sovereignty Protection Fund, Seattle Indian Health Board, and the Friends Committee on National Legislation.	Sen. Warren and Reps. Gallego and Cole Reintroduce Bicameral Bill to Guarantee Tribal Health Authorities Access to the Strategic National Stockpile	U.S. Senator Elizabeth Warren of Massachusetts (senate.gov)
197	Notice	Office of Minority Health, Office of the Secretary, Department of Health and Human Services	87 FR 1153	Published 1/10/2022	Extension of the Deadline for Nomination of Delegates; Center for Indigenous Innovation and Health Equity Tribal Advisory Committee; Solicitation of Nominations for Delegates	On October 1, 2021, the U.S. Department of Health and Human Services (HHS) Office of Minority Health (OMH) published a notice in the Federal Register inviting nominations of qualified candidates to serve as delegates for the Center for Indigenous Innovation and Health Equity Tribal Advisory Committee (Center TAC, previously referred to as CIIHE TAC), including a submission deadline of October 29, 2021. An extension for the submission deadline of nominations to January 7, 2022, was published on November 19, 2021. This notice extends the deadline date for submission of nominations to March 11, 2022, at 11:59 p.m. EST.	Nomination letters for the Center TAC must be sent to: All nominations should be emailed to: Violet Woo, Designated Federal Officer for the Center TAC, at Violet.Woo@hhs.gov . Please use the subject line "OMH Center Tribal Advisory Committee."no later than 11:59 p.m. EST on March 11, 2022 https://www.federalregister.gov/documents/2022/01/10/2022-00218/extension-of-the-deadline-for-nomination-of-delegates-center-for-indigenous-innovation-and-health?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
198	Notice	Indian Health Service	86 FR 1154	Published 1/10/2022	Urban Indian Education and Research Program	The Indian Health Service (IHS) is accepting applications for cooperative agreements for the Urban Indian Education and Research Organization Program. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and Section 301(a) of the Public Health Service Act, 42 U.S.C. 241(a). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.193. One award will be issued under this program announcement. The total funding identified for fiscal year (FY) 2022 is approximately $1,050,000. Award amount for the first budget year is anticipated to be $1,050,000. The funding available for competing and subsequent continuation awards issued under this announcement is subject to the availability of appropriations and budgetary priorities of the Agency. The IHS is under no obligation to make awards that are selected for funding under this announcement.	Federal Register :: Urban Indian Education and Research Program
199	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS)	87 FR 1842	Published 1/12/2022	Medicare Program; Contract Year 2023 Policy and Technical Changes to the Medicare Advantage and Medicare Prescription Drug Benefit Programs	This proposed rule would revise the Medicare Advantage (MA) (Part C) program and Medicare Prescription Drug Benefit (Part D) program regulations to implement changes related to marketing and communications, past performance, Star Ratings, network adequacy, medical loss ratio reporting, special requirements during disasters or public emergencies, and pharmacy price concessions. This proposed rule would also revise regulations related to dual eligible special needs plans (D-SNPs), other special needs plans, and cost contract plans.	To be assured consideration, comments must be received at one of the addresses provided below, by March 7, 2022. https://www.federalregister.gov/documents/2022/01/12/2022-00117/medicare-program-contract-year-2023-policy-and-technical-changes-to-the-medicare-advantage-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
200	Final Rule	IHS, Department of Health and Human Services	87 FR 2067	Published 1/13/2022	Acquisition Regulations: Buy Indian Act; Procedures for Contracting	The Secretary of the Department of Health and Human Services (HHS) is finalizing regulations guiding implementation of the Buy Indian Act, which provides the Indian Health Service (IHS) with authority to set-aside procurement contracts for Indian-owned and controlled businesses. This rule supplements the Federal Acquisition Regulations (FAR) and the Department of Health and Human Services Acquisition Regulations (HHSAR). This rule supplements the FAR and the HHSAR. This rule formalizes an administrative procedure for all IHS acquisition activities and locations to ensure uniformity for offers submitted by Indian labor and industry under solicitations set-aside under the Buy Indian Act and this part.	This rule is effective March 14, 2022 https://www.federalregister.gov/documents/2022/01/13/2021-28156/acquisition-regulations-buy-indian-act-procedures-for-contracting
201	DUILL	IHS, Department of Health and Human Services	N/A	Published 1/14/2022	IHS Urban Emergency Fund (UEF) The UEF is a limited, discretionary allocation managed by the IHS Office of Urban Indian Health Programs (OUIHP) to address some of the one-time, non-recurring emergencies and disaster relief efforts taken by Urban Indian Organizations (as defined by 25 U.S.C. § 1603(29)). Each fiscal year, the OUIHP allocates up to $200,000 to the UEF. Funding is not guaranteed and is subject to the availability of appropriations.	To be eligible for the UEF, n Urban Indian Organization (UIO) must have a contract with the IHS pursuant to 25 U.S.C. § 1653. For purposes of accessing the UEF, an emergency is defined as a sudden, urgent, usually unexpected occurrence or occasion that requires immediate action to avoid imminent or substantial endangerment to public health or safety. These funds are not intended for administration, maintenance, ongoing operations, construction, or for any other purpose that is unrelated to an emergency or disaster relief effort by a UIO. To make a request for the UEF, a UIO must submit a written request to the applicable IHS Area Director, with copies to the Area Chief Contracting Officer and the UIO's Contracting Officer Representative, as soon as reasonably practicable after the emergency situation.	If you have any questions, please contact Mr. Rick Mueller, Deputy Director, OUIHP, IHS, by telephone at (301) 443-3787, or by e-mail at rick.mueller@ihs.gov . https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DUIOILL_01142022.pdf
202	Notice	National Council on Disability	87 FR 2638	Published 1/18/2022	The Members of the National Council on Disability (NCD) will hold a quarterly business meeting on Thursday, January 27, 2022, 12:00 p.m.-4:00 p.m., Eastern Standard Time (EST). The Chairman and Executive Committee will provide reports; followed by a summary of NCD's Health Equity framework and a vote; an update on policy projects and themes work; a community presentation; a presentation of virtual curriculum on disability culture and inclusive storytelling; legislative and public affairs updates; a public comment session focused on home- and community-based services (HCBS) and transitions from congregate settings; an update and training for the Council Members and staff by NCD's administrative, finance, and operations team; and any old or new business before adjourning.	NCD will designate its half hour of public comment exclusively for receiving information for its upcoming project that examines the state of the nation's home- and community-based services (HCBS) prior to and during the COVID-19 pandemic that contributed to the inability of residents with ID/DD to transition to lesser-density community housing options and resulted in widespread deaths. In order to develop NCD's recommendations to policymakers, NCD invites you share your insights in response to the following questions: 1. What federal and policy state levers hold the greatest potential to transition people out of congregate care facilities? 2. What funding streams have you seen or do you think could be effective in bolstering or building up HCBS? 3. What pilots pilot programs have you observed that offer potentially positive solutions to many of the barriers encountered by people trying to acquire HCBS and what others do you think are needed?	To provide comments or notice to present public comment, please send an email to PublicComment@ncd.gov with the subject line "Public Comment" and your name, organization, state, and topic of comment included in the body of your email. Submission should be received no later than January 26 to ensure inclusion. https://www.federalregister.gov/documents/2022/01/18/2022-00969/sunshine-act-meetings?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
203	Notice	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 2613	Published 1/18/2022	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public.	Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments must be received by March 21, 2022 https://www.federalregister.gov/documents/2022/01/18/2022-00735/agency-information-collection-activities-proposed-collection-comment-request?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
204	Notice	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 2614	Published 1/18/2022	This notice announces the next meeting of the APOE (the Panel) in accordance with the Federal Advisory Committee Act. The Panel advises and makes recommendations to the Secretary of the U.S. Department of Health and Human Services (HHS) (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on opportunities to enhance the effectiveness of consumer education strategies concerning the Health Insurance Marketplace®, Medicare, Medicaid, and the Children's Health Insurance Program (CHIP). This meeting is open to the public.	The agenda for the February 3, 2022 meeting will include the following: - welcome and listening session with CMS leadership - recap of previous September 15, 2021 meeting - CMS programs, initiatives, and priorities - an opportunity for public comment - meeting summary, review of recommendations, next steps	Persons wishing to attend this meeting must register at the website https://www.eventbrite.com/e/apoe-february-3-2022-virtual-meeting-tickets-212590763697 https://www.federalregister.gov/documents/2022/01/18/2022-00745/announcement-of-the-advisory-panel-on-outreach-and-education-apoe-february-3-2022-virtual-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
205	Notice	Health Resources and Services Administration (HRSA), HHS	87 FR 2800	Published 1/19/2022	this notice announces that the Advisory Committee on Heritable Disorders in Newborns and Children (ACHDNC or Committee) has scheduled a public meeting to be held on Thursday, February 10, 2022, and Friday, February 11, 2022. Information about the ACHDNC and the agenda for this meeting can be found on the ACHDNC website at https://www.hrsa.gov/advisory-committees/heritable-disorders/index.html.	During the February 10-11, 2022 meeting, ACHDNC will hear from experts in the fields of public health, medicine, heritable disorders, rare disorders, and newborn screening. Agenda items include the following: (1) Final evidence-based review report on the Mucopolysaccharidosis type II (MPS II) condition nomination for possible inclusion on the RUSP. Following this report, the ACHDNC expects to vote on whether to recommend to the Secretary adding MPS II to the RUSP. (2) A presentation on phase two of the evidence-based review for Guanidinoacetate methyltransferase (GAMT) deficiency. (3) An update on the Krabbe disease condition nomination. (4) A possible vote on whether to move Krabbe disease forward to full evidence-based review. (5) Overview of ACHDNC consumer-friendly resources. (6) A presentation on healthy equity in newborn screening.	Thursday, February 10, 2022, from 10:00 a.m.-3:00 p.m. Eastern Time (ET) and Friday, February 11, 2022, from 10 a.m.-2:30 p.m. ET. Please visit the ACHDNC website for information on registration: https://www.hrsa.gov/advisory-committees/heritable-disorders/index.html. the deadline for registration is 12:00 p.m. ET on February 9, 2022. Instructions on how to access the meeting via webcast will be provided upon registration.
206	Notice	Substance Abuse and Mental Health Services Administration (SAMSA), HHS	87 FR 2882	Published 1/19/2022	Agency Information Collection Activities; Submission for OMB Review; Comment Request The Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Prevention (SAMHSA/CSAP) is requesting a reinstatement from the Office of Management and Budget (OMB) of information collection regarding the Assessment of Communities Talk to Prevent Underage Drinking, which is implemented by the Underage Drinking Prevention Education Initiatives (UADPEI) within CSAP.	Comments are invited on: (a) Whether the proposed collections of information are necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.	Send comments to Carlos Graham, SAMHSA Reports Clearance Officer, 5600 Fisher Lane, Room 15E57-A, Rockville, MD 20852 OR email him a copy at carlos.graham@samhsa.hhs.gov. Written comments should be received by March 21, 2022. https://www.federalregister.gov/documents/2022/01/19/2022-00860/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
207	Notice	Office of Infectious Disease and HIV/AIDS Policy, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	87 FR 3316	Published 1/21/2022	As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) will hold a virtual meeting. The meeting will be open to the public and public comment will be heard during the meeting.	Members of the public will have the opportunity to provide comment at the NVAC meeting during the public comment period designated on the agenda. Public comments made during the meeting will be limited to three minutes per person to ensure time is allotted for all those wishing to speak. Individuals are also welcome to submit written comments in advance. Written comments should not exceed three pages in length. Individuals submitting comments should email their written comments or their request to provide a comment during the meeting to nvac@hhs.gov at least five business days prior to the meeting.	The meeting will be held February 10-11, 2022. The confirmed meeting times and agenda will be posted on the NVAC website at http:// www.hhs.gov/nvpo/nvac/meetings/index.html as soon as they become available https://www.federalregister.gov/documents/2022/01/21/2022-01101/meeting-of-the-national-vaccine-advisory-committee
208	Notice	Centers for Medicare & Medicaid Services, HHS	87 FR 3301	Published 1/21/2022	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action.	Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments must be received by March 22, 2022. https://www.federalregister.gov/documents/2022/01/21/2022-01183/agency-information-collection-activities-proposed-collection-comment-request

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
209	Notice	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	87 FR 3314	Published 1/21/2022	The National Advisory Committee on Children and Disasters (NACCD or the Committee) is required by section 2811A of the PHS Act as amended by the Pandemic and All Hazards Preparedness and Advancing Innovation Act (PAHPAIA) and governed by the provisions of the Federal Advisory Committee Act (FACA). The NACCD shall evaluate issues and programs and provide findings, advice, and recommendations to the Secretary of HHS to support and enhance all-hazards public health and medical preparedness, response, and recovery aimed at meeting the unique needs of children and their families across the entire spectrum of their wellbeing. The Secretary of HHS has formally delegated authority to operate the NACCD to ASPR	The NACCD invites those who are involved in or represent a relevant industry, academia, health profession, health care consumer organization, or state, Tribal, territorial or local government to request up to four minutes to address the committee in person via Zoom. Requests to provide remarks to the NACCD during the public meeting must be sent to NACCD@hhs.gov at least 15 days prior to the meeting along with a brief description of the topic. We would specifically like to request inputs from the public on challenges, opportunities, and strategic priorities for national public health and medical preparedness, response and recovery specific to the needs of children and their families in disasters. Presenters who are selected for the public meeting will have audio only for up to four minutes during the meeting.	The NACCD will conduct an inaugural public meeting (virtual) on February 17, 2022. The new advisory committee will be sworn in along with the presentation and discussion of challenges, opportunities, and priorities for national public health and medical preparedness, response and recovery, specific to the needs of children and their families in disasters. A more detailed agenda and meeting registration link will be available on the NACCD meeting website https://www.phe.gov/Preparedness/legal/boards/naccd/Pages/default.aspx. https://www.federalregister.gov/documents/2022/01/21/2022-01161/national-advisory-committee-on-children-and-disasters?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
210	Notice	Health Resources and Services Administration (HRSA); Department of Health and Human Services	87 FR 3313	Published FR 1/21/2022	Collection: Public Comment Request: Maternal and Child Health Bureau Performance Measures for Discretionary Grant Information System	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.	Comments on this ICR should be received no later than March 22, 2022. https://www.federalregister.gov/documents/2022/01/21/2022-01114/agency-information-collection-activities-proposed-collection-public-comment-request-maternal-and?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
211	Notice, update	HHS	87 FR 3315	Published 1/21/2022	Annual Update of the HHS Poverty Guidelines	This notice provides an update of the Department of Health and Human Services (HHS) poverty guidelines to account for last calendar year's increase in prices as measured by the Consumer Price Index.	Effective January 12, 2022 unless an office administering a program using the guidelines specifies a different effective date for that particular program. https://www.federalregister.gov/documents/2022/01/21/2022-01166/annual-update-of-the-hhs-poverty-guidelines?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
212	Notice and request for comments; request for extension of approval	Indian Health Services (IHS)	87 FR 3562	Published 1/24/2022	Request for Public Comment: 60-Day Information Collection: Indian Health Service Purchased/Referred Care Proof of Residency (OMB No. 0917-0040)	Indian Health Service (IHS) invites the general public to take this opportunity to comment on the information collection Office of Management and Budget (OMB) Control Number 0917-0040, titled, Purchased/Referred Care Proof of Residency. The purpose of this notice is to allow 60 days for public comment. A copy of the supporting statement is available at www.regulations.gov (see Docket ID: IHS_FRDOC_0001). written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the agency processes the information collected in a useful and timely fashion; (c) the accuracy of the public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimates are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.	Deadline for Comments: March 25, 2022. Your comments regarding this information collection are best assured of having full effect if received within 60 days of the date of this publication. https://www.federalregister.gov/documents/2022/01/24/2022-01250/request-for-public-comment-60-day-information-collection-indian-health-service-purchased-referred?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
213	Notice with Comment Period	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	87 FR 3545	Published 1/24/2022	This notice invites comment on a proposed information collection project titled Data Collection for the Residential Care Community and Adult Day Services Center Components of the National Post-Acute and Long-Term Care Study.	The purpose is to collect data for the residential care community and adult day services center components for the 2022 wave of the National Post-Acute and Long-Term Care Study. The OMB is particularly interested in comments that will help: 1. Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; 2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; 3. Enhance the quality, utility, and clarity of the information to be collected; 4. Minimize the burden of the collection of information on those who respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submissions of responses; and 5. Assess information collection costs.	Written comments must be received on or before March 25, 2022. https://www.federalregister.gov/documents/2022/01/24/2022-01264/proposed-data-collections-submitted-for-public-comment-and-recommendations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
214	Proposed Rule, Request for Information	Office of the National Coordinator for Health IT, HHS	87 FR 3475	Published 1/24/2022	This request for information seeks input from the public regarding electronic prior authorization standards, implementation specifications, and certification criteria that could be adopted within the ONC Health IT Certification Program. Responses to this Request for Information will be used to inform potential future rulemaking.	We are seeking comment on functional capabilities for electronic prior authorization that should be considered for inclusion in certified health IT. Specifically we are seeking comment on a core set of capabilities that would enable a certified Health IT Module or Modules to: Identify when prior authorization is applicable for an item or service, using clinical decision support and/or user input, and for receiving notifications of changes in such applicability; Query a payer API for prior authorization requirements for each item and service and identify in real time specific rules and documentation requirements; Collect clinical and administrative documentation needed to complete prior authorization documentation (electronic forms or templates) from a health IT system; Electronically submit completed documentation for prior authorization to a payer's API, along with supporting information; Receive a response from a payer regarding approval, denial (including a reason for denial), or need for additional information;	To be assured consideration, written or electronic comments must be received at one of the addresses provided below, no later than 5 p.m. on March 25, 2022. https://www.federalregister.gov/documents/2022/01/24/2022-01309/request-for-information-electronic-prior-authorization-standards-implementation-specifications-and
215	Notice and Request for Public Comment	Administration for Native Americans, Administration for Children and Families, Department of HHS	87 FR 3562	Published 1/24/2022	Proposed Information Collection Activity; Administration for Native Americans Project Outcome Assessment Survey; (OMB #0970-0379) Respondents: Tribal Governments, Native American nonprofit organizations, and Tribal Colleges and Universities.	ACF is requesting a 3-year extension of the form Administration for Native Americans (ANA) Project Outcome Assessment Survey (OMB #0970-0379, expiration 6/30/2022). There are minor updates and changes requested to the form. The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Comments due within 60 days of publication. https://www.federalregister.gov/documents/2022/01/24/2022-01286/proposed-information-collection-activity-administration-for-native-americans-project-outcome?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
216	Notice	Office of the Assistant Secretary for Public Indian Housing (PIH), Department of Housing and Urban Development (HUD)	87 FR 3570	Published 1/25/2022	This notice implements and provides guidance on the provisions of the Fostering Stable Housing Opportunities (FSHO) amendments that are effective through the publication of this notice. This notice also identifies the provisions of FSHO that were effective upon enactment (i.e., December 27, 2020) or otherwise already in effect and advises of actions that may or must be taken now to comply with the changes. Additionally, this notice identifies the provisions of FSHO that require further action from HUD to be implemented. Through this notice, HUD also seeks public comment on certain provisions of FSHO. However, HUD welcomes public comment on any of this notice's provisions.	HUD also seeks public comment on certain provisions of FSHO. Specifically, HUD seeks public comment on the provisions of FSHO related to participation in an FSS program and engagement in education, workforce development, and employment activities and has included specific questions for public comment in each of these sections. While this notice implements these provisions, HUD is seeking public comment in order to determine whether future changes are necessary. HUD also welcomes public comment on any of the other provisions of this notice. QUESTIONS FOR COMMENT: 1. In order to receive an extension of FUP/YFF assistance, should the cut-off for requiring a youth to enroll in the FSS program be the 36-month mark or is a different cut-off more appropriate based on the requirements of the FSS program? 2. Should HUD establish a minimum number of classes or credits that a youth must be enrolled in or a minimum number of hours that a youth must work in order to receive an extension of FUP/YFF assistance under this provision? 3. Should HUD establish a maximum number of classes or credits or a maximum number of work hours that a PHA may require in order for a youth to receive an extension of FUP/YFF assistance under this provision?	Effective date of amendments in Section III of this notice: April 25, 2022. Comment due date: March 25, 2022. https://www.federalregister.gov/documents/2022/01/24/2022-01285/implementation-of-the-fostering-stable-housing-opportunities-amendments?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
217	Notice, Funding Announcement	Indian Health Service (IHS)	87 FR 3819	Published 1/25/2022	IHS is accepting applications for grants for the Tribal Management Grant Program (TMG)	The TMG Program is a competitive grant program that is capacity building and developmental in nature and has been available for federally recognized Indian Tribes and Tribal Organizations (T/TO) since shortly after enactment of the ISDEAA in 1975. The TMG Program was established to assist T/TOs to prepare for assuming all or part of existing IHS programs, functions, services, and activities (PFSAs) and further develop and improve Tribal health management capabilities. The TMG Program provides competitive grants to T/TOs to establish goals and performance measures for current health programs, assess current management capacity to determine if new components are appropriate, analyze programs to determine if a T/TO's management is practicable, and develop infrastructure systems to manage or organize PFSAs. NOTE: UIOs are not eligible for this grant	Application Deadline Date: April 25, 2022. Earliest Anticipated Start Date: June 9, 2022. https://www.federalregister.gov/documents/2022/01/25/2022-01322/tribal-management-grant-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
218	Notice, request for comment	Centers for Medicare & Medicaid Services, HHS	87 FR4031	Published 1/26/2022	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public.	Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments on the collection(s) of information must be received by the OMB desk officer by February 25, 2022. Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain . https://www.federalregister.gov/documents/2022/01/26/2022-01495/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
219	Notice, Request for public comment	Office on Trafficking in Persons; Administration for Children and Families; HHS	87 FR 4033	Published 1/26/2022	The Administration for Children and Families (ACF), Office on Trafficking in Persons (OTP), is requesting a 3-year extension of the Request for Certification of Adult Victims of Human Trafficking (RFC) form (Office of Management and Budget (OMB) #: 0970-0454, expiration 2/28/22). Minor revisions have been made to the form, including the addition of a few fields that will enable OTP to be more responsive to congressional inquiries, federal reporting requirements, and the needs of victims.	OTP developed a form for potential victims and their advocates, including case managers, attorneys, law enforcement officers, service providers, and other representatives to provide the required information for certification to HHS in accordance with the TVPA of 2000, as amended. Respondents: Potential victims of a severe form of trafficking in persons and their advocates, including case managers, attorneys, law enforcement officers, service providers, and other representatives.	Comments due within 30 days of publication. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the Federal Register . Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Comments due February 25, 2022. https://www.federalregister.gov/documents/2022/01/26/2022-01524/submission-for-omb-review-request-for-certification-of-adult-victims-of-human-trafficking?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
220	Notice, Press Release	CMS	N/A	Published 1/27/2022	CMS Commits Over $49 Million to Reduce Uninsured Rate Among Children and Boost Medicaid Enrollment Among Parents, Pregnant People	UIOs are eligible! Awardees—including state/local governments, tribal organizations, federal health safety net organizations, non-profits, schools, and others—will receive up to $1.5 million each for a three-year period to reduce the number of uninsured children by advancing Medicaid/CHIP enrollment and retention. Supporting President Joe Biden's 2021 Executive Order on Strengthening Medicaid and the Affordable Care Act, this notice of funding opportunity leverages the Connecting Kids to Coverage program to continue making health care more accessible and affordable. Funded organizations will provide enrollment and renewal assistance to children and their families, as well as pregnant people—a new optional target population in this year's award announcement.	Applications will be accepted through March 28, 2022. https://www.cms.gov/newsroom/press-releases/cms-commits-over-49-million-reduce-uninsured-rate-among-children-and-boost-medicaid-enrollment-among For more information, visit https://www.grants.gov/web/grants/view-opportunity.html?oppId=337485
221	Final Rule	Department of the Treasury	87 FR 4338	Published 1/27/2022	Coronavirus State and Local Fiscal Recovery Funds	The Secretary of the Treasury (Treasury) is adopting as final the interim final rule published on May 17, 2021, with amendments. This rule implements the Coronavirus State Fiscal Recovery Fund and the Coronavirus Local Fiscal Recovery Fund established under the American Rescue Plan Act. The final rule provides broader flexibility and greater simplicity in the program, in response to public comments. Among other clarifications and changes, the final rule provides for the following: - Public Health and Negative Economic Impacts - Premium Pay - Revenue Loss - Water, Sewer, and Broadband Infrastructure	The provisions in this final rule are effective April 1, 2022. https://www.federalregister.gov/documents/2022/01/27/2022-00292/coronavirus-state-and-local-fiscal-recovery-funds?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
222	Notice	Bureau of Indian Affairs, Interior	87 FR 4636	Published 1/28/2022	Indian Entities Recognized by and Eligible To Receive Services From the United States Bureau of Indian Affairs	This notice publishes the current list of 574 tribal entities recognized by and eligible for funding and services from the Bureau of Indian Affairs (BIA) by virtue of their status as Indian tribes. The list is updated from the notice published on January 29, 2021 (86 FR 7554) and from the notice published of corrections (tribal name changes) on April 9, 2021 (86 FR 18552).	Federal Register :: Indian Entities Recognized by and Eligible To Receive Services From the United States Bureau of Indian Affairs
223	Notice, Request for public comment	Administration for Children and Families	87 FR 5823	Published 02/02/2022	Submission for OMB Review; Tribal Maternal, Infant, and Early Childhood Home Visiting Program Form 1: Demographic and Service Utilization Data	The Administration for Children and Families (ACF), Office of Child Care (OCC) is requesting a 3-year extension of the Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program's Form 1: Demographic and Service Utilization Data (OMB #0970-0389; expiration 6/30/2022). There are minor updates to the existing Form 1. Respondents: Tribal MIECHV Program Grantees. Section 511(h)(2)(A) of Title V of the Social Security Act created the MIECHV Program and authorizes the Secretary of HHS to award grants to Indian tribes (or a consortium of Indian tribes), tribal organizations, or **urban indian organizations** to conduct an early childhood home visiting program. The legislation set aside 3 percent of the total MIECHV program appropriation for grants to tribal entities. Tribal MIECHV grants, to the greatest extent practicable, are to be consistent with the requirements of the MIECHV grants to states and jurisdictions and include conducting a needs assessment and establishing quantifiable, measurable benchmarks.	Comments due within 30 days of publication. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the Federal Register . Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. https://www.federalregister.gov/documents/2022/02/02/2022-02157/submission-for-omb-review-tribal-maternal-infant-and-early-childhood-home-visiting-program-form-1?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
224	Notice	CMS	CMS Media Inquiry	Published 2/2/2022	CMS Releases 2023 Medicare Advantage and Part D Advance Notice, Agency seeks input on promoting health equity in Medicare Advantage and Part D plans	the Centers for Medicare & Medicaid Services (CMS) released proposed payment policy changes for Medicare Advantage and Part D drug programs in 2023 that will create more choices and provide affordable options for consumers that meet their unique health needs. The Calendar Year (CY) 2023 Advance Notice for Medicare Advantage (MA) and Part D plans is open to public comment for 30 days. This year, CMS is specifically soliciting input through a health equity lens on the approach to some future potential changes.	Public comments on the Advance Notice must be submitted by March 4, 2022. The Medicare Advantage and Part D payment policies for 2023 will be finalized in the 2023 Rate Announcement, which will be published no later than April 4, 2022. https://www.cms.gov/files/document/2023-advance-notice.pdf
225	Notice of meeting	Bureau of Indian Affairs, Interior	87 FR 6196	Published 2/3/2022	Advisory Board of Exceptional Children will hold a two-day online meeting.	he purpose of the meeting is to meet the mandates of the Individuals with Disabilities Education Act of 2004 (IDEA) for Indian children with disabilities. Agenda available here: https://www.federalregister.gov/documents/2022/02/03/2022-02163/advisory-board-of-exceptional-children?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email	The BIE Advisory Board meeting will be held Wednesday, March 9, 2022, from 8:00 a.m. to 4:00 p.m., Mountain Standard Time (MST) and Thursday, March 10, 2022, from 8:00 a.m. to 4:00 p.m., Mountain Standard Time (MST). https://www.federalregister.gov/documents/2022/02/03/2022-02163/advisory-board-of-exceptional-children?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
226	Notice	Centers for Disease Control and Prevention (CDC), HHS	87 FR 6563	Published 2/4/2022	Announcement of Requirements and Registration for the REACH Lark Galloway-Gilliam Nomination for Advancing Health Equity Challenge (REACH Lark Award Challenge)	The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces the 2022 Racial and Ethnic Approaches to Community Health (REACH) Lark Galloway-Gilliam for Advancing Health Equity Award Challenge (REACH Lark Award Challenge). This biennial challenge was established in 2019 to recognize extraordinary individuals, organizations, or community coalitions associated with the REACH program whose work has contributed to the implementation of culturally tailored interventions that advance health equity, reduce health disparities, and increase community engagement to address preventable risk factors (e.g., tobacco use, poor nutrition, physical inactivity, and inadequate access to clinical services).	The Challenge will accept applications from February 7, 2022 through March 18, 2022. https://www.federalregister.gov/documents/2022/02/04/2022-02409/announcement-of-requirements-and-registration-for-the-reach-lark-galloway-gilliam-nomination-for?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email for more information: https://www.cdc.gov/nccdphp/dnpao/state-local-programs/reach/index.htm
227	Proposed Rule	Department of Veterans Affairs	87 FR 6456	Published 2/4/2022	VA Pilot Program on Graduate Medical Education and Residency	The Department of Veterans Affairs proposes to revise its medical regulations to establish a new pilot program on graduate medical education and residency, as required by section 403 of the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Internal Systems and Strengthening Integrated Outside Network Act of 2018. Proposed § 17.243(a) would establish that proposed §§ 17.243 through 17.248 would implement the VA Pilot Program on Graduate Medical Education and Residency (PPGMER) to place residents in existing or new residency programs in covered facilities and to reimburse certain costs associated with establishing new residency programs in covered facilities, as authorized by section 403 of Public Law 115-182.	Comments must be received on or before July 5, 2022 https://www.federalregister.gov/documents/2022/02/04/2022-02292/va-pilot-program-on-graduate-medical-education-and-residency?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
228	Final Rule	Rural Housing Service, USDA	87 FR 6761	Published 2/07/2022	Direct Single Family Housing Loans and Grants Programs	The Rural Housing Service (RHS or Agency), a Rural Development agency of the United States Department of Agriculture (USDA), is issuing a final rule to amend its Direct Single Family Housing Loans and Grants (DSFHLG) programs regulation. This final rule adopts most changes as presented in the proposed rule published on November 25, 2019. In the Federal Register , this final rule also addresses public comments received by the Agency and makes some modifications based on consideration of those comments, including revisions to the refinancing provisions which will help provide relief to homeowners who have difficulty keeping their accounts current (e.g., coming off a payment moratorium), based on the availability of funds and Agency priorities. The purpose of the DSFHLG programs is to assist low-and very-low-income applicants to obtain decent, safe, and sanitary single-family housing in eligible rural areas.	Effective on March 9, 2022 https://www.federalregister.gov/documents/2022/02/07/2022-02470/direct-single-family-housing-loans-and-grants-programs?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
229	Notice	Office of the Secretary, Interior	87 FR 7201	Published 2/8/2022	List of Programs Eligible for Inclusion in Funding Agreements Negotiated With Self-Governance Tribes by Interior Bureaus Other Than the Bureau of Indian Affairs and Fiscal Year 2022 Programmatic Targets	This notice lists programs or portions of programs that are eligible for inclusion in self-governance funding agreements with Indian Tribes and lists Fiscal Year 2022 programmatic targets for each of the non-Bureau of Indian Affairs (BIA) bureaus in the Department of the Interior (Department), pursuant to Title IV of the Indian Self-Determination and Education Assistance Act (Act), as amended.	These programs are eligible for inclusion in self-governance funding agreements until September 30, 2022. https://www.federalregister.gov/documents/2022/02/08/2022-02584/list-of-programs-eligible-for-inclusion-in-funding-agreements-negotiated-with-self-governance-tribes?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
230	Notice with Comment Period	Centers for Disease Control and Prevention (CDC), HHS	87 FR 7838	Published 2/10/2022	Proposed 2022 CDC Clinical Practice Guideline for Prescribing Opioids	The clinical practice guideline includes recommendations for primary care clinicians (including physicians, nurse practitioners, and physician assistants) as well as for outpatient clinicians in other specialties (including those managing dental and postsurgical pain in outpatient settings and emergency clinicians providing pain management for patients being discharged from emergency departments). This voluntary clinical practice guideline provides recommendations and does not require mandatory compliance; and the clinical practice guideline is intended to be flexible so as to support, not supplant, clinical judgment and individualized, patient-centered decision-making.	Written comments must be received on or before April 11, 2022. https://www.federalregister.gov/documents/2022/02/10/2022-02802/proposed-2022-cdc-clinical-practice-guideline-for-prescribing-opioids?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
231	Rule	CMS, HHS	87 FR 7746	Published 2/10/2022	Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; Provider and Supplier Prepayment and Post-Payment Medical Review Requirements; Corrections	In the November 19, 2021 issue of the Federal Register , we published a final rule entitled "Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; and Provider and Supplier Prepayment and Post-Payment Medical Review Requirements" (referred to hereafter as the "CY 2022 PFS final rule"). The effective date was January 1, 2022. This document corrects a limited number of technical and typographical errors identified in the November 19, 2021 final rule	This document is effective February 10, 2022, and is applicable beginning January 1, 2022.
232	Notice	Community Development Financial Institutions Fund	87 FR 8197	Published 2/11/2022	Notice of Funds Availability (NOFA) inviting Applications for Financial Assistance (FA) awards or Technical Assistance (TA) grants under the Native American CDFI Assistance (NACA Program) fiscal year (FY) 2022 Funding Round.	Through the NACA Program, the Community Development Financial Institutions (CDFI) Fund provides (i) FA awards of up to $1 million to Certified Community Development Financial Institutions (CDFIs) serving Native American, Alaska Native, or Native Hawaiian populations or Native American areas defined as Federally-designated reservations, Hawaiian homelands, Alaska Native Villages and U.S. Census Bureau-designated Tribal Statistical Areas (collectively, "Native Communities") to build their financial capacity to lend to Eligible Markets and/or their Target Markets, and (ii) TA grants of up to $150,000 to build Certified, and Emerging CDFIs' organizational capacity to serve Eligible Markets and/or their Target Markets, and Sponsoring Entities' ability to create Certified CDFIs that serve Native Communities. All awards provided through this NOFA are subject to funding availability.	Federal Register :: Notice of Funds Availability
233	Notice, Request for Public Comment	IHS, Department of Health and Human Services	87 FR 8020	Published 2/11/2022	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, "Urban Indian Organization On-Site Review." Office of Management and Budget (OMB) Control Number 0917-0XXX. IHS is requesting OMB to approve a new collection.	Urban Indian Organization On-Site Review . Need and Use of Information Collection: The Office of Urban Indian Health Programs (OUIHP) at IHS Headquarters provides national oversight of the annual on-site reviews. The IHS Urban Indian Organization On-Site Review is conducted annually by the IHS Area Offices to evaluate IHS-funded Urban Indian Organizations compliance with Federal Acquisition Regulation (FAR) contractual requirements and grant requirements established through the IHCIA. The on-site review requirements are based on best-practice standards for delivering safe and high quality health care. Agency Form Number: none. Members of Affected Public: IHS-funded Urban Indian Organizations. Status of the Proposed Information Collection: new.	Comment due date: April 12, 2022 https://www.federalregister.gov/documents/2022/02/11/2022-02969/request-for-public-comment-60-day-information-collection-urban-indian-organization-on-site-review?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
234	Notice of meeting	Substance Abuse and Mental Health Services Administration (SAMSA), HHS	87 FR 8025	Published 2/11/2022	Meeting of the Substance Abuse and Mental Health Services Administration National Advisory Council	Notice is hereby given for the meeting on March 24, 2022 of the Substance Abuse and Mental Health Services Administration National Advisory Council (SAMHSA NAC). The meeting is open to the public and can only be accessed virtually. Agenda with call-in information will be posted on the SAMHSA website prior to the meeting at: https://www.samhsa.gov/about-us/advisory-councils/meetings. The meeting will include, but not be limited to, remarks from the Assistant Secretary for Mental Health and Substance Use; approval of prior meeting minutes; updates on SAMHSA priorities; follow up on topics related to the previous SAMHSA NAC meeting; and council discussions.	March 24, 2022 1:00 pm - 5:00 pm EST https://www.federalregister.gov/documents/2022/02/11/2022-02900/meeting-of-the-substance-abuse-and-mental-health-services-administration-national-advisory-council?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
235	Notice	Health Resource and Service Administration (HRSA), HHS	87 FR 8265	Published 2/14/2022	Meeting of the Advisory Committee on Infant and Maternal Mortality 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.	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. The agenda for the March 15-16, 2022, meeting is being finalized and may include the following topics: Federal program updates; COVID-19 updates; race-concordant care; health of indigenous mothers and babies; and, the impact of violence on infant and maternal mortality. Agenda items are subject to change as priorities dictate. Refer to the ACIMM website listed above for any updated information concerning the meeting.	March 15, 2022, 12:00 p.m. to 4:00 p.m. Eastern Time and March 16, 2022, 12:00 p.m. to 4:00 p.m. Eastern Time. https://www.federalregister.gov/documents/2022/02/14/2022-03027/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
236	Notice of request for nominations	Bureau of Indian Affairs, Interior	87 FR 8284	Published 2/14/2022	Request for nominations of members to serve on the Bureau of Indian Education Advisory Board for Exceptional Children	There will be three positions available to specifically serve in the areas of Indian parents or guardians of children with disabilities within the BIE school system or Indian persons with disabilities. Board members shall serve a staggered term of two years or three years from the date of their appointment. The BIE will consider nominations received in response to this request for nominations, as well as other sources.	Please submit nominations by April 15, 2022.
237	Final Rule	Federal Communications Commission	87 FR 8346	Published 2/14/2022	Affordable Connectivity Program; Emergency Broadband Benefit Program	The Federal Communications Commission (Commission or FCC) adopts final rules for the Affordable Connectivity Program, established by Congress in the Infrastructure Investment and Jobs Act (Infrastructure Act). The Affordable Connectivity Program is designed to make broadband service and connected devices available to eligible low-income households at affordable, discounted prices from providers that opt to participate in the program. The rules adopted in the Report and Order address, inter alia, the eligibility criteria for broadband service providers that opt to participate in the program, eligibility criteria for households that seek benefits, the types of broadband services and connected devices that will be covered, the amounts of reimbursements available to providers, claims procedures, consumer protection requirements, and reporting, auditing, enforcement, and related matters.	Effective March 16, 2022, except for 47 CFR 54.1802(b), 54.1804, 54.1807(b), 54.1808(c)(1) and (2), 54.1809(c), and 54.1810(a) and (b), which are effective April 15, 2022. https://www.federalregister.gov/documents/2022/02/14/2022-02887/affordable-connectivity-program-emergency-broadband-benefit-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
238	Notice of Tribal Consultation	Department of Veteran Affairs (VA)	87 FR 8342	Published 2/14/2022	Department of Veterans Affairs' Tribal Representation Expansion Project	The Department of Veterans Affairs (VA) is seeking Tribal consultation on "The Tribal Representation Expansion Project (T. REP)", a project through which VA strives to ensure that Native American Veterans have access to responsible, qualified representation in the preparation, presentation, and prosecution of their benefit claims before VA. VA is seeking comments on whether Tribal communities currently have access to representation for VA benefit claims and, for those Tribes that are being underserved in terms of representation, whether the Tribal governments may be interested in collaborating with VA to designate an individual within the community as authorized to prepare, present, and prosecute VA benefit claims. In addition, VA is seeking comments and recommendations on any issues, concerns, or processes the Tribes believe should be addressed in T. REP to better ensure that the project is successful in helping to expand access to representation for Native American Veterans on their benefit claims before VA.	VA will hold the virtual tribal consultation session on March 23, 2022, from 3:00-5:00 p.m. (Eastern Time). Written comments may also be submitted to VA on or before March 30, 2022. Participants can access the virtual consultation session by registering through the following link: https://veteransaffairs.webex.com/veteransaffairs/onstage/g.php?MTID=e6a07b7d9c8f8a27c4c390e0c732ee1eb https://www.federalregister.gov/documents/2022/02/14/2022-03084/department-of-veterans-affairs-tribal-representation-expansion-project?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
239	Notice for Virtual Meeting	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	87 FR 8851	Published 2/16/2022	Meeting of the Presidential Advisory Council on HIV/AIDS	As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will be holding the 73rd full Council meeting utilizing virtual technology on Monday, March 14 and Tuesday, March 15, 2022 from approximately 10:00-4:30 p.m. (ET) on both days. The meeting will be open to the public and there will be an interactive community engagement session during the first day of the meeting. Additionally, there will be a public comment session during the meeting; pre-registration is required to provide public comment.	To pre-register to provide public comment, please send an email to PACHA@hhs.gov and include your name, organization, and title by close of business Monday, March 7, 2022. If you decide you would like to provide public comment but do not pre-register, you may submit your written statement by emailing PACHA@hhs.gov by close of business Tuesday, March, 22, 2022. The meeting agenda will be posted on the PACHA page on HIV.gov at https://www.hiv.gov/federal-response/pacha/about-pacha prior to the meeting. The meeting will be held on Monday, March 14 and Tuesday March 15, 2022 from approximately 10:00-4:30 p.m. (ET) on both days. https://www.federalregister.gov/documents/2022/02/16/2022-03353/meeting-of-the-presidential-advisory-council-on-hiv-aids?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
240	Notice of Funding Opportunity	Federal Transit Administration (FTA), Department of Transportation (DOT)	87 FR 8923	Published 2/16/2022	FY 2022 Competitive Funding Opportunity; Public Transportation on Indian Reservations Program; Tribal Transit Program	The Federal Transit Administration (FTA) announces the opportunity to apply for $8.75 million in competitive grants for the Fiscal Year (FY) 2022 Public Transportation on Indian Reservations (Tribal Transit) Program. As required by Federal public transportation law, funds will be awarded competitively for any purpose eligible under FTA's Formula Grants for Rural Areas Program, including planning, capital, and operating assistance for tribal public transit services in rural areas. FTA may award additional funding that is made available to the program prior to the announcement of project selections. Eligible applicants include federally recognized Indian tribes or Alaska Native villages, groups, or communities as identified by the U.S. Department of the Interior (DOI) Bureau of Indian Affairs (BIA). To be an eligible recipient, an Indian tribe must have the requisite legal, financial, and technical capabilities to receive and administer Federal funds under this program. Additionally, applicants must be located and provide service in a rural area with a population of less than 50,000. A service area can include some portions of urban areas (as identified in the most recent decennial census), so long as rural areas are also served.	Complete proposals must be submitted electronically through the GRANTS.GOV "APPLY" function by 11:59 p.m. Eastern time on May 25, 2022. Any applicant intending to apply should initiate the process of registering on the GRANTS.GOV site immediately to ensure completion of registration before the submission deadline. Instructions for applying can be found on FTA's website at http://www.transit.dot.gov/how-to-apply and in the "FIND" module of GRANTS.GOV. https://www.federalregister.gov/documents/2022/02/16/2022-03341/fy-2022-competitive-funding-opportunity-public-transportation-on-indian-reservations-program-tribal?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
241	Notice	Food and Drug Administration, Department of Health and Human Services	87 FR 9057	Published 2/17/2022	Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Class II Special Controls for Human Immunodeficiency Virus Serological Diagnostic and Supplemental Tests and Human Immunodeficiency Virus Nucleic Acid Diagnostic and Supplemental Tests	The Food and Drug Administration (FDA, Agency, or we) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995	Submit written comments (including recommendations) on the collection of information by March 21, 2022 https://www.federalregister.gov/documents/2022/02/17/2022-03437/agency-information-collection-activities-submission-for-office-of-management-and-budget-review?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list.
242	Proposed Rule - Notification of Tribal consultation session	Bureau of Indian Affairs, Interior	87 FR 8994	Published 2/17/2022	Notice of Consultations on Appeals From Administrative Actions	Indian Affairs will conduct consultation sessions with federally recognized Tribes to obtain oral and written comments concerning appeals from administrative actions. This proposed rule, among other things, aims to: Reflect changes in Indian Affairs organization that have occurred in the 30 years since the regulations were last updated; clarify how to administratively appeal actions from each Indian Affairs official; allow for more expedited reviews of requests to compel action by an Indian Affairs official; and add provisions to allow for administrative appeals of Statements of Performance issued by the Bureau of Trust Funds Administration. Additional information may be found at https://www.bia.gov/tribal-consultations/25-cfr-part-2-administrative-appeals.	Tribes are also invited to submit written input by 11:59 p.m. Eastern Time, Thursday, March 24, 2022. https://www.federalregister.gov/documents/2022/02/17/2022-03466/notice-of-consultations-on-appeals-from-administrative-actions?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
243	Notice Request for public comment	Office of Community Services, Administration for Children and Families, HHS	87 FR 9364	Published 2/18/2022	Submission for OMB Review; Office of Community Services Data Collection for the Low Income Household Water Assistance Program Reports (0970-0578)	requesting an extension of approval for an information request to collect data from Low Income Household Water Assistance Program (LIHWAP) grant recipients. This information collection was originally approved for 6 months as an emergency approval. OCS is proposing revisions to the information collection based on feedback received to date. The LIHWAP Annual Report collects data in three distinct modules: (1) Use of Funds, (2) Household Report, (3) Performance Measures.	Comments due within 30 days of publication. OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the Federal Register . Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. https://www.federalregister.gov/documents/2022/02/18/2022-03610/submission-for-omb-review-office-of-community-services-data-collection-for-the-low-income-household?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
244	DUILL	IHS, Department of Health and Human Services	N/A	Published 2/22/22	IHS Health Information Technology Modernization Acquisition Status and Introduction to Modernization Focus Groups - Virtual meeting on 3/10/2022 - 2-3 pm EST.	During this event the IHS will provide a status update on the acquisition process for solutions to replace the Resource and Patient Management System. We will also discuss opportunities for Tribes and Urban Indian Organizations to participate in HIT Modernization governance by contributing expertise to focus groups whose members will inform key aspects of the overall modernization approach.	Date: Thursday, March 10, 2022 Time: 2:00 p.m. - 3:30 p.m. (Eastern Time) Registration link: https://www.zoomgov.com/meeting/register/vJIsfuuqjjgoGKQTWvUgXpCYFTovL-nu0V1 I invite you to submit written comments on HIT Modernization following the March 10, 2022, session by E-MAIL to consultation@ihs.gov or urbanconfer@ihs.gov , respectively. Please use the SUBJECT LINE: HIT-Modernization. Please provide written comments by April 10, 2022 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTUI-OLL_02222022.pdf
245	Notice, request for comment	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	87 FR 10367	Published 2/24/2022	Agency Information Collection Activities; Proposals, Submissions, and Approvals: Medicaid and Children's Health Insurance Program	For the purposes of this RFI, CMS views the continuum of health care access across three dimensions: (1) enrollment in coverage; (2) maintaining coverage; and (3) access to services and supports (figure 1). Within each of these dimensions, accompanying regulatory, monitoring, or compliance actions may be needed in order to ensure access to health care is achieved and maintained. For access to services and supports, CMS intends to assess multiple domains of access that span: (1) potential access (provider availability and accessibility); (2) beneficiary utilization (realized access and access-related outcomes); and (3) beneficiaries' perceptions and experiences with care	Request for Information (quatrics.com)
246	Notice	Federal Emergency Management Agency, DHS	87 FR 10805	Published 2/25/2022	Hazard Mitigation Assistance: Building Resilient Infrastructure and Communities	This policy describes a new hazard mitigation grant program to assist States, territories, Tribes, and local governments with mitigating the impacts of natural hazards, including those created, aggravated, or amplified by climate change. The new program is funded by a FEMA 6 percent set aside of estimated disaster expenses for each major disaster, supersedes the Pre-Disaster Mitigation grant program, and promotes a national culture of preparedness through encouraging investments to protect communities and infrastructure by increasing pre-disaster hazard mitigation and strengthening national resilience.	This policy is effective April 26, 2022. https://www.federalregister.gov/documents/2022/02/25/2022-04041/hazard-mitigation-assistance-building-resilient-infrastructure-and-communities?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
247	Notice, Request for public comment	Administration for Native Americans, Administration for Children and Families, Department of HHS	87 FR 10796	Published 2/25/2022	Submission for OMB Review; Administration for Native Americans Annual Data Report (ADR)	The Administration for Children and Families' (ACF) Administration for Native Americans (ANA) is requesting a 2-year extension to the following information collection: Annual Data Report (ADR) (OMB# 0970-0473; expiration date: 2/28/2022). There are no changes requested to the form. ANA collects the information in the ADR on an annual basis to monitor the performance of grantees and better gauge grantee progress. The majority of grantees submit this information through the On-going Progress Report (OMB# 0970-0452), but there is a subset of about 80 grantees who still use the ADR and will continue to use the ADR through the end of their grants.	Federal Register :: Submission for OMB Review; Administration for Native Americans Annual Data Report (ADR)
248	Notice	National Park Service, Interior	87 FR 11088	Published 2/28/2022	Notice of Intent To Repatriate Cultural Items: U.S. Department of the Interior, Bureau of Indian Affairs, Washington, DC, and Pueblo Grande Museum, City of Phoenix, AZ	Lineal descendants or representatives of any Indian Tribe or Native Hawaiian organization not identified in this notice that wish to claim these cultural items should submit a written request to the BIA through PGM, if no additional claimants come forward, transfer of control of the cultural items to the lineal descendants, Indian Tribes, or Native Hawaiian organizations stated in this notice may proceed.	Lineal descendants or representatives of any Indian Tribe or Native Hawaiian organization not identified in this notice that wish to claim these cultural items should submit a written request with information in support of the claim to the BIA through PGM at the address in this notice by March 30, 2022. https://www.federalregister.gov/documents/2022/02/28/2022-04109/notice-of-intent-to-repatriate-cultural-items-us-department-of-the-interior-bureau-of-indian-affairs?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
249	Final Rule	Rural Housing Service, USDA	87 FR 11275	Published 3/1/2022	Multi-Family Housing (MFH) Direct Loan Program	The Rural Housing Service (RHS or Agency), an agency in the United States Department of Agriculture (USDA) Rural Development Mission area, published a proposed rule in the Federal Register on September 23, 2020, to amend its regulations for the Multi-Family Housing Direct Loans and Grants Programs to implement changes related to the development of a sustainable plan for the Rental Assistance (RA) program. Through this action, RHS is adopting the changes as proposed. The regulation updates are intended to provide additional RA program flexibility and transparency, and to improve the efficiency of managing assets in the Direct Loan portfolio.	The final rule is effective March 31, 2022. https://www.federalregister.gov/documents/2022/03/01/2022-03837/multi-family-housing-mfh-direct-loan-programs?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
250	Notice, request for nominations	Centers for Medicare & Medicaid Services, HHS	87 FR 11448	Published 3/1/2022	Medicare Program; Request for Nominations for Members for the Medicare Evidence Development & Coverage Advisory Committee	This notice announces the request for nominations for membership on the Medicare Evidence Development & Coverage Advisory Committee (MEDCAC). Among other duties, the MEDCAC provides advice and guidance to the Secretary of the Department of Health and Human Services (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) concerning the adequacy of scientific evidence available to CMS in making coverage determinations under the Medicare program. The MEDCAC's fundamental purpose is to support the principles of an evidence-based determination process for Medicare's coverage policies. MEDCAC panels provide advice to CMS on the strength of the evidence available for specific medical treatments and technologies through a public, participatory, and accountable process.	Nominations must be received by Monday, March 28, 2022. https://www.federalregister.gov/documents/2022/03/01/2022-04382/medicare-program;request-for-nominations-for-members-for-the-medicare-evidence-development-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
251	Notice and request for comment	Department of Health and Human Services, Office of the Secretary, Office of the Assistant Secretary for Health, Office of Infectious Disease and HIV/AIDS Policy.	87 FR 11724	Published 3/2/2022	Meeting of the Vaccines Federal Implementation Plan	The Department of Health and Human Services' Office of Infectious Disease and HIV/AIDS Policy in the Office of the Assistant Secretary for Health announces that the draft Vaccines Federal Implementation Plan 2021-2025 is available for public comment. The Vaccines Federal Implementation Plan is a companion document to the Vaccines National Strategic Plan 2021-2025 (VNSP), which was published in January 2021. The Vaccines Federal Implementation Plan is a compilation of federal agency immunization activities that collectively advance the goals of the VNSP. Its target audience is other federal agencies and external partners who work in the area of vaccination. The public will be interested in how the implementation plan documents federal agency efforts. It does not outline mandates or other COVID-19 response measures.	The public comment period for the Vaccines Federal Implementation Plan starts on February 28, 2022 at 9 a.m. ET and ends on March 29, 2022 at 5 p.m. ET. All comments must be received by 5 p.m. ET on March 29, 2022 to be considered. https://www.federalregister.gov/documents/2022/03/02/2022-04327/meeting-of-the-vaccines-federal-implementation-plan?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
252	Dear Tribal Leader Letter, Tribal Consultation, Request for Comment	White House	N/A	Published 3/4/2022	White House Office of Science and Technology Policy (OSTP) and the White House Council on Environmental Quality (CEQ) invitation to a Tribal Consultation discussing the development of Guidance for Federal Agencies on Indigenous Traditional Ecological Knowledge (ITEK)	the guidance will include best practices on collaborating with Tribal Nations and knowledge holders to achieve mutually beneficial outcomes, recommendations on how to address potential Federal barriers around working with ITEK, and advice on how to appropriately respect the knowledge holders' rights to decline invitations to collaborate	Tribal Consultation 1: Tuesday, April 5, 2022, 3:30-5:30 pm EDT Register in advance for the meeting here: https://pitc.zoomgov.com/webinar/register/WN_KMwXXWsQFyzpxyaOgxV2UQ Tribal Consultation 2: Friday, April 29, 2022, 3:00 – 5:00 pm EDT Register in advance for the meeting here: https://pitc.zoomgov.com/webinar/register/WN_NOcHbTPzTSgmhHr9eUcFA https://mcusercontent.com/fe202888bb41dd81ffc715ef4d/files/717bd364-3937-e559-e03e-75de2c0c4999/ITEK_DearTribalLeader_and_Memo.pdf
253	Notice, request for nominations	Centers for Disease Control and Prevention (CDC)	87 FR 12709	Published 3/7/2022	Solicitation of Nominations for Appointment to CDC's Advisory Committee to the Director (ACD) Health Equity Workgroup (HEW)	The HEW will consist of approximately 15 members who are experts in fields associated with health equity; public health science and practice; public health policy development, analysis, and implementation.	Nominations for membership on the HEW workgroup must be received no later than March 17, 2022. Late nominations will not be considered for membership. https://www.federalregister.gov/documents/2022/03/07/2022-04690/solicitation-of-nominations-for-appointment-to-cdcs-advisory-committee-to-the-director-acd-health?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov &utm_medium=email
254	Notice, Request for Information	Office of the Surgeon General, Department of Health and Human Services (HHS)	87 FR 12712	Published 3/7/2022	Impact of Health Misinformation in the Digital Information Environment in the United States Throughout the COVID-19 Pandemic Request for Information (RFI)	The purpose of this RFI is to understand the impact of COVID-19 misinformation on healthcare infrastructure and public health more broadly during the pandemic including (but not limited to) quality of care, health decisions and outcomes, direct and indirect costs, trust in the healthcare system and providers, and healthcare worker morale and safety, understand the unique role the information environment played in the societal response to the COVID-19 pandemic and implications for future public health emergencies, understand the impact of exposure to health misinformation and how access to trusted and credible health information, particularly during a public health emergency, impacts lifesaving health decisions such as an individual's likelihood to vaccinate; and use the information requested to prepare for and respond to future public health crises. HHS will consider the usability, applicability, and rigor of submissions in response to this RFI and share learnings from these responses with the public. Public comments and submissions will also be made available to the public and can be used for research purposes	To be assured consideration, comments must be received via the methods provided below, no later than midnight Eastern Time (ET) on May 2, 2022. Submissions received after the deadline will not be reviewed. https://www.federalregister.gov/documents/2022/03/07/2022-04777/impact-of-health-misinformation-in-the-digital-information-environment-in-the-united-states?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov &utm_medium=email
255	DTLL	Executive Office of the President, Council on Environmental Quality (CEQ)	N/A	Published 3/7/2022	CEQ is hosting Tribal consultations to seek input on the current version of CEJST, including on the datasets it includes and the methodology it uses. This feedback will help CEQ ensure that the tool reflects the environmental and climate challenges and realities that communities are experiencing. CEQ also welcomes feedback more broadly on the implementation of the Justice40 Initiative.	The Council on Environmental Quality (CEQ) invites you to participate in a Tribal consultation on the beta – or draft – version of the Climate and Economic Justice Screening Tool (CEJST) that the Council on Environmental Quality (CEQ) recently launched. How should CEQ continue to engage Tribal Nations and, more broadly, Native people on the Justice40 Initiative and the development of the CEJST?	Option 1: Thursday, April 7, 2022 4:00 pm ET – 7:00 pm ET Please register in advance at: https://pitc.zoomgov.com/webinar/register/WN_ganKZLM3Qmqj-bMNWcQ1Q Option 2: Wednesday, April 13, 2022 4:00 pm ET – 7:00 pm ET Please register in advance at: https://pitc.zoomgov.com/webinar/register/WN_MNqdmRAkTqGN1dfd0HKmaA You may also provide written comments on the beta version of the CEJST by May 11, 2022. Written comments should be sent to ej@ceq.eop.gov CEJST_Dear_Tribal_Leader_Letter_FINAL.pdf (mcusercontent.com)
256	Notice of meeting	Census Bureau, Department of Commerce	87 FR 13251	Published 3/9/2022	2020 Census Tribal Consultation; Virtual Public Meeting	The Census Bureau will conduct a tribal consultation on the next set of 2020 Census Data Products on March 24, 2022, via national webinar, and review the 2010 Demonstration Data Product—Demographic and Housing Characteristics File (DHC). The tribal consultation meeting reflects the Census Bureau's continuous commitment to strengthen nation-to-nation relationships with federally recognized tribes. The Census Bureau's procedures for outreach, notice, and consultation ensure involvement of tribes, to the extent practicable and permitted by law, before making decisions or implementing policies, rules, or programs that affect federally recognized tribal governments. These meetings are open to citizens of federally and state recognized tribes by invitation. In that regard, the Census Bureau is seeking comments on the 2010 Demonstration Data—DHC, and asking tribal governments to identify the problematic table, level of geography, and a description of the use case, along with the likely implications should the data be released as-is. Tribes will have four weeks after consultation to analyze the 2010 Demonstration Data Product—DHC.	The Census Bureau will conduct the tribal consultation webinar on Thursday, March 24, 2022, from 3:00 p.m. to 4:30 p.m. EDT. Any questions or topics to be considered in the tribal consultation meetings must be received in writing via email by Tuesday, March 22, 2022. https://www.federalregister.gov/documents/2022/03/09/2022-04924/2020-census-tribal-consultation-virtual-public-meeting?utm_source=federalregister.gov &utm_medium=email&utm_campaign=subscription+mailing+list
257	Interim Final Rule	Department of VA	87 FR 13806	Published 3/10/2022	Staff Sergeant Parker Gordon Fox Suicide Prevention Program	VA is issuing this interim final rule to implement a new authority requiring VA to implement a three-year community-based grant program to award grants to eligible entities to provide or coordinate the provision of suicide prevention services to eligible individuals and their families for the purpose of reducing veteran suicide. This rulemaking specifies grant eligibility criteria, application requirements, scoring criteria, constraints on the allocation and use of the funds, and other requirements necessary to implement this grant program.	Effective date: This interim final rule is effective on April 11, 2022. Comments: Comments must be received on or before May 9, 2022. https://www.federalregister.gov/documents/2022/03/10/2022-04477/staff-sergeant-parker-gordon-fox-suicide-prevention-grant-program?utm_source=federalregister.gov &utm_medium=email&utm_campaign=subscription+mailing+list
258	Notice, request for nominations	Administration for Community Living, HHS	87 FR 14016	Published 3/11/2022	Solicitation for Nominations to Serve on the Advisory Council to Support Grandparents Raising Grandchildren	The Advisory Council to Support Grandparents Raising Grandchildren is authorized by the Supporting Grandparents Raising Grandchildren Act (Pub. L. 115-196) of 2018. The Advisory Council identifies, promotes, coordinates, and disseminates to the public information, resources, and the best practices available to help grandparents and other older relatives both meet the needs of the children in their care; and maintain their own physical and mental health and emotional well-being. The Advisory Council is specifically directed to consider the needs of those affected by the opioid crisis, as well as the needs of members of Native American Tribes.	Nominations must be submitted electronically by 11:59 p.m., Eastern on April 11, 2022 to be considered for appointment. https://www.federalregister.gov/documents/2022/03/11/2022-05153/solicitation-for-nominations-to-serve-on-the-advisory-council-to-support-grandparents-raising?utm_source=federalregister.gov &utm_medium=email&utm_campaign=subscription+mailing+list
259	Notice, request for nominations	American Psychological Association (APA); American Academy of Pediatrics (AAP) Committee on Native American Child Health (CONACH).	N/A	N/A	APA is seeking nominees for 4 psychologists to participate in CONACH pediatric consultation visits. Self nominations for these positions will be accepted until April 4, 2022. The APA Advisory Group will meet in May 2022 to review nominations and make final selections. Appointments will be effective July 1, 2022. Psychologists are re-appointed every two years and may be appointed up to three times for a total of six years.	The APA Advisory Group consists of APA staff from multiple APA offices: Practice; Public Interest; Equity, Diversity, and Inclusion (EDI); and Advocacy; as well as representation from the Society of Indian Psychologists (SIP). Psychologists selected will also participate in the APA Advisory Group.	Nominees must submit the completed application materials to the APA Advisory Group (ohcf@apa.org) by Monday April 4, 2022. https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:820e4ab39-45d0-3773-8f44-0185fd121808#pageNum=2
260	Notice of Funding Opportunity	Substance Abuse and Mental Health Services Administration (SAMSA), HHS	87 FR14546	Published 3/15/2022	Fiscal Year (FY) 2022 Notice of Funding Opportunity	Substance Abuse and Mental Health Services Administration (SAMHSA) is supporting administrative supplements (in scope of the parent award) up to $249,999 (total costs) for the 166 CCBHC Expansion grant recipients funded in FY 2020 under the Certified Community Behavioral Health Clinic (CCBHC) Expansion (Ellie: CCBHC Expansion Grants, NOFO SM-20-012, with a project end date of April 30, 2022) to cover unanticipated costs caused by the COVID-19 pandemic or related mitigation efforts that could not have been covered by budgeting existing funds. The supplemental funding is to assist CCBHC Expansion grant recipients that had unplanned administrative, staffing, labor, and other program costs due to the COVID-19 pandemic. Assistance will only be provided to the 166 CCBHC Expansion grant recipients, funded in FY 2020 under NOFO SM-20-012, based on the receipt of a satisfactory application and associated budget that is approved by a review group.	Federal Register :: Fiscal Year (FY) 2022 Notice of Funding Opportunity (NOFO)
261	Notice	Health Resources and Services Administration (HRSA), HHS	87 FR 15254	Published 3/17/2022	Agency Information Collection Activities: Proposed Collection; Public Comment Request; The Maternal, Infant, and Early Childhood Home Visiting Program; Advancing Health Equity in Response to the COVID-19 Public Health Emergency, 0906-XXXX, New	The MIECHV Program is authorized by Social Security Act, Title V, § 511 (42 U.S.C. 711) and Congress made available supplemental appropriations to carry out the program through the American Rescue Plan Act (Pub. L. 117-2). American Rescue Plan Act funds are being used to support the MIECHV: Advancing Health Equity in Response to the COVID-19 Public Health Emergency project. The project includes five case studies to be conducted in communities across the United States. Communities will be selected based on a county level assessment of available data on social and structural determinants of health, the variation in COVID-19 patterns including disparities in key COVID-19 indicators, and the existence of MIECHV-funded local implementing agencies. The five communities will represent a mix of urban and rural counties and Tribal communities with measurable health disparities by race and ethnicity. The case studies will lead to a deeper understanding of the ways in which COVID-19 has shaped families' experiences, and the role home visiting plays (and could play) in addressing the inequities that continue to accrue from the pandemic within a community.	Comments on this IRC should be received no later than May 16, 2022 Federal Register :: Agency Information Collection Activities: Proposed Collection; Public Comment Request; The Maternal, Infant, and Early Childhood Home Visiting Program; Advancing Health Equity in Response to the COVID-19 Public Health Emergency, 0906-XXXX, New

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
262	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	87 FR 16001	Published 3/21/2022	CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHACHSPT)	In accordance with the Federal Advisory Committee Act, the CDC and the Health Resources and Services Administration (HRSA), announce the following meeting for the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHACHSPT). This meeting is open to the public, limited only by the number of audio and web conference lines (1,000 audio and web conference lines are available). Members of the public are welcome to listen to the meeting by accessing the telephone number and web conference access provided in the addresses section below. Time will be available for public comment. Matters To Be Considered: The agenda will include discussions on (1) Leveraging policy to advance HIV, STI, and viral hepatitis priorities; (2) Providing comprehensive STI services; (3) Syndemic approaches to HIV, viral hepatitis, and STI prevention; and (4) Self-testing and self-sample collection. Agenda items are subject to change as priorities dictate.	The meeting will be held on April 26, 2022, from 11:00 a.m. to 5:30 p.m., EDT; April 27, 2022, from 11:00 a.m. to 4:00 p.m., EDT; and April 28, 2022, from 10:00 a.m. to 12:00 p.m., EDT he public is welcome to submit written comments in advance of the meeting. Written comments must be submitted in writing by email to nchhstppolicy@cdc.gov with subject line "Spring CHAC Public Comment Registration" by Tuesday, April 19, 2022.
263	Notice and Request for Comment	Administration for Children and Families, HHS	87 FR 16195	Published 3/22/2022	Request for Information: Technical Assistance Needs and Priorities on Implementation and Coordination of Early Childhood Development Programs in American Indian and Alaska Native Communities	Through this Request for Information (RFI), the Administration for Children and Families (ACF), in the U.S. Department of Health and Human Services (HHS), seeks to further the development, implementation, and coordination of early childhood development programs in American Indian and Alaska Native (AI/AN) communities, by soliciting information and recommendations from a broad array of individuals and organizations with knowledge and expertise around the context and needs of tribal communities and early childhood programs. ACF will analyze information received from this RFI to support the development, improvement, and implementation of technical assistance (TA) (i.e., information, tools, training, and other supports) efforts and strategies to support tribal communities and programs in carrying out and coordinating early childhood services and initiatives.	Send comments on or before May 20, 2022. https://www.federalregister.gov/documents/2022/04/13/2022-07840/request-for-information-technical-assistance-needs-and-priorities-on-implementation-and-coordination?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
264	Notice, solicitation for proposals	Office of the Assistant Secretary, Indian Affairs, Interior (BIA)	87 FR 16481	Published 3/23/2022	Indian Business Incubators Program (IBIP) Grants Under the Native American Business Incubator Act of 2020	The Secretary of the Interior (Secretary), through the Office of Indian Economic Development (OIED), Division of Economic Development (DED), solicits proposals from eligible applicants (see Section IV. Eligibility for Funding, of this notice) to receive competitive grants to establish and operate business incubators that serve Tribal reservation communities. These grants will provide individually tailored business incubation and other business services to Native businesses and Native entrepreneurs to overcome the unique obstacles they confront and provide tools necessary to start and grow businesses that offer products and services to reservation communities.	Grant application packages must be submitted to Grants.gov no later than 5 p.m. Eastern Daylight Time, on Monday May 23, 2022. OIED will not consider proposals received after this time and date. https://www.federalregister.gov/documents/2022/03/23/2022-06077/indian-business-incubators-program-ibip-grants-under-the-native-american-business-incubator-act-of?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
265	Notice, solicitation for nominations	Department of Veterans Affairs	87 FR 16557	Published 3/23/2022	Solicitation of Nominations for Appointment to the Advisory Committee on Homeless Veterans	The Veterans Health Administration (VHA) is requesting nominations for upcoming vacancies on the Committee. The Committee is comprised of not more than 15 members. Several members may be regular Government employees, but the majority of the Committee's membership shall consist of non-Federal employees, appointed by the Secretary from the general public, serving as Special Government employees	Nominations for membership on the Committee must be received no later than 5:00 p.m. EST on April 8, 2022. https://www.federalregister.gov/documents/2022/03/23/2022-06170/solicitation-of-nominations-for-appointment-to-the-advisory-committee-on-homeless-veterans?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
266	DULL	IHS, Department of Health and Human Services	N/A	Published 3/24/2022	IHS decision on the distribution of funds for two initiatives: 1. $5 million from FY 2021 Appropriations to address Alzheimer's disease 2. $5 million in funding for "Ending the HIV Epidemic in the U.S." to support work toward the elimination of HIV and HCV in Indian Country	Pursuant to the FY 2021 Consolidated Appropriation Act, which authorizes funding for "Alzheimer's grants," the IHS will establish an Alzheimer's Grant Program to target the resources directly to Tribes, Tribal Organizations, Urban Indian Organizations, and IHS Direct Service hospitals and clinics working directly with Tribes to address Alzheimer's disease within Tribal communities. The IHS will allocate $2.6 million to award through cooperative agreements (the award mechanism used when the awarding agency is substantially involved in the recipient's program) for Tribal health programs, Urban Indian Organizations, and program awards for IHS Direct Service programs working in close collaboration with the Tribes they serve. These cooperative agreements and program awards will support awardees in developing comprehensive and sustainable approaches to addressing Alzheimer's disease and other causes of dementia, focusing on awareness, recognition, diagnosis, assessment, management, and support for caregivers. In addition, these cooperative agreements and program awards will provide greater flexibility for awardees to meet the unique needs within their communities, while also providing models and promising practices for others.	For updates on the Alzheimer's Disease initiative and the EHE initiative, please visit the IHS OCPS Division of Clinical and Community Services (DCCS) Web site at https://www.ihs.gov/dccs/. If you need additional information, please contact Marcella Ronyak, Ph.D., Director, DCCS, IHS, by e-mail, at marcella.ronyak@ihs.gov., https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DULL-DULIOLL_03242022.pdf
267	Notice, request for nominations	Housing and Urban Development (HUD)	87 FR 18807	Published 3/31/2022	Notice of intent to establish a Tribal Intergovernmental Advisory Committee	This notice seeks nominations for HUD's Tribal Intergovernmental Advisory Committee (TIAC). It provides details on who is eligible to serve on TIAC and how Tribal governments can nominate persons to serve on TIAC on their behalf. Additionally, this notice announces the structure of the TIAC, informed by Tribal feedback. To further enhance consultation and collaboration with Tribal governments, HUD is once again proposing to establish the TIAC. Several Federal agencies have established similar Tribal advisory committees. These advisory committees convene periodically during the year to exchange information with agency staff, notify Tribal leaders of activities or policies that could affect Tribes, and provide guidance on consultation. HUD has determined that a similar advisory committee would provide critical support to the Department as it formulates policies having a direct impact on Tribes/Tribally Designated Housing Entities (TDHEs). The formation of the TIAC would also assist the Department in carrying out its responsibilities under the Presidential Memorandum on Tribal Consultation and Strengthening Nation-to-Nation Relationships Because the TIAC will operate under the Tribal government statutory exemption to the Federal Advisory Committee Act (FACA) found in the Unfunded Mandates Reform Act (UMRA) of 2 U.S.C. 1534(b), HUD will not consider nominees solely representing Tribally Designated Housing Entities, state recognized Tribes, or national or regional organizations. However, HUD will consider nominations from associations that represent elected officials of Tribes who have been designated by an elected Tribal leader to participate in TIAC	Nominations for potential representatives of the TIAC are due on or before: May 31, 2022.
268	Notice with Comment Period	Centers for Disease Control and Prevention (CDC); HHS	87 FR 19516	Published 4/04/2022	CDC Recommendations for Hepatitis B Screening and Testing-United States, 2022: Request for Comment	announces the opening of a docket to obtain comment on proposed updated recommendations for hepatitis B virus (HBV) infection screening and testing (Proposed Updated Recommendations), including hepatitis B screening at least once in a lifetime for persons 18 years of age and older, using a three-test panel. The Proposed Updated Recommendations also expand existing risk-based testing recommendations to include the following populations, activities, exposures, or conditions associated with increased risk for HBV infection: Persons currently or formerly incarcerated in a jail, prison, or other detention setting; persons with a history of sexually transmitted infections or multiple sex partners; and persons with a history of hepatitis C virus infection. The Proposed Updated Recommendations are intended to inform the practices of and care by U.S. healthcare providers and are based on scientific evidence of the effectiveness and economic value of screening to diagnose current HBV infection among adults in the United States.	Written comments must be received on or before June 3, 2022. https://www.federalregister.gov/documents/2022/04/04/2022-07050/cdc-recommendations-for-hepatitis-b-screening-and-testing-united-states-2022-request-for-comment?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
269	Notice	Office of Assistant Secretary for Public and Indian Housing, Department of Housing and Urban Development (HUD)	87 FR 19522	Published 4/04/2022	Section 8 Housing Choice Vouchers: Implementation of the Housing Choice Voucher Mobility Demonstration for Awarded PHAs, Supplementary Notice for Demonstration Participants	On July 15, 2020, HUD published a notice ("Implementation Notice") implementing the Housing Choice Voucher (HCV) mobility demonstration ("demonstration") authorized by the Consolidated Appropriations Act, 2019. Through that Implementation Notice, HUD made available up to $50,000,000 to participating Public Housing Agencies ("PHAs") to implement housing mobility programs. On April 30, 2021, HUD announced its selection of PHAs that will participate in the demonstration. These PHAs will receive $45.7 million in total funding under that award. This notice supplements the July 15, 2020, notice to describe additional policies and flexibilities for PHAs selected to participate in the demonstration.	Federal Register :: Section 8 Housing Choice Vouchers: Implementation of the Housing Choice Voucher Mobility Demonstration for Awarded PHAs, Supplementary Notice for Demonstration Participants
270	Dear Tribal Leader Letter, Tribal Consultation, Request for Comment	Health and Human Services (HHS)	N/A	Published 4/4/2022	The U.S. Department of Health and Human Services (HHS or Department) is initiating Tribal Consultation related to the policy directives outlined in Executive Order (E.O.) 14053— Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People.	As the President noted in the E.O., "Native Americans face unacceptably high levels of violence, and are victims of violent crime at a rate much higher than the national average." While these instances of violence are deplorable and require a swift response, we want to focus on the root causes of violence to work towards prevention. Section 5 of the E.O. calls on the Secretary of Health and Human Services, in consultation with Tribal nations, to develop a comprehensive plan to support prevention efforts that reduce risk factors for victimization of Native Americans and increase protective factors by enhancing the delivery of services to victims, survivors, and their families and advocates	Written comments must be received by May 20, 2022. https://acrobat.adobe.com/link/track?uri=urn:aaid:scds:US:66b58c5b-a805-3d18-8c61-1b8be16b2d4f
271	Notice, request for nominations for GAO Tribal Advisory Council	U.S. Government Accountability Office (GAO)	87 FR 20404	Published 4/07/2022	Request for Nominations for a GAO Tribal Advisory Council	This notice announces the U.S. Government Accountability Office's (GAO) intention to form its first standing Tribal Advisory Council (TAC) expected to be composed of a diverse group of tribal leaders (elected or appointed by their Tribes); an elected or appointed leader of a state-recognized Tribe and/or Native Hawaiian organization; and advisors who are experts on tribal and indigenous issues. The TAC will advise GAO on vital and emerging issues affecting Tribes and Indigenous peoples for the purpose of informing GAO's strategic goals and priorities with respect to the agency's work evaluating federal programs serving Tribes and related topics. GAO is now accepting nominations for TAC appointments that will be effective in August 2022. Nominations should be sent to the email address listed below. Acknowledgement of submission will be provided within a week of submission.	Nominations should be submitted no later than May 20, 2022, to ensure adequate opportunity for review and consideration of nominees prior to appointment. https://www.federalregister.gov/documents/2022/04/07/2022-07423/gao-tribal-advisory-council
272	Notice	Centers for Disease Control and Prevention (CDC)	87 FR 19940	Published 4/07/2022	Solicitation of Nominations for Appointment to the Healthcare Infection Control Practices Advisory Committee (HICPAC)	seeking nominations for membership on the HICPAC. The HICPAC consists of 14 experts in fields including but not limited to, infectious diseases, infection prevention, healthcare epidemiology, nursing, clinical microbiology, surgery, hospitalist medicine, internal medicine, epidemiology, health policy, health services research, public health, and related medical fields. Nominations are being sought for individuals who have expertise and qualifications necessary to contribute to the accomplishments of the committee's objectives. Nominees will be selected based on expertise in the fields of infectious diseases, infection prevention, healthcare epidemiology, nursing, environmental and clinical microbiology, surgery, internal medicine, and public health. Federal employees will not be considered for membership. Members may be invited to serve for four-year terms. Selection of members is based on candidates' qualifications to contribute to the accomplishment of HICPAC objectives	Nominations for membership on the HICPAC should be received no later than September 17, 2022. Packages received after this time will not be considered for the current membership cycle. https://www.federalregister.gov/documents/2022/04/06/2022-07236/solicitation-of-nominations-for-appointment-to-the-healthcare-infection-control-practices-advisory?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
273	Notice of meeting	Veterans Affairs Department (VA)	87 FR 20034	Published 4/07/2022	Advisory Committee on Minority Veterans, Notice of Meeting	The Department of Veterans Affairs (VA) gives notice under the Federal Advisory Committee Act, 5 U.S.C. App. 2., that the Advisory Committee on Minority Veterans (ACMV) will conduct a virtual site visit on May 3-May 5, 2022, with the Phoenix VA Healthcare System, Phoenix Regional Benefits Office, and National Memorial Cemetery of Arizona via MS Teams. The purpose of the Committee is to advise the Secretary on the administration of VA benefits and services to minority Veterans; assess the needs of minority Veterans; and evaluate whether VA compensation, medical and rehabilitation services, outreach, and other programs are meeting those needs. The Committee makes recommendations to the Secretary regarding such activities. Individuals who speak are invited to submit a 1-2-page summary of their comments no later than April 26, 2022, for inclusion in the official meeting record. Members of the public may also submit written statements for the Committee's review to Mr. Dwayne E. Campbell, at Dwayne.Campbell3@va.gov . Any member of the public seeking additional information should contact Mr. Campbell or Mr. Ronald Sagudan (202) 461-6191.	Federal Register :: Advisory Committee on Minority Veterans, Notice of Meeting
274	Notice	Indian Health Service (IHS)	87 FR 20443	Published 4/07/2022	Zero Suicide Initiative Coordinating Center	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for the IHS Zero Suicide Initiative (ZSI) Coordinating Center. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1665a. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.654. The purpose of this cooperative agreement is to build capacity of ZSI projects to improve the system of care for those at risk for suicide by implementing a comprehensive, culturally informed, multi-setting approach to suicide prevention in Indian health systems. The ZSI Coordinating Center will provide technical assistance in the areas of data collection, reporting, training, resources, and implementation of the Zero Suicide approach in Indian Country. The ZSI Coordinating Center technical assistance will be framed to promote the core Seven Elements of the Zero Suicide model that was developed by the Suicide Prevention Resource Center (SPRC) at https://zerosuicide.edc.org/toolkit/zero-suicide-toolkit.	Application deadline date: July 6, 2022 Earliest anticipation start date: August 22, 2022 https://www.federalregister.gov/documents/2022/04/07/2022-07333/zero-suicide-initiative-coordinating-center?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
275	Notice	Indian Health Service (IHS), HHS	87 FR 20878	Published 4/08/2022	Reimbursement Rates for Calendar Year 2022	The Acting Director of the Indian Health Service (IHS), under the authority of sections 321(a) and 322(b) of the Public Health Service Act (42 U.S.C. 248 and 249(b)), Public Law 83-568 (42 U.S.C. 2001(a)), and the Indian Health Care Improvement Act (25 U.S.C. 1601 et seq.), has approved the following rates for inpatient and outpatient medical care provided by IHS facilities for Calendar Year 2022 for Medicare and Medicaid beneficiaries, beneficiaries of other federal programs, and for recoveries under the Federal Medical Care Recovery Act (42 U.S.C. 2651-2653). The inpatient rates for Medicare Part A are excluded from the table below. That is because Medicare inpatient payments for IHS hospital facilities are made based on the prospective payment system, or (when IHS facilities are designated as Medicare Critical Access Hospitals) on a reasonable cost basis. Since the inpatient per diem rates set forth below do not include all physician services and practitioner services, additional payment shall be available to the extent that those services are provided. Inpatient Hospital per Diem Rate (Excludes Physician/Practitioner Services) Calendar Year 2022 Lower 48 States: $4,239 Alaska: $3,583 Outpatient per Visit Rate (Excluding Medicare) Calendar Year 2022 Lower 48 States: $640 Alaska: $945 Outpatient per Visit Rate (Medicare) Calendar Year 2022 Lower 48 States: $541 Alaska: $792 Medicare Part B Inpatient Ancillary per Diem Rate Calendar Year 2022 Lower 48 States: $813 Alaska: $1,138	https://www.federalregister.gov/documents/2022/04/08/2022-07468/reimbursement-rates-for-calendar-year-2022?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
276	Final Rule	Assistant Secretary for Policy, Management and Budget, Department of the Interior (DOI)	87 FR 20761	Published 4/08/2022	Acquisition Regulations; Buy Indian Act; Procedures for Contracting	This final rule revises the Department of the Interior's regulations implementing the Buy Indian Act, which provides the Department of Interior (DOI) with authority to set aside procurement contracts for Indian-owned and controlled businesses. These revisions eliminate barriers to Indian Economic Enterprises from competing on certain construction contracts, expand Indian Economic Enterprises' ability to subcontract construction work consistent with other socio-economic set-aside programs, and give greater preference to Indian Economic Enterprises when a deviation from the Buy Indian Act is necessary, among other updates.	This rule is effective May 9, 2022 https://www.federalregister.gov/documents/2022/04/08/2022-07118/acquisition-regulations-buy-indian-act-procedures-for-contracting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
277	Notice and request for comment	Administration for Community Living, HHS	87 FR 20871	Published 4/08/2022	Agency Information Collection Activities; Proposed Collection; Comment Request; Older Americans Act, Title VI Grant Application	Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (PRA), Federal agencies are required to publish a notice in the Federal Register concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on a proposed extension without change information collection and solicits comments on the information collection requirements related to the Application for Older Americans Act, Title VI Parts A/B and C Grants.	Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by June 7, 2022. https://www.federalregister.gov/documents/2022/04/08/2022-07507/agency-information-collection-activities-proposed-collection-comment-request-older-americans-act?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
278	Executive Order	Executive Office of the President	87 FR 20995	Published 4/08/2022	Addressing the Long-Term Effects of COVID-19	My Administration has made combating the coronavirus disease 2019 (COVID-19) pandemic, and guiding the Nation through the worst public health crisis in more than a century, our top priority. When I came into office, COVID-19 was wreaking havoc on our country—closing our businesses, keeping our kids out of school, and forcing us into isolation. Today, America has the tools to protect against COVID-19 and to dramatically decrease its risks. We move towards a future in which COVID-19 does not disrupt our daily lives and is something we prevent, protect against, and treat.	https://www.federalregister.gov/documents/2022/04/08/2022-07756/addressing-the-long-term-effects-of-covid-19
279	Executive Order	Executive Office of the President	87 FR 20689	Published 4/08/2022	Continuing to strengthen Americans' Access to Affordable, Quality Health Coverage	Federal Register :: Continuing To Strengthen Americans' Access to Affordable, Quality Health Coverage	Federal Register :: Continuing To Strengthen Americans' Access to Affordable, Quality Health Coverage
280	Notice, Request for Information	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services (HHS).	87 FR 20876	Published 4/08/2022	Request for Information (RFI): 2022 HHS Environmental Justice Strategy and Implementation Plan Draft Outline	The Department of Health and Human Services (HHS) is issuing this Request for Information (RFI) to receive input from the public on HHS' draft outline to further the development of the 2022 Environmental Justice Strategy and Implementation Plan. Consistent with the policy of this administration directing HHS to make achieving environmental justice part of its mission, HHS would like to identify priority actions and strategies to best address environmental injustices and health inequities for people of color, disadvantaged, vulnerable, low-income, marginalized, and indigenous populations. With the engagement of and input from the public, the 2022 Environmental Justice Strategy and Implementation Plan will serve as a guide to confront environmental and health disparities and implement a multifaceted approach that will serve vulnerable populations and communities disproportionately impacted by environmental burdens.	To be assured consideration, comments must be received at the email address provided below, no later than midnight Eastern Time (ET) on May 19, 2022. HHS will not reply individually to responders but will consider all comments submitted by the deadline. Do not provide confidential information as comments may be published or otherwise used for agency purposes. https://www.federalregister.gov/documents/2022/04/08/2022-07514/request-for-information-rfi-2022-hhs-environmental-justice-strategy-and-implementation-plan-draft?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
281	Notice	Office of Chief Financial Officer, HUD	87 FR 21898	Published 4/13/2022	Announcement of Funding Awards	this announcement notifies the public of funding decisions made by the Department in competitions for additional funding under the Notices of Funding Opportunity (NOFOs) and Notices for the following programs: FY2020 and FY2021 HUD Community Compass Technical Assistance and Capacity Building Program, FY2021 HOPWA Permanent Supportive Renewal and Replacement Grant, FY2020 Section 4 Capacity Building Program, FY 2021 Veterans Housing Rehabilitation and Modification Pilot Program, FY2021 Fair Housing Initiatives Program (FHIP)—Education and Outreach Initiative (ECI), FY 2021 Fair Housing Initiatives Program (FHIP)—Fair Housing Organizations Initiative (FHOI), FY2021 Fair Housing Initiatives Program (FHIP)—Private Enforcement Initiative (PEI), FY 2021 Fair Housing Initiatives Program (FHIP) Education and Outreach Initiative—Tester Training (ECI-TT), FY2021 Healthy Homes Weatherization Cooperation Demonstration, FY2021 Lead Technical Studies, FY 2021 Health Homes Technical Studies, FY2020 Choice Neighborhoods Implementation Grants, FY2020 HOPE VI Main Street, FY 2020 Housing Related Hazards, FY 2021 Emergency Safety and Security, FY 2021 Emergency and Natural Disaster Receivership, FY2021 Emergency and Natural Disaster, FR Notice 2021-09 Tribal VASH Supportive Housing Renewal Funding (fiscal year 2017 appropriated funds), FY2020 Indian Housing Block Grant Competitive Program, FY2020 Tribal VASH Supportive Housing Expansion (fiscal year 2015 appropriated funds), FY2020 Jobs Plus Initiative, and FY2020 Resident Opportunity & Efficiency Service Coordinator (ROSS-SC) Grant Program.	Federal Register :: Announcement of Funding Awards
282	Final Rule	Office of Personnel Management	87 FR 21739	Published 4/13/2022	Access to Federal Employees Health Benefits (FEHB) for Employees of Certain Tribally Controlled Schools	This rule finalizes an interim rule which expanded access to enrollment in the Federal Employees Health Benefits (FEHB) Program to additional tribal employees. The Consolidated Appropriations Act, 2021 (P21 CAA) amended section 409 of the Indian Health Care Improvement Act and expanded entitlement to Indian tribes or tribal organizations carrying out programs under the Tribally Controlled Schools Act of 1988 (TCSA) to purchase coverage, rights, and benefits under the FEHB Program for their employees. This final rule adopts the interim final rule with minor clarifications. The Patient Protection and Affordable Care Act (ACA) (Pub. L. 111-148) and the Health Care and Education Reconciliation Act of 2010 (Pub. L. 111- 152), as amended extended entitlement to Indian tribes and tribal organizations carrying out programs under the Indian Self-Determination and Education Assistance Act (ISDEAA) (Pub. L. 93- 638), and **urban Indian organizations** carrying out programs under Title V of the Indian Health Care Improvement Act (IHCIA) to purchase coverage, rights, and benefits under the FEHB Program for their employees, defined in the FEHB regulations as "tribal employees."	Effective on April 13, 2022. https://www.federalregister.gov/documents/2022/04/13/2022-07802/access-to-federal-employees-health-benefits-fehb-for-employees-of-certain-tribally-controlled?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
283	Final Rule with comment period	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	87 FR 22290	Published 4/14/2022	Medicare Program; Maximum out-of-pocket (MOOP) Limits and service category cost sharing standards	This final rule with comment period (FC) will finalize the two remaining proposals from the proposed rule titled "Medicare and Medicaid Programs; Contract Year 2021 and 2022 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, Medicaid Program, Medicare Cost Plan Program, and Programs of All-Inclusive Care for the Elderly" which appeared in the Federal Register on February 18, 2020 (February 2020 proposed rule). The two proposals being finalized here from the February 2020 proposed rule include the maximum out-of-pocket (MOOP) limits for Medicare Parts A and B services and cost sharing limits for Medicare Parts A and B services, including service category cost sharing limits and per member per month actuarial equivalence cost sharing. In addition, CMS is requesting comments in section III of this FC on new or different ways to update and change cost sharing limits in future years for service categories subject to the regulations, including mental health services.	Effective date: June 13, 2022 Applicability Date: The provisions in this rule will apply to coverage beginning January 1, 2023. Comment date: To be assured consideration, comments on section III, of this FC must be received at one of the addresses provided below, by July 13, 2022.
284	Publication	u.s. Census	N/A	Published 4/14/2022	Census undercount risks funding for Native American Reservations	Census undercount risks funding for Native American reservations (cq.com)	Census undercount risks funding for Native American reservations (cq.com)
285	Proposed Rule, Request for Comments	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	87 FR 22720	Published 4/15/2022	Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities; Updates to the Quality Reporting Program and Value-Based Purchasing Program for Federal Fiscal Year 2023; Request for Information on Revising the Requirements for Long-Term Care Facilities To Establish Mandatory Minimum Staffing Levels	This proposed rule would update: Payment rates; forecast error adjustment; diagnosis code mappings; the Patient Drive Payment Model (PDPM) parity adjustment, the SNF Quality Reporting Program (QRP), SNF Value-Based Purchasing (VBP) Program. It also proposes to establish a permanent cap policy. This proposed rule also includes a request for information related to long-term care (LTC) facilities. CMS requests comments on these proposals as well as on related subjects and announces the application of a risk adjustment for the SNF Readmission Measure for COVID-19 beginning in FY 2023.	To be assured consideration, comments must be received at one of the addresses provided below, by June 10, 2022. https://www.federalregister.gov/documents/2022/04/15/2022-07906/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
286	Notice	Bureau of Indian Affairs, Interior	87 FR 22552	Published 4/15/2022	Indian Child Welfare Act; Designated Tribal Agents for Service of Notice	The regulations implementing the Indian Child Welfare Act provide that Federally recognized Indian Tribes may designate an agent other than the Tribal Chairman for service of notice of proceedings under the Act. This notice includes the current list of designated Tribal agents for service of notice.	https://www.federalregister.gov/documents/2022/04/15/2022-08077/indian-child-welfare-act-designated-tribal-agents-for-service-of-notice?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
287	Notice of Funding Opportunity	Department of Veteran Affairs (VA)	87 FR 22630	Published 4/15/2022	Funding Opportunity; Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program	The SSG Fox SPGP enables the Office of Mental Health and Suicide Prevention (OMHSP) within the Veterans Health Administration (VHA) to provide financial assistance through a 3-year community-based grant program to eligible entities to provide, or coordinate the provision of, suicide prevention services to eligible Veterans and their families. Funding offered under this Notice of Funding Opportunity (NOFO) responds to the mounting need to reach Veterans at risk for suicide in their communities. This Notice contains information concerning the SSG Fox SPGP, the application process and the amount of funding available. Awards made for suicide prevention services grants will fund operations beginning on or around September 1, 2022.	**Federal Register :: Funding Opportunity: Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program**
288	DULL	Indian Health Service (IHS)	N/A	Published 4/15/2022	Urban Confer on Special Diabetes Program for Indians (SDPI) for FY 2023	The Tribal Leaders Diabetes Committee (TLDC) recommended that Urban Confer on the SDPI for FY 2023 be conducted in all 12 IHS Areas. Once Urban Confer is complete, the TLDC will reconvene to review the input and make final national recommendations to me. I anticipate that this will occur during the next TLDC meeting in June. Fiscal Year 2023 will be the beginning of a new 3-year grant cycle for the SDPI. Accordingly, the IHS will publish a new notice of funding opportunity in the Federal Register and a grant application process will follow. Your recommendations on these questions are particularly important, as FY 2023 will provide an opportunity for changes to the SDPI.	DUI-OCL 041422-2.pdf (ihs.gov)
289	Notice of Funding Opportunity	Indian Health Service (IHS)	87 FR 22908	Published 4/18/2022	Ending the HIV/HCV Epidemics in Indian Country: A Program for American Indian/Alaska Native Tribes and Urban Indian Communities	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for the Ending the Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV) Epidemics in Indian Country (EHIC) program. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1621a, 1660e. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.933.	Application Deadline Date: June 17, 2022. Earliest Anticipated Start Date: August 1, 2022. https://www.federalregister.gov/documents/2022/04/18/2022-08250/ending-the-hiv-hcv-epidemics-in-indian-country-a-program-for-american-indianalaska-native-tribes-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
290	Notice	Indian Health Service (IHS)	87 FR 22924	Published 4/18/2022	Addressing Dementia in Indian Country: Models of Care	The Indian Health Service (IHS) is accepting applications for cooperative agreements for Addressing Dementia in Indian Country. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1660c(b)(9) and 1660e. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.933. Alzheimer's disease and Alzheimer's disease-related dementias affect lives in every Tribal and Urban Indian community. Alzheimer's disease is the most common cause of dementia—a progressive cognitive impairment that adversely affects function. Other forms of dementia include vascular dementia, Lewy-Body Disease, Fronto-Temporal Dementia, alcohol-related dementia, dementia related to traumatic brain injury, and mixed dementia (attributable to more than one cause of cognitive impairment). Age is the most significant risk factor for Alzheimer's disease. Although the average age of American Indians and Alaska Natives (AI/AN) is younger than the population as a whole, the group age 65 and older is growing more rapidly than the United States (U.S.) population. The Centers for Disease Control and Prevention (CDC) notes that the number of AI/AN age 65 and older is expected to triple in the next 30 years, with the oldest—those 85 years and older—increasing even more rapidly. While age is the most substantial risk factor for Alzheimer's disease, early-onset occurs in younger populations and in persons with Down Syndrome or Trisomy 21, who are at markedly increased risk for Alzheimer's Disease. Conditions such as diabetes, cardiovascular disease, chronic kidney disease, chronic liver disease, and traumatic brain injury increase the risk of dementia and can lead to a more rapid worsening.	Application Deadline Date: July 18, 2022. Earliest Anticipated Start Date: August 31, 2022. https://www.federalregister.gov/documents/2022/04/18/2022-08249/addressing-dementia-in-indian-country-models-of-care?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
291	Notice of Meeting	Department of Veteran Affairs (VA)	87 FR 23051	Published 4/18/2022	Advisory Committee on Women Veterans	The Department of Veterans Affairs (VA) gives notice under the Federal Advisory Committee Act, 5 U.S.C. app. 2, that the Advisory Committee on Women Veterans will conduct a virtual meeting on May 9-11, 2022. No time will be allocated at this meeting for receiving oral presentations from the public. Interested parties should provide written comments for review by the Committee to Ms. Shannon L. Middleton at 00W@mail.va.gov no later than May 2, 2022. Any member of the public who wishes to observe the virtual meeting may use the following WebEx link: https://veteransaffairs.webex.com/veteransaffairs/j.php?MTID=m51ab4e28ba861dac7926152b23d57b4b. To join by phone: 1-404-397-1596 (toll free); meeting number: 2760 037 3217; password: bmBOMUP5555.	Federal Register :: Advisory Committee on Women Veterans, Notice of Meeting https://www.federalregister.gov/documents/2022/04/18/2022-08248/advisory-committee-on-women-veterans-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
292	Urban Confer	Indian Health Service (IHS), OUIHP	N/A	Published 4/18/2022	OUIHP 5-year Strategic Plan Draft Urban Confer	Purpose: Please make plans to join us on Thursday, April 29, 2022, from 2:00-3:30 p.m. ET for a virtual Urban Confer session to seek your input on the draft 2022-2026 IHS OUIHP Strategic Plan. WRITTEN COMMENTS and RECOMMENDATIONS: Please send your comments and recommendations on the draft 2022-2026 OUIHP Strategic Plan as follows, by Friday, May 20, 2022: By e-mail to: urbanconfer@ihs.gov – Subject line: OUIHP Strategic Plan. To continue to improve the Urban Confer process, please complete the online confer satisfaction survey. It is available through Survey Monkey, see link	register for Urban Confer on April 29, 2022 here: https://ihs-gov.zoomgov.com/meeting/register/vJIsdeCqrDooH43eFy8eiJq3oHoVcZCbbnk
293	Notice	Substance Abuse and Mental Health Services (SAMHSA), HHS	N/A	Published 4/19/2022	HHS Awards Nearly $105 Million to States and Territories to Strengthen Crisis Call Center Services in Advance of July Transition to 988	The Department of Health and Human Services (HHS), through its Substance Abuse and Mental Health Services Administration (SAMHSA), is awarding nearly $105 million in grant funding, provided by the American Rescue Plan, to 54 states and territories in advance of the transition of the National Suicide Prevention Lifeline and disclaimer icon from the current 10-digit number to the 988 three-digit dialing code in July. Strengthening our crisis care infrastructure is a core priority of President Biden's Mental Health Strategy, which he announced at the State of the Union as part of his national Unity Agenda. Improving 988 readiness and responsiveness is a critical step to realizing this objective.	https://www.hhs.gov/about/news/2022/04/19/part-president-bidens-mental-health-strategy-hhs-awards-nearly-105-million-states-territories-strengthen-crisis-call-center-services-advance-july-transition-988.html
294	Press Release	Centers for Medicare and Medicaid Services (CMS), HHS	N/A	Published 4/20/2022	CMS Outlines Strategy to Advance Health Equity, Challenges Industry Leaders to Address Systemic Inequities	The Centers for Medicare & Medicaid Services (CMS) outlined an action plan that demonstrates the Biden-Harris Administration's ongoing efforts to provide high-quality, affordable health care for all people, regardless of their background, and to drive health equity across the Department of Health and Human Services (HHS). Building on the agency's commitment to make health equity the first "pillar" of its strategic vision, CMS Administrator Chiquita Brooks-LaSure invited health care industry leaders to make commitments to advance health equity and work with CMS to share best practices to address systemic inequities in the delivery of care.	CMS Outlines Strategy to Advance Health Equity, Challenges Industry Leaders to Address Systemic Inequities	CMS
295	Notice	Administration for Community Living	87 FR 23867	Published 4/21/2022	Availability of Program Application Instructions for MIPPA Program Funds	Medicare Improvements for Patients and Providers Act; State Applications for Medicare Low-Income Benefit Programs Enrollment Outreach and Assistance.	Federal Register :: Availability of Program Application Instructions for MIPPA Program Funds https://www.federalregister.gov/documents/2022/04/21/2022-08511/availability-of-program-application-instructions-for-mippa-program-funds?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
296	Proposed Rule	Centers for Medicare and Medicaid Services (CMS), HHS	N/A	Published 4/22/2022	CMS Proposes Updates to Reduce Barriers to Coverage, Simplify Medicare Enrollment and Expand Access	CMS issued a proposed rule to update Medicare enrollment and eligibility rules that would expand coverage for people with Medicare and advance health equity. This proposed rule would provide Medicare coverage the month immediately after enrollment, thereby reducing the uninsured period and expand access through Medicare special enrollment periods (SEPs). It would also allow eligible beneficiaries to receive Medicare Part B coverage without a late enrollment penalty. This proposed rule would make it easier for people to enroll in Medicare and eliminate delays in coverage.	Comments are due on June 27, 2022. CMS Proposes Updates to Reduce Barriers to Coverage, Simplify Medicare Enrollment and Expand Access | HHS.gov https://www.cms.gov/files/document/cms-4199-p.pdf
297	Notice, request for applications	Health Resources and Services Administration (HRSA), HHS	N/A	Published 4/22/2022	HHS Announces $90 Million to Support New Data-Driven Approaches for Health Centers to Identify and Reduce Health Disparities	On April 21, the Department of Health, and Human Services (HHS) released an announcement on $90 million to "Support New Data-Driven Approaches for Health Centers to Identify and Reduce Health Disparities." This funding will be dispersed in collaboration with the Health Resources and Services Administration (HRSA) and will be designed to collect more efficient information on social determinants of health while also improving data quality reporting for health centers.	Applications are due May 23, 2022. https://www.hhs.gov/about/news/2022/04/21/hhs-announces-90-million-support-new-data-driven-approaches-health-centers-identify-reduce-health-disparities.html

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
298	Notice	Bureau of Indian Affairs (BIA), Interior	87 FR 24339	Published 4/25/2022	Native American Business Development Institute (NABDI) Grant; Solicitation of Proposals	The Office of Indian Energy and Economic Development (OIED), through its Native American Business Development Institute (NABDI), is soliciting grant proposals from eligible federally recognized Tribes and Tribal organizations. NABDI award funding will be used to explore economic development opportunities through feasibility studies and business plans. Feasibility studies may concern the viability of an economic development project or business, or the practicality of a technology, that a tribe may choose to pursue to explore how a current Tribal business or enterprises could recover from and adapt to the challenges resulting from the COVID-19 pandemic. Business plans may concern goals for economic opportunity and recovery from the impacts of the COVID-19 pandemic. Eligibility for Funding: Tribes or Tribal Organizations; UIOs not eligible	Applications will be accepted until 5 p.m. ET on Monday, June 27, 2022. OIED will not consider proposals received after this time and date. https://www.federalregister.gov/documents/2022/04/25/2022-08735/native-american-business-development-institute-nabdi-grant-solicitation-of-proposals?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
299	Proposed Rule	Bureau of Indian Affairs (BIA), Interior	87 FR 24908	Published 4/27/2022	Federal Acknowledgment of American Indian Tribes	This proposed rule seeks input on continuation of an express prohibition on re-petitioning under the U.S. Department of the Interior's (Department) regulations for Federal acknowledgment of Indian Tribes. When first promulgated in 1978, the acknowledgment regulations did not provide a regulatory path that allowed re-petitioning, and since 1994, the regulations have expressly prohibited petitioners who have received a negative final determination from the Department from re-petitioning (ban). The most recent update to the regulations in 2015 continued this ban, but two Federal district courts held that the Department's stated reasons for implementing the ban, as articulated in the 2015 final rule updating the regulations (2015 final rule), were arbitrary and capricious, and remanded to the Department for further consideration. The Department has undertaken further consideration and is proposing to maintain the ban, albeit with revised justifications, in light of the Federal district courts' orders. The Department seeks input on this proposal and the basis for its proposal.	Please submit your comments by July 6, 2022. Consultation sessions with federally recognized Indian Tribes will be held on Thursday, June 2, 2022, 3 p.m. to 5 p.m. ET and Monday, June 6, 2022, 2 p.m. to 4 p.m. ET. A listening session for present, former, and prospective petitioners will be held on Thursday, June 9, 2022, 3 p.m. to 5 p.m. ET. https://www.federalregister.gov/documents/2022/04/27/2022-08488/federal-acknowledgment-of-american-indian-tribes?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
300	Notice	Centers for Disease Control and Prevention (CDC), HHS	87 FR25640	Published 5/2/2022	Solicitation of Nominations for Appointment as Members of the Community Preventive Services Task Force (CPSTF)	The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), is soliciting nominations for appointment of individuals qualified to serve as new members of the Community Preventive Services Task Force (CPSTF). New CPSTF members will serve a five-year term starting in either 2023 or 2024. For efficiency and to reduce the burden on the public, CDC is soliciting nominations to fill vacancies on the CPSTF anticipated for both calendar years 2023 and 2024.	Nomination packages must be received on or before 5:00 p.m. EDT, on June 24, 2022. Late nomination packages will not be considered. https://www.federalregister.gov/documents/2022/05/02/2022-09368/solicitation-of-nominations-for-appointment-as-members-of-the-community-preventive-services-task?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
301	Notice of Urban Confer	Indian Health Service (IHS); HHS	N/A	Published 5/3/2022	Urban Confer to Discuss Policy Directives Outlined in Executive Order 14053	Virtual Urban Confer on Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People on Friday, May 13, 2022.	Register in advance for this meeting: https://ihs-gov.zoomgov.com/meeting/register/v.3tdeGurSgGm1zBVB5Kqn3bDLcOPXxdzk UIO Leaders are encouraged to email written comments and recommendations by the Confer comment deadline of Friday, June 10, 2022 https://www.ihs.gov/ihscalendar/calendar/virtual-urban-confer-on-improving-public-safety-and-criminal-justice-for-native-americans-and-addressing-the-crisis-of-missing-or-murdered-indigenous-people/
302	Notice of Meeting	Centers for Disease Control and Prevention (CDC), HHS	87 FR 26202	Published 5/03/2022	Healthcare Infection Control Practices Advisory Committee	The CDC announces the following meeting for the Healthcare Infection Control Practices Advisory Committee (HICPAC). This virtual meeting is open to the public, limited only by the number of audio and web conference lines (300 audio and web conference lines are available). Time will be available for public comment. Registration is required.	The meeting will be held on June 2, 2022, from 12:00 p.m. to 2:30 p.m., EDT. To register for this web conference, please go to: www.cdc.gov/hicpac. All registered participants will receive the meeting link and instructions shortly before the meeting. Please click the link below to join the webinar: https://cdc.zoomgov.com/
303	Notice of meeting	Office of Infectious Disease and HIV/AIDS Policy, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	87 FR 26360	Published 5/4/2022	Meeting of the National Vaccine Advisory Committee	As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) will hold an in-person meeting. The meeting will be open to the public and public comment will be heard during the meeting.	The meeting will be held June 15-16, 2022. The confirmed meeting times and agenda will be posted on the NVAC website at http://www.hhs.gov/nvpo/nvac/meetings/index.html as soon as they become available. https://www.federalregister.gov/documents/2022/05/04/2022-09551/meeting-of-the-national-vaccine-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
304	Presidential Proclamation	Executive Office of the President, White House	N/A	Published 5/4/2022	A Proclamation on Missing or Murdered Indigenous Persons Awareness Day, 2022	The President has proclaimed May 5, 2022, as Missing or Murdered Indigenous Persons Awareness Day. "I call on all Americans and ask all levels of government to support Tribal governments and Tribal communities' efforts to increase awareness of the issue of missing or murdered Indigenous persons through appropriate programs and activities." "For generations, Indigenous persons, including American Indians, Alaska Natives and Native Hawaiians, have been forced to mourn a missing or murdered loved one without the answers and support they deserve. On Missing or Murdered Indigenous Persons Awareness Day, we remember these victims and their families, and commit to working with Tribal Nations and **Native communities** to achieve justice and healing. The Federal Government has an obligation to ensure that cases of missing or murdered persons are met with swift and effective action. My Administration is fully committed to investigating and resolving these cases through a coordinated law enforcement response, as well as intervention and prevention efforts. We are also dedicated to researching the underlying causes of this violence and to working with **Native communities** to address them."	A Proclamation on Missing Or Murdered Indigenous Persons Awareness Day, 2022 | The White House https://www.whitehouse.gov/briefing-room/presidential-actions/2022/05/04/a-proclamation-on-missing-or-murdered-indigenous-persons-awareness-day-2022/
305	Presidential Proclamation	Executive Office of the President, White House	87 FR 26659	Published 5/05/2022	National Mental Health Awareness Month, 2022	"Each May we raise awareness about the importance of mental health and its impact on the well-being of all Americans, including children, adults, families, and communities across our Nation. We also give thanks to the dedicated mental health providers whose service and support improve the lives of so many Americans. We stand in solidarity with those who are experiencing mental health conditions, renewing our commitment to providing them with the support they need and deserve." "...proclaim May 2022 as National Mental Health Awareness Month. I call upon citizens, government agencies, private businesses, non-profit organizations, and other groups to join in activities and take action to strengthen the mental health of our communities and our Nation."	Federal Register :: National Mental Health Awareness Month, 2022 https://www.federalregister.gov/documents/2022/05/05/2022-09760/national-mental-health-awareness-month-2022?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
306	Final Rule	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 27208	Published 5/06/2022	Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2023	This final rule includes payment parameters and provisions related to the risk adjustment and risk adjustment data validation programs, as well as 2023 user fee rates for issuers offering qualified health plans (QHPs) through Federally-facilitated Exchanges (FFEs) and State-based Exchanges on the Federal platform (SBE-FPs). This final rule also includes requirements related to guaranteed availability; the offering of QHP standardized plan options through Exchanges on the Federal platform; requirements for agents, brokers, and web-brokers; verification standards related to employer sponsored coverage; Exchange eligibility determinations during a benefit year; special enrollment period verification; cost-sharing requirements; Essential Health Benefits (EHBs); Actuarial Value (AV); QHP issuer quality improvement strategies; accounting for quality improvement activity (QIA) expenses and provider incentives for medical loss ratio (MLR) reporting and rebate calculation purposes; and re-enrollment. This final rule also responds to comments on how the Department of Health and Human Services (HHS) can advance health equity through QHP certification standards and otherwise in the individual and group health insurance markets, and how HHS might address plan choice overload in the Exchanges	These regulations are effective July 1, 2022 https://www.federalregister.gov/documents/2022/05/06/2022-09438/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2023?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
307	Notice of request for nomination for members	Agency for Healthcare Research and Quality (AHRQ); HHS	87 FR 27148	Published 5/06/2022	National Advisory Council for Healthcare Research and Quality; Request for Nominations for Members	The National Advisory Council for Healthcare Research and Quality (the Council) advises the Secretary of HHS (Secretary) and the Director of the Agency for Healthcare Research and Quality (AHRQ) with respect to activities proposed or undertaken to carry out AHRQ's statutory mission. AHRQ produces evidence to make health care safer, higher quality, more accessible, equitable, and affordable, and works within the U.S. Department of Health and Human Services and with other partners to make sure that the evidence is understood and used. Seven new members will be appointed to replace seven current members whose terms will expire in November 2022. The Council meets in the Washington, DC, metropolitan area, generally in Rockville, Maryland, approximately three times a year to provide broad guidance to the Secretary and AHRQ's Director on the direction of and programs undertaken by AHRQ. Seven individuals will be selected by the Secretary to serve on the Council beginning with the meeting in the spring of 2023. Members generally serve 3-year terms. Appointments are staggered to permit an orderly rotation of membership. To fill these positions, we are seeking individuals who: (1) Are distinguished in the conduct of research, demonstration projects, and evaluations with respect to health care; (2) are distinguished in the fields of health care quality research or health care improvement; (3) are distinguished in the practice of medicine; (4) are distinguished in other health professions; (5) represent the private health care sector (including health plans, providers, and purchasers) or are distinguished as administrators of health care delivery systems; (6) are distinguished in the fields of health care economics, information systems, law, ethics, business, or public policy; and (7) represent the interests of patients and consumers of health care. 42 U.S.C. 299c(c)(2). Individuals are particularly sought with experience and success in these activities. AHRQ will accept nominations to serve on the Council in a representative capacity	Nominations should be received on or before 60 days after date of publication. https://www.federalregister.gov/documents/2022/05/06/2022-09728/national-advisory-council-for-healthcare-research-and-quality-request-for-nominations-for-members?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
308	Final Rule	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 27704	Published 5/09/2022	Medicare Program; Contract Year 2023 Policy and Technical Changes to the Medicare Advantage and Medicare Prescription Drug Benefit Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency; Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency	This final rule will revise the Medicare Advantage (MA) (Part C) program and Medicare Prescription Drug Benefit (Part D) program regulations to implement changes related to marketing and communications, past performance, Star Ratings, network adequacy, medical loss ratio reporting, special requirements during disasters or public emergencies, and pharmacy price concessions. This final rule will also revise regulations related to dual eligible special needs plans (D-SNPs), other special needs plans, and cost contract plans. This final rule finalizes certain 2021 and 2022 Star Ratings provisions that were included in two interim final rules with comment period (IFC) that CMS issued on April 6, 2020, and September 2, 2020; other policies from those interim final rules will be addressed in other rulemakings.	Effective dates: These regulations are effective on June 28, 2022, except for amendatory instructions 27 and 36 (regarding the definition of "negotiated price" at §§ 423.100 and 423.2305), which are effective January 1, 2024. Applicability dates: The applicability date of the provisions in this rule is January 1, 2023, except as explained in SUPPLEMENTARY INFORMATION. https://www.federalregister.gov/documents/2022/05/09/2022-09375/medicare-program-contract-year-2023-policy-and-technical-changes-to-the-medicare-advantage-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
309	Notice of Funding Opportunity	Substance Abuse and Mental Health Services (SAMHSA), HHS	87 FR 27654	Published 5/09/2022	Fiscal Year (FY) 2022 Notice of Supplemental Funding Opportunity	This notice is to inform the public that the Substance Abuse and Mental Health Services Administration (SAMHSA) is supporting administrative supplements (in scope of the parent award) up to $150,000 each for one-year to the ten PTTC Regional Centers, the PTTC Hispanic and Latino Center and the PTTC Tribal Affairs Center for a total funding amount of $1,800,000. These grant recipients were funded in FY 2018 under the PTTC Cooperative Agreements, funding announcement SP-19-001 and have a project end date of April 30, 2023. The supplemental funds will be used to: (1) Develop a Prevention Fellowship Program (PFP); (2) develop and sustain a well-trained and knowledgeable cadre of prevention professionals who understand and exemplify the principles and best practices of substance abuse prevention; and (3) prepare fellows to achieve certification from the International Certification and Reciprocity Consortium (ICSAPC) Certified Prevention Specialist (CPS) exam. The PFP shall support internships for fellows in the following areas: Hands-on experience working in state agencies while supported by state agency mentors; virtual and in-person training in professional development and prevention; acquiring proficiency in appropriate core competencies in preparation for the CPS exam; developing management and leadership skills; and preparing for potential employment opportunities within the prevention field. This is not a formal request for application. Assistance will only be provided to the twelve eligible PTTC Centers based on the receipt of a satisfactory application and associated budget that is approved by a review group.	Funding Opportunity Title: FY 2018 Prevention Technology Transfer Centers (PTTC) Cooperative Agreements Funding Opportunity SP-19-001. https://www.federalregister.gov/documents/2022/05/09/2022-09866/fiscal-year-fy-2022-notice-of-supplemental-funding-opportunity%utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
310	Publication	Indian Health Service (IHS); HHS	N/A	Published 5/09/2022	Indian Health Service funding provides resources to address Alzheimer's disease	The Indian Health Service is announcing $5 million to target resources directly to tribes, tribal organizations, urban Indian organizations, and IHS direct service facilities to address Alzheimer's disease within tribal communities. This marks the first time IHS will allocate for this critical need. This funding will support tribes, tribal organizations, and **urban Indian organizations** to develop comprehensive and sustainable approaches to addressing Alzheimer's disease and other causes of dementia, focusing on awareness, recognition, diagnosis, assessment, management, and support for caregivers.	Eligible tribes, tribal organizations, and urban Indian organizations can now apply for approximately 2.6 million in funding. The application deadline is July 18. This is the first time IHS has received funding to directly address Alzheimer's disease. https://www.grants.gov/web/grants/search-grants.html?keywords=indian%20alzheimer%27s https://www.ihs.gov/about/news/2022/05/09/indian-health-service-funding-provides-resources-address-alzheimers-disease.html
311	Notice	Centers for Disease Control and Prevention (CDC), HHS	87 FR 28011	Published 5/10/2022	Advisory Committee on Immunization Practices (ACIP)	The Centers for Disease Control and Prevention (CDC) announces the following meeting of the Advisory Committee on Immunization Practices (ACIP). This meeting is open to the public, time will be available for public comment. The agenda will include discussions on the use of COVID-19 vaccines. A recommendation vote(s) is scheduled. Agenda items are subject to change as priorities dictate. For more information on the meeting agenda, visit https://www.cdc.gov/vaccines/acip/meetings/meetings-info.html. The meeting will be webcast live via the World Wide Web; for more information on ACIP, visit the ACIP website: https://www.cdc.gov/vaccines/acip/index.html.	The meeting will be held on May 19, 2022, from 11:00 a.m. to 4:00 p.m., EDT (times subject to change). The meeting will be webcast live via the World Wide Web. Written comments must be received on or before May 19, 2022. https://www.federalregister.gov/documents/2022/05/10/2022-10130/advisory-committee-on-immunization-practices-acip?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
312	Notice	Centers for Disease Control and Prevention (CDC), HHS	87 FR 28013	Published 5/10/2022	Advisory Committee on Immunization Practices (ACIP)	Matters to be considered: The agenda will include discussions on influenza vaccines; pneumococcal vaccine; human papillomavirus vaccine; measles, mumps, rubella (MMR) vaccine; respiratory syncytial virus vaccine; rotavirus vaccine; and Chikungunya vaccine. Recommendation votes on influenza vaccines, pneumococcal vaccine, and MMR vaccine are scheduled. No VFC votes are scheduled. Agenda items are subject to change as priorities dictate. For more information on the meeting agenda, visit https://www.cdc.gov/vaccines/acip/meetings/index.html. The meeting will be webcast live via the World Wide Web; for more information on ACIP, visit the ACIP website: https://www.cdc.gov/vaccines/acip/index.html.	Written Public Comment: The docket will be opened to receive written comments on May 10, 2022. Written comments must be received on or before June 23, 2022. https://www.federalregister.gov/documents/2022/05/10/2022-09930/advisory-committee-on-immunization-practices-acip?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
313	Notice	Administration for Community Living	87 FR 28832	Published 5/11/2022	Intent To Award a Single-Source Supplement for the Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and Other Older Adults With a History of Trauma and their Family Caregivers Program	The Administration for Community Living (ACL) announces the intent to award a single-source supplement to the current cooperative agreement held by the Jewish Federations of North America for the project Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and **Other Older Adults with a History of Trauma and Their Family Caregivers** program. The purpose of this program is to advance the development and expansion of PCTI supportive services for Holocaust survivors living in the U.S. **Additionally, the project is advancing the capacity of the broader aging services network to deliver services of this type to any older adult with a history of trauma and their family caregivers.** The overall goals of the program are as follows: Increase the number and type of innovations in PCTI care for Holocaust survivors, older adults with a history of trauma, and their family caregivers, and Expand the capacity of the Aging Network to provide PCTI care to the populations it serves. The administrative supplement for FY 2022 will be in the amount of $987,000, bringing the total award for FY 2022 to $5,922,000.	Federal Register :: Intent To Award a Single-Source Supplement for the Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and Other Older Adults With a History of Trauma and Their Family Caregivers Program
314	Notice of Meeting	National Institute of Health	87 FR 28839	Published 5/11/2022	Notice of a Meeting of the Office of AIDS Research Advisory Council	The sixtieth meeting of the Office of AIDS Research Advisory Council (OARAC) will include the OAR Director's Report; updates from the Clinical Guidelines Working Groups of OARAC; updates from NIH HIV-related advisory councils; presentation and discussions on Data Science, and NIH-wide programs and initiatives; and public comment. The meeting will be open to the public via NIH Videocast. The URL link to this meeting is: https://videocast.nih.gov/watch=45264.	Federal Register :: Office of the Director, National Institutes of Health; Notice of Meeting
315	Notice of Meeting	Substance Abuse and Mental Health Services (SAMHSA), HHS	87 FR 29162	Published 5/12/2022	Advisory Committee for Women's Services (ACWS) Notice of Meeting	The meeting will include discussions on assessing SAMHSA's current strategies, including the mental health and substance use needs of the women and girls population. Additionally, the ACWS will be addressing priorities regarding the impact of COVID-19 on the behavioral health needs of women and children and directions around behavioral health services and access for women and children. The meeting may be accessed via telephone or web meeting. To obtain the call-in number and access code, submit written or brief oral comments, or request special accommodations for persons with disabilities, please register on-line at: https://www.samhsa.gov/about-us/advisory-councils	Federal Register :: Advisory Committee for Women's Services (ACWS) Notice of Meeting
316	Notice of Funding Opportunity	Indian health Service (IHS)	87 FR 29346	Published 5/13/2022	Public Health Nursing Case Management: Reducing Sexually Transmitted Infections	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for Public Health Nursing Case Management: Reducing Sexually Transmitted Infections. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1621q, 1660e. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.383. The purpose of this IHS program is to mitigate the prevalence of sexually transmitted infections (STI) within Indian Country through a case management model that utilizes the PHN as a case manager. The emphasis is on raising awareness of STIs as a high-priority health issue among AI/AN communities and to support prevention and control activities of comorbid conditions. Case management involves the client, family, and other members of the health care team. Quality of care, continuity, and assurance of appropriate and timely interventions are also crucial. UIOs are eligible for this program.	Application deadline date: August 11, 2022 https://www.federalregister.gov/documents/2022/05/13/2022-10241/public-health-nursing-case-management-reducing-sexually-transmitted-infections?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
317	Request for Information and Comment	Centers for Disease Control and Prevention (CDC), HHS	87 FR 29748	Published 5/16/2022	Draft National Institute for Occupational Safety and Health (NIOSH) Healthcare Personal Protective Technology (PPT) Targets for 2020 to 2030; Request for Comment	The National Institute for Occupational Safety and Health (NIOSH) in the Centers for Disease Control and Prevention (CDC), an Operating Division of the Department of Health and Human Services (HHS), announces the availability of a draft document entitled DRAFT NIOSH Healthcare Personal Protective Technology (PPT) Targets for 2020 to 2030 (Draft PPT Targets) now available for public comment.	Electronic or written comments must be received by July 15, 2022. https://www.federalregister.gov/documents/2022/05/16/2022-10413/draft-national-institute-for-occupational-safety-and-health-niosh-healthcare-personal-protective?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
318	Final Rule	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 29675	Published 5/16/2022	Medicaid Program; Reassignment of Medicaid Provider Claims	This final rule reinterprets the scope of the general requirement that State payments for Medicaid services under a State plan must generally be made directly to the individual practitioner or institution providing services or to the beneficiary, in the case of a class of practitioners for which the Medicaid program is the primary source of revenue. Specifically, this final rule explicitly authorizes States to make payments to third parties on behalf of individual practitioners, for individual practitioners' health insurance and welfare benefits, skills training, and other benefits customary for employees, if the individual practitioner consents to such payments on their behalf.	These regulations are effective June 15, 2022. ?rtt=A320ps://www.federalregister.gov/documents/2022/05/16/2022-10225/medicaid-program-reassignment-of-medicaid-provider-claims?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
319	Request for Information and Comment	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services (HHS)	87 FR 29868	Published 5/17/2022	Request for Information (RFI); 2022 HHS Environmental Justice Strategy and Implementation Plan Draft Outline; Comment Period Extended	On April 8, 2022, the Department of Health and Human Services (HHS) published into the Federal Register a Request for Information (RFI) which is located at 87 FR 20874 to receive input from the public on HHS's draft outline to further the development of the 2022 Environmental Justice Strategy and Implementation Plan. Consistent with the policy of this administration directing HHS to make achieving environmental justice part of its mission, HHS would like to identify priority actions and strategies to best address environmental injustices and health inequities for people of color, disadvantaged, vulnerable, low-income, marginalized, and indigenous populations. With the engagement of and input from the public, the 2022 Environmental Justice Strategy and Implementation Plan will serve as a guide to confront environmental and health disparities and implement a multifaceted approach that will serve vulnerable populations and communities disproportionately impacted by environmental burdens.	To be assured consideration, comments must be received at the email address provided below, no later than midnight Eastern Time (ET) on June 18, 2022. HHS will not reply individually to responders but will consider all comments submitted by the deadline. Do not provide confidential information as comments may be published or otherwise used for agency purposes. https://www.federalregister.gov/documents/2022/05/17/2022-10540/request-for-information-rfi-2022-hhs-environmental-justice-strategy-and-implementation-plan-draft?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
320	DULL	Indian Health Service (IHS); HHS	N/A	Published 5/17/2022	FY 2022 Urban Indian Health funding increase for distribution to the OUIHP and UIOs is $10,000,000	In accordance with the standard methodology established after Urban Confer in FY 2018, the IHS will distribute 10 percent of the funds to the Office of Urban Indian Health Programs (OUIHP) and 90 percent of the funds to Urban Indian Organizations (UIOs). An equitable distribution methodology will divide the 90 percent evenly among UIOs for FY 2022. With this distribution, 90 percent of the funding increase will be directly transferred to UIOs via IHS contracts. Before funds may be awarded and transferred, each Urban Indian Organization funded from the Urban Indian Health budget line must submit a scope of work, budget, and budget narrative to their Area Chief Contracting Officer and Area Contracting Officer Representative. In addition, each Urban Indian Organization must have satisfactory performance under its IHS contract.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DUIOLL-05172022.pdf
321	Notice and request for comment	Children's Bureau, Administration for Children and Families, HHS	87 FR 30225	Published 5/18/2022	Submission for OMB Review; Plan for Foster Care and Adoption Assistance-Title IV-E (OMB #0970-0433)	The Children's Bureau (CB), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting a 3-year extension of the Plan for Foster Care and Adoption Assistance—Title IV-E, (OMB#: 0970-0433, expiration 11/30/2022). This plan also incorporates the plan requirements for the optional Guardianship Assistance program, the Title IV-E Prevention Services plan and the Title IV-E Kinship Navigator program. There are no changes requested to the form. Title IV-E of the Act was amended by Public Law 115-123, which included the Family First Prevention Services Act (FFPSA). FFPSA authorized new optional Title IV-E funding for time-limited (1 year) prevention services for mental health/substance abuse and in-home parent skill-based programs for (1) a child who is a candidate for foster care (as defined in section 475(13) of the Act), (2) pregnant/parenting foster youth, and (3) the parents/kin caregivers of those children and youth (sections 471(e), 474(a)(6), and 475(13) of the Act). Title IV-E prevention services must be rated as promising, supported, or well supported in accordance with HHS criteria and be approved by HHS (section 471(e)(4)(C) of the Act) as part of the Title IV-E Prevention Services Clearinghouse (section 476(b)(2) of the Act). A state or tribal Title IV-E agency electing to participate in the program must submit a 5-year Title IV-E Prevention Program Plan that meets the statutory requirements.	Federal Register :: Submission for OMB Review; Plan for Foster Care and Adoption Assistance-Title IV-E (OMB #0970-0433)
322	Notice of meeting request for comment	Indian Health Service; HHS	N/A	n/a	Urban Confer to seek your input on the Urban Indian All Inclusive Rate.	Please register in advance and make plans to join us on Friday, June 10, 2022, from 1:00-2:30 p.m. ET for a virtual Urban Confer to seek your input on the Urban Indian All Inclusive Rate.	WRITTEN COMMENTS and RECOMMENDATIONS: Please send your comments and recommendations on the UIO All Inclusive Rate as follows, by August 5, 2022 by e-mail to: urbanconfer@ihs.gov – Subject line: UIO All Inclusive Rate. Register in advance for this meeting: https://ihs-gov.zoomgov.com/meeting/register/vJItd-GrqjsHApcx9SIM1MVp-Rqf2GCKNY
323	Notice; Final Response	Health Resources and Services Administration (HRSA), HHS	87 FR 30501	Published 5/19/2022	Criteria for Determining Maternity Care Health Professional Target Areas	Section 332 of the Public Health Service Act (PHSA) directs the Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), to identify Maternity Care Target Areas (MCTAs), or geographic areas within health professional shortage areas that have a shortage of maternity care health professionals, for the purpose of providing maternity health care assistance to such health professional shortage areas. On September 21, 2021, the Health Resources and Services Administration (HRSA) published a Federal Register notice soliciting feedback on proposed criteria to be used to identify Maternity Care Target Areas (MCTAs). HRSA requested feedback on six proposed criteria for inclusion in a composite scale to identify MCTAs with the greatest shortage of maternity care health professionals: (1) Ratio of females ages 15-44 -to-full time-equivalent maternity care health professional ratio; (2) percentage of females 15-44 with income at or below 200 percent of the federal poverty level (FPL); (3) travel time and distance to the nearest provider location with access to comprehensive maternity care services; (4) fertility rate; (5) the Social Vulnerability Index; and (6) four Maternal Health Indicators (pre-pregnancy obesity, pre-pregnancy diabetes, pre-pregnancy hypertension, and prenatal care initiation in the first trimester). This notice summarizes and responds to the comments received during the 60-day comment period and presents the final criteria which will be used to identify and score MCTAs.	Federal Register :: Criteria for Determining Maternity Care Health Professional Target Areas
324	Proposed Rule	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 31815	Published 5/25/2022	Basic Health Program; Federal Funding Methodology for Program Year 2023 and Proposed Changes to Basic Health Program Regulations	This document proposes the methodology and data sources necessary to determine Federal payment amounts to be made for program year 2023 to States that elect to establish a Basic Health Program under the Patient Protection and Affordable Care Act to offer health benefits coverage to low-income individuals otherwise eligible to purchase coverage through Health Insurance Exchanges.	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on June 24, 2022. https://www.federalregister.gov/documents/2022/05/25/2022-11047/basic-health-program-federal-funding-methodology-for-program-year-2023-and-proposed-changes-to-basic#utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
325	DRL	White House, HHS, USDA	N/A	Published 5/27/2022	HHS USDA and White House Tribal Consultation on developing and implementing a national strategy on hunger, nutrition, and health.	The Biden-Harris Administration has launched an effort to end hunger by 2030 and to increase healthy eating and physical activity so that fewer Americans get chronic diseases — like heart disease and diabetes. This effort will include a White House Conference on Hunger, Nutrition, and Health to find solutions to these challenges. At the conference, scheduled for September, the Biden-Harris Administration will announce a Plan encouraging the public and private sectors to work together to transform the food and physical activity environments in the United States. The goal is to help end hunger, improve nutrition and physical activity, and eliminate disparities	WH Conference_Dear Tribal Leader_5.27.22.pdf(Shared) - Adobe cloud storage
326	Notice	Health Resources and Services Administration (HRSA), HHS	87 FR 32426	Published 5/31/2022	Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)	The agenda for the June 14-15, 2022, meeting is being finalized and may include the following topics: Federal program updates; Sudden Infant Death Syndrome/Sudden Unexpected Infant Death; Violence, Incarceration, and Substance Abuse; Cultural Strength/Resilience; American Indian/Alaskan Native maternal and infant health disparities; Workforce and Workforce Development; and Race Concordant Care.	June 14, 2022, 11:00 a.m. to 5:30 p.m. Eastern Time and June 15, 2022, 11:00 a.m. to 5:30 p.m. Eastern Time. This meeting will be held virtually via 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. https://www.federalregister.gov/documents/2022/05/31/2022-11520/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee#utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
327	Interim Final Rule	Department of Veteran Affairs (VA)	87 FR 33025	Published 6/01/2022	Legal Services for Homeless Veterans and Veterans At-Risk for Homelessness Grant Program	The Department of Veterans Affairs (VA) issues this rule to implement a new authority requiring VA to award grants to eligible entities that will provide certain legal services for homeless veterans and veterans at risk for homelessness. This new grant program is within the continuum of VA's homeless services programs. This rulemaking specifies grant eligibility criteria, application requirements, scoring criteria, constraints on the allocation and use of the funds, and other requirements necessary to implement this grant program. Section 79.0 explains the purpose and scope of part 79. Paragraph (a) states that the purpose of this part is to implement the Legal Services for Homeless Veterans and Veterans At-Risk for Homelessness Grant Program. This Grant Program authorizes VA to award legal services grants to eligible entities to provide legal services to eligible veterans. This is consistent with the intent and purpose of section 4202 of the Act.	Effective date: This interim final rule is effective July 1, 2022; Comment date: Comments must be received on or before August 1, 2022. https://www.federalregister.gov/documents/2022/06/01/2022-10930/legal-services-for-homeless-veterans-and-veterans-at-risk-for-homelessness-grant-program#utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
328	Notice, Request for nominations	Centers for Disease Control and Prevention (CDC), HHS	87 FR 33486	Published 6/02/2022	Solicitation of Nominations for Appointment to the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHACHSPT)	The Centers for Disease Control and Prevention (CDC) is seeking nominations for membership on the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHACHSPT). The CHACHSPT consists of 18 experts in fields associated with public health: epidemiology; laboratory practice; immunology; infectious diseases; drug abuse; behavioral science; health education; healthcare delivery; state health programs; clinical care; preventive health; medical education; health services and clinical research; and healthcare financing, who are selected by the Secretary of the U.S. Department of Health and Human Services (HHS). The CHACHSPT charter stipulates that the Committee shall include representation of persons with HIV and other affected populations; state and local health and education agencies; HIV/viral hepatitis/ STD community-based organizations; and the ethics or faith-based community. At least four members shall be persons with HIV.	Nominations for membership on the CHACHSPT must be received no later than October 1, 2022. Packages received after this time will not be considered for the current membership cycle. https://www.federalregister.gov/documents/2022/06/02/2022-11815/solicitation-of-nominations-for-appointment-to-the-cdchrsa-advisory-committee-on-hiv-viral-hepatitis#utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
329	Notice of listening sessions and request for public comments	Department of the Interior (DOI)	87 FR 33825	Published 6/03/2022	Strengthening Public Trust in the Department of the Interior Law Enforcement Programs DOI is conducting twelve (12) virtual listening sessions and inviting public comments to obtain stakeholder input on public perception of DOI law enforcement and understand how the DOI can best develop and maintain public trust, transparency, and legitimacy with its stakeholders.	In an effort to identify opportunities for improvement in law enforcement programs of the Department of the Interior (DOI) (National Park Service, U.S. Fish and Wildlife Service, Bureau of Land Management, Bureau of Indian Affairs, and Bureau of Reclamation) and to strengthen public trust in the Department's law enforcement practices and policies, the DOI is hosting twelve (12) listening sessions open to the public. DOI seeks to engage with diverse stakeholders who interact with, are impacted by, or have experience with DOI Law Enforcement Officers to strengthen public relations and inform DOI law enforcement programs. Transparency, building public trust and ensuring accountability are key tenets that support equitable law enforcement experiences across diverse geographic and demographic populations. The public can submit comments through this Federal Register Notice which will inform themes and recommendations for the Department. On July 7, 2021, Secretary Deb Haaland announced the establishment of a new departmental law enforcement task force to implement the highest standards for protecting the public and provide necessary policy guidance, resources, and training to agency personnel within the DOI. Led by Deputy Secretary of the Interior Tommy Beaudreau, the Task Force is responsible for implementing the Secretary's vision of utilizing an equity lens and evidence-based decision making to review and identify opportunities for improvement in law enforcement programs of the National Park Service, U.S. Fish and Wildlife Service, Bureau of Land Management, Bureau of Indian Affairs, and Bureau of Reclamation. The Task Force will focus on ways to (1) strengthen trust in our law enforcement programs; (2) ensure appropriate policy and oversight is implemented; and (3) ensure supportive resources are available for officer mental health, wellness, and safety. What are your perceptions of DOI law enforcement? What experiences or interactions have you had with them? How can the Interior best develop and maintain public trust, transparency, and legitimacy in the communities DOI law enforcement works in or serves? Is your perception of DOI law enforcement positive or negative? Which practices does DOI law enforcement engage in that inform your feelings about them? • What recommendations or suggestions would you like to see adopted by DOI law enforcement (i.e., policies and practices, measures to increase diversity in officers to reflect the community, etc.)?	Interested persons are also invited to submit comments in writing or online on or before August 2, 2022. https://www.federalregister.gov/documents/2022/06/03/2022-11892/strengthening-public-trust-in-the-department-of-the-interior-law-enforcement-programs#utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
330	Notice	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 34273	Published 06/06/2022	Announcement of the Advisory Panel on Outreach and Education (APOE) June 23, 2022 Virtual Meeting	This notice announces the next meeting of the APOE (the Panel) in accordance with the Federal Advisory Committee Act. The Panel advises and makes recommendations to the Secretary of the U.S. Department of Health and Human Services (HHS) (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on opportunities to enhance the effectiveness of consumer education strategies concerning the Health Insurance Marketplace®, Medicare, Medicaid, and the Children's Health Insurance Program (CHIP). This meeting is open to the public. In accordance with the renewed charter, the APOE will advise the Secretary and the CMS Administrator concerning optimal strategies for the following: Developing and implementing education and outreach programs for individuals enrolled in, or eligible for, Medicare, Medicaid, the CHIP, and coverage available through the Health Insurance Marketplace® and other CMS programs. Enhancing the federal government's effectiveness in informing Medicare, Medicaid, CHIP, or the Health Insurance Marketplace® consumers, issuers, providers, and stakeholders, pursuant to education and outreach programs of issues regarding these programs, including the appropriate use of public-private partnerships to leverage the resources of the private sector in educating beneficiaries, providers, partners and stakeholders. Expanding outreach to minority and underserved communities, including racial and ethnic minorities, in the context of Medicare, Medicaid, CHIP, and the Health Insurance Marketplace® education programs and other CMS programs as designated. Assembling and sharing an information base of "best practices" for helping consumers evaluate health coverage options. Building and leveraging existing community infrastructures for information, counseling, and assistance. Drawing the program link between outreach and education, promoting consumer understanding of health care coverage choices, and facilitating consumer selection/enrollment, which in turn support the overarching goal of improved access to quality care, including prevention services, envisioned under the Affordable Care Act.	Deadline for Meeting Registration, Presentations, Special Accommodations, and Comments: Thursday, June 16, 2022, 5:00 p.m. (e.d.t). https://www.federalregister.gov/documents/2022/06/06/2022-12136/announcement-of-the-advisory-panel-on-outreach-and-education-apoe-june-23-2022-virtual-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
331	Notice	Health Resources and Services Administration (HRSA), Department of Health and Human Services.	87 FR 35223	Published on 06/09/2022	Agency Information Collection Activities: Proposed Collection; Public Comment Request: HRSA Ryan White HIV/AIDS Program Part F AIDS Education and Training Center Program Evaluation Activities, OMB No. 0915-0281-Extension	This notice announces a new information collection request (ICR) from HRSA to OMB for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. HRSA is requesting an extension of the current Event Record and Participant Information Form with minor changes. Respondents will also have the option to report multiple clinic and health professional program identification numbers to reflect multiple affiliations on the ER. Additional options were added for multiple questions in the ER to allow for more complete responses (e.g. an "other" response option was added to two questions; and response options such as trauma-informed care, gender affirming care, transgender/non-binary/other gender, people experiencing homelessness, and people with justice system involvement were added to capture relevant event topics). In addition to changes on the ER, minor revisions were made to the response options for multiple questions on the PIF to improve clarity (e.g., "Substance Abuse" was changed to "Substance Use Disorder"). Additionally, the question and response options on gender were updated. Changes include options added to multiple questions to allow for more complete responses. For example, questions on gender, racial and ethnic identity now include "Choose Not to Disclose" as response options.	Comments on this ICR should be received no later than July 11, 2022. Submit your comments by email to paperwork@hrsa.gov or by mail to the HRSA Information Collection Clearance Officer, Room 14N136B, 5600 Fishers Lane, Rockville, MD 20857.
332	Notice of meeting and request for comment	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).	87 FR 35215	Published on 06/09/2022	Advisory Committee on Immunization Practices (ACIP)	The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces the following meeting of the Advisory Committee on Immunization Practices (ACIP). This meeting is open to the public. Time will be available for public comment. The agenda will include discussions on the use of COVID-19 pediatric vaccines. A recommendation vote(s) is scheduled. Agenda items are subject to change as priorities dictate. For more information on the meeting agenda, visit https://www.cdc.gov/vaccines/acip/meetings/index.html. The meeting will be webcast live via the World Wide Web; for more information on ACIP, visit the ACIP website: https://www.cdc.gov/vaccines/acip/index.html.	You may submit comments, identified by Docket No. CDC-2022-0079, by either of the following methods: • Federal eRulemaking Portal: https://www.regulations.gov. Follow the instructions for submitting comments. • Mail:Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop H24-8, Atlanta, Georgia 30329-4027, Attn: June 17-18, 2022, ACIP Meeting. Instructions: All submissions received must include the Agency name and Docket Number. All relevant comments received in conformance with the https://www.regulations.gov suitability policy will be posted without change to https://www.regulations.gov, including any personal information provided. For access to the docket to read background documents or comments received, go to https://www.regulations.gov.
333	Notice of Meeting	National Institute of Health	87 FR 35561	Published on 06/10/2022	National Institute of Diabetes and Digestive and Kidney Diseases; Notice of Meeting	The meeting will be closed to the public as indicated below in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended for the review, discussion, and evaluation of individual grant applications conducted by the NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES, including consideration of personnel qualifications and performance, and the competence of individual investigators, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.	Name of Committee: Board of Scientific Counselors, NIDDK. Date: October 13-14, 2022. Open: October 13, 2022, 10:00 a.m. to 10:20 a.m. Place: National Institutes of Health, Building 10, 10 Center Drive, Bethesda, MD 20892 (Virtual Meeting). Closed: October 13, 2022, 10:20 a.m. to 5:40 p.m. Agenda: To review and evaluate to review and evaluate personal qualifications and performance, and competence of individual investigators. Place: National Institutes of Health, Building 10, 10 Center Drive, Bethesda, MD 20892 (Virtual Meeting). Closed: October 14, 2022, 10:00 a.m. to 3:10 p.m. Agenda: To review and evaluate to review and evaluate personal qualifications and performance, and competence of individual investigators. Place: National Institutes of Health, Building 10, 10 Center Drive, Bethesda, MD 20892 (Virtual Meeting). Contact Person: Michael W. Krause, Ph.D., Scientific Director, NIDDK, National Institute of Diabetes and Digestive and Kidney Diseases, National Institute of Health, Building 5, Room B104, Bethesda, MD 20892-1818, (301) 402-4633, mwkrause@helix.nih.gov.
334	Final Rule	Department of Veterans Affairs (VA)	38 CFR 8	Published on 06/10/2022	National Service Life Insurance Premium Payment and Loan Amendment	The Department of Veterans Affairs (VA) is amending its National Service Life Insurance (NSLI) regulations to offer Service-Disabled Veterans' Insurance (S-DVI) policyholders the option of remitting premiums for government life insurance coverage only on a monthly or annual basis. VA is also increasing the amount that Veteran policyholders are eligible to borrow against the value of their life insurance policies and to adjust the interest rates charged for fixed-rate loans in certain circumstances.	This rule is effective July 11, 2022.
335	Notice	National Institutes of Health	87 FR 35791	Published on 06/13/2022	Notice of Listing of Members of the National Institutes of Health's Senior Executive Service 2022 Performance Review Board (PRB)	The National Institutes of Health (NIH) announces the persons who will serve on the National Institutes of Health's Senior Executive Service 2022 Performance Review Board.	For further information about the NIH Performance Review Board, contact Mr. Kha Nguyen, Director, Division of Senior and Scientific Executive Management, Office of Human Resources, National Institutes of Health, Building 31, Room 1C31P, Bethesda, Maryland 20892, telephone 301.594.3022 (not a toll-free number), email kha.nguyen@nih.gov.
336	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).	87 FR 36129	Published 06/15/2022	Rescinding Requirement for Negative Pre-Departure COVID-19 Test Result or Documentation of Recovery From COVID-19 for All Airline or Other Aircraft Passengers Arriving Into the United States From Any Foreign Country	The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), is hereby rescinding the Order titled, "Requirement for Negative Pre-Departure COVID-19 Test Result or Documentation of Recovery from COVID-19 for All Airline or Other Aircraft Passengers Arriving Into the United States from Any Foreign Country." As subsequently amended, the Order required all air passengers, two years or older, traveling to the United States from a foreign country to present a negative COVID-19 test result from a sample taken no more than one day before departure, or documentation of recovery from COVID-19 in the past 90 days, before boarding a flight.	This rescission was implemented June 12, 2022.
337	DULL	Indian Health Service, HHS	N/A	Published 06/16/2022	Urban Confer on the IHS Urban Indian Organization Infrastructure Study and requesting your input and recommendations on how to utilize funding available for the Urban Indian Infrastructure Study.	This is in follow-up to the Urban Confer initiated on July 15, 2021. As enacted on December 27, 2020, the Consolidated Appropriations Act, 2021 (Pub. L. No. 116-260) provided the IHS with a total fiscal year (FY) 2021 appropriation of $6.4 billion. Under the heading, Direct Operations, the joint explanatory statement accompanying Division G, Department of the Interior, Environment, and Related Agencies Appropriations Act, 2021, allocated $1 million to conduct an infrastructure study for facilities run by Urban Indian Organizations (UIOs) as a first step in the development of a comprehensive action plan to address the most critical deficiencies facing UIOs and health care service delivery for Urban Indians. On March 15, 2022, enactment of the Consolidated Appropriations Act, 2022 (Pub. L. No. 117-103) provides an additional $800,696 to the IHS to fund the Urban Indian Infrastructure Study. Accordingly, the IHS is seeking your input and recommendations on how to utilize this additional funding.	URBAN CONFER SESSION (VIRTUAL): Please make plans to join us on Thursday, June 23, 2022, for a virtual Urban Confer session. Urban Indian Organization Leaders are encouraged to provide comments on the Urban Indian Infrastructure Study funding provided by the Consolidated Appropriations Act, 2022. WRITTEN COMMENTS AND RECOMMENDATIONS: Please send your comments and recommendations on the FY 2022 Urban Indian Infrastructure Study Funding Distribution by the comment deadline of Tuesday, August 23, 2022. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DUIOLL_061602022.pdf
338	Notice of request for public comment.	Health Resources and Services Administration (HRSA), Department of Health and Human Services.	87 FR 36516	Published June 17, 2022	Request for Information; Early Hearing Detection and Intervention Program	HRSA's Early Hearing Detection and Intervention (EHDI) Program is requesting input from the public to inform future EHDI program development. HRSA is seeking responses that address the following questions. A response to each question is not required. 1. What strategies or programs are needed to support EHDI programs to ensure that all newborns are screened by 1 month of age, a diagnosis is made by 3 months of age, and children who are deaf or hard of hearing are enrolled in and start to receive intervention services by 6 months of age? 2. What strategies should be considered to support the timely identification and receipt of services for young children up to age 3? 3. What strategies should be considered to ensure that infants and young children receive screening and diagnosis services that are high quality and evidence-based? 4. What strategies should be considered to ensure that providers collect and report high quality data on hearing screening, diagnosis, and follow-up to EHDI programs for public health surveillance? 5. What strategies or programs would ensure that families of children who are deaf or hard of hearing receive information that is accurate, comprehensive, up-to-date, and evidence-based, as appropriate, to allow families to make important decisions for their children in a timely manner, including decisions with respect to the full range of assistive hearing technologies and communications modalities, as appropriate? 6. What strategies would help ensure families, parents, and caregivers are continuously engaged as active partners in the EHDI system? 7. What approaches that foster family-to-family and deaf and hard of hearing consumer-to-family supports by families and adults who are deaf or hard of hearing should be considered? 8. What new evidence-based or promising approaches that help deaf or hard of hearing children meet language, literacy, social, emotional, and other developmental milestones should be considered within EHDI Programs/the EHDI system?	Submit electronic comments to ehdi@hrsa.gov. Please submit your response only one time by July 18, 2022.

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339	DTLL, request for comment	Indian Health Service, HHS	N/A	Published 06/17/2022	IHS Tribal Consultation on how to evaluate health care facilities construction demonstration project proposals.	As part of the Patient Protection and Affordable Care Act, the Indian Health Care Improvement Act (IHCIA) contains new provisions on health care facility construction demonstration projects. This authority affords an opportunity for the Indian Health Service (IHS) to test alternative models of care through unique funding arrangements with Tribes and Tribal Organizations. The IHCIA at Title 25 USC § 1637(d)(1), "Indian Health Care Delivery Demonstration Projects," encourages the IHS to establish demonstration projects to test alternative means of delivering health care or to use alternative or innovative methods or models of delivering health care services. The IHCIA Health Care Facility provisions provide this authority and broad evaluation criteria. To ensure that the IHS considers your interests, please address the following questions. Your recommendations will contribute to the development of the Indian Health Care Delivery Demonstration Projects policy.	*WRITTEN COMMENTS AND RECOMMENDATIONS: I would also like to encourage Tribal Leaders to e-mail comments and recommendations by the Consultation comment deadline of Friday, August 5, 2022* *https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-06172022.pdf*
340	Notice of meeting	Substance Abuse and Mental Health Services (SAMHSA), HHS	87 FR 37340	Published 06/22/2022	Meeting of the Substance Abuse and Mental Health Services Administration, Center for Mental Health Services National Advisory Council	Notice is hereby given of the meeting on August 18, 2022 of the Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services National Advisory Council (CMHS NAC). The meeting will include consideration of the minutes from the March 29, 2022, SAMHSA, CMHS NAC meeting; updates from the CMHS Director; updates from the Office of the Assistant Secretary, and council discussions.	Thursday, August 18, 2022, 10:00 a.m. to 4:00 p.m., EDT, (OPEN). The meeting is open to the public and can be accessed virtually only by accessing: https://www.zoomgov.com/j/1608093799?pwd=M01ubE1nVFNxZzB4TGdrc0dzIWVLUT09 or by dialing 669-254-5252, webinar ID: 160 809 3799, passcode: 730918. Agenda with call-in information will be posted on the SAMHSA website prior to the meeting at: https://www.samhsa.gov/about-us/advisory-councils/meetings. https://www.federalregister.gov/documents/2022/06/22/2022-13180/meeting-of-the-substance-abuse-and-mental-health-services-administration-center-for-mental-health?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
341	Notice, Comments	Office of Assistant Secretary for Public and Indian Housing, U.S. Department of Housing and Urban Development (HUD)	87 FR 37351	Published 06/22/22	Notice of Intent To Establish a Tribal Intergovernmental Advisory Committee; Request for Comments on Committee Structure	This notice announces HUD's intention to form the Department's first standing Tribal advisory committee. The committee will be called the ''Tribal Intergovernmental Advisory Committee'' (TIAC). This notice also solicits comments and recommendations regarding the establishment and structure of the TIAC. The TIAC will be made up of a diverse group of duly elected tribal leaders representing small, medium, and large federally recognized Tribes. The TIAC is intended to further communications between HUD and federally recognized Tribes on HUD programs, make recommendations to HUD regarding current program regulations, provide advice in the development of HUD's American Indian and Alaska Native (AIAN) housing priorities, and encourage peer learning and capacity building among Tribes and non-Tribal entities. Consistent with HUD's Tribal Government-to-Government Consultation Policy, this notice solicits input on the proposed structure of the TIAC. The TIAC will be comprised of HUD representatives and Tribal delegates from across the country, representing small, medium, and large tribes. The TIAC will be composed of HUD officials (including the Secretary or his or her designee, as well as the Assistant Secretaries for Office of Public and Indian Housing (PIH), Office of Policy, Development, and Research (PD&R), Office of Fair Housing and Equal Opportunity (FHEO), Office of Field Policy Management (FPM), Office of Housing (HHA), Government National Mortgage Association (Ginnie Mae), and Office of Community Planning and Development (CPD) or their designees) and up to fifteen Tribal delegates. Up to two Tribal delegates will represent each of the six HUD ONAP regions. Up to three remaining Tribal delegates will serve at-large. Only duly elected or appointed Tribal leaders may serve as TIAC delegates or alternates of the TIAC. The Secretary of HUD will appoint the HUD representatives of the TIAC. TIAC Tribal delegates will serve a term of two years. To ensure consistency between Tribal terms, delegates will have a staggered term of appointment. In order to establish a staggered term of appointment, half of the Tribal delegates appointed in the inaugural year of the TIAC will serve two years and the other half will serve three years. Tribal delegates must designate their preference to serve two or three years; however, HUD will make the final determination on which Tribal delegates will serve two or three years. Once these Tribal delegates complete these initial terms, future Tribal delegates will serve terms that last two years. Should a delegate's tenure as a Tribal leader come to an end during their appointment to the TIAC, the delegate's Tribe will nominate a replacement, if not the already nominated alternate.	Comments on the proposed structure of the TIAC are due on or before: August 22, 2022. https://www.federalregister.gov/documents/2022/06/22/2022-13262/notice-of-intent-to-establish-a-tribal-intergovernmental-advisory-committee-request-for-comments-on?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
342	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 37600	Published 6/23/2022	Medicare Program; Calendar Year (CY) 2023 Home Health Prospective Payment System Rate Update; Home Health Quality Reporting Program Requirements; Home Health Value-Based Purchasing Expanded Model Requirements; and Home Infusion Therapy Services Requirements	This proposed rule would set forth routine updates to the Medicare home health and home infusion therapy services payment rates for calendar year (CY) 2023 in accordance with existing statutory and regulatory requirements. This proposed rule discusses home health utilization; proposes a methodology for determining the difference between assumed versus actual behavior change on estimated aggregate expenditures for home health payments as result of the change in the unit of payment to 30 days and the implementation of the Patient Driven Groupings Model (PDGM) case-mix adjustment methodology; and proposes a temporary retrospective and permanent prospective adjustment to the CY 2023 home health payment rates. This rule proposes reassignment of certain diagnosis codes under the PDGM, and proposes to establish a permanent mitigation policy to smooth the impact of year-to-year changes in home health payments related to changes in the home health wage index. This rule also proposes recalibration of the PDGM case-mix weights and updates the low utilization payment adjustment (LUPA) thresholds, functional impairment levels, comorbidity adjustment subgroups for CY 2023 and the fixed-dollar loss ratio (FDL) used for outlier payments. Additionally, this rule discusses the future collection of data regarding the use of telecommunications technology during a 30-day home health period of care on home health claims. In addition, this rule proposes changes to the Home Health Quality Reporting Program (HH QRP) requirements; changes to the expanded Home Health Value-Based Purchasing (HHVBP) Model; and updates to the home infusion therapy services payment rates for CY 2023.	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on August 16, 2022. https://www.federalregister.gov/documents/2022/06/23/2022-13376/medicare-program-calendar-year-cy-2023-home-health-prospective-payment-system-rate-update-home?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
343	Notice, request for comments	Health Resources and Services Administration (HRSA), HHS	87 FR 37873	Published 6/24/2022	Proposed Temporary Changes in State Title V Maternal and Child Health Block Grant Allocations	This notice seeks comments on proposed temporary changes to the method of calculating poverty-based allocations under Title V of the Social Security Act for HRSA's State Title V Maternal and Child Health (MCH) Block Grant. Since Fiscal Year (FY) 2017, the poverty-based allocation has been based on the U.S. Census Bureau's 3-year American Community Survey (ACS) estimates using three pooled 1-year estimates. However, due to the COVID-19 pandemic, there were disruptions in the ACS data collection in 2020 resulting in data quality issues that prevented the Census Bureau from releasing standard 1-year ACS estimates; instead, the Census Bureau released experimental estimates. HRSA proposes that the ACS 2020 experimental estimates be excluded from calculating MCH block grant allocations and that the FY 2023 funding allocation be based on the same poverty data used in the FY 2022 allocation (i.e., pooled 1-year estimates for 2017, 2018, and 2019 ACS). Funding allocations for FY 2024 and FY 2025 would continue to incorporate the latest 1-year ACS data while skipping 2020 (i.e., for FY 2024, the 2018, 2019, and 2021 ACS data will be used; for FY 2025, the 2019, 2021, and 2022 ACS data will be used). In FY 2026, the temporary change to the method for calculating allocations will no longer be necessary, and HRSA will resume pooling of three consecutive 1-year estimates (2021-2023).	Interested persons are invited to comment on this proposed change. Submit written comments no later than July 25, 2022. All comments received on or before this date will be considered. https://www.federalregister.gov/documents/2022/06/24/2022-13475/proposed-temporary-changes-in-state-title-v-maternal-and-child-health-block-grant-allocations?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
344	Notice of Tribal Consultation	Office of Head Start (OHS), Administration for Children and Families (AFC),HHS	87 FR 37858	Published 06/24/2022	Tribal Consultation Meetings between HHS/AFC and OHS leadership. Other representatives of tribal organizations and Native nonprofit organizations are welcome to attend as observers.	Pursuant to the Head Start Act, notice is hereby given of three tribal consultation sessions to be held between HHS/ACF OHS leadership and the leadership of tribal governments operating Head Start and Early Head Start programs. The purpose of these consultation sessions is to discuss ways to better meet the needs of American Indian and Alaska Native (AI/AN) children and their families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations. Three tribal consultations will be held as part of HHS/ACF or ACF Tribal Consultation Sessions	Tuesday, July 12, 2022 Monday, August 15, 2022 Wednesday, September 14, 2022 https://www.federalregister.gov/documents/2022/06/24/2022-13532/tribal-consultation-meetings?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
345	Notice, request for information (RFI)	Office of the Assistant Secretary for Health, HHS	FR 87 38168	Published 6/27/2022	Request for Information (RFI): HHS Initiative to Strengthen Primary Health Care	U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Health (OASH) requests input from persons, communities, health care providers, purchasers and payers, educators, researchers, and other members of the public about what the federal government could do to strengthen primary health care in the United States. Improving access to health care, advancing health equity, and improving the health of the Nation are top priorities for the Biden-Harris Administration and HHS. Access to high-quality primary health care has been shown to improve health equity and health outcomes, and is essential for addressing key priorities, including: the COVID-19 pandemic; mental and substance use disorder prevention and care, including suicide and overdose prevention; prevention and management of chronic conditions; gender-based violence; and maternal and child health and well-being. However, our nation's primary health care foundation is weakening and in need of support; primary health care is under-resourced; the workforce is shrinking; workforce well-being is in peril; and many practices face reimbursement challenges that may result in financial instability. The HHS Initiative to Strengthen Primary Health Care (the Initiative) aims to establish a federal foundation for the provision of primary health care for all that supports improved health outcomes and advanced health equity. The first task is to develop an initial HHS plan for strengthening primary health care that will delineate specific actions that HHS agencies and offices may take to achieve the aims, within the current legislation and funding environment. In addition, the plan will include actions that establish an infrastructure in HHS to continue its focus on strengthening primary health, developing subsequent HHS plans that build on the initial plan, and monitoring progress and impact. The purpose of this RFI is to provide OASH with diverse perspectives, experiences, and knowledge that may inform the development of the initial plan for HHS, as well as future steps for the Initiative. OASH seeks information about successful approaches and innovations that improve primary health care payment, delivery models, service integration, access, workforce education, training and well-being, digital health and primary care measurement and research. OASH also seeks information about barriers to implementation of such innovations and how they could be overcome, including specific ideas for possible HHS action. OASH encourages respondents to address health equity, and is particularly interested in information from community-based settings, such as public housing, personal homes, group homes, and assisted living facilities where older adults and people with disabilities may live, and about populations traditionally underserved by current primary health care.	To be assured consideration, comments must be received at the email address provided below, no later than 11:59 p.m. Eastern Time (ET) on August 1, 2022. HHS will not reply individually to responders but will consider all comments submitted by the deadline. https://www.federalregister.gov/documents/2022/06/27/2022-13632/request-for-information-rfi-hhs-initiative-to-strengthen-primary-health-care?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
346	Notice, RFI and Comment	Centers for Disease Control and Prevention (CDC), HHS	87 FR 38408	Published 6/28/2022	Draft-American Indian and Alaska Native Worker Safety and Health Strategic Plan	The National Institute for Occupational Safety and Health (NIOSH) in the Centers for Disease Control and Prevention (CDC), an Operating Division of the Department of Health and Human Services (HHS), announces the availability of a draft strategic plan for public comment entitled Revised Draft of American Indian and Alaska Native Worker Safety and Health Strategic Plan (Revised Draft Strategic Plan). Information Needs: Additional data and information are needed to ensure the Revised Draft Strategic Plan addresses research and outreach that is most critical for understanding and reducing work-related injuries, illnesses, and fatalities among AI/AN workers. NIOSH seeks comments on the following: 1. Does the Revised Draft Strategic Plan address the most pressing occupational safety and health concerns for the AI/AN workforce? If not, what would you suggest be included or removed, and why? Please provide details on other health concerns considered pressing (e.g., type, prevalence, economic burden), including the reasoning for the suggestion that the health and safety concern be included or excluded from the Revised Draft Strategic Plan. 2. What recommendations do you have for NIOSH for partnering with tribal nations to conduct the activities described in this plan? Please explain the basis for your suggestion(s), such as past experiences, subject matter expertise, or collaborations on other efforts. 3. What other organizations may have an interest in collaborating with NIOSH to improve occupational safety and health for AI/AN workers? Please explain the basis of your suggestion(s) such as past experiences, subject matter expertise, or a shared mission or vision. 4. How might NIOSH improve communication with tribal nations regarding worker safety and health issues? Please include examples of the type of communication material and channel. 5. What support may be needed to address occupational safety and health concerns for the AI/AN workforce? Please provide details explaining how the support will benefit the AI/AN workforce.	Electronic or written comments must be received by August 29, 2022. https://www.federalregister.gov/documents/2022/06/28/2022-13723/draft-american-indian-and-alaska-native-worker-safety-and-health-strategic-plan?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
347	Notice of intent to award supplemental funding	Substance Abuse and Mental Health Services Administration	87 FR 38418	Published 06/28/2022	Fiscal Year 2022 Notice of Supplemental Funding Opportunity	This is a notice of intent to award supplemental funding to the Addiction Technology Transfer Centers (ATTC) Regional Centers and ATTC National Coordinating Office (NCO) recipients funded in FY 2017 under Notice of Funding Opportunities (NOFO) TI-17-005. It will inform the public that the Substance Abuse and Mental Health Services Administration (SAMHSA) is supporting administrative supplements, which are consistent with the scope of the initial FY 2017 awards, of up to $740,298 each for one-year to the ten ATTC Regional Centers and ATTC NCO for a total funding amount of $8,143,285. These grant recipients were funded in FY 2017 under the ATTC Cooperative Agreements, funding announcement TI-17-005 and have a project end date of September 29, 2022. The supplemental funds will be used to extend the program services for all 11 ATTCs from September 30, 2022 to September 29, 2023. The proposed 12-month extension will allow SAMHSA to align the project periods of the ATTCs with those of the Mental Health Technology Transfer Centers (MHTTC) and Prevention Technology Transfer Centers (PTTC) networks so that all three networks can compete together for the next five-year funding cycle of the Technology Transfer Centers (TTC) program. The TTC program is comprised of the three network programs (ATTC, PTTC and MHTTC), which all use the same training and technical assistance platform. If the three networks are competed in different years and new organizations become award recipients of this cooperative agreement program, the structure of this common platform may be compromised. By competing them at the same time, if changes occur in award recipients, the new award recipients will be able to restructure the website and training platform within the first three months of the new funding cycle without disruptions.	https://www.federalregister.gov/documents/2022/06/28/2022-13614/fiscal-year-fy-2022-notice-of-supplemental-funding-opportunity?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
348	DUILL	Indian Health Service (IHS), HHS	N/A	Published 06/30/2022	IHS Urban Confer on Exploring the Formation of an Urban Interagency Workgroup with other Federal Agencies	By letter dated February 3, 2022, 14 Senators signed a letter requesting that President Biden and Vice President Harris form an Urban Indian Interagency Workgroup to identify needs and develop strategies to improve services provided to urban American Indian and Alaska Native populations. In response, on May 2, 2022, the Indian Health Service (IHS) sent an update to Senator Alex Padilla indicating that the IHS would explore forming an Urban Indian Interagency Workgroup to ensure Urban Indian health care needs are considered at the local, regional, and national levels. URBAN CONFER SESSION (VIRTUAL): Please make plans to join us for a virtual Urban Confer session on Wednesday, July 13, 2022. I would like to encourage you to provide comments and recommendations on this important topic.	DATE: Wednesday, July 13, 2022 TIME: 2:00 p.m. – 3:30 p.m., Eastern Time REGISTRATION LINK: https://ihsgov.zoomgov.com/meeting/register/v.3TdOrqkjG--ocd3FzbH0U-1Le23-rx4 WRITTEN COMMENTS AND RECOMMENDATIONS: Please send your recommendations on exploring the formation of an Urban Indian Interagency Workgroup by the comment deadline of Monday, September 12, 2022. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DUIOLL-0630222.pdf
349	DILL & DUILL	Indian Health Service (IHS), HHS	N/A	Published 07/01/2022	The Indian Health Service (IHS) Division of Health Professions Support requests your assistance in identifying priority health professions for inclusion into categories eligible for the IHS Scholarship Program (SP) in academic year 2023-2024 and the IHS Loan Repayment Program (LRP) in fiscal year (FY) 2023. the IHS seeks feedback on a list of "Priority Categories" for inclusion in the IHS SP and the IHS LRP. For academic year 2023-2024, and FY 2023, the IHS SP and the IHS LRP, respectively, will be funding physicians, nurses, dentists, pharmacists, and optometrists. We will also be asking IHS Areas to provide their feedback on health professions funding priorities. Please send us your list of priorities on the enclosed spreadsheets. Please limit your submission to health professions priorities for which you currently have full-time vacancies, or are anticipating full-time vacancies within the next year.	The Indian Health Service (IHS) Division of Health Professions Support requests your assistance in identifying priority health professions for inclusion into categories eligible for the IHS Scholarship Program (SP) in academic year 2023-2024 and the IHS Loan Repayment Program (LRP) in fiscal year (FY) 2023. the IHS seeks feedback on a list of "Priority Categories" for inclusion in the IHS SP and the IHS LRP. For academic year 2023-2024, and FY 2023, the IHS SP and the IHS LRP, respectively, will be funding physicians, nurses, dentists, pharmacists, and optometrists. We will also be asking IHS Areas to provide their feedback on health professions funding priorities. Please send us your list of priorities on the enclosed spreadsheets. Please limit your submission to health professions priorities for which you currently have full-time vacancies, or are anticipating full-time vacancies within the next year. IHS Loan Repayment: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DILL-DUIOLL_07012022-Enclosure-1.pdf IHS Scholarship Program: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DILL-DUIOLL_07012022-Enclosure-2.pdf	Please e-mail your priorities by August 1, 2022, to Ms. Tara Johnston at Tara.Johnston@ihs.gov . If you have any questions about the IHS SP, please contact CAPT Michael Bartholomew (SP) by e-mail at Michael.Bartholomew@ihs.gov , or by telephone at (301) 443-2349; questions about the IHS LRP, please contact Ms. Jackie Santiago (LRP) by e-mail at Jackie.Santiago@ihs.gov , or by telephone at (301) 443-248. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DILL-DUIOLL-07012022.pdf
350	DUILL & DILL	Indian Health Service (IHS), HHS	N/A	Published 07/01/2022	IHS Urban Confer on OUIHP Strategic Plan: Draft 2	To promote meaningful discussion on the first draft of the 2022-2026 OUIHP Strategic Plan, the IHS hosted a virtual Urban Confer on April 29, 2022, and a virtual Tribal Consultation on May 2, 2022. There were 14 Urban Indian Organizations (UIOs) that submitted written comments or made comments during the virtual Urban Confer session. The attached second draft of the 2022-2026 OUIHP Strategic Plan incorporates those recommendations. Draft Strategic Plan: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DRAFT-Enclosure-07012022b.pdf	VIRTUAL URBAN CONFER SESSION 2022 – 2026 OUIHP STRATEGIC PLAN DATE: Friday, July 8, 2022 TIME: 1:00 p.m. – 2:30 p.m., Eastern Time REGISTRATION LINK: https://ihs-gov.zoomgov.com/meeting/register/v.3Tf-yYqMsGMo4kLNK7RFxj5tNN83YyE https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DILL-DUIOLL-07012022b.pdf
351	Notice	Health Resources and Services Administration (HRSA), HHS	87 FR 40540	Published 07/07/2022	List of Designated Primary Medical Care, Mental Health, and Dental Health Professional Shortage Areas	This notice informs the public of the availability of the complete lists of all geographic areas, population groups, and facilities designated as primary medical care, dental health, and mental health professional shortage areas (HPSAs) in a designated status as of April 29, 2022. The lists are available on the shortage area topic page on HRSA's data.hrsa.gov website. Given the COVID-19 pandemic's impact on the health workforce and health care service delivery, HRSA is providing a longer transition time for jurisdictions and facilities to prepare for potential change of HPSA designations. HPSA designations that are currently proposed for withdrawal will remain in this status until they are re-evaluated in preparation for the publication of the 2023 HPSA Federal Register Notice. If these HPSAs do not meet the requirements for designation at the time of the publication of the July 2023 HPSA Federal Register Notice next year, they will be withdrawn. This additional time will allow jurisdictions to re-evaluate their HPSAs against the designation criteria, and plan for potential changes in staffing. Urban Indian Health Clinics are automatically designated as HPSAs based on statute or through regulation.	Complete lists of HPSAs designated as of April 29, 2022, and updated information on HPSAs are available on the website at https://data.hrsa.gov/topics/health-workforce/shortage-areas. Information on shortage designations is available at https://bhw.hrsa.gov/workforce-shortage-areas/shortage-designation. https://www.federalregister.gov/documents/2022/07/07/2022-14501/lists-of-designated-primary-medical-care-mental-health-and-dental-health-professional-shortage-areas?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
352	Notice of Funding/Grant Opportunity	Indian Health Service (IHS), HHS	N/A	Published 07/08/2022	IHS Alzheimer's Grant Program invites applications to the 2022 Indian Health Geriatric Scholars pilot The Alzheimer's Grant Program, a program of the IHS Office of Clinical and Preventive Services (OCPS), Division of Clinical and Community Services (DCCS), invites applications to the 2022 Indian Health Geriatric Scholars (GeriScholars) pilot. The Indian Health GeriScholars pilot has been developed with the support and collaboration of the VA Office of Rural Health and takes as its model the highly successful VA Geriatric Scholars Program that has built geriatric expertise into the primary care workforce over the past decade.	The Indian Health GeriScholars pilot has been developed with the support and collaboration of the VA Office of Rural Health and takes as its model the highly successful VA Geriatric Scholars Program that has built geriatric expertise into the primary care workforce over the past decade. The Indian Health GeriScholars pilot will provide participating IHS, Tribal, and Urban Indian Health clinicians with an individual intensive learning track for professional continuing education, including: A week-long intensive training in geriatrics at through an approved Geriatrics Board Review course A mentored geriatric improvement project at their local facility A clinical practicum or mentorship in geriatric practice Ongoing education, training, and peer support as an Indian Health Geriatric Scholar In this pilot year the Indian Health GeriScholars Program will accept at least 8 physicians, nurse practitioners, PAs, or pharmacists sponsored by their IHS, Tribal, or Urban Indian Health program	Application form: https://www.ihs.gov/sites/dccs/themes/responsive2017/display_objects/documents/GeriScholarsApp2022.docx For further information email IHSDHHS@ihs.gov . https://www.ihs.gov/dccs/alzheimers/
353	Final Rule	Department of Veterans Affairs (VA)	87 FR 41594	Published 07/13/2022	Civilian Health and Medical Program of the Department of Veteran Affairs	The Department of Veterans Affairs (VA) adopts as final, with changes, a proposed rule to amend its medical regulations concerning the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA). The final rule clarifies and updates these regulations to conform to changes in law and policy that control the administration of CHAMPVA and include details concerning the administration of CHAMPVA that were previously not reflected in regulation. The amendments improve our ability to effectively administer CHAMPVA and make technical revisions to make our regulations more understandable. In addition, this rulemaking expands covered services and supplies, to include certain preventive services, and eliminates cost-share amounts and deductibles for certain covered services.	Effective date: This final rule is effective August 12, 2022. Applicability date: The provisions of this final rule shall apply to all applications for benefits that are received by VA on or after the effective date of this final rule or that are pending before VA, the United States Court of Appeals for Veterans Claims, or the United States Court of Appeals for the Federal Circuit on the effective date of this final rule. https://www.federalregister.gov/documents/2022/07/13/2022-14285/civilian-health-and-medical-program-of-the-department-of-veterans-affairs?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
354	Notice of Meeting	Department of Veterans Affairs (VA)	87 FR 41874	Published 07/13/2022	The VA Advisory Committee on Tribal and Indian Affairs will meet on August 15, 16, and 17, 2022 from 8:30 am - 5:00 pm MST each day. The purpose of the Committee is to advise the Secretary on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans. This includes advising the Secretary on the administration of healthcare services and benefits to American Indians and Alaska Native Veterans; thereby assessing those needs and whether VA is meeting them. The Advisory Committee on Tribal and Indian Affairs is a newly established FACA Committee. The Committee provides advice and guidance to the Secretary of Veterans Affairs on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans	On August 15, 2022, from 8:30 a.m. to 11:30 a.m. MST, the Committee will meet in open session with key staff from the Albuquerque Veterans Benefits Administration (VBA), held at the Albuquerque VBA Regional Office, 500 Gold Ave. SW, Albuquerque, NM 87102. The agenda will include opening remarks from the Committee Chair, Executive Sponsor, and other VA officials. There will be updates from the Benefits & NCA Subcommittee for discussion. From 1:30 p.m. to 5:00 p.m. MST, the Committee will convene with closed tour of the Santa Fe National Cemetery and New Mexico State Department of Veterans Affairs, and Santa Fe Indian Hospital. On August 16, 2022, from 8:30 a.m. to 11:30 a.m. MST, the Committee will convene at the Albuquerque VBA Regional Office, and receive updates from the Administrative Subcommittee for discussion. From 11:30 a.m. to 12:00 p.m. there will be Public Comment from those public members who have provided a written summary. From 1:30 p.m. to 5:00 p.m. MST, the Committee will convene with closed tour of the Albuquerque VBA site visits. On August 17, 2022, from 8:30 a.m. to 11:30 a.m. MST, the Committee the Committee will convene at the Albuquerque VBA Regional Office and receive updates from the Health Subcommittee for discussion. The committee will hold open discussion on topics relevant to the Committee and address follow-up and action items including dates for next meeting. From 1:30 p.m. to 5:00 p.m. MST, the Committee will convene with closed tour of the VA Medical Center, Indian Health Service Albuquerque Indian Hospital and the First Nations Community HealthSource.	https://www.federalregister.gov/documents/2022/07/13/2022-14854/advisory-committee-on-tribal-and-indian-affairs-notice-of-meeting?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
355	Notice of Tribal Consultation and Comment	Department of Homeland Security (DHS)	N/A	Published 07/13/2022	Department of Homeland Security invites Tribal leaders to join in virtual Tribal consultations related to our implementation of Executive Order 13175, Consultation and Coordination with Indian Tribal Governments of November 6, 2000; and Executive Order 14053, Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People of November 15, 2021	The purpose of these consultation sessions is to solicit input and recommendations from Tribal Nations and Alaska Native Corporations on the following topics: (1) The Department's efforts related to Executive Order 14053, Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People; and (2) Implementation of the DHS 2021 Action Plan for Tribal Consultation and Strengthening Nation-to-Nation Relationships and additional action items to consider for including in the 2022 revision. We also encourage Tribal Nations to schedule individual consultation meetings as appropriate. Written comments for these consultation efforts are due no later than 90-days (9/8/2022) after the issuance of this invitation. The Deputy Assistant Secretary for Intergovernmental Affairs, Miriam Enriquez will serve as the Department's tribal consultation official and lead this tribal consultation effort. The DHS 2021 Action Plan can be found here: https://www.dhs.gov/publication/dhs-tribal-consultation-policy The Department is interested in soliciting input from Tribal Nations on the following topics: •What process would you like to see the Department use when planning efforts and activities to address Missing and Murdered Indigenous People, to ensure that efforts are informed by Tribal Nations? •What challenges do you see the Department of Homeland Security facing in the realm of improving public safety and criminal justice within Tribal Nations? What actions and policies would you like to see the Department of Homeland Security prioritize?	Monday, July 18, 2022, 2:00 ET, 1:00 CT, 12:00 MT, 11:00 PT, 10:00 AK: MS Teams: Click here to join https://tinyurl.com/3axd3ak4 Wednesday, July 20, 2022, 3:00 ET, 2:00 CT, 1:00 MT, 12:00 PT, 11:00 AK; Phone only - 855-852-7677 Pin: 9999-0743-8454# Tuesday, July 26, 2022, 3:00 ET, 2:00 CT, 1:00 MT, 12:00 PT, 11:00 AK: MS Teams: Click here to join https://tinyurl.com/5fjunttr Wednesday, July 27, 2022, 12:00 ET, 11:00 CT, 10:00 MT, 9:00 PT, :00 AK; MS Teams: Click here to join https://tinyurl.com/ye9r92nu Thursday, July 28, 2022, 4:00 ET, 3:00 CT, 2:00 MT, 1:00 PT, 12:00 AK; Phone only - 855-852-7677 Pin: 9999-0743-8454# Wednesday, August 3, 2022, 12:00 ET, 11:00 CT, 10:00 MT, 9:00 PT, :00 AK; MS Teams: Click here to join or copy and paste: https://tinyurl.com/yckk6zee https://members.nathpo.org/eventcalendar/Details/dhs-tribal-consultations-on-eo-14053-dhs-s-2021-action-plan-phone-only-690648?sourceTypeId=Website
356	Notice and Request for Public Comment	Office of Planning, Research, and Evaluation, Administration for Children and Families, HHS	87 FR 42180	Published 07/14/2022	Proposed Information Collection Activity; Racial and Ethnic Disparities in Human Services Analysis Execution Project (New Collection)	The Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services (HHS) is proposing to collect data to explore how one state's changes to Temporary Assistance for Needy Families (TANF) policies and services in response to the COVID-19 pandemic were experienced by different racial and ethnic groups in that state. The goal is to obtain an in-depth understanding of how TANF participants of different racial and ethnic backgrounds experienced these policy and programmatic changes by comparing those experiences within one state, and to assess whether those changes may have helped to ameliorate challenges around program and benefit access for different populations or potentially created new challenges.	Comments are due within 60 days of this Notice. https://www.federalregister.gov/documents/2022/07/14/2022-15057/proposed-information-collection-activity-racial-and-ethnic-disparities-in-human-services-analysis?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
357	Notice of Tribal Consultation	Office on Violence Against Women (OVAW), DOJ	N/A	Published 07/14/2022	The 17th Annual Government-to-Government Violence Against Women Tribal Consultation will be conducted from September 21-23, 2022, in Anchorage, AK. Due to the ongoing COVID-19 national pandemic and uncertainty about future medical trends, the Department of Justice will continue to implement measures to protect the safety and health of tribal leaders and others who attend this tribal consultation in person. They will also provide an option for tribal leaders who prefer to testify virtually and, if it becomes unsafe to conduct meetings in person, they will conduct the full tribal consultation virtually. The Department of Justice will be joined by other federal stakeholders, including their colleagues from the United States Departments of Health and Human Services and the Interior. They will conduct the tribal consultation over two full days with the morning of the third day to be an open and interactive discussion between tribal leaders and federal representatives.	The Office on Violence Against Women is a grant-making agency in the U.S. Department of Justice. Under §903 of Title IX of the United States Department of Justice Reauthorization and Violence Against Women Act of 2005 (VAWA 2005), OVW is responsible for conducting annual government-to-government consultations with the leaders of all Federally recognized Indian tribal governments on behalf of the United States Attorney General. The purpose of each consultation is to solicit recommendations from tribal government leaders on the following topics: (1) Administering tribal funds and programs; (2) Enhancing the safety of Indian women from domestic violence, dating violence, sexual assault, homicide, stalking, and sex trafficking; (3) Strengthening the federal response to such crimes; and, (4) Improving access to local, regional, state, and federal crime information databases and criminal justice information systems.	OVW Consultation: https://www.ovw.consultation.org/?mc_cid=67f687a327&mc_eid=f53b91c0b8ef38f53d
358	Notice and Request for Public Comments	Office of Planning, Research, and Evaluation, Administration for Children and Families, HHS	87 FR 42180	Published 07/14/2022	Proposed Information Collection Activity; Racial and Ethnic Disparities in Human Services Analysis Execution Project (New Collection)	The Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services (HHS) is proposing to collect data to explore how one state's changes to Temporary Assistance for Needy Families (TANF) policies and services in response to the COVID-19 pandemic were experienced by different racial and ethnic groups in that state. The goal is to obtain an in-depth understanding of how TANF participants of different racial and ethnic backgrounds experienced these policy and programmatic changes by comparing those experiences within one state, and to assess whether those changes may have helped to ameliorate challenges around program and benefit access for different populations or potentially created new challenges.	Comments due within 60 days of publication. In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above. https://www.federalregister.gov/documents/2022/07/14/2022-15057/proposed-information-collection-activity-racial-and-ethnic-disparities-in-human-services-analysis?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
359	Notice of Summit	Indian Health Service (IHS), HHS	N/A	Published 07/19/2022	IHS Public & Community Health Virtual Summit on September 7-9, 2022	Public and Community Health Virtual Summit "Using Innovative and Collaborative Approaches to Support Community Health Partners" Purpose: to bring together public and community health professionals, workers, and teams to learn, network, and share ideas to promote and support patient and community health. Target Audience: nurses, social workers, public health nurses, community health representatives, health educators and other interested individuals.	Indian Health Service - Public & Community Health Virtual Summit (v-fairs.com)
360	Notice of Funding	Indian Health Service (IHS), HHS	87 FR 43537	Published 07/21/2022	Youth Regional Treatment Center (YRTC) Aftercare Program	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for Youth Regional Treatment Center Aftercare Programs (Short Title: Youth Aftercare). This program is authorized under the Snyder Act, 25 U.S.C. 13; the transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1665a and 1665g. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.654. The goal of the Youth Aftercare cooperative agreement is to help AI/AN youth pursue and sustain safety, sobriety, and employability after release from a YRTC. While aftercare support services may not exist in a youth's home community, the YRTC can lead the development of effective aftercare methods. The YRTC Aftercare cooperative agreement awardee ("awardee") will pursue the above stated goal in each AI/AN client who separates from their respective YRTCs. In addition to the stated goal, a focus of this funding opportunity is to understand and overcome aftercare management and performance barriers that affect the capacity of YRTCs and the IHS to develop effective and responsive solutions within the scope of the AI/AN Youth CoC, given AI/AN youth's behavioral health treatment requirements. To be eligible for this funding opportunity, an applicant must be a current, IHS-funded YRTC, operated by one of the following as defined by 25 U.S.C. 1603: • A federally recognized Indian tribe as defined by 25 U.S.C. 1603(14). The term "Indian tribe" means any Indian tribe, band, nation, or other organized group or community, including any Alaska Native village or group or regional or village corporation as defined in or established pursuant to the Alaska Native Claims Settlement Act (85 Stat. 688) [43 U.S.C. 1601 et seq.], which is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians.	Federal Register :: Youth Regional Treatment Center Aftercare Program
361	Proposed Rule	HHS	N/A	Published 07/25/2022	HHS Announces Proposed Rule to Strengthen Nondiscrimination in Health Care	The Section 1557 Notice of Proposed Rulemaking (NPRM) seeks to address gaps identified in prior regulations. In order to advance protections under this rule it: Reinstates the scope of Section 1557 to cover HHS' health programs and activities. Clarifies the application of Section 1557 nondiscrimination requirements to health insurance issuers that receive federal financial assistance. Aligns regulatory requirements with Federal court opinions to prohibit discrimination on the basis of sex including sexual orientation and gender identity. Makes clear that discrimination on the basis of sex includes discrimination on the basis of pregnancy or related conditions, including "pregnancy termination." Ensures requirements to prevent and combat discrimination are operationalized by entities receiving federal funding by requiring civil rights policies and procedures. Requires entities to give staff training on the provision of language assistance services for individuals with limited English proficiency (LEP), and effective communication and reasonable modifications to policies and procedures for people with disabilities. Requires covered entities to provide a notice of nondiscrimination along with a notice of the availability of language assistance services and auxiliary aids and services. Explicitly prohibits discrimination in the use of clinical algorithms to support decision-making in covered health programs and activities. Clarifies that nondiscrimination requirements applicable to health programs and activities include those services offered via telehealth, which must be accessible to LEP individuals and individuals with disabilities. Interprets Medicare Part B as federal financial assistance. Refines and strengthens the process for raising conscience and religious freedom objections.	Public comments on the NPRM are due 60 days after publication of the NPRM in the Federal Register. The Department will also be conducting a Tribal consultation meeting on August 10, 2022, from 2:00 p.m. to 4:00 p.m. Eastern Daylight Time. To participate, you must register in advance at https://www.zoomgov.com/meeting/register/vJIsfu-rqjsiEOfBgUg_IDWKqkU02ZC7 exit disclaimer icon. https://www.hhs.gov/about/news/2022/07/25/hhs-announces-proposed-rule-to-strengthen-nondiscrimination-in-health-care.html

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362	Notice, request for comments	Health Resources and Services Administration (HRSA), HHS	N/A	Published 07/27/2022	HRSA's Pediatric Mental Health Care Access Program	HRSA's Pediatric Mental Health Care Access Program is authorized by § 330M (42 U.S.C. § 254c-19), as amended of the Public Health Service Act., and Section 2712 of the American Rescue Plan Act of 2021 (P.L. 117-2). The purpose of this program is to promote behavioral health integration into pediatric primary care by supporting pediatric mental health care telehealth access programs. The Pediatric Mental Health Care Access Program utilizes state, tribal, and regional networks of pediatric mental health care teams to provide consultation, training, technical assistance, and care coordination support for pediatric primary care and other providers to diagnose, treat, and refer children with behavioral health conditions HRSA welcomes input from all stakeholders and parties interested in our mission. We are specifically seeking information from Indian Country about ways telehealth can be used in public health to increase access to and improve pediatric behavioral health care. HRSA currently supports 45 Pediatric Mental Health Care Access Programs, including the Chickasaw Nation and the Red Lake Band of Chippewa Indians. We are soliciting feedback to inform program development, and to increase program reach into additional Indian Tribes and Tribal Organizations. We are seeking information from, but not limited to, Tribal elders, leaders, members of Tribal Councils, relevant provider organizations, medical societies, organizations representing medical facilities, or other Tribal Organizations with experience and expertise in pediatrics and behavioral health care	HRSA's Maternal and Child Health Bureau (MCHB) is hosting a virtual listening session to collect input and inform Pediatric Mental Health Care Access Program implementation in Indian Tribes and Tribal Organizations. Date: Thursday, August 11 Time: 4:00-5:30 PM Eastern Location: https://hrsa.gov.zoomgov.com/j/1617602241?pwd=MHYUckZjMnhPbUpPcWhFTm9VRWJkdz09 https://acrobat.adobe.com/link/track?uri=urn:aaid:scds:US:ff9f606e-2418-329c-b4b9-e7997758c3b9
363	Notice of Funding Opportunity	Indian Health Service, HHS	87 FR 45778	Published 07/29/2022	IHS Special Diabetes Program for Indians (SDPI) funding opportunity	The Indian Health Service (IHS) is accepting applications for the Special Diabetes Program for Indians (SDPI – formerly Community-Directed SDPI). This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and section 330C of the Public Health Service Act, codified at 42 U.S.C. 254c-3. This program is described in the Assistance Listings located at https://sam.gov/content/home/ (formerly known as the CFDA) under 93.237 The total funding identified for fiscal year (FY) 2023 is approximately $136 million. Individual award amounts for the first budget year are anticipated to be between $12,500 and $7.5 million. The funding formula which determines the funds available to each IHS area has been determined through Tribal consultation. Within each area, awardee tribes provide input on the formula which determines the amount of funding available for each successful applicant. Current SDPI awardees should budget for the same amount as they received in FY 2022. However, funding amounts may change. See the paragraph below for additional information. • New SDPI award applicants should apply for a $12,500 base amount. The funding available for competing and subsequent continuation awards issued under this announcement is subject to the availability of appropriations and budgetary priorities of the Agency. The IHS is under no obligation to make awards to applicants selected for funding under this announcement. Anticipated Number of Awards Approximately 325 - 400 awards will be issued under this program announcement	Application Deadline Date: October 7, 2022 Earliest Anticipated Start Date: January 1, 2023 https://public-inspection.federalregister.gov/2022-16264.pdf https://www.federalregister.gov/documents/2022/07/29/2022-16264/special-diabetes-program-for-indians
364	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 45860	Published 07/29/2022	Medicare and Medicaid Programs; CY 2023 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Medicare and Medicaid Provider Enrollment Policies, Including for Skilled Nursing Facilities; Conditions of Payment for Suppliers of Durable Medicaid Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS); and Implementing Requirements for Manufacturers of Certain Single-Dose Container or Single-Use Package Drugs To Provide Refunds With Respect to Discarded Amounts	This major proposed rule addresses: changes to the physician fee schedule (PFS); other changes to Medicare Part B payment policies to ensure that payment systems are updated to reflect changes in medical practice, relative value of services, and changes in the statute; Medicare Shared Savings Program requirements; updates to the Quality Payment Program; Medicare coverage of opioid use disorder services furnished by opioid treatment programs; updates to certain Medicare and Medicaid provider enrollment policies, including for skilled nursing facilities; updates to conditions of payment for DMEPOS suppliers; HCPCS Level II coding and payment for wound care management products; electronic prescribing for controlled substances for a covered Part D drug under a prescription drug plan or an MA-PD plan under the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act (SUPPORT Act); updates to the Medicare Ground Ambulance Data Collection System; and provisions under the Infrastructure Investment and Jobs Act. *In the FY 2023 IPPS/LTCH PPS proposed rule (87 FR 28396 through 28398), CMS is proposing to use the exceptions and adjustments authority under section 1886(d)(5)(I) of the Act to establish a new supplemental payment for IHS/Tribal hospitals and hospitals located in Puerto Rico, beginning in FY 2023.*	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on September 6, 2022. In commenting, please refer to file code CMS-1770-P. https://www.federalregister.gov/documents/2022/07/29/2022-14562/medicare-and-medicaid-programs-cy-2023-payment-policies-under-the-physician-fee-schedule-and-other
	DTLL/DULL	Health Resources and Services Administration (HRSA), HHS	N/A	Published 08/01/2022	HRSA's Advisory Committee on Infant and Maternal Mortality (ACIMM) Meeting in Shakopee Mdewakanton Sioux Community in Prior Lake, Minnesota	This public meeting will allow the Committee to hear directly from tribal communities to inform their recommendations to HHS related to improving the birth outcomes of American Indian/Alaska Native (AI/AN) mothers and infants. There will be a virtual option for those who cannot attend the meeting in-person.	Advisory Committee on Infant and Maternal Mortality (ACIMM)	HRSA https://www.hrsa.gov/advisory-committees/infant-mortality
365	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 47824	Published 08/04/2022	CMS issues proposed rule concerning nondiscrimination in Health Programs and Activities	The Department of Health and Human Services (HHS or the Department) is issuing this proposed rule on Section 1557 of the Affordable Care Act (ACA) (Section 1557). Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs and activities. Section 1557(c) of the ACA authorizes the Secretary of the Department to promulgate regulations to implement the nondiscrimination requirements of Section 1557. The Department is also proposing to revise its interpretation regarding whether Medicare Part B constitutes Federal financial assistance for purposes of civil rights enforcement and to revise nondiscrimination provisions to prohibit discrimination on the basis of sexual orientation and gender identity in regulations issued by the Centers for Medicare & Medicaid Services (CMS) governing Medicaid and the Children's Health Insurance Program (CHIP); Programs of All-Inclusive Care for the Elderly (PACE); health insurance issuers and their officials, employees, agents, and representatives; States and the Exchanges carrying out Exchange requirements; agents, brokers, or web-brokers that assist with or facilitate enrollment of qualified individuals, qualified employers, or qualified employees; issuers providing essential health benefits; and qualified health plan issuers.	Submit comments on or before October 3, 2022 https://www.federalregister.gov/documents/2022/08/04/2022-16217/nondiscrimination-in-health-programs-and-activities?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
366	DULL/DTLL	Indian Health Service, HHS	N/A	Published 08/04/2022	IHS to elevate 12 existing Chief Executive Officer (CEO) positions at various IHS Service Units to Senior Executive Service (SES) positions	IHS intends to enable parity across the IHS for positions of similar complexity, enhance the capacity of the IHS to optimize resources, facilities, oversight, and consistency across the organization, and create equity across the IHS to effectively recruit and retain executive-level leadership to manage what is presently an executive-level assignment carried out by a General Schedule grade 15 (GS-15). The recruitment timeline to fill the 12 additional SES-level CEO positions is tentatively scheduled to begin in August 2022. The positions will be recruited simultaneously. In the near future, IHS Area Directors in each of the Areas affected by this announcement will contact Tribal Leaders and Urban Indian Organization leaders within their Areas to provide updates on Area-specific SES recruitment timelines and processes. The next scheduled OPM Biennial Review Submission period for FYs 2024 and 2025 will commence later this year. At that time, the IHS will respond with our identified needs for additional SES position allocations.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DULL-080422.pdf
367	DULL/DTLL	Indian Health Service, HHS	N/A	Published 08/05/2022	The Indian Health Service (IHS) posts Request for Proposal (RFP) for IHS Health Information Technology (HIT) Modernization.	The purpose of Request for Proposals (RFP) No. 140004219I0050 is to solicit Electronic Health Records (EHR) providers and/or integrators in order to establish a single-award Indefinite Delivery, Indefinite Quantity (IDIQ) contract for IHS's Health Information Technology (HIT) modernization efforts. An important part of the RFP evaluation process will be an opportunity to review a series of video demonstrations of representative clinical scenarios presented by the vendors. The IHS plans to engage health IT system users from IHS, Tribal, and Urban Indian Organization sites to assist in this process. IHS will be reaching out in a few weeks to ask I/T/U providers to identify individuals who can serve as Advisors. Selected staff should be health IT users who can attest to having no potential conflicts of interest with product vendors or system integrators that might be bidding or partnering with others participating in the IHS IT modernization process. Tribal Leaders and U/O leaders are encouraged to review the RFP and re-visit the site periodically, as there may be updates to reflect new information, for example, responses provided when vendor questions are posted.	The Acting Director announces the August 4, 2022, publication of a Request for Proposal (RFP) for commercial products to replace the Resource and Patient Management System (RPMS). (ihs.gov) DTLL/DULL: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DULL-080502022.pdf RFP: https://sam.gov/opp/57a0b54fa27246adb1d9de034fa37330/view.
368	DTLL	Administration for Children and Families; Department of the Interior	N/A	Published 08/08/2022	The Department of the Interior (DOI) and Department of Health and Human Services (HHS) announce virtual briefing on their efforts to ensure the wellbeing of Tribal Children	DOI and HHS will host a virtual briefing on August 8, 2022 from 1:00-3:00pm ET concerning their efforts to ensure the wellbeing of tribal children. As part of the briefing, the Bureau of Indian Affairs will provide an update on social service programs, grants, and other actions in support of ICWA. The HHS Administration for Children and Families will share information on funding, training, and technical assistance resources that it provides to tribes, state child welfare agencies, and courts to strengthen practice in support of the wellbeing of tribal children. The ACF awarded state-tribal collaboration grants to recipients in Minnesota, North Dakota, and Oklahoma to strengthen practices around ICWA. Following the updates, grantee officials will share the outcomes of their work. Tribal leaders will be able to provide comments and ask questions.	The agencies welcome written comments or questions to tribalaffairs@act.hhs.gov by September 7, 2022. If you have questions regarding this virtual briefing, please feel free to contact Martha Beadle, Senior Policy Advisor, at martha.beadle@act.hhs.gov https://www.bia.gov/sites/default/files/dup/tcinfo/dttl_doi-hhs-icwa-virtual-briefing-on-8-8-2022_508.pdf
369	Presidential Document	Executive Office of the President	87 FR 48601	Published 08/10/2022	President Biden proclaims August 7 through August 13, 2022 as National Health Center Week	On August 9, 2022, President Biden declared August 7 through August 13, 2022 as National Health Center Week. The intent of this declaration is to recognize health centers and staff for their outstanding contributions to communities across America and to thank them for their dedication, their service, and their commitment to a stronger, healthier, and more equitable health system.	https://www.federalregister.gov/documents/2022/08/10/2022-17297/national-health-center-week-2022?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov

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370	Notice	Department of State, PEPFAR Scientific Advisory Board (SAB)	87 FR 48747	Published 08/10/2022	U.S. Department of State announces a Public Meeting of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) Scientific Advisory Board	In accordance with the Federal Advisory Committee Act, the U.S. Department of State announces that the PEPFAR Scientific Advisory Board (SAB) will be holding a virtual meeting of the full board. The meeting will be open to the public; a public comment session will be held during the meeting. The meeting will be held on Thursday, September 8, 2022, from approximately 8 a.m. to 1 p.m. (EDT) utilizing an online platform. Individuals wishing to view are asked to pre-register at https://forms.gle/FrEhNQyoX8Xav2pz8.Pre-registration is required for both public viewing and comment. SAB members will be discussing two topics: considerations for PEPFAR implementation of tools for recent HIV infection surveillance and considerations for PEPFAR implementation of the dapivirine vaginal ring. Meeting materials from prior SAB meetings may be accessed here: www.state.gov/scientific-advisory-board-pepfar.	https://www.federalregister.gov/documents/2022/08/10/2022-17083/public-meeting-of-the-us-presidents-emergency-plan-for-aids-relief-pepfar-scientific-advisory-board?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
371	DULL/DTLL	IHS, HHS	N/A	Published 08/10/2022	The Indian Health Service announces that CAPT Marcus Martinez has been named director of the Portland Area Indian Health Service.	As the Director of the Portland Area IHS, CAPT Martinez is responsible for overseeing comprehensive health care and environmental health services for American Indians and Alaska Natives throughout Oregon, Idaho, Washington State, and part of Utah. With an estimated patient population of approximately 150,000, the Portland Area IHS includes six federally operated Service Units, as well as Tribal and Urban Indian Organization health programs.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DULL/DULL-08102022.pdf
372	DTLL	Veterans Affairs (VA)	N/A	Published 08/12/2022	The Department of Veterans Affairs (VA) initiates Tribal Consultation to finalize the Tribal Health Program Rimbursement Agreement template.	VA invites tribal leaders (or their representative designees) to provide feedback and comments on a draft template to assist in finalizing the THP Reimbursement Agreement template for the lower 48 states. VA specifically seeks feedback regarding the topics below: 1) VA endeavors to make THP billing for PRC as easy as possible and heard from several stakeholders the preference for monthly billing submissions. VA proposes monthly billing submission to include a cover letter and excel spreadsheet with the THP facility information and claims information with associated EOBs or similar documentation attached showing proof of THP payment. Facilities would electronically submit those using VA's g-invoice or e-invoice system, which conforms to the X12 electronic data interchange (EDI). a. Would THPs have technical issues invoicing VA for PRC as proposed? If so, what alternative approach do you propose that would be consistent with submitting invoices and attached document as proof of payment for PRC. 2) Both Medicare and Medicaid pay providers separately from the IHS All Inclusive Rate (AIR) for certain outpatient services when not billed with a clinic visit. a. Do THPs or IHS facilities have recommendations on services that should be excluded from the IHS AIR reimbursement and paid at Medicare Fee for Service rates instead? What is the rational for proposal?	An in-person consultation is scheduled for September 27, 2022, between 4:30 pm and 6:00 pm (Eastern Time) at the Hyatt Regency Washington, 400 New Jersey Ave NW, Washington, DC 20001. A virtual listening session is scheduled for September 30th, 2022, between 1:00 - 2:00 p.m. (Eastern Time). Participants can access the session by logging into: https://vaoctraining.adobeconnect.com/v400v-3p2d8jsj Written comments may be submitted to tribalgovernmentconsultation@va.gov by September 30, 2022. For additional information regarding this effort, please contact Kara Kaw-Thorne at tribal.agreements@va.gov. DTLL: https://content.gov-delivery.com/attachments/USVAOITGR/2022/08/25/file_attachments/2253736/2022%20RFI%20notice,%20signed%20LaPua.pdf Draft Template: https://content.gov-delivery.com/attachments/USVAOITGR/2022/08/25/file_attachments/2253734/%282022%29%20THP%20RAP%20Template%20draft%20%286-12%29-%20RC.pdf
373	Notice of Funding Opportunity	IHS, HHS	87 FR 49865	Published 08/12/2022	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for the Healthy Lifestyles in Youth (HLY) Program	This program promotes healthy lifestyles for American Indian and Alaska Native (AI/AN) youth using the curriculum "Together Raising Awareness for Indian Life" (TRAIL) among selected Native Boys and Girls Club sites. Under this cooperative agreement,IHS proposes to enter into a collaborative effort/initiative with an entity that has experience working with Boys and Girls Clubs of America (BGCA), experience working with and implementing the TRAIL curriculum, and overall expertise and experience in addressing and evaluating healthy lifestyle techniques in AI/AN youth. The IHS issued the original funding opportunity announcement for the HLY cooperative agreement in 2003 and the program has been ongoing since that time. The Boys and Girls Club sites selected by the awardee may use IHS grant funds to provide services to eligible IHS beneficiaries only. The awardee will: provide technical consultation; train; monitor; evaluate; and provide funds to support these activities. Boys and Girl Club sites that are located outside of Tribal communities are not eligible.	Application Deadline Date: September 15, 2022. Earliest Anticipated Start Date: September 30, 2022. https://www.federalregister.gov/documents/2022/08/12/2022-17403/healthy-lifestyles-in-youth-project?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
374	Final Rule	Administration for Community Living, HHS	87 FR 50000	Published 08/15/2022	The Administration for Community Living (ACL) within the Department of Health and Human Services (HHS or the Department) is amending its regulations for the National Institute on Disability, Independent Living and Rehabilitation Research (NIDILRR).	ACL intends these amendments to NIDILRR's peer review criteria to allow NIDILRR to better evaluate the extent to which its grant applicants conduct outreach to people with disabilities and people from other groups that traditionally have been underserved and underrepresented, as described in Executive Order 13985, and emphasize the need for research and development activities that apply appropriate engineering knowledge and techniques within NIDILRR's Rehabilitation Engineering Research Centers (RERC) program.	These final regulations are effective September 14, 2022 https://www.federalregister.gov/documents/2022/08/15/2022-17422/national-institute-on-disability-independent-living-and-rehabilitation-research?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
375	Notice	Department of Veterans Affairs (VA)	87 FR 50166	Published 08/15/2022	VA solicits nominations for the appointment of an IHS Billings Area Representative to the VA Advisory Committee on Tribal and Indian Affairs	The VA, Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs to represent the Indian Health Service, Billings Area. Nominations should be type written (one nomination per nominator). Nomination package should include: (1) a letter of nomination that clearly states the name and affiliation of the nominee, the basis for the nomination (i.e.specific attributes which qualify the nominee for service in this capacity), and a statement from the nominee indicating a willingness to serve as a member of the Committee; (2) the nominee's contact information, including name, mailing address, telephone numbers, and email address; (3) the nominee's curriculum vitae or resume, not to exceed five pages and (4) a summary of the nominee's experience and qualification relative to the professional qualifications criteria listed above.	Nominations for membership on the Committee must be received no later than 5:00 p.m. EST on September 2, 2022. https://www.federalregister.gov/documents/2022/08/15/2022-17423/solicitation-of-nominations-for-the-appointment-to-the-advisory-committee-on-tribal-and-indian?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
376	Notice	HHS	87 FR 50090	Published 08/15/2022	The Secretary of Health and Human Services announces determination that there is a public health emergency, or a significant potential for a publice health emergency, that involves monkeypox virus.	The Secretary of Health and Human Services (HHS) is issuing this notice pursuant to section 564 of the Federal Food, Drug, and Cosmetic (FD&C) Act. On August 9, 2022, the Secretary determined pursuant to his authority under section 564 of the FD&C Act that there is a public health emergency, or a significant potential for a public health emergency, that affects, or has a significant potential to affect, national security or the health and security of United States citizens living abroad that involves monkeypox virus. On the basis of this determination, he also declared that circumstances exist justifying the authorization of emergency use of vaccines for use against monkeypox virus pursuant to section 564 of the FD&C Act, subject to the terms of any authorization issued under that section.	The determination and declaration are valid August 9, 2022. https://www.federalregister.gov/documents/2022/08/15/2022-17503/office-of-the-secretary-emergency-use-authorization-monkeypox-virus-vaccine?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
377	Notice of meeting	Health Resources and Services Administration (HRSA), HHS	87 FR 50090	Published 08/15/2022	The Health Resources and Services Administration announces a public meeting of the Advisory Committee on Infant and Maternal Mortality	In accordance with the Federal Advisory Committee Act, this notice announces that the Advisory Committee on Infant and Maternal Mortality (ACIMM) 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. The agenda for the September 13-15, 2022, meeting is being finalized and may include the following topics: infant and maternal mortality among American Indian/Alaska Native (AI/AN) women and infants; indigenous health; and federal program updates. In addition to these topics, it is expected that there will be a discussion of recommendations by the ACIMM to the Secretary of HHS on improving birth outcomes among AI/AN mothers and infants, and then a vote on whether to send the recommendations forward to the Secretary of HHS. Agenda items are subject to change as priorities dictate.	Dates and Times of the announced September 13, 2022, 9 a.m.-4 p.m. Central Time (CT): September 14, 2022, 9 a.m.-5 p.m. CT; and September 15, 2022, 9 a.m.-12 p.m. CT. https://www.federalregister.gov/documents/2022/08/15/2022-17487/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
378	Notice of a modified system of records	Department of Housing and Human Services (HUD); Office of Public and Indian Housing and Office of Housing	87 FR 50635	Published 08/157/2022	The Housing and Urban Development Department announces a modification to the Enterprise Income Verification System	The Enterprise Income Verification System (EIV) is used to verify program participants/tenants, reported income, identify unreported income sources and/or amounts and identify substantial annual income discrepancies amongst households that receive HUD provided rental assistance through programs administered by HUD's Office of Public and Indian Housing and Office of Housing Multifamily program. Under the Privacy Act of 1974, the Department of Housing and Urban Development, the Office of Public and Indian Housing proposes to update the system of records titled EIV. The EIV System has been modified replacing the Income Discrepancy Report with the Income Validation Tool built on the MicroStrategy platform. The EIV System is a web-based Upfront Income verification System that allows authorized Public Housing Agencies, Multifamily Housing Owners/Agents, and Contract Administrators to verify program participants/tenants, reported income, identify unreported income sources and/or amounts and identify substantial annual income discrepancies amongst households that receive HUD provided rental assistance through programs administered by HUD's Office of Public and Indian Housing and Office of Housing's Multifamily Housing Programs.	This notice shall become valid September 16, 2022. https://www.federalregister.gov/documents/2022/08/17/2022-17710/privacy-act-of-1974-system-of-records?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
379	Notice of virtual public meeting	Census Bureau, Department of Commerce	87 FR 50833	Published 08/18/2022	2020 Census Tribal Consultation; Virtual Public Meeting	The Census Bureau will conduct a tribal consultation on the second and final 2010 Demonstration Data Product for the Demographic and Housing Characteristics File (DHC) on September 19, 2022, via national webinar. Feedback on this demonstration data product will help to determine the final parameter and settings for the 2020 DHC. The tribal consultation meeting reflects the Census Bureau's continuous commitment to strengthen nation-to-nation relationships with federally recognized tribes. The Census Bureau's procedures for outreach, notice, and consultation ensure involvement of tribes to the extent practicable and permitted by law before making decisions or implementing policies, rules, or programs that affect federally recognized tribal governments. These meetings are open to citizens of federally recognized tribes by invitation. The Census Bureau conducted a tribal listening session on Thursday, August 18, 2022, to prepare tribes for the September virtual tribal consultation and sent materials to the tribes to help with their analysis of the demonstration data product. The Census Bureau provided questions in preparation for the virtual tribal consultation focused on the DHC. In that regard, the Census Bureau is asking tribal governments to identify potentially problematic results from the application of disclosure avoidance to the 2010 demonstration data. Helpful feedback would include identification of tables and geographies that are acceptable and unacceptable. The purpose of the virtual tribal consultation is to hear tribes' recommendations.	The Census Bureau will conduct the tribal consultation webinar on Monday, September 19, 2022, from 3:00 p.m. to 4:30 p.m. EDT. Any questions or topics to be considered in the tribal consultation meetings must be received in writing via email by Monday, September 12, 2022. Meeting Information: The Census Bureau tribal consultation webinar meeting will be held via the Microsoft Teams platform at the following link: https://teams.microsoft.com/registration/iRanOlntbGiMEfRgePGAw.ft,icpXMJ2nESpQgaKuiF03g,rTIDfLb1wkeav-nebFVFaoQ,lUFZBp4BHkUiQKzk6kUDang,Eg0uHKaPDK45QLUrkw.jpg,SS-JWw-hUaO3gRjCnuTBQ?mode=read&tenantId=3ae71d1-e559-41ce-a530-47d18313c603&webinarRing=gcc. Submit your comments by email. Send comments to: 2020DAS@census.gov. https://www.federalregister.gov/documents/2022/08/18/2022-17764/2020-census-tribal-consultation-virtual-public-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
380	Notice of a hybrid meeting	HHS, Office of the Secretary, Office of the Assistant Secretary for Health	87 FR 51114	Published 08/19/2022	Meeting of the Presidential Advisory Council on HIV/AIDS	U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will convene the 74th full council meeting on Monday, September 19, 2022 and September 20, 2022. The meeting will convene in Los Angeles, California and it will also utilize virtual technologies. The meeting will be open to the public. Due to limited space, pre-registration is encouraged for members of the public who wish to attend the meeting in-person. Please email your name to PACHA@hhs.gov by close of business Friday, September 9, 2022 to pre-register. There will be a public comment session during the meeting; pre-registration is required to provide public comment. To pre-register to provide public comment, please send an email to PACHA@hhs.gov and include your name, organization, and title by close of business Friday, September 9, 2022. If you decide you would like to provide public comment but do not pre-register, you may submit your written statement by emailing PACHA@hhs.gov by close of business Tuesday, September 27, 2022. The meeting agenda will be posted on the PACHA page on HIV.gov at https://www.hiv.gov/federal-response/pacha/about-pacha-pacha prior to the meeting.	The meeting will be held on Monday, September 19, 2022 from approximately 4:00-10:00 p.m. (ET) and September 20, 2022 from approximately 3:30-8:00 p.m. (ET). https://www.federalregister.gov/documents/2022/08/19/2022-17812/meeting-of-the-presidential-advisory-council-on-hiv-aids?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
381	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 51303	Published 08/22/2022	Medicaid Program and CHIP; Mandatory Medicaid and Children's Health Insurance Program (CHIP) Core Set Reporting	This proposed rule would establish the requirements for mandatory annual State reporting of the Core Set of Children's Health Care Quality Measures for Medicaid and Children's Health Insurance Program (CHIP), the behavioral health measures on the Core Set of Adult Health Care Quality Measures for Medicaid, and the Core Sets of Health Home Quality Measures for Medicaid. This proposed rule would also establish compliance requirements. CMS is developing strategies to improve State access to Medicaid data in order to improve reporting capabilities. For example, CMS is developing strategies to improve reporting for beneficiaries served by IHS, Tribes and Tribal Organizations and Urban Indian Organizations. Some States have been able to leverage their Health Information Exchanges to accomplish more complete reporting of entire Medicaid and CHIP populations, and CMS is planning to work with those States to identify and share best practices with other States and facilitate peer-to-peer learning. Finally, CMS is currently piloting technical assistance work with States with the idea of providing written resources and guidance. Under this proposal, the Secretary would specify each year, in the reporting guidance issued under § 437.10(b), the populations on which States would be required to report the Core Set measures, and whether mandatory reporting for certain populations could be phased in over time. CMS anticipates that this annual guidance would take the following statutory language into consideration. The statutory language in section 1139A(a)(4)(B) of the Act requires mandatory reporting of measures on the Child Core Set for pediatric health care under Titles XIX and XXI of the Act. Section 1139B(b)(3)(B) of the Act provides for development of a core set of adult health quality measures for Medicaid eligible adults and requires that States report on all behavioral health measures included in the Adult Core Set starting in 2024. To improve the quality of care delivered to all Medicaid and CHIP beneficiaries, CMS interprets this language as requiring that reporting for the Child Core Set include all beneficiaries covered by Medicaid and CHIP and reporting for the behavioral health measures in the Adult Core Sets include all beneficiaries covered by Medicaid. This includes beneficiaries enrolled in all Medicaid and CHIP delivery systems as well as services received in all applicable health care settings, such as hospitals, outpatient settings, Federally Qualified Health Centers (FQHCs), rural health clinics (RHCs), and facilities operated by IHS, by Tribes and Tribal Organizations under the Indian Self-Determination and Education Assistance Act, and by Urban Indian Organizations under Title V of the Indian Health Care Improvement Act.	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on October 21, 2022. https://www.federalregister.gov/documents/2022/08/22/2022-17810/medicaid-program-and-chip-mandatory-medicaid-and-childrens-health-insurance-program-chip-core-set?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
382	Proposed Rule	Department of Veterans Affairs (VA)	87 FR 51625	Published 08/23/2022	Health Care Professionals Practicing Via Telehealth The Department of Veterans Affairs (VA) proposes to amend its medical regulations that govern the VA health care professionals who practice health care via telehealth. This proposed rule would implement the authorities of the VA MISSION Act of 2018 and the William M. (Mac) Thornberry National Defense Authorization Act for Fiscal Year 2021.	Section 1730C provides a definition of covered health care professionals that differs from the definition of health care provider under § 17.417(o). VA proposes this regulation to make these definitions consistent. Section 1730C(b)(1)(A) defines a covered health care professional to include those VA employees appointed under 38 U.S.C. 7306, 7401, 7405, 7406, 7408 and title 5 of the U.S. Code. Section 17.417(o) defined a health care provider as an individual who is appointed to an occupation in the Veterans Health Administration that is listed in or authorized under 38 U.S.C. 7401(1) or (3). To maintain consistency between 38 U.S.C. 1730C and § 17.417, VA is proposing to amend the definition of health care provider to instead refer to health care professionals. VA would also renumber the definition in § 17.417 for clarity. VA proposes to add in § 17.417(o)(2)(i) that a health care professional would include those individuals who are appointed under 38 U.S.C. 7306, 7401, 7405, 7406, 7408, and title 5 of the U.S. Code. VA is further proposing to amend the definition of health care professional to be consistent with section 1730C(b)(1)(C) in proposed § 17.417(o)(2)(ii) to state that VA health care professionals would be required to adhere to all standards for quality relating to the provision of health care in accordance with applicable VA policies. VA would, therefore, state in proposed § 17.417(o)(2)(iv)(D) that a health care professional would also include those individuals who are under the clinical supervision of a health care professional that meets the requirements of paragraphs (o)(2)(iv)(A) through (C) of this section and is either a health professions trainee or a health care employee.	Comments must be received on or before October 24, 2022. https://www.federalregister.gov/documents/2022/08/23/2022-18033/health-care-professionals-practicing-via-telehealth?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
383	Notice	Bureau of Indian Affairs (BIA), Interior	87 FR 52021	Published 08/24/2022	Tribal Tourism Grant Program; Solicitation of Proposals	The Secretary of the Interior (Secretary), through the Office of Indian Economic Development (OIED), Division of Economic Development (DED), is soliciting proposals from eligible federally recognized Tribes and Tribal organizations for the Tribal Tourism Grant Program (TTGP). The grant funding will be used to support Tribal tourism by providing Tribes and Tribal organizations funding to obtain technical assistance to perform feasibility studies or develop Tribal tourism business plans. The TTGP grant will provide Tribes resources to explore opportunities to increase Tribal capacity to plan, develop, and manage tourism and related infrastructure, in support of economic development and the Native American Tourism and Improving Visitor Experience Act or NATIVE Act. The feasibility study or business plan will empower Tribes to make informed decisions on potential tourism project(s). The Office of the Assistant Secretary—Indian Affairs, through OIED, is soliciting proposals from federally recognized Tribes listed as Indian Entities Recognized by and Eligible to Receive Services from the United States Bureau of Indian Affairs at 87 FR 4636 (January 28, 2022) and eligible Tribal Organizations as defined by 25 U.S.C. 5304(l). Note: The U.S. Department of the Interior Office of Native Hawaiian Relations is managing NATIVE Act tourism grants to Native Hawaiian Organizations. For additional information on grants for Native Hawaiian Organizations, please contact Ka'i'ini Kalei, Director, Office of Native Hawaiian Relations, (202) 208-7462, Kaiini_Kalei@ios.doi.gov	Grant application packages will be accepted until 5 p.m. ET, on October 24, 2022. OIED will not consider proposals received after this time and date. https://www.federalregister.gov/documents/2022/08/24/2022-18242/tribal-tourism-grant-program-solicitation-of-proposals?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
384	Notice of Meeting	Substance Abuse and Mental Health Services Administration	87 FR 52001	Published 08/24/2022	Advisory Committee for Women's Services (ACWS); Notice of Meeting	The meeting will include discussions on assessing SAMHSA's current strategies, including the mental health and substance use needs of the women and girls population. Additionally, the ACWS will be addressing priorities regarding the impact of COVID-19 on the behavioral health needs of women and children and directions around behavioral health services and access for women and children. The meeting is open to the public and will be held virtually. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions should be forwarded to the contact person by September 1, 2022. Oral presentations from the public will be scheduled at the conclusion of the meeting. Individuals interested in making oral presentations are encouraged to notify the contact person on or before September 1, 2022. Up to five minutes will be allotted for each presentation.	Date/Time/Type: Tuesday, September 6, 2022, from: 1:00 p.m. to 4:30p.m. EDT (OPEN). https://www.federalregister.gov/documents/2022/08/24/2022-18036/advisory-committee-for-womens-services-acws-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
385	Notice of Meeting	Department of Veterans Affairs (VA)	87 FR 52114	Published 08/24/2022	Advisory Committee on Homeless Veterans; Notice of Meeting	The Department of Veterans Affairs (VA) gives notice under the Federal Advisory Committee Act, 5 U.S.C., app. 2, that virtual meetings of the Advisory Committee on Homeless Veterans will be held on September 20 through September 22, 2022. The meeting sessions will begin and end at 12:00 p.m. to 4:00 p.m. Eastern Standard Time (EST). The virtual meeting sessions will be open to the public. On September 20 through September 22, 2022, the agenda will include briefings from VA and other Federal agency officials regarding services for homelessness among Veterans. The Committee will also discuss its proposed annual report recommendations to the Secretary of Veterans Affairs. No time will be allocated at the meetings for receiving oral presentations from the public. Interested parties should provide written comments on issues affecting homeless Veterans for review by the Committee to Anthony Love, Designated Federal Officer, Veterans Health Administration Homeless Programs Office (11HPO), U.S. Department of Veterans Affairs, 811 Vermont Avenue NW (11HPO), Washington, DC 20420, or via email at actv@va.gov.	Members of the public who wish to attend the virtual meetings should contact Anthony Love, Designated Federal Officer, Veterans Health Administration, Homeless Programs Office, at actv@va.gov no later than September 9, 2022, providing their name, professional affiliation, email address, and phone number. Attendees who require reasonable accommodations should also state so in their requests. The meeting link and call-in number is listed below: Zoom Meeting: https://va06web.zoom.us/j/81120356187. https://www.federalregister.gov/documents/2022/08/24/2022-18072/advisory-committee-on-homeless-veterans-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
386	Notice of tribal consultation meeting; request for comments	Small Business Administration	87 FR 52602	Published 08/26/2022	Tribal Consultation for Ownership and Control and Contractual Assistance; Requirements for the 8(a) Business Development (BD) Program and other Planned 8(a) BD Program Regulatory Proposals	The U.S. Small Business Administration (SBA or Agency) announces that it is holding tribal consultation meetings in Anchorage, Alaska, Albuquerque, New Mexico, Oklahoma City, Oklahoma and Washington, DC, as well as a Listening Session in Honolulu, Hawaii, concerning forthcoming proposed revisions to the 8(a) Business Development (BD) program regulations. Additionally, SBA requests comments and input on how best to propose several program policies the Agency is contemplating that would impact Alaska Native Corporations (ANC), tribes, Native Hawaiian Organizations (NHO) (collectively, "entities"), and 8(a) Participants owned by such entities. Testimony presented at these tribal consultations will become part of the administrative record for SBA's consideration when the Agency deliberates on approaches to changes in the 8(a) BD program regulations.	https://www.federalregister.gov/documents/2022/08/26/2022-18393/tribal-consultation-for-ownership-and-control-and-contractual-assistance-requirements-for-the-8a?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
387	Final Rules	Internal Revenue Service, Department of the Treasury; Employee Benefits Security Administration, Department of Labor; Centers for Medicare & Medicaid Services, Department of Health and Human Services.	87 FR 52618	Published 08/26/2022	Requirements Related to Surprise Billing	This document includes final rules under the No Surprises Act, which was enacted as part of the Consolidated Appropriations Act, 2021 (CAA). The document finalizes certain disclosure requirements relating to information that group health plans, and health insurance issuers offering group or individual health insurance coverage, must share about the qualifying payment amount (QPA) under the interim final rules issued in July 2021, titled Requirements Related to Surprise Billing; Part I (July 2021 interim final rules). Additionally, this document finalizes select provisions under the October 2021 interim final rules, titled Requirements Related to Surprise Billing; Part II (October 2021 interim final rules), to address certain requirements related to consideration of information when a certified independent dispute resolution (IDR) entity makes a payment determination under the Federal IDR process.	Effective date: These final rules are effective on October 25, 2022. https://www.federalregister.gov/documents/2022/08/26/2022-18022/requirements-related-to-surprise-billing?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
388	Notice of meeting	Bureau of Indian Affairs (BIA), Interior	87 FR 52593	Published 08/26/2022	Annual Meeting of Federal Partners and Tribal 477 Workgroup Under Indian Employment, Training and Related Services Act of 2017	The Department of the Interior, Bureau of Indian Affairs (BIA), announces the annual meeting of Federal agencies and Tribes that participate in the Indian Employment, Training, and Related Services Act of 2017 also known as the "Public Law 477 Work Group." The meeting will be conducted virtually via MS Teams and by telephone. In 2017, Congress enacted the Indian Employment Training and Related Services Consolidation Act of 2017, Public Law 115-93, codified at 25 U.S.C. 3401-3417 ("2017 Act"). The 2017 Act amended and expanded the Indian Employment and Related Services Demonstration Act of 1992, Public Law 102-477 by, in part, identifying twelve Federal agencies that are now subject to the amended law (as amended by the 2017 Act, "PL477"). Under PL477, Tribes may propose to integrate eligible grant programs from the Departments of the Interior, Agriculture, Commerce, Education, Energy, Health & Human Services, Homeland Security, Housing & Urban Development, Justice, Labor, Transportation, and Veterans Affairs, consolidate and reprogram grant funds in accordance with a single plan, budget, and report approved by the Secretary of the Interior ("477 Plan"). As required by PL477, the Department of the Interior and its eleven partner Federal agencies entered into a Memorandum of Agreement (MOA) governing the implementation of PL477. That MOA is being renegotiated among the twelve Federal partners and Tribal representatives.	Meeting: The annual Federal Partner and Tribal 477 Work Group meeting will be held on Monday, September 12, 2022, from 2:00 p.m. to 4 p.m. Eastern Daylight Time (EDT). Comments: Interested persons are invited to submit comments on or before October 25, 2022. https://www.federalregister.gov/documents/2022/08/26/2022-18464/annual-meeting-of-federal-partners-and-tribal-477-workgroup-under-indian-employment-training-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
389	DTLL/DULL	IHS, HHS	N/A	Published 08/26/2022	Special Diabetes Program for Indians (SDPI) Fiscal Year 2023	The Consolidated Appropriations Act, 2021, authorized SDPI funding until September 30, 2023. The SDPI has been authorized at $147 million for FY 2023, a $3 million decrease due to mandatory sequestration. With ongoing support and collaboration, the SDPI will be able to continue providing important diabetes treatment and prevention services in Tribal and Urban Indian communities In accordance with the TLDC's recommendations, IHS has decided to keep the SDPI funding distribution and national funding formula the same in FY 2023, as it has been since FY 2016. All awarding agencies within the United States Department of Health and Human Services (HHS) are required to maximize competition for discretionary awards by allowing all potentially eligible applicants to apply for a given funding opportunity. In defining eligible applicants, each awarding agency must adhere to programmatic eligibility, as specified in statute or regulations. Consistent with this HHS requirement and the statutory authorization for the SDPI grant program, eligible applicants for the new SDPI grant cycle include the IHS, Indian health programs operated by a Tribe or Tribal Organization pursuant to an Indian Self-Determination and Education Assistance Act contract or compact, and urban Indian health programs operated by Urban Indian Organizations (UIOs) pursuant to an Indian Health Care Improvement Act contract. Additional details on the SDPI FY 2023 Notice of Funding Opportunity (NOFO) and associated grant application requirements are available online: SDPI Application. All applicants have until Friday, October 7, 2022, to submit their applications for SDPI funding. To ensure that each eligible applicant has the same opportunity for success, please note it is essential that complete, high quality applications be submitted by the due date listed in the NOFO. Grant regulations do not allow for any revisions once the due date has passed. No SDPI funds will be awarded to any application that is incomplete, of insufficient quality, or submitted after the NOFO deadline.	If you have any SDPI-related questions, please contact Ms. Carmen Hardin, Acting Director, IHS Division of Diabetes Treatment and Prevention, by telephone at (844) 447-3387. For questions pertaining to SDPI grant issues, please contact Ms. Marsha Brookins, Director, IHS Division of Grants Management, by telephone at (301) 443-5204, or by e-mail at dgm@ihs.gov. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DULL-08262022.pdf Summary of Comments received and Final Recommendations: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/Enclosure-DTLL-DULL-08262022.pdf
390	DTLL	DOJ, DOI	N/A	Published 08/26/2022	Listening Session with the DOJ and DOI to discuss the impact of *Oklahoma v. Castro-Herta*	*Oklahoma v. Castro-Huerta* addressed the scope of a state's criminal jurisdiction to prosecute non-Indian defendants in Indian country.	Wednesday, September 26, 2022 3:00 — 5:00 p.m. Eastern Time Link to register: https://dpregister.com/sreg/10170785/f44817553.15; those unable to pre-register may join by calling 1-844-845-4169 and asking to be joined to the US DOJ Office of Tribal Justice call. Thursday September 27, 2022 3:00 — 5:00 p.m. Eastern Time Link to register: https://dpregister.com/sreg/10170786/f44912150cc; those unable to pre-register may join by calling 1-844-845-4169 and asking to be joined to the US DOJ Office of Tribal Justice call. https://acrobat.adobe.com/link/track?uri=urn:aaid:scds:US:62c9556a-1428-3a33-9dc9-dc66eb1adaa5
391	Notice of request for information	Substance Abuse and Mental Health Services Administration	87 FR 53477	Published 08/31/2022	Request for Information: SAMHSA's Role in Possible Agency Actions Regarding Mental Health and Substance Use Wellbeing in the Context of Climate Change and Health Equity	SAMHSA seeks input from members of the public about how it can best address the behavioral health impacts of climate change and health equity considerations. Behavioral health includes mental health conditions and substance use disorders. SAMHSA specifically seeks input on suggested priorities, resources, partners and collaborating agencies and organizations A. What should SAMHSA's top priorities be with respect to climate change and behavioral health? What are current strengths or gaps in SAMHSA's work in this area? B. What should SAMHSA's top priorities be to ensure behavioral health equity with respect to climate change? C. Which population(s) are most vulnerable to the behavioral health impact(s) of climate change? How can SAMHSA communicate with such population(s) and others to support their preparedness for the behavioral health impact(s) of climate change? D. In thinking about behavioral health, what are the top lessons learned from past climate-related emergencies and natural disasters, such as recent or past hurricanes, heat waves, wildfires, or other events? E. What peer-reviewed articles, papers, toolkits, listservs or other resources related to climate change should SAMHSA highlight in its work with states, local, tribal and territorial health authorities, behavioral health providers, grant recipients, national and local stakeholder organizations, and the general public? F. Should SAMHSA programs highlight the importance of climate change to its grant recipients? If so, how? G. What barriers exist in SAMHSA's programs or regulations that make it difficult to prepare for, mitigate, respond to or recover from the impacts of climate change on mental health or substance use disorders? H. What steps should SAMHSA take to help states, local, tribal and territorial health authorities, grant recipients and stakeholders, behavioral health providers, national and local stakeholder organizations, and the general public address the impacts of climate change and the needs of underserved populations? I. Can SAMHSA promote behavioral health equity by addressing intergenerational trauma resulting from climate change? If so, how? J. How can SAMHSA support access to behavioral health and climate change resources and supports for future generations?	Comments on this notice must be received by October 31, 2022. https://www.federalregister.gov/documents/2022/08/31/2022-18834/request-for-information-samhsas-role-in-possible-agency-actions-regarding-mental-health-and?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
392	DULL/DTLL	Veterans Affairs (VA)	N/A	Published 08/31/2022	VHA-IHS Draft Annual Operational Plan	VHA and IHS will host an upcoming tribal consultation webinar to solicit feedback on the Draft Annual Operational Plan. Once a date and time are confirmed, they ll announce the details for the tribal consultation webinar in the federal register. Current draft: https://content.gov-delivery.com/attachments/USVAOTGR/2022/08/31/file_attachments/2268638/VA%20-IH%20MOU%20Operational%20Plan_FINAL.pdf	63493-1 DTLL DULL IHS VHA MOU Operational Plan signed 8.22.2022 (002).pdf (gov-delivery.com)
393	Notice of single source award	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 54219	Published 09/02/2022	Analyses, Research, and Studies To Assess the Impact of Centers for Medicare & Medicaid Services Programs on American Indians/Alaska Nativ es and the Indian Health Care System Serving American Indians/Alaska Nativ es Beneficiaries	Through a Notice of Funding Opportunity, "Analyses, Research, and Studies to Assess the Impact of Centers for Medicare & Medicaid Services (CMS) Programs on American Indians/Alaska Nativ es (AI/ANs) and the Indian Health Care System Serving AI/ANs Beneficiaries," CMS has sought an application from the National Indian Health Board (NIHB)for a single source cooperative agreement. The funding CMS anticipates awarding under this single source cooperative agreement will support research to assess the impact of CMS programs that affect AI/ANs and the Indian Health Care System. The funding CMS anticipates awarding under this single source cooperative agreement will support research to assess the impact of CMS programs that affect AI/ANs and the Indian Health Care System, composed of Indian Health Service (IHS) providers, providers that are tribally operated under the Indian Self Determination and Education Assistance Act (ISDEAA), and providers operated by Urban Indian organizations (collectively referred to as ITU providers). The total amount of funding available over a 5-year period will be up to $4,000,000 pending availability of funds and satisfactory performance by the recipient. The cooperative agreement will be awarded consistent with the overall quality of the proposal and the applicant's ability to meet project goals. The amount of funding awarded will be no more than $800,000 per 12-month budget period, subject to availability of funds, and there will be five 12-month budget periods under this award. Funding for budget periods 2-5 is non-competitive and is subject to the availability of funds as well as satisfactory performance of the recipient. The total award will not exceed $4,000,000.	NIHB's application is due on September 1, 2022, and if the application is approved, CMS anticipates awarding a single source cooperative agreement by September 28, 2022. The anticipated period of performance for the cooperative agreement would be from September 29, 2022, through September 28, 2027, subject to the availability of funds and satisfactory performance. https://www.federalregister.gov/documents/2022/09/02/2022-19085/analyses-research-and-studies-to-assess-the-impact-of-centers-for-medicare-and-medicaid-services?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
394	Rule, Final Action	Federal Communications Commission (FCC)	87 FR 54401	Published 09/06/2022	Affordable Connectivity Program	The Federal Communications Commission (Commission) established a pilot program, titled "Your Home, Your Internet," designed to increase awareness of and encourage participation in the Affordable Connectivity Program for households receiving Federal housing assistance. The pilot program is established on September 6, 2022. Earlier this year, the Federal Communications Commission (Commission) established the $14.2 billion Affordable Connectivity Program (or ACP). Over 12 million households have signed up to receive a $30 benefit (or up to $75 per month for households on qualifying Tribal lands) to offset the cost of internet access. For those households, the Affordable Connectivity Program can open up a world of opportunity. They can work from home, take advantage of telehealth and remote schooling, and stay connected with friends and family. The Commission is committed to bringing those benefits to the millions more eligible households who have not yet signed up. In this document, the Commission establishes a pilot program, titled "Your Home, Your Internet," designed to increase awareness of and encourage participation in the Affordable Connectivity Program for households receiving Federal housing assistance.	https://www.federalregister.gov/documents/2022/09/06/2022-18093/affordable-connectivity-program?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov

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395	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 54760	Published 09/07/2022	Streamlining the Medicaid, Children's Health Insurance Program, and Basic Health Program Application, Eligibility Determination, Enrollment, and Renewal Processes	This rulemaking proposes changes to simplify the processes for eligible individuals to enroll and retain eligibility in Medicaid, the Children's Health Insurance Program (CHIP), and the Basic Health Program. This proposed rule aims to remove barriers and facilitate enrollment of new applicants, particularly those dually eligible for Medicare and Medicaid; align enrollment and renewal requirements for most individuals in Medicaid; establish beneficiary protections related to returned mail; create timeliness requirements for redeterminations of eligibility in Medicaid and CHIP; make transitions between programs easier; eliminate access barriers for children enrolled in CHIP by prohibiting premium lock-out periods, waiting periods, and benefit limitations; and modernize recordkeeping requirements to ensure proper documentation of eligibility and enrollment. In this rulemaking, CMS seeks to eliminate obstacles that make it harder for eligible people to remain enrolled, particularly those individuals who are exempted from MAGI and did not benefit from many of the enrollment simplifications in our 2012 and 2013 eligibility final rules. CMS seeks to streamline enrollment for individuals known to be Medicaid eligible, like current enrollees who are also eligible for but not enrolled in the MSPs. CMS seeks to remove coverage barriers, like premium lock-out periods and waiting periods that are not permitted under other insurance affordability programs, and to reduce coverage gaps as individuals transition from one insurance affordability program to another. Together, the changes in this proposed rule would streamline Medicaid, CHIP and BHP eligibility and enrollment processes, reduce the administrative burden on States and enrollees, expand coverage of eligible applicants, increase retention of eligible enrollees, and improve health equity.	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on November 7, 2022. https://www.federalregister.gov/documents/2022/09/07/2022-18875/streamlining-the-medicaid-childrens-health-insurance-program-and-basic-health-program-application?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
396	Notice and Request for Public Comments, request for approval	Indian Health Service (IHS), HHS	87 FR 55448	Published 09/09/2022	Request for Public Comment: 30-Day Information Collection: Urban Indian Organization On-Site Review	In compliance with the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) invites the general public to comment on a new information collection titled, "Urban Indian Organization On-Site Review." IHS is requesting the Office of Management and Budget (OMB) to approve this new collection. The purpose of this notice is to announce the IHS' intent to submit this collection to OMB and to allow 30 days for public comment to be submitted directly to OMB.	Consideration will be given to all comments received by October 11, 2022. https://www.federalregister.gov/documents/2022/09/09/2022-19493/request-for-public-comment-30-day-information-collection-urban-indian-organization-on-site-review?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
397	Notice	Veterans Affairs (VA)	87 FR 56152	Published 09/13/2022	Cost-Based and Inter-Agency Billing Rates for Medical Care or Services Provided by the Department of Veterans Affairs for Fiscal Year 2023	This notice document updates the Cost-Based and Inter-Agency billing rates for medical care or services provided by the U.S. Department of Veterans Affairs (VA) furnished in certain circumstances. VA's methodology for computing Cost-Based and Inter-Agency rates for medical care or services provided by VA is set forth in 38 CFR 17.102(h). Two sets of rates are obtained by applying this methodology, Cost-Based and Inter-Agency. Cost-Based rates apply to medical care and services that are provided by VA under 38 CFR 17.102(a), (b), (d) and (g), respectively, in the following circumstances: a) In error or based on tentative eligibility; b) In a medical emergency; c) To pensioners of allied nations; and d) For research purposes in circumstances under which the medical care appropriation shall be reimbursed from the research appropriation. Inter-Agency rates apply to medical care and services that are provided by VA under § 17.102(c) and (f), respectively, in the following circumstances when the care or services provided are not covered by any applicable sharing agreement in accordance with § 17.102(e): a) To beneficiaries of the Department of Defense or other Federal agencies; and b) To military retirees with chronic disability.	The rates set forth herein are effective October 1, 2022. https://www.federalregister.gov/documents/2022/09/13/2022-19739/cost-based-and-inter-agency-billing-rates-for-medical-care-or-services-provided-by-the-department-of?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
398	Notice and request for comments	Office of Planning, Research, and Evaluation, Administration for Children and Families, HHS	87 FR 56425	Published 09/14/2022	Proposed Information Collection Activity; Formative Evaluation of the Demonstration Grants To Strengthen the Response to Victims of Human Trafficking in Native Communities Program (New Collection)	The Administration for Children and Families (ACF) is proposing a new data collection activity for the Formative Evaluation of the Demonstration Grants to Strengthen the Response to Victims of Human Trafficking in Native Communities (VHHNC) Program. The overarching goals of the formative evaluation are to understand the context in which the VHHNC projects are implemented, the projects' goals, and the paths they take to achieve their goals. The proposed data collection will include semi-structured interviews with project staff, project participants, and key partners.	Comments due within 60 days of publication – November 11, 2022. https://www.federalregister.gov/documents/2022/09/14/2022-19796/proposed-information-collection-activity-formative-evaluation-of-the-demonstration-grants-to?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
399	Notice and request for comment	Health Resources and Services Administration (HRSA), HHS	87 FR 56689	Published 09/15/2022	Notice of Availability of Health Center Program Scope of Project and Telehealth Policy Information Notice	HRSA is inviting public comment on the Draft Health Center Program Scope of Project and Telehealth Policy Information Notice (Telehealth PIN). The purpose of the Telehealth PIN is to establish policy for health centers that provide services via telehealth within the HRSA-approved scope of project. The Telehealth PIN also describes considerations and criteria health centers must meet for providing services via telehealth within the Health Center Program scope of project.	Submit comments no later than November 14, 2022. https://www.federalregister.gov/documents/2022/09/15/2022-19933/notice-of-availability-of-health-center-program-scope-of-project-and-telehealth-policy-information?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
400	Notice	Veterans Affairs (VA)	87 FR 57025	Published 09/16/2022	Solicitation of Nominations for the Appointment to the Advisory Committee on Tribal and Indian Affairs, Indian Health Service, Billing Area Representative	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs ("the Committee") to represent the Indian Health Service, Billings Area. At least one member of the Committee represents urban Indian organizations nominated by a national urban Indian organization.	Nominations for membership on the Committee must be received no later than 5:00 p.m. EST on October 7, 2022. https://www.federalregister.gov/documents/2022/09/16/2022-20136/solicitation-of-nominations-for-the-appointment-to-the-advisory-committee-on-tribal-and-indian?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
401	Notice	Veterans Affairs (VA)	87 FR 57024	Published 09/16/2022	Notice of Tribal Consultation and Request for Comments on New Agreement Template Draft for VA's Indian Health Services/Tribal Health Program Reimbursement Agreements	The Department of Veterans Affairs (VA), Veterans Health Administration (VHA) will facilitate a tribal consultation session regarding the expansion of VA's Indian Health Services/Tribal Health Programs (IHS/THP) Reimbursement Agreements Program to include Purchase Referred Care (PRC) and Contracted Travel. VA seeks tribal feedback to assist with drafting an updated Reimbursement Agreement template for the lower 48 states. Input requested includes, but is not limited to, the agreed scope of service, payment rates, and invoicing or billing submissions.	VA will hold an in-person consultation on Tuesday, September 27, 2022, between 4:30 p.m. and 6 p.m. (EST) at the Hyatt Regency Washington, 400 New Jersey Ave. NW., Washington, DC 20001, which will be hosted by the National Indian Health Board. Additionally, VA will hold a virtual consultation on September 30, 2022, between 1-2 p.m. (EST). Written comments must be received on or before September 30, 2022. https://www.federalregister.gov/documents/2022/09/16/2022-20068/notice-of-tribal-consultation-and-request-for-comments-on-new-agreement-template-draft-for-vas?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
402	DTLL	Health Resources and Services Administration (HRSA), HHS	N/A	Published 09/20/2022	HRSA in-person consultation health at the National Indian Health Board's 2022 National Tribal Health Conference and 50th Anniversary Celebration on September 29, 2022 from 5 to 7 PM EST	The focus of this consultation is to hear advice and recommendations on strategies to address systems challenges related to physician recruitment, retention, and provider burnout in Indian Country. The session will also include information on workforce programs in other related disciplines in which HRSA has forecasted programs slated for fiscal year 2023. HRSA will also highlight other key health programmatic activities including rural and maternal health initiatives.	Written testimony is being accepted until October 28, 2022 and can be emailed to HRSA at olanhealth@hrsa.gov DTLL: https://acrobat.adobe.com/link/track?uri=urn:aaid:scds:US:6a9232e2-f0cd-370a-b126-d46790128b7e0
403	Notice of nomination	Agency for Health Research and Quality (AHRQ), HHS	87 FR 57699	Published 09/21/2022	Supplemental Solicitation for Nominations of Members From Populations Underrepresented in Medicine (URM) To Serve on Scientific Peer Review Committee	This supplemental notice invites the public to nominate individuals from populations underrepresented in medicine to serve as members to the AHRQ Initial Review Group (IRG), which is responsible for the scientific peer review of AHRQ grant applications. The AHRQ IRG conducts scientific and technical review for health services research and training grant applications and is comprised of five subcommittees or study sections, each with a particular research focus. AHRQ is seeking nominations from the public, including minority-serving institutions, academic health centers, community-based organizations, professional societies, or other state and federal agencies. The IRG is comprised of five subcommittees, or study sections, each with a particular emphasis around which peer reviewer expertise is assembled. AHRQ seeks nominations for each of the subcommittee competency domains described below: 1. Health Care Effectiveness and Outcomes Research: End-stage renal disease; cardiovascular disease; pediatrics; pharmacologist in opioid management; biostatisticians in health services research; health disparities and social determinants of health. 2. Healthcare Information Technology Research: Biomedical and consumer health informatics; family medicine; health care data analysis; health information technology; health services research in patient-oriented research; electronic health record and data for research; population-based studies in medicine; epidemiology; telehealth/telemedicine; emergency medicine; insurance benefit design; chronic condition care; natural language processing and machine learning; social networking and its determinants of health; health disparities and social determinants of health. 3.Healthcare Systems and Value Research: Health statistics; health care outcome research; evaluation and survey methods; health system and service research; health care policy research; health economics research; large database analysis; private health insurance/Medicaid and Medicare; learning laboratory development; health disparities and social determinants of health. 4. Healthcare Systems and Value Research: Health statistics; health care outcome research; evaluation and survey methods; health system and service research; health care policy research; health economics research; large database analysis; private health insurance/Medicaid and Medicare; learning laboratory development; health disparities and social determinants of health. 5. Healthcare Safety and Quality Improvement Research: Pharmacists with expertise in informatics; infectious diseases specialists; geriatricians; surgeons with a specialty in diagnostic error; health disparities and social determinants of health.	Nominations should be received on or before December 31, 2022. https://www.federalregister.gov/documents/2022/09/21/2022-20419/supplemental-solicitation-for-nominations-of-members-from-populations-underrepresented-in-medicine?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
404	Notice of Tribal Consultation Session	Indian Health Service (IHS), HHS	N/A	Published 09/23/2022	IHS Listening Session on Monday, September 26 from Noon – 1:30PM (ET) during the NIHB's National Tribal Health Conference.	On Monday, September 26, 2022, from 12:00 - 1:30 PM ET at 400 New Jersey Avenue, NW, Washington, D.C., United States, 2000, the IHS will provide important updates and extend an opportunity for Tribal Leaders and Urban Indian Organization Leaders to share input with IHS officials. IHS updates will include evaluating Health Care Facilities Construction Demonstration Project Proposals, Health Information Technology Modernization, decisions on Special Diabetes Program for Indians for FY 2023, Tribal Consultation Policy, 2022-2026 Office of Urban Indian Health Programs Strategic Plan, and Draft Operational Plan for IHS-NIHA Memorandum of Understanding (MOU).	Virtual Access: Join ZoomGov Meeting: https://ihs-gov.zoomgov.com/j/1614036634 | Meeting ID: 161 403 6634 Telephone: (833) 568-8864 Toll-free | Meeting ID: 161 403 6634 https://www.ihs.gov/ihscalendar/calendar/ihs-listening-session/ For more information on the NIHB Conference visit: https://web.cvent.com/event/a65f9da55-6075-4089-b57d-ab1395ebaa6f/websitePage:cab88dbb-07fb-4b28-86d5-716ac1d8dc7a?WebId=nthc2022
405	Notice	Census Bureau	87 FR 60117	Published 10/04/2022	2020 Census Tribal Consultation	The Census Bureau is planning two tribal consultations on October 18, 2022, in Anchorage, Alaska and October 31, 2022, in Sacramento, California, with federally recognized tribes, so tribes can provide feedback on the content and design of the 2020 Census Detailed Demographic and Housing Characteristics File A (Detailed DHC-A) and Detailed Demographic and Housing Characteristics File B (Detailed DHC-B). These two products are the successor products to the American Indian and Alaska Native Summary File (AIANSF) that was produced in previous censuses. The Detailed DHC-A provides population counts and sex by age statistics for approximately 370 detailed racial and ethnic groups, such as German, Lebanese, Jamaican, Chinese, Native Hawaiian, and Mexican, as well as about 1,200 detailed American Indian and Alaska Native tribal and village population groups, such as Native Village of Hooper Bay (Haparyamiut) and Navajo Nation. The Detailed DHC-B provides household type and tenure information for the same detailed race and ethnicity groups and American Indian and Alaska Native tribal and village population groups.	The Census Bureau tribal consultation registration links are: Tribal Consultation—Anchorage—Oct 18, 2022: https://censustribalconsultationak.splashthat.com/. Tribal Consultation—Sacramento—Oct 31, 2022: https://censustribalconsultationca.splashthat.com/. Submit your comments by email. Send comments to: 2020DAS@census.gov. Deadline date for input: November 30, 2022. Use the product name of either Detailed DHC-A or Detailed DHC-B in the subject line. https://www.federalregister.gov/documents/2022/10/04/2022-21479/2020-census-tribal-consultation?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
406	DTLL/DULL	IHS, HHS	N/A	Published 10/04/2022	IHS Health IT Modernization Tribal Consultation and Urban Confer	The Indian Health Service (IHS) has embarked on full replacement of the Resource and Patient Management System. Through a series of Tribal Consultations and Urban Confers, the Agency is seeking meaningful input from Tribal and Urban Indian Organization Leaders. The focus of the fourth session in the 2022 Tribal Consultation and Urban Confer regarding IHS Health Information Technology Modernization series is Implementation Deployment Plan.	Date:Tuesday, November 1, 2022 Time:2:00 p.m. – 3:30 p.m. (Eastern Time) Registration Link:https://www.zoomgov.com/meeting/register/v.1tdeuxTorGAg68ryaAVY90dTGwcPaa-Mg__

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
407	Presidential Document	Executive Office of the President	87 FR 60253	Published 10/05/2022	National Domestic Violence Awareness and Prevention Month, 2022	During National Domestic Violence Awareness and Prevention Month, the Administration continues to shine a light on the causes of this scourge, strengthen the ability of Federal, State, Tribal, territorial, and local officials to take action, and call on all communities to strengthen prevention efforts. The Administration is working to ensure that all survivors have access to justice and the support they need for their healing and well-being. The Administration calls on all Americans to speak out against domestic violence and support efforts to educate all people about healthy relationships centered on respect; support victims and survivors in your own families and networks; and support the efforts of victim advocates, service providers, health care providers, and the legal system, as well as the leadership of survivors, in working to end domestic violence.	https://www.federalregister.gov/documents/2022/10/05/2022-21784/national-domestic-violence-awareness-and-prevention-month-2022?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
408	DTLL	Office for Victims of Crimes (OVC); US Department of Justice (DOJ)	N/A	Published 10/05/2022	Consultation on the Tribal Set-Aside from the Crime Victims Fund (TVSSA) for Fiscal Year 2023	The Consultation on OVC's administration of the TVSSA will be held on Wednesday, November 9th from 2:00–4:00 p.m., eastern time. An informational framing paper and a report on the management of the Tribal Set-Aside will be provided in advance of the Consultation for your consideration. Consultation testimony can be provided by: • an elected Tribal leader, • an appointed Tribal leader, or • someone designated by an elected or appointed Tribal leader. (Designation must be provided in writing.) In addition to the virtual Consultation, OVC plans to host an in-person Listening Session before the 17th National Indian Nations Conference scheduled for December 6–9, 2022, at the Agua Caliente Band of Cahuilla Indians Reservation in Palm Springs, CA. This session will be held on December 6, 2022, from 9:00–11:30 a.m., and will provide interested persons an opportunity to offer feedback about the TVSSA program, and other matters to enhance services for victims of crime within Tribal communities. Information about the Consultation and other upcoming events is available on the OVC website at: https://ovc.ojp.gov/program/tribal/tribal-victim-services-set-aside	https://ovc.ojp.gov/tribal/tribal-victim-services-set-aside/fy-2023-tvssa-consultation-tribal-leaders-letter.pdf To register for the TVSSA Consultation visit: https://us06web.zoom.us/webinar/register/WN_24U3Xdlb5tmHo3pXe2gE6Q For more information, visit: https://ovc.ojp.gov/program/tribal/tribal-victim-services-set-aside
409	Notice of meeting	HHS	87 FR 61339	Published 10/11/2022	Meeting of the Presidential Advisory Council on HIV/AIDS	U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will convene the 75th full council meeting virtually on Monday, October 17, 2022 from approximately 12:00-2:00 p.m. (ET). The meeting will be open to the public and there will be a public comment session; pre-registration is required to provide public comment. To pre-register to provide public comment, please send an email to PACHA@hhs.gov and include your name, organization, and title by close of business Monday, October 10, 2022. There is also an option to submit written statement by emailing PACHA@hhs.gov by close of business Monday, October 24, 2022. The meeting agenda will be posted on the PACHA page on HIV.gov at https://www.hiv.gov/federal-response/pacha/about-pacha prior to the meeting.	The meeting will be held on Monday, Monday, October 17, 2022 from approximately 12:00-2:00 p.m. (ET). https://www.federalregister.gov/documents/2022/10/11/2022-22013/meeting-of-the-presidential-advisory-council-on-hiv-aids?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
410	Notice of Tribal Consultation	Substance Abuse and Mental Health Servies Administration, HHS	87 FR 61343	Published 10/11/2022	Meeting of the Substance Abuse and Mental Health Services Administration's Tribal Technical Advisory Committee (TTAC)	The TTAC meeting will be on November 15-17, 2022. The meeting is open to the public and will be held in person. Agenda with call-in information will be posted on the SAMHSA website prior to the meeting at: https://www.samhsa.gov/about-us/advisory-councils/meetings. The meeting will include, but not be limited to, remarks from the Assistant Secretary for Mental Health and Substance Use; updates on SAMHSA priorities; follow up on topics related to the previous TTAC meetings; and council discussions.	Federal Register :: Meeting of the Substance Abuse and Mental Health Services Administration's Tribal Technical Advisory Committee (TTAC)
411	Notice of Funding Opportunity	Urban Indian Health Institute	N/A	Published 10/11/2022	Sweetgrass Grants open to UIOs	Sweetgrass grants support public health programs related to chronic disease prevention and management. Part of the UIHI Community Grants Program, Sweetgrass grants award up to four grants of $10,000 to urban Native health and human services organizations and to urban Indian organizations with programming focusing on Indigenous approaches to chronic disease. UIOs are eligible for this grant.	IMPORTANT DATES: Pre-application webinar: Monday, October 17, 2022 9:30 am PT Funding Application deadline: Monday, November 21, 2022 by 11:59 pm PT Award notification: Friday, December 16, 2022 Grantee orientation: Wednesday, January 4, 2023 Funding period: December 16, 2022 - September 29, 2023 https://www.uihi.org/sweetgrass-grants/
412	Notice of meeting	Veterans Affairs (VA)	87 FR 63586	Published 10/19/2022	Advisory Committee on Tribal and Indian Affairs	The Advisory Committee on Tribal and Indian Affairs meetings will be open to the public (virtually). The purpose of the Committee is to advise the Secretary on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans. This includes advising the Secretary on the administration of healthcare services and benefits to American Indians/Alaska Native and Native Hawaiian Veterans; thereby assessing those needs and whether VA is meeting them. On November 8, 2022, from 1:00 p.m. to 4:00 p.m. EST, the agenda will include opening remarks from the Committee Chair, Executive Sponsor, and other VA officials. There will be updates and proposed recommendations from the health subcommittee. On November 9, 2022, from 11:00 a.m. to 4:00 p.m. EST, the agenda will include updates from the benefits and administrative subcommittees for proposed recommendations from each of the subcommittees. From 2:45 p.m. to 3:30 p.m. there will be Public Comment from those public members who have provided a written summary. On November 10, 2022, from 10:00 a.m. to 12 p.m. EST, the Committee will receive updates from the VA Office of Tribal Health. The committee will hold open discussion on topics relevant to the Committee and address follow-up and action items including dates for next meeting.	Meeting Link: https://www.zoomgov.com/meeting/register/vJItcOmvpjIE4NnNB17Irqa4-5GHvmMQHyk. https://www.federalregister.gov/documents/2022/10/19/2022-22699/advisory-committee-on-tribal-and-indian-affairs-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
413	Notice and request for comment	HHS, Office of the Secretary, Office of the Assistant Secretary of Health, Office of Disease Prevention and Health Promotion	87 FR 64240	Published 10/24/2022	Announcement of Solicitation of Written Comments on Proposed Health People 2030 Objectives	The U.S. Department of Health and Human Services (HHS) solicits written comments on an additional objective proposed to be added to Healthy People 2030, and written comments from the public proposing additional new core, developmental, or research objectives to be included in Healthy People 2030. Public comment informed the development of Healthy People 2030. HHS will provide opportunities for public input periodically throughout the decade to ensure Healthy People 2030 reflects current public health priorities and public input. The updated set of Healthy People 2030 objectives will be incorporated on https://health.gov/healthypeople. This updated set will reflect further review and deliberation by federal Healthy People topic area workgroups, the Federal Interagency Workgroup on Healthy People 2030, and other federal subject matter experts. The public now is invited to comment on one new core objective proposed to be added to Healthy People 2030. This new objective was developed by federal subject matter experts, approved by the Healthy People Federal Interagency Workgroup and is presented for the public's review and comment. The objective is: 1. Social Determinants of Health-NEW-07: Increase the proportion of the voting age citizens who vote. Data Source: Current Population Survey (CPS), U.S. Census Bureau and the U.S. Bureau of Labor Statistics (BLS). The public is also invited to propose additional core, developmental, or research objectives for consideration that address critical public health issues. Proposed new objectives must meet all the objective selection criteria.	Written comments will be accepted through 11:59 p.m. ET, December 2, 2022. https://www.federalregister.gov/documents/2022/10/24/2022-22983/announcement-of-solicitation-of-written-comments-on-proposed-healthy-people-2030-objectives?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
414	Notice of meeting	White House, Office of Intergovernmental Affairs	N/A	Published 10/27/2022	White House 2022 Tribal Nations Summit on November 30th and December 1st, 2022 at the Department of the Interior in Washington, D.C.	Building on the 2021 Summit and the progress made to strengthen our Nation-to-Nation relationships and invest record levels of resources in Tribal communities, the Administration looks forward to hosting a robust and meaningful engagement with Tribal leaders on important issues facing Tribal communities. The Summit will feature new Administration announcements and efforts to implement key policy initiatives supporting Tribal communities.	Additional details are forthcoming. Please register for the 2022 White House Tribal Nations Summit by Monday, November 14th, 2022. Due to limited capacity, we can only accommodate one governmental representative per Tribe. Tribal leaders register here: wh.gov/TribalNationsSummit If you have any questions, please reach out to TNS@who.eop.gov . https://mcusercontent.com/f62088bb41dd81f9c715ef4d/files/58c59fd2-856f-4444-117f-ef4fb1e2b8e1/2022_White_House_Tribal_Nations_Summit_Announcement_Letter.pdf
415	DTLL	HHS	N/A	Published 10/28/2022	HHS Tribal Consultation Policy	HHS will have a 60-day comment period. Please send us your comments and recommendations to the draft policy that is attached to consultation@hhs.gov . Deadline for submission of comments is January 6, 2023. Once HHS has received all the comments, we will reconvene the STAC Workgroup to review the comments. In addition, the updated Policy will go through an internal HHS clearance process. Secretary Becerra's goal is to have an updated Policy signed in early 2023.	https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:d5a08768-eb5b-3e10-8f4f-f8244fb74f41
416	DTLL/DUIL	IHS	N/A	Published 10/31/2022	The Deputy Director writes to inform Tribal Leaders and Urban Indian Leaders that the IHS Resource and Patient Management System (RPMS) Laboratory Accession Graphical User Interface package (BLGU) will be decommissioned, effective October 31, 2022.	The RPMS BLGU is not being used due to errors in functionality. The BLGU has not been able to accession laboratory specimens since its rollout in 2013, and continues to generate error messages when utilized. Outreach has been done to confirm the BLGU package is not being used for other purposes. The IHS-operated sites will need to uninstall the BLGU software, if they have not already done so, and the IHS recommends other RPMS EHR sites consider uninstalling the BLGU software as well. RPMS EHR enhancements (Patch 34) are projected for release by the end of October 2022, and instructions for uninstalling BLGU software will be released concurrently. These instructions will be available on the RPMS website (https://www.ihs.gov/rpms/applications/clinical/).	If you need additional information or have questions, please e-mail Dr. Susy Postal, Chief Health Informatics Officer, Office of Information Technology, IHS, by email at Susy.Postal@ihs.gov or CDR Karen Romancito, RPMS Laboratory Informaticist, Office of Information Technology, IHS, by email at Karen.Romancito@ihs.gov . https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DUOIUL_10-31-22.pdf
417	Notice of Meeting	Health Resource and Services Administration (HRSA), HHS	87 FR 66198	Published 11/02/2022	Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)	The agenda for the December 7, 2022, meeting is being finalized and may include the following topics: a review of draft recommendations for the Secretary on improving birth outcomes among American Indian and Alaska Native mothers and infants and a vote on whether to send them forward; discussion to determine new and continuing priority areas for the Committee 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.	Meeting date: December 7, 2022, from 11 a.m. to 6 p.m. Eastern Time. https://www.federalregister.gov/documents/2022/11/02/2022-23790/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
418	Final Rule	CMS, HHS	87 FR 66454	Published 11/03/2022	Medicare Program; Implementing Certain Provisions of the Consolidated Appropriations Act, 2021 and Other Revisions to Medicare Enrollment and Eligibility Rules	This final rule implements certain provisions of the Consolidated Appropriations Act, 2021 (CAA). Additionally, CMS is proposing to delete references to specific Medicare forms from the text of existing regulations at §§ 406.7 and 407.11 in order to provide greater administrative flexibility. Finally, this final rule updates the various federal regulations that affect a State's payment of Medicare Part A and B premiums for beneficiaries enrolled in the Medicare Savings Programs and other Medicaid eligibility groups.	This final rule is effective on January 1, 2023, except for the addition of § 407.47(f) at instruction 21, which is effective on January 1, 2024. https://www.federalregister.gov/documents/2022/11/03/2022-23407/medicare-program-implementing-certain-provisions-of-the-consolidated-appropriations-act-2021-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

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419	DTLL/DULL	IHS	N/A	Published 11/01/2022	The Director announces the appointment of the Acting Director for the Great Plains Area IHS.	Mr. Joe Amiotte will serve as the Acting Director of the Great Plains Area Indian Health Service (IHS). With more than 20 years of Agency service, Mr. Amiotte brings extensive expertise in health care administration and Tribal Consultation to the Great Plains Area IHS. Previously, Great Plains Area Deputy of Field Operations, Mr. Amiotte began his IHS career with the Office of Environmental Health and Engineering (OEHE) and served as Chief Executive Officer of the Rapid City Service Unit from 2017 to 2019.	IHS is advertising for a permanent hire for the Great Plains Area Director position. The announcement will be posted to the USAJobs Web site at https://www.usajobs.gov . https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DULL-11-01-22.pdf
420	Notice and request for comment	Offices of Housing, Public and Indian Housing, Community Planning and Development, HUD	87 FR 66723	Published 11/04/2022	60-Day Notice of Proposed Information Collection: Implementation of the Violence Against Women Reauthorization Act of 2013, OMB Control No.: 2577-0286	HUD is seeking approval from the Office of Management and Budget (OMB) for the information collection described below. In accordance with the Paperwork Reduction Act, HUD is requesting comment from all interested parties on the proposed collection of information. The purpose of this notice is to allow for 60 days of public comment.	Deadline to submit comments: January 3, 2023 https://www.federalregister.gov/documents/2022/11/04/2022-24070/60-day-notice-of-proposed-information-collection-implementation-of-the-violence-against-women?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
421	Virtual Urban Confer	OUIHP, IHS	N/A	Published 11/14/2022	Virtual Urban Confer – OUIHP Strategic Plan	OUIHP will be hosting an Urban Confer to discuss the OUIHP Strategic Plan. This Urban Confer will likely be a review of the final version of the Strategic Plan, in which UIOs and NCUIH had the opportunity to provide comments and recommendations.	Nov 29, 2022 01:00 PM Eastern Time Register in advance for this meeting: https://ihs-gov.zoomgov.com/meeting/register/v.Jlff-ivqQuHs8MGIhd0f90qx5LD4A2Bv-NA
422	Virtual Urban Confer	IHS	N/A	Published 11/15/2022	Virtual Urban Confer to Discuss Urban Indian Priorities	IHS will be hosting a Virtual Urban Confer to Discuss Urban Indian Priorities	Wednesday, December 7, 2022 3:00 PM-4:30 PM Eastern Time Register in advance for this meeting: https://ihs-gov.zoomgov.com/meeting/register/v.JiscOyupkGP3dKoHO26X1Z7hvIaFt
423	DTLL/DULL	IHS	N/A	Published 11/17/2022	Urban Confer and Tribal Consultation to seek additional input and recommendations for the final draft of the 2023-2027 IHS OUIHP Strategic Plan and implementation Plan	The IHS hosted a virtual Urban Confer on July 8, 2022, and a virtual Tribal Consultation on July 11, 2022, to promote meaningful discussion and transparency on the second draft of the 2023-2027 OUIHP Strategic Plan. There were 18 Urban Indian Organizations (UIOs) that submitted written comments or made comments during the virtual Urban Confer and no comments were received from the virtual Tribal Consultation. Recommendations were taken into consideration in the third draft of the 2023-2027 OUIHP Strategic Plan and corresponding Implementation Plan. The third draft 2023-2027 OUIHP Strategic Plan and draft Implementation Plan will be shared via email.	Virtual Urban Confer Session will be on November 29, 2022 (1:-2:30 pm EST) register here: https://ihs-gov.zoomgov.com/meeting/register/v.Jlff-ivqQuHs8MGIhd0f90qx5LD4A2Bv-NA Virtual Tribal Consultation will be on December 2, 2022 (1:2:30 pm EST). Register here: https://ihs-gov.zoomgov.com/meeting/register/v.JiTc-6pxDvGWPCmHAINHEOhdQwYLW14Q WRITTEN COMMENTS AND RECOMMENDATIONS: Please send recommendations on: the final draft 2023–2027 OUIHP Strategic Plan and implementation Plan by the comment deadline of December 15, 2022. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DULL-11-17-22.pdf
424	Proposed Rule, Request for comments	Food and Nutrition Services (FNS), USDA	87 FR 71090	Published 11/21/2022	Special Supplemental Nutrition Program for Women, Infants, and Children (WIC): Revisions in the WIC Food Packages	This rulemaking proposes to revise regulations governing the WIC food packages to align them with the current Dietary Guidelines for Americans and reflect recommendations made by the National Academies of Sciences, Engineering and Medicine (NASEM) in its 2017 report, "Review of WIC Food Packages: Improving Balance and Choice," while promoting nutrition security and equity and taking into account program administration considerations. The proposed changes are intended to provide WIC participants with a wider variety of foods that align with the latest nutritional science; provide WIC State agencies with greater flexibility to prescribe and tailor food packages that accommodate participants' special dietary needs and personal and cultural food preferences; provide more equitable access to supplemental foods; and better promote and support individual breastfeeding goals of participants to help establish successful long-term breastfeeding.	Written comments must be received on or before February 21, 2023 to be assured of consideration. Online comments submitted through the Federal eRulemaking Portal on this proposed rule must be received on or before February 21, 2023. https://www.federalregister.gov/documents/2022/11/21/2022-24705/special-supplemental-nutrition-program-for-women-infants-and-children-wic-revisions-in-the-wic-foodf?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
425	DTLL/DULL	IHS	N/A	Published 11/25/2022	IHS Guidance on COVID-19 funding availability	Funds are obligated to an UIO when they are transferred to an UIO through an Indian Health Care Improvement Act Title V Federal Acquisition Regulation (FAR) contract. Once obligated by the IHS, these funds are available for expenditure by UIOs until the date specified in the FAR contract. This guidance applies to following funding and periods of availability,some of which are no longer active. Active COVID-19 supplemental funding includes: □ American Rescue Plan Act (ARPA): o Funds are available for obligation by the IHS until expended. □ Paycheck Protection Program and Health Care Enhancement Act (PPPHCEA): o Funds are available for obligation by the IHS until expended. □ Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (CPRSAA): o Funds are available for obligation by the IHS until September 30, 2024. □ Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA): o Funds for COVID-19 vaccine-related activities are available for obligation by the IHS until September 30, 2024. Inactive COVID-19 supplemental funding includes: □ Families First Coronavirus Response Act (FFCRA): o Funds were available for obligation by the IHS until September 30, 2022. □ CRRSAA: o Funds for COVID-19 tests, test kits, testing supplies, therapeutics, and related personal protective equipment were available for obligation by the IHS until September 30, 2022. □ Coronavirus Aid, Relief, and Economic Security (CARES Act): o Funds were available for obligation by the IHS until September 30, 2021.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DULL-11252022.pdf
426	Proposed Rule	Office for Civil Rights (OCR), HHS, SAMHSA	87 FR 74216	Published 12/02/2022	Confidentiality of Substance Use Disorder (SUD) Patient Records	The Department of Health and Human Services (HHS or "the Department") is issuing this notice of proposed rulemaking (NPRM) to solicit public comment on its proposal to modify its regulations to implement section 3221 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act.	Comments due on or before January 31, 2023. https://www.federalregister.gov/documents/2022/12/02/2022-25784/confidentiality-of-substance-use-disorder-sud-patient-records?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
427	Notice	Office of Planning, Research, and Evaluation, Administration for Children and Families HHS	87 Fr 74152	Published 12/02/2022	Submission for Office of Management and Budget Review; Human Trafficking Youth Prevention Education Demonstration Grant Program Process Evaluation (New Collection)	The Office of Planning, Research, and Evaluation (OPRE), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), in collaboration with the Office on Trafficking in Persons (OTIP), is proposing a new data collection activity for the Human Trafficking Youth Prevention Education (HTYPE) Demonstration Grant Program Process Evaluation. The process evaluation will explore whether the program is being implemented as intended, describe the successes and barriers that have been encountered, and highlight the changes that may be needed to support program implementation.	Comments Due on or before December 30, 2022. https://www.federalregister.gov/documents/2022/12/02/2022-26224/submission-for-office-of-management-and-budget-review-human-trafficking-youth-prevention-education?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
428	Notice	Veterans Affairs	87 FR 74474	Published12/05/2022	Agency Information Collection Activity; Notice of Waiver of Compensation or Pension To Receive Military Pay and Allowances	Veterans Benefits Administration, Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed revision of a currently approved collection, and allow 60 days for public comment in response to the notice.	Comments Due on or before February 3, 2023 https://www.federalregister.gov/documents/2022/12/05/2022-26417/agency-information-collection-activity-notice-of-waiver-of-compensation-or-pension-to-receive
429	Proposed Rule	Bureau of Indian Affairs	87 FR 74334	Published 12/05/2022	Land Acquisitions	The Bureau of Indian Affairs (BIA) seeks input on changes to its regulations governing the discretionary acquisition of land into trust for the benefit of tribal governments and individual Indians. Since these regulations were first promulgated in 1980, the BIA has developed extensive experience in the fee-to-trust acquisition process. Relying on that experience and input from tribal governments and individual Indians, this proposed rule seeks to make the land into trust process more efficient, simpler, and less expensive to support restoration of tribal homelands.	Comments Due on or before March 1, 2023 https://www.federalregister.gov/documents/2022/12/05/2022-25735/land-acquisitions?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
430	Notice	Indian Health Services	87 FR 74638	Published 12/06/2022	Tribal Management Grant Program	The Indian Health Service (IHS) is accepting applications for grants for the Tribal Management Grant (TMG) Program. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Self-Determination and Education Assistance Act (ISDEAA), Public Law 93-638, as amended, 25 U.S.C. 5322(b)(2) and 25 U.S.C. 5325(a). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.228. The TMG Program is a competitive grant program that is capacity building and developmental in nature and has been available for federally recognized Indian Tribes and Tribal Organizations (T/TOs) since shortly after enactment of the ISDEAA in 1975. The TMG Program was established to assist T/TOs to prepare for assuming all or part of existing IHS programs, functions, services, and activities (PFSAs) and further develop and improve Tribal health management capabilities. The TMG Program provides competitive grants to T/TOs to establish goals and performance measures for current health programs, assess current management capacity to determine if new components are appropriate, analyze programs to determine if a T/TO's management is practicable, and develop infrastructure systems to manage or organize PFSAs.	Application due on or before March 6, 2023 https://www.federalregister.gov/documents/2022/12/06/2022-26480/tribal-management-grant-program?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
431	DTLL/DULL	Indian Health Services	N/A	Published 12/05/2022	IHS decision on the distribution of funds for the $210 million in American Rescue Plan Act of 2021 (ARPA)	As specific activities have been approved through the White House, the IHS has limited flexibility to adjust the allocation of the $210 million in ARPA public health workforce funding. Allocation decisions for the $210 million in ARPA public health workforce funding are described below: - $92 million for Registered Nurses in Bureau of Indian Education (BIE) Funded Schools - $47 million for Public Health Capacity Building in Indian Country - $20 million for Emergency Preparedness Capacity at the IHS - $45 million for Additional IHS Loan Repayment Program Awards - $6 million for Core Surveillance and Epidemiology Functions	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DULL-12052022.pdf
432	Notice	Indian Health Services	N/A	Published 12/09/2022	OUIHP data collection on Health Information Technology (HIT) for UIOs	The Office of Urban Indian Health Programs (OUIHP) is again updating the information on Health Information Technology (HIT) in use at our Urban Indian Organizations (UIOs). OUIHP kindly asks your assistance in collecting the information. Please locate your site within the attached template and update as needed. Also, please include ALL HIT data management point-of-contacts from your organization as I will be developing an urban HIT e-mail group and would like to ensure all relevant staff are included in communications.	Data is to be submitted directly to shawn.thomas@ihs.gov Response due no later than December 21, 2022.
433	Notice	CDC / ATSDR	87 FR 76195	Published 12/13/2022	Center for State, Tribal, Local, and Territorial Support (CSTLTS), CDC/ATSDR Tribal Consultation Session	The Centers for Disease Control and Prevention (CDC)/Agency for Toxic Substances and Disease Registry (ATSDR) announces the 2023 CDC/ATSDR Tribal Consultation. CDC/ATSDR will host a virtual tribal consultation with American Indian and Alaska Native (AI/AN) Federally Recognized Tribes. The proceedings will be open to the public.	The tribal consultation will be held on February 9, 2023, from 4:00 p.m. to 5:00 p.m., EST. Written tribal testimony is due by 5:00 p.m. EST, on February 24, 2023. https://www.federalregister.gov/documents/2022/12/13/2022-26958/center-for-state-tribal-local-and-territorial-support-cstlts-cdcatsdr-tribal-consultation-session?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
434	Proposed Rule	HUD	88 FR 321	Published 1/4/2023	The Violence Against Women Act Reauthorization Act of 2022: Overview of Applicability to HUD Programs	This document highlights the key changes made by the recently enacted Violence Against Women Act Reauthorization Act of 2022 (VAWA 2022) to the Violence Against Women Act of 1994, as amended, provides an overview of key provisions applicable to HUD programs, and explains HUD's plans to issue rules or guidance to implement VAWA 2022. In addition, this document seeks comment from HUD housing providers, grantees, and other interested members of the public on this document generally and on certain issues discussed in more detail below. Comments received in response to this solicitation will aid HUD in developing additional regulations and guidance.	Comments due March 6, 2023 https://www.federalregister.gov/documents/2023/01/04/2022-28073/the-violence-against-women-act-reauthorization-act-of-2022-overview-of-applicability-to-hud-programs?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
435	Notice	HRSA; HHS	88 FR 357	44930	Request for Information; Healthy Start Initiative: Eliminating Disparities in Perinatal Health (Healthy Start)	HRSA's Maternal and Child Health Bureau, Division of Healthy Start and Perinatal Services seeks the perspectives of Healthy Start grantees, community members, people with lived experience, health care providers, community health workers, birthing people, parents, and other members of the public to inform future Healthy Start program development.	Comments due February 3, 2023 https://www.federalregister.gov/documents/2023/01/04/2022-28559/request-for-information-healthy-start-initiative-eliminating-disparities-in-perinatal-health-healthy?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
436	Notice	BIA; Interior	88 FR 879	44931	Agency Information Collection Activities; Request for Comment on Fiscal Year 2024 Expirations Under the Paperwork Reduction Act	In accordance with the Paperwork Reduction Act of 1995, the Bureau of Indian Affairs (BIA), Bureau of Indian Education (BIE), and Office of the Assistant Secretary—Indian Affairs (AS-IA) are proposing to renew ten (10) information collections. Office of Management and Budget (OMB) Control Number 1076-0017, 1076-0100, 1076-0172, 1076-0176, 1076-0177, 1076-0179, 1076-0187, 1076-0188, 1076-0195, and 1076-0196.	Comments due on or before March 6, 2023 https://www.federalregister.gov/documents/2023/01/05/2022-28612/agency-information-collection-activities-request-for-comment-on-fiscal-year-2024-expirations-under?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
437	Proposed Rule	Interior	88 FR 1344	44936	Native American Graves Protection and Repatriation Act Systematic Process for Disposition and Repatriation of Native American Human Remains, Funerary Objects, Sacred Objects, and Objects of Cultural Patrimony-Extension of Public Comment Period	The Department of the Interior is extending the public comment period for the proposed rule to amend regulations to improve implementation of the Native American Graves Protection and Repatriation Act of 1990. Extending the comment period will allow more time for the public to review the proposal and submit comments.	Comments due on or before January 31, 2023, extended from the October 18, 2022 deadline https://www.federalregister.gov/documents/2023/01/10/2023-00360/native-american-graves-protection-and-repatriation-act-systematic-process-for-disposition-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
438	Notice	CDC	88 FR 1580	44937	Proposed Data Collection Submitted for Public Comment and Recommendations	The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies the opportunity to comment on a continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Maternal Mortality Review Information Application (MMRIA). MMRIA is a standardized data collection system that allows Maternal Mortality Review Committees (MMRCs) to abstract relevant data from a variety of sources, document committee decisions, and analyze data to better understand the contributing factors and preventability of pregnancy-related deaths in order to develop recommendations for prevention.	Comments must be received on or before March 13, 2023 https://www.federalregister.gov/documents/2023/01/11/2023-00334/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
439	Proposed Rule	VA	88 FR 2038	44938	Copayment Exemption for Indian Veterans	The Department of Veterans Affairs (VA) proposes to amend its medical regulations to implement a statute exempting Indian and urban Indian veterans from copayment requirements for the receipt of hospital care or medical services, including the initial three urgent care visits in a calendar year, under laws administered by VA.	Comments must be received on or before February 13, 2023. https://www.federalregister.gov/documents/2023/01/12/2023-00364/copayment-exemption-for-indian-veterans?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
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442	Notice	BIA; Interior	88 FR 879	44931	Agency Information Collection Activities; Request for Comment on Fiscal Year 2024 Expirations Under the Paperwork Reduction Act	In accordance with the Paperwork Reduction Act of 1995, the Bureau of Indian Affairs (BIA), Bureau of Indian Education (BIE), and Office of the Assistant Secretary—Indian Affairs (AS-IA) are proposing to renew ten (10) information collections. Office of Management and Budget (OMB) Control Number 1076-0017, 1076-0100, 1076-0172, 1076-0176, 1076-0177, 1076-0179, 1076-0187, 1076-0188, 1076-0195, and 1076-0196.	Comments due on or before March 6, 2023 https://www.federalregister.gov/documents/2023/01/05/2022-28612/agency-information-collection-activities-request-for-comment-on-fiscal-year-2024-expirations-under?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
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445	Notice	HUD	88 FR 2959	44944	30-Day Notice of Proposed Information Collection: Housing Choice Voucher Program and Tribal HUD-VASH, OMB Control No.: 2577-0169	HUD is seeking approval from the Office of Management and Budget (OMB) for the information collection described below. In accordance with the Paperwork Reduction Act, HUD is requesting comment from all interested parties on the proposed collection of information. The purpose of this notice is to allow for an additional 30 days of public comment.	Comment due date: February 17, 2023 https://www.federalregister.gov/documents/2023/01/18/2023-00805/30-day-notice-of-proposed-information-collection-housing-choice-voucher-program-and-tribal-hud-vash?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
446	Notice	Census Bureau	88 FR 3710	44946	2020 Census Tribal Consultation	The Census Bureau will conduct a virtual tribal consultation on the Proof of Concept for the Detailed Demographic and Housing Characteristics File A (DHC-A) on February 23, 2023. Feedback on the Proof of Concept will help inform final decisions on the 2020 Census Detailed DHC-A. The tribal consultation reflects the Census Bureau's continuous commitment to strengthen nation-to-nation relationships with federally recognized tribes. The Census Bureau's procedures for outreach, notice, and consultation ensure involvement of tribes to the extent practicable and permitted by law before making decisions or implementing policies, rules, or programs that affect federally recognized tribal governments. These meetings are open to citizens of federally recognized tribes by invitation. The Census Bureau provided information on the feedback it is seeking in preparation for the tribal consultation focused on the Proof of Concept for the Detailed DHC-A. In that regard, the Census Bureau is asking tribal governments to review the Proof of Concept and accompanying materials. We would like to hear from tribal nations if they will be impacted positively, negatively, or not at all, if we release the Detailed DHC-A using the current specifications outlined in the Proof of Concept. Please provide the level of geography, description of the use case(s), and implications should the data be released as reflected in this Proof of Concept. The purpose of the tribal consultation is to hear tribes' recommendations.	The Census Bureau will conduct a tribal consultation on Thursday, February 23, 2023, from 3:00 to 4:30 p.m. EST. Any questions or topics to be considered in the tribal consultation meeting must be received in writing via email by February 1, 2023 https://www.federalregister.gov/documents/2023/01/20/2023-01083/2020-census-tribal-consultation?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
447	Notice	IHS	88 FR 4002	44949	4-in-1 Grant Program-Urban Indian Health	The purpose of this program is to ensure the highest possible health status for Urban Indians. Funding will be used to support the 4-in-1 health program objectives. These programs are integral components of the IHS health care delivery system. Funds from this effort will ensure that comprehensive, culturally acceptable personal and public health services are available and accessible to Urban Indians.	Application Deadline Date: February 21, 2023 https://www.federalregister.gov/documents/2023/01/23/2023-01150/4-in-1-grant-program-urban-indian-health?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
448	DUIL/DTLL	IHS	N/A	44951	FY 2023 Grant Awardees for SDPI	IHS is updating UIO Leaders on the fiscal year (FY) 2023 Indian Health Service (IHS) Special Diabetes Program for Indians (SDPI) grant application process. The SDPI is currently authorized through September 30, 2023. The Consolidated Appropriations Act, 2021, authorized SDPI funding at $147 million for FY 2023, a $3 million decrease due to mandatory sequestration. The status of funding for SDPI FY 2024 and beyond is unknown at this time.	www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUILOLL-012523.pdf
449	Notice of Funding	VA	88 FR 7540	Published 2/03/2023	Funding Opportunity: Homeless Providers Grant and Per Diem (GPD) Program Case Management Grant	VA is announcing the availability of approximately $15 million per year for up to 2 years, pending availability of funding and grantee performance, in new grants under the case management component of the VA Homeless Providers GPD program. Applications for grants are being accepted from eligible entities to support case management services. These time-limited case management services will improve retention of housing by Veterans who are at risk of becoming homeless or who were previously homeless and are transitioning to permanent housing from programs such as VA's Homeless Providers GPD program or VA's Health Care for Homeless Veterans (HCHV) Contracted Residential Services (CRS) program. An entity is eligible to apply if it is a 501(c)(3) or 501(c)(19) nonprofit organization, State, local or Tribal government. For purposes of this program, the term "tribal government" means an entity described in paragraph (2) of the definition of "public entity" in 38 CFR 61.1.	Applications for grants must be received by the GPD National Program Office no later than 4:00 p.m. Eastern Time on Thursday, May 4, 2023. https://www.federalregister.gov/documents/2023/02/03/2023-02341/funding-opportunity-homeless-providers-grant-and-per-diem-gpd-program-case-management-grant?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
450	DTLL/DUIL	IHS	N/A	Published 2/06/2023	Tribal Consultation and Urban Confer (TC/UC) sessions in calendar year 2023 on Health IT Modernization	IHS is hosting a series of four TC/UC sessions in 2023 on Health IT Modernization to ask questions and get UIO feedback. During the first event, Preparing for Change, scheduled for March 8, the IHS will provide an overview of milestones and accomplishments of the Health IT Modernization Program and seek your UIO on change readiness, what the IHS could be doing to support organizations and individuals, and what facilities can be doing to prepare for an electronic health record modernization.	www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUILOLL-020623.pdf
451	Notice of Funding	Child and Families Admin	88 FR 7978	Published 02/07/2023	Proposed Information Collection Activity; Tribal Maternal, Infant, and Early Childhood Home Visiting Program Implementation Plan Guidance for Development and Implementation and Implementation and Expansion Grantees	The Administration for Children and Families (ACF), Office of Early Childhood Development (ECD) is requesting Office of Management and Budget (OMB) approval of Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Implementation Plan Guidance for Tribal Home Visiting Development and Implementation Grants (DIG) and Tribal Home Visiting Implementation and Expansion Grants (IEG).	Comments are due April 7, 2023 https://www.federalregister.gov/documents/2023/02/07/2023-02543/proposed-information-collection-activity-tribal-maternal-infant-and-early-childhood-home-visiting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

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452	Notice	HRSA	88 FR 8436	Published 02/09/2023	Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)	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. The agenda for the March 20-21, 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	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. March 20, 2023, 11:30 a.m. to 4:30 p.m. Eastern Time and March 21, 2023, 11:30 a.m. to 3:00 p.m. Eastern Time. https://www.federalregister.gov/documents/2023/02/09/2023-02791/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
453	Notice	Education Department	88 FR 8411	Published 02/09/2023	Application for New Awards; Native American and Alaska Native Children in School Program	The Department of Education (Department) is issuing a notice inviting applications for fiscal year (FY) 2023 for the Native American and Alaska Native Children in School (NAMA) Program, Assistance Listing Number 84.365C. This notice relates to the approved information collection under OMB control number 1894-0006. The goal of this program is to support the teaching, learning, and studying of Native American languages while also increasing the English language proficiency and academic achievement of students served.	Applications Available: February 9, 2023 Deadline for Notice of Intent to Apply: February 24, 2023 Deadline for Transmittal of Applications: April 25, 2023 Deadline for Intergovernmental Review:June 26, 2023 https://www.federalregister.gov/documents/2023/02/09/2023-02736/application-for-new-awards-native-american-and-alaska-native-children-in-school-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
454	DTLL/DULL	IHS	N/A	Published 02/13/2023	Urban Confer	The DULL regards an upcoming Urban Confer on the Urban Indian Organization (UIO) Infrastructure Study convened by the Indian Health Service (IHS) scheduled for June 23, 2022.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL-021323.pdf
455	DULL/DTLL	OMB	N/A	Published 2/14/2023	Tribal consultation on the initial proposals from the Federal Interagency Technical Working Group on Race and Ethnicity Standards	The purpose of this tribal consultation is for Tribal designees to share views with the Working Group, OMB, and the Chief Statistician of the United States on the initial proposals and provide suggestions on how we can improve the quality and usefulness of Federal race and ethnicity data.	Consultation will be held virtually on March 16, 2023 (2:00 p.m. – 4:00 p.m. ET) chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://mcusercontent.com/162028f8bb41d8119c715ef4d/files/600d2003-c57f-05a9-dbde-7ea12f821c36/OMB_DTLL_SPD_15.01.pdf
456	DTLL	HHS	N/A	Published 2/16/2023	Invitation to the 25th U.S. Department of Health and Human Services (HHS) Annual Tribal Budget Consultation (ATBC)	The ATBC will provide a forum for tribes to collectively share their views and priorities with HHS officials on national health and human services funding priorities and make recommendations for the Department's FY 2025 budget request. While the FY 2024 budget proposal is not yet published, you can review the FY 2023 proposal at: HHS FY 2023 Budget in Brief	HHS.gov	The ATBC will take place in-person on April 18-19, 2023, at the Hubert H. Humphrey Building at 200 Independence Avenue, SW, Washington, DC. https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/2/760c082b-2937-4634-94ad-64916d266c66.pdf
457	Notice	IHS	88 FR 10127	Published 02/16/2023	Zero Suicide Initiative Coordinating Center	The Zero Suicide Initiative (ZSI) is a key concept of the National Strategy for Suicide Prevention and is a priority of the National Action Alliance for Suicide Prevention (https://theactionalliance.org/). In fiscal year (FY) 2022, the IHS awarded eight grants to tribes, tribal organizations, and Urban Indian organizations to combat the suicide public health crisis in Indian Country. This program aims to improve the system of care for those at risk for suicide by implementing a comprehensive, culturally informed, multi-setting approach to suicide prevention in Indian health systems.	Application Deadline Date: April 17, 2023 Earliest Anticipated Start Date: May 17, 2023 https://www.federalregister.gov/documents/2023/02/16/2023-03281/zero-suicide-initiative-coordinating-center?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
458	Notice	IHS	88 FR 10359	Published 02/17/2023	The Special Diabetes Program for Indians Nashville Area Technical Assistance and Support Program	Diabetes is a complex and costly chronic disease that requires tremendous long-term efforts to prevent and treat. Although diabetes is a nationwide public health problem, American Indian and Alaska Native (AI/AN) people are disproportionately affected. In 2019, 14.5 percent of AI/AN people aged 18 years or older had diagnosed diabetes, compared to 7.4 percent of non-Hispanic white people. In addition, AI/AN people have higher rates of diabetes-related morbidity and mortality than the general U.S. population. Strategies to address the prevention and treatment of diabetes in AI/AN communities are urgently needed.	Application Deadline Date: April 3, 2023 https://www.federalregister.gov/documents/2023/02/17/2023-03341/the-special-diabetes-program-for-indians-nashville-area-technical-assistance-and-support-program?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
459	Notice	BIA	88 FR 11470	Published 2/23/2023	Agency Information Collection Activities; Submission to the Office of Management and Budget for Review and Approval; Indian Child Welfare Act Proceedings in State	The Bureau of Indian Affairs (BIA) is proposing to renew an information collection on whether or not the collection of information is necessary for the proper performance of the functions of the agency, including whether or not the information will have practical utility; the accuracy of our estimate of the burden for this collection of information, including the validity of the methodology and assumptions used; ways to enhance the quality, utility, and clarity of the information to be collected; and how might the agency minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.	Comments are due March 27, 2023 https://www.federalregister.gov/documents/2023/02/23/2023-03791/agency-information-collection-activities-submission-to-the-office-of-management-and-budget-for?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
460	Notice of Funding	DOJ, OVW	N/A	Published 2/21/2023	Grants to Enhance Culturally Specific Services for Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Program	The Grants to Enhance Culturally Specific Services for Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Program supports the maintenance and replication of existing successful community-based programs providing culturally specific services to victims of domestic violence, dating violence, sexual assault, and stalking, as well as the development of innovative culturally specific strategies to enhance access to services and resources for victims who face obstacles to accessing more traditional programs. Eligible applicants include UIOs.	Applicants are strongly encouraged to submit a non-binding Letter of Intent to OVW.Cultural@usdoj.gov by March 20, 2023. Interested applicants who do not submit a Letter of Intent are still eligible to apply. Application Deadline April 12, 2023 https://www.justice.gov/ovw/page/file/1569791/download
461	Notice of Meeting	IHS	N/A	Published 2/23/2023	Indian Health Service (IHS) Webinar on Medicaid Unwinding	IHS, in collaboration with the National Indian Health Board, is conducting an informational webinar on implications of the end of the COVID-19 public health emergency on the Medicaid program.Topics covered will include unwinding updates and best practices for Tribal enrollment assisters, including healthcare provider communication and education strategies with patients.	The session will take place on March 1 from 1:00pm – 2:30pm ET (register here: https://us02web.zoom.us/meeting/register/tZUtc-COpzIoGdbGKaGKysYmVkX4W25q2bvL)
462	Notice	IHS	88 FR 12387	Published 2/27/2023	Reimbursement Rates for Calendar Year 2023	Notice is provided that the Director of the Indian Health Service (IHS) has approved the rates for inpatient and outpatient medical care provided by the IHS facilities for Calendar Year 2023.	https://www.federalregister.gov/documents/2023/02/27/2023-03896/reimbursement-rates-for-calendar-year-2023?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
463	Rule	ACF/ HHS/ ANA	88 FR 12224	Published 2/27/2023	Native American Programs	The Native American Programs Act of 1974 (NAPA), Public Law 93-644, was first enacted on January 4, 1975. The last time substantial amendments to the NAPA regulations were made was 1996. Section 803 of the NAPA establishes as its broad statutory purpose the promotion of "the goal of economic and social self-sufficiency for American Indians, Native Hawaiians, other Native American Pacific Islanders (including American Samoan Native-es), and Alaska Native-s." This final rule provides a process for ANA grant recipients to request a waiver for part or all of their non-Federal cost share or match (NFS) during a budget period due to emergency circumstances.	Rule is effective April 28, 2023 https://www.federalregister.gov/documents/2023/02/27/2023-03994/native-american-programs?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
464	Notice	IHS	88 FR 12956	Published 3/1/2023	Preventing Alcohol-Related Deaths Through Social Detoxification	The Indian Health Service (IHS), Office of Clinical and Preventive Services, Division of Behavioral Health (DBH) is accepting applications for cooperative agreements for the Preventing Alcohol-Related Deaths (PARD) through Detoxification. The purpose of this program is to increase access to community-based prevention strategies that provide social detoxification, evaluation, stabilization, fostering patient readiness for and entry into treatment for alcohol use, and other substance use disorders.	Application Deadline: March 31, 2023 https://www.federalregister.gov/documents/2023/03/01/2023-04151/preventing-alcohol-related-deaths-through-social-detoxification?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
465	Notice	VA	88 FR 14472	Published 3/8/2023	Advisory Committee on Tribal and Indian Affairs; Notice of Meeting	The purpose of the Committee meeting is to advise the Secretary on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans. This includes advising the Secretary on the administration of healthcare services and benefits to American Indians/Alaska Natives (AI/AN) and Native Hawaiian Veterans; thereby assessing those needs and whether VA is meeting them.	Meeting Dates: April 4, 202311 a.m.-7:30 p.m. (EST), April 5, 202311 a.m.-7:30 p.m. EST, April 6, 202311 a.m.-3 p.m. EST https://www.federalregister.gov/documents/2023/03/08/2023-04731/advisory-committee-on-tribal-and-indian-affairs-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
466	Notice	Education Dept.	88 FR 15382	Published 3/13/2023	National Advisory Council on Indian Education (NACIE)	The purpose of this meeting is to convene NACIE and conduct the following business: discussion of bylaws and charter; taking action to establish meeting calendar and subcommittees; discussion of recommendations to be provided to the Secretary of Interior and Secretary of Education, including the U.S. Department of Education's budget request; discussion of annual report action item follow-up; and discussion of invited federal partner updates, e.g., U.S. Department of the Interior, Bureau of Indian Education (BIE), White House Initiative on Advancing Educational Equity, Excellence, and Economic Opportunity for Native Americans and Strengthening Tribal Colleges and Universities.	The NACIE open virtual meeting will be held on March 30-31, 2023, from 1:00-4:30 p.m. (EST) https://www.federalregister.gov/documents/2023/03/13/2023-05079/national-advisory-council-on-indian-education-nacie?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
467	DULL/DTLL	IHS	N/A	Published 3/10/2023	Invitation to Participate in Upcoming Communication Activities	On behalf the entire staff of the Indian Health Service (IHS), we express our commitment to our patients and our Tribal and Urban partners throughout Indian Country. Today, we write to invite you to join us in our efforts to improve our communications with Tribes, Tribal organizations, and Urban Indian Organizations (UIO) by actively participating in the following communication activities: Monthly All Tribal Leaders and Urban Indian Organization Leaders Call, The IHS Updates, The IHS 2023 Work Plan, and Social Media.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_20230310.pdf
468	Urban Confer	IHS	N/A	Published 3/13/2023	Urban Confer - Access to Federal Medical Supplies	The Indian Health Service (IHS) is initiating an Urban Confer on Executive Order (EO) 14001 , "A Sustainable Public Health Supply Chain," to gather input and comments on draft recommendations for improving the process for federally recognized tribal governments, IHS health care providers, Tribal Health Programs, and Urban Indian Organizations.	Comments Due: April 24, 2023 Urban Confer: Thursday, March 23, 2023 2:30 - 4:30 PM ET https://ihs-gov.zoomgov.com/meeting/register/vJItde2opzkGHhZ3Ce9N3i0ykaGM72r7q8
469	Notice	SAMHSA	88 FR 16022	Published 3/15/2023	Meeting of the Substance Abuse and Mental Health Services Administration's Tribal Technical Advisory Committee (TTAC)	Notice is hereby given for the meeting on April 25, 2023, of the Substance Abuse and Mental Health Services Administration's Tribal Technical Advisory Committee (TTAC). The meeting is open to the public and will be held in person (hybrid). Agenda with call-in information will be posted on the SAMHSA website prior to the meeting at: https://www.samhsa.gov/about-us/advisory-councils/meetings. The meeting will include, but not be limited to, remarks from the Assistant Secretary for Mental Health and Substance Use; updates on SAMHSA priorities; follow up on topics related to the previous TTAC meetings; and council discussions.	Meeting: April 25, 2023, 9:00 a.m. to approximately 5:00 p.m. (ET) https://www.federalregister.gov/documents/2023/03/15/2023-05258/meeting-of-the-substance-abuse-and-mental-health-services-administrations-tribal-technical-advisory?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
470	Notice	BIA	88 FR 17242	Published 3/22/2023	Indian Child Welfare Act; Designated Tribal Agents for Service of Notice	The regulations implementing the Indian Child Welfare Act provide that Federally recognized Indian Tribes may designate an agent other than the Tribal chairman for service of notice of proceedings under the Act. This notice includes the current list of designated Tribal agents for service of notice.	The notice is effective March 22, 2023 and supersedes the list published on April 15, 2022. https://www.federalregister.gov/documents/2023/03/22/2023-05861/indian-child-welfare-act-designated-tribal-agents-for-service-of-notice?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
471	Notice	VA	88 FR 17930	Published 3/24/2023	Advisory Committee on Tribal and Indian Affairs, Notice of Meeting, Amended	The purpose of the Committee is to advise the Secretary on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans. This includes advising the Secretary on the administration of healthcare services and benefits to American Indians/Alaska Natives (AI/AN) and Native Hawaiian Veterans; thereby assessing those needs and whether VA is meeting them.	The meeting dates are as follows: April 4, 202311 a.m.-7:30 p.m.—Eastern Standard Time (EST),April 5, 202311 a.m.-7:30 p.m. EST,April 6, 202311 a.m.-3 p.m. EST. https://www.federalregister.gov/documents/2023/03/24/2023-06078/advisory-committee-on-tribal-and-indian-affairs-notice-of-meeting-amended?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
472	DULL/DTLL	IHS	N/A	Published 3/24/2023	Agency revisions to the IHS Urban Confer Policy	The revised Conferring with Urban Indian Organizations at Part 5, Chapter 26 of the Indian Health Manual (IHM) incorporates your recommendations to provide UIOs with consistent Urban Confer practices that specify responsibilities at all levels of the IHS. The revised Confer Policy strengthens time-honored commitments to Urban Indian Organization Leaders to ensure that the IHS follows up with UIOs on Urban Indian health priorities in a timely matter.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL_032423.pdf

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
473	Notice	IHS	88 FR 18558	Published 3/29/2023	Addressing Dementia in Indian Country: Models of Care	The purpose of this program is to support the development of models of comprehensive and sustainable dementia care and services in Tribal and Urban Indian communities that are responsive to the needs of persons living with dementia and their caregivers.	Application Deadline Date: June 27, 2023 https://www.federalregister.gov/documents/2023/03/29/2023-06455/addressing-dementia-in-indian-country-models-of-care?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
474	Rule	VA	88 FR 19862	Published 4/4/2023	Copayment Exemption for Indian Veterans	The Department of Veterans Affairs (VA) adopts as final, with changes, a proposed rule to amend its medical regulations to implement a statute exempting Indian and urban Indian veterans from copayment requirements for the receipt of hospital care or medical services. This final rule also exempts such veterans from copayments for all urgent care visits.	This rule is effective April 4, 2023. https://www.federalregister.gov/documents/2023/04/04/2023-06954/copayment-exemption-for-indian-veterans?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
475	DTLL	IHS	N/A	Published 4/4/2023	Initiation of Tribal Consultation on how to bring the administration of the Small Ambulatory Program (SAP) closer to those who benefit from the program	Authorized by the Indian Health Care Improvement Act (IHCIA), the SAP provides an opportunity for the Indian Health Service (IHS) to contribute to projects for a tribe or Tribal Organization operating an Indian health facility pursuant to a contract entered into under the Indian Self-Determination and Education Assistance	Meeting date: April 4,2023, 1:30-3pm ET https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_04032023.pdf
476	DTLL	IHS	N/A	Published 4/5/2023	Tribal Consultation Meeting	IHS is hosting a Tribal Consultation to seek guidance and recommendations on a spend plan for the second year of funding for the Infrastructure Investment and Jobs Act (IIJA). The IIJA (Pub. L. No. 117-58 (November 15, 2021)), appropriated $3.5 billion to the Indian Health Service (IHS), with $700 million made available over 5 years, beginning in fiscal year 2022.	Meeting date: April 12, 2023, 3-6pm ET https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL-20230405.pdf
477	Notice	Children and Families Administration	88 FR 21192	Published 4/10/2023	Proposed Information Collection Activity; Tribal Maternal, Infant, and Early Childhood Home Visiting Program Data Reports: Demographic and Service Utilization, Grantee Performance Measures and Quarterly Performance Reports	The Administration for Children and Families (ACF) is requesting a new information collection for the Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Tribal Home Visiting Program Data Reports: Demographic and Service Utilization, Grantee Performance Measures and Quarterly Performance Reports.	Comments are due June 9, 2023 https://www.federalregister.gov/documents/2023/04/10/2023-07462/proposed-information-collection-activity-tribal-maternal-infant-and-early-childhood-home-visiting?utm_source=federalregister.gov &utm_medium=email&utm_campaign=subscription+mailing+list
478	Rule	VA	88 FR 21478	Published 4/11/2023	Copayment Exemption for Indian Veterans	On April 4, 2023, the Department of Veterans Affairs (VA) published in the Federal Register a final rule to amend its medical regulations to implement a statute exempting Indian and urban Indian veterans from copayment requirements for the receipt of hospital care or medical services. This correction addresses a technical error in the published final rule and correcting amendments to four sections involved.	Effective April 11, 2023. https://www.federalregister.gov/documents/2023/04/11/2023-07528/copayment-exemption-for-indian-veterans?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
479	Rule	Justice Dept.	88 FR 21459	Published 4/11/2023	Special Tribal Criminal Jurisdiction Reimbursement	The Violence Against Women Act Reauthorization Act of 2022 (VAWA 2022) authorized a new program to reimburse Tribal governments (or authorized designees of Tribal governments) for expenses incurred in exercising "special Tribal criminal jurisdiction" (STCJ) over non-Indians who commit certain covered crimes in Indian country. This rule will implement this new Tribal Reimbursement Program within the Department of Justice's Office on Violence Against Women (OVW) by providing details on how it will be administered, including eligibility, frequency of reimbursement, costs that can be reimbursed, the annual maximum allowable reimbursement per Tribe, and conditions for waiver of the annual maximum.	This rule is effective April 11, 2023. https://www.federalregister.gov/documents/2023/04/11/2023-07519/special-tribal-criminal-jurisdiction-reimbursement?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
480	Notice	Children and Families Administration	88 FR 22450	Published 4/13/2023	Submission for Office of Management and Budget (OMB) Review; Tribal Maternal, Infant, and Early Childhood Home Visiting Program; Implementation Plan Guidance for Development and Implementation and Implementation and Expansion Grantees	The Administration for Children and Families (ACF), Office of Early Childhood Development (ECD) is requesting Office of Management and Budget (OMB) approval of Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Implementation Plan Guidance for Tribal Home Visiting Development and Implementation Grants (DIG) and Tribal Home Visiting Implementation and Expansion Grants (IEG).	Comments are due May 13, 2023. https://www.federalregister.gov/documents/2023/04/13/2023-07845/submission-for-office-of-management-and-budget-omb-review-tribal-maternal-infant-and-early-childhood?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
481	DUILL	IHS	N/A	Published 4/14/2023	IHS distribution decision for the fiscal year (FY) 2023 Urban Indian Health funding increase.	In accordance with the methodology established after Urban Confer in FY 2018, the IHS will distribute 90 percent of the funding equally among Urban Indian Organizations (UIOs), with the remaining 10 percent distributed to the IHS Office of Urban Indian Health Programs (OUIHP). The total FY 2023 Urban Indian Health funding increase available for distribution to the OUIHP and UIOs is $15 million.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL_041423.pdf
482	Notice	Dept. of Education	88 FR 23647	Published 4/18/2023	Applications for New Awards; Alaska Native and Native Hawaiian-Serving Institutions Program, Part A	The Department of Education (Department) is issuing a notice inviting applications for new awards for fiscal year (FY) 2023 for the Alaska Native and Native Hawaiian-Serving Institutions (ANNH) Program, Part A, Assistance Listing Numbers 84.031N (Alaska Native) and 84.031W (Native Hawaiian). This notice relates to the approved information collection under OMB control number 1840–0810.	Applications Available: April 18, 2023. Deadline for Transmittal of Applications: June 20, 2023. Deadline for Intergovernmental Review: August 16, 2023. https://www.federalregister.gov/documents/2023/04/18/2023-08094/applications-for-new-awards-alaska-native-and-native-hawaiian-serving-institutions-program-part-a?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
483	Notice	IHS	88 FR 24196	Published 4/19/2023	Tribal Self-Governance Planning Cooperative Agreement Program	The Tribal Self-Governance Program (TSGP) is more than an IHS program; it is an expression of the Government-to-Government relationship between the United States (U.S.) and Indian Tribes. Through the TSGP, Tribes negotiate with the IHS to assume Programs, Services, Functions, and Activities (PSFAs), or portions thereof, which gives Tribes the authority to manage and tailor health care programs in a manner that best fits the needs of their communities.	Application Deadline Date: June 20, 2023. Earliest Anticipated Start Date:July 16, 2023. https://www.federalregister.gov/documents/2023/04/19/2023-08201/tribal-self-governance-planning-cooperative-agreement-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
484	Notice	IHS	88 FR 24812	Published 4/24/2023	Produce Prescription Pilot Program	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for the Produce Prescription Pilot Program (PP4). The purpose of this program is to help establish Produce Prescription Programs through collaborations with stakeholders from various health care and food industries in Tribal communities.	Application Deadline Date: June 8, 2023 Earliest Anticipated Start Date: June 23, 2023 https://www.federalregister.gov/documents/2023/04/24/2023-08614/produce-prescription-pilot-program?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
485	Proposed Rule	CMS	88 FR 25313	Published 4/26/2023	Clarifying Eligibility for a Qualified Health Plan Through an Exchange, Advance Payments of the Premium Tax Credit, Cost-Sharing Reductions, a Basic Health Program, and for Some Medicaid and Children's Health Insurance Programs	This proposed rule would make several clarifications and update the definitions currently used to determine whether a consumer is eligible to enroll in a Qualified Health Plan (QHP) through an Exchange; a Basic Health Program (BHP), in States that elect to operate a BHP; and for some State Medicaid and Children's Health Insurance Programs (CHIPs).	Comments are due 06/23/2023 https://www.federalregister.gov/documents/2023/04/26/2023-08635/clarifying-eligibility-for-a-qualified-health-plan-through-an-exchange-advance-payments-of-the?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
486	Presidential Document	Executive Office of the President	88 FR 25251	Published 4/26/2023	Revitalizing Our Nation's Commitment to Environmental Justice for All	To fulfill our Nation's promises of justice, liberty, and equality, every person must have clean air to breathe; clean water to drink; safe and healthy foods to eat; and an environment that is healthy, sustainable, climate-resilient, and free from harmful pollution and chemical exposure. Restoring and protecting a healthy environment—wherever people live, play, work, learn, grow, and worship—is a matter of justice and a fundamental duty that the Federal Government must uphold on behalf of all people.	https://www.federalregister.gov/documents/2023/04/26/2023-08955/revitalizing-our-nations-commitment-to-environmental-justice-for-all?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
487	Rule	HHS	88 FR 25740	Published 4/27/2023	Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2024	This final rule includes payment parameters and provisions related to the HHS-operated risk adjustment and risk adjustment data validation programs, as well as 2024 user fee rates for issuers offering qualified health plans (QHPs) through Federally-facilitated Exchanges (FFEs) and State-based Exchanges on the Federal platform (SBE-FPs). This final rule also has requirements related to updating standardized plan options and reducing plan choice overload; the automatic re-enrollment hierarchy; plan and plan variation marketing name requirements for QHPs; essential community providers (ECPs) and network adequacy; failure to file and reconcile; special enrollment periods (SEPs); the annual household income verification; the deadline for QHP issuers to report enrollment and payment inaccuracies; requirements related to the State Exchange improper payment measurement program; and requirements for agents, brokers, and web-brokers assisting FFE and SBE-FP consumers.	https://www.federalregister.gov/documents/2023/04/27/2023-08368/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2024?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
488	DTLL	OMB	N/A	Published 5/2/2023	OMB Tribal Consultation: Proposed IHS Mandatory Funding	Tribal Consultation on the FY 2024 President's Budget proposal to shift funding for the HHS Indian Health Service (IHS) from discretionary to mandatory beginning in FY 2025	Meeting Date: June 2, 2023 2:00 PM ET register here: https://www.zoomgov.com/meeting/register/v.Jsceyqqzu0Tf9L2mARrv.ID6RLTlFyr20Q
489	Proposed Rule	CMS	88 FR 28092	Published 5/3/2023	Medicaid Program; Medicaid and Children's Health Insurance Program (CHIP) Managed Care Access, Finance, and Quality	This proposed rule would advance CMS' efforts to improve access to care, quality and health outcomes, and better address health equity issues for Medicaid and Children's Health Insurance Program (CHIP) managed care enrollees. The proposed rule would specifically address standards for timely access to care and States' monitoring and enforcement efforts, reduce burden for some State directed payments and certain quality reporting requirements, add new standards that would apply when States use in lieu of services and settings (ILOSs) to promote effective utilization and specify the scope and nature of ILOS, specify medical loss ratio (MLR) requirements, and establish a quality rating system for Medicaid and CHIP managed care plans.	Comments are due July 3, 2023 https://www.federalregister.gov/documents/2023/05/03/2023-08961/medicaid-program-medicaid-and-childrens-health-insurance-program-chip-managed-care-access-finance?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
490	Notice	IHS	88 FR 27905	Published 5/3/2023	Community Health Aide Program: Tribal Planning & Implementation	The purpose of the TPI program is to support the planning and implementation for Tribes and Tribal Organizations (T/TO) positioned to begin operating a CHAP or support a growing CHAP in the contiguous 48 states. The program is designed to support the regional flexibility required to implement a CHAP unique to the needs of individual Tribal communities across the country through the identification of feasibility factors.	Application Deadline Date: August 1, 2023 Earliest Anticipated Start Date: September 15, 2023 https://www.federalregister.gov/documents/2023/05/03/2023-09363/community-health-aide-program-tribal-planning-and-implementation?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
491	Presidential Document	Executive Office of the President	88 FR 29813	Published 5/9/2023	Missing or Murdered Indigenous Persons Awareness Day, 2023	NOW, THEREFORE, I, JOSEPH R. BIDEN JR., President of the United States of America, by virtue of the authority vested in me by the Constitution and the laws of the United States, do hereby proclaim May 5, 2023, as Missing or Murdered Indigenous Persons Awareness Day. I call on all Americans and ask all levels of government to support Tribal governments and Tribal communities' efforts to increase awareness and address the issues of missing or murdered Indigenous persons through appropriate programs and activities.	https://www.federalregister.gov/documents/2023/05/09/2023-09981/missing-or-murdered-indigenous-persons-awareness-day-2023?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
492	Notice	IHS	88 FR 30141	Published 5/10/2023	National Indian Health Outreach and Education	The purpose of this IHS cooperative agreement is to further the IHS mission and goals related to providing quality health care to the AI/AN community through outreach and education efforts with a focus on improving Indian health care, promoting awareness, visibility, advocacy, training, technical assistance, and education efforts.	Application Deadline Date: July 10, 2023 Earliest Anticipated Start Date: July 24, 2023 https://www.federalregister.gov/documents/2023/05/10/2023-09958/national-indian-health-outreach-and-education?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
493	Notice	HRSA	88 FR 30316	Published 5/11/2023	Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)	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.	June 13, 2023, 10:00 a.m. to 5:00 p.m. ET and June 14, 2023, 9:30 a.m. to 2:00 p.m. ET. https://www.federalregister.gov/documents/2023/05/11/2023-10069/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
494	Notice	HRSA	88 FR 30316	Published 5/11/2023	Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)	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.	June 13, 2023, 10:00 a.m. to 5:00 p.m. ET and June 14, 2023, 9:30 a.m. to 2:00 p.m. ET. https://www.federalregister.gov/documents/2023/05/11/2023-10069/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
495	Notice	CDC	88 FR 30975	Published 5/15/2023	National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce, CDC and ATSDR Tribal Consultation Session	The Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR) announce a CDC and ATSDR Tribal Consultation. CDC and ATSDR will host a virtual tribal consultation with American Indian and Alaska Native (AI/AN) Federally Recognized Tribes. The proceedings will be open to the public.	The tribal consultation will be held on July 12, 2023, from 2 p.m. to 3:30 p.m., EDT. Written tribal testimony is due by 5 p.m., EDT, on July 24, 2023. https://www.federalregister.gov/documents/2023/05/15/2023-10275/national-center-for-state-tribal-local-and-territorial-public-health-infrastructure-and-workforce?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
496	DUILL	IHS	N/A	Published 5/19/2023	IHS Seeks Recommendations on Loan Repayment and Scholarship Programs	The IHS Deputy Director for Operations writes to Tribal Leaders and Urban Indian Organization Leaders to seek your recommendations on health professions priorities eligible for the IHS Scholarship Program in academic year 2024-2025 and the IHS Loan Repayment	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_SP_LRP_051923.pdf

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
497	DULL	IHS	N/A	Published 5/19/2023	IHS Notification of Fraud Schemes	The IHS Director writes to notify Tribal Leaders and Urban Indian Organization Leaders of Fraud Schemes Targeting Native American Communities in Behavioral Health Treatment Centers	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DRLL_DUIOLL_051923.pdf
498	DULL	IHS	N/A	Published 5/22/2023	IHS Follow-up on Two Urban Confers Hosted in Oct and Dec 2022	The IHS Director writes to Urban Indian Organization Leaders to share comments received from Urban Indian Health Priorities Confers convened virtually on October 31, 2022, and December 15, 2022. An update is also provided on the 2023-2027 Strategic Plan of the Office of Urban Indian Health Programs.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL_052223.pdf
499	Notice	IHS	88 FR 33151	Published 5/23/2023	Privacy Act of 1974; System of Records	In accordance with the requirements of the Privacy Act of 1974, as amended, the Department of Health and Human Services (HHS) is modifying a system of records maintained by the Indian Health Service (IHS). System No. 09–17–0003, Indian Health Service Medical Staff Credentials and Privileges Records. The system of records covers records about individuals who request credentialing and privileging to serve as IHS medical or health care professionals.	Comments due June 22, 2023. https://www.federalregister.gov/documents/2023/05/23/2023-10835/privacy-act-of-1974-system-of-records?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
500	Notice	Education Dept.	88 FR 33098	Published 5/23/2023	Applications for New Awards; Demonstration Grants for Indian Children and Youth Program-Native American Teacher Retention Initiative	The purpose of the Demonstration program is to provide financial assistance to projects that develop, test, and demonstrate the effectiveness of services and programs to improve the educational opportunities and achievement of Indian students attending preschool, elementary, and secondary schools.	Applications Available: May 23, 2023 Deadline for Notice of Intent to Apply: June 22, 2023 https://www.federalregister.gov/documents/2023/05/23/2023-10901/applications-for-new-awards-demonstration-grants-for-indian-children-and-youth-program-native?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
501	Proposed Rule	CMS	88 FR 34238	Published 5/26/2023	Medicaid Program; Misclassification of Drugs, Program Administration and Program Integrity Updates Under the Medicaid Drug Rebate Program	This proposed rule would seek to implement policies in the Medicaid Drug Rebate Program (MDRP) related to the new legislative requirements in the Medicaid Services Investment and Accountability Act of 2019 (MSIAA), which are needed to address drug misclassification, as well as drug pricing and product data misreporting by manufacturers. Additionally, we are proposing several other program integrity and program administration provisions or modifications in this proposed rule including revising and proposing key definitions used in the MDRP. This proposed rule also designates a time limitation on manufacturers initiating audits with States; clarifies and establishes requirements for State fee-for-service (FFS) pharmacy reimbursement; codifies conditions relating to States claiming FFP for physician-administered drugs (PADs); clarifies the requirement of accumulating price concessions when determining best price; designates drug price verification and transparency through data collection; and proposes two new contracting requirements between States and their Medicaid managed care plans. In addition, this rule includes a proposal unrelated to MDRP that would make revisions to the third-party liability regulation due to Bipartisan Budget Act (BBA) of 2018. Finally, we are proposing to rescind revisions made by the December 31, 2020 final rule "Medicaid Program; Establishing Minimum Standards in Medicaid State Drug Utilization Review (DUR) and Supporting Value-Based Purchasing (VBP) for Drugs Covered in Medicaid, Revising Medicaid Drug Rebate and Third Party Liability (TPL) Requirements" to the Determination of Best Price and Determination of Average Manufacturer Price (AMP) sections.	To be assured consideration, comments must be received at one of the addresses provided below, by July 25, 2023. https://www.federalregister.gov/documents/2023/05/26/2023-10934/medicaid-program-misclassification-of-drugs-program-administration-and-program-integrity-updates?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
502	Proposed Rule	FDA	88 FR 35694	Published 5/31/2023	Medication Guides; Patient Medication Information	The Food and Drug Administration (FDA, the Agency, or we) is proposing to amend its human prescription drug product labeling regulations for Medication Guides (FDA-approved written prescription drug product information distributed to patients). This action, if finalized, will require applicants to create a new type of Medication Guide, referred to as Patient Medication Information (PMI), for prescription drug products, including biological products, used, dispensed, or administered on an outpatient basis and for blood and blood components transfused in an outpatient setting. PMI would be a one-page document with standardized format and content that would be submitted to FDA for approval. This proposed rule is intended to improve public health by providing patients with clear, concise, accessible, and useful written prescription drug product information delivered in a consistent and easily understood format to help patients use their prescription drug products safely and effectively.	Either electronic or written comments on the proposed rule must be submitted by November 27, 2023 https://www.federalregister.gov/documents/2023/05/31/2023-11354/medication-guides-patient-medication-information?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
503	Notice	Educatoin Dept.	88 FR 36286	Published 6/2/2023	National Advisory Council on Indian Education (NACIE)	This notice sets forth the agenda, time, and instructions to access or participate in the June 29–30, 2023, virtual meeting of NACIE. This notice provides information about the meeting to members of the public who may be interested in attending the meeting and how to provide written comment for the meeting.	The NACIE open virtual meeting will be held on June 29–30, 2023, from 1:00–4:30 p.m. (EST) https://www.federalregister.gov/documents/2023/06/02/2023-11788/national-advisory-council-on-indian-education-nacie?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
504	DULL	IHS	N/A	Published 6/5/2023	The IHS Director writes to notify Tribal Leaders and Urban Indian Organization Leaders that the Indian Health Service has released the 2023-2027 Office of Urban Indian Health Programs Strategic Plan	The OUIHP Strategic Plan identifies five pillars that guide the work of the IHS in partnership with Urban Indian Organizations (UIOs) and to support their efforts. The five guiding pillars of the Strategic Plan are: Provide effective, timely, and transparent communication; Improve OUIHP's operational oversight and management; Leverage partnerships to expand UIO resources; Improve data quality; and Expand the infrastructure and capacity of UIOs.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DRLL_DUIOLLL_060523.pdf
505	Notice	CMS	88 FR 36485	Published 6/5/2023	Medicare and Medicaid Programs; Policy and Regulatory Changes to the Omnibus COVID-19 Health Care Staff Vaccination Requirements; Additional Policy and Regulatory Changes to the Requirements for Long-Term Care (LTC) Facilities and Intermediate Care Facilities for Individuals With Intellectual Disabilities (ICFs-IID) To Provide COVID-19 Vaccine Education and Offer Vaccinations to Residents, Clients, and Staff; Policy and Regulatory Changes to the Long Term Care Facility COVID-19 Testing Requirements	This final rule removes expired language addressing staff and patient COVID–19 testing requirements for LTC Facilities issued in the interim final rule with comment "Medicare and Medicaid Programs, Clinical Laboratory Improvement Amendments (CLIA), and Patient Protection and Affordable Care Act; Additional Policy and Regulatory Revisions in Response to the COVID–19 Public Health Emergency" published in the September 2, 2020 Federal Register . The rule also finalizes requirements for these facilities to provide education about COVID–19 vaccines and to offer COVID–19 vaccines to residents, clients, and staff. In addition, the rule withdraws the regulations in the interim final rule with comment (IFC) "Omnibus COVID–19 Health Care Staff Vaccination" published in the November 5, 2021 Federal Register , and finalizes certain provisions of the "COVID–19 Vaccine Requirements for Long-Term Care (LTC) Facilities and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs–IID) Residents, Clients, and Staff" IFC, published in the May 13, 2021 Federal Register .	The regulations in this final rule are effective on August 4, 2023 https://www.federalregister.gov/documents/2023/06/05/2023-11449/medicare-and-medicaid-programs-policy-and-regulatory-changes-to-the-omnibus-covid-19-health-care?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
506	Notice	Education Dept.	88 FR 37211	Published 6/7/2023	Applications for New Awards; Indian Education Discretionary Grants Programs-Native American Language Resource Centers Program	The Department of Education (Department) is issuing a notice inviting applications (NIA) for fiscal year (FY) 2023 for the Native American Language Resource Centers (NALRC) Program. Assistance Listing Number 84.415C. This notice relates to the approved information collection under OMB control number 1894–0006.	Applications Available: June 7, 2023 Deadline for Notice of Intent to Apply: June 27, 2023 Date of Pre-Application Webinar: June 22, 2023 Deadline for Transmittal of Applications: July 27, 2023 Deadline for Intergovernmental Review: August 28, 2023 https://www.federalregister.gov/documents/2023/06/07/2023-12166/applications-for-new-awards-indian-education-discretionary-grants-programs-native-american-language?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
507	Rule	CMS	88 FR 37174	Published 6/7/2023	Medicare Program; Contract Year 2024 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, Medicare Cost Plan Program, and Programs of All-Inclusive Care for the Elderly; Correction	This document corrects technical errors that appeared in the final rule published in the Federal Register on April 12, 2023 entitled "Contract Year 2024 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, Medicare Cost Plan Program, and Programs of All-Inclusive Care for the Elderly."	This correcting document is effective June 5, 2023 https://www.federalregister.gov/documents/2023/06/07/2023-12098/medicare-program-contract-year-2024-policy-and-technical-changes-to-the-medicare-advantage-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
508	Rule	CMS	88 FR 37772	Published 6/9/2023	Medicare Program; Treatment of Medicare Part C Days in the Calculation of a Hospital's Medicare Disproportionate Patient Percentage	This final action establishes a policy concerning the treatment of patient days associated with persons enrolled in a Medicare Part C (also known as "Medicare Advantage") plan for purposes of calculating a hospital's disproportionate patient percentage for cost reporting periods starting before fiscal year (FY) 2014 in response to the Supreme Court's ruling in Azar v. Allina Health Services, 139 S. Ct. 1804 (June 3, 2019).	The policy set out in this final action is effective August 8, 2023 https://www.federalregister.gov/documents/2023/06/09/2023-12308/medicare-program-treatment-of-medicare-part-c-days-in-the-calculation-of-a-hospitals-medicare?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
509	Notice	HHS	88 FR 38519	Published 6/13/2023	National Committee on Vital and Health Statistics; Meeting and Request for Information	Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting and related Request for Information (RFI). The meeting is open to the public. The public is invited and welcome to obtain the link to attend this meeting by following the instructions posted on the Committee website: https://ncvhs.hhs.gov/meetings-meeting/.	The meeting will be held Thursday, August 3, 2023; 10:00 a.m.–5:30 p.m. EDT. Comments are due June 30, 2023. https://www.federalregister.gov/documents/2023/06/13/2023-12617/national-committee-on-vital-and-health-statistics-meeting-and-request-for-information?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
510	Notice	VA	88 FR 39908	Published 6/20/2023	Request for Data and Information on Minority Veterans	The Department of Veterans Affairs (VA), Office of the Secretary, Center for Minority Veterans (CMV), is hereby giving notice of an opportunity for the public to provide available data and information on minority and historically underserved Veterans. Historically underserved Veterans includes racial and ethnic minority (Asian American; Black; Hispanic/Latino; Native American (including American Indian, Alaskan Native, and Native Hawaiian); or Pacific-Islander American); LGBTQ+; those whose religious or conscientious identity, beliefs, and practices have been determined to be underserved; language barriers or are without citizenship status; and those in rural areas and on tribal lands.	Comments must be received on or before August 21, 2023 https://www.federalregister.gov/documents/2023/06/20/2023-13067/request-for-data-and-information-on-minority-veterans?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
511	Notice	ACF	88 FR 39854	Published 6/20/2023	Submission for OMB Review; Tribal Maternal, Infant, and Early Childhood Home Visiting Program Data Reports; Demographic and Service Utilization, Grantee Performance Measures, and Quarterly Performance Reports	The Administration for Children and Families (ACF) is requesting a new information collection for the Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Tribal Home Visiting Program Data Reports: Demographic and Service Utilization, Grantee Performance Measures, and Quarterly Performance Reports.	Comments due July 20, 2023 https://www.federalregister.gov/documents/2023/06/20/2023-13065/submission-for-omb-review-tribal-maternal-infant-and-early-childhood-home-visiting-program-data?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
512	Notice	Food and Nutrition Services	88 FR 41067	Published 6/23/2023	Agency Information Collection Activities: WIC Participant and Program Characteristics 2024 & 2026 Study	In accordance with the Paperwork Reduction Act of 1995, this notice invites the general public and other public agencies to comment on this proposed information collection. This collection is a reinstatement, with change, of a previously approved collection for which approval has expired for the WIC Participant and Program Characteristics 2024 and 2026 Study.	Written comments must be received on or before August 22, 2023 https://www.federalregister.gov/documents/2023/06/23/2023-13313/agency-information-collection-activities-wic-participant-and-program-characteristics-2024-and-2026?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
513	Notice	VA	88 FR 42012	Published 6/28/2023	Solicitation of Nominations for the Appointment to the Advisory Committee on Tribal and Indian Affairs	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs ("the Committee") to represent the following Indian Health Service (IHS) Areas: Bemidji; California; Great Plains; Nashville; Navajo; Tucson.	Nominations for membership on the Committee must be received no later than 5:00 p.m. EST on August 1, 2023 https://www.federalregister.gov/documents/2023/06/28/2023-13675/solicitation-of-nominations-for-the-appointment-to-the-advisory-committee-on-tribal-and-indian?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
514	Notice	NIH	88 FR 41974	Published 6/28/2023	Notice To Announce Tribal Consultation for an All of Us Research Program Update and To Discuss the Program's Policies and Protections Around Data Access and Use Statement for Fiscal Year 2023	The U.S. Department of Health and Human Services (HHS), National Institutes of Health (NIH) hereby gives notice that the All of Us Research Program will be hosting a virtual Tribal Consultation with American Indian and Alaska Native (AI/AN) Federally Recognized Tribes. The consultation will include an update on our approach to Tribal engagement, discussion about integrating data from self-identified AI/AN participants in the program's data platform, the All of Us Research Hub at https://www.researchallofus.org, and program planning.	Thursday, September 28, 2023, from 1 to 3:00 p.m. ET. Written Tribal testimony is due by October 28, 2023 https://www.federalregister.gov/documents/2023/06/28/2023-13730/notice-to-announce-tribal-consultation-for-an-all-of-us-research-program-update-and-to-discuss-the?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
515	DUILL	IHS	N/A	Published 6/29/2023	The IHS Director writes to share an opportunity to become involved in the collaborative planning for the new IHS enterprise electronic health record solution.	One of the central principles of the IHS Health IT Modernization is to build and operate the new EHR solution with our partners, not for them. As the IHS approaches finalization of a contract award for the new IHS enterprise EHR solution, it is important to know which sites may wish to participate with the IHS on shared enterprise solution planning efforts. As discussed during the May 10 Tribal Consultation and Urban Confer session, the IHS invites sites that are considering the new enterprise EHR as a viable option to complete the enclosed Statement of Interest to indicate their interest in participating in shared enterprise solution planning. The Statement of Interest may be submitted by e-mail to modernization@ihs.gov.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DILL_DUIOLLL_062923.pdf
516	Notice	ACF	88 FR 42076	Published 6/29/2023	Tribal Consultation Meetings	Pursuant to the Head Start Act, notice is hereby given of two tribal consultation sessions to be held between HHS/ACF OHS leadership and the leadership of tribal governments operating Head Start and Early Head Start programs. The purpose of these consultation sessions is to discuss ways to better meet the needs of American Indian and Alaska Native (AI/AN) children and their families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations. Two tribal consultations will be held as part of HHS/ACF or ACF Tribal Consultation Sessions.	Meeting dates: Wednesday, September 13, 2023, Tuesday, December 5, 2023 https://www.federalregister.gov/documents/2023/06/29/2023-13793/tribal-consultation-meetings?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
517	Notice	IHS	88 FR 42379	Published 6/30/2023	Notice of Listing of Members of the Indian Health Service Senior Executive Service Performance Review Board	Notice is provided of the persons who will serve on the Indian Health Service Senior Executive Service Performance Review Board.	https://www.federalregister.gov/documents/2023/06/30/2023-13892/notice-of-listing-of-members-of-the-indian-health-service-senior-executive-service-performance?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
518	DUILL	IHS	N/A	Published 6/30/2023	COVID 19 Supplemental Appropriations Update	On June 3, 2023, President Biden signed the Fiscal Responsibility Act of 2023 (FRA) (Public Law 118-5) into law. The FRA suspends the public debt limit through January 1, 2025, establishes new discretionary spending limits, and rescinds certain unobligated COVID-19 supplemental funding balances, among other items. Prior to the enactment of the FRA, the IHS continued to obligate COVID-19 funding and the Agency obligated approximately $600 million during the month of May. The FRA protects IHS funds, particularly those that were directly appropriated to the Agency in the American Rescue Plan Act (ARPA) and the Coronavirus Aid, Relief, and Economic Security (CARES) Act. However, COVID-19 funding that was transferred to the IHS from COVID-19 appropriations, approximately $419 million, is impacted by the enacted rescissions.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DILL_DUIOLLL_063023.pdf
519	Notice	HRSA	88 FR 42725	Published 7/3/2023	Lists of Designated Primary Medical Care, Mental Health, and Dental Health Professional Shortage Areas	This is the first of two notices planned for the coming months informing the public of the availability of the complete lists of all geographic areas, population groups, and facilities designated as primary medical care, dental health, and mental health professional shortage areas (HPSAs). This notice includes the lists of HPSAs in a designated status as of April 28, 2023.	https://www.federalregister.gov/documents/2023/07/03/2023-14092/lists-of-designated-primary-medical-care-mental-health-and-dental-health-professional-shortage-areas?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
520	Notice	IHS	88 FR 42726	Published 7/3/2023	Request for Public Comment: 60-Day Information Collection: Indian Health Service Forms To Implement the Privacy Rule	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, "IHS Forms to Implement the Privacy Rule" Office of Management and Budget (OMB) Control Number 0917-0030.	September 1, 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 https://www.federalregister.gov/documents/2023/07/03/2023-14017/request-for-public-comment-60-day-information-collection-indian-health-service-forms-to-implement?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
521	Notice	Agency for Healthcare Research and Quality (AHRQ), HHS.	88 FR 42941	Published 7/5/2023	Supplemental Evidence and Data Request on Breastfeeding and Health Outcomes for Infants and Children	The Agency for Healthcare Research and Quality (AHRQ) is seeking scientific information submissions from the public. Scientific information is being solicited to inform our review on Breastfeeding and Health Outcomes for Infants and Children, which is currently being conducted by the AHRQ's Evidence-based Practice Centers (EPC) Program. Access to published and unpublished pertinent scientific information will improve the quality of this review.	Submission Deadline on or before August 4, 2023 https://www.federalregister.gov/documents/2023/07/05/2023-14184/supplemental-evidence-and-data-request-on-breastfeeding-and-health-outcomes-for-infants-and-children?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
522	Notice	SAMHSA	88 FR 44134	Published 7/11/2023	Tribal Technical Advisory Committee; Notice of Meeting	Notice is given for the August 29, 2023, virtual meeting of SAMHSA's Tribal Technical Advisory Committee (TTAC). TTAC meetings are exclusively between federal officials and elected officials of Tribal governments (or their designated employees) to exchange views, information, or advice related to the management or implementation of SAMHSA programs. The public may attend but are not allowed to participate in the meeting. Immediately following the TTAC meeting, SAMHSA will host American Indian and Alaska Native (AI/AN) Federally Recognized Tribes for a virtual Tribal Consultation session on the BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDER RESOURCES FOR NATIVE AMERICANS PROGRAM	The virtual SAMHSA TTAC Meeting will be held on August 29, 2023, from 1:00 p.m. to 4:00 p.m. EDT https://www.federalregister.gov/documents/2023/07/11/2023-14638/tribal-technical-advisory-committee-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
523	Notice	CMS	88 FR 44281	Published 7/12/2023	Request for Information Regarding Medical Payment Products	The CFPB, an independent agency, HHS, and the Treasury (collectively, the agencies), are soliciting comments from the public and interested parties on medical credit cards, loans, and other financial products used to pay for health care. The agencies seek to understand the prevalence, nature, and impact of these products, including disparities across different demographic groups. The agencies also seek to understand the effects these products may have on patients and on the health care system. In particular, the agencies seek comment on whether these products may allow health care providers to operate outside of a broad range of patient and consumer protections. The agencies also seek comment on whether these products may contribute to health care cost inflation, displace hospitals' provision of financial assistance, lead patients to pay inaccurate or inflated medical bills, increase the amount patients must pay due to financing costs, or otherwise harm patients' mental, physical, and financial well-being, including through downstream credit reporting and debt collection practices.	Comments are due September 11, 2023 https://www.federalregister.gov/documents/2023/07/12/2023-14726/request-for-information-regarding-medical-payment-products?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
524	Notice	CDC	88 FR 44338	Published 7/12/2023	Reorganization of the National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce	CDC has modified its structure. This notice announces the reorganization of the State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce, henceforth referred to as the Public Health Infrastructure Center (PHIC). PHIC reorganized to enhance and enable coordination for partners collectively working to bolster the Nation's public health infrastructure.	This reorganization was approved by the Director of CDC on June 28, 2023 https://www.federalregister.gov/documents/2023/07/12/2023-14705/reorganization-of-the-national-center-for-state-tribal-local-and-territorial-public-health?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
525	Proposed Rule	HHS	88 FR 44596	Published 7/12/2023	Short-Term, Limited-Duration Insurance; Independent, Noncoordinated Excepted Benefits Coverage; Level-Funded Plan Arrangements; and Tax Treatment of Certain Accident and Health Insurance	This document sets forth proposed rules that would amend the definition of short-term, limited-duration insurance, which is excluded from the definition of individual health insurance coverage under the Public Health Service Act. This document also sets forth proposed amendments to the requirements for hospital indemnity or other fixed indemnity insurance to be considered an excepted benefit in the group and individual health insurance markets. This document further sets forth proposed amendments to clarify the tax treatment of certain benefit payments in fixed amounts received under employer-provided accident and health plans. Finally, this document solicits comments regarding coverage only for a specified disease or illness that qualifies as excepted benefits, and comments regarding level-funded plan arrangements.	Comments are due September 11, 2023 https://www.federalregister.gov/documents/2023/07/12/2023-14238/short-term-limited-duration-insurance-independent-noncoordinated-excepted-benefits-coverage?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
526	Notice	BIA	88 FR 44823	Published 7/13/2023	Privacy Act of 1974; System of Records	Pursuant to the Privacy Act of 1974, as amended, the Department of the Interior (DOI) is issuing a public notice of its intent to create the Bureau of Indian Affairs (BIA) Privacy Act system of records, INTERIOR/BIA–33, Behavioral Health and Wellness Program. This system helps the Behavioral Health and Wellness Program (BHWP) provide immediate behavioral health crisis support, clinical counseling services, crisis care coordination, and communication with the client and appropriate points of contact for referrals and continued service delivery or emergency care. This newly established system will be included in DOI's inventory of systems of records.	This new system will be effective upon publication on July 13, 2023. New routine uses will be effective August 14, 2023. Submit comments on or before August 14, 2023 https://www.federalregister.gov/documents/2023/07/13/2023-14877/privacy-act-of-1974-system-of-records?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
527	Notice	ACF	88 FR 45219	Published 7/14/2023	Submission for Office of Management and Budget Review; Guidance for Tribal Temporary Assistance for Needy Families Program (Office of Management and Budget #0970-0157)	The Administration for Children and Families (ACF) is requesting a 3-year extension of the form ACF–123: Guidance for the Tribal Temporary Assistance for Needy Families (TANF) Program (Office of Management and Budget (OMB) #0970–0157, expiration date: August 31, 2023). There are minor clarifying changes requested to the guidance.	Comments due August 13, 2023 https://www.federalregister.gov/documents/2023/07/14/2023-15001/submission-for-office-of-management-and-budget-review-guidance-for-tribal-temporary-assistance-for?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
528	Notice	IHS	88 FR 45867	Published 7/18/2023	Catastrophic Health Emergency Fund	The Indian Health Service (IHS or Service) administers the Catastrophic Health Emergency Fund (CHEF) pursuant to section 202 of the Indian Health Care Improvement Act (IHCIA). The purpose of the CHEF is to meet the extraordinary medical costs associated with the treatment of victims of disasters or catastrophic illnesses who are within the responsibility of the Service. This notice proposes regulations governing the administration of the CHEF.	Send comments on or before September 18, 2023 https://www.federalregister.gov/documents/2023/07/18/2023-14849/catastrophic-health-emergency-fund?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
529	DUILL	IHS	N/A	Published 7/19/2023	Update on Status on Implementing FY2024 Advanced Appropriations given to IHS	In FY 2023, the IHS received the first ever advance appropriation for the FY 2024 Budget. The FY 2023 Consolidated Appropriations Act (Public Law 117-328) included a total of $5.1 billion in FY 2024 advance appropriations for the Indian Health Service, which includes funding at the same level as FY 2023 enacted for nearly all IHS programs. The full year funding level will be available for these programs on Oct. 1, 2023, regardless of whether Congress enacts a continuing resolution or full year bill. Advance appropriations provide long overdue funding stability and predictability for the IHS	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DILL_DUIOLLL_071923.pdf
530	DUILL	IHS	N/A	Published 7/19/2023	Information Regarding the Syphilis Epidemic Currently Impacting AI/AN Communities	IHS is providing information regarding the syphilis epidemic affecting American Indian and Alaska Native (AI/AN) communities. American Indian and Alaska Native people have the highest rates of syphilis and congenital syphilis of any group in the country. Some congenital syphilis cases have resulted in stillbirths or death shortly after birth. IHS is committed to reducing the prevalence of syphilis in AI/AN communities and I ask for your assistance in helping us achieve this goal.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DILL_DUIOLLL_071923_Syphilis.pdf
531	N/A	CMS	N/A	Published 7/25/2023	CMS Releases 2021 Medicaid Data on Managed Care	The Centers for Medicare & Medicaid Services (CMS) released the 2021 Medicaid Managed Care Enrollment and Program Characteristics and Data Tables. This national data is broken down by program and population, as well as by individual state. The enrollment data provides an accurate snapshot of Medicaid managed care enrollment for a particular year as of July 1st of each year.	https://www.medicaid.gov/medicaid/managed-care/profiles-program-features/index.html https://www.medicaid.gov/medicaid/managed-care/enrollment-report/index.html
532	DILL	USETINC	N/A	Published 7/26/2023	DOI, HHS, DOJ Tribal Consultation on ICWA	The Department of the Interior (DOI), Department of Health and Human Services (HHS), and the Department of Justice (DOJ) are committed to partnering on a nation-to-nation basis with Tribal Nations to ensure the wellbeing of Tribal children and preservation of Tribal families. In response to requests by Tribal leaders for updates on their collective efforts, they invite you to provide input on the Indian Child Welfare Act and what steps the agencies can take to promote federal protections for Indian children and their parents and caregivers.	Meeting date: August 7, 2023 2-4pm CT https://www.usetinc.org/wp-content/uploads/2023/07/ICWA-Consultation-DILL-ASIA-ACF-HHS-logo-ENRD-logo.pdf
533	Tribal Listening Session	SAMHSA	N/A	Published 7/26/2023	Upcoming SAMHSA Event	SAMHSA Tribal Listening Session and virtual Tribal Consultation on Behavioral Health and Substance Use Disorder Resources for Native Americans. This is a new program, authorized but not appropriated, under the 2023 Omnibus Funding bill. SAMHSA will initially hold a listening session on August 8 at 3 p.m. ET. The listening session will provide an opportunity for SAMHSA to share information about the statute and engage with Tribal Leaders prior to the consultation.	Meeting date: August 8, 2023 3pm ET https://www.zoomgov.com/meeting/register/v.3sdeutq4tqHSfLUK83WNkaaKRNn1eoPFw

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
534	Tribal Recovery Summit	SAMHSA	N/A	Published 7/26/2023	Upcoming SAMHSA Event	SAMHSA Office of Tribal Affairs and Policy (OTAP) and Office of Recovery (OR) will convene a Tribal Recovery Summit on August 15 - 16, 2023 at the Radiance Plaza located at 1301 Young Street in Dallas, TX. The purpose of the summit is to share best practices and experiences related to expanding recovery related programs and opportunities within American Indian and Alaska Native (AI/AN) communities. The ultimate goal of the Summit is to provide all attendees with valuable insight and information that can help improve recovery related outcomes.	Meeting date August 15 & 16, 2023 1pm ET https://www.zoomgov.com/meeting/register/vJItf-mpqjMsE5B6vVdCB4OwmEEV_XLIE
535	Proposed Rule	ACF	88 FR 48409	Published 7/27/2023	Request for Information: Meeting the Child Care Needs in Tribal Nations	The Office of Child Care invites public comment on the rules and regulations of the Tribally administered Child Care and Development Fund (CCDF) program as part of the Administration for Children and Families' (ACF) commitment to creating partnerships with Tribal Nations to identify and implement solutions that transcend traditional program boundaries. As part of that commitment, OCC seeks input on the requirements, regulations, and processes for Tribal Nations that administer CCDF. This Request for Information (RFI) specifically seeks public comment on the following topics of the Tribal child care programs—CCDF Funding Policies for Tribes, CCDF Administration, Improving Families' Access to Child Care, and Increasing Child Care Supply in Tribal Communities—but input on any aspect of the Tribally administered CCDF programs is welcome. OCC will host a Tribal consultation during the RFI public comment period.	Comments are due January 2, 2024 https://www.federalregister.gov/documents/2023/07/27/2023-15930/request-for-information-meeting-the-child-care-needs-in-tribal-nations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
536	DTLL	IHS	N/A	Published 8/2/2023	Indian Health Service (IHS) Division of Facilities Planning and Construction, Office of Environmental Health and Engineering (DFPC OEHE) will be accepting applications for the Fiscal Year (FY) 2022 and FY 2023 Small Ambulatory Program (SAP) starting on August 7, 2023	The FY 2022 budget includes $25 million and the FY 2023 budget includes $25 million for a total budget of $50 million available for SAP. Fiscal year 2022 and 2023 SAP projects will be awarded up to $3.5 million and all 12 IHS Areas that submit an application will have an opportunity to receive an award. Authorization for the SAP is provided in the Indian Health Care Improvement Act, Title III, Section 306, Public Law (P. L.) 94-437, as amended (25 U.S.C. § 1636). Under the SAP, American Indian and Alaska Native Tribes or Tribal Organizations that are operating an Indian health care facility pursuant to a health care services contract or compact entered into under the Indian Self-Determination and Education Assistance Act, P.L. 93-638, as amended (25 U.S.C. § 5301 et seq.), may competitively apply for funding for the construction, expansion, or modernization of small ambulatory health care facilities.	The deadline for submitting FY 2022 and FY 2023 SAP applications is November 10, 2023. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_080223_SAP.pdf
537	Final Rule	CMS, HHS	88 FR 50956	Published 8/2/2023	Medicare Program; Inpatient Rehabilitation Facility Prospective Payment System for Federal Fiscal Year 2024 and Updates to the IRF Quality Reporting Program	This final rule updates the prospective payment rates for inpatient rehabilitation facilities (IRFs) for Federal fiscal year (FY) 2024. As required by statute, this final rule includes the classification and weighting factors for the IRF prospective payment system's case-mix groups and a description of the methodologies and data used in computing the prospective payment rates for FY 2024. It also rebases and revises the IRF market basket to reflect a 2021 base year. It also confirms when IRF units can become excluded and paid under the IRF PPS. This rule also includes updates for the IRF Quality Reporting Program (QRP).	Effective date: These regulations are effective on October 1, 2023. https://www.federalregister.gov/documents/2023/08/02/2023-16050/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
538	Notice	IHS	88 FR 52186	Published 8/7/2023	Indian Self-Determination and Education Assistance Act Contracts	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 Self-Determination and Education Assistance Act Contracts." Office of Management and Budget (OMB) Control Number 0917–0037. The IHS is requesting OMB to approve an extension for this collection, which expires on August 31, 2023.	Comment Due Date: September 6, 2023. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication. https://www.federalregister.gov/documents/2023/08/07/2023-16706/request-for-public-comment-30-day-information-collection-indian-self-determination-and-education?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
539	Final Rule	CMS	88 FR 53200	Published 8/7/2023	Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities; Updates to the Quality Reporting Program and Value-Based Purchasing Program for Federal Fiscal Year 2024	This final rule updates payment rates, including implementing the second phase of the Patient Driven Payment Model (PDPM) parity adjustment recalibration. This final rule also updates the diagnosis code mappings used under PDPM, the SNF Quality Reporting Program (QRP), and the SNF Value-Based Purchasing (VBP) Program. We are also eliminating the requirement for facilities to actively waive their right to a hearing in writing, treating as a constructive waiver when the facility does not submit a request for hearing.	These regulations are effective October 1, 2023, except for the amendments to §§ 411.15 and 489.20 in instructions 2 and 11, which are effective January 1, 2024. https://www.federalregister.gov/documents/2023/08/07/2023-16249/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
540	Notice and Comment	CMS	88 FR 53489	Published 8/8/2023	Medicare and Medicaid Programs; Application From the Community Health Accreditation Program (CHAP) for Continued Approval of Its Home Health Agency Accreditation Program	This proposed notice acknowledges the receipt of an application from Community Health Accreditation Program (CHAP) for continued recognition as a national accrediting organization for home health agencies (HHAs) that wish to participate in the Medicare or Medicaid programs. The statute requires that within 60 days of receipt of an organization's complete application, the Centers for Medicare & Medicaid Services (CMS) publish a notice that identifies the national accrediting body making the request, describes the nature of the request, and provides at least a 30-day public comment period.	To be assured consideration, comments must be received at one of the addresses provided below, by September 6, 2023. https://www.federalregister.gov/documents/2023/08/08/2023-16917/medicare-and-medicaid-programs-application-from-the-community-health-accreditation-program-chap-for?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
541	DUILL	IHS	N/A	Published 8/8/2023	Agency-sponsored Listening Sessions to share information and solicit your input on advance appropriations implementation	During the Listening Sessions, the IHS will share additional information on implementation plans and strategies for advance appropriations, and seek input from Tribal and Urban Indian Organization Leaders. The information discussed in these sessions will be used to prepare public facing Frequently Asked Questions and other helpful materials.	Advance Appropriations Implementation Listening Sessions Thursday, August 17, 2023, 12:00-1:30 p.m., Eastern Time https://ihs-gov.zoomgov.com/j/1610168198 Wednesday, September 6, 2023, 3:00-4:30 p.m., Eastern Time https://ihs-gov.zoomgov.com/j/1608717068 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUI/DLL_080823.pdf
542	Notice	VA	88 FR 54400	Published 8/10/2023	Solicitation of Nominations for the Appointment to the Advisory Committee on Tribal and Indian Affairs	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs ("the Committee") to represent the following Indian Health Service (IHS) Areas: Bemidji; California; Great Plains; Nashville; Navajo; Tucson.	Nominations for membership on the Committee must be received no later than 5 p.m. EST on August 21, 2023. https://www.federalregister.gov/documents/2023/08/10/2023-17182/solicitation-of-nominations-for-the-appointment-to-the-advisory-committee-on-tribal-and-indian?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
543	Proposed Rule	FNS, USDA	88 FR 54908	Published 8/13/2023	Food Distribution Programs; Improving Access and Parity	The Food and Nutrition Service is proposing to amend its regulations to make access and parity improvements within several food distribution programs, including the Commodity Supplemental Food Program (CSFP), the Food Distribution Program on Indian Reservations (FDPIR), The Emergency Food Assistance Program (TEFAP), and USDA Foods disaster response. The proposed provisions use plain language to make them easier to read and understand.	Written comments must be received on or before October 13, 2023 to be assured of consideration. https://www.federalregister.gov/documents/2023/08/14/2023-17467/food-distribution-programs-improving-access-and-parity?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
544	DTLL	DOI	N/A	Published 8/18/2023	Education Committee of the White House Council on Native American Affairs (WHCNAA) is hosting four virtual Tribal Consultations in September	The White House Council on Native American Affairs (WHCNAA) Education Committee is hosting four Tribal consultations on the development of a 10-year National Plan on Native Language Revitalization (National Plan). The 10-year National Plan will lay out a long-term, all-of-government strategy that works with Tribal Nations and, as appropriate, nonprofit organizations, subject matter experts, and other entities for the revitalization, protection, preservation, and reclamation of Native languages.	Virtual Tribal Consultations: Monday, Sept. 18, 2023 (3-5 PM ET); Wednesday, September 20, 2023 (1-3 PM ET); Tuesday, September 26, 2023 (3-5 PM ET); Thursday, September 28, 2023 (2-4 PM ET). Optional written input is due no later than September 29, 11:59 PM ET. DTLL: https://www.bia.gov/sites/default/files/dup/inline-files/8.18.23_dtll_whcnaa_national_plan_on_native_lang_1.pdf BIA Native Language Revitalization Literature Review: https://www.bia.gov/sites/default/files/dup/inline-files/bia_native_american_revitalization_lit_review_draft_08182023.pdf
545	Notice of Meeting	HHS	88 FR 57963	Published 8/24/2023	Meeting of the Presidential Advisory Council on HIV/AIDS	As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will convene the 78th full council meeting on Wednesday, September 20, 2023. The meeting will convene in Charleston, West Virginia and it will also utilize virtual technologies. The meeting will be open to the public. Due to limited space, pre-registration is encouraged for members of the public who wish to attend the meeting in-person. Please email your name to PACHA@hhs.gov by close of business Wednesday, September 13, 2023 to pre-register. There will be a public comment session during the meeting; pre-registration is required to provide public comment. To pre-register to provide public comment, please send an email to PACHA@hhs.gov and include your name, organization, and title by close of business Wednesday, September 13, 2023. If you decide you would like to provide public comment but do not pre-register, you may submit your written statement by emailing PACHA@hhs.gov by close of business September 27, 2023. The meeting agenda will be posted on the PACHA page on HIV.gov at https://www.hiv.gov/federal-response/pacha/about-pacha prior to the meeting.	The meeting will be held on Wednesday, September 20, 2023 from approximately 9 a.m.–6 p.m. (ET). https://www.federalregister.gov/documents/2023/08/24/2023-18267/meeting-of-the-presidential-advisory-council-on-hiv-aids?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
546	Notice	SAMHSA	88 FR 57965	Published 8/24/2023	Advisory Committee for Women's Services (ACWS); Solicitation of Nominations for Additional Non-Voting Representatives on the Maternal Mental Health Task Force	The Substance Abuse and Mental Health Services Administration (SAMHSA) within the Department of Health and Human Services (HHS), is soliciting applications from qualified individuals or organizations to be considered for non-voting representative positions on the Maternal Mental Health Task Force subcommittee of the Advisory Committee for Women's Services (ACWS) (ACWS Subcommittee), as authorized in the Consolidated Appropriations Act. This notice solicits additional representatives.	Nomination period is open until September 22, 2023. https://www.federalregister.gov/documents/2023/08/24/2023-18216/advisory-committee-for-womens-services-acws-solicitation-of-nominations-for-additional-non-voting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
547	Notice of Committee Establishment	US Census Bureau	88 FR 58237	Published 8/25/2023	2030 Census Advisory Committee	The Census Bureau is publishing this notice to announce the establishment of the 2030 Census Advisory Committee (Committee). The Secretary of Commerce has determined that the Committee's establishment is necessary and in the public interest. The Committee will function solely as an advisory body and in compliance with provisions of the Federal Advisory Committee Act. Copies of the charter will be filed with the appropriate standing committees of the U.S. Congress and with the Library of Congress.	Please submit nominations by September 30, 2023. https://www.federalregister.gov/documents/2023/08/25/2023-18341/2030-census-advisory-committee
548	Notice of Meeting	BIA	88 FR 60483	Published 9/01/2023	Advisory Board of Exceptional Children	The Bureau of Indian Education (BIE) is announcing that the Advisory Board for Exceptional Children will hold a two-day meeting, in-person and online. The purpose of the meeting is to meet the mandates of the Individuals with Disabilities Education Act of 2004 (IDEA) for Indian children with disabilities.	The BIE Advisory Board meeting will be held Thursday, September 21, 2023, from 8:00 a.m. to 4:30 p.m., Eastern Daylight Time (EDT); and continue on Friday, September 22, 2023, from 8:00 a.m. to 4:30 p.m., Eastern Daylight Time (EDT). https://www.federalregister.gov/documents/2023/09/01/2023-18913/advisory-board-of-exceptional-children?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
549	Notice of intent to award supplemental funding	SAMHSA	88 FR 60471	Published 9/01/2023	Fiscal Year (FY) 2023 Notice of Supplemental Funding Opportunity	This notice is to inform the public that the Substance Abuse and Mental Health Services Administration (SAMHSA) is supporting supplemental funding in the scope of the parent award to the 56 Rural Emergency Medical Services Training Grant (REMS) recipients funded under Notice of Funding Opportunity (NOFO) TI–23–011. These recipients have a project end date of September 29, 2024. The supplemental funding is to provide the opioid antagonist medication, naloxone, that can be used to treat respiratory depression in suspected opioid overdose patients, and for the procurement of emergency equipment used to rapidly reverse the effects of opioid overdoses. Recipients may receive up to $49,000 for the purchase of naloxone and up to $49,000 for purchasing equipment, for a total of $98,000 per recipient.	Federal Register :: Fiscal Year (FY) 2023 Notice of Supplemental Funding Opportunity
550	UIO Listening Session	SAMHSA	N/A	Published 9/07/2023	SAMHSA UIO Listening Session Behavioral Health and Substance Use Disorder Resources for Native Americans Program (Section 1201 Program)	Substance Abuse Mental Health Services Administration (SAMHSA) would like to meet with Urban Indian Health Organizations to discuss the Behavioral Health and Substance Use Disorder Resources for Native Americans. This is a new program, authorized but not appropriated, under the 2023 Omnibus Funding bill. This meeting will provide the opportunity for SAMHSA to share information about the statute and engage with UIOs.	Thursday, October 19, 2023 3:00 PM-4:00 PM (UTC-05:00) Eastern Time https://www.samhsa.gov/sites/default/files/tribal-listening-session-framing-paper-july-2023.pdf

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
551	DTLL	IHS	N/A	Published 9/07/2023	The IHS Director writes to announce the fiscal year 2023 allocation decisions for $700 million in Bipartisan Infrastructure Law funding	The Infrastructure Investment and Jobs Act, or Bipartisan Infrastructure Legislation (BIL), appropriates $700 million in each year from fiscal year (FY) 2022 through FY 2026, for a total of $3.5 billion for the IHS Sanitation Facilities Construction (SFC) program. These resources are available until expended. These funds are one-time, non-recurring, and can only be used for the purposes specified in the statute.	64413-1 DTLL FY2023 IIJA Funding Allocation Final 8-14-2023 OMB_IHS 9.1.2023 CLEAN.pdf https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_090723.pdf
552	DUILL	IHS	N/A	Published 9/12/2023	The IHS Director writes to Urban Indian Organization Leaders to share the Fiscal Year 2022 Budget to Support Urban Indian Organizations report. The FY 2022 report details funds distribution by the IHS Office of Urban Indian Health Programs and IHS Area Offices	The FY 2022 Budget Report details funds distribution by the OUIHP and IHS Area Offices. These funds have already been allocated for program administration, contract and grant awards, health information technology, and Urban Indian Health initiatives aimed at improving the quality of care in Urban Indian communities.	DUILL: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL_091223.pdf https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/Enclosure_DUIOLL_091223.pdf
553	DTLL	HHS	N/A	Published 9/13/2023	HHS OMH Virtual Tribal Listening Session to obtain feedback on the development of the NOFO entitled Healthy People 2030 Leading Indicators Initiative.	The Healthy People 2030 Leading Health Indicators Initiative (LHI) is intended to identify innovative adaptations of evidence based/evidence informed practices that improve health outcomes related to Healthy People 2030 Leading Health Indicators (LHIs) among racial, ethnic, tribal and other disadvantaged communities. Projects funded under the LHI will implement public health improvement models intended to improve health for one to two Healthy People 2030 LHIs in geographic areas targeted by the recipients. OMH also expects the initiative will result in enhanced capacity of public health, community, and government entities to address and reduce health disparities. The forecast for the NOFO is posted on Grants.gov.	Wednesday, October 25, 2023, from 4:00pm – 5:00pm ET To register for the Zoom meeting, go to this link: https://www.zoomgov.com/meeting/register/vJIsdOCopzkoHxWrQDHr7HkNTBoSK1R7U . After registering, you will receive a confirmation email containing information about joining the meeting. In addition to participating in the listening session, tribes also can submit written comments to OMH at info@minorityhealth.hhs.gov by Tuesday, October 31, 2023 https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/5dff9ce1b-d7f1-4fd4-b3fd-832584174a23.pdf
554	DTLL	HHS	N/A	Published 9/14/2023	HHS Virtual Tribal Consultation on the regulations for Section 504 of the Rehabilitation Act.	U.S. Department of Health and Human Services Office for Civil Rights (OCR) issued a Notice of Proposed Rulemaking (NPRM) on September 14, 2023. This proposed rule revises implementing regulations for Section 504 of the Rehabilitation Act which prohibits discrimination against otherwise qualified individuals on the basis of disability in programs and activities that receive Federal financial assistance or are conducted by a Federal agency. 29 U.S.C. § 794. The NPRM proposes robust civil rights protections on the basis of disability. In addition, the proposed rule incorporates changes needed to reflect amendments to the Rehabilitation Act, enactment of the Americans with Disabilities Act, and significant case law. The proposed rule can be accessed by searching for RIN number 0945-AA15 at www.federalregister.gov.	HHS will hold a Virtual Tribal Consultation on the proposed rule on October 6, 2023 from 2 p.m. to 4 p.m., ET. HHS understands the importance of hearing from Tribes on national and regional issues, as well as Tribe-specific concerns. You can register for the Tribal Consultation on Section 504 Rulemaking at the following link: https://www.zoomgov.com/meeting/register/v.ZceGqzqzEwi5AQ8pvdlhoim7Xp4hwLs Comments are due on or before November 13, 2023. Please note that your comments will be made public https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/e7c019c8-70cd-4a5f-afb4-77b404948977.pdf
555	Notice	IHS	88 FR 64915	Published 9/20/2023	Request for Public Comment: 30-Day Information Collection: Indian Health Service Forms To Implement the Privacy Rule	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, "IHS Forms to Implement the Privacy Rule" Office of Management and Budget (OMB) Control Number 0917-0030. This notice announces the IHS intent to submit the collection, which expires September 30, 2023, to OMB for approval of an extension with modifications, and to solicit comments on specific aspects of the information collection.	Comment Due Date: October 20, 2023. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication. https://www.federalregister.gov/documents/2023/09/20/2023-20309/request-for-public-comment-30-day-information-collection-indian-health-service-forms-to-implement?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
556	Final Rule	CMS	88 FR 65230	Published 9/21/2023	Streamlining Medicaid: Medicare Savings Program Eligibility Determination and Enrollment	This final rule simplifies processes for eligible individuals to enroll and retain eligibility in the Medicare Savings Programs (MSPs). This final rule better aligns enrollment into the MSPs with requirements and processes for other public programs. Finally, this final rule reduces the complexity of applications and reenrollment for eligible individuals.	These regulations are effective November 17, 2023. Throughout, however, we identify separate compliance dates that vary by provision, thereby giving States additional time to implement the provisions of this final rule.
557	Notice	VA	88 FR 65226	Published 9/21/2023	Solicitation of Nominations for the Appointment to the Advisory Committee on Tribal and Indian Affairs	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs ("the Committee") to represent the following Indian Health Service (IHS) Areas: California; Nashville.	Nominations for membership on the Committee must be received no later than 5:00 p.m. EST on October 20, 2023. https://www.federalregister.gov/documents/2023/09/21/2023-20475/solicitation-of-nominations-for-the-appointment-to-the-advisory-committee-on-tribal-and-indian?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
558	Notice of Proposed Rulemaking	OFA, ACF, HHS	88 FR 67697	Published 10/2/2023	Strengthening Temporary Assistance for Needy Families (TANF) as a Safety Net and Work Program	ACF proposes to amend the Temporary Assistance for Needy Families (TANF) program regulations to strengthen the safety net and reduce administrative burden. This NPRM encompasses a package of reforms to ensure TANF programs are designed and funds are used in accordance with the statute. In addition, the package includes provisions that are more technical in nature and are designed to reduce administrative burden and increase program effectiveness.	In order to be considered, the Department must receive written comments on this NPRM, on or before December 1, 2023. https://www.federalregister.gov/documents/2023/10/02/2023-21169/strengthening-temporary-assistance-for-needy-families-tanf-as-a-safety-net-and-work-program?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
559	DUILL	IHS	N/A	Published 10/01/2023	The IHS Director writes to Tribal Leaders and Urban Indian Organization Leaders to share information regarding the current status of fiscal year 2024 appropriations for the Indian Health Service.	the "Continuing Appropriations Act, 2024 and Other Extensions Act" was enacted and funds the Federal Government through November 17. The FY 2024 Continuing Resolution does not affect IHS advance appropriations that are already appropriated for a full fiscal year, which include the same funding level as FY 2023 for almost all programs in the IHS Services and Facilities accounts. The FY 2024 advance appropriations and carryover funds from previously appropriated funds, including COVID supplemental funds, are not limited to the pro rata percentage applied by the continuing resolution, and the IHS has access to this full funding amount as of October 1. In the coming days, the IHS will begin distributing FY 2024 advance appropriations to IHS programs, Tribal Health Programs, and Urban Indian Organizations.	You can find additional information on IHS advance appropriations at the link that follows: IHS Blog: IHS Provides an Update on Advance Appropriations Implementation https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_100123.pdf
560	Notice of Application	IHS	88 FR 68630	Published 10/4/2023	Special Diabetes Program for Indians Application	The Indian Health Service (IHS) is accepting applications for the Special Diabetes Program for Indians (SDPI—formerly Community-Directed SDPI).	Application Deadline Date: November 29, 2023. Earliest Anticipated Start Date: January 1, 2024. https://www.federalregister.gov/documents/2023/10/04/2023-22057/special-diabetes-program-for-indians?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
561	Notice of Tribal Consultation	SAMHSA, HHS	88 FR 68642	Published 10/4/2023	Tribal Opioid Response (TOR) Consultation	SAMHSA announces a Tribal Consultation Session on the Tribal Opioid Response (TOR) grant funding methodology. SAMHSA will host American Indian and Alaska Native (AI/AN) Federally Recognized Tribes for a virtual Tribal consultation session.	The tribal consultation will be held on November 9th, at 2 p.m. ET. SAMHSA will accept written Tribal testimony until 5 p.m., November 23rd, 2023. https://www.federalregister.gov/documents/2023/10/04/2023-21967/tribal-opioid-response-for-consultation?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
562	Notice of Public Virtual Meeting	Census	88 FR 71333	Published 10/16/2023	National Advisory Committee	The Census Bureau is giving notice of a virtual meeting of the National Advisory Committee on Racial, Ethnic and Other Populations (NAC). The Committee will address policy, research, and technical issues relating to a full range of Census Bureau programs and activities, including the decennial census, demographic and economic statistical programs, field operations, and information technology. Last minute changes to the schedule are possible, which could prevent giving advance public notice of schedule adjustments.	The virtual meeting will be held on: Thursday, November 16, 2023, from 8:30 a.m. to 5 p.m. ET, and Friday, November 17, 2023, from 8:30 a.m. to 2:30 p.m. ET. A brief period will be set aside during the virtual meeting to read public comments received by noon ET, November 16, 2023. https://www.federalregister.gov/documents/2023/10/16/2023-22715/national-advisory-committee?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
563	Notice of Tribal Consultation and request for comments	Patent and Trademark Office	88 FR 73000	Published 10/24/2023	Formal Tribal Consultation on WIPO IGC Negotiations	The United States Patent and Trademark Office (USPTO), Department of Commerce, announces a formal Tribal Consultation, and requests written comments on issues involving genetic resources (GR), traditional knowledge (TK), and traditional cultural expressions (TCEs). These topics are being discussed at the World Intellectual Property Organization (WIPO). Specifically, the WIPO Intergovernmental Committee on Intellectual Property and Genetic Resources, Traditional Knowledge, and Folklore (traditional cultural expressions) (WIPO IGC) is undertaking negotiations regarding how best to protect GR, TK, and TCEs of Indigenous Peoples.	Webinar Dates: The webinar for federally recognized Tribal Nations and their proxies will be held on Tuesday, January 16, 2024, from 3 to 5 p.m. ET and Wednesday, January 17, 2024 from 3 to 5 p.m. ET. The webinar for state recognized Tribes and other Tribal members, Native Hawaiians and their representatives, and inter-tribal organizations, will be held on Friday, January 19, 2024, from 3 to 5 p.m. ET and Tuesday, January 23, 2024, from 3 to 5 p.m. ET. Please register in advance to participate in one of these webinars at: https://cvent.me/bZRP3L. Comment Deadline: Written comments pursuant to the questions in this Notice must be received by Friday, February 23, 2024. https://www.federalregister.gov/documents/2023/10/24/2023-23386/formal-tribal-consultation-on-wipo-igc-negotiations
564	Notice and request for comments. Request for revision to a collection.	IHS	88 FR 74499	Published 10/31/2023	Request for Public Comment: 30-Day Information Collection: Application for Participation in the IHS Scholarship Program	In compliance the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) invites the general public to comment on the information collection titled, "Application for Participation in the IHS Scholarship Program." Office of Management and Budget (OMB) Control No. 0917-0006. IHS is requesting OMB to approve an extension for this collection, which expires on October 31, 2023.	Comment Due Date: November 30, 2023. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication. https://www.federalregister.gov/documents/2023/10/31/2023-23996/request-for-public-comment-30-day-information-collection-application-for-participation-in-the-ihs?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
565	Request for Nominations	Census Bureau	88 FR 77076	Published 11/8/2023	Request for Nominations of Members To Serve on the National Advisory Committee on Racial, Ethnic, and Other Populations	The Director of the Census Bureau (Director) is seeking nominations for the National Advisory Committee on Racial, Ethnic and Other Populations (NAC or Committee). The purpose of the NAC is to provide advice to the Director on the full range of economic, housing, demographic, socioeconomic, linguistic, technological, methodological, geographic, behavioral and operational variables affecting the cost, accuracy and implementation of Census Bureau programs and surveys, including the decennial census. The Director has determined that the work of the NAC is in the public interest and relevant to the duties of the Census Bureau. Therefore, the Director is seeking nominations to fill vacancies on the NAC.	Additional information concerning the NAC can be found by visiting the NAC's website at: https://www.census.gov/about/cac/nac.html. Nominations must be received on or before Wednesday, January 10, 2024. Nominations must contain a completed resume. The Census Bureau will retain nominations received after the deadline for consideration should additional vacancies occur. Please submit nominations via email to: census.national.advisory.committee@census.gov (subject line 2024 NAC Nominations"). https://www.federalregister.gov/documents/2023/11/08/2023-24662/request-for-nominations-of-members-to-serve-on-the-national-advisory-committee-on-racial-ethnic-and?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
566	Final Rule	VA	88 FR 77514	Published 11/13/2023	VA Pilot Program on Graduate Medical Education and Residency	The Department of Veterans Affairs (VA) adopts as final, with changes, a proposed rule amending its medical regulations to establish a new pilot program on graduate medical education and residency, as required by section 403 of the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Internal Systems and Strengthening Integrated Outside Network Act of 2018.	https://www.federalregister.gov/documents/2023/11/13/2023-24709/va-pilot-program-on-graduate-medical-education-and-residency#:~:text=This%20section%20and%20%C2%A7%C2%A7,establishing%20new%20residency%20programs%20in
567	Notice and Request for Comments	DOI	88 FR 78061	Published 11/14/2023	Request for Comments on the Departmenet of Interior's Environmental Justic Strateegic Plan Draft, Vision, Goals and Objectives	Pursuant to the Executive Order (E.O.) 14096, Revitalizing our Nation's Commitment to Environmental Justice for All, the Department of the Interior (Department) is updating its Environmental Justice Strategic Plan and soliciting feedback on its draft environmental justice vision, goals, and objectives (included in Supplemental Information). The Department is also soliciting feedback on priority actions and performance metrics the Department should evaluate to advance the draft environmental justice vision, goals, and objectives.	There will be three public listening sessions with opportunity to give oral feedback: November 30, 2023, 3-4:30 PM ET (Virtual) https://bit.ly/generalpublicsession1; November 30,2023, 6:30-8 PM ET (Virtual) https://bit.ly/generalpublicsession2; December 1, 2023, 3-4:30 PM ET (Virtual) https://bit.ly/generalpublicsession3. Written comments must be postmarked by December 15, 2023. https://www.federalregister.gov/documents/2023/11/14/2023-24937/environmental-justice-strategic-plan-draft-vision-goals-and-objectives?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
568	Notice	SAMHSA	N/A	Published 11/16/2023	Notice of Funding Opportunity for Tribal Behavioral Health	The purpose of this program is to prevent and reduce suicidal behavior and substance use/misuse, reduce the impact of trauma, and promote mental health among American Indian/Alaska Native (AI/AN) youth, up to and including age 24, by building a healthy network of systems, services, and partnerships that impact youth. SAMHSA expects this program will be a model for community change that integrates a community's culture, resources, and readiness to address suicide prevention and substance use/misuse among AI/AN youth.	Eligibility is limited to federally recognized American Indian/Alaska Native (AI/AN) tribes, tribal organizations, Urban Indian Organizations, or consortia of tribes or tribal organizations. The application due date is Wednesday, March 6, 2024. The anticipated total available funding is $13,051,443. The anticipated number of awards is 52, the anticipated award amount is $250,000. The length of the project is up to 5 yeaers. https://www.samhsa.gov/grants/grant-announcements/sm-23-021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
569	DTLL	IHS	N/A	Published 11/27/2023	IHS Director's Advisory Workgroup on Tribal Consultation to Initiate Tribal Consultation on definition of Indian tribe to use in the updated IHS Tribal Consultation policy.	On July 26, the IHS initiated Tribal Consultation on the draft Consultation Policy. Subsequently, on August 11, an additional Tribal Leader letter was provided with a summary document of key items that the Consultation Workgroup addressed after reviewing comments received from the first Tribal Consultation on April 27, 2021. There was consensus by the Consultation Workgroup to ensure the updated IHS Consultation Policy aligns as closely as possible with the Department of Health and Human Services (HHS) Tribal Consultation Policy (TCP) that was finalized on September 12 and Executive Order 13175, "Consultation and Coordination with Indian Tribal Governments." After reviewing comments received from the first Tribal Consultation, and aligning the draft Consultation Policy with the final HHS TCP, the Consultation Workgroup reconvened to walk through the final draft. Consultation Workgroup members requested two weeks to go back and share the latest draft with their respective Tribes. At the conclusion of that two-week period, the Consultation Workgroup reconvened to determine any remaining issues and discussed how to proceed. A final consensus was not reached on one issue – the definition of Indian Tribe. As Co-Chairs of the Workgroup, we believe the best way to resolve this issue is to initiate additional Tribal Consultation. Option #1: Lit Act Definition (25 U.S.C. § 5130): "Indian tribe" means any Indian or Alaska Native tribe, band, nation, pueblo, village or community that the Secretary of the Interior acknowledges to exist as an Indian Tribe. Option #2: ISDEAA Definition (25 U.S.C. § 5304(e)): "Indian tribe" or "Indian Tribe" means any Indian Tribe, band, nation, or other organized group or community, including any Alaska Native village or regional or village corporation as defined in or established pursuant to the Alaska Native Claims Settlement Act (85 Stat. 688) (43 U.S.C. 1601 et seq.), which is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians.	TRIBAL CONSULTATION SESSIONS: Please make plans to join us for one or more of the following virtual Tribal Consultation sessions scheduled below to share your input and recommendations on the definition of Indian Tribe that should be included in the updated Consultation Policy. Session details follow: DATES: Tuesday, January 9, 2024, from 3:00 p.m. – 4:30 p.m., ET Thursday, January 11, 2024, from 3:00 p.m. – 4:30 p.m., ET Wednesday, January 17, 2024, from 3:30 p.m. – 5:00 p.m., ET Thursday, January 18, 2024, from 1:00 p.m. – 2:30 p.m., ET ZOOM REGISTRATION: https://ihs-gov.zoomgov.com/meeting/register/v.Jsc-yvrQgdSj7aLurrYtSPNRONDEB1C2A WRITTEN COMMENTS and RECOMMENDATIONS: Please send your written comments and recommendations on which definition of Indian Tribe to include in the updated Consultation Policy by Friday, February 20, 2024 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_112723.pdf
570	DULL	IHS	N/A	Published 11/28/2023	Announcement of the list of eligible degree programs for the Indian Health Service Scholarship Program (IHSSP) in Academic Year (AY) 2024-2025.	Beginning on December 15, 2023, interested applicants will be able to apply online at https://www.ihs.gov/scholarship/apply/. Please direct them to the IHS Scholarship web site for further information. A complete list of eligible degree programs for AY 2024-2025 is enclosed.	The IHS Director writes to Tribal Leaders and Urban Indian Organization Leaders to announce the eligible degree programs for the Indian Health Service Scholarship Program in Academic Year 2024-2025.
571	Notice	ACF	88 FR 83543	Published 11/30/2023	Proposed Information Collection Activity; Tribal Early Childhood Facilities Combined Application Guide (New Collection)	The Office of Early Childhood Development (ECD), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting Office of Management and Budget (OMB) approval of the Tribal Early Childhood Facilities Combined Application Guide for joint applications for construction and major renovation projects using both Head Start and Child Care and Development Fund (CCDF) resources.	Comments due within 60 days of publication. https://www.federalregister.gov/documents/2023/11/30/2023-26307/proposed-information-collection-activity-tribal-early-childhood-facilities-combined-application#ufm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
572	Notice	SAMHSA	88 FR 83955	Published 12/1/2023	Agency Information Collection Activities; Submission for OMB Review; Comment Request	The Substance Abuse and Mental Health Services Administration (SAMHSA) is seeking Office of Management and Budget (OMB) Emergency approval for new information collection activities for monitoring all of SAMHSA's 988 Cooperative Agreements. The collection of this information is critical to successfully oversee operational response and quality of service through the 988 Suicide and Crisis Lifeline to ensure connections to care for individuals in suicidal crisis or emotional distress contacting in for 988 phone, chat, and text support for connecting local, state/territory and national outcomes and monitoring contractual obligations for current and future 988 grant programs. Much of this information is already embedded in the current 988 Suicide and Crisis Lifeline network administrator grants, the 988 state and territory grant program, or the 988 Tribal Response grant program.	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. https://www.federalregister.gov/documents/2023/12/01/2023-26436/agency-information-collection-activities-submission-for-omb-review-comment-request#ufm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
573	Notice	USDA	88 FR 84120	Published 12/4/2023	Submission for OMB Review; Comment Request	The Indigenous Animals Harvesting and Meat Processing Grant Program was authorized by Section 1001 of the American Rescue Plan (ARP) Act of 2021 (Pub. L. 117–2), which assists U.S. states and territories to build resilience in the middle of the supply chain and strengthen local and regional food systems. The information provided will be used to determine applicant and project eligibility and to ensure that projects meet program goals and are for authorized purposes. Applicants that receive grant awards are also required to execute a Financial Assistance Agreement with the Agency and provide financial and project performance reports to the Agency to ensure that projects are being completed in a timely manner.	Comments regarding this information collection received by January 3, 2024 will be considered. Written comments and recommendations for the proposed information collection should be submitted within 30 days of the publication of this notice on the following website www.reginfo.gov/public/do/PRAMain. https://www.federalregister.gov/documents/2023/12/04/2023-26519/submission-for-omb-review-comment-request#ufm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
574	DTLL/DULL	VA, HHS	N/A	Published 12/6/2023	VA and IHS Reimbursement Agreement for Health Care and Related Services Provided by the IHS to Eligible AI/AN Veterans	This agreement replaces and expands upon the prior agreement between our agencies, which was originally executed on December 5, 2012. Under the new agreement, VA will now reimburse the IHS for purchased/referred care and contracted travel for AI/AN Veterans. The VA will also continue to reimburse the IHS for direct care provided to AI/AN Veterans.	As the IHS and VA move forward with the implementation of the Agreement, Tribal Leaders are encouraged to send any written comments by January 23, 2024. You can e-mail your comments to: consultation@ihs.gov and tribalgovernmentconsultation@va.gov, adding REVISED IHS-VA REIMBURSEMENT AGREEMENT as the subject line. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_120723.pdf Enclosure: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/Enclosure_DTLL_DUIOLL_120723.pdf
575	Executive Order	White House	N/A	Published 12/06/2023	President Biden Signs Executive Order on Reforming Federal Funding and Support for Tribal Nations to Better Embrace our Trust Responsibilities and Promote the Next Era of Tribal Self Determination	This Executive Order demonstrates the Biden-Harris Administration's respect for Tribal sovereignty, and commitment to ushering in the next era of Tribal self-determination by ensuring that Tribal Nations have greater autonomy over how they invest federal funding.	https://www.whitehouse.gov/briefing-room/presidential-actions/2023/12/06/executive-order-on-reforming-federal-funding-and-support-for-tribal-nations-to-better-embrace-our-trust-responsibilities-and-promote-the-next-era-of-tribal-self-determination/
576	Notice	DHS	88 FR 87445	Published 12/18/2023	Request for Information Regarding Department of Homeland Security Activities and Advancing Environmental Justice	With this Request for information (RFI), DHS is seeking public comment and feedback on how environmental justice is considered Department-wide, how it can provide opportunities for meaningful engagement in decision-making, and what to include in the next DHS Environmental Justice Strategy. The public is encouraged to provide input in response to the questions in this RFI and to share barriers and challenges, successes, suggestions, and ideas. DHS will use this information to help improve and advance the Department's environmental justice program, conduct meaningful engagement, and address environmental justice challenges that communities are facing.	Comments are requested on or before 60 days after publication of this RFI and must be received no later than 11:59 p.m. eastern time (ET) on February 16, 2024. Email comments to DHSEnvironmentalJusticeRFI@hq.dhs.gov. Include Environmental Justice RFI in the message's subject line. Email submissions should be machine-readable (i.e., in PDF or Microsoft Word format) and not copyright-protected. https://www.federalregister.gov/documents/2023/12/18/2023-27628/request-for-information-regarding-department-of-homeland-security-activities-and-advancing#ufm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
577	DTLL/DULL	IHS	N/A	Published 12/18/2023	The IHS Director writes to announce the award of the Forensic Nursing Consultation Program contract that will help boost forensic health care-related workforce activities across IHS, Tribal, and Urban Indian facilities.	the Indian Health Service (IHS) Division of Nursing Services in the Office of Clinical and Preventive Services, has awarded the Forensic Nursing Consultation Program (FNCP) contract to the Texas A&M Center of Excellence in Forensic Nursing. This five-year contract will help boost forensic health care-related workforce activities across all IHS, Tribal, and Urban Indian (I/T/U) facilities	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_121823.pdf
578	Notice	IHS	88 FR 87789	Published 12/19/2023	Reimbursement Rates for Calendar Year 2024	Notice is provided that the Director of the Indian Health Service (IHS) has approved the rates for inpatient and outpatient medical care provided by the IHS facilities for Calendar Year 2024.	Federal Register :: Reimbursement Rates for Calendar Year 2024
579	DTLL	HHS, ACL	N/A	Published 12/21/2023	Tribal Consultation for ACL's Draft Tribal Consultation Policy		The consultation will be held in person and virtually on Wednesday, January 24, 2024, from 1 PM - 5 PM ET. Capital Hilton 1001 16th Street NW Washington, DC, 20036 Please contact TEYA Support Services, LLC, to register for the Tribal Consultation at: laura.stevenson@teyacompany.com or melissa.szasz@teyacompany.com If you wish to send written comments, please submit them by February 23, 2023 to: olderindians@acl.hhs.gov. https://mcusercontent.com/f28e1520462ec3771230344f/files/11c34886-f90e-6b43-c33d-b7187835e502/ACL_DTLL_Final.pdf
580	Notice	DOL	88 FR 89467	Published 12/27/2023	Revised Final Tribal Consultation Policy	The Department of Labor (DOL) is issuing its revised final Tribal Consultation Policy. The Tribal Consultation Policy (hereinafter referred to as the "policy") establishes standards for improved consultation with federally recognized Indian Tribes to the extent that no conflict exists with applicable Federal laws or regulations. The policy applies to any Department action that affects federally recognized Indian Tribes and requires that the Department's government-to-government consultation involve appropriate Tribal and Departmental Officials. These revisions are set forth as the final policy in response to comments from the April 14, 2021, Tribal consultation meeting.	https://www.federalregister.gov/documents/2023/12/27/2023-28493/revised-final-tribal-consultation-policy This Revised Final Policy is effective October 10, 2023.
581	Notice	IHS	88 FR 89711	Published 12/28/2023	Funding Opportunity for the Tribal Management Grant Program	The Indian Health Service (IHS) is accepting applications for grants for the Tribal Management Grant (TMG) Program. The TMG Program is a competitive grant program that is capacity building and developmental in nature and has been available for federally recognized Indian Tribes and Tribal Organizations (I/TO) since shortly after enactment of the ISDEAA in 1975. The TMG Program was established to assist I/TOs to prepare for assuming all or part of existing IHS programs, functions, services, and activities (PFSAs) and further develop and improve Tribal health management capabilities. The TMG Program provides competitive grants to I/TOs to establish goals and performance measures for current health programs, assess current management capacity to determine if new components are appropriate, analyze programs to determine if a I/TO's management is practicable, and develop infrastructure systems to manage or organize PFSAs.	Application Deadline Date: March 14, 2024. Earliest Anticipated Start Date: June 1, 2024. The total funding identified for fiscal year (FY) 2024 is approximately $2,464,000. Individual award amounts for the first budget year are anticipated to be between $50,000 and $150,000. The funding available for competing and subsequent continuation awards issued under this announcement is subject to the availability of appropriations and budgetary priorities of the Agency. https://www.federalregister.gov/documents/2023/12/28/2023-28586/funding-opportunity-for-the-tribal-management-grant-program#ufm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
582	Notice	HRSA	89 FR 82	Published 1/2/2024	Lists of Designated Primary Medical Care, Mental Health, and Dental Health Professional Shortage Areas	This is the second of two planned notices informing the public of the availability of the complete lists of all geographic areas, population groups, and facilities designated as primary medical care, dental health, and mental health professional shortage areas (HPSA). This notice includes the lists of HPSAs in a designated status as of December 2, 2023.	Complete lists of HPSAs designated as of December 2, 2023, are available on the website at https://data.hrsa.gov/tools/health-workforce/shortage-areas/tfm. https://www.federalregister.gov/documents/2024/01/02/2023-28844/lists-of-designated-primary-medical-care-mental-health-and-dental-health-professional-shortage-areas#ufm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
583	Proposed Rule	IHS	89 FR 896	Published 1/8/2024	Removal of Outdated Regulations	The Indian Health Service (IHS) of the Department of Health and Human Services (HHS or "the Department") is issuing this Notice of Proposed Rulemaking (NPRM) proposing the removal of regulations appearing in the Code of Federal Regulations (CFR). These outdated regulations do not align with the current statutory text.	Comments due on or before March 8, 2024. https://www.federalregister.gov/documents/2024/01/08/2023-28948/removal-of-outdated-regulations#ufm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
584	Notice	BIA	89 FR 944	Published 1/8/2024	Indian Entities Recognized by and Eligible To Receive Services From the United States Bureau of Indian Affairs	This notice publishes the current list of 574 tribal entities recognized by and eligible for funding and services from the Bureau of Indian Affairs (BIA) by virtue of their status as Indian Tribes.	https://www.federalregister.gov/documents/2024/01/08/2024-00109/indian-entities-recognized-by-and-eligible-to-receive-services-from-the-united-states-bureau-of#ufm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
585	DTLL	HHS	N/A	Published 1/10/2024	HHS Tribal Data Policy	HHS is seeking comments and recommendations on the agency's Draft HHS Tribal and Tribal Epidemiology Center Data Access Policy.	Virtual Tribal Consultation: February 6, 2024, 3-5 PM Eastern Zoom registration: https://www.zoomgov.com/meeting/register/v.Jtsc-lurzorESMWCgSDXfNG0qzDpVXEm9o#/registration Written comments are requested by March 5, 2024. DTLL: https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/48e23919-9b7b-49bc-a991-a888fdcc49a8.pdf Draft Policy: https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/110d3948-d9c0-40bf-8f95-e7ad86bec5eb.pdf

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
586	Proposed Rule	HUD	89 FR 1746	Published 1/10/2024	Submission for Community Development Block Grant Program, Consolidated Plans, and Indian Community Development Block Grant Program Changes	HUD is proposing to revise the Community Development Block Grant (CDBG) and related Section 108 loan guarantee program regulations to make it easier for recipients to promote economic development and recovery in low- and moderate-income communities and support investments in underserved areas. This proposed rule also would revise provisions related to Consolidated Plan and citizen participation requirements for the CDBG program and institute quarterly reporting to improve performance with respect to timeliness. HUD is also proposing to make certain corresponding changes to the Indian Community Development Block Grant (ICDBG) program regulations to align the ICDBG program with the revisions being made to the CDBG program regulations.	Comments are due by March 11, 2024. https://www.federalregister.gov/documents/2024/01/10/2024-00039/submission-for-community-development-block-grant-program-consolidated-plans-and-indian-community?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
587	DTLL	White House	N/A	Published 1/11/2024	TRIBAL CONSULTATION ANNOUNCEMENT ON EXECUTIVE ORDER 14112:Reforming Federal Funding and Support for Tribal Nations To Better Embrace Our Trust Responsibilities and Promote the Next Era of Tribal Self-Determination.	During this engagement session, Biden-Harris Administration leadership and staff from the White House and Federal Departments will discuss the substance and implementation process the Administration is planning for EO 14112. Tribal leaders are invited to ask questions, provide comments, and share their perspectives on how EO 14112 can best meet the needs of their Tribal Nations.	The virtual engagement session with Biden-Harris Administration leadership will be on Monday, January 22, 2024, from 3:30pm – 5:30pm ET, to discuss Executive Order 14112 on Reforming Federal Funding and Support for Tribal Nations to Better Embrace Our Trust Responsibilities and Promote the Next Era of Tribal Self-Determination. The Executive Order (EO) demonstrates the Biden-Harris Administration's respect for Tribal https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:57ccd2f-e1fd-30ce-a427-ef63187e30fb
588	DTLL/DUILL	IHS	N/A	Published 1/16/2024	The IHS Director writes to announce the appointment of the new IHS Deputy Director for Quality Healthcare and Enterprise Risk Management.	IHS has appointed Ms. Michelle Boylan, RN, M.A, M.B.A, CPHQ, as the new Deputy Director for Quality Healthcare and Enterprise Risk Management at the Indian Health Service (IHS). Prior to joining the IHS, Ms. Boylan served as the quality management officer for the Veterans Affairs Heartland Network – VISN 15, and as the lead quality management officer at the Veterans Health Administration. In her new position at the IHS, Ms. Boylan is responsible for strengthening the agency's ongoing efforts to ensure the delivery of consistent, high-quality health care at federally operated facilities serving American Indians and Alaska Natives.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_20240116.pdf
589	DTLL	IHS	N/A	Published 1/11/2024	The IHS Director writes to notify you of an opportunity to comment on an NPRM published in the Federal Register, proposing the removal of outdated regulations on the use of IHS funds for certain abortions, and to initiate Tribal Consultation on the NPRM.	The IHS does not expect the NPRM will have any substantial direct effect or impact because it only removes outdated regulations. The IHS values opportunities for dialogue with Tribes and to inform Tribal Leaders of this opportunity to comment on the NPRM.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_011824.pdf
590	DTLL/DUILL	IHS	N/A	Published 1/18/2024	The IHS Director writes to invite Tribal and UIO leaders to join a series of four Tribal Consultations and Urban Confer session in calendar year 2024 on Health IT Modernization.	IHS is holding the meetings to ask questions and receive feedback from Tribal and UIO leaders. During the first event scheduled for February 8, Enterprise Collaboration Group (ECG), the IHS will provide an overview of the ECG, a body that gathers insights from subject matter experts who are end-users of the enterprise Electronic Health Record, and seek your feedback on system configuration and change management.	The Tribal Consultation and Urban Confer sessions are virutal from 1:30 PM to 3 PM Eastern on the following dates: February 8, 2024; May 9, 2024; August 8, 2024; and November 7, 2024. Please email your comments and recommendations on Health IT Modernization within 30 days following each session to consultation@ihs.gov or urbanconfer@ihs.gov with the subject line "Health IT Modernization." https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_011824.pdf
591	DTLL/DUILL	IHS	N/A	Published 1/22/2024	The IHS Director writes to Tribal Leaders and Urban Indian Organization Leaders to share Agency accomplishments during the first quarter of fiscal year 2024.	FY2024 First Quarter of FY 2024 Performance Report: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/Enclosure_DTLL_DUIOLL_12224.pdf	DTLL/DULL: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_12224.pdf REPORT: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/Enclosure_DTLL_DUIOLL_12224.pdf
592	DUILL	IHS	N/A	Published 1/22/2024	The IHS Director writes to Urban Indian Organization Leaders to announce the IHS Fiscal Year 2023 Budget to Support Urban Indian Organizations	The purpose of the FY 2023 Budget Report is to provide financial transparency and accountability for the Urban Indian Health Budget line. This aligns with the IHS Office of Urban Indian Health Programs (OUIHP) 2023-2027 Strategic Plan recommendations to increase transparency of funds allocated to Urban Indian Health Programs. The FY 2023 Budget Report details the funds distribution by the OUIHP and IHS Area Offices. These funds have been allocated for program administration, contract and grant awards, health information technology, and Urban Indian Health initiatives aimed at improving the quality of health care in Urban Indian communities	DULL: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DUIOLL_12224-2.pdf Enclosure: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/ENCLOSURE-DUIOLL_12224-2.pdf
593	Final Rule	SAMHSA	89 FR 7528	Published 2/2/2024	Medications for the Treatment of Opioid Use Disorder	This final rule modifies and updates certain provisions of regulations related to Opioid Treatment Program (OTP) accreditation, certification, and standards for the treatment of Opioid Use Disorder (OUD) with Medications for Opioid Use Disorder (MOUD) in OTPs. This includes making flexibilities put forth during the COVID-19 Public Health Emergency (PHE) permanent, as well as expanding access to care and evidence-based treatment for OUD. The final rule also removes all language and rules pertaining to the Drug Addiction and Treatment Act (DATA) Waiver from the regulations pursuant to the "Consolidated Appropriations Act, 2023".	The effective date of this final rule is April 2, 2024, and the compliance date is October 2, 2024. https://www.federalregister.gov/documents/2024/02/02/2024-01693/medications-for-the-treatment-of-opioid-use-disorder?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
594	Final Rule	ACL	87 FR 11566	Published 2/14/2024	Older Americans Act: Grants to State and Community Programs on Aging; Grants to Indian Tribes and Native Hawaiian Grantees for Supportive, Nutrition, and Caregiver Services; Grants for Supportive and Nutritional Services to Older Hawaiian Natives; and Allotments for Vulnerable Elder Rights Protection Activities	ACL is issuing this final rule to modernize the implementing regulations of the Older Americans Act of 1965 ("the Act" or OAA). These changes advance the policy goals of the Act as articulated by Congress, including equity in service delivery, accountability for funds expended, and clarity of administration for ACL and its grantees. This final rule ultimately facilitates improved service delivery and enhanced benefits for OAA participants, particularly those in greatest economic need and greatest social need consistent with the statute.	*Effective date:* This final rule is effective on March 15, 2024. Compliance date: October 1, 2025. *https://www.federalregister.gov/documents/2024/02/14/2024-01913/older-americans-act-grants-to-state-and-community-programs-on-aging-grants-to-indian-tribes-and?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov*
595	Proposed Rule	Administration for Native Americans (ANA)	89 FR 11798	Published 2/15/2024	Notice for Public Comment on Administration for Native Americans' Program Policies and Procedures	Pursuant to section 814 of the Native American Programs Act of 1974 (NAPA), as amended, the Administration for Native Americans (ANA) is required to provide members of the public an opportunity to comment on proposed changes in interpretive rules and general statements of policy and to give notice of the proposed changes no less than 30 days before such changes become effective. In accordance with notice requirements of NAPA, ANA herein describes proposed interpretive rules and general statements of policy that relate to ANA's Notices of Funding Opportunities (NOFOs) in fiscal year (FY) 2024. Changes to FY NOFOs will be based on the previously published programs: Environmental Regulatory Enhancement (ERE), HHS-2021–ACF–ANA–NB–1907; Native American Language Preservation and Maintenance-Esther Martinez Immersion (EMI), HHS-2021–ACF–ANA–NB–1958; Native American Language Preservation and Maintenance (P&M), HHS-2021–ACF–ANA–NL–1924; Social and Economic Development Strategies (SEDS), HHS-2021–ACF–ANA–NA–1906; Social and Economic Development Strategies-Alaska (SEDS–AK), HHS-2021–ACF–ANA–NK–1902.	Comments are due by March 18, 2024. If ANA does not receive any significant comments within the 30-day comment period, ANA will proceed with the proposed changes in the respective published NOFOs. The NOFOs will serve as the final notice of these proposed changes. https://www.federalregister.gov/documents/2024/02/15/2024-03160/notice-for-public-comment-on-administration-for-native-americans-program-policies-and-procedures?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
596	Request for Information	National Institutes of Health (NIH)	89 FR 11843	Published 2/15/2024	Request for Informaiton to Inform Development of the FY2026-2030 NIH Strategic Plan for HIV and HIV-Related Research	Through this Request for Information (RFI), the Office of AIDS Research (OAR) in the Division of Program Coordination, Planning, and Strategic Initiatives (DPCPSI), National Institutes of Health (NIH), invites feedback from researchers, health care professionals, advocates and health advocacy organizations, scientific or professional organizations, federal/state/local government agencies, community, and other interested constituents on the development of the fiscal year (FY) 2026-2030 NIH Strategic Plan for HIV and HIV-Related Research (the Plan). The Plan (https://www.oar.nih.gov/sites/default/files/NIH_StrategicPlan_FY2021-2025.pdf) guides the NIH investment, building on scientific progress and opportunities for advancing HIV research toward an end to the pandemic.	Send comments on or before April 1, 2024 to ensure consideration. https://www.federalregister.gov/documents/2024/02/15/2024-03122/request-for-information-rfi-to-inform-development-of-the-fy-2026-2030-nih-strategic-plan-for-hiv-and?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
597	Final Rule	OCR SAMHSA	87 FR 12472	Published 2/16/2024	Confidentiality of Substance Use Disorder (SUD) Patient Records	The United States Department of Health and Human Services (HHS or "Department") is issuing this final rule to modify its regulations to implement section 3221 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act. The Department is issuing this final rule after careful consideration of all public comments received in response to the notice of proposed rulemaking (NPRM) for the Confidentiality of Substance Use Disorder (SUD) Patient Records. This final rule also makes certain other modifications to increase alignment with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule to improve workability and decrease burden on programs, covered entities, and business associates.	Federal Register :: Confidentiality of Substance Use Disorder (SUD) Patient Records
598	DTLL	HHS	N/A	Published 2/21/2024	26 th U.S. Department of Health and Human Services (HHS) Annual Tribal Budget Consultation (ATBC)	Annual Tribal Budget Consultation (ATBC) will take place in-person on April 9-10, 2024, at the Hubert H. Humphrey Building at 200 Independence Avenue, SW, Washington, DC.	fdfae707-4915-4240-a15e-abc8f3e204f5a.pdf (hhs.gov)
599	Proposed Rule	ACF	88 FR 13652	Published 2/23/2024	Adoption and Foster Care Analysis and Reporting System	ACF proposes to amend the Adoption and Foster Care Analysis and Reporting System (AFCARS) regulations that require title IV-E agencies to collect and report data to ACF on children who enter out-of-home care, their providers, and children who have a title IV-E adoption or guardianship assistance agreement to collect additional data related to Indian children.	In order to be considered, we must receive written comments on or before April 23, 2024. https://www.federalregister.gov/documents/2024/02/23/2024-03373/adoption-and-foster-care-analysis-and-reporting-system

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
26	Notice	Agency Information Collection Activities; Submission to OMB for Review and Approval; Public Comment Request; Ryan White HIV/AIDS Program Parts A and B Unobligated Balances and Rebate Addendum Tables, OMB No. 0906-0047-Revision	88 FR 21197	Publised 4/10/2023	Notice	In compliance with of the Paperwork Reduction Act of 1995, HRSA submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA's ICR only after the 30-day comment period for this notice has closed.	Comments on this ICR should be received no later than May 10, 2023 https://www.federalregister.gov/documents/2023/04/10/2023-07410/agency-information-collection-activities-submission-to-omb-for-review-and-approval-public-comment?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
27	Notice	Solicitation of Nominations for Appointment to the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment	88 FR 23424	Published 4/17/2023	Notice	The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), is seeking nominations for membership on the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHAC). CHAC consists of 18 experts in fields associated with public health, epidemiology, laboratory practice, immunology, infectious diseases, substance use disorder, behavioral science, health education, healthcare delivery, state health programs, clinical care, preventive health, medical education, health services and clinical research, health equity, and healthcare financing, who are selected by the Secretary, HHS.	Nominations for membership on CHAC must be received no later than October 1, 2023. https://www.federalregister.gov/documents/2023/04/17/2023-07997/solicitation-of-nominations-for-appointment-to-the-cdchrsa-advisory-committee-on-hiv-viral-hepatitis?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
28	Notice	Notice of Charter Renewal for the President's Emergency Plan for AIDS Relief (PEPFAR) Scientific Advisory Board	88 FR 24460	Published 4/20/2023	Notice	The Department of State has renewed The President's Emergency Plan for AIDS Relief (PEPFAR) Scientific Advisory Board, hereinafter referred to as "the Board." The Board is established under the general authority of the Secretary of State and the Department of State ("the Department") as set forth in title 22 of the United States Code, in particular section 2656 of that title, and consistent with the Federal Advisory Committee Act, as amended (5 U.S.C. chapter 10). The Board serves the U.S. Global AIDS Coordinator solely in an advisory capacity concerning scientific, implementation, and policy issues related to the global response to HIV/AIDS.	https://www.federalregister.gov/documents/2023/04/20/2023-08317/notice-of-charter-renewal-for-the-presidents-emergency-plan-for-aids-relief-pepfar-scientific?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
29	Notice	Agency Information Collection Activities; Proposed Collection; Public Comment Request; Information Collection Request Title: Ryan White HIV/AIDS Program: Mpox Vaccine Distribution Request Forms, OMB No. 0915-xxxx-New	88 FR 29909	Published 5/9/2023	Notice	In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.	https://www.federalregister.gov/documents/2023/05/09/2023-09823/agency-information-collection-activities-proposed-collection-public-comment-request-information?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
30	Notice	Recommendations for Evaluating Donor Eligibility Using Individual Risk-Based Questions To Reduce the Risk of Human Immunodeficiency Virus Transmission by Blood and Blood Products; Guidance for Industry; Availability	88 FR 30765	Published 5/12/2023	Notice	The Food and Drug Administration (FDA or Agency) is announcing the availability of a final guidance entitled "Recommendations for Evaluating Donor Eligibility Using Individual Risk-Based Questions to Reduce the Risk of Human Immunodeficiency Virus Transmission by Blood and Blood Products; Guidance for Industry." The guidance document provides blood establishments that collect blood or blood components, including Source Plasma, with FDA's revised donor deferral recommendations for individuals with increased risk for transmitting human immunodeficiency virus (HIV) infection. FDA is also recommending that these blood establishments make corresponding revisions to donor educational materials, donor history questionnaires and accompanying materials, along with revisions to donor requalification and product management procedures. The guidance announced in this notice finalizes the draft guidance of the same title issued January 2023. This guidance also supersedes the guidance entitled "Revised Recommendations for Reducing the Risk of Human Immunodeficiency Virus Transmission by Blood and Blood Products; Guidance for Industry" dated April 2020 and updated August 2020.	https://www.federalregister.gov/documents/2023/05/12/2023-10252/recommendations-for-evaluating-donor-eligibility-using-individual-risk-based-questions-to-reduce-the?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
31	Notice	Agency Information Collection Activities; Submission to OMB for Review and Approval; Public Comment Request; Enhancing HIV Care of Women, Infants, Children and Youth Building Capacity Through Communities of Practice	88 FR 30767	Publised 5/12/2023	Notice	In compliance with the Paperwork Reduction Act of 1995, HRSA submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA's ICR only after the 30-day comment period for this notice has closed.	Comments on this ICR should be received no later than June 12, 2023. https://www.federalregister.gov/documents/2023/05/12/2023-10192/agency-information-collection-activities-submission-to-omb-for-review-and-approval-public-comment?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
32	Notice	Regional AIDS Education and Training Centers Program Supplemental Award	88 FR 30992	Published 5/15/2023	Notice	HRSA will provide supplemental funding to UMass, a current Regional AETC Program award recipient, for a 1-year period of performance and 1-year budget period to support a program designed to train internal and family medicine residents to specialize in HIV treatment and care management. This training program is critically needed, as it will help increase the number of primary HIV care providers available to diagnose, treat, and medically manage people with HIV and address urgent needs stemming from the HIV care workforce shortage.	https://www.federalregister.gov/documents/2023/05/15/2023-10302/regional-aids-education-and-training-centers-program-supplemental-award?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
33	Notice	Agency Information Collection Activities; Submission to OMB for Review and Approval; Public Comment Request; Ryan White HIV/AIDS Program: Expenditures Forms, OMB No. 0915-xxxx-New	88 FR 34867	Published 5/31/2023	Notice	In compliance with the Paperwork Reduction Act of 1995, HRSA submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA's ICR only after the 30-day comment period for this notice has closed.	Comments on this ICR should be received no later than June 30, 2023 https://www.federalregister.gov/documents/2023/05/31/2023-11565/agency-information-collection-activities-submission-to-omb-for-review-and-approval-public-comment?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
34	Notice	Agency Information Collection Activities; Submission to OMB for Review and Approval; Public Comment Request; Ryan White HIV/AIDS Program Part F Dental Services Report, OMB No. 0915-0151-Extension	88 FR 35888	Published 6/01/2023	Notice	In compliance with of the Paperwork Reduction Act of 1995, HRSA submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA's ICR only after the 30-day comment period for this notice has closed.	Comments on this ICR should be received no later than July 3, 2023 https://www.federalregister.gov/documents/2023/06/01/2023-11588/agency-information-collection-activities-submission-to-omb-for-review-and-approval-public-comment?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
35	Notice	Opportunity To Collaborate in the Evaluation of Serologic and Nucleic Acid Tests for Detecting HIV and Nucleic Acid Tests for Quantifying HIV	88 FR 38055	Published 6/12/2023	Notice	The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), announces an opportunity for industry and the public to collaborate on a project to evaluate nucleic acid and serologic tests. CDC is interested in evaluating serologic and nucleic acid tests that can be used to aid in the diagnosis of HIV–1 infection, including serologic tests that can secondarily differentiate recent infection, and nucleic acid tests for the quantitation or semi-quantitation of HIV RNA. Tests of interest include those that use whole blood, serum, plasma, or dried blood spots. Performance will be evaluated relative to Food and Drug Administration (FDA)-approved qualitative and quantitative nucleic acid tests as well as serologic immunoassays. More than one collaborator may be selected.	Letters of interest must be received on or before Friday, September 15, 2023. Formal proposals must be received on or before Friday, November 10, 2023. https://www.federalregister.gov/documents/2023/06/12/2023-12435/opportunity-to-collaborate-in-the-evaluation-of-serologic-and-nucleic-acid-tests-for-detecting-hiv?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: HIV GRANT (July 1, 2023 - September 30, 2023)

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Notice of Meeting	HHS	88 FR 57963	Published 8/24/2023	Meeting of the Presidential Advisory Council on HIV/AIDS	As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will convene the 78th full council meeting on Wednesday, September 20, 2023. The meeting will convene in Charleston, West Virginia and it will also utilize virtual technologies. The meeting will be open to the public. Due to limited space, pre-registration is encouraged for members of the public who wish to attend the meeting in-person. Please email your name to PACHA@hhs.gov by close of business Wednesday, September 13, 2023 to pre-reigster. There will be a public comment session during the meeting; pre-registration is required to provide public comment. To pre-register to provide public comment, please send an email to PACHA@hhs.gov and include your name, organization, and title by close of business Wednesday, September 13, 2023. If you decide you would like to provide public comment but do not pre-register, you may submit your written statement by emailing PACHA@hhs.gov by close of business September 27, 2023. The meeting agenda will be posted on the PACHA page on HIV.gov at https://www.hiv.gov/federal-response/pacha/about-pacha prior to the meeting.	The meeting will be held on Wednesday, September 20, 2023 from approximately 9 a.m.–6 p.m. (ET). https://www.federalregister.gov/documents/2023/08/24/2023-18267/meeting-of-the-presidential-advisory-council-on-hivaids?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: December 2020

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Corrected Rule	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System	85 FR 78748/ CMS HHS	Effective 12/01/2020	Corrected	Technical and typo errors are corrected from this September 18, 2020 final rule.	
2	Request for Comment	All Data Use Agreements with CMS	85 FR 78855/ CMS	Due 2/5/2021 published 12/7/2020	Pending	Opportunity for the public to comment on CMS' intention to collect information from the public. All Data Use Agreements are required to complete a questionnaire as a part of the data request packet. Comments will close February 5, 2021.	For further info: William Parhan (410) 786-4669
3	DULL	Listening Session on the Modernization of IHS HIT	N/A	Published 12/10/2021 Listening Sessions 12/17/2020 & 1/14/2021	Listening Sessions	In an effort to support the modernization of technology, two listening sessions will be conducted. Comprehensive project deliverables can be viewed at https://www.hhs.gov/cto/initiatives/public health-innovation/Indian-health-service-health-it-modernization/index.html.	The options outlined in the proposed project scope evaluate in detail four broad options for modernization of IHS health IT: Stabilize the Resource and Patient Management System (RPMS); Renew RPMS; Selective Replacement; and Full Replacement December 17, 2020, 2:00-3:30 p.m., Eastern Time https://kauffmaninc.zoom.us/j/99639526346?pwd=cEF4Q3lrY3dIaVNpZjZCQVgxM3FRZz09 Meeting ID: 996 3952 6346 Passcode: 461608 January 14, 2021, 2:00-3:30 p.m., Eastern Time https://kauffmaninc.zoom.us/j/93981311999?pwd=VTNOUmVEcnY5REJIZ2tYS24rT2NUQT09 Meeting ID: 939 8131 1999 Passcode: 026367
4	Payment Advisory	Medicare Program; Alternative Payment Model (APM) Incentive Payment Advisory for Clinicians—	85 FR 78770	Respond by 12/13/2020	Published	Allow clinicians to detail information of their billing information by December 13, 2020 in order to receive Alternate Payment Model Incentive payment.	List of Qualified Medicare Participants that owe current billing information.
5	DULL	Urban Confer on allocation of $1 billion in COVID-19 resources included in the Coronavirus Response and Relief Supplemental Appropriations Act of 2021	N/A	Published 12/29/2020	Urban Confer	Funds for IHS are appropriated in the Centers for Disease Control and Prevention Agency-Wide Activities and Program Support account, and the Public Health and Social Services Emergency Fund. Both appropriations include bill language directing the funds to be transferred to the IHS. Both appropriations also include specific language directing that any funds transferred through Indian Self-Determination and Education Assistance Act funding agreements are provided on a one-time, non-recurring basis, and that they may only be used for the purposes identified in the statute.	The bill provides appropriations for costs related to vaccination & testing related activities. Urban Confer will be January 4, 2021from 2-3 pm EST his.cosocloud.com/r42c87qo6jnd/ (888) 831-8976 Code: 6142767

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS

NCUIH REGULATIONS TRACKER: January 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Rule	Good Guidance Practices proposed rule	85 FR 78770/ Secretary HHS	Effective 1/6/2021	Final Rule	The rule details good guidance practices that agencies can use to ensure the public obtains accurate notice of new guidance and that guidance documents do not specify obligations to parties that have already been specified in other statutes.	One component of Department's regulatory reform initiative. See link https://www.hhs.gov/about/budget/fy2020/performance/regulatory-reform/index.html
2	Notice	Information Collection Activities	85 FR 78853/ CMS HHS	Due 1/6/2021	Notice	On three information collection requests. The first details the "mandatory insurer reporting requirement of Section 111 of the Medicare, Medicaid and State Children's Health Insurance Plans (SCHIP) Act of 2007." Specifically, this notice is regarding Medicare Secondary Payer (MSP) reporting.	For further info: William Parhan (410) 786-4669
3	Rule	National Vaccine Injury Compensations Program: Revisions to the Vaccine Injury Table; Delay of Effective Date	86 FR 10835/ pp.10835-10837	Published 1/21/2021	Final Rule; effective date delay	HHS delayed for 60 days the effective date on the final rule "National Vaccine Injury Compensation Program: Revision to the Vaccine Injury Table" after taking comments in a public hearing. The final notice effective date is delayed due to the "Regulatory Freeze Pending Review." The final rule will now be in effect on April 23, 2021.	There are rare reactions to COVID-19 vaccines or other injuries (e.g. shoulder injury) that might occur at the time the vaccine is administered. Final rule on this $4 billion fund compensation program is complete, while delayed due to regulatory freeze by the Biden Administration. https://www.federalregister.gov/documents/2021/02/23/2021-03747/national-vaccine-injury-compensation-program-revisions-to-the-vaccine-injury-table-delay-of
4	Comments (IRC)	Federal Office of Rural Health Policy	85 FR 76585/ HRSA	Due 1/29/2021	Notice	HRSA published a notice on the performance measures drawn for the principle topics of interest to the Federal Office of Rural Health Policy, such as access to care, population demographics, staffing consortium network, project specific domains and sustainability.	https://www.federalregister.gov/documents/2020/11/30/2020-26254/agency-information-collection-activities-proposed-collection-public-comment-request-information

NCUIH REGULATIONS TRACKER: February 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Directive to FEMA	Memorandum on Maximizing Assistance from FEMA	Presidential Action - TBD	Issued 2/2/2021	To Publish in Federal Register	Presidential Directive states FEMA shall provide 100% federal cost share for all work eligible for assistance under Public Assistance Category B (emergency assistance to states/tribes) and extends use of the National Guard during Covid-19 pandemic.	https://www.whitehouse.gov/briefing-room/presidential-actions/2021/02/02/memorandum-on-maximizing-assistance-from-the-federal-emergency-management-agency/
2	DULL	Urban Confer to complement a joint Tribal Consultation with the Veterans Health Administration	N/A	Published 2/5/2021	Virtual Listening Session and Comment Submission	IHS extended the comment submission deadline to March 2, 2021. The virtual listening session will be held February 17, 2021 from 3-4 pm EDT. Input will be gathered on the drafted revised memorandum of understanding between IHS and VHA.	The listening session can be viewed at https://veteransaffairs.webex.com/webappng/sites/veteransaffairs/meeting/download/932143eb85c14931804d8fad903b4d39?siteurl=veteransaffairs&MTID=m5e2a043803566c70591fcffdb38454a2 or by phone at 1-404-397-1596 Code: 199-799-8876 Written Comments: VA-IHS MOU urbanconfer@ihs.gov Ms. Elizabeth Fowler Acting Director Indian Health Service 5600 Fishers Lane 08E86 Rockville, MD 20857
3	Request for Comment	Wireline Competition Bureau (WCB) Seeks Comment on Emergency Broadband Connectivity Fund Assistance	Docket/RM 20-445	Due 2/16/2021	Pending	On Jan.4, 2021, the Federal Communications Commission's WCB issued request for comments on how best to administer a new $3.2 billion Emergency Broadband Benefit Program.	The Consolidated Appropriations Act of 2021 directed the FCC to create the program, which would reimburse participating companies for providing discounted broadband service and connected devices to eligible households during the COVID-19 pandemic. NCUIH replied with comments to extend similar benefits in Tribal Lifeline program to Urban Indians. For status update contact Eric Wu at (202) 418-1543, email: Eric.Wu@fcc.gov
4	Amendment	Sixth Amendment to Declaration under PREP Act against COVID-19	86 FR 9516/ pp. 9516-9520	Published 2/16/2021	Notice	To add additional categories of Qualified Persons authorized to prescribe, dispense, and administer covered countermeasures for COVID-19 (including Vax).	https://www.federalregister.gov/d/2021-03106
5	Notice	Agency Information Collection Activities: Proposed Collection; Comment Request	86 FR 10084/ pp.10084-10085	Published 2/18/2021	Comments Due	CMS and HHS released a joint notice on information collection request titled "Electronic Submission of Medicare Graduate Medical Education Affiliation Agreements." This is a reinstatement without change of a currently approved collection, to be used for residents to form a Medicare Graduate Medical Education affiliated group who are in similar urban or rural areas. In turn, this group will provide flexibility to hospitals in structuring rotations under the full time equivalent resident cap when they share residents.	Comments Due 4/19/2021 This is a Workforce issue dealing with GME agreements to share rotations in urban/rural hospitals. Impact on urban Indian health is minimal or unknown at this time; Not usually tracked by UIO leaders. https://www.federalregister.gov/documents/2021/02/18/2021-03257/agency-information-collection-activities-proposed-collection-comment-request

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6	Rule	Fraud And Abuse; Removal of Safe Harbor Protection for Rebates Involving Prescription Pharmaceuticals and Creation of New Safe Harbor Protection for Certain Point-of-Sale Reductions in Price on Prescription Pharmaceuticals and Certain Pharmacy Benefit Manager Service Fees; Delayed Effective Date	86 FR 10181/ pp.10181	Published 2/19/2021	Final Rule	Background/Summary: After a court-ordered delay of effective date on a final rule by HHS. This final rule detailed regulatory safe harbors to the Federal anti-kickback statute. On January 12, 2021, a lawsuit was filled to challenge this final rule and on January 30, 2021 the court ordered a postponement of the effective date of the provisions. The effective date of the amendments to paragraph 42 CFR 10001.952 (h)(5) to the final rule are now effective on January 1, 2023.	This is a final notice with no comment period. WATCH for further developments. https://www.federalregister.gov/documents/2021/02/19/2021-03167/fraud-and-abuse-removal-of-safe-harbor-protection-for-rebates-involving-prescription-pharmaceuticals Point-of-Sale Reductions in Price on Prescription Pharmaceuticals and Certain Pharmacy Benefit Manager Service Fees; Delayed Effective Date
7	Notice	Agency Information Collection Request; 60-Day Public Comment Request	86 FR 10587/ pp. 10587-10588	Published 2/22/2021	Notice	HHS published notice on an information request revision to the Appellant Climate Survey. This survey is for Medicare beneficiaries, providers, suppliers, and others who participated in a hearing before the Administrative Law Judge from the Office of Medicare Appeals.	Comments due by 4/23/2012 This is a recurring request for information on satisfaction survey of remote interest to single Medicare beneficiaries who appeal their case. Not a large enough impact for UIOs, given the small size of potential group. Moving forward, the Federal Relations team opted not to track Requests for Information Collection. Federal Register :: Agency Information Collection Request; 60-Day Public Comment Request
8	Notice	Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)	86 FR 11780/ pp. 11780-11781	Published 2/26/2021	Notice	CMS published an information collection request to support the implementation of the Consumer Assessment of Healthcare Providers (CAHPS) for Merit-Based Incentive Payment Systems (MIPS) survey. In order to address stakeholders and the increased use of telehealth services due to the PHE for COVID-19, a question is being added to integrate one telehealth item to assess the patient-reported usage of telehealth services (for example, phone or video visit).	Comments Close on 4/9/2021 This is a recurring request for information on satisfaction survey of remote interest to single Medicare beneficiaries who appeal their case. Not a large enough impact for UIOs, given the small size of potential group. Moving forward, the Federal Relations team opted not to track Requests for Information Collection. Federal Register :: Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

NCUIH REGULATIONS TRACKER: March 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	DULL	Urban Confer on allocation of $6 billion under consideration with the American Rescue Plan Act	N/A	Published 3/8/21 Virtual Urban Confer 3/15/21	Notice of Urban Confer	ARPA has allocated $6 billion, currently under consideration by Congress. Urban Confer will be held on March 15th, 2021 to seek rapid input. Approved funs will be available to support eligible expenses dating back to January 31, 2020.	Urban Leaders are urged to join in the Tribal Confer process and provide input. March 15th, 2021 1-800-857-6561 code:1709562 ihs.cosocloud.com/rp79n2pbnxzg/ code:ihs123 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DUIOLL_03082021.pdf
2	Proposed Rule	Modifications to the HIPAA Privacy Rule to Support, and Remove Barriers to, Coordinated Care and Individual Engagement	86 FR 13683/ pp. 13683-13684	Published 3/10/2021	Proposed Rule; extension of comment period	HHS published modifications to a proposed rule and an extension of a comment period. This proposed rule details the specific standard for the privacy of individually identifiable health information under the Health Insurance Portability and Accountability Act (HIPAA). Comments on this proposed rule should include topics centered around an individual's engagement in their health care, barriers in their coordinated care, and the regulatory burdens these standards may impose on the healthcare industry.	Unsure of substantial impact on urban Indian health; in discussions with NIHB partner. Comments close 5/6/2021. Federal Register :: Modifications to the HIPAA Privacy Rule to Support, and Remove Barriers to, Coordinated Care and Individual Engagement
3	Notice	National Vaccine Injury Compensation Program: Revisions to the Vaccine Injury Table	86 FR 14567/ pp. 14567-14570	Published 3/17/2021	Notice of proposed withdrawal	On 3/17/21, HHS backtracked on previous notice making changes to the "Injury Table" for COVID-19 vaccines. The final rule titled "National Vaccine Injury Compensation Program: Revisions to the Vaccine Injury Table" is proposed to be withdrawn. No change until another round of public comment and consultation by HHS is concluded. If the HHS chooses to proceed with removing SIRVA (shoulder injury), vasovagal syncope, and the new vaccines category from the Table, it will do so with sufficient time to carefully review the science and the law regarding these items.	NCUIH should support withdrawal/rescission, in light of efforts to increase vaccination efforts. However, surprise reversal by HHS did not give sufficient time to re-engage. Recommendation: WATCH; if any changes to the Injury Table are proposed again, submit Comment. Comments close on 4/16/2021 Federal Register :: National Vaccine Injury Compensation Program: Revisions to the Vaccine Injury Table

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4	MEMORANDUM	MEMORANDUM FOR THE HEADS OF EXECUTIVE DEPARTMENTS AND AGENCIES	WH M-21-20	Published 3/19/2021	Implementation of the American Rescue Plan Act and Stewardship of the Taxpayer Rescources	The Administration is committed to effective implementation and stewardship of ARP funds. To that end, the Administration will foster accountability and public trust by delivering effective and equitable relief, while implementing sound financial management of the resources funding that relief. This includes working with the Pandemic Response Accountability Committee (PRAC) and agency Inspector Generals to strengthen payment integrity to minimize the risk of waste, fraud, and abuse; and improving the overall award and administration of financial assistance programs with an increased focus on human-centered program and service design to achieve more equitable results. The Administration will also work with executive departments and agencies (agencies) to identify ARP programs that—given the nature of the program's goals and design and the program's potential impacts on equitable outcomes—require additional attention (beyond the overarching financial tracking and reporting requirements herein) to program design, tracking, and reporting to support agency, Administration, and public understanding of measures such as trust, equity, and experience that are critical to ensuring the achievement of intended program outcomes and positive impact for the American public.	In carrying out this Memorandum, agencies will use existing financial transparency and accountability mechanisms established by OMB Memorandum M-20-21 Implementation Guidance for Supplemental Funding Provided in Response to the Coronavirus Disease 2019 (COVID-19) (Apr. 10, 2020). As such, agencies must report monthly, including award outlays, to USAspending.gov for all funding in the ARP and follow existing Government-wide reporting requirements on USAspending.gov as established by the Federal Funding Accountability and Transparency Act (FFATA), as amended by the Digital Accountability & Transparency Act (DATA Act). Agencies are required to ensure that all data required by M-20-21 are reported to USAspending.gov. Additionally, agencies are also reminded of the direction in M-20-21 to incorporate reporting of organizational performance on COVID-19 related relief funding into their established mission performance plans and reports, and review progress regularly as part of their performance, evidence-building and enterprise risk management routines
5	DULL	Urban Confer on FY 2021 Appropriations (IHS)	IHS Newsroom/ 2021 Letters/March 31, 2021	Delivered 3/31/2021 Learning Session 4/7/2021 Urban Confer Sessions 4/20/2021 and 4/21/2021	Learning Sessions	Urban Confer on the use of (1) $5 million from the Fiscal Year (FY) 2021 appropriations that the IHS has allocated to address Alzheimer's disease; and (2) the use of $5 million in funding for Ending the HIV Epidemic. IHS Office of Clinical and Preventive Services will host a virtual learning session and Urban Confer sessions.	Virtual Learning Session: April 7th, 2021 from 1-2 p.m. EDT (877-801-1365 code 6488559 or his.cosocloud.com/ihsdccs/ and using code ihs123 Urban Confer Session: April 20, 2021 (Alzheimer's Disease) & April 21, 2021 (Ending the HIV Epidemic) from 1-2:30 p.m. EDT (877-801-1365 code 6488559 or his.cosocloud.com/ihsdccs/ and using code ihs123

NCUIH REGULATIONS TRACKER: April 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Notice	Advisory Committee on Immunization Practices (ACIP)	86 FR 17606/ pp 17606	Published 4/05/2021	Notice of meeting and request for comment	CDC and HHS announce a meeting of the Advisory Committee on Immunization Practices (ACIP). This is a public comment session and will be held on June 23-24 from 9am to 5:30 pm, EDT. Comments close on 6/24/21 and can be submitted through the Federal eRulemaking Portal at www.regulations.gov or by mail at CDC 1600 Clifton Rd NE, MS H24-8, Atlanta Georgia 30329-4027 ATTN: June ACIP Meeting	Considerations will be given to vaccine cycle and schedules for Vaccines for Children (VFC). Interested parties are invited to submit views, recommendations, and supporting data. CDC will review all submissions and carefully consider suggestions. Federal Register :: Advisory Committee on Immunization Practices (ACIP)
2	DULL	Urban Confer on FY 2021 Appropriations (IHS)	IHS Newsroom/ 2021 Letters/March 31, 2021	Delivered 3/3/2021 Learning Session 4/7/2021 Urban Confer Sessions 4/20/2021 and 4/21/2021	Learning Sessions	Urban Confer on the use of (1) $5 million from the Fiscal Year (FY) 2021 appropriations that the IHS has allocated to address Alzheimer's disease; and (2) the use of $5 million in funding for Ending the HIV Epidemic. IHS Office of Clinical and Preventive Services will host a virtual learning session and Urban Confer sessions.	Virtual Learning Session: April 7th, 2021 from 1-2 p.m. EDT (877-801-1365 code 6488559 or his.cosocloud.com/ihsdccs/ and using code ihs123 Urban Confer Session: April 20, 2021 (Alzheimer's Disease) & April 21, 2021 (Ending the HIV Epidemic) from 1-2:30 p.m. EDT (877-801-1365 code 6488559 or ihs.cosocloud.com/ihsdccs/ code ihs123
3	DULL	Modernization Initiative: Urban Confer for IHS HIT and retirement of RPMS	IHS Newsroom/ 2021 Letters/ April 1, 2023	RFI Published 3/17/2021 Response Deadline: 4/19/2021	RFI Solicitation	In December 2020 & January 2021, IHS held two listening sessions to gather input on appropriate, realistic, and sustainable options for the HIT modernization. Written comments ended on January 24, 2021. Sessions represented more than 300 of the 574 federally recognized Tribes and more than 25% of UIOs. The option selected was option 4: full replacement of the current RPMS solution. Currently, an RFI is open for vendors to respond.	Recording of the listening sessions can be reviewed at www.ihs.gov/hit/project-updates/ RFI for vendors is open through April 19th, 2021 https://beta.sam.gov/opp/f6ba899fe98b482b8d9348357f0953a4/view?keywords=%22indian%20health%20service%22&sort=-modifiedDate&index=&is_active=true&page=1 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DTLL_DUIOLL_04012021.pdf
4	Notice of Information	Reissuance of PAR-1-324, "Testing Interventions for Health-Enhancing Physical Activity" as a Notice of Special Interest	NOT-OD-21-086	Published 4/9/2021	N/A	This Notice is to inform the research community that the Office of Disease Prevention and participating NIH Institutes and Offices have reissued the Funding Opportunity Announcement (FOA), PAR-18-324 "Testing Interventions for Health Enhancing Physical Activity (R01 - Clinical Trial Optional)" as NOT-OD-21-087, "Notice of Special Interest (NOSI): Developing and Testing Multilevel Physical Activity Interventions to Improve Health and Well-Being." The published NOSI includes new and revised research priorities. This Notice is being published to inform prospective applicants of this action	Related announcements: PAR-18-324 - Testing Interventions for Health-Enhancing Physical Activity (R01 Clinical Trial Optional) NOT-OD-21-087 - Notice of Special Interest (NOSI): Developing and Testing Multilevel Physical Activity Interventions to Improve Health and Well-Being NOT-AA-21-015 - Notice of NIAAA Participation in NOT-OD-21-086
5	Proposed Rule	Medicare Program; FY 2022 Inpatient Psychiatric Facilities Prospective Payment System and Quality Reporting Updates for Fiscal Year Beginning October 1, 2021	86 FR 19480/ pp 19480-19529	Published 4/13/2021	Comment Solicitation- Due by June 7, 2021	This proposed rule would update the prospective payment rates, the outlier threshold, and the wage index for Medicare inpatient hospital services provided by Inpatient Psychiatric Facilities (IPF), which include psychiatric hospitals and excluded psychiatric units of an Inpatient Prospective Payment System (IPPS) hospital or critical access hospital. This rule also proposes to update and clarify the IPF teaching policy with respect to IPF hospital closures and displaced residents and proposes a technical change to the 2016-based IPF market basket price proxies. In addition, this proposed rule would update quality measures and reporting requirements under the Inpatient Psychiatric Facilities Quality Reporting (IPFQR) Program. These changes would be effective for IPF discharges occurring during the Fiscal Year (FY) beginning October 1, 2021 through September 30, 2022 (FY 2022).	In commenting, please refer to file code CMS-1750-P. Comments, including mass comment submissions, must be submitted in one of the following three ways (please choose only one of the ways listed): 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: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1750-P, P.O. Box 8010, Baltimore, MD 21244-8016. 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 following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1750-P, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850. https://www.federalregister.gov/documents/2021/04/13/2021-07433/medicare-program-fy-2022-inpatient-psychiatric-facilities-prospective-payment-system-and-quality?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov

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6	DULL	Allocation Decisions for Approximately $4.3 billion: Appropriated to the IHS in the American Rescue Plan Act	2021, Pub. L. No 117-2, Div. XI (ARPA)	Published 4/16/2021	Allocation of Funding	Approximately $4.3 billion in new resources appropriated to the IHS in the American Rescue Plan Act, 2021, Pub. L. No 117-2, Div. XI (ARPA). These funds are one-time, non-recurring, and can only be used for the purposes specified in the statute. They may also cover costs that were incurred to prevent, prepare for, and respond to COVID-19 during the period beginning January 31, 2020, through March 11, 2021. Tribal Health Programs will receive these one-time, non-recurring funds through unilateral modifications and/or amendments to their existing ISDEAA agreements. As noted above, these funds must be used for the purposes for which they are appropriated, and must be used consistent with the conditions established by law and the modifications/amendments. Urban Indian Organizations will receive these one-time, non-recurring funds through existing IHCIA contracts. These funds must be used for the purposes for which they are appropriated, consistent with a modified scope of work, budget, and bilateral modification for each IHCIA contract.	The IHS will provide $80 million to support UIOs. Urban Indian Organizations that bill for reimbursements will receive a one-time, equal payment amount, and an additional one-time payment based on their UIO's total number of Urban Indian users. The IHS will provide $20 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users. The IHS will provide $84 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users. The IHS will provide $3 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users. The IHS will provide $24 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users. The IHS will provide $40 million to support UIOs. Each Urban Indian Organization will receive a one-time, equal payment amount, and an additional one-time payment based on each Urban Indian Organization's total number of Urban Indian users.
7	Notice of Information	Flexibilities Guidance for Applicants and Recipients of Federal Financial Assistance Affected by COVID-19	M-21-20	Published 4/19/2021	No approval or action needed by CDC	On March 19, 2021, the Office of Management and Budget (OMB) issued Memorandum M-21-20pdf iconexternal icon, which addresses administrative relief for applicants and recipients of COVID-19 related federal financial assistance and those applicants and recipients affected by the COVID-19 pandemic. The memorandum identifies administrative flexibilities to help manage administrative, financial management, and audit requirements under 2 CFR Part 200. This guidance will reference the parallel sections found in the Department of Health and Human Services (HHS) grant regulations at 45 CFR Part 75, which are applicable to CDC recipients CDC has released flexabilities from M-21-20 and apply not only to COVID-19 related assistance but also those not related to COVID-19.	Flexibilities with: **SAM Registration**-CDC has relaxed the requirement for active System for Award Management (SAM) registration at time of application in order to expeditiously issue funding **Waiver for Notice of Funding Opportunities (NOFOs) Publication**-CDC will make every effort to provide applicants with adequate time to submit quality applications, should additional funding become available for COVID-19 competitive NOFOs. However, applicants should be aware that CDC may publish emergency and competitive NOFOs for less than 30 days if CDC needs to expedite the process-Applicants may search for applicable funding opportunities at www.Grants.gov **Pre-award costs**- If within the scope of the award, CDC may allow necessary pre-award costs that are incurred (i) from March 15, 2021, through the Public Health Emergency Period and (ii) prior to the effective date of a federal award. **No-cost extensions on expiring awards**- CDC may extend awards that were active as of March 31, 2021, and scheduled to expire prior or up to December 31, 2021, automatically at no cost for a period of up to 12 months. **Abbreviated non-competitive continuation requests**- CDC may accept a brief statement from recipients for non-competitive continuation requests scheduled to come in from April 1, 2021, to December 31, 2021, for projects with planned future support. CDC programs will post any specific instructions in their continuation guidance. **Waivers from prior approval requirements**- CDC may waive prior approval requirements as necessary to effectively address the response. All costs charged to federal awards must be consistent with federal cost policy guidelines and the terms of the award, except where specified in Memorandum M-21-20. **Exemption of certain procurement requirements**- CDC waives the procurement requirements contained in 45 CFR § 75.328(b) regarding geographical preferences and 45 CFR § 75.330 regarding contracting with small and minority businesses, women's business enterprises, and labor surplus area firms. This exemption is limited to these specific procurement requirements **Extension of financial and other reporting-** CDC may allow recipients to delay submission of financial or other reports up to 3 months beyond the normal due date **Extension of single audit submission**- CDC recipients and subrecipients that have not yet filed their single audits with the Federal Audit Clearinghouse as of the date of the issuance of OMB Memorandum M-21-20pdf iconexternal icon that have fiscal year-ends through June 30, 2021, may delay the completion and submission of the Single Audit reporting package to 6 months beyond the normal due date. **Flexibilities with application deadlines-** When a delay occurs because the applicant or recipient is directly impacted by COVID-19, CDC will consider extending the application due date beyond the date specified in the Notice of Funding Opportunity (NOFO) on a case-by-case basis **Extension of closeout-** On a case-by-case basis, CDC may allow the recipient to delay submission of any pending financial, performance, or other reports required by the terms of the award for the closeout of expired projects, provided that proper notice about the reporting delay is given by the recipient to the agency **Management Requirement related to Physical Inventories-**On a case-by-case basis, CDC may provide recipients up to a 12-month extension for the biennial physical inventory of equipment purchased under a federal award. https://www.cdc.gov/grants/public-health-emergencies/covid-19/flexibilities-available-applicants-recipients/index.html
8	Notice	Advisory Committee on Immunization Practices (ACIP)	86 FR 20497/ PP20497-20498	Published 4/20/2021 Comments Due 4/23/2021	Notice of public meeting and request for comment	In accordance with the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC), announces the following meeting of the Advisory Committee on Immunization Practices (ACIP). This meeting is open to the public. The meeting will be webcast live via the World Wide Web.	The meeting will be held on April 23, 2021, from 11:00 a.m. to 5:00 p.m., EDT (dates and times subject to change, see the ACIP website for updates; http://www.cdc.gov/vaccines/acip/index.html). The public may submit comments from April 20, 2021 through April 23, 2021. For more information on ACIP please visit the ACIP website: http://www.cdc.gov/vaccines/acip/index.html. You may submit comments, identified by Docket No. CDC-2021-0044 by any of the following methods: Federal eRulemaking Portal: https://www.regulations.gov. Follow the instructions for submitting comments. Mail: Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H24-8, Atlanta, GA 30329-4027, Attn: April 23, 2021 ACIP Meeting. https://www.federalregister.gov/documents/2021/04/20/2021-08275/advisory-committee-on-immunization-practices-acip?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

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9	Tribal Feedback	TTAC GWE Subcommittee Solicits Tribal Feedback on Draft Report	N/A	Input Deadline: 4/23/2021	Treasury Tribal Advisory Committee Request for Input	TTAC Subcommittee on General Welfare Exclusion (GWE Subcommittee) is soliciting input from Tribal governments on its draft report prior to making final recommendations to the TTAC on guidance under Tribal General Welfare Exclusion Act (TGWEA) and the Internal Revenue Code Section 139E.	Input should be submitted, by April 23, 2021 at 5 pm, to the GWE Subcommittee technical advisor. Ellie Beckett, ellie@nafoa.org Nicholas Courtney, ncourtney@ncai.org https://files.constantcontact.com/c2394f27001/65fbb937-df7a-48d1-a09b-9acd70521ad6.pdf
10	Tribal Consultation	The Department of the Interior (DOI) Consultation on Climate Crisis	N/A	Consultation: 4/27/2021 and 4/29/2021	Tribal Consultation and Request for Input	The Department of the Interior (DOI) is conducting two tribal consultations on Tuesday, April 27, 2021 and Thursday, April 29, 2021 in reference to Executive Order 14008, Tackling the Climate Crisis at Home and Abroad. The Executive Order directs the Secretary of the Interior to "engage with Tribal authorities regarding the development and management of renewable and conventional energy resources on Tribal lands." DOI is requesting input on: 1. How can the Department help Tribal Nations access capital for development of renewable energy resources? 2. How can the Department improve processes and policies that affect tribal development of renewable energy resources, including facilitating greater communication and support among Federal agencies? 3. What steps can Federal agencies take to ensure that Tribal Nations have greater control over the development of energy projects on tribal lands? 4. What additional barriers do Tribal governments face when attempting to develop resources within reservation lands?	Consultation Details: Tuesday, April 27, 2021 1:00 - 3:00 p.m. EDT Call in Number: 800-857-5055 Passcode: 6951606 Thursday, April 29, 2021 1:00 - 3:00 p.m. EDT Call in Number: 800-857-5055 Passcode 6951606 Written comments are recommended and will be accepted at consultation@bia.gov until 11:59 p.m. EDT on April 16, 2021. NCAI Contact: Darren Modzelewski, Policy Counsel, dmodzelewski@ncai.org
11	Notice	Agency Information Collection Activities: Submission for OMB Review; Comment Request	86 FR 21321/ PP 21321-21322	Published 4/22/2021 Comments Due 5/24/2021	Comments on the collection of information must be received by the OMB desk officer by May 24, 2021	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	*Type of Information Collection Request:* Reinstatement without change of a previously approved collection; *Title of Information Collection:* Generic Clearance for Evaluation of Stakeholder Training—Health Insurance Marketplace and Market Stabilization Programs; *Use:* CMS is strongly committed to providing appropriate education and technical outreach to States, issuers, self-insured group health plans and third-party administrators (TPA) participating in the Marketplace and/or market stabilization programs mandated by the ACA. CMS continues to engage with stakeholders in the Marketplace to obtain input through Satisfaction Surveys following Stakeholder Training events. The survey results will help to determine stakeholders' level of satisfaction with trainings, identify any issues with training and technical assistance delivery, clarify stakeholders' needs and preferences, and define best practices for training and technical assistance. https://www.federalregister.gov/documents/2021/04/22/2021-08377/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
12	Comments	Federal Tort Claims Act Coverage for Urban Indian Organizations- Q&A	N/A	Published 4/23/2021	N/A	"The information in this document is for informational purposes only and is not intended to provide legal advice to any Urban Indian Organization (UIO) or individual. Whether a health care provider is covered under the Federal Tort Claims Act (FTCA) is a complex matter. We urge you to consult with your own legal advisor before taking any action. It is important to keep in mind as you read the frequently asked questions (FAQs) below that the Department of Health and Human Services (HHS) does not determine the scope of coverage under the FTCA. Whether the FTCA applies in any particular case is decided on an individual case-by-case basis by the United States Department of Justice (DOJ) and subsequently by the Federal Courts. The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled National Learning Community for HIV CBO Leadership Evaluation. The purpose of this data collection is to evaluate the National Learning Community for HIV CBO Leadership which is a component of cooperative agreement CDC-RFA-PS19-1904: Capacity Building Assistance (CBA) for High Impact HIV Prevention Program Integration."	UIO FTCA QA 4-23-2021 FINAL (003)

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
13	Notice	Proposed Data Collection Submitted for Public Comment and Recommendations	86 FR 22052/ pp 22052-22053	Published 4/26/2021 Comments Due 6/25/2021	CDC must receive written comment on or before June 25, 2021	The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled "Drug Overdose Surveillance and Epidemiology"	Highlighted the urgent need to rapidly establish and enhance timely surveillance of suspected drug, opioid, heroin, and stimulant overdoses. These data are critical to inform timely local, state, and regional response, especially to acute and/or widespread multi-state outbreaks https://www.federalregister.gov/documents/2021/04/26/2021-08576/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list Submit all comments through the Federal eRulemaking portal (regulations.gov) or Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-D74, Atlanta, Georgia 30329.
14	DULL	The Acting Director writes to Urban Indian Organization Leaders to initiate Urban Confer to seek input and recommendations to improve the Indian Health Service Policy on Conferring with Urban Indian Organizations. [PDF - 366 KB]	N/A	Published 4/27/2024	Initiate Urban Confer to seek your input and recommendations to improve the Indian Health Service (IHS) Policy on Conferring with Urban Indian Organizations (UIOs).	In 2010, as part of the Patient Protection and Affordable Care Act, Congress reauthorized and amended the Indian Health Care Improvement Act (IHCIA). During the amendment process, Congress added a new requirement that the IHS "confer," to the maximum extent practicable, with Urban Indian Organizations (UIOs) in carrying out the IHCIA. Later in 2014, in the Indian Health Manual (IHM) the Indian Health Service (IHS) established the Policy on "Conferring with Urban Indian Organizations,". The IHS Urban Confer Policy provides guidance when seeking input from UIO Leaders as it pertains to Urban Indian health. Such processes ensure that Urban Indian health care needs are understood and identified at the local, state, and national levels, when implementing and carrying out the IHCIA. Currently, IHS is the only federal agency with an Urban Confer Policy that engages in community feedback. The Urban Confer Policy and process is distinct from Tribal Consultation and fulfills a critical need in furtherance of meeting the federal trust obligation. Urban Indian health spans across 22 states and 41 UIOs; where services are provided in a network of 77 facilities. The lack of a current vehicle for dialogue between other federal agencies and UIOs has dire consequences, which imposes barriers on UIOs response to general health and public health emergencies, such as COVID-19.	Wednesday, June 9, 2021, for a virtual Urban Confer session. Urban Indian Organization Leaders are encouraged to provide comments and recommendations on how to improve the Urban Confer Policy and process. URBAN CONFER SESSION IHS URBAN CONFER POLICY AND PROCESS DATE: Wednesday, June 9, 2021 TIME: 2:00 p.m. – 3:30 p.m., ET ZOOM INFORMATION: (833) 568-8864 https://www.zoomgov.com/j/1619982193 Zoom Meeting ID: 161 998 2193

NCUIH REGULATIONS TRACKER: May 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Notice	Medicare and Medicaid Programs; Quarterly Listing of Program Issuances-January Through March 2021	86 FR 23373/ pp 23370-23384	Published 5/3/2021	This quarterly notice provides only the specific updates that have occurred in the 3-month period along with a hyperlink to the full listing that is available on the CMS website or the appropriate data registries that are used.	Quarterly notice lists CMS manual instructions, substantive and interpretive regulations, and other **Federal Register** notices that were published from January through March 2021, relating to the Medicare and Medicaid programs and other programs administered by CMS.	This quarterly notice lists CMS manual instructions, substantive and interpretive regulations, and other Federal Register notices that were published from January through March 2021, relating to the Medicare and Medicaid programs and other programs administered by CMS. https://www.federalregister.gov/documents/2021/05/03/2021-09081/medicare-and-medicaid-programs-quarterly-listing-of-program-issuances-january-through-march-2021
2	Notice	Medicare Program; Public Meeting on June 24, 2021 Regarding New and Reconsidered Clinical Diagnostic Laboratory Test Codes for the Clinical Laboratory Fee Schedule for Calendar Year 2022	86 FR 23386/ pp 23386-23359	Published 5/3/2021	CLFS Annual Public Meeting Date: The virtual meeting is scheduled for Thursday, June 24, 2021 from 9 a.m. to 5 p.m., E.D.T.	This notice announces a public meeting to receive comments and recommendations (including data on which recommendations are based) on the appropriate basis for establishing payment amounts for new or substantially revised Healthcare Common Procedure Coding System codes being considered for Medicare payment under the Clinical Laboratory Fee Schedule (CLFS) for calendar year (CY) 2022. This meeting also provides a forum for those who submitted certain reconsideration requests regarding final determinations made last year on new test codes and for the public to provide comment on the requests.	CLFS Annual Public Meeting Date: The virtual meeting is scheduled for Thursday, June 24, 2021 from 9 a.m. to 5 p.m., E.D.T. Deadline for Submission of Presentations and Written Comments: All presenters for the CLFS Annual Public Meeting must register and submit their presentations electronically to our CLFS dedicated email box, CLFS_Annual_Public_Meeting@cms.hhs.gov, by June 3, 2021 at 5 p.m., E.D.T. All written comments (non-presenter comments) must also be submitted electronically to our CLFS dedicated email box, CLFS_Annual_Public_Meeting@cms.hhs.gov, by June 3, 2021, at 5 p.m., E.D.T. Any presentations or written comments received after that date and time will not be included in the meeting and will not be reviewed. Deadline for Submitting Requests for Special Accommodations: Requests for special accommodations must be received no later than June 3, 2021 at 5 p.m. E.D.T. Publication of Proposed Determinations: We intend to publish our proposed determinations for new test codes and our preliminary determinations for reconsidered codes (as described later in section II "Format" of this notice) for CY 2022 by early September 2021. Deadline for Submission of Written Comments Related to Proposed Determinations: Comments in response to the preliminary determinations will be due by early October 2021.
3	Information Bullet	Extension of the Spousal Impoverishment Rules for Married Applicants and Recipients of Home and Community-Based Services	SMDL #15-001 ("Affordable Care Act's Amendments to the Spousal Impoverishment Statute," available at https://www.medicaid.gov/federal-policy-guidance/downloads/smd050715.pdf)	Dispersed 5/4/2021	"Extension of the Spousal Impoverishment Rules for Married Applicants and Recipients of Home and Community-Based Services." Through the Consolidated Appropriations Act of 202. Applicable through September 30, 2023.	The Consolidated Appropriations Act, 2021 provides a temporary extension of the ACA's spousal impoverishment-related provision, which initially was set to expire on December 31, 2018, but has been extended several times through subsequent legislation.	As CMS has noted with regard to previous extensions, states should continue to follow the guidance CMS published in SMDL #15-001 ("Affordable Care Act's Amendments to the Spousal Impoverishment Statute," available at https://www.medicaid.gov/federal-policy-guidance/downloads/smd050715.pdf) relating to the application of the ACA's spousal impoverishment-related provision so long as section 2404 of the ACA is in effect. https://www.medicaid.gov/federal-policy-guidance/downloads/cib050421.pdf

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
4	Notice	Privacy Act of 1974; Matching Program	86 FR 23728/ pp 23728-23729	Published 5/4/2021	Notice of a new matching program.	In accordance with the Privacy Act of 1974, as amended, the Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS) is providing notice of the re-establishment of a computer matching program between CMS and the Office of Personnel Management (OPM), "Verification of Eligibility of Minimum Essential Coverage Under the Patient Protection and Affordable Care Act through an Office of Personnel Management Health Benefit Plan."	The deadline for comments on this notice is June 3, 2021. The re-established matching program will commence not sooner than 30 days after publication of this notice, provided no comments are received that warrant a change to this notice. The matching program will be conducted for an initial term of 18 months (from approximately June 8, 2021 to December 7, 2022) and within three months of expiration may be renewed for one additional year if the parties make no change to the matching program and certify that the program has been conducted in compliance with the matching agreement. Interested parties may submit comments: 1. Electronically. You may send your comments electronically to http://www.regulations.gov. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments. 2. By Regular Mail. You may mail written comments to the following address: Centers for Medicare & Medicaid Services, Division of Security, Privacy Policy & Governance, Information Security & Privacy Group, Office of Information Technology, Location: N1-14-56, 7500 Security Blvd., Baltimore, MD 21244-1850. https://www.federalregister.gov/documents/2021/05/04/2021-09292/privacy-act-of-1974-matching-program
5	Notice	Eleventh Meeting of the National Clinical Care Commission	86 FR 23731	Published 5/4/2021	The two-day meeting will take place May 19 and June 1, 2021 from 1 p.m. to approximately 6 p.m. Eastern Time (ET).	The National Clinical Care Commission (the Commission) will conduct its eleventh meeting virtually on May 19 and June 1, 2021. The Commission is charged to evaluate and make recommendations to the U.S. Department of Health and Human Services (HHS) Secretary and Congress regarding improvements to the coordination and leveraging of federal programs related to diabetes and its complications.	The eleventh meeting will be held virtually, and each subcommittee will present a summary of stakeholder calls and all draft recommendations. This will be followed by a discussion of the recommendations. The final meeting agenda will be available prior to the meeting at https://health.gov/our-work/health-care-quality/national-clinical-care-commission/meetings. Public Participation at Meeting: The Commission invites public comment on issues related to the Commission's charge. There will be an opportunity for limited oral comments (each no more than 3 minutes in length) at this virtual meeting. Virtual attendees who plan to provide oral comments at the Commission meeting during a designated time must register prior to the meeting at https://kauffmaninc.adobeconnect.com/ncccmeeting11/event/event_info.html . Written comments are welcome throughout the entire development process of the Commission's work and may be emailed to OHQ@hhs.gov. Written comments should not exceed three pages in length. Individuals who need special assistance, such as sign language interpretation or other reasonable accommodations, should indicate the special accommodation when registering online or by notifying Jennifer Gillissen at jennifer.gillissen@kauffmaninc.com by May 10, 2021. https://www.federalregister.gov/documents/2021/05/04/2021-09277/eleventh-meeting-of-the-national-clinical-care-commission
6	Final Rule	Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2022 and Pharmacy Benefit Manager Standards	86 FR 24140/ pp 24140-24295	Published 5/5/2021 These regulations are effective on July 6, 2021, with the exception of the amendments to §§ 155.320(c) and 158.221(b) which are effective May 5, 2021.	Revises the regulation requiring the reporting of certain prescription drug information by qualified health plans or their pharmacy benefit managers.	This final rule sets forth payment parameters and provisions related to the risk adjustment program and cost-sharing parameters. It includes changes related to special enrollment periods; direct enrollment entities; the administrative appeals processes with respect to health insurance issuers and non-federal governmental group health plans; the medical loss ratio program; income verification by Exchanges; and other related topics. It also revises the regulation requiring the reporting of certain prescription drug information by qualified health plans or their pharmacy benefit managers.	On January 28, 2021, President Biden issued Executive Order 14009, "Strengthening Medicaid and the Affordable Care Act," [1] directing HHS, and the heads of all other executive departments and agencies with authorities and responsibilities related to the ACA, to review all existing regulations, orders, guidance documents, policies, and any other similar agency actions to determine whether such agency actions are inconsistent with this Administration's policy to protect and strengthen the ACA and to make high-quality health care accessible and affordable for every American. As part of this review, HHS examined policies and requirements under the proposed 2022 Payment Notice and the January 19, 2021 final 2022 Payment Notice to analyze whether the policies under these rulemakings might undermine the Health Benefits Exchanges or the health insurance markets, and whether they may present unnecessary barriers to individuals and families attempting to access health coverage. HHS also considered whether to suspend, revise, or rescind any such actions through appropriate administrative action. https://www.federalregister.gov/documents/2021/05/05/2021-09102/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2022-and

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
7	Notice and Comment Request	120 Day Proposed Information Collection: Tribal Investment in Commercial Electronic Health Records	86 FR 26923/ pp 26923-26924	Published 5/8/2021	Compliance with the Paperwork Reduction Act of 1995	In compliance with the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) takes this opportunity to provide information on a new Office of Management and Budget (OMB) information collection, Control Number 0917-XXXX, titled, "Tribal Investment in Commercial Electronic Health Records." This proposed information collection project has been granted an emergent review by OMB. The purpose of this notice is to provide the public a notice of the information sent directly to OMB.	The IHS has requested emergency review of this information collection by OMB, as authorized by section 3507(j) of the Paperwork Reduction Act of 1995. The Agency gathers comments concerning: (a) The necessity of this information collection for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) the accuracy of the agency's estimate of the burden (hours and cost) of the collection of information, including the validity of the methodology and assumptions used; (c) ways we could enhance the quality, utility, and clarity of the information to be collected; and (d) ways we could minimize the burden of the collection of the information on the respondents. *Direct Your Comments to OMB:* Send your comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS https://www.federalregister.gov/documents/2021/05/18/2021-10409/120-day-proposed-information-collection-tribal-investment-in-commercial-electronic-health-records?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
8	DULL	Developing the Strategy, ONDCP seeks to consult with a broad range of partners and stakeholders to develop a comprehensive and well-coordinated strategy to guide the Federal Government's activities in addressing the Nation's drug issue	agency's authorization statute (21 U.S.C. § 1701 et seq)	Published 5/11/2021 Feedback due July 9, 2021	the Office of National Drug Control Policy (ONDCP) develops and submits to Congress the Administration's National Drug Control Strategy (Strategy) on a biennial basis, as required under the agency's authorization statute (21 U.S.C. § 1701 et seq). The 2022 Strategy will build off the drug policy priorities that the Biden-Harris Administration issued on April 1.	ONDCP is requesting any relevant input or advice you have about the Strategy, including the data collection plan under 21 U.S.C. § 1705(c)(1)(M), the Southwest Border Counternarcotic Strategy, the Northern Border Counternarcotic Strategy, and the Caribbean Border Counternarcotic Strategy.	Input will be vital in developing a Strategy that will help to reduce drug use and its consequences in Indian Country. Please email your comments directly to Strategy@ondcp.eop.gov. Feedback is requested, no later than Friday, July 9, 2021. https://mcusercontent.com/f620288bb41dd81f9c715ef4d/files/dbee69f6-c738-e6b9-a8fd-4895cc142192/ONDCP_Tribal_Letter_Request_for_Comment.pdf
9	Notice	Medicaid and Children's Health Insurance Program (CHIP) Generic Information Collection Activities: Proposed Collection; Comment Request	86 FR 26042/ pp26042-26043	Published 5/12/2021	Notice seeks public comment on one or more of our collection of information requests. Comments must be received by May 26, 2021.	On May 28, 2010, the Office of Management and Budget (OMB) issued Paperwork Reduction Act (PRA) guidance [1] related to the "generic" clearance process. Generally, this is an expedited process by which agencies may obtain OMB's approval of collection of information requests that are "usually voluntary, low-burden, and uncontroversial collections," do not raise any substantive or policy issues, and do not require policy or methodological review. The process requires the submission of an overarching plan that defines the scope of the individual collections that would fall under its umbrella. On October 23, 2011, OMB approved our initial request to use the generic clearance process under control number 0938-1148 (CMS-10398). It was last approved on April 26, 2021, via the standard PRA process which included the publication of 60- and 30-day Federal Register notices.	To be assured consideration, comments and recommendations must be submitted in any one of the following ways: 1. Electronically. You may send your comments electronically to http://www.regulations.gov. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments. 2. By regular mail. You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: CMS-10398 (#37)/OMB control number: 0938-1148, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may access CMS' website at https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html. https://www.federalregister.gov/documents/2021/05/12/2021-10050/medicaid-and-childrens-health-insurance-program-chip-generic-information-collection-activities?utm_campaign=subscription%20mailing%20list&utm_source=federalregister.gov&utm_medium=email

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
10	Notice	CDC Draft 2021 Update to the HIV Preexposure Prophylaxis Clinical Practice Guideline and Supplement; Webinars	86 FR 26229/ pp26223	Published 5/13/2021	Webinars for open comments. CDC will consider comments given prior to drafting the finalized HIV Preexposure Prophylaxis Clinical Practice Guideline: 2021 Update	The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces webinars that will be held on two dates to receive comments on the draft 2021 update to the HIV Preexposure Prophylaxis (PrEP) Clinical Practice Guideline and Providers Supplement. The webinars are an opportunity for all interested parties to ask questions and provide feedback, but are specifically directed toward clinicians, such as medical doctors, nurse practitioners, physician's assistants, and pharmacists.	The webinars will be held on the following two dates: May 24, 2021 from 1 p.m. to 2:30 p.m. EDT, and May 25, 2021 from 1 p.m. to 2:30 p.m. EDT. Registration is not required. The webinars can be accessed at https://cdc.zoomgov.com/j/1602789792?pwd=NVhQbWpDMXcza1UrbE94TWJnbEJCZz09. Meeting ID: 160 278 9792, Passcode: 7i@v%w29 or by phone at 1-551-285-1373. Please refer to the draft guideline documents that will be posted for ten days beginning on May 17, 2021 at https://www.cdc.gov/hiv/pdf/risk/prep/cdc-hiv-prep-guidelines-2021.pdf and https://www.cdc.gov/hiv/pdf/risk/prep-cdc-hiv-prep-provider-supplement-2021.pdf. A recording of each of the two webinars and accompanying transcripts will be available on the website listed in the paragraph above by June 15, 2021. In addition, CDC's responses to questions from the webinars will also be available June 30, 2021 at https://www.cdc.gov/hiv/program resources/planning.html. Comments will be received only during the webinars. There will be no written comment period. https://www.federalregister.gov/documents/2021/05/13/2021-10094/cdc-draft-2021-update-to-the-hiv-preexposure-prophylaxis-clinical-practice-guideline-and-supplement?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
11	Communications	Implementation of American Rescue Plan Act of 2021 Section 9817: Additional Support for Medicaid Home and Community-Based Services during the COVID-19 Emergency	SMD# 21-003	Published 5/13/2021	Demonstrate compliance with section 9817 of the ARP, beginning April 1	Section 9817 of the ARP provides qualifying states with a temporary 10 percentage point increase to the federal medical assistance percentage (FMAP) for certain Medicaid expenditures for home and community-based services (HCBS). States must use the federal funds attributable to the increased FMAP to supplement, not supplant, existing state funds expended for Medicaid HCBS in effect as of April 1, 2021, and states must use state funds equivalent to the amount of federal funds attributable to the increased FMAP to implement or supplement the implementation of one or more activities to enhance, expand, or strengthen HCBS under the Medicaid program	CMS issued a 26-pg long Medicaid letter on HCBS, it has yet to issue a State Health Official (SHO) letter to provide guidance on the FMAP temporary increase for UIOs. The purpose of this letter is to provide guidance to states on the implementation of section 9817 of the ARP, as well as to describe opportunities for states to strengthen the HCBS system in response to the COVID-19 Public Health Emergency (PHE), increase access to HCBS for Medicaid beneficiaries, adequately protect the HCBS workforce, safeguard financial stability for HCBS providers, and accelerate long-term services and supports (LTSS) reform under section 9817 of the ARP. This increased federal funding can help states increase community living options for people with disabilities, in accordance with Title II of the Americans with Disabilities Act, 42 U.S.C. §§ 12131–12134, as interpreted by the Supreme Court in Olmstead v. L.C., 527 U.S. 581 (1999), which requires public entities to administer services to individuals with disabilities in the most integrated setting appropriate to their needs. In addition, this letter updates Medicaid retainer payment policy for HCBS providers during the COVID-19 PHE. https://www.medicaid.gov/federal-policy-guidance/downloads/smd21003.pdf
12	DULL	The Acting Director writes to Tribal Leaders and Urban Indian Organization Leaders to request your participation in an Electronic Health Record data call.	N/A	Published 5/14/2021	Collection of de-identified information reguarding invested cost for commercial HIT solutions.	Last December and in January of this year, the Indian Health Service held a series of Listening Sessions related to modernizing our Health Information Technology (HIT) infrastructure through full replacement of the Resource and Patient Management System (RPMS) Electronic Health Record (EHR). During and after those sessions, a number of you commented on investments that you have already made in commercial HIT solutions, and inquired about the potential for reimbursement of those costs. The Consolidated Appropriations Act, 2021, included language requiring the IHS "to report back within 120 days of enactment of this Act with a list of Tribes that currently maintain their own non-RPMS EHR systems along with cost estimates required for those Tribes to implement, maintain, and make any necessary upgrades to these systems."	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DTLL_DUIOLL_05142021.pdf To help the IHS respond to this Congressional mandate and improve our understanding of Tribal and Urban Indian Organization investment in HIT, It is asked that those complete the enclosed EHR Data Call Template by June 4, 2021, and return it to ihsmodernization@mitre.org. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/Enclosure-DTLL-DUIOLL-05142021.pdf

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
13	Webinar	What's the Price of Privacy 2020 Census Disclosure Avoidance System Impacts on Tribal Nation Census Data	NCAI Policy Research Center	Released 5/18/2021 Webinar 5/19/2021	The webinar will provide a brief overview of the new privacy system planned by the U.S. Census Bureau for the 2020 Census data products. The webinar will also cover the latest demonstrated impacts of these privacy protections on Tribal Nations.	This webinar aims to provide background and education for tribal leaders, tribal staff, community members, and researchers in preparation for the U.S. Census Bureau Tribal Consultation Webinar scheduled for Wednesday, May 19, 2021.	Register for the webinar here: https://bit.ly/33NfTRT View resource materials to prepare for the U.S. Census Bureau tribal consultation webinar: https://bit.ly/2N1ICND Federal register notice for U.S. Census Bureau Tribal Consultation Webinar: https://bit.ly/3fnUcNp NCAI Contact: Gwynne Evans-Lomayesva, Researcher, NCAI Policy Research Center, gevans-lomayesva@ncai.org
14	Notice of Tribal Consultation	Notice of Tribal Consultation on the Department of Veterans Affairs' State Home Programs	86 FR 27145/ pp 27145-27146	Published 5/19/2021 Comments Close 7/3/2021	VA is required to consult with Indian tribes to determine if any legislative or administrative action is necessary to modify these state home programs to function efficiently in support of state Veterans homes operated by Indian tribes pursuant to the amendments made by section 3004 of the Act.	The Department of Veterans Affairs (VA) is seeking Tribal consultation to assist VA in implementing the requirements of section 3004 of the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020 (the Act), The Act amended the statutory authorities of two VA programs (the State Veterans Home Construction Grant Program and the State Home Per Diem Program) so that Indian tribes were included in definitions for "state" and "state home." VA is required to consult with Indian tribes to determine if any legislative or administrative action is necessary to modify these state home programs to function efficiently in support of state Veterans homes operated by Indian tribes pursuant to the amendments made by section 3004 of the Act. VA seeks input on the legislative, regulatory and administrative modifications that may be necessary to support State Veterans Homes operated by American Indian and Alaska Native tribes in response to these amendments.	Written comments may be submitted by any of the following methods: Federal Rulemaking Portal at http://www.regulations.gov. Follow the online instructions for submitting comments. Email to tribalgovernmentconsultation@va.gov. By mail to U.S. Department of Veterans Affairs, Office of Geriatrics and Extended Care (12GEC), 810 Vermont Avenue NW, Washington, DC 20420. Comments should indicate that the submission is in response to "Notice of Tribal Consultation State Veterans Homes." https://www.federalregister.gov/documents/2021/05/19/2021-10556/notice-of-tribal-consultation-on-the-department-of-veterans-affairs-state-home-programs?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
15	Final Notice	Notice of Purchased/Referred Care Delivery Area Redesignation for the Northwestern Band of the Shoshone Nation	86 FR 27451/ pp 27451-27458	Published 5/20/2021	The IHS currently provides services under regulations in effect on September 15, 1987, and republished in the Code of Federal Regulations (CFR) at 42 CFR part 136, subparts A-C. Subpart C defines a Contract Health Service Delivery Area (CHSDA), now referred to as a Purchased/Referred Care delivery area (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 area.	Notice is hereby given that the Indian Health Service has decided to expand the geographic boundaries of the Purchased/Referred Care (PRC) Delivery Area for the Northwestern Band of the Shoshone Nation (NWBSN) in the State of Utah to include the Utah counties of Davis, Salt Lake, and Weber. The final PRC delivery area for the NWBSN is Box Elder County, Davis, Salt Lake, and Weber counties in the State of Utah. The sole purpose of this expansion is to authorize NWBSN to cover additional Tribal members and beneficiaries to receive PRC services.	This notice can be found at https://www.federalregister.gov. Written requests for information should be delivered to: CAPT John Rael, Director, Office of Resource Access and Partnerships, Indian Health Service, 5600 Fishers Lane, Mail Stop 10E85C, Rockville, MD 20857, (301) 443-0609 (This is not a toll-free number). As applicable to the Tribes, these regulations 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 (U.S.) for inclusion in or exclusion from a PRCDA. The regulations require that certain criteria must be considered before any redesignation is made.
16	Proposed Rule	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Proposed Policy Changes and Fiscal Year 2022 Rates; Quality Programs and Medicare Promoting Interoperability Program Requirements for Eligible Hospitals and Critical Access Hospitals; Proposed Changes to Medicaid Provider Enrollment; and Proposed Changes to the Medicare Shared Savings Program	86 FR 25070/ pp 25070-25790	Published 5/10/2021 Comments Close 6/28/2021	Proposing to revise the Medicare hospital inpatient prospective payment systems (IPPS) for operating and capital-related costs of acute care hospitals to implement changes arising from our continuing experience with these systems for FY 2022 and to implement certain recent legislation.	Establish new requirements and revise existing requirements for eligible hospitals and critical access hospitals (CAHs) participating in the Medicare Promoting Interoperability Program. We are also providing estimated and newly established performance standards for the Hospital Value-Based Purchasing (VBP) Program, and proposing updated policies for the Hospital Readmissions Reduction Program, Hospital Inpatient Quality Reporting (IQR) Program, Hospital VBP Program, Hospital-Acquired Condition (HAC) Reduction Program, and the PPS-Exempt Cancer Hospital Reporting (PCHQR) Program, and the Long-Term Care Hospital Quality Reporting Program (LTCH QRP). Additionally, due to the impact of the COVID-19 PHE on measure data used in our value-based purchasing programs, we are proposing to suppress several measures in the Hospital VBP, HAC Reduction, and Hospital Readmissions Reduction Programs.	Comments must be submitted in one of the following three ways (please choose only one of the ways listed): 1. Electronically. You may (and we encourage you to) submit electronic comments on this regulation to http://www.regulations.gov. Follow the instructions under the "submit a comment" tab. 2. By regular mail. You may mail written comments to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1752-P, P.O. Box 8013, Baltimore, MD 21244-1850. 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 via express or overnight mail to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1752-P, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850. https://www.federalregister.gov/documents/2021/05/10/2021-08888/medicare-program-hospital-inpatient-prospective-payment-systems-for-acute-care-hospitals-and-the

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17	Final Notice	Notice of Purchased/Referred Care Delivery Area Redesignation for the Northwestern Band of the Shoshone Nation	86 FR 27451/ pp 27451-27458	Published 5/20/2021	The IHS currently provides services under regulations in effect on September 15, 1987, and republished in the Code of Federal Regulations (CFR) at 42 CFR part 136, subparts A-C. Subpart C defines a Contract Health Service Delivery Area (CHSDA), now referred to as a Purchased/Referred Care delivery area (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 area.	Notice is hereby given that the Indian Health Service has decided to expand the geographic boundaries of the Purchased/Referred Care (PRC) Delivery Area for the Northwestern Band of the Shoshone Nation (NWBSN) in the State of Utah to include the Utah counties of Davis, Salt Lake, and Weber. The final PRC delivery area for the NWBSN is Box Elder County, Davis, Salt Lake, and Weber counties in the State of Utah. The sole purpose of this expansion is to authorize NWBSN to cover additional Tribal members and beneficiaries to receive PRC services.	This notice can be found at https://www.federalregister.gov. Written requests for information should be delivered to: CAPT John Rael, Director, Office of Resource Access and Partnerships, Indian Health Service, 5600 Fishers Lane, Mail Stop 10E85C, Rockville, MD 20857, (301) 443-0609 (This is not a toll-free number). As applicable to the Tribes, these regulations 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 (U.S.) for inclusion in or exclusion from a PRCDA. The regulations require that certain criteria must be considered before any redesignation is made.
18	Notice	Agency Information Collection Activities; Submission for OMB Review; Public Comment Request; State Performance Report [OMB #0985-New]	86 FR 27625/ pp 27625-27626	Published 5/21/2021 Comments Close 6/21/2021	The purpose of this data collection is to fulfill requirements of the Older Americans Act and the Government Performance and Results Modernization Act (GPRA Modernization Act) of 2010 and related program performance activities.	The Administration for Community Living is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under section 506(c)(2)(A) of the Paperwork Reduction Act of 1995. This 30-Day notice collects comments on the information collection requirements related to the State Performance Report. This notice solicits comments on the new information collection requirements relating to the State Performance Report.	Submit written comments and recommendations for the proposed information collection within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find the information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function. By mail to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW, Rm. 10235, Washington, DC 20503, Attn: OMB Desk Officer for ACL.
19	Notice	Proposed Data Collection Submitted for Public Comment and Recommendations	86 FR 28354/ pp 28354-28355	Published 5/26/2021 Comments Close 7/26/2021	Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires Federal agencies to provide a 60-day notice in the Federal Register concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection	The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Health Message Testing System (HMTS). The Health Message Testing System (HMTS), a generic information collection, enables programs across CDC to collect the information they require regarding testing of messages in a timely manner.	You may submit comments, identified by Docket No. CDC-2012-0052 by any of the following methods: Federal eRulemaking Portal: Regulations.gov. Follow the instructions for submitting comments. Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-D74, Atlanta, Georgia 30329. Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to Regulations.gov. Please note: Submit all comments through the Federal eRulemaking portal (regulations.gov) or by U.S. mail to the address listed above. https://www.federalregister.gov/documents/2021/05/26/2021-11096/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
20	DULL	Urban Indian Organizational Leaders to Participate in Agency-sponsored Listening Sessions: Share and Solicit input on next steps for IHS HIT Modernization	IHS DULL	Published 5/26/2021	Indian Health Service (IHS) Health Information Technology (HIT) Modernization project will host two identical Listening Sessions on June 15, 2021, and June 17, 2021.	Following the announcement of the IHS decision for the full replacement of the Resource and Patient Management System. As the HIT Modernization project continues, the IHS is committed to meaningful Tribal Consultation, Urban Confer, and engagement. IHS will share information at the sessions about the draft HIT Modernization Statement of Objectives (SOO) and obtain feedback. The SOO will survey the business objectives, applicablescope,and contraints for IHS HIT infrastructure and acquisition.	IHS Health IT Modernization Next Steps Listening Sessions Tuesday, June 15, 2021, 1:00-4:00 p.m., Eastern Time https://mitre.zoomgov.com/j/1604137691?pwd=L2d3UXhDMktyQjc1MVAwSmpRMzlsZz09 Thursday, June 17, 2021, 1:00-4:00 p.m., Eastern Time https://mitre.zoomgov.com/j/1604735351?pwd=RkN3VG5kclAyRXhTdXhsbGJMMzhoQT09

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21	DULL	Best Practices and Strategies of Protecting the Native American Vote	Tribal Consultation	Published 5/28/2021	On March 7, 2021, the President issued an Executive Order on Promoting Access to Voting. The EO established an Interagency Steering Group on Native American Voting Rights (Steering Group). The charge of the Steering Group includes studying best practices for protecting voting rights of Native Americans and producing a report within 1 year of the date of this order outlining recommendations for providing such protection, consistent with applicable law. The Steering Group will engage in meaningful and robust consultation with Tribal Nations and Native leaders during this process and will include tribal recommendations in this report.	Tribal input is critical in this effort. Therefore, the Steering Group will be engaging in several consultations across the country, both virtually and in-person, as allowable, over the coming months. Please see attached for the schedule of the proposed consultations	PDF Tribal Consultation on Native American Voting Rights.pdf (mcusercontent.com) https://mcusercontent.com/f620288bb41dd81f9c715ef4d/files/d6a0c5f1-1e57-39ee-4ce2-a0c105974738/PDF_2021_05_10_FINAL_Tribal_Consultation_Schedule.pdf
22	Proposed Rule	Medicaid Program; Establishing Minimum Standards in Medicaid State Drug Utilization Review (DUR) and Supporting Value-Based Purchasing (VBP) for Drugs Covered in Medicaid, Revising Medicaid Drug Rebate and Third Party Liability (TPL) Requirements: Delay of Effective Date for Provision Relating to Manufacturer Reporting of Multiple Best Prices Connected to a Value Based Purchasing Arrangement; Delay of Inclusion of Territories in Definition of States and United States	86 FR 28742/ pp 28742-28746	Published 5/28/2021 Comments Close 6/28/2021	This proposed rule proposes to delay for 6 months the January 1, 2022 effective date for amendatory instruction 10.a., which addresses the reporting by manufacturers of multiple best prices connected to a value based purchasing arrangement, of the final rule entitled, "Medicaid Program; Establishing Minimum Standards in Medicaid State Drug Utilization Review (DUR) and Supporting Value-Based Purchasing (VBP) for Drugs Covered in Medicaid, Revising Medicaid Drug Rebate and Third Party Liability (TPL) Requirements", published in the December 31, 2020 **Federal Register**. This proposed rule also proposes to delay for 2 years the April 1, 2022 effective date of inclusion (inclusion date) for U.S. territories (American Samoa, Northern Mariana Islands, Guam, Puerto Rico, and the Virgin Islands) in the amended regulatory definitions of "States" and "United States" for purposes of the Medicaid Drug Rebate Program (MDRP), adopted in the interim final rule with comment period entitled, "Medicaid Program; Covered Outpatient Drug; Further Delay of Inclusion of Territories in Definitions of States and United States", published in the November 25, 2019 **Federal Register** to April 1, 2024.	In the alternative, the proposal is to finalize an inclusion date that may be earlier than April 1, 2024, but not before January 1, 2023, based on public comments received.	Comments, including mass comment submissions, must be submitted in one of the following three ways (please choose only one of the ways listed): 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: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-2482-P2, P.O. Box 8016, Baltimore, MD 21244-8016. 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 following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-2482-P2, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850.

NCUIH REGULATIONS TRACKER: June 2021

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1	Notice of Tribal Consultation	VA's Indian Health Service/Tribal Health Program Reimbursement Agreements Program-Pharmacy Reimbursement Rate for the Lower 48 States	86 FR 29882/ pp 29882	Published 6/03/2021 Comments Close 7/05/2021	IHS and Tribal health care providers have created the IHS/THP Reimbursement Agreements Program. This program provides a means for IHS and THP health facilities to receive reimbursement from VA for direct care services, including pharmaceutics, provided to eligible American Indian/Alaska Native (AI/AN) Veterans. Currently, reimbursement agreements under this program state that VA will reimburse "actual costs" for pharmaceuticals. In implementing this requirement, VA has realized that this term, "actual costs," may be ambiguous and has led to difficulties in administering the agreements in compliance with applicable laws. VA is considering replacing the term "actual cost" with a more recognizable and easily calculated rate.	VA, Veterans Health Administration (VHA) will facilitate a tribal consultation regarding VA's Indian Health Service/Tribal Health Program (IHS/THP) Reimbursement Agreements Program. VA is seeking input on adopting a pharmacy reimbursement rate for the lower 48 states.	Comments must be received by VA on or before July 5, 2021 Comments may be submitted to tribalgovernmentconsultation@va.gov or by mail at Department of Veterans Affairs, Suite 915L, 810 Vermont Avenue NW, Washington, DC 20420. https://www.federalregister.gov/documents/2021/06/03/2021-11624/vas-indian-health-servicetribal-health-program-reimbursement-agreements-program-pharmacy?utm_campaign=subscription%20mailing%20list&utm_source=federalregister.gov&utm_medium=email
2	Notice	Solicitation of Nominations for Appointment to the Advisory Committee on Tribal and Indian Affairs, Amended	86 FR 29884/ pp 29884-29885	Published 6/3/2021	The Committee was established in accordance with section 7002 of Public Law 116-315 (H.R. 7105—Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020). In accordance with Public Law 116-315, the Committee provides advice and guidance to the Secretary of Veterans Affairs on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations and Native American Veterans. The Committee serves in an advisory capacity and advises the Secretary on ways the Department can improve the programs and services of the Department to better serve Native American Veterans. Committee members make recommendations to the Secretary regarding such activities.	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs ("the Committee").	All nomination packages (Application, should be mailed to the Office of Tribal Government Relations, 810 Vermont Ave. NW, Suite 915H (075), Washington, DC 20420 or email us at tribalgovernmentconsultation@va.gov. https://www.federalregister.gov/documents/2021/06/03/2021-11669/solicitation-of-nominations-for-appointment-to-the-advisory-committee-on-tribal-and-indian-affairs?utm_campaign=subscription%20mailing%20list&utm_source=federalregister.gov&utm_medium=email
3	Request for Comment	Submission for OMB Review; Head Start Family and Child Experiences Survey (FACES) (OMB #0970-0151)	86 FR 30463/ pp 30463-30465	Published 6/8/2021	The Office of Planning, Research, and Evaluation (OPRE), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is proposing to collect data for a new wave of the Head Start Family and Child Experiences Survey (FACES).	The purpose of the FACES data collection is to support the 2007 reauthorization of the Head Start program (Pub. L. 110-134), which calls for periodic assessments of Head Start's quality and effectiveness. FACES 2019 focuses on Head Start Regions I through X (which are geographically based); AIAN (American Indian and Alaska Native) FACES 2019 focuses on Region XI (which funds Head Start programs that serve federally recognized American Indian and Alaska Native tribes). Both studies will provide data on a set of key indicators for Head Start programs. Information about the Head Start program recruitment and center selection processes and on the fall 2019 and spring 2020 data collection activities for both FACES and AIAN FACES can be found here: https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202005-0970-009	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function. https://www.federalregister.gov/documents/2021/06/08/2021-11935/submission-for-omb-review-head-start-family-and-child-experiences-survey-faces-omb-0970-0151?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
4	Notice	HHS Issues Revised Notice of Reporting Requirements and Reporting Timeline for Recipients of Provider Relief Fund Payments	N/A	Published 6/11/2021	U.S. Department of Health and Human Services, through the Health Resources and Services Administration (HRSA) is releasing revised reporting requirements for recipients of Provider Relief Fund (PRF) payments	Revised reporting requirements for HRSA Provider Relief Fund (PRF) payments. PRF recipients who have received one or more payments exceeding $10,000 during a Payment Received Period are required to report within the Reporting Time Period. Specifically, these revisions include changes to the period of availability of funds that are now based on the date the payment was received, a 90 day turn around pay period to complete reporting and the inclusion of Skilled Nursing Facilities/Nursing Home Infection Control Distributions. Providers are encouraged to sign up for the PRF Reporting Portal which will be available starting July 1, 2021.	The revised requirements and more information on these requirements can be found here: https://www.hhs.gov/sites/default/files/provider-post-payment-notice-of-reporting-requirements-june-2021.pdf To register and establish a provider PRF Reporting Portal account please follow this link: https://urldefense.proofpoint.com/v2/url?u=https-3A__lnks.gd_l_eyJhbGciOiJIUzI1NiJ9.eyJidWxsZXRpbI9saW5rX2lkIjoxMDQsInVyaSI6ImJwMjpjbGljayIsImJ1bGxldGluX2lkIjoiMjAyMTA2MTEuNDE4MTczMzEiLCJ1cmwiOiJodHRwczovL3ByZnJlcG9ydGluZy5ocnNhLmdvdi8ifQ.fQYMITN4-2DQNnbK4HIU7fSFHFkufsdAB31u-2DySQvLYFU_s_910308411_br_107806395282-2DI&d=DwMFAA&c=euGZstcaTDllvimEN8b7jXrwqOf-v5A_CdpgnVfiiMM&r=q8ri_Yg6DlZ_HLfzVNdDfCcYsNBFkQJ8XLiTBTE5op0&m=D2wWCOjmRgcL0QeA6ZTQiIE5iGJKkV_dw5zyCZfL01Q&s=KqeB_DuEOc8nIcoTCXMH9bEKO8tmpHjlbmCuHp2-H3s&e= https://www.hhs.gov/about/news/2021/06/11/hhs-issues-revised-reporting-requirements-timeline-for-provider-relief-fund-recipients.html

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5	Notice	Agency Information Collection Activities: Proposed Collection; Comment Request	86 FR 31506/ pp 31506	Published 6/14/2021	Under the PRA (44 U.S.C. 3501-3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term "collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party.	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments	When commenting, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways: 1. Electronically. You may send your comments electronically to http://www.regulations.gov. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments. 2. By regular mail. You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number: ___: Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following: 1. Access CMS' website address at website address at https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html. https://www.federalregister.gov/documents/2021/06/14/2021-12365/agency-information-collection-activities-proposed-collection-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	HHS Press Release	HHS Awards $125 Million in Workforce Grants for Community-Based Efforts to Bolster COVID-19 Vaccinations in Underserved Communities	N/A	Published 6/14/2021	US Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA) awarded $125 million to support 14 nonprofit private or public organizations to reach underserved communities in all 50 states plus the District of Columbia, Puerto Rico, Guam and the Freely Associated States to develop and support a community-based workforce that will engage in locally tailored efforts to build vaccine confidence and bolster COVID-19 vaccinations in underserved communities.	These awards reflect the first of two funding opportunities announced by President Biden last month for community-based efforts to hire and mobilize community outreach workers, community health workers, social support specialists, and others to increase vaccine access for the hardest-hit and highest-risk communities through high-touch, on-the-ground outreach to educate and assist individuals in getting the information they need about vaccinations. The workers supported with this funding will answer individual questions, help make vaccine appointments, and assist with transportation and other needs. Award recipients will collaborate with regional and local partners to ensure a broad geographic reach with the goal of getting as many people vaccinated as possible.	For a list of awards recipients, see www.hrsa.gov/coronavirus/community-based-workforce. HRSA has also released a second notice of funding opportunity targeting smaller community-based organizations, with awards expected to be released in July 2021. Contact CBOVaccineOutreach@hrsa.gov with any questions.
7	Request for Comment	Proposed Information Collection Activity; Tribal Maternal, Infant, and Early Childhood Home Visiting Program: Guidance for Submitting an Annual Report to the Secretary (OMB #0970-0409)	86 FR 31719/ pp 31719-31720	Published 6/15/2021	The Administration for Children and Families (ACF), Office of Child Care (OCC) is requesting a 3-year extension of the Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program: Guidance for Submitting an Annual Report to the Secretary (OMB #0970-0409; expiration 9/30/2021). There are minor updates to the annual guidance which reflects a change in timing for the due date of the final report.	Section 511(e)(8)(A) of Title V of the Social Security Act requires that grantees under the MIECHV program for states and jurisdictions submit an annual report to the Secretary of Health and Human Services regarding the program and activities carried out under the program, including such data and information as the Secretary shall require. Section 511(h)(2)(A) further Start Printed Page 31720states that the requirements for the MIECHV grants to tribes, tribal organizations, and urban Indian organizations are to be consistent, to the greatest extent practicable, with the requirements for grantees under the MIECHV program for states and jurisdictions.	Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing infocollection@acf.hhs.gov. Alternatively, copies can also be obtained by writing to the Administration for Children and Families, Office of Planning, Research, and Evaluation (OPRE), 330 C Street SW, Washington, DC 20201, Attn: ACF Reports Clearance Officer. All requests, emailed or written, should be identified by the title of the information collection. https://www.federalregister.gov/documents/2021/06/15/2021-12464/proposed-information-collection-activity-tribal-maternal-infant-and-early-childhood-home-visiting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
8	Notice & Request for Comment	Advisory Committee on Immunization Practices (ACIP)	86 FR 31716/ pp 31716-31717	Published 6/15/2021	In accordance with the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC), announces the following meeting of the Advisory Committee on Immunization Practices (ACIP). This meeting is open to the public. The meeting will be webcast live via the World Wide Web. Time will be available for public comment.	The committee is charged with advising the Director, CDC, on the use of immunizing agents. In addition, under 42 U.S.C. 1396s, the committee is mandated to establish and periodically review and, as appropriate, revise the list of vaccines for administration to vaccine-eligible children through the Vaccines for Children (VFC) program, along with schedules regarding dosing interval, dosage, and contraindications to administration of vaccines. Further, under provisions of the Affordable Care Act, section 2713 of the Public Health Service Act, immunization recommendations of the ACIP that have been approved by the Director of the Centers for Disease Control and Prevention and appear on CDC immunization schedules must be covered by applicable health plans.	The meeting will be held on June 18, 2021, from 11:00 a.m. to 5:00 p.m., EDT (dates and times subject to change), see the ACIP website for updates: http://www.cdc.gov/vaccines/acip/index.html. The public may submit written comments from June 15, 2021 through June 18, 2021. You may submit comments, identified by Docket No. CDC-2021-0060 by any of the following methods: Federal eRulemaking Portal: https://www.regulations.gov. Follow the instructions for submitting comments. Mail: Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H24-8, Atlanta, Georgia 30329-4027, Attn: June 18, 2021 ACIP Meeting. Instructions: All submissions received must include the Agency name and Docket Number. All relevant comments received in conformance with the https://www.regulations.gov suitability policy will be posted without change to https://www.regulations.gov, including any personal information provided. For access to the docket to read background documents or comments received, go to https://www.regulations.gov.
9	HHS Press Release	HHS Announces $80 million in American Rescue Plan Funding to Strengthen U.S. Public Health IT, Improve COVID-19 Data Collection, and Bolster Representation of Underrepresented Communities in Public Health IT Workforce	N/A	Published 6/17/2021	U.S. Department of Health and Human Services' (HHS) Office of the National Coordinator for Health Information Technology (ONC) is announcing the establishment of an $80 million Public Health Informatics & Technology Workforce Development Program (PHIT Workforce Program) to strengthen U.S. public health informatics and data science. As part of this launch, ONC is inviting college and universities—particularly Historically Black Colleges and Universities (HBCUs), Tribal Colleges and Universities (TCUs), Hispanic Serving Institutions (HSIs), Asian American and Native American Pacific Islander-Serving Institutions (AANAPISIs), and other minority-serving institutions (MSIs)—to apply for funding through a consortium that will develop the curriculum, recruit and train participants, secure paid internship opportunities, and assist in career placement at public health agencies, public health-focused non-profits or public health-focused private sector or clinical settings.	Supports the Administration's efforts to root out pervasive health and socioeconomic inequities that have been exacerbated by the pandemic and ensure our health care system is better equipped for the next public health emergency. Currently, we have learned through the pandemic that there are gaps in our public health, including reporting and data analysis, particularly around race and ethnicity-specific data. Differences can be attributed to inconsistent technology infrastructures and chronic underfunding to support the staffing needs around public health data reporting at the state and local levels. "Federal efforts to center equity in the COVID-19 response and future public health responses will be improved by robust data collection and reporting around infection, hospitalization, and mortality rates, as well as underlying health and social vulnerabilities, that is disaggregated by race and ethnicity, age, gender, and other key variables."	ONC will host an information session about this funding opportunity on June 23, 2021 at 2:00 pm ET. View the notice of funding opportunity: https://www.healthit.gov/topic/onc-funding-opportunities/funding-announcements
10	HRSA Press Release	HRSA Announces Coverage of Over Five Million Claims for COVID-19 Vaccinations for Uninsured Individuals	N/A	Published 6/17/2021	Health Resources and Services Administration (HRSA) is announcing that the HRSA COVID-19 Claims Reimbursement to Health Care Providers and Facilities for Testing, Treatment, and Vaccine Administration for the Uninsured (Uninsured Program) has paid over 5 million claims to health care providers for administering COVID-19 vaccines to uninsured individuals.	There are approximately 29 million uninsured individuals living in the United States. In an effort to aid in treatment, testing, prevention, and vaccine administration for those uninsured HRSA has launched the Coverage Assistance Fund. The Uninsured Program allows anyone without health insurance, to receive their COVID-19 vaccines for free by reimbursing providers for the cost of administering the vaccine. In addition, the program will also cover COVID-19 testing and treatment claims for individuals without health insurance	The Covid-19 assistance fund may be viewed at: https://www.hrsa.gov/covid19-coverage-assistance
11	DULL	Allocation decisions for approximately $1.8 billion in resources appropriated to the IHS in the American Rescue Plan Act	N/A	Published 6/22/2021	These funds are one-time, non-recurring, and can only be used for the purposes specified in the statute. They may also cover obligations for purposes specified in the statute that were incurred to prevent, prepare for, and respond to COVID-19 during the period beginning January 31, 2020, through March 11, 2021.	On March 15, 2021, Tribal Consultation conference call was held with Tribal Leaders and an Urban Confer conference call with Urban Indian Organization Leaders to seek rapid input regarding the allocation of $6.094 billion in ARPA resources. The IHS also received written comments. On April 16, 2021, an initial announcement of the allocation of approximately $4.3 billion from the ARPA. The allocation decisions for the remaining distribution of approximately $1.8 billion from the ARPA: $240 million for Public Health Workforce Activities $420 million for Mental Health and Substance Abuse Prevention and Treatment $500 million to Detect, Diagnose, Trace, Monitor, and Mitigate COVID-19 Infections $600 million for COVID-19-Related Facilities Activities $10 million for Potable Water Delivery Through Tribal Consultation and Urban Confer, the IHS identified areas important to Tribal leaders when distributing these funds: supporting flexibility of these funds rapid distribution using existing distribution methods for allocation.	The DULL may be read at https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DTLL_DUIOLL_062221.pdf

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
12	Notice	Needs and Challenges in Personal Protective Equipment (PPE) Use for Underserved User Populations	86 FR 33296	Published 6/28/2021	National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS) requests information on the Needs and Challenges in Personal Protective Equipment (PPE) Use for Underserved User Populations.	The NIOSH National Personal Protective Technology Laboratory (NPPTL) is expanding its portfolio to include activities that consider the needs of U.S. worker populations who are underserved related to personal protective equipment (PPE) use, availability, accessibility, acceptability, or knowledge. Underserved PPE user populations may include, but are not limited to, workers who are of an atypical size; who are members of a gender, racial, ethnic, or linguistic minority group; who conduct non-traditional worker activities; or who are members of sub-disciplines that are not the primary focus of the current PPE activities within their larger field.	Informational submissions in response to this Notice are due no later than August 23, 2021. Interested parties should submit information to: NIOSH, Attn: Sherri Diana, National Institute for Occupational Safety and Health, NIOSH Docket Office, 1090 Tusculum Avenue, MS C-34, Cincinnati, Ohio 45226-1998, Email address: ppeconcerns@cdc.gov. Detailed information on submission content can be viewed at https://www.federalregister.gov/documents/2021/06/24/2021-13263/needs-and-challenges-in-personal-protective-equipment-ppe-use-for-underserved-user-populations?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

NCUIH REGULATIONS TRACKER: July 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Tribal Consultation	Tribal Consultation: Feedback on the President's Fiscal Year (FY) 2022 Budget	N/A	Published 7/1/2021	Office of Management and Budget (OMB), I am writing to invite you to a Tribal consultation to provide your feedback on the President's Fiscal Year (FY) 2022 Budget. While your feedback on the FY 2022 Budget will help to guide the formulation of the President's FY 2023 Budget, please note that OMB intends to hold a separate Tribal consultation later this year specifically to inform the FY 2023 Budget formulation process.	Tribal leaders and their designees are invited to provide comments and recommendations on the following: •The FY 2022 President's Budget proposals to reclassify Contract Supports Costs, Indian Self Determination and Education Assistance Act Section 105(l) Leases costs, and enacted Indian Water Rights Settlements payments as mandatory beginning in FY 2023. •Other feedback on the FY 2022 President's Budget for programs and activities serving and benefitting Tribal governments, organizations, and communities. •Ensuring adequate and stable funding by considering options for a potential mandatory funding proposal for the Department of Health and Human Services 'Indian Health Service in future President's Budgets. OMB will conduct another consultation on the President's FY 2023 Budget, which will include this topic, in2021, but this July session can start the process of seeking Tribal Leaders' views on some of the major questions around developing such a proposal. •How OMB can improve Tribal funding transparency, such as through changes toOMB's annual Native American Funding Crosscut.	This Tribal consultation on the President's FY 2022 Budget will be held via teleconference on: •Thursday, July 15, 2021 (1:00 p.m. – 3:00 p.m. ET) oRegistration link: https://ems9.intellor.com?do=register&l=1&p=902398
2	Tribal Consultation	Center for State, Tribal, Local, and Territorial Support (CSTLTS), CDC/ATSDR Tribal Consultation Session	86 FR 35298/ pp 35298-35299	Published 7/2/2021	The Centers for Disease Control and Prevention (CDC)/Agency for Toxic Substances and Disease Registry (ATSDR), announces the 2021 CDC/ATSDR Tribal Consultation Session. CDC/ATSDR will host American Indian and Alaska Native (AI/AN) Federally Recognized Tribes for the virtual tribal consultation session. The proceedings will be open to the public.	The purpose of the consultation meeting is to advance CDC/ATSDR support for and collaboration with AI/AN tribal nations and to improve the health of AI/AN tribal nations by pursuing goals that include assisting in eliminating the health disparities faced by AI/AN tribal nations. CDC/ATSDR is hosting this meeting to hold a consultation with federally recognized tribal nations to receive input and guidance on improving the current CDC/ATSDR Tribal Consultation Policy. CDC/ATSDR is seeking feedback on how the agency can improve its policies and practices to better engage with Indian Country through meaningful consultation.	The tribal consultation will be held on August 5, 2021, from 3:15 p.m. to 5:00 p.m., EDT. Written tribal testimony is due by 5:00 p.m., EDT, on September 7, 2021. Zoom Virtual Tribal Consultation. To register, see CDC web page https://cdc.zoomgov.com/meeting/register/vJIsfu-gqDgsGD1rTre7HPjbXyIF3v5jSp4. All elected tribal officials are encouraged to submit written tribal testimony to the contact person and mailing address listed below or by email at Tribalsupport@cdc.gov. https://www.federalregister.gov/documents/2021/07/02/2021-14205/center-for-state-tribal-local-and-territorial-support-cstlts-cdcatsdr-tribal-consultation-session?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
3	Notice	Lists of Designated Primary Medical Care, Mental Health, and Dental Health Professional Shortage Areas	86 FR 35808/ pp 35808-35809	Published 7/7/2021	Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS released notice informing the public of the availability of the complete lists of all geographic areas, population groups, and facilities designated as primary medical care, dental health, and mental health professional shortage areas (HPSAs) as of April 30, 2021.	Each list of designated HPSAs is arranged by state. Within each state, the list is presented by county. If only a portion (or portions) of a county is (are) designated, a county is part of a larger designated service area, or a population group residing in a county or a facility located in the county has been designated, the name of the service area, population group, or facility involved is listed under the county name. All Indian Tribes that meet the definition of such Tribes in the Indian Health Care Improvement Act of 1976, 25 U.S.C. 1603, are automatically designated as population groups with primary medical care and dental health professional shortages. Further, the Health Care Safety Net Amendments of 2002 provides eligibility for automatic facility HPSA designations for all federally qualified health centers (FQHCs) and rural health clinics that offer services regardless of ability to pay. Specifically, these entities include FQHCs funded under section 330 of the PHS Act, FQHC Look-Alikes, and Tribal and urban Indian clinics operating under the Indian Self-Determination and Education Act of 1975 (25 U.S.C. 450) or the Indian Health Care Improvement Act. Many, but not all, of these entities are included on this listing. Absence from this list does not	Complete lists of HPSAs designated as of April 30, 2021, are available on the website at *https://data.hrsa.gov/topics/health-workforce/shortage-areas*. Frequently updated information on HPSAs is available at *https://data.hrsa.gov/tools/shortage-area*. Information on shortage designations is available at *https://bhw.hrsa.gov/workforce-shortage-areas/shortage-designation*. https://www.federalregister.gov/documents/2021/07/07/2021-14408/lists-of-designated-primary-medical-care-mental-health-and-dental-health-professional-shortage-areas?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
4	Final Methodology	Basic Health Program; Federal Funding Methodology for Program Year 2022	86 FR 35615/ pp 35615-35631	Published 7/7/2021	Centers for Medicare & Medicaid Services (CMS), HHS, finalized the methodology and data sources necessary to determine federal payment amounts to be made for program year 2022 to states that elect to establish a Basic Health Program under the Patient Protection and Affordable Care Act to offer health benefits coverage to low-income individuals otherwise eligible to purchase coverage through Health Insurance Exchanges, and incorporates the effects on such payment amounts the American Rescue Plan Act of 2021 (ARP).	Effective on January 1, 2022, In the states that elect to operate a Basic Health Plan (BHP), the BHP will make affordable health benefits coverage available for individuals under age 65 with household incomes between 133 percent and 200 percent of the federal poverty level (FPL) who are not otherwise eligible for Medicaid, the Children's Health Insurance Program (CHIP), or affordable employer-sponsored coverage, or for individuals whose income is below these levels but are lawfully present non-citizens ineligible for Medicaid. For those states that have expanded Medicaid coverage under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (the Act), the lower income threshold for BHP eligibility is effectively 138 percent due to the application of a required 5 percent income disregard in determining the upper limits of Medicaid income eligibility (section 1902(e)(14)(I) of the Act). A BHP is another option for states to provide affordable health benefits to individuals with incomes in the ranges described above. States may find a BHP a useful option for several reasons, including the ability to potentially coordinate standard health plans in the BHP with their Medicaid managed care plans, or to potentially reduce the costs to individuals by lowering premiums or cost-sharing requirements.	A state that is approved to implement a BHP must provide data showing quarterly enrollment of eligible individuals in the various federal BHP payment rate cells. Such data must include the following: Personal identifier; Date of birth; County of residence; Indian status; Family size; Household income; Number of persons in household enrolled in BHP; Family identifier; Months of coverage; Plan information; and Any other data required by CMS to properly calculate the payment. Full details on the formulas and comments can be viewed at https://www.federalregister.gov/documents/2021/07/07/2021-14393/basic-health-program-federal-funding-methodology-for-program-year-2022?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
5	Notice of Meeting	Meeting of the Presidential Advisory Council on HIV/AIDS	86 FR 36144	Published 7/8/2021	As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will be holding the 71st full Council meeting utilizing virtual technology	Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will be holding the 71st full Council meeting utilizing virtual technology on Tuesday, August 3-Wednesday, August 4, 2021 from 1:00-5:00 p.m. (ET) on both days. The meeting will be open to the public; a public comment session will be held during the meeting. Pre-registration is required to provide public comment during the meeting. To pre-register to attend or to provide public comment, please send an email to *PACHA@hhs.gov* and include your name, organization, and title by close of business Monday, July 26, 2021. If you decide you would like to provide public comment but do not pre-register, you may submit your written statement by emailing *PACHA@hhs.gov* by close of business Wednesday, August 11, 2021. The meeting agenda will be posted on the PACHA page on *HIV.gov* at *https://www.hiv.gov/federal-response/pacha/about-pacha* prior to the meeting.	Instructions on attending this meeting virtually will be posted one week prior to the meeting at: https://www.hiv.gov/federal-response/pacha/about-pacha.
6	DTLL	Indian Health Service (IHS) Circular No. 21-02, Contract Support Costs Advisory Group – Charter	N/A	Published 7/13/2021	Seeking nominations for Tribal members to serve on the Contract Support Costs Advisory Group (CSCAG).	A copy of the CSCAG Charter is available on the IHS Web site at: https://www.ihs.gov/ihm/circulars/2021/contract-support-costs-advisory-group-charter/. The purpose of the CSCAG is to serve as a resource for information and advice to the IHS. The CSCAG is also tasked with providing recommendations for a uniform and equitable system of determining, paying, and reconciling Contract Support Costs (CSC) funds for new, expanded, and ongoing Indian Self-Determination and Education Assistance Act contracts and compacts	Nominations for CSCAG members to your respective IHS Area Director by Wednesday, August 11, 2021. The membership of the CSCAG is comprised of Federal and Tribal officials. Tribal membership must comply with Federal Advisory Committee Act Intergovernmental exemption requirements (2 U.S.C. § 1534(b)). Tribal membership will consist of two (2) elected Tribal Leaders from each IHS Area. In addition, both the Tribal Self-Governance Advisory Committee and the Direct Service Tribes Advisory Committee will select an elected Tribal Leader, representing his or her Tribe, to serve on the CSCAG. The first scheduled meeting of the CSCAG will be held virtually on September 2, 2021. A meeting announcement
7	DULL	Urban Confer	N/A	Published 7/15/2021	$1,000,000 is provided to conduct an infrastructure study for facilities run by UIOs. The infrastructure study will be a first step towards creating a comprehensive action plan to address the most critical challenges faced by UIOs	The December 27, 2020-enacted Consolidated Appropriations Act, 2021 (Pub. L. No. 116-260) (the Act), provides the IHS with a total fiscal year (FY) 2021 appropriation of $6.4 billion. The Act's Joint Explanatory Statement for Division G provides appropriations for the Department of the Interior, the IHS, Environmental Protection Agency, the Forest Service, and related agencies for FY 2021. Specifically, $1,000,000 is provided to conduct an infrastructure study for facilities run by UIOs	Urban Confer session on Thursday, July 22, 2021. Urban Indian Organization Leaders are encouraged to provide comments on the scope of the IHS Urban Indian Organization Infrastructure Study. Thursday, July 22, 2021- 4-5 PM EST Access Zoom by Telephone: (833) 568-8864 Zoom Meeting ID: 161 963 5644 https://www.zoomgov.com/j/161963564 4?pwd=QWJYNEINSEFpOHE4bjVqa1I oQ2hWUT09 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DUIOLL_07162021.pdf
8	DULL	Urban Confer	N/A	Published 7/16/2021	The IHS is currently researching the feasibility of calculating an All-Inclusive Rate for UIOs.	Urban Confer to seek your input on the calculation of an All-Inclusive Rate for Urban Indian Organizations (UIOs).	Urban Confer session on Monday, July 26, 2021. Urban Indian Organization Leaders are encouraged to provide comments on the calculation of an All-Inclusive Rate for UIOs Monday, July 26, 2021- 2-3 PM EST Access Zoom by Telephone: (833) 568-8864 Zoom Meeting ID: 161 333 5777 https://www.zoomgov.com/j/1613 335777?pwd=bmJCQWh0dStLQl Y5M3BGOU9xM1VwUT09 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DUIOLL_07162021-2.pdf
9	A Proposed Rule	Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; Provider and Supplier Prepayment and Post-Payment Medical Review Requirements.	86 FR 39104/ pp 39104-39907	Published 7/23/2021	Centers for Medicare & Medicaid Services (CMS) and Health and Human Services (HHS), major proposed rule addresses: Changes to the physician fee schedule (PFS); other changes to Medicare Part B payment policies to ensure that payment systems are updated to reflect changes in medical practice, relative value of services, and changes in the statute	Based on these provisions, the following three types of organizations that are eligible to enroll in Medicare as FQHCs: Health Center Program grantees: Organizations receiving grants under section 330 of the PHS Act (42 U.S.C. 254b). Health Center Program "lookalikes": Organizations that have been identified by the Health Resources and Services Administration as meeting the requirements to receive a grant under section 330 of the PHS Act, but which do not receive section 330 grant funding. Outpatient health programs or facilities operated by a Tribe or tribal organization under the ISDEAA, or by an urban Indian organization receiving funds under Title V of the IHCIA. The American Recovery and Reinvestment Act of 2009 section 5006(e)(1), which became effective July 1, 2009, mandates that TTAG shall be maintained within CMS and added two new representative's positions: A representative and alternate from a national urban Indian health organization (National Council of Urban Indian Health) and a representative and alternate from the IHS.	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on September 13, 2021. In commenting, please refer to file code CMS-1751-P. Comments, including mass comment submissions, must be submitted in one of the following three ways (please choose only one of the ways listed): 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: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1751-P, P.O. Box 8016, Baltimore, MD 21244-8016. 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 following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1751-P, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850. https://www.federalregister.gov/documents/2021/07/23/2021-14973/medicare-program-cy-2022-payment-policies-under-the-physician-fee-schedule-and-other-changes-to-part?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
10	Tribal Consultation	Tribal Consultation: Native American Voting Rights	White House Tribal Affairs	Published 7/26/2021	The Native American Voting Rights Steering Group will be holding the next consultaiton on July 28th from 2-4 pm.	This steering group will cover the Southern, Eastern, Rocky Mountain, Eastern Oklahoma, and Midwest Regions. Secretary Haaland will be join the consultation. There will be additional consultations, details will be forthcoming.	Registration can be found at: https://pitc.zoomgov.com/webinar/register/WN_ofcbkisaS8KYAvPU-an6Aw

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11	Notice: New and Competing Continuation	Epidemiology Program for American Indian/Alaska Native Tribes and Urban Indian Communities	86 FR 41058/ pp 41058-41073	Published 7/30/2021	Indian Health Service is accepting application for a cooperative agreement for Tibal Epidemiology Centers (TECs) servicing AI/AN Tribes and Urban Indian communities.	This program is authorized under: The Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act (IHCIA), as amended, 25 U.S.C. 1621m. This program is described in the Assistance Listings located at *https://beta.sam.gov* (formerly known as Catalog of Federal Domestic Assistance) under 93.231. The TEC program was authorized by Congress in 1996 as a way to provide public health support to multiple Tribes and Urban Indian communities in each of the IHS Administrative Areas. The funding opportunity announcement is open to currently funded TECs	Application Deadline Date: September 1, 2021. Earliest Anticipated Start Date: September 30, 2021 https://www.federalregister.gov/documents/2021/07/30/2021-16281/epidemiology-program-for-american-indianalaska-native-tribes-and-urban-indian-communities?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
12	Notice	Community Health Aide Program: Tribal Planning & Implementation	86 FR 41044/ pp41044-41051	Published 7/30/2021	The Indian Health Service (IHS) is accepting applications for grants for the Community Health Aide Program (CHAP) Tribal Planning and Implementation (TPI) program	The CHAP is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 16161. This grant program is described in the Assistance Listings located at *https://beta.sam.gov* (formerly known as Catalog of Federal Domestic Assistance) under 93.382. The national CHAP will provide a network of health aides trained to support licensed health professionals while providing direct health care, health promotion, and disease prevention services. These providers will work within a referral relationship under the supervision of licensed clinical providers that includes clinics, service units, and hospitals. The program will increase access to direct health services, including inpatient and outpatient visits.	Application Deadline Date: September 1, 2021. Earliest Anticipated Start Date: September 30, 2021. https://www.federalregister.gov/documents/2021/07/30/2021-16283/community-health-aide-program-tribal-planning-and-implementation?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
13	Notice	AR27-Notice of Request for Information on the Department of Veterans Affairs' Eligibility Considerations for the Veterans Cemetery Grants Program	86 FR 41162/ pp 41162-41163	Published 7/30/2021	Through this request for information, VA seeks comments to help inform VA's understanding of issues affecting States and Tribal Organizations in meeting burial and other needs of their National Guard and Reservist populations with respect to burial in VA grant-funded cemeteries.	State and Tribal veterans' cemetery grant applicants that seek to participate in the Department of Veterans Affairs (VA) Veterans Cemetery Grants Program (VCGP) must, to qualify for a grant, solely inter and memorialize eligible persons, which includes Veterans and certain family members. VA seeks stakeholder input to improve our understanding of issues impacting States and Tribal Organizations (as those terms are defined in 38 CFR 39.2) in serving their National Guard servicemembers and Reservists. The Secretary seeks information on the questions listed below. Commenters do not need to address each question and should focus on those that relate to their expertise or perspectives. To the extent possible, please clearly indicate which questions you address in your response.	Comments must be submitted through www.Regulations.gov and will be available for public viewing, inspection or copies. Comments are due by August 30, 2021. George Eisenbach, Director, Veterans Cemetery Grants Program, National Cemetery Administration (40), Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420, (202) 632-7369 (this is not a toll-free telephone number). https://www.federalregister.gov/documents/2021/07/30/2021-16291/ar27-notice-of-request-for-information-on-the-department-of-veterans-affairs-eligibility?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: August 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	DULL	Ongoing Tribal Consultation and Urban Confer concerning modernization of the Health Information Technology (HIT) infrastructure supported by the Indian Health Service (IHS).	N/A	Published 8/9/2021	On May 21, 2021, the IHS hosted a virtual Industry Day event. We convened two Listening Sessions on this topic for Tribal and Urban Indian Organization leadership on June 15, 2021, and June 17, 2021. We have also released a Request for Information for interested vendors. As a next step, the IHS is following established Federal contracting processes by posting draft acquisition documents for review and comment by HIT vendors. Contracting staff posted a draft Statement of Objectives https://sam.gov/opp/1c9347a64fc4400e82a1e7e01d8bcc50/view on July 29, 2021. The Statement of Objectives will be the focus of the upcoming Request for Proposals. The Statement of Objectives describes the business objectives and applicable scope and constraints for IHS HIT modernization, and offers vendors greater flexibility to respond with solutions that will meet those objectives.	To ensure that you have an opportunity to review and comment on these documents. Feel free to share the draft documents posted. Comments and recommendations can be sent to to ihsmodernization@mitre.org. Responses due by September 6, 2021. Feedback from vendors on these documents will help the IHS refine and improve our solicitation. Release should be planned for in the first quarter of fiscal year 2022.	Dear Tribal and Indian Organization Leader Letter August 9, 2021 (ihs.gov) If you have questions or concerns about this process, please contact Mr. Mitchell Thornbrugh, Chief Information Officer, IHS, by telephone at (240) 620-3117, or by e-mail at mitchell.thornbrugh@ihs.gov.
2	Notice	Notice of Final Issuance on the Administration for Native Americans Program Policies and Procedures	86 FR 43663/ pp 43663-43665	Published 8/10/2021	Pursuant to section 814 of the Native American Programs Act of 1974 (NAPA), as amended, ANA is required to provide members of the public an opportunity to comment on proposed changes in interpretive rules and general statements of policy and to give notice of the proposed changes no less than 30 days before such changes become effective. On February 19, 2021, ANA published a Notice of Public Comment (NOPC) in the **Federal Register** regarding its proposed interpretive rules and general statements of policy relative to its six FY 2021 Funding Opportunity Announcements (FOAs)	The FY 2021 FOAs have been published, and these FOAs serve as the final notice of ANA's proposed changes. Environmental Regulatory Enhancement (HHS-2021-ACF-ANA-NR-1907); Native American Language Preservation and Maintenance—Esther Martinez. Immersion (HHS-2021-ACF-ANA-NB-1958); Native American Language Preservation and Maintenance (HHS-2021-ACF-ANA-NL-1924); Social and Economic Development Strategies (HHS-2021-ACF-ANA-NA-1906); Social and Economic Development Strategies—Alaska (HHS-2021-ACF-ANA-NK-1902); and Social and Economic Strategies—Growing Organizations (HHS-2021-ACF-ANA-NN-1918).	Pursuant to section 814 of NAPA, as amended, ANA is required to provide members of the public an opportunity to comment on proposed changes in interpretive rules and general statements of policy and to give notice of the proposed changes no less than 30 days before such changes become effective. ANA published a NOPC (86 FR 10283) on February 19, 2021, with proposed policy and program clarifications, modifications, and activities for the FY 2021 FOAs. The NOPC provided proposed clarifications, modifications, and new text for six FY 2021 FOAs. During the 30-day comment period, ANA received three responses to the NOPC. https://www.federalregister.gov/documents/2021/08/10/2021-16959/notice-of-final-issuance-on-the-administration-for-native-americans-program-policies-and-procedures?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
3	DULL	Initiate Urban Confer for input and recommendation on mandatory funding approaches at the IHS	N/A	Published 8/13/2021	The fiscal year (FY) 2022 President's Budget commits to conducting robust Tribal Consultation and Urban Confer to evaluate options, including mandatory funding, to provide adequate, stable, and predictable funding for the IHS in the future. To help facilitate your input and recommendations regarding mandatory funding approaches, the IHS would like your input	Input will be around the following discussion points: What is the appropriate funding level for a mandatory funding proposal? What is the appropriate growth pattern for a mandatory funding proposal? What is the appropriate appropriations structure for a mandatory funding proposal?	Urban confer will be held: Monday, August 30th, 2021 2-4 p.m. (EDT) (833) 568-8864 Toll-free Meeting ID: 161 104 8863 Passcode: 961455 Join the ZoomGov Meeting at: https://www.zoomgov.com/j/16110488638?pwd=anh5RklxRFZ6YzFqVFBZVnNIdkdhdz09
4	Notice	Emergency Use Authorizations for Vaccine- CPT Codes	N/A	Published 8/17/2021	The Food and Drug Administration (FDA) released new emergency use authorizations for both the Pfizer and Moderna vaccine. The CPT code 0003A will now be used for the Pfizer vaccine and the CPT code 0013A for the Moderna vaccine. .	These new codes are effective August 12, 2021. CMS has authorized payment for administration of additional doses of the COVID-19 vaccine which has recently been cleared by the FDA for immunocompromised people. These additional doses will be reimbursed at $40	For more information on Medicare COVID-19 codes click here- https://www.cms.gov/medicare/medicare-part-b-drug-average-sales-price/covid-19-vaccines-and-monoclonal-antibodies For more information on Medicare COVID-19 payments click here- https://www.cms.gov/medicare/covid-19/medicare-covid-19-vaccine-shot-payment
5	Directive	Native American Voting Rights Steering Group	N/A	Published 8/17/2021	The Native American Voting Rights Steering Group will be holding regional consultations.	Wednesday September 15th 2021- Southern Plains and Great Plains Regions Register: https://pitc.zoomgov.com/webinar/register/WN_e64eKfouQTyk6ZqlIGtXUQ Wednesday September 22nd 2021- Alaska Register: https://pitc.zoomgov.com/webinar/register/WN_BPt_NzDIQeCwQWMhcBIXng	https://mcusercontent.com/f620288bb41dd81f9c715ef4d/files/a83d0a1d-3120-4691-62b2-eaf7529f7d7b/SEPT_DTLL_Voting_Rights_Consultations.01.pdf https://mcusercontent.com/f620288bb41dd81f9c715ef4d/files/c891de3e-89aa-5127-3f5b-123992452c1c/Tribal_Voting_Rights_Consultation_Schedule.pdf
	HRC Press Release	Human Rights Campaign Foundation, Center for Community Practice	N/A	Published 8/19/2021	HRC Foundation, in partnership with Us Helping Us, launched the nations first national in-home HIV testing program centered around reaching communities disproportionaltely impacted by HIV	The in-home testing kit aims to empower people to learn their status and take control of their sexual health without having to visit a medical provider. HRC will be providing a direct-to-door service to the LGBTQ+ community by pledging to administer a minimum of 5,000 free in-home testing kits for HIV over one year. The service fits under the My Body My Health public education campagn.	Human Rights Campaign Foundation Launches the Country's First National In-Home HIV Testing Program (urccp.org)
7	DTLL	Tribal Consultation with the Council on Environmental Quality (CEQ)	N/A	Published 8/30/2021	This consultation will inform CEQ's ongoing review of its NEPA regulations, which CEQ intends to pursue through a two phased rulemaking process. This first phase will propose a few, targeted amendments to fix critical problems created by regulations finalized in 2020. The second phase will take a broader, longer-term look at how the federal government's environmental review process can be done smarter, more efficiently, and in a way that better responds to the needs and voices of affected communities, including Tribal Nations.	During the consultation input will be collected on how NEPA affects Tribes & what is working well about the NEPA regulations, and what can be improved. This input is invaluable to CEQ's overall approach to reviewing and considering revisions to the NEPA regulations. There is planned engagement with Tribal consultation throughout the rulemaking process. NEPA applies to a wide variety of Federal agency actions of interest to Tribes. CEQ anticipates holding additional Tribal consultations later in the fall. Information about future consultation meetings or other Tribal engagement opportunities will be posted at https://ceq.doe.gov/.	September 30, 2021 from 2:00-4:00 pm EST Zoom Access Link: https://pitc.zoomgov.com/j/1617773334?pwd=ZmVqSHRqbG1UNDRiZE9IaWh4czFDZz09 Phone Only Dial-in Information (for higher quality, dial a number based on your current location): (669) 254-5252 or (551) 285-1373 or (646) 828-7666 or (669) 216-1590 Webinar ID: 161 777 3334 Passcode: 557760 https://mcusercontent.com/f620288bb41dd81f9c715ef4d/files/54105bcc-5757-24d4-68d6-be8c7ae46b60/CEQ_NEPA_Regulations_Tribal_Consultation_Letter.pdf

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NCUIH REGULATIONS TRACKER: September 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Rule	**Access to Federal Employees Health Benefits (FEHB) for Employees of Certain Tribally Controlled Schools**	86 FR 49461/ pp 49461-49466	Published 9/3/2021	The Office of Personnel Management (OPM) is issuing an interim final rule to expand eligibility for enrollment in the Federal Employees Health Benefits (FEHB) Program to additional tribal employees. The Consolidated Appropriations Act, 2021 (FY21 CAA) amended section 409 of the Indian Health Care Improvement Act and expanded entitlement to Indian tribes or tribal organizations carrying out programs under the Tribally Controlled Schools Act of 1988 (TCSA) to purchase coverage, rights, and benefits under the FEHB Program for their employees.	Accordingly, under 25 U.S.C. 1647b, tribally controlled schools include both TCSA grant schools and schools operating under the ISDEAA (Pub. L. 93-638) or a "638 contract." Tribes or tribal organizations operating schools under 638 contracts were already entitled to purchase FEHB since the extension of FEHB to tribal employers in 2012. Currently, there are 128 tribally controlled schools with approximately 4,533 employees. Three of these tribally controlled schools operate under 638 contracts schools, and the remainder are TCSA grant schools. Tribal employees, as defined at 5 CFR 890.1402, across the 125 TCSA grant schools are now eligible for FEHB.	Effective date: This rule is effective on September 3, 2021. Comment date: OPM must receive comments on or before November 2, 2021 You may submit comments, identified by docket number and/or Regulatory Information Number (RIN) and title, by the following method: Federal Rulemaking Portal: http://www.regulations.gov. Follow the instructions for submitting comments. All submissions received must include the agency name and docket number or RIN https://www.federalregister.gov/documents/2021/09/03/2021-19042/access-to-federal-employees-health-benefits-fehb-for-employees-of-certain-tribally-controlled
2	DTLL	Office of Management and Budget: Tribal Consultation	N/A	Published 9/3/2021	Tribal leaders and their designees are invited to provide comments and recommendations on how the FY 2023 President's Budget can effectively support American Indian and Alaska Native governments, organizations, communities and individuals.	•Specific feedback on the highest priority programs and activities recommended for investment in the FY 2023 budget, including associated funding levels. Tribal leaders' feedback on the treatment of these programs and activities in the FY 2023 President's Budget in the context of those included in the Infrastructure Investment and Jobs Act and the Budget Reconciliation process will be particularly helpful to OMB. •Specific technical assistance needs to support the effective use of existing resources, such as through the American Rescue Plan Act, as well as future resources, such as those included in the Infrastructure Investment and Jobs Act and the Budget Reconciliation process. •Options for a potential mandatory funding proposal for the Department of Health and Human Services' Indian Health Service (IHS), including input on the analytical considerations in setting the level for mandatory funding and how this funding should grow in subsequent years.	This Tribal consultation on the President's FY 2023 Budget will be held via teleconference on: Thursday, September 23, 2021 (2:00 p.m. – 4:00 p.m. ET)oRegistration Link: https://ems9.intellor.com/?do=register&t=1&p=902466
3	Tribal Consultation	Office of Management and Budget: Tribal Consultation	N/A	Published 9/3/2021	Tribal consultation on the FY 2023 Budget next Thursday, September 23.	Provide comments and recommendations on how the FY 2023 President's Budget can effectively support AI/AN governments, organizations, communities, and individuals	please use the link below to register to participate in the Tribal consultation. When registering, you will be asked to provide your name, email, title and Tribal leadership position, and Tribal affiliation. You will receive the call-in number and a unique participant code following registration. •Thursday, September 23, 2021 (2:00 p.m. – 4:00 p.m. ET) oRegistration Link: https://ems9.intellor.com?do=register&t=1&p=902466
4	Notice	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	86 FR 50138	Published 9/7/2021	As required by the Federal Advisory Committee Act, the U.S. Department of Health and Human Services (HHS) is hereby giving notice that the COVID-19 Health Equity Task Force (Task Force) will hold a virtual meeting on September 30, 2021. The purpose of this meeting is to present and vote on the final recommendations for mitigating inequities caused or exacerbated by the COVID-19 pandemic and for preventing such inequities in the future.	The Task Force meeting will be held on Thursday, September 30, 2021, from 2 p.m. to approximately 6 p.m. ET (date and time are tentative and subject to change). The confirmed time and agenda will be posted on the COVID-19 Health Equity Task Force web page: www.minorityhealth.hhs.gov/healthequitytaskforce/ when this information becomes available.	This meeting is open to the public and will be live-streamed at *www.hhs.gov/live*. Information about the meeting will be posted on the HHS Office of Minority Health website: *www.minorityhealth.hhs.gov/healthequitytaskforce/* prior to the meeting. https://www.federalregister.gov/documents/2021/09/07/2021-19322/meeting-of-the-covid-19-health-equity-task-force
5	Rule	**Medicare and Medicaid Programs; Adjustment of Civil Monetary Penalties for Inflation; Continuation of Effectiveness and Extension of Timeline for Publication of the Final Rule**	86 FR 50263	Published 9/8/2021	Continuation of effectiveness and extension of timeline for publication of the final rule.	This document announces the continuation of, effectiveness of, and the extension of the timeline for publication of a final rule. We are issuing this document in accordance with the Social Security Act (the Act), which allows an interim final rule to remain in effect after the expiration of the timeline specified in the Act if the Secretary publishes a notice of continuation explaining why we did not comply with the regular publication timeline. This regulation changes the timeline for publication of this final rule to be extended to September 6, 2022.	Federal Register :: Medicare and Medicaid Programs; Adjustment of Civil Monetary Penalties for Inflation; Continuation of Effectiveness and Extension of Timeline for Publication of the Final Rule
6	Tribal Consultation	The White House Council on Envronmental Quality	N/A	Published 9/10/2021	The White House Council on Environmental Quality is hosting a Tribal consultation on CEQ's NEPA Regulations on September 30, 2021 at 2:00 pm EST.	Hear from Tribal leaders on how NEPA affects your Tribe, what is working well currently with the NEPA regulations, and what can be improved. We also welcome other members of your Tribe to participate in the session, as well.	Please register for this event through the link below. When: Sep 30, 2021 02:00 PM Eastern Time (US and Canada) Topic: Tribal Consultation on CEQ NEPA Regulations Revision Registration Link: https://pitc.zoomgov.com/webinar/register/WN_1-8JxgCDQ3-7i67MZe9FbQ
7	DTLL	Department of Health and Human Services	N/A	Published 9/10/2021	Department of Health and Human Services (HHS) in collaboration with the Health Resources and Services Administration (HRSA) released a Dear Tribal Leader Letter (DTLL) on HRSA's Annual Tribal Consultation.	Consultation will be held virtually during the National Indian Health Board's (NIHB) 2021 National Tribal Health Conference (NTHC) on October 8, 2021, from 11:00AM to 1:00PM ET.	

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8	HHS Press	Department of Health and Human Services	N/A	Published 9/10/2021	Department of Health and Human Services (HHS) released an announcement on applications to apply for American Rescue Plan (ARP) rural funding and Provider Relief Fund (PRF) funding for Phase 4. Applications will open on September 29, 2021. Overall, $8.5 billion in ARP funding and $17 billion in PRF funding will be distributed to rural health providers who serve Medicaid, the Children's Health Care Insurance Program (CHIP) and Medicare patients	HHS has also included in this announcement a final 60-day grace period to help providers come into compliance with PRF reporting requirements if they are unable to meet the September 30, 2021, deadline of the first PRF reporting period.	HHS Announces the Availability of $25.5 Billion in COVID-19 Provider Funding | HHS.gov
9	HHS Press	Department of Health and Human Services	N/A	Published 9/10/2021	The U.S. Department of Health and Human Services (HHS), through the Centers for Medicare & Medicaid Services (CMS), is awarding $20 million in American Rescue Plan (ARP) grant funding to State-based Marketplaces (SBMs) to increase consumer access to affordable, comprehensive health insurance coverage.	The grants will be used by 21 SBMs to modernize IT systems and/or conduct targeted consumer outreach activities to help make health care coverage enrollment smoother. As a result, consumers will have access to increased financial assistance and eligibility determinations will be made faster. The 21 SBMs that received the ARP grant funding include the District of Columbia and the following states: Arkansas, California, Colorado, Connecticut, Idaho, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Nevada, New Jersey, New Mexico, New York, Oregon, Pennsylvania, Rhode Island, Vermont, Virginia, and Washington. States with a Federally-Facilitated Marketplace (FFM) were not eligible for this funding opportunity. Grant award amounts range from $500,000 to $1,107,392, and are based on the SBM model and number of successful applicants. The period of performance is from September 10, 2021 through September 9, 2022.	For more information on the 21 SBMs that received the funding and use of the funds, please visit: https://www.cms.gov/cciio/resources/funding-opportunities#Health Insurance Marketplaces.
10	DTLL	White House Tribal Nations Summit	N/A	Published 9/21/2021	The 2021 White House Tribal Nations Summit will occur the **week of November 8 2021**	Specific dates and times will be shared in a follow up announcement. President Biden and the Administration look forward to hosting a robust and meaningful dialogue with Tribal leaders on key issues, policy initiatives, and goals for Indian Country.	Registration can be accessed here https://46eop.force.com/Surveys/survey/runtimeApp.app?invitationId=0Kit00000007DbP&surveyName=X2021_tribal_nations_summit&UUID=a04c1a73-f2ed-4336-8913-a130651387d3
11	Notice	Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS)	86 FR 53070	Published 9/24/2021	In accordance with the Federal Advisory Committee Act, this notice announces that the Secretary's Centers for Disease Control and Prevention (CDC)/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHAC) has scheduled a public meeting.	CHAC provides advice and recommendations to the Secretary of HHS (Secretary) on policy, program development, and other matters of significance concerning the activities under Section 222 of the Public Health Service (PHS) Act, 42 U.S.C. 217a. The purpose of CHAC is to advise the Secretary of HHS, the Director of CDC, and the HRSA Administrator regarding objectives, strategies, policies, and priorities for HIV, viral hepatitis, and other STDs; prevention and treatment efforts, including surveillance of HIV infection, viral hepatitis, and other STDs, and related behaviors; epidemiologic, behavioral, health services, and laboratory research on HIV, viral hepatitis, and other STDs; identification of policy issues related to HIV/viral hepatitis/STD professional education, patient health care delivery, and prevention services; agency policies about prevention of HIV, viral hepatitis and other STDs; treatment, health care delivery, and research and training; strategic issues influencing the ability of CDC and HRSA to fulfill their missions of providing prevention and treatment services; programmatic efforts to prevent and treat HIV, viral hepatitis, and other STDs; and support to the CDC and HRSA in their developoment of responses to emerging health needs related to HIV, viral hepatitis, and other STDs. During the November 3-4, 2021 meeting, CHAC will discuss issues related to engagement in care among people living with HIV using telemedicine; improving STI screenings in people with HIV through the Ryan White HIV/AIDS program; providing housing services at the intersection of substance use disorder, mental health Start Printed Page 53071 and HIV; and patient centered	Information about CHAC and the agenda for this meeting can be found on the CHAC website at *https://www.cdc.gov/maso/facm/facmCHACHSPT.html* and the meeting website at *https://www.chacfall2021.org/* . This meeting will be held virtually by webinar. Advance registration is required to attend. Please visit the meeting website above to register. The registration deadline is Friday, October 29, 2021, at 12:00 p.m. Prior to the meeting, each individual registrant will receive a registration confirmation along with an access link to the virtual meeting location. https://www.federalregister.gov/documents/2021/09/24/2021-20646/meeting-of-the-cdchrsa-advisory-committee-on-hiv-viral-hepatitis-and-std-prevention-and-treatment

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12	Final Rule	Centers for Meidcare & Medicaid Services (CMS), HHS; Monetary Offices, Department of the Treasury	86 FR 53412	Published 9/27/2021	This final rule sets forth revised 2022 user fee rates for issuers offering qualifies health plans (QHPs) through federally-facilitated Exchanges and State-based Exchanges on the Federal platform	repeals separate billing requirements related to the collection of separate payments for the portion of QHP premiums attributable to coverage for certain abortion services; expands the annual open enrollment period and Navigator duties; implements a new monthly special enrollment period for qualified individuals or enrollees, or the dependents of a qualified individual or enrollee, who are eligible for advance payments of the premium tax credit (APTC) and whose household income does not exceed 150% of the Federal poverty level, available during periods of time during which APTC benefits are available such that certain applicable taxpayers' applicable percentage is set at zero, such as during tax years 2021 and 2022 under the section 9661 of the American Rescue Plan Act of 2021; repeals the recent establishment of a Direct Enrollment option for Exchanges; and modifies regulations and policies related to section 1332 waivers.	Final rule is effective on November 26, 2021.
13	Notice	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	86 FR 54223	Published 9/30/2021	As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will be holding the 72nd full Council meeting utilizing virtual technology on Monday, November, 15 and Wednesday, November, 17, 2021 from 1:00-5:00 p.m. (ET) on both days.	PACHA was established by Executive Order 12963, dated June 14, 1995, as amended by Executive Order 13009, dated June 14, 1996 and is currently operating under the authority given in Executive Order 13889, dated September 27, 2019. The Council was established to provide advice, information, and recommendations to the Secretary regarding programs and policies intended to promote effective prevention and care of HIV infection and AIDS. The functions of the Council are solely advisory in nature. The Council consists of not more than 25 members. Council members are selected from prominent community leaders with particular expertise in, or knowledge of, matters concerning HIV and AIDS, public health, global health, philanthropy, marketing or business, as well as other national leaders held in high esteem	Instructions on attending this meeting virtually will be posted one week prior to the meeting at: https://www.hiv.gov/federal-response/pacha/about-pacha. https://www.federalregister.gov/documents/2021/09/30/2021-21275/meeting-of-the-presidential-advisory-council-on-hivaids

NCUIH REGULATIONS TRACKER: October 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Strategic Plan Draft	Environmental Protection Agency (EPA), FY 2022-2026 EPA Strategic Plan Draft	N/A	Published 10/01/2021	EPA's FY 2022-2026 Strategic Plan communicates the Agency's priorities and provides the roadmap for achieving its mission to protect human health and the environment. Building on work already begun under President Biden's Executive Orders (E.O.s) 13985: Advancing Racial Equity and Support for Underserved Communities Through the Federal Government and 14008: Tackling the Climate Crisis at Home and Abroad, and in alignment with the Administration's whole-of-government approach, we are charting a course in this Strategic Plan where tackling climate change and advancing environmental justice and civil rights are integral to all we do in carrying out EPA's mission.	Strategy 4: Strengthen Tribal, State, and Local Partnerships and Enhance Engagemen Strengthening the Nation-to-Nation Relationship with Sovereign Tribal Partners: In accordance with Executive Order 13175: Memorandum on Tribal Consultation and Strengthening Nation-to-Nation Relationships, and in light of the disproportionate impact of environmental pollution on Native Americans, EPA is committed to strengthening its nation-to-nation relationship with American Indian and Alaska Native Tribal Nations. In keeping with the Federal Trust Responsibility, the Agency will endeavor to protect the environmental interests of Indian Tribes when carrying out its responsibilities that may affect Indian country	fy-2022-2026-epa-draft-strategic-plan.pdf
2	Notice	Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).	86 FR 54458	Published 10/1/2021	The Ryan White HIV/AIDS Program (RWHAP) statute of the Public Health Services Act requires that RWHAP Part A, B, and C recipients expend not less than 75 percent of Parts A, B, and C grant funds on core medical services for individuals with HIV/AIDS identified and eligible under the statute, after reserving statutory permissible amounts for administrative and clinical quality management (CQM) costs. The statute also grants the Secretary of HHS authority to waive this requirement if certain requirements are met. HRSA has simplified the process for RWHAP Part A, B, and C recipients to request a waiver of the core medical services expenditure amount requirement by replacing HRSA Policy Number 13-07, "Uniform Standard for Waiver of Core Medical Services Requirement for Grantees Under Parts, A, B, and C" with Policy Notice 21-01, "Waiver of the Ryan White HIV/AIDS Program Core Medical Services Expenditure Requirement."	The RWHAP statute also grants the Secretary of HHS authority to waive this requirement for RWHAP Parts A, B, or C recipients if a number of requirements are met and a waiver request is submitted to HRSA for approval. RWHAP Part A, B, and C core medical services waiver requests—if approved—are effective for a 1-year budget period, and apply to funds awarded under the Minority AIDS Initiative. Currently, for a core medical services waiver request to be approved, (1) core medical services must be available and accessible to all individuals identified and eligible for the RWHAP in the recipient's service area within 30 days, without regard to payer source; (2) there cannot be any AIDS Drug Assistance Program (ADAP) waiting lists in the recipient's service area; and (3) a public process to obtain input on the waiver request from impacted communities, including clients and RWHAP-funded core medical services providers, on the availability of core medical services and the decision to request the waiver must have occurred.	The final policy is effective on October 1, 2021. https://www.federalregister.gov/documents/2021/10/01/2021-21241/final-policy-updates-to-uniform-standard-for-waiver-of-the-ryan-white-hivaids-program-core-medical?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
3	Final Rule	Office of Head Start (OHS), Administration for Children and Families (ACF), Department of Health and Human Services (HHS).	86 FR 55509	Published 10/6/2021	This rule adopts as final the provision to the Head Start Program Performance Standards (HSPPS) to establish parameters by which ACF may make designation renewal determinations during a federally declared major disaster, emergency, or public health emergency (PHE) and in the absence of all normally required data.	The Improving Head Start for School Readiness Act of 2007 (the 2007 Reauthorization) of the Head Start Act (the Act) required ACF to establish a system for determining whether Head Start (including Early Head Start) grantees are delivering high-quality and comprehensive services to the children and families they serve. In 2011, ACF issued a regulation (76 FR 70009) to establish the Designation Renewal System (DRS) to meet this requirement. Under the DRS, all Head Start grants were transitioned from indefinite to 5-year grant periods, and any grant that meets one or more of seven specified conditions during the 5-year project period is subject to an open competition for continued funding. Any Head Start grant that does not meet one of the seven DRS conditions becomes eligible for a new noncompetitive 5-year grant. The Act lays out the types of data that must be considered as part of these DRS determinations. Three of the seven conditions of the DRS were revised through a final rule published on August 28, 2020 (85 FR 53189). Due to the ongoing 2019 Novel Coronavirus (COVID-19) pandemic, the ability of ACF to collect all data on grants required for making determinations under the DRS has been severely impaired. This issue is described further in the following paragraph. Furthermore, there may be major disasters, emergencies, or PHEs in the future that similarly impact ACF's ability to collect all information required for making DRS	ACF conducts an average of five tribal consultations each year for those tribes operating Head Start and Early Head Start. The consultations are held in four geographic areas across the country: Southwest, Northwest, Midwest (Northern and Southern), and Eastern. The consultations are often held in conjunction with other tribal meetings or conferences, to ensure the opportunity for most of the 150 tribes that operate Head Start and Early Head Start programs to be able to attend and voice their concerns about issues regarding service delivery. ACF completes a report after each consultation and then compiles a final report that summarizes the consultations and submits the report to the Secretary at the end of the year. Effective October 6, 2021, the interim final rule published December 7, 2020, at 85 FR 78792, is adopted as final. https://www.federalregister.gov/documents/2021/10/06/2021-19786/flexibility-for-head-start-designation-renewals-in-certain-emergencies?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
3	Notice of Meeting	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).	86 FR 55615	Published 10/6/2021	In accordance with the Federal Advisory Committee Act, the CDC announces the following meeting for the Healthcare Infection Control Practices Advisory Committee (HICPAC). Purpose: The Committee is charged with providing advice and guidance to the Director, Division of Healthcare Quality Promotion (DHQP), the Director, National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), the Director, CDC, the Secretary, Health and Human Services regarding (1) the practice of healthcare infection prevention and control; (2) strategies for surveillance, prevention, and control of infections, antimicrobial resistance, and related events in settings where healthcare is provided; and (3) periodic updating of CDC guidelines and other policy statements regarding prevention of healthcare-associated infections and healthcare-related conditions. Matters To Be Considered: The agenda will include the following updates: The Division Healthcare Quality Promotion; the Healthcare Personnel Guideline Workgroup	Procedures for Public Comment: Time will be available for public comment. Members of the public who wish to provide public comments should plan to attend the public comment session at the start time listed. Please note that the public comment period may end before the time indicated, following the last call for comments. Procedures for Written Comment: The public may submit written comments in advance of the meeting. Comments should be submitted in writing by email to the contact person listed above. The deadline for receipt of written public comment is October 22, 2021. All requests must contain the name, address, and organizational affiliation of the speaker, as well as the topic being addressed. Written comments should not exceed one single-spaced typed page in length. Written comments received in advance of the meeting will be included in the official record of the meeting.	This virtual meeting is open to the public, limited only by audio and web conference lines (300 audio and web conference lines are available). Registration is required. To register for this web conference, please go to: www.cdc.gov/hicpac. All registered participants will receive the meeting link and instructions shortly before the meeting. The meeting will be held on October 28, 2021, from 12:00 p.m. to 1:30 p.m., EDT. Please click the link below to join the webinar: https://cdc.zoomgov.com/j/1609325980?pwd=YmFGbWNLUHlXOEVoakpucXpld0NSUT09 . Meeting ID: 160 932 5980. Passcode: b7G.nXEG. https://www.federalregister.gov/documents/2021/10/06/2021-21806/healthcare-infection-control-practices-advisory-committee-hicpac?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
4	Rule	Office of Personnel Management, Internal Revenue Service, Department of the Treasury; Employee Benefits Security Administration, Department of Labor; Centers for Medicare & Medicaid Services, Department of Health and Human Services	86 FR 55980	Published 10/7/2021	sets forth interim final rules implementing certain provisions of the No Surprises Act, which was enacted as part of the Consolidated Appropriations Act, 2021.	The Department of Health and Human Services (HHS), the Department of Labor (DOL), and the Department of the Treasury (collectively, the Departments) are issuing these interim final rules with largely parallel provisions that apply to group health plans and health insurance issuers offering group or individual health insurance coverage and certified IDR entities, providers, facilities, and providers of air ambulance services. In addition to the interim final rules issued jointly by the Departments, this document also includes interim final rules issued by the Office of Personnel Management (OPM) to clarify how certain No Surprises Act provisions apply to health benefits plans offered by carriers under the Federal Employees Health Benefits (FEHB) Act. In addition to the interim final rules issued jointly by the Departments and OPM, this document includes interim final rules issued by HHS that address good faith estimates of health care items and services for uninsured or self-pay individuals and the associated patient-provider dispute resolution process. The HHS-only interim final rules apply to selected dispute resolution (SDR) entities, providers, facilities, and providers of air ambulance services.	These regulations are effective on October 7, 2021 https://www.federalregister.gov/documents/2021/10/07/2021-21441/requirements-related-to-surprise-billing-part-ii
5	Final Rule	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	86 FR 56144	Published 10/7/2021	The Office of Population Affairs (OPA) in the Office of the Assistant Secretary for Health issues this final rule to revise the regulations that govern the Title X family planning program by readopting the 2000 regulations, with several revisions to ensure access to equitable, affordable, client-centered, quality family planning services for clients, especially low-income clients.	The effect of this 2021 final rule is to revoke the requirements of the 2019 regulations, including removing restrictions on nondirective options counseling and referrals for abortion services and eliminating requirements for strict physical and financial separation between abortion-related activities and Title X project activities, thereby reversing the several revisions to the 2000 regulations.	This rule is effective November 8, 2021 https://www.federalregister.gov/documents/2021/10/07/2021-21542/ensuring-access-to-equitable-affordable-client-centered-quality-family-planning-services
6	Notice of Meeting	U.S. Food and Drug Administration (FDA)	FDA-2021-N-1088	Published 10/12/2021	Food and Drug Administration has scheduled a public meeting regarding requests to amend Pfizer-BioNTech's Emergency Use Authorization (EUA) for administration of their COVID-19 mRNA vaccine to children 5 - 11 years old.	Procedures for Comment: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. FDA is establishing a docket for public comment on this meeting (docket number: FDA-2021-N-1088). The docket will close on October 25, 2021. Late, untimely filed comments will not be considered. Electronic Comments: must be submitted on or before October 25, 2021. Comments received by mail/hand delivery/courier will be considered timely if they are postmarked or the delivery service acceptance receipt is on or before that date. Comments received on or before October 21, 2021, will be provided to the committee. Comments received after October 21, 2021, and by October 25, 2021, will be taken into consideration. On October 26, 2021, oral presentations from the public will be scheduled between approximately 12:45 p.m. and 1:45 p.m. Eastern Time. Those individuals interested in making formal oral presentations should notify CBERVRBPAC@fda.hhs.gov and submit a brief	All meeting participants will be joining this advisory committee meeting via an online teleconferencing platform. The online web conference meeting will be available at the following: YouTube: https://youtu.be/laaL0_xKmmA Yorkcast: https://fda.yorkcast.com/webcast/Play/6ff3dee6ad834af8954fa9eb08a2e0911d
7	Notice of Availability	Food and Drug Administration, Department of Health and Human Services	86 FR 57156	Published 10/13/2021	The FDA is announcing the availability of a final guidance for industry entitled "Voluntary Sodium Reduction Goals: Target Mean and Upper Bound Concentrations for Sodium in Commercially Processed, Packaged, and Prepared Goods."	The guidance describes the FDA's views on voluntary short-term (2.5-year) goals for sodium reduction in a variety of identified categories of foods that are commercially processed, packaged, or prepared. These goals are intended to address the excessive intake of sodium in the current population and promote improvements in public health.	You may submit either electronic or written comments on FDA guidance at any time. All submissions received must include the Docket No. FDA-2014-D-0055 for "Voluntary Sodium Reduction Goals: Target Mean and Upper Bound Concentrations for Sodium in Commercially Processed, Packaged, and Prepared Foods." Received comments will be placed in the docket and, except for those submitted as "Confidential Submissions," publicly viewable at https://www.regulations.gov or at the Dockets Management Staff

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8	Proclamation	Executive Office of the President	86 FR 57307	Published 10/14/2021	President of the United States of America, proclaimed October 11, 2021, as Indigenous Peoples' Day. The Executive Office called upon the people of the United States to observe this day with appropriate ceremonies and activities. Executive Office also directed that the flag of the United States be displayed on all public buildings on the appointed day in honor of our diverse history and the Indigenous peoples who contribute to shaping this Nation.	The Federal Government has a solemn obligation to lift up and invest in the future of Indigenous people and empower Tribal Nations to govern their own communities and make their own decisions.	https://www.federalregister.gov/documents/2021/10/14/2021-22583/indigenous-peoples-day-2021
9	Executive Order	Executive Office of the President	86 FR 57313	Published 10/14/2021	White House Initiative of Advancing Educational Equity, Excellence, and Economic Opportunity for Native Americans and Strengthening Tribal Colleges and Universities The Federal Government is committed to protecting the rights and ensuring the well-being of Tribal Nations while respecting Tribal sovereignty and inherent rights of self-determination.	Executive departments and agencies (agencies) must help advance educational equity, excellence, and economic opportunity for Native American students, whether they attend public schools in urban, suburban, or rural communities; are homeschooled; attend primary and secondary schools operated or funded by the Bureau of Indian Education (BIE) of the Department of the Interior; or attend postsecondary educational institutions, including Tribal Colleges and Universities (TCUs).	https://www.federalregister.gov/documents/2021/10/14/2021-22588/white-house-initiative-on-advancing-educational-equity-excellence-and-economic-opportunity-for
10	Notice	Administration for Children and Families (ACF); HHS; Office of Child Support Enforcement	86 FR 57433	Published 10/15/2021	The Office of Child Support Enforcement (OCSE), Administration for Children and Families (ACF), is requesting approval for a 3-year extension of the Child Support Annual Data Report and Instructions (OCSE-157) with revisions. The current Office of Management and Budget (OMB) approval expires on March 31, 2022.	The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing infocollection@acf.hhs.gov. All requests should be identified by the title of the information collection.
11	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	86 FR 58663	Published 10/22/2021	In accordance with the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC) announces the following meeting of the Advisory Committee on Immunization Practices (ACIP).	The committee is charged with advising the Director, CDC, on the use of immunizing agents. In addition, under 42 U.S.C. 1396s, the committee is mandated to establish and periodically review and, as appropriate, revise the list of vaccines for administration to vaccine-eligible children through the Vaccines for Children program, along with schedules regarding dosing interval, dosage, and contraindications to administration of vaccines. Further, under provisions of the Affordable Care Act, section 2713 of the Public Health Service Act, immunization recommendations of the ACIP that have been approved by the CDC Director and appear on CDC immunization schedules must be covered by applicable health plans. The agenda will include discussions on adult immunization schedule, child/adolescent immunization schedule, Ebola vaccine, hepatitis vaccines, Orthopoxviruses vaccine and COVID vaccines. Recommendation votes on adult immunization schedule, child/adolescent immunization schedule, hepatitis	This meeting is open to the public. Time will be available for public comment. The meeting will be webcast live via the World Wide Web; for more information on ACIP please visit the ACIP website: http://www.cdc.gov/vaccines/acip/index.html. The meeting will be held on November 2-3, 2021, from 10:00 a.m. to 5:00 p.m., EDT (times subject to change). The public may submit written comments from October 22, 2021 through November 3, 2021. You may submit comments identified by Docket No. CDC-2021-0112 by any of the following methods: • Federal eRulemaking Portal: https://www.regulations.gov. Follow the instructions for submitting comments. https://www.federalregister.gov/documents/2021/10/22/2021-23222/advisory-committee-on-immunization-practices-acip?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
12	White House Briefing/ Event Invite	White House Office of Intergovernmental Affairs	N/A	Published 10/22/2021	At the White House Tribal Nations Summit on November 15 and 16, the White House will provide an update on what happened at COP26 and how Tribal Nations and Native Americans can play a role in combatting climate change	You are invited to join a White House Tribal briefing with the Office of the Special Presidential Envoy for Climate about the upcoming UN climate change conference known as the Conference of Parties. This year's Conference of Parties (COP 26) will take place in Glasgow, Scotland between Oct 31-Nov 12, 2021. President Biden plans to attend COP26 and will be bringing a number of Cabinet members and senior administration officials.	To sign up for White House Tribal Affairs: https://mailchi.mp/who.eop.gov/tribal-affairs Additional informational links: •Learn more about the COP26: https://ukcop26.org/uk-presidency/what-is-a-cop/ • Learn more about President Biden's Whole-of-Government effort to tackle the climate crises: https://www.whitehouse.gov/climate/
13	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	86 FR 58912	Published 10/25/2021	The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies to take this opportunity to comment on proposed information collections, as required by the Paperwork Reduction Act of 1995. This notice invites comment on the Research Data Center (RDC) Proposal for Access to Confidential Data for the National Center for Health Statistics (NCHS). The proposed collection will be used to assess researcher's requests for access to confidential NCHS data for their research projects.	You may submit comments, identified by Docket No. CDC-2021-0113 by any of the following methods: - Federal eRulemaking Portal: Relations.gov - Mail: Jeffery M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 16000 Clifton Road NW, MS H21-8, Atlanta, Georgia 30329 - Instructions: All submissions received must include the agency name and Docket Number. All relevant comments received will be posted without change to Regulations.gov , including any personal information provided. For access to the docket to read background documents or comments received, go to Regulations.gov .	Written comments must be received on or before December 27, 2021 https://www.federalregister.gov/documents/2021/10/25/2021-23186/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

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14	Notice	Office of Community Services, Administration for Children and Families, HHS	86 FR 59166	Published 10/26/2021	The Departments are requesting expedited review of an information collection request from the Office of Management and Budget (OMB) and inviting public comment on the proposed collection. The proposed forms are necessary to provide data to the Administration and Congress in its oversight of recipients' performance in administering the Low IncomeStart Printed Page 59167Household Water Assistance Program (LIHWAP) program. The information collection is essential to the mission of the agency for this emergency assistance effort and the use of normal clearance procedures is reasonably likely to disrupt and prevent the collection of information	The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.	Consideration will be given to comments and suggestions submitted within 60 days of this publication. Comments will be considered and any necessary updates to materials made prior to, and responses provided in, the submission to OMB that will follow this public comment period. https://www.federalregister.gov/documents/2021/10/26/2021-23271/expedited-omb-review-and-public-comment-office-of-community-services-data-collection-for-the-low?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
15	Notice and Request for Information (RFI)	Office of Minority Health, Office of the Secretary, Department of Health and Human Services	86 FR 59168	Published 10/26/2021	The Center is tasked with supporting education, service and policy development, and research related to advancing sustainable solutions, to address health disparities and advance health equity among NHPI and American Indian/Alaska Native (AI/AN) populations. This is NOT a solicitation for proposals or proposal abstracts. In efforts to advance health equity, the Departments seek input from Native Hawaiian and Pacific Islander communities, NHPI-serving organizations, and other interested parties regarding their efforts of the new Center for Indigenous Innovation and Health Equity Center.	This RFI and notice of a listening session is for planning purposes only. It is not a notice for a proposal and does not commit the federal government to issue a solicitation, make an award, or pay any costs associated with responding to this announcement.	The virtual listening session will be held on Tuesday, November 2, 2021, from 3:30 p.m.-4:30 p.m. EDT. To register for the listening session, visithttps://www.zoomgov.com/meeting/register/vJisc-6qpj4tGrQwQx2vdmoUfMZmRWXZNDs. Written comments also may be submitted All comments should be emailed to CAPT Samuel Wu at Samuel.Wu@hhs.gov. Please use the subject line "OMH RFI: CIIHE NHPI". https://www.federalregister.gov/documents/2021/10/26/2021-23200/request-for-information-and-notice-of-listening-session-on-efforts-to-advance-health-equity-among?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
16	Notice	Centers for Medicare & Medicaid Services (CMS), Health and Human Services (HHS)	86 FR 59165	Published 10/26/2021	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice.	Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments on the collection(s) of information must be received by the OMB desk officer by November 26, 2021. To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following: 1. Access CMS' website address at website address at: https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html . FOR FURTHER INFORMATION CONTACT: William Parham at (410) 786-4669.
17	Government Accountability Office (GAO)	GAO Office of Public Affairs, Missing or Murdered Indigenous Women	GAO-22-104045	Published 10/28/2021	Research shows that violence against American Indian and Alaska Native women in the U.S. is a crisis. Cases of missing or murdered Indigenous women persist nationwide, but without more comprehensive case data in federal databases, the full extent of the problem is unknown. Two laws, Savanna's Act and the Not Invisible Act—enacted in October 2020—present opportunities to increase and improve data on the number of missing or murdered Indians, including American Indian and Alaska Native women. However, the Department of Justice and the Department of the Interior have not implemented certain requirements to increase intergovernmental coordination and data collection, which remain unfulfilled past their statutory deadlines.	Savanna's Act: Requires the Attorney General, in coordination with the Secretary of the Interior, to confer with tribal organizations and **urban Indian organizations** on how to further improve American Indian and Alaska Native (AI/AN) data relevance and access to databases; Requires the Attorney General to conduct specific outreach to Indian tribes, tribal organizations, and urban Indian organizations regarding the ability to publicly enter information regarding missing persons through NamUs or other non-law-enforcement-sensitive portal. Recommendations for Executive Action: The Attorney General should develop a plan, including milestone dates, to conduct specific outreach to Indian tribes, tribal organizations, and **urban Indian organizations** regarding the ability to publicly enter information regarding missing persons through NamUs or other non-law enforcement sensitive portal Tribal organization officials noted that they would like victim services providers and law enforcement agencies, including at the federal levels, to provide education and other resources to	Please contact Gretta L. Goodwin at goodwing@gao.gov; or Anna Maria Ortiz at ortiza@gao.gov if you are interested in learning more about this report. https://www.gao.gov/assets/gao-22-104045.pdf
18	Notice	Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS)	86 FR 59741	Published 10/28/2021	This notice seeks comments on two updated draft recommendations for (1) providing contraception and (2) screening for human immunodeficiency virus (HIV) infection, as part of the HRSA-supported Women's Preventive Services Guidelines (Guidelines). These updated draft recommendations have been developed through a national cooperative agreement, the Women's Preventive Services Initiative (WPSI), by the American College of Obstetricians and Gynecologists (ACOG).	Under applicable law, non-grandfathered group health plans and health insurance issuers offering non-grandfathered group and individual health insurance coverage must include coverage, without cost sharing, for certain preventive services, including those provided for in the HRSA-supported Women's Preventive Services Guidelines (Guidelines). The Departments of Labor (DOL), Health and Human Services (HHS), and the Treasury have previously issued regulations, which describe how group health plans and health insurance issuers apply the coverage requirements, including the use of reasonable medical management.	Members of the public are invited to provide written comments no later than November 29, 2021. All comments received on or before this date will be reviewed and considered by the WPSI Multidisciplinary Steering Committee. https://www.federalregister.gov/documents/2021/10/28/2021-23498/updated-hrsa-supported-womens-preventive-services-guidelines-contraception-and-screening-for-hiv

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19	Notice and Request for Comments	Indian Health Services (IHS), HHS; Loan Repayment Program (LRP)	86 FR 60055	Published 10/29/2021	the Indian Health Service (IHS) invites the general public to take this opportunity to comment on the information collection Office of Management and Budget (OMB) Control Number 0917-0014, titled, "IHS Loan Repayment Program (LRP)." The IHS is requesting OMB to approve anStart Printed Page 60056extension for this collection, which expires on November 30, 2021. Notice regarding the information collection was last published in the Federal Register (86 FR 43257) on August 6, 2021, and allowed 60 days for public comment. The purpose of this notice is to announce the IHS' intent to submit this collection to OMB and to allow 30 days for public comment to be submitted directly to OMB.	Consideration will be given to all comments received by November 29, 2021. Direct Your Comments To OMB: Send your comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS.	Comments close : 11/29/2021 https://www.federalregister.gov/documents/2021/10/29/2021-23629/request-for-public-comment-30-day-notice-for-extension-of-the-indian-health-service-loan-repayment
20	IHS DULL	IHS, Department of Health and Human Services	N/A	Published 10/29/2021	The Office of Urban Indian Health Programs (OUIHP) Strategic Plan provides recommendations to improve financial transparency and accountability regarding the Agency's budget for Urban Indian health.1 The FY 2020 Report meets this goal and identifies the funds distribution by the OUIHP and IHS Area Offices, including program administration, information technology, initiatives promoting quality improvement, and contract and grant awards	The FY 2020 Report also aligns with the IHS's goal to improve communication with Urban Indian Organizations (UIOs) and other stakeholders, including the public	If you have any questions, please contact Rose Weahkee, Ph.D., Director, OUIHP, IHS, by telephone at (301) 443-1555 or by e-mail at rose.weahkee@ihs.gov. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DUIOLL_10292021.pdf

NCUIH REGULATIONS TRACKER: November 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Notice	Centers for Medicare & Medicaid Services (CMS), HHS	86 FR 60244	Published 11/01/2021	CMS is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.	Comments on the collection(s) of information must be received by the OMB desk officer by December 1, 2021. https://www.federalregister.gov/documents/2021/11/01/2021-23779/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	Notice	Department of Health and Human Services (HHS), Administration for Children and Families (ACF)	N/A	Published 11/01/2021	the Department of Health and Human Services (HHS) along with the Administration for Children and Families (ACF) released $3.3 billion to help individuals and families with heating costs this winter. This initiative will also aid in covering unpaid utility bills. In addition, the Biden administration will work with state, localities, tribes, and energy providers to deploy American Rescue Plan funds and other resources to address these costs	The LIHEAP allocation is timed to make energy assistance funds available to states, the District of Columbia, territories, and tribes ahead of the winter heating season. LIHEAP grantees will be able to use the funding appropriated by Congress through the Extending Government Funding and Delivering Emergency Assistance Act (Public Law 117-43), along with funding made available through the American Rescue Plan Act, to assist more than 5 million households this winter.	Individuals interested in applying for energy assistance should contact their local, state, territory, or tribal LIHEAP agency or call the National Energy Assistance Referral (NEAR) hotline toll-free at: 1-866-674-6327. Individuals can also search for a local intake center near them by clicking here: https://hhs-acf.maps.arcgis.com/apps/opsdashboard/index.html#/683ba3b0c2064498a4a60fc04644a1ea
3	Notice with Comment Period	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	86 FR 60463	Published 11/2/2021	CDC, as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995.	This notice invites comment on a proposed information collection project titled National HIV Behavioral Surveillance among Transgender Women (NHBS-Trans). CDC is requesting approval to continue collecting standardized HIV-related behavioral data from transgender women at risk for HIV. The purpose of this data collection is to monitor behaviors of transgender women at high risk for infection that are related to Human Immunodeficiency Virus (HIV) transmission and prevention in the United States. This includes recruiting, interviewing and providing HIV testing and referral to services (as needed) following CDC protocol.	CDC must receive written comments on or before January 3, 2022. You may submit comments, identified by Docket No. CDC-2021-0111 by any of the following methods: • Federal eRulemaking Portal: Regulations.gov . Follow the instructions for submitting comments. • Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30329. Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to Regulations.gov . Please note: Submit all comments through the Federal eRulemaking portal (regulations.gov) or by U.S. mail to the address listed above. https://www.federalregister.gov/documents/2021/11/02/2021-23872/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_source=federalregister

4	Notice	HHS, IHS (Behavrioral Health Integration Initiative)	86 FR 60867	Published 11/4/2021	IHS is accepting applications for grants for the Behavioral Health Integration Initiative (BH2I) to plan, develop, implement, and evaluate behavioral health integration with primary care, community-based settings, and/or integrating primary care, nutrition, diabetes care, and chronic disease management with behavioral health.	The purpose of the BH2I program is to improve the physical and mental health status of people with behavioral health issues by developing an integrated and coordinated system of care. This effort supports the IHS mission to raise the physical, mental, social, and spiritual health of AI/AN individuals to the highest level. Increasing capacity among Tribal and Urban Indian Organization (UIO) health facilities to implement an integrative approach in the delivery of behavioral health services, including trauma-informed care, nutrition, exercise, social, spiritual, cultural, and primary care services, will improve morbidity and mortality outcomes among the AI/AN population. The total funding identified for fiscal year (FY) 2022 is approximately $6,000,000. Individual award amounts for the first budget year are anticipated to be between $300,000 and $400,000.	The application package and detailed instructions for this announcement are available at https://www.Grants.gov. Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204 https://www.federalregister.gov/documents/2021/11/04/2021-24040/behavioral-health-integration-initiative
5	Notice	HHS, IHS (Domestic Violence Prevention)	86 FR 60875	Published 11/4/2021	IHS is accepting applications for grants for the Domestic Violence Prevention (DVP) program, formerly known as the Domestic Violence Prevention Initiative (DVPI)	The purpose of this IHS grant is to support the development and/or expansion of a DVP program by incorporating prevention efforts addressing social, spiritual, physical, and emotional well-being of victims through the integration of culturally appropriate practices and trauma-informed services for Tribes, Tribal organizations, and Urban Indian organizations (UIO) serving the AI/AN population. This IHS program aims to promote prevention efforts that address domestic and sexual violence, including sexual exploitation/human trafficking, Missing and Murdered AI/AN people, and child maltreatment. total funding identified for fiscal year (FY) 2022 is approximately $7,890,000. Individual award amounts for the first budget year are anticipated to be between $100,000 and $200,000.	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. Applications must be submitted through Grants.gov by 11:59 p.m. Eastern Time on the Application Deadline Date. Any application received after the application deadline will not be accepted for review. https://www.federalregister.gov/documents/2021/11/04/2021-24023/domestic-violence-prevention-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	Notice	HHS, IHS (Suicide Prevention, Intervention, and Postvention)	86 FR 60859	Published 11/4/2021	IHS is accepting applications for a component of the Substance Abuse and Suicide Prevention (SASP) Program: Suicide Prevention, Intervention, and Postvention (SPIP).	The primary purpose of this program is to reduce the prevalence of suicide among American Indian and Alaska Native (AI/AN) populations. Approximately 35 awards will be issued under this program announcement. Up to five awards will be set aside for eligible Urban Indian organizations. The total funding identified for FY 2022 is approximately $14,000,000. Individual award amounts for the first budget year are anticipated to be from $300,000 to $400,000. Approximately 35 awards will be issued under this program announcement	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. The application package and detailed instructions for this announcement are available at https://www.Grants.gov. Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204. https://www.federalregister.gov/documents/2021/11/04/2021-24022/substance-abuse-and-suicide-prevention-program-suicide-prevention-

7	Notice	HHS, IHS (Substance Abuse Prevention, Treatment, and Aftercare)	86 FR 60850	Published 11/4/2021	IHS is accepting applications for a component of the Substance Abuse and Suicide Prevention (SASP) Program: Substance Abuse Prevention, Treatment, and Aftercare (SAPTA).	The purpose of this program is to reduce the prevalence of substance abuse and decrease the overall use of addicting and illicit substances among American Indian and Alaska Native (AI/AN) populations. total funding identified for FY 2022 is approximately $14,000,000. Individual award amounts for the first budget year are anticipated to be between $300,000 and $400,000. Approximately 35 awards will be issued under this program announcement. **Up to five awards will be set aside for eligible UIOs**	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. The application package and detailed instructions for this announcement are available at https://www.Grants.gov. Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204. https://www.federalregister.gov/documents/2021/11/04/2021-24020/substance-abuse-and-suicide-prevention-program-substance-abuse-prevention-treatment-and-aftercare?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
8	Notice	HHS, IHS (Zero Suicide Initiative)	86 FR 60883	Published 11/4/2021	IHS is accepting applications for a cooperative agreement for the Zero Suicide Initiative (ZSI).	The purpose of this program is to improve the system of care for those at risk for suicide by implementing a comprehensive, culturally informed, multi-setting approach to suicide prevention in Indian health systems. This award represents a continuation of the IHS effort to implement the Zero Suicide approach in Indian Country. The intent of this announcement is to initiate a new, or build upon the previous, Zero Suicide Initiative efforts. Existing efforts have focused on foundational learning of the key concepts of the Zero Suicide framework, technical assistance, and consultation for several AI/AN Zero Suicide communities. The total funding identified for fiscal year (FY) 2022 is approximately $2,000,000. Individual award amounts for the first budget year are anticipated to be between $200,000 and $300,000. Approximately 8-10 awards will be issued under this program announcement, with a set aside of **up to two awards issued to eligible UIOs**	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. The application package and detailed instructions for this announcement are available at https://www.Grants.gov. Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204. https://www.federalregister.gov/documents/2021/11/04/2021-24039/zero-suicide-initiative?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
9	Notice, Request for Information	Department of Veteran Affairs (VA)	86 FR 60970	Published 11/4/2021	VA) is requesting information from the public to inform VA's review of access standards for furnishing hospital care, medical services and extended care services to covered veterans, for purposes of the Veterans Community Care Program (VCCP).	VA requests information regarding access standards, including but not limited to, information regarding health plans on the use of access standards for the design of health plan provider networks; referrals from network providers to out-of-network providers; the appeals process for exemptions from benefit limits to out-of-network providers; and the measurement of performance against Federal or State regulatory standards. Further, VA is requesting input on Veterans' experience with the access standards established in 2019.	Comments must be received on or before December 6, 2021. Comments may be submitted through www.regulations.gov. Comments should indicate that they are submitted in response to "Notice of Request for Information Regarding Health Care Access Standards." For further information contact: Natalie Frey, Management Analyst, Office of the Assistant Under Secretary for Health, Office of Community Care, Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420; 720-429-9171. https://www.federalregister.gov/documents/2021/11/04/2021-24041/notice-of-request-for-information-regarding-health-care-access-standards?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

10	Notice	HHS, IHS (Domestic Violence Prevention: Forensic Healthcare Services)	86 FR 60843	Published 11/4/2021	IHS is accepting applications for grants that will develop and/or expand Forensic Healthcare (FHC) services. This program was first established by the Omnibus Appropriations Act of 2009, Public Law 111-8, 123 Stat. 524, 735, as a component of the Domestic Violence Prevention Initiative, and continued in the annual appropriations acts since that time.	The purpose of this IHS grant is to provide access to treatment for AI/AN victims of domestic and sexual violence by supporting the development of and/or expansion of FHC services that are culturally appropriate and trauma-informed. The intent is to impact FHC services in each IHS Area (provided by Tribes, Tribal organizations and **Urban Indian organizations**). This also includes promoting treatment, intervention, and prevention efforts for the social, spiritual, and emotional well-being of victims, including victims of child maltreatment. To address domestic and sexual violence, including victims of sexual exploitation/human trafficking, applicants are encouraged to use Multidisciplinary Team (MDT) and Sexual Assault Response Team (SART) approaches. Using these types of team approaches is crucial—especially among local, state, and Federal agencies that includes health care providers, law enforcement, child protective services, social services, legal services, domestic violence coalitions, behavioral health services, and victim advocacy. The MDT/SART are community-based approaches in responding to sexual assault, intimate partner violence, and sexual abuse victims. Without the advantage of a team approach method, a program is more likely to fail. Improving collaboration through formal inter-agency agreements can improve the response time for sexual assault victims.	Application Deadline Date: February 2, 2022. Earliest Anticipated Start Date: March 21, 2022. The application package and detailed instructions for this announcement are available at https://www.Grants.gov. Please direct questions regarding the application process to Mr. Paul Gettys at (301) 443-2114 or (301) 443-5204. The total funding identified for fiscal year (FY) 2022 is approximately $2,500,000. Individual award amounts for the first budget year are anticipated to be $250,000 Approximately 10 awards will be issued under this program announcement with **up to one award set aside for an eligible Urban Indian organization.**
11	Dear Urban Indian Organization Leader	Department of Health and Human Services(HHS) response to comments shared during Urban Confer	N/A	Published 11/4/2021	The 1996 MOA between the Health Care Financing Administration (then HCFA, now CMS) and the IHS, which was referenced during the Urban Confer session, does not provide HHS with authority to require that state Medicaid programs adopt the IHS All-Inclusive Rate as a Medicaid provider payment rate for UIOs. The MOA explains that CMS would provide 100 percent Federal match for state expenditures on Medicaid services received through certain health care facilities owned and operated by Tribes and Tribal Organizations pursuant to the Indian Self-Determination and Education Assistance Act (ISDEAA). By its terms, the MOA does not include Urban Indian Organization facilities. The ARP has authorized a temporary 100 percent Federal match for state Medicaid expenditures on services received through certain UIOs. However, nothing in the ARP, IHS authorities, or the 1996 MOA supports a conclusion that states must adopt the IHS All-Inclusive Rate as the Medicaid provider payment rate for UIOs.	IHS will continue to engage in discussions within HHS regarding the possible calculation of an Urban Indian Organization-specific All-Inclusive Rate. We will seek additional input from Urban Indian Organization Leaders on whether and how to calculate an AIR for UIOs. I	If you have questions, please contact Mr. Rick Mueller, Deputy Director, Office of Urban Indian Health Programs, IHS, by telephone at (301) 443-3787, or by e-mail at rick.mueller@ihs.gov. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DUIOLL_11042021.pdf
12	Notice	Department of Health and Human Services (HHS)	86 FR 61279	Published 11/05/2021	the Health and Human Services Department (HHS) released a notice on the delegation of authority to several heads of federal health care agencies to conduct international health activities such as HIV/AIDs, chronic and environmental disease, and other health activities abroad.	The authority delegated herein includes the authority to determine the necessity of negotiating, executing, and performing such contracts without regard to statutory provisions as related to the negotiation, making, and performance of contracts and performance of work in the United States. This authority is immediately revoked in the event that any subsequent fiscal year HHS appropriations act does not contain the provision currently in section 212(1) or substantially similar authority.	Federal Register :: Assistant Secretary for Administration; Delegation of Authority
13	Interim Final Rule	Centers for Medicare & Medicaid Services (CMS), HHS	86 FR 61555	Published 11/05/2021	This interim final rule with comment period revises the requirements that most Medicare- and Medicaid-certified providers and suppliers must meet to participate in the Medicare and Medicaid programs. These changes are necessary to help protect the health and safety of residents, clients, patients, PACE participants, and staff, and reflect lessons learned to date as a result of the COVID-19 public health emergency. The revisions to the requirements establish COVID-19 vaccination requirements for staff at the included Medicare- and Medicaid-certified providers and suppliers.	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. We post all comments received before the close of the comment period on the following website as soon as possible after they have been received: http://www.regulations.gov. Follow the search instructions on that website to view public comments. CMS will not post on Regulations.gov public comments that make threats to individuals or institutions or suggest that the individual will take actions to harm the individual. CMS continues to encourage individuals not to submit duplicative comments. We will post acceptable comments from multiple unique commenters even if the content is identical or nearly identical to other comments.	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on January 4, 2022. https://www.federalregister.gov/documents/2021/11/05/2021-23831/medicare-and-medicaid-programs-omnibus-covid-19-health-care-staff-vaccination

14	Final Rule	Centers for Medicare & Medicaid Services (CMS), HHS	86 FR 61874	Published 11/8/2021	This final rule updates the End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) for calendar year (CY) 2022. This rule also updates the payment rate for renal dialysis services furnished by an ESRD facility to individuals with acute kidney injury (AKI). In addition, this rule updates requirements for the ESRD Quality Incentive Program (QIP), including a measure suppression policy for the duration of the coronavirus disease 2019 (COVID-19) public health emergency (PHE) as well as suppression of individual ESRD QIP measures for Payment Year (PY) 2022 under the measure suppression policy.	This rule also finalizes that CMS will not score facilities or reduce payment to any facility under the ESRD QIP in PY 2022. Further, this rule finalizes changes to the ESRD Treatment Choices (ETC) Model, which is a mandatory payment model that is focused on encouraging greater use of home dialysis and kidney transplants, to reduce Medicare expenditures while preserving or enhancing the quality of care furnished to Medicare beneficiaries.	These regulations are effective on January 1, 2022. https://www.federalregister.gov/documents/2021/11/08/2021-23907/medicare-program-end-stage-renal-disease-prospective-payment-system-payment-for-renal-dialysis
15	Notice	Substnce Abuse and Mental Health Services Administration (SAMSA), HHS	86 FR 61771	Published 11/8/2021	https://www.federalregister.gov/	The ISMICC will make specific recommendations for actions that agencies can take to better coordinate the administration of mental health services for adults with SMI or children with SED. Not later than one (1) year after the date of enactment of the 21st Century Cures Act, and five (5) years after such date of enactment, the ISMICC shall submit a report to Congress and any other relevant federal department or agency.	Agenda with call-in information will be posted on SAMHSA's website prior to the meeting at: https://www.samhsa.gov/about-us/advisory-councils/meetings. The meeting will provide information on federal efforts related to serious mental illness (SMI) and serious emotional disturbance (SED). DATES: December 16, 2021, 1:00 p.m.-4:00 p.m. (EDT)/Open.
16	HHS Press	HHS, As Vaccinations are Approved for Children Across the Country, U.S. Surgeon General Releases New Community Toolkit for Addressing Health Misinformation	N/A	Published 11/9/2021	As a new phase of the COVID-19 vaccination campaign begins for children ages 5 to 11 years old, U.S. Surgeon General Dr. Vivek Murthy releases a Community Toolkit for Addressing Health Misinformation - PDF to help Americans navigate the serious threat of health misinformation, especially online. Earlier this year, Dr. Murthy issued the first Surgeon General's Advisory of this administration warning people about the urgent threat of health misinformation and calling for a whole-of-society approach to address it.	The Surgeon General's Community Toolkit for Addressing Health Misinformation provides specific guidance to individuals, health care professionals and administrators, teachers, school administrators, librarians, and faith leaders to understand, identify, and stop the spread of health misinformation in their communities. The toolkit comes at a critical time when Americans are learning more about the role technology companies play in the spread of health misinformation.	Health Misinformation Reports and Publications | HHS.gov https://www.hhs.gov/about/news/2021/11/09/as-vaccinations-approved-for-children-across-country-us-surgeon-general-releases-new-community-toolkit-for-addressing-health-misinformation.html
17	Final Rule	Centers for Medicare & Medicaid Services (CMS), HHS	86 FR 62240	Published 11/9/2021	This final rule updates the home health and home infusion therapy services payment rates for calendar year (CY) 2022 in accordance with existing statutory and regulatory requirements. This rule also finalizes recalibration of the case-mix weights and updates the functional impairment levels, and comorbidity adjustment subgroups while maintaining the current low utilization payment adjustment (LUPA) thresholds for CY 2022. Additionally, this rule finalizes a policy to utilize the physical therapy LUPA add-on factor to establish the occupational therapy add-on factor for the LUPA add-on payment amounts and makes conforming regulations text changes to reflect that allowed practitioners are able to establish and review the plan of care.	It also finalizes proposed changes to the Home Health Quality Reporting Program (QRP) including finalizing proposed measure removals and adoptions, public reporting, and modification of effective dates. It also finalizes proposed modifications to the effective date for the reporting of measures and certain standardized patient assessment data in the Inpatient Rehabilitation Facility (IRF) QRP and Long-Term Care Hospital (LTCH) QRP. In addition, this final rule codifies certain Medicare provider and supplier enrollment policies. It also makes permanent selected regulatory blanket waivers related to home health aide supervision that were issued to Medicare participating home health agencies during the COVID-19 public health emergency (PHE), and updates the home health conditions of participation regarding occupational therapists assessment completion to implement provisions of the Consolidated Appropriations Act, 2021 (CAA 2021). This final rule also finalizes proposals to expand the Home Health Value-Based Purchasing (HHVBP) Model and to end the original HHVBP Model one year early. Lastly, it establishes survey and enforcement requirements for hospice programs as set forth in the CAA 2021; and finalizes revisions to the infection control requirements for long-term care (LTC) facilities (Medicaid nursing facilities and Medicare skilled nursing facilities, also collectively known as "nursing homes") that will extend the mandatory COVID-19 reporting requirements beyond the current COVID-19 PHE until December 31, 2024.	These regulations are effective on January 1, 2022. FOR FURTHER INFORMATION CONTACT: Brian Slater, (410) 786-5229, for home health and home infusion therapy payment inquiries. For general information about home infusion payment, send your inquiry via email to HomeInfusionPolicy@cms.hhs.gov https://www.federalregister.gov/documents/2021/11/09/2021-23993/medicare-and-medicaid-programs-cy-2022-home-health-prospective-payment-system-rate-update-home?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
18	Rule	Department of Veteran Affairs (VA)	86 FR 62482	Published 11/10/2021	The Department of Veterans Affairs (VA) is amending its regulations that govern the Supportive Services for Veteran Families (SSVF) Program. This interim final rule will provide a more effective subsidy to veterans in high-cost rental markets; increase the cap on General Housing Assistance to reflect increased costs; and extend the ability of SSVF grantees to provide emergency housing for the most vulnerable, unsheltered veterans and their families.	Comments may be submitted through www.Regulations.gov. Comments should indicate that they are submitted in response to "RIN 2900-AR15—Supportive Services for Veterans Families." Comments received will be available at regulations.gov for public viewing, inspection or copies.	This interim final rule is effective November 10, 2021 FOR FURTHER INFORMATION CONTACT: John Kuhn, National Director, Supportive Services for Veteran Families. 810 Vermont Avenue NW, Washington, DC 20420. (202) 632-8596 (this is not a toll-free telephone number).

19	HHS Press	HHS Announces $143.5 Million to Expand Community-Based Efforts to Address Barriers to COVID-19 Vaccination	N/A	Published 11/10/2021	The US Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), today announced $143.5 million in American Rescue Plan funding to expand community-based efforts to conduct tailored local outreach about vaccines, build vaccine confidence and address barriers to vaccination in their communities.	These awards build on previous HRSA funding for community-based organizations to hire and mobilize community outreach workers to increase vaccine access for the hardest-hit and highest-risk communities. HRSA awarded $125 million in June 2021 to support 14 nonprofit private or public organizations to reach underserved communities in all 50 states. Then in July 2021, HRSA provided even more localized support by awarding another $121 million to 127 local community-based organizations.	To apply for the Community-Based Workforce to Build COVID-19 Vaccine Confidence Funding Opportunity, visit Grants.gov. Applications are due December 10, 2021. Applicants should contact CBOVaccineOutreach@hrsa.gov with any questions. https://www.hhs.gov/about/news/2021/11/10/hhs-announces-143-million-to-expand-community-based-covid-19-vaccination-efforts.html
20	New and Competing Continuation	Indian Health Services (IHS), HHS	86 FR 62546	Published 11/10/2021	The Indian Health Service (IHS) is accepting applications for grants for the 4-in-1 Grant Program. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and Title V of the Indian Health Care Improvement Act(IHCIA), at 25 U.S.C. 1653(c)-(e) (authorizing grants for Health Promotion and Disease Prevention (HP/DP) services, Immunization services, and Mental Health services), and 1660a (authorizing grants for Alcohol and Substance Abuse related services). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as Catalog of Federal Domestic Assistance) under 93.193.	The purpose of this program is to ensure the highest possible health status for Urban Indians. Funding will be used to support the 4-in-1 health program objectives. These programs are integral components of the IHS health care delivery system. Funds from this effort will ensure that comprehensive, culturally acceptable personal and public health services are available and accessible to Urban Indians.	All applications must be submitted via Grants.gov . Please use the https://www.Grants.gov website to submit an application. Find the application by selecting the "Search Grants" link on the homepage. Follow the instructions for submitting an application under the Package tab. No other method of application submission is acceptable. If the applicant cannot submit an application through Grants.gov , a waiver must be requested. Prior approval must be requested and obtained from Mr. Paul Gettys, Acting Director, DGM. A written waiver request must be sent to GrantsPolicy@ihs.gov with a copy to Paul.Gettys@ihs.gov. The waiver request must: (1) Be documented in writing (emails are acceptable) before submitting an application by some other method; and (2) include clear justification for the need to deviate from the required application submission process. https://www.bgov.com/us_regulation/federal_register_document/7028879873358954514 https://www.federalregister.gov/documents/2021/11/10/2021-24577/4-in-1-grant-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
21	Notice	IHS, Department of Health and Human Services	86 FR 62820	Published 11/12/2021	Tribal Self-Governance Planning Cooperative Agreement Program The Indian Health Service (IHS) is accepting applications for Planning Cooperative Agreements for the Tribal Self-Governance Program (TSGP). This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and Title V of the Indian Self-Determination and Education Assistance Act (ISDEAA), 25 U.S.C. 5383(e). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as Catalog of Federal Domestic Assistance) under 93.444.	The purpose of this Planning Cooperative Agreement is to provide resources to Tribes interested in entering the TSGP and to existing Self-Governance Tribes interested in assuming new or expanded PSFAs. Title V of the ISDEAA requires a Tribe or Tribal organization (T/TO) to complete a planning phase to the satisfaction of the Tribe. The planning phase must include legal and budgetary research and internal Tribal government planning and organizational preparation relating to the administration of health care programs. See 25 U.S.C. 5383(d).	Application Deadline Date: February 10, 2022. Earliest Anticipated Start Date: March 28, 2022. https://www.federalregister.gov/documents/2021/11/12/2021-24675/tribal-self-governance-planning-cooperative-agreement-program

22	Notice	IHS, Department of Health and Human Services	86 FR 62826	Published 11/12/2021	Tribal Self-Governance Negotiation Cooperative Agreement Program The Indian Health Service (IHS) is accepting applications for Negotiation Cooperative Agreements for the Tribal Self-Governance Program (TSGP). This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and Title V of the Indian Self-Determination and Education Assistance Act (ISDEAA), 25 U.S.C. 5383(e). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as Catalog of Federal Domestic Assistance) under 93.444.	The purpose of this Negotiation Cooperative Agreement is to provide Tribes with resources to help defray the costs associated with preparing for and engaging in TSGP negotiations. TSGP negotiations are a dynamic, evolving, and tribally-driven process that requires careful planning, preparation, and sharing of precise, up-to-date information by both Tribal and Federal parties. Because each Tribal situation is unique, a Tribe's successful transition into the TSGP, or expansion of their current program, requires focused discussions between the Federal and Tribal negotiation teams about the Tribe's specific health care concerns and plans. One of the hallmarks of the TSGP is the collaborative nature of the negotiations process, which is designed to: (1) Enable a Tribe to set its own priorities when assuming responsibility for IHS PSFAs; (2) observe and respect the government-to-government relationship between the U.S. and each Tribe; and (3) involve the active participation of both Tribal and IHS representatives, including the OTSG. Negotiations are a method of determining and agreeing upon the terms and provisions of a Tribe's Compact and FA, the implementation documents required for the Tribe to enter into the TSGP. The Compact sets forth the general terms of the government-to-government relationship between the Tribe and the Secretary of the U.S. Department of Health and Human Services (HHS). The FA: (1) Describes the length of the agreement (whether it will be annual or multi-year); (2) identifies the PSFAs, or portions thereof, the Tribe will assume; (3) specifies the amount of funding associated with the Tribal assumption; and (4) includes terms required by Federal statutes and other terms agreed to by the parties. Both documents are required to participate in the TSGP and they are mutually negotiated agreements that become legally binding and mutually enforceable after both parties sign	Application Deadline Date: February 10, 2022. Earliest Anticipated Start Date: March 28, 2022. https://www.federalregister.gov/documents/2021/11/12/2021-24679/tribal-self-governance-negotiation-cooperative-agreement-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
23	DULL	IHS, Department of Health and Human Services	N/A	Published 11/15/2021	Indian Health Service (IHS) released a Dear Tribal Leader Letter on an update on the Special Diabetes Program for Indians. Specifically, this letter details the upcoming changes for fiscal year 2022.	Beginning in FY 2022, a mandatory sequester reduces the SDPI funding level from $150 million to $147 million each year. This reflects a required 2 percent reduction, which will continue through FY 2023 under current law.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2021_Letters/DTLL_DUIOLL_11112021.pdf
24	Notice	Office of Assistant Secretary for Public and Indian Housing, Department of Housing and Urban Development (HUD)	86FR 63051	Published 11/15/2021	This notice announces HUD's intention to form the Department's first standing Tribal advisory committee. The committee will be called the `Tribal Intergovernmental Advisory Committee' (TIAC). This notice also solicits comments and recommendations regarding the establishment and structure of the TIAC. The TIAC will be made up of a diverse group of duly elected Tribal leaders representing small, medium, and large federally recognized Tribes. The TIAC is intended to further communications between HUD and federally recognized Tribes on HUD programs, make recommendations to HUD regarding current program regulations, provide advice in the development of HUD's American Indian and Alaska Native (AIAN) housing priorities, and encourage peer learning and capacity building among Tribes and non-Tribal entities. Consistent with HUD's Tribal Government-to-Government Consultation Policy, this notice solicits input on the proposed structure of the TIAC.	The purposes of the TIAC are: (1) To further facilitate intergovernmental communication between HUD and Tribal leaders of federally recognized Tribes on all HUD programs; (2) To make recommendations to HUD regarding current program regulations that may require revision, as well as suggest rulemaking methods to develop such changes. The TIAC will not, however, negotiate any changes to regulations that are subject to negotiated rulemaking under Section 106 of the Native American Housing Assistance and Self-Determination Act (NAHASDA) and will not serve in place of any future negotiated rulemaking committee established by HUD; and (3) To advise in the development of HUD's AIAN housing priorities.	Comments on the proposed structure of the TIAC are due on or before: January 14, 2022. Interested persons are invited to submit comments on the structure of the TIAC. Comments may be submitted to HUD electronically. All submissions must refer to the above docket number and title. Electronic Submission of Comments. Interested persons may submit comments electronically through the Federal eRulemaking Portal at www.regulations.gov.
25	Notice	Health Resources and Services Administration (HRSA), HHS	86 FR 63404	Published 11/16/2021	In compliance with of the Paperwork Reduction Act of 1995, HRSA is submitting an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA's ICR only after the 30-day comment period for this Notice has closed. nformation Collection Request Title: Ryan White HIV/AIDS	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.	Comments on this ICR should be received no later than December 16, 2021 https://www.federalregister.gov/documents/2021/11/16/2021-24922/agency-information-collection-activities-submission-to-omb-for-review-and-approval-public-comment?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

26	Notice	Department of Veteran Affairs (VA)	86 FR 63454	Published 11/16/2021	On December 7, the Committee will receive briefings and updates from the Center for Minority Veterans, National Cemetery Administration, Veterans Experience Office, National Center for Veterans Analysis and Statistics, Office of Tribal Government Relations, and Veterans Benefits Administration. On December 8, the Committee will receive briefings and updates from the Board of Veterans Appeals, Veterans Health Administration, Center for Women Veterans, Mental Health, Inclusion, Diversity, Equity and Access (IDEA) Task Force, Office of Rural Health and Office of Health Equity. On December 9, the Committee will receive briefings and updates on Office of Diversity & Inclusion, Senior Advisor for Pacific Strategies and ex officio updates. The Committee will then hold a leadership exit briefing with Veterans Benefits Administration, Veterans Health Administration and National Cemetery Administration. The Committee will receive public comments from 1:00 p.m. to 1:15 p.m. The Committee will conduct an after-action review	The purposes of the Committee are to: Advise the Secretary on the administration of VA benefits and services to minority Veterans; assess the needs of minority Veterans; and evaluate whether VA compensation, medical and rehabilitation services, outreach, and other programs are meeting those needs. The Committee makes recommendations to the Secretary regarding such activities.	Individuals who wish to provide public comment are invited to submit a 1-2-page summary of their comments no later than November 29, 2021 for inclusion in the official meeting record. Members of the public may also submit written statements for the Committee's review to Ms. Juanita Mullen, at Juanita.Mullen@va.gov. Any member of the public seeking additional information should contact Ms. Juanita Mullen or Mr. Dwayne Campbell at (202) 461-6191. https://www.federalregister.gov/documents/2021/11/16/2021-24909/advisory-committee-on-minority-veterans-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
27	Notice	Substnce Abuse and Mental Health Services Administration (SAMSA), HHS	86 FR 64222	Published 11/17/2021	This notice is to inform the public that the Substance Abuse and Mental Health Services Administration (SAMHSA) intends to award $152,000,000 (total costs) for up to two years to Vibrant Emotional Health for the 988 National Suicide Prevention Lifeline Expansion for Behavioral Health Crisis Response (Lifeline Expansion). Under this cooperative agreement, Vibrant Emotional Health will improve and expand the national Lifeline backup centers, text/chat centers, and Spanish language crisis centers to: (1) Respond, intervene, and provide follow-up to individuals experiencing a behavioral health crisis by recruiting and training additional behavioral health staff; (2) support and expand services for populations at high risk of suicide; and (3) develop the infrastructure needed to meet the increased service demand requirements anticipated with the FCC's national launch of 988 in July 2022.	It is expected that this program will: (1) Increase response rates for national Lifeline backup centers, text/chat centers, and Spanish language crisis centers; (2) increase the workforce capacity of the national Lifeline backup centers, text/chat centers, and Spanish language crisis centers; and (3) improve the oversight and standardization of outcomes of the Lifeline.	FOR FURTHER INFORMATION CONTACT: James Wright, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Rockville, MD 20857; telephone: (240) 276-1615; email: james.wright@samhsa.hhs.gov. https://www.federalregister.gov/documents/2021/11/17/2021-25035/fiscal-year-fy-2022-funding-opportunity?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
28	Executive Order: Office of the President (EO)	E.O. 14053 Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People	86 FR 64337	Published 11/18/2021	The safety and well-being of all Native Americans is a top priority for the Biden Administration. This Administration will work hand in hand with Tribal Nations and Tribal partners to build safe and healthy Tribal communities and to support comprehensive law enforcement, prevention, intervention, and support services.	Given that approximately 70 percent of American Indian and Alaska Natives live in urban areas and part of this epidemic of violence is against Native American people in urban areas, we must continue that work on Tribal lands but also build on existing strategies to identify solutions directed toward the particular needs of urban Native Americans. The Secretary of HHS, in consultation with the Secretary of the Interior and Tribal Nations and after conferring with other agencies, researchers, and community-based organizations supporting indigenous wellbeing, including Urban Indian Organizations, as appropriate, shall develop a comprehensive plan to support prevention efforts that reduce risk factors for victimization of Native Americans and increase protective factors, including by enhancing the delivery of services for Native American victims and survivors, as well as their families and advocates.	EO Signed on 11/15/2021 during the White House Tribal Nation's Summit https://www.federalregister.gov/documents/2021/11/18/2021-25287/improving-public-safety-and-criminal-justice-for-native-americans-and-addressing-the-crisis-of?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
29	Notice	Office of Minority Health, Office of the Secretary, Department of Health and Human Services	86 FR 64951	Published 11/19/2021	Notice of solicitation of nominations for delegates for the Center for Indigenous Innovation and Health Equity Tribal Advisory Committee.	On October 1, 2021, the U.S. Department of Health and Human Services (HHS) Office of Minority Health (OMH) published a notice in the Federal Register inviting nominations of qualified candidates to serve as primary and alternate delegates for the Center for Indigenous Innovation and Health Equity Tribal Advisory Committee (CIIHE TAC), including a submission deadline of October 29, 2021. This notice extends the deadline date for submission of nominations to January 7, 2022 at 11:59 p.m. EST.	Nomination letters for the CIIHE TAC must be sent to the address noted below no later than 11:59 p.m. EST on January 7, 2022. ADDRESSES: All nominations should be emailed to: Violet Woo, Designated Federal Officer for the CIIHE TAC, at Violet.Woo@hhs.gov. Please use the subject line "OMH CIIHE Tribal Advisory Committee". https://www.federalregister.gov/documents/2021/11/19/2021-25292/extension-of-the-deadline-for-nomination-of-delegates-center-for-indigenous-innovation-and-health?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
30	Publication	Bloomberg.Gov, U.S. House of Representatives	N/A	Published 11/22/2021	The Build Back Better Act (BBB) narrowly passed the House on November 19th, 2021. It next moves on to what is expected to be a tumultuous time in the Senate because of the major policy differences that remain, as well as the special procedures governing the Senate's reconciliation process that would guide the debate.	BBB would also extend through March 2025 the special 100 percent federal medical assistance funding formula to support state Medicaid expenditures, first authorized under the American Rescue Plan, for health care services provided by Native Hawaiian Health Care Systems and Urban Indian Health Systems.	https://www.healthaffairs.org/do/10.1377/hblog20211121.674613/full/

31	DULL	IHS, Department of Health and Human Services	N/A	Published 11/22/2021	On November 22, the Indian Health Service (IHS) released a Dear Tribal Leader Letter on initiating Tribal consultation on the allocation of $210 million from the American Rescue Plan Act, $3.5 billion from the Infrastructure Investment and Jobs Act, and $2.35 billion already in the process of appropriation by the Build Back Better Act. This Tribal consultation will take place on December 14, 2021, from 1PM to 3PM EST. Written comments are due December 23, 2021	NCUIH will be holding a prep call on Wednesday, December 15, 2021 from 12:00 p.m. – 1:00 p.m. (EST). Join NCUIH's prep call here. During this meeting, we will review potential talking points and provide a shareable document prior to the IHS Urban Confer Session.	Tribal Leader Letter, Nov 22, 2021 (ihs.gov) https://ihs-gov.zoomgov.com/j/1608027268
32	Notice	Office of Child Care, Administration for Children and Families, HHS	86 FR 66314	Published 11/22/2021	The Administration for Children and Families (ACF), Office of Child Care (OCC) is requesting a 3-year extension of the Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program's Form 1: Demographic and Service Utilization Data (OMB #0970-0389; expiration 6/30/2022). There are minor updates to the existing Form 1.	The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Comments due within 60 days of publication. In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above. https://www.federalregister.gov/documents/2021/11/22/2021-25408/proposed-information-collection-activity-tribal-maternal-infant-and-early-childhood-home-visiting?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
33	Press Release	HHS, HRSA	N/A	Published 11/22/2021	HHS Announces Record Health Care Workforce Awards in Rural and Underserved Communities Biden-Harris Administration has awarded the largest field strength in history for its health workforce loan repayment and scholarship programs thanks to a new $1.5 billion investment, including $1 billion in supplemental American Rescue Plan (ARP) funding and other mandatory and annual appropriations. More than 22,700 primary care clinicians now serve in the nation's underserved tribal, rural and urban communities, including nearly 20,000 National Health Service Corps (NHSC) members, more than 2,500 Nurse Corps nurses, and approximately 250 awardees under a new program, the Substance Use Disorder Treatment and Recovery Loan Repayment Program.	The U.S. Department of Health and Human Services' (HHS) Health Resources and Services Administration (HRSA) oversees these critical programs.	HHS Announces Record Health Care Workforce Awards in Rural and Underserved Communities | HHS.gov
34	Notice	Department of Veteran Affairs (VA)	86 FR 66389	Published 11/22/2021	The Department of Veterans Affairs (VA) is announcing the availability of funds for supportive services grants under the Supportive Services for Veteran Families (SSVF) Program. This Notice of Funding Opportunity (NOFO) contains information concerning the SSVF Program, the renewal and new applicant supportive services grant application processes, and the amount of funding available. Awards made for supportive services grants will fund operations beginning October 1, 2022.	The SSVF Program's purpose is to provide supportive services grants to private non-profit organizations and consumer cooperatives, who will coordinate or provide supportive services to very low-income veteran families who: (i) Are residing in permanent housing and at risk of becoming homeless; (ii) are homeless and scheduled to become residents of permanent housing within a specified time period; or (iii) after exiting permanent housing within a specified time period, are seeking other housing that is responsive to such very low-income veteran family's needs and preferences. SSVF prioritizes the delivery of rapid re-housing services to homeless veteran households. Any applicant proposing to serve an Indian tribal area is strongly encouraged to provide a letter of support from the relevant Indian tribal government.	Applications for supportive services grants under the SSVF Program must be received by the SSVF Program Office by 4:00 p.m. Eastern Time on February 7, 2022 Applicants must submit applications electronically following instructions found at www.va.gov/homeless/ssvf. Applications may not be mailed, hand carried or sent by facsimile (FAX). Applications must be received in the SSVF Program Office by 4:00 p.m. Eastern Time on the application deadline date. https://www.federalregister.gov/documents/2021/11/22/2021-25463/funding-opportunity-under-supportive-services-for-veteran-families-program?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
35	Notice	HHS	N/A	Published 11/23/2021	HHS Announces $35 Million for Telehealth in the Title X Family Planning Program	On November 23, the Department of Health and Human Services (HHS) published an announcement on "$35 Million for Telehealth in the Title X Family Planning Program." This funding is being made available through the American Rescue Plan and aims to expand telehealth infrastructure and capacity to Title X family planning providers.	https://www.hhs.gov/about/news/2021/11/23/hhs-announces-35-million-telehealth-title-x-family-planning-program.html More information about the Title X family planning program is available at https://opa.hhs.gov/grant-programs/title-x-service-grants.

36	Press Release	HHS	N/A	Published 11/23/2021	Biden-Harris Administration Begins Distributing American Rescue Plan Rural Funding to Support Providers Impacted by Pandemic	the U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), began distributing $7.5 billion in American Rescue Plan (ARP) Rural payments to providers and suppliers who serve rural Medicaid, Children's Health Insurance Program (CHIP), and Medicare beneficiaries. The Biden-Harris Administration is committed to providing much-needed relief to rural providers who historically operate on thin margins and have had their financial challenges further exacerbated during the pandemic. The average payment being announced today is approximately $170,700, with payments ranging from $500 to approximately $43 million. More than 40,000 providers in all 50 states, Washington, D.C., and six territories will receive ARP Rural payments	Biden-Harris Administration Begins Distributing American Rescue Plan Rural Funding to Support Providers Impacted by Pandemic | HHS.gov
37	Interim Final Rule	Office of Personnel Management; Internal Revenue Service, Department of the Treasury; Employee Benefits Security Administration, Department of Labor; Centers for Medicare & Medicaid Services, Department of Health and Human Services.	86 FR 66662	Published 11/23/2021	This document sets forth interim final rules implementing provisions of the Internal Revenue Code (the Code), the Employee Retirement Income Security Act (ERISA), and the Public Health Service Act (PHS Act), as enacted by the Consolidated Appropriations Act, 2021 (CAA).	the Department of Health and Human Services (HHS) released an interim final rule on changes to prescription drug and health care spending. This rule will be applicable to all group health plans and health insurance issuers offering group or individual health insurance coverage. This rule aims to increase transparency by requiring these groups to submit information pertaining to prescription drug costs and health care spending.	These changes are effective on December 23, 2021, and comments on this rule are due January 24, 2022 https://www.federalregister.gov/documents/2021/11/23/2021-25183/prescription-drug-and-health-care-spending
38	CMCS Informational Bulletin	CMS	N/A	Published 11/23/2021	Updates to Intake Process for State Submissions to CMS	the Centers for Medicare, and Medicaid Services (CMS) released an information bulletin on new updates to the intake process for states to submit to CMS. Specifically, this bulletin details a new process for state Medicaid and Children's Health Insurance Programs (CHIP) to submit items such as Medicaid state plan amendments (SPAs), CHIP SPAs, 1915 (b) waiver actions and Appendix K 1915(c) waiver amendments. These changes will take effect on February 1, 2022, for all states.	If you have any questions or need additional information, please contact Adrienne Delozier, Senior Technical Advisor, Disabled and Elderly Health Programs Group, Adrienne.Delozier@cms.hhs.gov and Kaitlin Devine, Director, Division of Information Systems, Kaitlin.Devine@cms.hhs.gov
39	Rule	HHS	86 FR 67351	Published 11/26/2021	The U.S. District Court for the District of Columbia in Facing Foster Care et al. v. HHS, 21-cv-00308 (D.D.C. Feb. 2, 2021), has postponed the effectiveness of portions of the final rule making amendments to the Uniform Administrative Requirements, promulgated on January 12, 2021. Those provisions are now effective January 17, 2022.	Specifically, the rule amended paragraph (c), which previously provided that it is a public policy requirement of HHS that no person otherwise eligible will be excluded from participation in, denied the benefits of, or subjected to discrimination in the administration of HHS programs and services based on non-merit factors such as age, disability, sex, race, color, national origin, religion, gender identity, or sexual orientation. Recipients must comply with the public policy requirement in the administration of programs supported by HHS awards. The rule amended paragraph (c) to provide that it is a public policy requirement of HHS that no person otherwise eligible will be excluded from participation in, denied the benefits of, or subjected to discrimination in the administration of HHS programs and services, to the extent doing so is prohibited by Federal statute.	Federal Register :: Grants Regulation; Removal of Non-Discrimination Provisions and Repromulgation of Administrative Provisions Under the Uniform Grant Regulation
40	Notice	Centers for Medicare & Medicaid Services (CMS), Health and Human Services (HHS)	86 FR 67473	Published 11/26/2021	CMS is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action.	Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments must be recived by January 25, 2022 https://www.federalregister.gov/documents/2021/11/26/2021-25816/agency-information-collection-activities-proposed-collection-comment-request?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
41	Notice	Office of the Secretary, HHS	86 FR 67479	Published 11/26/2021	The Federal Medical Assistance Percentages (FMAP), Enhanced Federal Medical Assistance Percentages (eFMAP), and disaster-recovery FMAP adjustments for Fiscal Year 2023 have been calculated pursuant to the Social Security Act (the Act). These percentages will be effective from October 1, 2022 through September 30, 2023.	This notice announces the calculated FMAP rates, in accordance with sections 1101(a)(8) and 1905(b) of the Act, that the U.S. Department of Health and Human Services (HHS) will use in determining the amount of federal matching for state medical assistance (Medicaid), Temporary Assistance for Needy Families (TANF) Contingency Funds, Child Support Enforcement collections, Child Care Mandatory and Matching Funds of the Child Care and Development Fund, Title IV-E Foster Care Maintenance payments, Adoption Assistance payments and Kinship Guardianship	Ann Conmy, Office of Health Policy, Office of the Assistant Secretary for Planning and Evaluation, Room 447D—Hubert H. Humphrey Building, 200 Independence Avenue SW, Washington, DC 20201, (202) 690-6870. https://www.federalregister.gov/documents/2021/11/26/2021-25798/federal-financial-participation-in-state-assistance-expenditures-federal-matching-shares-for?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

42	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	86 FR 67949	Published 11/30/2021	The National Institute for Occupational Safety and Health (NIOSH), within the Centers for Disease Control and Prevention (CDC) announces a CDC Tribal Consultation Session. CDC will host American Indian and Alaska Native (AI/AN) Federally Recognized Tribes for a virtual tribal consultation session on the NIOSH draft strategic plan entitled American Indian and Alaska Native Worker Safety and	The purpose of the consultation meeting is to advance NIOSH's support for, and collaboration with, federally recognized American Indian and Alaska Native (AI/AN) tribes, and to improve the health of AI/AN tribal nations by pursuing research and outreach activities to prevent injuries, illnesses, and fatalities to AI/AN workers. To advance these goals, CDC conducts government-to-government consultations with Indian Tribes represented by the Tribal President, Tribal Chair, or Tribal Governor, or an elected or appointed Tribal Leader, or their authorized representative(s) to the extent practicable and permitted by law before CDC takes any action that will significantly affect Indian Tribes. Consultation is an enhanced form of communication that emphasizes trust, respect, and shared responsibility. It is an open and free exchange of information and opinion among parties that leads to mutual understanding.	The tribal consultation will be held February 3, 2022, from 4:15 p.m. to 6:00 p.m., EST. Zoom Virtual Tribal Consultation. If you wish to attend the virtual consultation session, please register by accessing the CDC web page at: https://cdc.zoomgov.com/meeting/register/vJItdeipqzIvGgMKRWjU6mOIfMiRxs3dggw. https://www.federalregister.gov/documents/2021/11/30/2021-26016/national-institute-for-occupational-safety-and-health-tribal-consultation-session?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
43	Notice	Department of Veteran Affairs (VA), VHA	86 FR 68048	Published 11/30/2021	Veterans Health Administration, Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and it includes the actual data collection instrument.	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function. Refer to "OMB Control No. 2900-0609.	FOR FURTHER INFORMATION CONTACT: Maribel Aponte, Office of Enterprise and Integration, Data Governance Analytics (008), 1717 H Street NW, Washington, DC 20006, (202) 266-4688 or email maribel.aponte@va.gov. Please refer to "OMB Control No. 2900-0609" in any correspondence. https://www.federalregister.gov/documents/2021/11/30/2021-25961/agency-information-collection-activity-under-omb-review-survey-of-veteran-enrollees-health-and-use?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: December 2021

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Notice	Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary of Health, Office of the Secretary, Department of Health and Human Services.	86 FR 68677	Published 12/03/2021	The U.S. Department of Health and Human Services (HHS) solicits written comments on three new objectives proposed to be added to Healthy People 2030 since its launch in August 2020; written comments from the public proposing additional new core, developmental, or research objectives to be included in Healthy People 2030; and evidence-based information regarding the relationship between voter participation and health status as a measure of civic engagement.	HHS will provide opportunities for public input periodically throughout the decade to ensure Healthy People 2030 reflects current public health priorities and public input. The updated set of Healthy People 2030 objectives will be incorporated on www.health.gov/HealthyPeople2030. This updated set will reflect further review and deliberation by federal Healthy People topic area workgroups, the Federal Interagency Workgroup on Healthy People 2030, and other federal subject matter experts.	Written comments and evidence-based information will be accepted through 11:59 p.m. ET, January 10, 2022. https://www.federalregister.gov/documents/2021/12/03/2021-26184/announcement-of-solicitation-of-written-comments-on-proposed-healthy-people-2030-objectives-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	Notice	Administration for Native Americans, Administration for Children and Families, Department of HHS	86 FR 68672	Published 12/03/2021	Pursuant to Section 814 of the Native American Programs Act of 1974 (NAPA), as amended, the Administration for Native Americans (ANA) is required to provide members of the public an opportunity to comment on proposed changes in interpretive rules and general statements of policy and to give notice of the proposed changes no less than 30 days before such changes become effective.	Comments are due by January 3, 2022. If ANA does not receive any significant comments within the 30-day comment period, ANA will proceed with the proposed changes in the respective published NOFOs. The NOFOs will serve as the final notice of these proposed changes.	Comments may be submitted to: Carmelia Strickland, Director of Program Operations, Administration for Native Americans, 330 C Street SW, Washington, DC 20201 or via email to: ANAComments@acf.hhs.gov. https://www.federalregister.gov/documents/2021/12/03/2021-26271/notice-for-public-comment-on-administration-for-native-americans-program-policies-and-procedures?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
3	Notice	CMS	86 FR 69058	Published 12/06/2021	CMS is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice.	Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments on the collection(s) of information must be received by the OMB desk officer by January 5, 2022. https://www.federalregister.gov/documents/2021/12/06/2021-26414/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
4	Notice	CMS	86 FR 69059	Published 12/06/2021	CMS is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action.	Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments must be received by February 4, 2022 https://www.federalregister.gov/documents/2021/12/06/2021-26413/agency-information-collection-activities-proposed-collection-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Notice	Administration for Children and Families (ACF); HHS	86 FR 69062	Published 12/06/2021	Proposed Information Collection Activity; Tribal Child Support Enforcement Annual Data Report (OMB #0970-0320)	The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Comments due within 60 days of publication. In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection. https://www.federalregister.gov/documents/2021/12/06/2021-26323/proposed-information-collection-activity-tribal-child-support-enforcement-annual-data-report-omb?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	Proposed Rule	Administration for Children and Families (ACF); Administration for Native Americans (ANA); HHS	86 FR 69215	Published 12/07/2021	This notice of proposed rulemaking proposes changes to ANA regulations to allow grant recipients to apply for an emergency waiver of part or all of their proposed non-Federal shares (NFS) due to emergency circumstances	Current regulations (45 CFR 1336.50) state that grant recipients can only apply for a waiver for NFS at the time of application or while applying for a non-competitive continuation award. The on-going public health emergency has greatly impacted our recipients. The pandemic has greatly increased the risk of language and cultural decline among Native communities with many Elders dying from the COVID-19 virus. As tribes began closing their revenue generating businesses and other governmental operations due to the COVID-19 pandemic, they lost income they needed to fund Federal projects requiring a NFS. In addition, planned sources of income, such as use of tribal-owned facilities from which to operate the project, as part of the NFS also diminished. NAPA requires a 20 percent cost-share and match requirement. ANA's current cost-share waiver does not allow for a process to address a recipient's inability to meet the cost-share due to an emergency in the middle of a budget period. The proposed revisions to the regulations (45 CFR 1336.50(b)(2)(ii)) add a provision allowing grant recipients to apply for an emergency waiver within the current budget period in order to remedy this burden.	In order to be considered, written comments on this proposed rule must be received on or before February 7, 2022. https://www.federalregister.gov/documents/2021/12/07/2021-25906/native-american-programs?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
7	Press Release	Centers for Disease Control (CDC)	N/A	Published 12/09/2021	CDC is strengthening its booster recommendations and encouraging everyone 16 and older to receive a booster shot.	At this time, only the Pfizer-BioNTech COVID-19 vaccine is authorized and recommended for adolescents aged 16 and 17. More information will be available on CDC's website soon.	CDC Expands COVID-19 Booster Recommendations to 16-and-17-year-olds | CDC Online Newsroom | CDC
8	Rule	Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS)	86 FR 70412	Published 12/10/2021	This notification is to inform the public that CMS is exercising its discretion in how it enforces the payer-to-payer data exchange provisions. As a matter of enforcement discretion, CMS does not expect to take action to enforce compliance with these specific provisions until we are able to address certain implementation challenges.	The decision to exercise enforcement discretion for the payer-to-payer policy until future rulemaking is finalized does not affect any other existing regulatory requirements and implementation timelines finalized in the CMS Interoperability and Patient Access rule finalized on May 1, 2020.	Federal Register :: Medicare and Medicaid Programs; Patient Protection and Affordable Care Act; Interoperability and Patient Access for Medicare Advantage Organizations and Medicaid Managed Care Plans, State Medicaid Agencies, CHIP Agencies and CHIP Managed Care Entities, Issuers of Qualified Health Plans on the Federally-Facilitated Exchanges, and Health Care Providers

9	Notice	Indian Health Service (IHS), HHS	86 FR 70853	Published 12/13/2021	In compliance with the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) invites the general public to take this opportunity to comment on the information collection titled, "Addendum to Declaration for Federal Employment, Child Care and Indian Child Care Worker Positions," Office of Management and Budget (OMB) Control Number 0917-0028. A copy of the supporting statement is available at www.regulations.gov	Requests for Comments: Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the agency processes the information collected in a useful and timely fashion; (c) the accuracy of the public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimates are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.	February 11, 2022. Your comments regarding this information collection are best assured of having full effect if received within 60 days of the date of this publication.
10	Notice	Administration for Native Americans, Administration for Children and Families, Department of HHS	86 FR 70845	Published 12/13/2021	The Administration for Children and Families (ACF), Office of Child Care (OCC) is requesting a 2-year extension to the following information collection: Annual Data Report (ADR) (OMB #0970-0475; expiration date: 2/28/2022). There are no changes requested to the form.	Comments: The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Comments are due on Februrary 28, 2022 https://www.federalregister.gov/documents/2021/12/13/2021-26912/proposed-information-collection-activity-administration-for-native-americans-annual-data-report-adr?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
11	Notice for Public Comment	Administration for Children and Families, HHS	86 FR 71504	Published 12/16/2021	Submission for OMB Review; Low Income Home Energy Assistance Program (LIHEAP) Performance Data Form (OMB #0970-0449) The Administration for Children and Families (ACF) is requesting reinstatement of the Low Income Home Energy Assistance Program (LIHEAP) Performance Data Form (Office of Management and Budget (OMB) #0970-0449, expiration date March 31, 2021) with changes. Changes include additional reporting items to collect Module 2 (Performance Measures) data on the impacts of supplemental federal LIHEAP funds, and other minor changes to the most recent version of this form.	Comments due within 30 days of publication. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the Federal Register . Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.	https://www.federalregister.gov/documents/2021/12/16/2021-27277/submission-for-omb-review-low-income-home-energy-assistance-program-liheap-performance-data-form-omb?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
12	Notice	Administration for Community Living, HHS	86 FR 71506	Published 12/16/20121	Agency Information Collection Activities; Submission for OMB Review; Public Comment Request; National Center on Law and Elder Rights-Resource Support and User Satisfaction; OMB# 0985-0060	The Administration for Community Living (ACL) is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under section 506(c)(2)(A) of the Paperwork Reduction Act of 1995. This 30-Day notice collects comments on the information collection requirements related to the information collection requirements for the National Center on Law and Elder Rights-Resource Support and User Satisfaction [OMB# 0985-0060].	Submit written comments on the collection of information by January 18, 2022. https://www.federalregister.gov/documents/2021/12/16/2021-27258/agency-information-collection-activities-submission-for-omb-review-public-comment-request-national?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
13	Notice	Health Resource and Service Administration (HRSA), HHS	86 FR 71508	Published 12/16/2021	Meeting of the Advisory Committee on Training and Primary Care Medicine and Dentistry: In accordance with the Federal Advisory Committee Act, this notice announces that the Advisory Committee on Training and Primary Care Medicine and Dentistry (ACTPCMD) will hold public meetings for the 2022 calendar year (CY). Information about ACTPCMD, agendas, and materials for these meetings can be found on the ACTPCMD website at https://www.hrsa.gov/advisory-committees/primarycare-dentist/index.html.	Members of the public will have the opportunity to provide comments. Public participants may submit written statements in advance of the scheduled meeting(s). Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to submit a written statement or make oral comments to the ACTPCMD should be sent to Shane Rogers using the contact information above at least 5 business days before the meeting date(s). Individuals who need special assistance or another reasonable accommodation should notify Shane Rogers using the contact information listed above at least 10 business days before the meeting(s) they wish to attend.	ACTPCMD meetings will be held on: February 17, 2022, 10:00 a.m.-5:00 p.m. Eastern Time (ET) and February 18, 2022, 10:00 a.m.-2:00 p.m. ET; and August 2, 2022, 10:00 a.m.-5:00 p.m. ET Shane Rogers, Designated Federal Official, Division of Medicine and Dentistry, Bureau of Health Workforce, HRSA, 5600 Fishers Lane, Room 15N142, Rockville, Maryland 20857; 301-443-5260; or SRogers@hrsa.gov. https://www.federalregister.gov/documents/2021/12/16/2021-27262/meeting-of-the-advisory-committee-on-training-and-primary-care-medicine-and-dentistry?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
14	Executive Order	Executive Office of the President	86 FR 71357	Published 12/16/2021	Transforming Federal Customer Experience and Service Delivery To Rebuild Trust in Government	Purpose. Our Government must recommit to being "of the people, by the people, [and] for the people" in order to solve the complex 21st century challenges our Nation faces. Government must be held accountable for designing and delivering services with a focus on the actual experience of the people whom it is meant to serve. Government must also work to deliver services more equitably and effectively, especially for those who have been historically underserved. Strengthening the democratic process requires providing direct lines of feedback and mechanisms for engaging the American people in the design and improvement of Federal Government programs, processes, and services.	Federal Register :: Transforming Federal Customer Experience and Service Delivery To Rebuild Trust in Government

15	Notice	Department of Veteran Affairs (VA)	86 FR 72687	Published 12/22/2021	Advisory Committee on Tribal and Indian Affairs will virtually meet on January 25, 26, and 27, 2022 to advise the Secretary on all matters relating to Indian Tribes, Tribal organizations, Native Hawaiian Organizations, and Native American Veterans.	This includes advising the Secretary on the administration of healthcare services and benefits to American Indians and Alaska Native Veterans; thereby assessing those needs and whether VA is meeting them. The Advisory Committee on Tribal and Indian Affairs is a newly formed FACA Committee. The Committee provides advice and guidance to the Secretary of Veterans Affairs on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans.	These meeting sessions are open to the public. To access the meetings, please use the following registration link: https://www.zoomgov.com/meeting/register/vJItcO2hpzMsG9dbmWEES3Gw8mE2rJMry8U. Participants need to register for the meeting then will receive a link to access it each day. January 25, 20221:00 p.m.-5:00 p.m. Eastern Standard Time (EST). January 26, 20221:00 p.m.-5:00 p.m. EST. January 27, 20221:00 p.m.-5:00 p.m. EST. https://www.federalregister.gov/documents/2021/12/22/2021-27640/advisory-committee-on-tribal-and-indian-affairs-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
16	Rule	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	86 FR 72531	Published 12/22/2021	Medicare and Medicaid Programs; CY 2022 Home Health Prospective Payment System Rate Update; Home Health Value-Based Purchasing Model Requirements and Model Expansion; Home Health and Other Quality Reporting Program Requirements; Home Infusion Therapy Services Requirements; Survey and Enforcement Requirements for Hospice Programs; Medicare Provider Enrollment Requirements; and COVID-19 Reporting Requirements for Long-Term Care Facilities; Correction	This document corrects technical and typographical errors that appeared in the final rule published in the Federal Register on November 9, 2021 titled "Medicare and Medicaid Programs; CY 2022 Home Health Prospective Payment System Rate Update; Home Health Value-Based Purchasing Model Requirements and Model Expansion; Home Health and Other Quality Reporting Program Requirements; Home Infusion Therapy Services Requirements; Survey and Enforcement Requirements for Hospice Programs; Medicare Provider Enrollment Requirements; and COVID-19 Reporting Requirements for Long-Term Care Facilities".	This correcting document is effective January 1, 2022. https://www.federalregister.gov/documents/2021/12/22/2021-27568/medicare-and-medicaid-programs-cy-2022-home-health-prospective-payment-system-rate-update-home?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
17	Notice, correction	IHS, Department of Health and Human Services	86 FR 72985	Published 12/23/2021	Substance abuse and suicide prevention program: suicide prevention, intervention, and postvention; correction	The Indian Health Service published a Notice of Funding Opportunity in the Federal Register of November 4, 2021, for the Suicide Prevention, Intervention, and Postvention grant program. The notice was missing a section in the description of the required Project Narrative that applicants must submit with their application. The Project Narrative will have a fourth section added, Statement of Need, and the page limit for the Project Narrative will increase from 15 to 17 pages.	Federal Register :: Substance Abuse and Suicide Prevention Program: Suicide Prevention, Intervention, and Postvention; Correction
18	Notice, correction	IHS, Department of Health and Human Services	86 FR 72986	Published 12/23/2021	Substance Abuse and Suicide Prevention Program: Substance Abuse Prevention, Treatment, and Aftercare; Correction	The Indian Health Service published a Notice of Funding Opportunity in the Federal Register of November 4, 2021, for the Substance Abuse Prevention, Treatment, and Aftercare grant program. The notice was missing a section in the description of the required Project Narrative that applicants must submit with their application. The Project Narrative will have a fourth section added, Statement of Need, and the page limit for the Project Narrative increased from 15 to 17 pages.	Federal Register :: Substance Abuse and Suicide Prevention Program: Substance Abuse Prevention, Treatment, and Aftercare; Correction
19	Notice	Department of Veteran Affairs (VA)	86 FR 73412	Published 12/27/2021	Reimbursement for Caskets and Urns for Burial of Unclaimed Remains in a National Cemetery or a VA-Funded State or Tribal Veterans' Cemetery	The Department of Veterans Affairs (VA) is updating the monetary reimbursement rates for caskets and urns purchased for interment in a VA national cemetery or a VA-funded state or tribal veterans' cemetery of veterans who die with no known next of kin and where there are insufficient resources for furnishing a burial container. The purpose of this notice is to notify interested parties of the rates that will apply to reimbursement claims that occur during calendar year (CY) 2022.	This notice is effective January 1, 2022. https://www.federalregister.gov/documents/2021/12/27/2021-27947/reimbursement-for-caskets-and-urns-for-burial-of-unclaimed-remains-in-a-national-cemetery-or-a?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
20	Rule	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	86 FR 73157	Published 12/27/2021	Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; Provider and Supplier Prepayment and Post-Payment Medical Review Requirements; Correction	This document corrects technical errors that appeared in the final rule published in the Federal Register on November 19, 2021 entitled "Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; and Provider and Supplier Prepayment and Post-Payment Medical Review Requirements" (referred to hereafter as the "CY 2022 PFS final rule"). The effective date of the CY 2022 PFS final rule is January 1, 2022.	This correction is effective January 1, 2022. https://www.federalregister.gov/documents/2021/12/27/2021-27853/medicare-program-cy-2022-payment-policies-under-the-physician-fee-schedule-and-other-changes-to-part?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
21	Notice	Bureau of Indian Education, Interior	86 FR 73799	Published 12/28/2022	Agency Information Collection Activities; Tribal Colleges and Universities CARES Act and CRRSA Act Report	invite the public and other Federal agencies to comment on new, proposed, revised, and continuing collections of information. This helps us assess the impact of our information collection requirements and minimize the public's reporting burden. It also helps the public understand our information collection requirements and provide the requested data in the desired format. We are especially interested in public comment addressing the following: (1) Whether or not the collection of information is necessary for the proper performance of the functions of the agency, including whether or not the information will have practical utility; (2) The accuracy of our estimate of the burden for this collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) How might the agency minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of response.	Interested persons are invited to submit comments on or before February 28, 2022. Send your comments on this information collection request (ICR) by mail to Steven Mullen, Information Collection Clearance Officer, Office of Regulatory Affairs and Collaborative Action—Indian Affairs, U.S. Department of the Interior, 1001 Indian School Road NW, Suite 229, Albuquerque, New Mexico 87104; or by email to comments@bia.gov. Please reference OMB Control Number 1076-NEW in the subject line of your comments. https://www.federalregister.gov/documents/2021/12/28/2021-28113/agency-information-collection-activities-tribal-colleges-and-universities-cares-act-and-crrsa-act?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

22	Notice	Centers for Disease Control and Prevention, HHS	86 FR 74417	Published 12/30/2021	National Committee on Vital and Health Statistics will be holding an advisory committee meeting.	As outlined in its Charter, the National Committee on Vital and Health Statistics assists and advises the Secretary of HHS on health data, data standards, statistics, privacy, national health information policy, and the Department's strategy to best address those issues. This includes the adoption and implementation of transaction standards, unique identifiers, operating rules and code sets adopted under the Health Insurance and Portability Act of this meeting, the Committee will receive updates from HHS officials, hold discussions on current health data policy topics, and discuss its work plan for the upcoming period.	This meeting will be held Monday, January 24, 2022 at 10:30 am - 5:30 pm EST and Tuesday, January 25, 2022 at 10:00 am - 4:30 pm EST The public is welcome to obtain the link to attend this meeting by following the instructions that will be posted on the website prior to the meeting at: https://ncvhs.hhs.gov/ https://www.federalregister.gov/documents/2021/12/30/2021-28341/national-committee-on-vital-and-health-statistics?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

NCUIH REGULATIONS TRACKER: January 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Proposed Rule	CMS, HHS	87 FR 584	Published 01/05/2022	Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2023 Request for Comments	This proposed rule includes proposed payment parameters and provisions related to the risk adjustment and risk adjustment data validation programs, as well as proposed 2023 user fee rates for issuers offering qualified health plans (QHPs) through federally-facilitated Exchanges and State-based Exchanges on the Federal platform. This proposed rule also proposes requirements related to prohibiting discrimination based on sexual orientation and gender identity; guaranteed availability; the offering of QHP standardized options through Exchanges on the Federal platform; requirements for agents, brokers, web-brokers, and issuers assisting consumers with enrollment through Exchanges that use the Federal platform; verification standards related to employer sponsored coverage; Exchange eligibility determinations during a benefit year; special enrollment period verification; cost-sharing requirements; Essential Health Benefits (EHBs); Actuarial Value (AV); QHP issuer quality improvement strategies; accounting for quality improvement activity (QIA) expenses and provider incentives for medical loss ratio (MLR) reporting and rebate calculation purposes; re-enrollment, and requirements related to a new State Exchange improper payment measurement program. This proposed rule also seeks comment on how HHS can advance health equity through QHP certification standards and otherwise in the individual and group health insurance markets, and how HHS might address plan choice overload in the Exchanges	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on January 27, 2022. https://www.federalregister.gov/documents/2022/01/05/2021-28317/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2023?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	Notice	Office of Assistant Secretary for Public and Indian Housing, Department of Housing and Urban Development (HUD)	87 FR 473	Published 01/05/2022	Regulatory and Administrative Requirement Flexibilities Available to Native American Programs During CY 2022 and CY 2023 to Tribal Grantees To Assist With Recovery and Relief Efforts on Behalf of Families Affected by Presidentially Declared Disasters	This notification advises the public of waivers and flexibilities from HUD requirements for its Indian Housing Block Grant (IHBG), Indian Community Development Block Grant (ICDBG), and Native Hawaiian Housing Block Grant (NHHBG) grantees located in areas that are covered by Presidentially Declared Disasters (PDDs). A PDD is a major disaster or emergency declared under the Robert T. Stafford Disaster Relief and Emergency Assistance Act that activates an array of federal programs to assist.	Federal Register :: Regulatory and Administrative Requirement Flexibilities Available to Native American Programs During CY 2022 and CY 2023 to Tribal Grantees To Assist With Recovery and Relief Efforts on Behalf of Families Affected by Presidentially Declared Disasters
3	Notice	Office of Assistant Secretary for Public and Indian Housing, Department of Housing and Urban Development (HUD)	87 FR 469	Published 01/05/2022	Regulatory and Administrative Requirement Waivers and Flexibilities Available to HUD Public Housing and Section 8 During CY 2022 and CY 2023 to Public Housing Agencies To Assist With Recovery and Relief Efforts on Behalf of Families Affected by Presidentially Declared Disasters	This notification advises the public of HUD's expedited process for waivers and flexibilities from HUD regulatory and administrative requirements ("HUD requirements") during Presidentially Declared Disasters (PDDs). To respond to PDDs, this notice establishes an expedited process for the review of waiver requests and flexibilities for calendar years (CY) 2022 and 2023, for Public Housing Agencies (PHAs) located within PDDs (PDD PHAs). PDD PHAs may make such requests utilizing the expedited process set forth in this notification.	Federal Register :: Regulatory and Administrative Requirement Waivers and Flexibilities Available to HUD Public Housing and Section 8 During CY 2022 and CY 2023 to Public Housing Agencies To Assist With Recovery and Relief Efforts on Behalf of Families Affected by Presidentially Declared Disasters
4	Bill	Tribal Medical Supplie Stockpile Access Act	N/A	Published 01/04/2022	Sen. Warren and Reps. Gallego and Cole Reintroduce Bicameral Bill to Guarantee Tribal Health Authorities Access to the Strategic National Stockpile Indian Health Service and other tribal health organizations currently lack guaranteed, direct access to federal repository of drugs and medical supplies for emergencies; Legislation would allow the Indian Health Service, tribal health authorities, and urban Indian organizations to access the Strategic National Stockpile and help combat the coronavirus crisis	United States Senator Elizabeth Warren (D-Mass.) and Representatives Ruben Gallego (D-Ariz.) and Tom Cole (R-Okla.) today reintroduced the Tribal Medical Supplies Stockpile Access Act, legislation originally introduced in 2020 that would guarantee that the Indian Health Service (IHS), tribal health authorities, and urban Indian organizations have access to the Strategic National Stockpile (SNS), a federal repository of drugs and medical supplies that can be tapped if a public health emergency could exhaust local supplies. The Tribal Medical Supplies Stockpile Access Act is supported by the National Indian Health Board, the National Congress of American Indians, the National Council of Urban Indian Health, United South and Eastern Tribes Sovereignty Protection Fund, Seattle Indian Health Board, and the Friends Committee on National Legislation.	Sen. Warren and Reps. Gallego and Cole Reintroduce Bicameral Bill to Guarantee Tribal Health Authorities Access to the Strategic National Stockpile | U.S. Senator Elizabeth Warren of Massachusetts (senate.gov)
5	Notice	Office of Minority Health, Office of the Secretary, Department of Health and Human Services	87 FR 1153	Published 1/10/2022	Extension of the Deadline for Nomination of Delegates; Center for Indigenous Innovation and Health Equity Tribal Advisory Committee; Solicitation of Nominations for Delegates	On October 1, 2021, the U.S. Department of Health and Human Services (HHS) Office of Minority Health (OMH) published a notice in the Federal Register inviting nominations of qualified candidates to serve as delegates for the Center for Indigenous Innovation and Health Equity Tribal Advisory Committee (Center TAC, previously referred to as CIIHE TAC), including a submission deadline of October 29, 2021. An extension for the submission deadline of nominations to January 7, 2022, was published on November 19, 2021. This notice extends the deadline date for submission of nominations to March 11, 2022, at 11:59 p.m. EST.	Nomination letters for the Center TAC must be sent to: All nominations should be emailed to: Violet Woo, Designated Federal Officer for the Center TAC, at Violet.Woo@hhs.gov . Please use the subject line "OMH Center Tribal Advisory Committee."no later than 11:59 p.m. EST on March 11, 2022 https://www.federalregister.gov/documents/2022/01/10/2022-00218/extension-of-the-deadline-for-nomination-of-delegates-center-for-indigenous-innovation-and-health?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

6	Notice	Indian Health Service	86 FR 1154	Published 1/10/2022	Urban Indian Education and Research Program	The Indian Health Service (IHS) is accepting applications for cooperative agreements for the Urban Indian Education and Research Organization Program. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and Section 301(a) of the Public Health Service Act, 42 U.S.C. 241(a). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.193. One award will be issued under this program announcement. The total funding identified for fiscal year (FY) 2022 is approximately $1,050,000. Award amount for the first budget year is anticipated to be $1,050,000. The funding available for competing and subsequent continuation awards issued under this announcement is subject to the availability of appropriations and budgetary priorities of the Agency. The IHS is under no obligation to make awards that are selected for funding under this announcement.	Federal Register :: Urban Indian Education and Research Program
7	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS)	87 FR 1842	Published 1/12/2022	Medicare Program; Contract Year 2023 Policy and Technical Changes to the Medicare Advantage and Medicare Prescription Drug Benefit Programs	This proposed rule would revise the Medicare Advantage (MA) (Part C) program and Medicare Prescription Drug Benefit (Part D) program regulations to implement changes related to marketing and communications, past performance, Star Ratings, network adequacy, medical loss ratio reporting, special requirements during disasters or public emergencies, and pharmacy price concessions. This proposed rule would also revise regulations related to dual eligible special needs plans (D-SNPs), other special needs plans, and cost contract plans.	To be assured consideration, comments must be received at one of the addresses provided below, by March 7, 2022. https://www.federalregister.gov/documents/2022/01/12/2022-00117/medicare-program-contract-year-2023-policy-and-technical-changes-to-the-medicare-advantage-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
8	Final Rule	IHS, Department of Health and Human Services	87 FR 2067	Published 1/13/2022	Acquisition Regulations: Buy Indian Act; Procedures for Contracting	The Secretary of the Department of Health and Human Services (HHS) is finalizing regulations guiding implementation of the Buy Indian Act, which provides the Indian Health Service (IHS) with authority to set-aside procurement contracts for Indian-owned and controlled businesses. This rule supplements the Federal Acquisition Regulations (FAR) and the Department of Health and Human Services Acquisition Regulations (HHSAR). This rule supplements the FAR and the HHSAR. This rule formalizes an administrative procedure for all IHS acquisition activities and locations to ensure uniformity for offers submitted by Indian labor and industry under solicitations set-aside under the Buy Indian Act and this part.	This rule is effective March 14, 2022 https://www.federalregister.gov/documents/2022/01/13/2021-28156/acquisition-regulations-buy-indian-act-procedures-for-contracting
9	DULL	IHS, Department of Health and Human Services	N/A	Published 1/14/2022	IHS Urban Emergency Fund (UEF) The UEF is a limited, discretionary allocation managed by the IHS Office of Urban Indian Health Programs (OUIHP) to address some of the one-time, non-recurring emergencies and disaster relief efforts taken by Urban Indian Organizations (as defined by 25 U.S.C. § 1603(29)). Each fiscal year, the OUIHP allocates up to $200,000 to the UEF. Funding is not guaranteed and is subject to the availability of appropriations.	To be eligible for the UEF, n Urban Indian Organization (UIO) must have a contract with the IHS pursuant to 25 U.S.C. § 1653. For purposes of accessing the UEF, an emergency is defined as a sudden, urgent, usually unexpected occurrence or occasion that requires immediate action to avoid imminent or substantial endangerment to public health or safety. These funds are not intended for administration, maintenance, ongoing operations, construction, or for any other purpose that is unrelated to an emergency or disaster relief effort by a UIO. To make a request for the UEF, a UIO must submit a written request to the applicable IHS Area Director, with copies to the Area Chief Contracting Officer and the UIO's Contracting Officer Representative, as soon as reasonably practicable after the emergency situation.	If you have any questions, please contact Mr. Rick Mueller, Deputy Director, OUIHP, IHS, by telephone at (301) 443-3787, or by e-mail at rick.mueller@ihs.gov. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DUIOLL_01142022.pdf
10	Notice	National Council on Disability	87 FR 2638	Published 1/18/2022	The Members of the National Council on Disability (NCD) will hold a quarterly business meeting on Thursday, January 27, 2022, 12:00 p.m.-4:00 p.m., Eastern Standard Time (EST). The Chairman and Executive Committee will provide reports; followed by a summary of NCD's Health Equity Framework and a vote; an update on policy projects and themes work; a community presentation; a presentation of virtual curriculum on disability culture and inclusive storytelling; legislative and public affairs updates; a public comment session focused on home- and community-based services (HCBS) and transitions from congregate settings; an update and training for the Council Members and staff by NCD's administrative, finance, and operations team; and any old or new business before adjourning.	NCD will designate its half hour of public comment exclusively for receiving information for its upcoming project that examines the state of the nation's home- and community-based services (HCBS) prior to and during the COVID-19 pandemic that contributed to the inability of residents with ID/DD to transition to lesser-density community housing options and resulted in widespread deaths. In order to develop NCD's recommendations to policymakers, NCD invites you share your insights in response to the following questions: 1. What federal and policy state levers hold the greatest potential to transition people out of congregate care facilities? 2. What funding streams have you seen or do you think could be effective in bolstering or building up HCBS? 3. What pilots pilot programs have you observed that offer potentially positive solutions to many of the barriers encountered by people trying to acquire HCBS and what others do you think are needed?	To provide comments or notice to present public comment, please send an email to PublicComment@ncd.gov with the subject line "Public Comment" and your name, organization, state, and topic of comment included in the body of your email. Submission should be received no later than January 26 to ensure inclusion. https://www.federalregister.gov/documents/2022/01/18/2022-00969/sunshine-act-meetings?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

11	Notice	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 2613	Published 1/18/2022	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public.	Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments must be received by March 21, 2022 https://www.federalregister.gov/documents/2022/01/18/2022-00735/agency-information-collection-activities-proposed-collection-comment-request?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
12	Notice	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 2614	Published 1/18/2022	This notice announces the next meeting of the APOE (the Panel) in accordance with the Federal Advisory Committee Act. The Panel advises and makes recommendations to the Secretary of the U.S. Department of Health and Human Services (HHS) (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on opportunities to enhance the effectiveness of consumer education strategies concerning the Health Insurance Marketplace®, Medicare, Medicaid, and the Children's Health Insurance Program (CHIP). This meeting is open to the public.	The agenda for the February 3, 2022 meeting will include the following: - welcome and listening session with CMS leadership - recap of previous (September 15, 2021) meeting - CMS programs, initiatives, and priorities - an opportunity for public comment - meeting summary, review of recommendations, next steps	Persons wishing to attend this meeting must register at the website https://www.eventbrite.com/e/apoe-february-3-2022-virtual-meeting-tickets-212590763697 https://www.federalregister.gov/documents/2022/01/18/2022-00745/announcement-of-the-advisory-panel-on-outreach-and-education-apoe-february-3-2022-virtual-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
13	Notice	Health Resources and Services Administration (HRSA), HHS	87 FR 2800	Published 1/19/2022	this notice announces that the Advisory Committee on Heritable Disorders in Newborns and Children (ACHDNC or Committee) has scheduled a public meeting to be held on Thursday, February 10, 2022, and Friday, February 11, 2022. Information about the ACHDNC and the agenda for this meeting can be found on the ACHDNC website at https://www.hrsa.gov/advisory-committees/heritable-disorders/index.html.	During the February 10-11, 2022 meeting, ACHDNC will hear from experts in the fields of public health, medicine, heritable disorders, rare disorders, and newborn screening. Agenda items include the following: (1) Final evidence-based review report on the Mucopolysaccharidosis type II (MPS II) condition nomination for possible inclusion on the RUSP. Following this report, the ACHDNC expects to vote on whether to recommend to the Secretary adding MPS II to the RUSP. (2) A presentation on phase two of the evidence-based review for Guanidinoacetate methyltransferase (GAMT) deficiency. (3) An update on the Krabbe disease condition nomination. (4) A possible vote on whether to move Krabbe disease forward to full evidence-based review. (5) Overview of ACHDNC consumer-friendly resources. (6) A presentation on healthy equity in newborn screening.	Thursday, February 10, 2022, from 10:00 a.m.-3:00 p.m. Eastern Time (ET) and Friday, February 11, 2022, from 10 a.m.-2:30 p.m. ET. Please visit the ACHDNC website for information on registration: https://www.hrsa.gov/advisory-committees/heritable-disorders/index.html. The deadline for registration is 12:00 p.m. ET on February 9, 2022. Instructions on how to access the meeting via webcast will be provided upon registration.
14	Notice	Substnce Abuse and Mental Health Services Administration (SAMSA), HHS	87 FR 2882	Published 1/19/2022	Agency Information Collection Activities: Submission for OMB Review; Comment Request The Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Prevention (SAMHSA/CSAP) is requesting a reinstatement from the Office of Management and Budget (OMB) of information collection regarding the Assessment of Communities Talk to Prevent Underage Drinking, which is implemented by the Underage Drinking Prevention Education Initiatives (UADPEI) within CSAP.	Comments are invited on: (a) Whether the proposed collections of information are necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.	Send comments to Carlos Graham, SAMHSA Reports Clearance Officer, 5600 Fisher Lane, Room 15E57-A, Rockville, MD 20852 OR email him a copy at carlos.graham@samhsa.hhs.gov. Written comments should be received by March 21, 2022. https://www.federalregister.gov/documents/2022/01/19/2022-00860/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
15	Notice	Office of Infectious Disease and HIV/AIDS Policy, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	87 FR 3316	Published 1/21/2022	As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) will hold a virtual meeting. The meeting will be open to the public and public comment will be heard during the meeting.	Members of the public will have the opportunity to provide comment at the NVAC meeting during the public comment period designated on the agenda. Public comments made during the meeting will be limited to three minutes per person to ensure time is allotted for all those wishing to speak. Individuals are also welcome to submit written comments in advance. Written comments should not exceed three pages in length. Individuals submitting comments should email their written comments or their request to provide a comment during the meeting to nvac@hhs.gov at least five business days prior to the meeting.	The meeting will be held February 10-11, 2022. The confirmed meeting times and agenda will be posted on the NVAC website at http:// www.hhs.gov/nvpo/nvac/meetings/index.html as soon as they become available https://www.federalregister.gov/documents/2022/01/21/2022-01101/meeting-of-the-national-vaccine-advisory-committee
16	Notice	Centers for Medicare & Medicaid Services, HHS	87 FR 3301	Published 1/21/2022	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action.	Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments must be received by March 22, 2022. https://www.federalregister.gov/documents/2022/01/21/2022-01183/agency-information-collection-activities-proposed-collection-comment-request

17	Notice	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	87 FR 3314	Published 1/21/2022	The National Advisory Committee on Children and Disasters (NACCD or the Committee) is required by section 2811A of the PHS Act as amended by the Pandemic and All Hazards Preparedness and Advancing Innovation Act (PAHPAIA) and governed by the provisions of the Federal Advisory Committee Act (FACA). The NACCD shall evaluate issues and programs and provide findings, advice, and recommendations to the Secretary of HHS to support and enhance all-hazards public health and medical preparedness, response, and recovery aimed at meeting the unique needs of children and their families across the entire spectrum of their wellbeing. The Secretary of HHS has formally delegated authority to operate the NACCD to ASPR	The NACCD invites those who are involved in or represent a relevant industry, academia, health profession, health care consumer organization, or state, Tribal, territorial or local government to request up to four minutes to address the committee in person via Zoom. Requests to provide remarks to the NACCD during the public meeting must be sent to NACCD@hhs.gov at least 15 days prior to the meeting along with a brief description of the topic. We would specifically like to request inputs from the public on challenges, opportunities, and strategic priorities for national public health and medical preparedness, response and recovery specific to the needs of children and their families in disasters. Presenters who are selected for the public meeting will have audio only for up to four minutes during the meeting.	The NACCD will conduct an inaugural public meeting (virtual) on February 17, 2022. The new advisory committee will be sworn in along with the presentation and discussion of challenges, opportunities, and priorities for national public health and medical preparedness, response and recovery, specific to the needs of children and their families in disasters. A moreStart Printed Page 3315detailed agenda and meeting registration link will be available on the NACCD meeting website https://www.phe.gov/Preparedness/legal/boards/naccd/Pages/default.aspx. https://www.federalregister.gov/documents/2022/01/21/2022-01161/national-advisory-committee-on-children-and-disasters?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
18	Notice	Health Resources and Services Administration (HRSA); Department of Health and Human Services	87 FR 3313	Published FR 1/21/2022	Collection: Public Comment Request; Maternal and Child Health Burea Performance Measures for Discretionary Grant Information Systm	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.	Comments on this ICR should be received no later than March 22, 2022. https://www.federalregister.gov/documents/2022/01/21/2022-01114/agency-information-collection-activities-proposed-collection-public-comment-request-maternal-and?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
19	Notice, update	HHS	87 FR 3315	Published 1/21/2022	Annual Update of the HHS Poverty Guidelines	This notice provides an update of the Department of Health and Human Services (HHS) poverty guidelines to account for last calendar year's increase in prices as measured by the Consumer Price Index.	Effective January 12, 2022 unless an office administering a program using the guidelines specifies a different effective date for that particular program. https://www.federalregister.gov/documents/2022/01/21/2022-01166/annual-update-of-the-hhs-poverty-guidelines?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
20	Notice and request for comments; request for extension of approval	Indian Health Services (IHS)	87 FR 3562	Published 1/24/2022	Request for Public Comment: 60-Day Information Collection: Indian Health Service Purchased/Referred Care Proof of Residency (OMB No. 0917-0040)	Indian Health Service (IHS) invites the general public to take this opportunity to comment on the information collection Office of Management and Budget (OMB) Control Number 0917-0040, titled, Purchased/Referred Care Proof of Residency. The purpose of this notice is to allow 60 days for public comment. A copy of the supporting statement is available at www.regulations.gov (see Docket ID: IHS_FRDOC_0001). written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the agency processes the information collected in a useful and timely fashion; (c) the accuracy of the public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimates are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.	Deadline for Comments: March 25, 2022. Your comments regarding this information collection are best assured of having full effect if received within 60 days of the date of this publication. https://www.federalregister.gov/documents/2022/01/24/2022-01250/request-for-public-comment-60-day-information-collection-indian-health-service-purchasedreferred?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

21	Notice with Comment Period	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	87 FR 3545	Published 1/24/2022	This notice invites comment on a proposed information collection project titled Data Collection for the Residential Care Community and Adult Day Services Center Components of the National Post-Acute and Long-Term Care Study.	The purpose is to collect data for the residential care community and adult day services center components for the 2022 wave of the National Post-Acute and Long-Term Care Study. The OMB is particularly interested in comments that will help: 1. Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; 2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; 3. Enhance the quality, utility, and clarity of the information to be collected; 4. Minimize the burden of the collection of information on those who respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submissions of responses; and 5. Assess information collection costs.	Written comments must be received on or before March 25, 2022. https://www.federalregister.gov/documents/2022/01/24/2022-01264/proposed-data-collections-submitted-for-public-comment-and-recommendations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
22	Notice and Request for Public Comment	Administration for Native Americans, Administration for Children and Families, Department of HHS	87 FR 3562	Published 1/24/2022	Proposed Information Collection Activity; Administration for Native Americans Project Outcome Assessment Survey; (OMB #0970-0379) Respondents: Tribal Governments, Native American nonprofit organizations, and Tribal Colleges and Universities.	ACF is requesting a 3-year extension of the form Administration for Native Americans (ANA) Project Outcome Assessment Survey (OMB #0970-0379, expiration 6/30/2022). There are minor updates and changes requested to the form. The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.	Comments due within 60 days of publication. https://www.federalregister.gov/documents/2022/01/24/2022-01286/proposed-information-collection-activity-administration-for-native-americans-project-outcome?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
23	Notice	Office of the Assistant Secretary for Public Indian Housing (PIH), Department of Housing and Urban Development (HUD)	87 FR 3570	Published 1/25/2022	This notice implements and provides guidance on the provisions of the Fostering Stable Housing Opportunities (FSHO) amendments that are effective through the publication of this notice. This notice also identifies the provisions of FSHO that were effective upon enactment (i.e., December 27, 2020) or otherwise already in effect and advises of actions that may or must be taken now to comply with the changes. Additionally, this notice identifies the provisions of FSHO that require further action from HUD to be implemented. Through this notice, HUD also seeks public comment on certain provisions of FSHO. However, HUD welcomes public comment on any of this notice's provisions.	HUD also seeks public comment on certain provisions of FSHO. Specifically, HUD seeks public comment on the provisions of FSHO related to participation in an FSS program and engagement in education, workforce development, and employment activities and has included specific questions for public comment in each of these sections. While this notice implements these provisions, HUD is seeking public comment in order to determine whether future changes are necessary. HUD also welcomes public comment on any of the other provisions of this notice. QUESTIONS FOR COMMENT: 1. In order to receive an extension of FUPY/FYI assistance, should the cut-off for requiring a youth to enroll in the FSS program be the 36-month mark or is a different cut-off more appropriate based on the requirements of the FSS program? 2. Should HUD establish a minimum number of classes or credits that a youth must be enrolled in or a minimum number of hours that a youth must work in order to receive an extension of FUPY/FYI assistance under this provision? 3. Should HUD establish a maximum number of classes or credits or a maximum number of work hours that a PHA may require in order for a youth to receive an extension of FUPY/FYI assistance under this provision?	Effective date of amendments in Section III of this notice: April 25, 2022. Comment due date: March 25, 2022. https://www.federalregister.gov/documents/2022/01/24/2022-01285/implementation-of-the-fostering-stable-housing-opportunities-amendments?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
24	Notice, Funding Announcement	Indian Health Service (IHS)	87 FR 3819	Published 1/25/2022	IHS is accepting applications for grants for the Tribal Management Grant Program (TMG)	The TMG Program is a competitive grant program that is capacity building and developmental in nature and has been available for federally recognized Indian Tribes and Tribal Organizations (T/TO) since shortly after enactment of the ISDEAA in 1975. The TMG Program was established to assist T/TOs to prepare for assuming all or part of existing IHS programs, functions, services, and activities (PFSAs) and further develop and improve Tribal health management capabilities. The TMG Program provides competitive grants to T/TOs to establish goals and performance measures for current health programs, assess current management capacity to determine if new components are appropriate, analyze programs to determine if a T/TO's management is practicable, and develop infrastructure systems to manage or organize PFSAs. NOTE: UIOs are not eligible for this grant	Application Deadline Date: April 25, 2022. Earliest Anticipated Start Date: June 9, 2022. https://www.federalregister.gov/documents/2022/01/25/2022-01322/tribal-management-grant-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

25	Notice, request for comment	Centers for Medicare & Medicaid Services, HHS	87 FR4031	Published 1/26/2022	The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public.	Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.	Comments on the collection(s) of information must be received by the OMB desk officer by February 25, 2022. Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain . https://www.federalregister.gov/documents/2022/01/26/2022-01495/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
26	Notice, Request for public comment	Office on Trafficking in Persons; Administration for Children and Families; HHS	87 FR 4033	Published 1/26/2022	The Administration for Children and Families (ACF), Office on Trafficking in Persons (OTIP), is requesting a 3-year extension of the Request for Certification of Adult Victims of Human Trafficking (RFC) form (Office of Management and Budget (OMB) #: 0970-0454, expiration 2/28/22). Minor revisions have been made to the form, including the addition of a few fields that will enable OTIP to be more responsive to congressional inquiries, federal reporting requirements, and the needs of victims.	OTIP developed a form for potential victims and their advocates, including case managers, attorneys, law enforcement officers, service providers, and other representatives to provide the required information for certification to HHS in accordance with the TVPA of 2000, as amended. Respondents: Potential victims of a severe form of trafficking in persons and their advocates, including case managers, attorneys, law enforcement officers, service providers, and other representatives.	Comments due within 30 days of publication. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the Federal Register . Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Comments due February 25, 2022. https://www.federalregister.gov/documents/2022/01/26/2022-01524/submission-for-omb-review-request-for-certification-of-adult-victims-of-human-trafficking?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
27	Final Rule	Department of the Treasury	87 FR 4338	Published 1/27/2022	Coronavirus State and Local Fiscal Recovery Funds	The Secretary of the Treasury (Treasury) is adopting as final the interim final rule published on May 17, 2021, with amendments. This rule implements the Coronavirus State Fiscal Recovery Fund and the Coronavirus Local Fiscal Recovery Fund established under the American Rescue Plan Act. The final rule provides broader flexibility and greater simplicity in the program, in response to public comments. Among other clarifications and changes, the final rule provides for the following: - Public Health and Negative Economic Impacts - Premium Pay - Revenue Loss - Water, Sewer, and Broadband Infrastructure	The provisions in this final rule are effective April 1, 2022. https://www.federalregister.gov/documents/2022/01/27/2022-00292/coronavirus-state-and-local-fiscal-recovery-funds?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
28	Notice	Bureau of Indian Affairs, Interior	87 FR 4636	Published 1/28/2022	Indian Entities Recognized by and Eligible To Receive Services From the United States Bureau of Indian Affairs	This notice publishes the current list of 574 Tribal entities recognized by and eligible for funding and services from the Bureau of Indian Affairs (BIA) by virtue of their status as Indian Tribes. The list is updated from the notice published on January 29, 2021 (86 FR 7554) and from the notice published of corrections (Tribal name changes) on April 9, 2021 (86 FR 18552).	Federal Register :: Indian Entities Recognized by and Eligible To Receive Services From the United States Bureau of Indian Affairs

NCUIH REGULATIONS TRACKER: February 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Notice, Request for public comment	Administration for Children and Families	87 FR 5823	Published 02/02/2022	Submission for OMB Review; Tribal Maternal, Infant, and Early Childhood Home Visiting Program Form 1: Demographic and Service Utilization Data	The Administration for Children and Families (ACF), Office of Child Care (OCC) is requesting a 3-year extension of the Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program's Form 1: Demographic and Service Utilization Data (OMB #0970-0389; expiration 6/30/2022). There are minor updates to the existing Form 1. Respondents: Tribal MIECHV Program Grantees. Section 511(h)(2)(A) of Title V of the Social Security Act created the MIECHV Program and authorizes the Secretary of HHS to award grants to Indian tribes (or a consortium of Indian tribes), tribal organizations, or **urban Indian organizations** to conduct an early childhood home visiting program. The legislation set aside 3 percent of the total MIECHV program appropriation for grants to tribal entities. Tribal MIECHV grants, to the greatest extent practicable, are to be consistent with the requirements of the MIECHV grants to states and jurisdictions and include conducting a needs assessment and establishing quantifiable, measurable benchmarks.	Comments due within 30 days of publication. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the Federal Register . Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. https://www.federalregister.gov/documents/2022/02/02/2022-02157/submission-for-omb-review-tribal-maternal-infant-and-early-childhood-home-visiting-program-form-1?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	Notice	CMS	CMS Media Inquiry	Published 2/2/2022	CMS Releases 2023 Medicare Advantage and Part D Advance Notice. Agency seeks input on promoting health equity in Medicare Advantage and Part D plans	the Centers for Medicare & Medicaid Services (CMS) released proposed payment policy changes for Medicare Advantage and Part D drug programs in 2023 that will create more choices and provide affordable options for consumers that meet their unique health needs. The Calendar Year (CY) 2023 Advance Notice for Medicare Advantage (MA) and Part D plans is open to public comment for 30 days. This year, CMS is specifically soliciting input through a health equity lens on the approach to some future potential changes.	Public comments on the Advance Notice must be submitted by March 4, 2022. The Medicare Advantage and Part D payment policies for 2023 will be finalized in the 2023 Rate Announcement, which will be published no later than April 4, 2022. https://www.cms.gov/files/document/2023-advance-notice.pdf
3	Notice of meeting	Bureau of Indian Affairs, Interior	87 FR 6196	Published 2/3/2022	Advisory Board of Exceptional Children will hold a two-day online meeting.	he purpose of the meeting is to meet the mandates of the Individuals with Disabilities Education Act of 2004 (IDEA) for Indian children with disabilities. Agenda available here: https://www.federalregister.gov/documents/2022/02/03/2022-02163/advisory-board-of-exceptional-children?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email	The BIE Advisory Board meeting will be held Wednesday, March 9, 2022, from 8:00 a.m. to 4:00 p.m., Mountain Standard Time (MST) and Thursday, March 10, 2022, from 8:00 a.m. to 4:00 p.m., Mountain Standard Time (MST). https://www.federalregister.gov/documents/2022/02/03/2022-02163/advisory-board-of-exceptional-children?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

4	Notice	Centers for Disease Control and Prevention (CDC), HHS	87 FR 6563	Published 2/4/2022	Announcement of Requirements and Registration for the REACH Lark Galloway-Gilliam Nomination for Advancing Health Equity Challenge (REACH Lark Award Challenge)	The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces the 2022 Racial and Ethnic Approaches to Community Health (REACH) Lark Galloway-Gilliam for Advancing Health Equity Award Challenge (REACH Lark Award Challenge). This biennial challenge was established in 2019 to recognize extraordinary individuals, organizations, or community coalitions associated with the REACH program whose work has contributed to the implementation of culturally tailored interventions that advance health equity, reduce health disparities, and increase community engagement to address preventable risk factors (e.g., tobacco use, poor nutrition, physical inactivity, and inadequate access to clinical services).	The Challenge will accept applications from February 7, 2022 through March 18, 2022. https://www.federalregister.gov/documents/2022/02/04/2022-02409/announcement-of-requirements-and-registration-for-the-reach-lark-galloway-gilliam-nomination-for?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email for more information: https://www.cdc.gov/nccdphp/dnpao/state-local-programs/reach/index.htm
5	Proposed Rule	Department of Veterans Affairs	87 FR 6456	Published 2/4/2022	VA Pilot Program on Graduate Medical Education and Residency	The Department of Veterans Affairs proposes to revise its medical regulations to establish a new pilot program on graduate medical education and residency, as required by section 403 of the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Internal Systems and Strengthening Integrated Outside Network Act of 2018. Proposed § 17.243(a) would establish that proposed §§ 17.243 through 17.248 would implement the VA Pilot Program on Graduate Medical Education and Residency (PPGMER) to place residents in existing or new residency programs in covered facilities and to reimburse certain costs associated with establishing new residency programs in covered facilities, as authorized by section 403 of Public Law 115-182.	Comments must be received on or before April 5, 2022 https://www.federalregister.gov/documents/2022/02/04/2022-02292/va-pilot-program-on-graduate-medical-education-and-residency?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
6	Final Rule	Rural Housing Service, USDA	87 FR 6761	Published 2/07/2022	Direct Single Family Housing Loans and Grants Programs	The Rural Housing Service (RHS or Agency), a Rural Development agency of the United States Department of Agriculture (USDA), is issuing a final rule to amend its Direct Single Family Housing Loans and Grants (DSFHLG) programs regulation. This final rule adopts most changes as presented in the proposed rule published on November 25, 2019, in the Federal Register . This final rule also addresses public comments received by the Agency and makes some modifications based on consideration of those comments, including revisions to the refinancing provisions which will help provide relief to homeowners who have difficulty keeping their accounts current (e.g., coming off a payment moratorium), based on the availability of funds and Agency priorities. The purpose of the DSFHLG programs is to assist low-and very-low-income applicants to obtain decent, safe, and sanitary single-family housing in eligible rural areas.	Effective on March 9, 2022 https://www.federalregister.gov/documents/2022/02/07/2022-02470/direct-single-family-housing-loans-and-grants-programs?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
7	Notice	Office of the Secretary, Interior	87 FR 7201	Published 2/8/2022	List of Programs Eligible for Inclusion in Funding Agreements Negotiated With Self-Governance Tribes by Interior Bureaus Other Than the Bureau of Indian Affairs and Fiscal Year 2022 Programmatic Targets	This notice lists programs or portions of programs that are eligible for inclusion in self-governance funding agreements with Indian Tribes and lists Fiscal Year 2022 programmatic targets for each of the non-Bureau of Indian Affairs (BIA) bureaus in the Department of the Interior (Department), pursuant to Title IV of the Indian Self-Determination and Education Assistance Act (Act), as amended.	These programs are eligible for inclusion in self-governance funding agreements until September 30, 2022. https://www.federalregister.gov/documents/2022/02/08/2022-02584/list-of-programs-eligible-for-inclusion-in-funding-agreements-negotiated-with-self-governance-tribes?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

8	Notice with Comment Period	Centers for Disease Control and Prevention (CDC), HHS	87 FR 7838	Published 2/10/2022	Proposed 2022 CDC Clinical Practice Guideline for Prescribing Opioids	The clinical practice guideline includes recommendations for primary care clinicians (including physicians, nurse practitioners, and physician assistants) as well as for outpatient clinicians in other specialties (including those managing dental and postsurgical pain in outpatient settings and emergency clinicians providing pain management for patients being discharged from emergency departments). This voluntary clinical practice guideline provides recommendations and does not require mandatory compliance; and the clinical practice guideline is intended to be flexible so as to support, not supplant, clinical judgment and individualized, patient-centered decision-making.	Written comments must be received on or before April 11, 2022. https://www.federalregister.gov/documents/2022/02/10/2022-02802/proposed-2022-cdc-clinical-practice-guideline-for-prescribing-opioids?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
9	Rule	CMS, HHS	87 FR 7746	Published 2/10/2022	Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; Provider and Supplier Prepayment and Post-Payment Medical Review Requirements; Corrections	In the November 19, 2021 issue of the Federal Register , we published a final rule entitled "Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Provider Enrollment Regulation Updates; and Provider and Supplier Prepayment and Post-Payment Medical Review Requirements" (referred to hereafter as the "CY 2022 PFS final rule"). The effective date was January 1, 2022. This document corrects a limited number of technical and typographical errors identified in the November 19, 2021 final rule	This document is effective February 10, 2022, and is applicable beginning January 1, 2022.
10	Notice	Community Development Financial Institutions Fund	87 FR 8197	Published 2/11/2022	Notice of Funds Availability (NOFA) inviting Applications for Financial Assistance (FA) awards or Technical Assistance (TA) grants under the Native American CDFI Assistance (NACA Program) fiscal year (FY) 2022 Funding Round.	Through the NACA Program, the Community Development Financial Institutions (CDFI) Fund provides (i) FA awards of up to $1 million to Certified Community Development Financial Institutions (CDFIs) serving Native American, Alaska Native, or Native Hawaiian populations or Native American areas defined as Federally-designated reservations, Hawaiian homelands, Alaska Native Villages and U.S. Census Bureau-designated Tribal Statistical Areas (collectively, "Native Communities") to build their financial capacity to lend to Eligible Markets and/or their Target Markets, and (ii) TA grants of up to $150,000 to build Certified, and Emerging CDFIs' organizational capacity to serve Eligible Markets and/or their Target Markets, and Sponsoring Entities' ability to create Certified CDFIs that serve Native Communities. All awards provided through this NOFA are subject to funding availability.	Federal Register :: Notice of Funds Availability
11	Notice. Request for Public Comment	IHS, Department of Health and Human Services	87 FR 8020	Published 2/11/2022	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, "Urban Indian Organization On-Site Review," Office of Management and Budget (OMB) Control Number 0917-00XX. IHS is requesting OMB to approve a new collection.	Urban Indian Organization On-Site Review. Need and Use of Information Collection: The Office of Urban Indian Health Programs (OUIHP) at IHS Headquarters provides national oversight of the annual on-site reviews. The IHS Urban Indian Organization On-Site Review is conducted annually by the IHS Area Offices to evaluate IHS-funded Urban Indian Organizations compliance with Federal Acquisition Regulation (FAR) contractual requirements and grant requirements established through the IHCIA. The on-site review requirements are based on best-practice standards for delivering safe and high quality health care. Agency Form Number: none. Members of Affected Public: IHS-funded Urban Indian Organizations. Status of the Proposed Information Collection: new.	Comment due date: April 12, 2022 https://www.federalregister.gov/documents/2022/02/11/2022-02969/request-for-public-comment-60-day-information-collection-urban-indian-organization-on-site-review?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

12	Notice of meeting	Substnce Abuse and Mental Health Services Administration (SAMSA), HHS	87 FR 8025	Published 2/11/2022	Meeting of the Substance Abuse and Mental Health Services Administration National Advisory Council	Notice is hereby given for the meeting on March 24, 2022 of the Substance Abuse and Mental Health Services Administration National Advisory Council (SAMHSA NAC). The meeting is open to the public and can only be accessed virtually. Agenda with call-in information will be posted on the SAMHSA website prior to the meeting at: https://www.samhsa.gov/about-us/advisory-councils/meetings. The meeting will include, but not be limited to, remarks from the Assistant Secretary for Mental Health and Substance Use; approval of prior meeting minutes; updates on SAMHSA priorities; follow up on topics related to the previous SAMHSA NAC meeting; and council discussions.	March 24, 2022 1:00 pm - 5:00 pm EST https://www.federalregister.gov/documents/2022/02/11/2022-02900/meeting-of-the-substance-abuse-and-mental-health-services-administration-national-advisory-council?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
13	Notice	Health Resource and Service Administration (HRSA), HHS	87 FR 8265	Published 2/14/2022	Meeting of the Advisory Committee on Infant and Maternal Mortality 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.	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. The agenda for the March 15-16, 2022, meeting is being finalized and may include the following topics: Federal program updates; COVID-19 updates; race-concordant care, health of indigenous mothers and babies; and, the impact of violence on infant and maternal mortality. Agenda items are subject to change as priorities dictate. Refer to the ACIMM website listed above for any updated information concerning the meeting.	March 15, 2022, 12:00 p.m. to 4:00 p.m. Eastern Time and March 16, 2022, 12:00 p.m. to 4:00 p.m. Eastern Time. https://www.federalregister.gov/documents/2022/02/14/2022-03027/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
14	Notice of request for nominations	Bureau of Indian Affairs, Interior	87 FR 8284	Published 2/14/2022	Request for nominations of members to serve on the Bureau of Indian Education Advisory Board for Exceptional Children	There will be three positions available to specifically serve in the areas of Indian parents or guardians of children with disabilities within the BIE school system or Indian persons with disabilities. Board members shall serve a staggered term of two years or three years from the date of their appointment. The BIE will consider nominations received in response to this request for nominations, as well as other sources.	Please submit nominations by April 15, 2022.
15	Final Rule	Federal Communications Commission	87 FR 8346	Published 2/14/2022	Affordable Connectivity Program; Emergency Broadband Benefit Program	the Federal Communications Commission (Commission or FCC) adopts final rules for the Affordable Connectivity Program, established by Congress in the Infrastructure Investment and Jobs Act (Infrastructure Act). The Affordable Connectivity Program is designed to make broadband service and connected devices available to eligible low-income households at affordable, discounted prices from providers that opt to participate in the program. The rules adopted in the Report and Order address, inter alia, the eligibility criteria for broadband service providers that opt to participate in the program, eligibility criteria for households that seek benefits, the types of broadband services and connected devices that will be covered, the amounts of reimbursements available to providers, claims procedures, consumer protection requirements, and reporting, auditing, enforcement, and related matters.	Effective March 16, 2022, except for 47 CFR 54.1802(b), 54.1804, 54.1807(b), 54.1808(c)(1) and (2), 54.1809(c), and 54.1810(a) and (b), which are effective April 15, 2022. https://www.federalregister.gov/documents/2022/02/14/2022-02887/affordable-connectivity-program-emergency-broadband-benefit-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

16	Notice of Tribal Consultation	Department of Veteran Affairs (VA)	87 FR 8342	Published 2/14/2022	Department of Veterans Affairs' Tribal Representation Expansion Project	The Department of Veterans Affairs (VA) is seeking Tribal consultation on "The Tribal Representation Expansion Project (T. REP)", a project through which VA strives to ensure that Native American Veterans have access to responsible, qualified representation in the preparation, presentation, and prosecution of their benefit claims before VA. VA is seeking comments on whether Tribal communities currently have access to representation for VA benefit claims and, for those Tribes that are being underserved in terms of representation, whether the Tribal governments may be interested in collaborating with VA to designate an individual within the community as authorized to prepare, present, and prosecute VA benefit claims. In addition, VA is seeking comments and recommendations on any issues, concerns, or processes the Tribes believe should be addressed in T. REP to better ensure that the project is successful in helping to expand access to representation for Native American Veterans on their benefit claims before VA.	VA will hold the virtual tribal consultation session on March 23, 2022, from 3:00-5:00 p.m. (Eastern Time). Written comments may also be submitted to VA on or before March 30, 2022. Participants can access the virtual consultation session by registering through the following link: https://veteransaffairs.webex.com/veteransaffairs/onstage/g.php?MTID=eaa07b769b5f8a27cfe390e0c732ee1eb https://www.federalregister.gov/documents/2022/02/14/2022-03084/department-of-veterans-affairs-tribal-representation-expansion-project?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
17	Notice for Virtual Meeting	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	87 FR 8851	Published 2/16/2022	Meeting of the Presidential Advisory Council on HIV/AIDS	As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will be holding the 73rd full Council meeting utilizing virtual technology on Monday, March 14 and Tuesday, March 15, 2022 from approximately 10:00-4:30 p.m. (ET) on both days. The meeting will be open to the public and there will be an interactive community engagement session during the first day of the meeting. Additionally, there will be a public comment session during the meeting; pre-registration is required to provide public comment.	To pre-register to provide public comment, please send an email to PACHA@hhs.gov and include your name, organization, and title by close of business Monday, March 7, 2022. If you decide you would like to provide public comment but do not pre-register, you may submit your written statement by emailing PACHA@hhs.gov by close of business Tuesday, March, 22, 2022. The meeting agenda will be posted on the PACHA page on HIV.gov at https://www.hiv.gov/federal-response/pacha/about-pacha prior to the meeting. The meeting will be held on Monday, March 14 and Tuesday March 15, 2022 from approximately 10:00-4:30 p.m. (ET) on both days. https://www.federalregister.gov/documents/2022/02/16/2022-03353/meeting-of-the-presidential-advisory-council-on-hivaids?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

18	Notice of Funding Opportunity	Federal Transit Administration (FTA), Department of Transportation (DOT)	87 FR 8923	Published 2/16/2022	FY 2022 Competitive Funding Opportunity: Public Transportation on Indian Reservations Program; Tribal Transit Program	The Federal Transit Administration (FTA) announces the opportunity to apply for $8.75 million in competitive grants for the Fiscal Year (FY) 2022 Public Transportation on Indian Reservations (Tribal Transit) Program. As required by Federal public transportation law, funds will be awarded competitively for any purpose eligible under FTA's Formula Grants for Rural Areas Program, including planning, capital, and operating assistance for tribal public transit services in rural areas. FTA may award additional funding that is made available to the program prior to the announcement of project selections. Eligible applicants include federally recognized Indian tribes or Alaska Native villages, groups, or communities as identified by the U.S. Department of the Interior (DOI) Bureau of Indian Affairs (BIA). To be an eligible recipient, an Indian tribe must have the requisite legal, financial, and technical capabilities to receive and administer Federal funds under this program. Additionally, applicants must be located and provide service in a rural area with a population of less than 50,000. A service area can include some portions of urban areas (as identified in the most recent decennial census), so long as rural areas are also served.	Complete proposals must be submitted electronically through the GRANTS.GOV "APPLY" function by 11:59 p.m. Eastern time on May 25, 2022. Any applicant intending to apply should initiate the process of registering on the GRANTS.GOV site immediately to ensure completion of registration before the submission deadline. Instructions for applying can be found on FTA's website at http://www.transit.dot.gov/howtoapply and in the "FIND" module of GRANTS.GOV. https://www.federalregister.gov/documents/2022/02/16/2022-03341/fy-2022-competitive-funding-opportunity-public-transportation-on-indian-reservations-program-tribal?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
19	Notice	Food and Drug Administration, Department of Health and Human Services	87 FR 9057	Published 2/17/2022	Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Class II Special Controls for Human Immunodeficiency Virus Serological Diagnostic and Supplemental Tests and Human Immunodeficiency Virus Nucleic Acid Diagnostic and Supplemental Tests	The Food and Drug Administration (FDA, Agency, or we) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995	Submit written comments (including recommendations) on the collection of information by March 21, 2022 https://www.federalregister.gov/documents/2022/02/17/2022-03437/agency-information-collection-activities-submission-for-office-of-management-and-budget-review?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list.
20	Proposed Rule - Notification of Tribal consultation session	Bureau of Indian Affairs, Interior	87 FR 8994	Published 2/17/2022	Notice of Consultations on Appeals From Administrative Actions	Indian Affairs will conduct consultation sessions with federally recognized Tribes to obtain oral and written comments concerning appeals from administrative actions. This proposed rule, among other things, aims to: Reflect changes in Indian Affairs organization that have occurred in the 30 years since the regulations were last updated; clarify how to administratively appeal actions from each Indian Affairs official; allow for more expedited reviews of requests to compel action by an Indian Affairs official; and add provisions to allow for administrative appeals of Statements of Performance issued by the Bureau of Trust Funds Administration. Additional information may be found at https://www.bia.gov/tribal-consultation/25-cfr-part-2-administrative-appeals.	Tribes are also invited to submit written input by 11:59 p.m. Eastern Time, Thursday, March 24, 2022. https://www.federalregister.gov/documents/2022/02/17/2022-03466/notice-of-consultations-on-appeals-from-administrative-actions?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

21	Notice Request for public comment	Office of Community Services, Administration for Children and Families, HHS	87 FR 9364	Published 2/18/2022	Submission for OMB Review; Office of Community Services Data Collection for the Low Income Household Water Assistance Program Reports (0970-0578)	requesting an extension of approval for an information request to collect data from Low Income Household Water Assistance Program (LIHWAP) grant recipients. This information collection was originally approved for 6 months as an emergency approval. OCS is proposing revisions to the information collection based on feedback received to date. The LIHWAP Annual Report collects data in three distinct modules: (1) Use of Funds, (2) Household Report, (3) Performance Measures.	Comments due within 30 days of publication. OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the Federal Register . Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. https://www.federalregister.gov/documents/2022/02/18/2022-03610/submission-for-omb-review-office-of-community-services-data-collection-for-the-low-income-household?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
22	DULL	IHS, Department of Health and Human Services	N/A	Published 2/22/22	IHS Health Information Technology Modernization Acquisition Status and Introduction to Modernization Focus Groups - Virtual meeting on 3/10/2022 - 2-3 pm EST.	During this event the IHS will provide a status update on the acquisition process for solutions to replace the Resource and Patient Management System. We will also discuss opportunities for Tribes and Urban Indian Organizations to participate in HIT Modernization governance by contributing expertise to focus groups whose members will inform key aspects of the overall modernization approach.	Date: Thursday, March 10, 2022 Time: 2:00 p.m. - 3:30 p.m. (Eastern Time) Registration link: https://www.zoomgov.com/meeting/register/vJIsfuuqrjgoGkQTWuIgXpCYF1ovL-nu0VI I invite you to submit written comments on HIT Modernization following the March 10, 2022, session by E-MAIL to consultation@ihs.gov or urbanconfer@ihs.gov, respectively. Please use the SUBJECT LINE: HIT Modernization. Please provide written comments by April 10, 2022 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTUIOLL_02222022.pdf
23	Notice, request for comment	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	87 FR 10367	Published 2/24/2022	Agency Information Collection Activities; Proposals, Submissions, and Approvals: Medicaid and Children's Health Insurance Program	For the purposes of this RFI, CMS views the continuum of health care access across three dimensions: (1) enrollment in coverage; (2) maintaining coverage; and (3) access to services and supports (Figure 1). Within each of these dimensions, accompanying regulatory, monitoring, or compliance actions may be needed in order to ensure access to health care is achieved and maintained. For access to services and supports, CMS intends to assess multiple domains of access that span: (1) potential access (provider availability and accessibility); (2) beneficiary utilization (realized access and access-related outcomes); and (3) beneficiaries' perceptions and experiences with care	Request for Information (qualtrics.com)
24	Notice	Federal Emergency Management Agency, DHS	87 FR 10805	Published 2/25/2022	Hazard Mitigation Assistance: Building Resilient Infrastructure and Communities	This policy describes a new hazard mitigation grant program to assist States, territories, Tribes, and local governments with mitigating the impacts of natural hazards, including those created, aggravated, or amplified by climate change. The new program is funded by a FEMA 6 percent set aside of estimated disaster expenses for each major disaster, supersedes the Pre-Disaster Mitigation grant program, and promotes a national culture of preparedness through encouraging investments to protect communities and infrastructure by increasing pre-disaster hazard mitigation and strengthening national resilience.	This policy is effective April 26, 2022. https://www.federalregister.gov/documents/2022/02/25/2022-04041/hazard-mitigation-assistance-building-resilient-infrastructure-and-communities?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

25	Notice, Request for public comment	Administration for Native Americans, Administration for Children and Families, Department of HHS	87 FR 10796	Published 2/25/2022	Submission for OMB Review; Administration for Native Americans Annual Data Report (ADR)	The Administration for Children and Families' (ACF) Administration for Native Americans (ANA) is requesting a 2-year extension to the following information collection: Annual Data Report (ADR) (OMB# 0970-0475; expiration date: 2/28/2022). There are no changes requested to the form. ANA collects the information in the ADR on an annual basis to monitor the performance of grantees and better gauge grantee progress. The majority of grantees submit this information through the On-going Progress Report (OMB# 0970-0452), but there is a subset of about 80 grantees who still use the ADR and will continue to use the ADR through the end of their grants.	Federal Register :: Submission for OMB Review; Administration for Native Americans Annual Data Report (ADR)

NCUIH REGULATIONS TRACKER: March 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Final Rule	Rural Housing Service, USDA	87 FR 11275	Published 3/1/2022	Multi-Family Housing (MFH) Direct Loan Program	The Rural Housing Service (RHS or Agency), an agency in the United States Department of Agriculture (USDA) Rural Development Mission area, published a proposed rule in the Federal Register on September 23, 2020, to amend its regulations for the Multi-Family Housing Direct Loans and Grants Programs to implement changes related to the development of a sustainable plan for the Rental Assistance (RA) program. Through this action, RHS is adopting the changes as proposed. The regulation updates are intended to provide additional RA program flexibility and transparency, and to improve the efficiency of managing assets in the Direct Loan portfolio.	The final rule is effective March 31, 2022. https://www.federalregister.gov/documents/2022/03/01/2022-03837/multi-family-housing-mfh-direct-loan-programs?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	Notice, request for nominations	Centers for Medicare & Medicaid Services, HHS	87 FR 11448	Published 3/1/2022	Medicare Program; Request for Nominations for Members for the Medicare Evidence Development & Coverage Advisory Committee	This notice announces the request for nominations for membership on the Medicare Evidence Development & Coverage Advisory Committee (MEDCAC). Among other duties, the MEDCAC provides advice and guidance to the Secretary of the Department of Health and Human Services (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) concerning the adequacy of scientific evidence available to CMS in making coverage determinations under the Medicare program. The MEDCAC's fundamental purpose is to support the principles of an evidence-based determination process for Medicare's coverage policies. MEDCAC panels provide advice to CMS on the strength of the evidence available for specific medical treatments and technologies through a public, participatory, and accountable process.	Nominations must be received by Monday, March 28, 2022. https://www.federalregister.gov/documents/2022/03/01/2022-04382/medicare-program-request-for-nominations-for-members-for-the-medicare-evidence-development-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
3	Notice and request for comment	Department of Health and Human Services, Office of the Secretary, Office of the Assistant Secretary for Health, Office of Infectious Disease and HIV/AIDS Policy.	87 FR 11724	Published 3/2/2022	Meeting of the Vaccines Federal Implementation Plan	The Department of Health and Human Services' Office of Infectious Disease and HIV/AIDS Policy in the Office of the Assistant Secretary for Health announces that the draft Vaccines Federal Implementation Plan 2021-2025 is available for public comment. The Vaccines Federal Implementation Plan is a companion document to the Vaccines National Strategic Plan 2021-2025 (VNSP), which was published in January 2021. The Vaccines Federal Implementation Plan is a compilation of federal agency immunization activities that collectively advance the goals of the VNSP. Its target audience is other federal agencies and external partners who work in the area of vaccination. The public will be interested in how the implementation plan documents federal agency efforts. It does not outline mandates or other COVID-19 response measures.	The public comment period for the Vaccines Federal Implementation Plan starts on February 28, 2022 at 9 a.m. ET and ends on March 29, 2022 at 5 p.m. ET. All comments must be received by 5 p.m. ET on March 29, 2022 to be considered. https://www.federalregister.gov/documents/2022/03/02/2022-04327/meeting-of-the-vaccines-federal-implementation-plan?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
4	Dear Tribal Leader Letter, Tribal Consultation, Request for Comment	White House	N/A	Published 3/4/2022	White House Office of Science and Technology Policy (OSTP) and the White House Council on Environmental Quality (CEQ) invitation to a Tribal Consultation discussing the development of Guidance for Federal Agencies on Indigenous Traditional Ecological Knowledge (ITEK)	the guidance will include best practices on collaborating with Tribal Nations and knowledge holders to achieve mutually beneficial outcomes, recommendations on how to address potential Federal barriers around working with ITEK, and advice on how to appropriately respect the knowledge holders' rights to decline invitations to collaborate	Tribal Consultation 1: Tuesday, April 5, 2022. 3:30-5:30 pm EDT Register in advance for the meeting here: https://pitc.zoomgov.com/webinar/register/WN_KMwXKWx2QFypxyaOgxV2UQ Tribal Consultation 2: Friday, April 29, 2022. 3:00 – 5:00 pm EDT Register in advance for the meeting here: https://pitc.zoomgov.com/webinar/register/WN_NOcHbTPzTZSgmhHr9eUcFA https://mcusercontent.com/f620288bb41dd81f9c715ef4d/files/7f78d364-3937-e559-e03e-75de2c0c4999/ITEK_DearTribalLeader_and_Memo.pdf
5	Notice, request for nominations	Centers for Disease Control and Prevention (CDC)	87 FR 12709	Published 3/7/2022	Solicitation of Nominations for Appointment to CDC's Advisory Committee to the Director (ACD) Health Equity Workgroup (HEW)	The HEW will consist of approximately 15 members who are experts in fields associated with health equity; public health science and practice; public health policy development, analysis, and implementation.	Nominations for membership on the HEW workgroup must be received no later than March 17, 2022. Late nominations will not be considered for membership. https://www.federalregister.gov/documents/2022/03/07/2022-04690/solicitation-of-nominations-for-appointment-to-cdcs-advisory-committee-to-the-director-acd-health?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

6	Notice, Request for Information	Office of the Surgeon General, Department of Health and Human Services (HHS)	87 FR 12712	Published 3/7/2022	Impact of Health Misinformation in the Digital Information Environment in the United States Throughout the COVID-19 Pandemic Request for Information (RFI)	The purpose of this RFI is to understand the impact of COVID-19 misinformation on healthcare infrastructure and public health more broadly during the pandemic including (but not limited to) quality of care, health decisions and outcomes, direct and indirect costs, trust in the healthcare system and providers, and healthcare worker morale and safety, understand the unique role the information environment played in the societal response to the COVID-19 pandemic and implications for future public health emergencies, understand the impact of exposure to health misinformation and how access to trusted and credible health information, particularly during a public health emergency, impacts lifesaving health decisions such as an individual's likelihood to vaccinate; and use the information requested to prepare for and respond to future public health crises. HHS will consider the usability, applicability, and rigor of submissions in response to this RFI and share learnings from these responses with the public. Public comments and submissions will also be made available to the public and can be used for research purposes	To be assured consideration, comments must be received via the methods provided below, no later than midnight Eastern Time (ET) on May 2, 2022. Submissions received after the deadline will not be reviewed. https://www.federalregister.gov/documents/2022/03/07/2022-04777/impact-of-health-misinformation-in-the-digital-information-environment-in-the-united-states?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
7	DTLL	Executive Office of the President, Council on Environmental Quality (CEQ)	N/A	Published 3/7/2022	CEQ is hosting Tribal consultations to seek input on the current version of CEJST, including on the datasets it includes and the methodology it uses. This feedback will help CEQ ensure that the tool reflects the environmental and climate challenges and realities that communities are experiencing. CEQ also welcomes feedback more broadly on the implementation of the Justice40 Initiative.	The Council on Environmental Quality (CEQ) invites you to participate in a Tribal consultation on the beta – or draft – version of the Climate and Economic Justice Screening Tool (CEJST) that the Council on Environmental Quality (CEQ) recently launched. How should CEQ continue to engage Tribal Nations and, more broadly, Native people on the Justice40 Initiative and the development of the CEJST?	Option 1: Thursday, April 7, 2022 4:00 pm ET – 7:00 pm ET Please register in advance at: https://pitc.zoomgov.com/webinar/register/WN_gonKZIM3Qmqi-bMNWcQYZ Option 2: Wednesday, April 13, 2022 4:00 pm ET – 7:00 pm ET Please register in advance at: https://pitc.zoomgov.com/webinar/register/WN_MNqdmRAkTqGN1dh0rHKmaA You may also provide written comments on the beta version of the CEJST by May 11, 2022. Written comments should be sent to ej@ceq.eop.gov CEJST_Dear_Tribal_Leader_Letter_FINAL.pdf (mcusercontent.com)
8	Notice of meeting	Census Bureau, Department of Commerce	87 FR 13251	Published 3/9/2022	2020 Census Tribal Consultation; Virtual Public Meeting	The Census Bureau will conduct a tribal consultation on the next set of 2020 Census Data Products on March 24, 2022, via national webinar, and review the 2010 Demonstration Data Product—Demographic and Housing Characteristics File (DHC). The tribal consultation meeting reflects the Census Bureau's continuous commitment to strengthen nation-to-nation relationships with federally recognized tribes. The Census Bureau's procedures for outreach, notice, and consultation ensure involvement of tribes, to the extent practicable and permitted by law, before making decisions or implementing policies, rules, or programs that affect federally recognized tribal governments. These meetings are open to citizens of federally and state recognized tribes by invitation. In that regard, the Census Bureau is seeking comments on the 2010 Demonstration Data—DHC, and asking tribal governments to identify the problematic table, level of geography, and a description of the use case, along with the likely implications should the data be released as-is. Tribes will have four weeks after consultation to analyze the 2010 Demonstration Data Product—DHC.	The Census Bureau will conduct the tribal consultation webinar on Thursday, March 24, 2022, from 3:00 p.m. to 4:30 p.m. EDT. Any questions or topics to be considered in the tribal consultation meetings must be received in writing via email by Tuesday, March 22, 2022. https://www.federalregister.gov/documents/2022/03/09/2022-04924/2020-census-tribal-consultation-virtual-public-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
9	Interim Final Rule	Department of VA	87 FR 13806	Published 3/10/2022	Staff Sergeant Parker Gordon Fox Suicide Prevention Program	VA is issuing this interim final rule to implement a new authority requiring VA to implement a three-year community-based grant program to award grants to eligible entities to provide or coordinate the provision of suicide prevention services to eligible individuals and their families for the purpose of reducing veteran suicide. This rulemaking specifies grant eligibility criteria, application requirements, scoring criteria, constraints on the allocation and use of the funds, and other requirements necessary to implement this grant program.	Effective date: This interim final rule is effective on April 11, 2022. Comments: Comments must be received on or before May 9, 2022. https://www.federalregister.gov/documents/2022/03/10/2022-04477/staff-sergeant-parker-gordon-fox-suicide-prevention-grant-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

10	Notice, request for nominations	Administration for Community Living, HHS	87 FR 14016	Published 3/11/2022	Solicitation for Nominations to Serve on the Advisory Council to Support Grandparents Raising Grandchildren	The Advisory Council to Support Grandparents Raising Grandchildren is authorized by the Supporting Grandparents Raising Grandchildren Act (Pub. L. 115-196) of 2018. The Advisory Council identifies, promotes, coordinates, and disseminates to the public information, resources, and the best practices available to help grandparents and other older relatives both meet the needs of the children in their care; and maintain their own physical and mental health and emotional well-being. The Advisory Council is specifically directed to consider the needs of those affected by the opioid crisis, as well as the needs of members of Native American Tribes.	Nominations must be submitted electronically by 11:59 p.m., Eastern on April 11, 2022 to be considered for appointment. https://www.federalregister.gov/documents/2022/03/11/2022-05153/solicitation-for-nominations-to-serve-on-the-advisory-council-to-support-grandparents-raising?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
11	Notice, request for nominations	American Psychological Association (APA); American Academy of Pediatrics (AAP) Committee on Native American Child Health (CONACH).	N/A	N/A	APA is seeking nominees for 4 psychologists to participate in CONACH pediatric consultation visits. Self nominations for these positions will be accepted until April 4, 2022. The APA Advisory Group will meet in May 2022 to review nominations and make final selections. Appointments will be effective July 1, 2022. Psychologists are re-appointed every two years and may be appointed up to three times for a total of six years.	The APA Advisory Group consists of APA staff from multiple APA offices: Practice; Public Interest; Equity, Diversity, and Inclusion (EDI); and Advocacy; as well as representation from the Society of Indian Psychologists (SIP). Psychologists selected will also participate in the APA Advisory Group.	Nominees must submit the completed application materials to the APA Advisory Group (ohcf@apa.org) by Monday April 4, 2022. https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:82a4ab39-45d0-3773-8f44-01858d121808#pageNum=2
12	Notice of Funding Opportunity	Substance Abuse and Mental Health Services Administration (SAMSA), HHS	87 FR14546	Published 3/15/2022	Fiscal Year (FY) 2022 Notice of Funding Opportunity	Substance Abuse and Mental Health Services Administration (SAMHSA) is supporting administrative supplements (in scope of the parent award) up to $249,999 (total costs) for the 166 CCBHC Expansion grant recipients funded in FY 2020 under the Certified Community Behavioral Health Clinic (CCBHC) Expansion (Title: CCBHC Expansion Grants, NOFO SM-20-012, with a project end date of April 30, 2022) to cover unanticipated costs caused by the COVID-19 pandemic or related mitigation efforts that could not have been covered by budgeting existing funds. The supplemental funding is to assist CCBHC Expansion grant recipients that had unplanned administrative, staffing, labor, and other program costs due to the COVID-19 pandemic. Assistance will only be provided to the 166 CCBHC Expansion grant recipients, funded in FY 2020 under NOFO SM-20-012, based on the receipt of a satisfactory application and associated budget that is approved by a review group.	Federal Register :: Fiscal Year (FY) 2022 Notice of Funding Opportunity (NOFO)
13	Notice	Health Resources and Services Administration (HRSA), HHS	87 FR 15254	Published 3/17/2022	Agency Information Collection Activities: Proposed Collection: Public Comment Request; The Maternal, Infant, and Early Childhood Home Visiting Program: Advancing Health Equity in Response to the COVID-19 Public Health Emergency, 0906-XXXX, New	The MIECHV Program is authorized by Social Security Act, Title V, § 511 (42 U.S.C. 711) and Congress made available supplemental appropriations to carry out the program through the American Rescue Plan Act (Pub. L. 117-2). American Rescue Plan Act funds are being used to support the MIECHV: Advancing Health Equity in Response to the COVID-19 Public Health Emergency project. The project includes five case studies to be conducted in communities across the United States. Communities will be selected based on a county level assessment of available data on social and structural determinants of health, the variation in COVID-19 patterns including disparities in key COVID-19 indicators, and the existence of MIECHV-funded local implementing agencies. The five communities will represent a mix of urban and rural counties and Tribal communities with measurable health disparities by race and ethnicity. The case studies will lead to a deeper understanding of the ways in which COVID-19 has shaped families' experiences, and the role home visiting plays (and could play) in addressing the inequities that continue to accrue from the pandemic within a community.	Comments on this IRC should be received no later than May 16, 2022 Federal Register :: Agency Information Collection Activities: Proposed Collection: Public Comment Request; The Maternal, Infant, and Early Childhood Home Visiting Program: Advancing Health Equity in Response to the COVID-19 Public Health Emergency, 0906-XXXX, New

14	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS)	87 FR 16001	Published 3/21/2022	CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHACHSPT)	In accordance with the Federal Advisory Committee Act, the CDC and the Health Resources and Services Administration (HRSA), announce the following meeting for the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHACHSTP). This meeting is open to the public, limited only by the number of audio and web conference lines (1,000 audio and web conference lines are available). Members of the public are welcome to listen to the meeting by accessing the telephone number and web conference access provided in the addresses section below. Time will be available for public comment. Matters To Be Considered: The agenda will include discussions on (1) Leveraging policy to advance HIV, STI, and viral hepatitis priorities; (2) Providing comprehensive STI services; (3) Syndemic approaches to HIV, viral hepatitis, and STI prevention; and (4) Self-testing and self-sample collection. Agenda items are subject to change as priorities dictate.	The meeting will be held on April 26, 2022, from 11:00 a.m. to 5:30 p.m., EDT; April 27, 2022, from 11:00 a.m. to 4:00 p.m., EDT; and April 28, 2022, from 10:00 a.m. to 12:00 p.m., EDT he public is welcome to submit written comments in advance of the meeting. Written comments must be submitted in writing by email to nchhstppolicy@cdc.gov with subject line "Spring CHAC Public Comment Registration" by Tuesday, April 19, 2022.
15	Notice and Request for Comment	Administration for Children and Families, HHS	87 FR 16195	Published 3/22/2022	Request for Information: Technical Assistance Needs and Priorities on Implementation and Coordination of Early Childhood Development Programs in American Indian and Alaska Native Communities	Through this Request for Information (RFI), the Administration for Children and Families (ACF), in the U.S. Department of Health and Human Services (HHS), seeks to further the development, implementation, and coordination of early childhood development programs in American Indian and Alaska Native (AI/AN) communities, by soliciting information and recommendations from a broad array of individuals and organizations with knowledge and expertise around the context and needs of tribal communities and early childhood programs. ACF will analyze information received from this RFI to support the development, improvement, and implementation of technical assistance (TA) (i.e., information, tools, training, and other supports) efforts and strategies to support tribal communities and programs in carrying out and coordinating early childhood services and initiatives.	Send comments on or before May 20, 2022. https://www.federalregister.gov/documents/2022/04/13/2022-07840/request-for-information-technical-assistance-needs-and-priorities-on-implementation-and-coordination?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
16	Notice, solicitation for proposals	Office of the Assistant Secretary, Indian Affairs, Interior (BIA)	87 FR 16481	Published 3/23/2022	Indian Business Incubators Program (IBIP) Grants Under the Native American Business Incubator Act of 2020	The Secretary of the Interior (Secretary), through the Office of Indian Economic Development (OIED), Division of Economic Development (DED), solicits proposals from eligible applicants (see Section IV. Eligibility for Funding, of this notice) to receive competitive grants to establish and operate business incubators that serve Tribal reservation communities. These grants will provide individually tailored business incubation and other business services to Native businesses and Native entrepreneurs to overcome the unique obstacles they confront and provide tools necessary to start and grow businesses that offer products and services to reservation communities.	Grant application packages must be submitted to Grants.gov no later than 5 p.m. Eastern Daylight Time, on Monday May 23, 2022. OIED will not consider proposals received after this time and date. https://www.federalregister.gov/documents/2022/03/23/2022-06077/indian-business-incubators-program-ibip-grants-under-the-native-american-business-incubator-act-of?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
17	Notice, solicitation for nominations	Department of Veterans Affairs	87 FR 16557	Published 3/23/2022	Solicitation of Nominations for Appointment to the Advisory Committee on Homeless Veterans	The Veterans Health Administration (VHA) is requesting nominations for upcoming vacancies on the Committee. The Committee is comprised of not more than 15 members. Several members may be regular Government employees, but the majority of the Committee's membership shall consist of non-Federal employees, appointed by the Secretary from the general public, serving as Special Government employees	Nominations for membership on the Committee must be received no later than 5:00 p.m. EST on April 8, 2022. https://www.federalregister.gov/documents/2022/03/23/2022-06170/solicitation-of-nominations-for-appointment-to-the-advisory-committee-on-homeless-veterans?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov

NCUIH REGULATIONS TRACKER: April 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Notice with Comment Period	Centers for Disease Control and Prevention (CDC); HHS	87 FR 19516	Published 4/04/2022	CDC Recommendations for Hepatitis B Screening and Testing-United States, 2022; Request for Comment	Announces the opening of a docket to obtain comment on proposed updated recommendations for hepatitis B virus (HBV) infection screening and testing (Proposed Updated Recommendations), including hepatitis B screening at least once in a lifetime for persons 18 years of age and older, using a three-test panel. The Proposed Updated Recommendations also expand existing risk-based testing recommendations to include the following populations, activities, exposures, or conditions associated with increased risk for HBV infection: Persons currently or formerly incarcerated in a jail, prison, or other detention setting; persons with a history of sexually transmitted infections or multiple sex partners; and persons with a history of hepatitis C virus infection. The Proposed Updated Recommendations are intended to inform the practices of and care by U.S. healthcare providers and are based on scientific evidence of the effectiveness and economic value of screening to diagnose current HBV infection among adults in the United States.	Written comments must be received on or before June 3, 2022. https://www.federalregister.gov/documents/2022/04/04/2022-07050/cdc-recommendations-for-hepatitis-b-screening-and-testing-united-states-2022-request-for-comment?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	Notice	Office of Assistant Secretary for Public and Indian Housing, Department of Housing and Urban Development (HUD)	87 FR 19522	Published 4/04/2022	Section 8 Housing Choice Vouchers: Implementation of the Housing Choice Voucher Mobility Demonstration for Awarded PHAs, Supplementary Notice for Demonstration Participants	On July 15, 2020, HUD published a notice ("Implementation Notice") implementing the Housing Choice Voucher (HCV) mobility demonstration ("demonstration") authorized by the Consolidated Appropriations Act, 2019. Through that Implementation Notice, HUD made available up to $50,000,000 to participating Public Housing Agencies ("PHAs") to implement housing mobility programs. On April 30, 2021, HUD announced its selection of PHAs that will participate in the demonstration. These PHAs will receive $45.7 million in total funding under that award. This notice supplements the July 15, 2020, notice to describe additional policies and flexibilities for PHAs selected to participate in the demonstration.	Federal Register :: Section 8 Housing Choice Vouchers: Implementation of the Housing Choice Voucher Mobility Demonstration for Awarded PHAs, Supplementary Notice for Demonstration Participants
3	Dear Tribal Leader Letter, Tribal Consultation, Request for Comment	Health and Human Services (HHS)	N/A	Published 4/4/2022	The U.S. Department of Health and Human Services (HHS or Department) is initiating Tribal Consultation related to the policy directives outlined in Executive Order (E.O.) 14053—Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People.	As the President noted in the E.O., "Native Americans face unacceptably high levels of violence, and are victims of violent crime at a rate much higher than the national average." While these instances of violence are deplorable and require a swift response, we want to focus on the root causes of violence to work towards prevention. Section 5 of the E.O. calls on the Secretary of Health and Human Services, in consultation with Tribal nations, to develop a comprehensive plan to support prevention efforts that reduce risk factors for victimization of Native Americans and increase protective factors by enhancing the delivery of services to victims, survivors, and their families and advocates	Written comments must be received by May 20, 2022. https://acrobat.adobe.com/link/track?uri=urn:aaid:scds:US:66b58c5b-a805-3df8-8c61-1b8bef6b2d4f

4	Notice, request for nominations for GAO Tribal Advisory Council	U.S. Government Accountability Office (GAO)	87 FR 20404	Published 4/07/2022	Request for Nominations for a GAO Tribal Advisory Council	This notice announces the U.S. Government Accountability Office's (GAO) intention to form its first standing Tribal Advisory Council (TAC) expected to be composed of a diverse group of tribal leaders (elected or appointed by their Tribes); an elected or appointed leader of a state-recognized Tribe and/or Native Hawaiian organization; and advisors who are experts on tribal and indigenous issues. The TAC will advise GAO on vital and emerging issues affecting Tribes and Indigenous peoples for the purpose of informing GAO's strategic goals and priorities with respect to the agency's work evaluating federal programs serving Tribes and related topics. GAO is now accepting nominations for TAC appointments that will be effective in August 2022. Nominations should be sent to the email address listed below. Acknowledgement of submission will be provided within a week of submission.	Nominations should be submitted no later than May 20, 2022, to ensure adequate opportunity for review and consideration of nominees prior to appointment. https://www.federalregister.gov/documents/2022/04/07/2022-07423/gao-tribal-advisory-council
5	Notice	Centers for Disease Control and Prevention (CDC)	87 FR 19940	Published 4/07/2022	Solicitation of Nominations for Appointment to the Healthcare Infection Control Practices Advisory Committee (HICPAC)	seeking nominations for membership on the HICPAC. The HICPAC consists of 14 experts in fields including but not limited to, infectious diseases, infection prevention, healthcare epidemiology, nursing, clinical microbiology, surgery, hospitalist medicine, internal medicine, epidemiology, health policy, health services research, public health, and related medical fields. Nominations are being sought for individuals who have expertise and qualifications necessary to contribute to the accomplishments of the committee's objectives. Nominees will be selected based on expertise in the fields of infectious diseases, infection prevention, healthcare epidemiology, nursing, environmental and clinical microbiology, surgery, internal medicine, and public health. Federal employees will not be considered for membership. Members may be invited to serve for four-year terms. Selection of members is based on candidates' qualifications to contribute to the accomplishment of HICPAC objectives	Nominations for membership on the HICPAC should be received no later than September 17, 2022. Packages received after this time will not be considered for the current membership cycle. https://www.federalregister.gov/documents/2022/04/06/2022-07236/solicitation-of-nominations-for-appointment-to-the-healthcare-infection-control-practices-advisory?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	Notice of meeting	Veterans Affairs Department (VA)	87 FR 20034	Published 4/07/2022	Advisory Committee on Minority Veterans, Notice of Meeting	The Department of Veterans Affairs (VA) gives notice under the Federal Advisory Committee Act, 5 U.S.C. App. 2., that the Advisory Committee on Minority Veterans (ACMV) will conduct a virtual site visit on May 3-May 5, 2022, with the Phoenix VA Healthcare System, Phoenix Regional Benefits Office, and National Memorial Cemetery of Arizona via MS Teams. The purpose of the Committee is to advise the Secretary on the administration of VA benefits and services to minority Veterans; assess the needs of minority Veterans; and evaluate whether VA compensation, medical and rehabilitation services, outreach, and other programs are meeting those needs. The Committee makes recommendations to the Secretary regarding such activities. Individuals who speak are invited to submit a 1-2-page summary of their comments no later than April 26, 2022, for inclusion in the official meeting record. Members of the public may also submit written statements for the Committee's review to Mr. Dwayne E. Campbell, at Dwayne.Campbell3@va.gov. Any member of the public seeking additional information should contact Mr. Campbell or Mr. Ronald Sagudan (202) 461-6191.	Federal Register :: Advisory Committee on Minority Veterans, Notice of Meeting

7	Notice	Indian Health Service (IHS)	87 FR 20443	Published 4/07/2022	Zero Suicide Initiative Coordinating Center	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for the IHS Zero Suicide Initiative (ZSI) Coordinating Center. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1665a. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.654. The purpose of this cooperative agreement is to build capacity of ZSI projects to improve the system of care for those at risk for suicide by implementing a comprehensive, culturally informed, multi-setting approach to suicide prevention in Indian health systems. The ZSI Coordinating Center will provide technical assistance in the areas of data collection, reporting, training, resources, and implementation of the Zero Suicide approach in Indian Country. The ZSI Coordinating Center technical assistance will be framed to promote the core Seven Elements of the Zero Suicide model that was developed by the Suicide Prevention Resource Center (SPRC) at https://zerosuicide.edc.org/toolkit/zero-suicide-toolkit.	Application deadline date: July 6, 2022 Earliest anticipation start date: August 22, 2022 https://www.federalregister.gov/documents/2022/04/07/2022-07333/zero-suicide-initiative-coordinating-center?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
8	Notice	Indian Health Service (IHS), HHS	87 FR 20878	Published 4/08/2022	Reimbursement Rates for Calendar Year 2022	The Acting Director of the Indian Health Service (IHS), under the authority of sections 321(a) and 322(b) of the Public Health Service Act (42 U.S.C. 248 and 249(b)), Public Law 83-568 (42 U.S.C. 2001(a)), and the Indian Health Care Improvement Act (25 U.S.C. 1601 et seq.), has approved the rates for inpatient and outpatient medical care provided by IHS facilities for Calendar Year 2022 for Medicare and Medicaid beneficiaries, beneficiaries of other federal programs, and for recoveries under the Federal Medical Care Recovery Act (42 U.S.C. 2651-2653).	https://www.federalregister.gov/documents/2022/04/08/2022-07468/reimbursement-rates-for-calendar-year-2022?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
9	Final Rule	Assistant Secretary for Policy, Management and Budget, Department of the Interior (DOI)	87 FR 20761	Published 4/08/2022	Acquisition Regulations; Buy Indian Act; Procedures for Contracting	This final rule revises the Department of the Interior's regulations implementing the Buy Indian Act, which provides the Department of Interior (DOI) with authority to set aside procurement contracts for Indian-owned and controlled businesses. These revisions eliminate barriers to Indian Economic Enterprises from competing on certain construction contracts, expand Indian Economic Enterprises' ability to subcontract construction work consistent with other socio-economic set-aside programs, and give greater preference to Indian Economic Enterprises when a deviation from the Buy Indian Act is necessary, among other updates.	This rule is effective May 9, 2022 https://www.federalregister.gov/documents/2022/04/08/2022-07118/acquisition-regulations-buy-indian-act-procedures-for-contracting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
10	Notice and request for comment	Administration for Community Living, HHS	87 FR 20871	Published 4/08/2022	Agency Information Collection Activities; Proposed Collection; Comment Request; Older Americans Act, Title VI Grant Application	Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (PRA), Federal agencies are required to publish a notice in the Federal Register concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on a proposed extension without change information collection and solicits comments on the information collection requirements related to the Application for Older Americans Act, Title VI Parts A/B and C Grants.	Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by June 7, 2022. https://www.federalregister.gov/documents/2022/04/08/2022-07507/agency-information-collection-activities-proposed-collection-comment-request-older-americans-act?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

11	Notice, Request for Information	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services (HHS).	87 FR 20876	Published 4/08/2022	Request for Information (RFI): 2022 HHS Environmental Justice Strategy and Implementation Plan Draft Outline	The Department of Health and Human Services (HHS) is issuing this Request for Information (RFI) to receive input from the public on HHS' draft outline to further the development of the 2022 Environmental Justice Strategy and Implementation Plan. Consistent with the policy of this administration directing HHS to make achieving environmental justice part of its mission, HHS would like to identify priority actions and strategies to best address environmental injustices and health inequities for people of color, disadvantaged, vulnerable, low-income, marginalized, and indigenous populations. With the engagement of and input from the public, the 2022 Environmental Justice Strategy and Implementation Plan will serve as a guide to confront environmental and health disparities and implement a multifaceted approach that will serve vulnerable populations and communities disproportionately impacted by environmental burdens.	To be assured consideration, comments must be received at the email address provided below, no later than midnight Eastern Time (ET) on May 19, 2022. HHS will not reply individually to responders but will consider all comments submitted by the deadline. Do not provide confidential information as comments may be published or otherwise used for agency purposes. https://www.federalregister.gov/documents/2022/04/08/2022-07514/request-for-information-rfi-2022-hhs-environmental-justice-strategy-and-implementation-plan-draft?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
12	Notice	Office of Chief Financial Officer, HUD	87 FR 21898	Published 4/13/2022	Announcement of Funding Awards	This announcement notifies the public of funding decisions made by the Department in competitions for additional funding under the Notices of Funding Opportunity (NOFOs) and Notices for the following programs: FY2020 and FY2021 HUD Community Compass Technical Assistance and Capacity Building Program, FY2021 HOPWA Permanent Supportive Renewal and Replacement Grant, FY2020 Section 4 Capacity Building Program, FY 2021 Veterans Housing Rehabilitation and Modification Pilot Program, FY2021 Fair Housing Initiatives Program (FHIP)—Education and Outreach Initiative (EOI), FY 2021 Fair Housing Initiatives Program (FHIP)—Fair Housing Organizations Initiative (FHOI), FY2021 Fair Housing Initiatives Program (FHIP)—Private Enforcement Initiative (PEI), FY 2021 Fair Housing Initiatives Program (FHIP) Education and Outreach Initiative—Tester Training (EOI-TT), FY2021 Healthy Homes Weatherization Cooperation Demonstration, FY2021 Lead Technical Studies, FY 2021 Health Homes Technical Studies, FY2020 Choice Neighborhoods Implementation Grants, FY2020 HOPE VI Main Street, FY 2020 Housing Related Hazards, FY 2021 Emergency Safety and Security, FY 2021 Emergency and Natural Disaster Receivership, FY2021 Emergency and Natural Disaster, PIH Notice 2021-09 Tribal VASH Supportive Housing Renewal Funding (fiscal year 2017 appropriated funds), FY2020 Indian Housing Block Grant Competitive Program, FY2020 Tribal VASH Supportive Housing Expansion (fiscal year 2015 appropriated funds), FY2020 Jobs Plus Initiative, and FY2020 Resident Opportunity & Efficiency Service Coordinator (ROSS-SC) Grant Program.	Federal Register :: Announcement of Funding Awards

13	Final Rule	Office of Personnel Management	87 FR 21739	Published 4/13/2022	Access to Federal Employees Health Benefits (FEHB) for Employees of Certain Tribally Controlled Schools	This rule finalizes an interim rule which expanded access to enrollment in the Federal Employees Health Benefits (FEHB) Program to additional tribal employees. The Consolidated Appropriations Act, 2021 (FY21 CAA) amended section 409 of the Indian Health Care Improvement Act and expanded entitlement to Indian tribes or tribal organizations carrying out programs under the Tribally Controlled Schools Act of 1988 (TCSA) to purchase coverage, rights, and benefits under the FEHB Program for their employees. This final rule adopts the interim final rule with minor clarifications. The Patient Protection and Affordable Care Act (ACA) (Pub. L. 111-148) and the Health Care and Education Reconciliation Act of 2010 (Pub. L. 111- 152), as amended extended entitlement to Indian tribes and tribal organizations carrying out programs under the Indian Self-Determination and Education Assistance Act (ISDEAA) (Pub. L. 93- 638), and **urban Indian organizations** carrying out programs under Title V of the Indian Health Care Improvement Act (IHCIA) to purchase coverage, rights, and benefits under the FEHB Program for their employees, defined in the FEHB regulations as "tribal employees."	Effective on April 13, 2022. https://www.federalregister.gov/documents/2022/04/13/2022-07802/access-to-federal-employees-health-benefits-fehb-for-employees-of-certain-tribally-controlled?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
14	Final Rule with comment period	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	87 FR 22290	Published 4/14/2022	Medicare Program; Maximum out-of-pocket (MOOP) Limits and service category cost sharing standards	This final rule with comment period (FC) will finalize the two remaining proposals from the proposed rule titled "Medicare and Medicaid Programs; Contract Year 2021 and 2022 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, Medicaid Program, Medicare Cost Plan Program, and Programs of All-Inclusive Care for the Elderly" which appeared in the Federal Register on February 18, 2020 (February 2020 proposed rule). The two proposals being finalized here from the February 2020 proposed rule include the maximum out-of-pocket (MOOP) limits for Medicare Parts A and B services and cost sharing limits for Medicare Parts A and B services, including service category cost sharing limits and per member per month actuarial equivalence cost sharing. In addition, CMS is requesting comments in section III of this FC on new or different ways to update and change cost sharing limits in future years for service categories subject to the regulations, including mental health services.	Effective date: June 13, 2022 Applicability Date: The provisions in this rule will apply to coverage beginning January 1, 2023. Comment date: To be assured consideration, comments on section III. of this FC must be received at one of the addresses provided below, by July 13, 2022.
15	Publication	u.s. Census	N/A	Published 4/14/2022	Census undercount risks funding for Native American Reservations	Census undercount risks funding for Native American reservations (cq.com)	Census undercount risks funding for Native American reservations (cq.com)
16	Proposed Rule, Request for Comments	Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS)	87 FR 22720	Published 4/15/2022	Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities; Updates to the Quality Reporting Program and Value-Based Purchasing Program for Federal Fiscal Year 2023; Request for Information on Revising the Requirements for Long-Term Care Facilities To Establish Mandatory Minimum Staffing Levels	This proposed rule would update: Payment rates; forecast error adjustment; diagnosis code mappings; the Patient Drive Payment Model (PDPM) parity adjustment, the SNF Quality Reporting Program (QRP), SNF Value-Based Purchasing (VBP) Program. It also proposes to establish a permanent cap policy. This proposed rule also includes a request for information related to long-term care (LTC) facilities. CMS requests comments on these proposals as well as on related subjects and announces the application of a risk adjustment for the SNF Readmission Measure for COVID-19 beginning in FY 2023.	To be assured consideration, comments must be received at one of the addresses provided below, by June 10, 2022. https://www.federalregister.gov/documents/2022/04/15/2022-07906/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

17	Notice	Bureau of Indian Affairs, Interior	87 FR 22552	Published 4/15/2022	Indian Child Welfare Act; Designated Tribal Agents for Service of Notice	The regulations implementing the Indian Child Welfare Act provide that Federally recognized Indian Tribes may designate an agent other than the Tribal Chairman for service of notice of proceedings under the Act. This notice includes the current list of designated Tribal agents for service of notice.	https://www.federalregister.gov/documents/2022/04/15/2022-08077/indian-child-welfare-act-designated-tribal-agents-for-service-of-notice?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
18	Notice of Funding Opportunity	Department of Veteran Affairs (VA)	87 FR 22630	Published 4/15/2022	Funding Opportunity: Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program	The SSG Fox SPGP enables the Office of Mental Health and Suicide Prevention (OMHSP) within the Veterans Health Administration (VHA) to provide financial assistance through a 3-year community-based grant program to eligible entities to provide, or coordinate the provision of, suicide prevention services to eligible Veterans and their families. Funding offered under this Notice of Funding Opportunity (NOFO) responds to the mounting need to reach Veterans at risk for suicide in their communities. This Notice contains information concerning the SSG Fox SPGP, the application process and the amount of funding available. Awards made for suicide prevention services grants will fund operations beginning on or around September 1, 2022.	Federal Register :: Funding Opportunity: Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program
19	DULL	Indian Health Service (IHS)	N/A	Published 4/15/2022	Urban Confer on Special Diabetes Program for Indians (SDPI) for FY 2023	The Indian Health Service (IHS) announced the initiation of Urban Confer on the Special Diabetes Program for Indians for Fiscal Year 2023. Urban Confer will be conducted in all 12 IHS Areas. Once Urban Confer is complete, the Tribal Leaders Diabetes Committee (TLDC) will reconvene to review the input and make final national recommendations to the Acting Director of IHS. This is anticipated to occur during the next TLDC meeting in June. Fiscal Year 2023 will be the beginning of a new 5-year grant cycle for the SDPI. Accordingly, the IHS will publish a new notice of funding opportunity in the Federal Register and a grant application process will follow. Your recommendations on these questions are particularly important, as FY 2023 will provide an opportunity for changes to the SDPI.	Submit written comments to urbanconfer@ihs.gov within the Confer period, which will close 30 days from the date of this letter DUIOLL_04142022-2.pdf (ihs.gov)
20	Notice of Funding Opportunity	Indian Health Service (IHS)	87 FR 22908	Published 4/18/2022	Ending the HIV/HCV Epidemics in Indian Country: A Program for American Indian/Alaska Native Tribes and Urban Indian Communities	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for the Ending the Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV) Epidemics in Indian Country (ETHIC) program. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1621q, 1660e. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.933.	Application Deadline Date: June 17, 2022. Earliest Anticipated Start Date: August 1, 2022. https://www.federalregister.gov/documents/2022/04/18/2022-08250/ending-the-hivhcv-epidemics-in-indian-country-a-program-for-american-indianalaska-native-tribes-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
21	Notice	Indian Health Service (IHS)	87 FR 22924	Published 4/18/2022	Addressing Dementia in Indian Country: Models of Care	The Indian Health Service (IHS) is accepting applications for cooperative agreements for Addressing Dementia in Indian Country. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1665a(c)(5)(F) and 1660e. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.933.	Application Deadline Date: July 18, 2022. Earliest Anticipated Start Date: August 31, 2022. https://www.federalregister.gov/documents/2022/04/18/2022-08249/addressing-dementia-in-indian-country-models-of-care?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

22	Notice of Meeting	Department of Veteran Affairs (VA)	87 FR 23051	Published 4/18/2022	Advisory Committee on Women Veterans	The Department of Veterans Affairs (VA) gives notice under the Federal Advisory Committee Act, 5 U.S.C. app. 2, that the Advisory Committee on Women Veterans will conduct a virtual meeting on May 9-11, 2022. No time will be allocated at this meeting for receiving oral presentations from the public. Interested parties should provide written comments for review by the Committee to Ms. Shannon L. Middleton at 00W@mail.va.gov no later than May 2, 2022. Any member of the public who wishes to observe the virtual meeting may use the following WebEx link: https://veteransaffairs.webex.com/veteransaffairs/j.php?MTID=m51ab4e28ba8610ac7926152b23d57b4b. To join by phone: 1-404-397-1596 (toll free); meeting number: 2760 037 3217; password: bmBDMUP$555.	Federal Register :: Advisory Committee on Women Veterans, Notice of Meeting https://www.federalregister.gov/documents/2022/04/18/2022-08248/advisory-committee-on-women-veterans-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
23	Urban Confer	Indian Health Service (IHS), OUIHP	n/a	Published 4/18/2022	OUIHP 5-year Strategic Plan Draft Urban Confer	The Indian Health Service Office of Urban Indian Health Programs will hold a virtual Urban Confer on Thursday, April 29, 2022, from 2:00-3:30 p.m. ET to seek UIO input on the draft 2022-2026 IHS OUIHP Strategic Plan.	Submit written comments and recommendations on the draft 2022-2026 OUIHP Strategic Plan by Friday, May 20, 2022 by e-mail to: urbanconfer@ihs.gov – Subject line: OUIHP Strategic Plan. Register for Urban Confer: https://ihs-gov.zoomgov.com/meeting/register/vJIsdeCqrDooH43xPy8e6Jq3aHoVcZCb6nk
24	Notice	Administration for Community Living	87 FR 23867	Published 4/21/2022	Availability of Program Application Instructions for MIPPA Program Funds	Medicare Improvements for Patients and Providers Act: State Applications for Medicare Low-Income Benefit Programs Enrollment Outreach and Assistance.	Federal Register :: Availability of Program Application Instructions for MIPPA Program Funds https://www.federalregister.gov/documents/2022/04/21/2022-08511/availability-of-program-application-instructions-for-mippa-program-funds?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: May 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Notice	Centers for Disease Control and Prevention (CDC), HHS	87 FR25640	Published 5/2/2022	Solicitation of Nominations for Appointment as Members of the Community Preventive Services Task Force (CPSTF)	The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), is soliciting nominations for appointment of individuals qualified to serve as new members of the Community Preventive Services Task Force (CPSTF). New CPSTF members will serve a five-year term starting in either 2023 or 2024. For efficiency and to reduce the burden on the public, CDC is soliciting nominations to fill vacancies on the CPSTF anticipated for both calendar years 2023 and 2024.	Nomination packages must be received on or before 5:00 p.m. EDT, on June 24, 2022. Late nomination packages will not be considered. https://www.federalregister.gov/documents/2022/05/02/2022-09368/solicitation-of-nominations-for-appointment-as-members-of-the-community-preventive-services-task?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
2	Notice of Urban Confer	Indian Health Service (IHS); HHS	n/a	Published 5/3/2022	Urban Confer to Discuss Policy Directives Outlined in Executive Order 14053	Virtual Urban Confer on Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People on Friday, May 13, 2022.	Register in advance for this meeting: https://ihs-gov.zoomgov.com/meeting/register/vJItdeGurTgjGm1zBVBSKqn3bDLcOP6xdzk UIO Leaders are encouraged to email written comments and recommendations by the Confer comment deadline of Friday, June 10, 2022 https://www.ihs.gov/ihscalendar/calendar/virtual-urban-confer-on-improving-public-safety-and-criminal-justice-for-native-americans-and-addressing-the-crisis-of-missing-or-murdered-indigenous-people/
3	Notice of Meeting	Centers for Disease Control and Prevention (CDC), HHS	87 FR 26202	Published 5/03/2022	Healthcare Infection Control Practices Advisory Committee	The CDC announces the following meeting for the Healthcare Infection Control Practices Advisory Committee (HICPAC). This virtual meeting is open to the public, limited only by the number of audio and web conference lines (300 audio and web conference lines are available). Time will be available for public comment. Registration is required.	The meeting will be held on June 2, 2022, from 12:00 p.m. to 2:30 p.m., EDT. To register for this web conference, please go to: www.cdc.gov/hicpac. All registered participants will receive the meeting link and instructions shortly before the meeting. Please click the link below to join the webinar: https://cdc.zoomgov.com/
4	Notice of meeting	Office of Infectious Disease and HIV/AIDS Policy, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.	87 FR 26360	Published 5/4/2022	Meeting of the National Vaccine Advisory Committee	As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) will hold an in-person meeting. The meeting will be open to the public and public comment will be heard during the meeting.	The meeting will be held June 15-16, 2022. The confirmed meeting times and agenda will be posted on the NVAC website at http://www.hhs.gov/nvpo/nvac/meetings/index.html as soon as they become available. https://www.federalregister.gov/documents/2022/05/04/2022-09551/meeting-of-the-national-vaccine-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Presidential Proclamation	Executive Office of the President, White House	N/A	Published 5/4/2022	A Proclamation on Missing or Murdered Indigenous Persons Awareness Day, 2022	The President has proclaimed May 5, 2022, as Missing or Murdered Indigenous Persons Awareness Day. "I call on all Americans and ask all levels of government to support Tribal governments and Tribal communities' efforts to increase awareness of the issue of missing or murdered Indigenous persons through appropriate programs and activities." "For generations, Indigenous persons, including American Indians, Alaska Natives and Native Hawaiians, have been forced to mourn a missing or murdered loved one without the answers and support they deserve. On Missing or Murdered Indigenous Persons Awareness Day, we remember these victims and their families, and commit to working with Tribal Nations and **Native communities** to achieve justice and healing. The Federal Government has an obligation to ensure that cases of missing or murdered persons are met with swift and effective action. My Administration is fully committed to investigating and resolving these cases through a coordinated law enforcement response, as well as intervention and prevention efforts. We are also dedicated to researching the underlying causes of this violence and to working with **Native communities** to address them."	A Proclamation on Missing Or Murdered Indigenous Persons Awareness Day, 2022 | The White House https://www.whitehouse.gov/briefing-room/presidential-actions/2022/05/04/a-proclamation-on-missing-or-murdered-indigenous-persons-awareness-day-2022/
6	Presidential Proclamation	Executive Office of the President, White House	87 FR 26659	Published 5/05/2022	National Mental Health Awareness Month, 2022	"Each May we raise awareness about the importance of mental health and its impact on the well-being of all Americans, including children, adults, families, and communities across our Nation. We also give thanks to the dedicated mental health providers whose service and support improve the lives of so many Americans. We stand in solidarity with those who are experiencing mental health conditions, renewing our commitment to providing them with the support they need and deserve." "...proclaim May 2022 as National Mental Health Awareness Month. I call upon citizens, government agencies, private businesses, non-profit organizations, and other groups to join in activities and take action to strengthen the mental health of our communities and our Nation."	Federal Register :: National Mental Health Awareness Month, 2022 https://www.federalregister.gov/documents/2022/05/05/2022-09760/national-mental-health-awareness-month-2022?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

7	Final Rule	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 27208	Published 5/06/2022	Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2023	This final rule includes payment parameters and provisions related to the risk adjustment and risk adjustment data validation programs, as well as 2023 user fee rates for issuers offering qualified health plans (QHPs) through Federally-facilitated Exchanges (FFEs) and State-based Exchanges on the Federal platform (SBE-FPs). This final rule also includes requirements related to guaranteed availability; the offering of QHP standardized plan options through Exchanges on the Federal platform; requirements for agents, brokers, and web-brokers; verification standards related to employer sponsored coverage; Exchange eligibility determinations during a benefit year; special enrollment period verification; cost-sharing requirements; Essential Health Benefits (EHBs); Actuarial Value (AV); QHP issuer quality improvement strategies; accounting for quality improvement activity (QIA) expenses and provider incentives for medical loss ratio (MLR) reporting and rebate calculation purposes; and re-enrollment. This final rule also responds to comments on how the Department of Health and Human Services (HHS) can advance health equity through QHP certification standards and otherwise in the individual and group health insurance markets, and how HHS might address plan choice overload in the Exchanges	These regulations are effective July 1, 2022 https://www.federalregister.gov/documents/2022/05/06/2022-09438/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2023?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
8	Notice of request for nomination for members	Agency for Healthcare Research and Quality (AHRQ); HHS	87 FR 27148	Published 5/06/2022	National Advisory Council for Healthcare Research and Quality: Request for Nominations for Members	The National Advisory Council for Healthcare Research and Quality (the Council) advises the Secretary of HHS (Secretary) and the Director of the Agency for Healthcare Research and Quality (AHRQ) with respect to activities proposed or undertaken to carry out AHRQ's statutory mission. AHRQ produces evidence to make health care safer, higher quality, more accessible, equitable, and affordable, and works within the U.S. Department of Health and Human Services and with other partners to make sure that the evidence is understood and used. Seven new members will be appointed to replace seven current members whose terms will expire in November 2022. The Council meets in the Washington, DC, metropolitan area, generally in Rockville, Maryland, approximately three times a year to provide broad guidance to the Secretary and AHRQ's Director on the direction of and programs undertaken by AHRQ. Seven individuals will be selected by the Secretary to serve on the Council beginning with the meeting in the spring of 2023. Members generally serve 3-year terms. Appointments are staggered to permit an orderly rotation of membership. To fill these positions, we are seeking individuals who: (1) Are distinguished in the conduct of research, demonstration projects, and evaluations with respect to health care; (2) are distinguished in the fields of health care quality research or health care improvement; (3) are distinguished in the practice of medicine; (4) are distinguished in other health professions; (5) represent the private health care sector (including health plans, providers, and purchasers) or are distinguished as administrators of health care delivery systems; (6) are distinguished in the fields of health care economics, information systems, law, ethics, business, or public policy; and (7) represent the interests of patients and consumers of health care	Nominations should be received on or before 60 days after date of publication. https://www.federalregister.gov/documents/2022/05/06/2022-09728/national-advisory-council-for-healthcare-research-and-quality-request-for-nominations-for-members?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
9	Final Rule	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 27704	Published 5/09/2022	Medicare Program; Contract Year 2023 Policy and Technical Changes to the Medicare Advantage and Medicare Prescription Drug Benefit Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency; Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency	This final rule will revise the Medicare Advantage (MA) (Part C) program and Medicare Prescription Drug Benefit (Part D) program regulations to implement changes related to marketing and communications, past performance, Star Ratings, network adequacy, medical loss ratio reporting, special requirements during disasters or public emergencies, and pharmacy price concessions. This final rule will also revise regulations related to dual eligible special needs plans (D-SNPs), other special needs plans, and cost contract plans. This final rule finalizes certain 2021 and 2022 Star Ratings provisions that were included in two interim final rules with comment period (IFC) that CMS issued on April 6, 2020, and September 2, 2020; other policies from those interim final rules will be addressed in other rulemakings.	Effective dates: These regulations are effective on June 28, 2022, except for amendatory instructions 27 and 36 (regarding the definition of "negotiated price" at §§ 423.100 and 423.2305), which are effective January 1, 2024. Applicability dates: The applicability date of the provisions in this rule is January 1, 2023, except as explained in SUPPLEMENTARY INFORMATION. https://www.federalregister.gov/documents/2022/05/09/2022-09375/medicare-program-contract-year-2023-policy-and-technical-changes-to-the-medicare-advantage-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

10	Notice of Funding Opportunity	Substance Abuse and Mental Health Services (SAMHSA), HHS	87 FR 27654	Published 5/09/2022	Fiscal Year (FY) 2022 Notice of Supplemental Funding Opportunity	This notice is to inform the public that the Substance Abuse and Mental Health Services Administration (SAMHSA) is supporting administrative supplements (in scope of the parent award) up to $150,000 each for one-year to the ten PTTC Regional Centers, the PTTC Hispanic and Latino Center and the PTTC Tribal Affairs Center for a total funding amount of $1,800,000. These grant recipients were funded in FY 2018 under the PTTC Cooperative Agreements, funding announcement SP-19-001 and have a project end date of April 30, 2023. The supplemental funds will be used to: (1) Develop a Prevention Fellowship Program (PFP); (2) develop and sustain a well-trained and knowledgeable cadre of prevention professionals who understand and exemplify the principles and best practices of substance abuse prevention; and (3) prepare fellows to achieve certification from the International Certification and Reciprocity Consortium (IC&RC) Certified Prevention Specialist (CPS) exam. The PFP shall support internships for fellows in the following areas: Hands-on experience working in state agencies while supported by state agency mentors; virtual and in-person training in professional development and prevention; acquiring proficiency in appropriate core competencies in preparation for the CPS exam; developing management and leadership skills; and preparing for potential employment opportunities within the prevention field. This is not a formal request for application. Assistance will only be provided to the twelve eligible PTTC Centers based on the receipt of a satisfactory application and associated budget that is approved by a review group.	Funding Opportunity Title: FY 2018 Prevention Technology Transfer Centers (PTTC) Cooperative Agreements Funding Opportunity SP-19-001. https://www.federalregister.gov/documents/2022/05/09/2022-09866/fiscal-year-fy-2022-notice-of-supplemental-funding-opportunity?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
11	Publication	Indian Health Service (IHS); HHS	N/A	Published 5/09/2022	Indian Health Service funding provides resources to address Alzheimer's disease	The Indian Health Service is announcing $5 million to target resources directly to tribes, tribal organizations, urban Indian organizations, and IHS direct service facilities to address Alzheimer's disease within tribal communities. This marks the first time IHS will allocate for this critical need. This funding will support tribes, tribal organizations, and **urban Indian organizations** to develop comprehensive and sustainable approaches to addressing Alzheimer's disease and other causes of dementia, focusing on awareness, recognition, diagnosis, assessment, management, and support for caregivers.	. Eligible tribes, tribal organizations, and urban Indian organizations can now apply for approximately 2.6 million in funding. The application deadline is July 18. This is the first time IHS has received funding to directly address Alzheimer's disease. https://www.grants.gov/web/grants/search-grants.html?keywords=indian%20alzheimer%27s https://www.hhs.gov/about/news/2022/05/09/indian-health-service-funding-provides-resources-address-alzheimers-disease.html
12	Notice	Centers for Disease Control and Prevention (CDC), HHS	87 FR 28011	Published 5/10/2022	Advisory Committee on Immunization Practices (ACIP)	The Centers for Disease Control and Prevention (CDC) announces the following meeting of the Advisory Committee on Immunization Practices (ACIP). This meeting is open to the public. Time will be available for public comment. The agenda will include discussions on the use of COVID-19 vaccines. A recommendation vote(s) is scheduled. Agenda items are subject to change as priorities dictate. For more information on the meeting agenda, visit https://www.cdc.gov/vaccines/acip/meetings/meetings-info.html. The meeting will be webcast live via the World Wide Web; for more information on ACIP, visit the ACIP website: https://www.cdc.gov/vaccines/acip/index.html.	The meeting will be held on May 19, 2022, from 11:00 a.m. to 4:00 p.m., EDT (times subject to change). The meeting will be webcast live via the World Wide Web. Written comments must be received on or before May 19, 2022. https://www.federalregister.gov/documents/2022/05/10/2022-10130/advisory-committee-on-immunization-practices-acip?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
13	Notice	Centers for Disease Control and Prevention (CDC), HHS	87 FR 28013	Published 5/10/2022	Advisory Committee on Immunization Practices (ACIP)	Matters to be considered: The agenda will include discussions on influenza vaccines; pneumococcal vaccine; human papillomavirus vaccine; measles, mumps, rubella (MMR) vaccine; respiratory syncytial virus vaccine; rotavirus vaccine; and Chikungunya vaccine. Recommendation votes on influenza vaccines, pneumococcal vaccine, and MMR vaccine are scheduled. No VFC votes are scheduled. Agenda items are subject to change as priorities dictate. For more information on the meeting agenda, visit https://www.cdc.gov/vaccines/acip/meetings/index.html. The meeting will be webcast live via the World Wide Web; for more information on ACIP, visit the ACIP website: https://www.cdc.gov/vaccines/acip/index.html.	Written Public Comment: The docket will be opened to receive written comments on May 10, 2022. Written comments must be received on or before June 23, 2022. https://www.federalregister.gov/documents/2022/05/10/2022-09950/advisory-committee-on-immunization-practices-acip?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

14	Notice	Administration for Community Living	87 FR 28832	Published 5/11/2022	Intent To Award a Single-Source Supplement for the Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and Other Older Adults With a History of Trauma and Their Family Caregivers Program	The Administration for Community Living (ACL) announces the intent to award a single-source supplement to the current cooperative agreement held by the Jewish Federations of North America for the project Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and **Other Older Adults with a History of Trauma and Their Family Caregivers** program. The purpose of this program is to advance the development and expansion of PCTI supportive services for Holocaust survivors living in the U.S. **Additionally, the project is advancing the capacity of the broader aging services network to deliver services of this type to any older adult with a history of trauma and their family caregivers.** The overall goals of the program are as follows: Increase the number and type of innovations in PCTI care for Holocaust survivors, older adults with a history of trauma, and their family caregivers, and Expand the capacity of the Aging Network to provide PCTI care to the populations it serves. The administrative supplement for FY 2022 will be in the amount of $987,000, bringing the total award for FY 2022 to $5,922,000.	Federal Register :: Intent To Award a Single-Source Supplement for the Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and Other Older Adults With a History of Trauma and Their Family Caregivers Program
15	Notice of Meeting	National Institute of Health	87 FR 28839	Published 5/11/2022	Notice of a Meeting of the Office of AIDS Research Advisory Council	The sixtieth meeting of the Office of AIDS Research Advisory Council (OARAC) will include the OAR Director's Report; updates from the Clinical Guidelines Working Groups of OARAC; updates from NIH HIV-related advisory councils; presentation and discussions on Data Science, and NIH-wide programs and initiatives; and public comment. The meeting will be open to the public via NIH Videocast. The URL link to this meeting is: https://videocast.nih.gov/watch=45264.	Federal Register :: Office of the Director, National Institutes of Health; Notice of Meeting
16	Notice of Meeting	Substance Abuse and Mental Health Services (SAMHSA), HHS	87 FR 29162	Published 5/12/2022	Advisory Committee for Women's Services (ACWS) Notice of Meeting	The meeting will include discussions on assessing SAMHSA's current strategies, including the mental health and substance use needs of the women and girls population. Additionally, the ACWS will be addressing priorities regarding the impact of COVID-19 on the behavioral health needs of women and children and directions around behavioral health services and access for women and children. The meeting may be accessed via telephone or web meeting. To obtain the call-in number and access code, submit written or brief oral comments, or request special accommodations for persons with disabilities, please register on-line at: https://www.samhsa.gov/about-us/advisory-councils	Federal Register :: Advisory Committee for Women's Services (ACWS) Notice of Meeting

17	Notice of Funding Opportunity	Indian health Service (IHS)	87 FR 29346	Published 5/13/2022	Public Health Nursing Case Management: Reducing Sexually Transmitted Infections	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for Public Health Nursing Case Management: Reducing Sexually Transmitted Infections. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1621q, 1660e. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.383. The purpose of this IHS program is to mitigate the prevalence of sexually transmitted infections (STI) within Indian Country through a case management model that utilizes the PHN as a case manager. The emphasis is on raising awareness of STIs as a high-priority health issue among AI/AN communities and to support prevention and control activities of comorbid conditions. Case management involves the client, family, and other members of the health care team. Quality of care, continuity, and assurance of appropriate and timely interventions are also crucial. UIOs are eligible for this program.	Application deadline date: August 11, 2022 https://www.federalregister.gov/documents/2022/05/13/2022-10241/public-health-nursing-case-management-reducing-sexually-transmitted-infections?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
18	Request for Information and Comment	Centers for Disease Control and Prevention (CDC), HHS	87 FR 29748	Published 5/16/2022	Draft National Institute for Occupational Safety and Health (NIOSH) Healthcare Personal Protective Technology (PPT) Targets for 2020 to 2030; Request for Comment	The National Institute for Occupational Safety and Health (NIOSH) in the Centers for Disease Control and Prevention (CDC), an Operating Division of the Department of Health and Human Services (HHS), announces the availability of a draft document entitled DRAFT NIOSH Healthcare Personal Protective Technology (PPT) Targets for 2020 to 2030 (Draft PPT Targets) now available for public comment.	Electronic or written comments must be received by July 15, 2022. https://www.federalregister.gov/documents/2022/05/16/2022-10413/draft-national-institute-for-occupational-safety-and-health-niosh-healthcare-personal-protective?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
19	Final Rule	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 29675	Published 5/16/2022	Medicaid Program; Reassignment of Medicaid Provider Claims	This final rule reinterprets the scope of the general requirement that State payments for Medicaid services under a State plan must generally be made directly to the individual practitioner or institution providing services or to the beneficiary, in the case of a class of practitioners for which the Medicaid program is the primary source of revenue. Specifically, this final rule explicitly authorizes States to make payments to third parties on behalf of individual practitioners, for individual practitioners' health insurance and welfare benefits, skills training, and other benefits customary for employees, if the individual practitioner consents to such payments on their behalf.	These regulations are effective June 15, 2022. htt+A320ps://www.federalregister.gov/documents/2022/05/16/2022-10225/medicaid-program-reassignment-of-medicaid-provider-claims?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
20	Request for Information and Comment	Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services (HHS)	87 FR 29868	Published 5/17/2022	Request for Information (RFI): 2022 HHS Environmental Justice Strategy and Implementation Plan Draft Outline; Comment Period Extended	On April 8, 2022, the Department of Health and Human Services (HHS) published into the Federal Register a Request for Information (RFI) which is located at 87 FR 20876 to receive input from the public on HHS's draft outline to further the development of the 2022 Environmental Justice Strategy and Implementation Plan. Consistent with the policy of this administration directing HHS to make achieving environmental justice part of its mission, HHS would like to identify priority actions and strategies to best address environmental injustices and health inequities for people of color, disadvantaged, vulnerable, low-income, marginalized, and indigenous populations. With the engagement of and input from the public, the 2022 Environmental Justice Strategy and Implementation Plan will serve as a guide to confront environmental and health disparities and implement a multifaceted approach that will serve vulnerable populations and communities disproportionately impacted by environmental burdens.	To be assured consideration, comments must be received at the email address provided below, no later than midnight Eastern Time (ET) on June 18, 2022. HHS will not reply individually to responders but will consider all comments submitted by the deadline. Do not provide confidential information as comments may be published or otherwise used for agency purposes. https://www.federalregister.gov/documents/2022/05/17/2022-10540/request-for-information-rfi-2022-hhs-environmental-justice-strategy-and-implementation-plan-draft?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

21	DULL	Indian Health Service (IHS); HHS	N/A	Published 5/17/2022	FY 2022 Urban Indian Health funding increase for distribution to the OUIHP and UIOs is $10,000,000	In accordance with the standard methodology established after Urban Confer in FY 2018, the IHS will distribute 10 percent of the funds to the Office of Urban Indian Health Programs (OUIHP) and 90 percent of the funds to Urban Indian Organizations (UIOs). An equitable distribution methodology will divide the 90 percent evenly among UIOs for FY 2022. With this distribution, 90 percent of the funding increase will be directly transferred to UIOs via IHS contracts. Before funds may be awarded and transferred, each Urban Indian Organization funded from the Urban Indian Health budget line must submit a scope of work, budget, and budget narrative to their Area Chief Contracting Officer and Area Contracting Officer Representative. In addition, each Urban Indian Organization must have satisfactory performance under its IHS contract.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DUIOLL-05172022.pdf
22	Notice and request for comment	Children's Bureau, Administration for Children and Families, HHS	87 FR 30225	Published 5/18/2022	Submission for OMB Review; Plan for Foster Care and Adoption Assistance-Title IV-E (OMB #0970-0433)	The Children's Bureau (CB), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting a 3-year extension of the Plan for Foster Care and Adoption Assistance—Title IV-E, (OMB#: 0970-0433, expiration 11/30/2022). This plan also incorporates the plan requirements for the optional Guardianship Assistance program, the Title IV-E Prevention Services plan and the Title IV-E Kinship Navigator program. There are no changes requested to the form. Title IV-E of the Act was amended by Public Law 115-123, which included the Family First Prevention Services Act (FFPSA). FFPSA authorized new optional Title IV-E funding for time-limited (1 year) prevention services for mental health/substance abuse and in-home parent skill-based programs for (1) a child who is a candidate for foster care (as defined in section 475(13) of the Act), (2) pregnant/parenting foster youth, and (3) the parents/kin caregivers of those children and youth (sections 471(e), 474(a)(6), and 475(13) of the Act). Title IV-E prevention services must be rated as promising, supported, or well supported in accordance with HHS criteria and be approved by HHS (section 471(e)(4)(C) of the Act) as part of the Title IV-E Prevention Services Clearinghouse (section 476(d)(2) of the Act). A state or tribal Title IV-E agency electing to participate in the program must submit a 5-year Title IV-E Prevention Program Plan that meets the statutory requirements.	Federal Register :: Submission for OMB Review; Plan for Foster Care and Adoption Assistance-Title IV-E (OMB #0970-0433)
23	Notice of meeting request for comment	Indian Health Service; HHS	N/A	n/a	Urban Confer to seek your input on the Urban Indian All Inclusive Rate.	Please register in advance and make plans to join us on Friday, June 10, 2022, from 1:00-2:30 p.m. ET for a virtual Urban Confer to seek your input on the Urban Indian All Inclusive Rate.	WRITTEN COMMENTS and RECOMMENDATIONS: Please send your comments and recommendations on the UIO All Inclusive Rate as follows, by August 5, 2022 by e-mail to: urbanconfer@ihs.gov – Subject line: UIO All Inclusive Rate. Register in advance for this meeting: https://ihs-gov.zoomgov.com/meeting/register/vJIsd-GrqjstHApcx9SIM1MVp-9qf2GCKNY
24	Notice; Final Response	Health Resources and Services Administration (HRSA), HHS	87 FR 30501	Published 5/19/2022	Criteria for Determining Maternity Care Health Professional Target Areas	Section 332 of the Public Health Service Act (PHSA) directs the Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), to identify Maternity Care Target Areas (MCTA), or geographic areas within health professional shortage areas that have a shortage of maternity care health professionals, for the purpose of providing maternity health care assistance to such health professional shortage areas. On September 21, 2021, the Health Resources and Services Administration (HRSA) published a Federal Register notice soliciting feedback on proposed criteria to be used to identify Maternity Care Target Areas (MCTAs). HRSA requested feedback on six proposed criteria for inclusion in a composite scale to identify MCTAs with the greatest shortage of maternity care health professionals: (1) Ratio of females ages 15-44 -to-full time equivalent maternity care health professional ratio; (2) percentage of females 15-44 with income at or below 200 percent of the federal poverty level (FPL); (3) travel time and distance to the nearest provider location with access to comprehensive maternity care services; (4) fertility rate; (5) the Social Vulnerability Index; and (6) four Maternal Health Indicators (pre-pregnancy obesity, pre-pregnancy diabetes, pre-pregnancy hypertension, and prenatal care initiation in the first trimester). This notice summarizes and responds to the comments received during the 60-day comment period and presents the final criteria which will be used to identify and score MCTAs.	Federal Register :: Criteria for Determining Maternity Care Health Professional Target Areas

25	Proposed Rule	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 31815	Published 5/25/2022	Basic Health Program; Federal Funding Methodology for Program Year 2023 and Proposed Changes to Basic Health Program Regulations	This document proposes the methodology and data sources necessary to determine Federal payment amounts to be made for program year 2023 to States that elect to establish a Basic Health Program under the Patient Protection and Affordable Care Act to offer health benefits coverage to low-income individuals otherwise eligible to purchase coverage through Health Insurance Exchanges.	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on June 24, 2022. https://www.federalregister.gov/documents/2022/05/25/2022-11047/basic-health-program-federal-funding-methodology-for-program-year-2023-and-proposed-changes-to-basic?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
26	DTLL	White House, HHS, USDA	N/A	Published 5/27/2022	HHS USDA and White House Tribal Consultation on developing and implementing a national strategy on hunger, nutrition, and health.	The Biden-Harris Administration has launched an effort to end hunger by 2030 and to increase healthy eating and physical activity so that fewer Americans get chronic diseases — like heart disease and diabetes. This effort will include a White House Conference on Hunger, Nutrition, and Health to find solutions to these challenges. At the conference, scheduled for September, the Biden-Harris Administration will announce a Plan encouraging the public and private sectors to work together to transform the food and physical activity environments in the United States. The goal is to help end hunger, improve nutrition and physical activity, and eliminate disparities	WH Conference_Dear Tribal Leader_5.27.22.pdf(Shared)- Adobe cloud storage
27	Notice	Health Resources and Services Administration (HRSA), HHS	87 FR 32426	Published 5/31/2022	Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)	The agenda for the June 14-15, 2022, meeting is being finalized and may include the following topics: Federal program updates; Sudden Infant Death Syndrome/Sudden Unexpected Infant Death; Violence, Incarceration, and Substance Abuse; Cultural Strength/Resilience; American Indian/Alaskan Native maternal and infant health disparities; Workforce and Workforce Development; and Race Concordant Care.	June 14, 2022, 11:00 a.m. to 5:30 p.m. Eastern Time and June 15, 2022, 11:00 a.m. to 5:30 p.m. Eastern Time. This meeting will be held virtually via 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. https://www.federalregister.gov/documents/2022/05/31/2022-11520/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: June 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Interim Final Rule	Department of Veteran Affairs (VA)	87 FR 33025	Published 6/01/2022	Legal Services for Homeless Veterans and Veterans At-Risk for Homelessness Grant Program	The Department of Veterans Affairs (VA) issues this rule to implement a new authority requiring VA to award grants to eligible entities that will provide certain legal services for homeless veterans and veterans at risk for homelessness. This new grant program is within the continuum of VA's homeless services programs. This rulemaking specifies grant eligibility criteria, application requirements, scoring criteria, constraints on the allocation and use of the funds, and other requirements necessary to implement this grant program. Section 79.0 explains the purpose and scope of part 79. Paragraph (a) states that the purpose of this part is to implement the Legal Services for Homeless Veterans and Veterans At-Risk for Homelessness Grant Program. This Grant Program authorizes VA to award legal services grants to eligible entities to provide legal services to eligible veterans. This is consistent with the intent and purpose of section 4202 of the Act.	Effective date: This interim final rule is effective July 1, 2022; Comment date: Comments must be received on or before August 1, 2022. https://www.federalregister.gov/documents/2022/06/01/2022-10930/legal-services-for-homeless-veterans-and-veterans-at-risk-for-homelessness-grant-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	Notice, Request for nominations	Centers for Disease Control and Prevention (CDC), HHS	87 FR 33486	Published 6/02/2022	Solicitation of Nominations for Appointment to the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHACHSPT)	The Centers for Disease Control and Prevention (CDC) is seeking nominations for membership on the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHACHSPT). The CHACHSPT consists of 18 experts in fields associated with public health; epidemiology; laboratory practice; immunology; infectious diseases; drug abuse; behavioral science; health education; healthcare delivery; state health programs; clinical care; preventive health; medical education; health services and clinical research; and healthcare financing, who are selected by the Secretary of the U.S. Department of Health and Human Services (HHS). The CHACHSPT charter stipulates that the Committee shall include representation of persons with HIV and other affected populations; state and local health and education agencies; HIV/viral hepatitis/ STD community-based organizations; and the ethics or faith-based community. At least four members shall be persons with HIV.	Nominations for membership on the CHACHSPT must be received no later than October 1, 2022. Packages received after this time will not be considered for the current membership cycle. https://www.federalregister.gov/documents/2022/06/02/2022-11815/solicitation-of-nominations-for-appointment-to-the-cdchrsa-advisory-committee-on-hiv-viral-hepatitis?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

3	Notice of listening sessions and request for public comments	Department of the Interior (DOI)	87 FR 33825	Published 6/03/2022	Strengthening Public Trust in the Department of the Interior Law Enforcement Programs DOI is conducting twelve (12) virtual listening sessions and inviting public comments to obtain stakeholder input on public perception of DOI law enforcement and understand how the DOI can best develop and maintain public trust, transparency, and legitimacy with its stakeholders.	In an effort to identify opportunities for improvement in law enforcement programs of the Department of the Interior (DOI) (National Park Service, U.S. Fish and Wildlife Service, Bureau of Land Management, Bureau of Indian Affairs, and Bureau of Reclamation) and to strengthen public trust in the Department's law enforcement practices and policies, the DOI is hosting twelve (12) listening sessions open to the public. DOI seeks to engage with diverse stakeholders who interact with, are impacted by, or have experience with DOI Law Enforcement Officers to strengthen public relations and inform DOI law enforcement programs. Transparency, building public trust and ensuring accountability are key tenets that support equitable law enforcement experiences across diverse geographic and demographic populations. The public can submit comments through this Federal Register Notice which will inform themes and recommendations for the Department. On July 7, 2021, Secretary Deb Haaland announced the establishment of a new departmental law enforcement task force to implement the highest standards for protecting the public and provide necessary policy guidance, resources, and training to agency personnel within the DOI. Led by Deputy Secretary of the Interior Tommy Beaudreau, the Task Force is responsible for implementing the Secretary's vision of utilizing an	Interested persons are also invited to submit comments in writing or online on or before August 2, 2022. https://www.federalregister.gov/documents/2022/06/03/2022-11892/strengthening-public-trust-in-the-department-of-the-interior-law-enforcement-programs?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
4	Notice	Centers for Medicare and Medicaid Services (CMS), HHS	87 FR 34273	Published 06/06/2022	Announcement of the Advisory Panel on Outreach and Education (APOE) June 23, 2022 Virtual Meeting	This notice announces the next meeting of the APOE (the Panel) in accordance with the Federal Advisory Committee Act. The Panel advises and makes recommendations to the Secretary of the U.S. Department of Health and Human Services (HHS) (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on opportunities to enhance the effectiveness of consumer education strategies concerning the Health Insurance Marketplace®, Medicare, Medicaid, and the Children's Health Insurance Program (CHIP). This meeting is open to the public. In accordance with the renewed charter, the APOE will advise the Secretary and the CMS Administrator concerning optimal strategies for the following: Developing and implementing education and outreach programs for individuals enrolled in, or eligible for, Medicare, Medicaid, the CHIP, and coverage available through the Health Insurance Marketplace® and other CMS programs. Enhancing the federal government's effectiveness in informing Medicare, Medicaid, CHIP, or the Health Insurance Marketplace® consumers, issuers, providers, and stakeholders, pursuant to education and outreach programs of issues regarding these programs, including the appropriate use of public-private partnerships to leverage the resources of	Deadline for Meeting Registration, Presentations, Special Accommodations, and Comments: Thursday, June 16, 2022, 5:00 p.m. (e.d.t). https://www.federalregister.gov/documents/2022/06/06/2022-12136/announcement-of-the-advisory-panel-on-outreach-and-education-apoe-june-23-2022-virtual-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

5	Notice	Health Resources and Services Administration (HRSA), Department of Health and Human Services.	87 FR 35223	Published on June 9, 2022	Agency Information Collection Activities: Proposed Collection: Public Comment Request: HRSA Ryan White HIV/AIDS Program Part F AIDS Education and Training Center Program Evaluation Activities, OMB No. 0915-0281-Extension	This notice announces a new information collection request (ICR) from HRSA to OMB for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. HRSA is requesting an extension of the current Event Record and Participant Information Form with minor changes. Respondents will also have the option to report multiple clinic and health professional program identification numbers to reflect multiple affiliations on the ER. Additional options were added for multiple questions in the ER to allow for more complete responses (e.g. an "other" response option was added to two questions; and response options such as trauma-informed care, gender affirming care, transgender/non-binary/other gender, people experiencing homelessness, and people with justice system involvement were added to capture relevant event topics). In addition to changes on the ER, minor revisions were made to the response options for multiple questions on the PIF to improve clarity (e.g., "Substance Abuse" was changed to "Substance Use Disorder"). Additionally, the question and response options on gender were updated. Changes include options added to multiple questions to allow for more complete	Comments on this ICR should be received no later than July 11, 2022. Submit your comments by email to paperwork@hrsa.gov or by mail to the HRSA Information Collection Clearance Officer, Room 14N136B, 5600 Fishers Lane, Rockville, MD 20857.
6	Notice of meeting and request for comment	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).	87 FR 35215	Published on June 9, 2022	Advisory Committee on Immunization Practices (ACIP)	The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces the following meeting of the Advisory Committee on Immunization Practices (ACIP). This meeting is open to the public. Time will be available for public comment. The agenda will include discussions on the use of COVID-19 pediatric vaccines. A recommendation vote(s) is scheduled. Agenda items are subject to change as priorities dictate. For more information on the meeting agenda, visit https://www.cdc.gov/vaccines/acip/meetings/index.html. The meeting will be webcast live via the World Wide Web; for more information on ACIP, visit the ACIP website: https://www.cdc.gov/vaccines/acip/index.html.	You may submit comments, identified by Docket No. CDC-2022-0079, by either of the following methods: • Federal eRulemaking Portal: https://www.regulations.gov. Follow the instructions for submitting comments. • Mail:Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop H24-8, Atlanta, Georgia 30329-4027, Attn: June 17-18, 2022, ACIP Meeting. Instructions: All submissions received must include the Agency name and Docket Number. All relevant comments received in conformance with the https://www.regulations.gov suitability policy will be posted without change to https://www.regulations.gov, including any personal

7	Notice of Meeting	National Institute of Health	87 FR 35561	Published on June 10, 2022	National Institute of Diabetes and Digestive and Kidney Diseases; Notice of Meeting	The meeting will be closed to the public as indicated below in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended for the review, discussion, and evaluation of individual grant applications conducted by the NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES, including consideration of personnel qualifications and performance, and the competence of individual investigators, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.	Name of Committee: Board of Scientific Counselors, NIDDK. Date: October 13-14, 2022. Open: October 13, 2022, 10:00 a.m. to 10:20 a.m. Place: National Institutes of Health, Building 10, 10 Center Drive, Bethesda, MD 20892 (Virtual Meeting). Closed: October 13, 2022, 10:20 a.m. to 5:40 p.m. Agenda: To review and evaluate to review and evaluate personal qualifications and performance, and competence of individual investigators. Place: National Institutes of Health, Building 10, 10 Center Drive, Bethesda, MD 20892 (Virtual
8	Final Rule	Department of Veterans Affairs (VA)	38 CFR 8	Published on June 10, 2022	National Service Life Insurance Premium Payment and Loan Amendment	The Department of Veterans Affairs (VA) is amending its National Service Life Insurance (NSLI) regulations to offer Service-Disabled Veterans' Insurance (S-DVI) policyholders the option of remitting premiums for government life insurance coverage only on a monthly or annual basis. VA is also increasing the amount that Veteran policyholders are eligible to borrow against the value of their life insurance policies and to adjust the interest rates charged for fixed-rate loans in certain circumstances.	This rule is effective July 11, 2022.
9	Notice	National Institutes of Health	87 FR 35791	Published on June 13, 2022	Notice of Listing of Members of the National Institutes of Health's Senior Executive Service 2022 Performance Review Board (PRB)	The National Institutes of Health (NIH) announces the persons who will serve on the National Institutes of Health's Senior Executive Service 2022 Performance Review Board.	For further information about the NIH Performance Review Board, contact Mr. Kha Nguyen, Director, Division of Senior and Scientific Executive Management, Office of Human Resources, National Institutes of Health, Building 31, Room 1C31P, Bethesda, Maryland 20892, telephone 301.594.3022 (not a toll-free number), email kha.nguyen@nih.gov.

10	Notice	Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).	87 FR 36129	Published June 15, 2022	Rescinding Requirement for Negative Pre-Departure COVID-19 Test Result or Documentation of Recovery From COVID-19 for All Airline or Other Aircraft Passengers Arriving Into the United States From Any Foreign Country	The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), is hereby rescinding the Order titled, "Requirement for Negative Pre-Departure COVID-19 Test Result or Documentation of Recovery from COVID-19 for All Airline or Other Aircraft Passengers Arriving Into the United States From Any Foreign Country." As subsequently amended, the Order required all air passengers, two years or older, traveling to the United States from a foreign country to present a negative COVID-19 test result from a sample taken no more than one day before departure, or documentation of recovery from COVID-19 in the past 90 days, before boarding a flight.	This rescission was implemented June 12, 2022.
11	Notice of request for public comment.	Health Resources and Services Administration (HRSA), Department of Health and Human Services.	87 FR 36516	Published June 17, 2022	Request for Information: Early Hearing Detection and Intervention Program	HRSA's Early Hearing Detection and Intervention (EHDI) Program is requesting input from the public to inform future EHDI program development. HRSA is seeking responses that address the following questions. A response to each question is not required. 1. What strategies or programs are needed to support EHDI programs to ensure that all newborns are screened by 1 month of age, a diagnosis is made by 3 months of age, and children who are deaf or hard of hearing are enrolled in and start to receive intervention services by 6 months of age? 2. What strategies should be considered to support the timely identification and receipt of services for young children up to age 3? 3. What strategies should be considered to ensure that infants and young children receive screening and diagnosis services that are high quality and evidence-based? 4. What strategies should be considered to ensure that providers collect and report high quality data on hearing screening, diagnosis, and follow-up to EHDI programs for public health surveillance? 5. What strategies or programs would ensure that families of children who are deaf or hard of hearing receive information that is accurate	Submit electronic comments to ehdi@hrsa.gov. Please submit your response only one time by July 18, 2022.

12	DTLL, request for comment	Indian Health Service, HHS	N/A	Published 06/17/2022	IHS Tribal Consultation on how to evaluate health care facilities construction demonstration project proposals.	As part of the Patient Protection and Affordable Care Act, the Indian Health Care Improvement Act (IHCIA) contains new provisions on health care facility construction demonstration projects. This authority affords an opportunity for the Indian Health Service (IHS) to test alternative models of care through unique funding arrangements with Tribes and Tribal Organizations. The IHCIA at Title 25 USC §1637(a)(1), "Indian Health Care Delivery Demonstration Projects," encourages the IHS to establish demonstration projects to test alternative means of delivering health care or to use alternative or innovative methods or models of delivering health care services. The IHCIA Health Care Facility provisions provide this authority and broad evaluation criteria. To ensure that the IHS considers your interests, please address the following questions. Your recommendations will contribute to the development of the Indian Health Care Delivery Demonstration Projects policy.	*WRITTEN COMMENTS AND RECOMMENDATIONS: I would also like to encourage Tribal Leaders to e-mail comments and recommendations by the Consultation comment deadline of Friday, August 5, 2022* *https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-06172022.pdf*
13	Notice of meeting	Substance Abuse and Mental Health Services (SAMHSA), HHS	87 FR 37340	Published 06/22/2022	Meeting of the Substance Abuse and Mental Health Services Administration, Center for Mental Health Services National Advisory Council	Notice is hereby given of the meeting on August 18, 2022 of the Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services National Advisory Council (CMHS NAC). The meeting will include consideration of the minutes from the March 29, 2022, SAMHSA, CMHS NAC meeting; updates from the CMHS Director; updates from the Office of the Assistant Secretary, and council discussions.	Thursday, August 18, 2022, 10:00 a.m. to 4:00 p.m., EDT, (OPEN). The meeting is open to the public and can be accessed virtually only by accessing: https://www.zoomgov.com/j/1608093739?pwd=M01ubE1nVENzZzZHT3drc0dUYWVLUT09 or by dialing 669-254-5252, webinar ID: 160 809 3739, passcode: 730918. Agenda with call-in information will be posted on the SAMHSA website prior to the meeting at: https://www.samhsa.gov/about-us/advisory-councils/meetings. https://www.federalregister.gov/documents/2022/06/22/2022-13180/meeting-of-the-substance-abuse-and-mental-health-services-

14	Notice, Comments	Office of Assistant Secretary for Public and Indian Housing, U.S. Department of Housing and Urban Development (HUD)	87 FR 37351	Published 06/22/22	Notice of Intent To Establish a Tribal Intergovernmental Advisory Committee; Request for Comments on Committee Structure	This notice announces HUD's intention to form the Department's first standing Tribal advisory committee. The committee will be called the `Tribal Intergovernmental Advisory Committee' (TIAC). This notice also solicits comments and recommendations regarding the establishment and structure of the TIAC. The TIAC will be made up of a diverse group of duly elected Tribal leaders representing small, medium, and large federally recognized Tribes. The TIAC is intended to further communications between HUD and federally recognized Tribes on HUD programs, make recommendations to HUD regarding current program regulations, provide advice in the development of HUD's American Indian and Alaska Native (AIAN) housing priorities, and encourage peer learning and capacity building among Tribes and non-Tribal entities. Consistent with HUD's Tribal Government-to-Government Consultation Policy, this notice solicits input on the proposed structure of the TIAC. The TIAC will be comprised of HUD representatives and Tribal delegates from across the country, representing small, medium, and large tribes. The TIAC will be composed of HUD officials (including the Secretary or his or her designee, as well as the Assistant Secretaries for Office of Public and Indian Housing (PIH), Office of Policy, Development, and Research (PD&R), Office of Fair Housing and Equal Opportunity (FHEO), Office of Field Policy	Comments on the proposed structure of the TIAC are due on or before: August 22, 2022. https://www.federalregister.gov/documents/2022/06/22/2022-13262/notice-of-intent-to-establish-a-tribal-intergovernmental-advisory-committee-request-for-comments-on?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
15	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 37600	Published 6/23/2022	Medicare Program; Calendar Year (CY) 2023 Home Health Prospective Payment System Rate Update; Home Health Quality Reporting Program Requirements; Home Health Value-Based Purchasing Expanded Model Requirements; and Home Infusion Therapy Services Requirements	This proposed rule would set forth routine updates to the Medicare home health and home infusion therapy services payment rates for calendar year (CY) 2023 in accordance with existing statutory and regulatory requirements. This proposed rule discusses home health utilization; proposes a methodology for determining the difference between assumed versus actual behavior change on estimated aggregate expenditures for home health payments as result of the change in the unit of payment to 30 days and the implementation of the Patient Driven Groupings Model (PDGM) case-mix adjustment methodology; and proposes a temporary retrospective and permanent prospective adjustment to the CY 2023 home health payment rates. This rule proposes reassignment of certain diagnosis codes under the PDGM. and proposes to establish a permanent mitigation policy to smooth the impact of year-to-year changes in home health payments related to changes in the home health wage index. This rule also proposes recalibration of the PDGM case-mix weights and updates the low utilization payment adjustment (LUPA) thresholds, functional impairment levels, comorbidity adjustment subgroups for CY 2023 and the fixed-dollar loss ratio (FDL) used for outlier payments. Additionally, this rule discusses the future collection of data regarding the use of telecommunications technology during a 30-day home health period of care on home health claims. In addition, this rule	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on August 16, 2022. https://www.federalregister.gov/documents/2022/06/23/2022-13376/medicare-program-calendar-year-cy-2023-home-health-prospective-payment-system-rate-update-home?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

16	Notice, request for comments	Health Resources and Services Administration (HRSA), HHS	87 FR 37873	Published 6/24/2022	Proposed Temporary Changes in State Title V Maternal and Child Health Block Grant Allocations	This notice seeks comments on proposed temporary changes to the method of calculating poverty-based allocations under Title V of the Social Security Act for HRSA's State Title V Maternal and Child Health (MCH) Block Grant. Since Fiscal Year (FY) 2017, the poverty-based allocation has been based on the U.S. Census Bureau's 3-year American Community Survey (ACS) estimates using three pooled 1-year estimates. However, due to the COVID-19 pandemic, there were disruptions in the ACS data collection in 2020 resulting in data quality issues that prevented the Census Bureau from releasing standard 1-year ACS estimates; instead, the Census Bureau released experimental estimates. HRSA proposes that the ACS 2020 experimental estimates be excluded from calculating MCH block grant allocations and that the FY 2023 funding allocation be based on the same poverty data used in the FY 2022 allocation (i.e., pooled 1-year estimates for 2017, 2018, and 2019 ACS). Funding allocations for FY 2024 and FY 2025 would continue to incorporate the latest 1-year ACS data while skipping 2020 (i.e., for FY 2024, the 2018, 2019, and 2021 ACS data will be used; for FY 2025, the 2019, 2021, and 2022 ACS data will be used). In FY 2026, the temporary change to the method for calculating allocations will no longer be necessary, and HRSA will resume pooling of three consecutive 1-year estimates (2021-2023).	Interested persons are invited to comment on this proposed change. Submit written comments no later than July 25, 2022. All comments received on or before this date will be considered. https://www.federalregister.gov/documents/2022/06/24/2022-13475/proposed-temporary-changes-in-state-title-v-maternal-and-child-health-block-grant-allocations?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
17	Notice of Tribal Consultation	Office of Head Start (OHS), Administration for Children and Families (AFC),HHS	87 FR 37858	Published 06/24/2022	Tribal Consultation Meetings between HHS/AFC and OHS leadership. Other representatives of tribal organizations and Native nonprofit organizations are welcome to attend as observers.	Pursuant to the Head Start Act, notice is hereby given of three tribal consultation sessions to be held between HHS/ACF OHS leadership and the leadership of tribal governments operating Head Start and Early Head Start programs. The purpose of these consultation sessions is to discuss ways to better meet the needs of American Indian and Alaska Native (AI/AN) children and their families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations. Three tribal consultations will be held as part of HHS/ACF or ACF Tribal Consultation Sessions.	Tuesday, July 12, 2022 Monday, August 15, 2022 Wednesday, September 14, 2022 https://www.federalregister.gov/documents/2022/06/24/2022-13532/tribal-consultation-meetings?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov

18	Notice, request for information (RFI)	Office of the Assistant Secretary for Health, HHS	FR 87 38168	Published 6/27/2022	Request for Information (RFI): HHS Initiative to Strengthen Primary Health Care	U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Health (OASH) requests input from persons, communities, health care providers, purchasers and payers, educators, researchers, and other members of the public about what the federal government could do to strengthen primary health care in the United States. Improving access to health care, advancing health equity, and improving the health of the Nation are top priorities for the Biden-Harris Administration and HHS. Access to high-quality primary health care has been shown to improve health equity and health outcomes, and is essential for addressing key priorities, including: the COVID-19 pandemic; mental and substance use disorder prevention and care, including suicide and overdose prevention; prevention and management of chronic conditions; gender-based violence; and maternal and child health and well-being. However, our nation's primary health care foundation is weakening and in need of support: primary health care is under-resourced; the workforce is shrinking; workforce well-being is in peril; and many practices face reimbursement challenges that may result in financial instability. The HHS Initiative to Strengthen Primary Health Care (the Initiative) aims to establish a federal foundation for the provision of primary health care for all that supports improved health outcomes and advanced health equity. The first task is to develop an initial HHS plan for strengthening	To be assured consideration, comments must be received at the email address provided below, no later than 11:59 p.m. Eastern Time (ET) on August 1, 2022. HHS will not reply individually to responders but will consider all comments submitted by the deadline. https://www.federalregister.gov/documents/2022/06/27/2022-13632/request-for-information-rfi-hhs-initiative-to-strengthen-primary-health-care?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
19	Notice, RFI and Comment	Centers for Disease Control and Prevention (CDC), HHS	87 FR 38408	Published 6/28/2022	Draft-American Indian and Alaska Native Worker Safety and Health Strategic Plan	The National Institute for Occupational Safety and Health (NIOSH) in the Centers for Disease Control and Prevention (CDC), an Operating Division of the Department of Health and Human Services (HHS), announces the availability of a draft strategic plan for public comment entitled Revised Draft of American Indian and Alaska Native Worker Safety and Health Strategic Plan (Revised Draft Strategic Plan). Information Needs: Additional data and information are needed to ensure the Revised Draft Strategic Plan addresses research and outreach that is most critical for understanding and reducing work-related injuries, illnesses, and fatalities among AI/AN workers. NIOSH seeks comments on the following: 1. Does the Revised Draft Strategic Plan address the most pressing occupational safety and health concerns for the AI/AN workforce? If not, what would you suggest be included or removed, and why? Please provide details on other health concerns considered pressing (e.g., type, prevalence, economic burden), including the reasoning for the suggestion that the health and safety concern be included or excluded from the Revised Draft Strategic Plan. 2. What recommendations do you have for NIOSH	Electronic or written comments must be received by August 29, 2022. https://www.federalregister.gov/documents/2022/06/28/2022-13723/draft-american-indian-and-alaska-native-worker-safety-and-health-strategic-plan?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

20	Notice of intent to award supplemental funding	Substance Abuse and Mental Health Services Administration	87 FR 38418	Published 06/28/2022	Fiscal Year 2022 Notice of Supplemental Funding Opportunity	This is a notice of intent to award supplemental funding to the Addiction Technology Transfer Centers (ATTC) Regional Centers and ATTC National Coordinating Office (NCO) recipients funded in FY 2017 under Notice of Funding Opportunities (NOFO) TI-17-005. It will inform the public that the Substance Abuse and Mental Health Services Administration (SAMHSA) is supporting administrative supplements, which are consistent with the scope of the initial FY 2017 awards, of up to $740,298 each for one-year to the ten ATTC Regional Centers and ATTC NCO for a total funding amount of $8,143,285. These grant recipients were funded in FY 2017 under the ATTC Cooperative Agreements, funding announcement TI-17-005 and have a project end date of September 29, 2022. The supplemental funds will be used to extend the program services for all 11 ATTCs from September 30, 2022 to September 29, 2023. The proposed 12-month extension will allow SAMHSA to align the project periods of the ATTCs with those of the Mental Health Technology Transfer Centers (MHTTC) and Prevention Technology Transfer Centers (PTTC) networks so that all three networks can compete together for the next five-year funding cycle of the Technology Transfer Centers (TTC) program. The TTC program is comprised of the three network programs (ATTC, PTTC and MHTTC), which all use the same training and technical assistance platform. If the three networks are competed in different years and new	https://www.federalregister.gov/documents/2022/06/28/2022-13616/fiscal-year-fy-2022-notice-of-supplemental-funding-opportunity?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
21	DULL	Indian Health Service (IHS), HHS	N/A	Published 06/30/2022	IHS Urban Confer on Exploring the Formation of an Urban Interagency Workgroup with other Federal Agencies	By letter dated February 3, 2022, 14 Senators signed a letter requesting that President Biden and Vice President Harris form an Urban Indian Interagency Workgroup to identify needs and develop strategies to improve services provided to urban American Indian and Alaska Native populations. In response, on May 2, 2022, the Indian Health Service (IHS) sent an update to Senator Alex Padilla indicating that the IHS would explore forming an Urban Indian Interagency Workgroup to ensure Urban Indian health care needs are considered at the local, regional, and national levels. URBAN CONFER SESSION (VIRTUAL): Please make plans to join us for a virtual Urban Confer session on Wednesday, July 13, 2022. I would like to encourage you to provide comments and recommendations on this important topic.	DATE: Wednesday, July 13, 2022 TIME: 2:00 p.m. – 3:30 p.m., Eastern Time REGISTRATION LINK: https://ihsgov.zoomgov.com/meeting/register/vJItdOrqjkjG--ocd3Fz6HXU-YLe23-rx4 WRITTEN COMMENTS AND RECOMMENDATIONS: Please send your recommendations on exploring the formation of an Urban Indian Interagency Workgroup by the comment deadline of Monday, September 12, 2022. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DUIOLL-06302022.pdf

NCUIH REGULATIONS TRACKER: July 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	DTLL & DULL	Indian Health Service (IHS), HHS	N/A	Published 07/01/2022	The Indian Health Service (IHS) Division of Health Professions Support requests your assistance in identifying priority health professions for inclusion into categories eligible for the IHS Scholarship Program (SP) in academic year 2023-2024 and the IHS Loan Repayment Program (LRP) in fiscal year (FY) 2023. the IHS seeks feedback on a list of "Priority Categories" for inclusion in the IHS SP and the IHS LRP. For academic year 2023-2024, and FY 2023, the IHS SP and the IHS LRP, respectively, will be funding physicians, nurses, dentists, pharmacists, and optometrists. We will also be asking IHS Areas to provide their feedback on health professions funding priorities. Please send us your list of priorities on the enclosed spreadsheets. Please limit your submission to health professions priorities for which you currently have full-time vacancies, or are anticipating full-time vacancies within the next year.	The Indian Health Service (IHS) Division of Health Professions Support requests your assistance in identifying priority health professions for inclusion into categories eligible for the IHS Scholarship Program (SP) in academic year 2023-2024 and the IHS Loan Repayment Program (LRP) in fiscal year (FY) 2023. the IHS seeks feedback on a list of "Priority Categories" for inclusion in the IHS SP and the IHS LRP. For academic year 2023-2024, and FY 2023, the IHS SP and the IHS LRP, respectively, will be funding physicians, nurses, dentists, pharmacists, and optometrists. We will also be asking IHS Areas to provide their feedback on health professions funding priorities. Please send us your list of priorities on the enclosed spreadsheets. Please limit your submission to health professions priorities for which you currently have full-time vacancies, or are anticipating full-time vacancies within the next year. IHS Loan Repayment: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DUIOLL_07012022-Enclosure-1.pdf IHS Scholarship Program: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DUIOLL_07012022-Enclosure-2.pdf	Please e-mail your priorities by August 1, 2022, to Ms. Tara Johnston at Tara.Johnston@ihs.gov. If you have any questions about the IHS SP, please contact CAPT Michael Bartholomew (SP) by e-mail at Michael.Bartholomew@ihs.gov, or by telephone at (301) 443-2349; questions about the IHS LRP, please contact Ms. Jackie Santiago (LRP) by e-mail at Jackie.Santiago@ihs.gov, or by telephone at (301) 443-248 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DUIOLL-07012022.pdf
2	DULL & DTLL	Indian Health Service (IHS), HHS	N/A	Published 07/01/2022	IHS Urban Confer on OUIHP Strategic Plan: Draft 2	To promote meaningful discussion on the first draft of the 2022-2026 OUIHP Strategic Plan, the IHS hosted a virtual Urban Confer on April 29, 2022, and a virtual Tribal Consultation on May 2, 2022. There were 14 Urban Indian Organizations (UIOs) that submitted written comments or made comments during the virtual Urban Confer session. The attached second draft of the 2022-2026 OUIHP Strategic Plan incorporates those recommendations. Draft Strategic Plan: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DRAFT-Enclosure-07012022b.pdf	VIRTUAL URBAN CONFER SESSION 2022 – 2026 OUIHP STRATEGIC PLAN DATE: Friday, July 8, 2022 TIME: 1:00 p.m. – 2:30 p.m., Eastern Time REGISTRATION LINK: https://ihs-gov.zoomgov.com/meeting/register/vJItf-ytrjMsGMa4kLhK7RFxj5rhNB3FyE https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DUIOLL-07012022b.pdf
3	Notice	Health Resources and Services Administration (HRSA), HHS	87 FR 40540	Published 07/07/2022	List of Designated Primary Medical Care, Mental Health, and Dental Health Professional Shortage Areas	This notice informs the public of the availability of the complete lists of all geographic areas, population groups, and facilities designated as primary medical care, dental health, and mental health professional shortage areas (HPSAs) in a designated status as of April 29, 2022. The lists are available on the shortage area topic page on HRSA's data.hrsa.gov website. Given the COVID-19 pandemic's impact on the health workforce and health care service delivery, HRSA is providing a longer transition time for jurisdictions and facilities to prepare for potential change of HPSA designations. HPSA designations that are currently proposed for withdrawal will remain in this status until they are re-evaluated in preparation for the publication of the 2023 HPSA Federal Register Notice. If these HPSAs do not meet the requirements for designation at the time of the publication of the July 2023 HPSA Federal Register Notice next year, they will be withdrawn. This additional time will allow jurisdictions to re-evaluate their HPSAs against the designation criteria, and plan for potential changes in staffing. Urban Indian Health Clinics are automatically designated as HPSAs based on statute or through regulation.	Complete lists of HPSAs designated as of April 29, 2022, and updated information on HPSAs are available on the website at https://data.hrsa.gov/topics/health-workforce/shortage-areas. Information on shortage designations is available at https://bhw.hrsa.gov/workforce-shortage-areas/shortage-designation. https://www.federalregister.gov/documents/2022/07/07/2022-14501/lists-of-designated-primary-medical-care-mental-health-and-dental-health-professional-shortage-areas?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
4	Notice of Funding/Grant Opportunity	Indian Health Service (IHS), HHS	N/A	Published 07/08/2022	IHS Alzheimer's Grant Program invites applications to the 2022 Indian Health Geriatric Scholars pilot The Alzheimer's Grant Program, a program of the IHS Office of Clinical and Preventive Services (OCPS), Division of Clinical and Community Services (DCCS), invites applications to the 2022 Indian Health Geriatric Scholars (GeriScholars) pilot. The Indian Health GeriScholars pilot has been developed with the support and collaboration of the VA Office of Rural Health and takes as its model the highly successful VA Geriatric Scholars Program that has built geriatric expertise into the primary care workforce over the past decade.	The Indian Health GeriScholars pilot has been developed with the support and collaboration of the VA Office of Rural Health and takes as its model the highly successful VA Geriatric Scholars Program that has built geriatric expertise into the primary care workforce over the past decade. The Indian Health GeriScholars pilot will provide participating IHS, Tribal, and Urban Indian Health clinicians with an individual intensive learning track for professional continuing education, including: A week-long intensive training in geriatrics at through an approved Geriatrics Board Review course A mentored geriatric improvement project at their local facility A clinical practicum or mentorship in geriatric practice Ongoing education, training, and peer support as an Indian Health Geriatric Scholar In this pilot year the Indian Health GeriScholars Program will accept at least 8 physicians, nurse practitioners, PAs, or pharmacists sponsored by their IHS, Tribal, or Urban Indian Health program	Application form: https://www.ihs.gov/sites/dccs/themes/responsive2017/display_objects/documents/GeriScholarsApp2022.docx For further information email IHSDHHS@ihs.gov. https://www.ihs.gov/dccs/alzheimers/

5	Final Rule	Department of Veterans Affairs (VA)	87 FR 41594	Published 07/13/2022	Civilian Health and Medical Program of the Department of Veteran Affairs	The Department of Veterans Affairs (VA) adopts as final, with changes, a proposed rule to amend its medical regulations concerning the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA). The final rule clarifies and updates these regulations to conform to changes in law and policy that control the administration of CHAMPVA and include details concerning the administration of CHAMPVA that were previously not reflected in regulation. The amendments improve our ability to effectively administer CHAMPVA and make technical revisions to make our regulations more understandable. In addition, this rulemaking expands covered services and supplies, to include certain preventive services, and eliminates cost-share amounts and deductibles for certain covered services.	Effective date: This final rule is effective August 12, 2022. Applicability date: The provisions of this final rule shall apply to all applications for benefits that are received by VA on or after the effective date of this final rule or that are pending before VA, the United States Court of Appeals for Veterans Claims, or the United States Court of Appeals for the Federal Circuit on the effective date of this final rule. https://www.federalregister.gov/documents/2022/07/13/2022-14285/civilian-health-and-medical-program-of-the-department-of-veterans-affairs?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	Notice of Meeting	Department of Veterans Affairs (VA)	87 FR 41874	Published 07/13/2022	The VA Advisory Committee on Tribal and Indian Affairs will meet on August 15, 16, and 17, 2022 from 8:30 am - 5:00 pm MST each day. The purpose of the Committee is to advise the Secretary on all matters relating to Indian Tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans. This includes advising the Secretary on the administration of healthcare services and benefits to American Indians and Alaska Native Veterans; thereby assessing those needs and whether VA is meeting them. The Advisory Committee on Tribal and Indian Affairs is a newly established FACA Committee. The Committee provides advice and guidance to the Secretary of Veterans Affairs on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans	On August 15, 2022, from 8:30 a.m. to 11:30 a.m. MST, the Committee will meet in open session with key staff from the Albuquerque Veterans Benefits Administration (VBA), held at the Albuquerque VBA Regional Office, 500 Gold Ave. SW, Albuquerque, NM 87102. The agenda will include opening remarks from the Committee Chair, Executive Sponsor, and other VA officials. There will be updates from the Benefits & NCA Subcommittee for discussion. From 1:30 p.m. to 5:00 p.m. MST, the Committee will convene with closed tour of the Santa Fe National Cemetery and New Mexico State Department of Veterans Affairs, and Santa Fe Indian Hospital. On August 16, 2022, from 8:30 a.m. to 11:30 a.m. MST, the Committee will convene at the Albuquerque VBA Regional Office, and receive updates from the Administrative Subcommittee for discussion. From 11:30 a.m. to 12:00 p.m. there will be Public Comment from those public members who have provided a written summary. From 1:30 p.m. to 5:00 p.m. MST, the Committee will convene with closed tour of the Albuquerque VBA site visits. On August 17, 2022, from 8:30 a.m. to 11:30 a.m. MST, the Committee the Committee will convene at the Albuquerque VBA Regional Office and receive updates from the Health Subcommittee for discussion. The committee will hold open discussion on topics relevant to the Committee and address follow-up and action items including dates for next meeting. From 1:30 p.m. to 5:00 p.m. MST, the Committee will convene with closed tour of the VA Medical Center, Indian Health Service Albuquerque Indian Hospital and the First Nations Community HealthSource.	https://www.federalregister.gov/documents/2022/07/13/2022-14854/advisory-committee-on-tribal-and-indian-affairs-notice-of-meeting?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
7	Notice of Tribal Consultation and Comment	Department of Homeland Security (DHS)	N/A	Published 07/13/2022	Department of Homeland Security invites Tribal leaders to join in virtual Tribal consultations related to our implementation of Executive Order 13175, Consultation and Coordination with Indian Tribal Governments of November 6, 2000; and Executive Order 14053, Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People of November 15, 2021	The purpose of these consultation sessions is to solicit input and recommendations from Tribal Nations and Alaska Native Corporations on the following topics: (1) The Department's efforts related to Executive Order 14053, Improving Public Safety and Criminal Justice for Native Americans and Addressing the Crisis of Missing or Murdered Indigenous People; and (2) Implementation of the DHS's 2021 Action Plan for Tribal Consultation and Strengthening Nation-to-Nation Relationships and additional action items to consider for including in the 2022 revision. We also encourage Tribal Nations to schedule individual consultation meetings as appropriate. Written comments for these consultation efforts are due no later than 90-days (9/8/2022) after the issuance of this invitation. The Deputy Assistant Secretary for Intergovernmental Affairs, Miriam Enriquez will serve as the Department's tribal consultation official and lead this tribal consultation effort. The DHS 2021 Action Plan can be found here: https://www.dhs.gov/publication/dhs-tribal-consultation-policy The Department is interested in soliciting input from Tribal Nations on the following topics: •What process would you like to see the Department use when planning efforts and activities to address Missing and Murdered Indigenous People, to ensure that efforts are informed by Tribal Nations? •What challenges do you see the Department of Homeland Security facing in the realm of improving public safety and criminal justice within Tribal Nations? What actions and policies would you like to see the Department of Homeland Security prioritize?	Monday, July 18, 2022, 2:00 ET, 1:00 CT, 12:00 MT, 11:00 PT, 10:00 AK: MS Teams: Click here to join https://tinyurl.com/3axd5ak4 Wednesday, July 20, 2022, 3:00 ET, 2:00 CT, 1:00 MT, 12:00 PT, 11:00 AK: Phone only - 855-852-7677 Pin: 9999-0743-8454# Tuesday, July 26, 2022, 3:00 ET, 2:00 CT, 1:00 MT, 12:00 PT, 11:00 AK: MS Teams: Click here to join https://tinyurl.com/5fjunttr Wednesday, July 27, 2022, 12:00 ET, 11:00 CT, 10:00 MT, 9:00 PT, :00 AK: MS Teams: Click here to join https://tinyurl.com/y6wtr2nu Thursday, July 28, 2022, 4:00 ET, 3:00 CT, 2:00 MT, 1:00 PT, 12:00 AK: Phone only - 855-852-7677 Pin: 9999-0743-8454# Wednesday, August 3, 2022, 12:00 ET, 11:00 CT, 10:00 MT, 9:00 PT, :00 AK: MS Teams: Click here to join or copy and paste: https://tinyurl.com/yckk6zee https://members.nathpo.org/eventcalendar/Details/dhs-tribal-consultations-on-eo-14053-dhs-s-2021-action-plan-phone-only-690648?sourceTypeId=Website
8	Notice and Request for Public Comment	Office of Planning, Research, and Evaluation, Administration for Children and Families, HHS	87 FR 42180	Published 07/14/2022	Proposed Information Collection Activity; Racial and Ethnic Disparities in Human Services Analysis Execution Project (New Collection)	The Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services (HHS) is proposing to collect data to explore how one state's changes to Temporary Assistance for Needy Families (TANF) policies and services in response to the COVID-19 pandemic were experienced by different racial and ethnic groups in that state. The goal is to obtain an in-depth understanding of how TANF participants of different racial and ethnic backgrounds experienced these policy and programmatic changes by comparing those experiences within one state, and to assess whether those changes may have helped to ameliorate challenges around program and benefit access for different populations or potentially created new challenges.	Comments are due within 60 days of this Notice. https://www.federalregister.gov/documents/2022/07/14/2022-15057/proposed-information-collection-activity-racial-and-ethnic-disparities-in-human-services-analysis?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

9	Notice of Tribal Consultation	Office on Violence Against Women (OVAW), DOJ	N/A	Published 07/14/2022	The 17th Annual Government-to-Government Violence Against Women Tribal Consultation will be conducted from September 21-23, 2022, in Anchorage, AK. Due to the ongoing COVID-19 national pandemic and uncertainty about future medical trends, the Department of Justice will continue to implement measures to protect the safety and health of tribal leaders and others who attend this tribal consultation in person. They will also provide an option for tribal leaders who prefer to testify virtually and, if it becomes unsafe to conduct meetings in person, they will conduct the full tribal consultation virtually. The Department of Justice will be joined by other federal stakeholders, including their colleagues from the United States Departments of Health and Human Services and the Interior. They will conduct the tribal consultation over two full days with the morning of the third day to be an open and interactive discussion between tribal leaders and federal representatives.	The Office on Violence Against Women is a grant-making agency in the U.S. Department of Justice. Under §903 of Title IX of the United States Department of Justice Reauthorization and Violence Against Women Act of 2005 (VAWA 2005), OVW is responsible for conducting annual government-to-government consultations with the leaders of all Federally recognized Indian tribal governments on behalf of the United States Attorney General. The purpose of each consultation is to solicit recommendations from tribal government leaders on the following topics: (1) Administering tribal funds and programs; (2) Enhancing the safety of Indian women from domestic violence, dating violence, sexual assault, homicide, stalking, and sex trafficking; (3) Strengthening the federal response to such crimes; and, (4) Improving access to local, regional, state, and federal crime information databases and criminal justice information systems.	OVW Consultation: https://www.ovwconsultation.org/?mc_cid=67f687a327&mc_eid=%5b91c0b8ef38%5d
10	Notice of Summit	Indian Health Service (IHS), HHS	N/A	Published 07/19/2022	IHS Public & Community Health Virtual Summit on September 7-9, 2022	Public and Community Health Virtual Summit "Using Innovative and Collaborative Approaches to Support Community Health Partners" Purpose: To bring together public and community health professionals, workers, and teams to learn, network, and share ideas to promote and support patient and community health. Target Audience: nurses, social workers, public health nurses, community health representatives, health educators and other interested individuals.	Indian Health Service - Public & Community Health Virtual Summit (vfairs.com)
11	Notice of Funding	Indian Health Service (IHS), HHS	87 FR 43537	Published 07/21/2022	Youth Regional Treatment Center (YRTC) Aftercare Program	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for Youth Regional Treatment Center Aftercare Programs (Short Title: Youth Aftercare). This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Health Care Improvement Act, 25 U.S.C. 1665a and 1665g. This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.654. The goal of the Youth Aftercare cooperative agreement is to help AI/AN youth pursue and sustain safety, sobriety, and employability after release from a YRTC. While aftercare support services may not exist in a youth's home community, the YRTC can lead the development of effective aftercare methods. The YRTC Aftercare cooperative agreement awardee ("awardee") will pursue the above stated goal in each AI/AN client who separates from their respective YRTCs. In addition to the stated goal, a focus of this funding opportunity is to understand and overcome aftercare management and performance barriers that affect the capacity of YRTCs and the IHS to develop effective and responsive solutions within the scope of the AI/AN Youth CoC, given AI/AN youth's behavioral health treatment requirements. To be eligible for this funding opportunity, an applicant must be a current, IHS-funded YRTC, operated by one of the following as defined by 25 U.S.C. 1603: • A federally recognized Indian Tribe as defined by 25 U.S.C. 1603(14).	Federal Register :: Youth Regional Treatment Center Aftercare Program
12	Proposed Rule	HHS	N/A	Published 07/25/2022	HHS Announces Proposed Rule to Strengthen Nondiscrimination in Health Care	The Section 1557 Notice of Proposed Rulemaking (NPRM) seeks to address gaps identified in prior regulations. In order to advance protections under this rule it: Reinstates the scope of Section 1557 to cover HHS' health programs and activities. Clarifies the application of Section 1557 nondiscrimination requirements to health insurance issuers that receive federal financial assistance. Aligns regulatory requirements with Federal court opinions to prohibit discrimination on the basis of sex including sexual orientation and gender identity. Makes clear that discrimination on the basis of sex includes discrimination on the basis of pregnancy or related conditions, including "pregnancy termination." Ensures requirements to prevent and combat discrimination are operationalized by entities receiving federal funding by requiring civil rights policies and procedures. Requires entities to give staff training on the provision of language assistance services for individuals with limited English proficiency (LEP), and effective communication and reasonable modifications to policies and procedures for people with disabilities. Requires covered entities to provide a notice of nondiscrimination along with a notice of the availability of language assistance services and auxiliary aids and services. Explicitly prohibits discrimination in the use of clinical algorithms to support decision-making in covered health programs and activities. Clarifies that nondiscrimination requirements applicable to health programs and activities include those services offered via telehealth, which must be accessible to LEP individuals and individuals with disabilities	Public comments on the NPRM are due 60 days after publication of the NPRM in the Federal Register. The Department will also be conducting a Tribal consultation meeting on August 10, 2022, from 2:00 p.m. to 4:00 p.m. Eastern Daylight Time. To participate, you must register in advance at https://www.zoomgov.com/meeting/register/vJIsfu-rqzksEI2T8gUp_IDrWBqkU0223CY exit disclaimer icon. https://www.hhs.gov/about/news/2022/07/25/hhs-announces-proposed-rule-to-strengthen-nondiscrimination-in-health-care.html

13	Notice of Funding Opportunity	Indian Health Service, HHS	87 FR 45778	Published 07/29/2022	IHS Special Diabetes Program for Indians (SDPI) funding opportunity	The Indian Health Service (IHS) is accepting applications for the Special Diabetes Program for Indians (SDPI – formerly Community-Directed SDPI). This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and section 330C of the Public Health Service Act, codified at 42 U.S.C. 254c-3. This program is described in the Assistance Listings located at https://sam.gov/content/home/ (formerly known as the CFDA) under 93.237 The total funding identified for fiscal year (FY) 2023 is approximately $136 million. Individual award amounts for the first budget year are anticipated to be between $12,500 and $7.5 million. The funding formula which determines the funds available to each IHS area has been determined through Tribal consultation. Within each area, awardee Tribes provide input on the formula which determines the amount of funding available for each successful applicant. Current SDPI awardees should budget for the same amount as they received in FY 2022. However, funding amounts may change. See the paragraph below for additional information. • New SDPI award applicants should apply for a $12,500 base amount. The funding available for competing and subsequent continuation awards issued under this announcement is subject to the availability of appropriations and budgetary priorities.	Application Deadline Date: October 7, 2022 Earliest Anticipated Start Date: January 1, 2023 https://public-inspection.federalregister.gov/2022-16264.pdf
14	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 45860	Published 07/29/2022	Medicare and Medicaid Programs; CY 2023 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Medicare and Medicaid Provider Enrollment Policies, Including for Skilled Nursing Facilities; Conditions of Payment for Suppliers of Durable Medicaid Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS); and Implementing Requirements for Manufacturers of Certain Single-Dose Container or Single-Use Package Drugs To Provide Refunds With Respect to Discarded Amounts	This major proposed rule addresses: changes to the physician fee schedule (PFS); other changes to Medicare Part B payment policies to ensure that payment systems are updated to reflect changes in medical practice, relative value of services, and changes in the statute; Medicare Shared Savings Program requirements; updates to the Quality Payment Program; Medicare coverage of opioid use disorder services furnished by opioid treatment programs; updates to certain Medicare and Medicaid provider enrollment policies, including for skilled nursing facilities; updates to conditions of payment for DMEPOS suppliers; HCPCS Level II coding and payment for wound care management products; electronic prescribing for controlled substances for a covered Part D drug under a prescription drug plan or an MA-PD plan under the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act (SUPPORT Act); updates to the Medicare Ground Ambulance Data Collection System; and provisions under the Infrastructure Investment and Jobs Act. *In the FY 2023 IPPS/LTCH PPS proposed rule (87 FR 28396 through 28398), CMS is proposing to use the exceptions and adjustments authority under section 1886(d)(5)(I) of the Act to establish a new supplemental payment for IHS/Tribal hospitals and hospitals located in Puerto Rico, beginning in FY 2023.*	To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on September 6, 2022. In commenting, please refer to file code CMS-1770-P. https://www.federalregister.gov/documents/2022/07/29/2022-14562/medicare-and-medicaid-programs-cy-2023-payment-policies-under-the-physician-fee-schedule-and-other

NCUIH REGULATIONS TRACKER: August 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	RELEVANT DATES	AGENCY ACTIONS	SUMMARY	AN
1	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 47824	Published 08/04/2022	CMS issues proposed rule concerning nondiscrimination in Health Programs and Activities	The Department of Health and Human Services (HHS or the Department) is issuing this proposed rule on Section 1557 of the Affordable Care Act (ACA) (Section 1557). Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs and activities. Section 1557(c) of the ACA authorizes the Secretary of the Department to promulgate regulations to implement the nondiscrimination requirements of Section 1557. The Department is also proposing to revise its interpretation regarding whether Medicare Part B constitutes Federal financial assistance for purposes of civil rights enforcement and to revise nondiscrimination provisions to prohibit discrimination on the basis of sexual orientation and gender identity in regulations issued by the Centers for Medicare & Medicaid Services (CMS) governing Medicaid and the Children's Health Insurance Program (CHIP); Programs of All-Inclusive Care for the Elderly (PACE); health insurance issuers and their officials, employees, agents, and representatives; States and the Exchanges carrying out Exchange requirements; agents, brokers, or web-brokers that assist with or facilitate enrollment of qualified individuals, qualified employers, or qualified employees; issuers providing essential health benefits; and qualified health plan issuers.	Submit comments on or before Octobe https://www.federalregister.gov/docu programs-and- activities?utm_source=federalregister.g ist
2	DULL/DTLL	Indian Health Service, HHS	N/A	Published 08/04/2022	IHS to elevate 12 existing Chief Executive Officer (CEO) positions at various IHS Service Units to Senior Executive Service (SES) positions	IHS intends to enable parity across the IHS for positions of similar complexity, enhance the capacity of the IHS to optimize resources, facilities, oversight, and consistency across the organization, and create equity across the IHS to effectively recruit and retain executive-level leadership to manage what is presently an executive-level assignment carried out by a General Schedule grade 15 (GS-15). The recruitment timeline to fill the 12 additional SES-level CEO positions is tentatively scheduled to begin in August 2022. The positions will be recruited simultaneously. In the near future, IHS Area Directors in each of the Areas affected by this announcement will contact Tribal Leaders and Urban Indian Organization Leaders within their Areas to provide updates on Area-specific SES recruitment timelines and processes. The next scheduled OPM Biennial Review Submission period for FYs 2024 and 2025 will commence later this year. At that time, the IHS will respond with our identified needs for additional SES position allocations.	https://www.ihs.gov/sites/newsroom/th DTLL-DUIOLL-080422.pdf
3	DULL/DTLL	Indian Health Service, HHS	N/A	Published 08/05/2022	The Indian Health Service (IHS) posts Request for Proposal (RFP) for IHS Health Information Technology (HIT) Modernization.	The purpose of Request for Proposals (RFP) No. 140D0421R0050 is to solicit Electronic Health Records (EHR) providers and/or integrators in order to establish a single-award Indefinite Delivery, Indefinite Quantity (IDIQ) contract for IHS's Health Information Technology (HIT) modernization efforts. An important part of the RFP evaluation process will be an opportunity to review a series of video demonstrations of representative clinical scenarios presented by the vendors. The IHS plans to engage health IT system users from IHS, Tribal, and Urban Indian Organization sites to assist in this process. HHS will be reaching out in a few weeks to ask I/T/U providers to identify individuals who can serve as Advisors. Selected staff should be health IT users who can attest to having no potential conflicts of interest with product vendors or system integrators that might be bidding or partnering with others participating in the IHS IT modernization process. Tirbal Leaders and UIO leaders are ecnouraged to review the RFP and re-visit the site periodically, as there may be updates to reflect new information, for example, responses provided when vendor questions are posted.	The Acting Director announces the Aug commercial products to replace the Re DTLL/DULL: https://www.ihs.gov/sites/newsroom/th DTLL-DUIOLL-08052022.pdf RFP: https://sam.gov/opp/57a0b54fa27
4	DTLL	Administration for Children and Families; Department of the Interior	N/A	Published 08/08/2022	The Department of the Interior (DOI) and Department of Health and Human Services (HHS) announce virtual briefing on their efforts to ensure the wellbeing of Tribal Children	DOI and HHS will host a virtual briefing on August 8, 2022 from 1:00-3:00pm ET concerning their efforts to ensure the wellbeing of Tribal children. As part of the briefing, the Bureau of Indian Affairs will provide an update on social service programs, grants, and other actions in support of ICWA. The HHS Administration for Children and Families will share information on funding, training, and technical assistance resources that it provides to tribes, state child welfare agencies, and courts to strengthen practice in support of the wellbeing of tribal children. The ACF awarded state-tribal collaboration grants to recipients in Minnesota, North Dakota, and Oklahoma to strengthen practices around ICWA. Following the updates, grantee officials will share the outcomes of their work. Tribal leaders will be able to provide comments and ask questions.	The agencies welcome written comme 2022. If you have questions regarding this virtual bri Advisor, at mirtha.beadle@acf.hhs.gov https://www.bia.gov/sites/default/files
5	Presidential Document	Executive Office of the President	87 FR 48601	Published 08/10/2022	President Biden proclaims August 7 through August 13, 2022 as National Health Center Week	On August 9, 2022, President Biden declared August 7 through August 13, 2022 as National Health Center Week.The intent of this declaration is to recognize health centers and staff for their outstanding contributions to communities across America and to thank them for their dedication, their service, and their commitment to a stronger, healthier, and more equitable health system.	https://www.federalregister.gov/docu 2022?utm_medium=email&utm_camp
6	Notice	Department of State, PEPFAR Scientific Advisory Board (SAB)	87 FR 48747	Published 08/10/2022	U.S. Department of State announces a Public Meeting of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) Scientific Advisory Board	In accordance with the Federal Advisory Committee Act, the U.S. Department of State announces that the PEPFAR Scientific Advisory Board (SAB) will be holding a virtual meeting of the full board. The meeting will be open to the public; a public comment session will be held during the meeting. The meeting will be held on Thursday, September 8, 2022, from approximately 8 a.m. to 1 p.m. (EDT) utilizing an online platform. Individuals wishing to view are asked to pre-register at https://forms.gle/FrENNQyoX8Xav2zp8.Pre-registration is required for both public viewing and comment. SAB members will be discussing two topics: considerations for PEPFAR implementation of tools for recent HIV infection surveillance and considerations for PEPFAR implementation of the dapivirine vaginal ring. Meeting materials from prior SAB meetings may be accessed here: www.state.gov/scientific-advisory-board-pepfar.	https://www.federalregister.gov/docu presidents-emergency-plan-for-aids-rel board?utm_source=federalregister.gov
7	DULL/DTLL	IHS, HHS	N/A	Published 08/10/2022	The Indian Health Service announces that CAPT Marcus Martinez has been named director of the Portland Area Indian Health Service.	As the Director of the Portland Area IHS, CAPT Martinez is responsible for overseeing comprehensive health care and environmental health services for American Indians and Alaska Natives throughout Oregon, Idaho, Washington State, and part of Utah. With an estimated patient population of approximately 150,000, the Portland Area IHS includes six federally operated Service Units, as well as Tribal and Urban Indian Organization health programs.	https://www.ihs.gov/sites/newsroom/th DTLL-DUIOLL-08102022.pdf
8	DTLL	Veterans Associate (VA)	N/A	Published 08/12/2022	The Department of Veterans Affairs (VA) initiates Tribal Consultation to finalize the Tribal Health Program Rimbursement Agreement template.	VA invites tribal leaders (or their representative designees) to provide feedback and comments on a draft template to assist in finalizing the THP Reimbursement Agreement template for the lower 48 states. VA specifically seeks feedback regarding the topics below: 1) VA endeavors to make THP billing for PRC as easy as possible and heard from several stakeholders the preference for monthly billing submissions. VA proposes monthly billing submission to include a cover letter and excel spreadsheet with the THP facility information and claims information with associated EOBs or similar documentation attached showing proof of THP payment. Facilities would electronically submit those using VA's g-invoice or e-Invoice system, which conforms to the X12 electronic data interchange (EDI). a. Would THPs have technical issues invoicing VA for PRC as proposed? If so, what alternative approach do you propose that would be consistent with submitting invoices and attached document as proof of payment for PRC. 2) Both Medicare and Medicaid pay providers separately from the IHS All Inclusive Rate (AIR) for certain outpatient services when not billed with a clinic visit. a. Do THPs or IHS facilities have recommendations on services that should be excluded from the IHS AIR reimbursement and paid at Medicare Fee for Service rates instead? What is the rational for proposal?	An in: person consultation is scheduled Time) at the Hyatt Regency Washingto A virtual listening session is scheduled fo Participants can access the session by l https://vacctraining.adobeconnect.co Written comments may be submitted t For additional information regarding th tribal.agreements@va.gov. DTLL: https://content.govdelivery.com/attac 20FR%20notice,%20signed%20LaPuz.pd Draft Template: https://content.govdelivery.com/attac 22%29%20THP%20RAP%20Template%20
9	Notice of Funding Opportunity	IHS, HHS	87 FR 49865	Published 08/12/2022	The Indian Health Service (IHS) is accepting applications for a cooperative agreement for the Healthy Lifestyles in Youth (HLY) Program	This program promotes healthy lifestyles for American Indian and Alaska Native (AI/AN) youth using the curriculum "Together Raising Awareness for Indian Life" (TRAIL) among selected Native Boys and Girls Club sites. Under this cooperative agreement,IHS proposes to enter into a collaborative effort/initiative with an entity that has experience working with Boys and Girls Clubs of America (BGCA), experience working with and implementing the TRAIL curriculum, and overall expertise and experience in addressing and evaluating healthy lifestyle techniques in AI/AN youth. The IHS issued the original funding opportunity announcement for the HLY cooperative agreement in 2003 and the program has been ongoing since that time. The Boys and Girls Club sites selected by the awardee may use IHS grant funds to provide services to eligible IHS beneficiaries only. The awardee will: provide technical consultation; train; monitor; evaluate; and provide funds to support these activities. Boys and Girl Club sites that are located outside of Tribal communities are not eligible.	Application Deadline Date: Septembe Earliest Anticipated Start Date: Septem https://www.federalregister.gov/docu project?utm_source=federalregister.go t
10	Final Rule	Administration for Community Living, HHS	87 FR 50000	Published 08/15/2022	The Administration for Community Living (ACL) within the Department of Health and Human Services (HHS or the Department) is amending its regulations for the National Institute on Disability, Independent Living and Rehabilitation Research (NIDILRR).	ACL intends these amendments to NIDILRR's peer review criteria to allow NIDILRR to better evaluate the extent to which its grant applicants conduct outreach to people with disabilities and people from other groups that traditionally have been underserved and underrepresented, as described in Executive Order 13985, and emphasize the need for research and development activities that apply appropriate engineering knowledge and techniques within NIDILRR's Rehabilitation Engineering Research Centers (RERC) program.	These final regulations are effective Sep https://www.federalregister.gov/docu independent-living-and-rehabilitation- research?utm_source=federalregister.g ist
11	Notice	Department of Veterans Affairs (VA)	87 FR 50166	Published 08/15/2022	VA solicits nominations for the appointment of an IHS Billings Area Representative to the VA Advisory Committee on Tribal and Indian Affairs	The VA, Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs to represent the Indian Health Service, Billings Area. Nominations should be type written (one nomination per nominator). Nomination package should include: (1) a letter of nomination that clearly states the name and affiliation of the nominee, the basis for the nomination (i.e.specific attributes which qualify the nominee for service in this capacity), and a statement from the nominee indicating a willingness to serve as a member of the Committee; (2) the nominee's contact information, including name, mailing address, telephone numbers, and email address; (3) the nominee's curriculum vitae or resume, not to exceed five pages and (4) a summary of the nominee's experience and qualification relative to the professional qualifications criteria listed above.	Nominations for membership on the C September 2, 2022. https://www.federalregister.gov/doc the-appointment-to-the-advisory-co indian?utm_source=federalregister.go t
12	Notice	HHS	87 FR 50090	Published 08/15/2022	The Secretary of Health and Human Services announces determination that there is a public health emergency, or a significant potental for a publice health emergency, that involves monkeypox virus.	The Secretary of Health and Human Services (HHS) is issuing this notice pursuant to section 564 of the Federal Food, Drug, and Cosmetic (FD&C) Act. On August 9, 2022, the Secretary determined pursuant to his authority under section 564 of the FD&C Act that there is a public health emergency, or a significant potential for a public health emergency, that affects, or has a significant potential to affect, national security or the health and security of United States citizens living abroad that involves monkeypox virus. On the basis of this determination, he also declared that circumstances exist justifying the authorization of emergency use of vaccines for use against monkeypox virus pursuant to section 564 of the FD&C Act, subject to the terms of any authorization issued under that section.	The determination and declaration a https://www.federalregister.gov/doc emergency-use-authorization-monke vaccine?utm_source=federalregister +list
13	Notice of meeting	Health Resources and Services Administration (HRSA), HHS	87 FR 50090	Published 08/15/2022	The Health Resources and Services Administration announces a public meeting of the Advisory Committee on Infant and Maternal Mortality	In accordance with the Federal Advisory Committee Act, this notice announces that the Advisory Committee on Infant and Maternal Mortality (ACIMM) 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. The agenda for the September 13-15, 2022, meeting is being finalized and may include the following topics: infant and maternal mortality among American Indian/Alaska Native (AI/AN) women and infants; indigenous health; and federal program updates. In addition to these topics, it is expected that there will be a discussion of recommendations by the ACIMM to the Secretary of HHS on improving birth outcomes among AI/AN mothers and infants, and then a vote on whether to send the recommendations forward to the Secretary of HHS. Agenda items are subject to change as priorities dictate.	Dates and Times of the announced Sep September 14, 2022, 9 a.m.-5 p.m. CT; a September 15, 2022, 9 a.m.-12 p.m. CT. https://www.federalregister.gov/docu committee-on-infant-and-maternal-mo committee?utm_campaign=subscriptio email
14	Notice of a modified system of records	Department of Housing and Human Services (HUD); Office of Public and Indian Housing and Office of Housing	87 FR 50635	Published 08/157/2022	The Housing and Urban Development Department announces a modification to the Enterprise Income Verification System	The Enterprise Income Verification System (EIV) is used to verify program participants/tenants, reported income, identify unreported income sources and/or amounts and identify substantial annual income discrepancies amongst households that receive HUD provided rental assistance through programs administered by HUD's Office of Public and Indian Housing and Office of Housing Multifamily program. Under the Privacy Act of 1974, the Department of Housing and Urban Development, the Office of Public and Indian Housing proposes to update the system of records titled EIV. The EIV System has been modified replacing the Income Discrepancy Report with the Income Validation Tool built on the MicroStrategy platform. The EIV System is a web-based Upfront income verification System that allows authorized Public Housing Agencies, Multifamily Housing Owners/Agents, and Contract Administrators to verify program participants/tenants, reported income, identify unreported income sources and/or amounts and identify substantial annual income discrepancies amongst households that receive HUD provided rental assistance through programs administered by HUD's Office of Public and Indian Housing and Office of Housing's Multifamily Housing Programs.	This notice shall become valid Septemb https://www.federalregister.gov/docu records?utm_source=federalregister.go t

15	Notice of virtual public meeting	Census Bureau, Department of Commerce	87 FR 50833	Published 08/18/2022	2020 Census Tribal Consultation; Virtual Public Meeting	The Census Bureau will conduct a tribal consultation on the second and final 2010 Demonstration Data Product for the Demographic and Housing Characteristics File (DHC) on September 19, 2022, via national webinar. Feedback on this demonstration data product will help to determine the final parameter and settings for the 2020 DHC. The tribal consultation meeting reflects the Census Bureau's continuous commitment to strengthen nation-to-nation relationships with federally recognized tribes. The Census Bureau's procedures for outreach, notice, and consultation ensure involvement of tribes to the extent practicable and permitted by law before making decisions or implementing policies, rules, or programs that affect federally recognized tribal governments. These meetings are open to citizens of federally recognized tribes by invitation. The Census Bureau conducted a tribal listening session on Thursday, August 18, 2022, to prepare tribes for the September virtual tribal consultation and sent materials to the tribes to help with their analysis of the demonstration data product. The Census Bureau provided questions in preparation for the virtual tribal consultation focused on the DHC. In that regard, the Census Bureau is asking tribal governments to identify potentially problematic results from the application of disclosure avoidance to the 2010 demonstration data. Helpful feedback would include identification of tables and geographies that are acceptable and unacceptable. The purpose of the virtual tribal consultation is to hear tribes' recommendations.	The Census Bureau will conduct the trib 3:00 p.m. to 4:30 p.m. EDT. Any question must be received in writing via email b Meeting Information: The Census Bureau tribal consultation w the following link: https://teams.microsoft.com/registratio wkezvnebFVFaoQ,iUFZ8p48HkiUQKd6kl hUaO3gRjCnuT8Q?mode=read&tenan Submit your comments by email. Send https://www.federalregister.gov/docu virtual-public- meeting?utm_source=federalregister.g st
16	Notice of a hybrid meeting	HHS, Office of the Secretary, Office of the Assistant Secretary for Health	87 FR 51114	Published 08/19/2022	Meeting of the Presidential Advisory Council on HIV/AIDS	U.S. Department of Health and Human Service is hereby giving notice that the Presidential Advisory Council on HIV/AIDS (PACHA or the Council) will convene the 74th full council meeting on Monday, September 19, 2022 and September 20, 2022. The meeting will convene in Los Angeles, California and it will also utilize virtual technologies. The meeting will be open to the public. Due to limited space, pre-registration is encouraged for members of the public who wish to attend the meeting in-person. Please email your name to PACHA@hhs.gov by close of business Friday, September 9, 2022 to pre-reigster. There will be a public comment session during the meeting; pre-registration is required to provide public comment. To pre-register to provide public comment, please send an email to PACHA@hhs.gov and include your name, organization, and title by close of business Friday, September 9, 2022. If you decide you would like to provide public comment but do not pre-register, you may submit your written statement by emailing PACHA@hhs.gov by close of business Tuesday, September 27, 2022. The meeting agenda will be posted on the PACHA page on HIV.gov at https://www.hiv.gov/federal-response/pacha/about-pacha prior to the meeting.	The meeting will be held on Monday, S September 20, 2022 from approximatel https://www.federalregister.gov/docu advisory-council-on- hivaids?utm_source=federalregister.go
17	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 51303	Published 08/22/2022	Medicaid Program and CHIP; Mandatory Medicaid and Children's Health Insurance Program (CHIP) Core Set Reporting	This proposed rule would establish the requirements for mandatory annual State reporting of the Core Set of Children's Health Care Quality Measures for Medicaid and Children's Health Insurance Program (CHIP), the behavioral health measures on the Core Set of Adult Health Care Quality Measures for Medicaid, and the Core Sets of Health Home Quality Measures for Medicaid. This proposed rule would also establish compliance requirements. CMS is deloping strategies to improve State access to Medicaid data in order to improve reporting capabilities. For example, CMS is developing strategies to improve reporting for beneficiaries served by IHS, Tribes and Tribal Organizations and Urban Indian Organizations. Some States have been able to leverage their Health Information Exchanges to accomplish more complete reporting of entire Medicaid and CHIP populations, and CMS is planning to work with those States to identify and share best practices with other States and facilitate peer-to-peer learning. Finally, CMS is currently piloting technical assistance work with States with the idea of providing written resources and guidance. Under this proposal, the Secretary would specify each year, in the reporting guidance issued under § 437.10(b), the populations on which States would be required to report the Core Set measures, and whether mandatory reporting for certain populations could be phased in over time. CMS anticipates that this annual guidance would take the following statutory language into consideration. The statutory language in section 1139A(a)(4)(B) of the Act requires mandatory reporting of measures on the Child Core Set for pediatric health care under Titles XIX and XXI of the Act. Section 1139B(b)(3)(B) of the Act provides for development of a core set of adult health quality measures for Medicaid eligible adults and requires that States report on all behavioral health measures included in the Adult Core Set starting in 2024. To improve the quality of care delivered to all Medicaid and CHIP beneficiaries, CMS interprets this language as requiring that reporting for the Child Core Set include all beneficiaries covered by Medicaid and CHIP and reporting for the behavioral health measures in the Adult Core Sets include all beneficiaries covered by Medicaid. This includes beneficiaries enrolled in all Medicaid and CHIP delivery systems as well as services received in all applicable health care settings, such as hospitals, outpatient settings, Federally Qualified Health Centers (FQHCs), rural health clinics (RHCs), and facilities operated by IHS, by Tribes and Tribal Organizations under the Indian Self-Determination and Education Assistance Act, and by Urban Indian Organizations under Title V of the Indian Health Care Improvement Act.	To be assured consideration, comment later than 5 p.m. on October 21, 2022. https://www.federalregister.gov/docu mandatory-medicaid-and-childrens-he set?utm_source=federalregister.gov&u
18	Proposed Rule	Department of Veterans Affairs (VA)	87 FR 51625	Published 08/23/2022	Health Care Professionals Practicing Via Telehealth The Department of Veterans Affairs (VA) proposes to amend its medical regulations that govern the VA health care professionals who practice health care via telehealth. This proposed rule would implement the authorities of the VA MISSION Act of 2018 and the William M. (Mac) Thornberry National Defense Authorization Act for Fiscal Year 2021.	Section 1730C provides a definition of covered health care professionals that differs from the definition of health care provider under § 17.417(a). VA proposes this regulation to make these definitions consistent. Section 1730C(b)(1)(A) defines a covered health care professional to include those VA employees appointed under 38 U.S.C. 7306, 7401, 7405, 7406, 7408 and title 5 of the U.S. Code. Section 17.417(a) defined a health care provider as an individual who is appointed to an occupation in the Veterans Health Administration that is listed in or authorized under 38 U.S.C. 7401(1) or (3). To maintain consistency between 38 U.S.C. 1730C and § 17.417, VA is proposing to amend the definition of health care provider to instead refer to health care professionals. VA would also renumber the definition in § 17.417 for clarity. VA proposes to add in § 17.417(a)(2)(i) that a health care professional would include those individuals who are appointed under 38 U.S.C. 7306, 7401, 7405, 7406, 7408, and title 5 of the U.S. Code. VA is further proposing to amend the definition of health care professional to be consistent with section 1730C(b)(1)(C) in proposed § 17.417(a)(2)(ii) to state that VA health care professionals would be required to adhere to all standards for quality relating to the provision of health care in accordance with applicable VA policies. VA would, therefore, state in proposed § 17.417(a)(2)(iv)(D) that a health care professional would also include those individuals who are under the clinical supervision of a health care professional that meets the requirements of paragraphs (a)(2)(iv)(A) through (C) of this section and is either a health professions trainee or a health care employee.	Comments must be received on or bef https://www.federalregister.gov/docu practicing-via- telehealth?utm_source=federalregister +list
19	Notice	Bureau of Indian Affairs (BIA), Interior	87 FR 52021	Published 08/24/2022	Tribal Tourism Grant Program; Solicitation of Proposals	The Secretary of the Interior (Secretary), through the Office of Indian Economic Development (OIED), Division of Economic Development (DED), is soliciting proposals from eligible federally recognized Tribes and Tribal organizations for the Tribal Tourism Grant Program (TTGP). The grant funding will be used to support Tribal tourism by providing Tribes and Tribal organizations funding to obtain technical assistance to perform feasibility studies or develop Tribal tourism business plans. The TTGP grant will provide Tribes resources to explore opportunities to increase Tribal capacity to plan, develop, and manage tourism and related infrastructure, in support of economic development and the Native American Tourism and Improving Visitor Experience Act or NATIVE Act. The feasibility study or business plan will empower Tribes to make informed decisions on potential tourism project(s). The Office of the Assistant Secretary—Indian Affairs, through OIED, is soliciting proposals from federally recognized Tribes listed as Indian Entities Recognized by and Eligible to Receive Services from the United States Bureau of Indian Affairs at 87 FR 4636 (January 28, 2022) and eligible Tribal Organizations as defined by 25 U.S.C. 5304(l). Note: The U.S. Department of the Interior Office of Native Hawaiian Relations is managing NATIVE Act tourism grants to Native Hawaiian Organizations. For additional information on grants for Native Hawaiian Organizations, please contact Ka'i'ini Kaloi, Director, Office of Native Hawaiian Relations, (202) 208-7462, Kaiini_Kaloi@ios.doi.gov	Grant application packages will be ac proposals received after this time and https://www.federalregister.gov/docu solicitation-of- proposals?utm_source=federalregister. list
20	Notice of Meeting	Substance Abuse and Mental Health Services Administration	87 FR 52001	Published 08/24/2022	Advisory Committee for Women's Services (ACWS); Notice of Meeting	The meeting will include discussions on assessing SAMHSA's current strategies, including the mental health and substance use needs of the women and girls population. Additionally, the ACWS will be addressing priorities regarding the impact of COVID-19 on the behavioral health needs of women and children and directions around behavioral health services and access for women and children. The meeting is open to the public and will be held virtually. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions should be forwarded to the contact person by September 1, 2022. Oral presentations from the public will be scheduled at the conclusion of the meeting. Individuals interested in making oral presentations are encouraged to notify the contact person on or before September 1, 2022. Up to five minutes will be allotted for each presentation.	Date/Time/Type: Tuesday, September https://www.federalregister.gov/docu services-acws-notice-of- meeting?utm_source=federalregister.g st
21	Notice of Meeting	Department of Veterans Affairs (VA)	87 FR 52114	Published 08/24/2022	Advisory Committee on Homeless Veterans; Notice of Meeting	The Department of Veterans Affairs (VA) gives notice under the Federal Advisory Committee Act, 5 U.S.C., app. 2., that virtual meetings of the Advisory Committee on Homeless Veterans will be held on September 20 through September 22, 2022. The meeting sessions will begin and end at 12:00 p.m. to 4:00 p.m. Eastern Standard Time (EST). The virtual meeting sessions will be open to the public. On September 20 through September 22, 2022, the agenda will include briefings from VA and other Federal agency officials regarding services for homelessness among Veterans. The Committee will also discuss its proposed annual report recommendations to the Secretary of Veterans Affairs. No time will be allocated at the meetings for receiving oral presentations from the public. Interested parties should provide written comments on issues affecting homeless Veterans for review by the Committee to Anthony Love, Designated Federal Officer, Veterans Health Administration Homeless Programs Office (11HPO), U.S. Department of Veterans Affairs, 811 Vermont Avenue NW (11HPO), Washington, DC 20420, or via email at achv@va.gov.	Members of the public who wish to atte Designated Federal Officer, Veterans H no later than September 9, 2022, provid number. Attendees who require reason meeting link and call-in number is listed https://www.federalregister.gov/docu veterans-notice-of- meeting?utm_source=federalregister.g st
22	Notice of tribal consultation meeting; request for comments	Small Business Administration	87 FR 52602	Published 08/26/2022	Tribal Consultation for Ownership and Control and Contractual Assistance; Requirements for the 8(a) Business Development (BD) Program and other Planned 8(a) BD Program Regulatory Proposals	The U.S. Small Business Administration (SBA or Agency) announces that it is holding tribal consultation meetings in Anchorage, Alaska, Albuquerque, New Mexico, Oklahoma City, Oklahoma and Washington, DC, as well as a Listening Session in Honolulu, Hawaii, concerning forthcoming proposed revisions to the 8(a) Business Development (BD) program regulations. Additionally, SBA requests comments and input on how best to propose several program policies the Agency is contemplating that would impact Alaska Native Corporations (ANC), tribes, Native Hawaiian Organizations (NHO) (collectively, "entities"), and 8(a) Participants owned by such entities. Testimony presented at these tribal consultations will become part of the administrative record for SBA's consideration when the Agency deliberates on approaches to changes in the 8(a) BD program regulations.	https://www.federalregister.gov/docu and-control-and-contractual-assistance 8a?utm_source=federalregister.gov&u
23	Final Rules	Internal Revenue Service, Department of the Treasury; Employee Benefits Security Administration, Department of Labor; Centers for Medicare & Medicaid Services, Department of Health and Human Services.	87 FR 52618	Published 08/26/2022	Final rules published detalining requirements related to surprise billing	This document includes final rules under the No Surprises Act, which was enacted as part of the Consolidated Appropriations Act, 2021 (CAA). The document finalizes certain disclosure requirements relating to information that group health plans, and health insurance issuers offering group or individual health insurance coverage, must share about the qualifying payment amount (QPA) under the interim final rules issued in July 2021, titled Requirements Related to Surprise Billing; Part I (July 2021 interim final rules). Additionally, this document finalizes select provisions under the October 2021 interim final rules, titled Requirements Related to Surprise Billing; Part II (October 2021 interim final rules), to address certain requirements related to consideration of information when a certified independent dispute resolution (IDR) entity makes a payment determination under the Federal IDR process.	Effective date: These final rules are effe https://www.federalregister.gov/docu billing?utm_source=federalregister.gov
24	Notice of meeting	Bureau of Indian Affairs (BIA), Interior	87 FR 52593	Published 08/26/2022	Annual Meeting of Federal Partners and Tribal 477 Workgroup Under Indian Employment, Training and Related Services Act of 2017	The Department of the Interior, Bureau of Indian Affairs (BIA), announces the annual meeting of Federal agencies and Tribes that participate in the Indian Employment, Training, and Related Services Act of 2017 also known as the "Public Law 477 Work Group." The meeting will be conducted virtually via MS Teams and by telephone. In 2017, Congress enacted the Indian Employment Training and Related Services Consolidation Act of 2017, Public Law 115-93, codified at 25 U.S.C. 3401-3417 ("2017 Act"). The 2017 Act amended and expanded the Indian Employment and Related Services Demonstration Act of 1992, Public Law 102-477 by, in part, identifying twelve Federal agencies that are now subject to the amended law (as amended by the 2017 Act, "PL477"). Under PL477, Tribes may propose to integrate eligible grant programs from the Departments of the Interior, Agriculture, Commerce, Education, Energy, Health & Human Services, Homeland Security, Housing & Urban Development, Justice, Labor, Transportation, and Veterans Affairs, consolidate and reprogram grant funds in accordance with a single plan, budget, and report approved by the Secretary of the Interior ("477 Plan"). As required by PL477, the Department of the Interior and its eleven partner Federal agencies entered into a Memorandum of Agreement (MOA) governing the implementation of PL477. That MOA is being renegotiated among the twelve Federal partners and Tribal representatives.	The annual Federal Partner and Tribal 4 2022, from 2:00 p.m. to 4 p.m. Eastern D Comments: Interested persons are invit https://www.federalregister.gov/docu partners-and-tribal-477-workgroup-und and?utm_source=federalregister.gov&

NCUIH REGULATIONS TRACKER: September 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY
1	Notice of single source award	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 54219	Published 09/02/2022	Analyses, Research, and Studies To Assess the Impact of Centers for Medicare & Medicaid Services Programs on American Indians/Alaska Natives and the Indian Health Care System Serving American Indians/Alaska Natives Beneficiaries	Through a Notice of Funding Opportunity, "Analyses, Research, and Studies to Assess the Impact of Centers for Medicare & Medicaid Services (CMS) Programs on American Indians/Alaska Natives (AI/ANs) and the Indian H System Serving AI/AN Beneficiaries," CMS has sought an application from the National Indian Health Board (NIHB)for a single source cooperative agreement. The funding CMS anticipates awarding under this single source agreement will support research to assess the impact of CMS programs that affect AI/ANs and the Indian Health Care System. The funding CMS anticipates awarding under this single source cooperative agreement will support research to assess the impact of CMS programs that affect AI/ANs and the Indian Health Care System, composed of Ind Service (IHS) providers, providers that are Tribally operated under the Indian Self Determination and Education Assistance Act (ISDEAA), and providers operated by Urban Indian organizations (collectively referred to as ITU The total amount of funding available over a 5-year period will be up to $4,000,000 pending availability of funds and satisfactory performance by the recipient. The cooperative agreement will be awarded consistent with quality of the proposal and the applicant's ability to meet project goals. The amount of funding awarded will be no more than $800,000 per 12-month budget period, subject to availability of funds, and there will be five 12 periods under this award. Funding for budget periods 2-5 is non-competitive and is subject to the availability of funds as well as satisfactory performance of the recipient. The total award will not exceed $4,000,000.
2	Rule. Final Action	Federal Communications Commission (FCC)	87 FR 54401	Published 09/06/2022	Affordable Connectivity Program	The Federal Communications Commission (Commission) established a pilot program, titled "Your Home, Your internet," designed to increase awareness of and encourage participation in the Affordable Connectivity Progr households receiving Federal housing assistance. The pilot program is established on September 6, 2022. Earlier this year, the Federal Communications Commission (Commission) established the $14.2 billion Affordable Connectivity Program (or ACP). Over 12 million households have signed up to receive a $30 benefit (or up to $ for households on qualifying Tribal lands) to offset the cost of internet access. For those households, the Affordable Connectivity Program can open up a world of opportunity. They can work from home, take advantage o remote schooling, and stay connected with friends and family. The Commission is committed to bringing those benefits to the millions more eligible households who have not yet signed up. In this document, the Commissio pilot program, titled "Your Home, Your internet," designed to increase awareness of and encourage participation in the Affordable Connectivity Program for households receiving Federal housing assistance.
3	Proposed Rule	Centers for Medicare & Medicaid Services (CMS), HHS	87 FR 54760	Published 09/07/2022	Streamlining the Medicaid, Children's Health Insurance Program, and Basic Health Program Application, Eligibility Determination, Enrollment, and Renewal Processes	This rulemaking proposes changes to simplify the processes for eligible individuals to enroll and retain eligibility in Medicaid, the Children's Health Insurance Program (CHIP), and the Basic Health Program. This proposed rule barriers and facilitate enrollment of new applicants, particularly those dually eligible for Medicare and Medicaid; align enrollment and renewal requirements for most individuals in Medicaid; establish beneficiary protection returned mail; create timeliness requirements for redeterminations of eligibility in Medicaid and CHIP; make transitions between programs easier; eliminate access barriers for children enrolled in CHIP by prohibiting premiun periods, waiting periods, and benefit limitations; and modernize recordkeeping requirements to ensure proper documentation of eligibility and enrollment. In this rulemaking, CMS seeks to eliminate obstacles that make it harder for eligible people to remain enrolled, particularly those individuals who are exempted from MAGI and did not benefit from many of the enrollment si our 2012 and 2013 eligibility final rules. CMS seeks to streamline enrollment for individuals known to be Medicaid eligible, like current enrollees who are also eligible for but not enrolled in the MSPs. CMS seeks to remove cove like premium lock-out periods and waiting periods that are not permitted under other insurance affordability programs, and to reduce coverage gaps as individuals transition from one insurance affordability program to a Together, the changes in this proposed rule would streamline Medicaid, CHIP and BHP eligibility and enrollment processes, reduce the administrative burden on States and enrollees, expand coverage of eligible applicant retention of eligible enrollees, and improve health equity.
4	Notice and Request for Public Comments, request for approval	Indian Health Service (IHS), HHS	87 FR 55448	Published 09/09/2022	Request for Public Comment: 30-Day Information Collection: Urban Indian Organization On-Site Review	In compliance with the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) invites the general public to comment on a new information collection titled, "Urban Indian Organization On-Site Review." IHS is requ Office of Management and Budget (OMB) to approve this new collection. The purpose of this notice is to announce the IHS' intent to submit this collection to OMB and to allow 30 days for public comment to be submitted
5	Notice	Veterans Affairs (VA)	87 FR 56152	Published 09/13/2022	Cost-Based and Inter-Agency Billing Rates for Medical Care or Services Provided by the Department of Veterans Affairs for Fiscal Year 2023	This notice document updates the Cost-Based and Inter-Agency billing rates for medical care or services provided by the U.S. Department of Veterans Affairs (VA) furnished in certain circumstances. VA's methodology for computing Cost-Based and Inter-Agency rates for medical care or services provided by VA is set forth in 38 CFR 17.102(h). Two sets of rates are obtained by applying this methodology, Cost-Based ar Agency. Cost-Based rates apply to medical care and services that are provided by VA under 38 CFR 17.102(a), (b), (d) and (g), respectively, in the following circumstances: a) In error or based on tentative eligibility; b) In a medica To pensioners of allied nations; and d) For research purposes in circumstances under which the medical care appropriation shall be reimbursed from the research appropriation. Inter-Agency rates apply to medical care and services that are provided by VA under § 17.102(c) and (f), respectively, in the following circumstances when the care or services provided are not covered by any applicab agreement in accordance with § 17.102(e): a) To beneficiaries of the Department of Defense or other Federal agencies; and b) To military retirees with chronic disability.
6	Notice and request for comments	Office of Planning, Research, and Evaluation, Administration for Children and Families, HHS	87 FR 56425	Published 09/14/2022	Proposed Information Collection Activity; Formative Evaluation of the Demonstration Grants To Strengthen the Response to Victims of Human Trafficking in Native Communities Program (New Collection)	The Administration for Children and Families (ACF) is proposing a new data collection activity for the Formative Evaluation of the Demonstration Grants to Strengthen the Response to Victims of Human Trafficking in Native (VHT-NC) Program. The overarching goals of the formative evaluation are to understand the context in which the VHT-NC projects are implemented, the projects' goals, and the paths they take to achieve their goals. The collection will include semi-structured interviews with project staff, project participants, and key partners.
7	Notice and request for comment	Health Resources and Services Administration (HRSA), HHS	87 FR 56689	Published 09/15/2022	Notice of Availability of Health Center Program Scope of Project and Telehealth Policy Information Notice	HRSA is inviting public comment on the Draft Health Center Program Scope of Project and Telehealth Policy Information Notice (Telehealth PIN). The purpose of the Telehealth PIN is to establish policy for health centers that services via telehealth within the HRSA-approved scope of project. The Telehealth PIN also describes considerations and criteria health centers must meet for providing services via telehealth within the Health Center Prog project.
8	Notice	Veterans Affairs (VA)	87 FR 57025	Published 09/16/2022	Solicitation of Nominations for the Appointment to the Advisory Committee on Tribal and Indian Affairs, Indian Health Service, Billing Area Representative	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointme of the Advisory Committee on Tribal and Indian Affairs ("the Committee") to represent the Indian Health Service, Billings Area. At least one member of the Committee represents urban Indian organizations nominated by a Indian organization.

9	Notice	Veterans Affairs (VA)	87 FR 57024	Published 09/16/2022	Notice of Tribal Consultation and Request for Comments on New Agreement Template Draft for VA's Indian Health Services/Tribal Health Program Reimbursement Agreements	The Department of Veterans Affairs (VA), Veterans Health Administration (VHA) will facilitate a tribal consultation session regarding the expansion of VA's Indian Health Services/Tribal Health Program's (IHS/THP) Reimbursem Program to include Purchase Referred Care (PRC) and Contracted Travel. VA seeks tribal feedback to assist with drafting an updated Reimbursement Agreement template for the lower 48 states. Input requested includes limited to, the agreed scope of service, payment rates, and invoicing or billing submissions.
10	DTLL	Health Resources and Services Administration (HRSA), HHS	N/A	Published 09/20/2022	HRSA in-person consultation health at the National Indian Health Board's 2022 National Tribal Health Conference and 50th Anniversary Celebration on September 29, 2022 from 5 to 7 PM EST	The focus of this consultation is to hear advice and recommendations on strategies to address systems challenges related to physician recruitment, retention, and provider burnout in Indian Country. The session will also inc information on workforce programs in other related disciplines in which HRSA has forecasted programs slated for fiscal year 2023. HRSA will also highlight other key health programmatic activities including rural and materna initiatives.
11	Notice of nomination	Agency for Health Research and Quality (AHRQ), HHS	87 FR 57699	Published 09/21/2022	Supplemental Solicitation for Nominations of Members From Populations Underrepresented in Medicine (URIM) To Serve on Scientific Peer Review Committee	This supplemental notice invites the public to nominate individuals from populations underrepresented in medicine to serve as members to the AHRQ Initial Review Group (IRG), which is responsible for the scientific peer rev grant applications. The AHRQ IRG conducts scientific and technical review for health services research and training grant applications and is comprised of five subcommittees or study sections, each with a particular rese AHRQ is seeking nominations from the public, including minority-serving institutions, academic health centers, community-based organizations, professional societies, or other state and federal agencies. The IRG is comprised of five subcommittees, or study sections, each with a particular emphasis around which peer reviewer expertise is assembled. AHRQ seeks nominations for each of the subcommittee competency do below: 1. Health Care Effectiveness and Outcomes Research: End-stage renal disease; cardiovascular disease; pediatrics; pharmacologist in opioid management; biostatisticians in health services research; health disparities and determinants of health. 2. Healthcare Information Technology Research: Biomedical and consumer health informatics; family medicine; health care data analysis; health information technology; health services research in patient-oriented resear health record and data for research; population-based studies in medicine; epidemiology; telehealth/telemedicine; emergency medicine; insurance benefit design; chronic condition care; natural language processing a learning; social networking and its determinants of health; health disparities and social determinants of health. 3.Healthcare Systems and Value Research: Health statistics; health care outcome research; evaluation and survey methods; health system and service research; health care policy research; health economics research; la analysis; private health insurance/Medicaid and Medicare; learning laboratory development; health disparities and social determinants of health. 4. Healthcare Systems and Value Research: Health statistics; health care outcome research; evaluation and survey methods; health system and service research; health care policy research; health economics research; la analysis; private health insurance/Medicaid and Medicare; learning laboratory development; health disparities and social determinants of health. 5. Healthcare Safety and Quality Improvement Research: Pharmacists with expertise in informatics; infectious diseases specialists; geriatricians; surgeons with a specialty in diagnostic error; health disparities and social dete health.
12	Notice of Listening Session/Tribal Consultation Session	Indian Health Service (IHS), HHS	N/A	Published 09/23/2022	IHS Listening Session on Monday, September 26 from Noon – 1:30PM (ET) during the NIHB's National Tribal Health Conference.	On Monday, September 26, 2022, from 12:00 - 1:30 PM ET at 400 New Jersey Avenue, NW, Washington, D.C., United States, 2000, the IHS will provide important updates and extend an opportunity for Tribal Leaders and Urb Organization Leaders to share input with IHS officials. IHS updates will include evaluating Health Care Facilities Construction Demonstration Project Proposals, Health Information Technology Modernization, decisions on Sp Program for Indians for FY 2023, Tribal Consultation Policy, 2022-2026 Office of Urban Indian Health Programs Strategic Plan, and Draft Operational Plan for IHS-VHA Memorandum of Understanding (MOU).

NCUIH REGULATIONS TRACKER: October 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ANALYSIS/ ADDITIONAL DETAILS
1	Notice	Census Bureau	87 FR 60117	Published 10/04/2022	2020 Census Tribal Consultation	The Census Bureau is planning two tribal consultations on October 18, 2022, in Anchorage, Alaska and October 31, 2022, in Sacramento, California, with federally recognized tribes, so tribes can provide feedback on the content and design of the 2020 Census Detailed Demographic and Housing Characteristics File A (Detailed DHC-A) and Detailed Demographic and Housing Characteristics File B (Detailed DHC-B). These two products are the successor products to the American Indian and Alaska Native Summary File (AIANSF) that was produced in previous censuses. The Detailed DHC-A provides population counts and sex by age statistics for approximately 370 detailed racial and ethnic groups, such as German, Lebanese, Jamaican, Chinese, Native Hawaiian, and Mexican, as well as about 1,200 detailed American Indian and Alaska Native tribal and village population groups, such as Native Village of Hooper Bay (Naparyarmiut) and Navajo Nation. The Detailed DHC-B provides household type and tenure information for the same detailed race and ethnicity groups and American Indian and Alaska Native tribal and village population groups.	The Census Bureau tribal consultation registration links are: Tribal Consultation—Anchorage—Oct 18, 2022: https://censustribalconsultationak.spla Tribal Consultation—Sacramento—Oct 31, 2022: https://censustribalconsultationca.spla Submit your comments by email. Send comments to: 2020DAS@census.go Deadline date for input: November 30, 2022. Use the product name of either Detailed DHC-A or Deta https://www.federalregister.gov/documents/2022/10/04/2022-21479/2020-censu consultation?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subsc
2	DTLL/DULL	IHS, HHS	N/A	Published 10/04/2022	IHS Health IT Modernization Tribal Consultation and Urban Confer	The Indian Health Service (IHS) has embarked on full replacement of the Resource and Patient Management System. Through a series of Tribal Consultations and Urban Confers, the Agency is seeking meaningful input from Tribal and Urban Indian Organization Leaders. The focus of the fourth session in the 2022 Tribal Consultation and Urban Confer regarding IHS Health Information Technology Modernization series is Implementation Deployment Plan.	Date:Tuesday, November 1, 2022 Time:2:00 p.m. – 3:30 p.m. (Eastern Time) Registration Link:https://www.zoomgov.com/meeting/register/vJItdeuurTorGAq68vaAV99
3	Presidential Document	Executive Office of the President	87 FR 60253	Published 10/05/2022	National Domestic Violence Awareness and Prevention Month, 2022	During National Domestic Violence Awareness and Prevention Month, the Administration continues to shine a light on the causes of this scourge, strengthen the ability of Federal, State, Tribal, territorial, and local officials to take action, and call on all communities to strengthen prevention efforts. The Administration is working to ensure that all survivors have access to justice and the support they need for their healing and well-being. The Administration calls on all Americans to speak out against domestic violence and support efforts to educate all people about healthy relationships centered on respect; support victims and survivors in your own families and networks; and support the efforts of victim advocates, service providers, health care providers, and the legal system, as well as the leadership of survivors, in working to end domestic violence.	https://www.federalregister.gov/documents/2022/10/05/2022-21786/national-domestic-violence-a month-2022?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subsc
4	DTLL	Office for Victims of Crimes (OVC); US Department of Justice (DOJ)	N/A	Published 10/05/2022	Consultation on the Tribal Set-Aside from the Crime Victims Fund (TVSSA) for Fiscal Year 2023	The Consultation on OVC's administration of the TVSSA will be held on Wednesday, November 9th from 2:00–4:00 p.m., eastern time. An informational framing paper and a report on the management of the Tribal Set-Aside will be provided in advance of the Consultation for your consideration. Consultation testimony can be provided by: • an elected Tribal leader, • an appointed Tribal leader, or • someone designated by an elected or appointed Tribal leader. (Designation must be provided in writing.) In addition to the virtual Consultation, OVC plans to host an in-person Listening Session before the 17th National Indian Nations Conference scheduled for December 6–9, 2022, at the Agua Caliente Band of Cahuilla Indians Reservation in Palm Springs, CA. This session will be held on December 6, 2022, from 9:00–11:30 a.m., and will provide interested persons an opportunity to offer feedback about the TVSSA program, and other matters to enhance services for victims of crime within Tribal communities. Information about the Consultation and other upcoming events is available on the OVC website at: https://ovc.ojp.gov/program/tribal/tribal victim-services-set-aside	https://ovc.ojp.gov/tribal/tribal-victim-services-set-aside/fy-2023-tvssa-consultation-tribal- To register for the TVSSA Consultation visit: https://us06web.zoom.us/webinar/register/WN_Z4U3 For more information, visit: https://ovc.ojp.gov/program/tribal/tribal-victim-service

NCUIH REGULATIONS TRACKER: November 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	DTLL/DULL	IHS	N/A	Published 11/01/2022	The Director announces the appointment of the Acting Director for the Great Plains Area IHS.	Mr. Joe Amiotte will serve as the Acting Director of the Great Plains Area Indian Health Service (IHS). With more than 20 years of Agency service, Mr. Amiotte brings extensive expertise in health care administration and Tribal Consultation to the Great Plains Area IHS. Previously, Great Plains Area Deputy of Field Operations, Mr. Amiotte began his IHS career with the Office of Environmental Health and Engineering (OEHE) and served as Chief Executive Officer of the Rapid City Service Unit from 2017 to 2019.	IHS is advertising for a permanent hire for the Great Plains Area Director position. The announcement will be posted to the USAJobs Web site at https://www.usajobs.gov. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DUIOLL_11-01-22.pdf
2	Notice of Meeting	Health Resource and Services Administration (HRSA), HHS	87 FR 66198	Published 11/02/2022	Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)	The agenda for the December 7, 2022, meeting is being finalized and may include the following topics: a review of draft recommendations for the Secretary on improving birth outcomes among American Indian and Alaska Native mothers and infants and a vote on whether to send them forward; discussion to determine new and continuing priority areas for the Committee; 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.	Meeting date: December 7, 2022, from 11 a.m. to 6 p.m. Eastern Time. https://www.federalregister.gov/documents/2022/11/02/2022-23790/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
3	Final Rule	CMS, HHS	87 FR 66454	Published 11/03/2022	Medicare Program; Implementing Certain Provisions of the Consolidated Appropriations Act, 2021 and Other Revisions to Medicare Enrollment and Eligibility Rules	This final rule implements certain provisions of the Consolidated Appropriations Act, 2021 (CAA). Additionally, CMS is proposing to delete references to specific Medicare forms from the text of existing regulations at §§ 406.7 and 407.11 in order to provide greater administrative flexibility. Finally, this final rule updates the various federal regulations that affect a State's payment of Medicare Part A and B premiums for beneficiaries enrolled in the Medicare Savings Programs and other Medicaid eligibility groups.	This final rule is effective on January 1, 2023, except for the addition of § 407.47(f) at instruction 21, which is effective on January 1, 2024. https://www.federalregister.gov/documents/2022/11/03/2022-23407/medicare-program-implementing-certain-provisions-of-the-consolidated-appropriations-act-2021-and?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
4	Notice and request for comment	Offices of Housing, Public and Indian Housing, Community Planning and Development, HUD	87 FR 66723	Published 11/04/2022	60-Day Notice of Proposed Information Collection: Implementation of the Violence Against Women Reauthorization Act of 2013, OMB Control No.: 2577-0286	HUD is seeking approval from the Office of Management and Budget (OMB) for the information collection described below. In accordance with the Paperwork Reduction Act, HUD is requesting comment from all interested parties on the proposed collection of information. The purpose of this notice is to allow for 60 days of public comment.	Deadline to submit comments: January 3, 2023 https://www.federalregister.gov/documents/2022/11/04/2022-24070/60-day-notice-of-proposed-information-collection-implementation-of-the-violence-against-women?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Virtual Urban Confer	OUIHP, IHS	N/A	Published 11/14/2022	Virtual Urban Confer – OUIHP Strategic Plan	OUIHP will be hosting an Urban Confer to discuss the OUIHP Strategic Plan. This Urban Confer will likely be a review of the final version of the Strategic Plan, in which UIOs and NCUIH had the opportunity to provide comments and recommendations.	Nov 29, 2022 01:00 PM Eastern Time Register in advance for this meeting: https://ihs-gov.zoomgov.com/meeting/register/vJltf-ivqj0uHx8MGlhd090qvSLD4A28vNA
6	Virtual Urban Confer	IHS	N/A	Published 11/15/2022	Virtual Urban Confer to Discuss Urban Indian Priorities	IHS will be hosting a Virtual Urban Confer to Discuss Urban Indian Priorities	Wednesday, December 7, 2022 3:00 PM-4:30 PM Eastern Time Register in advance for this meeting: https://ihs-gov.zoomgov.com/meeting/register/vJIscOyupj4sGP3dKpNiOZj6X1Z7h-rioFI

7	DTLL/DULL	IHS	N/A	Published 11/17/2022	Urban Confer and Tribal Consultation to seek additional input and recommendations for the final draft of the 2023-2027 IHS OUIHP Strategic Plan and Implementation Plan	The IHS hosted a virtual Urban Confer on July 8, 2022, and a virtual Tribal Consultation on July 11, 2022, to promote meaningful discussion and transparency on the second draft of the 2023-2027 OUIHP Strategic Plan. There were 18 Urban Indian Organizations (UIOs) that submitted written comments or made comments during the virtual Urban Confer and no comments were received from the virtual Tribal Consultation. Recommendations were taken into consideration in the third draft of the 2023-2027 OUIHP Strategic Plan and corresponding Implementation Plan. The third draft 2023-2027 OUIHP Strategic Plan and draft Implementation Plan will be shared via email.	Virtual Urban Confer Session will be on November 29, 2022 (1-2:30 pm EST) register here: https://ihs-gov.zoomgov.com/meeting/register/vJItf-ivqj0uHx8MGlhd090qvSLD4A28vNA Virtual Tribal Consultation will be on December 2, 2022 (1-2:30 pm EST). Register here: https://ihs-gov.zoomgov.com/meeting/register/vJItc-6paDsvGWPCmIAlNHI0hztQwVLWt4Q WRITTEN COMMENTS AND RECOMMENDATIONS: Please send recommendations on the final draft 2023–2027 OUIHP Strategic Plan and Implementation Plan by the comment deadline of December 15, 2022. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DUIOLL_11-17-22.pdf

NCUIH REGULATIONS TRACKER: December 2022

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
	Notice	Office of Early Childhood Develoment, ACT, HHS	87 FR 80540	Published 12/30/2022	Submission for Office of Management and Budget Review; Tribal Maternal, Infant, and Early Childhood Home Visiting Program: Guidance for Submitting an Annual Report to the Secretary (Office of Management and Budget #0970-0409)	The Administration for Children and Families (ACF), Office of Early Childhood Development (ECD) is requesting revisions to the Tribal Maternal, Infant, and Early Childhood Home Visiting Program (Tribal MIECHV) Guidance for Submitting Reports to the Secretary (Office of Management and Budget (OMB) #0970-0409; expiration September 30, 2024). Guidance under this OMB number includes that for an annual report and that for a final report. This request is for review of the final report guidance. There are no changes proposed to the guidance for the annual report.	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. https://www.federalregister.gov/documents/2022/12/30/2022-28427/submission-for-office-of-management-and-budget-review-tribal-maternal-infant-and-early-childhood?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
	DULL/DTLL	Indian Health Services	N/A	Published 12/28/2022	U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Health (OASH) will hold a listening session with Urban Indian Organizations on February 2, 2023 to obtain input on the development of the HHS Initiative to Strengthen Primary Health Care (Initiative)	The OASH seeks information from Indian Country about possible HHS actions that may support efforts to improve the health of American Indian and Alaskan Native individuals, families, and communities through strengthened primary health care. In addition, we hope to increase the reach of the Initiative to Indian Tribes and Tribal Organizations. The OASH will use the information shared to inform the Initiative, including the implementation of the Initial Action Plan, and will share key messages with our 14 collaborating HHS agencies. The OASH is separately meeting with Tribal Leaders	OASH is hosting a virtual listening session to collect input and inform the HHS Initiative to Strengthen Primary Health Care. Title: OASH Primary Health Care Listening Session with Urban Indian Organizations When: Thursday, February 2, 2023 Time: 01:00 PM Eastern Time to 02:30 PM Eastern Time (U.S. and Canada) You must register in advance for this meeting. Register at: https://www.zoomgov.com/meeting/register/vJItc-6qpj4jHU5Kh06Lh8D9qZNx466ZJKE
	Proposed Rule	HUD	87 FR 78324	Published 12/21/2022	Strengthening the Section 184 Indian Home Loan Guarantee Program	This proposed rule would revise the regulations governing the Section 184 Indian Home Loan Guarantee Program ("Section 184 Program") to fiscally strengthen the program by clarifying rules for Lenders, Tribes, and Borrowers. As the program has experienced an increase in demand, it now requires an update to the implementing regulations to minimize potential risk and increase program participation by financial institutions. This proposed rule strives to modernize and enhance the Section 184 Program by adding participation and eligibility requirements for Lenders and other financial institutions. This proposed rule would also clarify the rules governing Tribal participation in the program, establish underwriting requirements, specify rules on the closing and endorsement process, establish stronger and clearer servicing requirements, establish program rules governing claims submitted by Servicers and paid by HUD, and add standards governing monitoring, reporting, sanctions and appeals. This rule would add new definitions and make statutory conforming amendments, including the categorical exclusion of the Section 184 program in HUD's environmental review regulations. Ultimately, the changes made by this proposed rule would promote program sustainability, increase Borrower	*Comment Due Date:* March 17, 2023 *https://www.federalregister.gov/documents/2022/12/21/2022-26097/strengthening-the-section-184-indian-home-loan-guarantee-program?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov*
	Rule	CMS, HHS	87 FR 77722	Published 12/20/2022	Basic Health Program; Federal Funding Methodology for Program Year 2023 and Changes to the Basic Health Program Payment Notice Process	This rule finalizes the methodology and data sources necessary to determine Federal payment amounts to be made for program year 2023 to States that elect to establish a Basic Health Program under the Patient Protection and Affordable Care Act to offer health benefits coverage to low-income individuals otherwise eligible to purchase coverage through Health Insurance Exchanges.	This amendments in this rule are effective January 1, 2023. The methodology and data sources announced in this rule are effective on January 1, 2023 https://www.federalregister.gov/documents/2022/12/20/2022-27211/basic-health-program-federal-funding-methodology-for-program-year-2023-and-changes-to-the-basic?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
	DTLL/DULL	Indian Health Services	N/A	Published 12/16/2022	IHS update on Health Information Technology (IT) Moderization	Indian Health Service (IHS) to provide an update on the Health Information Technology (IT) Modernization, and to invite individuals from Tribes and Urban Indian Organizations to provide feedback on the replacement of the Resource and Patient Management System. An important part of the evaluation process for the industry proposals and solutions will be a series of video demonstrations of the vendors' products, in the form of representative clinical scenarios. The IHS is seeking a wide range of health IT system users from the IHS, Tribal, and Urban Indian Organization (I/T/U) sites to participate in and provide input on these demonstrations.	I/T/U organizations can register to participate by January 5, 2023 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DUIOLL-IT_Modernization_Advisor_Invitation_Signed_12162022.pdf

	Notice	CDC / ATSDR	87 FR 76195	Published 12/13/2022	Center for State, Tribal, Local, and Territorial Support (CSTLTS), CDC/ATSDR Tribal Consultation Session	The Centers for Disease Control and Prevention (CDC)/Agency for Toxic Substances and Disease Registry (ATSDR) announces the 2023 CDC/ATSDR Tribal Consultation. CDC/ATSDR will host a virtual tribal consultation with American Indian and Alaska Native (AI/AN) Federally Recognized Tribes. The proceedings will be open to the public.	The tribal consultation will be held on February 9, 2023, from 4:00 p.m. to 5:00 p.m., EST. Written tribal testimony is due by 5:00 p.m. EST, on February 24, 2023. https://www.federalregister.gov/documents/2022/12/13/2022-26958/center-for-state-tribal-local-and-territorial-support-cstlts-cdcatsdr-tribal-consultation-session?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
	Notice	Indian Health Services	N/A	Published 12/09/2022	OUIHP data collection on Health Information Technology (HIT) for UIOs	The Office of Urban Indian Health Programs (OUIHP) is again updating the information on Health Information Technology (HIT) in use at our Urban Indian Organizations (UIOs). OUIHP kindly asks your assistance in collecting the information. Please locate your site within the attached template and update as needed. Also, please include ALL HIT/data management point-of-contacts from your organization as I will be developing an urban HIT e-mail group and would like to ensure all relevant staff are included in communications.	Data is to be submitted directly to shawn.thomas@ihs.gov Response due no later than December 21, 2022.
	Notice	Indian Health Services	87 FR 74638	Published 12/06/2022	Tribal Management Grant Program	The Indian Health Service (IHS) is accepting applications for grants for the Tribal Management Grant (TMG) Program. This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Indian Self-Determination and Education Assistance Act (ISDEAA), Public Law 93-638, as amended, 25 U.S.C. 5322(b)(2) and 25 U.S.C. 5322(e). This program is described in the Assistance Listings located at https://sam.gov/content/home (formerly known as the CFDA) under 93.228. The TMG Program is a competitive grant program that is capacity building and developmental in nature and has been available for federally recognized Indian Tribes and Tribal Organizations (T/TOs) since shortly after enactment of the ISDEAA in 1975. The TMG Program was established to assist T/TOs to prepare for assuming all or part of existing IHS programs, functions, services, and activities (PFSAs) and further develop and improve Tribal health management capabilities. The TMG Program provides competitive grants to T/TOs to establish goals and performance measures for current health programs, assess current management capacity to determine if new components are appropriate, analyze programs to determine if a T/TO's management is practicable, and develop infrastructure systems to manage or organize PFSAs.	Application due on or before March 6, 2023 https://www.federalregister.gov/documents/2022/12/06/2022-26480/tribal-management-grant-program?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
	DTLL/DULL	Indian Health Services	N/A	Published 12/05/2022	IHS decision on the distribution of funds for the $210 million in American Rescue Plan Act of 2021 (ARPA)	As specific activities have been approved through the White House, the IHS has limited flexibility to adjust the allocation of the $210 million in ARPA public health workforce funding. Allocation decisions for the $210 million in ARPA public health workforce funding are described below: - $92 million for Registered Nurses in Bureau of Indian Education (BIE) Funded Schools - $47 million for Public Health Capacity Building in Indian Country - $20 million for Emergency Preparedness Capacity at the IHS - $45 million for Additional IHS Loan Repayment Program Awards - $6 million for Core Surveillance and Epidemiology Functions	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2022_Letters/DTLL-DUIOLL-12052022.pdf

	Notice	Veterans Affairs	87 FR 74474	Published12/05/2022	Agency Information Collection Activity: Notice of Waiver of Compensation or Pension To Receive Military Pay and Allowances	Veterans Benefits Administration, Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed revision of a currently approved collection, and allow 60 days for public comment in response to the notice.	Comments Due on or before February 3, 2023 https://www.federalregister.gov/documents/2022/12/05/2022-26417/agency-information-collection-activity-notice-of-waiver-of-compensation-or-pension-to-receive
	Proposed Rule	Bureau of Indian Affairs	87 FR 74334	Published 12/05/2022	Land Acquisitions	The Bureau of Indian Affairs (BIA) seeks input on changes to its regulations governing the discretionary acquisition of land into trust for the benefit of tribal governments and individual Indians. Since these regulations were first promulgated in 1980, the BIA has developed extensive experience in the fee-to-trust acquisition process. Relying on that experience and input from tribal governments and individual Indians, this proposed rule seeks to make the land into trust process more efficient, simpler, and less expensive to support restoration of tribal homelands.	Comments Due on or before March 1, 2023 https://www.federalregister.gov/documents/2022/12/05/2022-25735/land-acquisitions?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
	Notice	Office of Planning, Research, and Evaluation, Administration for Children and Families HHS	87 Fr 74152	Published 12/02/2022	Submission for Office of Management and Budget Review; Human Trafficking Youth Prevention Education Demonstration Grant Program Process Evaluation (New Collection)	The Office of Planning, Research, and Evaluation (OPRE), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), in collaboration with the Office on Trafficking in Persons (OTIP), is proposing a new data collection activity for the Human Trafficking Youth Prevention Education (HTYPE) Demonstration Grant Program Process Evaluation. The process evaluation will explore whether the program is being implemented as intended, describe the successes and barriers that have been encountered, and highlight the changes that may be needed to support program implementation.	Comments Due on of before December 30, 2022. https://www.federalregister.gov/documents/2022/12/02/2022-26224/submission-for-office-of-management-and-budget-review-human-trafficking-youth-prevention-education?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: JANUARY 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Proposed Rule	HUD	88 FR 321	1/4/2023	The Violence Against Women Act Reauthorization Act of 2022: Overview of Applicability to HUD Programs	This document highlights the key changes made by the recently enacted Violence Against Women Act Reauthorization Act of 2022 (VAWA 2022) to the Violence Against Women Act of 1994, as amended, provides an overview of key provisions applicable to HUD programs, and explains HUD's plans to issue rules or guidance to implement VAWA 2022. In addition, this document seeks comment from HUD housing providers, grantees, and other interested members of the public on this document generally and on certain issues discussed in more detail below. Comments received in response to this solicitation will aid HUD in developing additional regulations and guidance.	Comments due March 6, 2023 https://www.federalregister.gov/documents/2023/01/04/2022-28073/the-violence-against-women-act-reauthorization-act-of-2022-overview-of-applicability-to-hud-programs?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
2	Notice	HRSA; HHS	88 FR 357	1/4/2023	Request for Information: Healthy Start Initiative: Eliminating Disparities in Perinatal Health (Healthy Start)	HRSA's Maternal and Child Health Bureau, Division of Healthy Start and Perinatal Services seeks the perspectives of Healthy Start grantees, community members, people with lived experience, health care providers, community health workers, birthing people, parents, and other members of the public to inform future Healthy Start program development.	Comments due February 3, 2023 https://www.federalregister.gov/documents/2023/01/04/2022-28559/request-for-information-healthy-start-initiative-eliminating-disparities-in-perinatal-health-healthy?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
3	Notice	BIA; Interior	88 FR 879	1/5/2023	Agency Information Collection Activities; Request for Comment on Fiscal Year 2024 Expirations Under the Paperwork Reduction Act	In accordance with the Paperwork Reduction Act of 1995, the Bureau of Indian Affairs (BIA), Bureau of Indian Education (BIE), and Office of the Assistant Secretary—Indian Affairs (AS-IA) are proposing to renew ten (10) information collections. Office of Management and Budget (OMB) Control Number 1076-0017, 1076-0100, 1076-0172, 1076-0176, 1076-0177, 1076-0179, 1076-0187, 1076-0188, 1076-0195, and 1076-0196.	Comments due on or before March 6, 2023 https://www.federalregister.gov/documents/2023/01/05/2022-28612/agency-information-collection-activities-request-for-comment-on-fiscal-year-2024-expirations-under?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Notice	CDC	88 FR 1580	1/11/2023	Proposed Data Collection Submitted for Public Comment and Recommendations	The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies the opportunity to comment on a continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Maternal Mortality Review Information Application (MMRIA). MMRIA is a standardized data collection system that allows Maternal Mortality Review Committees (MMRCs) to abstract relevant data from a variety of sources, document committee decisions, and analyze data to better understand the contributing factors and preventability of pregnancy-related deaths in order to develop recommendations for prevention.	Comments must be received on or before March 13, 2023 https://www.federalregister.gov/documents/2023/01/11/2023-00334/proposed-data-collection-submitted-for-public-comment-and-recommendations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Proposed Rule	VA	88 FR 2038	1/12/2023	Copayment Exemption for Indian Veterans	The Department of Veterans Affairs (VA) proposes to amend its medical regulations to implement a statute exempting Indian and urban Indian veterans from copayment requirements for the receipt of hospital care or medical services, including the initial three urgent care visits in a calendar year, under laws administered by VA.	Comments must be received on or before February 13, 2023. https://www.federalregister.gov/documents/2023/01/12/2023-00364/copayment-exemption-for-indian-veterans?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	Notice	HUD	88 FR 2959	1/18/2023	30-Day Notice of Proposed Information Collection: Housing Choice Voucher Program and Tribal HUD-VASH, OMB Control No.: 2577-0169	HUD is seeking approval from the Office of Management and Budget (OMB) for the information collection described below. In accordance with the Paperwork Reduction Act, HUD is requesting comment from all interested parties on the proposed collection of information. The purpose of this notice is to allow for an additional 30 days of public comment.	Comment due date: February 17, 2023 https://www.federalregister.gov/documents/2023/01/18/2023-00805/30-day-notice-of-proposed-information-collection-housing-choice-voucher-program-and-tribal-hud-vash?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

8	Notice	Census Bureau	88 FR 3710	1/20/2023	2020 Census Tribal Consultation	The Census Bureau will conduct a virtual tribal consultation on the Proof of Concept for the Detailed Demographic and Housing Characteristics File A (DHC-A) on February 23, 2023. Feedback on the Proof of Concept will help inform final decisions on the 2020 Census Detailed DHC-A. The tribal consultation reflects the Census Bureau's continuous commitment to strengthen nation-to-nation relationships with federally recognized tribes. The Census Bureau's procedures for outreach, notice, and consultation ensure involvement of tribes to the extent practicable and permitted by law before making decisions or implementing policies, rules, or programs that affect federally recognized tribal governments. These meetings are open to citizens of federally recognized tribes by invitation. The Census Bureau provided information on the feedback it is seeking in preparation for the tribal consultation focused on the Proof of Concept for the Detailed DHC-A. In that regard, the Census Bureau is asking tribal governments to review the Proof of Concept and accompanying materials. We would like to hear from tribal nations if they will be impacted positively, negatively, or not at all, if we release the Detailed DHC-A using the current specifications outlined in the Proof of Concept. Please provide the level of geography, description of the use case(s), and implications should the data be released as reflected in this Proof of Concept. The purpose of the tribal consultation is to hear tribes' recommendations.	The Census Bureau will conduct a tribal consultation on Thursday, February 23, 2023, from 3:00 to 4:30 p.m. EST. Any questions or topics to be considered in the tribal consultation meeting must be received in writing via email by February 1, 2023 https://www.federalregister.gov/documents/2023/01/20/2023-01083/2020-census-tribal-consultation?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
9	Notice	IHS	88 FR 4002	1/23/2023	4-in-1 Grant Program-Urban Indian Health	The purpose of this program is to ensure the highest possible health status for Urban Indians. Funding will be used to support the 4-in-1 health program objectives. These programs are integral components of the IHS health care delivery system. Funds from this effort will ensure that comprehensive, culturally acceptable personal and public health services are available and accessible to Urban Indians.	Application Deadline Date: February 21, 2023 https://www.federalregister.gov/documents/2023/01/23/2023-01150/4-in-1-grant-program-urban-indian-health?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
11	DULL/DTLL	IHS	N/A	1/25/2023	FY 2023 Grant Awardees for SDPI	IHS is updating UIO Leaders on the fiscal year (FY) 2023 Indian Health Service (IHS) Special Diabetes Program for Indians (SDPI) grant application process. The SDPI is currently authorized through September 30, 2023. The Consolidated Appropriations Act, 2021, authorized SDPI funding at $147 million for FY 2023, a $3 million decrease due to mandatory sequestration. The status of funding for SDPI FY 2024 and beyond is unknown at this time.	www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL-012523.pdf
12	DULL/DTLL	IHS	N/A	1/26/2023	IHS Urban Emergency Fund (UEF)	The UEF is a limited, discretionary allocation managed by the IHS Office of Urban Indian Health Programs (OUIHP) to address some of the one-time, non-recurring emergencies and disaster relief efforts taken by Urban Indian Organizations (as defined by 25 U.S.C. § 1603(29)). Each fiscal year, the OUIHP allocates up to $200,000 to the UEF. Funding is not guaranteed and is subject to the availability of appropriations.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL-012623.pdf

NCUIH REGULATIONS TRACKER: February 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Notice of Funding	VA	88 FR 7540	Published 2/03/2023	Funding Opportunity: Homeless Providers Grant and Per Diem (GPD) Program Case Management Grant	VA is announcing the availability of approximately $15 million per year for up to 2 years, pending availability of funding and grantee performance, in new grants under the case management component of the VA Homeless Providers GPD program. Applications for grants are being accepted from eligible entities to support case management services. These time-limited case management services will improve retention of housing by Veterans who are at risk of becoming homeless or who were previously homeless and are transitioning to permanent housing from programs such as VA's Homeless Providers GPD program or VA's Health Care for Homeless Veterans (HCHV) Contracted Residential Services (CRS) program. An entity is eligible to apply if it is a 501(c)(3) or 501(c)(19) nonprofit organization, State, local or Tribal government. For purposes of this program, the term "Tribal government" means an entity described in paragraph (2) of the definition of "public entity" in 38 CFR 61.1.	Applications for grants must be received by the GPD National Program Office no later than 4:00 p.m. Eastern Time on Thursday, May 4, 2023. https://www.federalregister.gov/documents/2023/02/03/2023-02341/funding-opportunity-homeless-providers-grant-and-per-diem-gpd-program-case-management-grant?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	DTLL	HHS	N/A	Published 2/06/2023	TRIBAL CONSULTATION SESSION: ACCESS TO FEDERAL MEDICAL SUPPLIES	On January 21, 2021, President Biden issued Executive Order 14001 on a Sustainable Public Health Supply Chain, which directs actions to secure supplies necessary for responding to the COVID-19 pandemic as well as future public health emergencies. In response, a working group led by the HHS Administration for Strategic Preparedness and Response (ASPR) reviewed recommendations received during Tribal Consultation in the fall of 2021 to develop the attached draft plan (Link EO 14001 pdf). As part of this new round of Tribal consultation (link DTLL), Tribal leaders are invited to a virtual consultation on March 20, 2023, at 2:00pm – 4:00pm ET.	WRITTEN COMMENTS AND RECOMMENDATIONS: Please send your comments and recommendations on ASPR's recommendations for streamlining the process for requesting federal assistance for medical supplies by Monday, April 24, 2023. You can register here: https://www.zoomgov.com/meeting/register/vJItcuutpjgsE8Y0zO6e5nH1Vy8Cpz_ufjU https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/2/0939dc76-4bbc-47e0-9da0-76e9bb4d8608.pdf
3	DTLL/DULL	IHS	N/A	Published 2/06/2023	Tribal Consultation and Urban Confer (TC/UC) sessions in calendar year 2023 on Health IT Modernization	IHS is hosting a series of four TC/UC sessions in 2023 on Health IT Modernization to ask questions and get UIO feedback. During the first event, Preparing for Change, scheduled for March 8, the IHS will provide an overview of milestones and accomplishments of the Health IT Modernization Program and seek your UIO on change readiness, what the IHS could be doing to support organizations and individuals, and what facilities can be doing to prepare for an electronic health record modernization.	www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL-020623.pdf
4	Notice of Funding	Child and Families Admin	88 FR 7978	Published 02/07/2023	Proposed Information Collection Activity; Tribal Maternal, Infant, and Early Childhood Home Visiting Program Implementation Plan Guidance for Development and Implementation and Implementation and Expansion Grantees	The Administration for Children and Families (ACF), Office of Early Childhood Development (ECD) is requesting Office of Management and Budget (OMB) approval of Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Implementation Plan Guidance for Tribal Home Visiting Development and Implementation Grants (DIG) and Tribal Home Visiting Implementation and Expansion Grants (IEG).	Comments are due April 7, 2023 https://www.federalregister.gov/documents/2023/02/07/2023-02543/proposed-information-collection-activity-tribal-maternal-infant-and-early-childhood-home-visiting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Notice	HRSA	88 FR 8436	Published 02/09/2023	Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)	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. The agenda for the March 20-21, 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	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. March 20, 2023, 11:30 a.m. to 4:30 p.m. Eastern Time and March 21, 2023, 11:30 a.m. to 3:00 p.m. Eastern Time. https://www.federalregister.gov/documents/2023/02/09/2023-02791/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	Notice	Education Department	88 FR 8411	Published 02/09/2023	Application for New Awards; Native American and Alaska Native Children in School Program	The Department of Education (Department) is issuing a notice inviting applications for fiscal year (FY) 2023 for the Native American and Alaska Native Children in School (NAM) Program, Assistance Listing Number 84.365C. This notice relates to the approved information collection under OMB control number 1894-0006. The goal of this program is to support the teaching, learning, and studying of Native American languages while also increasing the English language proficiency and academic achievement of students served.	Applications Available: February 9, 2023 Deadline for Notice of Intent to Apply: February 24, 2023 Deadline for Transmittal of Applications: April 25, 2023 Deadline for Intergovernmental Review:June 26, 2023 https://www.federalregister.gov/documents/2023/02/09/2023-02736/application-for-new-awards-native-american-and-alaska-native-children-in-school-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

7	DTLL/DULL	IHS	N/A	Published 02/13/2023	Urban Confer	The DULL regards an upcoming Urban Confer on the Urban Indian Organization (UIO) Infrastructure Study convened by the Indian Health Service (IHS) scheduled for June 23, 2022.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL-021323.pdf
8	DULL/DTLL	OMB	N/A	Published 2/14/2023	Tribal consultation on the initial proposals from the Federal Interagency Technical Working Group on Race and Ethnicity Standards	The purpose of this Tribal consultation is for Tribal designees to share views with the Working Group, OMB, and the Chief Statistician of the United States on the initial proposals and provide suggestions on how we can improve the quality and usefulness of Federal race and ethnicity data.	Consultation will be held virtually on March 16, 2023 (2:00 p.m. – 4:00 p.m. ET) chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://mcusercontent.com/f620288bb41dd81f9c715ef4d/files/600d2003-c57f-05a9-dbde-7ea12f821c36/OMB_DTLL_SPD_15.01.pdf
9	DTLL	HHS	N/A	Published 2/16/2023	Invitation to the 25h US. Department of Health and Human Services (HHS) Annual Tribal Budget Consultation (ATBC)	The ATBC will provide a forum for tribes to collectively share their views and priorities with HHS officials on national health and human services funding priorities and make recommendations for the Department's FY 2025 budget request. While the FY 2024 budget proposal is not yet published, you can review the FY 2023 proposal at: HHS FY 2023 Budget in Brief I HHS.gov	The ATBC will take place in-person on April 18-19, 2023, at the Hubert H. Humphrey Building at 200 Independence Avenue, SW, Washington, DC https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/2/760ca82b-2937-4634-94ad-64916d066c66.pdf
10	Notice	IHS	88 FR 10127	Publised 02/16/2023	Zero Suicide Initiative Coordinating Center	The Zero Suicide Initiative (ZSI) is a key concept of the National Strategy for Suicide Prevention and is a priority of the National Action Alliance for Suicide Prevention (https://theactionalliance.org/). In fiscal year (FY) 2022, the IHS awarded eight grants to Tribes, Tribal organizations, and Urban Indian organizations to combat the suicide public health crisis in Indian Country. This program aims to improve the system of care for those at risk for suicide by implementing a comprehensive, culturally informed, multi-setting approach to suicide prevention in Indian health systems.	Application Deadline Date: April 17, 2023 Earliest Anticipated Start Date: May 17, 2023 https://www.federalregister.gov/documents/2023/02/16/2023-03281/zero-suicide-initiative-coordinating-center?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
11	Notice	IHS	88 FR 10359	Published 02/17/2023	The Special Diabetes Program for Indians Nashville Area Technical Assistance and Support Program	Diabetes is a complex and costly chronic disease that requires tremendous long-term efforts to prevent and treat. Although diabetes is a nationwide public health problem, American Indian and Alaska Native (AI/AN) people are disproportionately affected. In 2019, 14.5 percent of AI/AN people aged 18 years or older had diagnosed diabetes, compared to 7.4 percent of non-Hispanic white people. In addition, AI/AN people have higher rates of diabetes-related morbidity and mortality than the general U.S. population. Strategies to address the prevention and treatment of diabetes in AI/AN communities are urgently needed.	Application Deadline Date: April 3, 2023 https://www.federalregister.gov/documents/2023/02/17/2023-03341/the-special-diabetes-program-for-indians-nashville-area-technical-assistance-and-support-program?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
12	Notice	BIA	88 FR 11470	Published 2/23/2023	Agency Information Collection Activities; Submission to the Office of Management and Budget for Review and Approval; Indian Child Welfare Act Proceedings in State	The Bureau of Indian Affairs (BIA) is proposing to renew an information collection on whether or not the collection of information is necessary for the proper performance of the functions of the agency, including whether or not the information will have practical utility; the accuracy of our estimate of the burden for this collection of information, including the validity of the methodology and assumptions used; ways to enhance the quality, utility, and clarity of the information to be collected; and how might the agency minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.	Comments are due March 27, 2023 https://www.federalregister.gov/documents/2023/02/23/2023-03791/agency-information-collection-activities-submission-to-the-office-of-management-and-budget-for?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
13	Notice of Funding	DOJ, OVW	N/A	Published 2/21/2023	Grants to Enhance Culturally Specific Services for Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Program	The Grants to Enhance Culturally Specific Services for Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Program supports the maintenance and replication of existing successful community-based programs providing culturally specific services to victims of domestic violence, dating violence, sexual assault, and stalking, as well as the development of innovative culturally specific strategies to enhance access to services and resources for victims who face obstacles to accessing more traditional programs. Eligible applicants include UIOs.	Applicants are strongly encouraged to submit a non-binding Letter of Intent to OVW.Cultural@usdoj.gov by March 20, 2023. Interested applicants who do not submit a Letter of Intent are still eligible to apply. Application Deadline April 12, 2023 https://www.justice.gov/ovw/page/file/1569391/download

NCUIH REGULATIONS TRACK

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE
1	Notice	IHS	88 FR 12956	Published 3/1/2023
2	Notice	VA	88 FR 14472	Published 3/8/2023
3	Notice	Education Dept.	88 FR 15382	Published 3/13/2023
4	DULL/DTLL	IHS	N/A	Published 3/10/2023

5	Urban Confer	IHS	N/A	Published 3/13/2023
6	Notice	SAMHSA	88 FR 16022	Published 3/15/2023
7	Notice	BIA	88 FR 17242	Published 3/22/2023
8	Notice	VA	88 FR 17930	Published 3/24/2023

9	DULL/DTLL	IHS	N/A	Published 3/24/2023
10	Notice	IHS	88 FR 18558	Published 3/29/2023

ER: March

AGENCY ACTIONS
Preventing Alcohol-Related Deaths Through Social Detoxification
Advisory Committee on Tribal and Indian Affairs; Notice of Meeting
National Advisory Council on Indian Education (NACIE)
Invitation to Participate in Upcoming Communication Activities

Urban Confer - Access to Federal Medical Supplies
Meeting of the Substance Abuse and Mental Health Services Administration's Tribal Technical Advisory Committee (TTAC)
Indian Child Welfare Act; Designated Tribal Agents for Service of Notice
Advisory Committee on Tribal and Indian Affairs, Notice of Meeting, Amended

Agency revisions to the HIS Urban Confer Policy
Addressing Dementia in Indian Country: Models of Care

2023

SUMMARY

The Indian Health Service (IHS), Office of Clinical and Preventive Services, Division of Behavioral Health (DBH) is accepting applications for cooperative agreements for the Preventing Alcohol-Related Deaths (PARD) through Detoxification. The purpose of this program is to increase access to community-based prevention strategies that provide social detoxification, evaluation, stabilization, fostering patient readiness for and entry into treatment for alcohol use, and other substance use disorders.

The purpose of the Committee meeting is to advise the Secretary on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans. This includes advising the Secretary on the administration of healthcare services and benefits to American Indians/Alaska Natives (AI/AN) and Native Hawaiian Veterans; thereby assessing those needs and whether VA is meeting them.

The purpose of this meeting is to convene NACIE and conduct the following business: discussion of bylaws and charter; taking action to establish meeting calendar and subcommittees; discussion of recommendations to be provided to the Secretary of Interior and Secretary of Education, including the U.S. Department of Education's budget request; discussion of annual report action item follow-up; and discussion of invited federal partner updates, e.g., U.S. Department of the Interior, Bureau of Indian Education (BIE), White House Initiative on Advancing Educational Equity, Excellence, and Economic Opportunity for Native Americans and Strengthening Tribal Colleges and Universities.

On behalf the entire staff of the Indian Health Service (IHS), we express our commitment to our patients and our Tribal and Urban partners throughout Indian Country. Today, we write to invite you to join us in our efforts to improve our communications with Tribes, Tribal organizations, and Urban Indian Organizations (UIO) by actively participating in the following communication activities: Monthly All Tribal Leaders and Urban Indian Organization Leaders Call, The IHS Updates, The IHS 2023 Work Plan, and Social Media.

The Indian Health Service (IHS) is initiating an Urban Confer on Executive Order (EO) 14001 ,"A Sustainable Public Health Supply Chain," to gather input and comments on draft recommendations for improving the process for federally recognized tribal governments, IHS health care providers, Tribal Health Programs, and Urban Indian Organizations.

Notice is hereby given for the meeting on April 25, 2023, of the Substance Abuse and Mental Health Services Administration's Tribal Technical Advisory Committee (TTAC). The meeting is open to the public and will be held in person (hybrid). Agenda with call-in information will be posted on the SAMHSA website prior to the meeting at: https://www.samhsa.gov/about-us/advisory-councils/meetings. The meeting will include, but not be limited to, remarks from the Assistant Secretary for Mental Health and Substance Use; updates on SAMHSA priorities; follow up on topics related to the previous TTAC meetings; and council discussions.

The regulations implementing the Indian Child Welfare Act provide that Federally recognized Indian Tribes may designate an agent other than the Tribal chairman for service of notice of proceedings under the Act. This notice includes the current list of designated Tribal agents for service of notice.

The purpose of the Committee is to advise the Secretary on all matters relating to Indian tribes, tribal organizations, Native Hawaiian organizations, and Native American Veterans. This includes advising the Secretary on the administration of healthcare services and benefits to American Indians/Alaska Natives (AI/AN) and Native Hawaiian Veterans; thereby assessing those needs and whether VA is meeting them.

The revised Conferring with Urban Indian Organizations at Part 5, Chapter 26 of the Indian Health Manual (IHM) incorporates your recommendations to provide UIOs with consistent Urban Confer practices that specify responsibilities at all levels of the IHS. The revised Confer Policy strengthens time-honored commitments to Urban Indian Organization Leaders to ensure that the IHS follows-up with UIOs on Urban Indian health priorities in a timely matter.

The purpose of this program is to support the development of models of comprehensive and sustainable dementia care and services in Tribal and Urban Indian communities that are responsive to the needs of persons living with dementia and their caregivers.

ADDITIONAL DETAILS

Application Deadline: March 31, 2023

https://www.federalregister.gov/documents/2023/03/01/2023-04151/preventing-alcohol-related-deaths-through-social-detoxification?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

Meeting Dates: April 4, 202311 a.m.-7:30 p.m. (EST). April 5, 202311 a.m.-7:30 p.m. EST. April 6, 202311 a.m.-3 p.m. EST

https://www.federalregister.gov/documents/2023/03/08/2023-04731/advisory-committee-on-tribal-and-indian-affairs-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

The NACIE open virtual meeting will be held on March 30-31, 2023, from 1:00-4:30 p.m. (EST)

https://www.federalregister.gov/documents/2023/03/13/2023-05079/national-advisory-council-on-indian-education-nacie?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_20230310.pdf

Comments Due: April 24, 2023 Urban Confer: Thursday, March 23, 2023 2:30 - 4:30 PM ET https://ihs-gov.zoomgov.com/meeting/register/vJItde2opzksGHhZ3Ce9N3I0ykaGM72r7q8
Meeting: April 25, 2023, 9:00 a.m. to approximately 5:00 p.m. (ET) https://www.federalregister.gov/documents/2023/03/15/2023-05258/meeting-of-the-substance-abuse-and-mental-health-services-administrations-tribal-technical-advisory?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
The notice is effective March 22, 2023 and supersedes the list published on April 15, 2022. https://www.federalregister.gov/documents/2023/03/22/2023-05861/indian-child-welfare-act-designated-tribal-agents-for-service-of-notice?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
The meeting dates are as follows: April 4, 202311 a.m.-7:30 p.m.—Eastern Standard Time (EST).April 5, 202311 a.m.-7:30 p.m. EST.April 6, 202311 a.m.-3 p.m. EST. https://www.federalregister.gov/documents/2023/03/24/2023-06078/advisory-committee-on-tribal-and-indian-affairs-notice-of-meeting-amended?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL_032423.pdf

Application Deadline Date: June 27, 2023

https://www.federalregister.gov/documents/2023/03/29/2023-06455/addressing-dementia-in-indian-country-models-of-care?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION
1	Rule	VA	88 FR 19862
2	DTLL	IHS	N/A
3	DTLL	IHS	N/A
4	Notice	Children and Families Administration	88 FR 21192
5	Rule	VA	88 FR 21478

6	Rule	Justice Dept.	88 FR 21459
7	Notice	Children and Families Administration	88 FR 22450
8	DULL	IHS	N/A
9	Notice	Dept. of Education	88 FR 23647

9	Notice	IHS	88 FR 24196
10	Notice	IHS	88 FR 24812
11	Proposed Rule	CMS	88 FR 25313
12	Presidential Document	Executive Office of the President	88 FR 25251

13	Rule	HHS	88 FR 25740

TRACKER: April 2023

PUBLISHED DATE	AGENCY ACTIONS
Published 4/4/2023	Copayment Exemption for Indian Veterans
Published 4/4/2023	Intiation of Tribal Consultation on how to bring the administration of the Small Ambulatory Program (SAP) closer to those who benefit from the program
Published 4/5/2023	Tribal Consulation Meeting
Published 4/10/2023	Proposed Information Collection Activity; Tribal Maternal, Infant, and Early Childhood Home Visiting Program Data Reports: Demographic and Service Utilization, Grantee Performance Measures and Quarterly Performance Reports
Published 4/11/2023	Copayment Exemption for Indian Veterans

Published 4/11/2023	Special Tribal Criminal Jurisdiction Reimbursement
Published 4/13/2023	Submission for Office of Management and Budget (OMB) Review; Tribal Maternal, Infant, and Early Childhood Home Visiting Program: Implementation Plan Guidance for Development and Implementation and Implementation and Expansion Grantees
Published 4/14/2023	IHS distribution decision for the fiscal year (FY) 2023 Urban Indian Health funding increase.
Published 4/18/2023	Applications for New Awards; Alaska Native and Native Hawaiian-Serving Institutions Program, Part A

Published 4/19/2023	Tribal Self-Governance Planning Cooperative Agreement Program
Published 4/24/2023	Produce Prescription Pilot Program
Published 4/26/2023	Clarifying Eligibility for a Qualified Health Plan Through an Exchange, Advance Payments of the Premium Tax Credit, Cost-Sharing Reductions, a Basic Health Program, and for Some Medicaid and Children's Health Insurance Programs
Published 4/26/2023	Revitalizing Our Nation's Commitment to Environmental Justice for All

Published 4/27/2023	Patient Protection and Affordable Care Act, HHS Notice of Benefit and Payment Parameters for 2024

SUMMARY

The Department of Veterans Affairs (VA) adopts as final, with changes, a proposed rule to amend its medical regulations to implement a statute exempting Indian and urban Indian veterans from copayment requirements for the receipt of hospital care or medical services. This final rule also exempts such veterans from copayments for all urgent care visits.

Authorized by the Indian Health Care Improvement Act (IHCIA), the SAP provides an opportunity for the Indian Health Service (IHS) to contribute to projects for a Tribe or Tribal Organization operating an Indian health facility pursuant to a contract entered into under the Indian Self-Determination and Education Assistance

IHS is hosting a Tribal Consultation to seek guidance and recommendations on a spend plan for the second year of funding for the Infrastructure Investment and Jobs Act (IIJA). The IIJA (Pub. L. No. 117-58 (November 15, 2021)), appropriated $3.5 billion to the Indian Health Service (IHS), with $700 million made available over 5 years, beginning in fiscal year 2022.

The Administration for Children and Families (ACF) is requesting a new information collection for the Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Tribal Home Visiting Program Data Reports: Demographic and Service Utilization, Grantee Performance Measures and Quarterly Performance Reports.

On April 4, 2023, the Department of Veterans Affairs (VA) published in the Federal Register a final rule to amend its medical regulations to implement a statute exempting Indian and urban Indian veterans from copayment requirements for the receipt of hospital care or medical services. This correction addresses a technical error in the published final rule and correcting amendments to four sections involved.

The Violence Against Women Act Reauthorization Act of 2022 (VAWA 2022) authorized a new program to reimburse Tribal governments (or authorized designees of Tribal governments) for expenses incurred in exercising "special Tribal criminal jurisdiction" (STCJ) over non-Indians who commit certain covered crimes in Indian country. This rule will implement this new Tribal Reimbursement Program within the Department of Justice's Office on Violence Against Women (OVW) by providing details on how it will be administered, including eligibility, frequency of reimbursement, costs that can be reimbursed, the annual maximum allowable reimbursement per Tribe, and conditions for waiver of the annual maximum.

The Administration for Children and Families (ACF), Office of Early Childhood Development (ECD) is requesting Office of Management and Budget (OMB) approval of Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Implementation Plan Guidance for Tribal Home Visiting Development and Implementation Grants (DIG) and Tribal Home Visiting Implementation and Expansion Grants (IEG).

In accordance with the methodology established after Urban Confer in FY 2018, the IHS will distribute 90 percent of the funding equally among Urban Indian Organizations (UIOs), with the remaining 10 percent distributed to the IHS Office of Urban Indian Health Programs (OUIHP). The total FY 2023 Urban Indian Health funding increase available for distribution to the OUIHP and UIOs is $15 million.

The Department of Education (Department) is issuing a notice inviting applications for new awards for fiscal year (FY) 2023 for the Alaska Native and Native Hawaiian-Serving Institutions (ANNH) Program, Part A, Assistance Listing Numbers 84.031N (Alaska Native) and 84.031W (Native Hawaiian). This notice relates to the approved information collection under OMB control number 1840–0810.

The Tribal Self-Governance Program (TSGP) is more than an IHS program; it is an expression of the Government-to-Government relationship between the United States (U.S.) and Indian Tribes. Through the TSGP, Tribes negotiate with the IHS to assume Programs, Services, Functions, and Activities (PSFAs), or portions thereof, which gives Tribes the authority to manage and tailor health care programs in a manner that best fits the needs of their communities.

The Indian Health Service (IHS) is accepting applications for a cooperative agreement for the Produce Prescription Pilot Program (P4). The purpose of this program is to help establish Produce Prescription Programs through collaborations with stakeholders from various health care and food industries in Tribal communities.

This proposed rule would make several clarifications and update the definitions currently used to determine whether a consumer is eligible to enroll in a Qualified Health Plan (QHP) through an Exchange; a Basic Health Program (BHP), in States that elect to operate a BHP; and for some State Medicaid and Children's Health Insurance Programs (CHIPs).

To fulfill our Nation's promises of justice, liberty, and equality, every person must have clean air to breathe; clean water to drink; safe and healthy foods to eat; and an environment that is healthy, sustainable, climate-resilient, and free from harmful pollution and chemical exposure. Restoring and protecting a healthy environment—wherever people live, play, work, learn, grow, and worship—is a matter of justice and a fundamental duty that the Federal Government must uphold on behalf of all people.

This final rule includes payment parameters and provisions related to the HHS-operated risk adjustment and risk adjustment data validation programs, as well as 2024 user fee rates for issuers offering qualified health plans (QHPs) through Federally-facilitated Exchanges (FFEs) and State-based Exchanges on the Federal platform (SBE–FPs). This final rule also has requirements related to updating standardized plan options and reducing plan choice overload; the automatic re-enrollment hierarchy; plan and plan variation marketing name requirements for QHPs; essential community providers (ECPs) and network adequacy; failure to file and reconcile; special enrollment periods (SEPs); the annual household income verification; the deadline for QHP issuers to report enrollment and payment inaccuracies; requirements related to the State Exchange improper payment measurement program; and requirements for agents, brokers, and web-brokers assisting FFE and SBE–FP consumers.

ADDITIONAL DETAILS

This rule is effective April 4, 2023.

https://www.federalregister.gov/documents/2023/04/04/2023-06954/copayment-exemption-for-indian-veterans?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

Meeting date: April14,2023, 1:30-3pm ET

https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_04032023.pdf

Meeting date: April 12, 2023, 3-6pm ET

https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL-20230405.pdf

Comments are due June 9, 2023

https://www.federalregister.gov/documents/2023/04/10/2023-07462/proposed-information-collection-activity-tribal-maternal-infant-and-early-childhood-home-visiting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

Effective April 11, 2023.

https://www.federalregister.gov/documents/2023/04/11/2023-07528/copayment-exemption-for-indian-veterans?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

This rule is effective April 11, 2023.

https://www.federalregister.gov/documents/2023/04/11/2023-07519/special-tribal-criminal-jurisdiction-reimbursement?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

Comments are due May 13, 2023.

https://www.federalregister.gov/documents/2023/04/13/2023-07845/submission-for-office-of-management-and-budget-omb-review-tribal-maternal-infant-and-early-childhood?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL_041423.pdf

Applications Available: April 18, 2023.
Deadline for Transmittal of Applications: June 20, 2023.
Deadline for Intergovernmental Review: August 16, 2023.

https://www.federalregister.gov/documents/2023/04/18/2023-08094/applications-for-new-awards-alaska-native-and-native-hawaiian-serving-institutions-program-part-a?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

Application Deadline Date: June 20, 2023.
Earliest Anticipated Start Date:July 18, 2023.

https://www.federalregister.gov/documents/2023/04/19/2023-08201/tribal-self-governance-planning-cooperative-agreement-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

Application Deadline Date: June 8, 2023
Earliest Anticipated Start Date: June 23, 2023

https://www.federalregister.gov/documents/2023/04/24/2023-08614/produce-prescription-pilot-program?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

Comments are due 06/23/2023

https://www.federalregister.gov/documents/2023/04/26/2023-08635/clarifying-eligibility-for-a-qualified-health-plan-through-an-exchange-advance-payments-of-the?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

https://www.federalregister.gov/documents/2023/04/26/2023-08955/revitalizing-our-nations-commitment-to-environmental-justice-for-all?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

https://www.federalregister.gov/documents/2023/04/27/2023-08368/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2024?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: May 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	DTLL	OMB	N/A	Published 5/2/2023	OMB Tribal Consultation: Proposed IHS Mandatory Funding	Tribal Consultation on the FY 2024 President's Budget proposal to shift funding for the HHS Indian Health Service (IHS) from discretionary to mandatory beginning in FY 2025	Meeting Date: June 2, 2023 2:00 PM ET register here: https://www.zoomgov.com/meeting/register/vJIsceyqqzIuGT9LZmARnvsD6RLiTFyr20Q
2	Proposed Rule	CMS	88 FR 28092	Published 5/3/2023	Medicaid Program; Medicaid and Children's Health Insurance Program (CHIP) Managed Care Access, Finance, and Quality	This proposed rule would advance CMS' efforts to improve access to care, quality and health outcomes, and better address health equity issues for Medicaid and Children's Health Insurance Program (CHIP) managed care enrollees. The proposed rule would specifically address standards for timely access to care and States' monitoring and enforcement efforts, reduce burden for some State directed payments and certain quality reporting requirements, add new standards that would apply when States use in lieu of services and settings (ILOSs) to promote effective utilization and specify the scope and nature of ILOS, specify medical loss ratio (MLR) requirements, and establish a quality rating system for Medicaid and CHIP managed care plans.	Comments are due July 3, 2023 https://www.federalregister.gov/documents/2023/05/03/2023-08961/medicaid-program-medicaid-and-childrens-health-insurance-program-chip-managed-care-access-finance?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
3	Notice	IHS	88 FR 27905	Published 5/3/2023	Community Health Aide Program: Tribal Planning & Implementation	The purpose of the TPI program is to support the planning and implementation for Tribes and Tribal Organizations (T/TO) positioned to begin operating a CHAP or support a growing CHAP in the contiguous 48 states. The program is designed to support the regional flexibility required to implement a CHAP unique to the needs of individual Tribal communities across the country through the identification of feasibility factors.	Application Deadline Date: August 1, 2023 Earliest Anticipated Start Date: September 15, 2023 https://www.federalregister.gov/documents/2023/05/03/2023-09363/community-health-aide-program-tribal-planning-and-implementation?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
4	Presidential Document	Executive Office of the President	88 FR 29813	Published 5/9/2023	Missing or Murdered Indigenous Persons Awareness Day, 2023	NOW, THEREFORE, I, JOSEPH R. BIDEN JR., President of the United States of America, by virtue of the authority vested in me by the Constitution and the laws of the United States, do hereby proclaim May 5, 2023, as Missing or Murdered Indigenous Persons Awareness Day. I call on all Americans and ask all levels of government to support Tribal governments and Tribal communities' efforts to increase awareness and address the issues of missing or murdered Indigenous persons through appropriate programs and activities.	https://www.federalregister.gov/documents/2023/05/09/2023-09981/missing-or-murdered-indigenous-persons-awareness-day-2023?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Notice	IHS	88 FR 30141	Published 5/10/2023	National Indian Health Outreach and Education	The purpose of this IHS cooperative agreement is to further the IHS mission and goals related to providing quality health care to the AI/AN community through outreach and education efforts with a focus on improving Indian health care, promoting awareness, visibility, advocacy, training, technical assistance, and education efforts.	Application Deadline Date: July 10, 2023 Earliest Anticipated Start Date: July 24, 2023 https://www.federalregister.gov/documents/2023/05/10/2023-09958/national-indian-health-outreach-and-education?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	Notice	HRSA	88 FR 30316	Published 5/11/2023	Meeting of the Advisory Committee on Infant and Maternal Mortality (Formerly the Advisory Committee on Infant Mortality)	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.	June 13, 2023, 10:00 a.m. to 5:00 p.m. ET and June 14, 2023, 9:30 a.m. to 2:00 p.m. ET. https://www.federalregister.gov/documents/2023/05/11/2023-10069/meeting-of-the-advisory-committee-on-infant-and-maternal-mortality-formerly-the-advisory-committee?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: June 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Notice	Education Dept.	88 FR 36286	Published 6/2/2023	National Advisory Council on Indian Education (NACIE)	This notice sets forth the agenda, time, and instructions to access or participate in the June 29–30, 2023, virtual meeting of NACIE. This notice provides information about the meeting to members of the public who may be interested in attending the meeting and how to provide written comment for the meeting.	The NACIE open virtual meeting will be held on June 29–30, 2023, from 1:00–4:30 p.m. (EST) https://www.federalregister.gov/documents/2023/06/02/2023-11788/national-advisory-council-on-indian-education-nacie?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	DULL	IHS	N/A	Published 6/5/2023	The IHS Director writes to notify Tribal Leaders and Urban Indian Organization Leaders that the Indian Health Service has released the 2023-2027 Office of Urban Indian Health Programs Strategic Plan	The OUIHP Strategic Plan identifies five pillars that guide the work of the IHS in partnership with Urban Indian Organizations (UIOs) and to support their efforts. The five guiding pillars of the Strategic Plan are: Provide effective, timely, and transparent communication; Improve OUIHP's operational oversight and management; Leverage partnerships to expand UIO resources; Improve data quality; and Expand the infrastructure and capacity of UIOs.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLLL_060523.pdf
3	Notice	CMS	88 FR 36485	Published 6/5/2023	Medicare and Medicaid Programs; Policy and Regulatory Changes to the Omnibus COVID-19 Health Care Staff Vaccination Requirements; Additional Policy and Regulatory Changes to the Requirements for Long-Term Care (LTC) Facilities and Intermediate Care Facilities for Individuals With Intellectual Disabilities (ICFs-IID) To Provide COVID-19 Vaccine Education and Offer Vaccinations to Residents, Clients, and Staff; Policy and Regulatory Changes to the Long Term Care Facility COVID-19 Testing Requirements	This final rule removes expired language addressing staff and patient COVID–19 testing requirements for LTC Facilities issued in the interim final rule with comment "Medicare and Medicaid Programs, Clinical Laboratory Improvement Amendments (CLIA), and Patient Protection and Affordable Care Act; Additional Policy and Regulatory Revisions in Response to the COVID–19 Public Health Emergency" published in the September 2, 2020 Federal Register . The rule also finalizes requirements for these facilities to provide education about COVID–19 vaccines and to offer COVID–19 vaccines to residents, clients, and staff. In addition, the rule withdraws the regulations in the interim final rule with comment (IFC) "Omnibus COVID–19 Health Care Staff Vaccination" published in the November 5, 2021 Federal Register , and finalizes certain provisions of the "COVID–19 Vaccine Requirements for Long-Term Care (LTC) Facilities and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs–IID) Residents, Clients, and Staff" IFC, published in the May 13, 2021 Federal Register .	The regulations in this final rule are effective on August 4, 2023 https://www.federalregister.gov/documents/2023/06/05/2023-11449/medicare-and-medicaid-programs-policy-and-regulatory-changes-to-the-omnibus-covid-19-health-care?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
4	Notice	Education Dept.	88 FR 37211	Published 6/7/2023	Applications for New Awards; Indian Education Discretionary Grants Programs-Native American Language Resource Centers Program	The Department of Education (Department) is issuing a notice inviting applications (NIA) for fiscal year (FY) 2023 for the Native American Language Resource Centers (NALRC) Program, Assistance Listing Number 84.415C. This notice relates to the approved information collection under OMB control number 1894–0006.	Applications Available: June 7, 2023 Deadline for Notice of Intent to Apply: June 27, 2023 Date of Pre-Application Webinar: June 22, 2023 Deadline for Transmittal of Applications: July 27, 2023 Deadline for Intergovernmental Review: August 28, 2023 https://www.federalregister.gov/documents/2023/06/07/2023-12166/applications-for-new-awards-indian-education-discretionary-grants-programs-native-american-language?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Rule	CMS	88 FR 37174	Published 6/7/2023	Medicare Program; Contract Year 2024 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, Medicare Cost Plan Program, and Programs of All-Inclusive Care for the Elderly; Correction	This document corrects technical errors that appeared in the final rule published in the Federal Register on April 12, 2023 entitled "Contract Year 2024 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, Medicare Cost Plan Program, and Programs of All-Inclusive Care for the Elderly."	This correcting document is effective June 5, 2023 https://www.federalregister.gov/documents/2023/06/07/2023-12098/medicare-program-contract-year-2024-policy-and-technical-changes-to-the-medicare-advantage-program?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	Rule	CMS	88 FR 37772	Published 6/9/2023	Medicare Program; Treatment of Medicare Part C Days in the Calculation of a Hospital's Medicare Disproportionate Patient Percentage	This final action establishes a policy concerning the treatment of patient days associated with persons enrolled in a Medicare Part C (also known as "Medicare Advantage") plan for purposes of calculating a hospital's disproportionate patient percentage for cost reporting periods starting before fiscal year (FY) 2014 in response to the Supreme Court's ruling in Azar v. Allina Health Services, 139 S. Ct. 1804 (June 3, 2019).	The policy set out in this final action is effective August 8, 2023 https://www.federalregister.gov/documents/2023/06/09/2023-12308/medicare-program-treatment-of-medicare-part-c-days-in-the-calculation-of-a-hospitals-medicare?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
7	Notice	HHS	88 FR 38519	Published 6/13/2023	National Committee on Vital and Health Statistics; Meeting and Request for Information	Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting and related Request for Information (RFI). The meeting is open to the public. The public is invited and welcome to obtain the link to attend this meeting by following the instructions posted on the Committee website: https://ncvhs.hhs.gov/meetings-meeting/.	The meeting will be held Thursday, August 3, 2023: 10:00 a.m.–5:30 p.m. EDT. Comments are due June 30, 2023. https://www.federalregister.gov/documents/2023/06/13/2023-12617/national-committee-on-vital-and-health-statistics-meeting-and-request-for-information?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
8	Notice	VA	88 FR 39908	Published 6/20/2023	Request for Data and Information on Minority Veterans	The Department of Veterans Affairs (VA), Office of the Secretary, Center for Minority Veterans (CMV), is hereby giving notice of an opportunity for the public to provide available data and information on minority and historically underserved Veterans. Historically underserved Veterans includes racial and ethnic minority (Asian American; Black; Hispanic/Latino; Native American (including American Indian, Alaskan Native, and Native Hawaiian); or Pacific-Islander American); LGBTQ+; those whose religious or conscientious identity, beliefs, and practices have been determined to be underserved; language barriers or are without citizenship status; and those in rural areas and on tribal lands.	Comments must be received on or before August 21, 2023 https://www.federalregister.gov/documents/2023/06/20/2023-13067/request-for-data-and-information-on-minority-veterans?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov

9	Notice	ACF	88 FR 39854	Published 6/20/2023	Submission for OMB Review; Tribal Maternal, Infant, and Early Childhood Home Visiting Program Data Reports: Demographic and Service Utilization, Grantee Performance Measures, and Quarterly Performance Reports	The Administration for Children and Families (ACF) is requesting a new information collection for the Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Tribal Home Visiting Program Data Reports: Demographic and Service Utilization, Grantee Performance Measures, and Quarterly Performance Reports.	Comments due July 20, 2023 https://www.federalregister.gov/documents/2023/06/20/2023-13065/submission-for-omb-review-tribal-maternal-infant-and-early-childhood-home-visiting-program-data?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
10	Notice	Food and Nutrition Services	88 FR 41067	6/23/2023	Agency Information Collection Activities: WIC Participant and Program Characteristics 2024 & 2026 Study	In accordance with the Paperwork Reduction Act of 1995, this notice invites the general public and other public agencies to comment on this proposed information collection. This collection is a reinstatement, with change, of a previously approved collection for which approval has expired for the WIC Participant and Program Characteristics 2024 and 2026 Study.	Written comments must be received on or before August 22, 2023 https://www.federalregister.gov/documents/2023/06/23/2023-13313/agency-information-collection-activities-wic-participant-and-program-characteristics-2024-and-2026?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
12	Notice	VA	88 FR 42012	6/28/2023	Solicitation of Nominations for the Appointment to the Advisory Committee on Tribal and Indian Affairs	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs ("the Committee") to represent the following Indian Health Service (IHS) Areas: Bemidji; California; Great Plains; Nashville; Navajo; Tucson.	Nominations for membership on the Committee must be received no later than 5:00 p.m. EST on August 1, 2023 https://www.federalregister.gov/documents/2023/06/28/2023-13675/solicitation-of-nominations-for-the-appointment-to-the-advisory-committee-on-tribal-and-indian?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
13	Notice	NIH	88 FR 41974	6/28/2023	Notice To Announce Tribal Consultation for an All of Us Research Program Update and To Discuss the Program's Policies and Protections Around Data Access and Use Statement for Fiscal Year 2023	The U.S. Department of Health and Human Services (HHS), National Institutes of Health (NIH) hereby gives notice that the All of Us Research Program will be hosting a virtual Tribal Consultation with American Indian and Alaska Native (AI/AN) Federally Recognized Tribes. The consultation will include an update on our approach to Tribal engagement, discussion about integrating data from self-identified AI/AN participants in the program's data platform, the All of Us Research Hub at https://www.researchallofus.org, and program planning.	Thursday, September 28, 2023, from 1 to 3:00 p.m. ET. Written Tribal testimony is due by October 28, 2023 https://www.federalregister.gov/documents/2023/06/28/2023-13750/notice-to-announce-tribal-consultation-for-an-all-of-us-research-program-update-and-to-discuss-the?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
14	DULL	IHS	N/A	6/29/2023	The IHS Director writes to share an opportunity to become involved in the collaborative planning for the new IHS enterprise electronic health record solution.	One of the central principles of the IHS Health IT Modernization is to build and operate the new EHR solution with our partners, not for them. As the IHS approaches finalization of a contract award for the new IHS enterprise EHR solution, it is important to know which sites may wish to participate with the IHS on shared enterprise solution planning efforts. As discussed during the May 10 Tribal Consultation and Urban Confer session, the IHS invites sites that are considering the new enterprise EHR as a viable option to complete the enclosed Statement of Interest to indicate their interest in participating in shared enterprise solution planning. The Statement of Interest may be submitted by e-mail to modernization@ihs.gov.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLLL_062923.pdf
15	Notice	ACF	88 FR 42076	6/29/2023	Tribal Consultation Meetings	Pursuant to the Head Start Act, notice is hereby given of two tribal consultation sessions to be held between HHS/ACF OHS leadership and the leadership of tribal governments operating Head Start and Early Head Start programs. The purpose of these consultation sessions is to discuss ways to better meet the needs of American Indian and Alaska Native (AI/AN) children and their families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations. Two tribal consultations will be held as part of HHS/ACF or ACF Tribal Consultation Sessions.	Meeting dates: Wednesday, September 13, 2023, Tuesday, December 5, 2023 https://www.federalregister.gov/documents/2023/06/29/2023-13793/tribal-consultation-meetings?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
16	Notice	IHS	88 FR 42379	6/30/2023	Notice of Listing of Members of the Indian Health Service Senior Executive Service Performance Review Board	Notice is provided of the persons who will serve on the Indian Health Service Senior Executive Service Performance Review Board.	https://www.federalregister.gov/documents/2023/06/30/2023-13892/notice-of-listing-of-members-of-the-indian-health-service-senior-executive-service-performance?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: July 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Notice	HRSA	88 FR 42725	Published 7/3/2023	Lists of Designated Primary Medical Care, Mental Health, and Dental Health Professional Shortage Areas	This is the first of two notices planned for the coming months informing the public of the availability of the complete lists of all geographic areas, population groups, and facilities designated as primary medical care, dental health, and mental health professional shortage areas (HPSAs). This notice includes the lists of HPSAs in a designated status as of April 28, 2023.	https://www.federalregister.gov/documents/2023/07/03/2023-14092/lists-of-designated-primary-medical-care-mental-health-and-dental-health-professional-shortage-areas?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	Notice	IHS	88 FR 42726	Published 7/3/2023	Request for Public Comment: 60-Day Information Collection: Indian Health Service Forms To Implement the Privacy Rule	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, "IHS Forms to Implement the Privacy Rule" Office of Management and Budget (OMB) Control Number 0917–0030.	September 1, 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 https://www.federalregister.gov/documents/2023/07/03/2023-14017/request-for-public-comment-60-day-information-collection-indian-health-service-forms-to-implement?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
3	Notice	Agency for Healthcare Research and Quality (AHRQ), HHS.	88 FR 42941	Published 7/5/2023	Supplemental Evidence and Data Request on Breastfeeding and Health Outcomes for Infants and Children	The Agency for Healthcare Research and Quality (AHRQ) is seeking scientific information submissions from the public. Scientific information is being solicited to inform our review on Breastfeeding and Health Outcomes for Infants and Children, which is currently being conducted by the AHRQ's Evidence-based Practice Centers (EPC) Program. Access to published and unpublished pertinent scientific information will improve the quality of this review.	Submission Deadline on or before August 4, 2023 https://www.federalregister.gov/documents/2023/07/05/2023-14184/supplemental-evidence-and-data-request-on-breastfeeding-and-health-outcomes-for-infants-and-children?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
4	Notice	SAMHSA	88 FR 44134	Published 7/11/2023	Tribal Technical Advisory Committee; Notice of Meeting	Notice is given for the August 29, 2023, virtual meeting of SAMHSA's Tribal Technical Advisory Committee (TTAC). TTAC meetings are exclusively between federal officials and elected officials of Tribal governments (or their designated employees) to exchange views, information, or advice related to the management or implementation of SAMHSA programs. The public may attend but are not allowed to participate in the meeting. Immediately following the TTAC meeting, SAMHSA will host American Indian and Alaska Native (AI/AN) Federally Recognized Tribes for a virtual Tribal Consultation session on the BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDER RESOURCES FOR NATIVE AMERICANS PROGRAM	The virtual SAMHSA TTAC Meeting will be held on August 29, 2023, from 1:00 p.m. to 4:00 p.m. EDT https://www.federalregister.gov/documents/2023/07/11/2023-14638/tribal-technical-advisory-committee-notice-of-meeting?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Notice	CMS	88 FR 44281	Published 7/12/2023	Request for Information Regarding Medical Payment Products	The CFPB, an independent agency, HHS, and the Treasury (collectively, the agencies), are soliciting comments from the public and interested parties on medical credit cards, loans, and other financial products used to pay for health care. The agencies seek to understand the prevalence, nature, and impact of these products, including disparities across different demographic groups. The agencies also seek to understand the effects these products may have on patients and on the health care system. In particular, the agencies seek comment on whether these products may allow health care providers to operate outside of a broad range of patient and consumer protections. The agencies also seek comment on whether these products may contribute to health care cost inflation, displace hospitals' provision of financial assistance, lead patients to pay inaccurate or inflated medical bills, increase the amount patients must pay due to financing costs, or otherwise harm patients' mental, physical, and financial well-being, including through downstream credit reporting and debt collection practices.	Comments are due September 11, 2023 https://www.federalregister.gov/documents/2023/07/12/2023-14726/request-for-information-regarding-medical-payment-products?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	Notice	CDC	88 FR 44338	Published 7/12/2023	Reorganization of the National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce	CDC has modified its structure. This notice announces the reorganization of the State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce, henceforth referred to as the Public Health Infrastructure Center (PHIC). PHIC reorganized to enhance and enable coordination for partners collectively working to bolster the Nation's public health infrastructure.	This reorganization was approved by the Director of CDC on June 28, 2023 https://www.federalregister.gov/documents/2023/07/12/2023-14705/reorganization-of-the-national-center-for-state-tribal-local-and-territorial-public-health?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
7	Proposed Rule	HHS	88 FR 44596	Published 7/12/2023	Short-Term, Limited-Duration Insurance; Independent, Noncoordinated Excepted Benefits Coverage; Level-Funded Plan Arrangements; and Tax Treatment of Certain Accident and Health Insurance	This document sets forth proposed rules that would amend the definition of short-term, limited-duration insurance, which is excluded from the definition of individual health insurance coverage under the Public Health Service Act. This document also sets forth proposed amendments to the requirements for hospital indemnity or other fixed indemnity insurance to be considered an excepted benefit in the group and individual health insurance markets. This document further sets forth proposed amendments to clarify the tax treatment of certain benefit payments in fixed amounts received under employer-provided accident and health plans. Finally, this document solicits comments regarding coverage only for a specified disease or illness that qualifies as excepted benefits, and comments regarding level-funded plan arrangements.	Comments are due September 11, 2023 https://www.federalregister.gov/documents/2023/07/12/2023-14238/short-term-limited-duration-insurance-independent-noncoordinated-excepted-benefits-coverage?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

8	Notice	BIA	88 FR 44823	Published 7/13/2023	Privacy Act of 1974; System of Records	Pursuant to the Privacy Act of 1974, as amended, the Department of the Interior (DOI) is issuing a public notice of its intent to create the Bureau of Indian Affairs (BIA) Privacy Act system of records, INTERIOR/BIA–35, Behavioral Health and Wellness Program. This system helps the Behavioral Health and Wellness Program (BHWP) provide immediate behavioral health crisis support, clinical counseling services, crisis care coordination, and communication with the client and appropriate points of contact for referrals and continued service delivery or emergency care. This newly established system will be included in DOI's inventory of systems of records.	This new system will be effective upon publication on July 13, 2023. New routine uses will be effective August 14, 2023. Submit comments on or before August 14, 2023 https://www.federalregister.gov/documents/2023/07/13/2023-14877/privacy-act-of-1974-system-of-records?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
9	Notice	ACF	88 FR 45219	Published 7/14/2023	Submission for Office of Management and Budget Review; Guidance for Tribal Temporary Assistance for Needy Families Program (Office of Management and Budget #0970-0157)	The Administration for Children and Families (ACF) is requesting a 3-year extension of the form ACF–123: Guidance for the Tribal Temporary Assistance for Needy Families (TANF) Program (Office of Management and Budget (OMB) #0970–0157, expiration date: August 31, 2023). There are minor clarifying changes requested to the guidance.	Comments due August 13, 2023 https://www.federalregister.gov/documents/2023/07/14/2023-15001/submission-for-office-of-management-and-budget-review-guidance-for-tribal-temporary-assistance-for?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
10	Notice	IHS	88 FR 45867	Published 7/18/2023	Catastrophic Health Emergency Fund	The Indian Health Service (IHS or Service) administers the Catastrophic Health Emergency Fund (CHEF) pursuant to section 202 of the Indian Health Care Improvement Act (IHCIA). The purpose of the CHEF is to meet the extraordinary medical costs associated with the treatment of victims of disasters or catastrophic illnesses who are within the responsibility of the Service. This notice proposes regulations governing the administration of the CHEF.	Send comments on or before September 18, 2023 https://www.federalregister.gov/documents/2023/07/18/2023-14849/catastrophic-health-emergency-fund?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
11	DULL	IHS	N/A	Published 7/19/2023	Update on Status on Implementing FY2024 Advanced Appropriations given to IHS	In FY 2023, the IHS received the first ever advance appropriation for the FY 2024 Budget. The FY 2023 Consolidated Appropriations Act (Public Law 117-328) included a total of $5.1 billion in FY 2024 advance appropriations for the Indian Health Service, which includes funding at the same level as FY 2023 enacted for nearly all IHS programs. The full year funding level will be available for these programs on Oct. 1, 2023, regardless of whether Congress enacts a continuing resolution or full year bill. Advance appropriations provide long overdue funding stability and predictability for the IHS	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLLL_071923.pdf
12	DULL	IHS	N/A	Published 7/19/2023	Information Regarding the Syphilis Epidemic Currently Impacting AI/AN Communities	IHS is providing information regarding the syphilis epidemic affecting American Indian and Alaska Native (AI/AN) communities. American Indian and Alaska Native people have the highest rates of syphilis and congenital syphilis of any group in the country. Some congenital syphilis cases have resulted in stillbirths or death shortly after birth. IHS is committed to reducing the prevalence of syphilis in AI/AN communities and I ask for your assistance in helping us achieve this goal.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLLL_071923_Syphilis.pdf
13	N/A	CMS	N/A	Published 7/25/2023	CMS Releases 2021 Medicaid Data on Managed Care	The Centers for Medicare & Medicaid Services (CMS) released the 2021 Medicaid Managed Care Enrollment and Program Characteristics and Data Tables. This national data is broken down by program and population, as well as by individual state. The enrollment data provides an accurate snapshot of Medicaid managed care enrollment for a particular year as of July 1st of each year.	https://www.medicaid.gov/medicaid/managed-care/profiles-program-features/index.html https://www.medicaid.gov/medicaid/managed-care/enrollment-report/index.html
	DTLL	IHS	N/A	Published 7/26/2023	Tribal Consultation on the updated draft of the Indian Health Service (IHS) Tribal Consultation Policy (Consultation Policy)	Should the requirement to Consult with ANCs be addressed in the updated Consultation Policy, added as Addendum 2, or should the IHS issue a separate policy on Consulting with ANCs, where applicable, in the Indian Health Manual (IHM)?	TRIBAL CONSULTATION SESSION: Please make plans to join for a virtual Tribal Consultation session to share your input and recommendations on the updated Consultation Policy on Wednesday, August 9, 2023. Session details follow: DATE: Wednesday, August 9, 2023 TIME: 12:00 p.m. – 2:00 p.m. ET ZOOM: Meeting ID: 160 614 4452 Passcode: 572342 https://ihs gov.zoomgov.com/meeting/register/vJItceisqj8vGCqBwKWiCbjlOyje MqWf8Q https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_072723.pdf WRITTEN COMMENTS and RECOMMENDATIONS: Please send your written comments and recommendations on the Consultation Policy by Monday, September 11, 2023: x By e-mail to: consultation@ihs.gov – Subject line: IHS TRIBAL CONSULTATION POLICY.

14	DTLL	USETINC	N/A	Published 7/26/2023	DOI, HHS, DOJ Tribal Consultation on ICWA	The Department of the Interior (DOI), Department of Health and Human Services (HHS), and the Department of Justice (DOJ) are committed to partnering on a nation-to-nation basis with Tribal Nations to ensure the wellbeing of Tribal children and preservation of Tribal families. In response to requests by Tribal leaders for updates on their collective efforts, they invite you to provide input on the Indian Child Welfare Act and what steps the agencies can take to promote federal protections for Indian children and their parents and caregivers.	Meeting date: August 7, 2023 2-4pm CT https://www.usetinc.org/wp-content/uploads/2023/07/ICWA-Consultation-DTLL-ASIA-ACF-HHS-logo-ENRD-logo.pdf
15	Tribal Listerning Session	SAMHSA	N/A	Published 7/26/2023	Upcoming SAMHSA Event	SAMHSA Tribal Listening Session and virtual Tribal Consultation on Behavioral Health and Substance Use Disorder Resources for Native Americans. This is a new program, authorized but not appropriated, under the 2023 Omnibus Funding bill. SAMHSA will initially hold a listening session on August 8 at 3 p.m. ET. The listening session will provide an opportunity for SAMHSA to share information about the statute and engage with Tribal Leaders prior to the consultation.	Meeting date: August 8, 2023 3pm ET https://www.zoomgov.com/meeting/register/vJIsdeutqT4qHSYLUK83WN6aaN9NvIeoPFw
16	Tribal Recovery Summit	SAMHSA	N/A	Published 7/26/2023	Upcoming SAMHSA Event	SAMHSA Office of Tribal Affairs and Policy (OTAP) and Office of Recovery (OR) will convene a Tribal Recovery Summit on August 15 - 16, 2023 at the Radiance Plaza located at 1301 Young Street in Dallas, TX. The purpose of the summit is to share best practices and experiences related to expanding recovery related programs and opportunities within American Indian and Alaska Native (AIAN) communities. The ultimate goal of the Summit is to provide all attendees with valuable insight and information that can help improve recovery related outcomes.	Meeting date August 15 & 16, 2023 1pm ET https://www.zoomgov.com/meeting/register/vJItf-mpqjMsE58Z6vVzKTI4OwmEtV_XLIE
17	Proposed Rule	ACF	88 FR 48409	Published 7/27/2023	Request for Information: Meeting the Child Care Needs in Tribal Nations	The Office of Child Care invites public comment on the rules and regulations of the Tribally administered Child Care and Development Fund (CCDF) program as part of the Administration for Children and Families' (ACF) commitment to creating partnerships with Tribal Nations to identify and implement solutions that transcend traditional program boundaries. As part of that commitment, OCC seeks input on the requirements, regulations, and processes for Tribal Nations that administer CCDF. This Request for Information (RFI) specifically seeks public comment on the following topics of the Tribal child care program—CCDF Funding Policies for Tribes, CCDF Administration, Improving Families' Access to Child Care, and Increasing Child Care Supply in Tribal Communities—but input on any aspect of the Tribally administered CCDF program is welcome. OCC will host a Tribal consultation during the RFI public comment period.	Comments are due January 2, 2024 https://www.federalregister.gov/documents/2023/07/27/2023-15930/request-for-information-meeting-the-child-care-needs-in-tribal-nations?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: August 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	DTLL	IHS	N/A	Published 8/2/2023	Indian Health Service (IHS) Division of Facilities Planning and Construction, Office of Environmental Health and Engineering (DFPC OEHE) will be accepting applications for the Fiscal Year (FY) 2022 and FY 2023 Small Ambulatory Program (SAP) starting on August 7, 2023	The FY 2022 budget includes $25 million and the FY 2023 budget includes $25 million for a total budget of $50 million available for SAP. Fiscal year 2022 and 2023 SAP projects will be awarded up to $3.5 million and all 12 IHS Areas that submit an application will have an opportunity to receive an award. Authorization for the SAP is provided in the Indian Health Care Improvement Act, Title III, Section 306, Public Law (P. L.) 94-437, as amended (25 U.S.C. § 1636). Under the SAP, American Indian and Alaska Native Tribes or Tribal Organizations that are operating an Indian health care facility pursuant to a health care services contract or compact entered into under the Indian Self-Determination and Education Assistance Act, P.L. 93-638, as amended (25 U.S.C. § 5301 et seq.), may competitively apply for funding for the construction, expansion, or modernization of small ambulatory health care facilities.	The deadline for submitting FY 2022 and FY 2023 SAP applications is November 10, 2023. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_080223_SAP.pdf
2	Final Rule	CMS, HHS	88 FR 50956	Published 8/2/2023	Medicare Program; Inpatient Rehabilitation Facility Prospective Payment System for Federal Fiscal Year 2024 and Updates to the IRF Quality Reporting Program	This final rule updates the prospective payment rates for inpatient rehabilitation facilities (IRFs) for Federal fiscal year (FY) 2024. As required by statute, this final rule includes the classification and weighting factors for the IRF prospective payment system's case-mix groups and a description of the methodologies and data used in computing the prospective payment rates for FY 2024. It also rebases and revises the IRF market basket to reflect a 2021 base year. It also confirms when IRF units can become excluded and paid under the IRF PPS. This rule also includes updates for the IRF Quality Reporting Program (QRP).	Effective date: These regulations are effective on October 1, 2023. https://www.federalregister.gov/documents/2023/08/02/2023-16050/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
3	Notice	IHS	88 FR 52186	Published 8/7/2023	Indian Self-Determination and Education Assistance Act Contracts	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 Self-Determination and Education Assistance Act Contracts," Office of Management and Budget (OMB) Control Number 0917–0037. The IHS is requesting OMB to approve an extension for this collection, which expires on August 31, 2023.	Comment Due Date: September 6, 2023. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication. https://www.federalregister.gov/documents/2023/08/07/2023-16706/request-for-public-comment-30-day-information-collection-indian-self-determination-and-education?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
4	Final Rule	CMS	88 FR 53200	Published 8/7/2023	Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities; Updates to the Quality Reporting Program and Value-Based Purchasing Program for Federal Fiscal Year 2024	This final rule updates payment rates, including implementing the second phase of the Patient Driven Payment Model (PDPM) parity adjustment recalibration. This final rule also updates the diagnosis code mappings used under PDPM, the SNF Quality Reporting Program (QRP), and the SNF Value-Based Purchasing (VBP) Program. We are also eliminating the requirement for facilities to actively waive their right to a hearing in writing, treating as a constructive waiver when the facility does not submit a request for hearing.	These regulations are effective October 1, 2023, except for the amendments to §§ 411.15 and 489.20 in instructions 2 and 11, which are effective January 1, 2024. https://www.federalregister.gov/documents/2023/08/07/2023-16249/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

5	Notice and Comment	CMS	88 FR 53489	Published 8/8/2023	Medicare and Medicaid Programs; Application From the Community Health Accreditation Program (CHAP) for Continued Approval of Its Home Health Agency Accreditation Program	This proposed notice acknowledges the receipt of an application from Community Health Accreditation Program (CHAP) for continued recognition as a national accrediting organization for home health agencies (HHAs) that wish to participate in the Medicare or Medicaid programs. The statute requires that within 60 days of receipt of an organization's complete application, the Centers for Medicare & Medicaid Services (CMS) publish a notice that identifies the national accrediting body making the request, describes the nature of the request, and provides at least a 30-day public comment period.	To be assured consideration, comments must be received at one of the addresses provided below, by September 6, 2023. https://www.federalregister.gov/documents/2023/08/08/2023-16917/medicare-and-medicaid-programs-application-from-the-community-health-accreditation-program-chap-for?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
6	DULL	IHS	N/A	Published 8/8/2023	Agency-sponsored Listening Sessions to share information and solicit your input on advance appropriations implementation	During the Listening Sessions, the IHS will share additional information on implementation plans and strategies for advance appropriations, and seek input from Tribal and Urban Indian Organization Leaders. The information discussed in these sessions will be used to prepare public facing Frequently Asked Questions and other helpful materials.	Advance Appropriations Implementation Listening Sessions Thursday, August 17, 2023, 12:00-1:30 p.m., Eastern Time https://ihs-gov.zoomgov.com/j/1610168198 Wednesday, September 6, 2023, 3:00-4:30 p.m., Eastern Time https://ihs-gov.zoomgov.com/j/1608717068 https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_080823.pdf
7	Notice	VA	88 FR 54400	Published 8/10/2023	Solicitation of Nominations for the Appointment to the Advisory Committee on Tribal and Indian Affairs	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs ("the Committee") to represent the following Indian Health Service (IHS) Areas: Bemidji; California; Great Plains; Nashville; Navajo; Tucson.	Nominations for membership on the Committee must be received no later than 5 p.m. EST on August 21, 2023. https://www.federalregister.gov/documents/2023/08/10/2023-17182/solicitation-of-nominations-for-the-appointment-to-the-advisory-committee-on-tribal-and-indian?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list

NCUIH REGULATIONS TRACKER: September 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Notice of Meeting	BIA	88 FR 60483	Published 9/01/2023	Advisory Board of Exceptional Children	The Bureau of Indian Education (BIE) is announcing that the Advisory Board for Exceptional Children will hold a two-day meeting, in-person and online. The purpose of the meeting is to meet the mandates of the Individuals with Disabilities Education Act of 2004 (IDEA) for Indian children with disabilities.	The BIE Advisory Board meeting will be held Thursday, September 21, 2023, from 8:00 a.m. to 4:30 p.m., Eastern Daylight Time (EDT); and continue on Friday, September 22, 2023, from 8:00 a.m. to 4:30 p.m., Eastern Daylight Time (EDT). https://www.federalregister.gov/documents/2023/09/01/2023-18913/advisory-board-of-exceptional-children?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
2	Notice of intent to award supplemental funding	SAMHSA	88 FR 60471	Published 9/01/2023	Fiscal Year (FY) 2023 Notice of Supplemental Funding Opportunity	This notice is to inform the public that the Substance Abuse and Mental Health Services Administration (SAMHSA) is supporting supplemental funding in the scope of the parent award to the 36 Rural Emergency Medical Services Training Grant (REMS) recipients funded under Notice of Funding Opportunity (NOFO) TI–23–011. These recipients have a project end date of September 29, 2024. The supplemental funding is to provide the opioid antagonist medication, naloxone, that can be used to treat respiratory depression in suspected opioid overdose patients, and for the procurement of emergency equipment used to rapidly reverse the effects of opioid overdoses. Recipients may receive up to $49,000 for the purchase of naloxone and up to $49,000 for purchasing equipment, for a total of $98,000 per recipient.	Federal Register :: Fiscal Year (FY) 2023 Notice of Supplemental Funding Opportunity
3	UIO Listening Session	SAMHSA	N/A	Published 9/07/2023	SAMHSA UIO Listening Session Behavioral Health and Substance Use Disorder Resources for Native Americans Program (Section 1201 Program)	Substance Abuse Mental Health Services Administration (SAMHSA) would like to meet with Urban Indian Health Organizations to discuss the Behavioral Health and Substance Use Disorder Resources for Native Americans. This is a new program, authorized but not appropriated, under the 2023 Omnibus Funding bill. This meeting will provide the opportunity for SAMHSA to share information about the statute and engage with UIOs.	Thursday, October 19, 2023 3:00 PM-4:00 PM (UTC-05:00) Eastern Time https://www.samhsa.gov/sites/default/files/tribal-listening-session-framing-paper-july-2023.pdf
4	DTLL	IHS	N/A	Published 9/07/2023	The IHS Director writes to announce the fiscal year 2023 allocation decisions for $700 million in Bipartisan Infrastructure Law funding	The Infrastructure Investment and Jobs Act, or Bipartisan Infrastructure Legislation (BIL), appropriates $700 million in each year from fiscal year (FY) 2022 through FY 2026, for a total of $3.5 billion for the IHS Sanitation Facilities Construction (SFC) program. These resources are available until expended. These funds are one-time, non-recurring, and can only be used for the purposes specified in the statute.	64413-1 DTLL FY 2023 IIJA Funding Allocation Final 8-14-2023 OMB_IHS 9.1.2023 CLEAN.pdf https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_090723.pdf
5	RFI	SAMHSA	88 FR 61608	Published 9/07/2023	Request for Information; Potential Changes to its Evidence-Based Practices Resource Center	SAMHSA is issuing this RFI to gather expert and public feedback to determine how to best satisfy Sec. 7002, subsections (b), (c), or (d) of the 21st Century Cures Act, which are explained below. Input from the public and experts will help SAMHSA identify the optimal ways to identify, evaluate, and disseminate programs and practices, based on their intended audiences, the nature of the evidence supporting the program or practice, and the type of product deemed best suited to the content. SAMHSA seeks input from members of the public on potential changes to its Evidence-Based Practices Resource Center (EBPRC), specifically regarding the possible introduction of three new domains for the EBPRC website (https://www.samhsa.gov/resource-search/ebp). In addition to addressing four general questions about the EBPRC overall, SAMHSA encourages members of the public to comment on several questions pertaining to each of the domains described. SAMHSA believes that public and expert input on the new domains will help make the EBPRC more responsive to the needs of the public and the behavioral health field.	Comments on this notice must be received by October 13th, 2023. https://www.federalregister.gov/documents/2023/09/07/2023-19272/request-for-information-potential-changes-to-its-evidence-based-practices-resource-center
6	DULL	IHS	N/A	Published 9/12/2023	The IHS Director writes to Urban Indian Organization Leaders to share the Fiscal Year 2022 Budget to Support Urban Indian Organizations report. The FY 2022 report details funds distribution by the IHS Office of Urban Indian Health Programs and IHS Area Offices	The FY 2022 Budget Report details funds distribution by the OUIHP and IHS Area Offices. These funds have already been allocated for program administration, contract and grant awards, health information technology, and Urban Indian Health initiatives aimed at improving the quality of care in Urban Indian communities.	DULL: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DUIOLL_091223.pdf https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/Enclosure_DUIOLL_091223.pdf

7	DTLL	HHS	N/A	Published 9/13/2023	HHS OMH Virtual Tribal Listening Session to obtain feedback on the development of the NOFO entitled Healthy People 2030 Leading Indicators Initiative.	The Healthy People 2030 Leading Health Indicators Initiative (LHII) is intended to identify innovative adaptations of evidence based/evidence informed practices that improve health outcomes related to Healthy People 2030 Leading Health Indicators (LHIs) among racial, ethnic, tribal and other disadvantaged communities. Projects funded under the LHII will implement public health improvement models intended to improve health for one to two Healthy People 2030 LHIs in geographic areas targeted by the recipients. OMH also expects the initiative will result in enhanced capacity of public health, community, and government entities to address and reduce health disparities. The forecast for the NOFO is posted on Grants.gov.	Wednesday, October 25, 2023, from 4:00pm – 5:00pm ET To register for the Zoom meeting, go to this link: https://www.zoomgov.com/meeting/register/vJIsdOCqpzkoHxvWrQDHr7H6NT0oSK1tF7U . After registering, you will receive a confirmation email containing information about joining the meeting. In addition to participating in the listening session, tribes also can submit written comments to OMH at Info@minorityhealth.hhs.gov by Tuesday, October 31, 2023 https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/5df9ce1b-df7f-4fd4-b39d-832584174a23.pdf
8	DTLL	HHS	N/A	Published 9/14/2023	HHS Virtual Tribal Consultation on the regulations for Section 504 of the Rehabilitation Act.	U.S. Department of Health and Human Services Office for Civil Rights (OCR) issued a Notice of Proposed Rulemaking (NPRM) on September 14, 2023. This proposed rule revises implementing regulations for Section 504 of the Rehabilitation Act which prohibits discrimination against otherwise qualified individuals on the basis of disability in programs and activities that receive Federal financial assistance or are conducted by a Federal agency, 29 U.S.C. § 794. The NPRM proposes robust civil rights protections on the basis of disability. In addition, the proposed rule incorporates changes needed to reflect amendments to the Rehabilitation Act, enactment of the Americans with Disabilities Act, and significant case law. The proposed rule can be accessed by searching for RIN number 0945-AA15 at www.federalregister.gov.	HHS will hold a Virtual Tribal Consultation on the proposed rule on October 6, 2023 from 2 p.m. to 4 p.m., ET. HHS understands the importance of hearing from Tribes on national and regional issues, as well as Tribe-specific concerns. You can register for the Tribal Consultation on Section 504 Rulemaking at the following link: https://www.zoomgov.com/meeting/register/vJIsceGqpzsjEwi5AQ8pvdIholm7Xp4hwLs Comments are due on or before November 13, 2023. Please note that your comments will be made public https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/e7c019a8-70ad-4a5f-afb4-77b404948977.pdf
9	Notice	IHS	88 FR 64915	Published 9/20/2023	Request for Public Comment: 30-Day Information Collection: Indian Health Service Forms To Implement the Privacy Rule	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, "IHS Forms to Implement the Privacy Rule" Office of Management and Budget (OMB) Control Number 0917–0030. This notice announces the IHS intent to submit the collection, which expires September 30, 2023, to OMB for approval of an extension with modifications, and to solicit comments on specific aspects of the information collection.	Comment Due Date: October 20, 2023. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication. https://www.federalregister.gov/documents/2023/09/20/2023-20329/request-for-public-comment-30-day-information-collection-indian-health-service-forms-to-implement?utm_medium=email&utm_campaign=subscription+mailing+list&utm_source=federalregister.gov
10	Final Rule	CMS	88 FR 65230	Published 9/21/2023	Streamlining Medicaid; Medicare Savings Program Eligibility Determination and Enrollment	This final rule simplifies processes for eligible individuals to enroll and retain eligibility in the Medicare Savings Programs (MSPs). This final rule better aligns enrollment into the MSPs with requirements and processes for other public programs. Finally, this final rule reduces the complexity of applications and reenrollment for eligible individuals.	These regulations are effective November 17, 2023. Throughout, however, we identify separate compliance dates that vary by provision, thereby giving States additional time to implement the provisions of this final rule.
11	Notice	VA	88 FR 65226	Published 9/21/2023	Solicitation of Nominations for the Appointment to the Advisory Committee on Tribal and Indian Affairs	The Department of Veterans Affairs (VA), Office of Public and Intergovernmental Affairs (OPIA), Office of Tribal Government Relations (OTGR), is seeking nominations of qualified candidates to be considered for appointment as a member of the Advisory Committee on Tribal and Indian Affairs ("the Committee") to represent the following Indian Health Service (IHS) Areas: California; Nashville.	Nominations for membership on the Committee must be received no later than 5:00 p.m. EST on October 20, 2023. https://www.federalregister.gov/documents/2023/09/21/2023-20475/solicitation-of-nominations-for-the-appointment-to-the-advisory-committee-on-tribal-and-indian?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
12	Final Rule	ACF	88 FR 66700	Published 09/28/2023	Separate Licensing or Approval Standards for Relative or Kinship Foster Family Homes	This rule finalizes revisions to the definition of "foster family home" proposed on February 14, 2023 (here after referred to as the February 2023 NPRM). Title IV–E agencies may choose to claim title IV–E federal financial participation (FFP) for the cost of foster care maintenance payments (FCMP) on behalf of an otherwise eligible child who is placed in a relative or kinship licensed or approved foster family home when the agency uses different licensing or approval standards for relative or kinship foster family homes and non-relative/non-kinship foster family homes. In addition, the final rule requires title IV–E agencies to periodically review the amount of FCMPs to also ensure that the agency provides a licensed or approved relative or kinship foster family home the same amount of FCMP that would have been made if the child was placed in a non-related/non-kinship foster family home.	This rule is effective on November 27, 2023. https://www.federalregister.gov/documents/2023/09/28/2023-21081/separate-licensing-or-approval-standards-for-relative-or-kinship-foster-family-homes
13	Notice of Proposed Rulemaking	OFA, ACF, HHS	88 FR 67697	Published 10/2/2023	Strengthening Temporary Assistance for Needy Families (TANF) as a Safety Net and Work Program	ACF proposes to amend the Temporary Assistance for Needy Families (TANF) program regulations to strengthen the safety net and reduce administrative burden. This NPRM encompasses a package of reforms to ensure TANF programs are designed and funds are used in accordance with the statute. In addition, the package includes provisions that are more technical in nature and are designed to reduce administrative burden and increase program effectiveness.	In order to be considered, the Department must receive written comments on this NPRM on or before December 1, 2023. https://www.federalregister.gov/documents/2023/10/02/2023-21169/strengthening-temporary-assistance-for-needy-families-tanf-as-a-safety-net-and-work-program?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email

14	Request for Comments	CMCS	N/A	Published 09/2023	Request for Comments for Assessing Compliance with Mental Health Parity and Addiction Equity in Medicaid and CHIP	In light of recent updates to the underlying Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) statutory provisions and proposed regulatory changes for private sector plans and issuers as well as concerns raised by various stakeholders including MH and SUD treatment advocates regarding barriers to accessing treatment and by state Medicaid and CHIP agencies regarding administrative burden of the current CMS parity compliance processes, CMS is requesting public comment on 11 questions presented in the request for comments. Questions concern document review when examining compliance with parity requirements; processes used to determine if there is parity; key issues to look for that may indicate parity compliance issues; review prioritization and criteria; measures, data points, or other information that could help identify parity violations; how data should be collected; potential follow-up protocols and corrective actions when there is a potential parity violation; additional measures to assess compliance; whether mental health conditions or substance use disorders more prevalent among enrollees and the barriers to assessing treatment; and, mental health conditions or substance use disorders or types of treatments that are at risk of not being covered in compliance with parity requirements.	Comments must be submitted to the following email address by December 4th, 2023, to receive full consideration: MedicaidandCHIP-Parity@cms.hhs.gov. https://www.medicaid.gov/sites/default/files/2023-09/cmcs-mental-health-parity-092023.pdf
15	Notice	HRSA	N/A	Published 9/22/2023	Notice of Funding Opportunity for Healthy Start Initiative: Eliminating Disparitities in Perinatal Health	This notice announces the opportunity to apply for funding under the Healthy Start Initiative: Eliminating Disparities in Perinatal Health (Healthy Start or HS) Program. The purpose of HS is to improve health outcomes before, during, and after pregnancy and reduce the well-documented racial/ethnic differences in rates of infant death and adverse perinatal outcomes. HS is intended to support projects in communities and populations experiencing the greatest disparities in maternal and infant health outcomes. HS has two focus areas: 1) providing direct and enabling services (for example, screening and referrals, case management and care coordination, health and parenting education, and linkage to clinical care) to enrolled HS participants; and 2) convening Community Consortia (formerly known as Community Action Networks or "CANs") comprised of diverse, multi-sector partners to advise and inform HS activities as well as to develop and implement plans to improve perinatal outcomes within the selected project area. HS continues to have an increased emphasis on addressing social determinants of health, such as access to adequate food, housing, and transportation, to improve disparities in maternal and infant health outcomes. Based on stakeholder feedback, this FY 2024 HS competition also provides recipients with increased flexibility to tailor interventions to the unique needs of their community and/or target population. The goals of HS are to: 1) Continue reducing infant mortality rates in the United States, and 2) Decrease disparities in infant mortality and poor perinatal health outcomes in areas where those rates are high.	Application closing date is December 15, 2023. The estimated total program funding is $113,645,000. https://www.grants.gov/search-results-detail/349416

NCUIH REGULATIONS TRACKER: October 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Notice of Proposed Rulemaking	OFA, ACF, HHS	88 FR 67697	Published 10/2/2023	Strengthening Temporary Assistance for Needy Families (TANF) as a Safety Net and Work Program	ACF proposes to amend the Temporary Assistance for Needy Families (TANF) program regulations to strengthen the safety net and reduce administrative burden. This NPRM encompasses a package of reforms to ensure TANF programs are designed and funds are used in accordance with the statute. In addition, the package includes provisions that are more technical in nature and are designed to reduce administrative burden and increase program effectiveness.	In order to be considered, the Department must receive written comments on this NPRM on or before December 1, 2023. https://www.federalregister.gov/documents/2023/10/02/2023-21169/strengthening-temporary-assistance-for-needy-families-tanf-as-a-safety-net-and-work-program?utm_campaign=subscription+mailing+list&utm_source=federalregister.gov&utm_medium=email
2	DULL	IHS	N/A	Published 10/01/2023	The IHS Director writes to Tribal Leaders and Urban Indian Organization Leaders to share information regarding the current status of fiscal year 2024 appropriations for the Indian Health Service.	the "Continuing Appropriations Act, 2024 and Other Extensions Act" was enacted and funds the Federal Government through November 17. The FY 2024 Continuing Resolution does not affect IHS advance appropriations that are already appropriated for a full fiscal year, which include the same funding level as FY 2023 for almost all programs in the IHS Services and Facilities accounts. The FY 2024 advance appropriations and carryover funds from previously appropriated funds, including COVID supplemental funds, are not limited to the pro□rata percentage applied by the continuing resolution, and the IHS has access to this full funding amount as of October 1. In the coming days, the IHS will begin distributing FY 2024 advance appropriations to IHS programs, Tribal Health Programs, and Urban Indian Organizations.	You can find additional information on IHS advance appropriations at the link that follows: IHS Blog: IHS Provides an Update on Advance Appropriations Implementation https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_100123.pdf
3	Notice of Application	IHS	88 FR 68630	Published 10/4/2023	Special Diabetes Program for Indians Application	The Indian Health Service (IHS) is accepting applications for the Special Diabetes Program for Indians (SDPI—formerly Community-Directed SDPI).	Application Deadline Date: November 29, 2023. Earliest Anticipated Start Date: January 1, 2024. https://www.federalregister.gov/documents/2023/10/04/2023-22057/special-diabetes-program-for-indians?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
4	Notice of Tribal Consultation	SAMHSA, HHS	88 FR 68642	Published 10/4/2023	Tribal Opioid Response (TOR) Consultation	SAMHSA announces a Tribal Consultation Session on the Tribal Opioid Response (TOR) grant funding methodology. SAMHSA will host American Indian and Alaska Native (AI/AN) Federally Recognized Tribes for a virtual Tribal consultation session.	The Tribal consultation will be held on November 9th, at 2 p.m. ET. SAMHSA will accept written Tribal testimony until 5 p.m., November 23rd, 2023. https://www.federalregister.gov/documents/2023/10/04/2023-21967/tribal-opioid-response-tor-consultation?utm_source=federalregister.gov&utm_medium=email&utm_campaign=subscription+mailing+list
5	Notice of Public Virtual Meeting	Census	88 FR 71333	Published 10/16/2023	National Advisory Committee	The Census Bureau is giving notice of a virtual meeting of the National Advisory Committee on Racial, Ethnic and Other Populations (NAC). The Committee will address policy, research, and technical issues relating to a full range of Census Bureau programs and activities, including the decennial census, demographic and economic statistical programs, field operations, and information technology. Last minute changes to the schedule are possible, which could prevent giving advance public notice of schedule adjustments.	The virtual meeting will be held on: Thursday, November 16, 2023, from 8:30 a.m. to 5 p.m. ET, and Friday, November 17, 2023, from 8:30 a.m. to 2:30 p.m. ET. A brief period will be set aside during the virtual meeting to read public comments received by noon ET, November 16, 2023. https://www.federalregister.gov/documents/2023/10/16/2023-22715/national-advisory-committee?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
6	Solicitation of Written Comments	HHS	88 FR 71580	Published 10/17/2023	Writen Comments Regarding Health People 2030	The U.S. Department of Health and Human Services (HHS) solicits written comments from the public on the current Healthy People 2030 objectives, and written comments from the public proposing additional new core, developmental, or research objectives or topics to be included in Healthy People 2030. Public comment informed the development of Healthy People 2030. HHS will provide opportunities for public input periodically throughout the decade to ensure Healthy People 2030 reflects current public health priorities and public input. The updated set of Healthy People 2030 objectives and topics will be incorporated on https://health.gov/healthypeople. This updated set will reflect further review and deliberation by Federal Healthy People topic area workgroups, the Federal Interagency Workgroup on Healthy People 2030, and other Federal subject matter experts.	Written comments will be accepted through 11:59 p.m. ET, November 20, 2023. https://www.federalregister.gov/documents/2023/10/17/2023-22805/announcement-of-solicitation-of-written-comments-on-healthy-people-2030-objectives?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
7	Notice of Tribal Consultation and request for comments	Patent and Trademark Office	88 FR 73000	Published 10/24/2023	Formal Tribal Consultation on WIPO IGC Negotiations	The United States Patent and Trademark Office (USPTO), Department of Commerce, announces a formal Tribal Consultation, and requests written comments on issues involving genetic resources (GR), traditional knowledge (TK), and traditional cultural expressions (TCEs). These topics are being discussed at the World Intellectual Property Organization (WIPO). Specifically, the WIPO Intergovernmental Committee on Intellectual Property and Genetic Resources, Traditional Knowledge, and Folklore (traditional cultural expressions) (WIPO IGC) is undertaking negotiations regarding how best to protect GR, TK, and TCEs of Indigenous Peoples.	Webinar Dates: The webinar for federally recognized Tribal Nations and their proxies will be held on Tuesday, January 16, 2024, from 3 to 5 p.m. ET and Wednesday, January 17, 2024 from 3 to 5 p.m. ET. The webinar for state recognized Tribes and other Tribal members, Native Hawaiians and their representatives, and inter-tribal organizations, will be held on Friday, January 19, 2024, from 3 to 5 p.m. ET and Tuesday, January 23, 2024, from 3 to 5 p.m. ET. Please register in advance to participate in one of these webinars at: https://cvent.me/bZRP3L. Comment Deadline: Written comments pursuant to the questions in this Notice must be received by Friday, February 23, 2024. https://www.federalregister.gov/documents/2023/10/24/2023-23386/formal-tribal-consultation-on-wipo-igc-negotiations
8	Notice and request for comments. Request for revision to a collection.	IHS	88 FR 74499	Published 10/31/2023	Request for Public Comment: 30-Day Information Collection: Application for Participation in the IHS Scholarship Program	In compliance the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) invites the general public to comment on the information collection titled, "Application for Participation in the IHS Scholarship Program," Office of Management and Budget (OMB) Control No. 0917–0006. IHS is requesting OMB to approve an extension for this collection, which expires on October 31, 2023.	Comment Due Date: November 30, 2023. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication. https://www.federalregister.gov/documents/2023/10/31/2023-23996/request-for-public-comment-30-day-information-collection-application-for-participation-in-the-ihs?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
9	Notice	IHS	N/A	Published 10/2/2023	Notice of Funding Opportunity for Special Diabetes Program for Indians	The purpose of this program is to provide diabetes treatment and/or prevention activities and/or services (also referred to as "activities/services") for AI/AN communities. Recipients will implement one Special Diabetes Program for Indians (SDPI) Diabetes Best Practice (also referred to as "Best Practice") and report data on the Best Practice's Required Key Measure (RKM). Recipients may also implement other activities/services based on diabetes-related community needs and develop an evaluation plan. Activities/services will be aimed at reducing the risk of diabetes in at-risk individuals, providing high quality care to those with diagnosed diabetes, and/or reducing the complications of diabetes.	Current closing date for applications is Novembeer 29, 2023. The estimated total program funding is $10,000,000. The award ceiling is $600,000. The award floor is $25,000. https://www.grants.gov/search-results-detail/350227

NCUIH REGULATIONS TRACKER: November 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Request for Nominations	Census Bureau	88 FR 77076	Published 11/8/2023	Request for Nominations of Members To Serve on the National Advisory Committee on Racial, Ethnic, and Other Populations	The Director of the Census Bureau (Director) is seeking nominations for the National Advisory Committee on Racial, Ethnic and Other Populations (NAC or Committee). The purpose of the NAC is to provide advice to the Director on the full range of economic, housing, demographic, socioeconomic, linguistic, technological, methodological, geographic, behaviorial and operational variables affecting the cost, accuracy and implementation of Census Bureau programs and surveys, including the decennial census. The Director has determined that the work of the NAC is in the public interest and relevant to the duties of the Census Bureau. Therefore, the Director is seeking nominations to fill vacancies on the NAC.	Additional information concerning the NAC can be fou website at: https://www.census.gov/about/cac/nac.htr Nominations must be received on or before Wednesda Nominations must contain a completed resume. The C nominations received after the deadline for considerat vacancies occur. Please submit nominations via email to: census.national.advisory.committee@census.gov (subje Nominations"). https://www.federalregister.gov/documents/2023/11/08 nominations-of-members-to-serve-on-the-national-advi racial-ethnic-and?utm_campaign=subscription+mailing+list&utm_me ce=federalregister.gov
2	Final Rule	VA	88 FR 77514	Published 11/13/2023	VA Pilot Program on Graduate Medical Education and Residency	The Department of Veterans Affairs (VA) adopts as final, with changes, a proposed rule amending its medical regulations to establish a new pilot program on graduate medical education and residency, as required by section 403 of the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Internal Systems and Strengthening Integrated Outside Network Act of 2018.	https://www.federalregister.gov/documents/2023/11/13 program-on-graduate-medical-education-and-residency#:~:text=This%20section%20and%20%C2%A7%c ew%20residency%20programs%20in
3	Notice and Request for Comments	DOI	88 FR 78061	Published 11/14/2023	Request for Comments on the Departmenet of Interior's Environmental Justic Strateegic Plan Draft, Vision, Goals and Objectives	Pursuant to the Executive Order (E.O.) 14096, Revitalizing our Nation's Commitment to Environmental Justice for All, the Department of the Interior (Department) is updating its Environmental Justice Strategic Plan and soliciting feedback on its draft environmental justice vision, goals, and objectives (included in Supplemental Information). The Department is also soliciting feedback on priority actions and performance metrics the Department should evaluate to advance the draft environmental justice vision, goals, and objectives.	There will be three public listening sessions with opportu feedback: November 30, 2023, 3-4:30 PM ET (Virtual) https://bit.ly/generalpublicsession1; November 30,2023, https://bit.ly/generalpublicsession2; Deceember 1, 2023 https://bit.ly/generalpublicsession3. Written comments must be postmarked by December 1 https://www.federalregister.gov/documents/2023/11/14 24937/environmental-justice-strategic-plan-draft-vision-a objectives?utm_campaign=subscription+mailing+list&u m_source=federalregister.gov
4	DTLL/DULL	HHS	N/A	Published 11/14/2023	Update on Suspected Behavioral Health Treatment Center Fraudulent Activities in Arizona That Have Impacted Many Amerian Indian and Alaska Native Families and Communities	Many residents displaced by the closure of suspected fraudulent facilities have reported that they were seeking shelter, food, and other human needs, and not SUD services. The IHS, Tribal leaders, Urban Indian Health Program leaders, the AHCCCS, and the State of Arizona have established mechanisms to help affected people receive care, transportation, and other needed services.	https://image.connect.hhs.gov/lib/fe4515707564047b74 1931-47dd-8845-a6de3c5ecc1c.pdf
5	Notice	SAMHSA	N/A	Published 11/15/2023	Grant Review Opportunities	SAMHSA's three Centers are always looking for qualified grant peer reviewers who can evaluate applications for discretionary grants.	For SAMHSA to consider you as a peer grant reviewer, y following documents to Reviewer@samhsa.hhs.gov: Co Contact Information form; and, A current copy of your r https://www.samhsa.gov/grants/review/grant-review-op
6	DTLL	IHS	N/A	Published 11/16/2023	Tribal Consultation to seek guidance and recommendations as we work to develop a spend plan for the third year of funding for the Bipartisan Infrastructure Law (BIL), also known as the Infrastructure Investment and Jobs Act	The BIL (Pub. L. No. 117-58 (November 15, 2021)), appropriated $3.5 billion to the Indian Health Service (IHS), with $700 million made available over 5 years, beginning in fiscal year 2022	Tribal Consultation on the BIL allocation method on Mo 2023 Please register in advance for this meeting: https://ihs gov.zoomgov.com/meeting/register/vJIsfuC YSfI8Zs The deadline to provide written comments for this Tribal Consultation is 2024.
7	Notice	SAMHSA	N/A	Published 11/16/2023	Notice of Funding Opportunity for Tribal Behavioral Health	The purpose of this program is to prevent and reduce suicidal behavior and substance use/misuse, reduce the impact of trauma, and promote mental health among American Indian/Alaska Native (AI/AN) youth, up to and including age 24, by building a healthy network of systems, services, and partnerships that impact youth. SAMHSA expects this program will be a model for community change that integrates a community's culture, resources, and readiness to address suicide prevention and substance use/misuse among AI/AN youth.	Eligibility is limited to federally recognized American Ind (AI/AN) tribes, tribal organizations, Urban Indian Organiz tribes or tribal organizations. The application due date is Wednesday, March 6, 2024. The anticipated total available funding is $13,051,443. T of awards is 52. the anticipated award amount is $250,0 project is up to 5 yeaers. https://www.samhsa.gov/grants/grant-announcements
8	DTLL	IHS	N/A	Published 11/27/2023	IHS Director's Advisory Workgroup on Tribal Consultation to Initaite Tribal Consultation on definition of Indian Tribe to use in the updated IHS Tribal Consultation policy.	On July 26, the IHS initiated Tribal Consultation on the draft Consultation Policy. Subsequently, on August 11, an additional Tribal Leader letter was provided with a summary document of key items that the Consultation Workgroup addressed after reviewing comments received from the first Tribal Consultation on April 27, 2021. There was consensus by the Consultation Workgroup to ensure the updated IHS Consultation Policy aligns as closely as possible with the Department of Health and Human Services (HHS) Tribal Consultation Policy (TCP) that was finalized on September 12 and Executive Order 13175, "Consultation and Coordination with Indian Tribal Governments." After reviewing comments received from the first Tribal Consultation, and aligning the draft Consultation Policy with the final HHS TCP, the Consultation Workgroup reconvened to walk through the final draft. Consultation Workgroup members requested two weeks to go back and share the latest draft with their respective Tribes. At the conclusion of that two-week period, the Consultation Workgroup reconvened to determine any remaining issues and discussed how to proceed. A final consensus was not reached on one issue – the definition of Indian Tribe. As Co-Chairs of the Workgroup, we believe the best way to resolve this issue is to initiate additional Tribal Consultation. Option #1: List Act Definition (25 U.S.C. § 5130): "Indian tribe" means any Indian or Alaska Native Tribe, band, nation, pueblo, village or community that the Secretary of the Interior acknowledges to exist as an Indian Tribe. Option #2: ISDEAA Definition (25 U.S.C. § 5304(e)): "Indian tribe" or "Indian Tribe" means any Indian Tribe, band, nation, or other organized group or community, including any Alaska Native village or regional or village corporation as defined in or established pursuant to the Alaska Native Claims Settlement Act (85 Stat. 688) [43 U.S.C. 1601 et seq.], which is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians.	TRIBAL CONSULTATION SESSIONS: Please make plans to j of the following virtual Tribal Consultation sessions sche your input and recommendations on the definition of In be included in the updated Consultation Policy. Session Tuesday, January 9, 2024, from 3:00 p.m. – 4:30 p.m., ET 2024, from 3:00 p.m. – 4:30 p.m., ET Wednesday, January – 5:00 p.m., ET Thursday, January 18, 2024, from 1:00 p.m ZOOM REGISTATION: https://ihs-gov.zoomgov.com/meeting/register/vJIsc- yurDgqEj7aTuznYsSPNR0NDE81C2A WRITTEN COMMENTS and RECOMMENDATIONS: Please comments and recommendations on which definition of Indian Tri updated Consultation Policy by Friday, February 20, 2024 https://www.ihs.gov/sites/newsroom/themes/responsive ocuments/2023_Letters/DTLL_112723.pdf
9	DULL	IHS	N/A	Published 11/28/2023	Announcement of the list of eligible degree programs for the Indian Health Service Scholarship Program (IHSSP) in Academic Year (AY) 2024-2025.	Beginning on December 15, 2023, interested applicants will be able to apply online at https://www.ihs.gov/scholarship/apply/. Please direct them to the IHS Scholarship web site for further information. A complete list of eligible degree programs for AY 2024-2025 is enclosed.	The IHS Director writes to Tribal Leaders and Urban Indian to announce the eligible degree programs for the India Scholarship Program in Academic Year 2024-2025.
10	Notice	ACF	88 FR 83543	Published 11/30/2023	Proposed Information Collection Activity; Tribal Early Childhood Facilities Combined Application Guide (New Collection)	The Office of Early Childhood Development (ECD), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting Office of Management and Budget (OMB) approval of the Tribal Early Childhood Facilities Combined Application Guide for joint applications for construction and major renovation projects using both Head Start and Child Care and Development Fund (CCDF) resources.	Comments due within 60 days of publication. https://www.federalregister.gov/documents/2023/11/30 information-collection-activity-tribal-early-childhood-fa application?utm_campaign=subscription+mailing+list& m_source=federalregister.gov

NCUIH REGULATIONS TRACKER: December 2023

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Notice	SAMHSA	88 FR 83955	Published 12/1/2023	Agency Information Collection Activities: Submission for OMB Review; Comment Request	The Substance Abuse and Mental Health Services Administration (SAMHSA) is seeking Office of Management and Budget (OMB) Emergency approval for new information collection activities for monitoring all of SAMHSA's 988 Cooperative Agreements. The collection of this information is critical to successfully oversee operational response and quality of service through the 988 Suicide and Crisis Lifeline to ensure connections to care for individuals in suicidal crisis or emotional distress contacting in for 988 phone, chat, and text support for connecting local, state/territory and national outcomes and monitoring contractual obligations for current and future 988 grant programs. Much of this information is already embedded in the current 988 Suicide and Crisis Lifeline network administrator grants, the 988 state and territory grant program, or the 988 Tribal Response grant program.	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. https://www.federalregister.gov/documents/2023/12/01/2023-26436/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
2	Notice	USDA	88 FR 84120	Published 12/4/2023	Submission for OMB Review; Comment Request	The Indigenous Animals Harvesting and Meat Processing Grant Program was authorized by Section 1001 of the American Rescue Plan (ARP) Act of 2021 (Pub. L. 117–2), which assists U.S. states and territories to build resilience in the middle of the supply chain and strengthen local and regional food systems. The information provided will be used to determine applicant and project eligibility and to ensure that projects meet program goals and are for authorized purposes. Applicants that receive grant awards are also required to execute a Financial Assistance Agreement with the Agency and provide financial and project performance reports to the Agency to ensure that projects are being completed in a timely manner.	Comments regarding this information collection received by January 3, 2024 will be considered. Written comments and recommendations for the proposed information collection should be submitted within 30 days of the publication of this notice on the following website www.reginfo.gov/public/do/PRAMain. https://www.federalregister.gov/documents/2023/12/04/2023-26519/submission-for-omb-review-comment-request?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
3	DTLL/DULL	VA, HHS	N/A	Published 12/6/2023	VA and IHS Reimbursement Agreement for Health Care and Related Services Provided by the IHS to Eligible AI/AN Veterans	This agreement replaces and expands upon the prior agreement between our agencies, which was originally executed on December 5, 2012. Under the new agreement, VA will now reimburse the IHS for purchased/referred care and contracted travel for AI/AN Veterans. The VA will also continue to reimburse the IHS for direct care provided to AI/AN Veterans.	As the IHS and VA move forward with the implementation of the Agreement, Tribal Leaders are encouraged to send any written comments by January 23, 2024. You can e-mail your comments to: consultation@ihs.gov and tribalgovernmentconsultation@va.gov, adding REVISED IHS-VA REIMBURSEMENT AGREEMENT as the subject line. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_120723.pdf Enclosure: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/Enclosure_DTLL_DUIOLL_120723.pdf

4	Executive Order	White House	N/A	Published 12/06/2023	President Biden Signs Executive Order on Reforming Federal Funding and Support for Tribal Nations to Better Embrace our Trust Responsibilities and Promote the Next Era of Tribal Self Determination	This Executive Order demonstrates the Biden-Harris Administration's respect for Tribal sovereignty, and commitment to ushering in the next era of Tribal self-determination by ensuring that Tribal Nations have greater autonomy over how they invest federal funding.	https://www.whitehouse.gov/briefing-room/presidential-actions/2023/12/06/executive-order-on-reforming-federal-funding-and-support-for-tribal-nations-to-better-embrace-our-trust-responsibilities-and-promote-the-next-era-of-tribal-self-determination/
5	Notice	DHS	88 FR 87445	Published 12/18/2023	Request for Information Regarding Department of Homeland Security Activities and Advancing Environmental Justice	With this Request for information (RFI), DHS is seeking public comment and feedback on how environmental justice is considered Department-wide, how it can provide opportunities for meaningful engagement in decision-making, and what to include in the next DHS Environmental Justice Strategy. The public is encouraged to provide input in response to the questions in this RFI and to share barriers and challenges, successes, suggestions, and ideas. DHS will use this information to help improve and advance the Department's environmental justice program, conduct meaningful engagement, and address environmental justice challenges that communities are facing.	Comments are requested on or before 60 days after publication of this RFI and must be received no later than 11:59 p.m. eastern time (ET) on February 16, 2024. Email comments to DHSEnvironmentalJustice@hq.dhs.gov. Include Environmental Justice RFI in the message's subject line. Email submissions should be machine-readable (i.e., in PDF or Microsoft Word format) and not copyright-protected. https://www.federalregister.gov/documents/2023/12/18/2023-27628/request-for-information-regarding-department-of-homeland-security-activities-and-advancing?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov

NCUIH REGULATIONS TRACKER: January 2024

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Notice	HRSA	89 FR 82	Published 1/2/2024	Lists of Designated Primary Medical Care, Mental Health, and Dental Health Professional Shortage Areas	This is the second of two planned notices informing the public of the availability of the complete lists of all geographic areas, population groups, and facilities designated as primary medical care, dental health, and mental health professional shortage areas (HPSA). This notice includes the lists of HPSAs in a designated status as of December 2, 2023.	Complete lists of HPSAs designated as of December 2, 2023, are available on the website at https://data.hrsa.gov/tools/health-workforce/shortage-areas/frn. https://www.federalregister.gov/documents/2024/01/02/2023-28844/lists-of-designated-primary-medical-care-mental-health-and-dental-health-professional-shortage-areas?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
2	Proposed Rule	IHS	89 FR 896	Published 1/8/2024	Removal of Outdated Regulations	The Indian Health Service (IHS) of the Department of Health and Human Services (HHS or "the Department") is issuing this Notice of Proposed Rulemaking (NPRM) proposing the removal of regulations appearing in the Code of Federal Regulations (CFR). These outdated regulations do not align with the current statutory text.	Comments due on or before March 8, 2024. https://www.federalregister.gov/documents/2024/01/08/2023-28948/removal-of-outdated-regulations?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
3	Notice	BIA	89 FR 944	Published 1/8/2024	Indian Entities Recognized by and Eligible To Receive Services From the United States Bureau of Indian Affairs	This notice publishes the current list of 574 Tribal entities recognized by and eligible for funding and services from the Bureau of Indian Affairs (BIA) by virtue of their status as Indian Tribes.	https://www.federalregister.gov/documents/2024/01/08/2024-00109/indian-entities-recognized-by-and-eligible-to-receive-services-from-the-united-states-bureau-of?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
4	DTLL	HHS	N/A	Published 1/10/2024	HHS Tribal Data Policy	HHS is seeking comments and recommendations on the agency's Draft HHS Tribal and Tribal Epidemiology Center Data Access Policy.	Virtual Tribal Consultation: February 6, 2024, 3-5 PM Eastern Zoom registration: https://www.zoomgov.com/meeting/register/vJlsc-iurzorE5MWGjSDXfNG0spDpVXEm9o#/registration Written comments are requested by March 5, 2024. DTLL: https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/48e23919-9b7b-49bc-a991-a888fdcc4968.pdf Draft Policy: https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/1f0d3948-d9c0-40bf-8f95-e7ad86bec5eb.pdf
5	Proposed Rule	HUD	89 FR 1746	Published 1/10/2024	Submission for Community Development Block Grant Program, Consolidated Plans, and Indian Community Development Block Grant Program Changes	HUD is proposing to revise the Community Development Block Grant (CDBG) and related Section 108 loan guarantee program regulations to make it easier for recipients to promote economic development and recovery in low- and moderate-income communities and support investments in underserved areas. This proposed rule also would revise provisions related to Consolidated Plan and citizen participation requirements for the CDBG program and institute quarterly reporting to improve performance with respect to timeliness. HUD is also proposing to make certain corresponding changes to the Indian Community Development Block Grant (ICDBG) program regulations to align the ICDBG program with the revisions being made to the CDBG program regulations.	Comments are due by March 11, 2024. https://www.federalregister.gov/documents/2024/01/10/2024-00039/submission-for-community-development-block-grant-program-consolidated-plans-and-indian-community?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
6	DTLL	White House	N/A	Published 1/11/2024	TRIBAL CONSULTATION ANNOUNCEMENT ON EXECUTIVE ORDER 14112:Reforming Federal Funding and Support for Tribal Nations To Better Embrace Our Trust Responsibilities and Promote the Next Era of Tribal Self-Determination.	During this engagement session, Biden-Harris Administration leadership and staff from the White House and Federal Departments will discuss the substance and implementation process the Administration is planning for EO 14112. Tribal leaders are invited to ask questions, provide comments, and share their perspectives on how EO 14112 can best meet the needs of their Tribal Nations.	The virtual engagement session with Biden-Harris Administration leadership will be on Monday, January 22, 2024, from 3:30pm – 5:30pm ET, to discuss Executive Order 14112 on Reforming Federal Funding and Support for Tribal Nations to Better Embrace Our Trust Responsibilities and Promote the Next Era of Tribal Self-Determination. The Executive Order (EO) demonstrates the Biden-Harris Administration's respect for Tribal https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:57cca82f-e1fd-30ce-a427-ef63187e30fb

7	DULL	IHS	N/A	Published 1/12/2024	The IHS Director writes to initiate Urban Confer on the proposed supplemental funding request to support fentanyl and opioid programs	Urban Confer seeking guidance and recommendations on the potential implementation of $250 million included in the Administration's recent supplemental request to support funding for fentanyl and opioid abuse prevention, treatment, recovery services, and harm reduction interventions. Congress has not taken action on the enactment of this potential funding. If enacted, this potential funding would be used to combat the ongoing fentanyl and opioid crises in American Indian and Alaska Native communities. Your input is essential to inform Agency planning related to potential allocation methodologies in anticipation of potential action by Congress on the supplemental funding.	Virtual Urban Confer on the proposed supplemental funding request on Friday, February 2, 2024. The comment submission deadline for this Urban Confer is Monday March 4, 2024. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DUIOLL_011224.pdf
8	DTLL/DULL	IHS	N/A	Published 1/16/2024	The IHS Director writes to announce the appointment of the new IHS Deputy Director for Quality Healthcare and Enterprise Risk Management.	IHS has appointed Ms. Michelle Boylan, RN, MA, MBA, CPHQ, as the new Deputy Director for Quality Healthcare and Enterprise Risk Management at the Indian Health Service (IHS). Prior to joining the IHS, Ms. Boylan served as the quality management officer for the Veterans Affairs Heartland Network – VISN 15, and as the lead quality management officer at the Veterans Health Administration. In her new position at the IHS, Ms. Boylan is responsible for strengthening the agency's ongoing efforts to ensure the delivery of consistent, high-quality health care at federally operated facilities serving American Indians and Alaska Natives.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_20240116.pdf

NCUIH REGULATIONS TRACKER: February 2024

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Final Rule	SAMHSA	89 FR 7528	Published 2/2/2024	Medications for the Treatment of Opioid Use Disorder	This final rule modifies and updates certain provisions of regulations related to Opioid Treatment Program (OTP) accreditation, certification, and standards for the treatment of Opioid Use Disorder (OUD) with Medications for Opioid Use Disorder (MOUD) in OTPs. This includes making flexibilities put forth during the COVID–19 Public Health Emergency (PHE) permanent, as well as expanding access to care and evidence-based treatment for OUD. The final rule also removes all language and rules pertaining to the Drug Addiction and Treatment Act (DATA) Waiver from the regulations pursuant to the "Consolidated Appropriations Act, 2023".	The effective date of this final rule is April 2, 2024, and the compliance date is October 2, 2024. https://www.federalregister.gov/documents/2024/02/02/2024-01693/medications-for-the-treatment-of-opioid-use-disorder?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
2	Final Rule	ACL	87 FR 11566	Published 2/14/2024	Older Americans Act: Grants to State and Community Programs on Aging; Grants to Indian Tribes and Native Hawaiian Grantees for Supportive, Nutrition, and Caregiver Services; Grants for Supportive and Nutritional Services to Older Hawaiian Natives; and Allotments for Vulnerable Elder Rights Protection Activities	ACL is issuing this final rule to modernize the implementing regulations of the Older Americans Act of 1965 ("the Act" or OAA). These changes advance the policy goals of the Act as articulated by Congress, including equity in service delivery, accountability for funds expended, and clarity of administration for ACL and its grantees. This final rule ultimately facilitates improved service delivery and enhanced benefits for OAA participants, particularly those in greatest economic need and greatest social need consistent with the statute.	*Effective date:* This final rule is effective on March 15, 2024. Compliance date: October 1, 2025. *https://www.federalregister.gov/documents/2024/02/14/2024-01913/older-americans-act-grants-to-state-and-community-programs-on-aging-grants-to-indian-tribes-and?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov*
3	Proposed Rule	Administration for Native Americans (ANA)	89 FR 11798	Published 2/15/2024	Notice for Public Comment on Administration for Native Americans' Program Policies and Procedures	Pursuant to section 814 of the Native American Programs Act of 1974 (NAPA), as amended, the Administration for Native Americans (ANA) is required to provide members of the public an opportunity to comment on proposed changes in interpretive rules and general statements of policy and to give notice of the proposed changes no less than 30 days before such changes become effective. In accordance with notice requirements of NAPA, ANA herein describes proposed interpretive rules and general statements of policy that relate to ANA's Notices of Funding Opportunities (NOFOs) in fiscal year (FY) 2024. Changes to FY NOFOs will be based on the previously published programs: Environmental Regulatory Enhancement (ERE), HHS–2021–ACF–ANA–NR–1907; Native American Language Preservation and Maintenance-Esther Martinez Immersion (EMI), HHS–2021–ACF–ANA–NB–1958; Native American Language Preservation and Maintenance (P&M), HHS–2021–ACF–ANA–NL–1924; Social and Economic Development Strategies (SEDS), HHS–2021–ACF–ANA–NA–1906; Social and Economic Development Strategies-Alaska (SEDS–AK), HHS–2021–ACF–ANA–NK–1902.	Comments are due by March 18, 2024. If ANA does not receive any significant comments within the 30-day comment period, ANA will proceed with the proposed changes in the respective published NOFOs. The NOFOs will serve as the final notice of these proposed changes. https://www.federalregister.gov/documents/2024/02/15/2024-03160/notice-for-public-comment-on-administration-for-native-americans-program-policies-and-procedures?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
4	Request for Information	National Institutes of Health (NIH)	89 FR 11843	Published 2/15/2024	Request for Informaiton to Inform Development of the FY2026-2030 NIH Strategic Plan for HIV and HIV-Related Research	Through this Request for Information (RFI), the Office of AIDS Research (OAR) in the Division of Program Coordination, Planning, and Strategic Initiatives (DPCPSI), National Institutes of Health (NIH), invites feedback from researchers, health care professionals, advocates and health advocacy organizations, scientific or professional organizations, federal/state/local government agencies, community, and other interested constituents on the development of the fiscal year (FY) 2026–2030 NIH Strategic Plan for HIV and HIV-Related Research (the Plan). The Plan (https://www.oar.nih.gov/sites/default/files/NIH_StrategicPlan_FY2021-2025.pdf) guides the NIH investment, building on scientific progress and opportunities for advancing HIV research toward an end to the pandemic.	Send comments on or before April 1, 2024 to ensure consideration. https://www.federalregister.gov/documents/2024/02/15/2024-03122/request-for-information-rfi-to-inform-development-of-the-fy-2026-2030-nih-strategic-plan-for-hiv-and?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
5	Final Rule	OCR SAMHSA	87 FR 12472	Published 2/16/2024	Confidentiality of Substance Use Disorder (SUD) Patient Records	The United States Department of Health and Human Services (HHS or "Department") is issuing this final rule to modify its regulations to implement section 3221 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act. The Department is issuing this final rule after careful consideration of all public comments received in response to the notice of proposed rulemaking (NPRM) for the Confidentiality of Substance Use Disorder (SUD) Patient Records. This final rule also makes certain other modifications to increase alignment with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule to improve workability and decrease burden on programs, covered entities, and business associates.	Federal Register :: Confidentiality of Substance Use Disorder (SUD) Patient Records

6	DTLL	VA	N/A	Published 2/20/2024	Revised VA-THP Lower 48 RAP 2024.pdf (govdelivery.com)	Revised VA-THP Lower 48 RAP 2024.pdf (govdelivery.com)	Revised VA-THP Lower 48 RAP 2024.pdf (govdelivery.com)
7	DTLL	HHS	N/A	Published 2/21/2024	26 th U.S. Department of Health and Human Services (HHS) Annual Tribal Budget Consultation (ATBC)	Annual Tribal Budget Consultation (ATBC) will take place in-person on April 9-10, 2024, at the Hubert H. Humphrey Building at 200 Independence Avenue, SW, Washington, DC.	fd9ae327-49f5-4240-a18e-abc8f3b2049a.pdf (hhs.gov)
8	Proposed Rule	ACF	88 FR 13652	Published 2/23/2024	Adoption and Foster Care Analysis and Reporting System	ACF proposes to amend the Adoption and Foster Care Analysis and Reporting System (AFCARS) regulations that require title IV–E agencies to collect and report data to ACF on children who enter out-of-home care, their providers, and children who have a title IV–E adoption or guardianship assistance agreement to collect additional data related to Indian children.	In order to be considered, we must receive written comments on or before April 23, 2024. https://www.federalregister.gov/documents/2024/02/23/2024-03373/adoption-and-foster-care-analysis-and-reporting-system

NCUIH REGULATIONS TRACKER: N

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE
1	DTLL	IHS	N/A	Published 3/4/2024
2	DULL	IHS	N/A	Published 3/5/2024
3	Executive Order	White House	3/21/2024	Published 3/21/2024

4	DULL	VA	N/A	Published 3/20/2024
5	DULL	VA	N/A	Published 3/27/2024

6	DTLL	HUD	N/A	Published 3/29/2024

March 2024

AGENCY ACTIONS	SUMMARY
The IHS Director writes to Tribal Leaders to update on Agency-wide consolidation of human resources (HR) offices, an initiative that we are referencing as "One HR."	One HR moves the IHS towards a cohesive, integrated approach to delivering HR services. This bold move underscores my commitment to enhancing an area identified for improvement at every level of our organization. IHS' vision for One HR is to consolidate various HR administrative systems to maximize IHS resources and cultivate a stronger HR workforce more closely aligned with the IHS mission.
The IHS Director writes to Urban Indian Organization Leaders to provide the fiscal year 2024 allocation, eligibility requirements, and procedures to access the Urban Emergency Fund (UEF).	The UEF is a limited, discretionary allocation fund managed by the IHS Office of Urban Indian Health Programs (OUIHP) to address some of the costs incurred during one-time, non-recurring emergencies and disaster relief efforts involving Urban Indian Organizations (as defined by 25 U.S.C. § 1603(29)). Each fiscal year, the OUIHP allocates up to $200,000 to the UEF. Funding is not guaranteed and is subject to the availability of appropriations.
Executive Order 14120 Advancing Women's Health Research and Innovation	President Biden signed a new Executive Order that will direct the most comprehensive set of executive actions ever taken to expand and improve research on women's health. These directives will ensure women's health is integrated and prioritized across the federal research portfolio and budget, and will galvanize new research on a wide range of topics, including women's midlife health.

The Department of Veteran Affairs (VA) would like to invite facility Leaders (or their representative designee) to an Urban Confer regarding VA's Reimbursement Agreement Program (RAP).	The VA would like to enhance the current UIO RAP and is proposing the adoption of a revised Agreement template. The revisions seek to expand the scope of reimbursable services, remove the VA's quality oversight, lengthen timely filing, and generally streamline the Agreement.
The Veterans Health Administration (VHA) and the Indian Health Service (IHS) are writing to request your recommendations on the Draft Annual Operational Plan for fiscal year (FY) 2024 and to share the completed FY 2023 VHA-IHS Memorandum of Understanding (MOU) Operational Plan. This updated plan was based on collective input from a series of Tribal Consultation and Urban Confer sessions held in September and October 2022.	The next round of Tribal Consultation and Urban Confer will be held in the spring of FY 2024. We will convene a joint in-person Tribal Consultation and Urban Confer session that will be held on Monday, April 15, 2024, during the Tribal Self-Governance Conference at the Gila River Indian Community's Wildhorse Pass Resort in Chandler, Arizona. https://content.govdelivery.com/attachments/USVAOTGR/2024/03/27/file_attachments/2828705/64834-1%20%20Enclosure%20--DRAFT%20VHA%20IHS%20MOU%20Operational%20Plan%203-27-24%20%28002%29.pdf

Tribes, Tribally Designated Housing Entities and Tribal Housing Authorities Public Engagement Listening Session on HUD's Draft 2024-2028 Environmental Justice Strategic Plan	The U.S. Department of Housing and Urban Development (HUD) is in the process of developing its 2024-2028 Environmental Justice Strategic Plan. The Department is inviting Tribal leaders and representatives to participate in the Department's upcoming public engagement listening session on the development of the Strategic Plan. This is an opportunity for tribal representatives to hear specifics from HUD officials regarding the development of the Environmental Justice Strategic Plan and to provide feedback on the priorities HUD should consider in the development of this strategic document. During this listening session, HUD will provide an update on the development of the strategy and engage with tribal representatives regarding the desired outcomes of the strategic plan. HUD will also ask open-ended questions so as to hear from those who attend on their specific feedback, opportunities, and concerns related to environmental justice within Tribal communities that may improve the strategic outcomes of the document and its priorities.

ADDITIONAL DETAILS

The IHS Director writes to Tribal Leaders to update you on our Agency-wide consolidation of human resources (HR) offices, an initiative that we are referencing as "One HR."

https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DUIOLL_030524.pdf

Federal Register :: Advancing Women's Health Research and Innovation

In addition to in person participation, stakeholders are encouraged to submit written comments to tribalgovernmentconsultation@va.gov by May 10, 2024. For additional information regarding this effort, please contact the VA Reimbursement Agreement Program Office at tribal.agreements@va.gov.

DULL: https://acrobat.adobe.com/id/urn:aaid:sc:VA6C2:264eb8b8-0d51-4f90-bf07-05cf34a7b80f

Revised RAP Draft: https://acrobat.adobe.com/id/urn:aaid:sc:VA6C2:31742ec0-fee3-4f1a-b649-397575a8db9c

Please send your written comments and recommendations on the VHA-IHS MOU Operational Plan for FY 2024 no later than April 30, 2024.

https://content.govdelivery.com/attachments/USVAOTGR/2024/03/27/file_attachments/2828688/64834-1%20DTLL%20DUIOLL%20Joint%20With%20VA%20%20SIGNED%203-27-24.pdf

HUD will host a virtual public engagement listening session specific to Tribes, Tribally Designated Housing Entities, and Tribal Housing Authorities via webinar on Tuesday, April 30, 2024. The webinar begins at 2:00 p.m. Eastern Daylight Time (you may join the conference 10 minutes prior).

Environmental Justice Strategic Plan Listening Session I: Tribes, Tribally Designated Housing Entities and Tribal Housing Authorities – April 30, 2024, 2:00pm ET
https://www.zoomgov.com/meeting/register/vJIsd--trjoiH_RQ2Kz10rGVhyoxFgAS6ko

https://acrobat.adobe.com/id/urn:aaid:sc:VA6C2:afe9c0ef-909b-4f82-9299-2a7274a0ca6a

NCUIH REGULATIONS TRACKER: April 2024

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	DTLL	HHS	N/A	3/27/2024	The Deputy Assistant Secretary for Human Services Policy with the HHS writes to invite Tribal leaders to discuss the HHS' Equity Action Plan.	The Equity Action Plan is part of the HHS' efforts to implement the President's Executive Order on "Further Advancing Racial Equity and Support for Underserved Communities Through The Federal Government," which reaffirmed the Administration's commitment to deliver equity and build an America in which all can participate, prosper, and reach their full potential. HHS is inviting Tribes to share feedback on the Plan's priority areas and to hear Tribal leaders' thoughts and concerns.	The virtual Tribal Consultation will take place on April 29, 2023, from 2:30 to 4 PM Eastern. To help plan, HHs invites written questions or comments by April 22, 2024. Please email questions or comments to consultation@hhs.gov. A 30-day written comment period will be available after the virtual consultation. https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/b3f9388d-7781-4201-adec-c007df80bd7e.pdf
2	DTLL/DULL	IHS	N/A	1/18/2024	The IHS Director writes to invite Tribal and UIO leaders to join a series of four Tribal Consultations and Urban Confer session in calendar year 2024 on Health IT Modernization.	IHS is holding the meetings to ask questions and receive feedback from Tribal and UIO leaders. During the second event scheduled for May 9, the IHS provide information on and received feedback concerning deployment and cohort planning.	The Tribal Consultation and Urban Confer sessions are virutal from 1:30 PM to 3 PM Eastern on May 8, 2024. Please email your comments and recommendations on Health IT Modernization within 30 days following each session to consultation@ihs.gov or urbanconfer@ihs.gov with the subject line "Health IT Modernization." https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_011824.pdf
3	DTLL	DOI, HHS, DOJ	N/A	4/17/2024	DOI, HHS, and DOJ write to invite Tribal leaders to provide input on the ICWA and steps the agencies cant ake to promote federal protections for Indian children and their parents and caregivers.	This will be the final consultation and comment period on the jointagency efforts to Strengthen ICWA. The Agencies are seeking input on the following: • What additional supports would Tribal leaders find helpful to build their Tribe's capacity to exercise their rights and responsibilities under ICWA? • Are there specific supports you believe the Federal government could provide to help state courts and child welfare agencies meet their obligations under ICWA? In your experience, are there specific aspects or requirements of ICWA where state courts and agencies need to build greater understanding or capacity? • Are there existing State-Tribe collaborative partnerships or processes that you believe have helped support effective implementation of ICWA?	The virtual and in-person Tribal Consultation will be May 14, 2024, from 2 to 4 PM CDT. Written comments are due to consultation@bia.gov by 11:59 PM ET on Friday, June 14, 2024. https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/46b85045-1d5a-4fd4-80bb-45a041426de5.pdf

NCUIH REGULATIONS TRACKER: December 1, 2023 - February 28, 2024

TRACKER ENTRY #	DOCUMENT CATEGORY	AGENCY TITLE	CITATION/ LOCATION	PUBLISHED DATE	AGENCY ACTIONS	SUMMARY	ADDITIONAL DETAILS
1	Notice	SAMHSA	88 FR 83955	Published 12/1/2023	Agency Information Collection Activities: Submission for OMB Review; Comment Request	The Substance Abuse and Mental Health Services Administration (SAMHSA) is seeking Office of Management and Budget (OMB) Emergency approval for new information collection activities for monitoring all of SAMHSA's 988 Cooperative Agreements. The collection of this information is critical to successfully oversee operational response and quality of service through the 988 Suicide and Crisis Lifeline to ensure connections to care for individuals in suicidal crisis or emotional distress contacting in for 988 phone, chat, and text support for connecting local, state/territory and national outcomes and monitoring contractual obligations for current and future 988 grant programs. Much of this information is already embedded in the current 988 Suicide and Crisis Lifeline network administrator grants, the 988 state and territory grant program, or the 988 Tribal Response grant program.	Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. https://www.federalregister.gov/documents/2023/12/01/2023-26436/agency-information-collection-activities-submission-for-omb-review-comment-request?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
2	Notice	USDA	88 FR 84120	Published 12/4/2023	Submission for OMB Review; Comment Request	The Indigenous Animals Harvesting and Meat Processing Grant Program was authorized by Section 1001 of the American Rescue Plan (ARP) Act of 2021 (Pub. L. 117–2), which assists U.S. states and territories to build resilience in the middle of the supply chain and strengthen local and regional food systems. The information provided will be used to determine applicant and project eligibility and to ensure that projects meet program goals and are for authorized purposes. Applicants that receive grant awards are also required to execute a Financial Assistance Agreement with the Agency and provide financial and project performance reports to the Agency to ensure that projects are being completed in a timely manner.	Comments regarding this information collection received by January 3, 2024 will be considered. Written comments and recommendations for the proposed information collection should be submitted within 30 days of the publication of this notice on the following website www.reginfo.gov/public/do/PRAMain. https://www.federalregister.gov/documents/2023/12/04/2023-26519/submission-for-omb-review-comment-request?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
3	DTLL/DULL	VA, HHS	N/A	Published 12/6/2023	VA and IHS Reimbursement Agreement for Health Care and Related Services Provided by the IHS to Eligible AI/AN Veterans	This agreement replaces and expands upon the prior agreement between our agencies, which was originally executed on December 5, 2012. Under the new agreement, VA will now reimburse the IHS for purchased/referred care and contracted travel for AI/AN Veterans. The VA will also continue to reimburse the IHS for direct care provided to AI/AN Veterans.	As the IHS and VA move forward with the implementation of the Agreement, Tribal Leaders are encouraged to send any written comments by January 23, 2024. You can e-mail your comments to: consultation@ihs.gov and tribalgovernmentconsultation@va.gov, adding REVISED IHS-VA REIMBURSEMENT AGREEMENT as the subject line. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_120723.pdf Enclosure: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/Enclosure_DTLL_DUIOLL_120723.pdf
4	Executive Order	White House	N/A	Published 12/06/2023	President Biden Signs Executive Order on Reforming Federal Funding and Support for Tribal Nations to Better Embrace our Trust Responsibilities and Promote the Next Era of Tribal Self Determination	This Executive Order demonstrates the Biden-Harris Administration's respect for Tribal sovereignty, and commitment to ushering in the next era of Tribal self-determination by ensuring that Tribal Nations have greater autonomy over how they invest federal funding.	https://www.whitehouse.gov/briefing-room/presidential-actions/2023/12/06/executive-order-on-reforming-federal-funding-and-support-for-tribal-nations-to-better-embrace-our-trust-responsibilities-and-promote-the-next-era-of-tribal-self-determination/
5	Notice	DHS	88 FR 87445	Published 12/18/2023	Request for Information Regarding Department of Homeland Security Activities and Advancing Environmental Justice	With this Request for information (RFI), DHS is seeking public comment and feedback on how environmental justice is considered Department-wide, how it can provide opportunities for meaningful engagement in decision-making, and what to include in the next DHS Environmental Justice Strategy. The public is encouraged to provide input in response to the questions in this RFI and to share barriers and challenges, successes, suggestions, and ideas. DHS will use this information to help improve and advance the Department's environmental justice program, conduct meaningful engagement, and address environmental justice challenges that communities are facing.	Comments are requested on or before 60 days after publication of this RFI and must be received no later than 11:59 p.m. eastern time (ET) on February 16, 2024. Email comments to DHSEnvironmentalJustice@hq.dhs.gov. Include Environmental Justice RFI in the message's subject line. Email submissions should be machine-readable (i.e., in PDF or Microsoft Word format) and not copyright-protected. https://www.federalregister.gov/documents/2023/12/18/2023-27628/request-for-information-regarding-department-of-homeland-security-activities-and-advancing?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
6	DTLL/DULL	IHS	N/A	Published 12/18/2023	The IHS Director writes to announce the award of the Forensic Nursing Consultation Program contract that will help boost forensic health care-related workforce activities across IHS, Tribal, and Urban Indian facilities.	the Indian Health Service (IHS) Division of Nursing Services in the Office of Clinical and Preventive Services, has awarded the Forensic Nursing Consultation Program (FNCP) contract to the Texas A&M Center of Excellence in Forensic Nursing. This five-year contract will help boost forensic health care-related workforce activities across all IHS, Tribal, and Urban Indian (I/T/U) facilities	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2023_Letters/DTLL_DUIOLL_121823.pdf
7	Notice	IHS	88 FR 87789	Published 12/19/2023	Reimbursement Rates for Calendar Year 2024	Notice is provided that the Director of the Indian Health Service (IHS) has approved the rates for inpatient and outpatient medical care provided by the IHS facilities for Calendar Year 2024.	Federal Register :: Reimbursement Rates for Calendar Year 2024
8	DTLL	HHS, ACL	N/A	Published 12/21/2023	Tribal Consultation for ACL's Draft Tribal Consultation Policy	On November 27, 2023, ACL announced our draft Tribal Consultation Policy and distributed it to Tribes in attendance at the HHS Secretary's Tribal Advisory Council (STAC) meeting. ACL plans to hold a Tribal Consultation on the draft policy to receive Tribal leader feedback and recommendations of what to incorporate in the final policy.	The consultation will be held in person and virtually on Wednesday, January 24, 2024, from 1 PM - 5 PM ET. Capital Hilton 1001 16th Street NW Washington, DC, 20036 Please contact TEYA Support Services, LLC, to register for the Tribal Consultation at: laura.stevenson@teyacompany.com or melissa.szasz@teyacompany.com If you wish to send written comments, please submit them by February 23, 2023 to: olderindians@acl.hhs.gov. https://mcusercontent.com/f28e15204626ec3771230344f/files/1fc34886-f90e-6b43-c33d-b7187835e502/ACL_DTLL_Final.pdf

9	Notice	DOL	88 FR 89467	Published 12/27/2023	Revised Final Tribal Consultation Policy	The Department of Labor (DOL) is issuing its revised final Tribal Consultation Policy. The Tribal Consultation Policy (hereinafter referred to as the "policy") establishes standards for improved consultation with federally recognized Indian Tribes to the extent that no conflict exists with applicable Federal laws or regulations. The policy applies to any Department action that affects federally recognized Indian Tribes and requires that the Department's government-to-government consultation involve appropriate Tribal and Departmental Officials. These revisions are set forth as the final policy in response to comments from the April 14, 2021, Tribal consultation meeting.	https://www.federalregister.gov/documents/2023/12/27/2023-28493/revised-final-tribal-consultation-policy This Revised Final Policy is effective October 10, 2023.
10	Notice	IHS	88 FR 89711	Published 12/28/2023	Funding Opportunity for the Tribal Management Grant Program	The Indian Health Service (IHS) is accepting applications for grants for the Tribal Management Grant (TMG) Program. The TMG Program is a competitive grant program that is capacity building and developmental in nature and has been available for federally recognized Indian Tribes and Tribal Organizations (T/TO) since shortly after enactment of the ISDEAA in 1975. The TMG Program was established to assist T/TOs to prepare for assuming all or part of existing IHS programs, functions, services, and activities (PFSAs) and further develop and improve Tribal health management capabilities. The TMG Program provides competitive grants to T/TOs to establish goals and performance measures for current health programs, assess current management capacity to determine if new components are appropriate, analyze programs to determine if a T/TO's management is practicable, and develop infrastructure systems to manage or organize PFSAs.	Application Deadline Date: March 14, 2024. Earliest Anticipated Start Date: June 1, 2024. The total funding identified for fiscal year (FY) 2024 is approximately $2,464,000. Individual award amounts for the first budget year are anticipated to be between $50,000 and $150,000. The funding available for competing and subsequent continuation awards issued under this announcement is subject to the availability of appropriations and budgetary priorities of the Agency. https://www.federalregister.gov/documents/2023/12/28/2023-28586/funding-opportunity-for-the-tribal-management-grant-program?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
11	Notice	HRSA	89 FR 82	Published 1/2/2024	Lists of Designated Primary Medical Care, Mental Health, and Dental Health Professional Shortage Areas	This is the second of two planned notices informing the public of the availability of the complete lists of all geographic areas, population groups, and facilities designated as primary medical care, dental health, and mental health professional shortage areas (HPSA). This notice includes the lists of HPSAs in a designated status as of December 2, 2023.	Complete lists of HPSAs designated as of December 2, 2023, are available on the website at https://data.hrsa.gov/tools/health-workforce/shortage-areas/frn. https://www.federalregister.gov/documents/2024/01/02/2023-28844/lists-of-designated-primary-medical-care-mental-health-and-dental-health-professional-shortage-areas?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
12	Proposed Rule	IHS	89 FR 896	Published 1/8/2024	Removal of Outdated Regulations	The Indian Health Service (IHS) of the Department of Health and Human Services (HHS or "the Department") is issuing this Notice of Proposed Rulemaking (NPRM) proposing the removal of regulations appearing in the Code of Federal Regulations (CFR). These outdated regulations do not align with the current statutory text.	Comments due on or before March 8, 2024. https://www.federalregister.gov/documents/2024/01/08/2023-28948/removal-of-outdated-regulations?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
13	Notice	BIA	89 FR 944	Published 1/8/2024	Indian Entities Recognized by and Eligible To Receive Services From the United States Bureau of Indian Affairs	This notice publishes the current list of 574 Tribal entities recognized by and eligible for funding and services from the Bureau of Indian Affairs (BIA) by virtue of their status as Indian Tribes.	https://www.federalregister.gov/documents/2024/01/08/2024-00109/indian-entities-recognized-by-and-eligible-to-receive-services-from-the-united-states-bureau-of?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
14	DTLL	HHS	N/A	Published 1/10/2024	HHS Tribal Data Policy	HHS is seeking comments and recommendations on the agency's Draft HHS Tribal and Tribal Epidemiology Center Data Access Policy.	Virtual Tribal Consultation: February 6, 2024, 3-5 PM Eastern Zoom registration: https://www.zoomgov.com/meeting/register/vJIsc-iurzorE5MWGjSDXfNG0spDpVXEm9o#/registration Written comments are requested by March 5, 2024. DTLL: https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/48e23919-9b7b-49bc-a991-a888fdcc4968.pdf Draft Policy: https://image.connect.hhs.gov/lib/fe4515707564047b741472/m/1/1f0d3948-d9c0-40bf-8f95-e7ad86bec5eb.pdf
15	Proposed Rule	HUD	89 FR 1746	Published 1/10/2024	Submission for Community Development Block Grant Program, Consolidated Plans, and Indian Community Development Block Grant Program Changes	HUD is proposing to revise the Community Development Block Grant (CDBG) and related Section 108 loan guarantee program regulations to make it easier for recipients to promote economic development and recovery in low- and moderate-income communities and support investments in underserved areas. This proposed rule also would revise provisions related to Consolidated Plan and citizen participation requirements for the CDBG program and institute quarterly reporting to improve performance with respect to timeliness. HUD is also proposing to make certain corresponding changes to the Indian Community Development Block Grant (ICDBG) program regulations to align the ICDBG program with the revisions being made to the CDBG program regulations.	Comments are due by March 11, 2024. https://www.federalregister.gov/documents/2024/01/10/2024-00039/submission-for-community-development-block-grant-program-consolidated-plans-and-indian-community?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
16	DTLL	White House	N/A	Published 1/11/2024	TRIBAL CONSULTATION ANNOUNCEMENT ON EXECUTIVE ORDER 14112:Reforming Federal Funding and Support for Tribal Nations To Better Embrace Our Trust Responsibilities and Promote the Next Era of Tribal Self-Determination.	During this engagement session, Biden-Harris Administration leadership and staff from the White House and Federal Departments will discuss the substance and implementation process the Administration is planning for EO 14112. Tribal leaders are invited to ask questions, provide comments, and share their perspectives on how EO 14112 can best meet the needs of their Tribal Nations.	The virtual engagement session with Biden-Harris Administration leadership will be on Monday, January 22, 2024, from 3:30pm – 5:30pm ET, to discuss Executive Order 14112 on Reforming Federal Funding and Support for Tribal Nations to Better Embrace Our Trust Responsibilities and Promote the Next Era of Tribal Self-Determination. The Executive Order (EO) demonstrates the Biden-Harris Administration's respect for Tribal https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:57cca82f-e1fd-30ce-a427-ef63187e30fb
17	DULL	IHS	N/A	Published 1/12/2024	The IHS Director writes to initiate Urban Confer on the proposed supplemental funding request to support fentanyl and opioid programs	Urban Confer seeking guidance and recommendations on the potential implementation of $250 million included in the Administration's recent supplemental request to support funding for fentanyl and opioid abuse prevention, treatment, recovery services, and harm reduction interventions. Congress has not taken action on the enactment of this potential funding. If enacted, this potential funding would be used to combat the ongoing fentanyl and opioid crises in American Indian and Alaska Native communities. Your input is essential to inform Agency planning related to potential allocation methodologies in anticipation of potential action by Congress on the supplemental funding.	Virtual Urban Confer on the proposed supplemental funding request on Friday, February 2, 2024. The comment submission deadline for this Urban Confer is Monday March 4, 2024. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DUIOLL_011224.pdf
18	DTLL/DULL	IHS	N/A	Published 1/16/2024	The IHS Director writes to announce the appointment of the new IHS Deputy Director for Quality Healthcare and Enterprise Risk Management.	IHS has appointed Ms. Michelle Boylan, RN, MA, MBA, CPHQ, as the new Deputy Director for Quality Healthcare and Enterprise Risk Management at the Indian Health Service (IHS). Prior to joining the IHS, Ms. Boylan served as the quality management officer for the Veterans Affairs Heartland Network – VISN 15, and as the lead quality management officer at the Veterans Health Administration. In her new position at the IHS, Ms. Boylan is responsible for strengthening the agency's ongoing efforts to ensure the delivery of consistent, high-quality health care at federally operated facilities serving American Indians and Alaska Natives.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_20240116.pdf
19	DTLL	IHS	N/A	Published 1/11/2024	The IHS Director writes to notify you of an opportunity to comment on an NPRM published in the Federal Register, proposing the removal of outdated regulations on the use of IHS funds for certain abortions, and to initiate Tribal Consultation on the NPRM.	The IHS does not expect the NPRM will have any substantial direct effect or impact because it only removes outdated regulations. The IHS values opportunities for dialogue with Tribes and to inform Tribal Leaders of this opportunity to comment on the NPRM.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_011824.pdf
20	DTLL/DULL	IHS	N/A	Published 1/18/2024	The IHS Director writes to invite Tribal and UIO leaders to join a series of four Tribal Consultations and Urban Confer session in calendar year 2024 on Health IT Modernization.	IHS is holding the meetings to ask questions and receive feedback from Tribal and UIO leaders. During the first event scheduled for February 8, Enterprise Collaboration Group (ECG), the IHS will provide an overview of the ECG, a body that gathers insights from subject matter experts who are end-users of the enterprise Electronic Health Record, and seek your feedback on system configuration and change management.	The Tribal Consultation and Urban Confer sessions are virutal from 1:30 PM to 3 PM Eastern on the following dates: February 8, 2024; May 9, 2024; August 8, 2024; and November 7, 2024. Please email your comments and recommendations on Health IT Modernization within 30 days following each session to consultation@ihs.gov or urbanconfer@ihs.gov with the subject line "Health IT Modernization." https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_011824.pdf
21	DTLL/DULL	IHS	N/A	Published 1/22/2024	The IHS Director writes to Tribal Leaders and Urban Indian Organization Leaders to share Agency accomplishments during the first quarter of fiscal year 2024.	FY2024 First Quarter of FY 2024 Performance Report: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/Enclosure_DTLL_DUIOLL_12224.pdf	DTLL/DULL: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_12224.pdf REPORT: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/Enclosure_DTLL_DUIOLL_12224.pdf
22	DULL	IHS	N/A	Published 1/22/2024	The IHS Director writes to Urban Indian Organization Leaders to announce the IHS Fiscal Year 2023 Budget to Support Urban Indian Organizations	The purpose of the FY 2023 Budget Report is to provide financial transparency and accountability for the Urban Indian Health Budget line. This aligns with the IHS Office of Urban Indian Health Programs (OUIHP) 2023-2027 Strategic Plan recommendations to increase transparency of funds allocated to Urban Indian Health Programs. The FY 2023 Budget Report details the funds distribution by the OUIHP and IHS Area Offices. These funds have been allocated for program administration, contract and grant awards, health information technology, and Urban Indian Health initiatives aimed at improving the quality of health care in Urban Indian communities	DULL: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DUIOLL_12224-2.pdf Enclosure: https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/ENCLOSURE-DUIOLL_12224-2.pdf

23	DTLL/DULL	IHS	N/A	Published 1/31/2024	The IHS Director writes to communicate key leadership changes within the Indian Health Service, which include multiple reassignments, the departure of a long-tenured staff member, and a noteworthy retirement.	Te appointment of Mr. Daniel Frye as the Acting Director for the Office of Human Resources (OHR) at the IHS. The appointment is effective immediately. The appointment of Ms. Asha Petoskey, who will serve as the Acting Area Director for the Bemidji Area IHS. The appointment is effective immediately. Rose Weahkee, Ph.D., has been appointed to serve as the Chief Performance Officer in the IHS Office of the Director. The effective date of this action will be Monday, February 12, 2024. As Chief Performance Officer, Dr. Weahkee will serve as the principal advisor to the Director, Deputy Director, and other key officials within the IHS, on matters pertaining to strategy development, strategic planning, and performance management. Dr. Weahkee's appointment to the IHS Office of the Director, Mr. Rick Mueller will serve as Acting Director, OUIHP.	https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2024_Letters/DTLL_DUIOLL_20240131.pdf
24	Final Rule	SAMHSA	89 FR 7528	Published 2/2/2024	Medications for the Treatment of Opioid Use Disorder	This final rule modifies and updates certain provisions of regulations related to Opioid Treatment Program (OTP) accreditation, certification, and standards for the treatment of Opioid Use Disorder (OUD) with Medications for Opioid Use Disorder (MOUD) in OTPs. This includes making flexibilities put forth during the COVID–19 Public Health Emergency (PHE) permanent, as well as expanding access to care and evidence-based treatment for OUD. The final rule also removes all language and rules pertaining to the Drug Addiction and Treatment Act (DATA) Waiver from the regulations pursuant to the "Consolidated Appropriations Act, 2023".	The effective date of this final rule is April 2, 2024, and the compliance date is October 2, 2024. https://www.federalregister.gov/documents/2024/02/02/2024-01693/medications-for-the-treatment-of-opioid-use-disorder?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
25	Final Rule	ACL	87 FR 11566	Published 2/14/2024	Older Americans Act: Grants to State and Community Programs on Aging; Grants to Indian Tribes and Native Hawaiian Grantees for Supportive, Nutrition, and Caregiver Services; Grants for Supportive and Nutritional Services to Older Hawaiian Natives; and Allotments for Vulnerable Elder Rights Protection Activities	ACL is issuing this final rule to modernize the implementing regulations of the Older Americans Act of 1965 ("the Act" or OAA). These changes advance the policy goals of the Act as articulated by Congress, including equity in service delivery, accountability for funds expended, and clarity of administration for ACL and its grantees. This final rule ultimately facilitates improved service delivery and enhanced benefits for OAA participants, particularly those in greatest economic need and greatest social need consistent with the statute.	*Effective date:* This final rule is effective on March 15, 2024. Compliance date: October 1, 2025. *https://www.federalregister.gov/documents/2024/02/14/2024-01913/older-americans-act-grants-to-state-and-community-programs-on-aging-grants-to-indian-tribes-and?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov*
26	Proposed Rule	Administration for Native Americans (ANA)	89 FR 11798	Published 2/15/2024	Notice for Public Comment on Administration for Native Americans' Program Policies and Procedures	Pursuant to section 814 of the Native American Programs Act of 1974 (NAPA), as amended, the Administration for Native Americans (ANA) is required to provide members of the public an opportunity to comment on proposed changes in interpretive rules and general statements of policy and to give notice of the proposed changes no less than 30 days before such changes become effective. In accordance with notice requirements of NAPA, ANA herein describes proposed interpretive rules and general statements of policy that relate to ANA's Notices of Funding Opportunities (NOFOs) in fiscal year (FY) 2024. Changes to FY NOFOs will be based on the previously published programs: Environmental Regulatory Enhancement (ERE), HHS–2021–ACF–ANA–NR–1907; Native American Language Preservation and Maintenance-Esther Martinez Immersion (EMI), HHS–2021–ACF–ANA–NB–1958; Native American Language Preservation and Maintenance (P&M), HHS–2021–ACF–ANA–NL–1924; Social and Economic Development Strategies (SEDS), HHS–2021–ACF–ANA–NA–1906; Social and Economic Development Strategies-Alaska (SEDS–AK), HHS–2021–ACF–ANA–NK–1902.	Comments are due by March 18, 2024. If ANA does not receive any significant comments within the 30-day comment period, ANA will proceed with the proposed changes in the respective published NOFOs. The NOFOs will serve as the final notice of these proposed changes. https://www.federalregister.gov/documents/2024/02/15/2024-03160/notice-for-public-comment-on-administration-for-native-americans-program-policies-and-procedures?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
27	Request for Information	National Institutes of Health (NIH)	89 FR 11843	Published 2/15/2024	Request for Informaiton to Inform Development of the FY2026-2030 NIH Strategic Plan for HIV and HIV-Related Research	Through this Request for Information (RFI), the Office of AIDS Research (OAR) in the Division of Program Coordination, Planning, and Strategic Initiatives (DPCPSI), National Institutes of Health (NIH), invites feedback from researchers, health care professionals, advocates and health advocacy organizations, scientific or professional organizations, federal/state/local government agencies, community, and other interested constituents on the development of the fiscal year (FY) 2026–2030 NIH Strategic Plan for HIV and HIV-Related Research (the Plan). The Plan (https://www.oar.nih.gov/sites/default/files/NIH_StrategicPlan_FY2021-2025.pdf) guides the NIH investment, building on scientific progress and opportunities for advancing HIV research toward an end to the pandemic.	Send comments on or before April 1, 2024 to ensure consideration. https://www.federalregister.gov/documents/2024/02/15/2024-03122/request-for-information-rfi-to-inform-development-of-the-fy-2026-2030-nih-strategic-plan-for-hiv-and?utm_campaign=subscription+mailing+list&utm_medium=email&utm_source=federalregister.gov
28	Final Rule	OCR SAMHSA	87 FR 12472	Published 2/16/2024	Confidentiality of Substance Use Disorder (SUD) Patient Records	The United States Department of Health and Human Services (HHS or "Department") is issuing this final rule to modify its regulations to implement section 3221 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act. The Department is issuing this final rule after careful consideration of all public comments received in response to the notice of proposed rulemaking (NPRM) for the Confidentiality of Substance Use Disorder (SUD) Patient Records. This final rule also makes certain other modifications to increase alignment with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule to improve workability and decrease burden on programs, covered entities, and business associates.	Federal Register :: Confidentiality of Substance Use Disorder (SUD) Patient Records
29	DTLL	VA	N/A	Published 2/20/2024	Revised VA-THP Lower 48 RAP 2024.pdf (govdelivery.com)	Revised VA-THP Lower 48 RAP 2024.pdf (govdelivery.com)	Revised VA-THP Lower 48 RAP 2024.pdf (govdelivery.com)
30	DTLL	HHS	N/A	Published 2/21/2024	26 th U.S. Department of Health and Human Services (HHS) Annual Tribal Budget Consultation (ATBC)	Annual Tribal Budget Consultation (ATBC) will take place in-person on April 9-10, 2024, at the Hubert H. Humphrey Building at 200 Independence Avenue, SW, Washington, DC.	fd9ae327-49f5-4240-a18e-abc8f3b2049a.pdf (hhs.gov)
31	Proposed Rule	ACF	88 FR 13652	Published 2/23/2024	Adoption and Foster Care Analysis and Reporting System	ACF proposes to amend the Adoption and Foster Care Analysis and Reporting System (AFCARS) regulations that require title IV–E agencies to collect and report data to ACF on children who enter out-of-home care, their providers, and children who have a title IV–E adoption or guardianship assistance agreement to collect additional data related to Indian children.	In order to be considered, we must receive written comments on or before April 23, 2024. https://www.federalregister.gov/documents/2024/02/23/2024-03373/adoption-and-foster-care-analysis-and-reporting-system