Management and support services for the ACMH are provided by the OMH, which is a program office within the OPHS.
Nominations: The OPHS is requesting nominations for current and impending vacant positions on the ACMH. The Committee is composed of 12 voting members, in addition to non-voting ex officio members. This announcement is seeking nominations for voting members. Voting members of the Committee are appointed by the Secretary from individuals who are not officers or employees of the Federal Government and who have expertise regarding issues of minority health. To qualify for consideration of appointment to the Committee, an individual must possess demonstrated experience and expertise working on issues/matters impacting the health of racial and ethnic minority populations. The charter stipulates that the racial and ethnic minority groups shall be equally represented on the Committee membership. This means we are seeking candidates who can represent the health interest of Hispanics/Latino Americans; Blacks/African Americans; American Indians and Alaska Natives; and Asian Americans, Native Hawaiians, and/or other Pacific Islanders.
Mandatory Professional/Technical Qualifications: Nominees must meet all of the following mandatory qualifications to be eligible for consideration.
(1) Expertise in minority health and racial and ethnic health disparities.
(2) Expertise in developing or contributing to the development of health policies and/or programs. This may include experience in the analysis, evaluation, and interpretation of Federal health or regulatory policy.
(3) Involvement in national, regional, Tribal, and/or community efforts to improve minority health.
(4) Educational achievement, professional certification(s) in healthrelated field (behavioral health, public health, nursing, environmental health, nutrition, pharmacy, epidemiology, health administration, etc.), and professional experience that will support ability to give expert advice on issues related to improving minority health and eliminating racial and ethnic health disparities.

Desirable Qualifications: It is desired that the nominee have:
(1) Knowledge of national health policies and programs managed by the HHS.
(2) Job-related training, self-
development, and outside professional activities which provides evidence of
initiative, resourcefulness, and potential for effective performance.

Requirements for Nomination Submission: Nominations should be typewritten (one nomination per nominator). The following information should be included in the package of material submitted for each individual being nominated for consideration: (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 that the nominee is willing to serve as a member of the Committee; (2) the nominator's name, address, and daytime telephone number, and the home and/or work address, telephone number, and e-mail address of the individual being nominated; (3) a current copy of the nominee's curriculum vitae, and (4) provide narrative responses to the mandatory professional/technical qualifications listed above in regard to the nominee's expertise. Federal employees should not be nominated for consideration of appointment to this Committee.

Individuals selected for appointment to the Committee shall be invited to serve four year terms. Committee members who are not officers or employees of the United States Government will receive a stipend for attending Committee meetings and conducting other business in the interest of the Committee, including per diem and reimbursement for travel expenses incurred.

The Department makes every effort to ensure that the membership of HHS Federal advisory committees is fairly balanced in terms of points of view represented and the committee's function. Every effort is made to ensure that a broad representation of geographic areas, females, ethnic and minority groups, and the disabled are given consideration for membership on HHS Federal advisory committees. Appointment to this Committee shall be made without discrimination on the basis of age, race, ethnicity, gender, sexual orientation, disability, and cultural, religious, or socioeconomic status. Nominations must state that the nominee is willing to serve as a member of ACMH and appears to have no conflict of interest that would preclude membership. An ethics review is conducted for each selected candidate. Therefore, individuals selected for nomination will be required to provide detailed information concerning such matters as financial holdings, consultancies, and research grants or
contracts to permit evaluation of possible sources of conflict of interest.
Dated: July 8, 2010.
Garth N. Graham,
Deputy Assistant Secretary for Minority Health.
[FR Doc. 2010-17852 Filed 7-21-10; 8:45 am]

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BILLING CODE 4150-29-P
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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Health Resources and Services Administration

The Negotiated Rulemaking Committee on the Designation of Medically Underserved Populations and Health Professions Shortage Areas
agency: Health Resources and Services Administration (HRSA), HHS.
ACTION: Notice of establishment.

## Authority: The Negotiated

Rulemaking Committee on the
Designation of Medically Underserved Populations (MUPs) and Health Professions Shortage Areas (HPSAs) was specifically mandated by Section 5602 of Public Law 111-148, the Patient Protection and Affordable Care Act of 2010 (ACA). The Negotiated Rulemaking process is described at 5 U.S.C. 561-569, the Negotiated Rulemaking Act of 1990, Public Law 101-648. Each Negotiated Rulemaking Committee is also governed by the provisions of Public Law 92-463
(5 U.S.C., App.), which sets forth standards for the formation and use of advisory committees.
SUMMARY: Pursuant to Section 5602 of the ACA, HRSA plans to establish a comprehensive methodology and criteria for Designation of MUPs and Primary Care HPSAs [under Sections 330(b)(3) and 332 of the Public Health Service (PHS) Act, respectively], using a Negotiated Rulemaking process. To do this, HRSA announces the establishment of the Negotiated Rulemaking Committee on the Designation of Medically Underserved Populations and Health Professions Shortage Areas.
FOR FURTHER INFORMATION CONTACT:
Andy Jordan, Senior Analyst, Office of Shortage Designation, Bureau of Health Professions; e-mail ajordan@hrsa.gov; telephone (301) 594-0197.
SUPPLEMENTARY INFORMATION: Section 5602 of the Patient Protection and Affordable Care Act of 2010 mandates the Negotiated Rulemaking Committee within the Department of Health and Human Services. To comply with the authorizing directive and guidelines
under the Federal Advisory Committee Act (FACA), a charter has been filed with the Committee Management Secretariat in the General Services Administration (GSA), the appropriate committees in the Senate and U.S. House of Representatives, and the Library of Congress to establish the Advisory Board as a non-discretionary Federal advisory committee. The charter was filed on June 29, 2010.

## Objectives and Scope of Activities

The purpose of the Negotiated Rulemaking Committee on Designation of MUPs and HPSAs is to provide advice and make recommendations to the Secretary of Health and Human Services, through the Administrator, Health Resources and Services Administration, with respect to developing a new rule containing a revised methodology, criteria and process for such designations.

## Membership and Designation

The Committee shall be limited to 25 members, unless it is determined that a greater number of members is necessary for the functioning of the Committee or to achieve balanced membership, including the one Government employee representing HRSA/DHHS. A neutral facilitator, approved by the Committee, shall act as Chair. Members shall be chosen for their ability to represent the various interests that will be significantly affected by the rule, and/or for technical expertise related to indicators and methodologies potentially useful in defining medical underservice and health professions shortage. Members shall be invited to serve for the duration of the Committee.

## Administrative Management and Support

HRSA will provide funding and administrative support for the Negotiated Rulemaking Committee to the extent permitted by law within existing appropriations. Management and oversight for support services provided to the Negotiated Rulemaking Committee will be provided by the Bureau of Health Professions, HRSA.

A copy of the Committee charter can be obtained from the designated contacts or by accessing the FACA database that is maintained by the GSA Committee Management Secretariat. The Web site for the FACA database is http://fido.gov/facadatabase/.
Dated: July 16, 2010.

## Mary K. Wakefield,

## Administrator.

[FR Doc. 2010-17837 Filed 7-21-10; 8:45 am]
BILLING CODE 4165-15-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## National Institutes of Health

## National Heart, Lung, and Blood Institute; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections $552 \mathrm{~b}(\mathrm{c})(4)$ and $552 \mathrm{~b}(\mathrm{c})(6)$, Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Heart, Lung, and Blood Institute Special Emphasis Panel, Research Program Project in Thrombus
Formation.
Date: August 6, 2010.
Time: 8 a.m. to 5 p.m.
Agenda: To review and evaluate grant applications.

Place: Bethesda Marriott, 5151 Pooks Hill Road, Bethesda, MD 20814.

Contact Person: Robert T. Su, PhD,
Scientific Review Officer, Review Branch/ DERA, National Heart, Lung, and Blood Institute, 6701 Rockledge Drive, Room 7202, Bethesda, Md 20892-7924, 301-435-0297, sur@mail.nih.gov.

Name of Committee: National Heart, Lung, and Blood Institute Special Emphasis Panel, Resource for Bioactive Sphingolipids.

Date: August 12, 2010.
Time: 1 p.m. to 3 p.m.
Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892.
(Telephone Conference Call).
Contact Person: Robert Blaine Moore, PhD, Scientific Review Officer, Review Branch/ DERA, National Heart, Lung, and Blood Institute, National Institutes of Health, 6701 Rockledge Drive, Room 7213, Bethesda, MD 20892, 301-594-8394,
mooreb@nhlbi.nih.gov.
Name of Committee: National Heart, Lung, and Blood Institute Special Emphasis Panel, Cardiovascular Risk in Diabetes Follow On Study.

Date: August 17, 2010.
Time: 1 p.m. to 3 p.m.
Agenda: To review and evaluate contract proposals.

Place: National Institutes of Health, 6701 Rockledge Drive, Room 7200, Bethesda, MD 20892. (Telephone Conference Call).

Contact Person: Robert Blaine Moore, PhD, Scientific Review Officer, Review Branch/ DERA, National Heart, Lung, and Blood Institute, 6701 Rockledge Drive, Room 7213,

Bethesda, MD 20892, 301-594-8394,
mooreb@nhlbi.nih.gov.
(Catalogue of Federal Domestic Assistance Program Nos. 93.233, National Center for Sleep Disorders Research; 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; 93.839, Blood Diseases and Resources Research, National Institutes of Health, HHS)

Dated: July 16, 2010.
Jennifer Spaeth,
Director, Office of Federal Advisory Committee Policy.
[FR Doc. 2010-17996 Filed 7-21-10; 8:45 am]
BILLING CODE 4140-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## National Institutes of Health

## National Institute on Alcohol Abuse and Alcoholism; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552 b (c)(4) and 552 b (c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable materials, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Advisory Council on Alcohol Abuse and Alcoholism. Date: August 19, 2010.
Time: 1 p.m. to 5:30 p.m.
Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 5635
Fishers Lane, Bethesda, MD 20892
(Telephone Conference Call).
Contact Person: Abraham P. Bautista, PhD, Executive Secretary, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, 5635 Fishers Lane, Room 2085, Rockville, MD 20892, 301-443-9737, bautistaa@mail.nih.gov.

Information is also available on the Institute's/Center's home page: http:/// www.silk.nih.gov/silk/niaaa1/about/ roster.htm, where an agenda and any additional information for the meeting will be posted when available.
(Catalogue of Federal Domestic Assistance Program Nos.: 93.271, Alcohol Research Career Development Awards for Scientists and Clinicians; 93.272, Alcohol National Research Service Awards for Research Training; 93.273, Alcohol Research Programs; 93.891, Alcohol Research Center Grants; 93.701, ARRA Related Biomedical Research

