be scheduled between approximately 10:30 a.m. and 11:30 a.m. on November 2, 2012. Those individuals interested in making formal oral presentations should notify the contact person 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 25, 2012. 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 26, 2012. Interested persons can also log on to https://collaboration.fda.gov/rcac/ to hear and see the proceedings.

Persons attending FDA’s advisory committee meetings are advised that the Agency is not responsible for providing access to electrical outlets.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact Lee L. Zwanziger at least 7 days in advance of the meeting.

FDA is committed to the orderly conduct of its advisory committee meetings. Please visit our Web site at http://www.fda.gov/AdvisoryCommittees/AboutAdvisoryCommittees/ucm111462.htm for procedures on public conduct during advisory committee meetings.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: October 9, 2012.

Jill Hartzer Warner, Acting Associate Commissioner for Special Medical Programs.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Advisory Council on the National Health Service Corps Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), notice is hereby given of the following meeting:

**Name:** National Advisory Council on the National Health Service Corps (NHSC).
**Dates and Times:** November 1, 2012—8:30 a.m.–4:30 p.m., November 2, 2012—8:00 a.m.–12:00 p.m.
**Place:** Health Resources and Services Administration (HRSA), Parklawn Building (and via audio conference call), 5600 Fishers Lane, Room 16–49, Rockville, MD 20857.
**Status:** The meeting will be open to the public.

**Agenda:** The Council is convening in Rockville, Maryland, to hear HRSA and NHSC program updates and discuss NHSC’s retention strategy and inter-agency workforce efforts. A portion of the meeting will be open for public comment and questions on November 2.

The public can join the meeting via audio conference call on the dates and times specified above using the following information: Dial-in number: 1–888–455–9651; Passcode: 7699967.

For Further Information Contact: Njeri Jones, Bureau of Clinician Recruitment and Service, Health Resources and Services Administration, Parklawn Building, Room 13–64, 5600 Fishers Lane, Rockville, Maryland 20857; email: Njones@hrsa.gov; Telephone: 301–443–2541.

Dated: October 5, 2012.

Bahaar Niakan, Director, Division of Policy and Information Coordination.

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Rural Health Network Development Program

**AGENCY:** Health Resources and Services Administration (HRSA), HHS.

**ACTION:** Notice of Non-competitive Replacement Award to Siloam Springs Regional Health Cooperative, Inc.

**SUMMARY:** The Health Resources and Services Administration (HRSA) is issuing a non-competitive replacement award under the Rural Health Network Development Program to the Siloam Springs Regional Health Cooperative, Inc. This non-competitive replacement award will continue activities to improve the treatment and prevention of chronic disease, increase provider knowledge and effective use of health information technology and perform network development activities to ensure the sustainability and viability of a rural health network in order to serve rural, medically underserved residents in rural, northwest Arkansas and northeast Oklahoma.

**SUPPLEMENTARY INFORMATION:**

Former Grantee of Record; ARcare. 
Original Period of Grant Support: May 1, 2011, to April 30, 2014.
Replacement Awardee: Siloam Springs Regional Health Cooperative, Inc.

Amount of Replacement Award: $179,748.

Period of Replacement Award: The period of support for this award is October 1, 2012, to April 30, 2014.

**Authority:** Section 330(a)(1) of the Public Health Service Act (42 U.S.C. 254(c)(1)), as amended.

**Catalog of Federal Domestic Assistance Number:** 93.912.

Justification for the Exception to Competition: The primary goals of the project funded through the Rural Health Network Development Grant Program are to improve the capacity of network members to treat and prevent chronic disease, increase provider knowledge and effective use of health information technology, and strengthen network sustainability. The current grantee, ARcare, was originally awarded the Rural Health Network Development Grant D06RH21666 on May 1, 2011, to serve as the grantee of record representing the rural health network serving counties in northwest Arkansas and northeast Oklahoma. Since May 1, 2011, the Siloam Springs Regional Health Cooperative, Inc. (SSRHC), an organization composed of the participating network members, was primarily responsible for administering the program activities of the Rural Health Network Development Project. SSRHC has now obtained 501(c)3 status; and ARcare notified HRSA that, while they will remain involved in the project, they would like to relinquish their responsibilities as grantee of record to SSRHC to ensure efficient administration of the award and strengthen the Network’s future viability and growth. SSRHC has demonstrated a history of successfully managing and achieving project goals and now has the organizational structure to support the fiscal management responsibilities of the grant. This replacement award will