Transportation Intermediary Applicants:
Interport Company, Inc. dba Interport Lines, 2300 E. Higgins Road, Ste. 312, Elk Grove Village, IL 60007.
Officer: Antonio J. Alvaro, President (Qualifying Individual).
Consolidators International, Inc., dba Corrigan’s Express Freight dba Backstage Cargo USA, 8900 Bellanca Avenue, Los Angeles, CA 90045.
Officer: Ronen Donde, Vice President (Qualifying Individual).

Dated: October 9, 2009.
Tanga S. FitzGibbon,
Assistant Secretary.

[FR Doc. E9–24835 Filed 10–14–09; 8:45 am]
BILLING CODE 6730–01–P

FEDERAL RESERVE SYSTEM

Notice of Proposals to Engage in Permissible Nonbanking Activities or to Acquire Companies that are Engaged in Permissible Nonbanking Activities

The companies listed in this notice have given notice under section 4 of the Bank Holding Company Act (12 U.S.C. 1843) (BHC Act) and Regulation Y (12 CFR Part 225) to engage de novo, or to acquire or control voting securities or assets of a company, including the companies listed below, that engages either directly or through a subsidiary or other company, in a nonbanking activity that is listed in § 225.28 of Regulation Y (12 CFR 225.28) or that the Board has determined by Order to be closely related to banking and permissible for bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act. Additional information on all bank holding companies may be obtained from the National Information Center website at www.ffiec.gov/nic/.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than October 29, 2009.

A. Federal Reserve Bank of Chicago
(Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60604–1414:
1. Iowa Credit Union League, and Affiliates Management Company, both of Clive, Iowa; to acquire 100 percent of the voting shares of The Members Group, Inc., Clive, Iowa, and thereby engage in data processing, real estate leasing, and asset management, servicing, and collection activities, pursuant to sections 225.28(2)(vi), (b)(3), and (b)(14)(i) of Regulation Y.
2. Iowa Credit Union League, and Affiliates Management Company, both of Clive, Iowa; to acquire 53 percent of the voting shares of Community Business Lenders, L.L.C., Clive, Iowa, and thereby engage in extending credit and servicing loans, pursuant to section 225.28(b)(1) of Regulation Y.
3. Iowa Credit Union League, and Affiliates Management Company, both of Clive, Iowa; to acquire 89 percent of the voting shares of TMG Financial Services, Inc., Clive, Iowa, and thereby engage in extending credit and servicing loans, pursuant to section 225.28(b)(1) of Regulation Y.
4. Iowa Credit Union League, and Affiliates Management Company, both of Clive, Iowa; to acquire 90 percent of the voting shares of Coopera Consulting, L.L.C., Clive, Iowa, and thereby engage in community development advisory activities, pursuant to section 225.28(b)(12)(ii) of Regulation Y.

Jennifer J. Johnson,
Secretary of the Board.

[FR Doc. E9–24766 Filed 10–14–09; 8:45 am]
BILLING CODE 6730–01–P

FEDERAL TRADE COMMISSION

Senior Executive Service Performance Review Board

AGENCY: Federal Trade Commission.
ACTION: Notice.

SUMMARY: Notice is hereby given of the appointment of members to the Federal Trade Commission’s Performance Review Board.

FOR FURTHER INFORMATION CONTACT: Karen Leydon, Director of Human Resources, 600 Pennsylvania Avenue NW, Washington, DC 20580, (202) 326–3633.

SUPPLEMENTARY INFORMATION:
Publication of the Performance Review Board (PRB) membership is required by 5 U.S.C. 4314 (c)(4). The PRB reviews and evaluates the initial appraisal of a senior executive’s performance by the supervisor, and makes recommendations regarding performance ratings, performance awards, and pay-for-performance pay adjustments to the Chairman.

The following individuals have been designated to serve on the Commission’s Performance Review Board:
• Charles H. Schneider, Executive Director, Chairman
• Willard K. Tom, General Counsel
• Pauline M. Ippolito, Deputy Director, Bureau of Economics

By direction of the Commission.

Donald S. Clark
Secretary

BILLING CODE 6750–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General; Notice for Potential Monitors for Quality-of-Care Corporate Integrity Agreements

ACTION: Notice.

SUMMARY: The Office of Inspector General (OIG) is seeking to identify potential organizations to monitor health care entities under quality-of-care Corporate Integrity Agreements (CIA) with OIG. OIG is interested in receiving information from organizations that believe they have the capability to be monitors for quality-of-care CIs. This is not a request for proposals and does not commit OIG to select or consider a particular organization to be a monitor. Any information provided to OIG in response to this notice is strictly voluntary. The Government will not pay for information submitted in response to this notice.

DATES: Responses may be submitted on an ongoing basis.

ADDRESSES: Please mail or deliver any response to the following address: Office of Counsel to the Inspector General, Department of Health and Human Services, Room 5527, Cohen Building, 330 Independence Avenue, SW., Washington, DC 20201. Prominently identify the title of notice on the first page of any submitted response. Electronic responses may be sent to imnotice@oig.hhs.gov.

FOR FURTHER INFORMATION CONTACT: Katie A. Arnholt, Senior Counsel, Office of Counsel to the Inspector General, (202) 265–3203, or katie.arnholt@oig.hhs.gov.

SUPPLEMENTARY INFORMATION:
Background
OIG often negotiates compliance obligations with health care providers
and other entities as part of the settlement of Federal health care program fraud investigations arising under civil and administrative false claims statutes. These obligations are set forth in a CIA. A provider or an entity consents to a CIA in conjunction with a civil or administrative settlement and in exchange for OIG’s agreement not to seek to exclude that health care provider or entity from participation in Medicare, Medicaid, and other Federal health care programs under 42 U.S.C. 1320a–7. False claims submitted in violation of the False Claims Act or Civil Monetary Penalties Law give rise to OIG’s permissive exclusion authority under 42 U.S.C. 1320a–7(b)(7).

The typical term of a CIA is 5 years. CIAs seek to ensure the integrity of Federal health care program claims submitted by the provider. CIAs generally include requirements to, among other things: (1) Hire a compliance officer; (2) appoint a compliance committee; (3) develop written standards and policies; (4) implement a comprehensive employee training program; (5) establish a confidential disclosure program; (6) restrict employment of ineligible persons; (7) report overpayments, reportable events, and ongoing investigations/legal proceedings; and (8) provide an implementation report and annual reports to OIG on the status of the entity’s compliance activities.

When resolving cases that involve quality-of-care allegations, OIG often requires health care providers to enter into quality-of-care CIAs. OIG may enter into quality-of-care CIAs with many different types of health care providers, including, but not limited to, skilled nursing facilities, assisted-living facilities, psychiatric facilities, intermediate care facilities for the mentally retarded, hospitals, physician practices, dental practices, and management companies. Under these quality-of-care CIAs, health care providers agree to compliance obligations that include quality assurance and improvement. One such obligation is to retain an appropriately qualified monitor, which is appointed by OIG after consultation with the health care provider. The monitor selected contracts directly with the provider. The monitor does not enter into any contractual relationship with OIG or act as an agent for OIG.

The monitor typically is responsible for assessing the effectiveness, reliability, and thoroughness of the provider’s: (1) Internal quality control systems; (2) procedures to quality-of-care issues; (3) development and implementation of corrective action plans and the timeliness of such actions; (4) proactive steps to ensure that each patient receives care in accordance with basic care, treatment, and protection—harm standards; the governing regulations; and the policies and procedures required to be adopted under the CIA; and (5) in residential settings, compliance with staffing requirements. In making these assessments, the monitor conducts site visits, analyzes available data, observes facility and corporate-level committee meetings, and reviews relevant documents. The monitor submits regular written reports to the provider and OIG.

Responses to This Notice

OIG is interested in hearing from organizations that believe they have the capability to be a monitor for quality-of-care CIAs. Please include in any response to this notice the following:

1. The name of the organization;
2. The size and location(s) of the organization;
3. The qualifications of the organization to serve as a monitor for quality-of-care CIAs;
4. The organization’s capacity to monitor large providers with locations in multiple States;
5. The organization’s clinical experience and expertise;
6. The organization’s experience with quality assessment, assurance, and improvement;
7. The organization’s prior monitoring experience, including, but not limited to, systems reviews and auditing; and
8. An indication of whether the organization has any current or prior (within the last 5 years) Federal Government contracts or is on any General Services Administration or HHS list of approved contractors.

OIG will review each response submitted to this notice to assess whether the organization may be appropriate to serve as a monitor for quality-of-care CIAs. The assessment will not be for the purpose of making any definitive determination regarding whether a particular organization is qualified to be a monitor or creating a list of pre-approved monitors. Factors that OIG considers when assessing whether an organization may be an appropriate monitor for a particular CIA include, among other things, the organization’s clinical expertise, capacity to handle a particular monitoring relationship, quality monitoring experience, geographic location, and independence and objectivity. Each provider and quality-of-care CIA is unique. Accordingly, the selection of an appropriate monitor for any given quality-of-care CIA requires consideration of unique and individualized factors. In order to select an appropriate monitor for any individual quality-of-care CIA, OIG may contact an organization that submitted information in response to this notice to request additional information. In selecting a monitor, OIG will not be limited to organizations that submitted information in response to this notice.

Any organization submitting information in response to this notice should identify any information that it believes is trade secret, or commercial or financial information, and privileged or confidential under exemption four of the Freedom of Information Act (FOIA). Consistent with the HHS FOIA regulations, set forth in 45 CFR Part 5, when OIG receives a request for such records and OIG determines that OIG may be required to disclose them, OIG will make reasonable efforts to notify the organization about these facts.

Daniel R. Levinson, Inspector General.
[FR Doc. E9–24715 Filed 10–14–09; 8:45 am]
BILLING CODE 4152–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2009–N–0483]

Agency Information Collection Activities; Proposed Collection; Comment Request; Medical Device User Fee Cover Sheet; Form FDA 3601

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing an opportunity for public comment on the proposed collection of certain information by the agency. 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 of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on Form FDA 3601 entitled “Medical Device User Fee Cover Sheet,” which must be submitted along with certain medical device product applications, supplements, and fee payment of those applications.