noted, nonbanking activities will be conducted throughout the United States.

unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than November 26, 2010.

A. Federal Reserve Bank of Chicago (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 6060-1414:

1. Peeples Bancorp, Inc., Prairie du Chien, Wisconsin; to acquire 100 percent of the voting shares of Woodhouse & Bartley Bank, Bloomington, Wisconsin.

B. Federal Reserve Bank of Kansas City (Dennis Denney, Assistant Vice President) 1 Memorial Drive, Kansas City, Missouri 64118-0001:

1. Exchange Bancorp of Missouri, Inc., Fayette, Missouri; to become a bank holding company by acquiring 100 percent of the voting shares of Woodhouse & Bartley Bank, Bloomington, Wisconsin.

C. Federal Reserve Bank of Baltimore, Maryland (Karen V. Gregory, Assistant Vice President) 1 Memorial Drive, Baltimore, MD 21201:

1. Baltimore Marine Terminal Association; to acquire 100 percent of the voting shares of Exchange Bancorp of Missouri, Inc., Fayette, Missouri.

By Order of the Federal Maritime Commission.


Karen V. Gregory,
Secretary.

[FR Doc. 2010-27777 Filed 11-2-10; 8:45 am]

BILLING CODE 6210-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Current List of Laboratories and Instrumented Initial Testing Facilities Which Meet Minimum Standards To Engage in Urine Drug Testing for Federal Agencies

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice.

SUMMARY: The Department of Health and Human Services (HHS) notifies Federal agencies of the Laboratories and Instrumented Initial Testing Facilities (IITF) currently certified to meet the standards of the Mandatory Guidelines for Federal Workplace Drug Testing Programs (Mandatory Guidelines). The Mandatory Guidelines were first published in the Federal Register on April 11, 1988 (53 FR 11970), and subsequently revised in the Federal Register on June 9, 1994 (59 FR 29908); September 30, 1997 (62 FR 51118); April 13, 2004 (69 FR 16444); November 25, 2008 (73 FR 71522); and on April 30, 2010 (75 FR 22809).

A notice listing all currently certified Laboratories and Instrumented Initial Testing Facilities (IITF) is published in the Federal Register during the first week of each month. If any Laboratory/IITF’s certification is suspended or revoked, the Laboratory/IITF will be omitted from subsequent lists until such time as it is restored to full certification under the Mandatory Guidelines. If any Laboratory/IITF has withdrawn from the HHS National Laboratory Certification Program (NLCP) during the past month, it will be listed at the end and will be omitted from the monthly listing thereafter.

This notice is also available on the Internet at http://www.workplace.samhsa.gov and http://www.drugfreeworkplace.gov.

FOR FURTHER INFORMATION CONTACT: Mrs. Giselle Hersh, Division of Workplace Programs, SAMHSA/CAPS, Room 2-1042, One Choke Cherry Road, Rockville, Maryland 20857; 240–276–2600 (voice), 240–276–2610 (fax).
SUPPLEMENTARY INFORMATION: The Mandatory Guidelines were initially developed in accordance with Executive Order 12564 and section 503 of Public Law 100–71. The “Mandatory Guidelines for Federal Workplace Drug Testing Programs,” as amended in the revisions listed above, requires [or set] strict standards that Laboratories and Instrumented Initial Testing Facilities (IITF) must meet in order to conduct drug and specimen validity tests on urine specimens for Federal agencies.

To become certified, an applicant Laboratory/IITF must undergo three rounds of performance testing plus an on-site inspection. To maintain that certification, a Laboratory/IITF must participate in a quarterly performance testing program plus undergo periodic, on-site inspections.

Laboratories and Instrumented Initial Testing Facilities (IITF) in the applicant stage of certification are not to be considered as meeting the minimum requirements described in the HHS Mandatory Guidelines. A Laboratory/IITF must have its letter of certification from HHS/SAMHSA (formerly: HHS/NIDA) which attests that it has met minimum standards. In accordance with the Mandatory Guidelines dated November 25, 2008 (73 FR 71858), the following Laboratories and Instrumented Initial Testing Facilities (IITF) meet the minimum standards to conduct drug and specimen validity tests on urine specimens:

Instrumented Initial Testing Facilities (IITF):

None.

Laboratories:

ACL Laboratories, 8901 W. Lincoln Ave., West Allis, WI 53227, 414–328–7840/800–877–7016 (Formerly: Bayshore Clinical Laboratory).


Aegis Analytical Laboratories, 345 Hill Ave., Nashville, TN 37210, 615–255–2400 (Formerly: Aegis Sciences Corporation, Aegis Analytical Laboratories, Inc.).

Alere Toxicology Services, 1111 Newton St., Gretna, LA 70053, 504–361–8989/800–433–3823 (Formerly: Kroll Laboratory Specialists, Inc., Kroll Laboratory Specialists, Inc.).


Baptist Medical Center-Toxicology Laboratory, 11401 I–30, Little Rock, AR 72209–7056, 501–202–2783 (Formerly: Forensic Toxicology Laboratory Baptist Medical Center).

Clinical Reference Lab, 8433 Quivira Road, Lenexa, KS 66215–2802, 800–445–9617.

Doctors Laboratory, Inc., 2906 Julia Drive, Valdosta, GA 31602, 229–671–2281.

DrugScan, Inc., P.O. Box 2969, 1119 Mearns Road, Warminster, PA 18974, 215–674–9310.


Laboratory Corporation of America Holdings, 7207 N. Gessner Road, Houston, TX 77040, 713–856–8288/800–800–2387.

Laboratory Corporation of America Holdings, 69 First Ave., Raritan, NJ 08869, 908–528–2400/800–437–4986 (Formerly: Roche Biomedical Laboratories, Inc.).


Laboratory Corporation of America Holdings, 1120 Main Street, Southaven, MS 38671, 866–827–8042/800–233–6339 (Formerly: LabCorp Occupational Testing Services, Inc.; MedExpress/National Laboratory Center).

LabOne, Inc. d/b/a Quest Diagnostics Incorporated, 10101 Renner Blvd., Lenexa, KS 66219, 913–888–3927/800–873–8845 (Formerly: Quest Diagnostics Incorporated; LabOne, Inc.; Center for Laboratory Services, a Division of LabOne, Inc., Inc.).

Maxxam Analytics*, 6740 Campobello Road, Mississauga, ON, Canada L5N 2L8, 905–817–5700 (Formerly: Maxxam Analytics Inc., NOVAMANN (Ontario), Inc.).


MetroLab-Legacy Laboratory Services, 1225 NE 2nd Ave., Portland, OR 97232, 503–413–5295/800–950–5295.

Minneapolis Veterans Affairs Medical Center, Forensic Toxicology Laboratory, 1 Veterans Drive, Minneapolis, MN 55417, 612–725–2088.


One Source Toxicology Laboratory, Inc., 1213 Genoa-Red Bluff, Pasadena, TX 77504, 888–747–3774 (Formerly: University of Texas Medical Branch, Clinical Chemistry Division: UTMB Pathology-Toxicology Laboratory).

Pacific Toxicology Laboratories, 9348 DeSoto Ave., Chatsworth, CA 91311, 800–328–6942 (Formerly: Centinela Hospital Airport Toxicology Laboratory).


Phamatech, Inc., 10151 Barnes Canyon Road, San Diego, CA 92121, 858–643–5555.


Quest Diagnostics Incorporated, 8401 Fallbrook Ave., West Hills, CA 91304, 800–877–2520 (Formerly: SmithKline Beecham Clinical Laboratories).


South Bend Medical Foundation, Inc., 530 N. Lafayette Blvd., South Bend, IN 46601, 574–234–4176 x1276.


St. Anthony Hospital Toxicology Laboratory, 1000 N. Lee St., Oklahoma City, OK 73101, 405–272–7052.


Toxicology & Drug Monitoring Laboratory, University of Missouri Hospital & Clinics, 301 Business Loop 70 West, Suite 208, Columbia, MO 65203, 573–882–1273.
US Army Forensic Toxicology Drug Testing Laboratory, 2490 Wilson St., Fort George G. Meade, MD 20755–5235, 301–677–7085.
*The Standards Council of Canada (SCC) voted to end its Laboratory Accreditation Program for Substance Abuse (LAPSA) effective May 12, 1998. Laboratories certified through that program were accredited to conduct forensic urine drug testing as required by U.S. Department of Transportation (DOT) regulations. Of that date, the certification of those accredited Canadian laboratories will continue under DOT authority. The responsibility for conducting quarterly performance testing plus periodic on-site inspections of those LAPSA-accredited laboratories was transferred to the U.S. HHS, with the HHS’ NLCP contractor continuing to have an active role in the performance testing and laboratory inspection processes. Other Canadian laboratories wishing to be considered for the NLCP may apply directly to the NLCP contractor just as U.S. laboratories do.

Upon finding a Canadian laboratory to be qualified, HHS will recommend that DOT certify the laboratory (Federal Register, July 16, 1996) as meeting the minimum standards of the Mandatory Guidelines published in the Federal Register on April 30, 2010 (75 FR 22809). After receiving DOT certification, the laboratory will be included in the monthly list of HHS-certified laboratories and participate in the NLCP certification maintenance program.

Elaine Parry,
Director, Office of Management, Technology, and Operations, SAMHSA.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services
[CMS–5055–N]
Medicare Program: Community-Based Care Transitions Program (CCTP) Meeting
AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.
ACTION: Notice of meeting.
SUMMARY: This notice announces a public conference hosted by CMS. This conference will provide a forum for community-based organizations, hospitals, Quality Improvement Organizations, Administration on Aging grantees, and other healthcare providers to receive useful guidance and ask questions about the upcoming Community-based Care Transitions Program. The meeting is open to the public, but attendance is limited to space and Webinar lines available.

DATES: Meeting Date: Friday, December 3, 2010, from 8 a.m. to 4 p.m., eastern standard time (e.s.t.).
Deadline for Webinar or Web-based Registration: Thursday, December 2, 2010, 8 a.m., e.s.t.
Deadline for Meeting Registration: Friday, November 19, 2010, 4 p.m., e.s.t.
Limited walk-in registration may be available the evening prior to the conference and the morning of the conference as space permits.

ADDRESSES: Meeting Location: Marriott Waterfront Hotel, 700 Aliceanna Street, Baltimore, MD 21202.
Registration: The meeting is open to the public, but attendance is limited to space and Webinar lines available. A link to the agenda and registration information will be posted on the CMS Care Transitions Web site at http://www.cms.gov/DemoProjectsEvalRpts/MD/itemdetail.asp?itemID=CMS1239313 as soon as it is available. Persons wishing to attend this meeting in person or via Webinar are encouraged to register in advance.
Special Accommodations: Individuals who require special accommodations should send an e-mail request to CareTransitions@cms.hhs.gov or via regular mail to the address specified in the FOR FURTHER INFORMATION CONTACT section of this notice. Presentation materials will be posted on the CMS Care Transitions Web site prior to the meeting.

FOR FURTHER INFORMATION CONTACT: Juliana Tiongson, Social Science Research Analyst, Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore, MD 21244–1850, Mail Stop C4–14–15, telephone 410–786–0342 or e-mail Juliana.Tiongson@cms.hhs.gov.
SUPPLEMENTARY INFORMATION:
I. Background
Community-based organizations (CBOs) are defined in the statute as community-based organizations that provide care transition services across a continuum of care through arrangements with subsection (d) hospitals (as defined in section 1886(d)(1)(B) of the Social Security Act) and whose governing body includes sufficient representation of multiple health care stakeholders, including consumers. Experts in the field will present evidence-based care transition models, and lessons learned from participation in the Quality Improvement Organizations’ (QIOs) 9th scope of work care transitions sub-national theme and related initiatives. Healthcare leaders will present broader, hospital-based interventions to reduce readmissions, as well as the positive financial implications of successfully reducing readmissions. This conference will also provide an overview of the Community-based Care Transitions Program (CCTP) and provide the opportunity for hospitals to connect with CBOs in their communities. Once a solicitation for the CCTP is published, proposals will be accepted on a rolling quarterly basis beginning in early 2011.

II. Meeting Agenda
The agenda for the December 3, 2010 meeting will include the following topic areas:
- Overview of the CCTP under section 3026 of the Affordable Care Act.
- The Business Case for Improving Care Transitions.
- Building Community Support and Root Cause Analysis.
- Overview of Care Transition Interventions.
- Implementation of Care Transition Interventions—Successes and Challenges.

Authority: Section 3026 of the Affordable Care Act
Donald M. Berwick,
Administrator, Centers for Medicare & Medicaid Services.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health
Center for Scientific Review; Amended Notice of Meeting
Notice is hereby given of a change in the meeting of the Center for Scientific Review Special Emphasis Panel, November 18, 2010, 2 p.m. to November 18, 2010, 4 p.m., National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892 which was published in the Federal Register on October 25, 2010, 75 FR 65498–65499.
The meeting title has been changed to “RFA Panel: Translational Research in Pediatric and Obstetric Pharmacology”. The meeting is closed to the public.