FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 et seq.) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below. The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank noted. The application also will be made available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the standards in section 4 of the BHC Act. The review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States.

In connection with this application, Applicant also has applied to acquire Nikko Am Americas Holding Co., Inc., Nikko Asset Management Americas, Inc., and Cho Mitsui Investment, all in New York, New York, and thereby engage in investment advisory activities, pursuant to section 225.24(b)(6) of Regulation Y.


Robert DeV. Frierson, Deputy Secretary of the Board.

FEDERAL RESERVE SYSTEM

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Adjustments for Disaster-Recovery States to the Fourth Quarter of Fiscal Year 2011 and Fiscal Year 2012 Federal Medical Assistance Percentage (FMAP) Rates for Federal Matching Shares for Medicaid and Title IV–E Foster Care, Adoption Assistance and Guardianship Assistance Programs

AGENCY: Office of the Secretary, DHHS.

ACTION: Notice.

SUMMARY: This notice describes the methodology for calculating the higher federal matching funding that is made available under section 1905(aa) of the Social Security Act, as amended by section 2006 of the Patient Protection and Affordable Care Act of 2010 (“Affordable Care Act”) and provides the adjusted Federal Medical Assistance Percentage (FMAP) rates for the fourth quarter of Fiscal Year 2011 and Fiscal Year 2012 for disaster-recovery FMAP adjustment states. Section 1905(aa) of the Social Security Act provides for an increase in the FMAP rate for qualifying states that have experienced a major, statewide disaster.

DATES: Effective Date: The percentages listed are for the fourth quarter of Fiscal Year 2011 beginning July 1, 2011 and ending September 30, 2011, and for Fiscal Year 2012.

A. Background

The Federal Medical Assistance Percentage (FMAP) is used to determine the amount of Federal matching for specified State expenditures for assistance payments under programs under the Social Security Act. Sections 1905(b) and 1101(a)(8)(B) of the Social Security Act (“the Act”) require the Secretary of Health and Human Services to publish the FMAP rates each year. The Secretary calculates the percentages, using formulas set forth in
sections 1905(b) and 1101(a)(8)(B), from
the Department of Commerce’s statistics
of average income per person in each
State and for the Nation as a whole. The
percentages must be within the upper
and lower limits given in section
1905(b) of the Act. The percentages to
be applied to the District of Columbia,
Puerto Rico, the Virgin Islands, Guam,
American Samoa, and the Northern
Mariana Islands are specified in statute,
and thus are not based on the statutory
formula that determines the percentages
for the 50 States.
Section 1905(b) of the Social Security
Act specifies the formula for calculating
FMAP as follows:
The FMAP for any State shall be 100 per
centum less the State percentage; and the
State percentage shall be that percentage
which bears the same ratio to 45 per centum
as the square of the per capita income of such
State bears to the square of the per capita
income of the continental United States
(including Alaska and Hawaii): except that
(1) the FMAP shall in no case be less than
50 per centum or more than 85 per centum,
and (2) the FMAP for Puerto Rico, the Virgin
Islands, Guam, the Northern Marianas Islands,
and American Samoa shall be 50 per centum.
Section 4725 of the Balanced Budget Act of
1997 amended section 1905(b) to provide
that the FMAP for the District of Columbia
for purposes of titles XIX (Medicaid) and XXI
(CHIP) shall be 70 percent.
Section 2006 of the Patient Protection
and Affordable Care Act of 2010
(“Affordable Care Act”) amended section
1905 of the Social Security Act by
adding section (aa) to provide for an
increase in the FMAP rate for qualifying
states for Medicaid and title IV–E Foster
Care, Adoption Assistance and
Guardianship Assistance programs. The
purpose of the increase to the FMAP
rate is to provide increased Federal
financial participation for qualifying
states that have experienced a major,
statewide disaster.
B. Definition of a Disaster-Recovery
FMAP Adjustment State
Section 1905(aa) of the Social
Security Act, as added by section 2006
of the Affordable Care Act specifies that
the annual FMAP rate shall be increased
for a “disaster-recovery FMAP
adjustment state.” The statute defines a
“disaster-recovery FMAP adjustment
state” as one of the 50 states or District
of Columbia for which, at any time
during the preceding 7 fiscal years, the
President has declared a major disaster
under section 401 of the Robert T.
Stafford Disaster Relief and Emergency
Assistance Act under which every
county or parish in the state is eligible
for individual or public or public
assistance from the federal government,
and for which the FMAP as determined
for the fiscal year is less than the FMAP
for the preceding fiscal year by at least
three percentage points. For Fiscal Year
2011 (FY11), the first fiscal year in
which a state can qualify for the disaster
adjustment, the FMAP for FY11 must be
less than the FMAP for the preceding
fiscal year after the application of the
“hold harmless” provision under
subsection (a) of Section 5001 of the
American Recovery and Reinvestment
Act of 2009 (ARRA) (Pub. L. 111–5), by
at least three percentage points. For
Fiscal Year 2012 (FY12) and beyond, the
FMAP rate for the state for the fiscal
year, as determined based on the annual
FMAP calculation (without regard to
section 1905(aa)), must be less than the
preceding year FMAP rate, including
the applicable disaster-recovery
adjustment, by at least three percentage
points.
C. Calculation of the Increased FMAP
Rates for Disaster-Recovery FMAP
Adjustment States
For the first year in which a state
qualifies for the disaster-recovery FMAP
adjustment, the FMAP shall be equal to
the FMAP as determined for the fiscal
year, plus 50% of the number of
percentage points by which the FMAP
is less than the preceding fiscal year
FMAP. For FY11, the preceding fiscal
year FMAP includes the application of
the “hold harmless” provision under
subsection (a) of Section 5001 of the
ARRA. In year two or any succeeding
fiscal year in the qualifying 7-year
period, the FMAP shall be equal to the
FMAP as determined for the preceding
fiscal year, including any disaster-
recovery adjustment for that year, plus
25% of the number of percentage points
by which the FMAP as determined for the
fiscal year (without any disaster-
recovery adjustment) is less than the
FMAP for the previous year (including
any applicable disaster-recovery
adjustments).
Expenditures for which the increased
FMAP is not available under title XIX
include expenditures for
proportionate share hospital
payments and expenditures that are
paid at an enhanced FMAP rate, as well
as any payments made under title XXI.
The increased FMAP is available for
expenditures under part E of title IV
only.
Disaster-recovery FMAP adjustments
will be included in the annual
publication of the FMAP rates for the
succeeding fiscal year. Beginning in the
fall of 2011, the annual Federal Register
Notice will include the FMAP rates for
the succeeding fiscal year, as well as
disaster-recovery adjustments to the
FMAP rates.
D. Disaster-Recovery FMAP
Adjustments for the Fourth Quarter
of Fiscal Year 2011 and Fiscal Year 2012
The application of the disaster-
recovery FMAP adjustment is effective
January 1, 2011. Due to the
implementation of the ARRA FMAP adjustments, which
extended the recession adjustment
period to June 30, 2011 (the end of the
third quarter of FY11), no state will
qualify for the disaster-recovery
adjustment until the fourth quarter of
FY11. As such, any adjustments that are
made to the FY11 FMAP rates are
effective for the fourth fiscal quarter
only. Disaster-recovery FMAP
adjustments made in future fiscal years
will be applicable for all four quarters
of the year.
Based on the criteria for a qualifying
state, only three states meet the
requirement that the FMAP as
determined for FY11 is less than the
previous year FMAP, after the
application of subsection (a) of Section
5001 of the ARRA, by at least three
percentage points. Of the three states,
only one state, Louisiana, has had a
presidential disaster declaration that
applies to all counties and parishes
within the state in the preceding 7 fiscal
years. Therefore, this notice only
provides a disaster-recovery FMAP
adjustment for the state of Louisiana for
fourth quarter of FY11. The
disaster-recovery adjusted FMAP rate is shown
in the accompanying table.
Based on the criteria for a qualifying
state, only two states meet the
requirement that the FMAP as
determined for FY12 is less than the
previous year FMAP by at least three
percentage points. Of the two states,
only one state, Louisiana, has had a
presidential disaster declaration that
applies to all counties and parishes
within the state in the preceding 7 fiscal
years. Therefore, this notice only
provides a disaster-recovery FMAP
adjustment for the state of Louisiana for
FY12. The disaster-recovery adjusted
FMAP rate is shown in the
accompanying table. This is the second
fiscal year for which Louisiana has
qualified for the disaster-recovery
adjustment; the adjusted FMAP rate for
FY12 reflects the calculation as
prescribed in statute for succeeding
qualifying years.
FURTHER INFORMATION CONTACT:
Carrie Shelton, 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.
(Catalog of Federal Domestic Assistance
Program Nos. 93.638: Foster Care; 93.659:
Adoption Assistance; 93.090: Guardianship Assistance; 93.778: Medical Assistance Program)

Dated: November 12, 2010.

Kathleen Sebelius,
Secretary.

FISCAL YEAR 2011 (Q4) DISASTER-RECOVERY ADJUSTED FMAP RATES

<table>
<thead>
<tr>
<th>State</th>
<th>FY11 FMAP</th>
<th>ARRA Hold harmless FY 08–10 FMAP</th>
<th>Decrease in FMAP</th>
<th>Disaster-recovery adjusted FMAP FY11 (Q4)</th>
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<tr>
<td>Louisiana</td>
<td>63.61</td>
<td>72.47</td>
<td>8.86</td>
<td>68.04</td>
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</table>

FISCAL YEAR 2012 DISASTER-RECOVERY ADJUSTED FMAP RATES

<table>
<thead>
<tr>
<th>State</th>
<th>FY12 FMAP</th>
<th>FY11 FMAP/Disaster recovery adjusted FMAP</th>
<th>Decrease in FMAP</th>
<th>Disaster-recovery adjusted FMAP FY12</th>
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</thead>
<tbody>
<tr>
<td>Louisiana</td>
<td>61.09</td>
<td>68.04</td>
<td>6.95</td>
<td>69.78</td>
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</tbody>
</table>

[FR Doc. 2010–32054 Filed 12–21–10; 8:45 am]
BILLING CODE 4150–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier CMS–10321]

Emergency Clearance; Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Office of Consumer Information and Insurance Oversight, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of Consumer Information and Insurance Oversight (OCIIO), the U.S. Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (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. We are, however, requesting an emergency review to ensure compliance with an initiative of the Administration.

1. Type of Information Collection Request: Revision of a currently approved collection; Title of Information Collection: Early Retiree Reinsurance Program; Use: Under the Section 1102 of the Affordable Care Act and implementing regulations at 45 CFR Part 149, employment-based plans that offer health benefits to early retirees and their spouses, surviving spouses and dependents are eligible under a temporary program to receive a tax-free reimbursement for the costs of certain health benefits for such individuals. In order to qualify, plan sponsors must submit a complete application to the HHS. In order to receive reimbursement under the program, they must also submit documentation of actual costs for health care benefits, which consists of documentation of actual costs for the items and services involved, and a list of individuals to whom the documentation applies. Once HHS reviews and analyzes the information on the application, notification will be sent to the plan sponsor about its eligibility to participate in the program. Once HHS reviews and analyzes each reimbursement request, reimbursement under the program will be made to the sponsor, as appropriate. Form Number: CMS–10321 (OMB–0938–1087); Frequency: Occasionally; Affected Public: Private Sector; Business or other for-profits and Not-for-profit institutions; State, Local, or Tribal Governments; Number of Respondents: 13,200; Number of Responses: 71,330; Total Annual Hours: 1,927,575. [For policy questions regarding this collection, contact Dave Mlawsky at (410) 786–6851. For all other issues call (410) 786–1326.]

OCIIO is requesting OMB approval by January 3, 2011, with a 180-day approval period. Written comments and recommendations will be considered from the public if received by the individuals designated below by January 3, 2011.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections references above, access CMS’ Web site address at http://www.cms.hhs.gov/PaperworkReductionActof1995 or E-mail your request, including your address, phone number, OMB Number, and CMS document identifier to Paperwork@cms.hhs.gov, or call the Reports Clearance Office on (410) 786–1326.

Interested parties are invited to send comments regarding the burden or any other aspect of these collections of information requirements. To be assured consideration, comments and recommendations must be submitted in one of the following ways by January 3, 2011:

1. Electronically. You may submit your comments electronically to http://Regulations.gov. Follow the instructions for “Comment or Submission” or “More Search Options” to find the information collection document(s) accepting comments.

2. By regular mail. Office of Consumer Information and Insurance Oversight, Department of Health and Human Services, Attention: Paperwork Reduction Act, Room 445–C, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201. Please allow sufficient time for mailed comments to be received before the close of the comment period. (Because access to the interior of the Hubert H. Humphrey Building is not readily available to persons without Federal government identification, commenters are encouraged to leave their comments in the OCIIO drop slots located in the