

of, or the power to vote shares of a savings association and nonbanking companies owned by the savings and loan 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 indicated. The application also will be 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 HOLA (12 U.S.C. 1467a(e)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 10(c)(4)(B) of the HOLA (12 U.S.C. 1467a(c)(4)(B)). Unless otherwise 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 July 15, 2013.

A. Federal Reserve Bank of Philadelphia (William Lang, Senior Vice President) 100 North 6th Street, Philadelphia, Pennsylvania 19105–1521:

1. *Delanco, MHC, Delanco, New Jersey*, proposes to convert to stock form and merge with and into Delanco Bancorp, Inc., Delanco, New Jersey, which proposes to become a savings and loan holding company by acquiring Delanco Federal Savings Bank, Delanco, New Jersey.

B. Federal Reserve Bank of Chicago (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690–1414:

1. *Lampighter Financial, MHC*, a federally chartered mutual holding company, to convert to stock form and merge with Waterstone Financial, Inc., a federal corporation, both in Wauwatosa, Wisconsin. Waterstone Financial, Inc. will be merged into a new Maryland corporation named Waterstone Financial, Inc., which proposes to become a savings and loan holding company by acquiring 100 percent of the voting shares of WaterStone Bank SSB, a Wisconsin stock savings bank.

Board of Governors of the Federal Reserve System, June 13, 2013.

**Margaret McCloskey Shanks,**  
*Deputy Secretary of the Board.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the Secretary

[Document Identifier HHS–OS–18774–30D]

### Agency Information Collection Activities; Submission to OMB for Review and Approval; Public Comment Request

**AGENCY:** Office of the Secretary, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Office of the Assistant Secretary for Planning and Evaluation (ASPE), Department of Health and Human Services, has submitted an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB) for review and approval. The ICR is for a new collection. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public on this ICR during the review and approval period.

**DATES:** Comments on the ICR must be received on or before July 19, 2013.

**ADDRESSES:** Submit your comments to *OIRA\_submission@omb.eop.gov* or via facsimile to (202) 395–5806.

**FOR FURTHER INFORMATION CONTACT:** Information Collection Clearance staff, *Information.CollectionClearance@hhs.gov* or (202) 690–6162.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the Information Collection Request Title and document identifier HHS–ASPE–18774–30D for reference.

*Information Collection Request Title:* Survey of Physician Time Use Patterns Under the Medicare Fee Schedule

*Abstract:* The objectives of this study are to conduct initial exploration of the time inputs to the Medicare Fee Schedule. The information, to be collected through primary data collection and analysis of administrative data, will help Assistant Secretary Planning and Evaluation (ASPE) to better understand—for a limited number of services and specialties—one aspect of how clinical services are delivered and the relationships between the clinical time spent by physicians and the time that is currently part of the fee schedule. The total average burden hours for which we are seeking approval in this package is 200 hours. The survey will be multi-mode, with 50% of

responses anticipated via the web survey, 45% through the mail, and 5% over the phone. The latter will be obtained by interviewers who conduct a follow up with non-respondents by telephone to prompt completion of the survey; they will provide an opportunity to complete the paper survey over the phone. The surveys are estimated to take an average of 20 minutes to complete. Need and Proposed Use of the Information: The intended data collection effort is a survey of physician providers in five specialties (family medicine, radiology, cardiology, ophthalmology, and orthopedics) to gather information on the clinical time spent by the physician and associated non-physician providers in providing selected services as well as related information on the physician's practice. The information collected focuses on the time data that is used as an input in the fee schedule. As part of the project, the time data collected in the survey of physicians will be analyzed along with time input data from the fee schedule to examine (i) the strength of the correlation between physician-reported clinical time and fee-schedule time values for surveyed services; (ii) how consistent the relationships are across services and across specialties; (iii) whether the relationships vary across physicians in different types of practice settings; and (iv) whether this approach to gathering time data is feasible and could be scaled up for a larger effort.

*Likely Respondents:* A total of 600 physicians are expected to complete the survey. This includes 120 primary care physicians and 480 specialists including Ophthalmologists, Orthopedists, Radiologists, and Cardiologists.

*Burden Statement:* Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions, to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information, to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information, and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

## TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Primary Care .....	120	1	20/60	40
Specialists .....	480	1	20/60	160
Total .....	600	600	200	200

**Darius Taylor,**

*Deputy Information Collection Clearance Officer.*

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**BILLING CODE 4150-05-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Meeting of the Advisory Committee on Minority Health

**AGENCY:** Office of Minority Health, Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice of meeting.

**SUMMARY:** As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (DHHS) is hereby giving notice that the Advisory Committee on Minority Health (ACMH) will hold a meeting. This meeting will be open to the public. Preregistration is required for both public attendance and comment. Any individual who wishes to attend the meetings and/or participate in the public comment session should email [acmh@osophs.dhhs.gov](mailto:acmh@osophs.dhhs.gov).

**DATES:** The meeting will be held on Tuesday, July 9, 2013, from 9:00 a.m. to 5:00 p.m. (EST) and Wednesday, July 10, 2013, from 9:00 a.m. to 1:00 p.m. (EST).

**ADDRESSES:** The meeting will be held at the Doubletree Hotel, 1515 Rhode Island Avenue NW., Washington, DC 20005.

**FOR FURTHER INFORMATION CONTACT:** Ms. Monica A. Baltimore, Tower Building, 1101 Wootton Parkway, Suite 600, Rockville, Maryland 20852. Phone: 240-453-2882, Fax: 240-453-2883.

**SUPPLEMENTARY INFORMATION:** In accordance with Public Law 105-392, the ACMH was established to provide advice to the Deputy Assistant Secretary for Minority Health in improving the health of each racial and ethnic minority group and on the development of goals and specific program activities of the Office of Minority Health.

Topics to be discussed during these meetings will include strategies to

improve the health of racial and ethnic minority populations through the development of health policies and programs that will help eliminate health disparities.

Public attendance at this meeting is limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the designated contact person at least fourteen (14) business days prior to the meeting. Members of the public will have an opportunity to provide comments at the meeting. Public comments will be limited to three minutes per speaker. Individuals who would like to submit written statements should mail or fax their comments to the Office of Minority Health at least seven (7) business days prior to the meeting. Any members of the public who wish to have printed material distributed to ACMH committee members should submit their materials to the Executive Director, ACMH, Tower Building, 1101 Wootton Parkway, Suite 600, Rockville, Maryland 20852, prior to close of business Monday, July 1, 2013.

Dated: June 10, 2013.

**Monica A. Baltimore,**

*Executive Director, Advisory Committee on Minority Health, Office of Minority Health, U.S. Department of Health and Human Services.*

[FR Doc. 2013-14520 Filed 6-18-13; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Meeting of the Secretary's Advisory Committee on Human Research Protections

**AGENCY:** Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** Pursuant to Section 10(a) of the Federal Advisory Committee Act, U.S.C. Appendix 2, notice is hereby given that the Secretary's Advisory

Committee on Human Research Protections (SACHRP) will hold a meeting that will be open to the public. Information about SACHRP and the full meeting agenda will be posted on the SACHRP Web site at: <http://www.dhhs.gov/ohrp/sachrp/mtgins/index.html>.

**DATES:** The meeting will be held on Wednesday, July 10, 2013 from 8:30 a.m. until 5:00 p.m. and Thursday, July 11, 2013 from 8:30 a.m. until 4:30 p.m.

**ADDRESSES:** U.S. Department of Health and Human Services, 200 Independence Avenue SW., Hubert H. Humphrey Building, Room 800, Washington, DC 20201.

**FOR FURTHER INFORMATION CONTACT:** Jerry Menikoff, M.D., J.D., Director, Office for Human Research Protections (OHRP), or Julia Gorey, J.D., Executive Director, SACHRP; U.S. Department of Health and Human Services, 1101 Wootton Parkway, Suite 200, Rockville, Maryland 20852; 240-453-8141; fax: 240-453-6909; email address: [Julia.Gorey@hhs.gov](mailto:Julia.Gorey@hhs.gov).

**SUPPLEMENTARY INFORMATION:** Under the authority of 42 U.S.C. 217a, Section 222 of the Public Health Service Act, as amended, SACHRP was established to provide expert advice and recommendations to the Secretary of Health and Human Services through the Assistant Secretary for Health, on issues and topics pertaining to or associated with the protection of human research subjects.

The meeting will open to the public at 8:30 a.m., Wednesday, July 10. Following opening remarks from Dr. Jerry Menikoff, OHRP Director, and Dr. Jeffrey Botkin, SACHRP Chair, the Subcommittee on Harmonization (SOH) will give their report. SOH was established by SACHRP at its July 2009 meeting and is charged with identifying and prioritizing areas in which regulations and/or guidelines for human subjects research adopted by various agencies or offices within HHS would benefit from harmonization, consistency, clarity, simplification and/or coordination. The SOH report will be followed by an expert panel discussion