FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Savings and Loan Holding Companies

The company listed in this notice has applied to the Board for approval, pursuant to the Home Owners’ Loan Act (12 U.S.C. 1461 et seq.) (HOLA), Regulation LL (12 CFR part 238), and all other applicable statutes and regulations to become a savings and loan holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a savings association.

The application listed below is 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 whether the proposed transaction complies with the standards enumerated in the HOLA (12 U.S.C. 1467a(e)).

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 October 21, 2019.

A. Federal Reserve Bank of Cleveland (Mary S. Johnson, Vice President) 1455 East Sixth Street, Cleveland, Ohio 44101–2566. Comments can also be sent electronically to Comments.applications@clev.frb.org:

1. First Mutual Holding Company, Lakewood, Ohio; a mutual savings and loan holding company, to acquire Blue Grass Federal Savings and Loan Association, Paris, Kentucky, a standalone federal mutual savings association, through the merger of Blue Grass Federal Savings and Loan Association with an interim federal savings association subsidiary of First Mutual Holding Company, pursuant to section 10(e) of the Home Owners’ Loan Act.

Yao-Chin Chao, Assistant Secretary of the Board.

FEDERAL RESERVE SYSTEM

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The companies listed in this notice have applied to the Board for approval, pursuant to the Home Owners’ Loan Act (12 U.S.C. 1461 et seq.) (HOLA), Regulation LL (12 CFR part 238), and all other applicable statutes and regulations to become a savings and loan holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a savings association.

The applications listed below are available for immediate inspection at the Federal Reserve Bank indicated. The applications also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on whether the proposed transaction complies with the standards enumerated in the HOLA (12 U.S.C. 1467a(e)).

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 October 22, 2019.

A. Federal Reserve Bank of Cleveland (Nadine Wallman, Vice President) 1455 East Sixth Street, Cleveland, Ohio 44101–2566. Comments can also be sent electronically to Comments.applications@clev.frb.org:

1. CF Mutual Holding Company, Cincinnati, Ohio; a mutual savings and loan holding company that indirectly controls Cincinnati Federal, Cincinnati, Ohio, to complete a second step conversion, converting from the mutual to the stock form. As part of the conversion, CF Mutual Holding Company and Cincinnati Bancorp, Cincinnati, Ohio, an existing mid-tier savings and loan holding company controlled by CF Mutual Holding Company, will cease to exist and Cincinnati Federal will become a wholly-owned subsidiary of Cincinnati Bancorp, Inc., a newly-formed Maryland corporation headquartered in Cincinnati, Ohio.

2. Cincinnati Bancorp, Inc.; a newly-formed Maryland corporation headquartered in Cincinnati, Ohio, to become a savings and loan holding company by acquiring 100 percent of the voting shares of Cincinnati Federal, Cincinnati, Ohio.

Yao-Chin Chao, Assistant Secretary of the Board.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–3386–PN]

Medicare Program; Application From The Compliance Team for Initial CMS-Approval of Its Home Infusion Therapy Accreditation Program

AGENCY: Centers for Medicare and Medicaid Services (CMS), HHS.

ACTION: Proposed notice with request for comment.

SUMMARY: This proposed notice acknowledges the receipt of an application from The Compliance Team for initial recognition as a national accrediting organization for suppliers of home infusion therapy services that wish to participate in the Medicare program. Within 60 days of receipt of an organization’s complete application, the statute requires that CMS publish a notice that identifies the national accrediting body making the request, describes the nature of the request, and provides at least a 30-day public comment period.

DATES: To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on October 23, 2019.
training and education not otherwise
services, including nursing services;
new Medicare benefit for Home Infusion
Security Act (the Act), establishing a
Act added section 1861(iii) to the Social
range of acute and chronic conditions.
I. Background
public comments.
instructions on that website to view
www.regulations.gov
http://
have been received:
website as soon as possible after they
received before the close of the
business information that is included in
personally identifiable or confidential
viewing by the public, including any
comments received before the close of
the comment period are available for
comments to be received before the
close of the comment period.

II. Approval of Accreditation
Organizations
Section 1834(u)(5) of the Act and the
regulations at § 488.1010 require that
our findings concerning review and
approval of a national AO’s
requirements consider, among other
factors, the applying AO’s requirements
for accreditation; survey procedures;
resources for conducting required
surveys; capacity to furnish information
for use in enforcement activities;
monitoring procedures for provider
entities found not in compliance with
the conditions or requirements; and
ability to provide CMS with
the necessary data.

Our regulations at 42 CFR 488.1020(a)
requires that we publish, after receipt of
an organization’s complete application,
a notice identifying the national
accrediting body making the request,
describing the nature of the request, and
providing at least a 30-day public
comment period. In accordance with
§ 488.1010(d), we have 210 days from
the receipt of a complete application to
publish notice of approval or denial of
the application.
The purpose of this proposed notice is
to inform the public of TCT’s initial
request for CMS approval of its HIT
accreditation program. This notice also
solicits public comment on whether
TCT’s requirements meet or exceed the
Medicare conditions of participation for
HIT services.

III. Evaluation of Deeming Authority
Request
TCT submitted all the necessary
materials to enable us to make a
determination concerning its request for
initial approval of its HIT accreditation
program. This application was
determined to be complete on July 27,
2019. Under section 1834(u)(5) of the
Act and the regulations at § 488.1010
(Application and re-application
procedures for national HIT AOs), our
review and evaluation of TCT will be
conducted in accordance with, but not
necessarily limited to, the following
factors:
The equivalency of TCT’s standards for
HIT as compared with CMS’ HIT
conditions for certification.
TCT’s survey process to determine
the following:
The composition of the survey
team, surveyor qualifications, and the
ability of the organization to provide
continuing surveyor training.
The comparability of TCT’s to
CMS standards and processes, including
survey frequency, and the ability to
covered under the Durable Medical
Equipment (DME) benefit; remote
monitoring; and other monitoring
services. Home infusion therapy must
be furnished by a qualified HIT supplier
and furnished in the individual’s home.
The individual must be under—
• The care of an applicable provider
(that is, physician, nurse practitioner, or
physician assistant); and
• A plan of care established and
periodically reviewed by a physician in
coordination with the furnishing of
home infusion drugs under Part B, that
prescribes the type, amount, and
duration of infusion therapy services
that are to be furnished.
Section 1861(iii)(D)(III) of the Act
requires that a qualified HIT supplier be
accredited by an accrediting
organization (AO) designated by the
Secretary in accordance with section
1834(u)(5) of the Act. Section
1834(u)(5)(A) of the Act identifies
factors for designating AOs and in
reviewing and modifying the list of
designated AOs. These statutory factors
are as follows:
• The ability of the organization to
conduct timely reviews of accreditation
applications.
• The ability of the organization take
into account the capacities of suppliers
located in a rural area (as defined in
section 1866(d)(2)(D) of the Act).
• Whether the organization has
established reasonable fees to be
charged to suppliers applying for
accreditation.
• Such other factors as the Secretary
determines appropriate.

Section 1834(u)(5)(B) of the Act
requires the Secretary to designate AOs
to accredit HIT suppliers furnishing HIT
not later than January 1, 2021. Section
1861(iii)(3)(D) of the Act defines
“qualified home infusion therapy
suppliers” as being accredited by a
CMS-approved AO.

On March 1, 2019, we published a
solicitation notice entitled, “Medicare
Program; Solicitation of Independent
Accrediting Organizations To
Participate in the Home Infusion
Therapy Supplier Accreditation
Program” (84 FR 7057). This notice
informed national AOs that accredit HIT
suppliers of an opportunity to submit
applications to participate in the HIT
supplier accreditation program.

Complete applications will be
considered for the January 1, 2021
designation deadline if received by
February 1, 2020.

Regulations for the approval and
oversight of AOs for HIT organizations
are located at 42 CFR part 488, subpart
L. The requirements for HIT suppliers

ADRESSES: In commenting, please refer
to file code CMS–3386–PN. Because of
staff and resource limitations, we cannot
accept comments by facsimile (FAX)
transmission.

Comments, including mass comment
submissions, must be submitted in one
of the following three ways (please
choose only one of the ways listed):
1. Electronically. You may submit
electronic comments on this regulation
to http://www.regulations.gov. Follow
the “Submit a comment” instructions.
2. By regular mail. You may mail
written comments to the following
address ONLY:
Centers for Medicare & Medicaid
Services, Department of Health and
Human Services, Attention: CMS–3386–
PN, P.O. Box 8016, Baltimore, MD
21244–8010.

Please allow sufficient time for mailed
comments to be received before the
close of the comment period.
3. By express or overnight mail. You
may send written comments to the
following address ONLY:
Centers for Medicare & Medicaid
Services, Department of Health and
Human Services, Attention: CMS–3386–
PN, Mail Stop C4–26–05, 7500 Security
Boulevard, Baltimore, MD 21244–1850.

For information on viewing public
comments, see the beginning of the
SUPPLEMENTARY INFORMATION section.

FOR FURTHER INFORMATION CONTACT:
Christina Mister-Ward, (410)786–2441.
Shannon Freeland, (410)786–4348.
Lillian Williams, (410)786–8636.

SUPPLEMENTARY INFORMATION:
Inspection of Public Comments: All
comments received before the close of
the comment period are available for
viewing by the public, including any
personally identifiable or confidential
business information that is included in
a comment. We post all comments
received before the close of the
comment period on the following
website as soon as possible after they
have been received: http://www.regulations.gov. Follow the search
instructions on that website to view
public comments.

I. Background
Infusion therapy is a treatment option
for Medicare beneficiaries with a wide
range of acute and chronic conditions.
Section 5012 of the 21st Century Cures
Act added section 1861(iii) to the Social
Security Act (the Act), establishing a
new Medicare benefit for Home Infusion
Therapy (HIT) services. Section
1861(iii)(1) of the Act defines “home
infusion therapy” as professional
services, including nursing services;
training and education not otherwise
regulated and government policies.

II. Approval of Accreditation
Organizations
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regulations at § 488.1010 require that
our findings concerning review and
approval of a national AO’s
requirements consider, among other
factors, the applying AO’s requirements
for accreditation; survey procedures;
resources for conducting required
surveys; capacity to furnish information
for use in enforcement activities;
monitoring procedures for provider
entities found not in compliance with
the conditions or requirements; and
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the necessary data.

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a notice identifying the national
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conditions for certification.
TCT’s survey process to determine
the following:
The composition of the survey
team, surveyor qualifications, and the
ability of the organization to provide
continuing surveyor training.
The comparability of TCT’s to
CMS standards and processes, including
survey frequency, and the ability to

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investigate and respond appropriately to complaints against accredited facilities.  
++ TCT’s processes and procedures for monitoring a HIT found out of compliance with TCT’s program requirements. .  
++ TCT’s capacity to report deficiencies to the surveyed facilities and respond to the facility’s plan of correction in a timely manner.  
++ TCT’s capacity to provide CMS with electronic data and reports necessary for effective assessment and interpretation of the organization’s survey process.  
++ The adequacy of TCT’s staff and other resources, and its financial viability.  
++ TCT’s capacity to adequately fund required surveys.  
++ TCT’s policies with respect to whether surveys are announced or unannounced, to assure that surveys are unannounced.  
++ TCT’s agreement to provide CMS with a copy of the most current accreditation survey together with any other information related to the survey as CMS may require (including corrective action plans)  
• TCT’s agreement or policies for voluntary and involuntary termination of suppliers.  
• TCT agreement or policies for voluntary and involuntary termination of the HIT AO program.

IV. Collection of Information Requirements  
This document does not impose information collection and requirements, that is, reporting, recordkeeping or third party disclosure requirements. Consequently, there is no need for review by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35).

V. Response to Public Comments  
Because of the large number of public comments we normally receive on Federal Register documents, we are not able to acknowledge or respond to them individually. We will consider all comments we receive by the date and time specified in the DATES section of this preamble, and, when we proceed with a subsequent document, we will respond to the comments in the preamble to that document.  
Upon completion of our evaluation, including evaluation of comments received as a result of this notice, we will publish a final notice in the Federal Register announcing the result of our evaluation.