

difficult to do so within the period of time allowed by this notice, you should advise the contact listed below as soon as possible.

ADDRESSES: Direct all PRA comments to Nicole Ongele, FCC, via email *PRA@fcc.gov* and to *Nicole.Ongele@fcc.gov*.

FOR FURTHER INFORMATION CONTACT: For additional information about the information collection, contact Nicole Ongele at (202) 418-2991.

SUPPLEMENTARY INFORMATION:

OMB Control Number: 3060-1258.

Title: Alternative Dispute Resolution Intake Form Requests, FCC Form 5628.

Form Number: FCC Form 5628.

Type of Review: Extension of a currently approved collection.

Respondents: Individuals or households.

Number of Respondents and Responses: 7 respondents and 7 responses.

Estimated Time per Response: 3 hours.

Frequency of Response: One-time reporting requirement.

Obligation to Respond: Voluntary. Statutory authority for this information collection is contained in Administrative Dispute Resolution Act, 5 U.S.C. 571 *et seq.*; Civil Justice Reform, Executive Order 12988; 29 CFR 1614.102(b)(2), 1614.105(f), 1614.108(b), and 1614.603.

Total Annual Burden: 25 hours.

Total Annual Cost: \$10,000.

Privacy Act Impact Assessment: Yes. An existing system of records for FCC/OWD-2, Alternative Dispute Resolution Program, is published in the **Federal Register** at 84 FR 14374 (April 10, 2019).

Nature and Extent of Confidentiality: Confidentiality of information will be provided in accordance with the Privacy Act. The Commission is not requesting respondents to submit confidential information to the Commission. If the Commission requests respondents to submit information which respondents believe is confidential, respondents may request confidential treatment of such information pursuant to section 0.459 of the Commission's rules, 47 CFR 0.459.

Needs and Uses: FCC employees and related individuals may seek a forum through the Alternative Dispute Resolution Program for inquiry and resolution of EEO and non-EEO matters by completing FCC Form 5628.

Federal Communications Commission.

Marlene Dortch,

Secretary, Office of the Secretary.

[FR Doc. 2021-10602 Filed 5-19-21; 8:45 am]

BILLING CODE 6712-01-P

FEDERAL ELECTION COMMISSION

Sunshine Act Meeting

TIME AND DATE: Thursday, May 20, 2021 at 10:00 a.m.

PLACE: Virtual meeting. *Note:* Because of the COVID-19 pandemic, we will conduct the open meeting virtually. If you would like to access the meeting, see the instructions below.

STATUS: The May 20, 2021 Open Meeting has been canceled.

CONTACT PERSON FOR MORE INFORMATION: Judith Ingram, Press Officer. Telephone: (202) 694-1220.

Authority: Government in the Sunshine Act, 5 U.S.C. 552b.

Laura E. Sinram,

Acting Secretary and Clerk of the Commission.

[FR Doc. 2021-10801 Filed 5-18-21; 4:15 pm]

BILLING CODE 6715-01-P

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices; Acquisitions of Shares of a Bank or Bank Holding Company

The notificants listed below have applied under the Change in Bank Control Act (Act) (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire shares of a bank or bank holding company. The factors that are considered in acting on the applications are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board's Freedom of Information Office at <https://www.federalreserve.gov/foia/request.htm>. Interested persons may express their views in writing on the standards enumerated in paragraph 7 of the Act.

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E. Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington DC 20551-0001, not later than June 4, 2021.

A. Federal Reserve Bank of Atlanta (Erien O. Terry, Assistant Vice President) 1000 Peachtree Street NE,

Atlanta, Georgia 30309. Comments can also be sent electronically to *Applications.Comments@atl.frb.org*:

1. *The Merry Rea Thomson Revocable Trust, Merry Rea Thomson, as trustee, both of Pass Christian, Mississippi; John C. Thomson, Port Orange, Florida; Susan T. Eaves and Richard S. Thomson, Jr., both of Hattiesburg, Mississippi;* to become members of the Thomson Family Control Group, a group acting in concert, to retain voting shares of First National Corporation of Picayune, and thereby indirectly retain voting shares of First National Bank of Picayune (FNB Picayune Bank), both of Picayune, Mississippi.

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

1. *The F. Addison Survivor Trust and the Marion A Jones Descendant Trust, F. Addison Jones, as trustee, the David A. Jones Irrevocable Trust and the F. Austin Jones Irrevocable Trust, Grinnell State Bank and F. Addison Jones, as co-trustees, Fitzpatrick A Jones, David Aric Jones, Alyson Marie Jones, all of Grinnell, Iowa; Anthony Joseph Jones, Cumming, Iowa; Kelsey Megan McCulley, Wellman, Iowa; and Miranda Austin Bradberry, Tiffin, Iowa;* to become members of the Jones Family Control Group, a group acting in concert, by retaining voting shares of Grinnell Bancshares, Inc., and thereby indirectly retain voting shares of Grinnell State Bank, both of Grinnell, Iowa.

Board of Governors of the Federal Reserve System, May 14, 2021.

Yao-Chin Chao,

Assistant Secretary of the Board.

[FR Doc. 2021-10576 Filed 5-19-21; 8:45 am]

BILLING CODE P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10398 #69]

Medicaid and Children's Health Insurance Program (CHIP) Generic Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: On May 28, 2010, the Office of Management and Budget (OMB) issued Paperwork Reduction Act (PRA)

guidance related to the “generic” clearance process. Generally, this is an expedited process by which agencies may obtain OMB’s approval of collection of information requests that are “usually voluntary, low-burden, and uncontroversial collections,” do not raise any substantive or policy issues, and do not require policy or methodological review. The process requires the submission of an overarching plan that defines the scope of the individual collections that would fall under its umbrella. On October 23, 2011, OMB approved our initial request to use the generic clearance process under control number 0938–1148 (CMS–10398). It was last approved on April 26, 2021, via the standard PRA process which included the publication of 60- and 30-day **Federal Register** notices. The scope of the April 2021 umbrella accounts for Medicaid and CHIP State plan amendments, waivers, demonstrations, and reporting. This **Federal Register** notice seeks public comment on one or more of our collection of information requests that we believe are generic and fall within the scope of the umbrella. Interested persons are invited to submit comments regarding our burden estimates or any other aspect of this collection of information, including: The necessity and utility of the proposed information collection for the proper performance of the agency’s functions, the accuracy of the estimated burden, ways to enhance the quality, utility and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

DATES: Comments must be received by June 3, 2021.

ADDRESSES: When commenting, please reference the applicable form number (see below) and the OMB control number (0938–1148). To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically.* You may send your comments electronically to <http://www.regulations.gov>. Follow the instructions for “Comment or Submission” or “More Search Options” to find the information collection document(s) that are accepting comments.

2. *By regular mail.* You may mail written comments to the following address:

CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: CMS–10398 (#69)/OMB control number:

0938–1148, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may access CMS’ website at <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html>.

FOR FURTHER INFORMATION CONTACT:

William N. Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION: Following is a summary of the use and burden associated with the subject information collection(s). More detailed information can be found in the collection’s supporting statement and associated materials (see **ADDRESSES**).

Generic Information Collection

1. *Title of Information Collection:* Reporting Requirements for Additional Funding for Medicaid HCBS During the COVID–19 Emergency; *Type of Information Collection Request:* New collection; *Use:* CMS is responsible for ensuring that states receiving the temporary 10 percentage point increase comply with the statutory requirements specified in Section 9817 of the American Rescue Plan Act of 2021 (Pub. L. 117–2). To do so, CMS released a State Medicaid Director Letter (SMDL) that specifies the information that states must report to CMS in order to receive the temporary 10 percentage point increase. Participating states are required to submit initial and quarterly HCBS (home and community-based services) spending plans and narratives to CMS to report how the additional funding will be expended on activities that the state has implemented and/or intends to implement to enhance, expand, or strengthen HCBS to demonstrate that the state is supplementing, but not supplanting, existing state funds expended for Medicaid HCBS.

To ensure maximum state flexibility and to reduce the reporting burden on states as much as possible, states will submit spending plans and narratives in their own preferred format. CMS will not require states to use a standardized template or form. Instead, the SMDL details the minimum reporting requirements in full. The SMDL stipulates that in order to receive the additional funding available under Section 9817, states must initially submit the following via email within 30 days of the release of the SMDL:

- *Initial HCBS Spending Plan Projection:* State estimates of the total amount of funds attributable to the

increase in FMAP that the state anticipates claiming between April 1, 2021 and March 31, 2022, as well as the anticipated expenditures for the activities the state intends to implement to enhance, expand, or strengthen HBCS under the state Medicaid program between April 1, 2021 and March 31, 2024.

- *Initial HCBS Spending Narrative:* Information on the state’s required section 9817 activities and the connection between the spending plan projection and the scope of the activities. States must provide sufficient detail to affirm that the state’s activities enhance, expand, or strengthen HCBS under the state Medicaid program.

States must then submit a quarterly HCBS spending plan and narrative for CMS review and approval; states may update their initial spending plan submissions through the quarterly spending plan submissions. States must report on a quarterly basis until funds are expended. As part of the reporting cycle, there are two documents to be submitted:

- *Quarterly HCBS Spending Plan:* State estimate the total amount of funds attributable to the increase in FMAP that the state has claimed and/or anticipates claiming between April 1, 2021 and March 31, 2022, as well as anticipated and/or actual expenditures for the state’s activities to implement, to enhance, expand, or strengthen HBCS under the state Medicaid program between April 1, 2021, and March 31, 2024.

- *Quarterly HCBS Spending Narrative:* Similar to the narrative that was submitted with the initial HCBS spending plan, this is a shorter narrative to provide activity updates. A state may also choose to provide information on activity outcomes, lessons learned, challenges, or any other information that the state deems as relevant and important to advancing HCBS.

When submitting the initial and quarterly HCBS spending plan and narrative, the designated state point of contact should attest to the following via email:

- The state is not imposing stricter eligibility standards, methodologies, or procedures for HCBS programs and services than were in place on April 1, 2021;
- The state is preserving covered HCBS, including the services themselves and the amount, duration, and scope of those services, in effect as of April 1, 2021; and
- The state is maintaining provider payments at a rate no less than those in place as of April 1, 2021. *Form Number:* CMS–10398 (#69) (OMB control

number: 0938–1148); *Frequency*: Once, quarterly, and on occasion; *Affected Public*: State, Local, or Tribal Governments; *Number of Respondents*: 56; *Total Annual Responses*: 616; *Total Annual Hours*: 1,344. (For policy questions regarding this collection contact Ryan Shannahan at 410–786–0295.)

Dated: May 14, 2021.

William N. Parham, III,

Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2021–10574 Filed 5–19–21; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier CMS–10536, CSM–10225 and CMS–10764]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

DATES: Comments on the collection(s) of information must be received by the OMB desk officer by June 21, 2021.

ADDRESSES: Written comments and recommendations for the proposed

information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following:

1. Access CMS' website address at website address at: <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html>.

FOR FURTHER INFORMATION CONTACT:

William Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501–3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term "collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice that summarizes the following proposed collection(s) of information for public comment:

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Medicaid Eligibility and Enrollment (EE) Implementation Advanced Planning Document (IAPD) Template; *Use:* To assess the appropriateness of states' requests for enhanced federal financial participation for expenditures related to Medicaid eligibility determination systems, we will review the submitted information and documentation to make an approval determination for the advanced planning document. *Form Number:* CMS–10536 (OMB control number: 0938–1268); *Frequency:* Yearly, once, and occasionally; *Affected Public:* State, Local, or Tribal Governments; *Number of Respondents:* 56; *Total Annual Responses:* 168; *Total Annual*

Hours: 2,688. (For policy questions regarding this collection contact Edward Dolly at 410–786–8554.)

2. *Type of Information Collection Request:* Reinstatement of a previously approved collection; *Title of Information Collection:* Disclosures Required of Certain Hospitals and Critical Access Hospitals Regarding Physician Ownership; *Use:* This information collection relates to the required third party disclosures by certain Medicare-participating hospitals and Critical Access Hospitals (CAHs) and physicians to their patients. There are 5 types of disclosures required. The intent of the disclosure notice is to assist the patient in making an informed decision regarding their care. The first disclosure requires physician owned hospitals and CAHs to disclose to its patients whether the hospitals/CAHs are physician-owned and, if so, the names of the physician-owners. The second disclosure requires the physician owner or investor in the hospital, as part of his or her continued medical staff membership or admitting privileges, to disclose to the patient being referred to the hospital any ownership or investment interest held by the physician or an immediate family member of the physician. The third disclosure requires physician owned hospitals to disclose on all public websites for and in any public advertising for the hospital that the hospital is owned or invested in by physicians. The fourth and fifth disclosures apply to all hospitals and CAHs that do not have a Doctor of Medicine (MD) or a Doctor of Osteopathic Medicine (DO) on the premises at all times to disclose this to patients upon admission or registration for both inpatient and specified outpatient services. These hospitals and CAHs must provide a written disclosure to the patients admitted to the hospital and must also post a conspicuous notice in the Emergency Departments (ED) which states that the hospital does not have a physician present 24 hours per day, 7 days per week. *Form Number:* CMS–10225 (OMB control number: 0938–1034); *Frequency:* Occasionally; *Affected Public:* Private sector—Business or other for-profits and Not-for-profit institutions; *Number of Respondents:* 210; *Total Annual Responses:* 1,193,890; *Total Annual Hours:* 78,935. (For policy questions regarding this collection contact Caroline Gallaher at 410–786–8705).

3. *Type of Information Collection Request:* New collection (Request for a new OMB control number); *Title of Information Collection:* Evaluation of Risk Adjustment Data Validation