hours per response for lump sum payment elections.

Frequency of Response: One time reporting requirement.

Obligation to Respond: Statutory authority for this information collection is contained in sections 1, 2, 4(i), 4(j), 5(c), 201, 302, 303, 304, 307(e), and 309 of the Communications Act of 1934, as amended, 47 U.S.C. 151, 152, 154(i), 154(j), 155(c), 201, 302, 303, 304, 307(e), 309.

Total Annual Burden: 109,680 hours. Total Annual Cost: \$900,000.
Needs and Uses: Under this information collection, the Commission will collect information that will be used to determine when, how, and at what cost existing operations in the lower portion of the 3.7–4.2 GHz band will be relocated to the upper portion of the band. This collection will serve as the starting point for planning and managing the process of efficiently and expeditiously clearing of the lower

portion of the band, so that this

spectrum can be auctioned for flexible-

use service licenses. The transition relocation process began in 2020. Initial Transition Plans were filed on June 19, 2020 with final Transition Plans due August 14, 2020. Throughout the relocation process, the Wireless Telecommunications Bureau (Bureau) opened limited windows to amend their Transition Plans on several occasions. In addition to submitting and modifying Transition Plans during these periods, eligible space station operators were required to file quarterly status reports with the Commission beginning on December 31, 2020 to demonstrate their efforts to ensure a timely transition.

The 3.7 GHz band auction, Auction 107, took place from December 8, 2020 to February 17, 2021, and, on February 24, 2021, the Commission announced the winning bidders of the C-band auction for all 5,684 licenses. In the same year, the Bureau directed eligible space station operators to submit updates for their final Transition Plans during limited windows opened for operators to provide these updates.

Later that year, on August 4, 2021, the Bureau issued a Public Notice implementing filing procedures for Phase I Certifications. Originally, Phase I's deadline was set for December 5, 2021, but the deadline was met eleven days earlier than anticipated. On November 24, 2021, the Commission validated the certification of Phase I.

The C-band transition continued into 2023. On May 15, 2023, the Bureau announced procedures for filing C-band Phase II Certifications of Accelerated Relocation and implementation of the

Commission's incremental reduction plan for Phase II Accelerated Relocation Payments as part of the ongoing transition. The C-Band Relocation Payment Clearinghouse (RPC) is responsible for disbursing the Accelerated Relocation Payments within a certain time period.

On June 1, 2023, all eligible space station operators were permitted to submit their Phase II certifications. Also on June 1, 2023, the Bureau opened a limited, final window for eligible space station operators to file modified Transition Plans to accurately account for any updates since September 30, 2021.

Phase II's deadline to complete the transition of space station operations to the upper 200 megahertz of the band was originally set for December 5, 2023. Instead, on August 10, 2023, the last of the Phase II Certifications was deemed granted. Even though Phases I and II of the satellite transition are complete, the Commission continues to work through the C-band relocation process. On October 13, 2023, the Bureau released a Public Notice seeking comment on proposed deadlines for claimants to submit reimbursement claims. The Public Notice stated that the RPC's operations are currently scheduled to conclude on June 30, 2025, which is still more than a year and a half away. The relocation of the fixed service licensees is also ongoing.

On December 5, 2023, the Commission issued a Public Notice adopting two final reimbursement claims submission deadlines for eligible incumbents and other eligible stakeholders to submit any outstanding transition-related claims to the RPC for processing as part of this ongoing transition. The two deadlines are: (1) February 5, 2024 as the submission deadline to the RPC for all reimbursement claims for costs incurred and paid by claimants as of December 31, 2023, and (2) July 1, 2024 as the submission deadline to the RPC for all reimbursement claims for costs incurred and paid by claimants after December 31, 2023. In the Public Notice, the Commission stated that these adopted dates are important because they will aid in facilitating a timely conclusion of the C-band reimbursement program. Furthermore, the Commission highlighted the fact that all lump sum electees and many other eligible claimants and eligible stakeholders have had ample time within which to submit their claims to the RPC.

It is important to continue to collect information because it is crucial to ensure that managing this process is efficiently and quickly done, and that transition is still underway. Because this process remains ongoing, this information collection should be renewed to ensure that a complete set of information is maintained. If this collection were to expire now, stakeholders would be missing ongoing information about the transition process. Renewing this collection will provide stakeholders with complete information instead of an information collection that ends before the entire transition process is officially accomplished in 2025.

Federal Communications Commission.

Marlene Dortch,

Secretary, Office of the Secretary.
[FR Doc. 2024–00495 Filed 1–11–24; 8:45 am]
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FEDERAL HOUSING FINANCE AGENCY

[No. 2024-N-1]

Notice of Annual Adjustment of the Cap on Average Total Assets That Defines Community Financial Institutions

AGENCY: Federal Housing Finance Agency.

ACTION: Notice.

SUMMARY: The Federal Housing Finance Agency (FHFA) has adjusted the cap on average total assets that is used in determining whether a Federal Home Loan Bank (Bank) member qualifies as a "community financial institution" (CFI) to \$1,461,000,000, based on the annual percentage increase in the Consumer Price Index for all urban consumers (CPI–U), as published by the Department of Labor (DOL). These changes are effective as of January 1, 2024.

FOR FURTHER INFORMATION CONTACT:

Janna Bruce, Division of Federal Home Loan Bank Regulation, (202) 649–3202, Janna.Bruce@fhfa.gov; or Carly Malamud, Counsel, Office of General Counsel, (202) 649–3098, Carly.Malamud@fhfa.gov, (these are not toll-free numbers), Federal Housing Finance Agency, Constitution Center, 400 Seventh Street SW, Washington, DC 20219. For TTY/TRS users with hearing and speech disabilities, dial 711 and ask to be connected to any of the contact numbers above.

SUPPLEMENTARY INFORMATION:

I. Statutory and Regulatory Background

The Federal Home Loan Bank Act (Bank Act) confers upon insured depository institutions that meet the statutory definition of a CFI certain advantages over non-CFI insured depository institutions in qualifying for Bank membership, and in the purposes for which they may receive long-term advances and the collateral they may pledge to secure advances. 1 Section 2(10)(A) of the Bank Act and § 1263.1 of FHFA's regulations define a CFI as any Bank member the deposits of which are insured by the Federal Deposit Insurance Corporation and that has average total assets below the statutory cap.² The Bank Act was amended in 2008 to set the statutory cap at \$1 billion and to require FHFA to adjust the cap annually to reflect the percentage increase in the CPI-U, as published by the DOL.3 For 2023, FHFA set the CFI asset cap at \$1,417,000,000, which reflected a 7.1 percent increase over 2022, based upon the increase in the CPI-U between 2021 and 2022.4

II. The CFI Asset Cap for 2024

As of January 1, 2024, FHFA will increase the CFI asset cap to \$1,461,000,000, which reflects a 3.1 percent increase in the unadjusted CPI-U from November 2022 to November 2023. Consistent with the practice of other Federal agencies required to calculate and make annual adjustments based on CPI-U changes, FHFA bases the annual adjustment to the CFI asset cap on the percentage increase in the CPI-U from November of the year prior to the preceding calendar year to November of the preceding calendar year, because the November figures represent the most recent available data as of January 1st of the current calendar year. The new CFI asset cap was obtained by applying the percentage increase in the CPI–U to the unrounded amount for the preceding year and rounding to the nearest million, as has been FHFA's practice for all previous adjustments.

In calculating the CFI asset cap, FHFA uses CPI–U data that have not been seasonally adjusted (*i.e.*, the data have not been adjusted to remove the estimated effect of price changes that normally occur at the same time and in about the same magnitude every year). The DOL encourages use of unadjusted CPI–U data in applying "escalation" provisions such as that governing the CFI asset cap, because the factors that are used to seasonally adjust the data are amended annually, and seasonally adjusted data that are published earlier

are subject to revision for up to five years following their original release. Unadjusted data are not routinely subject to revision, and previously published unadjusted data are only corrected when significant calculation errors are discovered.

Joshua R. Stallings,

Deputy Director, Division of Federal Home Loan Bank Regulation, Federal Housing Finance Agency.

[FR Doc. 2024–00491 Filed 1–11–24; 8:45 am]

BILLING CODE 8070-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Supplemental Evidence and Data Request on The Effect of Dietary Digestible Carbohydrate Intake on Risk of Cardiovascular Disease

AGENCY: Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Request for supplemental evidence and data submission.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) is seeking scientific information submissions from the public. Scientific information is being solicited to inform our review on The Effect of Dietary Digestible Carbohydrate Intake on Risk of Cardiovascular Disease, which is currently being conducted by the AHRQ's Evidence-based Practice Centers (EPC) Program. Access to published and unpublished pertinent scientific information will improve the quality of this review.

DATES: Submission Deadline on or before February 12, 2024.

ADDRESSES:

 $Email\ submissions: epc@\\ahrq.hhs.gov.$

Print submissions:

Mailing Address: Center for Evidence and Practice Improvement Agency for Healthcare Research and Quality, ATTN: EPC SEADs Coordinator, 5600 Fishers Lane, Mail Stop 06E53A, Rockville, MD 20857

Shipping Address (FedEx, UPS, etc.):
Center for Evidence and Practice
Improvement, Agency for Healthcare
Research and Quality, ATTN: EPC
SEADs Coordinator, 5600 Fishers
Lane, Mail Stop 06E77D, Rockville,
MD 20857

FOR FURTHER INFORMATION CONTACT:

Kelly Carper, Telephone: 301–427–1656 or Email: epc@ahrq.hhs.gov.

SUPPLEMENTARY INFORMATION: The Agency for Healthcare Research and Quality has commissioned the Evidence-based Practice Centers (EPC) Program to complete a review of the evidence for *The Effect of Dietary Digestible Carbohydrate Intake on Risk of Cardiovascular Disease*. AHRQ is conducting this review pursuant to Section 902 of the Public Health Service Act, 42 U.S.C. 299a.

The EPC Program is dedicated to identifying as many studies as possible that are relevant to the questions for each of its reviews. In order to do so, we are supplementing the usual manual and electronic database searches of the literature by requesting information from the public (e.g., details of studies conducted). We are looking for studies that report on The Effect of Dietary Digestible Carbohydrate Intake on Risk of Cardiovascular Disease.

The entire research protocol is available online at: https://effective healthcare.ahrq.gov/products/risk-cardiovascular-disease.

This is to notify the public that the EPC Program would find the following information on *The Effect of Dietary Digestible Carbohydrate Intake on Risk of Cardiovascular Disease* helpful:

- A list of completed studies that your organization has sponsored for this topic. In the list, please *indicate* whether results are available on ClinicalTrials.gov along with the ClinicalTrials.gov trial number.
- For completed studies that do not have results on ClinicalTrials.gov, a summary, including the following elements, if relevant: study number, study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, primary and secondary outcomes, baseline characteristics, number of patients screened/eligible/enrolled/lost to follow-up/withdrawn/analyzed, effectiveness/efficacy, and safety results.
- A list of ongoing studies that your organization has sponsored for this topic. In the list, please provide the ClinicalTrials.gov trial number or, if the trial is not registered, the protocol for the study including, if relevant, a study number, the study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, and primary and secondary outcomes.
- Description of whether the above studies constitute *ALL Phase II and above clinical trials* sponsored by your organization for this topic and an index outlining the relevant information in each submitted file.

¹ See 12 U.S.C. 1424(a), 1430(a).

² See 12 U.S.C. 1422(10)(A); 12 CFR 1263.1.

³ See 12 U.S.C. 1422(10)(B); 12 CFR 1263.1 (defining the term "CFI asset cap").

⁴ See 87 FR 80184 (Dec. 29, 2022).