

company by acquiring Compass Sub Northwest, Inc., and by acquiring CommerceOne Financial Corporation and thereby indirectly acquiring CommerceOne Bank, both of Birmingham, Alabama. Compass Sub Northwest, Inc., and Compass Sub North, Inc., are currently subsidiaries of CommerceOne Financial Corporation, Birmingham, Alabama.

Finally, *Compass Sub North, Inc.*, to merge with CommerceOne Financial Corporation.

Board of Governors of the Federal Reserve System.

Michele Taylor Fennell,

Associate Secretary of the Board.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Committee on Immunization Practices (ACIP); Notice of Charter Renewal

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of charter renewal.

SUMMARY: Notice is hereby given, in accordance with the Federal Advisory Committee Act of October 6, 1972, that the Advisory Committee on Immunization Practices (ACIP), Centers for Disease Control and Prevention, Department of Health and Human Services, has been renewed for a 2-year period through April 1, 2028.

FOR FURTHER INFORMATION CONTACT: ACIP Secretariat, Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop H21-12, Atlanta, Georgia 30329-4027. Email: ACIP@cdc.gov.

SUPPLEMENTARY INFORMATION: In accordance with the Federal Advisory Committee Act, as amended, CDC is providing notice of the renewal of the charter of the Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, Department of Health and Human Services. This charter has been renewed for a two-year period through April 1, 2028.

Public Interest Determination

Pursuant to 41 CFR 102-3.60(a), to establish, renew, reestablish, or merge a discretionary (agency discretion)

advisory committee, an agency must first consult with the General Services Administration's Committee Management Secretariat (the Secretariat) and, as part of the consultation, provide a written public interest determination approved by the head of the agency to the Secretariat with a copy to the Office of Management and Budget. In addition, pursuant to 41 CFR 102-3.35, an agency shall follow the same consultation process and document in writing the same determination of need before creating a subcommittee under a discretionary committee that is not made up entirely of members of a parent advisory committee.

Information on the following factors for the committee is provided to the Secretariat to demonstrate that renewing the committee is in the public interest:

1. Annual budget: The ACIP's estimated annual costs for operating the Committee, including (i) Federal personnel and other Federal internal costs; (ii) proposed payments for up to 19 members; and (iii) reimbursable costs are as follows: a. Federal personnel on a full-time equivalent (FTE) basis, \$940,313; b. Other Federal internal costs, \$140,027; c. Proposed payments to members, \$42,750; d. Proposed number of members: The anticipated number of members for ACIP is up to 19; e. Reimbursable costs, \$83,106;

2. If applicable, the total dollar value of grants expected to be recommended during the fiscal year, \$0.

3. Criteria for selecting members to ensure the committee has the necessary expertise and fairly balanced membership: Departmental policy provides that Committee membership be fairly balanced in terms of points of view represented, and the Committee's function. Consideration is also given to representation from diverse geographic areas and diverse viewpoints. Preference is given to candidates who are citizens of the United States. Aspects that are considered at the time of candidate screening and review for inclusion in nomination packages forwarded to the Secretary, DHHS, include:

- Geographical balance. Efforts are made to ensure that voting members come from states representing a diversity of geographic locations within the U.S.

- Balance of specialty areas (*e.g.*, biostatistics, toxicology, immunology, epidemiology, pediatrics, internal medicine, family medicine, nursing, consumer issues, state and local health department perspective, academic perspective, public health perspective, etc.).

The ACIP Secretariat, including the DFO, solicits candidate names through the following channels:

- Procedures for application for ACIP membership are detailed on the ACIP website at <https://www.cdc.gov/acip/membership/index.html>. The ACIP Secretariat accepts applications as part of a continuous process throughout the year.

- Solicitation of potential candidates is posted annually in the **Federal Register**.

- Applications are solicited at ACIP meetings. A web link URL is provided on a meeting slide, and procedures for application are announced at the opening of meetings, which are broadcast via the internet ("webcast") to an audience that can exceed 10,000 viewers.

Members, including the Chair and Vice Chair, shall be selected and appointed by the HHS Secretary and shall be invited to serve for overlapping terms of up to four years, except that any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of that term. A member may serve 180 days after the expiration of that member's term if a successor has not taken office.

4. List of all other Federal advisory committees of the agency:

- Advisory Board on Radiation and Worker Health
- Advisory Committee for the Elimination of Tuberculosis
- Advisory Committee on Breast Cancer in Young Women
- Advisory Committee to the Director, CDC
- Board of Scientific Counselors, National Center for Injury Prevention and Control
- Lead Exposure and Prevention Advisory Committee
- Mine Safety and Health Research Advisory Committee
- National Committee on Vital and Health Statistics
- World Trade Center Health Program Scientific/Technical Advisory Committee

5. Justification that the information or advice provided by the Federal advisory committee or subcommittee is not available from another Federal advisory committee, another Federal Government source, or any other more cost-effective and less burdensome source: The ACIP has been given statutory roles under subsections 1928(c)(2)(B)(i) and 1928(e) of the Social Security Act (42 U.S.C. 1396s(c)(2)(B)(i) and 1396s(e)) and subsection 2713(a)(2) of the Public Health Service Act (42 U.S.C. 300g-13(a)(2)). In accordance with Section

1928 of the Social Security Act, the ACIP shall establish and periodically review and, as appropriate, revise the list of vaccines for administration to children and adolescents eligible to receive vaccines through the Vaccines for Children Program, along with schedules regarding the appropriate dose and dosing interval, and contraindications to administration of the pediatric vaccines. The Secretary, and as delegated the CDC Director, shall use the list established by the ACIP for the purpose of the purchase, delivery, and administration of pediatric vaccines in the Vaccines for Children Program. Further, under provisions of the Affordable Care Act (Section 2713 of the Public Health Service Act, as amended), immunization recommendations of the Committee that have been adopted by the Director of the Centers for Disease Control and Prevention must be covered by applicable health plans. Therefore, the advice provided by the ACIP is not available from another Federal advisory committee or Federal Government source, or any other more cost-effective and less burdensome source.

6. If the consultation is a committee renewal, a summary of the previous accomplishments of the committee and the reasons it needs to continue:

Summary of the previous accomplishments: Over the past two years, the Committee met over six times during calendar years 2024 and 2025. The Committee deliberated, offered recommendations, and/or revised over 15 recommendations during January 1, 2024, through December 31, 2025. The Committee also recommended updated child/adolescent and adult immunization schedules which CDC adopted and published in 2024 and 2025. Current information about ACIP activities can be found at: <https://www.cdc.gov/acip/index.html>.

Reasons for the continuation: During the next two years, the ACIP is anticipated to work on and/or advise on the following initiatives:

- convene new work groups as needed in response to new vaccine development, emerging evidence, and/or the review of existing vaccine-related data);
- ensure publication of the child/adolescent and adult immunization schedules in professional society journals/websites, in addition to MMWR publication and posting on the CDC website;
- continue to implement consistent procedures across the ACIP work groups;
- continue to refine the evidence-based process for development of ACIP vaccine recommendations;

- continue to improve processes to ensure transparency and opportunity for public comment during deliberations; and

- conduct continuing education activities for ACIP members to enhance their understanding of the role of health economic evaluations, and the evidence-based recommendations process, in development of vaccine recommendations.

7. Explanation of why the committee/subcommittee is essential to the conduct of agency business: The Secretary, Department of Health and Human Services (HHS), and by delegation the Director, Centers for Disease Control and Prevention (CDC), are authorized under Section 311 and Section 317 of the Public Health Service Act, [42 U.S.C. 243 and 42 U.S.C. 247b], as amended, to assist states and their political subdivisions in the prevention and control of communicable diseases; to advise the states on matters relating to the preservation and improvement of the public's health; and to make grants to states and, in consultation with the state health authorities, to agencies and political subdivisions of states to assist in meeting the costs of communicable disease control programs. Vaccines have played an important role in public health around the globe. The Advisory Committee on Immunization Practices (ACIP) provides recommendations to the Director of the Centers for Disease Control and Prevention (CDC) on the use of vaccines and immunization program strategies to inform individuals, clinicians, and broader public health efforts. This committee convenes scientific and medical experts to provide recommendations based on the best available evidence of vaccine risks and benefits, and efficacy. The ACIP shall provide advice and guidance to the CDC Director regarding use of vaccines and related agents for effective control of vaccine-preventable diseases and/or decrease symptomatology in the civilian population of the United States including identifying areas where additional data or evaluation would be useful to inform future recommendations. Recommendations made by the ACIP are initially reviewed by the CDC Director, and if adopted, become official CDC/HHS recommendations, and may be published in the Morbidity and Mortality Weekly Report (MMWR). The CDC Director informs the HHS Secretary, and Assistant Secretary for Health, of immunization recommendations provided by ACIP. Upon the licensure or authorization of any vaccine or any new indication for a vaccine, the Committee shall, as

appropriate, consider the use of the vaccine at its next regularly scheduled meeting. If the Committee does not make a recommendation at the Committee's first regularly scheduled meeting, the Committee shall provide an update on the status of such for the Committee's review.

In conclusion, this public interest determination documents that renewing the committee is in the public interest, essential to the conduct of agency business, and that the information to be obtained is not already available through another advisory committee or source within the Federal Government.

The Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Kalwant Smagh,

Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-R-5]

Agency Information Collection Activities: Proposed Collection; 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 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including