[FR Doc. 2012–24639 Filed 10–4–12; 8:45 am] BILLING CODE 8070–01–C

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 (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 notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing to the Reserve Bank indicated for that notice or to the offices of the Board of Governors. Comments must be received not later than October 22, 2012.

A. Federal Reserve Bank of Atlanta (Chapelle Davis, Assistant Vice President) 1000 Peachtree Street, NE., Atlanta, Georgia 30309:

1. *Guido Edwin Hinojosa Cardoso,* La Paz, Bolivia; to voting shares of Anchor Commercial Bank, Juno Beach, Florida.

Board of Governors of the Federal Reserve System, October 2, 2012.

Margaret McCloskey Shanks,

Associate Secretary of the Board. [FR Doc. 2012–24619 Filed 10–4–12; 8:45 am] BILLING CODE 6210–01–P

FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank 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 applications will also 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 BHC Act (12 U.S.C. 1842(c)). 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 4 of the BHC Act (12 U.S.C. 1843). 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 November 2, 2012.

A. Federal Reserve Bank of Kansas City (Dennis Denney, Assistant Vice President) 1 Memorial Drive, Kansas City, Missouri 64198–0001:

1. *BBJ Incorporated*, Ord, Nebraska; to merge with City National Bancshares, Inc., and thereby indirectly acquire CNB Community Bank, both in Greeley, Nebraska.

B. Federal Reserve Bank of San Francisco (Kenneth Binning, Vice President, Applications and Enforcement) 101 Market Street, San Francisco, California 94105–1579:

1. *Grandpoint Capital, Inc.,* Los Angeles, California; to acquire 100 percent of the voting shares of California Community Bank, Escondido, California.

Board of Governors of the Federal Reserve System, October 2, 2012.

Margaret McCloskey Shanks, Associate Secretary of the Board. [FR Doc. 2012–24620 Filed 10–4–12; 8:45 am] BILLING CODE 6210–01–P

FEDERAL RESERVE SYSTEM

Notice of Proposals To Engage in or To Acquire Companies Engaged in Permissible Nonbanking Activities

The companies listed in this notice have given notice under section 4 of the Bank Holding Company Act (12 U.S.C. 1843) (BHC Act) and Regulation Y, (12 CFR part 225) to engage de novo, or to acquire or control voting securities or assets of a company, including the companies listed below, that engages either directly or through a subsidiary or other company, in a nonbanking activity that is listed in § 225.28 of Regulation Y (12 CFR 225.28) or that the Board has determined by Order to be closely related to banking and permissible for bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than November 2, 2012.

A. Federal Reserve Bank of Richmond (Adam M. Drimer, Assistant Vice President) 701 East Byrd Street, Richmond, Virginia 23261–4528:

1. *City Holding Company*, Cross Lanes, West Virginia; to acquire 100 percent of the voting securities of Community Financial Corporation, and thereby indirectly acquire voting shares of Community Bank, both in Staunton, Virginia, and thereby engage in operating a savings association, pursuant to section 225.28(b)(4)(ii).

Board of Governors of the Federal Reserve System, October 2, 2012.

Margaret McCloskey Shanks,

Associate Secretary of the Board. [FR Doc. 2012–24621 Filed 10–4–12; 8:45 am] BILLING CODE 6210–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Office of the Assistant Secretary for Health, Statement of Organization, Functions, and Delegations of Authority

Part A, Office of the Secretary, Statement of Organization, Function, and Delegation of Authority for the U.S. Department of Health and Human Services is being amended at Chapter AC, Office of the Assistant Secretary for Health (OASH), as last amended at 77 FR 2012-12173, dated May 18, 2012; 75 FR 53304-05, dated August 31, 2010; 72 FR 58095–96, dated October 12, 2007; 69 FR 660-661, dated January 6, 2004; 68 FR 70507-10, dated December 18, 2003; and 67 FR 71568-70, dated December 2, 2002. The amendment reflects the realignment of personnel oversight, administration and management functions for the U.S. Public Health Service (PHS) Commissioned Corps in the OASH. Specifically, it transfers functions performed by the Office of the Assistant Secretary for Administration, Program Support Center, Administrative Operations Service, Office of

Commissioned Corps Support Services to the Office of the Surgeon General (ACM). The changes are as follows:

I. Under Part A, Chapter AC, Office of the Assistant Secretary for Health, make the following changes:

A. Under Section AC.20, Functions, "I. Office of Surgeon General (ACM), Section ACM.20 Functions, (c) Division of Commissioned Corps Personnel and Readiness (ACM2), 3. Assignments & Career Management Branch (ACM23)" add the following functions, beginning with (13) through (22):

3. Assignments and Career Management Branch (ACM23). (13) Administers a payroll system for active duty Commissioned Corps officers of basic pay, allowances, and special or incentive pay in coordination with the Departments of Defense, Veterans Affairs, and Treasury; (14) Administers a pay system for retired Commissioned Corps officers and survivor annuitants in coordination with the Departments of Veterans Affairs and Treasury; (15) Administrative management of active duty Commissioned Corps officer healthcare and support for healthcare authorization and access to care; (16) Provides pre-retirement counseling, conducts retirement boards, determines eligibility for retirement, processes retirements, and recalls retirees to active duty; (17) Administration of periodic, separation and retirement health evaluations; (18) Review and award of Combat-Related Special Pay, Servicemembers' Group Life Insurance Traumatic Injury Protection Program, and Line of Duty determinations; (19) Management and support of ongoing medical and behavioral health challenges among active duty officers; (20) Management of fitness for duty and disability evaluations and determinations; (21) Administration of medical waiver evaluations and issuances; and (22) Management of Medical Evaluation and Appeal Boards.

B. Under Section AC.20, Functions, "I. Office of Surgeon General (ACM), Section ACM.20 Functions, (e) Division of Systems Integration (ACM6), add the following functions, beginning with (4) through (9):

(e) Division of Systems Integration
(ACM6). (4) Certifies monthly
Commissioned Corps payroll to
Treasury; (5) Administers supplemental and third-party payments to Treasury;
(6) Reviews payroll reports, identifies potential payroll-related issues, and validates the monthly Commissioned
Corps payroll; (7) Provides data
reporting and data extracts to HHS and other governmental organizations and agencies; (8) Maintains Commissioned
Corps personnel data systems and

ensures integrity and availability of personnel and operational data; and (9) Maintains Commissioned Corps Web sites and ensures 508 compliance.

II. Continuation of Policy: Except as inconsistent with this reorganization, all statements of policy and interpretations with respect to the Commissioned Corps of the PHS heretofore issued and in effect prior to this reorganization are continued in full force and effect.

III. Delegations of Authority. Directives and orders of the Secretary, Assistant Secretary for Health, or Surgeon General and all delegations and re-delegations of authority previously made to officials and employees of the affected organizational components will continue in them or their successors pending further re-delegation, provided they are consistent with this reorganization. All delegated authorities associated with or necessary to administer, operate, and manage transferred entities affected by this reorganization are transferred to the Assistant Secretary for Health and may be re-delegated.

IV. Funds, Personnel, and Equipment. Transfer of organizations and functions affected by this reorganization shall be accompanied by direct and support funds, positions, personnel, records, equipment, supplies, and other resources.

Dated: September 21, 2012. E.J. Holland, Jr.,

Assistant Secretary for Administration. [FR Doc. 2012–24564 Filed 10–4–12; 8:45 am] BILLING CODE 4150–28–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS. **ACTION:** Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project: "Development of a Health Information Rating System (HIRS)." In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501–3521, AHRQ invites the public to comment on this proposed information collection.

DATES: Comments on this notice must be received by December 4, 2012.

ADDRESSES: Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, by email at *doris.lefkowitz@AHRQ.hhs.gov*.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

FOR FURTHER INFORMATION CONTACT:

Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427–1477, or by email at *doris.lefkowitz@AHRQ.hhs.gov.* SUPPLEMENTARY INFORMATION:

Proposed Project

Development of a Health Information Rating System (HIRS)

Over the past several years, low health literacy has been identified as an important health care quality issue. Healthy People 2010 defined health literacy as "the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions." In 2003, the Institute of Medicine identified health literacy as a crosscutting area for health care quality improvement. According to the 2003 National Assessment of Adult Literacy, only 12 percent of adults have proficient health literacy.

Persons with limited health literacy face numerous health care challenges. They often have a poor understanding of basic medical vocabulary and health care concepts. A study of patients in a large public hospital showed that 26 percent did not understand when their next appointment was scheduled and 42 percent did not understand instructions to "take medication on an empty stomach." In addition, limited health literacy leads to more medication errors, more and longer hospital stays, and a generally higher level of illness, resulting in an estimated excess cost for the US health care system of \$50 billion to \$73 billion per year.

Health care providers can improve their patients' health outcomes by delivering the right information at the right time in the right way to help patients prevent or manage chronic conditions such as diabetes, cardiovascular disease, hypertension, and asthma. Electronic health records (EHRs) can help providers offer patients the right information at the right time during office visits, by directly connecting patients to helpful resources on treatment and self-management. EHRs can also facilitate clinicians' use of patient health education materials in the clinical encounter. However, health education materials delivered by EHRs,