Budget. Strategic Plan and Annual Performance Budget. Proposed Bank Examination Rating System. Final Rule: Affordable Housing Program Amendments.

Matter to be Considered at the Closed Portion: Periodic Update of Examination Program Development and Supervisory Findings.

CONTACT PERSON FOR MORE INFORMATION: Shelia Willis, Paralegal Specialist, Office of General Counsel, at 202–408– 2876 or *williss@fhfb.gov.*

Dated: September 6, 2006.

By the Federal Housing Finance Board.

John P. Kennedy,

General Counsel.

[FR Doc. 06–7581 Filed 9–06–06; 2:54 pm] BILLING CODE 6725–01–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 application also will 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. Additional information on all bank holding companies may be obtained from the National Information Center website at www.ffiec.gov/nic/.

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 5, 2006. **A. Federal Reserve Bank of Minneapolis** (Jacqueline G. King, Community Affairs Officer) 90 Hennepin Avenue, Minneapolis, Minnesota 55480-0291:

1. Minnwest Corporation, Minnetonka, Minnesota; to acquire 100 percent of the voting shares of Aumanchester, Inc., Rochester, Minnesota, and thereby indirectly acquire Rochester Bank, Rochester, Minnesota.

B. Federal Reserve Bank of Kansas City (Donna J. Ward, Assistant Vice President) 925 Grand Avenue, Kansas City, Missouri 64198-0001:

1. Columbine Capital Corp., Buena Vista, Colorado; to become a bank holding company by acquiring 100 percent of the voting shares of Collegiate Peaks Bank, Buena Vista, Colorado.

Board of Governors of the Federal Reserve System, September 5, 2006.

Jennifer J. Johnson,

Secretary of the Board. [FR Doc. E6–14889 Filed 9–7–06; 8:45 am] BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Meeting on Patient and Physician Concerns in Access to Intravenous Immunoglobulin (IVIG)

AGENCY: Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation (HHS/ASPE).

ACTION: Notice of Meeting.

SUMMARY: This notice announces the date and location of a Town Hall meeting to be held on September 28, 2006 to obtain public comment on patient and physician concerns with access to IVIG. The Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation has contracted with Eastern Research Group, Inc. (ERG) to develop an analysis of supply, distribution, demand, and access issues associate with IVIG. This public meeting provides a forum for interested parties to make oral comments and to submit written comments about IVIG access for use in the analysis. In particular, comments are invited that will aid in the analysis of any physician or patient problems with access to IVIG, including the nature, size, and scope of any problems, as well as estimation of changes in health outcomes that may result from access problems.

DATES: The Town Hall meeting will be held on September 28, 2006 from 10 a.m. to 5 p.m.

ADDRESSES: Sheraton Crystal City Hotel, 1800 Jefferson Davis Highway, Arlington, VA.

FOR FURTHER INFORMATION CONTACT:

Amber Jessup. Office of the Assistant Secretary for Planning and Evaluation, 200 Independence Ave., SW., Washington, DC 20201. Telephone: 202–690–6621.

Web site: Additional details regarding the Town Hall meeting process for public comments, along with information on how to register and guidelines for an effective presentation and/or electronic comment submission, can be found on the project Web site at https://www2.ergweb.com/projects/ conferences/hhs.

SUPPLEMENTARY INFORMATION:

I. Background

The Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation has contracted with Eastern Research Group, Inc. (ERG) to develop an analysis of supply, distribution, demand, and access issues associated with IVIG. As part of this analysis, a Town Hall meeting is being scheduled to obtain public comment on access issues to be used in the analysis.

Intravenous Immune Globulin (IVIG) is a plasma product that is used to treat patients with immune system disorders. Îmmune globulins are antibodies. IVIG has a number of on-label uses including treatment of humoral immunodeficiency, acute and chronic idiopathic thrombocytopenia purpura, B cell chronic lymphocytic leukemia (to prevent recurrent bacterial infections), Kawasaki disease, pediatric HIV, and bone marrow transplantation. It is also used for off-label treatments including autoimmune, neurological, and systemic inflammatory conditions. According to the Department of Health and Human Services Advisory Committee on Blood Safety and Availability, more than half of IVIG use may be for off-label indications. Due at least in part to the increase in off-label uses, demand for IVIG has increased in recent years. The number of infusion days in hospitals increased to 70,000 days in 2004 from 40,000 days in 2002 and the number of grams infused in physician offices increased by 1.7 million grams, between 2003 and 2004, from 2.3 to 4.0 million grams.

IVIG is covered under Medicare Part B. In 2005, Medicare shifted from Average Wholesale Price (AWP) as the basis for reimbursement to Average

Sales Price (ASP) as required by the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA). This shift reduced the reimbursement amount to physicians by 35 percent for the powder form of IVIG and by 15 percent for the liquid form of IVIG. Since January 2005, some patient advocacy groups and physicians have reported difficulty acquiring IVIG. The FDA Center for Biologics Evaluation and Research, however, has not identified a shortage of IVIG. There have also been reports of IVIG being diverted to secondary markets with increases in prices.

The focus of the Town Hall meeting is on receiving information from stakeholders that will be helpful in the analysis. The Town Hall meeting will accept comments from all stakeholders, but is focused on patient and physician concerns with access to IVIG including:

(1) Patients switching IVIG products due to access problems,

(2) Changes in the administration location,

(3) Patients receiving fewer treatments,

(4) Patients receiving reduced dosages, and

(5) Reimbursement problems with IVIG products,

(6) Patients receiving reduced dosages, and

(7) Health consequences for patients of any access issues.

II. Registration

Registration procedures: Registration can be completed online at https:// www2.ergweb.com/projects/ conferences/hhs/. To register by telephone, contact ERG's Conference Registration Line at 781-674-7374. The following information must be provided when registering: Name, organization name and address (if applicable), and consent to publish contact information on a participants list and other reports to document the Town Hall meeting. An ERG staff member will confirm your registration by mail, e-mail, or fax. Attendees may participate in person or by phone. If you wish to participate by phone, please indicate this in your registration and a call-in conference number will be provided in your registration confirmation. Attendees must register by September 21.

III. Comment Format

a. "5-Minute" Public Comment

Meeting attendees can sign up on a first-come, first-served basis to present their comments (maximum of 5 minutes) via the meeting Web site when you register. Comments may be made in person or by phone. Commenters should focus on issues related to access to IVIG and quantify these impacts when possible. Commenters must provide their name, title, and organization (if applicable) on their registration and identify the topic area they will address. Presenters that can not attend in person can participate via phone. If you are unable to attend in person, you should indicate at registration that you wish to participate via phone. A call-in conference number will be provided to you in your registration confirmation.

b. Written Comments From Meeting Attendees

Written comments are welcome from the public regardless of whether you attend the Town Hall Meeting or whether you make an oral presentation at the Town Hall Meeting. Written comments can be submitted either at the meeting, or before or after the meeting via e-mail to *meetings@erg.com* (subject: IVIG Meeting Comments). Or via regular mail to Attn: IVIG Meeting, ERG, 110 Hartwell Avenue, Lexington, MA 02421. Please note that electronic submissions are preferred due to delays in receiving US Postal Mail. We are able to consider only those comments received in writing and/or via e-mail by 5 p.m. EST on October 15, 2006.

IV. Special Accommodations

Individuals attending the meeting who are hearing- or visually-impaired and have special requirements, or a condition that requires special assistance or accommodations, must provide this information when registering for the meeting and accommodations will be made.

Dated: August 31, 2006.

Jerry Regier,

Principal Deputy Assistant Secretary for Planning and Evaluation, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 06–7510 Filed 9–7–06; 8:45 am] BILLING CODE 4151–06–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the National Vaccine Advisory Committee

AGENCY: Department of Health and Human Services, Office of the Secretary. **ACTION:** Notice.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (DHHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) will hold a meeting. The meeting is open to the public. **DATES:** The meeting will be held on September 26, 2006, from 9 a.m. to 5 p.m., and on September 27, 2006, from 9 a.m. to 4 p.m.

ADDRESSES: Department of Health and Human Services; Hubert H. Humphrey Building, Room 800; 200 Independence Avenue, SW., Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: Ms. Emma English, Program Analyst, National Vaccine Program Office, Department of Health and Human Services, Room 443–H Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201; (202) 690–5566, *nvac@hhs.gov.*

SUPPLEMENTARY INFORMATION: Pursuant to Section 2101 of the Public Service Act (42 U.S.C. 300aa–1), the Secretary of Health and Human Services was mandated to establish the National Vaccine Program to achieve optimal prevention of human infectious diseases through immunization and to achieve optimal prevention against adverse reactions to vaccines. The National Vaccine Advisory Committee was established to provide advice and make recommendations to the Assistant Secretary for Health, as the Director of the National Vaccine Program, on matters related to the program's responsibilities.

Topics to be discussed at the meeting include: the 2006–2007 influenza season, increasing immunization among adolescents, vaccine financing, implementation plans for new vaccines, and vaccine safety. Updates will be given by various subcommittees and working groups. A tentative agenda will be made available on or about September 5, 2006 for review on the NVAC Web site: http://www.hhs.gov/ nvpo/nvac.

Public attendance at the meeting is limited to space available. Individuals must provide a photo ID for entry into the Humphrey Building. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the designated contact person. Members of the public will have the opportunity to provide comments at the meeting. Public comment will be limited to five minutes per speaker. Any members of the public who wish to have printed material distributed to NVAC members should submit materials to the Executive Secretary, NVAC, through the contact person listed above prior to close of business September 19, 2006. Preregistration is required for both public attendance and comment. Any