Shoemaker, Chief, Banking and Regulatory Policy, 202–898–6962, *kashoemaker@fdic.gov;* Legal Division: Sheikha Kapoor, Assistant General Counsel, 202–898–3960, *skapoor@fdic.gov;* Vivek Khare, Senior Counsel, 202–898–6847; or Ryan McCarthy, Counsel, 202–898–7301, *rymccarthy@fdic.gov.*

SUPPLEMENTARY INFORMATION: On August 6, 2024, the FDIC published in the **Federal Register** an RFI and comment soliciting comments on deposit data that is not currently reported in the FFIEC Call Report or other regulatory reports, including for uninsured deposits. The FDIC issued the RFI to seek information on the characteristics that affect the stability and franchise value of different types of deposits and whether more detailed or more frequent reporting on these characteristics or types of deposits could enhance offsite risk and liquidity monitoring, inform analysis of the benefits and costs associated with additional deposit insurance coverage for certain types of deposits, improve risk sensitivity in deposit insurance pricing, and provide analysts and the general public with accurate and transparent data. The RFI stated that the comment period would close on October 7, 2024. The FDIC has received requests to extend the comment period. An extension of the comment period will allow interested parties additional time to prepare information and comments. Therefore, the FDIC is extending the end of the comment period for the RFI from October 7, 2024, to December 6, 2024.

Federal Deposit Insurance Corporation.

Dated at Washington, DC, on October 1, 2024.

James P. Sheesley,

Assistant Executive Secretary.

[FR Doc. 2024–23010 Filed 10–3–24; 8:45 am]

BILLING CODE 6714–01–P

FEDERAL DEPOSIT INSURANCE CORPORATION

Notice of Termination of Receiverships

The Federal Deposit Insurance Corporation (FDIC or Receiver), as Receiver for each of the following insured depository institutions, was charged with the duty of winding up the affairs of the former institutions and liquidating all related assets. The Receiver has fulfilled its obligations and made all dividend distributions required by law.

NOTICE OF TERMINATION OF RECEIVERSHIPS

Fund	Receivership name	City	State	Termination date
10221	Lincoln Park Savings Bank	Chicago	IL	10/01/2024
10486	Community South Bank	Parsons	TN	10/01/2024
10524	Seaway Bank and Trust Company	Chicago	IL	10/01/2024

The Receiver has further irrevocably authorized and appointed FDIC-Corporate as its attorney-in-fact to execute and file any and all documents that may be required to be executed by the Receiver which FDIC-Corporate, in its sole discretion, deems necessary, including but not limited to releases, discharges, satisfactions, endorsements, assignments, and deeds. Effective on the termination dates listed above, the Receiverships have been terminated, the Receiver has been discharged, and the Receiverships have ceased to exist as legal entities.

(Authority: 12 U.S.C. 1819)

Federal Deposit Insurance Corporation.

Dated at Washington, DC, on October 1, 2024.

James P. Sheesley,

Assistant Executive Secretary.

[FR Doc. 2024–22964 Filed 10–3–24; 8:45 am]

BILLING CODE 6714–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–24–1310]

Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled ''Public Health Laboratory Testing for Emerging Antibiotic Resistance and Fungal Threats'' to the Office of Management and Budget (OMB) for review and approval. CDC previously published a ''Proposed Data Collection Submitted for Public Comment and Recommendations'' notice on June 17, 2024 to obtain comments from the public and affected agencies. CDC did not receive comments related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.,* permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570. 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. Direct written comments and/or suggestions regarding

the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW, Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

Proposed Project

Public Health Laboratory Testing for Emerging Antibiotic Resistance and Fungal Threats (0920–1310, Exp. 5/31/2026)—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Antimicrobial resistance has the potential to impact all Americans at every stage of life and the Centers for Disease Control and Prevention (CDC) is working to drive aggressive action and empower the nation to comprehensively respond to these threats. The National Action Plan Sub-Objective 2.1.1 describes creation of ''a regional public health laboratory network that uses standardized testing platforms to expand the availability of reference testing services'', and facilitation of ''rapid data analysis and dissemination of information.'' The CDC has created this public health laboratory network and named it the Antimicrobial Resistance Laboratory Network (AR Lab Network). The mission of the AR Lab Network is to offer validated high-quality laboratory testing through funding support of state and regional labs so these labs can build the capacity and the capability to locally improve detection and laboratory diagnostics. Building strength nationally through public health laboratories thereby increases the capacity of state and local health departments for rapid detection and faster response to outbreaks and emerging antimicrobial resistance among bacterial and fungal pathogens (*https://www.cdc.gov/antimicrobial-resistance/media/pdfs/2019-ar-threats-report-508.pdf*). This state and local public health laboratory testing capacity is being implemented by the Department of Health and Human Services (HHS), Centers for Disease Control and Prevention (CDC) in response to the Executive Order 13676 of September 18, 2014, the National Strategy of September 2014 and to implement the National Action Plan of October 2020 for Combating Antibiotic-Resistant Bacteria. Data collected throughout this network is also authorized by Section 301 of the Public Health Service Act (42 U.S.C. 241).

The CDC's AR Lab Network supports nationwide lab capacity to rapidly detect antimicrobial resistance and inform local public health responses to prevent spread and protect people. It closes the gap between local laboratory capabilities and the data needed to combat antimicrobial resistance by providing comprehensive lab capacity and infrastructure for detecting antimicrobial-resistant pathogens (germs), advanced technology, like DNA sequencing, and rapid sharing of actionable data to drive infection control responses and help treat infections. This infrastructure allows the public health community to rapidly detect emerging antimicrobial-resistant threats in healthcare, food, and the community, mount a comprehensive local response, and better understand these deadly threats to quickly contain them.

The AR Lab Network is a network of jurisdictional public health laboratories currently including those of all 50 states, District of Columbia, Los Angeles County, Houston, New York City, Philadelphia, Guam, and Puerto Rico. Laboratories are financially supported through the Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) Cooperative agreement (CDC–RFA–CK–24–0002) to perform testing, support workforce, and laboratory infrastructure. Laboratory capacity supported through the AR Lab Network fall into the following categories: (1) core testing, support for important antimicrobial resistant pathogens that are traditionally healthcare-associated, including carbapenem-resistant Enterobacteriaceae (CRE), carbapenem-resistant Pseudomonas aeruginosa (CRPA), carbapenem-resistant Acinetobacter baumannii (CRAB), and Candida species, including C. auris; (2) jurisdictional testing capacity that supports Neisseria gonorrhoeae surveillance; (3) testing of colonization screening samples to support local public health response; and (4) enhanced testing capacity at the regional laboratories (currently seven).

CDC is requesting a three-year approval for revisions made to OMB Control No. 0920–1310 for the Public Health Laboratory Testing for Emerging Antibiotic Resistance and Fungal Threats which supports the data collected through the Antimicrobial Resistance Laboratory Network (AR Lab Network). A Revision is being submitted to: (1) add new data elements to the data collection forms: (2) ensure that the burden of generating electronic messages for data transmission are accounted for; and (3) accommodate changes to the Performance Measures (PMs) used to monitor the performance of the AR Lab Network. For this Revision, the total estimated annual burden is 57,872 hours. There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Average number of responses per respondent	Average burden per response (in hours)
Public Health Laboratories	I.1—ROUTINE TESTING BY GENERAL IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	57	1	10/60
	1.2—EXPANDED DRUG SUSCEPTIBILITY TESTING (ExAST) IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	7	1	10/60
	1.3—CANDIDA SPECIES IDENTIFICATION IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	57	1	10/60
	1.4—HAIAR WHOLE GENOME SEQUENCING (WGS) OF GRAM–NEGATIVE AR THREATS IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	Up to 57	1	10/60

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Type of respondents	Form name	Number of respondents	Average number of responses per respondent	Average burden per response (in hours)
	1.5—C. AURIS COLONIZATION SCREENING IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	Up to 57	1	10/60
	1.6—CARBAPENEMASE–PRODUCING ORGANISM (CPO) SCREENING IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	Up to 57	1	10/60
	1.7—AZOLE RESISTANCE IN CLINICAL ASPERGILLUS FUMIGATUS ISOLATES—Annual Evaluation and Performance Measurement Report.	2	1	20/60
	1.8—N. GONORRHOEAE WHOLE GENOME SEQUENCING (WGS)—Annual Evaluation and Performance Measurement Report.	4	1	10/60
	1.9—GONOCOCCAL (GC) ANTIMICROBIAL SUSCEPTIBILITY TESTING (AST) IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	4	1	20/60
	1.10—WHOLE GENOME SEQUENCING (WGS) OF S. PNEUMONAIE—Annual Evaluation and Performance Measurement Report.	2	1	20/60
	1.11—CLOSTRIDIOIDES DIFFICILE (C. DIFFICLE) TESTING IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	2	1	20/60
	1.12—ANTIFUNGAL RESISTANT TINEA DERMATOPHYTES—Annual Evaluation and Performance Measurement Report.	3	1	20/60
	1.13—ANTIMICROBIAL SUSCEPTIBILITY TESTING (AST) OF INVASIVE HAEMOPHILUS INFLUENZAE (H. INFLUENZAE) IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	2	1	20/60
	1.14—MYCOPLASMA GENTALIUM (MG)—Annual Evaluation and Performance Measurement Report.	4	1	20/60
	1.15—MOLECULAR Mtb TESTING—Annual Evaluation and Performance Measurement Report.	Up to 20	1	10/60
	1.16—C. AURIS WHOLE GENOME SEQUENCING (WGS) IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	Up to 57	1	10/60
	1.17—MONITORING CRE CRPA IN COMPANION ANIMALS TO FROM HUMANS—Annual Evaluation and Performance Measurement Report.	Up to 2	1	20/60
	1.18—HEALTHCARE WASTEWATER–BASED SURVEILLANCE—Annual Evaluation and Performance Measurement Report.	Up to 2	1	20/60
	1.19—COMMUNICATION AND COORDINATION OF ACTIONABLE EPI LAB DATA IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	57	1	10/60
	1.20—CHARACTERIZATION OF THE CLINICAL LABORATORY NETWORK IN JURISDICTION—Annual Evaluation and Performance Measurement Report.	57	1	10/60
	1.21 NEISSERIA GONORRHOEAE ETEST FOR SHARP.	17	1	20/60
	AR Lab Network Annual Report of Testing Methods for Carbapenemase-producing Organisms.	57	1	2
	AR Lab Network Monthly Data Report Form for Carbapenemase-producing Organisms.	57	1302	20/60
	AR Lab Network Alert Report Form for Carbapenemase-producing Organisms.	57	214	3/60
	AR Lab Network Alert and Monthly Data Report Form for *Candida*.	Up to 57	1671	20/60
	AR Lab Network Form for Phylogenetic Tree-level Mycotics Reporting.	Up to 57	30	6/60
	AR Lab Network Alert and Monthly Data Report Form for *Neisseria gonorrhoeae*.	17	93	6/60
	AR Lab Network DAART data elements for *Neisseria gonorrhoeae*.	4	50	10/60
	HL7 Messages updates—IT Maintenance	32	4	20/60

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Type of respondents	Form name	Number of respondents	Average number of responses per respondent	Average burden per response (in hours)
	Implementation of new HL7 messages—IT Initial Set up.	11	4	3
	CSV files updates for Carbapenemase-producing organisms—IT Maintenance.	24	1	1

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.

[FR Doc. 2024–22958 Filed 10–3–24; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–R–65]

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 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 December 3, 2024.

ADDRESSES: When commenting, please reference the document identifier or OMB control number. 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: Document Identifier/OMB Control Number: 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, please access the CMS PRA website by copying and pasting the following web address into your web browser: *https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.*

FOR FURTHER INFORMATION CONTACT: William N. Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION:

Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

CMS–R–65 Final Peer Review Organizations Sanction and Supporting Regulations

Under the 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 requires federal agencies to publish a 60-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.

Information Collections

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Final Peer Review Organizations Sanction and Supporting Regulations; *Use:* The Peer Review Improvement Act of 1982 amended Title XI of the Social Security Act (the Act), creating the Utilization and Quality Control Peer Review Organization Program. Section 1156 of the Act imposes obligations on health care practitioners and others who furnish or order services or items under Medicare. This section also provides for sanction actions, if the Secretary determines that the obligations as stated by this section are not met. Quality Improvement Organizations (QIOs) are responsible for identifying violations. The QIOs may allow practitioners or other entities, opportunities to submit relevant information before determining that a violation has occurred. The information collection requirements contained in this information collection request are used by the QIOs to collect the information necessary to make their decision. *Form Number:* CMS–R–65 (OMB control number: 0938–0444); *Frequency:* Occasionally; *Affected Public:* Private sector—Business or other for-profit and Not-for-profit institutions; *Number of Respondents:* 34; *Total Annual Responses:* 34; *Total Annual Hours:* 8,144. (For policy questions