

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices; Acquisitions of Shares of Banks or Bank Holding Companies

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 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. Once the notices have been accepted for processing, they will also 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 June 11, 1996.

A. Federal Reserve Bank of Dallas (Genie D. Short, Vice President) 2200 North Pearl Street, Dallas, Texas 75201-2272:

1. *Stephen Elsmar Cone, Jr.*, Lubbock, Texas; to acquire an additional 21.79 percent, for a total of 29.19 percent of the voting shares of Sundown Bankshares, Inc., Sundown, Texas, and thereby indirectly acquire Sundown State Bank, Sundown, Texas.

Board of Governors of the Federal Reserve System, May 21, 1996.

Jennifer J. Johnson,

Deputy Secretary of the Board.

[FR Doc. 96-13227 Filed 5-24-96; 8:45 am]

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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. Once the application has been accepted for processing, it 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, including whether the acquisition of the nonbanking company can "reasonably be expected to produce benefits to the public, such as greater convenience, increased competition, or gains in efficiency, that outweigh possible adverse effects, such as undue concentration of resources, decreased or unfair competition, conflicts of interests, or unsound banking practices" (12 U.S.C. 1843). Any request for a hearing must be accompanied by a statement of the reasons a written presentation would not suffice in lieu of a hearing, identifying specifically any questions of fact that are in dispute, summarizing the evidence that would be presented at a hearing, and indicating how the party commenting would be aggrieved by approval of the proposal. 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 June 21, 1996.

A. Federal Reserve Bank of St. Louis (Randall C. Sumner, Vice President) 411 Locust Street, St. Louis, Missouri 63166:

1. *Chambers Bancshares, Inc.*, Danville, Arkansas; to acquire 100 percent of the voting shares of ACME Holding Company, Inc., Mulberry, Arkansas, and thereby indirectly acquire Bank of Mulberry, Mulberry, Arkansas.

Board of Governors of the Federal Reserve System, May 21, 1996.

Jennifer J. Johnson,

Deputy Secretary of the Board.

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Notice of Proposals to Engage in Permissible Nonbanking Activities or to Acquire Companies that are 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 that engages either directly or through a subsidiary or

other company, in a nonbanking activity that is listed in § 225.25 of Regulation Y (12 CFR 225.25) 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. Once the notice has been accepted for processing, it will also 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, including whether consummation of the proposal can "reasonably be expected to produce benefits to the public, such as greater convenience, increased competition, or gains in efficiency, that outweigh possible adverse effects, such as undue concentration of resources, decreased or unfair competition, conflicts of interests, or unsound banking practices" (12 U.S.C. 1843). Any request for a hearing on this question must be accompanied by a statement of the reasons a written presentation would not suffice in lieu of a hearing, identifying specifically any questions of fact that are in dispute, summarizing the evidence that would be presented at a hearing, and indicating how the party commenting would be aggrieved by approval of the proposal.

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 June 11, 1996.

A. Federal Reserve Bank of Richmond (Lloyd W. Bostian, Jr., Senior Vice President) 701 East Byrd Street, Richmond, Virginia 23261:

1. *FCFT, Inc.*, Princeton, West Virginia; to engage *de novo* in community development activities through an investment in South Oakwood Plaza Limited Partnership, III, pursuant to § 225.25(b)(6) of the Board's Regulation Y.

B. Federal Reserve Bank of Atlanta (Zane R. Kelley, Vice President) 104 Marietta Street, N.W., Atlanta, Georgia 30303:

1. *Tattnall Bancshares, Inc.*, Reidsville, Georgia; to acquire Reidsville Insurance Agency, Inc., Reidsville, Georgia, and thereby engage in insurance agency activities, pursuant to § 225.25(b)(8)(iii)(A) of the Board's Regulation Y. The geographic scope of this activity will be Reidsville, Georgia.

Board of Governors of the Federal Reserve System, May 21, 1996.

Jennifer J. Johnson,

Deputy Secretary of the Board.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Health Care Policy and Research

Nominations of Outcomes and Effectiveness Research Priority Topics

The Agency for Health Care Policy and Research (AHCPR) is inviting suggestions for priority topics for research related to prevention, diagnosis, treatment and/or management of common diseases and clinical conditions. These suggestions will be considered in AHCPR's plans for future research on the outcomes and effectiveness of health care services. The process AHCPR will employ in establishing priorities and selecting topics for outcomes/effectiveness research is described below.

Background

AHCPR is charged under Title IX of the Public Health Service Act (42 U.S.C. 299-299c-6) with enhancing the quality, appropriateness, and effectiveness of health care services and access to such services. AHCPR accomplishes these goals through scientific research that promotes improvements in clinical practice (including the prevention of diseases and other health conditions) and improvements in the organization, financing, and delivery of health care services. Section 1142 of the Social Security Act (42 U.S.C. 1320b-12) enhances and elaborates on AHCPR's program of outcomes and effectiveness research. Outcomes of care and effectiveness research constitutes a major portion of AHCPR's health services research agenda.

Outcomes and Effectiveness Research Program

The outcomes and effectiveness research program grew out of awareness of significant unexplained variations in clinical (medical, nursing, and allied health) practice and the inadequacy of scientific evidence to support many common treatments and procedures. Outcomes and effectiveness research encompasses three main areas of emphasis for the prevention, diagnosis, treatment, and management of illness: (1) Determination of the clinical

interventions that are most effective, cost effective, and appropriate; (2) development of methods and data to advance effectiveness research; and (3) dissemination and evaluation of the impact of research findings on clinical practice and outcomes. Other distinctive characteristics of outcomes and effectiveness research include its multidisciplinary nature; use of a variety of research designs (e.g., observational studies, prospective trials, database studies) and analytical methods (e.g., decision analysis, utility analysis, and cost-effectiveness analysis); incorporation of both objective and subjective measures of outcomes; and emphasis on policy relevance.

To date, AHCPR's outcomes and effectiveness research has focused on conditions that meet the following criteria:

- High incidence or prevalence in the general population or in major population subgroups, as defined by age, gender, or ethnicity;
- Controversy or uncertainty about the effectiveness and relative effectiveness of available clinical strategies;
- High cost, whether due to the number of people needing care, high unit cost of care, or high indirect costs;
- Needs, of the Medicare and Medicaid programs; and
- Data available, or readily developed.

In addition, all outcomes and effectiveness research is expected to be:

- Generalizable: Outcomes and effectiveness research is concerned with the outcomes that can be expected in typical patients, receiving care in typical clinical situations, not with outcomes that can be achieved only in selected patients and in controlled clinical situations. Thus, critical features of all outcomes and effectiveness research projects are that the questions have broad applicability and the research designs support wide generalizability of findings.
- Pragmatic: Outcomes and effectiveness research projects address questions that have high clinical and policy significance and are designed with attention to the eventual implementation of findings. They strengthen the science base in ways that can directly contribute to improved patient outcomes and decisionmaking processes (including practice guidelines), and to a more equitable and cost-effective health care system. The usefulness of outcomes and effectiveness research stems, in part, from the requirement that the clinical problems and practices addressed are

common and costly, and from attention to the realities of clinical practice.

- *Patient-Centered:* Outcomes and effectiveness research evaluates health care in terms of outcomes that emphasize the patient's experience and perspective. In addition to survival, morbidity, and complications, outcomes and effectiveness studies consider patient-reported symptom relief, functional capacity, quality of life, satisfaction with care, and economic burden. Demographic, social and cultural characteristics, as well as personal preferences, are important independent variables.

- *Multidisciplinary:* Outcomes and effectiveness research requires theoretical and practical understanding of a wide range of clinical and non-clinical variables that determine the structure, processes, and outcomes of health care. Studies typically involve teams of researchers who bring together the knowledge and methodological expertise of both the clinical and social sciences, plus understanding of the perspectives of patients, providers, and policymakers.

Since 1989, AHCPR has supported significant advances in medical effectiveness research, especially through the set of special projects known as Patient Outcomes Research Teams (PORTs). PORTs are large-scale, 5-year studies designed to determine "what works best" in clinical treatment for common diseases and conditions. PORTs have succeeded in (1) documenting the scientific basis for many common clinical practices, (2) demonstrating the relative benefits of different interventions, and (3) identifying areas for further research. The following clinical conditions addressed by the AHCPR PORT program meet the criteria of being common, costly, and feasible to study:

- Acute Myocardial Infarction
- Ischemic Heart Disease
- Low Back Pain
- Total Knee Replacement
- Hip Fracture and Osteoarthritis
- Low Birth Weight Prevention
- Cataract
- Community-Acquired Pneumonia
- Childbirth
- Schizophrenia
- Stroke Prevention
- Type II Diabetes
- Biliary Tract Disease
- Prostate Disease

In July 1993, AHCPR introduced a new generation of PORT research, known as PORT II. A program announcement inviting applications for PORT IIs was published in the May 13, 1994 "NIH Guide for Grant and