bid withdrawal payment of ten percent of the withdrawn bid for this auction. The Bureau seeks comment on this proposal.

## ii. Additional Default Payment Percentage

- 72. Any winning bidder that defaults or is disqualified after the close of an auction (i.e., fails to remit the required down payment within the prescribed period of time, fails to submit a timely long-form application, fails to make full and timely final payment, or is otherwise disqualified) is liable for a default payment under 47 CFR 1.2104(g)(2). This payment consists of a deficiency payment, equal to the difference between the amount of the Auction 97 bidder's winning bid and the amount of the winning bid the next time a license covering the same spectrum is won in an auction, plus an additional payment equal to a percentage of the defaulter's bid or of the subsequent winning bid, whichever
- 73. The Commission's rules provide that, in advance of each auction, it will establish a percentage between three and twenty percent of the applicable bid to be assessed as an additional default payment. As the Commission has indicated, the level of this additional payment in each auction will vary based on the nature of the service and the inventory of the licenses being offered.
- 74. Defaults weaken the integrity of the auction process and may impede the deployment of service to the public, however, the Bureau does not believe the detrimental effects of any defaults in Auction 97 are likely to be unusually great. Balancing these considerations, for Auction 97, the Bureau proposes to establish an additional default payment of fifteen percent of the applicable bid. The Bureau seeks comment on this proposal.

#### V. Ex Parte Rules

75. This proceeding has been designated as a "permit-but-disclose" proceeding in accordance with the Commission's *ex parte* rules. Persons making oral ex parte presentations are reminded that memoranda summarizing the presentations must contain summaries of the substance of the presentations and not merely a listing of the subjects discussed. More than a one or two sentence description of the views and arguments presented is generally required. Other provisions pertaining to oral and written ex parte presentations in permit-but-disclose proceedings are set forth in 47 CFR 1.1206(b).

Federal Communications Commission. **Gary D. Michaels.** 

Deputy Chief, Auctions and Spectrum Access Division, WTB.

[FR Doc. 2014–12824 Filed 5–30–14; 8:45 am]

BILLING CODE 6712-01-P

#### **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 June 17, 2014.

- A. Federal Reserve Bank of St. Louis (Yvonne Sparks, Community Development Officer) P.O. Box 442, St. Louis, Missouri 63166–2034:
- 1. David Leon Barnett and Linda Kay Barnett, both of Summersville, Missouri, jointly; to acquire voting shares of Summersville Bancorporation, Inc., and thereby indirectly acquire voting shares of Community Bank, N.A., both in Summersville, Missouri.
- B. Federal Reserve Bank of Dallas (E. Ann Worthy, Vice President) 2200 North Pearl Street, Dallas, Texas 75201–2272:
- 1. Kenneth D. Willmon, individually and as co-trustee of AIM Bancshares, Inc. 401(k) and Employee Stock Ownership Program; Lanny B. Modawell; Marjorie Willmon; and Debra Willmon, all of Lubbock, Texas; to retain voting shares of AIM Bancshares, Inc., Lovelland, Texas, and thereby indirectly retain voting shares of AimBank, Littlefield, Texas.

Board of Governors of the Federal Reserve System, May 28, 2014.

#### Michael J. Lewandowski,

Associate Secretary of the Board. [FR Doc. 2014–12672 Filed 5–30–14; 8:45 am] BILLING CODE 6210–01–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **Centers for Medicare & Medicaid Services**

[Document Identifiers: CMS-10277 and CMS-10518]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

**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 a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**DATES:** Comments on the collection(s) of information must be received by the OMB desk officer by *June 30, 2014.* 

ADDRESSES: When commenting on the proposed information collections, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be received by the OMB desk officer via one of the following transmissions: OMB, Office of Information and Regulatory Affairs, Attention: CMS Desk Officer, Fax Number: (202) 395–5806 OR, Email: OIRA submission@omb.eop.gov.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following:

- 1. Access CMS' Web site address at http://www.cms.hhs.gov/PaperworkReductionActof1995.
- 2. Email your request, including your address, phone number, OMB number,

and CMS document identifier, to *Paperwork@cms.hhs.gov.* 

3. Call the Reports Člearance Office at (410) 786–1326.

**FOR FURTHER INFORMATION CONTACT:** Reports Clearance Office at (410) 786–

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (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 (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-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 that summarizes the following proposed collection(s) of information for public comment:

1. Type of Information Collection Request: Revision of a currently approved collection; Title of Information Collection: Hospice Conditions of Participation and Supporting Regulations; Use: The Conditions of Participation and accompanying requirements are used by federal or state surveyors as a basis for determining whether a hospice qualifies for approval or re-approval under Medicare. The healthcare industry and CMS believe that the availability to the hospice of the type of records and general content of records, which the final rule (72 FR 32088) specifies, is standard medical practice, and is necessary in order to ensure the wellbeing and safety of patients and professional treatment accountability. Subsequent to the publication of the 60day Federal Register notice (November 29, 2013; 78 FR 71617), the burden hours previously accounted for in OMB control number 0938-0302 have been updated and moved under this package to consolidate all hospice-related burden into a single package. Form Number: CMS-10277 (OCN: 0938-1067); Frequency: Yearly; Affected Public: Private sector (business or other for-profit and not-for-profit institutions); Number of Respondents: 3,897; Total Annual Responses: 19,654,387; Total Annual Hours: 3,300,735. (For policy

questions regarding this collection contact Danielle Shearer at 410–786– 6617.)

2. Type of Information Collection Request: New collection (Request for a new OMB control number); Title of *Information Collection:* Application for Participation in the Intravenous Immune Globulin (IVIG) Demonstration; Use: Traditional fee-for-service (FFS) Medicare covers some or all components of home infusion services depending on the circumstances. By special statutory provision, Medicare Part B covers intravenous immune globulin (IVIG) for persons with primary immune deficiency disease (PIDD) who wish to receive the drug at home. However, Medicare does not separately pay for any services or supplies to administer it if the person is not homebound and otherwise receiving services under a Medicare Home Health episode of care. As a result, many beneficiaries have chosen to receive the drug at their doctor's office or in an outpatient hospital setting. On Tuesday, January 3, 2012, the President signed into law the "Medicare IVIG Access and Strengthening Medicare and Repaying Taxpayers Act of 2012." The act authorizes a 3-year demonstration under Part B of Title XVIII of the Social Security Act to evaluate the benefits of providing payment for items and services needed for the in-home administration of IVIG for the treatment of PIDD.

The statute limited the demonstration to 4,000 beneficiaries and \$45 million, including administrative expenses for implementation and evaluation as well as benefit costs. The statute also required that an evaluation of the demonstration be conducted. Under this demonstration, Medicare will issue, under Part B, a bundled payment for all medically necessary supplies and services to administer IVIG in the home to enrolled beneficiaries who are not otherwise homebound and receiving home health care benefits. To implement the demonstration and ensure that statutory limits are not exceeded, it is necessary to positively enroll beneficiaries in the demonstration.

This collection of information is for the application to participate in the demonstration. Participation is voluntary and may be terminated by the beneficiary at any time. Beneficiaries who do not participate will continue to be eligible to receive all of the regular Medicare Part B benefits that they are would be eligible for in the absence of the demonstration. Subsequent to the publication of the 60-day **Federal Register** notice (March 7, 2014; 79 FR 13058), the application has been revised by changing the order of the questions, rewording questions, and allowing more response options. Form Number: CMS–10518 (OCN: 0938—New); Frequency: Annually; Affected Public: Individuals and households; Number of Respondents: 4,000; Total Annual Responses: 4,000; Total Annual Hours: 1,000. (For policy questions regarding this collection contact Jody Blatt at 410–786–6921.)

Dated: May 28, 2014.

#### Martique Jones,

Deputy Director, Regulations Development Group, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2014-12665 Filed 5-30-14; 8:45 am]

BILLING CODE 4120-01-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Medicare & Medicaid Services

[Document Identifiers: CMS-10340 and CMS-10380]

#### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Centers for Medicare & Medicaid 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 (the 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 any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**DATES:** Comments must be received by August 1, 2014: