using the Commission's eFiling system at *http://www.ferc.gov/docs-filing/efiling.asp.* Commenters can submit brief comments up to 6,000 characters, without prior registration, using the eComment system at *http://www.ferc.gov/docs-filing/ecomment.asp.* For assistance, please contact FERC Online Support. In lieu of electronic filing, you may submit a paper copy. Submissions sent via the U.S. Postal Service must be addressed to: Debbie-Anne A. Reese, Secretary, Federal Energy Regulatory Commission, 888 First Street NE, Room 1A, Washington, DC 20426. Submissions sent via any other carrier must be addressed to: Debbie-Anne A. Reese, Secretary, Federal Energy Regulatory Commission, 12225 Wilkins Avenue, Rockville, Maryland 20852. The first page of any filing should include docket number P–3071–008.

For public inquiries and assistance with making filings such as interventions, comments, or requests for rehearing, contact the Office of Public Participation at (202) 502–6595 or *OPP@ferc.gov.*

For further information, contact Diana Shannon at 202–502–6136 or *diana.shannon@ferc.gov.*

(Authority: 18 CFR 2.1.)

Dated: August 10,2026.

Debbie-Anne A. Reese,

Secretary.

[FR Doc. 2026–16523 Filed 8–12–26; 8:45 am]

BILLING CODE 6717–01–P

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

Sunshine Act Meetings

FEDERAL REGISTER CITATION OF PREVIOUS ANNOUNCEMENT: 91 FR 51491.

PREVIOUSLY ANNOUNCED TIME AND DATE OF THE MEETING: Tuesday, August 11, 2026, 10:00 a.m. Eastern Time or earlier.

CHANGES IN THE MEETING: This notice announces that the meeting was cancelled. On August 10, 2026, the EEOC published a notice in the **Federal Register**, 91 FR 51491, announcing closed meeting of the Commission to consider the following matters: Pending Litigation Matter(s). The meeting was to be held on August 11, 2026, at EEOC Headquarters, Jacqueline A. Berrien Training Center, 131 M Street NE, Washington, DC 20507. The matters to be considered were decided by the Commissioners by notation vote pursuant to Commission voting procedures. Thus, the meeting became unnecessary.

CONTACT PERSON FOR MORE INFORMATION: Raymond Windmiller, Executive Officer, (202) 921–2705.

Dated: August 11, 2026.

For the Equal Employment Opportunity Commission.

Raymond D. Windmiller,

Executive Officer, Office of the Executive Secretariat.

[FR Doc. 2026–16543 Filed 8–11–26; 4:15 pm]

BILLING CODE 6570–01–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 (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 applications are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board's Freedom of Information Office at *https://www.federalreserve.gov/foia/request.htm.* Interested persons may express their views in writing on the standards enumerated in paragraph 7 of the Act.

Comments received are subject to public disclosure. In general, comments received will be made available without change and will not be modified to remove personal or business information including confidential, contact, or other identifying information. Comments should not include any information such as confidential information that would not be appropriate for public disclosure.

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Benjamin W. McDonough, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington, DC 20551–0001, not later than August 28, 2026.

A. Federal Reserve Bank of Kansas City (Jeffrey Imgarten, Assistant Vice President) 1 Memorial Drive, Kansas City, Missouri 64198–0001. Comments can also be sent electronically to *KCApplicationComments@kc.frb.org:*

1. *David Holloway and Jacob Halloway, both of Sublette, Kansas; Brett Holloway, Manhattan, Kansas; Matthew Holloway, Lake Worth, Florida; and Brooke Molz, Kiowa, Kansas;* to join the Holloway Family Control Group, a group acting in concert, to retain voting shares of Santa Fe Trail Banc Shares, Inc., and thereby indirectly retain voting shares of Centera Bank, both of Sublette, Kansas. David Holloway is a member of the Holloway Family Control Group and was previously permitted by the Federal Reserve System to acquire voting shares of Santa Fe Trail Banc Shares Inc., in his individual capacity.

Board of Governors of the Federal Reserve System.

Erin Cayce,

Assistant Secretary of the Board.

[FR Doc. 2026–16513 Filed 8–12–26; 8:45 am]

BILLING CODE P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10346 and CMS–10453]

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 October 13, 2026.

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**).

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:* Quality Bonus Payment Appeals; *Use:* Sections 1853(n) and 1853(o) of the Social Security Act (the Act) require CMS to make Quality Bonus Payments (QBPs) to MA organizations that achieve at least 4 stars in a 5-star quality rating system. In addition, section 1854(b)(1)(C) of the Act ties the share of savings that MA organizations must provide to enrollees as the beneficiary rebate to the level of an MA organization's QBP rating. The administrative review process for an MA contract to appeal their QBP status is laid out at § 422.260(c). §§ 422.260(c)(1) and (2) describe a two-step administrative review process that includes a request for reconsideration and a request for an informal hearing on the record, and § 422.260(c)(3) describes limits to requesting an administrative review. Historically, every November CMS has released the preliminary QBP ratings for MA contracts to review their ratings and to submit an appeal request under § 422.260(c) if they believe there is a calculation error or incorrect data are used. Each MA organization continues to be afforded the right to request an administrative review of CMS's determination concerning the organization's qualification for a QBP.

The information collected on the Request for Reconsideration form from MA organizations is considered by the reconsideration official and potentially the hearing officer and CMS Administrator to review CMS's determination of the organization's eligibility for a QBP. The form asks MA organizations to select the Star Ratings measure(s) they believe was miscalculated or used incorrect data and describe what they believe is the issue. Under § 422.260(c)(3)(ii) these are the only bases for appeals. In conducting the reconsideration, the reconsideration official will review the QBP determination, the evidence and findings upon which it was based, and any other written evidence submitted by the organization with their Request for Reconsideration or by CMS before the reconsideration determination is made.

Form Number: CMS–10346.

OMB Control Number: 0938–1129.

Frequency: Yearly.

Affected Public: Private Sector, Business or other for-profit and Not-for-profit institutions.

Number of Respondents: 120.

Total Annual Responses: 20.

Total Annual Hours: 160.

For policy questions regarding this collection contact Joy Binion at 410–786–5004.

2. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* The Medicare Advantage and Prescription Drug Programs: Part C and Part D Explanation of Benefits; *Use:* Sections 1852(k)(2)(C)(i) and 1860D–(4)(a)(4) of the Act give CMS authority to require EOBs in Part C and Part D, respectively. Corresponding Part C and Part D regulations at §§ 422.111(k) and 423.128(e) further specify the requirements to provide a written EOB directly to enrollees following their use of benefits.

These requirements and the CMS model documents help ensure that Part C and Part D enrollees receive consistent and timely information about costs associated with their medical claims. Part C and Part D EOBs allow enrollees to track their out-of-pocket expenses and benefit utilization in relation to their plan's deductible and out-of-pocket threshold. This customized information positions enrollees to make informed decisions about their healthcare options. Further, the proposed updates to the Part C EOB allow enrollees to better track their utilization of supplemental benefits, which previously were not included in the EOBs in a consistent way, while the proposed updates to the Part D EOB improve clarity and accuracy of information. The EOBs also enable enrollees to make a more practical use of the information found in plans' Annual Notice of Change (ANOC) and Evidence of Coverage (EOC) documents, as well as information available through tools such as the Medicare Plan Finder. Given the complexity of the health care system, providing readable and plain language information in the EOBs supports improved transparency.

Form Number: CMS–10453.

OMB Control Number: 0938–1228.

Frequency: Monthly.

Affected Public: Private Sector, Business or other for-profit and Not-for-profit institutions.

Number of Respondents: 1,723.

Total Annual Responses: 1,723.

Total Annual Hours: 17,230.

For policy questions regarding this collection contact Lucia Patrone at 410–786–8621.

William N. Parham, III,

Director, Division of Information Collections and Regulatory Impacts, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2026–16455 Filed 8–12–26; 8:45 am]

BILLING CODE 4169–69–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–5547–N]

Medicare Program; Alternative Payment Model (APM) Incentive Payment Advisory for Clinicians—Request for Current Billing Information for Qualifying APM Participants

AGENCY: Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS).

ACTION: Payment advisory.

SUMMARY: This advisory is to alert certain clinicians who are Qualifying Alternative Payment Model (APM) participants (QPs) and eligible to receive an APM Incentive Payment that the Centers for Medicare & Medicaid Services (CMS) does not have the current billing information needed to disburse the payment. This advisory provides information to these clinicians on how to update their billing information to receive this payment for the 2026 payment year.

DATES: This notice is applicable on August 13, 2026.

FOR FURTHER INFORMATION CONTACT: Tanya Dorm, (667) 290–9530.

SUPPLEMENTARY INFORMATION:

I. Background

Under the Medicare Quality Payment Program, an eligible clinician who participates in an Advanced Alternative Payment Model (APM) and meets or exceeds the applicable payment amount or patient count thresholds for a performance period is a qualifying APM participant (QP) for that year. For payment years 2019 through 2026, which respectively correspond to the QP performance periods for 2017 through 2024, an eligible clinician who attains QP status for a year earns a lump sum APM incentive payment that is paid in the payment year. For payment years 2021 through 2024, the amount of the APM incentive payment is equal to 5 percent of the estimated aggregate paid amounts for covered professional services furnished by the QP during the calendar year immediately preceding the payment year. The APM incentive payment percentage is 3.5 percent for the 2023 performance year and 2025 payment year, and 1.88 percent for the 2024 performance year and 2026 payment year.

II. Provisions of the Advisory

The Centers for Medicare & Medicaid Services (CMS) has identified those eligible clinicians who attained QP status in the 2024 performance period and earned a 1.88 percent APM incentive payment for the 2026 payment year based on aggregate paid amounts for the covered professional services they furnished in the calendar year 2025 base period.

When CMS processed the 2026 APM incentive payments, CMS was unable to identify a taxpayer identification number (TIN) or TINs associated with some QPs and was therefore unable to disburse the payment. To successfully issue the APM incentive payment for the 2026 payment year, CMS is requesting assistance identifying current Medicare billing information for these QPs in accordance with 42 CFR 414.1450(c)(8).

CMS has compiled a list of QPs for whom we were unable to identify any associated TIN to which we can make the APM incentive payment. These QPs, and any others who anticipated receiving an APM Incentive Payment but have not, should follow the instructions to provide CMS with updated Medicare billing information at the following web address: 2026 QP Notice for APM Incentive Payment.

If you have any questions concerning submission of information through the Quality Payment Program (QPP) website, please contact the QPP Help Desk at 1–866–288–8292.

All information must be received by October 13, 2026. After that date, any claim to an APM incentive payment for the 2026 payment period based on an eligible clinician's QP status for the 2024 QP performance period will be forfeited. To facilitate payment, please include all required documentation as specified in the previous link.

All submissions received on or before October 13, 2026, will be held and processed after the close of the response period. CMS will not accept requests for additional payment review or reprocessing after October 13, 2026. Any claim related to a 2025 APM Incentive that is submitted after October 13, 2026, will be forfeited and will not be considered for review. If your banking information has changed within the last year, we strongly recommend submitting a voided check and CMS Form 588 [1] to help avoid payment delays. Please note that CMS will not notify you if there is an issue processing your payment.

III. Collection of Information Requirements

This advisory is intended to alert certain QPs that CMS is requesting assistance identifying current Medicare billing information so that we can disburse APM incentive payments. This request for follow-up information is exempt from the requirements of the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*) as specified under implementing regulation 5 CFR 1320.3(h)(9) with regard to the clarification of responses.

The Administrator of the Centers for Medicare & Medicaid Services (CMS), Mehmet Oz, having reviewed and approved this document, authorizes Chyana Woodyard, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Chyana Woodyard,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2026–16472 Filed 8–12–26; 8:45 am]

BILLING CODE 4169–69–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2017–D–6530]

Formal Meetings Between the Food and Drug Administration and Sponsors or Applicants of Prescription Drug User Fee Act Products; Guidance for Industry; Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of availability.

SUMMARY: The Food and Drug Administration (FDA or Agency) is announcing the availability of a final guidance for industry titled ''Formal Meetings Between the FDA and Sponsors or Applicants of PDUFA Products.'' This guidance outlines the recommendations to industry on formal meetings between FDA and sponsors or applicants relating to the development and review of new drug or biological products regulated by the Center for Drug Evaluation and Research (CDER) and the Center for Biologics Evaluation and Research (CBER). This guidance

[1] Form CMS–588 is currently approved under OMB control number 0938–0626.