

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 the BHC Act (12 U.S.C. 1842(c)).

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 November 27, 2026.

A. Federal Reserve Bank of Atlanta (Erien O. Terry, Assistant Vice President) 1000 Peachtree Street NE, Atlanta, Georgia 30309. Comments can also be sent electronically to Applications.Comments@atl.frb.org:

1. *Newington Bancshares, Inc., Newington, Georgia*; to become a bank holding company by acquiring voting shares of Bank of Newington, also of Newington, Georgia.

B. Federal Reserve Bank of Dallas (Lindsey Wieck, Director, Mergers & Acquisitions) 2200 North Pearl Street, Dallas, Texas 75201-2272. Comments can also be sent electronically to Comments.applications@dal.frb.org:

1. *Plains Acquisition Corporation, Humble, Texas*; to acquire Austin Colony, Inc., and thereby indirectly acquire First National Bank of Lake Jackson, both of Lake Jackson, Texas.

Board of Governors of the Federal Reserve System.

Michele Taylor Fennell,

Associate Secretary of the Board.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Information collection notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the extension without change of the currently approved information collection "Questionnaire and Data Collection Testing, Evaluation, and Research for the Agency for Healthcare Research and Quality" (OMB #0935-0124).

DATES: Comments on this notice must be received by December 28, 2026.

ADDRESSES: Written comments should be submitted to: Margie Shofer, Reports Clearance Officer, AHRQ, by email at REPORTSCLEARANCEOFFICER@ahrq.hhs.gov. Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

FOR FURTHER INFORMATION CONTACT: Margie Shofer, AHRQ Reports Clearance Officer, (301) 427-1696, or by email at REPORTSCLEARANCEOFFICER@ahrq.hhs.gov.

SUPPLEMENTARY INFORMATION:

Proposed Project

The Agency for Healthcare Research and Quality (AHRQ) requests that the Office of Management and Budget (OMB) approve the extension without change of "Generic Clearance for Questionnaire and Data Collection Testing, Evaluation, and Research" (0935-0124) for three years to facilitate AHRQ's efforts to (1) employ evaluation-type methods and techniques to improve AHRQ's current data collection and estimation procedures, (2) develop new collections and procedures, including toolkits, and (3) revise existing collections and procedures. The current clearance expires on 3/31/2027.

AHRQ uses techniques to simplify data collection and estimation procedures, reduce respondent burden, and improve efficiencies to meet the needs of individuals and small business respondents who may have reduced budgets and staff. AHRQ believes that developing, testing, and evaluating data collection and estimation procedures using survey methods and other techniques in anticipation of agency-sponsored studies can improve its information collection efforts and the products it develops and allow AHRQ to be more responsive to fast-changing developments in the healthcare research field.

This clearance request is limited to research on data collections, toolkit

development, and estimation procedures and reports and does not extend to the collection of data for public release or policy formation.

This generic clearance will allow AHRQ to draft and test toolkits, survey instruments and other data collection and estimation procedures more quickly and with greater lead time, thereby managing project time more efficiently and improving the quality of the data AHRQ collects. In some instances, the ability to test and evaluate toolkits, data collection and estimation procedures in anticipation of work or early in a project may result in the decision not to proceed with additional activities, thereby saving both public and private resources and effectively eliminating respondent burden.

Many of the tools AHRQ develops are made available to the private sector to assist in improving health care quality. The health and health care environment changes rapidly and requires a quick response from AHRQ to provide refined tools. This generic clearance will facilitate AHRQ's response to this changing environment.

These preliminary research activities will not be used by AHRQ to regulate or sanction its customers. They will be entirely voluntary, and the confidentiality of respondents and their responses will be preserved.

Proposed Revisions

No revisions to the currently approved package are being proposed.

Method of Collection

The information collected through preliminary research activities will be used by AHRQ to employ techniques to (1) improve AHRQ's current data collection and estimation procedures, (2) develop new collections and procedures, including toolkits, and/or (3) revise existing collections and procedures in anticipation or in response to changes in the health or health care field. The end result will be improvement in AHRQ's data collections and procedures, and the quality of data collected, a reduction or minimization of respondent burden, increased agency efficiency, and improved responsiveness to the public.

Estimated Annual Respondent Burden

Exhibit 1 shows the estimated annual burden hours for the respondents' time to participate in the research activities that may be conducted under this generic clearance. Mail surveys will be conducted with about 2,000 respondents per year and are estimated to average 20 minutes. Mail surveys may also be sent to respondents via email

and may include a telephone non-response follow-up. Telephone non-response follow-up for mailed surveys is not counted as a telephone survey in Exhibit 1. About 200 people will participate in telephone surveys that will take about 40 minutes. Web-based surveys will be conducted with about 1,000 people and will require about 10 minutes to complete. About 500 people

will participate in focus groups which may last about two hours, while in-person interviews will be conducted with about 200 people and will take about 1 hour to complete. Automated data collection will be conducted for about 500 people and could take about 1 hour. Cognitive testing will be conducted with about 200 persons and is estimated to take 1½ hours to

complete. The total annual burden hours is 2,967.

Exhibit 2 shows the estimated annual cost burden associated with respondent's time to participate in these research activities. The adjusted annual cost burden is estimated to be \$310,111.

Exhibit 1—Estimated Annualized Burden Hours

Type of information collection	Number of respondents	Number of responses per respondent	Hours per response	Total burden hours
Mail/email *	2,000	1	20/60	667
Telephone	200	1	40/60	133
Web-based	1,000	1	10/60	167
Focus Groups	500	1	2.0	1000
In-person	200	1	1.0	200
Automated **	500	1	1.0	500
Cognitive Testing ***	200	1	1.5	300
Totals	4,600	N/A	N/A	2,967

* May include telephone non-response follow-up in which case the burden will not change.

** May include testing of database software, CAPI software or other automated technologies.

*** May include cognitive interviews for questionnaire or toolkit development, or "think aloud" testing of prototype websites.

Exhibit 2—Estimated Annualized Burden Costs

Type of information collection	Total burden hours	Average hourly wage rate *	Adjusted hourly wage rate **	Total adjusted cost burden
Mail/email	667	\$52.26	\$104.52	\$69,715
Telephone	133	52.26	104.52	13,901
Web-based	167	52.26	104.52	17,455
Focus Groups	1000	52.26	104.52	104,520
In-person	200	52.26	104.52	20,904
Automated	500	52.26	104.52	52,260
Cognitive Testing	300	52.26	104.52	31,356
Total	2,967	N/A	N/A	310,111

* U.S. Bureau of Labor & Statistics "Occupational Employment and Wages, May 2025" found at the following URL—<https://data.bls.gov/oes/#/area/0000000/2025>. Occupation series "Healthcare practitioners and technical occupations" (29-0000) was used for estimated average hourly wages in these calculations.

** Adjusted Average Hourly Rate is 200% of the average hourly rate. It is a fully loaded rate that includes the benefit costs of respondents.

Request for Comments

In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501–3520, comments on AHRQ's information collection are requested with regard to any of the following: (a) whether the proposed collection of information is necessary for the proper performance of AHRQ's health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the

respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: October 23, 2026.

Jeffrey Toven,
Executive Officer.

[FR Doc. 2026–21985 Filed 10–27–26; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2026–N–12178]

Notice of Approval of Product Under Voucher: Material Threat Medical Countermeasure (MCM) Priority Review Voucher; Bixlenvo (Bictegravir and Lenacapavir)

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the approval of a product redeeming a material threat MCM priority review voucher. The Federal Food, Drug, and