

Community Affairs Officer) 90 Hennepin Avenue, Minneapolis, Minnesota 55480-0291:

1. *John T. Vucurevich Foundation*, Rapid City, South Dakota; to become a bank holding company by acquiring 84.48 percent of the Class B common stock and 11.85 percent of the Class A common stock of United Bancorporation, and thereby indirectly acquire United Bank, both of Osseo, Wisconsin; Cambridge State Bank, Cambridge, Wisconsin; Lincoln Community Bank, Merrill, Wisconsin; Bank of Poynette, Poynette, Wisconsin; Clark County State Bank, Osceola, Iowa; Farmers State Bank, Stickney, South Dakota; and Farmers & Merchants State Bank, Iroquois, South Dakota.

**C. Federal Reserve Bank of Kansas City** (Todd Offenbacher, Assistant Vice President) 925 Grand Avenue, Kansas City, Missouri 64198-0001:

1. *The Protection Bank Holding Company, Inc.*, Protection, Kansas; to acquire up to 100 percent of the voting shares of Citizens State Bank of Ashland, Kansas.

Board of Governors of the Federal Reserve System, July 6, 2007.

**Robert deV. Frierson,**

*Deputy Secretary of the Board.*

[FR Doc. E7-13404 Filed 7-10-07; 8:45 am]

**BILLING CODE 6210-01-S**

## FEDERAL RESERVE SYSTEM

### Formations of, Acquisitions by, and Mergers of Bank Holding Companies; Correction

This notice corrects a notice (FR Doc. E7-12775) published on pages 36455-36456 of the issue for Tuesday, July 3, 2007.

Under the Federal Reserve Bank of Chicago heading, the entry for Metropolitan Bank Group, and Alpha Bancorp, Inc., both of Chicago, Illinois, is revised to read as follows:

**A. Federal Reserve Bank of Chicago** (Burl Thornton, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690-1414:

1. *Metropolitan Bank Group, Inc.; Alpha Bancorp, Inc.; Metropolitan Bancorp, Inc.; and Plaza Bancorp, Inc.*, all of Chicago, Illinois; to acquire 100 percent of the voting shares of Oswego Bancshares, Inc., and thereby indirectly acquire voting shares of Oswego Community Bank, both of Oswego, Illinois.

Comments on this application must be received by July 26, 2007.

Board of Governors of the Federal Reserve System, July 6, 2007.

**Robert deV. Frierson,**

*Deputy Secretary of the Board.*

[FR Doc. E7-13405 Filed 7-10-07; 8:45 am]

**BILLING CODE 6210-01-S**

## FEDERAL RETIREMENT THRIFT INVESTMENT BOARD

### Sunshine Act; Notice of Meeting

**TIME AND DATE:** 9 a.m. (Eastern Time), July 16, 2007.

**PLACE:** 4th Floor Conference Room, 1250 H Street, NW., Washington, DC 20005.

**STATUS:** Open.

#### MATTERS TO BE CONSIDERED:

1. Approval of the minutes of the June 19, 2007 Board member meeting.

2. Thrift Savings Plan activity report by the Executive Director:

a. Monthly Participant Activity Report.

b. Legislative Report.

3. Quarterly Reports:

a. Investment Policy Review.

b. Vendor Financial Reports.

#### CONTACT PERSON FOR MORE INFORMATION:

Thomas J. Trabucco, Director, Office of External Affairs, (202) 942-1640.

Dated: July 9, 2007.

**Thomas K. Emswiler,**

*Secretary to the Board, Federal Retirement Thrift Investment Board.*

[FR Doc. 07-3391 Filed 7-9-07; 11:33 am]

**BILLING CODE 6760-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the National Coordinator for Health Information Technology; American Health Information Community Meeting

**ACTION:** Announcement of meeting.

**SUMMARY:** This notice announces the 15th meeting of the American Health Information Community in accordance with the Federal Advisory Committee Act (Pub. L. 92-463, 5 U.S.C., App.) The American Health Information Community will advise the Secretary and recommend specific actions to achieve a common interoperability framework for health information technology (IT).

**DATES:** July 31, 2007, from 8:30 a.m. to 3 p.m. (EDT)

**ADDRESSES:** Hubert H. Humphrey building (200 Independence Avenue, SW, Washington, DC 20201), Conference Room 800

**FOR FURTHER INFORMATION:** visit <http://www.hhs.gov/healthit/ahic.html>.

**SUPPLEMENTARY INFORMATION:** The meeting will include a presentation by the Personalized Healthcare Workgroup on Recommendations; an update on activities of the Certification Commission for Health Information Technology; a presentation on use cases and the 2008 AHIC priorities for the national HIT agenda; a report from the AHIC Standing Committee of the Whole on the AHIC Successor; and a report from the Health Information Security and Privacy Collaborative.

A Web cast of the Community meeting will be available on the NIH Web site at: <http://www.videocast.nih.gov/>.

If you have special needs for the meeting, please contact (202) 690-7151.

Dated: July 2, 2007.

**Judith Sparrow,**

*Director, American Health Information Community, Office of Programs and Coordination, Office of the National Coordinator for Health Information Technology.*

[FR Doc. 07-3364 Filed 7-10-07; 8:45 am]

**BILLING CODE 4150-24-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institute for Occupational Safety and Health; Designation of a Class of Employees for Addition to the Special Exposure Cohort

**AGENCY:** National Institute for Occupational Safety and Health (NIOSH), Department of Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** The Department of Health and Human Services (HHS) gives notice of a decision to designate a class of employees at the Dow Chemical Company, Madison, Illinois, as an addition to the Special Exposure Cohort (SEC) under the Energy Employees Occupational Illness Compensation Program Act of 2000. On June 22, 2007, the Secretary of HHS designated the following class of employees as an addition to the SEC:

Atomic Weapons Employer (AWE) employees who were monitored or should have been monitored for exposure to thorium radionuclides while working at the Dow Chemical Company site in Madison, Illinois for a number of work days aggregating at least 250 work days from January 1, 1957 through December 31, 1960, or in combination with work days within the parameters established for one or more other classes of employees in the special Exposure Cohort.

This designation will become effective on July 22, 2007, unless Congress provides otherwise prior to the effective date. After this effective date, HHS will publish a notice in the **Federal Register** reporting the addition of this class to the SEC or the result of any provision by Congress regarding the decision by HHS to add the class to the SEC.

**FOR FURTHER INFORMATION CONTACT:**

Larry Elliott, Director, Office of Compensation Analysis and Support, National Institute for Occupational Safety and Health (NIOSH), 4676 Columbia Parkway, MS C-46, Cincinnati, OH 45226, Telephone 513-533-6800 (this is not a toll-free number). Information requests can also be submitted by e-mail to [OCAS@CDC.GOV](mailto:OCAS@CDC.GOV).

Dated: July 6, 2007.

**John Howard,**

*Director, National Institute for Occupational Safety and Health.*

[FR Doc. 07-3363 Filed 7-10-07; 8:45 am]

**BILLING CODE 4160-17-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Agency for Healthcare Research and Quality**

**Medicare Prescription Drug, Improvement, and Modernization Act of 2003 Section 1013: Request for Nominations—The Effective Health Care Stakeholder Group**

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), HHS.

**ACTION:** Notice of invitation to submit nominations for the Effective Health Care Stakeholder Group.

**SUMMARY:** The DHHS Agency for Healthcare Research and Quality (AHRQ) invites nominations from interested organizations and knowledgeable individuals for a Stakeholder Group to support the work of the Effective Health Care Program, funded under Section 1013 of the Medicare Prescription Drug, Improvement and Modernization Act (MMA) of 2003. The goals of this program are to develop evidence on the effectiveness and comparative effectiveness of different treatments and health care interventions of importance to the Medicare, Medicaid, and State Child Health Insurance. To achieve these goals, AHRQ is supporting projects to review, synthesize, generate and translate published and unpublished scientific evidence, as well as identify important issues for which

existing scientific evidence is insufficient to inform decisions about health care. This evidence will be made readily available to all health care decision-makers. The Stakeholder Group is critical to the success of this project, providing input to the program in collaboration with the Effective Health Care Scientific Resource Center (currently based at the Oregon Evidence-based Practice Center).

The role of the Stakeholder Group will be to:

- Provide input on critical research information gaps for practice and policy and on identifying and developing the key research questions to address these gaps.
- Provide input on implementation issues for Effective Health Care program reports and findings.
- Define information needs and identify types of projects that will be most useful.
- Provide feedback from report users.
- Provide guidance on the program as a whole for quality improvement.
- Provide guidance on how the program can have more of an impact with users.

Members will serve as volunteers for a two-year period from October 2007 through September 2009. Stakeholder Group members will attend 3–4 meetings per year as part of this process. Meetings will be held in Rockville, MD and Portland, Oregon. Meetings will be 1-2 days in length. The Scientific Resource Center (SRC) will make the travel arrangements. The first meeting will be held on October 26, 2007, in Rockville, MD.

Members are expected to actively participate in meetings and to engage in related activities by phone and e-mail between meetings. Between-meeting work may include assisting with agenda planning and session preparation for Stakeholder meetings, consulting with SRC or AHRQ staff on constituency issues, and serving as a resource to the Effective Health Care Program. It is anticipated that the Stakeholder Group member time commitment between meetings will not exceed 10 hours.

The Stakeholder Group will be composed of up to 15 members. The group will represent several broad constituencies of stakeholders and decision-makers at the policy, system, and clinical levels, which will include:

- Third party healthcare payers (including, but not limited to public State or Federal Medicare or Medicaid programs, and private insurance health plans and Health maintenance Organizations).
- Employers and health-related business groups.

- Pharmacy and therapeutic committees.

- Healthcare providers.
- Patient/consumer organizations.
- Consumers of Federal and State beneficiary programs.

- Healthcare industry professional organizations.

- Academic researchers (including, but not limited to those with expertise in evidence-based methods and effectiveness and translational research).

Self-nominations are encouraged. Materials to be submitted are a cover letter and curriculum vitae or similar supportive documentation. The cover letter will provide information on how the nominee's experience, skills and roles fit with the composition and goals of the Stakeholder Group as described above. Specific information on nominee experience in the constituency groups described above is required. Nominees chosen for the Stakeholder Group will be required to declare and submit conflict of interest documentation. This will not necessarily preclude service. Nominees may indicate their willingness to be considered in subsequent calls for nominations if not selected for this Stakeholder Group in their supporting documentation.

All nominations received by submission deadline will be reviewed by a committee composed of representatives from AHRQ and the SRC. Nominees who best represent the broad constituencies described as the goal for composition of the Stakeholder Group will be selected and notified by September 28, 2007. In addition, AHRQ is interested in fostering diversity and including representatives of, or individuals with expertise regarding, populations experiencing health care disparities and in this case individuals with expertise regarding chronic conditions and health care needs of the Medicare, Medicaid, and State Children's Health Insurance Program (CHIP) populations.

**DATES:** Nominations for the Effective Health Care Stakeholder Group must be received by August 31, 2007.

**ADDRESSES:** Nominations for consideration may be e-mailed to [EffectiveHealthCare@ahrq.gov](mailto:EffectiveHealthCare@ahrq.gov).

**FOR FURTHER INFORMATION CONTACT:** Effective Health Care Program at (301) 427-1502 or [EffectiveHealthCare@ahrq.gov](mailto:EffectiveHealthCare@ahrq.gov).

More information about the Effective Health Care Program is available at <http://www.EffectiveHealthCare.ahrq.gov>.

**SUPPLEMENTARY INFORMATION:** Nominees not selected for the Stakeholder Group