

indicated. The applications also will 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 (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States. Additional information on all bank holding companies may be obtained from the National Information Center website at www.ffiec.gov/nic/.

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 11, 2010.

A. Federal Reserve Bank of Dallas (E. Ann Worthy, Vice President) 2200 North Pearl Street, Dallas, Texas 75201-2272:

1. *Connemara Bancorp, Inc., Dallas, Texas*; to become a bank holding company by acquiring 100 percent of First Amherst Bancshares, Inc., Amherst, Texas, and indirectly acquire First National Bank, Amherst, Texas.

Board of Governors of the Federal Reserve System, May 13, 2010.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. 2010-11891 Filed 5-18-10; 8:45 am]

BILLING CODE 6210-01-S

FEDERAL MARITIME COMMISSION

Notice of Agreements Filed

The Commission hereby gives notice of the filing of the following agreements under the Shipping Act of 1984. Interested parties may submit comments on the agreements to the Secretary, Federal Maritime Commission, Washington, DC 20573, within ten days of the date this notice appears in the **Federal Register**. Copies of the agreements are available through the Commission's Web site (<http://www.fmc.gov>) or by contacting the Office of Agreements at (202) 523-5793 or tradeanalysis@fmc.gov.

Agreement No.: 011848-003.

Title: WWL/"K" Line Transatlantic Space Charter Agreement.

Parties: Kawasaki Kisen Kaisha, Ltd. ("K" Line) and Wallenius Wilhelmsen Logistics AS ("WWL").

Filing Party: John P. Meade, Esq.; Vice President-Law; "K" Line America, Inc.; 6009 Bethlehem Road; Preston, MD 21655.

Synopsis: The amendment revises the agreement to now provide for the reciprocal chartering of space between the parties for vehicles in the trade between the U.S. Atlantic Coast and Europe.

Agreement No.: 201162-005.

Title: NYSA-ILA Assessment

Agreement.

Parties: International Longshoremen's Association and New York Shipping Association.

Filing Parties: Donato Caruso, Esq.; The Lambos Firm; 29 Broadway, 9th Floor; New York, NY 10006 and Andre Mazzola, Esq.; Marrinan & Mazzola Mardon, P.C.; 26 Broadway, 17th Floor; New York, NY 10004.

Synopsis: The amendment reduces the assessment per container of bananas during the period from May 1, 2010 through September 30, 2010.

By Order of the Federal Maritime Commission.

Dated: May 14, 2010.

Karen V. Gregory,

Secretary.

[FR Doc. 2010-12013 Filed 5-18-10; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Solicitation of Written Comments on Draft HHS Strategic Framework on Multiple Chronic Conditions

AGENCY: Department of Health and Human Services, Office of the Secretary.

ACTION: Notice.

SUMMARY: The Office of Public Health and Science is soliciting public comment on the HHS Interagency Workgroup on Multiple Chronic Conditions draft "HHS Strategic Framework on Multiple Chronic Conditions."

DATES: Comments on the HHS Interagency Workgroup on Multiple Chronic Conditions draft strategic framework should be received no later than 5:30 p.m. on June 18, 2010.

ADDRESSES: The draft strategic framework can be found at <http://www.hhs.gov/ophs/initiatives/mcc/index.html>. Comments are preferred electronically and may be addressed to MCC@hhs.gov. Written responses should be addressed to Department of Health and Human Services, 200 Independence Avenue, SW., Room 736-E, Washington, DC 20201, Attention: MCC Strategic Framework.

FOR FURTHER INFORMATION CONTACT: Monica L. Stevenson, (202) 401-6998 or MCC@hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background

Approximately 75 million Americans have multiple (2 or more) concurrent chronic conditions, including problems such as hypertension, heart disease, arthritis, diabetes, mental health conditions, and chronic respiratory infections. As the number of chronic conditions in an individual increases, the risks of the following outcomes also increase: Mortality, poor functional status, unnecessary hospitalizations, adverse drug events, duplicative tests, and conflicting medical advice. Sixty-six percent of total health care spending is directed toward care for the approximately 27 percent of Americans with multiple chronic conditions (MCC). MCC can contribute to frailty and disability; conversely, most older persons who are frail or disabled have MCC. It is the confluence of MCC and functional limitations, especially the need for assistance with activities of daily living, that produces high levels of spending.

Developing and implementing the HHS Initiative on Multiple Chronic Conditions is the responsibility of the Office of Public Health and Science (OPHS), located within the Office of the Secretary, Department of Health and Human Services (HHS). OPHS advises the Secretary on matters involving the nation's public health, serves as the focal point for leadership and coordination across the Department in public health and science, and leads the U.S. Public Health Service (USPHS) Commissioned Corps.

As part of the HHS Initiative on Multiple Chronic Conditions, OPHS is responsible for convening the HHS Interagency Workgroup on Multiple Chronic Conditions. The Workgroup has drafted a "Strategic Framework on Multiple Chronic Conditions" that addresses approaches to improving the health of individuals with concurrent multiple chronic conditions by providing options for HHS to strengthen coordination of its efforts internally and collaboration with stakeholders externally. The intent of the strategic framework is to improve the foundation for realizing optimum health and quality of life for individuals with multiple chronic conditions. To assist the Workgroup in obtaining broad input in the development of the strategic framework, HHS, through this request for information (RFI), is seeking comments from stakeholders and the public on the draft strategic framework. The draft strategic framework can be found at <http://www.hhs.gov/ophs/initiatives/mcc/index.html>.

II. Information Request

The OPHS, on behalf of the HHS Interagency Workgroup on Multiple Chronic Conditions, requests input on the draft "HHS Strategic Framework on Multiple Chronic Conditions." In addition to general comments, the Workgroup is seeking input on any additional gaps not addressed in the draft document.

III. Potential Responders

HHS invites input from a broad range of individuals and organizations that have interests in MCC and persons with such conditions. Some examples of these organizations include, but are not limited to, the following:

- General public
- Health care, professional, and educational organizations
- Physicians, nurses, hospitals, and other health-care system providers
- State and local public health agencies
- Public health organizations
- Foundations
- Disease groups
- Chronic care and advocacy groups
- Aging-related organizations
- Medicaid- and Medicare-related organizations
- Pharmacy groups
- Insurers and business groups
- Collaboratives and consortia.

When responding, please self-identify with any of the above or other categories (include all that apply) and your name. Anonymous submissions will not be considered.

The submission of written materials in response to the RFI should not exceed 5 pages, not including appendices and supplemental documents. Responders may submit other forms of electronic materials to demonstrate or exhibit concepts of their written responses.

Dated: May 13, 2010.

Anand Parekh,

Deputy Assistant Secretary for Health (Science and Medicine).

[FR Doc. 2010-11956 Filed 5-18-10; 8:45 am]

BILLING CODE 4150-28-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276-1243.

Comments are invited on: (a) Whether the proposed collections of information are necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection 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 on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: Registration for Behavioral Health Web Site and Resources—NEW

SAMHSA is authorized under section 501(d)(16) of the Public Health Service Act (42 U.S.C. 290aa(d)(16)) to develop and distribute materials for the prevention, treatment, and recovery from substance abuse and mental health disorders. To improve the way the public locates and obtains these materials, SAMHSA uses its Web site as an online resource for behavioral health information. A part of this Web site is SAMHSA's development of a voluntary registration process that will allow customers to create accounts that will save their order histories and shipping addresses. During the Web site registration process, SAMHSA will also ask customers for optional demographic information that will include organization affiliation, SAMHSA

grantee identification information, and reasons for interest in behavioral health information. SAMHSA will use this information to conduct customer analyses that will inform materials development, assist in forecasting inventory needs, and identify ways that SAMHSA can improve its customer service. SAMHSA will request the same optional demographic information and state of residency when customers subscribe to its email update service, for the purpose of assessing information needs and better targeting email messages to appropriate audiences.

SAMHSA is employing a Web-based form for information collection to avoid duplication and unnecessary burden on customers who register both for an account on the Web site and for email updates. The Web technology allows SAMHSA to integrate the email update subscription process into the Web site account registration process. Customers who register for an account on the Web site will be given the option of being enrolled automatically to receive SAMHSA email updates. Any optional questions answered by the customer during the Web site registration process will automatically be mapped to the profile generated for the email update system, thereby reducing the collection of duplicate information.

SAMHSA will collect all customer information submitted for Web site registration and email update subscriptions electronically via a series of Web forms on the samhsa.gov domain. Customers can submit the Web forms at their leisure, or call SAMHSA's toll-free Call Center and an information specialist will submit the forms on their behalf. The electronic collection of information will reduce the burden on the respondent and streamline the data-capturing process. SAMHSA will place Web site registration information into a Knowledge Management database and will place email subscription information into a database maintained by a third-party vendor that serves multiple Federal agencies and the White House. Customers can change, add, or delete their information from either system at any time.

The respondents will be behavioral health professionals, researchers, parents, caregivers, and the general public.

SAMHSA estimates the burden of this information collection as follows: