

Alabama, will become a wholly-owned subsidiary of Cullman Bancorp, Inc., Cullman, Alabama, a newly-formed Maryland corporation, which has applied to become a savings and loan holding company, pursuant to section 10(e) of the HOLA, by acquiring Cullman Savings Bank.

B. Federal Reserve Bank of Chicago (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690-1414:

1. *1895 Bancorp of Wisconsin, MHC, Greenfield, Wisconsin*; to convert from mutual to stock form. As part of the conversion, 1895 Bancorp of Wisconsin, MHC, and 1895 Bancorp of Wisconsin, Inc., an existing mid-tier savings and loan holding company, both of Greenfield, Wisconsin, will cease to exist and PyraMax Bank, FSB, Greenfield, Wisconsin, will become a wholly-owned subsidiary of 1895 Bancorp of Wisconsin, Inc., Greenfield, Wisconsin, a newly-formed Maryland corporation, which has applied to become a savings and loan holding company, pursuant to section 10(e) of the HOLA, by acquiring PyraMax Bank, FSB.

Board of Governors of the Federal Reserve System, March 17, 2021.

Michele Taylor Fennell,

Deputy Associate Secretary of the Board.

[FR Doc. 2021-05880 Filed 3-19-21; 8:45 am]

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FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

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

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E. Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington DC 20551-0001, not later than April 21, 2021.

A. Federal Reserve Bank of New York (Ivan Hurwitz, Senior Vice President) 33 Liberty Street, New York, New York 10045-0001. Comments can also be sent electronically to

Comments.applications@ny.frb.org:

1. *Blue Foundry Bancorp, Rutherford, New Jersey*; to become a bank holding company by acquiring Blue Foundry Bank in connection with the conversion of Blue Foundry, MHC, both of Rutherford, New Jersey, from mutual to stock form.

Board of Governors of the Federal Reserve System, March 17, 2021.

Michele Taylor Fennell,

Deputy Associate Secretary of the Board.

[FR Doc. 2021-05879 Filed 3-19-21; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Notice of Meetings

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

ACTION: Notice of five AHRQ subcommittee meetings.

SUMMARY: The subcommittees listed below are part of AHRQ's Health Services Research Initial Review Group Committee. Grant applications are to be reviewed and discussed at these meetings. Each subcommittee meeting will be closed to the public.

DATES: See below for dates of meetings:

1. *Health Care Research and Training (HCRT)*
Date: May 20-21, 2021; July 16th, 2021
2. *Health System and Value Research (HSVR)*
Date: June 3-4, 2021
3. *Healthcare Information Technology Research (HITR)*
Date: June 3-4, 2021
4. *Healthcare Safety and Quality Improvement Research (HSQR)*
Date: June 9-10, 2021

5. Healthcare Effectiveness and Outcomes Research (HEOR)

Date: June 9-10, 2021

ADDRESSES: Agency for Healthcare Research and Quality (Virtual Review) 5600 Fishers Lane, Rockville, Maryland 20857.

FOR FURTHER INFORMATION CONTACT: (to obtain a roster of members, agenda or minutes of the non-confidential portions of the meetings.) Jenny Griffith, Committee Management Officer, Office of Extramural Research Education and Priority Populations, Agency for Healthcare Research and Quality (AHRQ), 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 427-1557.

SUPPLEMENTARY INFORMATION: In accordance with section 10 (a)(2) of the Federal Advisory Committee Act (5 U.S.C. App. 2), AHRQ announces meetings of the above-listed scientific peer review groups, which are subcommittees of AHRQ's Health Services Research Initial Review Group Committee. The subcommittee meetings will be closed to the public in accordance with the provisions set forth in 5 U.S.C. App. 2 section 10(d), 5 U.S.C. 552b(c)(4), and 5 U.S.C. 552b(c)(6). The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Agenda items for these meetings are subject to change as priorities dictate.

Dated: March 16, 2021.

Marquita Cullom,

Associate Director.

[FR Doc. 2021-05827 Filed 3-19-21; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Meeting of the Community Preventive Services Task Force (CPSTF)

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of meeting.

SUMMARY: The Centers for Disease Control and Prevention within the Department of Health and Human Services announces the next meeting of the Community Preventive Services Task Force (CPSTF) on June 9-10, 2021.

DATES: The meeting will be held on Wednesday, June 9, 2021, from 8:30 a.m. to 6:00 p.m. EDT, and Thursday, June 10, 2021, from 8:30 a.m. to 5:00 p.m. EDT.

ADDRESSES: The meeting will be held via web conference.

FOR FURTHER INFORMATION CONTACT: Arielle Gatlin, Office of the Associate Director for Policy and Strategy; Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-V-25-5, Atlanta, GA 30329, phone: (404)498-4512, email: CPSTF@cdc.gov.

SUPPLEMENTARY INFORMATION:

Meeting Accessibility: The CPSTF meeting will be held virtually via web conference.

CDC will send web conference information to registrants upon receipt of their registration. All meeting attendees must register by June 2, 2021 to receive the web conference information for the June meeting. CDC will email web conference information from the CPSTF@cdc.gov mailbox.

To register for the meeting, individuals should send an email to CPSTF@cdc.gov and include the following information: name, title, organization name, organization address, phone, and email.

Public Comment: Individuals who would like to make public comments during the June meeting must state their desire to do so with their registration and provide their name and organizational affiliation (if any) and the topic to be addressed (if known). The requestor will receive instructions for the public comment process for this virtual meeting after the request is received. A public comment period follows the CPSTF's discussion of each systematic review and will be limited, up to three minutes per person. Public comments will become part of the meeting summary.

Background on the CPSTF: The CPSTF is an independent, nonfederal panel whose members are appointed by the CDC Director. CPSTF members represent a broad range of research, practice, and policy expertise in prevention, wellness, health promotion, and public health. The CPSTF was convened in 1996 by the Department of Health and Human Services (HHS) to identify community preventive programs, services, and policies that increase health, longevity, save lives and dollars, and improve Americans' quality of life. CDC is mandated to provide ongoing administrative, research, and technical support for the operations of the CPSTF. During its meetings, the CPSTF considers the findings of systematic reviews of

existing research and practice-based evidence and issues recommendations. CPSTF recommendations are not mandates for compliance or spending. Instead, they provide information about evidence-based options that decision makers and stakeholders can consider when they are determining what best meets the specific needs, preferences, available resources, and constraints of their jurisdictions and constituents. The CPSTF's recommendations, along with the systematic reviews of the evidence on which they are based, are compiled in the *The Community Guide*.

Matters proposed for discussion: The agenda will consist of deliberation on systematic reviews of literature and is open to the public. Topics will include HIV Prevention; Heart Disease and Stroke Prevention; and Nutrition, Physical Activity, and Obesity. Information regarding the start and end times for each day, and any updates to agenda topics, will be available on the Community Guide website (www.thecommunityguide.org) closer to the date of the meeting.

The meeting agenda is subject to change without notice.

Dated: March 16, 2021.

Sandra Cashman,

Executive Secretary, Centers for Disease Control and Prevention.

[FR Doc. 2021-05810 Filed 3-19-21; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Revised Single-Case Design Procedures and Standards: Home Visiting Evidence of Effectiveness (HomVEE) Review

AGENCY: Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comment.

SUMMARY: The Administration for Children and Families (ACF), within the U.S. Department of Health and Human Services (HHS), oversees the Home Visiting Evidence of Effectiveness (HomVEE) review, which is proposing to revise the procedures and standards that guide its work with single-case design (SCD) research. The current **Federal Register** notice (FRN) seeks comments on proposed changes related to revised procedures and standards for SCD research. Readers are referred to the full version of the HomVEE Version 2 Handbook on the HomVEE website for

more details, particularly Appendix D (<https://homvee.acf.hhs.gov/publications/methods-standards>). HomVEE will release an updated Handbook (Version 2.1) after consideration of public comments received in response to this FRN.

DATES: Send comments on or before April 19, 2021.

ADDRESSES: Submit questions, comments, and supplementary documents to HomVEE@acf.hhs.gov with "HomVEE SCD procedures and standards FRN comment" in the subject line.

SUPPLEMENTARY INFORMATION: *Invitation to Comment:* HHS invites comments regarding this notice. To ensure that your comments are clearly stated, please identify the section of this notice that your comments address.

1.0 Background

To help policymakers, program administrators, model developers, researchers, and the public identify rigorous research and understand which early childhood home visiting models are effective, ACF's Office of Planning, Research, and Evaluation (OPRE) within HHS oversees the HomVEE review, in partnership with the Health Resources and Services Administration (HRSA). HomVEE's mission is to conduct a thorough and transparent review of early childhood home visiting models that serve pregnant women and children from birth to kindergarten entry. The review identifies well-designed, well-executed research, then extracts and summarizes the findings from that research.

One critical use of HomVEE's results is to determine which home visiting models meet the HHS criteria for an "evidence-based early childhood home visiting service delivery model" (see Section 1.1 below), a key requirement of eligibility for implementation of the model with Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program funding.

The MIECHV Program is administered by HRSA in partnership with ACF. Created in 2010, the MIECHV Program provides funding to states, territories, and tribal entities to implement home visiting models. MIECHV awardees have the flexibility to tailor the program to serve the specific needs of their communities. Through a needs assessment, awardees identify at-risk communities and select home visiting service delivery models that best meet state and/or local needs. In accordance with MIECHV's authorizing statute, state and territory awardees must spend the majority of their MIECHV Program