Estimated Time per Response: 0.017 hours–52 hours.

Obligation To Respond: Required to obtain or retain benefits. The statutory authority for this collection of information is contained in Sections 154(i), 307, 308, 309 and 319 of the Communications Act of 1934, as amended.

Total Annual Burden: 172,087 hours. Total Annual Cost: \$1,851,000.

Needs and Uses: On November 29, 1999, the Community Broadcasters Protection Act of 1999 (CBPA), Public Law 106-113, 113 Stat. appendix I at pp. 1501A-594-1501A-598 (1999), codified at 47 U.S.C. 336(f), was enacted. That legislation provided that a low power television (LPTV) licensee should be permitted to convert the secondary status of its station to the new Class A status, provided it can satisfy certain statutorily-established criteria by January 28, 2000. The CBPA directs that Class Å licensees be subject to the same license terms and renewal standards as full-power television licenses and that Class A licensees be accorded primary status as television broadcasters as long as they continue to meet the requirements set forth in the statute for a qualifying low power station.

For those stations that met the certification deadline, the CBPA sets out certain certification procedures, prescribes the criteria to maintain a Class A license, and outlines the interference protection Class A stations must provide to analog, digital, LPTV and TV translator stations.

The CBPA directs that Class A stations must comply with the operating requirements for full-service television broadcast stations in order to maintain Class A status. Therefore, beginning on the date of its application for a Class A license and thereafter, a station must be "in compliance" with the Commission's operating rules for full-service television stations, contained in 47 CFR part 73.

Federal Communications Commission.

#### Marlene Dortch,

Secretary, Office of the Secretary.

[FR Doc. 2024–25895 Filed 11–6–24; 8:45 am]

BILLING CODE 6712–01–P

#### FEDERAL ELECTION COMMISSION

#### **Sunshine Act Meetings**

TIME AND DATE: Wednesday, November 13, 2024, at 10:00 a.m. and its continuation at the conclusion of the open meeting on November 14, 2024.

PLACE: 1050 First Street NE,

Washington, DC, and virtual (This meeting will be a hybrid meeting.)

**STATUS:** This meeting will be closed to the public.

#### MATTERS TO BE CONSIDERED:

Compliance matters pursuant to 52 U.S.C. 30109.

Matters relating to internal personnel decisions, or internal rules and practices.

Information the premature disclosure of which would be likely to have a considerable adverse effect on the implementation of a proposed Commission action.

Matters concerning participation in civil actions or proceedings or arbitration.

# **CONTACT PERSON FOR MORE INFORMATION:** Judith Ingram, Press Officer, Telephone: (202) 694–1220.

(Authority: Government in the Sunshine Act, 5 U.S.C. 552b)

#### Vicktoria J. Allen,

Deputy Secretary of the Commission. [FR Doc. 2024–25999 Filed 11–5–24; 4:15 pm] BILLING CODE 6715–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

# **Healthcare Infection Control Practices Advisory Committee; Correction**

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

**ACTION:** Notice; correction.

SUMMARY: In accordance with the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC) announces an amendment to the following meeting of the Healthcare Infection Control Practices Advisory Committee (HICPAC). The meeting is open to the public.

#### FOR FURTHER INFORMATION CONTACT:

Sydnee Byrd, M.P.A., Program Analyst, Division of Healthcare Quality Promotion, National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop H16–3, Atlanta, Georgia 30329–4027. Telephone: (404) 718–8039; Email: HICPAC@cdc.gov.

#### SUPPLEMENTARY INFORMATION:

#### Correction

Notice is hereby given of a change in the meeting of the Healthcare Infection Control Practices Advisory Committee; November 14, 2024, from 9 a.m. to 5 p.m., EST, and November 15, 2024, from 9 a.m. to 12 p.m., EST, in the original **Federal Register** notice.

Notice of the virtual meeting was published in the **Federal Register** on October 17, 2024, 89 FR 83688.

The meeting notice is being amended to update the dates section; addresses section; and supplementary information section, including the addition of instructions for providing written public comment. These sections should read as follows:

**DATES:** The meeting will be held on November 14, 2024, from 8 a.m. to 5:45 p.m., EST, and November 15, 2024, from 8 a.m. to 12:30 p.m., EST.

ADDRESSES: The meeting will be webcast live via the World Wide Web. The webcast link can be found on the HICPAC website at https://www.cdc.gov/hicpac/php/upcomingmeeting/index.html.

#### SUPPLEMENTARY INFORMATION:

Purpose: The Healthcare Infection Control Practices Advisory Committee (HICPAC) is charged with providing advice and guidance to the Director, Division of Healthcare Quality Promotion; the Director, National Center for Emerging and Zoonotic Infectious Diseases; the Director, Centers for Disease Control and Prevention (CDC); and the Secretary, Department of Health and Human Services, regarding (1) the practice of healthcare infection prevention and control; (2) strategies for surveillance, prevention, and control of infections, antimicrobial resistance, and related events in settings where healthcare is provided; and (3) periodic updating of CDC guidelines and other policy statements regarding prevention of healthcare-associated infections and healthcare-related conditions.

Matters to be Considered: The agenda will include the following updates: the Division of Healthcare Quality Promotion; the Isolation Precautions Guideline Workgroup; and the Healthcare Personnel Guideline Workgroup. Agenda items are subject to change as priorities dictate.

#### **Public Participation**

Oral Public Comment: This meeting will include time for members of the public to make an oral comment. Priority will be given to individuals who submit a request to make an oral public comment before the meeting according to the procedures below. All persons interested in making an oral public comment at the November 14–15, 2024, HICPAC meeting must submit a request between October 15, 2024, and October 25, 2024, at <a href="https://www.cdc.gov/hicpac/php/upcoming-">https://www.cdc.gov/hicpac/php/upcoming-</a>

meeting/index.html no later than 5 p.m., EDT, on October 25, 2024, according to the instructions provided. If the number of persons requesting to speak is greater than can be reasonably accommodated during the scheduled time, CDC will conduct a random draw to determine the speakers for the scheduled public comment session. CDC staff will notify individuals regarding their request to speak by email by November 1, 2024.

Written Public Comment: Written comments should be submitted by email to HICPAC@cdc.gov. The deadline for receipt of written public comments is November 22, 2024. All submissions must contain the submitter's name, address, and organizational affiliation, as well as the topic being addressed. Written comments should not exceed one single-spaced typed page in length, not including attachments. All written comments will be shared with the Committee.

The Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

#### Kalwant Smagh,

Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2024–25906 Filed 11–6–24; 8:45 am] **BILLING CODE 4163–18–P** 

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

**Centers for Medicare & Medicaid Services** 

[CMS-9150-N]

Medicare and Medicaid Programs; Quarterly Listing of Program Issuances—July through September 2024

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

**ACTION: Notice** 

**SUMMARY:** This quarterly notice lists CMS manual instructions, substantive and interpretive regulations, and other **Federal Register** notices that were published in the 3-month period, relating to the Medicare and Medicaid programs and other programs administered by CMS.

FOR FURTHER INFORMATION CONTACT: It is possible that an interested party may need specific information and not be able to determine from the listed information whether the issuance or regulation would fulfill that need. Consequently, we are providing contact persons to answer general questions concerning each of the addenda published in this notice.

#### SUPPLEMENTARY INFORMATION:

#### I. Background

The Centers for Medicare & Medicaid Services (CMS) is responsible for administering the Medicare and Medicaid programs and coordination and oversight of private health insurance. Administration and oversight of these programs involves the following: (1) furnishing information to Medicare and Medicaid beneficiaries, health care providers, and the public; and (2) maintaining effective communications with CMS regional offices, state governments, state Medicaid agencies, state survey agencies, various providers of health care, all Medicare contractors that

process claims and pay bills, National Association of Insurance Commissioners (NAIC), health insurers, and other stakeholders. To implement the various statutes on which the programs are based, we issue regulations under the authority granted to the Secretary of the Department of Health and Human Services under sections 1102, 1871, 1902, and related provisions of the Social Security Act (the Act) and Public Health Service Act. We also issue various manuals, memoranda, and statements necessary to administer and oversee the programs efficiently.

Section 1871(c) of the Act requires that we publish a list of all Medicare manual instructions, interpretive rules, statements of policy, and guidelines of general applicability not issued as regulations at least every 3 months in the **Federal Register**.

# II. Format for the Quarterly Issuance Notices

This quarterly notice provides only the specific updates that have occurred in the 3-month period along with a hyperlink to the full listing that is available on the CMS website or the appropriate data registries that are used as our resources. This is the most current up-to-date information and will be available earlier than we publish our quarterly notice. We believe the website list provides more timely access for beneficiaries, providers, and suppliers. We also believe the website offers a