

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 applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The applications will also 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.

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 September 16, 2016.

A. Federal Reserve Bank of St. Louis (David L. Hubbard, Senior Manager) P.O. Box 442, St. Louis, Missouri 63166–2034. Comments can also be sent electronically to Comments.applications@stls.frb.org:

1. *Central Bancompany, Inc., Jefferson City, Missouri*; to acquire 100 percent of Bank Star One, Fulton, Missouri.

Board of Governors of the Federal Reserve System, August 17, 2016.

Margaret McCloskey Shanks,
Deputy Secretary of the Board.

[FR Doc. 2016–19958 Filed 8–19–16; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–2430–N]

Medicaid Program; Connecting Kids to Coverage Outreach and Enrollment Cooperative Agreement

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice.

SUMMARY: The purpose of this notice is to announce a single source emergency cooperative agreement funding opportunity available solely to the Greater Flint Health Coalition to reduce the number of children in Flint, Michigan who are eligible for Medicaid and CHIP, but are not enrolled, and improve retention of children enrolled.

DATES: 3 years, composed of three 12-month budget periods. The maximum funding amount for the first 12-month budget period is \$100,000. The Greater Flint Health Coalition will be eligible to receive an additional \$100,000 per year for the second and third 12-month budget periods.

FOR FURTHER INFORMATION CONTACT: Patrick M. Edwards, Project Officer, 410–786–4463.

SUPPLEMENTARY INFORMATION:

I. Background

On January 16, 2016, President Obama declared an emergency in the State of Michigan and ordered federal aid to supplement state and local efforts in response to the lead exposure related to the Flint, Michigan water system. On March 3, 2016, we approved the State of Michigan's 1115 demonstration, which (along with associated state plan amendments) extended Medicaid coverage and services to children up to age 21 years and to pregnant women with incomes up to and including 400 percent of the federal poverty level (FPL) who were served by the Flint water system from April 2014 through a state-specified date. To maximize outreach efforts to the significant number of children newly eligible for coverage, the Secretary for the Department of Health and Human Services (DHHS) has expressed interest in utilizing \$300,000 of outreach funding available under the Medicare Access and CHIP Reauthorization Act (MACRA) (Pub. L. 114–10, enacted on April 16, 2015) to support and coordinate outreach and enrollment efforts in Flint, Michigan to address the urgent health coverage needs of children

exposed to lead related to the Flint water system. The MACRA funds will be used to support the immediate need for an outreach and enrollment coordinator to educate current beneficiaries and applicants about the availability of important Medicaid benefits for children impacted by the lead exposure that began in April 2014 and continues to pose a risk. This exposure can cause negative developmental neurocognitive effects. Funds will be used for activities aimed at educating families about the availability of free or low-cost health coverage under Medicaid and CHIP,¹ identifying children likely to be eligible for these programs, assisting families with the application, as well as supporting the renewal of children in Medicaid and CHIP.

II. Provisions of the Notice

The purpose of this notice is to announce a single source emergency cooperative agreement funding opportunity available solely to the Greater Flint Health Coalition to reduce the number of children in Flint, Michigan who are eligible for Medicaid and CHIP, but are not enrolled, and improve retention of children enrolled. A single-source award to the Greater Flint Health Coalition will enable CMS to expeditiously provide emergency assistance to Flint, Michigan for the following purposes: To coordinate and promote activities aimed at educating families about the availability of free or low-cost health coverage under Medicaid and CHIP, identify children likely to be eligible for these programs, assist families with the application and renewal process, instruct current beneficiaries and applicants about the evaluation of potential lead exposure in the homes, communicate other benefits available to individuals eligible for services through the Flint demonstration, and ensure that such communication with individuals with disabilities and with individuals who are limited English proficient are in compliance with applicable civil rights laws, including Section 504 of the Rehabilitation Act and Title VI of the Civil Rights Act of 1964.

To provide these essential services as quickly as possible to reduce the

¹ On January 1, 2016, Michigan transitioned most of the children in its separate CHIP to a Medicaid expansion CHIP. The only children remaining in the separate CHIP are children from conception to birth, as defined in 42 CFR 457.10, with family income up to and including 195 percent of the Federal Poverty Level. Outreach and enrollment efforts will be directed to children who are eligible for Medicaid, as well as this CHIP population, to address the urgent health coverage needs of children exposed to lead contaminated water.

potential long term effects caused by lead exposure, this single source emergency funding opportunity must solely be available to the Greater Flint Health Coalition (GFHC) which is uniquely positioned to meet the goals of the emergency cooperative agreement based on the organization's location, capacity, partnerships, resources, prior experience, and ability to begin implementing the project immediately. Prior to the water crisis in Flint, the GFHC worked to significantly improve the health status of Flint residents by establishing a common health agenda and instituting a shared measurement system among local hospitals with mutually reinforcing health activities. In addition, this organization currently administers programs that involve a variety of constituents important to reaching and enrolling children in Medicaid and CHIP, such as schools, health homes, safety net providers, and various government organizations. The GFHC's presence in the greater Flint community enabled them to become an early leader in alerting the public about the lead exposure related to the Flint water system.

Utilizing the funding under this single-source award, the GFHC will be able to immediately hire an outreach and enrollment coordinator to educate beneficiaries about Medicaid and CHIP services available to affected children and families in Flint, Michigan and to coordinate community-based activities designed to support Medicaid enrollment for eligible children. More broadly, this funding will enable the GFHC to address the lead exposure related to the Flint water system by promoting critical public health, medical, and community-based services and interventions that address and mitigate the detrimental short and long term impacts of lead. Due to these reasons and the GFHC's cross sector collaboration with Genesee County's

public health leadership, physicians, hospitals, and health insurers, GFHC has the full capacity to begin implementation of the project tasks immediately.

III. Collection of Information Requirements

This document does not impose information collection requirements, that is, reporting, recordkeeping or third-party disclosure requirements. Consequently, there is no need for review by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*).

Dated: August 16, 2016.

Andrew M. Slavitt,

Acting Administrator, Centers for Medicare & Medicaid Services.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[CFDA Number: 93.583]

Announcement of the Award of Single-Source Grants Under the Wilson-Fish Alternative Program (W-F)

AGENCY: Office of Refugee Resettlement, ACF, HHS.

ACTION: Announcement of 13 single-source awards under the Wilson-Fish (W-F) Alternative Program.

SUMMARY: The Administration for Children and Families (ACF), Office of Refugee Resettlement (ORR), announces the award of 13 single-source grants for a total of \$35,513,938 under the W-F Alternative Program.

DATES: September 30, 2015 through September 29, 2016.

FOR FURTHER INFORMATION CONTACT:

Colleen Mahar-Piersma, Program Analyst, Office of Refugee Resettlement, Aerospace Building, 8th Floor West, 901 D Street SW., Washington, DC 20447. Telephone: 202-401-6891; Email: colleen.mahar-piersma@acf.hhs.gov.

SUPPLEMENTARY INFORMATION: The Wilson-Fish Alternative Program is intended to be an alternative to state-administered refugee assistance program that ensures that refugee assistance programs exist in every state where refugees are resettled. The W-F Alternative Program provides integrated assistance (cash and medical) and services (employment, case management, English language instruction, and other social services) to eligible clients in order to increase their prospects for early employment and self-sufficiency, reduce their level of welfare dependence, and promote coordination among voluntary resettlement agencies and service providers. W-F Alternative Program eligible clients include refugees, asylees, Amerasian Immigrants, Cuban and Haitian Entrants, Trafficking Victims, and Iraqi/Afghani Special Immigrant Visa holders.

The W-F Alternative Program, which operates in 13 states, is one of three models outlined in the ORR regulations for the purpose of providing refugee cash assistance (RCA) to new arrivals. The W-F Alternative Program utilizes a "one stop shop" model in which services and assistance are administered by a single agency.

Grant awards were made to 12 statewide W-F Alternative Programs in Alabama, Alaska, Colorado, Idaho, Kentucky, Louisiana, Massachusetts, Nevada, North Dakota, South Dakota, Tennessee, and Vermont. An award was also made to one countywide program in San Diego County, CA.

The W-F grant recipients are:

Grantee name	Location	Award amounts
Catholic Social Services	Mobile, AL	\$414,037
Catholic Social Services	Anchorage, AK	718,916
Colorado Department of Human Services	Denver, CO	2,955,177
Jannus Inc.—Idaho Office for Refugees	Boise, ID	2,304,414
Catholic Charities—Louisville	Louisville, KY	4,856,018
Catholic Charities Diocese of Baton Rouge	Baton Rouge, LA	1,463,000
Massachusetts Office of Refugees & Immigrants	Boston, MA	3,814,588
Catholic Charities of Southern Nevada	Las Vegas, NV	4,349,921
Lutheran Social Services of North Dakota	Fargo, ND	1,378,169
Catholic Charities Diocese of San Diego	San Diego, CA	3,534,100
Lutheran Social Services of South Dakota	Sioux Falls, SD	841,890
Catholic Charities of Tennessee, Inc.	Nashville, TN	8,299,523
US Committee for Refugees & Immigrants	Burlington, VT	584,185