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Board of Governors of the Federal Reserve System, September 12, 1997.

Jennifer J. Johnson,

Deputy Secretary of the Board.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Health Care Policy and Research

Contract Review Meeting

In accordance with section 10(a) of the Federal Advisory Committee Act (5 U.S.C. Appendix 2), the Agency for Health Care Policy and Research (AHCP) announces the following technical review committee to meet during the month of September 1997:

Name: Technical Review Committee for the AHCP User Liaison Program Mail Key Support Services Contract.

Date and Time: September 24, 1997, 10 a.m.—3 p.m.

Place: Agency for Health Care Policy and Research Willco Building, 3rd Floor Conference Room 6000 Executive Boulevard Rockville, MD 20852.

This meeting will be closed to the public.

Purpose: The Technical Review Committee's charge is to provide, on behalf of the AHCP Contracts Review Committee, recommendations to the Administrator,

AHCP, regarding the technical merit of contract proposals submitted in response to a specific Request for Proposals regarding the User Liaison Program (ULP) Mail Key Support Services contract.

The purpose of this contract is to provide for the timely merging and mailing of letters of invitation to User Liaison Program (ULP) workshops through use of a ULP developed, automated data base. The contractor will use and maintain a data base of State legislators, Governors and their staff, Federal and State executive branch, and local health officials, as well as selected public and private users of health services research including—health care consumers, purchasers, plans, practitioners, and policymakers. The contractor will perform mail merges for all letters of invitation and mail such invitations numbering between 3500 and 6000 as bulk mailings. Using the data in the database, the contractor will generate an annual *User Liaison Program Directory*. These services are required to ensure the timely dissemination of AHCP research findings and related publications to the research community and general public.

Agenda: The Committee meeting will be devoted entirely to the technical review and evaluation of contract proposals submitted in response to the above referenced Request for Proposals. The Administrator, AHCP, has made a formal determination that this meeting will not be open to the public. This action is necessary to protect the free and full exchange of views in the contract evaluation process and safeguard confidential proprietary information, and personal information concerning individuals associated with the proposals that may be revealed during the meeting. This action is taken in accordance with section 10(d) of the Federal Advisory Committee Act, 5 U.S.C., Appendix 2, 5 USC 522(b)(c)(6), 41 CFR 101-6.1023 and Department procurement regulations, 48 CFR 315.604(d).

Anyone wishing to obtain information regarding this meeting should contact Serena Toro, User Liaison Program, Center for Health Information Dissemination, Agency for Health Care Policy and Research, 2101 East Jefferson Street, Suite 401, Rockville, Maryland 20852, 301/594-6668.

Dated: September 11, 1997.

John M. Eisenberg,

Administrator.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

Expert Workshop Regarding Medical Monitoring in Bunker Hill, ID; Meeting

The Agency for Toxic Substances and Disease Registry (ATSDR) announces the following meeting.

Name: Expert Workshop Regarding Medical Monitoring in Bunker Hill, ID.

Times and Dates: 8 a.m.—5 p.m., September 23–24, 1997.

Place: The D. Abbott Turner Center at Emory University, 703 Clifton Road, NE, Atlanta, GA 30329, telephone 404/712-6725.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 100 people.

Purpose: ATSDR is considering the appropriateness of medical monitoring for populations who lived around the former Bunker Hill lead smelting facility (the Bunker Hill Superfund Site) in the Silver Valley area of Idaho during a time of excess exposures of public health significance. As Page 2 part of this consideration process, ATSDR is convening a series of workshops to examine the appropriateness and feasibility of a medical monitoring program.

The purpose of the medical monitoring program is to provide a public health service to communities affected by exposures to hazardous substances. This is accomplished by screening target populations at significant risk of a specific health effect or outcome, identifying individuals in need of further diagnosis or treatment, and arranging for appropriate referrals.

Section 104(i)(9) of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), as amended (42 U.S.C. 9604(i)(9)), provides for the Administrator, ATSDR, to initiate a health surveillance program for populations at significantly increased risk of adverse health effects as a result of exposure to hazardous substances released from a facility. A program included under health surveillance is referred to as "medical monitoring or screening" by ATSDR and is defined in the legislation as "the periodic medical testing to screen people at significant increased risk for disease."

ATSDR has established criteria to determine when medical monitoring is an appropriate health activity and the requirements for establishing a medical monitoring program at a site. The legislation requires that a mechanism to refer people for treatment be included in the program. The statute does not authorize ATSDR to provide medical treatment; thus, medical monitoring is performed as a community service, not a health study.

ATSDR is convening three expert workshops to assist in the evaluation of a medical monitoring program at the Bunker Hill site. If a program is deemed appropriate, the Agency will develop a medical monitoring plan for the target population(s). The first workshop, was held on August 19–20, 1997. This notice announces the second workshop.

Matters to be Considered: The objective of this workshop is to use all available relevant data from ATSDR, including that produced by the first workshop, to make individual recommendations and answer questions related to:

(1) The analysis of specific outcomes as candidates for monitoring from the first workshop, (2) further definition of the target populations from the first workshop, (3) the consideration of other heavy metals exposures as moderators of lead-based medical monitoring recommendations, and