

On August 21, 2000, the license for HCGS, to the extent held by PSE&G, was transferred to PSEG Nuclear Limited Liability Company (PSEG Nuclear). By letter dated September 6, 2000, PSEG Nuclear stated that they have assumed responsibility for the active items on the Hope Creek docket previously submitted by PSE&G as of the date of the transfer.

The proposed amendment would have revised the technical specifications to increase the allowable leak rate of the main steam isolation valves (MSIV) and delete the MSIV Sealing System.

The Commission had previously issued a Notice of Consideration of Issuance of Amendment published in the **Federal Register** on February 10, 1999 (64 FR 6707). However, by letter dated August 29, 2000, the licensee withdrew the proposed change.

For further details with respect to this action, see the application for amendment dated December 28, 1998, and the licensee's letter dated August 29, 2000, which withdrew the application for license amendment. The above documents are available for public inspection at the Commission's Public Document Room, the Gelman Building, 2120 L Street, NW., Washington, DC, and accessible electronically through the ADAMS Public Electronic Reading Room link at the NRC Web site (<http://www.nrc.gov>).

Dated at Rockville, Maryland, this 7th day of September 2000.

For the Nuclear Regulatory Commission.

**John Harrison,**

*Project Manager, Section 2, Project Directorate I, Division of Licensing Project Management, Office of Nuclear Reactor Regulation.*

[FR Doc. 00-23528 Filed 9-12-00; 8:45 am]

**BILLING CODE 7590-01-P**

## NUCLEAR REGULATORY COMMISSION

### Sunshine Act Meeting

**AGENCY HOLDING THE MEETING:** Nuclear Regulatory Commission.

**DATE:** Weeks of September 11, 18, 25, October 2, and 9, 2000.

**PLACE:** Commissioners' Conference Room, 11555 Rockville Pike, Rockville, Maryland.

**STATUS:** Public and Closed.

**MATTERS TO BE CONSIDERED:**

### Week of September 11

*Wednesday, September 13*

9:30 a.m.

Affirmation Session (Public Meeting)  
a: Final Rules—10 CFR Part 35,

“Medical Use of Byproduct Material” and 10 CFR Part 20, “Standards for Protection Against Radiation” (Tentative)

b: Final Rule: “Adjustment of Civil Monetary Penalties”; Proposed Revision to the Enforcement Policy to Conform to the Final Rule Adjusting Civil Monetary Penalties and Minor Administrative Changes to Parts 1 and 13

### Week of September 18—Tentative

There are no meetings scheduled for the Week of September 18.

### Week of September 25—Tentative

*Friday, September 29*

9:25 a.m.

Affirmation Session (Public Meeting)  
(If needed)

9:30 a.m.

Briefing on Risk-Informing Special Treatment Requirements (Public Meeting) (Contact: Tim Reed, 301-415-1462). This meeting will be webcast live at the Web address [www.nrc.gov/live.html](http://www.nrc.gov/live.html).

1:30 p.m.

Briefing on Threat Environment Assessment (Closed-Ex. 1)

### Week of October 2—Tentative

*Friday, October 6*

9:25 a.m.

Affirmation Session (Public Meeting)  
(If needed)

9:30 a.m.

Meeting with ACRS (Public Meeting) (Contact: John Larkins, 301-415-7360)

### Week of October 9—Tentative

There are no meetings scheduled for the Week of October 9.

**Note:** The schedule for Commission meetings is subject to change on short notice. To verify the status of meetings call (recording)—(301) 415-1292.

**CONTACT PERSON FOR MORE INFORMATION:** Bill Hill (301) 415-1661.

The NRC Commission Meeting Schedule can be found on the Internet at: <http://www.nrc.gov/SECY/smj/schedule.htm>.

This notice is distributed by mail to several hundred subscribers; if you no longer wish to receive it, or would like to be added to it, please contact the Office of the Secretary, Attn: Operations Branch, Washington, DC 20555 (301-415-1661). In addition, distribution of this meeting notice over the Internet system is available. If you are interested in receiving this Commission meeting schedule electronically, please send an electronic message to [wmh@nrc.gov](mailto:wmh@nrc.gov) or [dkw@nrc.gov](mailto:dkw@nrc.gov).

Dated: September 8, 2000.

**William M. Hill, Jr.,**

*SECY Tracking Officer, Office of the Secretary.*

[FR Doc. 00-23561 Filed 9-8-00; 4:40 pm]

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## OFFICE OF PERSONNEL MANAGEMENT

### Federal Employees Health Benefits Program: Medically Underserved Areas for 2001

**AGENCY:** Office of Personnel Management.

**ACTION:** Notice of medically underserved areas for 2001.

**SUMMARY:** The Office of Personnel Management (OPM) has completed its annual determination of the States that qualify as Medically Underserved Areas under the Federal Employees Health Benefits (FEHB) Program for the calendar year 2001. This is necessary to comply with a provision of the FEHB law that mandates special consideration for enrollees of certain FEHB plans who receive covered health services in States with critical shortages of primary care physicians. Accordingly, for calendar year 2001, OPM's calculations show that the following States are Medically Underserved Areas under the FEHB Program: Alabama, Idaho, Kentucky, Louisiana, Mississippi, Missouri, New Mexico, South Carolina, South Dakota, Utah, and Wyoming. The 2001 list is identical to the 2000 list, except we have removed North Dakota from the list for calendar year 2001.

**EFFECTIVE DATE:** January 1, 2001.

**FOR FURTHER INFORMATION CONTACT:** Ingrid Burford, 202-606-0004.

**SUPPLEMENTARY INFORMATION:** FEHB law (5 U.S.C. 8902(m)(2)) mandates special consideration for enrollees of certain FEHB plans who receive covered health services in States with critical shortages of primary care physicians. The FEHB law also requires that a State be designated as a Medically Underserved Area if 25 percent or more of the population lives in an area designated by the Department of Health and Human Services (HHS) as a primary medical care manpower shortage area. Such States are designated as Medically Underserved Areas for purposes of the FEHB Program, and the law requires plan payments to all qualified providers in these States.

FEHB regulations (5 CFR 890.701) require OPM to make an annual determination of the States that qualify as Medically Underserved Areas for the