

Commercial Issues Amendment,  
Comment Period Ends: 10/12/2018,  
Contact: Emily Gilbert 978-491-8024  
*EIS No. 20180182, Draft, USFS, NV, Lee  
Canyon EIS, Comment Period Ends:  
10/01/2018, Contact: Jonathan Stein  
702-515-5418*

*EIS No. 20180183, Draft, TVA, TN,  
Transmission System Vegetation  
Management Programmatic EIS,  
Comment Period Ends: 10/01/2018,  
Contact: Anita E. Masters 423-751-  
8697*

*EIS No. 20180184, Draft, BLM, UT, Draft  
Bears Ears National Monument Indian  
Creek and Shash Jaa Units Monument  
Management Plans and Associated  
Environmental Impact Statement,  
Comment Period Ends: 11/15/2018,  
Contact: Lance Porter 435-259-2100*

*EIS No. 20180185, Draft, BLM, UT,  
Grand Staircase-Escalante National  
Monument-Grand Staircase,  
Kaiparowits, and Escalante Canyon  
Units and Federal Lands Previously  
Included in the Monument That Are  
Excluded From the Boundaries Draft  
Resource Management Plans and  
Associated Environmental Impact  
Statement, Comment Period Ends: 11/  
15/2018, Contact: Matt Betenson 435-  
644-1200*

*EIS No. 20180186, Final, USFS, OR,  
East Hills Project, Review Period  
Ends: 09/17/2018, Contact: Jody  
Perozzi 541-353-2723*

#### Amended Notice

Revision to the **Federal Register**  
Notice published 07/06/2018, extend  
comment period from 08/20/2018 to 09/  
04/2018.

*EIS No. 20180149, Draft, FHWA, ND,  
Little Missouri Crossing, Contact:  
Gary Goff 701-221-9466*

Dated: August 14, 2018.

**Robert Tomiak,**

*Director, Office of Federal Activities.*

[FR Doc. 2018-17747 Filed 8-16-18; 8:45 am]

**BILLING CODE 6560-50-P**

## EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

### Sunshine Act Meetings

**TIME AND DATE:** Friday, August 24, 2018,  
9:00 a.m. Eastern Time.

**PLACE:** Jacqueline A. Berrien Training  
Center on the First Floor of the EEOC  
Office Building, 131 "M" Street NE,  
Washington, DC 20507.

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

**MATTERS TO BE CONSIDERED:**

### Closed Session

The Associate Legal Counsel has  
certified that, in her opinion, exemption  
10 of the Sunshine Act, 5 U.S.C.  
552b(c)(10) and 29 CFR 1612.4(j),  
permits consideration of the scheduled  
matters at the closed meeting.

Agency Adjudication and  
Determination on Federal Agency  
Discrimination Complaint Appeals:

The Commission will be considering  
four (4) cases.

**Note:** Any matter not discussed or  
concluded may be carried over to a later  
meeting. (In addition to publishing  
notices on EEOC Commission meetings  
in the **Federal Register**, the Commission  
also provides information about  
Commission meetings on its website,  
*www.eeoc.gov.*, and provides a recorded  
announcement a week in advance on  
future Commission sessions.)

Please telephone (202) 663-7100  
(voice) and (202) 663-4074 (TTY) at any  
time for information on these meetings.  
The EEOC provides sign language  
interpretation and Communication  
Access Realtime Translation (CART)  
services at Commission meetings for the  
hearing impaired. Requests for other  
reasonable accommodations may be  
made by using the voice and TTY  
numbers listed above.

**CONTACT PERSON FOR FURTHER  
INFORMATION:** Bernadette B. Wilson,  
Executive Officer on (202) 663-4077.

Dated: August 15, 2018.

**Bernadette B. Wilson,**

*Executive Officer, Executive Secretariat.*

[FR Doc. 2018-17922 Filed 8-15-18; 4:15 pm]

**BILLING CODE 6570-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[CMS-3357-FN]

#### Medicare and Medicaid Program; Application From DNV GL—Healthcare (DNV GL) for Continued Approval of Its Hospital Accreditation Program

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

**ACTION:** Final notice.

**SUMMARY:** This final notice announces  
our decision to approve the DNV GL—  
Healthcare for continued recognition as  
a national accrediting organization for  
hospitals that wish to participate in the  
Medicare or Medicaid programs.

**DATES:** This decision is effective August  
17, 2018 through September 26, 2022.

**FOR FURTHER INFORMATION CONTACT:**  
Karena Meushaw (410) 786-6609, or  
Monda Shaver (410) 786-3410.

#### SUPPLEMENTARY INFORMATION:

##### I. Background

Under the Medicare program, eligible  
beneficiaries may receive covered  
services from a hospital, provided that  
certain requirements are met. Section  
1861(e) of the Social Security Act (the  
Act), establishes distinct criteria for  
facilities seeking designation as a  
hospital. Regulations concerning  
provider agreements are at 42 CFR part  
489 and those pertaining to activities  
relating to the survey and certification  
of facilities are at 42 CFR part 488. The  
regulations at 42 CFR part 482 specify  
the minimum conditions that a hospital  
must meet to participate in the Medicare  
program.

Generally, to enter into an agreement,  
a hospital must first be certified by a  
State survey agency as complying with  
the conditions or requirements set forth  
in part 482 of our regulations.  
Thereafter, the hospital is subject to  
regular surveys by a State survey agency  
to determine whether it continues to  
meet these requirements. There is an  
alternative, however, to surveys by State  
agencies.

Section 1865(a)(1) of the Act provides  
that, if a provider entity demonstrates  
through accreditation by an approved  
national accrediting organization that all  
applicable Medicare conditions are met  
or exceeded, we may deem those  
provider entities as having met the  
requirements. Accreditation by an  
accrediting organization is voluntary  
and is not required for Medicare  
participation.

If an accrediting organization is  
recognized by the Secretary of the  
Department of Health and Human  
Services as having standards for  
accreditation that meet or exceed  
Medicare requirements, any provider  
entity accredited by the national  
accrediting body's approved program  
may be deemed to meet the Medicare  
conditions. A national accrediting  
organization applying for approval of its  
accreditation program under part 488,  
subpart A, must provide the Centers for  
Medicare and Medicaid Services (CMS)  
with reasonable assurance that the  
accrediting organization requires the  
accredited provider entities to meet  
requirements that are at least as  
stringent as the Medicare conditions.  
Our regulations concerning the approval  
of accrediting organizations are set forth  
at § 488.5. The regulations at  
§ 488.5(e)(2)(i) require accrediting  
organizations to reapply for continued  
approval of its accreditation program