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UNITED STATES NUCLEAR REGULATORY COMMISSION

SECRETARY
OFFICE
OF THE COMMISSION

In the Matter of:
PRICE-ANDERSON RULEMAKING

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1 UNITED STATES NUCLEAR REGULATORY COMMISSIO.

2 In the Matter of:)

3 PRICE-ANDERSON RULEMAKING)

4)

5 Room 2F21
6 One White Flint North
7 Rockville Pike
8 Rockville, Maryland

9 Monday,
10 November 14, 1988

11 The above-entitled matter came on for hearing,
12 pursuant to notice, at 9:10 a.m.

13 BEFORE: HONORABLE HOWARD S. BELLMAN
14 Mediator

15 APPEARANCES:

16 On behalf of the Nuclear Regulatory Commission:

17 STUART TREBY, ESQ.
18 FRANCIS CAMERON, ESQ.
19 Office of General Counsel
20 One White Flint North
21 Rockville Pike
22 Rockville, Maryland

23 Also Present:

24 IRA DINITZ, Office of Nuclear Reactor Regulation
25 JOHN TELFORD, Office of Research
NORMAN MCELROY, Office of NMSS
ERIC JAKEL, Office of General Counsel

26 On behalf of Hoffman-LaRoche:

27 ROBERT J. ROSS, ESQ.
28 1800 K Street, N.W. - Suite 600
29 Washington, D.C. 20006

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APPEARANCES: (Continued)

Also Present:

ROY BROWN, Mallinckrodt
LINDA MCLEAN, Hoffman-LaRoche
BOB HARNEY, Hoffman-LaRoche
GASTON DE BARON, Hoffman-LaRoche

On behalf of National Association Nuclear Pharmacy:

ALVIN J. LORMAN, ESQ.
Baker & Hostetler
1050 Connecticut Avenue, N.W.
Washington, D.C. 20036

On behalf of Syncor International Corporation:

WILLIAM KEMMEL, ESQ.
General Counsel
Syncor International Corporation

P R O C E E D I N G S

MR. BEILMAN: Let's bring the session to order. I am Howard Bellman, the convenor appointed by the Nuclear Regulatory Commission, pursuant to the requirements of Section 19 of the Price-Anderson Amendments Act of 1988. And this is the first session of the negotiated rulemaking procedures specified in the Federal Register of October 14, 1988.

I want to make some preliminary remarks about my intentions respecting procedure, although a great deal is already indicated in that Federal Register announcement, but before doing so, I would like to ask everyone here who intends to participate to state an appearance for the record. And we have also passed around, I believe, a sign-in document that will reflect everyone who is present here, whether they intend to participate or not. So, perhaps if we can just go around the table.

MR. TREBY: My name is Stuart A. Treby. I have been designated by the Commission to be the negotiator for the NRC Staff in this proceeding. My title doing my usual work at the Commission is Assistant General Counsel for Rulemaking and Fuel Cycle. In that capacity, I am the head of the division that is responsible for all of the rulemaking for the Commission.

With me, for the Nuclear Regulatory Commission is

1 Chip Cameron, who is also from the Office of General
2 Counsel, Ira Dinitz who is from the Office of Nuclear
3 Reactor Regulation, John Telford, who is from the Office of
4 Research, Norman McElroy who is from our Office of NMSS and
5 Eric Jakel who is also with the Office of General Counsel.
6 The people I have just indicated constitute an internal team
7 that is going to be involved in this negotiation.

8 MR. BELLMAN: Thank you.

9 MR. KEMMEL: My name is William Kemmel. I am
10 General Counsel for Syncor International Corporation. We
11 operate a system of nuclear pharmacies and we are a member
12 of the National Association of Nuclear Pharmacies.

13 MR. LORMAN: My name is Alvin J. Lorman. I'm with
14 the law firm of Baker and Hostetler and we represent the
15 National Association of Nuclear Pharmacies.

16 MR. BELLMAN: Do I understand, Mr. Lorman, that
17 you will be the chief spokesperson for the Pharmacy?

18 MR. LORMAN: That is correct. Well, for the
19 pharmacies which are members of the national association,
20 yes.

21 MR. BELLMAN: Thank you.

22 MR. TREBY: Could you clarify who those are?

23 MR. LORMAN: The National Association of Nuclear
24 Pharmacies represents approximately 80 of the 125 nuclear
25 pharmacies in the United States which are operated for

1 profit.

2 MR. ROSS: I am Robert J. Ross of the law firm of
3 Ross & Smith and I represent Hoffman-LaRoche, duPont and
4 Mallinckrodt. With me is Roy Brown, with Mallinckrodt,
5 Linda McLean with Hoffman-LaRoche, Bob Harney with
6 Hoffman-LaRoche and Gaston deBaron with Hoffman-LaRoche.

7 MR. BELLMAN: Thank you. Apparently there are no
8 other appearances.

9 After the following, I will take any questions
10 that my remarks may generate. As I am sure at least some of
11 you know, the procedures specified and required by the
12 Price-Anderson Amendments is not a typical negotiated
13 rulemaking as contemplated by the Administrative Conference
14 of the United States guidance documents that are actually
15 cited in the amendments.

16 The Commission's Federal Register notice makes
17 some reference to most of those discrepancies. And if you
18 would like, we can discuss further how the remainder of this
19 procedure will attempt to resolve those discrepancies
20 further. It has seemed to me that a discourse on that point
21 now might be gratuitous, but I want to make it clear that in
22 the future, including this morning, if any of you want to
23 discuss what I would refer to as reconciling the amendments
24 to the Administrative Conference of the United States
25 Guidelines, I'm happy to do that with you.

1 Perhaps the most difficult aspect of applying
2 those guidelines to this matter has been the absence of any
3 determination in advance of the number of participants.
4 Under normal circumstances, the convener would survey the
5 field of possible participants, make some judgments
6 respecting which ones were required for our proper
7 negotiations and recommend that they be invited or maybe
8 even recommend that there are too many to conduct feasible
9 negotiations or at least recommend how long the negotiations
10 ought to take in order to allow for proper participation by
11 the proper number of participants.

12 In this case, the amendments required the
13 procedure eclipsing any question of feasibility and
14 specified a time table making such a survey impracticable.
15 On that basis, the Commission, after consulting with me and
16 receiving my recommendations, simply invited all persons and
17 entities belonging to a list of some 15 categories of
18 interests potentially affected by this proceeding through
19 its Federal Register notice and I believe reinforced that
20 procedure by issuing some more specific invitations. And
21 perhaps Mr. Treby will speak to that later.

22 In settling on that process, we contemplated the
23 possibility of a very large number of requests to
24 participate and on that worst case scenario basis selected
25 many of the remaining specifications in the Federal Register

1 notice. For example, in order to insure that participation
2 would be granted only to parties who were willing and able
3 to participate substantially, the notice required that those
4 who wished to participate file a notice of intent
5 accompanied by a position statement specifying and
6 addressing a number of material issues. In effect, a
7 preliminary brief was required.

8 Also, the notice indicates that persons with
9 similar interests are encouraged to consolidate and granted
10 the convener the authority to require consolidation of
11 participants.

12 And, finally, in this respect, the notice
13 indicated that where a person did not wish to participate
14 fully as a negotiating party, so to speak, or where the
15 convener found that a request to so participate was
16 insufficient, such persons would participate as members of
17 the public. And I should say that it is my present
18 intention to provide a formal opportunity at every session
19 of these negotiations for the public to orally address the
20 negotiators and that any member of the public may submit
21 written statements for consideration by the negotiators
22 throughout the proceeding.

23 This morning, although it certainly would appear
24 that our fear of too great a number of participants has not
25 materialized, I will rule upon the requests that have been

1 submitted, some of which are obvious from who is here and
2 some of which are not, frankly.

3 Before doing that, however, I want to say that I
4 am quite open-minded respecting modifying the procedures in
5 view of the smaller number of participants and will be glad
6 to hear everybody's suggestions about that. However, for
7 the time being, I would not consider revising the calendar
8 in the Federal Register notice. It may take us fewer days
9 at each session. I'm not sure, however, I want to cancel
10 whole sessions. At this point, I would be reluctant to do
11 that.

12 On other matters, my current intentions are as
13 follows. We will devote the first session, the session that
14 starts today, to complete exposition of the parties'
15 positions. In the current session, we will hear from each
16 party, make sure everyone had received everyone else's
17 preliminary documents and, if there is time, which seems
18 very likely, ask one another some clarifying questions.

19 I had contemplated that the second multi-day
20 session would allow for questioning of initial presentations
21 and the presentation of rebuttal. I think that that should
22 stand, but in view of the smaller numbers, I would also
23 consider providing some time during that session for
24 experts. Clearly, there may be some critical fact issues in
25 this case. For example, respecting the availability of

1 insurance which may benefit from such presentations if we
2 have time. And there may be some other such issues as well.

3 I do not want this to develop into a
4 courtroom-like format, however. I would minimize question
5 and answer processes, except perhaps in the examination of
6 other party's witnesses. And even in that case, I would
7 like to keep it as untried like as I can appropriately.

8 I want to discuss this with you off the record,
9 particularly after we have formally specified who the
10 negotiators are. Perhaps as in a pure example of regulatory
11 negotiations, we can even agree on some ground rules at the
12 outset now that we see how few of us there are.

13 Speaking of off the record, I should say that I
14 only intend to have a transcript made during the first two
15 multi-day sessions so that we have that advantage in
16 studying one another's statements. The subsequent sessions,
17 which I've thought of as negotiation sessions, will be
18 untranscribed. I understand that we all should be able to
19 obtain transcripts within approximately two days of the
20 session. I believe you are able to purchase copies of the
21 transcript from the reporter. And let me say that if any of
22 you want to make off-the-record statements, I would
23 appreciate it if you would address that request to me and
24 not to the reporter.

25 I also want to address the matter of ex parte

1 communication. Given my hybrid role as mediator and sort of
2 arbitrator, up to a point, and the policymaking or
3 legislative-like role of this proceeding, I believe that
4 ex parte communications are appropriate, just as they always
5 are between negotiators and a mediator or between a
6 policymaker and an interested party. I would emphasize very
7 strongly, however, that to the extent that I have to decide
8 issues upon which the negotiators can't agree, I will do my
9 very best to base my decisions on the record that you make
10 together and not on ex parte communication. So, testimony
11 and documents will be highly valued and assertions that can
12 be documented, including assertions regarding congressional
13 intent, should be documented.

14 As you know very well, the amendment requires an
15 answer to the preliminary question: Should the Commission
16 enter indemnity agreements with radiopharmaceutical
17 licensees?

18 It is my present judgment that in order to make a
19 more informed decision and in order to be as consistent with
20 the normal regulatory negotiation format as is practicable,
21 I should defer my answer to that threshold question until
22 after our sessions.

23 I may likewise defer on some, if not all, of the
24 scope issues raised, particularly in the preliminary
25 document of the Commission.

1 It should be clearly understood that this deferral
2 does not reflect a decision in favor of indemnification or
3 any particular breadth of inclusion. I would think of it as
4 tantamount to the conventional arbitration procedure of
5 deferring decisions on arbitrability even where they are
6 jurisdictional until the entire case has been heard. There
7 are very similar court methods for accepting jurisdictional
8 contentions without bifurcating proceedings.

9 So, following our first multi-day sessions, we
10 will move to negotiation sessions where we will attempt to
11 negotiate a rule even if one or more participants contends
12 that there should be no rule.

13 I should tell you that I hope that we will be
14 negotiating from a single text. That is from a proposed
15 rule that one or more of you submits.

16 Let me ask on the record now if there are any
17 questions so far about what I have said that you would like
18 to put on the record?

19 (No response.)

20 MR. BELLMAN: I am going to go off the record for
21 some informal discussion about participant status and other
22 matters. I want you to understand that if you feel as
23 though something that is being said off the record ought to
24 be on the record, that we'll go back on at your request. It
25 isn't my intention by going on and off the record to obscure

1 certain things. It is just to reinforce informality which I
2 think ought to be bound in this matter.

3 So, unless there is something further that someone
4 else wants to say on the record, let's go off the record.

5 (Discussion was held off the record.)

6 MR. BELLMAN: Shall we go back on the record?

7 I have a number of things to say for the record
8 before we go ahead to the oral presentations. First of all,
9 I would put on the record that the negotiating parties will
10 be the Commission, the manufacturers as represented by
11 Mr. Ross, and the pharmacies as represented by Mr. Lorman.
12 So, we have three negotiating parties.

13 Another matter that we discussed were the
14 particular efforts that the Commission made to insure that
15 all appropriate parties were advised of this proceeding and
16 maybe, Mr. Treby, you want to make a statement about your
17 efforts to invite everyone?

18 MR. TREBY: Thank you.

19 Yes, the Staff besides publishing a notice in the
20 Federal Register also took the Federal Register notice and
21 mailed it to all of its licensees within the NRC so that
22 they would receive a copy of it as opposed to having to read
23 it in the Federal Register.

24 We also expanded the list of people that we would
25 normally send such a notice to by including all -- including

1 representatives of the insurance industry to the extent that
2 we could identify different ones, although I don't want to
3 represent that we sent copies to every insurance company in
4 the country.

5 Also, since many radiopharmaceuticals in other
6 categories on the list in the Federal Register are licensed
7 by states under the Agreement State Program between the NRC
8 and the states, we insured that the representative of each
9 of the agreement states received a copy of the notice so
10 that they would be aware of it.

11 We also attempted to identify potential interested
12 other federal agencies and sent them copies of it. And I
13 guess we were somewhat successful since we do have an
14 observer from another federal agency here today.

15 We also issued a press release. So, this is a
16 summary of the various efforts that the Commission Staff
17 undertook to insure the widest possible dissemination of its
18 Federal Register notice.

19 MR. BELLMAN: Thanks. I understand that
20 Mr. Cameron just had a discussion or a telephone
21 conversation with American Osteopathic College of Radiology
22 which had filed a letter. Can you report on that?

23 MR. CAMERON: Yes. I just talked to Pamela Smith
24 who is the executive director of the American Osteopathic
25 College of Radiography or Radiology, rather. And they were

1 mainly concerned with participating because they thought one
2 of the issues was going to be the indemnification of
3 physicians for malpractice or mis-administrations. I
4 informed her that that was not one of the issues that would
5 be on the table unless they wanted to put it on the table.
6 They are against such indemnification. And she informed me
7 that they would withdraw their request to participate. And
8 I committed to informing her if there was any change at all
9 on that issue that we would get back in touch with them and
10 ask them to come in and participate. I don't anticipate
11 that there will be any change, but they are satisfied with
12 withdrawing their request for participating, although they
13 may come as an observer.

14 MR. BELLMAN: Okay, thanks.

15 I would indicate for the record that while we were
16 off the record, the parties agreed that there will be an
17 opportunity for expert testimony at the December 5th meeting
18 and that the advanced text of that testimony will be
19 circulated here in Washington among them on November 30th.
20 It is also understood that there may be some unanticipatable
21 rebuttal offered during those sessions, depending on what
22 the testimony provides, of course.

23 I would like to say for the record that I will ask
24 for public input, if anyone wishes, at the end of this
25 session whenever that turns out to be today. And, finally,

1 that we have agreed that we are now going to go ahead with
2 oral presentation and that the presentation will be in the
3 order of manufacturers, pharmacies, and the Commission, and
4 between the presentations, there may be some questions based
5 on the presentations. So, that is where we are as of the
6 moment.

7 So, Mr. Ross, if you will?

8 MR. ROSS: Yes. I am Robert Ross and I represent
9 the manufacturers of radioisotopes and radiopharmaceuticals,
10 specifically, Hoffman-LaRoche and its subsidiaries,
11 Mallinckrodt and E.I. duPont et de Nemours And Co., Inc.

12 We have filed our document in this case and I
13 think it sets forth our positions on these matter, but let
14 me run through them briefly.

15 First off, our interest is as manufacturers, of
16 course, we would be if a rule were developed directing NRC
17 to enter into indemnity contracts with radiopharmaceutical
18 licensees, we would be the prime people who supply those
19 radiopharmaceuticals and who stand at risk in the case of a
20 potential law suit for releases from my clients' plants
21 which manufacture radiopharmaceuticals.

22 I think in order to make a more complete record,
23 at this time, I am going to ask Roy Brown from Mallinckrodt
24 to describe a little bit what it is the manufacturing
25 process for radioisotopes and radiopharmaceuticals is all

1 about.

2 MR. BROWN: My name is Roy Brown. I am
3 manager of Regulatory Compliance at Mallinckrodt. The
4 radiopharmaceutical manufacturers produce a couple of
5 different types of products. First of all, they produce
6 products that are used for diagnostic imaging. And, second
7 of all, the manufacturers produce therapeutic products for
8 treatment of various disorders.

9 The manufacturers ship these products both
10 directly to hospitals and to nuclear pharmacies. The
11 medical community uses these radiopharmaceuticals and
12 medical radioisotopes both on a national basis and on a
13 worldwide basis. It has been estimated that in the U.S.,
14 alone, there are 100 million nuclear medicine procedures
15 each year.

16 The three manufacturers represented in this group
17 comprise more than 90 percent of the radiopharmaceutical
18 manufacturing market. Two more manufacturers, a total of
19 five manufacturers, represent more than 99 percent of the
20 market. So, this group of manufacturers is well
21 represented. It represents the bulk of the manufacturing.

22 The manufacturers use both by-product materials
23 and NARM materials. Several of the facilities have one or
24 more cyclotrons on site to produce some of these machine
25 produced or NARM products. NARM products meaning, N-A-R-M,

1 naturally occurring to the accelerated produced radioactive
2 materials.

3 Due to the nature of the radiopharmaceuticals,
4 many of the radiopharmaceuticals have a very short half-
5 life, half-lives on the order of several hours. As a result
6 of this, several of the manufacturing facilities are located
7 in large urban areas. One need here is with the short
8 half-life materials, you manufacture and ship the material
9 one day and it has to be delivered to the hospital for use
10 the following morning. This necessitates the manufacturing
11 plants to be located in large urban areas close to major
12 airports. Consequently, many of these plants are located in
13 high population density areas.

14 Our manufacturing plants are highly regulated by
15 NRC, EPA, FTA, DOT, DEA in some cases. We all have
16 extensive environmental protection policies. We all have
17 large professional staffs to do environmental sampling,
18 environmental protection. The radiopharmaceutical industry
19 does have a flawless safety record, operating for many, many
20 year.

21 In summary, we just feel that the products we
22 manufacture, the medical radioisotopes and the
23 radiopharmaceuticals do represent an important niche in
24 diagnostic medicine and are used in the medical community,
25 many lifesaving procedures worldwide.

1 MR. ROSS: As Mr. Brown has indicated, the risk to
2 the public health and safety from the operations of these
3 plants is extremely low. And, in fact, there has been an
4 exemplary safety record established by the
5 radiopharmaceutical manufacturing industry. However, that
6 does not preclude such cases as Bennett v. Mallinckrodt
7 arising when the public believes that it has been injured.
8 This, we feel, is an indication of some of the future
9 problems that we could face and, therefore, we would favor
10 development of a rule directing NRC to enter into indemnity
11 contracts with the radiopharmaceutical licensees and this is
12 occasioned primarily because we are unable to obtain
13 insurance in some cases or adequate insurance in others as
14 reflected by insurance brokers that we have contacted and
15 gone to.

16 I would hope by December 5th to have the testimony
17 detailing that issue particularly in the hands of all the
18 parties here.

19 I think there is another issue that we have a
20 position on, also, and that is that if these indemnification
21 agreements are entered into, we think they should include
22 facilities in agreement states. We believe that
23 congressional intent to that effect is fairly clear. And I
24 would say that that finishes a brief synopsis of our
25 position in this case.

1 MR. BELLMAN: Are there questions?

2 MR. TREBY: I have a few, if I may just for the
3 purposes of the record.

4 MR. BELLMAN: Sure.

5 MR. TREBY: I wonder if you could explain to us
6 what the difference is between a radiopharmaceutical and a
7 radioisotope or whether there is a difference. I mean you
8 indicated that you manufactured both of them. And I'm not
9 quite sure I understand the difference.

10 MR. BROWN: Radioisotopes are various chemical
11 agents tagged with the radio nuclide. For example,
12 some compounds using C14 for labeling or tritium.
13 Those are mostly used in medical research, both in hospital
14 research and university research. Where
15 radiopharmaceuticals are products that are licensed by FDA
16 for use in humans either for diagnostic purposes or for
17 therapy purposes.

18 MR. KEMMEL: Don't they cross over from time to
19 time? In other words, something that was researched once
20 winds up being --

21 MR. BROWN: Oh, absolutely, In some cases, the
22 medical research that is being done using medical
23 radioisotopes eventually will become a radiopharmaceutical
24 or a radiopharmaceutical product.

25 MR. TREBY: But is the distinction the fact that a

1 radiopharmaceutical is licensed by the FDA for use in
2 humans?

3 MR. BROWN: That's right. That's right. That's a
4 distinction.

5 MR. TREBY: Also, you had indicated that there
6 were five major manufacturers who made up approximately 99
7 percent of the industry. Could you give us the
8 rough percentages of what each one of them have? What
9 percentage of the market just so we know, you know, whether
10 there is one that is 80 percent or --

11 MR. BROWN: I can give you some numbers that we
12 use. It's a difficult market to analyze because some of
13 these products go directly to hospitals. Some of the
14 products go to hospitals via nuclear pharmacies, but this is
15 the breakdown that we use and this represents products going
16 straight from the manufacturers to the hospital. These are
17 all estimates. Mallinckrodt represents 40 percent of the RP
18 market share. duPont 27 percent. Metaphysics or
19 Hoffman-LaRoche 21 percent. Squibb 9 percent. Amersham 2
20 percent. And all others 1 percent.

21 Once again, these are radiopharmaceutical products
22 going from the manufacturer directly to the hospital or what
23 the market considers direct sales.

24 MR. TREBY: I know that duPont, for instance, is a
25 very large corporation and all. I guess I don't know a

1 whole lot about Mallinckrodt. Could you tell us what other
2 businesses Mallinckrodt has?

3 MR. BROWN: Mallinckrodt is a subsidiary of
4 International Minerals & Chemicals out of Chicago.
5 Mallinckrodt manufactures other chemical products, other
6 pharmaceutical grade products and there is a division, a
7 medical products group that manufactures these
8 radiopharmaceuticals. The total, to give you a feel for
9 dollar sales, we're looking at a direct market of somewhere
10 around 225 million per year total market and a direct and
11 non-direct market of around \$400 million a year.

12 MR. TREBY: For radiopharmaceuticals?

13 MR. BROWN: For radiopharmaceuticals.

14 MR. TREBY: And radioisotopes.

15 MR. BROWN: Right.

16 MR. TREBY: In rough figures, what percentage of
17 Mallinckrodt's business is radiopharmaceutical?

18 MR. BROWN: Roughly, it's 25 to 30 percent.

19 MR. TREBY: You indicated that the
20 radiopharmaceuticals are manufactured I guess by two
21 different means. One is to use by-product materials.

22 MR. BROWN: That's right.

23 MR. TREBY: And the second means is this -- the
24 use of naturally occurring and accelerated produced
25 radioactive materials, the so-called NARM materials.

1 MR. BROWN: Yes.

2 MR. TREBY: Do you have some sort of feel for the
3 breakdown there, too? What percentage are from by-products
4 and what percentage might be from NARM?

5 MR. BROWN: In terms of sales figures or curie
6 throughput --

7 MR. ROSS: Use and manufacturing facility or sales
8 or what?

9 MR. BROWN: We can certainly put some numbers
10 together. There are several. In our written testimony
11 there is an example of some by-product material products and
12 some naturally occurring or accelerated produced materials.
13 If you would like, we could go back and get a greater detail
14 on either dollar figure breakdown or curie breakdown.

15 MR. TREBY: I think that might be helpful.

16 MR. CAMERON: I guess a critical question there
17 that we wanted to clarify is whether you were asserting that
18 the NARM material should be within the scope of the
19 rulemaking.

20 MR. BELLMAN: Let me just put that directly. But
21 before we do that, though, let me go off the record for just
22 a moment.

23 (Discussion was held off the record.)

24 MR. BELLMAN: Back on the record.

25 I think there is a potential issue here or there

1 is an issue here about the coverage and whether it reaches
2 these NARM materials and the by-product materials. The
3 Commission's position seems to -- addresses that pretty
4 directly in terms of your position on that. But let me just
5 ask you about yours.

6 MR. ROSS: I would like to just have a small
7 conference here, first.

8 MR. BELLMAN: Sure.

9 MR. TREBY: Well, let me just say something
10 because I don't want to be indirect or to be viewed as
11 trying to not put all my cards on the table.

12 One of the issues I think is the question of NARM.
13 The Commission's jurisdiction is from the Atomic Energy Act
14 and we do have jurisdiction to license by-product materials
15 and the use of by-product materials. We are not -- we do
16 not have any jurisdiction over NARM materials. Also, the
17 Price-Anderson Act provides that we are to indemnify those
18 things that are under our jurisdiction. And, so, the
19 question comes up whether or not we would be able to even
20 indemnify NARM manufactured materials. And that was why I
21 was trying to get some sort of feel for the difference or
22 the percentages of by-product materials and NARM materials.

23 MR. BELLMAN: All right. We'll go off the record
24 so you can confer.

25 (Discussion was held off the record.)

1 MR. BELLMAN: We'll go back on the record.

2 MR. ROSS: We believe that even though there may
3 be a gap in the Atomic Energy Act as far as NARM is
4 concerned that we are going to try and make a case for its
5 inclusion. We believe that the congressional intent was
6 this way and, moreover, we feel that we're dealing here
7 largely with matters of public perception. The public
8 probably doesn't distinguish between NARM products and other
9 radiopharmacies. And we feel that the overall public
10 perception and public interest, as well as our own status in
11 our facilities dictates that we will argue that NARM should
12 be included.

13 MR. BELLMAN: Do you have any questions?

14 MR. LORMAN: No, but I'd like to answer --

15 MR. TREBY: I have some more questions.

16 MR. BELLMAN: I'm sorry. I asked you out of turn.
17 Mr. Treby still has some more questions.

18 MR. TREBY: Right.

19 MR. BELLMAN: Go ahead.

20 MR. TREBY: The five major manufacturers that you
21 listed, do they all hold licenses from the NRC or do they
22 have licenses from the agreement states? Do you know?

23 MR. BROWN: Mallinckrodt has NRC license. duPont.

24 MR. ROSS: Metaphysics.

25 MS. MCLEAN: We have both NRC and state --

1 MR. TREBY: Just a second. We're getting too many
2 people on the record here.

3 MR. ROSS: Yes. Metaphysics does hold an NRC and
4 agreement state licenses. Squibb, NRC license. Amersham, I
5 know holds an agreement state license. I don't know whether
6 they hold an NRC license or not.

7 MR. TREBY: But it would be a fair statement to
8 say that there is a mixture between NRC and agreement
9 states.

10 MR. ROSS: Absolutely.

11 MR. TREBY: And even if Mallinckrodt has an NRC
12 license, it also has an agreement license from one of our
13 so-called agreement states as well.

14 MR. BROWN: Not in the manufacturing area, but in
15 the radiopharmacy area, yes, we do.

16 MR. TREBY: And I assume that each of these or
17 that some of these companies have facilities in more than
18 one location and so that there would be a combination of NRC
19 or agreement states depending on the location.

20 MR. BROWN: Possibly, yes.

21 MR. TREBY: I just have a couple of questions I
22 guess dealing with insurance. One of the points that has
23 been made is that insurance is not available. And just to
24 clarify what your position is on that, I guess my first
25 question is, Bob, do you know whether any of your clients

1 maintain insurance for this type of risk?

2 MR. ROSS: It has been my impression and my
3 understanding after quite a bit of research into this area
4 that they all have nuclear exclusions and that chronic
5 releases are not covered by any of the three of my clients
6 in their insurance policies.

7 MR. TREBY: All right. Well, just to clarify,
8 when you say they have nuclear exclusions, they may have
9 something called commercial general liability insurance, but
10 that type of insurance has certain exclusions in it.
11 Something called broad-form nuclear exclusions.

12 MR. ROSS: That is my understanding. And
13 pollution.

14 MR. TREBY: And those -- is it your understanding
15 that those exclusions cover by-product material?

16 MR. ROSS: Stuart, I'm going to have to -- I want
17 to get back to you in more detail on that question.

18 MR. TREBY: Right. No, I understand that.

19 MR. ROSS: It is not an easy one just to say yes
20 or no to. So, I'd like to be able to answer it, but it
21 isn't that simple and I am going to have to go back to make
22 sure that we have accurate statements on the record.

23 MR. TREBY: Well, let me just sort of indicate the
24 kinds of questions or concerns I guess that the Staff has.
25 And if you can answer them now, fine; and, if not, you know,

1 we are going to have another opportunity when you have your
2 experts here.

3 MR. ROSS: We'll have several other opportunities,
4 I think.

5 MR. TREBY: Right. You know, it is not my intent
6 to cross-examine you.

7 MR. ROSS: Certainly.

8 MR. TREBY: But I guess one of the questions I
9 would have is what type of insurance do your clients
10 maintain for the risk from non-radioisotope pharmaceuticals?
11 That is, you know, a company such as Squibb or Mallinckrodt
12 must produce other types of pharmaceuticals and they must
13 have some sort of insurance I would think for that kind of
14 risk and what it is.

15 And whether these companies are self-insurers or
16 not. With regard to that, I might say it is our belief that
17 a lot of these very large companies, these multi-national
18 large companies are self-insurers to some extent. And we
19 wonder, you know, if we could have some more information or
20 facts in that area.

21 On page 10 of your written statements, you had
22 indicated that there was a concern about insurance coverage.
23 And I guess we are wondering: Is your concern the coverage
24 of risk from the chronic low level type of releases or is it
25 to seek coverage from accidental releases or perhaps both?

1 You know, it is not clear to us what type of risk you're
2 seeking indemnification from.

3 MR. PELLMAN: Let me -- I want to ask a question
4 about that question. And that is are you making the
5 distinction between behavior or emissions that occur that
6 are in compliance and those that are not in compliance with
7 regulation? You are asking him if he is seeking coverage
8 for both of those categories in and out of compliance? Is
9 that another way of putting it?

10 MR. TREBY: Well, I guess -- it appears to us
11 there are perhaps three different types of situations.

12 MR. ROSS: Okay. I think this is very important
13 to spell all of this out.

14 MR. TREBY: Right. One situation I guess is
15 whether there is some sort of accident. And I'm not even
16 sure whether that's a possibility or not, but we will assume
17 for the purposes of our discussion here that there is the
18 possibility of some sort of accident which results in
19 releases which are far in excess of what PAR 20 says and
20 you're seeking to get some sort of indemnification or
21 protection against whatever claims might result from that.

22 Another situation for which you might be seeking
23 protection is a release that is in excess of the Part 20
24 requirements, but it is not an accident in the sense of --
25 none of our accidents are the mushroom cloud type things,

1 but, you know, an accident that is unforeseen or something.
2 This is just some sort of release that exceeds Part 20 or
3 our regulatory regime and you want some sort of protection
4 from that.

5 And then the third category, which I guess is the
6 situation that came up in the so-called Mallinckrodt case is
7 where there are some low level releases, and by "low level",
8 they are below what levels -- they are within the range that
9 we say you can have such releases and it is impossible to
10 have zero releases. And is that the type of --

11 MR. ROSS: We are seeking insurance for any
12 release that is a potential liability to the plant where we
13 cannot obtain commercial insurance or adequate insurance
14 coverage. And I understand where you're coming from and we
15 will answer for the industry in as much detail as we can in
16 the next written testimony.

17 MR. BFLLMAN: All right. Let me just say -- and
18 maybe we'll actually see this, but the same questions
19 probably can be answered by the -- will have to be put to
20 the pharmacies. From my perspective, in terms of meeting my
21 responsibilities, I think it will be extremely valuable to
22 me to be able to sort of crystallize the issues here and
23 make sure that what is an issue is specified and what is not
24 an issue is also specified as not an issue.

25 MR. ROSS: Right.

1 MR. TREBY: And no ships passing in the night
2 here. I would think that that would be one of the ways of
3 avoiding a terrible blunder on my part, which I presume we
4 all want to do here.

5 MR. ROSS: I think this is a crucial issue for all
6 of us. I mean this one probably is the most important one.
7 The insurance coverage issue is the one that is going to
8 drive the entire rulemaking, if there is one, or lead to the
9 decision that there won't be one.

10 MR. BELLMAN: Okay. Other questions?

11 MR. TREBY: Yes. In your statement, you make
12 reference to the fact that such cases as the Mallinckrodt
13 case, are you aware of other cases besides Mallinckrodt? I
14 ask that because we're not aware of other cases other than
15 the one that the Pharmacies mention in their document
16 dealing with --

17 MR. ROSS: I am aware of the cases that we
18 mentioned and the cases that the Pharmacies mentioned and
19 those are the only ones I'm aware of as well.

20 MR. TREBY: Well, one last question. I notice
21 that Squibb and Amersham are not one of your clients.

22 MR. ROSS: Right.

23 MR. TREBY: Is that because they have insurance or
24 they just didn't want to join in? Is there anything we
25 should read into that fact?

1 MR. ROSS: No. For whatever reason, they didn't
2 want to join in this particular effort. I can't second
3 guess their motives. We certainly talked with them. And we
4 have their support, but I have no idea why they didn't join.

5 MR. TREBY: Okay.

6 MR. BELLMAN: Do you have any questions?

7 MR. LORMAN: Several of your clients, Mr. Ross,
8 also operate pharmacies as well as manufacturing facilities.
9 I wonder if you would just identify the number of
10 manufacturers that own pharmacies?

11 MR. ROSS: We don't have today the exact number of
12 pharmacies connected with these people, but we can certainly
13 tell you the names of the corporations that own them. We
14 believe that it is Mallinckrodt, duPont and Medi-Physics
15 which is a subsidiary of Hoffman-LaRoche that have the
16 radio --

17 MR. BROWN: duPont does not operate pharmacies.

18 MR. ROSS: No pharmacies?

19 MR. BELLMAN: Let's go off the record.

20 (Discussion was held off the record.)

21 MR. BELLMAN: Back on the record.

22 MR. ROSS: Mallinckrodt and Medi-Physics, a
23 subsidiary of Hoffman-LaRoche, do operate radiopharmacies.
24 duPont does not. To our knowledge, Squibb does not and
25 Amersham does not.

1 MR. LORMAN: Are you representing the pharmacies
2 in this proceeding as well as the manufacturers?

3 MR. ROSS: I am representing the manufacturers
4 primarily, and not the radiopharmacies except as the
5 interest appears that benefits my client. And we certainly
6 agree with the Pharmacies' position statement and in almost
7 all regards. And we are certainly supportive of it.

8 MR. LORMAN: Will you supply us for the record
9 either an estimate today or an actual number tomorrow or the
10 next time we meet the number of pharmacies that are involved
11 for Mallinckrodt?

12 MR. ROSS: Sure.

13 MR. LORMAN: Thank you. I have no further
14 questions.

15 MR. BELLMAN: Why don't we go ahead with your
16 presentation, then.

17 MR. LORMAN: For the record, my name is Alvin J.
18 Lorman. I represent the National Association of Nuclear
19 Pharmacies. I will not take a great deal of time to
20 summarize my presentation, which I guess perhaps was the
21 weightiest by weight, if nothing else, of the statements of
22 positions that were submitted.

23 I find in reviewing the position papers of all the
24 parties that in fact I think most of us agree on most of the
25 issues, which I find encouraging. We agree with everyone

1 else in this room that the manufacturer and the compounding
2 and pharmacies of radiopharmaceuticals is an extraordinarily
3 safe procedure presenting virtually no risk to the public.
4 We agree that the levels of radiation involved are extremely
5 low.

6 Our concern, however, is that cases such as
7 Bennett v. Mallinckrodt are a part of a public trend in the
8 law toward environmental liability cases inventing types of
9 liability which did not exist before, in many cases for
10 which no insurance had existed because the liability was
11 thought not to exist. And, frankly, it was a type of
12 liability for which the nuclear pharmacies, themselves, did
13 not have insurance. When that case became known to the
14 nuclear pharmacy industry, inquiries were made of insurance
15 carriers as to whether the CGL policies did indeed cover
16 that kind of exposure and we are told that, in fact, the CGL
17 policies that the nuclear pharmacies did hold did not cover
18 it on two grounds. One was the general nuclear exclusion
19 and the other was the new exclusions for environmental
20 impairment. So, they get you one way or the other.

21 Nuclear pharmacies attempted to obtain or to
22 ascertain the availability of insurance that would cover
23 this kind of liability and as will appear later I guess in
24 talking to some of the same people that the NRC Staff did,
25 we were unable to determine that any such coverage was

1 available or available at a rate with coverage limits that
2 would make it worthwhile having.

3 That remains the key issue to us. We believe it
4 is a very important issue for two reasons. One, of course,
5 business people feel very nervous about investing large sums
6 of money in an operation which for at least one potentially
7 very large area of exposure is uninsured.

8 The other thing is that we believe there is a
9 public interest involved here. While we do not believe that
10 this industry causes injury to the public, if at some point
11 down the road we all turn out to be wrong, it would be
12 comforting to know that there was some sort of fund to
13 compensate the public. So, we believe it is more than just
14 the commercial interests of the people at this table at
15 stake here, but there is a public interest.

16 We believe that in passing the amendment in
17 Section 19, that Congress determined that in fact if we
18 demonstrate that insurance is not available, that the NRC
19 should exercise its discretionary authority to, in fact,
20 establish an indemnification program. Accordingly, we
21 believe that the focus of this issue as it apparently is
22 going to be is on the availability of insurance.

23 We also believe that Congress did -- and to answer
24 the question that Mr. Treby will be asking later -- we also
25 believe that Congress did determine that nuclear pharmacies

1 and other facilities as may be determined in the rule in
2 agreement states would be covered as well. And that
3 concludes my statement of position.

4 MR. BELLMAN: Let me ask you all whether there is
5 disagreement among you as to the effect of the exclusions.
6 I mean I realize there are differences among you as to the
7 facts of the insurance market. And we're going to get some
8 expertise here, I guess, on that point. But then you also
9 recognize all of you that there are these exclusions in what
10 is available, but are there differences among you as to what
11 that means, how those -- what sort of those exposure those
12 exclusions provide?

13 Maybe you could just describe why those exclusions
14 from your perspective frustrate your need for coverage?

15 MR. LORMAN: We have a very simple answer. Our
16 insurance carriers told us that the exclusions worked to
17 prohibit any coverage for the kinds of incidents that we're
18 talking about. So, whether -- we don't have any -- I don't
19 have any independent expertise in the area of insurance, but
20 our insurance carriers told our pharmacies that the nuclear
21 exclusion works as a bar as well as the environmental
22 impairment exclusion. So, we are knocked out of the ball
23 park, at least according to our insurance companies, on both
24 grounds.

25 MR. TREBY: I think there may be a difference. 1

1 don't profess to be an expert in insurance, but in talking
2 with members of the Staff who are more knowledgeable than I,
3 they seem to think that there may be a distinction in these
4 exclusions with regard to those people who operate nuclear
5 facilities, such as a power plant that produces electricity
6 and those who are using by-product materials or source
7 materials to do something. And that the exclusions go to
8 those who are operating nuclear facilities. Since a
9 by-product -- use of a by-product material is not within
10 this term of art, "nuclear facilities", then it appears that
11 perhaps the exclusions don't apply.

12 However, I want to make sure I add my caveat that
13 I'm not an expert on insurance. And it is an issue that I
14 think needs to be resolved before this group.

15 MR. BELLMAN: It seems to me it almost as
16 important as the whole notion of market, itself, because,
17 clearly, insurance is available with the exclusion. So, we
18 need to determine, it seems to me the importance of those
19 exclusions.

20 Mr. Lorman, I take it your position is the same as
21 the manufacturers, not only with regard to the coverage of
22 agreement states, but also with regard to this NARM
23 by-product dichotomy.

24 MR. LORMAN: I hate to do this, but I don't agree.
25 My client agrees with the NRC with that. NARM material is

1 not covered, with the understanding that as long as the NRC
2 is not at this point seeking to expand its jurisdiction to
3 cover such material, we agree it is not covered under the
4 present statute and, therefore, should not be covered under
5 Price-Anderson as well.

6 MR. BELLMAN: And with regard to the issues that
7 Mr. Treby indicated about accidents and compliance and
8 noncompliance, could you address that, please?

9 MR. LORMAN: Yes. I can answer those questions
10 quite simply. You gave us three scenarios: an accident, a
11 release of excessive of Part 20 limits that was not an
12 accident, and chronic complying releases. We believe that
13 insurance on all three of those events should be provided.

14 MR. TREBY: Can you think of other scenarios to go
15 with those three?

16 MR. LORMAN: No.

17 MR. BELLMAN: Do you have any other questions?

18 MR. TREBY: Yes. I have just a few, I guess.

19 You indicated that you were representing
20 radiopharmaceuticals, about 80 of them, I guess.

21 MR. LORMAN: Yes.

22 MR. TREBY: As in the case of the manufacturers,
23 do they hold both NRC licenses and agreement state licenses
24 and some combinations?

25 MR. LORMAN: Yes.

1 MR. TREBY: Are these 80 different outlets, are
2 some of them associated with each other in the sense that
3 they may be outlets of one company?

4 MR. LORMAN: Yes. The largest number are part of
5 an organization called Syncor, Inc., International which is
6 the successor firm to a merger of two prior chains of
7 nuclear pharmacies, Syncor and Nuclear Pharmacy, Inc., which
8 merged some years ago. Syncor is the largest member and
9 represents the bulk of those membership in the NANP.

10 MR. TREBY: Does Syncor, itself, have a license?
11 Do each of the subsidiaries --

12 MR. LORMAN: The pharmacies are licensed in one of
13 two ways. Some of them hold individual licenses, either the
14 NRC or an agreement state. There are a group of Syncor
15 pharmacies which in fact are covered by a master license
16 from the NRC. So, there is one license that covers more
17 than one pharmacy.

18 MR. TREBY: Do you know whether these companies
19 have insurance of any sort at this time? I assume they must
20 have some insurance for their non-radioactive program.

21 MR. LORMAN: My understanding is they have the CGL
22 policies to cover their businesses, but that does not
23 include the kind of coverage we are concerned about here.

24 MR. TREBY: Also, do you know whether any of these
25 companies are self-insurers?

1 MR. LORMAN: My understanding is that none of them
2 are.

3 MR. TREBY: Well, again, it is my view and I think
4 it is probably the consensus around the table that the
5 availability of insurance is the central issue. So, to the
6 extent that you can give us any more information about
7 things like self-insurance and whatever kinds of other
8 insurance they have, I think that would be helpful.

9 MR. LORMAN: I guess you could call them
10 self-insured if you call the absence of insurance,
11 self-insurance. But by definition, no.

12 MR. ROSS: Perhaps I could get a Staff definition
13 of what he means by self-insured because that's not -- well,
14 may I have one?

15 MR. TREBY: Sure. My understanding of a
16 self-insurer are companies who set aside some reserves to
17 take care of contingencies such as self-insurers or else
18 have some surety bond or letters of credit or some other
19 financial means whereby in the event they're hit with a
20 claim and then they have to pay some monies, there is a
21 source to meet that obligation.

22 MR. BELLMAN: It is something much more
23 affirmative than crossing your fingers.

24 MR. TREBY: Oh, yes. And it is much more than
25 just saying, "Well, we have x-amount of money in our

1 treasury and, you know, if we have to pay, we have to pay."

2 It is some sort of separate fund that is set up
3 for the purpose of meeting these kinds of obligations.

4 MR. LORMAN: We have no problem with your
5 definition. The answer is still, no.

6 (Laughter.)

7 MR. ROSS: Stu, in your definition, would you say
8 that self-insuring would mean that whatever this plan is
9 you're describing has to be funded before there's a loss?
10 Is that within the ambient of your definition?

11 MR. TREBY: I don't think that's critical to the
12 definition. It could be either, either funded or not
13 funded.

14 Well, I guess one other question that we would
15 have although you may not be able to answer it now and that
16 is to what extent your clients have looked into some sort of
17 captive insurance type things. Some pools made up by the
18 individual members who would provide some insurance or some
19 of these companies that provide specialty type insurance.

20 MR. LORMAN: Reserving the right to have an expert
21 speak to that in two weeks, our preliminary looks have
22 determined that we're not a big enough industry to do that.
23 There aren't enough people involved to spread the risk that
24 it ultimately is not really called insurance. But we will
25 bring in someone to address that issue.

1 MR. BELLMAN: Mr. Ross, do you have any questions
2 of Mr. Lorman?

3 MR. LORMAN: No, I do not.

4 MR. BELLMAN: I guess we are ready for the
5 Commission's presentation.

6 MR. TREBY: In the Commission's Federal Register
7 it sets forth six issues and I intend to briefly address
8 each of them. I have, on behalf of the Staff, submitted a
9 written statement as have the other two speakers before me.
10 And I assume that they will be made part of the record.
11 Maybe as a part of the housekeeping process when we're
12 finished, we can consider how we want to get that into the
13 record, whether we have it attached to the transcript or
14 just provided to you. Somethin', like that. I don't intend
15 to read my statement.

16 I have been designated by the Commission to serve
17 as the Staff's negotiator in this proceeding and authorized
18 to represent the Staff in this proceeding. The nature of
19 the Commission's interest that may be affected by this
20 rulemaking is that under Section 81 of the Atomic Energy Act
21 of 1954 as amended, the Commission is authorized to issue
22 licenses for the medical use of by-product material. And,
23 as indicated in the Staff's written statement, the
24 Commission has under license approximately 2800 licensees
25 doing various things. Not all of those are

1 radiopharmaceuticals. There is a variety of things that we
2 set forth in our statements.

3 Under Section 170(a) of the Atomic Energy Act, the
4 Commission has the discretion to require financial
5 protection of and to extend an indemnity coverage for these
6 activities licensed by the Commission. And I would note
7 that the Commission has been requested to exercise this
8 discretionary authority in the past for the licensees who
9 are before us today and has not chosen to do so. And, in
10 fact, has only exercised its discretionary authority to
11 require financial protection of and extend indemnity
12 coverage to certain persons licensed to possess or use
13 plutonium in plutonium processing and fuel fabrication
14 activities.

15 Of course, the 170(a) makes it mandatory that we
16 extend indemnification to the construction and operation of
17 power reactors and research reactors.

18 With regard to the nature and the extent to the
19 risk to the public health and safety posed by the activity
20 of concern, I think I agree -- or I know I agree with Al
21 when he stated that all of the participants here are in
22 agreement that the activities of concern pose low risk to
23 the public health and safety. For the Staff's part, based
24 on considerations of potential risks and consequences due to
25 the amount of by-product material in the inventories which

1 are listed on Table 1 of the Staff's written position. The
2 half-lives of the radioisotopes, the frequency and methods
3 and use of these radioisotopes and the low likelihood of an
4 accident based on historical experience at
5 radiopharmaceutical licensee facilities, the Staff believes
6 that there is adequate safety with respect to these
7 activities.

8 I might say if we didn't think so, we wouldn't
9 have issued the licenses. But I think that is one thing
10 that we probably have agreement on that there is very low
11 risk to the public health and safety.

12 Whether financial protection for such risk is
13 available to licensees from commercial sources, this is the
14 central question and the one where there appears to be the
15 greatest disagreement amongst the participants.

16 As the staff indicated in its written statement,
17 it believes financial protection is available from the
18 commercial sources. I provided a little earlier this
19 morning a list of telephone conversations that Mr. Dinitz
20 had had with various insurance representatives to verify the
21 Staff's belief which it has held for some time that the
22 possibility of commercial insurance exists. And the list
23 indicates a number of telephone conversations that he had
24 with different representatives. These representatives
25 included the largest excess and surplus insurer in the

1 United States or one of the larger casualty property
2 insurers in the U.S. writing medical professional liability
3 policies, the large casualty -- one of the largest casualty
4 companies, et cetera. And I intend to provide a copy of
5 this listing with the written statement and I don't need to
6 read through it all here. But in summary, it seems to
7 indicate that a lot of these companies indicated that they
8 had never previously been asked to provide this coverage,
9 but if asked, they would consider writing the coverage.
10 Now, that's not an ironclad agreement that they would
11 provide it, but, apparently, they would certainly consider
12 it and they appear willing to evaluate the possibility of
13 providing that coverage.

14 With regard to what our position is, I guess our
15 position can be summarized as stating that, first of all, we
16 believe that there is a low risk to public health and safety
17 from the pharmaceutical licensee's activities and,
18 furthermore, in the unlikely event that an event does occur,
19 the potential liability for offsite damages resulting from
20 such an event would be within the insurance coverage that
21 the Staff believes is available.

22 The Staff also would note that one of the primary
23 objectives of the Price-Anderson Act was to remove the
24 deterrents of the private sector participation in atomic
25 energy activities presented by the threat of potentially

1 enormous high liability claims in the event of a
2 catastrophic nuclear accident. And that was one of the
3 principal incentives for the initial Price-Anderson Act back
4 in 1954.

5 We believe that this objective retains its
6 validity for application to the issue of whether
7 radiopharmaceutical licensees should be indemnified. And,
8 therefore, we believe that in addition to demonstrating that
9 commercial insurance is unavailable, the Staff believes that
10 those supporting indemnification must also demonstrate that
11 indemnification is necessary to maintain participation in
12 the radiopharmaceutical industry in order to insure that the
13 public will not be deprived of radiopharmaceuticals.

14 We would note that we're not aware of any instance
15 where a radiopharmaceutical licensee has ceased operation
16 because of the threat of uninsured liability. And this is
17 an industry that has existed for 30 to 40 years so far.

18 The last area that I would like to address is
19 other facts pertinent to the indemnification issue. And
20 under this category, I'd like to raise this issue of the
21 coverage of agreement states. As I stated earlier in my
22 presentation, the NRC in the various categories that we
23 enumerated in our written statement cover about 2,800
24 licensees. We understand that the 29 agreement states cover
25 approximately 5,000. So, there are many more licensees

1 covered by agreement states than covered by the NRC. The
2 question is whether or not the NRC has the authority under
3 Section 170 of the Act to require financial protection and
4 indemnification of radiopharmaceuticals from an agreement
5 state.

6 We believe that the record on this issue is
7 ambiguous. The amendments act does not provide any explicit
8 authorization for the Commission to indemnify agreement
9 state licensees. And, as I said, a reading of the current
10 language of the Atomic Energy Act would indicate that we can
11 only -- that is the Commission can only cover its own
12 licensees. We do recognize, however, that there was some
13 language in Section 19 of the 1988 Act amendments that
14 extended Price-Anderson and contained Section 19 which
15 indicated that this negotiated rulemaking should cover both
16 persons licensed by the Commission and by the agreement
17 state. Frankly, we're not quite sure what that means,
18 whether Congress was implying that we should have the
19 jurisdiction to extend it to agreement states or whether
20 after we conducted this rulemaking activity we would then go
21 back through Congress with the results of our activity and
22 say, "Yes, there ought to be indemnification. And in order
23 for us to extend to agreement states, you need to give us
24 some additional jurisdiction."

25 We believe that this ambiguity needs to be

1 resolved in some way in the course of this proceeding. It
2 should be one of the issues on the table here and one that
3 the negotiating committee should address.

4 We suggest in our written statement that perhaps
5 we could defer addressing that until after we had reached
6 some sort of position as to whether or not indemnification
7 should be provided because if the answer is indemnification
8 should not be provided, then it's somewhat of a moot point.
9 And I guess I don't need to say anything further on that
10 issue. I have already discussed the NRC's Staff position
11 with regard to NARM and I don't think I need to elaborate
12 any further on the position covered in our written
13 statement.

14 With regard to the scope of the licensees to be
15 covered, as we said in our written statement, we thought
16 that it should be somewhat limited from the very broad
17 coverage that we initially stated in the Federal Register
18 notice. The purpose of the Federal Register notice was to
19 give the widest possible dissemination of notice to
20 potential participants in this proceeding. And because we
21 listed various categories, that did not necessarily mean
22 that the Staff agreed that all of those would fall within
23 Section 19.

24 As I believe I stated earlier, we thought that
25 there should be two tests, initially, as to the scope of

1 licensees covered, first, to look to Section 19 and,
2 secondly, who sought to participate here. Certainly, the
3 Staff does not disagree that the -- who are the parties to
4 this proceeding at the moment: the manufacturers and the
5 radiopharmaceuticals would fall within the scope of Section
6 19. And they certainly have sought to participate here.
7 And we would think that they are within the scope of whoever
8 should be included in any rulemaking that would take place.
9 So, I guess our position would be or our position would be
10 that at this time, they are the only categories that we
11 would see being covered by any rulemaking that might result
12 from this proceeding.

13 In the event that we get to the point that we
14 think there should be some rulemaking and some
15 indemnification, we would like to identify a couple of other
16 matters that we believe need to be covered in such
17 negotiations. First amongst these would be the amount of
18 coverage and financial protection to be provided. Section
19 170(c) of the Act requires that the Commission must provide
20 indemnity coverage in the amount of \$500 million. Given the
21 very slight risk that we have identified from these
22 categories of licensees and the very small half-lives,
23 et cetera, we raise the question whether even if
24 indemnification is found to be appropriate, whether it
25 should be in that amount or some other amount. That seems

1 to be a very large amount of money and perhaps some lesser
2 amount might be appropriate. In any regard, that is an
3 issue that we think needs to be discussed amongst us.

4 Secondly, pursuant to Section 170(b) of the Act,
5 the Commission may require that those licensees who are
6 indemnified have and maintain some amount of financial
7 protection of the type specified in Section 170(b) of the
8 Act as a first step. That is with regard to power reactors,
9 for instance. I believe there is a requirement that they
10 have to provide a certain amount of insurance first before
11 they indemnification thereto.

12 The issue is, again, if we were to provide in this
13 rulemaking for some indemnification, should there be a
14 similar type provision with regard to these licensees.

15 Finally, a subject that appears to be very close
16 to the heart of Congress and I guess therefore must be close
17 to the Commission's heart is the question of fees with
18 regard to all people to whom an indemnification agreement
19 would be executed. And we would like to put that subject on
20 the table, also.

21 These were the items that we identified in our
22 initial consideration of the problem of some things that
23 should be considered when we meet in the negotiation phases
24 of this proceeding. And we wanted to alert the other
25 participants of our thinking. And that concludes our oral

1 statement.

2 MR. BELLMAN: Let me say with respect to the last
3 three items Mr. Treby just specified, how much insurance
4 should the insured maintain on its own, the amount of
5 coverage that the law might provide and the fees that -- I
6 would hope that each of you would have a specific position
7 on those three issues.

8 With regard to the matter of the lack of evidence
9 that companies are withdrawing from the market because of
10 their exposure, the point you made of people being in this
11 business for decades and nobody seems to have left, what
12 sort of demonstration are you talking about? What sort of
13 evidence are you talking about? I know what an absence of
14 evidence is, but I don't know what you might see as
15 affirmative evidence.

16 MR. TREBY: I guess the type of affirmative
17 evidence that we would be looking for is some -- I don't
18 want to create a self-fulfilling prophecy, but, you know,
19 some statement by either the manufacturers or the
20 radiopharmaceuticals that due to the lack of some sort of
21 protection this is going to be the factor that determines
22 that they're going to go out of business, that this is such
23 an important matter that this determines whether they remain
24 in business or not.

25 When one reads the Congressional record and reads

1 some of the statements, at least on the Senate side, it
2 appeared that some of the Senators seemed to be concerned
3 with the concept that the radiopharmaceuticals industry and
4 the manufacture of those radiopharmaceuticals was a very
5 important public service. And that is something that the
6 Staff agrees with. We think that radiopharmaceuticals are
7 very important and very worthwhile to the public health and
8 safety. And they seemed to be concerned that this industry
9 was going to disappear unless it got some sort of
10 protection.

11 Our concern is that this is an industry that has
12 existed for a long time without that protection. And we
13 frankly don't know where this concern comes from that the
14 people involved in the industry are going to go out of
15 business. I guess the type of evidence would be some sort
16 of indication of that.

17 MR. BELLMAN: Well, I just want to say that
18 although it seems to me that what you're raising is relevant
19 and material and all that, it calls forth a sort of rhetoric
20 that can only be grounded sort of in the hearts of the
21 stockholders or something. And I don't know exactly. I
22 mean it's a perfectly plausible issue, but it is a difficult
23 matter of proof here.

24 MR. LORMAN: Would Mr. Treby be persuaded by sort
25 of evidence by analogy, such as what's happened in the

1 vaccine industry in the United States where DPT
2 manufacturers one by one fell off the boards because of
3 product liability concerns until there literally was a risk
4 of no one in this country being willing to make a DPT
5 vaccine or the evidence that until Congress passed the Swine
6 Flu vaccination scheme, no one would manufacture Swine Flu
7 vaccine in this country. Is that probative evidence to you?
8 Or do we have to get up and say, "We're going to go out of
9 business."

10 MR. TREBY: Well, that's why I said I am concerned
11 about the statement saying, "I'm going to go out of
12 business." It is easy to say that and I'm not sure how
13 probative that is, but maybe some information by analogy
14 would be helpful to show the extent of the concern. I think
15 as a representative of the Commission, I sort of have two
16 hats. One hat is as an advocate of the Staff's position,
17 but the other hat I wear is a person who is responsible and
18 concerned with how we go about rulemaking and how we can
19 protect our rulemaking if we are ever challenged in court.
20 I am concerned about developing records, too. And I would
21 like there to be some sort of record developed that, you
22 know, there was a need for the particular rulemaking and it
23 fell within the ambit of what Congress said
24 Price-Anderson was all about.

25 MR. LORMAN: I guess our response would be we will

1 certainly attempt to satisfy your curiosity in that regard,
2 but our legal position is that Congress satisfied your
3 curiosity for you by directing this proceeding. We agree
4 with you: Let Congress determine that this is an important
5 industry whose future is important to the American public
6 and that in directing this proceeding, Congress made the
7 judgment that the issue is insurance, not whether we are
8 going to go bankrupt without it.

9 MR. TREBY: Well, perhaps that's another issue
10 that needs to be considered at our table, too. I have read
11 the various congressional statements and all, and,
12 certainly, there are many statements on the Senate side that
13 indicate just what you have indicated. However, there are a
14 number of statements, particularly on the House side, that
15 indicate that Congress may not have reached a final
16 conclusion on this matter but may view this rulemaking
17 activity as a direction to the Commission that it engage in
18 rulemaking and that it did not preordain what the result
19 would be and that it was nothing more than an urging that we
20 undertake this stuff since Congress, itself, was unable to
21 resolve the matter when it was before them.

22 MR. BELLMAN: Let me just say on my own behalf
23 that I think it is uncontroversial that fundamental
24 questions were not disposed of by the Congress because if
25 they were, we wouldn't be here. I mean they disposed in

1 many ways of this issue by shunting it to this process, not
2 the normal course of events. I mean it is unprecedented to
3 my knowledge, this what we are going through here. That
4 doesn't mean that they didn't express some very strong
5 opinions about other things or that some of them didn't
6 express strong opinions.

7 Now, I think that in addition to recognizing what
8 they didn't dispose of, I agree with anyone who wants to be
9 sensitive to whatever broad opinions did seem to be evident
10 in their debates, in their discussions and consistent with
11 something that I think Mr. Treby just said. I presume that
12 we want the outcome of this process to float. That is to
13 say we don't -- not only do we want to do the right thing
14 here, not only do we want to do what we are requested to do,
15 but we also want to do something that will be sustained.
16 Whether it is a matter, as he suggested, of making an
17 appropriate record to withstand challenge subsequently, or
18 whether it is a matter of doing that which political
19 leadership in the best sense of those words will accept. I
20 think we want to do all of that, and I certainly do.

21 MR. LORMAN: We don't disagree with you at all.
22 Solely on this issue of whether or not the industry goes
23 under without insurance, I think that is our disagreement.
24 I don't think that's an issue. Did Congress consider it? I
25 don't think it's an issue, frankly, that is really

1 appropriately before this group for negotiation. Prudent
2 business practice dictate that businessmen either have
3 insurance or an alternative to insurance. That people don't
4 sit around saying, "Shall we go out of business if we
5 don't," most of the time. You do in extraordinary
6 circumstances, such as in the vaccine areas. Granted, we
7 don't sit here with as much horsepower behind us without a
8 \$20 million judgment against someone sitting in this room as
9 we would in the vaccine area. But once we have had that
10 judgment, it is sort of closing the barn door after the
11 horse has escaped. Our position is prudent people have
12 insurance, otherwise, they don't do business. Just as no one
13 here, I suspect, has no insurance on their automobile. And
14 we don't sit and engage in lengthy discussions about the
15 wisdom of not having insurance on your automobile.

16 MR. SCHWARTZ: Let me just get back to some other
17 points. You were asking the other parties about these three
18 scenarios of yours. And I want that you address them
19 yourself regarding your own position on that, on those.

20 MR. TREBY: I guess the first point is that our
21 current position, subject to overwhelming -- well, not
22 overwhelming, but evidence to the contrary is that they can
23 get insurance that cover all three possible scenarios.
24 However, as to whether indemnification should cover all
25 three scenarios, I guess I'd like to think about that.

1 Certainly, it should cover the accident one and the releases
2 above Part 20. I think I would like to defer until the next
3 time as to whether or not it should cover the releases that
4 are within regulatory guidelines.

5 MR. BELLMAN: With regard to your position on
6 scope which it seemed to me there were three elements, the
7 by-product, NARM, dichotomy, the federal versus state
8 licensees dichotomy and also the matter of only the
9 participants here. With regard to the -- I understand,
10 although I'm not sure what sure to do next with regard to
11 this notion of ambiguity. I know what you mean by ambiguity
12 there with regard to the federal-state licensees. With
13 regard to the by-product NARM element, is your position a
14 position of policy or a position of legal strictures.

15 In other words, are you saying it would somehow
16 bias the law to go beyond your position?

17 MR. TREBY: Yes, it's a legal stricture. We just
18 don't have the authority under the Atomic Act to cover --

19 MR. BELLMAN: So that if my recommendation, for
20 example, or our consensus did that, it would be an illegal,
21 it wouldn't be a proper rule.

22 MR. TREBY: At least with regard to NARM. To be
23 very candid, the subject of whether or not the Commission
24 should take jurisdiction over NARM comes up from time to
25 time and the Commission was briefed a month or two ago on

1 that very subject. And, you know, I can't predict if the
2 condition at some point is going to take jurisdiction over
3 NARM materials. The issue comes up from time to time,
4 particularly with regard to disposal because some of these
5 materials are in our low level burial sites. But at the
6 present time, we don't have jurisdiction over it and it
7 would be illegal to extend Price-Anderson to it.

8 MR. ROSS: When I indicated you were going to make
9 arguments with regard to NARM, I believe I started by
10 agreeing that in fact there is that hole in the law and that
11 NARM is not presently covered.

12 On the other hand, we want to certainly be
13 inclusive and if, in fact, we get to a point where some
14 indemnification results from this, we want to have raised it
15 on the record and in our documentation in case the
16 Commission does take it up in the future.

17 MR. BELLMAN: I just think that for purposes of
18 consensus building and the kind of objectives that I would
19 like to have here, it is important for all of us to know
20 when positions are known on discretion and policy judgment
21 as opposed to readings of the law because presumably none of
22 us is interested in reaching an agreement that is not legal.

23 MR. LORMAN: I would like to ask, Stuart, when you
24 say the Commission has been briefed on whether to take
25 jurisdiction over NARM, do you believe that the Commission

1 has the statutory authority to do so or would the statute
2 need to be amended --

3 MR. TREBY: The statute would need to be amended.
4 But I think the Commission pursues legislative agendas, too,
5 and this is something that the Commissioners appear to be
6 interested in. We have had subject as to whether or not
7 that is something they ought to go back to Congress and ask
8 about. In particular, the agreement states, some of which
9 do regulate NARM are always pressing the Commission to do
10 something in this area.

11 MR. BELLMAN: But that needs to be sorted out. I
12 mean we're not here to develop a legislative agenda.

13 MR. TREBY: That's right.

14 MR. BELLMAN: I mean we can give some gratuitous
15 advice here.

16 MR. TREBY: I didn't mean to muddy the waters. I
17 just wanted to provide full disclosure that while it is my
18 view that it is clearly not something that the Commission
19 can do now.

20 MR. LORMAN: I would just like to clarify our
21 position, then, in response. We agree with you that the
22 Commission does not have legal authority to regulate NARM at
23 this point, but we also agree with Mr. Ross that should the
24 Commission assert authority over it one way or another, then
25 we would like it covered as well.

1 MR. ROSS: We certainly wouldn't want to go back
2 through this just for NARM in case it came up. So, there
3 must be some way we can allow for that contingency in the
4 future.

5 MR. BELLMAN: Well, give that some thought because
6 it's not immediately apparent to me anyway. Do you have any
7 other questions or any questions?

8 MR. LORMAN: I don't. Well, I guess I do.
9 Perhaps this is an improper question, but since, without
10 divulging it today, the name of one of the insurance
11 companies on here is the name of the very insurance company
12 that we have been unable to extract the policy, quote, from
13 for some time. I am wondering whether in connection with
14 our next session, you are planning to bring in people that
15 we can ask about these things or is this basically the kind
16 of evidence we're going to see, because, quite frankly, I
17 don't know how to cross-examine this when it's the same
18 company that won't give us a quote.

19 MR. TREBY: Well, I guess I have two answers. I
20 think, first of all, with regard to the apparent different
21 views, I think it may be a matter of talking, one of us
22 talking to some sort of headquarters group in a different
23 location and another one talking to a regional office or
24 something like that. I think we just spoke to different
25 offices. I am not prepared to resolve the difference here

1 now.

2 With regard to whether we're going to bring in
3 people, well, we're working towards the best we can do.
4 We've been seeking to interest the insurance industry to
5 tell us what their views are one way or the other. And we
6 may look at getting an expert. It depends on what we can
7 do.

8 MR. BELLMAN: Without being too lawyer-like, as I
9 say, I suffer a lapse once in a while and I think that we
10 all appreciate the value of being able to cross-examine and
11 we all appreciate the lack of value in hearsay. So, I mean
12 if we're going to have competing evidence, some of it may be
13 more persuasive than other evidence because it is direct and
14 subject to cross-examination. I don't know what else to say
15 about that. We're going to get together for as many days,
16 really, as I'm sure it's going to take. And you all have
17 your own ways of putting these presentations on. I think in
18 many ways, the value of this document that shows the efforts
19 so far by the Commission or some of their efforts is to
20 forewarn the rest of you about the basis for their position.

21 Do you have any questions?

22 MR. ROSS: Yes, I do.

23 Stuart, on this list of telephone conversations
24 with insurance representatives, I know that most of it says,
25 "... would consider writing such coverage." Frankly, that

1 doesn't help me a great deal. Almost any insurance company
2 that you call probably would consider writing some coverage.
3 Did your people or you, if you made the calls, get any more
4 specifics out of these people, such as: Are these claims
5 made policies, occurrence policies? Were there limits that
6 you considered? Were any of the premiums brought up? Was
7 deductibility part of what you asked them? Is there a need
8 for engineering studies prior to these companies considering
9 issuing a policy? Questions of that nature. Were any of
10 those asked? Do we have the answers to any?

11 MR. TREBY: These telephone conversations were
12 conducted by Ira Dinitz who, as I earlier indicated, is our
13 expert in NRF who deals with Price-Anderson issues all the
14 time. Perhaps the most efficient way to answer your
15 question would be to have Ira provide the answer to you.
16 So, I would ask Ira to respond.

17 MR. BELLMAN: Okay. He can do that. Does anybody
18 have any objection?

19 MR. ROSS: No.

20 MR. BELLMAN: That's fine. Okay.

21 MR. DINITZ: I think our initial thought was that
22 we wanted to see from the industry as to whether or not they
23 had ever been approached by the radiopharmaceutical
24 manufacturers or radiopharmacies directly.

25 It's funny, because I normally read Business

1 Insurance and I see ads from various insurance companies and
2 one ad that caught me a little by surprise was an ad by the
3 Home Insurance Company that said, "We are willing to write
4 radiopharmaceutical -- I'm sorry -- pharmaceutical companies
5 and other high risk," I can't recall the other high-risk
6 type, "or all other product liability companies. Give us a
7 call." Which is what I did.

8 And one of my first contacts was with the Home
9 Insurance Company and they are a very large writer of
10 casualty and property insurance policies within the country.
11 And I asked them have they ever been approached by the
12 radiopharmaceutical manufacturers or radiopharmacies to
13 write or to consider writing insurance. And he said, "No."

14 And I said, "Well, I will take you at your word in
15 your advertisement that you would be interested in at least
16 considering it." And, of course, I should preface this by
17 saying, no one told me or could tell me over the phone that
18 they are willing to write any type of insurance. They have
19 to make a determination or underwriters have to make a
20 determination as to the nature of the risk, the coverage in
21 the policy, the deductibles in the policy. These are
22 underwriting decisions that no one could give to you over
23 the phone.

24 ur basic need, however, was to find out just what
25 kind of canvassing of the market -- we wanted to determine

1 what kind of canvassing of the market that the
2 radiopharmaceutical manufacturers or radiopharmacies
3 accomplished.

4 I also called one of my initial contacts, as you
5 see on there, was with the Lexington Insurance Company. In
6 a number of my conversations and, of course, I converse
7 very, very regularly with American Nuclear Insurers, the
8 larger of the two pools writing nuclear liability insurance.
9 From early on, they had indicated to us that they do not
10 write this type of insurance for radiopharmacies or
11 radiopharmaceuticals because of the ability, they have
12 indicated to us and as well have indicated to the Congress
13 numerous times, that this insurance they believed and
14 certainly indicated to me was available in the conventional
15 market. Therefore, we thought it was incumbent upon us to
16 just do an initial canvassing of the market to see if that,
17 in fact, was correct.

18 One of the companies I did contact early on was
19 the Lexington Insurance Company, the largest of the excess
20 and specialty insurance markets. The indications from
21 Lexington were that this is an area that they would be
22 interested in looking at. They had never been approached by
23 any of the participants to consider writing this type of
24 coverage, but they were in the business to write this type
25 of coverage and they certainly would welcome inquiries from

1 the radiopharmaceutical industry on this issue.

2 As I got into more of the telephone conversations,
3 that seemed to be a pattern that developed and a number of
4 the companies that I contacted indicated that they had not
5 been approached to write this type of coverage, but the
6 conventional insurance market was the area that the coverage
7 should be written in. And there was agreement that it
8 should not be written with American Nuclear Insurers, but
9 the CGL policy, the Commercial General Liability policy that
10 was being written for across the board for thousands and
11 thousands of companies would be the policy that should be
12 written for radiopharmaceuticals and all of the companies
13 that I contacted indicated that they would be willing, at
14 least, to consider whether or not to write this type of
15 coverage, given the fact that they couldn't make any other
16 commitment to me over the phone until they actually had
17 specifics on what we were talking about.

18 MR. ROSS: And you didn't give them a hypothetical
19 client or anything like that and say, "Could you just kind
20 of run this through your system?" Or would they even do
21 that for you?

22 MR. DINITZ: They wouldn't even do that. I think
23 we all know insurance companies --

24 MR. LORMAN: They don't do it when you submit it.

25 MR. BELLMAN: One at a time because the reporter

1 is going to have difficulty.

2 MR. DINITZ: You're right. They don't like to
3 deal in hypothetical situations, especially, you know,
4 insurance underwriters don't deal with hypotheticals. They
5 said that, "If we were approached, we certainly would
6 consider writing it."

7 To give just a follow-up on what Stu said, I had
8 spoken to Gary Lewis in Mallinckrodt about the insurance.
9 Of course, I guess early on, it had been alleged that
10 Mallinckrodt had not maintained and was not able to maintain
11 a CGL policy. And we were a little surprised to find out
12 that they were maintaining the policy. The gentleman I
13 happened to speak to at Liberty Mutual, just to give you an
14 idea as to what we were running up against, the one official
15 in the company saying insurance was available, and the other
16 saying it's not, the Liberty Mutual gentleman I spoke to
17 wasn't even aware that they were writing Mallinckrodt.

18 So, there are -- these are very large insurance
19 companies. Headquarters operations, regional operations.
20 And it is certainly very well possible that one official in
21 the company does not know what other officials of the
22 companies are doing.

23 I tried in my contacts to speak to the people in
24 this area that were directly responsible for the
25 pharmaceutical and these type of high-risk operations,

1 rather than speaking to the people writing the casualty and
2 property policies for fire and theft and the usual risks.

3 MR. ROSS: Other than that, I don't think I have
4 any other questions.

5 MR. BELLMAN: Let me pursue one other matter that
6 the Commission's position raises. And that is the coverage
7 by this proceeding -- our proceeding here, of categories of
8 actors who are not among us, the position of the Commission
9 being, I understand, that they should not be covered by this
10 proceeding. I mean I presume that allows us to say neither
11 yea nor nay with regard to whether they ought to be.
12 They're just not here and not germane.

13 Is there any dissent from that view of the
14 Commission? Is there any other category that you want
15 discussed here besides your own?

16 No? Okay.

17 MR. LORMAN: Not on behalf of the pharmacies.

18 MR. ROSS: Other than, of course, Squibb and
19 Amersham aren't directly represented here --

20 MR. BELLMAN: I'm not talking about companies.

21 MR. ROSS: Other than that, no. I agree with
22 that.

23 MR. BELLMAN: Are there any other further
24 questions that any of you have of one another here?

25 (No response.)

1 MR. BELLMAN: Is there anyone here from the --
2 anyone else here, not at the table, who wishes to say
3 something? I think I recognize everybody here, having been
4 here all along.

5 (No response.)

6 MR. BELLMAN: All right. Let's go off the record,
7 please.

8 (Whereupon, a brief recess was taken.)

9 MR. BELLMAN: Back on the record.

10 This is my attempt, subject to everyone's
11 correction, to recite for the record a list of issues and
12 agreements with respect to certain factors and some points
13 with respect to evidence that is regarded as important to
14 provide.

15 The first issue is the need for insurance, which
16 is divided into three subsets: the need to address
17 liability, the need to address litigation costs and the need
18 to address potential disincentives to investment.

19 Next, there are issues with respect to
20 availability of insurance which includes kinds of insurance,
21 amounts of coverage, and the cost of insurance. All of
22 which factors go to a question of whether acceptable
23 insurance is really available. Or, as it was put: What
24 kind of insurance can a participant in these industries hope
25 to purchase and is it reasonable to expect them to accept

1 that kind of insurance?

2 Then there was some discussion with respect to the
3 need for insurance and the period of time that has passed in
4 the present state of affairs where it is asserted there is a
5 lack or absence of insurance.

6 How does one account for decades of operation in
7 that situation, given that it is not conventional to expect
8 an enterprise to operate without coverage? In fact, were
9 there decades without coverage is another question. Or have
10 some kinds of insurance which were available become
11 unavailable?

12 Also, the question was asked what types of
13 insurance and other insurance-like devices are now held or
14 engaged in by these companies in these industries.

15 There is the question of the importance of the
16 nuclear or pollution exclusions and what effect or
17 importance should be attached to insurers' advice to these
18 companies with respect to the importance in effect of those
19 exclusions.

20 And the question of if these exclusions are
21 applied more broadly than simply these populations of
22 companies, why should these companies receive special
23 treatment from the government?

24 I think that we agreed that whether that the
25 public would suffer were these companies to leave their

1 business, but -- and we also agreed that we cannot --
2 ultimately, we cannot determine whether not being
3 indemnified will cause them to leave. What we know is that
4 the parties have varying opinions and it is difficult to
5 bolster any of those opinions with specific evidence.

6 Finally, with respect to insurance, there is the
7 issue of how much insurance for indemnification should be
8 provided if any is going to be provided.

9 Secondly, there is the issue of whether agreement
10 states are or should be covered and it was indicated that it
11 would be helpful to know how these companies are distributed
12 between federal licensing and agreement state licensing.

13 Thirdly, there is the issue of NARM coverage.
14 And, finally, it was agreed that the discussion here
15 encompasses releases within Part 20, releases that exceed
16 Part 20, and what we have referred to as "accidents."

17 That is my representation of what I think we have
18 agreed are the issues here. I mean I really do encourage
19 you to refine that if I have -- I take no pride in
20 authorship here.

21 (No response.)

22 Hearing none, thank you all very much. And I will
23 see you in a couple of weeks.

24 (Whereupon, at 2:15 p.m., the hearing was
25 adjourned.)

CERTIFICATE

This is to certify that the attached proceedings before the United States Nuclear Regulatory Commission in the matter of:

Name: PRICE-ANDERSON RULEMAKING

Docket Number:

Place: ROCKVILLE, MARYLAND

Date: November 14, 1988

were held as herein appears, and that this is the original transcript thereof for the file of the United States Nuclear Regulatory Commission taken stenographically by me and, thereafter reduced to typewriting by me or under the direction of the court reporting company, and that the transcript is a true and accurate record of the foregoing proceedings.

Joan Rose

(Signature typed): JOAN ROSE

Official Reporter

Heritage Reporting Corporation