

I believe in having testimony and evidence put before 23 men and women drawn at random. That's our system. That is government by the people. It's not government by prosecutors. It's putting evidence before a grand jury. That is our system. It's a sound system. It's centuries old. It was ordained at the founding of the American republic. Part of that is, guard the confidentiality of that. Ken Starr Press Conference, Feb. 5, 1998.

"In my service as Independent Counsel, particularly with regard to the secrecy of the grand jury, I have insisted on a high commitment to professional conduct. I have expressed this commitment to you repeatedly. From the beginning, I have made the prohibition of leaks a principal priority of the Office. It is a firing offense, as well as one that leads to criminal prosecution. In the case of each allegation of improper disclosure, we have thoroughly investigated the facts and reminded the staff that leaks are utterly intolerable." Letter from Ken Starr to David Kendall, February 6, 1998, at p.1.

"In light of the unclear press attributions in some examples cited in your letter, I have undertaken an investigation to determine whether, despite my persistent admonitions, someone in this Office may be culpable. I have no factual basis—as you likewise of not have—even to suspect anyone at this juncture." Letter from Ken Starr to David Kendall, February 6, 1998, at p.1.

Mr. Starr's earlier statements to the public appear inconsistent with his more recent admission that he and his deputy routinely talk to the press. The changing positions he has taken raise questions about whether he has been fully candid about the extent of his dealings with the media.

COMMUNICATION FROM THE
CHAIRMAN OF THE COMMITTEE
ON THE BUDGET REGARDING REVISIONS TO THE ALLOCATION FOR THE HOUSE COMMITTEE ON APPROPRIATIONS PURSUANT TO SECTION 2 OF THE HOUSE RESOLUTION 477

The Speaker pro tempore under a previous order of the House, the gentleman from Ohio, Mr. KASICH, is recognized for 5 minutes.

Mr. KASICH. Mr. Speaker, pursuant to Sec. 314 of the Congressional Budget Act, I hereby submit for printing in the Congressional Record revisions to the allocation for the House Committee on Appropriations pursuant to section 2 of House Resolution 477 to reflect \$475,000,000 in additional new budget authority and \$475,000,000 in outlays for fiscal year 1999.

As reported by the House Committee on Appropriations, H.R. 4276, a bill making appropriations for Departments of Commerce, Justice, and State, the Judiciary and Related Agencies Appropriations Bill for Fiscal Year 1999, includes \$475,000,000 in budget authority and \$475,000,000 in outlays for international arrearages.

These adjustments shall apply while the legislation is under consideration and shall take effect upon final enactment.

Questions may be directed to Art Sauer or Jim Bates at x6-7270.

The SPEAKER pro tempore. Under a previous order of the House, the gen-

tleman from Maryland (Mr. HOYER) is recognized for 5 minutes.

(Mr. HOYER addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mrs. TAUSCHER) is recognized for 5 minutes.

(Mrs. TAUSCHER addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from North Carolina (Mrs. CLAYTON) is recognized for 5 minutes.

(Mrs. CLAYTON addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New York (Mrs. MALONEY) is recognized for 5 minutes.

(Mrs. MALONEY addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

PATIENTS' BILL OF RIGHTS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Ms. JACKSON-LEE of Texas) is recognized for 5 minutes.

Ms. JACKSON-LEE of Texas. Mr. Speaker, there are times when issues impacting this country and the concerns of Americans and the concerns of our constituents, in this instance, my constituents in Houston and those in Texas, really grab hold of us. Frankly, I think the debate that we will have this week on the question of the Patients' Bill of Rights is one that really goes directly to the heart of the matter. Frankly, it is no issue to take lightly; it is no issue to take frivolous sides, to be partisan and to not come to a resolution. It is a very serious discussion.

Mr. Speaker, I am saddened by the fact that we have now thrown the gauntlet down on the Republican legislation and the Patients' Bill of Rights. I say Republicans over here, and the Patients' Bill of Rights, because that legislation truly represents what the American people want. It is disappointing to me that this House would rise to do something as important as answering the concerns of so many Americans about the abuses of HMOs and to design legislation with absolutely no hearings. I am very gratified today, however, that Democrats saw fit to hold hearings so that testimony could be heard in this Congress on the tragedy of some of the abuses of HMOs.

I think it is important to emphasize the positive, and that is that the Patients' Bill of Rights is centered around a major concept, and that is the sanctity of the patient-physician relationship. So there is no intervener who

comes in and says, you are denied service. There is no one who closes the door to an injured loved one when one comes to the emergency room. There is no one who says to you that this service is not going to be paid for.

So many tragedies have occurred because HMOs have taken upon themselves to emphasize business decisions and cost decisions which certainly have merit for more efficient medical care, but they have decided to do that over the needs of those who need the kind of care that is important in America.

We have had women who have been denied the use of an OB-GYN as a primary caretaker. We have had people who have been turned away from the emergency rooms. We have had doctors who have been intimidated by bureaucrats in some other State saying, no, that service is denied. We have had those doctors and nurses who want to give real quality care being refused the ability to serve their respective patients, and then we have had a very funny system: Well, if you do not like what the HMOs have done, why do you not just appeal? Mr. Speaker, 2 weeks at a time to take an appeal. The Patients' Bill of Rights gives a little extra clout to the patient.

Mr. Speaker, we stand on the side of those who are intimidated and who are denied the service by giving them the ability to sue the HMOs. Is that the anchor of our legislation? Absolutely not. But we do recognize that the health care in America is broken and it needs to be fixed.

Let me suggest to my colleagues why, because today Democrats took a real bold step and listened to those individuals who wanted to tell us what had happened to them with HMOs.

Sharon Crossley of Wallingford, Connecticut. In 1997, Sharon was diagnosed with breast cancer. Four days before her surgery was scheduled, the HMO medical review doctor denied that surgery. After making countless calls to her HMO, she was told by a customer service agent that if she did not agree with her medical review doctor's decision, she could follow the internal written appeals procedure. HMO members were not allowed to speak to the medical review doctor. Time was running out. Sharon was 3 weeks into biopsy, and after a biopsy is performed, there is only a 3 or 4 week window to take the next course of action. Sharon contacted a local Member of Congress who got her the surgery.

In 1989 Florence and Wayne Cocoran tragically lost their baby boy when Florence's managed care plan denied hospitalization over her obstetrician's objections during her eighth month of high-risk pregnancy. Florence was faced with a high-risk pregnancy; her obstetrician ordered her hospitalized, as she had been successfully in a previous high-risk pregnancy, which resulted in a healthy baby, yet her managed care company overruled her doctor and denied the hospitalization, even though they had a second opinion