

"because the alleged spying happened on Reagan's watch, not Clinton's watch." (unquote). Notwithstanding Dr. Prather's interpretations, Peter Lee pled guilty to willfully passing classified U.S. defense information to PRC scientists and to providing false statements to a U.S. government agency.

The Prather document also introduces the case of Wen Ho Lee, another scientist at Los Alamos. In fairness, the Prather document states that "Wen Ho Lee is not mentioned by name in the Cox Report . . ." He is not. However, aside from the caveat, Prather treats the Wen Ho Lee case as if it was the lynchpin of our investigation. It was not and furthermore the allegations against Wen Ho Lee are, at this time, still just that—allegations.

This Member does not disagree with Dr. Prather that through our open system, smart people can gather significant amounts of information other countries would consider very sensitive. Mr. Speaker, our colleagues may recall the publicity that was given to the book "Mushroom" which was written back in 1978 by John Phillips, then an undergraduate student at Princeton University. Mr. Phillips wrote about how he was able to design an atomic bomb using only the open-source information available in the university's library. Experts confirmed the design was valid. This Member is sure that the Chinese and others have similarly used our open system, as Dr. Prather states. However, the detailed design plans and other extremely sensitive information relating to the neutron bomb and other thermonuclear warheads have not been declassified and are not in Princeton's library or on the Los Alamos public website.

There are numerous other instances in the Prather document of inaccurate interpretations and distortions of the Cox Committee Report for which there is not enough time this evening to detail. However, given the apparent political objectives of the Prather document and the questionable selectivity of its analysis, it should be seen for what it really is: a partisan attack or a partisan counterattack to a Clinton Administration selective leak and spin operation against the findings of the Cox Committee, and it therefore does not warrant any further attention.

Mr. Speaker, the Congress has just begun the job of implementing many of the 38 recommendations made in the Cox Committee Report. Most can be implemented by the executive branch without legislation. Some recommendations, such as increasing the penalties for export control violations, are relatively easy to legislate. Others such as reauthorizing the Export Administration Act, are not so simple and will take time and effort. This Member strongly urges his colleagues to concentrate on implementing these recommendations and not be distracted and dissuaded from this duty by those critics like the author of the Prather Report who all too apparently has a different agenda.

LT. COL. EILEEN COLLINS, FIRST FEMALE PILOT OF A SPACE SHUTTLE

The SPEAKER pro tempore (Mr. OSE). Under a previous order of the House, the gentleman from Texas (Mr. LAMPSON) is recognized for 5 minutes.

Mr. LAMPSON. Mr. Speaker, I rise this evening to talk about a first that

is, in my opinion, long overdue. Early tomorrow morning, shortly after midnight, Lieutenant Colonel Eileen Collins, the first woman in the history of NASA, will command a 5-day Columbia space shuttle mission to launch NASA's most powerful space telescope, the Chandra X-ray Observatory.

Lieutenant Collins, who also can boast that she is the first female pilot of a space shuttle, is a good example of how far our space program has come since the first lunar landing 30 years ago tomorrow.

In these days of economic progress and budget surpluses, I urge all of my colleagues to support continued funding of the manned space program so that today's little girls can grow up knowing that they may be one of the first to walk on Mars or to conduct research in the international space station right alongside scientists from Italy, Russia, Japan, or wherever else in the world.

As a member of the House Committee on Science, and I guess a confirmed space nut, it makes me proud that I represent Johnson Space Center and its efforts to put more women into manned or, perhaps I should say, womaned space program.

Lieutenant Colonel Collins, I wish her Godspeed, a most successful mission, and a safe return for her and her crew.

HMO REFORM

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 1999, the gentleman from Iowa (Mr. GANSKE) is recognized for 60 minutes as the designee of the majority leader.

Mr. GANSKE. Mr. Speaker, here we are again. Another week has gone by, and the House of Representatives, United States of America, has done nothing to address HMO abuses in this country.

Of course we had, Mr. Speaker, a big debate on the other side of the capital last week, and I want to talk a little bit about that, that bill that passed, because I think that my colleagues on both sides of the aisle will need to educate themselves on some of the details of that bill that passed the Senate last week.

I think we may be looking at that bill in the near future. I hope at least we will be looking at some bill on the floor in the near future. After all, it was about 2 weeks ago that the Speaker of the House told me personally that it was his intent to have HMO reform legislation on the floor by the middle of July.

Well, Mr. Speaker, I am looking at my dates here, and here we are, it is past the middle of July; and furthermore, we are going to find time this week to debate a tax bill and other bills, and there is nothing in sight to even be having a committee markup in the Committee on Education and the Work Force or in the Committee on Commerce on HMO reform.

It is not exactly, Mr. Speaker, like we have not been dealing with this issue for the last 3 or 4 years in Congress. It is not exactly as if earlier this year we were overworked here on the floor when we were naming post offices. Mr. Speaker, I think it is time that we get this issue to the floor. There are people that are losing their lives and losing their limbs and their health is being injured because HMOs are making medical decisions that are not in the best interests of their clients, their patients.

Mr. Speaker, I want to talk specifically about some of the provisions that are in Senate bill S. 1344, which passed last week in the Senate, because, Mr. Speaker, I have the bill here, and I have been reading through this bill, and you know, there is an old saying here in Congress: the devil is in the details. You can have awfully good headings, Mr. Speaker, but once you start looking at the language, you can find out that it comes up rather empty.

So let me just go over a few problems and deficiencies with the bill that passed the Senate last week.

Now a couple years ago we here in the House, the other body, passed a bill for Medicare and Medicaid recipients that was signed into law by President Clinton. It said that if you were having a chest pain, severe chest pain in the middle of the night such that a prudent lay person would say, hey, that could be a heart attack, you could go to the nearest emergency room and be treated, and your health plan would be responsible for covering the cost because we know from the American Heart Association that if you delay prompt treatment, diagnosis and treatment of a heart attack, you could be dead before you get your treatment; and unfortunately many HMOs have said, as my colleagues know, you could go to that emergency room, but if they find out that instead of having a heart attack that you just had a severe case of inflammation of your esophagus, for instance, well, that proves that you did not have a heart attack and we are not going to pay for it.

The problem with that, Mr. Speaker, is that once that information gets out, people are a little bit hesitant to go to the emergency room when they have crushing chest pain because they think, oh, my goodness, what if I am not having a heart attack? Then I could be left with thousands of dollars of bills. So maybe I will just be a little extra careful, and I will just stay at home here sweaty, really sick, until I am really sure that I have a heart attack.

Mr. Speaker, we wanted to fix that. We did that in Medicare and Medicaid. We passed what is called a lay person's definition of an emergency, and we told the Medicare health plans that you have to cover those services if a patient goes to the emergency room.

Mr. Speaker, you would think that it would not be too difficult to get the language right in a patient bill of