

sequently, these restrictions will remain in place and will have a significant, adverse impact on women and families in the developing world. It is estimated that nearly 7 million couples in developing countries will have no access to safe, voluntary family planning services. The result will be millions of unwanted pregnancies and an increase in the number of abortions.

Finally, the bill contains a number of other objectionable provisions. Some of the most problematic would: (1) abruptly terminate the Agency for International Development's housing guaranty (HG) program, as well as abrogate existing HG agreements, except for South Africa, and prohibit foreign assistance to any country that fails to make timely payments or reimbursements on HG loans; (2) hinder negotiations aimed at resolving the plight of Vietnamese boat people; (3) unduly restrict the ability of the United States to participate in the United Nations Human Rights Committee; and (4) extend provisions of the Nuclear Proliferation Prevention Act that I have objected to in the past. I am also concerned that the bill, by restricting the time period during which economic assistance funds can be expended for longer-term development projects, would diminish the effectiveness of U.S. assistance programs.

In returning H.R. 1561, I recognize that the bill contains a number of important authorities for the Department of State and the United States Information Agency. In its current form, however, the bill is inconsistent with the decades-long tradition of bipartisanship in U.S. foreign policy. It unduly interferes with the constitutional prerogatives of the President and would seriously impair the conduct of U.S. foreign affairs.

For all these reasons, I am compelled to return H.R. 1561 without my approval.

WILLIAM J. CLINTON.

THE WHITE HOUSE, April 12, 1996.

The SPEAKER pro tempore, Mr. RIGGS, by unanimous consent, ordered that the veto message, together with the accompanying bill, be printed (H. Doc. 104-197) and spread upon the pages of the Journal of the House.

On motion of Mr. GILMAN, by unanimous consent, further consideration of the veto message was postponed until Tuesday, April 23, 1996.

¶39.20 SUBMISSION OF CONFERENCE REPORT—S. 735

Mr. HYDE submitted a conference report (Rept. No. 104-518) on the bill of the Senate (S. 735) to prevent and punish acts of terrorism, and for other purposes; together with a statement thereon, for printing in the Record under the rule.

¶39.21 MESSAGE FROM THE PRESIDENT—VETO OF H.R. 1833

The SPEAKER pro tempore, Mr. RIGGS, laid before the House a message from the President, which was read as follows:

*To the House of Representatives:*

I am returning herewith without any approval H.R. 1833, which would prohibit doctors from performing a certain kind of abortion. I do so because the bill does not allow women to protect themselves from serious threats to their health. By refusing to permit women, in reliance on their doctors' best medical judgment, to use their procedure when their lives are threatened or when their health is put in serious jeopardy, the Congress has fashioned a bill that is consistent neither with the Constitution nor with sound public policy.

I have always believed that the decision to have an abortion generally should be between a woman, her doctor, her conscience, and her God. I support the decision in *Roe v. Wade* protecting a woman's right to choose, and I believe that the abortions protected by that decision should be safe and rare. Consistent with that decision, I have long opposed late-term abortions except where necessary to protect the life or health of the mother. In fact, as Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health.

The procedure described in H.R. 1833 has troubled me deeply, as it has many people. I cannot support use of that procedure on an elective basis, where the abortion is being performed for non-health related reasons and there are equally safe medical procedures available.

There are, however, rare and tragic situations that can occur in a woman's pregnancy in which, in a doctor's medical judgment, the use of this procedure may be necessary to save a woman's life or to protect her against serious injury to her health. In these situations, in which a woman and her family must make an awful choice, the Constitution requires, as it should, that the ability to choose this procedure be protected.

In the past several months, I have heard from women who desperately wanted to have their babies, who were devastated to learn that their babies had fatal conditions and would not live, who wanted anything other than an abortion, but who were advised by their doctors that this procedure was their best chance to avert the risk of death or grave harm which, in some cases, would have included an inability to ever bear children again. For these women, this was not about choice—not about deciding against having a child. These babies were certain to perish before, during or shortly after birth, and the only question was how much grave damage was going to be done to the woman.

I cannot sign H.R. 1833, as passed, because it fails to protect women in such dire circumstances—because by treating doctors who perform the procedure in these tragic cases as criminals, the bill poses a danger of serious harm to women. This bill, in curtailing the ability of women and their doctors to

choose the procedure for sound medical reasons, violates the constitutional command that any law regulating abortion protect both the life and the health of the woman. The bill's overbroad criminal prohibition risks that women will suffer serious injury.

That is why I implored Congress to add an exemption for the small number of compelling cases where selection of the procedure, in the medical judgment of the attending physician, was necessary to preserve the life of the woman or avert serious adverse consequences to her health. The life exception in the current bill only covers cases where the doctor believes that the woman will die. It fails to cover cases where, absent the procedure, serious physical harm, often including losing the ability to have more children, is very likely to occur. I told Congress that I would sign H.R. 1833 if it were amended to add an exception for serious health consequences. A bill amended in this way would strike a proper balance, remedying the constitutional and human defect of H.R. 1833. If such a bill were presented to me, I would sign it now.

I understand the desire to eliminate the use of a procedure that appears inhumane. But to eliminate it without taking into consideration the rare and tragic circumstances in which its use may be necessary would be even more inhumane.

The Congress chose not to adopt the sensible and constitutionally appropriate proposal I made, instead leaving women unprotected against serious health risks. As a result of this Congressional indifference to women's health, I cannot, in good conscience and consistent with my responsibility to uphold the law, sign this legislation.

WILLIAM J. CLINTON.

THE WHITE HOUSE, April 10, 1996.

The SPEAKER pro tempore, Mr. RIGGS, by unanimous consent, ordered that the veto message, together with the accompanying bill, be printed (H. Doc. 104-198) and spread upon the pages of the Journal of the House.

On motion of Mr. CANADY, by unanimous consent, the veto message and accompanying bill were referred to the Committee on the Judiciary.

¶39.22 CONGRESSIONAL ACCOUNTABILITY WITH RESPECT TO HOUSE EMPLOYEES

Mr. THOMAS moved to suspend the rules and agree to the following resolution (H. Res. 400):

*Resolved,*

SECTION 1. APPROVAL OF REGULATIONS.

(a) IN GENERAL.—The regulations listed in subsection (b) are hereby approved, insofar as such regulations apply to employing offices and covered employees of the House of Representatives.

(b) REGULATIONS APPROVED.—The regulations referred to in subsection (a) are the following regulations issued by the Office of Compliance on January 22, 1996, as published in the Congressional Record on January 22, 1996 (Volume 142, daily edition), each beginning on the page indicated:

(1) Regulation on rights and protections under the Family and Medical Leave Act of 1993, page S200.

(2) Regulation on rights and protections under the Fair Labor Standards Act of 1938, page S238.

(3) Regulation on use of lie detector tests by the Capitol Police, page S261.

(4) Regulation on rights and protections under the Employee Polygraph Protection Act of 1988, page S263.

(5) Regulation on rights and protections under the Worker Adjustment and Retraining Notification Act, page S271.

The SPEAKER pro tempore, M. RIGGS, recognized Mr. THOMAS and Mr. FAZIO, each for 20 minutes.

After debate,

The question being put, *viva voce*,

Will the House suspend the rules and agree to said resolution?

The SPEAKER pro tempore, Mr. RIGGS, announced that two-thirds of the Members present had voted in the affirmative.

So, two-thirds of the Members present having voted in favor thereof, the rules were suspended and said resolution was agreed to.

A motion to reconsider the vote whereby the rules were suspended and said resolution was agreed to was, by unanimous consent, laid on the table.

¶39.23 EDUCATIONAL ASSISTANCE  
THROUGH OFFICE OF COMPLIANCE FOR  
HOUSE EMPLOYEES

Mr. THOMAS moved to suspend the rules and agree to the following resolution (H. Res. 401):

*Resolved,*

SECTION 1. INTERPRETATION AND ADVICE BY  
OFFICE OF COMPLIANCE.

In carrying out its duties under section 301(h) of the Congressional Accountability Act of 1995, the Office of Compliance shall, through interpretive bulletins, advisory opinions, and other methods, provide educational assistance to employing offices of the House of Representatives in the same manner as, and to no lesser extent than, such assistance is provided to other employers through the Department of Labor with respect to laws made applicable to such offices under that Act, except that any employees of the Office of Compliance who provide such assistance may not participate in deciding complaints filed under section 405 of the Act or in deciding petitions for review filed under section 406 of the Act.

SEC. 2. APPROVAL OF AMOUNT OF SETTLEMENT  
PAYMENTS.

No employing office of the House of Representatives may enter into any settlement of a compliant under the Congressional Accountability Act of 1995 which includes the payment of funds unless the office has obtained the prior approval of the chairman and the ranking minority party member of the Committee on House Oversight of the House of Representatives, acting jointly, regarding the amount of funds to be paid.

The SPEAKER pro tempore, Mr. RIGGS, recognized Mr. THOMAS and Mr. FAZIO, each for 20 minutes.

After debate,

The question being put, *viva voce*,

Will the House suspend the rules and agree to said resolution?

The SPEAKER pro tempore, Mr. RIGGS, announced that two-thirds of the Members present had voted in the affirmative.

So, two-thirds of the Members present having voted in favor thereof, the rules were suspended and said resolution was agreed to.

A motion to reconsider the vote whereby the rules were suspended and said resolution was agreed to was, by unanimous consent, laid on the table.

TUESDAY, APRIL 16 (LEGISLATIVE  
DAY OF APRIL 15), 1996

¶39.24 FINAL EMPLOYMENT REGULATIONS  
FOR HOUSE AND SENATE EMPLOYEES

Mr. THOMAS moved to suspend the rules and agree to the following concurrent resolution of the Senate (S. Con. Res. 51):

*Resolved by the Senate (the House of Representatives concurring),* That the following regulations issued by the Office of Compliance on January 22, 1996, and applicable to employing offices that are not employing offices of the House of Representatives or the Senate, and to covered employees who are not employees of the House of Representatives or the Senate, are hereby approved as follows:

PART 825—FAMILY AND MEDICAL LEAVE

825.1 Purpose and scope

825.2 [Reserved]

Subpart A—What is the Family and Medical Leave Act, and to Whom Does it Apply under the Congressional Accountability Act?

825.100 What is the Family and Medical Leave Act?

825.101 What is the purpose of the FMLA?

825.102 When are the FMLA and the CAA effective for covered employees and employing offices?

825.103 How does the FMLA, as made applicable by the CAA, affect leave in progress on, or taken before, the effective date of the CAA?

825.104 What employing offices are covered by the FMLA, as made applicable by the CAA?

825.105 [Reserved]

825.106 How is "joint employment" treated under the FMLA as made applicable by the CAA?

825.107—825.109 [Reserved]

825.110 Which employees are "eligible" to take FMLA leave under these regulations?

825.111 [Reserved]

825.112 Under what kinds of circumstances are employing offices required to grant family or medical leave?

825.113 What do "spouse," "parent," and "son or daughter" mean for purposes of an employee qualifying to take FMLA leave?

825.114 What is a "serious health condition" entitling an employee to FMLA leave?

825.115 What does it mean that "the employee is unable to perform the functions of the position of the employee"?

825.116 What does it mean that an employee is "needed to care for" a family member?

825.117 For an employee seeking intermittent FMLA leave or leave on a reduced leave schedule, what is meant by "the medical necessity for" such leave?

825.118 What is a "health care provider"?

Subpart B—What Leave Is an Employee Entitled To Take Under The Family and Medical Leave Act, as Made Applicable by the Congressional Accountability Act?

825.200 How much leave may an employee take?

825.201 If leave is taken for the birth of a child, or for placement of a child for adoption or foster care, when must the leave be concluded?

825.202 How much leave may a husband and wife take if they are employed by the same employing office?

825.203 Does FMLA leave have to be taken all at once, or can it be taken in parts?

825.204 May an employing office transfer an employee to an "alternative position" in order to accommodate intermittent leave or a reduced leave schedule?

825.205 How does one determine the amount of leave used where an employee takes leave intermittently or on a reduced leave schedule?

825.206 May an employing office deduct hourly amounts from an employee's salary, when providing unpaid leave under FMLA, as made applicable by the CAA, without affecting the employee's qualification for exemption as an executive, administrative, or professional employee, or when utilizing the fluctuating workweek method for payment of overtime, under the Fair Labor Standards Act?

825.207 Is FMLA leave paid or unpaid?

825.208 Under what circumstances may an employing office designate leave, paid or unpaid, as FMLA leave and, as a result, enable leave to be counted against the employee's total FMLA leave entitlement?

825.209 Is an employee entitled to benefits while using FMLA leave?

825.210 How may employees on FMLA leave pay their share of group health benefit premiums?

825.211 What special health benefits maintenance rules apply to multi-employer health plans?

825.212 What are the consequences of an employee's failure to make timely health plan premium payments?

825.213 May an employing office recover costs it incurred for maintaining "group health plan" or other non-health benefits coverage during FMLA leave?

825.214 What are an employee's rights on returning to work from FMLA leave?

825.215 What is an equivalent position?

825.216 Are there any limitations on an employing office's obligation to reinstate an employee?

825.217 What is a "key employee"?

825.218 What does "substantial and grievous economic injury" mean?

825.219 What are the rights of a key employee?

825.220 How are employees protected who request leave or otherwise assert FMLA rights?

Subpart C—How Do Employees Learn of Their Rights and Obligations under the FMLA, as Made Applicable by the CAA, and What Can an Employing Office Require of an Employee?

825.300 [Reserved]

825.301 What notices to employees are required of employing offices under the FMLA as made applicable by the CAA?

825.302 What notice does an employee have to give an employing office when the need for FMLA leave is foreseeable?

825.303 What are the requirements for an employee to furnish notice to an employing office where the need for FMLA leave is not foreseeable?

825.304 What recourse do employing offices have if employees fail to provide the required notice?

825.305 When must an employee provide medical certification to support FMLA leave?

825.306 How much information may be required in medical certifications of a serious health condition?

825.307 What may an employing office do if it questions the adequacy of a medical certification?

825.308 Under what circumstances may an employing office request subsequent recertifications of medical conditions?