

rate, but at this point in time Customs' hands are tied, so to speak, in that the Service cannot refund the overpayments absent legislation requiring them to do so.

Therefore, the bill I am introducing today provides for the reliquidation of relevant customs entries, which would ensure that Akzo Nobel will have paid only the duties required by law and will receive compensation only for the excess import duties mistakenly charged them.

Last year the House Ways and Means Committee agreed to incorporate the language of my bill as an amendment to the GATT implementing legislation. Unfortunately, this language, along with other similar provisions, were not retained in the conference agreement.

I want to strongly emphasize that this legislation is not a "gimme." This bill is intended to right a wrong done to my constituent: It is intended to refund excess import duties that Akzo Nobel paid due to a series of other people's errors, including errors by the U.S. Government.

I am hopeful that my bill will move swiftly through the legislative process and finally rectify an unfortunate situation. I urge my colleagues to join me in support of this important and fair initiative.

CANCER-RELATED INSURANCE REFORM—COVERAGE OF CLINICAL TRIALS

HON. RONALD D. COLEMAN

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, October 25, 1995

Mr. COLEMAN. Mr. Speaker, clinical trials provide the best available treatment for many patients with cancer, AIDS, and other life-threatening diseases, for whom standard therapies offer a limited chance for survival or enhanced quality of life. This is particularly true for children with cancer, over 60 to 70 percent are treated in clinical trials.

However, many health care insurers refuse to reimburse patient care costs which result from participating in clinical trials by claiming such therapy is "investigational" or "experimental." When this happens, individuals cannot receive what potentially may be the best treatment for their condition unless they can afford to pay significant out-of-pocket expenses often running into thousands of dollars. Unless these patient care costs are included in a standard benefits package, it is likely that the reformed system will evolve into one of two tiers of care—potentially one in which only the wealthy have access to the best anticancer treatments.

Reimbursement denials impede the ability to conduct effective and timely clinical research by increasing administrative burdens on medical institutions and reducing the number of patients eligible to participate in trials. If reimbursement is not available, fewer hospitals will be willing to participate in clinical research and the opportunity to test new and effective treatments will be lost. The data collected while providing state-of-the-art care to patients in

clinical trial advance medical science and improve our ability to provide cost-effective therapies.

COVERAGE OF UNLABELED DRUG USES

Between one-half and three-fourths of all anticancer therapy involves uses of drugs for purposes other than those described in FDA-approved labeling. Frequently insurers will refuse to reimburse so-called "unlabeled" uses of approved anticancer drugs referring to the treatment as "experimental" or "investigational".

This trend has been criticized by the FDA as depriving the patients of the most effective therapy as well as discouraging drug development. The FDA has made it clear that the drug's label is in no way intended to regulate or restrict the ability of practicing doctors to use the drug for other purposes consistent with their professional judgment. Additionally, many of the unlabeled uses are for a combination of drugs. The FDA does not routinely approve combinations of drugs.

Any health care reform measure should include coverage of unlabeled drug uses in the treatment of cancer and other life-threatening diseases which has been referenced in the medical compendia or other peer-reviewed literature.

ACCESS TO SPECIALIZED CARE

The rapid increase in the number of managed care systems across the country has led to growing concerns regarding the ability to access specialized cancer care. For example, often managed care plans do not include any pediatric oncologist in their networks. If no specialized care is available, the individual is often penalized for going outside of the network to find the proper care.

Managed care plans should contract with a sufficient number of oncologists and specialized cancer centers or allow the members to go outside of the network without penalization.

Managed care enrollees should have appropriate access to specialists providing cancer screening and diagnosis, as well as treatment. Timely screening and referral to specialized care not only saves lives, but also contributes to a more cost-effective and efficient health care system.

HONOR LEON KLINGHOFFER'S MEMORY

HON. CHARLES E. SCHUMER

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, October 25, 1995

Mr. SCHUMER. Mr. Speaker, 10 years ago this month the world changed forever for the family of Leon Klinghoffer. A decade ago a gang of coldblooded Palestinian terrorists brutally shot Mr. Klinghoffer and threw his body into the sea. Nothing can ever repair the mindless horror that act of terror visited upon the innocent. Nothing can replace the love of a husband and father.

Yet we can learn from this cowardly act of terror and others like it. Indeed we must learn from it if we are to survive as a free Nation in a world stalked by the terrorist gun and bomb.

First, we must understand that terrorism has gotten more dangerous to the United States since Leon Klinghoffer's murder. The bombing of the World Trade Center shattered the last hope that America would be spared the lash of international terrorism. America is a target. It will be hit again and again unless we act strongly.

Second, terrorism is becoming more and more lethal. The grotesque carnage of the Oklahoma City bombing may be only the beginning. Terrorists now have in their grasp technology capable of creating horror unthinkable 10 years ago. All Americans are at risk, here and abroad.

I urge my colleagues: Do not forget Leon Klinghoffer. Honor his memory by standing up now for strong action against international and domestic terrorism. Join me in seeking discharge of the terrorism bill. Do it now.

TRIBUTE TO MICHAEL THOMAS DOYLE

HON. JOSÉ E. SERRANO

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, October 25, 1995

Mr. SERRANO. Mr. Speaker, I rise to pay tribute to Michael Thomas Doyle, who was honored, on October 6 at the 1995 St. Benedict The Moor Neighborhood Center's dinner dance, for his leadership and guidance.

Mr. Doyle is one of eight individuals who were recognized for their remarkable success in helping rehabilitate individuals who had been struggling with substance abuse. The rehabilitation program is being implemented at St. Benedict The Moor Neighborhood Center.

Born in Manhattan, raised in the South Bronx and currently residing in the Bronx, Mr. Doyle's commitment to his community began early. While attending DeWitt Clinton High School in the late sixties, he volunteered his time as a tutor at an after school program sponsored by St. Peter's Lutheran Church in the South Bronx. Later, as a full time sophomore at City College of New York, he became the director of that program, working with troubled youths and youthful offenders. Mr. Doyle did not stop there; as part of his college studies, he became a student teacher at St. Peter's School and Brandeis High School.

Upon graduation from City College in 1974 with a B.A. in English, Mr. Doyle worked in the New York State Office of Drug Abuse Services. He served as a drug treatment assistant at a residential center specializing in the treatment and detoxification of adult men.

Mr. Doyle's commitment to our community is demonstrated by these and many more accomplishments within his illustrious communal services career. His appointment as the area director of The Bronx Operations in 1995 is further evidence. He is now responsible for 6,900 occupied units of In-Rem housing for the city of New York.

Mr. Speaker, I ask my colleagues to join me in recognizing Michael Thomas Doyle for his endeavors in an area that provides an invaluable service to our community.