

SEC. 3404. EXTENSION OF WAR RISK INSURANCE AUTHORITY.

Section 1214 of the Merchant Marine Act, 1936 (46 App. U.S.C. 1294) is amended by striking "June 30, 2000" and inserting "June 30, 2005".

SEC. 3405. OWNERSHIP OF THE JEREMIAH O'BRIEN.

Section 3302(l)(1)(C) of title 46, United States Code, is amended by striking "owned by the United States Maritime Administration" and inserting "owned by the National Liberty Ship Memorial, Inc.".

TITLE XXXV—PANAMA CANAL COMMISSION**SEC. 3501. SHORT TITLE.**

This title may be cited as the "Panama Canal Commission Authorization Act for Fiscal Year 2000".

SEC. 3502. AUTHORIZATION OF EXPENDITURES.

(a) IN GENERAL.—Subject to subsection (b), the Panama Canal Commission is authorized to use amounts in the Panama Canal Revolving Fund to make such expenditures within the limits of funds and borrowing authority available to it in accordance with law, and to make such contracts and commitments, as may be necessary under the Panama Canal Act of 1979 (22 U.S.C. 3601 et seq.) for the operation, maintenance, improvement, and administration of the Panama Canal for fiscal year 2000 until the termination of the Panama Canal Treaty of 1977.

(b) LIMITATIONS.—Until noon on December 31, 1999, the Panama Canal Commission may expend from funds in the Panama Canal Revolving Fund not more than \$100,000 for official reception and representation expenses, of which—

(1) not more than \$28,000 may be used for official reception and representation expenses of the Supervisory Board of the Commission;

(2) not more than \$14,000 may be used for official reception and representation expenses of the Secretary of the Commission; and

(3) not more than \$58,000 may be used for official reception and representation expenses of the Administrator of the Commission.

SEC. 3503. PURCHASE OF VEHICLES.

Notwithstanding any other provision of law, the funds available to the Panama Canal Commission shall be available for the purchase and transportation to the Republic of Panama of passenger motor vehicles built in the United States, the purchase price of which shall not exceed \$26,000 per vehicle.

SEC. 3504. OFFICE OF TRANSITION ADMINISTRATION.

(a) EXPENDITURES FROM PANAMA CANAL COMMISSION DISSOLUTION FUND.—Section 1305(c)(5) of the Panama Canal Act of 1979 (22 U.S.C. 3714a(c)(5)) is amended by inserting "(A)" after "(5)" and by adding at the end the following:

"(B) The office established by subsection (b) is authorized to expend or obligate funds from the Fund for the purposes enumerated in clauses (i) and (ii) of paragraph (2)(A) until October 1, 2004."

(b) OPERATION OF THE OFFICE OF TRANSITION ADMINISTRATION.—

(1) IN GENERAL.—The Panama Canal Act of 1979 (22 U.S.C. 3601 et seq.) shall continue to govern the Office of Transition Administration until October 1, 2004.

(2) PROCUREMENT.—For purposes of exercising authority under the procurement laws of the United States, the director of such office shall have the status of the head of an agency.

(3) OFFICES.—The Office of Transition Administration shall have offices in the Republic of Panama and in the District of Colum-

bia. Section 1110(b)(1) of the Panama Canal Act of 1973 (22 U.S.C. 3620(b)(1)) does not apply to such office in the Republic of Panama.

(4) EFFECTIVE DATE.—This subsection shall be effective on and after the termination of the Panama Canal Treaty of 1977.

(c) OFFICE OF TRANSITION ADMINISTRATION DEFINED.—In this section the term "Office of Transition Administration" means the office established under section 1305 of the Panama Canal Act of 1979 (22 U.S.C. 3714a) to close out the affairs of the Panama Canal Commission.

The motion was agreed to.

The Senate bill was ordered to be read a third time, was read the third time, and passed, and a motion to reconsider was laid upon the table.

A similar House bill (H.R. 1401) was laid on the table.

PERSONAL EXPLANATION

Mr. KENNEDY of Rhode Island. Mr. Speaker, last Thursday, June 10, I was unavoidably detained. I missed rollcall numbers 202 and 203. Had I been present, I would have voted "yes" on rollcall 202 and "no" on rollcall 203.

SPECIAL ORDERS

The SPEAKER pro tempore (Mr. PEASE). Under the Speaker's announced policy of January 6, 1999, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

WELCOME ACTION ON REMOVING SANCTIONS AGAINST INDIA, BUT BAN ON MILITARY TRANSFERS TO PAKISTAN SHOULD BE MAINTAINED

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New Jersey (Mr. PALLONE) is recognized for 5 minutes.

Mr. PALLONE. Mr. Speaker, last week in the other body, the Senate, an amendment to the fiscal year 2000 defense appropriations bill was approved that would suspend for 5 years certain sanctions against India and Pakistan. The sanctions were imposed pursuant to the Glenn amendment to the Arms Export Control Act, more than a year ago, after the two south Asian nations conducted nuclear tests.

I want to express my support for the approval of this amendment which was offered by Senator BROWNBACK of Kansas. I have introduced similar legislation to lift the sanctions, although my proposals would permanently repeal the sanctions as opposed to the 5-year suspension provided for by Senator BROWNBACK's amendment.

There is one other critical difference between the legislation I have introduced and the provision approved in the Senate last week, and that is the Senate bill includes language to repeal the Pressler amendment which bans U.S. military assistance to Pakistan. I support retaining the Pressler amendment which was adopted in the 1980s

and was invoked by President Bush in response to Pakistan's nuclear proliferation activities. Nothing has changed to justify repeal of the Pressler amendment. Thus, I will work for the Pressler amendment to be retained and will urge my House colleagues to maintain this vital provision of law.

Mr. Speaker, in the past few weeks, we were again reminded of why the Pressler amendment should remain in effect, as we have seen Pakistani support for the militants who have infiltrated territory on India's side of the line of control in Kashmir. It is clear that Pakistan is the country that is promoting instability in this current conflict as they have often done so in the past.

Pakistan's involvement in supporting the militants who continually infiltrate India's territory is an example of how Pakistan promotes regional instability and commits or supports aggression against its neighbors. India is not involved in these kinds of hostile destabilizing activities.

This is no time to be renewing military cooperation with Pakistan. Indeed, the Cox report, whose recommendations were implemented last week in this House as an amendment to the defense authorization bill, contain several references to transfers of nuclear technology and missile technology between China and Pakistan. India's nuclear program, on the other hand, is an indigenous program, and India has not been involved in sharing this technology with unstable regimes. This is an extremely, an extremely important distinction.

But, Mr. Speaker, I want to stress that our priorities should be to do what we can to promote stability and economic opportunities in south Asia. The best way we can do that is to lift the sanctions imposed under the Glenn amendment as the Senate has done.

Mr. Speaker, I would also like to mention that the Senate amendment has an important sense of the Congress provision stating that the export controls should be applied only to those Indian and Pakistani entities that make direct and material contributions to weapons of mass destruction and missile programs and only those items that can contribute to such programs. I have long been critical of the so-called "entities list" which has targeted a wide range of private and government entities in India that have no bearing on nuclear proliferation concerns, but which have been prohibited from contacts with U.S. entities. As the Senate language states, and I quote, "The broad application of export controls to nearly 300 Indian and Pakistani entities is inconsistent with specific national security interests of the United States, and that this entities list requires refinement."

I hope we can enact a similar provision here on this side of the Capitol and that the administration will respond in a meaningful way by removing entities from this list that really

do not belong there; thereby reopening important bilateral contacts that benefit both sides. To that end, I am drafting a sense of the Congress resolution which I hope to introduce this week.

Mr. Speaker, repealing the sanctions would have a positive impact on the people of India. But I also want to stress that the remaining sanctions are causing American companies to lose opportunities to do business in India, while our economic competitors in Europe and Japan gain a major foothold in this great emerging market.

Finally, Mr. Speaker, we must get beyond the unproductive approach of confrontation and work towards policies that will promote improved opportunities for cooperation between the world's two largest democracies. Last week's action in the Senate, in the other body, certainly will contribute to that process.

HEALTH CARE

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

Mr. FLETCHER. Mr. Speaker, I rise this evening to speak on a very important issue: health care. It is an issue that we will be discussing as we begin to look at the markup of some bills this week and I think it is very important as we address these bills that we do so and try to get the politics as much out of it as we possibly can.

Mr. Speaker, when we talk to people across the United States, the number one problem that we have now is the number of uninsured: 43.4 million people are uninsured at this time. That number will rise to about 60 million over the next 10 or 15 years. So I think it is imperative, Mr. Speaker, that as we pass legislation, as we look at health care legislation, that we realize that the number one problem we have is the number of uninsured. That number of uninsured is driven by costs. That is a direct correlation as increasing costs of health insurance drives up the number of uninsured.

Mr. Speaker, we could make sure that we pass some patient protection that does a whole lot of things, but if it raises the cost substantially we are going to have some of our people and some of our patients that are going to see the physician too late after the cancer has already spread. They are going to see the physician too late or go to the emergency room too late after the heart attack has already occurred when it could have been prevented. They are also going to go too late when the stroke has occurred when they could have had treatment for blood pressure. This is what is going to happen if we drive up the cost of insurance and we continue to drive up the cost of the number of the uninsured.

Not only is cost a factor, but it is morally the right thing to do. We need to make sure that we try to cover more

individuals in this country, that we provide more provisions to make sure that there is more health coverage and not less.

A number two concern I hear from people and patients is the fact that they are concerned about making sure that they get the kind of treatment that they need, that they and their physician make that decision, and it is not insurance companies or lawyers or judges that are making the decisions, and to make sure that those decisions are made by providers.

Another major concern is that they want to make sure that they can choose a physician that they trust, one that they have established a relationship with, that they have the kind of choice of choosing those physicians, and that is very important to them.

This next week, Mr. Speaker, or this week, actually, we will begin to hear the debate on this bill that talks about external review, ensuring that there is a grievance process if care is denied, that they can go to objective, independent authorities in the area that they are concerned about to make sure that physicians make those decisions; that if they need emergency room care, they can be assured that if it is a layperson's definition of emergency, they can get that care paid for when they get there; making sure that there are no gag rules to prevent physicians from talking about all of the treatment options that are necessary; making sure that they have the kind of information so that they can have the benefit of informed choice so that they can compare one insurance plan with the next, making sure that they know exactly what the grievance processes are, all of the things that the insurance company covers.

Another thing we are going to be looking at is associated health plans. The gentleman from New York (Mr. TOWNS) has introduced this, and this will allow for small companies, which about 60 percent of the small companies now are not able to afford, or very small companies are not able to provide insurance because of cost, the number one factor. Yet, this bill should hopefully reduce the cost to those companies by about 10 to 12 percent. For each 1 percent that we increase health care, we lose about 300,000 to 400,000 people off of health insurance, strictly because of the cost.

Lastly, we are going to be looking at a commission that will establish some guidelines to help again to take the politics out of health care reform. We say when we get to do things, I get disappointed in many folks that try to come and demagogue on this issue and are not truly concerned about the patients that we are talking about.

One of the things I would like to introduce and will introduce, and I hope that we are able to pass, is what is called a point of service. This is a provision where one can choose the physician that one has established a relationship with, and that trust, and I

think it is very important that we do that.

Mr. Speaker, I appreciate the opportunity to speak tonight, as we begin to debate this issue which is very important to the American people. I hope we can take the politics out and the demagoguery, making sure that we do not raise the cost of insurance, that we can have patients get the access to the care that they need, and not only that, but we allow them to choose the physician that they have trust in.

STOPPING SCHOOL VIOLENCE

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

Mrs. JOHNSON of Connecticut. Mr. Speaker, I rise to address an issue that concerns every parent in America and every child: school violence. The tragedy in Littleton, Colorado was a national wakeup call to all of us. Whether it is a form of rebellion, a means of revenge, intentional brutality and viciousness, or simply a way to make their voices heard, more and more students are resorting to acts of astounding violence and brutality, taking the lives of their fellow students and teachers.

Fortunately, some students are trying to do something about this. Last week, I had the pleasure of visiting the Clara T. O'Connell School in Bristol, Connecticut. What I found there gave me a sense of hope that our children do not want to live in a world of guns and violence.

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Students at the O'Connell school recently completed a 10-week program entitled "Bullyproofing," the purpose of which was to teach them ways of combatting bullying and avoiding violence.

As part of this program, students conducted a survey of their classmates in grades 1 through 5, asking two important questions: First, do you watch scary or violent movies; and second, do your parents know you watch scary and violent movies? The results of this survey are unsettling. What the students did with them with you truly encouraging.

Those kids wrote an open letter to their parents asking them for help: "Dear parents and guardians: Do you know what your children are going through? We would like to talk about being afraid. Do you know what your children are watching? Do you want your children to watch scary movies? Do you know how late they are staying up? Do you think your children will get ideas from scary movies? Why do you let them watch scary movies? Do you make sure they are doing the right things?"

These are the questions we and our children might want to answer.

One student says, "Don't let your children watch scary movies. Please