United States of America

Congressional Record

PROCEEDINGS AND DEBATES OF THE 106th CONGRESS, SECOND SESSION

Vol. 146 WASHINGTON, TUESDAY, APRIL 4, 2000 No. 40

House of Representatives

The House met at 9:30 a.m.

MESSAGE FROM THE SENATE

A message from the Senate by Mr. Lundregan, one of its clerks, announced that the Senate has passed without amendments bills of the House of the following titles:

H.R. 1374. An act to designate the United States Post Office building located at 680 U.S. Highway 130 in Hamilton, New Jersey, as the ''John K. Rafferty Hamilton Post Office Building''.

H.R. 3189. An act to designate the United States post office located at 14071 Peyton Drive in Chino Hills, California, as the ''Joseph Ileto Post Office''.

The message also announced that pursuant to Public Law 105–134, the Amtrak Reform and Accountability Act of 1997, the Chair announces the appointment of the following individual, appointed by the Minority Leader of the United States Senate, to the Amtrak Reform Council: James E. Coston of Illinois vice Donald R. Sweitzer of Virginia.

MORNING HOUR DEBATES

The SPEAKER. Pursuant to the order of the House of January 19, 1999, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning hour debates. The Chair will alternate recognition between the parties, with each party limited to not to exceed 30 minutes, and each Member except the majority leader, the minority leader or the minority whip limited to not to exceed 5 minutes.

The Chair recognizes the gentleman from Florida (Mr. STEARNS) for 5 minutes.

THE TOTAL TAX BURDEN

Mr. STEARNS. Mr. Speaker, I would like to bring to the attention of my colleagues the March 26 article in the Washington Post which highlights the tax cutting success of the Republicans here in Congress. The title reads, quote, ''Federal Tax Levels Falls For Most,'' end quote.

The article highlights studies conducted by a number of tax experts which have concluded that the median two-income family pays less in Federal taxes today than it did in 1981. Now, the figures may differ a little bit from the Congressional Budget Office, the Treasury Department, or the Tax Foundation depending upon the level of the two-family income.

The percentage of Federal income taxes paid has decreased anywhere from 2 percent to 3 percent. Most notably, the Tax Foundation study shows that in 1998, a two-earner family with an income of $68,605 paid 8.8 percent in Federal income taxes, roughly the same percentage as in 1955. The Tax Foundation credits much of the drop in the percentage paid in taxes to the enactment of the Taxpayer Relief Act of 1997. In particular, families received much of the relief through the per-child tax credit and the Hope and Lifetime Learning Education credits.

In the 106th Congress, we are going a step further by eliminating the marriage penalty tax, reducing the so-called death tax and allowing self-employed people to deduct 100 percent of their health insurance costs.

So, Mr. Speaker, we have made great strides here in Congress to reduce the Federal income tax burden on the American taxpayer, but I believe there is more to be done. Though the average American family is paying somewhat less in Federal income taxes, Mr. Speaker, the Tax Foundation report also shows that the total tax burden for the median two-earner family is 39 percent. For instance, there is the payroll tax which pays for Social Security, disability insurance and hospital portion of Medicare. These continue to increase. Both the employer and the employee pay these payroll taxes with the employer passing his burden to the employee through the form of lower wages. If we combine the employer/employee share of payroll taxes, the burden is 15.3 percent, which exceeds the Federal income tax.

We also have other Federal taxes such as the estate tax, the corporate income tax, various excise taxes paid by businesses which are passed on to the American taxpayers in the form of higher consumer prices or in the reduced value of assets.

Finally, of course, there are the State and local income taxes which surprisingly represent a higher amount of the tax burden compared with just the Federal income tax. The percentage of income paid in State and local taxes is 13.1%. This amount is 4.3% more than paid in federal income taxes on median two income families.

So by adding the payroll tax, all Federal taxes, State and local taxes, the median two-earner family is paying 39 percent of its income in total taxes.

Now, in 1996 the total tax burden was 41.5 percent, so we have seen some relief due to the Republicans' initiatives. Compare the total burden today to 1955, when the two-earner family paid only 18.2 percent total taxes. That is an enormous increase over 43 years, and I believe it shows that the publicity over the reduction in the Federal income tax burden, while important, masks the magnitude of the total tax burden on Americans. We need to continue to provide relief from the estate and gift tax, reduce the capital gains taxes, encourage State and local governments to provide additional tax relief for all Americans.

We are making progress, Mr. Speaker. Let us continue to work harder here and to do more for the American people.

Printed on recycled paper.

UNDERGROUND CAMPAIGN DISCLOSURE ACT

The SPEAKER pro tempore (Mr. RYAN of Wisconsin). Under the Speaker's announced policy of January 19, 1999, the gentleman from Texas (Mr. DOGGETT) is recognized during morning hour debates for 5 minutes.

Mr. DOGGETT. Mr. Speaker, there is a new, rather innocuous-sounding term that embodies much of what is wrong with our campaign finance system in America today. It is called the ''527''. It is not a bird; it is not a plane; but it is the Superman, the super weapon, of choice for American politics in this election year.

With unlimited amounts of hidden campaign money, 527 organizations are filling our airwaves with hate and our mailboxes with misinformation. 527 simply refers to section 527 of the Internal Revenue Code. It was actually enacted back in the Watergate era to respond to abuses at that time. But now it is as if we have been revisited by the ghost of Nixon and all the wrongdoing of the Committee for the Reelection of the President, better known as CREEP.

Roll Call first reported on this phenomenon last fall; and with a clever and somewhat humorous cartoon, as shown on this blowup, it referred to ''Introducing the New 527 Loophole Airbus.''

Since the exploitation of Section 527 apparently originated with Newt Gingrich's GOPAC, the tail section is marked ''GOP issue ads.'' There is reference to anonymous, unlimited political contributions and the wing sections of this pig of a plane flying over and polluting the Capitol have the initials of the committees that have been formed by TOM DELAY and J.C. WATTS. These clandestine groups plan to gorge themselves on millions of secret dollars to promote their partisan agenda with unidentified contributors.

There is not anything funny about the pollution of our political process that 527's produce, and as in any struggle neither will they be limited to one party or philosophy.

Today, together with over 100 Members of this House, I am filing the Underground Campaign Disclosure Act to require that these groups file with IRS an initial identifying statement of organization, as well as periodic contribution and expenditure reports similar to and with the same frequency as the filings all candidates already file with the Federal Election Commission.

This information must be made public, including promptly over the Internet. 527's would be subject to the same penalties that already apply for noncompliance already applicable to other tax-exempt organizations.

Unlike most Americans, who are struggling along right now preparing for April 15, these secret 527 organizations usually escape tax free, paying neither Federal income nor gift taxes. Because those American taxpayers, who are out there getting their returns filed and paid, are essentially subsidizing these 527 loophole organizations, I believe that all of us have a right to know what these clandestine groups are doing, who is giving and how their money is spent.

This legislation that I am introducing would implement the recommendations of the nonpartisan Congressional Joint Committee on Taxation, which only recently concluded that ''the special status accorded [these 527's] under present law justifies this public disclosure.''

Under my legislation, when the attack ads hit the airwaves, we can at least identify the attackers.

Though my home State of Texas has the most polluted city in America, a Texas-based Republican 527 group ran attack ads in New York against Senator MCCAIN about air pollution.

Drug manufacturers, who have insisted on discriminating against uninsured seniors by charging them over twice as much as their most favored customers on needed prescriptions, have founded a Republican-friendly group that has mislabeled itself ''Citizens for Better Medicare.'' This 527 is committed to spending over $30 million this year to block reform, and, indeed, it has already run attack ads against some of the very people who are trying to change the law to help seniors on their prescriptions.

For another clandestine political committee, brand new one, here is a blowup of its Web page. It is called ''Shape the Debate.'' How is it going to shape the debate? As its Web page says: by engaging in issue advocacy. It seeks ''contributions in unlimited amounts.'' The contributions can be ''from any source,'' including directly out of the corporate treasury, and we are told that these corporate contributions and other political contributions will never be a matter of public record. They will ''not be reported to the Federal Election Commission, nor to any State agency.''

I believe that we need a bipartisan effort to address the growing 527 plague. On his web page, George W. Bush indicates he favors ''near-instant disclosure of names of contributors on the Internet.'' I have invited all my colleagues to join in approving this bill. Let's close the growing 527 loophole.

KICKING OFF 30TH ANNIVERSARY OF EARTH DAY/EARTH MONTH

The SPEAKER pro tempore. Under the Speaker's announced policy of January 19, 1999, the gentleman from New Jersey (Mr. PALLONE) is recognized during morning hour debates for 5 minutes.

Mr. PALLONE. Mr. Speaker, today we are kicking off the celebration of the 30th anniversary of Earth Day. This year we are celebrating April as Earth Month, with April 22 as the day that is actually Earth Day. The theme of Earth Day this year is the problem of global climate change and clean energy solutions. Here at home, Mr. Speaker, in the United States, the House Democrats are working to ensure our Nation's long-term energy security while encouraging growth in our economy. We are working to reduce our reliance on fossil fuels and gas guzzling vehicles, increase energy conservation and protect our domestic and global environment.

I should add that the threats of climate change are very real. The past decade has seen some of the largest temperature increases on record. The impacts of climate change could include more extreme weather events, sea level rise, erosion, changes in rainfall patterns, increases in disease epidemics, and changes in agricultural production. And even if we act now, it will take many years to reverse the trend of increasing atmospheric concentrations of greenhouse gases.

Democrats, Mr. Speaker, in the House are trying to be practical. We are supporting measures in the administration's budget proposal that would promote energy efficient and renewable energy technologies in the United States and abroad, and that would reduce emissions that harm people's health and degrade our natural resources. We are also working with other nations to promote the development and export of U.S. clean-energy technologies and reduce emissions in developing nations.

For example, Mr. Speaker, I just returned from India with the President, which is one of the world's largest contributors to global greenhouse gas emissions. I am encouraged, however, because the U.S. and India signed a landmark agreement while the President was there to promote cooperation in the areas of clean energy and climate change in ways that will help India's economy grow in an environmentally sustainable manner. This will reduce air pollution, diminish health risks and preserve India's ecosystems and natural beauty.

As part of this agreement that was signed in India, the Confederation of Indian Industries and the U.S. Energy Association have launched a green business center to foster business development in one of India's most high-tech regions on a more sustainable path. The United States will help India use less energy and improve its environmental quality, and India will not sacrifice its economic growth. In fact, its local businesses will conserve energy and improve their bottom lines.

One of the utilities in my home State of New Jersey, Public Service Electric and Gas, is on the verge of signing a public/private partnership with the Indian government to promote clean-energy technologies and help India avoid the pollution we experienced alongside our industrial development here in the United States.

□ 0945

Mr. Speaker, I look forward to working with my colleagues in the business

and environmental communities, Members of Congress, the administration, and our colleagues in India to reduce the threat of global climate change, to develop alternative forms of energy for the industrial, transportation, building and utility sectors, and to better protect our environment for the current and future generations.

To this end, I pledge to work here at home to pass environmentally-sound legislation and budgetary items, and prevent passage of harmful antienvironmental riders. Abroad, we will work cooperatively and collectively to reduce threats to our global environment.

As we celebrate today and through the rest of this month of April the 30th anniversary of Earth Day, I would urge my colleagues on both sides of the aisle to make a similar commitment and join me in protecting our environment and energy security to the next 30 years.

Mr. DOGGETT. Mr. Speaker, will the gentleman yield?

Mr. PALLONE. I yield to the gentleman from Texas.

Mr. DOGGETT. Mr. Speaker, since the gentleman from New Jersey raised these important environmental issues, I know he has been a spokesperson, a very effective advocate for the environment for some years. At some times on that and some of the health care issues, it puts him in a position that has been adverse to the insurance lobby.

I am wondering if the gentleman from New Jersey is familiar with the 527 clandestine political organizations and if they played any role in New Jersey politics, in political pollution because of the gentleman's fight against environmental pollution.

Mr. PALLONE. Mr. Speaker, let me say I agree 100 percent with what my colleagues said about these corporations and this tax loophole. Back in November of 1998, I was hit the last 2 weeks of the campaign with a $5 million independent expenditure by a group like this that was obviously taking advantage of the fact that there was no disclosure under the campaign finance laws. We were able to determine that much of the money was from the insurance industry, particularly the HMOs, as well as we think from the prescription drug industry. But to this day I cannot verify that because the fact of the matter is there is no disclosure. I believe very strongly if we had disclosure along the lines of what the gentleman from Texas suggested, a lot of this veiled campaign money would not be spent.

Mr. DOGGETT. Mr. Speaker, they could put pretty names on their committee that appears in the mailers and on TV and attack you, however, without disclosing who gave them the dirty money.

DISCLOSURE OF 527 ORGANIZATIONS

The SPEAKER pro tempore (Mr. RYAN of Wisconsin). Under the Speaker's announced policy of January 19, 1999, the gentleman from Kansas (Mr. MOORE) is recognized during morning hour debates for 5 minutes.

Mr. MOORE. Mr. Speaker, I thank the gentleman from Texas (Mr. DOGGETT), who has taken a leadership role on the important issue of improved campaign finance disclosure. I am proud to be an original cosponsor of the proposal he discussed recently, and I hope it will quickly be approved by the Committee on Ways and Means.

Mr. Speaker, many Americans have lost faith in our political system. Routinely, half of those eligible to vote do not. People feel our political system is at best irrelevant and at worst shot full of corruption. Our country is better than that, and our people deserve better.

Last September, the House of Representatives overwhelmingly passed the Shays-Meehan bill, which would have dramatically reformed the campaign finance system. It would have rid our system of soft money and severely limited independent expenditures. But similar efforts died by a narrow majority in the Senate.

Though Shays-Meehan remains a necessary reform, a new type of political organization threatens the integrity of our campaign finance process, our electoral process. Known as 527s and named after the provision of the Tax Code under which they are created, these organizations contend they can accept unlimited funds and never disclose the names of donors, the amount of contributions, or how the money is spent.

This is possible because, while these groups qualify as political committees under the Tax Code, they are not subject to the jurisdiction of the Federal Election Commission. These organizations have caught the eye of many observers, not the least of which is the Joint Committee on Taxation.

When I was running for Congress, people told me how fed up they were with the system. Public cynicism and apathy eat away at voter participation and cause citizens to tune out of discussions of very serious issues. It has turned a whole generation of young people away from politics as a means of governance and social change.

Simply put, the current campaign laws alienate voters. I am hoping this legislation, or new legislation, I drafted will begin to restore public trust and will also take congressional seats off the 527 auction block.

This bill and my bill, called the Campaign Integrity Act of 2000, would require 527s to meet the disclosure and reporting requirements of the Federal Election Campaign Act. This proposal would rewrite the Internal Revenue Code section 527 definition of political organizations to require public disclosure of the names of contributors and the sums contributed. Violations would result in the loss of the organization's tax exempt status.

This bill will not cure all of the ills of the campaign finance system but instead represents two very important and necessary goals. First, this act closes the 527 loophole and reestablishes in our country the principle that campaigns will be subject to scrutiny. Secondly, this bill requires and represents a reasonable political compromise that, in the absence of more comprehensive reform, gives Congress the opportunity to make upcoming elections more open, fair, and honest.

To those who cling to free speech, an argument against reform, this legislation would not impose limitations on contributions to 527s and, therefore, will not interfere in anybody's first amendment right. It would simply require full disclosure, forcing those who wish to exercise this type of expression to show their face just like everybody else has to do.

My colleagues and I are urging other Members and pro-reform organizations to join in this effort. It is high time that Congress shine light on 527s and tell special interest groups that the American people are our special interest.

Mr. DOGGETT. Mr. Speaker, will the gentleman yield?

Mr. MOORE. Certainly, I yield to the gentleman from Texas.

Mr. DOGGETT. Mr. Speaker, I want to thank the gentleman for his leadership. I know he has already done two articles on this. He has developed a legislative solution on this.

You mentioned our efforts during the last session to try to approve the McCain-Feingold bill, the Shays-Meehan bill, as we call it here in the House, major campaign reform.

Does the gentleman recall that there were those on the Republican side who opposed that legislation, saying that all we needed was to have instant disclosure, complete disclosure of campaign contributions and expenditures?

Mr. MOORE. I do recall that, Mr. Speaker.

Mr. DOGGETT. Mr. Speaker, are we not basically taking them up on their word, but saying let us apply it across the board, and let us include these new secret organizations, covert operations that are occurring as 527s? All we are asking is complete and instant disclosure in our legislative approach.

Mr. MOORE. Absolutely. Mr. Speaker, I just do not see how any reasonable person can say that full disclosure of the names of persons who contribute and the amounts contributed can in any way interfere with anybody's right to free speech or the other objectives they have. I think this is something that people in this country deserve.

Mr. DOGGETT. Mr. Speaker, I pulled up George W. Bush's campaign Web page; and he claims that he favors, ''near instant disclosure of the names of contributors on the Internet.'' If our Republican colleagues would join with

us, could we not do this right now on these 527 organizations and require that instant disclosure over the Internet in both the spirit of JOHN MCCAIN and the campaign Web site of George W. Bush?

Mr. MOORE. Yes, Mr. Speaker.

CONGRATULATIONS TO MICHIGAN STATE UNIVERSITY BASKETBALL TEAM, KEEP SOCIAL SECURITY SOLVENT, AND ABOLISH CENSUS LONG FORM

The SPEAKER pro tempore. Under the Speaker's announced policy of January 19, 1999, the gentleman from Michigan (Mr. SMITH) is recognized during morning hour debates for 5 minutes.

Mr. SMITH of Michigan. Mr. Speaker, this is a little bit on the lighter side but also on the heavier side, sort of like sweet and sour. But I want to congratulate my alma mater, Michigan State University, for the excellent game that they played last night for their championship now in the college athletic contests of who does the great job in basketball. So I say congratulations to Michigan State.

I see some Michigan people up in the balcony. I know we all have pride when we support a team that, well, has honesty in their heart and knowledge and conviction and strength. It does take determination and conviction and strength.

Mr. Speaker, I want my colleagues to know that I tried to make some wagers last night on the Michigan State-Florida game. First, I went to the gentleman from Florida (Mr. SHAW), and I said to him, if Michigan State wins, then he would have to pass my Social Security bill. He did not think that was the right kind of wager.

So then I went to the gentleman from Florida (Mr. MILLER) and said, well, how about a wager; and if Michigan State wins, he has to do away with the long form on the census. The gentleman from Florida did not think that was right.

But, Mr. Speaker, I want to just comment on those two issues.

The long form on the census, which, on the average, one out of six Americans gets, is very intrusive. It approaches a kind of bureaucratic curiosity, wondering all about people, from whether they have mental problems, whether they have a tough time remembering, whether they have difficult times going out of doors and going to a doctor.

We need to have an accurate count on our census, but we do not need to ask every American household in the United States all of these intrusive questions. Those kinds of questions can be accomplished by polling, by sampling, and that is the way we should do it from now on.

That is why the Census Bureau, that is why the gentleman from Florida (Mr. MILLER) and his committee are looking at options to make sure we no longer have the long form in future years.

Look, we have got a government that is intrusive. Our technology today allows us to peek into everybody's lives. So our technology can listen in on one's phone calls, even if they are cell phones. We have a capacity of knowing what doctors one uses, when one goes to those doctors, and what one goes to those doctors for.

I think with the high-tech that we have today, we should be especially conscious of this kind of government intrusion. I think why American people, Mr. Speaker, are more suspicious today is because they have lost some of their confidence and trust in government.

Let me just finish off with a comment on my wager to the gentleman from Florida (Mr. SHAW), who is on the Committee on Ways and Means and chairs the subcommittee that oversees Social Security. Last week, we had sort of a placebo set out by the Social Security Administration that said, look, it is not going to be 2013 when Social Security brings in less revenues than is needed to pay benefits, but it is actually going to be 2015.

I just would like to say with all the force that I have, Mr. Speaker, that it is so important that we not put this off. If there is one disappointment in this administration, it is the President's unwillingness to come forth with a proposal that can keep Social Security solvent for the next 75 years.

I see a lot of young people in the audience. I see some seniors. Social Security and the willingness of Congress to make sure it survives is important to all groups. I would hope, Mr. Speaker, that this House would have the courage to move ahead with Social Security reform next year.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12 of rule I, the Chair declares the House in recess until 11 a.m.

Accordingly (at 9 o'clock and 53 minutes a.m.), the House stood in recess until 11 a.m.

□ 1100

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. LATOURETTE) at 11 a.m.

PRAYER

The Reverend Father Richard Doerr, Diocese of Lafayette-In-Indiana, Carmel, Indiana, offered the following prayer:

Loving God, You are author of life and origin of all created things.

We ask that Your grace and blessing be bestowed upon the men and women who have been called to serve our country in the House of Representatives.

Help them to represent their constituents wisely with an eye toward safeguarding the deeper truths of human life that come only from You.

Bless the regions that they represent. Bless our country. Help our legislators to enact laws that will uphold the values of peace and justice in our land and throughout the world. We ask this in God's name. Amen.

THE JOURNAL

The SPEAKER pro tempore. The Chair has examined the Journal of the last day's proceedings and announces to the House his approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER pro tempore. Will the gentleman from Nevada (Mr. GIBBONS) come forward and lead the House in the Pledge of Allegiance.

Mr. GIBBONS led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

PRIVATE CALENDAR

The SPEAKER pro tempore. This is Private Calendar day. The Clerk will call the first individual bill on the Private Calendar.

BELINDA MCGREGOR

The Clerk called the Senate bill (S. 452) for the relief of Belinda McGregor.

Mr. SENSENBRENNER. Mr. Speaker, I ask unanimous consent that the bill be passed over without prejudice.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Wisconsin?

There was no objection.

NANCY B. WILSON

The Clerk called the bill (H.R. 758) for the relief of Nancy B. Wilson.

There being no objection, the Clerk read the bill as follows:

H.R. 758

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. ENTITLEMENT TO WIDOW'S INSURANCE BENEFITS.

(a) IN GENERAL.—For purposes of determining the eligibility of Nancy B. Wilson, the wife of Alphonse M. Wilson (social security number 000–00–0000), to widow's insurance benefits under section 202(e) of the Social Security Act (42 U.S.C. 402(e)), Nancy B. Wilson shall be deemed to have been married to Alphonse M. Wilson for a period of not less than 9 months immediately prior to the day on which Alphonse M. Wilson died.

(b) EFFECTIVE DATE.—Subsection (a) takes effect on March 21, 1991.

(c) PAYMENT.—Any benefits to which Nancy B. Wilson is entitled for the period prior to the date of the enactment of this Act shall be paid to her in a lump sum.

The bill was ordered to be engrossed and read a third time, was read the

third time, and passed, and a motion to reconsider was laid on the table.

VESSEL MIST COVE

The Clerk called the bill (H.R. 3903) to deem the vessel M/V MIST COVE to be less than 100 gross tons, as measured under chapter 145 of title 46, United States Code.

There being no objection, the Clerk read the bill as follows:

H.R. 3903

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. VESSEL MIST COVE.

(a) CONSTRUCTION TONNAGE OF M/V MIST COVE.—The M/V MIST COVE (United States official number 1085817) is deemed to be less than 100 gross tons, as measured under chapter 145 of title 46, United States Code, for purposes of applying the optional regulatory measurement under section 14305 of that title.

(b) LIMITATION ON APPLICATION.—Subsection (a) shall not apply on any date on which the length of the vessel exceeds 157 feet.

AMENDMENT IN THE NATURE OF A SUBSTITUTE OFFERED BY MR. SENSENBRENNER

Mr. SENSENBRENNER. Mr. Speaker, I offer an amendment in the nature of a substitute.

The Clerk read as follows:

Amendment in the nature of a substitute offered by Mr. SENSENBRENNER:

Strike all after the enacting clause and insert the following:

SECTION 1. VESSEL M/V MIST COVE.

(a) The Secretary of Transportation shall prescribe a tonnage measurement as a small passenger vessel as defined in section 2101 of title 46, United States Code, for the M/V MIST COVE (United States official number 1085817) for purposes of applying the optional regulatory measurement under section 14305 of that title.

(b) Subsection (a) shall not apply on any date on which the length of the vessel exceeds 157 feet.

Mr. SENSENBRENNER (during the reading). Mr. Speaker, I ask unanimous consent that the amendment in the nature of a substitute be considered as read and printed in the RECORD.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Wisconsin?

There was no objection.

The SPEAKER pro tempore. The question is on the amendment in the nature of a substitute offered by the gentleman from Wisconsin (Mr. SENSENBRENNER).

The amendment in the nature of a substitute was agreed to.

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

The SPEAKER pro tempore. This concludes the call of the Private Calendar.

PARTIAL-BIRTH ABORTION

(Mr. PITTS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PITTS. Mr. Speaker, I rise today to urge my colleagues to support the ban on the procedure called the partial-birth abortion. That name is really a misnomer. It is really a preterm delivery that results in infanticide. I urge my colleagues to be honest and fair, to examine the evidence about what happens during this procedure.

Dr. C. Everett Koop says this procedure is, quote, never medically necessary to protect a mother's life or her future fertility. On the contrary, he says, this procedure can pose a significant threat to both mother and child.

The American College of Obstetricians and Gynecologists says, ''There are no circumstances under which this procedure would be the only option to save the life of the mother and preserve the health of the woman.'' Any serious person has to admit that this procedure is unnecessary, it is barbaric and should be banned. Unfortunately, some people are extreme enough in their views that they are willing to defend this procedure under any circumstances.

Tomorrow, Members of good faith and common sense from both sides will stand together and vote to ban this horrific procedure. I urge all Members to support us.

INTERNATIONAL ABDUCTION NO. 12—OMAR AND GAMELA ELKASABY

(Mr. LAMPSON asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. LAMPSON. Mr. Speaker, I rise for the 12th time to talk about one of the 10,000 American children who have been abducted to foreign countries.

Omar and Gamela Elkasaby were abducted from Brooklyn, New York in August of 1998 by their noncustodial father, Gamal Elkasaby. The children's mother, Marta Sierra Elkasaby, obtained full custody of the children after their divorce. On the day of the abduction, Gamal told Marta that he was going to take the children to the movies but instead fled with them to Alexandria, Egypt. He contacted Marta by phone from Egypt right after the abduction took place and tried to persuade her to come to Egypt. When she refused, he made it clear that she would never see the children again.

Marta has spoken with Omar and Gamela only once, over the phone, but their father refuses to return them. Gamal has a history of violence toward his children and was only allowed to resume visitation after counseling.

Mr. Speaker, Omar, Gamela and their mother need our help. I have had the opportunity to sit down with parents like Marta. I have looked into their eyes; I have listened to their stories. The pain they experience on a daily basis is heart wrenching. I urge my colleagues to help families like the Elkasabys and bring our children home.

ENFORCE OUR LAWS, MR. PRESIDENT

(Mr. GIBBONS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GIBBONS. Mr. Speaker, I rise today to call upon the Clinton administration to fulfill its duty to enforce the laws of the United States. Recently, I like many of my colleagues learned of some disturbing statistics about the wholesale failure of the current administration to prosecute Federal gun offenses. Mr. Speaker, the administration's lack of enforcement of our gun laws in America is simply appalling and unacceptable.

The number of referrals by the Federal Government for prosecution in gun crimes has declined by 44 percent under the Clinton administration. Looking back, in 1992, there were over 7,000 prosecutions under President Bush's project trigger lock program. President Clinton abandoned this get tough antigun crime enforcement program and as a result prosecutions fell almost 50 percent to a mere 3,800 in 1998.

Mr. Speaker, for the welfare and safety of every American, I call on our President to fulfill his commitment and constitutional duty. After all, if the administration is not going to enforce existing laws and prosecute criminals, what good is it to pass more laws?

THE BREAST AND CERVICAL CANCER TREATMENT ACT

(Ms. ESHOO asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. ESHOO. Mr. Speaker, I rise in support of H.R. 1070, the Breast and Cervical Cancer Treatment Act, legislation which will give the States the ability to provide a reliable method of treatment for uninsured and underinsured women battling breast or cervical cancer.

I urge the Speaker to bring this critically important legislation to the House floor for a vote by Mother's Day, May 14. There is absolutely no excuse to miss this opportunity which will save women's lives.

The bill has 289 bipartisan cosponsors, well over the required number to pass a bill on the Suspension Calendar.

It was reported out of the Committee on Commerce and the Health and Environment Subcommittee unanimously. The President has included the initiative in his 2001 budget.

Presidential candidate George W. Bush has endorsed the bill. The National Breast Cancer Coalition and over 500 health care and women's organizations have said that passage of this bill is one of their top priorities for this Congress.

The Committee on the Budget recently expressed its commitment to the bill.

I implore my colleagues, Mr. Speaker, bring H.R. 1070 to the House floor before Mother's Day, in time to give our mothers, our sisters, our daughters the most important gift of all, which is life.

COMMENDING UNIVERSITY OF FLORIDA'S BASKETBALL TEAM

(Mr. STEARNS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. STEARNS. Mr. Speaker, although it was Michigan State who celebrated last night, I am very proud of the team from the University of Florida for making it to the NCAA title game. This season, Florida put together an impressive record of 29 and 8, matching the 1994 team for the most victories in the school's history.

I commend coach Billy Donovan for his outstanding work and the players for their perseverance in bringing ''Billy ball'' to the court. The Gators gave little breathing room and pressed the other team after nearly every basket. This unique style of play demands endurance from the opponent, which the Spartans showed last night.

The University of Florida can take great pride in the talent they fielded with Mike Miller, Brett Nelson, Donnell Harvey, Teddy Dupay, and the other players. I know that the University's President, Dr. Charles Young; the athletic director, Mr. Jeremy Foley; the students; the faculty and the fans of the Gators are proud of the team's accomplishments. I know that I am.

RATIO OF ACCIDENTAL MEDICAL DEATHS TO ACCIDENTAL GUN DEATHS

(Mr. TRAFICANT asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. TRAFICANT. Mr. Speaker, something does not add up, the number of accidental deaths involving guns average 1,500 per year; and the number of accidental deaths caused by doctors, surgeons, and hospitals average 120,000 a year, 120,000 per year. That means the ratio of accidental medical-related deaths to accidental gun deaths is 80 to 1, 80 times more possible of being killed accidentally by a doctor than a gun.

Tell me, Mr. Speaker, should we mandate a 5-day waiting period on vasectomies?

Beam me up. Congress does not need more gun laws; America must enforce the laws that we have.

I yield back all the American lives saved by an honest law-abiding American who just happened to have a gun.

ORDER OF THE PURPLE HEART FOR MILITARY MERIT TO ROBERT EUGENE ELLEDGE

(Mr. GARY MILLER of California asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GARY MILLER of California. Mr. Speaker, I rise to honor an American hero. Last week, I had the opportunity to present Robert Eugene Elledge of Pomona, California with the Order of the Purple Heart for Military Merit service.

On May 10, 1951, as Mr. Elledge and his division began to crawl the hill they were ordered to take, his helmet was cracked into many pieces by enemy fire. After he was placed in an ambulance, he learned that his company had been annihilated, only four survived the Second Chinese Communist Forces Spring Offensive, also known as Battle of Soyang or, as Mr. Elledge recalls it, the May Massacre.

Mr. Speaker, 49 years ago, Mr. Elledge felt that his experience warranted a purple heart, and he began to inquire about when he might receive this honorable award. It seems that the paperwork requesting the medal was lost. Last Friday, 49 years after surviving the May Massacre, tears came to Mr. Elledge's eyes when he received the medal that he waited for so patiently.

The Korean War is often referred to as our ''forgotten war.'' While his paperwork may have been forgotten, the sacrifices that Mr. Elledge made for this country in Korea will always be remembered.

COMMENDING MICHIGAN STATE UNIVERSITY

(Ms. KILPATRICK asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. KILPATRICK. Mr. Speaker, I rise today to commend the NCAA, its universities, presidents, and teams for the outstanding season that we witnessed first of the 21st century.

Last night, our Michigan State Spartans won an overwhelming victory; and we applaud them. President McPherson, Coach Izzo, the Flintstones, as well as the entire Michigan State teams, its coaches and university and students, we are proud of you. Go Green. Keep the fight. Let us move on for a positive 21st century.

We are with you, God bless you.

FATHER RICHARD DOERR

(Mr. McINTOSH asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. McINTOSH. Mr. Speaker, it is an honor to introduce Father Richard Doerr as our guest chaplain today.

After speaking with some of the members of his congregation in Carmel, Indiana, I can tell my colleagues that Father Doerr enjoys the kind of universal adoration that folks like us in Washington can really only dream about.

He is cherished by his congregation because of his memorable sermons, his positive nature, and his devotion to young adults in Indianapolis. Father Doerr is a priest of the Diocese of Lafayette-in-Indiana. He is an associate pastor of our Lady of Mt. Carmel Catholic Church and St. Maria Goretti Mission in Carmel, Indiana, a beautiful suburb north of Indianapolis.

He was educated in Indiana. He got his bachelor's degree from Purdue, where, I am told, he was a star in the Glee Club. And he went on to earn his masters degrees in theology and arts at St. Meinrad Seminary in Southern Indiana. He has ministered in St. Louis, in Fishers and was a chaplain at the St. Francis Newman Center on the campus of Ball State in my hometown of Muncie.

Father Doerr has done wonderful work with young adults throughout his career. Together with his brother, Brian, Father Doerr founded the Frassatti Society in Indianapolis, a group of more than 200 young Catholic adults.

The Society's members help each other keep faith in their lives during the transitions from college life, joining the work force and starting a family.

□ 1115

At those critical junctures, Father Doerr is there to make sure they remember to keep their faith in everything they do, say, and think.

One of my staffers, a young woman from Carmel, attends Father Doerr's mass and described him as captivating in the pulpit. She said that he tells real-life stories and makes it easy for her to apply the lessons of the scripture in her life. Most of all, she said he is funny.

So it is with great pride that we Hoosiers present Father Richard Doerr as today's chaplain. Thank you, Father Doerr, for blessing us in this House today.

REINVENTING COMMON SENSE

(Mr. KINGSTON asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. KINGSTON. Mr. Speaker, under the Gore administration, there has been an all-out effort to reinvent common sense. Under that, the Vice President decided to take on purchasing over at the Pentagon and make the Pentagon act like the private sector.

Well, here is what we got after Mr. Gore was finished with it. They paid $30 for a 15-cent O-ring gasket; $714 for an electric bell that was worth only $47; $350 for a ball bearing that normally costs $48; and $1,236 for fan assemblies worth $675.

But then again, here is a guy who takes $300,000 from Buddhist monks, sworn on a vow of poverty, and does not recognize that as a fund-raiser. Perhaps that is why he could not recognize a good deal over at the Pentagon.

ORGAN PROCUREMENT AND TRANSPLANTATION NETWORK AMENDMENTS OF 1999

Mr. LINDER. Mr. Speaker, by direction of the Committee on Rules, I call up House Resolution 454 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 454

Resolved, That at any time after the adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 2418) to amend the Public Health Service Act to revise and extend programs relating to organ procurement and transplantation. The first reading of the bill shall be dispensed with. General debate shall be confined to the bill and shall not exceed one hour equally divided and controlled by the chairman and ranking minority member of the Committee on Commerce. After general debate the bill shall be considered for amendment under the five-minute rule. It shall be in order to consider as an original bill for the purpose of amendment under the five-minute rule the amendment in the nature of a substitute recommended by the Committee on Commerce now printed in the bill. The committee amendment in the nature of a substitute shall be considered as read. No amendment to the committee amendment in the nature of a substitute shall be in order except those printed in the report of the Committee on Rules accompanying this resolution. Each amendment may be offered only in the order printed in the report, may be offered only by a Member designated in the report, shall be considered as read, shall be debatable for the time specified in the report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against the amendments printed in the report are waived. The Chairman of the Committee of the Whole may: (1) postpone until a time during further consideration in the Committee of the Whole a request for a recorded vote on any amendment; and (2) reduce to five minutes the minimum time for electronic voting on any postponed question that follows another electronic vote without intervening business, provided that the minimum time for electronic voting on the first in any series of questions shall be 15 minutes. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. Any Member may demand a separate vote in the House on any amendment adopted in the Committee of the Whole to the bill or to the committee amendment in the nature of a substitute. The previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions.

The SPEAKER pro tempore (Mr. LATOURETTE). The gentleman from Georgia (Mr. LINDER) is recognized for 1 hour.

Mr. LINDER. Mr. Speaker, for the purpose of debate only, I yield the customary 30 minutes to the gentleman from Massachusetts (Mr. MOAKLEY), pending which I yield myself such time as I may consume. During consideration of this resolution, all time yielded is for the purpose of debate only.

Mr. Speaker, this is a fair, structured rule providing for consideration of H.R. 2418, the Organ Procurement and Transplantation Network Amendments. The rule provides for 1 hour of general debate, equally divided and controlled by the chairman and ranking minority member of the Committee on Commerce. It shall be in order to consider as an original bill for purposes of amendment the amendment in the nature of a substitute recommended by the Committee on Commerce.

No amendment to the committee amendment in the nature of a substitute shall be in order, except for those the Committee on Rules has permitted and printed in the report accompanying this resolution. Each amendment one, may be offered only in the order printed in the report; two, may be offered only by a Member designated in the report; three, shall be considered as read; four, shall be debatable for a time specified in the report; five, shall not be subject to amendment; and six, shall not be subject to a demand for division of the question. The rule waives all points of order against these amendments.

Specifically, the Committee on Rules has provided for the consideration of five amendments dealing with a number of important issues. Finally, the rule provides for one motion to recommit with or without instructions, as is the right of the minority Members of the House.

By way of background, HHS Secretary Donna Shalala announced on March 26, 1998, that the Department would publish in the Federal Register a final regulation that would completely overhaul the organ donor system. The current system, run by the private sector nonprofit Organ Procurement and Transplantation Network, is locally based, allowing patients and their families to search in their communities for a potential donor that could help them. Under the new rules, the system would be nationalized by the Federal Government.

This HHS rule is opposed by the vast majority of the transplant community and a congressional moratorium has been in place for almost 2 years. Clearly, Congress in the past has intended that the Organ Procurement and Transplantation Network, comprised of the medical and scientific community, have the power to allocate organs and decide the guidelines for the contribution of organs.

Today, H.R. 2418, the Organ Procurement and Transplantation Network Amendments, would clearly reinforce our intent that the responsibility for developing medical criteria and standards for organ procurement and transplantation rest with the network. This legislation also ensures that this distribution of organs is based so equity and ethics without political control or influence and strengthens patient donor data confidentiality safeguards.

One of the most valuable tools we have to raise public awareness about the need for organ donors is through the work of volunteers, dedicated to saving the lives of a particular patient waiting for an organ. If this system is nationalized, the work of these volunteers, while valuable, could not be attributed directly to a particular transplant, but to the next person on a list somewhere in the United States.

The immediate effect that an organ donor could have on his or her community is a primary motivating factor when making the decision to become a donor. These rules go too far in moving organ donation away from the local communities and closer to national bureaucracies. We are opposed to letting political appointees make the decisions to allocate organs across the Nation, and we should not allow a Federal department the ability to impact the medical decisions that affect thousands of patients waiting for a second chance at life.

In addition to ending the politicization of this medical process, we also want to encourage Americans to become organ donors. Because the demand for organs for transplantation far exceeds the supply, we should focus our efforts toward encouraging more individuals to become donors and not spreading the already limited supply of organs even thinner under the HHS nationalization plan.

Unfortunately, reports also indicate that HHS has not effectively done anything to increase organ donations. As a result, H.R. 2418 creates a new $5 million grant program to pay for the travel expenses incurred by living organ donors, authorizes $2 million in additional grant funds to carry out studies, and demonstration projects to increase organ donations, and requires the network to work actively to increase the supply of donated organs.

Mr. Speaker, I want to commend the chairman of the Committee on Commerce, the gentleman from Virginia (Mr. BLILEY); and the gentleman from Florida (Mr. BILIRAKIS) for their hard work in crafting this legislation. The product they have crafted would maintain responsible organ transplant policy decision-making within the current network, and this bill should be widely supported by the whole House today.

Mr. Speaker, this rule was unanimously reported by the Committee on Rules yesterday, and I urge my colleagues to support the rule so that we may proceed with debate and consideration of the underlying legislation.

Mr. Speaker, I reserve the balance of my time.

Mr. MOAKLEY. Mr. Speaker, I thank the gentleman from Georgia (Mr. LINDER), my colleague and dear friend, for yielding me the customary half hour. I yield myself as much time as I may consume.

Mr. Speaker, the sad truth is there are not enough body organs to go around. If there were enough organs, the question of whether to give them to the sickest person, or the closest person, really would be moot. But

today, this very minute, there are 67,000 people waiting for an organ transplant in the United States alone. Unfortunately, Mr. Speaker, many of them will not receive that organ.

Five years ago, a doctor walked into my hospital room and told me, unless I got a new liver, the chances of me living more than 2 months was a long shot. But I was one of the lucky ones. My life was saved by a liver transplant; and not a day goes by that I do not thank God and medical science for the miracle that happened to me.

So if I thought this bill would expand that miracle to the other 67,000 people waiting for a transplant, I would do all I could to support it. But this bill will not expand the miracle. This bill is being introduced to sabotage the recent HHS regulations, regulations that are supported by the Institute of Medicine, which says that medical professionals should establish organ allocation policies. Those regulations require organs to be given to the sickest patients who might benefit rather than be kept within artificial limits.

In direct opposition to those regulations, this bill will bestow sole authority over life and death decisions upon a private contractor with not one scintilla of regulation. This private contractor will have authority over billions upon billions of dollars of Medicaid and Medicare money. Meanwhile, the public will lose its right to be heard on that subject.

Mr. Speaker, this bill takes the public voice out of public health. It sets back years of progress on organ transplantation policy, and it should be opposed. The rule, however, Mr. Speaker, is fair, and should be supported. The gentleman from California (Mr. DREIER), the chairman of the Committee on Rules and my dear friend, was kind enough to make in order several minority amendments, including the LaHood-Rush-Peterson-Moakley amendment; and for that I thank him.

Five years ago, Mr. Speaker, a family I probably will never meet saved my life. Their son died somewhere in Virginia, and they gave his liver to this Congressman from south Boston. I will never be able to thank them for their kindnesses, but I will be able to keep fighting until every one of those 67,000 other people who need a transplant get one, regardless of where they live.

So I urge my colleagues to support this rule, support the LaHood-Rush-Peterson-Moakley amendment.

Mr. Speaker, I reserve the balance of my time.

Mr. LINDER. Mr. Speaker, I yield such time as he may consume to the gentleman from Illinois (Mr. LAHOOD), a sponsor of a major amendment.

Mr. LAHOOD. Mr. Speaker, I thank the gentleman from Georgia (Mr. LINDER) for yielding me this time.

Let me just begin by saying that this is a good rule, and I hope all Members will support it. It is a good rule because it is an open rule and it allows for plenty of debate on this very, very important legislation. As I said in the Committee on Rules last night, there is probably only 1 person in this House who is an expert on transplants, and the importance of a good organ donor program, and that is the gentleman from Massachusetts (Mr. MOAKLEY), the ranking member of the Committee on Rules, who has been through it. He knows the anxiety and frustration, and he knows what it is like to go through a transplant procedure as one who has received a transplanted liver and is, thank God, a survivor and still a good, strong, sturdy, healthy Member of this House of Representatives.

Mr. Speaker, I do support the rule; but I rise in opposition to H.R. 2418, the Organ Procurement and Transplantation Network Amendments of 1999, and in support of an amendment offered by myself and the gentleman from Massachusetts (Mr. MOAKLEY) and the gentleman from Illinois (Mr. RUSH) and the gentleman from Pennsylvania (Mr. PETERSON).

Mr. Speaker, H.R. 2418 is not about saving lives; what it is about is overlooking patients in the greatest need simply because of a geographic convenience. Through Medicare, Medicaid, CHAMPUS and other programs, the Federal Government pays for the vast majority of organ transplants. H.R. 2418 strips the Government of any rulemaking authority over transplant policy, affecting thousands of beneficiaries covered under Federal Government programs and delegates it to one agency, one private contractor.

□ 1130

This is wrong. This bill contradicts the recommendations of the Institute of Medicine that are detailed in a report mandated by Congress under the 1998 Omnibus Budget Act.

The IOM recommended additional government oversight of the organ procurement and transplant network and the establishment of an independent scientific advisory committee to work with the government to ensure the efficiency and equitable operation of the OPTN.

H.R. 2418 strips the government of its oversight authority and eliminates all public accountability of the Network. This is wrong.

For these reasons, I urge Members to support the rule but oppose the bill, and support our amendment, the amendment offered by the gentleman from Massachusetts (Mr. MOAKLEY), myself, the gentleman from Illinois (Mr. RUSH), and the gentleman from Pennsylvania (Mr. PETERSON).

It would apply several recommendations made by the Institute of Medicine to the organ allocation process. It ensures that organ allocation policies are based on sound medical principles and valid scientific data. The policies would be designed to share organs over as broad a geographic area as possible, providing some Federal oversight.

Again, Mr. Speaker, this is a good rule but a bad bill, and I urge my colleagues to support the rule.

Let me just for a minute say something. We do not want to go back to the old ways of doing things. There is a good system in place. This is a bad bill because it goes back to an old system that lets one agency play God about where organs will go. I do not think anybody in America wants that.

I urge all my colleagues and all the staff that are watching this being broadcast around the House system to pay close attention and to call back to their districts, and to talk to hospitals in their districts that do transplants. I doubt if they want one agency, a private agency, in America deciding where organ transplants will take place, this is wrong, with no oversight. Our amendment corrects that.

This is an important amendment, an important consideration for the Congress. I hope people will pay attention to it.

Again, I urge the adoption of the rule, the opposition to the bill, and the adoption of our amendment to bring common sense to a very important medical system in our country that will be eviscerated by this legislation.

Mr. MOAKLEY. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I thank the gentleman from Illinois (Mr. LAHOOD) for his very, very able presentation. I think he said it all.

Mr. Speaker, I yield 4 minutes to the gentleman from Pennsylvania (Mr. PETERSON), a cosponsor and a gentleman who has been fighting on this for many years.

Mr. PETERSON of Pennsylvania. Mr. Speaker, I rise to support the rule, speak against the bill, and support the amendment.

Mr. Speaker, I think it is important that whenever we are dealing with health care, we follow the lead of health care providers who have studied the issue.

This Congress asked the Institute of Medicine to do that. They did it very seriously and very coherently. They came forth with recommendations that allocation policies should be based on sound medical principles and valid scientific data.

The bill before us veers from that. Whenever we veer from that, we are going to cost lives. I do not think any of us want to be in that position.

Recently, Forbes Magazine talked about this system, UNOS, the united network supplying organs. Most organs are shared only within 62 regional territories, and in their opinion, last year 4,855 Americans died while waiting for transplants. This does not even count people pulled off the lists because they became too sick.

Each of us hopes we never need an organ, but we do not know when we will. We hope that we do not live in the wrong county or in the wrong State that would prevent us from receiving the organ that would save our life. That organ might go to someone who really had serious health problems, but could live a year or two longer.

Mr. Speaker, I hope we devise a system in this long debate today that will make sure that the scarce organs that are available go to those who need them to sustain life and can maintain life after the surgery. Anything less than that, we will have failed the American public.

Mr. Speaker, the other issue I want to raise is that the United Network for Organ Sharing system will under this legislation be totally free of any Federal regulation.

Now, I am not normally a fan of Federal regulators, I am not a fan of Federal power, but I want to tell the Members, we owe it to American citizens that our Federal Government and our HHS and our bureaucracy does oversee everything that deals with health care. We cannot have a system that is totally without some oversight.

Where will the citizens go that were denied? Where will the taxpayers go that are unhappy if we have no Federal oversight of a system?

To show Members what has been going on, patients pay over $350 to be listed on a waiting list. The listing fees make up the majority of UNOS's budget. They are spending $1 million a year of their budget to lobby us.

Should an organization that has total control, should an organization that is going to be given a position where they have no oversight, be allowed to spend $1 million a year to lobby us? No. There are a lot of problems with the system.

I want to say this, in conclusion: Economics should not rule on this issue. Part of this issue is about economics, because parts of this country who are harvesting more organs because they have younger populations and more young people who have good, strong organs that can be transplanted want to keep them there.

It is economics, health care economics. It is still one of the profitable parts of health care, and there are not many. I think that should not be part of this system. I think each and every one of us and each and every one of our constituents and taxpayers should have the thought and the hope that, just like they expect good emergency care no matter where they live, they would expect an equal chance at an organ if life depended on it.

Mr. MOAKLEY. Mr. Speaker, I yield 3 minutes to the gentleman from California (Mr. STARK), the ranking member on the Subcommittee on Health on the Committee on Ways and Means.

Mr. STARK. I thank the distinguished ranking member for yielding time to me, Mr. Speaker.

Mr. Speaker, I rise to discuss the legislation before us, and strongly oppose the legislation. It will really do harm. There are 66,000 Americans now awaiting organ transplants. Thirteen people die every day waiting.

H.R. 2418 does not save lives. The bill is very bad health policy. It impedes the public access to lifesaving information. It provides a monopoly and unprecedented protections to the current private contractor, which I might add Forbes Magazine characterized as an outfit with life and death power over patients waiting for transplants, and it has evolved into a heavy-handed private fiefdom.

It removes itself from public accountability by delegating an improper amount of regulatory power and control over billions of taxpayer dollars. It gives it to a private contractor, which the Department of Justice considers unconstitutional. It contradicts the congressionally-mandated National Academy of Sciences' Institute of Medicine recommendations, and it is something which we should oppose.

Mr. Speaker, there is some small hope in the LaHood-Moakley-Rush-Peterson amendment which will be offered, and I ask my colleagues to support that amendment, which makes the data available to the public. It ensures broader sharing of organs and organ allocation decisions on medical necessity versus just the accident of geography. It provides a public accountability through Federal oversight. It does not squirrel away these decisions in the back rooms of private enterprise.

It establishes a scientific advisory board separate from this private organ contractor, and it would, indeed, make some small effort to make the bill before us more equitable and a more humane bill which would provide good health policies.

So please support the LaHood-Moakley-Rush-Peterson amendment, and oppose H.R. 2418 at final passage.

Mr. SPEAKER. More than 66,000 Americans currently await an organ transplant. Every day 13 people die waiting for an organ.

H.R. 2418 does not save lives. This bill is bad health policy.

Instead, H.R. 2418—Impedes public access to life saving comparative information about transplant centers.

Provides a monopoly and unprecedented protections to the current contractor (UNOS—the United Network for Organ Sharing) which Forbes magazine characterized as "an outfit with life-and-death power over patients waiting for transplants [that] has evolved into a heavy-handed private fiefdom".

Removes public accountability by delegating an improper amount of regulatory power and control over billions of taxpayer dollars to a private contractor—which DOJ considers unconstitutional.

Contradicts the Congressionally mandated National Academy of Science's Institute of Medicine (IOM) recommendations.

Protects special interests—plus those of both UNOs—with their headquarters in Representative BLILEY's district, and plus those of the transplant centers that fear decreased business or that their centers will close under a fairer system or broader organ sharing.

Mr. Speaker, the Scarborough/Thruman amendment nullifies the final organ allocation regulation published by the Secretary of Health and Human Services.

The Secretary published the final rule governing the organ procurement and transplant network (OPTN) on April 2, 1998. After 2 years of congressional delays, this regulation became effective last month.

The HHS regulation calls for more equitable sharing of too-scarce supply of organs and over much larger populations of people who need them.

As the final regulation states, it "does not establish specific allocation policies, but instead looks to the organ transplant community to take action to meet the performance goals"—a rule that the Washington Post today notes is "Hardly Draconian."

HHS oversight ensures that allocation policies are developed with the expertise and experience of patients and medical practitioners. When those allocation policies fail to achieve the ends envisioned by Congress—as is the case today—the Secretary can ensure these failures are corrected.

The final rule has been supported by the major transplant patient organizations, including the American Liver Foundation, Transplant Recipients International Organization and the National Transplant Action Committee.

However, the extent to which a government contractor has attempted to influence and undermine the legislative and regulatory processes is alarming. UNOS has spent patient listing fees on a lobbying and public relations smear campaign. UNOS' numerous efforts to derail the final rule have diminished public confidence in the organ allocation system.

Mr. Speaker, this amendment incorporates IOM recommendations to establish a fairer national organ allocation policy and to—make comparative data widely available to the public. Ensure broader sharing of organs and base organ allocation decisions on Medical Necessity vs. Accidents of Geography. Provide public accountability through Federal oversight. Establish a scientific advisory board, separate from the private organ contractor.

The current system has created great disparities in organ allocation and transplantation outcomes.

Last fall, HHS publicized comparative transplant center performance data showing that under the current organ contractor's policies, a patient's chance of receiving an organ transplant depends on geography, not on medical need. For example:

> In some areas of California, patients had a 71 percent chance of receiving a liver transplant within one year, whereas patients had only a 24 percent of receiving a liver transplant in other areas of the State.

In December 1999, the New England Journal of Medicine concluded that liver-transplantation centers in the U.S. that perform 20 or fewer transplantations per year have significantly higher mortality rates than those centers that perform more than 20 transplantations per year. This life-saving data must be widely available to the public. This amendment would ensure it is.

CONCLUSION

Our Nation's system must base transplant decisions on common medical criteria and pure professional medical opinion—not geography. Donated organs go to those with the most medical need.

Without the LaHood-Peterson-Rush-Moakley amendment, H.R. 2418 will permit these inequities and cause additional, needless deaths.

Knowing that a loved one's or your own organ will go to the patient who needs it most will help improve donation rates—something our Nation very much needs and one thing that everyone can agree on.

Most all of us are aware of the problem: the demand for organs exceeds the supply—ensuring fair allocation of these scarce organs even more important.

Unfortunately, H.R. 2418 is not the answer.

Mr. MOAKLEY. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I would just like to bring the Members' attention to an article in today's Washington Post titled, on the editorial page, ''New Round of Transplants.''

If I may read just from a portion of it, they say, ''The strange battle over who will control the distribution of transplanted organs continues to rage. The House is scheduled to vote today on an ill-advised bill to strip the Department of Health and Human Services of authority to set rules for the private contractors that manage the nation's transplants. This comes 18 days after an HHS regulation aimed at achieving more consistent and equitable policies finally went into effect after 2 years of heated opposition from the transplant network and its members.

''The HHS rule is hardly draconian. It merely calls on the United Network of Organ Sharing, UNOS, to develop policies that better spread the too scarce supply of transplantable organs over the much larger population of people who actually need them. Right now, each distribution center has its own waiting list, creating dramatic disparities in which organs often fail to reach those with the most urgent need.

''But many local transplant centers are fiercely territorial and fear losing business to a few large transplant centers at major hospitals. Since the HHS rule was proposed, nearly a dozen States have passed laws forbidding organs to be sent to recipients out of state; Wisconsin is suing to block a feared outflow to nearby Chicago. The national network, meanwhile, has several times persuaded Congress to put off the rule. Congress also commissioned a report from the Institute of Medicine, which made proposals similar to those of HHS.''

Mr. Speaker, I include this entire article for the RECORD.

The article referred to is as follows:

[From the Washington Post, Apr. 4, 2000]

NEW ROUND ON TRANSPLANTS

The strange battle over who will control the distribution of transplanted organs continues to rage. The House is scheduled to vote today on an ill-advised bill to strip the Department of Health and Human Services of authority to set rules for the private contractors that manage the nation's transplants. This comes 18 days after an HHS regulation aimed at achieving more consistent and equitable policies finally went into effect after two years of heated opposition from the transplant network and its members.

The HHS rule is hardly Draconian. It merely calls on the United Network for Organ Sharing (UNOS) to develop policies that better spread the too-scarce supply of transplantable organs over the much larger population of people who need them. Right now, each distribution region has its own waiting list, creating dramatic disparities in which organs often fail to reach those with the most urgent need.

But many local transplant centers are fiercely territorial and fear losing business to a few large transplant centers at major hospitals. Since the HHS rule was proposed, nearly a dozen states have passed laws forbidding organs to be sent to recipients out of state; Wisconsin is suing to block a feared outflow to nearby Chicago. The national network, meanwhile, has several times persuaded Congress to put off the rule. Congress also commissioned a report from the Institute of Medicine, which made proposals similar to those of HHS.

A pending Senate bill would incorporate those recommendations. The House bill would simply vaporize the HHS rule in favor of the prior system. The House should drop the effort and follow the Senate's lead.

Mr. LINDER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I urge support for a rule that made every effort to include all the serious discussion around this bill. This is a very important bill. All the issues that were brought before the committee have one way or another been allowed to be discussed and voted up-or-down on the floor.

I urge my colleagues to support the rule.

Mr. Speaker, I yield back the balance of my time, and I move the previous question on the resolution.

The previous question was ordered.

The resolution was agreed to.

A motion to reconsider was laid on the table.

The SPEAKER pro tempore. Pursuant to House Resolution 454 and rule XVIII, the Chair declares the House in the Committee of the Whole House on the State of the Union for the consideration of the bill, H.R. 2418.

□ 1143

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole House on the State of the Union for the consideration of the bill (H.R. 2418) to amend the Public Health Service Act to revise and extend programs relating to organ procurement and transplantation, with Mr. LATOURETTE in the chair.

The Clerk read the title of the bill.

The CHAIRMAN. Pursuant to the rule, the bill is considered as having been read the first time.

Under the rule, the gentleman from Virginia (Mr. BLILEY) and the gentleman from Ohio (Mr. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from Virginia (Mr. BLILEY).

□ 1145

Mr. BLILEY. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I rise in support of H.R. 2418, the Organ Procurement and Transplantation Network Amendments of 1999. It has been 2 years and 2 days since the Clinton administration issued its regulation on the Organ Procurement and Transplantation Network. Some claim that the regulation changed the HHS Secretary's oversight authority into a policymaking authority. Policy control of the network is not what Congress has ever intended and that is not what the law permits. The Organ Procurement and Transplantation Network was authorized by Congress to make decisions without political interference.

The decisions they make safeguard the interests of not just those who are presently on a waiting list for a life-saving organ but those unknown persons who will be placed on a waiting list in the future.

Mr. Chairman, H.R. 2418 would safeguard the independence of the network. It would also increase the level of accountability of the network by mandating timely reports on the performance of transplant centers within the network.

The bill includes an innovative enforcement mechanism that would mandate the payment of liquidated damages by transplant centers that try to cheat under the network rules.

I also applaud the provision that would offer assistance for living donors seeking to donate an organ to someone in another State.

H.R. 2418 will ensure that decisions regarding organ procurement are placed in the hands of the medical community, patients and donor families, as they have been for the past decade. The creation of a national registry, where organs are allocated to the sickest patients first, would increase wait list mortalities, waste organs and increase retransplantation rates.

The Federal Government is simply not equipped to make these decisions. The Institute of Medicine reported that the current system is basically fair. It achieves a balanced and fair distribution of organs for all who await a life-saving transplant while supporting the continuation of local transplant programs.

As we move forward to reauthorize the National Organ Transplant Act, let us not forget that some alternatives to this bill may have a very damaging effect on organ supplies. According to written testimony submitted to the Subcommittee on Health and Environment, Joseph L. Brand, chairman of the National Kidney Foundation stated that, and I quote, ''we believe that less patients would receive liver transplants if the OPTN were required to develop policies where organs are allocated to the sickest candidates first. Such candidates are likely to have poor outcomes and require repeat transplants. Thus, reducing the number of organs available for other candidates,'' unquote.

I urge Members of the House to join with me in voting for H.R. 2418 to safeguard those who wait for an organ transplant from even more uncertainty.

Mr. Chairman, I reserve the balance of my time.

Mr. BROWN of Ohio. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, today we are taking up H.R. 2418, legislation sponsored by my friends, the gentleman from Florida (Mr. BILIRAKIS), the gentleman from Texas (Mr. GREEN), which would reauthorize and amend the National Organ Transplant Act.

House leadership has decided to move this controversial measure even though the Senate is making real progress on legislation reflecting consensus between those who oppose and those who support H.R. 2418. Surely it is more important to get this legislation right than it is to get our two cents in before the Senate does. Yet here we are poised to vote on a measure that while promising should not be passed whole cloth.

In its current form, the President would likely veto H.R. 2418 or the courts would likely dismiss the legislation as unconstitutional. There are some beneficial aspects to H.R. 2418. One set of provisions would help States pay for transportation and other costs incurred by organ donors. Given the waiting list for donated organs, anything we can do to facilitate organ donation is certainly a positive step.

Unfortunately, though, Mr. Chairman, omitted from this bill are several key recommendations that the Institute of Medicine made after taking a close look at the current organ allocation system. The most alarming omission is not really an omission as much as it is a gift. It is a gift to the United Network for Organ Sharing, so-called UNOS, the private contractor managing the current organ allocation system. H.R. 2418 gives UNOS a virtual carte blanche to spend taxpayers' money and determine which individuals will receive donated organs and which individuals will not receive donated organs.

Under H.R. 2418, UNOS would have carte blanche to spend our money and to make these life and death decisions without taking the public views into account. As currently written, 2418 confers more power on UNOS than it does on its employer, and its employer happens to be the American taxpayer.

2418 undercuts the authority of the Secretary of the Department of Health and Human Services to represent the public interests in the development and the application of organ allocation policies. In other words, the public would have no say over public policy.

The Secretary's job is to protect and promote the public interest and our public health. The contractor, UNOS, the contractor's job is to protect and promote itself. Last year the Institute of Medicine took a good hard look at the Nation's organ allocation system and made several compelling recommendations. One of those recommendations was that the Federal Government must exercise more oversight over the organ allocation system to ensure that individuals in need of donated organs are treated fairly.

This bill, Mr. Chairman, goes in the opposite direction. I understand my colleagues, the gentleman from Illinois (Mr. LAHOOD), the gentleman from Massachusetts (Mr. MOAKLEY), the gentleman from Illinois (Mr. RUSH) and the gentleman from Pennsylvania (Mr. PETERSON) will offer an amendment that would incorporate those Institute of Medicine recommendations into H.R. 2418, improving the bill measurably, recommendations like ensuring independent scientific review of organ allocation policies; of ensuring that organ allocation decisions are based on sound medicine and sound science; and ensuring that organ allocation decisions are equitable to people in this country; and ensuring that the Federal Government does its job and holds the Government contractor who works for taxpayers accountable for acting in the public's best interest. I strongly urge my colleagues to vote for this amendment.

Mr. Chairman, I reserve the balance of my time.

Mr. BLILEY. Mr. Chairman, I yield 1 minute to the gentlewoman from New York (Mrs. KELLY).

Mrs. KELLY. Mr. Chairman, I rise in support of H.R. 2418 because it keeps a promise made by Congress for the past 16 years to safeguard the independence of the Organ Procurement and Transplantation Network from political interference and control.

Ever since the National Organ Transplant Act of 1984 was enacted, Congress has recognized that experts at the forefront of changes in the medical profession and transplant community are best suited to adjust allocation policies in light of new technologies and new medical understanding.

Do we really want Federal bureaucrats making decisions about who gets these organs? What will keep the decisions being made from being political ones?

The congressionally created Organs and Transplant Network has worked, and it has worked in a nonpolitical way. The LaHood amendment, while well intentioned, would result in taking medical policy decisions out of the hands of doctors and placing them in the hands of bureaucrats. Medical decisions about organs are better left in the hands of health care professionals and transplant centers. That was the intent of the law when it was created in 1984 and remains so today.

Please join me in supporting H.R. 2418.

Mr. BROWN of Ohio. Mr. Chairman, I yield 2 minutes to the distinguished gentleman from Wisconsin (Mr. BARRETT), a member of the Committee on Commerce.

Mr. BARRETT of Wisconsin. Mr. Chairman, I rise today in strong support of H.R. 2418, and I say strong support even though I recognize that it is an imperfect solution to what I consider to be a horrible problem.

We have a serious problem in this country because the demand for organs is much greater than the supply, and there are essentially two ways to deal with that problem. One is for those areas of the country that feel that they do not have enough organs to essentially raid other parts of the country and try to grab those organs. The second option, and the option that I strongly prefer and I will have an amendment later addressing this, is to be aggressive and work together to increase the supply of organs. The problem with the Department's rule is that it defies the laws of economics. It assumes that economics is not involved in this fight when the reality is economics is at the core of this fight.

These are hospitals, these are businesses, big businesses, that are fighting over organs because organs, unfortunately in this context, equate with money. So there are situations like my State of Wisconsin that will see an essentially 30 percent drop in the number of organs available to them and my neighboring State of Illinois seeing a 30 percent increase.

Now, Chicago is 100 miles from Milwaukee, and it would not be that difficult for these patients to come to Milwaukee; but instead of trying to work together, what we see is we see from Wisconsin's perspective a raid, a raid on the fine job that we have done in Wisconsin to try to encourage more people to donate their organs. It defies logic to state that those areas of this country that have done a very good job, including my home State of Wisconsin, in developing an organ procurement network are going to continue working as hard as they have if they are going to see those organs leave the State.

We have to recognize some basic tenets of human nature; and one of those is, if one is allowed to keep the fruits of their labor, they are going to work harder. If the fruits of their labor are going to be sent to another part of this country, that increases the chances that they will not work as hard.

So I think that this bill, again, is an imperfect bill; but I think that the Department's response is in exactly the wrong direction.

Mr. BLILEY. Mr. Chairman, I yield 3 minutes to the gentleman from Oklahoma (Mr. COBURN).

Mr. COBURN. Mr. Chairman, I think it is important that we have a little perspective on why we are where we are. There is no question that this country had three or four major transplant centers that developed and perfected a lot of techniques, and then they asked doctors to come and offer their services for free to learn those techniques.

Know what? They did, and there are throughout this entire country now highly qualified, highly trained transplant surgeons in every State in the country.

Guess what happened? Now that they are as good as the transplant centers, the major transplant centers that pioneered this work, they are doing more transplants and all of a sudden the major centers do not have the organs with which to transplant because the people are being transplanted at home.

The purpose of this bill is to offset what I believe is a very unwise rule by Secretary Shalala. What this rule that is undergoing implementation as we speak will do will limit people in the outreaches of this country as far as transplants. They will have to live in an urban center, or they will have to move with their family to that urban center to achieve this.

This totally obviates the decision-making by health care professionals and their patients and puts bureaucrats in charge.

The HHS regulations are only going to shift organs around, and I think that is the important thing that needs to be noted. The real problem, this would not be a problem if there were an excess number of organs, and what it is going to do is the HHS rule defines the sickest patients as those that have been waiting the longest. They are not necessarily the truly sickest patients. So we are going to displace common sense, we are going to displace care and compassion, we are going to displace regional geographic quality and move organ transplantation back to the original centers of excellence when, in fact, the scientific studies say that the competing centers that they trained are doing as well or better in many instances.

In my home State of Oklahoma we have two centers of excellence for transplantation now, all of which received their training at one of these major pioneering centers. The fact is, the results are as good or better than those centers.

The other thing is, Oklahoma developed an organ donating network where we actually have an excess supply in our State now, more organs than what our citizens would supply. With this new rule, Oklahomans will not have the benefit of organs donated by their fellow citizens to another Oklahoman. Instead, a bureaucrat, influenced through the organization that the Secretary already controls, will then decide that people who offered the organs for donation will not benefit their fellow citizens.

I would ask that we support this bill and that the House come behind common sense and quality medicine.

Mr. BROWN of Ohio. Mr. Chairman, I yield 3 minutes to my friend, the gentleman from Illinois (Mr. LAHOOD).

Mr. LAHOOD. Mr. Chairman, let me see if I can explain to the House what is going on here. We have a pretty good system now, and there is pretty good oversight. If we pass this bill today, we let one agency play God with transplants and where organs will go. I do not think anybody in America wants one group to decide where all the organs are going to go. We just do not. That is bad policy, with no oversight, no government oversight.

This notion that some bureaucrat is going to make the decision is nonsense. It is not going to happen. There was actually a study done that said that there should be some oversight so that one agency cannot play God about where organs should go.

□ 1200

If we talk to any family about the long waiting list, the anxiety, the frustrating, they will tell us that one agency should not have this opportunity.

There is a letter that I have here from the agency, the United Network of Organ Sharing. This is the agency that has the jurisdiction right now over this. Let me just read the first paragraph. This is a letter to the gentleman from Michigan (Mr. DINGELL).

This letter is dated March 15. It says, ''On behalf of the Board of Directors of UNOS, I am very pleased to inform you and the members of the Committee that Monday we approved a new and expansive National Liver Allocation Policy Development Plan. Clearly, this plan goes a long way in furthering UNOS' and the Department of Health and Human Services' mutual goal of fair and equitable organ distribution. In addition, UNOS and HHS are working closely together to ensure an effective and efficient implementation of Department's Final Rule set for March 16th, including its organ allocation provisions.''

Mr. Chairman, I include the March 15, 2000, letter and the Statement of Administration Policy for the RECORD as follows:

UNITED NETWORK FOR ORGAN SHARING,
Richmond, VA, March 15, 2000.

Hon. JOHN D. DINGELL,
Ranking Minority Member, House Committee on Commerce, Washington, DC.

DEAR CONGRESSMAN DINGELL: On behalf of the Board of Directors of the United Network for Organ Sharing (UNOS), I am very pleased to inform you and the members of the Committee that Monday we approved a new and expansive National Liver Allocation Policy Development Plan. Clearly, this plan goes a long way in furthering UNOS' and the Department of Health and Human Services' mutual goal of fair and equitable organ distribution. In addition, UNOS and HHS are working closely together to ensure an effective and efficient implementation of the Department's Final Rule set for March 16th, including its organ allocation provisions.

Our new Liver Allocation Policy Development Plan was produced after a series of joint meetings of the UNOS Liver and Intestinal Organ Transplantation Committee and the UNOS Pediatric Transplantation Committee. The Committees incorporated recommendations from the Institute of Medicine report on Organ Procurement and Transplantation as well as many thoughtful public comments. We genuinely believe that the resulting policy, after further refinement at a scheduled consensus conference of the transplant community on liver allocation, will reflect the principles and goals of the Secretary's Final Rule and fully represent the transplant community's interests in developing equitable and medically sound policies.

Major elements of the proposal include a plan for significantly refining urgency categories for Status 2A, 2B and 3 liver transplant candidates by implementing a new numerical scale which will more accurately represent the varying degrees of illness among these patients. We are also endeavoring to better predict pre- and post-transplant mortality and morbidity in order to make the most efficient use of the previous livers that do become available. Further, we will establish appropriately-sized organ allocation units for all organs, and improve policy compliance monitoring by implementing a system for prospective verification of liver patient listing and status code changes.

We are proud of the efforts of the many medical professionals from the transplant community who joined together to develop this new important policy plan.

We would like to thank you and the Committee members for your continued interest and support for the life-giving endeavor of organ and tissue transplantation.

Sincerely,

WILLIAM D. PAYNE M.D.,
President.

EXECUTIVE OFFICE OF THE PRESIDENT, OFFICE OF MANAGEMENT AND BUDGET,
Washington, DC, April 3, 2000.

STATEMENT OF ADMINISTRATION POLICY

H.R. 2418—ORGAN PROCUREMENT AND TRANSPLANTATION NETWORK AMENDMENTS OF 2000

The Administration strongly opposes House passage of H.R. 2418, which would reauthorize the National Organ Transplantation Act (NOTA). H.R. 2418 raises serious Constitutional issues, would preserve existing inequities in the organ transplantation system, and could result in potential harm to patients. If H.R. 2418 were presented to the President in its current form, his senior advisers would recommend that he veto the bill.

The effects of the current organ allocation policies established by the Organ Procurement and Transplantation Network (OPTN) are inequitable because patients with similar severities of illness are treated differently, depending on where they may live or at which transplant center they may be listed. For this reason, the Department of Health and Human Services issued regulations, which became effective March 16th, that establish a framework for organ allocation policies, to be developed by the network, that are based on sound medical judgment, and that are fairer and more equitable for all parties. Unfortunately, H.R. 2418 would not result in a fairer system for all patients in this country. Rather, it is seriously flawed legislation because it:

Does not require the standardization of patient listing practices and broader sharing of organs, two items that the Administration and the Institute of Medicine consider essential to ensuring fairness in the system and optimal outcomes for patients.

Reduces the appropriate Federal role in overseeing the OPTN, despite the recommendation from an independent study required by Congress and conducted by the prestigious Institute of Medicine, that HHS should have the oversight responsibility ''to manage the system of organ procurement and transplantation in the public interest, and to ensure public accountability of the system.''

Inappropriately grants extraordinary powers to the private sector to approve the Federal contractor that manages the OPTN.

Raises serious constitutional concerns. It is a core constitutional value that politically accountable Executive Branch officers should make the important policy judgments necessary to implement a Federal regulatory scheme. For this reason, the bill's delegation of authority to a private party to establish standards governing organ transplants and transplant providers raises serious separation of powers concerns and would create a significant risk that a court might declare the bill unconstitutional.

The Administration could support the amendment offered by Representatives LaHood, Moakley, Rush, Peterson (John) and others. Similar to the current regulation, it reflects the recommendations made by the Institute of Medicine in its Congressionally mandated study of organ allocation policies and it strikes the proper balance between medical judgments being made by transplant professionals and the need for public accountability for tax payer funds. It articulates clear principles to guide organ allocation policy, designed to protect the interests of patients. It assures that data necessary to evaluate and improve the organ transplant system are provided to the public. It avoids the serious constitutional problems that are raised with H.R. 2418. Further, it promotes organ donation, the single most important factor in dealing with the shortage of transplantable organs. In sum, if Congress determines that legislation to update the National Organ Transplant Act is desirable, the amendment offered by Representatives LaHood, Moakley, Rush, Peterson (John) and others represents a thoughtful legislative response.

The Administration urges the Congress to develop NOTA reauthorization legislation that better reflects the recommendations of the Institute of Medicine and that results in a fairer transplantation system for all patients in this country and their families.

Mr. Chairman, so what we have got on the floor today is a bill in spite of the fact that these two agencies, HHS and UNOS, are working together. Congress is going to say, well, the heck with that, we want to give it to one agency. We want to tell families all over America that one agency gets to play God.

Now, here is what happens if this bill passes. We go back to the Mickey Mantle mentality of organ transplants. If one is somebody important, if one has a high profile, if one is an important person in America, one gets the organ. If one is just a common, ordinary citizen, one agency decides it. That is wrong.

We should not be administering health care, passing laws that distribute organs in this kind of a fashion in America. We have got a system whereby the Department of Health and Human Services will have oversight.

So what I am saying today is we have got an amendment, it is a good amendment, offered by the gentleman from Chicago, Illinois (Mr. RUSH), the gentleman from Massachusetts (Mr. MOAKLEY), the gentleman from Pennsylvania (Mr. PETERSON) that simply says that HHS should have some responsibility.

Mr. BLILEY. Mr. Chairman, will the gentleman yield?

Mr. LAHOOD. Absolutely. I am happy to yield to the gentleman from Virginia.

Mr. BLILEY. Mr. Chairman, can the gentleman from Illinois name me one instance where a person got an organ out of order.

Mr. LAHOOD. Yes, Mr. Chairman, I can. If the gentleman from Virginia (Mr. Bliley) will yield me 2 minutes, we will proceed.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from Illinois (Mr. LAHOOD).

Mr. LAHOOD. Mr. Chairman, I go back to the notion that there have been high-profile people who have been given organ transplants out of order, and I mentioned one already.

Mr. BLILEY. Mr. Chairman, if the gentleman will yield, Mickey Mantle did not get his organ out of order.

Mr. LAHOOD. Mr. Chairman, everybody in America knows that there are long waiting lists for these organs, long waiting lists. People wait years, and sometimes they die before they get their organs. But if one is a high-profile person, perhaps one moves up on the list.

We have a good system in place, and that system says we have got the agency, but we also have got jurisdiction from a Federal agency that deals out the money.

Who protects the taxpayers in these instances? Does one agency just happen to have the responsibility, and the taxpayers are not protected? What is wrong with having HHS as a part of the responsibility to oversee? We do it in all other areas. Can the gentleman from Virginia explain to me why we would not do it?

Mr. BLILEY. Mr. Chairman, I yield 5 minutes to the gentleman from Florida (Mr. BILIRAKIS), chairman of the Subcommittee on Health and Environment.

Mr. BILIRAKIS. Mr. Chairman, I thank the gentleman from Virginia for yielding me this time.

Mr. Chairman, the gentleman from Illinois talks about one agency. One Department I guess is okay, but one agency is not okay. I am not sure really what agency he is referring to.

I introduced this bill with the gentleman from Texas (Mr. GREEN) to reauthorize the National Organ Transplantation Act and to promote efforts to increase the supply of organs available for transplantation. The bill was passed by the subcommittee and then later on by the full Committee on Commerce approved by voice vote in October.

I was here when the gentleman from Massachusetts (Mr. MOAKLEY) made the comments that this bill intends to strip HHS of its authority. Well, I am here to say to the gentleman that this bill actually will leave the status quo alone. The HHS does not have the authority. It is HHS which is trying to strip the authority away from the States, if you will, and from the network and from the regions.

It was HHS, despite the fact that everything has been working and working well, that chose to take organ allocations away from the medical community and from the patients and from the donor families, as Congress intended.

Now, there has been testimony in hearings and whatnot, and there is an article in the Washington Post back in 1996 about a particular person, and I wish the gentleman from Illinois (Mr. LAHOOD) would listen to this, a particular individual, a Pittsburgh real estate agent who has real estate and property management dealings with the University of Pittsburgh Medical Center. He is also, as I understand it, a very close friend, this comes from the Post now, I am paraphrasing, of President Bill Clinton since their days at Georgetown. Okay.

The university apparently, according to the Post, asked this person to intercede with administration regarding this particular issue because they were afraid that they had a genuine reluctance, to use the words in the Post's article, to get involved. According to the Post, this September 30 letter got results.

According to these and other reports, President Clinton directly raised this issue with Secretary Shalala; and in November, she wrote Mr. So and So, explaining the Department would hold hearings or look into this situation.

According to Transplant News, October 31, 1996, which is a commercial news letter of the transplant community who wrote this letter, the letter clearly represents the arguments of the University of Pittsburgh Medical Center.

I want to say right now the University of Pittsburgh is my alma mater. When they are right, they are right. When they are wrong, they are wrong.

The article goes on to state, this gentleman outlined the University of Pittsburgh Medical Center's position that livers should be allocated ''to the sickest patients in the largest possible geographic area where the organ can be transported and remain in good condition to be transplanted.''

I think we have to ask ourselves, is the Government, is this bureaucracy up here equipped to make these decisions? Do we want the Government, the same administration which determined who should be buried in Arlington Cemetery as a result of politics, do we want politics determining life and death matters? I think not. I think not.

The bill directs the Secretary to carry out a program to educate the public with respect to organ donation and, in particular, the need for additional organ transplantation.

The bill acknowledges the advances of medical technology that have enabled a transplantation of organs donated by living individuals to become a viable treatment option for an increasing number of patients.

It reauthorizes the act which was enacted to provide for the establishment and operation of a network, and the bill clarifies that the network is responsible for developing, establishing, and maintaining medical criteria.

Mr. Chairman, these experts are at the forefront of changes of the medical profession. The gentleman from Oklahoma (Mr. COBURN) referred to them. They said in the American Society of Transplant Surgeons letter last year, and I quote them, ''an important step forward,'' referring to this bill, ''in setting forth principles to guide the functioning of a fair and equitable Organ

Procurement Transplantation and Transplantation Network in the 21st Century.''

The question of how to allocate a limited supply of organs among individuals in need of a transplant is extremely serious with life or death consequences, as I have already said, for the patients affected. Their lives should not be subject to the whims of the political process or the judgments of government bureaucrats with little or no experience in the field of transplantation.

We also should remember that many States, my State of Florida, Texas, so many others, have very successful programs to encourage organ donation; and those have been developed at the State level.

So there is an incentive to say to a fellow Floridian or fellow Texan or whatever the case may be that your organ will in all probability be used in this State or in this particular region, provided that there is a category 1 or category 2 patient that needs the particular organ. Of course it will be moved to another region if, in fact, there is not.

The program in Florida operated by LifeLink has increased donations by almost 50 percent in the last 3 years alone. We cannot interfere with that.

Mr. Chairman, I stand before you today to ask my colleagues to join me in supporting passage of H.R. 2418, the "Organ Procurement and Transplantation Network Amendments of 1999."

I introduced this bipartisan bill with Congressman GENE GREEN to reauthorize the National Organ Transplantation Act and promote efforts to increase the supply of organs available for transplantation. H.R. 2418 was passed by my Health and Environment Subcommittee last September, and the full Commerce Committee approved the bill by voice vote in October.

This legislation addresses a serious national health concern. Quite simply, we do not have enough organs to satisfy the demand for those in need of a transplant.

By even the most optimistic estimates, anticipated increases in organ supply are not projected to meet demand. This year, about 20,000 people will receive organ transplants—but more than 40,000 will not. In the last decade alone, the waiting list for transplants grew by over 300 percent. This is literally a matter of life and death for tens of thousands of Americans each year.

My bill directs the Secretary of Health and Human Services to carry out a program to educate the public with respect to organ donation and, in particular, the need for additional organs for transplantation.

The bill acknowledges the advances in medical technology that have enabled the transplantation of organs donated by living individuals to become a viable treatment option for an increasing number of patients. It specifically recognizes the generous contribution made by each living individual who has donated an organ to save a life. It also authorizes grants to cover the costs of travel and subsistence expenses for individuals who make living donations of their organs.

In addition, H.R. 2418 reauthorizes the National Organ Transplant Act, which was enacted to provide for the establishment and operation of an Organ Procurement and Transplantation Network. The bill clarifies that the Network is responsible for developing, establishing and maintaining medical criteria and standards for organ procurement and transplantation.

Mr. Chairman, those experts at the forefront of changes in the medical profession are best suited to adjust policies in light of new technology and medical understanding. In a letter last year, the American Society of Transplant Surgeons (ASTS) identified the bill as "an important step forward in setting forth principles to guide the functioning of a fair and equitable Organ Procurement and Transplantation Network in the 21st Century."

This legislation recognizes that decisions regarding organ procurement and transplantation are best left to the medical community—as Congress intended in passing the National Organ Transplant Act in 1984. It will ensure that organs are distributed based on sound scientific principles—without regard to the economic status or political influence of a recipient.

The question of how to allocate a limited supply of organs among individuals in need of a transplant is extremely serious—with life-or-death consequences for the patients affected. Their lives should never be subject to the whims of the political process or the judgments of government bureaucrats with little or no experience in the field of transplantation.

This point was reinforced by a letter I received last year from Kathy Gibson, a 49-year-old constituent who received two kidney transplants in one year. The second transplant, which was a success, followed an unsuccessful first transplant using her husband's kidney. Kathy received her second kidney through LifeLink Foundation, a nonprofit community service entity in Tampa, Florida, that operates four of the nation's 62 organ procurement organizations. She wrote to tell me how grateful she was for LifeLink's assistance, saying: "I have nothing but good things to say regarding my transplant team from Tampa General Hospital and LifeLink Transplant Institute . . . they found me the gift of life."

H.R. 2418 was drafted with people like Kathy Gibson in mind. By promoting efforts to increase organ donation around the country, it will help ensure that there is an adequate supply of organs for every patient who needs a transplant.

We should remember that many successful programs to encourage organ donation have been developed at the state level. In my home state of Florida, the organ procurement program operated by LifeLink has increased donations by almost 50 percent in the past three years alone. Organ allocation policies should not penalize states like Florida that have worked hard to increase the supply or organs available for transplantation. Instead, we should encourage other states to become more pro-active in support of organ donation initiatives.

To aid those efforts, H.R. 2418 authorizes the Secretary to establish a public education program to raise awareness of the need for organ donations. It also authorizes grants to public and nonprofit private entities to conduct studies and demonstration projects focused on providing for an adequate rate of organ donation.

Mr. Chairman, H.R. 2418 represents an important step forward in increasing the supply of organs available for transplantation. I urge all of my colleagues to support passage of this critical measure.

Mr. BROWN of Ohio. Mr. Chairman, I yield 5 minutes to the gentleman from Michigan (Mr. DINGELL), ranking member of the Committee on Commerce and the Dean of the House.

(Mr. DINGELL asked and was given permission to revise and extend his remarks.)

Mr. DINGELL. Mr. Chairman, I thank the gentleman from Ohio for yielding me this time. Mr. Chairman, I rise in opposition to H.R. 2418, and I urge my colleagues to vote against this bill and to vote for the Moakley-LaHood amendment. That will give us a decent proposal.

This bill is founded on deceit, misrepresentation, and falsehood by a rather shoddy, shabby contractor who seeks an absolute monopoly over the handling of organs in this Nation and which seeks as contractor to be totally exempt from the controls that the Federal Government would impose on any other contractor. In addition to that, it seeks to have itself fixed in a position where it can never be replaced. That is what is at the bottom of this bill. Anybody who does not know that is not a very good reader of legislation.

Now, having said that, let me tell my colleagues something else. UNOS, which is the contractor, seeks to use a rather unfortunate situation where there is a shortage of organs to put themselves in a place where they can now dictate to the whole Nation. This situation with regard to organs is a very bad one. There is wide disparity in availability of organs in different parts of this country. People are dying because of that situation. Healthy people are getting organs before they need them, and the very sick are not getting organs before they die. If my colleagues like that situation, this is a bill that they should support. If they do not, then they have no choice but to oppose it.

The organ procurement legislation before us is nothing more or less than a perpetual employment and protection from public oversight act to take care of UNOS. Now, while the bill has a few worthy provisions, H.R. 2418 perpetuates an allocation system that the Secretary of Health and Human Services has found to be inequitable and inefficient. African Americans, for example, wait twice as long for kidneys as Caucasians. Is this something which encourages organ donation? I think not.

H.R. 2418 will return us to the days before the National Organ Transplant Act was enacted in 1984. The organ allocation system was a balkanized patchwork of regions based on political and geographical considerations as well as amorphous understandings. The map of these regions makes gerrymandered congressional districts look not only fairly neat, but also elegant by comparison.

This legislation, as I said, would strip HHS of virtually all authority. It

leaves UNOS totally in charge of the organ allocation system. It is in contrast and in open conflict with a number of State statutes. No one believes that a situation of allocation based on State boundaries is in the best interest of the patients. But that is what we will be left with if H.R. 2418 is enacted, with all of the hardships that that will entail for people who are dependent on organ transplants for life itself.

It also puts UNOS on top of HHS. The contractor will be dictating to the Government and in a fashion which, very frankly, does not represent the best interests of the public. In so doing, it allows State hoarding laws to trump even UNOS's version of broader sharing.

So if my colleagues want to take care of the sick and the needy and those who need organs, then they must vote against this legislation.

Now, notwithstanding the Organ Transplant Act's clear directive to promote a more fair and efficient national organ allocation system, progress has been slow, and frustrations are properly felt. But that is, in good part, for two reasons. One, because UNOS has not done the job that it should; and, two, because there is a distinct shortage of organs available to the people who have needed them.

The act was designed so that the Secretary of Health and Human Services could work through a private contractor. That is good. The organ procurement transplantation network has expertise in the field of organ allocation. This contractor is and always has been UNOS of Richmond, Virginia. I would note it has not done a very good job in the public interest. It has fought the Secretary every step of the way. Indeed, it has sought to terminate the Secretary's power to issue regulations.

It has done worse than that. It has taken steps to set itself firmly as the everlasting contractor who will handle organs allocation. UNOS has engaged in an unprecedented lobbying campaign against any changes in its allocation policies. It has also misrepresented the positions of the Secretary. It is a very deceitful institution.

Let us note the regulation which is in question. It tells UNOS to propose an improved allocation system. That is all the Secretary wants it to do. But this is anathema to UNOS, and it is something which this Congress cannot permit.

There is more bad to be said about UNOS, and there is more bad to be said about this legislation.

Mr. BLILEY. Mr. Chairman, I yield 1½ minutes to the gentleman from Missouri (Mr. BLUNT).

Mr. BLUNT. Mr. Chairman, I thank the gentleman from Virginia for yielding me this time.

Mr. Chairman, I come up in opposition to the rule; and because of that, I am for the bill. The rule is a power grab. The bill is a continuation of where this Congress has been for the past 16 years. The bill continues to safeguard this network that ensures that the States still have some responsibilities, some incentive, some reason for their State to do a better job of procuring organs than other States. If we take that out of the system, we really lose a lot of the success of this system.

Whenever one talks to people about where their organs will be used if they are given as part of their final decision making, they are more receptive to those organs being used close to home if there is a need close to home. I would like to see a list that the gentleman has of healthy people who are getting organs when sick people are not. I think this will help this debate. I believe this is not happening in this system today.

In 1990, Senator ALBERT GORE testified before a subcommittee of the Health and Environment Committee. Senator GORE attacked HHS's bureaucratic interference with the independence of the organ procurement and transplant network.

□ 1215

He testified that the career bureaucrats were interfering with the network's policymaking efforts. In fact, he charged that HHS bureaucrats teamed up in an attempt to remove all policymaking authority from the network in contradiction to the law.

Even a stopped clock is right twice a day. Senator GORE was right in 1990. We are right today if we pass this bill.

Mr. BROWN of Ohio. Mr. Chairman could you let each side know how much time we have?

The CHAIRMAN. The gentleman from Ohio (Mr. BROWN) has 16½ minutes remaining, and the gentleman from Virginia (Mr. BLILEY) has 15½ minutes remaining.

Mr. BROWN of Ohio. Mr. Chairman, I yield 4 minutes to the gentleman from Texas (Mr. GREEN).

Mr. GREEN of Texas. Mr. Chairman, I thank my colleague, our ranking member on the Subcommittee on Health and Environment, for yielding me this time, particularly since he knows we are on opposite sides on this issue.

Mr. Chairman, in Texas we have a saying, ''If it ain't broke, don't fix it.'' Our current system is not broke. It needs to have a tune-up, but it is not broke, and the HHS rules go much too far.

I am proud to be an original cosponsor of this bill, because I believe it would move forward the debate on the crucial issue of organ transplant policy. While I strongly support the legislation, I am also concerned about our timing today. I know we are trying to work out a compromise. Our colleagues on the Senate side, Senator FRIST and Senator KENNEDY, are working on this and are meeting with organ transplant representatives to hammer out a compromise. I am hoping our actions today do not jeopardize real bipartisan solutions that are being developed. Hopefully, this bill today will move this issue forward.

There is plenty of room for compromise on both sides. We all agree that medicine and science, not politics, should oversee our Nation's organ transplant policy. Yet we are not seeing much sign of compromise from the administration on this issue. The Department of Health and Human Services' final amended rule on organ transplantation is a farce. It does not move enough from the original proposal. Likewise, those in the organ community, who refuse to budge an inch toward compromise, are simply stalling the process in an unproductive waste of time.

The organ transplant surgeons in Houston and experts in Houston and the surrounding area have done a good job of contributing to the debate. They are willing to approach the matter in a deliberative and sensible manner. They simply want what is best for their patients and their community. Like me, I believe that the HHS regulation could leave small- and medium-sized transplant centers at a significant operating disadvantage, which will ultimately cause them to shut their doors, leaving thousands of needy patients few options except to go to the larger centers.

H.R. 2418 contains many good initiatives. It goes beyond organ allocation policies to deal with the related issues, not only how organs are allocated but the number we have to allocate. The legislation creates a new $5 million grant program to pay for travel and other expenses for living organ donors. It authorizes $2 million for carrying out studies and demonstration projects that will increase organ donations, and it requires the network to work actively to increase the supply of donation of organs.

Mr. Chairman, the concern I have is that we may lose the success in some States with a higher percentage of organ donations. Walking over here I had a discussion with a colleague of mine from Wisconsin who said that Wisconsin does a great job in trying to increase organ donations, yet some other States may not. So what we will see is some State doing a great job having their organ donations transferred to somewhere else that is not doing a good job.

That is why this bill is needed and why it is so important, Mr. Chairman. I regret that HHS has chosen to force the new regulations on the transplant community that nearly unanimously rejected them. If we continue to stalemate, no one will benefit. That is why we need to move forward with this legislation and hopefully come up with a compromise.

Mr. BLILEY. Mr. Chairman, I yield 1 minute to the gentleman from Tennessee (Mr. BRYANT), a member of the committee.

Mr. BRYANT. Mr. Chairman, Congress should pass this legislation today because it reauthorizes the National Organ Transplant Act of 1984. Back then, Congress in its wisdom set up a private partnership between the medical community and patients. Congress

decided that the difficult decisions, the medical decisions involving the allocation of scarce organs should be made by this private partnership and not by government officials. That is the way the system has worked very well for 15 years.

This legislation does give the Secretary of HHS some oversight authority, and that is how it should be. But this bill leaves the real medical decision making about who gets organs firmly within the transplant community, which is exactly where it belongs.

I urge my colleagues to strongly support H.R. 2418, as it is the right bill at the right time.

Mr. BROWN of Ohio. Mr. Chairman, I yield such time as he may consume to the gentleman from Texas (Mr. BENTSEN).

(Mr. BENTSEN asked and was given permission to revise and extend his remarks.)

Mr. BENTSEN. Mr. Chairman, I rise in support of H.R. 2418, the "Organ Procurement and Transplantation Network Amendments," a measure that I am cosponsoring.

This legislation, H.R. 2418, would re-authorize the National Organ Transplantation Act, which was enacted to provide for the establishment and operation of an Organ Procurement and Transplantation Network. This Network would be responsible for developing, establishing and maintaining medical criteria and standards for organ procurement and transplantation. This bill would also promote efforts to increase the supply of organs available for transplantations.

Every year, more than 20,000 people receive organ transplants in the United States. While we have made great strides in providing these life-saving procedures, only one in three candidates for organ transplants actually undergo surgery. In the last decade alone, the waiting lists for transplants have grown by over 300 percent. The key to solving the organ allocation crisis is to increase the supply of donor organs. H.R. 2418 encourages organ donation through new, innovative programs aimed at increasing the number of living donors and recognizing organ donors and their family members.

This legislation, H.R. 2418, would require the Secretary of Health and Human Services (HHS) to create a program to educate the public with respect to organ donations. This bill would also authorize a new grant program to cover the costs of travel and subsistence expenses for individuals who make living donations of their organs. In addition, H.R. 2418 acknowledges the advances in medical technology that have enabled transplantation of organs donated by living individuals to become a viable treatment option for an increasing number of patients.

This bill also provides some much needed clarification to the relationship between HHS and the Organ Procurement and Transplantation Network (OPTN) to reflect what Congress intended when it first established the network in 1984. Congress has consistently recognized that the management and formulation of organ donation and transplantation policies are best left in the hands of those who are directly affected—the medical community, patients and donors. The original 1984 legislation provided for a network that is a private sector entity receiving HHS assistance relative to contract funding. The 1984 law did not authorize HHS to establish medical criteria or policies for the network. This measure insures that organ allocation policies are decided locally.

Therefore, Mr. Chairman, I urge the Congress to pass this valuable legislation which not only promotes organ donation but also assures that those with medical expertise can work with patients, donors and their family members to develop the best organ policy.

Mr. BROWN of Ohio. Mr. Chairman, I yield 3¼ minutes to the gentleman from California (Mr. WAXMAN).

Mr. WAXMAN. Mr. Chairman, let me give some background on this issue. In the mid-1980s, we did not have any Federal involvement in this area, and we found that there was an ad hoc region-to-region system in place to procure organs and to distribute them. So we adopted a law to set up a national organ recruitment and distribution system so that anyone in this country would have a fair chance to get an organ when they needed that transplantation. The biggest problem we have in this country is we do not have enough organs for all the people that are waiting.

Now, this national law was created to establish a national system, and wherever an individual lived they would not be penalized because they lived in a particular location. We wanted this distribution system; and to work it all out, the government contracted with an organization called UNOS. UNOS is a private organization. They have a government contract to set up this system. Now, UNOS is a private organization, but they are supposed to be working on behalf of the public.

The Secretary proposed some changes on the allocation system to make it more equitable nationally. UNOS did not like that, and they spent a lot of their money lobbying against it. They argued that what is happening is there is a top-down system being put into place, and they stirred a lot of commotion against the administration's original proposal.

Well, after that proposal was offered, the Institute of Medicine did a study. They evaluated the situation and they came up with some good recommendations, which are part of the LaHood amendment, which I will be supporting later. The bill before us is not to incorporate the constructive proposals, but it is to say the original proposal of the Secretary was not good, the subsequent proposal we are not even going to look at, and we are going to turn the whole system over to UNOS, and UNOS will run it and UNOS will not have to be accountable to anybody.

They will, in effect, be the ones to take the place for the protection of the public interest. But there will be no public accountability on behalf of UNOS. UNOS would have veto power over every single aspect of our Nation's organ allocation system, everything from who gets an organ, who does not, to how it spends the fees patients have to pay UNOS to get an organ. UNOS could spend all its fees on expensive trips lobbying Congress or a new $7 million headquarters that they are actually talking about spending money on, and the American public would be powerless to stop them.

I think this bill is fatally flawed. We should never contract with a group and then turn over to them all this power. I think it is probably unconstitutional, but it is certainly a bad idea. Let us make sure that UNOS works for us and we do not just work for UNOS. What we want is a fair, equitable system.

Ironically, UNOS, on March 15, 2000, wrote to the gentleman from Michigan (Mr. DINGELL) saying UNOS and HHS are working closely together to ensure an effective and efficient implementation of these rules, including an organ allocation provision. Why should we step in now and say we are not going to let the Secretary be involved, we will just let UNOS decide this policy on their own?

I urge opposition to the bill.

Mr. BLILEY. Mr. Chairman, I yield 1 minute to the gentleman from Wisconsin (Mr. GREEN).

Mr. GREEN of Wisconsin. Mr. Chairman, I thank the chairman for yielding me this time.

As I suspected, today there is a lot of testimony aimed primarily at muddying the water. Let me boil this bill down, this good bill, to two simple facts.

Fact number one: Back in 1984, Congress tried to take politics out of this process and turned decision making over to health care professionals. That is this entity we keep hearing about, UNOS, as though it is some alien creature.

UNOS is comprised of health care professionals in this field. Now, unfortunately, the bureaucracy is striking back and wants to repoliticize the process.

Fact number two: There is a tremendous shortage of organs nationwide. But some States, like my home State of Wisconsin, are doing a great job through public education and have a high percentage of organ donations. Unfortunately, the bureaucracy wants to punish States like Wisconsin, which is doing a good job, and wants to put them down and send the organs elsewhere. Only in Washington would this make sense to some people.

Fact number one: Let us keep politics out of this process. Fact number two: Let us reward States that are doing a good job. Please support this bill.

Mr. BROWN of Ohio. Mr. Chairman, I yield 2 minutes to the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN).

Mrs. CHRISTENSEN. Mr. Chairman, I thank the gentleman for yielding me this time.

As a physician, I rise to register my strong opposition to H.R. 2418 and in support of the revised regulations that were established by the Department of

Health and Human Services which seek to address the inequities that exist in the current transportation policies. That is why I support the Moakley-LaHood-Peterson-Rush amendment.

The only determining factors that should be taken into account when deciding who gets a transplant and when is availability of the needed organ and medical necessity. We cannot allow that determination to be based on where one lives. That would not have helped my constituent, Vincent George, or the many others who are alive today because they were lucky enough to get an organ when it was medically necessary.

Mr. Chairman, people of color right now do not have equal access to organ transplantation. While I commend the sponsors of this bill for creating new incentives to encourage people to become organ donors, I cannot believe, as the supporters of this bill would have us to, that a person willing to be a donor would not want that organ to go to the person who needs it most.

This bill is seriously flawed because it ignores the recommendation of the independent study authorized by this body that there be Federal oversight of the OPTN, and also because it does not require standardization of patient listing practices and broader sharing of organs, which is essential to ensuring fairness in the system and optimal outcome for patients.

We cannot run the risk of allowing profit motives or politics to impact in any way in the organ allocation process. We must act to promote and protect the public health. I ask that the bill H.R. 2418 be opposed and that my colleagues support the access of all of the people of this country to a transplant whenever it becomes medically necessary no matter where they live. The Department must have oversight. I support the LaHood-Moakley-Rush-Peterson amendment.

Mr. BLILEY. Mr. Chairman, I yield myself 1 minute, because I am confused.

Some of my colleagues on the other side of the aisle, my ranking member, the gentleman from Michigan (Mr. DINGELL), and my good friend, the gentleman from California (Mr. WAXMAN), are saying that we should let the Secretary make these decisions as to where these things should go. Well, just a few months ago they were here on the floor arguing overwhelmingly for the Dingell-Norwood bill saying just the opposite; that when we have medical decisions they should be made by medical people, not by bureaucrats.

□ 1230

It is somewhat confusing. I also heard that healthy people are getting organs before the sick but that, yet, nobody can come forward with any names. We had the great baseball player Mickey Mantle mentioned. He had cirrhosis of the liver. He was a category three. As he got sicker and sicker, he moved up to category two, finally up to category one when he got his liver. He did not go to the head of the line.

Mr. Chairman, I reserve the balance of my time.

Mr. BROWN of Ohio. Mr. Chairman, how much time does each side have remaining?

The CHAIRMAN. The gentleman from Virginia (Mr. BLILEY) has 12½ minutes remaining, and the gentleman from Ohio (Mr. BROWN) has 7¾ minutes remaining.

Mr. BROWN of Ohio. Mr. Chairman, I reserve the balance of my time.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from Alabama (Mr. BACHUS).

(Mr. BACHUS asked and was given permission to revise and extend his remarks.)

Mr. BACHUS. Mr. Chairman, I love this body because we start off talking about all sorts of esoteric comments and then, as the debate narrows, we really get to what the issue is.

As the gentlewoman from the Virgin Islands (Ms. CHRISTENSEN) says, I support HHS; I support Donna Shalala. I believe that she ought to set policy and procedure for organ transplants.

Those of us who support H.R. 2418 think it ought to be where it has been for the last 16 years, with the medical community, with the transplant community, with the donors, with their families, with the professionals.

That is all this vote is about: Do we give oversight to the Federal Government, do we involve the bureaucracy, or do we allow the medical community to make medical decisions?

There are problems with the system. There is a shortage of organs. H.R. 2418 addresses that. But we have no shortage of Federal bureaucracy in the system. Let us keep it out. Let us keep it the best system in the world where it is today. Let us keep the government, let us not make it a Federal Government system. Let us keep it in the organ transplant community where the vast majority of medical professionals and patients and their families and volunteers say it ought to be.

Mr. Chairman, I support H.R. 2418 because I believe organ transplant science and organ transplant policy in the United States is the very best in the world. The bill before us today is designed to build on the achievements made since passage of the original National Organ Transplant Act in 1984, legislation that set up the current system for organ transplant policy in the United States.

You will hear today from others who will argue that they have a better plan. One that would give the Federal Government more control over transplantation. Unfortunately, their proposals would wrest authority from the very people, the organ transplant community, who are responsible for the modern system of organ transplantation that has saved thousands of lives.

The transplant community, not the Federal Government, was given this responsibility, under the 1984 NOTA law, because Congress believed that those who are on the front lines know what the best transplant policy should be, and because new developments and breakthroughs in medical science could quickly be implemented into the system. That is why we have the best transplant system in the world and that is why we need to continue to develop transplant policy in the private sector transplant community.

What we should do today is support H.R. 2418 because it is the one bill that recognizes the contributions made by the thousands of patients and their families, volunteers, and medical professionals that make up the transplant community. It keeps transplant policy decision-making in the private sector and it focuses on the real problem in transplant policy, the shortage of organs.

Since 1984, the number of people receiving organs has increased each year. In 1998, more than 21,000 Americans received the "Gift of Life." Unfortunately, donation rates are not keeping up with the demand for transplants and it is imperative that we in Congress do everything we can to encourage more organ donation. That is what H.R. 2418 seeks to do. I urge my colleagues to support this bill.

Mr. BROWN of Ohio. Mr. Chairman, I yield 1½ minutes to the gentleman from Michigan (Mr. DINGELL).

Mr. DINGELL. Mr. Chairman, there is a great misapprehension about what is going on here. The only thing that the Department of HHS has suggested to the UNOS people is that they should come forward with new allocation policies which are fair.

Now, why is that necessary? First of all, it is necessary to consider the fact that some patients are sick and are going to die if they do not get an organ transplant. There is also the need to consider the disparity that exists between minority groups and Caucasians. Unfortunately, minority groups are not infrequently waiting longer than are Caucasians.

It is also true that, under the allocation system now in place by UNOS, we are finding there are major differences between different parts of the country. For example, in two major liver transplant centers in Kentucky, one transplant center has waiting times of 38 days and the other 226 days. That needs to be addressed. In Louisiana, in one center it is 38 days. In another it is 226. In Michigan, the difference is 161 days and 401 days.

Imagine if one lives in the State where the wait is longer and imagine then what their vote would be on this particular piece of legislation. Because, in those areas, sick people are dying because they are not being fairly treated. That is what is at stake.

HHS has called on UNOS to come forward with a newer, fairer, better allocation system. And that is what UNOS is rejecting, and that is why we are opposing this particular legislation. We think that this should be done in a fair fashion and done under the direction of the Secretary, not under the direction of a self-serving contractor.

Mr. BLILEY. Mr. Chairman, I yield 1 minute to the gentleman from Oregon (Mr. WALDEN).

Mr. WALDEN of Oregon. Mr. Chairman, I rise today in support of this legislation. I do so both from a personal

standpoint and from a public-policy standpoint.

When I served in the Oregon legislature, I worked hard to reform our anatomical donation process so that everybody on their Oregon driver's license can list this on the back; so, indeed, if they are killed, they are immediately available if they want to have their organs transplanted.

I stand here today as a father whose son died waiting for a heart transplant. He never received that transplant but was in line to. He died before we had the opportunity to get him to where he could get that.

I want medical professionals making this decision, not the agency that brings us HCFA and regulations and bureaucracy. I want an effort that causes other people to sign up to be donors and to be active in this process to give the gift of life. That is best done through this legislation, Mr. Chairman.

Mr. BROWN of Ohio. Mr. Chairman, I reserve the balance of my time.

Mr. BLILEY. Mr. Chairman, how much time do I have remaining?

The CHAIRMAN. The gentleman from Virginia (Mr. BLILEY) has 9½ minutes remaining, and the gentleman from Ohio (Mr. BROWN) has 6¼ minutes remaining.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from Oklahoma (Mr. ISTOOK).

Mr. ISTOOK. Mr. Chairman, I support this bill. This bill will stop a power grab by the administration, one of the most distasteful power grabs that we have seen.

The administration says the Federal Government should decide and control what happens to their body when they die. If they want to donate an organ, then Uncle Sam's bureaucrats will take over to decide what is going to become of their heart, their kidneys, their liver; and they will decide who can get a transplant and who cannot.

It is tough enough for doctors and hospitals to have to make that decision on medical judgment. We do not need bureaucrats making it instead. So this most personal decision would become a Federal issue. States right now go to great lengths to encourage people to be organ donors.

Some, like Oklahoma, are very successful in this effort with driver's licenses and other ways of indicating their desire. Other States, well, they do not have as much success so they want the administration to help them, to help them reach over to where there are people willing to make organ donations and reach over and grab those and take them to where they want them, all through a Federal power grab, not by encouraging more people to donate but by saying, we are going to reach in and take from where people have a successful program underway.

Now, if their State wants a different system, then their State ought to have the ability to do so. Who says the Federal Government is in charge of everybody when we die? Who? Not me. Not the Constitution.

Do not let this power grab happen. Unless we pass the bill, Federal bureaucrats will become the masters of what happens to our bodies when we die: our lungs, our heart, our kidney, our liver, whatever it may be. It has to be approved by the Federal Government before we can be an organ donor. Stop the power grab. Do not cut off the incentive for the States. Support this bill.

Mr. BROWN of Ohio. Mr. Chairman, I yield 1 minute to my friend, the gentleman from Pennsylvania (Mr. MASCARA).

Mr. MASCARA. Mr. Chairman, I thank the gentleman for yielding me the time.

Mr. Chairman, I rise today to express my opposition to H.R. 2418, the Organ Procurement and Transplant Network Amendments of 1999.

This misguided approach to addressing our Nation's organ-sharing needs goes against logic. The current system is not working, and the bill preserves the status quo. An estimated 68,000 Americans are on the waiting list for an organ transplant. A new person is added to the list every 16 minutes, and each day 10 to 12 people die while still waiting for a transplant.

Last year, Congress asked the Institute of Medicine to examine the current organ-sharing system. The IOM report clearly supported restructuring the current system to be more responsive to the needs of the public. The bill does nothing to accomplish that.

I ask my colleagues to support the LaHood-Moakley substitute amendment and oppose H.R. 2618. Let us fix the organ-sharing system to help our Nation's sick, not hurt them.

Mr. BLILEY. Mr. Chairman, I yield 3 minutes to the gentleman from Pennsylvania (Mr. PETERSON).

Mr. PETERSON of Pennsylvania. Mr. Chairman, I thank the gentleman for yielding me the time, even though we may disagree on this policy.

Mr. Chairman, I rise to state that this bill needs further work. We have an amendment a little later that will do that.

I want to share with my colleagues from the Forbes report. Last year 485,000 Americans died while waiting for transplants. This does not even count people pulled off the list after they became too sick to handle a transplant.

It is a matter of debate how much lower the number of deaths would be if the system for obtaining and allocating organs were more rational, said the Forbes record, more rational.

The next one they stated, most doctors involved in the business fear offending UNOS lest their organ supply be affected. We have a system that has our physicians afraid to speak up for fear they will not get organs. We have heard today that it should be a totally independent network. And I say, responsible to whom? Show me anything that should not be responsible to somebody.

We also heard today that the sickest candidates first would cost lives. I am waiting for that evidence. I am waiting, because I believe that is a mistake, anybody who made that statement.

It says the decision should be in the hands of doctors and not in the hands of bureaucrats. Share with me, also, how urging the system to have a fair allocation system puts anything in the hands of bureaucrats. We are asking them do it a little better. We should.

I also heard today that all transplant centers in all States are all equally successful. Well, I want to share with my colleagues today, if they are going to have an organ transplant, look at how often they do it. Look at their success rate. My colleagues, they vary.

Each of us hope we never need an organ transplant. But we sure hope that economics should not rule over good medical decisions.

The amendments we are going to get will take what this bill bypassed, the report that was given to us by the Institute of Medicine. Allocation policies should be based on sound medical principles and valid scientific data. Allocations should be designed to share organs over as broad a geographical area as possible. It did not say how. It did not say how far. It said as far as possible.

I live 50 miles from a State border. I would hate to think because I live 50 miles outside of the State next to me I might not get an organ or somebody in that State might not get an organ because they were 50 miles outside of that State.

My colleagues, we need medical principles driving the system. There are huge flaws in the system. The legislation that is before us gives almost no oversight to anybody to the system.

We do not want bureaucrats; nobody wants bureaucrats making decisions. And bureaucrats will not make decisions. We, as a Congress, cannot let them make decisions. But we need economics not to drive this system. We need good medicine to drive this system. And if they do, we will amend this bill later and improve it.

Mr. BROWN of Ohio. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I would like to first reiterate as we close this debate the opposition to this bill from the administration and the belief from the Department of Justice that this bill is unconstitutional.

The Statement of Administration Policy says, ''The Administration strongly opposes House passage of H.R. 2418. It raises serious constitutional issues, would preserve existing inequities in the organ transplantation system, and could result in potential harm to patients. If H.R. 2418 were presented to the President in its current form'' it says in this Statement of Administration Policy, ''his senior advisors would recommend that he veto the bill.''

In a letter from the Justice Department to the Speaker of the House, the Assistant Attorney General writes, ''We believe that to the extent Congress intends to insulate the Network's

exercise of policy-making authority from the Secretary's supervision, the proposed legislation raises significant constitutional concerns. Nevertheless, even if the courts were to sustain the legislation in the face of a constitutional challenge, we would strongly oppose the bill's restrictions. As the bill seeks to remove from the executive branch important oversight functions, it appears to constitute a substantial and unnecessary intrusion into the executive branch's role of implementing Federal regulatory programs and to compromise the core governmental value of political accountability for policy decisions affecting the public.''

Mr. Chairman, I am pleased to hear my Republican colleagues talk over and over about how we should leave it to the medical profession to make medical decisions. We on this side wholeheartedly agree and are glad to see our colleagues finally coming around.

For the past 3 years, we have been concerned that HMO bureaucrats are making medical decisions, not doctors, and have been working with the gentleman from Georgia (Mr. NORWOOD) to change that.

We have a piece of legislation, the Patients' Bill of Rights, which would fix this problem and allow physicians with their patients to make these decisions. This bill is now in conference. My colleagues' words today give many of us on this side encouragement that we can actually achieve success in the conference committee on the Patients' Bill of Rights in this very important issue.

Mr. Chairman, this legislation in front of us today is fundamentally flawed. It turns our organ allocation system from representatives of the public, our elected and appointed officials, who are charged with representing the public and advocating and protecting the public interest, it turns those decisions over to a private bureaucratic organization which, in the end, has no real accountability to taxpayers.

Mr. Chairman, I urge my colleagues to follow the recommendations from the Institute of Medicine. I urge my colleagues to vote ''yes'' on the LaHood amendment, and I urge my colleagues to vote ''no'' on the underlying legislation.

Mr. Chairman, I yield back the balance of my time.

Mr. BLILEY. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, in closing, I would like to make three points why we should adopt this legislation. First of all, one of the speakers just recently in the well says there is nothing here to stop these people from making decisions, we just want them to make better decisions.

Well, who is to determine whether they make better decisions? Bureaucrats at HHS, not medical people, not doctors. They are the ones that would be making the decisions.

Congress, when we passed this originally, said, we want these decisions which most often determine life and death to be made by medical people devoid of politics. And that is why the overwhelming reason why we should adopt this bill.

We then heard about the Justice Department and questioning the Constitution. Well, does the sick chicken case still rule the roost?

The Department of Justice questions whether delegating public policy to a private entity violates the Constitution and whether Schechter Poultry Corporation v. United States (295 U.S. 495 (1935)) still serves as a barricade.

In 65 years, the court has not struck down as unconstitutional any such delegation. And, indeed, the late Justice Thurgood Marshall once wrote, ''The notion that the Constitution narrowly confines the power of Congress to delegate authority to administrative agencies, which was briefly in vogue in the 1930s, has been virtually abandoned by the Court for all practical purposes.''

□ 1245

These are red herrings, Mr. Chairman. This is a good bill. The gentleman from Oklahoma (Mr. ISTOOK) put it right. What this is is a power grab on the part of the administration to reward a couple of institutions to the detriment of the States. We should enact this resolution, and we should oppose the LaHood amendment.

Mr. SPENCE. Mr. Chairman, I am pleased that the House will today consider H.R. 2418, the ''Organ Procurement and Transplantation Network Amendments.'' I am proud to be a cosponsor of this important measure, and I rise in unequivocal support.

My friends at the United Network for Organ Sharing (UNOS) tell me that I am probably the longest living double lung transplant recipient in the world. My successful surgery, like the successful surgery that has been performed on other recipients more than 200,000 times since the early 1980's, was made possible by the hard work and dedication of this nation's transplant community. I am alive today because of the countless doctors, nurses, transplant coordinators, and other dedicated individuals who worked tirelessly for my survival. This is, indeed, a remarkable group of people.

These are the same people to whom Congress gave the enormous responsibility of operating the Organ Procurement and Transplant Network (OPTN) when organized in 1985. They have responded with the enthusiasm and dedication we expected, freely contributing more than 1.5 million man-hours to the effort. The result of their collective labors is a transplant system that is the envy of the world. It is fair, objective, and it is in the proper hands—the doctors, patients, donor families, and other experts who care most.

We suffer from a tragic shortage of organs. I commend Secretary Shalala for her attention to the important issue of organ donation. However, I fear that the plan promulgated by the Department of Health and Human Services (HHS) would not have the intended effect. Instead, the HHS plan would remove an integral element of the organ donor network—the intimate and private relationship between transplant professionals, patients, and donor families. The focus must be placed on increasing organ donation and organ donor awareness nationwide. H.R. 2418 addresses this problem by directing the Secretary to carry out a program to educate the public with respect to organ donation, with particular emphasis on the need for additional organs for transplant. I am also pleased to learn that this measure would authorize grants to cover the costs of travel and subsistence expenses for individuals who make living donations of their organs.

Mr. Chairman, it is vitally important that Congress reauthorize the NOTA. We must also ensure that the decision making process remain in the hands of the experts directly involved in the transplant community. I urge my colleagues to join me in supporting the ''Organ Procurement and Transplantation Network Amendments.''

Mr. POMEROY. Mr. Chairman, I rise in opposition to H.R. 2418, the Organ Procurement and Transplantation Network Act. I strongly support efforts to increase the number of organ donors and the supply of organs available for transplantation. I also believe that medical decisions should be made with input from the medical community. In trying to address these issues, however, H.R. 2418 brings up questions of constitutionality, competition, and financial abuse.

This measure would give the United Network for Organ Sharing (UNOS), the current Organ Procurement Transportation Network (OPTN) contractor, broad regulatory authority. It takes away all meaningful oversight from the Department of Health and Human Services, placing functions of a ''scientific, clinical, or medical nature'' within the sole authority of the OPTN. According to the Department of Justice, this raises ''significant constitutional concerns.'' A private entity cannot be granted regulatory authority without executive involvement.

H.R. 2418 also raises serious concerns regarding competitive practices. This measure would require that any new contractor selected by the Department of Health and Human Services to run the OPTN must receive the written endorsement of a majority of the network's contractors. This requirement protects UNOS, the long-standing contractor, from competition and violates the Federal Acquisition Regulation which mandates competition in all government contracts.

Our country has had a long-standing ban on the sale of organs, a ban that could be compromised if H.R. 2418 were to become law. The measure allows the OPTN to accept ''gifts of money or services'' from patients on transplant waiting lists, but fails to state that preferential treatment may not be given to these patients on the basis of their gifts. In effect, these patients could ''buy'' their way up the list and into a transplant for the right price.

Finally, I am concerned by a current trend among states to pass laws that give priority in organ transplantation to state residents over out-of-states residents, regardless of medical necessity. While we must continue to encourage organ donation nationwide, our intent must be to serve those with the greatest needs.

Mr. STARK. Mr. Chairman, I rise in opposition to H.R. 2418, the Organ Procurement and Transplantation Network Amendments of 1999 and in support of the amendment offered by Representatives LAHOOD, MOAKLEY, RUSH and JOHN PETERSON.

Without this bipartisan amendment, H.R. 2418 will result in needless deaths and is bad health policy.

More than 66,000 Americans currently await an organ. Every day about 13 people die waiting for a transplant. If we want to save lives, or nation's organ allocation system must be improved—unfortunately, H.R. 2418 is not the answer.

Organ allocation policies established by the United Network for Organ Sharing (UNOS), the current private contractor in charge of distributing organs procured for transplant, are inequitable. Under UNOS' system, patients with similar severities of illness are treated differently depending on their location. UNOS' system relies more on geography than medical urgency; consequently, organs are offered first to people in a local, regional area and only when there are no local patients available is the organ offered to sicker patients on a broader level. This means that some of the most deserving patients will not receive an organ solely because of where they live or where they seek treatment—which often times is a managed care plan's decision. H.R. 2418 would preserve these existing inequities.

In addition to permitting such inequities, H.R. 2418 has many other flaws. The President's senior advisors will recommend that he veto the bill in its current form. H.R. 2418 would strip public accountability over the nation's organ allocation system and give power to a private contractor—a delegation of federal authority that the Department of Justice cited as raising ''constitutional concerns.'' This bill would also provide the current, private contractor (UNOS) with a monopoly over the organ procurement contract, and contradict the recommendations recently set forth by the Institute of Medicine.

Further, H.R. 2418 protects centers from releasing comparative transplant center information to the general public and eliminates the scientific registry that currently provides this data. Last fall, the Department of Health and Human Services (HHS) publicized transplant center performance data. This comparative information includes all patients who came onto the transplant waiting list between April 1994 through the end of 1997. Although this data was adjusted to correct for differences in the severity of patient illness, the data still revealed a wide disparity in transplant center outcomes nationwide.

For example, the data show that under the current organ contractor's policies, a patient's chance of receiving an organ transplant depends on geography, not on medical need. For example, in some areas of California, patients had a 71% chance of receiving a liver transplant within one year, whereas patients had only a 24% of receiving a liver transplant in other areas of California.

In December 1999, the New England Journal of Medicine concluded that liver-transplantation centers in the U.S. that perform 20 or fewer transplantations per year have significantly higher mortality rates than those centers that perform more than 20 transplantations per year. If enacted, H.R. 2418 would make it difficult for patients to access such life-saving information about transplant centers.

In addition, H.R. 2418 contradicts the Congressionally-mandated National Academy of Science's Institute of Medicine (IOM) report. In 1998, Congress delayed Health and Human Service (HHS) regulations intended to improve organ allocation and transplantation nationwide and called upon the IOM to study the current system. The IOM's July 1999 report overwhelmingly supports the HHS regulations and directly contradicts H.R. 2418 provisions. For example, the IOM called for increased federal (HHS) oversight over the organ allocation system. In contrast, H.R. 2418 constitutes an unprecedented attempt to give a federal contractor control over life-and-death health care policy decisions as well as control of more than billions in taxpayer dollars—with no meaningful oversight by the government.

The HHS organ allocation regulation attempts to move to a system based on medical necessity instead of geography, with medical professionals making medical decisions about the best way to allocate the limited number of donated organs. The newly revised rule incorporates comments and recommendations from the IOM, UNOS, transplant and advocacy communities, patients, and the general public to ensure the neediest patients receive organs first—regardless of where they live. Further efforts to delay this rule will only cause needless deaths.

H.R. 2418 ignores the impartial view of the IOM scientists whereas the HHS regulation incorporates the impartial recommendations of the scientific community. In fact, a January 14, 2000 issue of Science magazine reports that IOM scientists had found no evidence supporting the objections raised against the HHS final regulation. The IOM found no evidence that distributing organs across broader areas might force smaller transplant centers to close, nor that broader allocation would drive down donation rates. And the IOM found no evidence that minorities and economically disadvantaged patients would be adversely affected by broader sharing of organs.

Also, the Science article concluded that Congress has continued to struggle with the federal regulations and ''the House Commerce Committee has approved a bill (H.R. 2418) which sides with opponents of the regulation and ignores the IOM recommendations for enhanced government oversight.'' Members should oppose H.R. 2418 and ensure that the Administration is permitted to implement the IOM-supported HHS organ allocation regulation.

The bipartisan amendment offered by Representatives LAHOOD, MOAKLEY, RUSH and JOHN PETERSON incorporates IOM recommendations to establish a fairer national organ allocation policy. This amendment would provide public accountability through meaningful federal oversight to ensure broader sharing of organs and assure that organ allocation decisions are based on medical necessity and not accidents of geography. This amendment would also make data widely available to the public and establish a scientific advisory board that is separate from the private organ contractor. The current organ allocation and transplantation system has created great disparities in organ allocation and transplantation. This amendment would end such unfairness.

A system that offers a level playing field to all patients no matter where they live is in everyone's best interest—medical urgency rather than geography should be the determining standard.

Oppose H.R. 2418 as well as any efforts to remove the Secretary's legitimate oversight authority and to give a private contractor a monopoly over the nation's organ allocation program. And support a fairer allocation system that bases transplant decisions on common medical criteria and pure professional medical opinion. The LaHood-Moakley-Rush-Peterson amendment will make these improvements a reality.

Mr. TERRY. Mr. Chairman, I rise in opposition to H.R. 2418, the Organ Procurement and Transplantation Network Amendments of 1999.

The University of Nebraska Medical Center in my District is one of the premier organ transplantation centers in the country. Gifted and dedicated doctors and surgeons at this center have performed more than 2,800 organ transplants on patients from all fifty states. They are recognized as world leaders for their exceptional success with high-risk liver transplants.

But there are simply not enough organs available to help all the terribly sick people who come to the Medical Center. And H.R. 2418 would make sure it stays that way.

Until this year, organs were allocated by geography instead of medical necessity. Transplant patients were placed on waiting lists that prioritized who gets organs first by state, then region, and lastly by nation. This geographical approach did not help the sickest patients get transplants. And it went against the intent of Congress that all Americans should be treated equitably.

The Secretary of Health and Human Services tried to increase organ sharing in 1998, but Congress delayed this plan until last year by asking for a study from the National Academy of Sciences. When this study came back, it supported the Secretary's efforts to allocate organs based on medical necessity. H.R. 2418 ignores this recommendation, and eliminates oversight and accountability of the organ network. This would make it even more difficult for main transplant centers like the Nebraska University Medical Center to get the organs needed to help patients. Without the Secretary's organ sharing plan, each patient who comes to the center for help is a big fish in a very small pond of ''Nebraska-only'' organ donors.

Mr. Chairman, it is imperative that precious, life-saving organs be allocated by medical necessity, not geography. I oppose H.R. 2418, and strongly urge my colleagues to do the same so sick and dying patients can get the organ transplants they need to live.

Mr. DAVIS of Virginia. Mr. Chairman, I rise today in support of H.R. 2418 the Organ Procurement and Transplantation Network Amendments of 1999. I feel very strongly about the importance of supporting the transplant community in their important life-saving work and am proud to have signed a pledge to be an organ donor myself.

My own sister-in-law was blessed with a second chance in life when she was fortunate enough to receive a successful kidney transplant. The lives of more than 20,000 men, women and children are now saved each year by liver, kidney, pancreas, heart, lung, intestine, eye and tissue transplants.

On April 2, 1998, Labor Health Services Secretary Shalala issued a regulation that would result in an unprecedented federal takeover of the organ transplant system. On three separate occasions, Congress imposed a moratorium that spanned almost two years. Now

that the moratorium has expired, and the final HHS rule has become effective, I am deeply concerned that the new rule will penalize patients in states, such as Virginia, which have been successful in increasing organ donation, by forcing the shipment of locally-procured organs out-of-state or even across the country. We must now act quickly to ensure that our successful organ transplant program is not harmed.

H.R. 2418 will ensure that decision-making regarding organ transplantation will remain, as originally intended under the National Organ Transplant Act, within the transplant community. The distribution of organs should be based on medical criteria established by the Network and not by the political forces that have tainted the promulgation of this new rule. It is the medical profession and transplant community that should be the authority in determining how to adjust allocations policies to account for new technology and new medical innovations.

Unfortunately, not every person in need of an organ or tissue is able to receive a life saving transplant. One American dies every three hours because of a shortage of donor organs, and nearly 50,000 Americans are on a national register awaiting organ and tissue transplants. The key to solving the organ allocation crisis is to increase the supply of donor organs. H.R. 2418 also addresses this problems by creating new incentives for people to become organ donors. Furthermore, this bill provides for studies to discover innovative and successful approaches to organ recovery and donation around the country.

I commend Chairman BLILEY, Chairman BILIRAKIS, and Representatives PALLONE and GREEN for their efforts in bringing this critical piece of legislation to the floor. And I urge my colleagues to vote in support of H.R. 2418 to ensure that life and death decisions involved in organ transplantation remain in the hands of the transplant community and the medical professionals involved in transplantation every day.

Mr. RILEY. Mr. Chairman, I rise today in support of H.R. 2418. This important legislation addresses a serious health concern—the shortage and accessibility of donor organs for transplantation.

Mr. Chairman, in my home state of Alabama, we have about 1,600 people currently awaiting an organ transplant. For many of these people, time is running out. However, instead of attempting to help them, the Department of Health and Human Services is playing unfairly with their lives.

H.R. 2418 will fix this dilemma in several ways. First, it will keep decisions about organ transplants in the hands of the local medical community, like the professionals at the University of Alabama at Birmingham, and away from Washington bureaucrats. Second, the legislation will encourage more people to donate their organs because they will be able to help those in their community first.

Mr. Chairman, it is clear that places like UAB can serve those needing organ transplants much better than HHS. I urge my colleagues to support this legislation and do our part to help them as well.

Mr. BLILEY. Mr. Chairman, I yield back the balance of my time.

The CHAIRMAN. All time for general debate has expired.

Pursuant to the rule, the committee amendment in the nature of a substitute printed in the bill shall be considered as an original bill for the purpose of amendment under the 5-minute rule and shall be considered read.

The text of the committee amendment in the nature of a substitute is as follows:

H.R. 2418

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Organ Procurement and Transplantation Network Amendments of 1999''.

SEC. 2. FINDINGS.

(a) IN GENERAL.—The Congress finds as follows:

(1) It is in the public interest to maintain and improve a system for promoting and supporting a central network in the private sector to assist organ procurement organizations and transplant centers in the distribution of organs among transplant patients and the provision of organ transplantation services, and to assure quality and facilitate collaboration among network members and individual medical practitioners participating in network activities.

(2) The Organ Procurement and Transplantation Network (''Network''), which was established in the private sector pursuant to a contract awarded by the Federal Government, should continue to be operated by a nonprofit private entity pursuant to a contract with the Federal Government.

(3) The Federal Government should continue to provide Federal oversight of and financial assistance for the services provided by the Network.

(4) The responsibility for developing, establishing, and maintaining medical criteria and standards for organ procurement and transplantation belongs in the private sector and is a function of the Network.

(5) The Federal Government should assist the efforts of the Network to serve patient and donor families in procuring and distributing organs.

(6) The Federal Government should carry out programs to educate the public with respect to organ donation, including the need to provide for an adequate rate of such donations.

(b) SENSE OF CONGRESS REGARDING FAMILY DISCUSSIONS OF ORGAN DONATIONS.—The Congress recognizes the importance of families pledging to each other to share their lives as organ and tissue donors and acknowledges the importance of discussing organ and tissue donation as a family.

(c) SENSE OF CONGRESS REGARDING LIVING DONATIONS OF ORGANS.—The Congress—

(1) recognizes the generous contribution made by each living individual who has donated an organ to save a life; and

(2) acknowledges the advances in medical technology that have enabled organ transplantation with organs donated by living individuals to become a viable treatment option for an increasing number of patients.

SEC. 3. ORGAN PROCUREMENT AND TRANSPLANTATION NETWORK.

(a) IN GENERAL.—Section 372 of the Public Health Service Act (42 U.S.C. 274) is amended to read as follows:

''ORGAN PROCUREMENT AND TRANSPLANTATION NETWORK

''SEC. 372. (a) IN GENERAL.—The Secretary shall by contract provide for the continuing operation of an Organ Procurement and Transplantation Network (in this section referred to as the 'Network'), which contract shall be awarded to a nonprofit private entity that has expertise and experience in organ procurement and transplantation. The Network shall meet the following requirements:

''(1) The Network shall be an independent, nonprofit private entity that is a separate legal entity from the entity to which such contract is awarded.

''(2) The Network shall in accordance with criteria under subsection (b)(3) include as members qualified organ procurement organizations (as described in section 371(b)), transplant centers, and other entities that have a demonstrated interest in the fields of organ donation or transplantation. (Such members are in this section referred to as 'Network participants'.)

''(3) The Network shall have a board of directors (in this section referred to as the 'Board'). The Board shall, after consultation with Network participants, establish the policies for carrying out the functions described in this section for the Network.

''(4) The Board shall be in accordance with the following:

''(A) The Board shall include representatives of qualified organ procurement organizations, transplant centers, voluntary health associations, and the general public, including a reasonable proportion of the members of the Board who are patients awaiting a transplant or transplant recipients or individuals who have donated an organ or family members of patients, recipients or donors.

''(B) The Board shall establish membership categories and qualifications with respect to serving on the Board, and shall have exclusive authority to admit individuals to membership on the Board. Transplant surgeons and transplant physicians shall comprise not less than 50 percent of the membership of the Board. The Board shall be limited to a total of 42 members.

''(C) The Board shall have an executive committee, and such other committees as the Board determines to be appropriate.

''(D) The chair of each such committee shall be selected so as to ensure the continuity of leadership for the Board.

''(b) GENERAL FUNCTIONS.—The following applies to the Network:

''(1) The Network shall establish and operate a national system to match organs and individuals who need organ transplants, especially individuals whose immune system makes it difficult for them to receive organs.

''(2) The national system shall maintain one or more lists of individuals who need organ transplants, shall be operated in accordance with established medical criteria, shall be operated through the use of computers, and may function on a regionalized basis.

''(3) The Network shall establish criteria for being a Network participant, shall establish medical criteria for listing patients and for allocating organs, and shall provide to members of the public an opportunity to comment with respect to such criteria.

''(4) The Network shall maintain a twenty-four-hour telephone and computer service to facilitate matching organs with individuals included in the list.

''(5) The Network shall assist organ procurement organizations in the distribution of organs. The distribution of organs shall be based on medical criteria established by the Network, and also shall be based on equity and ethics without regard to economic status of those awaiting organ transplants and without political control or influence.

''(6) The Network shall adopt and use standards of quality for the acquisition and transportation of donated organs, including standards regarding the transmission of infectious diseases.

''(7) The Network shall prepare and distribute, on a regionalized basis (and, to the extent practicable, among regions or on a national basis), samples of blood sera from individuals who are included on the list and whose immune system makes it difficult for them to receive organs, in order to facilitate matching the compatibility of such individuals with organ donors.

''(8) The Network shall coordinate, as appropriate, the transportation of organs from organ procurement organizations to transplant centers.

''(9) The Network shall work actively to increase the supply of donated organs.

''(10) The Network shall establish criteria, policies, and procedures to address the disparity in mortality rates between children and adults while waiting for organ transplants.

''(c) SCIENTIFIC REGISTRY.—

''(1) IN GENERAL.—The Network shall maintain a scientific registry of patients awaiting organ transplantation, persons from whom organs are removed for transplantation, and organ transplant recipients for the ongoing evaluation of the scientific and clinical status of organ transplantation.

''(2) REPORTS.—The Network shall prepare for inclusion in the report under section 375 an analysis of scientifically and clinically valid information derived from the scientific registry under paragraph (1).

''(d) INFORMATION AND DATA.—

''(1) IN GENERAL.—The Network shall—

''(A) provide information to physicians and other health professionals regarding organ donation and transplantation; and

''(B) collect, analyze, and annually publish data concerning organ donation and transplantation.

''(2) INFORMATION FOR PATIENTS AND GENERAL PUBLIC.—The Network shall make available to patients in need of organ transplants information in accordance with the following:

''(A) The information shall be transplant-related information specific to transplant centers that are Network participants, which information has been determined by the Network to be scientifically and clinically valid.

''(B) The information shall be designed to assist patients and referring physicians in choosing a transplant center, including information on the supply of and demand for organs.

''(C) With respect to the patient involved, the information shall (taking into account patients in similar medical circumstances) include the following as applied to specific transplant centers:

''(i) The probability of receiving an organ transplant.

''(ii) The length of time that similarly situated patients have waited historically to receive a transplant.

''(iii) Medical outcomes for similarly situated patients, which information shall be adjusted to reflect the medical risk factors for such patients.

''(D) With respect to the patient involved, the information shall include the information described in subparagraph (C) as applied to the service areas of specific qualified organ procurement organizations (other than such areas in which there is only one transplant center).

''(E) Information under this paragraph shall be updated not less frequently than once a year.

''(3) ANNUAL PUBLIC REPORT.—The Network shall annually make available to the public a report on the overall status of organ procurement and transplantation.

''(4) CONFIDENTIALITY.—Except for the release of information that is authorized under paragraph (2) or (3) by the Network, neither the Network nor the Secretary has authority to release the following information (unless authorized in writing by the patient or other entity with which the data is concerned):

''(A) Information that permits direct or indirect identification of any patient who is waiting for a transplant, or who is an organ transplant patient or recipient of an organ.

''(B) Information that permits direct or indirect identification of any potential or actual organ donors.

''(C) Information that permits direct or indirect identification of participants in Network deliberations or determinations related to practitioner or institutional qualifications, due process proceedings or peer review activities, except for information announcing final decisions of the Network.

This paragraph may not be construed as prohibiting the disclosure of information within the Network, including information disclosed in the course of interactive organ sharing operations within the Network.

''(e) STUDIES.—

''(1) IN GENERAL.—The Network shall carry out studies and demonstration projects for the purpose of improving procedures for organ procurement and allocation, including but not limited to projects to examine and attempt to increase transplantation among populations with special needs or limited access to transplantation, and among children.

''(2) CERTAIN TECHNOLOGIES.—The Network may study the impact of possible transplantation of animal organs (xenotransplantation) and other technologies to determine the impact upon, and prevent negative effects on, the fair and effective use of human allograft organs.

''(f) QUALITY ASSURANCE; MONITORING OF NETWORK PARTICIPANTS.—The Network shall monitor the operations of Network participants to the extent appropriate for determining whether the participants are maintaining compliance with criteria under subsection (b)(3). In monitoring a Network participant under the preceding sentence, the Network shall inform the participant of any findings indicating noncompliance by the participant.

''(g) QUALITY ASSURANCE; PEER REVIEW PROCEEDINGS.—

''(1) IN GENERAL.—The Network shall develop a peer review system for assuring that members of the Network comply with criteria under subsection (b)(3).

''(2) NONCOMPLIANCE.—

''(A) PAYMENT OF DAMAGES.—The Network shall require that, as a condition of being a Network participant, each such participant agree that the Network may, through a peer review proceeding under paragraph (1), require the participant to pay damages for the failure of the participant to comply with criteria under subsection (b)(3). The Network shall establish procedures to ensure that such proceedings are conducted in an impartial manner, with adequate opportunity for the Network participant involved to receive a hearing. The Network shall identify various types of violations of such criteria and specify the maximum amount of damages that the Network may under this subparagraph require a Network participant to pay for the type of violation involved.

''(B) RESTRICTING ACCESS TO ALLOCATION SYSTEM.—If under subparagraph (A) it has been determined that a Network participant has engaged in substantial violations of criteria under subsection (b)(3), the Network may restrict the extent to which such participant is permitted to receive allocations of organs through the Network.

''(C) STATUS OF NETWORK PARTICIPANTS WITH RESPECT TO VIOLATIONS.—Subject to paragraph (3), the Network may take actions to make the public aware of the extent to which a Network participant has been required to pay damages under subparagraph (A) or has been the subject of restrictions under subparagraph (B).

''(3) CONFIDENTIALITY.—With respect to a peer review proceeding under paragraph (1), neither the Network nor the Secretary has authority to release data or information to the public relating to the proceedings without the written permission of all the parties involved, except that if damages under paragraph (2) are required to be paid, the requirement may be publicly announced after the conclusion of the proceeding.

''(h) ADMINISTRATIVE PROVISIONS.—

''(1) LIMITATION ON AMOUNT OF CONTRACT.—The amount provided under a contract under subsection (a) in any fiscal year may not exceed $6,000,000 for the operation of the Network, including the scientific registry under subsection (c). Such limitation does not apply to amounts provided under the contract for increasing organ donation and procurement.

''(2) RELATIONSHIP BETWEEN SECRETARY AND NETWORK.—The administrative and procedural functions described in this section for the Network shall be carried out in accordance with the mutual agreement of the Secretary and the Network. For purposes of the preceding sentence, functions that are scientific, clinical, or medical in nature are not administrative or procedural functions and are within the sole discretion of the Network. With respect to the programs under titles XVIII and XIX of the Social Security Act, this section may not be construed as having any legal effect on such programs, except to the extent that section 1138 of such Act, or any other provision of such Act, provides otherwise.

''(3) NONFEDERAL ASSETS OF NETWORK.—

''(A) IN GENERAL.—No assets in the possession of the Network or revenues collected by the Network, other than amounts appropriated under section 378, shall be considered or be treated as Federal property, Federal revenues, or program funds pursuant to a Federal contract, nor shall such assets, revenues, or nonappropriated funds be subject to restriction or control by the Secretary, nor shall any member of the Network be required by the Secretary to pay any fees to the Network, nor shall the Secretary be authorized to collect or authorize collection of service fees with respect to the Network or the scientific registry under subsection (c).

''(B) GIFTS.—This section does not prohibit the Network from accepting gifts of money or services, including gifts to carry out activities to provide for an increase in the rate of organ donation.

''(4) COMMUNITY ENDORSEMENT OF CONTRACT RECIPIENT.—In the case of any contract under subsection (a) that is awarded after the date of the enactment of the Organ Procurement and Transplantation Network Amendments of 1999, the Secretary shall select an applicant to receive the contract from among applicants that have the written endorsement of a majority of the combined total number of transplant centers and qualified organ procurement organizations that are Network participants (without regard to whether such centers or organizations endorse more than one applicant for the contract).

''(5) CHANGE IN CONTRACT RECIPIENT.—With respect to the expiration of the period during which a contract under subsection (a) is in effect, if the Secretary makes a determination to award the contract to a different entity than the entity to which the previous contract under such subsection was awarded, the Secretary shall publish in the Federal Register a notice that such change in the administration of the Network will take place, and the change may not take effect any sooner than the expiration of the six-month period beginning on the date on which the notice is so published. Such a change does not affect the membership status of any Network participant, or the membership status of any individual who serves on the Board (other than any membership position that is predicated solely on being a representative of the current contractor under subsection (a)).

''(i) ADDITIONAL PROCEDURES REGARDING OVERSIGHT AND PUBLIC ACCOUNTABILITY.—For purposes of providing oversight of and public accountability for the operation of the Network, the Secretary shall establish procedures for—

''(1) conducting public hearings and receiving from interested persons comments regarding criteria of the Network and critical comments relating to the manner in which the Network is carrying out its duties under this section;

''(2) providing such comments to the Network and receiving responses from the Network; and

''(3) the consideration by the Secretary of such comments.

''(j) EVALUATIONS BY GENERAL ACCOUNTING OFFICE.—

''(1) IN GENERAL.—The Comptroller General of the United States shall periodically conduct

evaluations of the Network, including the structure and function of the Network and the relationship between the Secretary and the nonprofit private entity that under subsection (a) operates the Network. The first such evaluation shall be completed not later than one year after the date of the enactment of the Organ Procurement and Transplantation Network Amendments of 1999, and such an evaluation shall be completed not later than every second year thereafter.

''(2) INPUT FROM FIELD.—In conducting evaluations under paragraph (1), the Comptroller General shall consult with organizations that represent transplant surgeons, transplant physicians, transplant centers, and qualified organ procurement organizations, and with other experts in the field of organ transplantation, including experts who are not members of the Board of the Network or of the executive structure of the contractor under subsection (a) .

''(3) PROCEDURES OF NETWORK.—The Network shall establish procedures for coordinating with the Comptroller General for purposes of evaluations under paragraph (1).

''(4) REPORTS TO CONGRESS.—

''(A) COMPTROLLER GENERAL.—The Comptroller General shall prepare reports describing the findings of evaluations under paragraph (1) and shall submit such reports to the Committee on Commerce of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate. The Comptroller General shall provide a copy of each such report to the Network.

''(B) NETWORK.—Not later than 180 days after the date on which a report is submitted under subparagraph (A), the Network shall submit to each of the committees specified in such subparagraph a report describing any actions the Network has taken in response to the report under subparagraph (A).''.

(b) RULE OF CONSTRUCTION.—The amendments made by this Act may not be construed as affecting the duration of the contract under section 372 of the Public Health Service Act that was in effect on the day before the date of the enactment of this Act.

SEC. 4. ADDITIONAL AMENDMENTS.

(a) IN GENERAL.—Part H of title III of the Public Health Service Act (42 U.S.C. 273 et seq.) is amended—

(1) by striking section 373;

(2) in section 374—

(A) in subsection (b)(1), by inserting after ''organization'' the following: ''and other organizations for the purpose of increasing the supply of transplantable organs'';

(B) in subsection (c), by striking ''or 373'' each place such term appears; and

(C) in subsection (d), by amending paragraph (2) to read as follows:

''(2) The term 'organ', with respect to transplantation into humans, means the human or other animal kidney, liver, heart, lung, pancreas, and any other organ (other than human corneas and eyes) specified by the Secretary by regulation. For purposes of section 372(c), such term includes bone marrow.'';

(3) in section 375—

(A) in paragraph (1), by striking ''this part'' and inserting ''this section''; and

(B) in paragraph (4)—

(i) by redesignating clauses (i) and (ii) as subparagraphs (A) and (B), respectively; and

(ii) in subparagraph (B) (as so redesignated), by striking ''comparative costs and patient outcomes'' and inserting ''comparative patient outcomes'';

(4) in section 376—

(A) by striking ''the Secretary'' and inserting ''the Organ Procurement and Transplantation Network under section 372''; and

(B) by striking ''Committee on Energy and Commerce'' and inserting ''Committee on Commerce''; and

(5) by striking section 377.

(b) REDESIGNATIONS.—Part H of title III of the Public Health Service Act, as amended by subsection (a) of this section, is amended by redesignating sections 374 through 376 as sections 373 through 375, respectively.

(c) PERFORMANCE STANDARDS.—Section 371(b)(1) of the Public Health Service Act (42 U.S.C. 273(b)(1)) is amended—

(1) by redesignating subparagraphs (D) through (G) as subparagraphs (E) through (H), respectively;

(2) by moving subparagraph (F) (as so redesignated) two ems to the left; and

(3) by inserting after subparagraph (C) the following:

''(D) notwithstanding any other provision of law, has met the other requirements of this subsection and has been certified or recertified by the Secretary as meeting the performance standards to be a qualified organ procurement organization through a process which—

''(i) granted certification or recertification within the previous 4 years with such certification in effect as of October 1, 1999, and remaining in effect through the earlier of—

''(I) January 1, 2002, or

''(II) the completion of recertification under the requirements of clause (ii); or

''(ii) is defined through regulations promulgated by the Secretary not later than January 1, 2002, which—

''(I) require recertifications of qualified organ procurement organizations not more frequently than once every 4 years;

''(II) rely on performance measures that are based on empirical evidence of organ donor potential and other related factors in each service area of qualified organ procurement organizations;

''(III) provide for the filing and approval of a corrective action plan by a qualified organ procurement organization that fails to meet the performance standards and a grace period of not less than 3 years during which such organization can implement the corrective action plan without risk of decertification; and

''(IV) provide for a qualified organ procurement organization to appeal a decertification to the Secretary on substantive and procedural grounds;''.

SEC. 5. PAYMENT OF TRAVEL AND SUBSISTENCE EXPENSES INCURRED TOWARD LIVING ORGAN DONATION.

Part H of title III of the Public Health Service Act, as amended by section 4(b) of this Act, is amended by inserting after section 375 the following section:

''PAYMENT OF TRAVEL AND SUBSISTENCE EXPENSES INCURRED TOWARD LIVING ORGAN DONATION

''SEC. 376. (a) IN GENERAL.—The Secretary may make awards of grants or contracts to States, transplant centers, qualified organ procurement organizations under section 371, or other public or private entities for the purpose of—

''(1) providing for the payment of travel and subsistence expenses incurred by individuals toward making living donations of their organs (in this section referred as 'donating individuals'); and

''(2) in addition, providing for the payment of such incidental nonmedical expenses that are so incurred as the Secretary determines by regulation to be appropriate.

''(b) ELIGIBILITY.—

''(1) IN GENERAL.—Payments under subsection (a) may be made for the qualifying expenses of a donating individual only if—

''(A) the State in which the donating individual resides is a different State than the State in which the intended recipient of the organ resides; and

''(B) the annual income of the intended recipient of the organ does not exceed $35,000 (as adjusted for fiscal year 2001 and subsequent fiscal years to offset the effects of inflation occurring after the beginning of fiscal year 2000).

''(2) CERTAIN CIRCUMSTANCES.—Subject to paragraph (1), the Secretary may in carrying out subsection (a) provide as follows:

''(A) The Secretary may consider the term 'donating individuals' as including individuals who in good faith incur qualifying expenses toward the intended donation of an organ but with respect to whom, for such reasons as the Secretary determines to be appropriate, no donation of the organ occurs.

''(B) The Secretary may consider the term 'qualifying expenses' as including the expenses of having one or more family members of donating individuals accompany the donating individuals for purposes of subsection (a) (subject to making payment for only such types of expenses as are paid for donating individuals).

''(c) LIMITATION ON AMOUNT OF PAYMENT.—

''(1) IN GENERAL.—With respect to the geographic area to which a donating individual travels for purposes of subsection (a), if such area is other than the covered vicinity for the intended recipient of the organ, the amount of qualifying expenses for which payments under such subsection are made may not exceed the amount of such expenses for which payment would have been made if such area had been the covered vicinity for the intended recipient, taking into account the costs of travel and regional differences in the costs of living.

''(2) COVERED VICINITY.—For purposes of this section, the term 'covered vicinity', with respect to an intended recipient of an organ from a donating individual, means the vicinity of the nearest transplant center to the residence of the intended recipient that regularly performs transplants of that type of organ.

''(d) RELATIONSHIP TO PAYMENTS UNDER OTHER PROGRAMS.—An award may be made under subsection (a) only if the applicant involved agrees that the award will not be expended to pay the qualifying expenses of a donating individual to the extent that payment has been made, or can reasonably be expected to be made, with respect to such expenses—

''(1) under any State compensation program, under an insurance policy, or under any Federal or State health benefits program; or

''(2) by an entity that provides health services on a prepaid basis.

''(e) DEFINITIONS.—For purposes of this section:

''(1) The term 'covered vicinity' has the meaning given such term in subsection (c)(2).

''(2) The term 'donating individuals' has the meaning indicated for such term in subsection (a)(1), subject to subsection (b)(2)(A).

''(3) The term 'qualifying expenses' means the expenses authorized for purposes of subsection (a), subject to subsection (b)(2)(B).

''(f) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of carrying out this section, there is authorized to be appropriated $5,000,000 for each of the fiscal years 2000 through 2005.''.

SEC. 6. PUBLIC AWARENESS; STUDIES AND DEMONSTRATIONS.

Part H of title III of the Public Health Service Act, as amended by section 5 of this Act, is amended by inserting after section 376 the following section:

''PUBLIC AWARENESS; STUDIES AND DEMONSTRATIONS

''SEC. 377. (a) PUBLIC AWARENESS.—The Secretary shall (directly or through grants or contracts) carry out a program to educate the public with respect to organ donation, including the need to provide for an adequate rate of such donations.

''(b) STUDIES AND DEMONSTRATIONS.—The Secretary may make grants to public and nonprofit private entities for the purpose of carrying out studies and demonstration projects with respect to providing for an adequate rate of organ donation.

''(c) ANNUAL REPORT TO CONGRESS.—The Secretary shall annually submit to the Congress a report on the activities carried out under this

section, including provisions describing the extent to which the activities have affected the rate of organ donation.

''(d) AUTHORIZATION OF APPROPRIATIONS.—

''(1) IN GENERAL.—For the purpose of carrying out this section, there are authorized to be appropriated $10,000,000 for fiscal year 2000, and such sums as may be necessary for each of the fiscal years 2001 through 2005. Such authorization of appropriations is in addition to any other authorizations of appropriations that is available for such purpose.

''(2) STUDIES AND DEMONSTRATIONS.—Of the amounts appropriated under paragraph (1) for a fiscal year, the Secretary may not obligate more than $2,000,000 for carrying out subsection (b).''.

SEC. 7. AUTHORIZATION OF APPROPRIATIONS.

Section 378 of the Public Health Service Act (42 U.S.C. 274g) is amended to read as follows:

''AUTHORIZATION OF APPROPRIATIONS FOR ORGAN PROCUREMENT AND TRANSPLANTATION NETWORK

''SEC. 378. (a) OPERATION OF NETWORK.—For the purpose of providing for the Organ Procurement and Transplantation Network under section 372, including the scientific registry, there are authorized to be appropriated $6,000,000 for fiscal year 2000, and such sums as may be necessary for each of the fiscal years 2001 through 2005.

''(b) INCREASING ORGAN DONATION AND PROCUREMENT.—For the purpose of increasing organ donation and procurement through the Organ Procurement and Transplantation Network under section 372, there are authorized to be appropriated such sums as may be necessary for each of the fiscal years 2000 through 2005. Such authorization of appropriations is with respect to such purpose in addition to the authorization of appropriations established in subsection (a).''.

SEC. 8. EFFECTIVE DATE.

The amendments made by this Act take effect October 1, 1999, or upon the date of the enactment of this Act, whichever occurs later.

The CHAIRMAN. No amendment to that amendment is in order except those printed in House Report 106–557. Each amendment may be offered only in the order printed in the report, by a Member designated in the report, shall be considered read, shall be debatable for the time specified in the report, equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question.

The Chairman of the Committee of the Whole may postpone a request for a recorded vote on any amendment and may reduce to a minimum of 5 minutes the time for voting on any postponed question that immediately follows another vote, provided that the time for voting on the first question shall be a minimum of 15 minutes.

It is now in order to consider amendment No. 1 printed in House Report 106–557.

AMENDMENT NO. 1 OFFERED BY MS. DEGETTE

Ms. DEGETTE. Mr. Chairman, I offer an amendment.

The CHAIRMAN. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 1 offered by Ms. DEGETTE:

Page 8, strike lines 11 through 14 and insert the following:

''(10) The Network shall recognize the differences in health and in organ transplantation issues between children and adults throughout the system and adopt criteria, policies, and procedures that address the unique health care needs of children.

Page 29, line 18, redesignate section 8 as section 9 and insert after line 17 the following:

SEC. 7. STUDY REGARDING IMMUNOSUPPRESSIVE DRUGS.

(a) IN GENERAL.—The Secretary of Health and Human Services (referred to in this section as the ''Secretary'') shall provide for a study to determine the costs of immunosuppressive drugs that are provided to children pursuant to organ transplants and to determine the extent to which health plans and health insurance cover such costs. The Secretary may carry out the study directly or through a grant to the Institute of Medicine (or other public or nonprofit private entity).

(b) RECOMMENDATIONS REGARDING CERTAIN ISSUES.—The Secretary shall ensure that, in addition to making determinations under subsection (a), the study under such subsection makes recommendations regarding the following issues:

(1) The costs of immunosuppressive drugs that are provided to children pursuant to organ transplants and to determine the extent to which health plans, health insurance and government programs cover such costs.

(2) The extent of denial of organs to be released for transplant by coroners and medical examiners.

(3) The special growth and developmental issues that children have pre- and post-organ transplantation.

(4) Other issues that are particular to the special health and transplantation needs of children.

(c) REPORT.—The Secretary shall ensure that, not later than December 31, 2000, the study under subsection (a) is completed and a report describing the findings of the study is submitted to the Congress.

The CHAIRMAN. Pursuant to House Resolution 454, the gentlewoman from Colorado (Ms. DEGETTE) and a Member opposed each will control 5 minutes.

Mr. BLILEY. Mr. Chairman, I am not in opposition to the amendment, but I claim the time in opposition.

The CHAIRMAN. Without objection, the gentleman from Virginia (Mr. BLILEY) will control the time in opposition.

There was no objection.

The CHAIRMAN. The Chair recognizes the gentlewoman from Colorado (Ms. DEGETTE).

Ms. DEGETTE. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, this amendment addresses an important and often forgotten aspect of organ transplantation, pediatric organ transplantation. The first part of the amendment is technical in nature and it amends an amendment that I passed in voice vote in the Committee on Commerce which requires the Organ Transplantation Network to adopt criteria, policies, and procedures that address the unique health care needs of children with respect to pretransplantation mortality rates.

Presently, children constitute the vast minority of organ transplantation cases as children tend to be healthier and less in need of organ transplants than adults. Despite this, however, the pretransplantation mortality rate among children in 1998 was much higher, an estimated 55 percent higher than adults. According to the United Network for Organ Sharing or UNOS, quote, among very young children, the death rates were much higher than for other children or adults, particularly on the liver, heart, and lung waiting lists.

However, because children have unique health, growth and developmental issues prior to transplantation and post-transplantation, the language needs to be broader than the amendment we passed in the Committee on Commerce. Therefore this portion of the amendment simply strikes the language specifically addressing children's unique needs in the pretransplantation period, making it more general to the full range of organ transplantation.

This new language has the full support of the entire pediatric organ transplantation community across the country, including the National Association of Children's Hospitals, the American Academy of Pediatrics, and the American Society of Pediatric Nephrology. Consumer groups and others in the organ transplantation field, including the American Society for Transplantation and UNOS are also supportive. In fact, I know of no stated opposition to the new language; and it is something that the proponents of this legislation can and I believe do support.

The second part of the amendment, Mr. Chairman, would require a study of the unique health care needs of children, including growth and developmental issues and immunosuppressive drug coverage in organ transplantation. This study will follow up on a congressionally mandated study of immunosuppressive drug coverage for the Medicare population which, obviously since it was the Medicare population, largely does not address children.

Mr. Chairman, this is the study that was done. Only a very small percentage of this study addressed kids and in that case only a very small percent of children's transplantation. The other seminal study in the field does not address pediatric organ transplantation at all. Given the fact that a substantially higher percentage of children who are on pediatric lists are dying, I think it is essential that we complete these studies and that we complete them soon. The study will give a more complete picture of the full range of problems in pediatric organ transplantation and will give us invaluable assistance as we move down the road and try to figure out what an allocation is.

Mr. Chairman, I urge the adoption of this important amendment to improve the lives of children across the country who are in need of organ transplants.

Mr. Chairman, I reserve the balance of my time.

Mr. BLILEY. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I rise in support of this amendment. This amendment is similar to one offered and accepted in committee by the gentlewoman from

Colorado. This amendment ensures that our Nation's organ transplantation system recognizes our children's unique health care needs. This provision provides for a study of immunosuppressive drug coverage for children and on children's unique growth, developmental health and organ transplant needs.

As many of my colleagues know, at the end of the last session, the House passed H.R. 3075, the Medicare, Medicaid and S-CHIP Balanced Budget Refinement Act of 1999. Due to Committee on Commerce efforts, this bill was strengthened by adding $200 million to pay for immunosuppressive drugs needed by organ transplant patients to prevent their body from rejecting the new organ. Medicare currently only covers these drugs for 36 months. This bill took a first step at addressing that issue and allows us to provide more coverage for needy organ transplant patients. Access to these drugs can literally make the difference between life and death.

It is time we extend our efforts to America's children and recognize their unique organ transplant needs. I urge my colleagues to support the amendment.

Mr. Chairman, I reserve the balance of my time.

Ms. DEGETTE. Mr. Chairman, I am delighted to yield whatever time I may have remaining to my colleague, the gentleman from Pennsylvania (Mr. PETERSON) who has been a real partner with me on these pediatric transplant organ issues and to whom I owe a lot of thanks.

The CHAIRMAN pro tempore (Mr. EWING). The gentleman from Pennsylvania (Mr. PETERSON) is recognized for 1½ minutes.

Mr. PETERSON of Pennsylvania. Mr. Chairman, I thank the gentlewoman from Colorado for her fine work on this bill. It was a delight to work with her and her staff as we introduced it just a short time ago. I would like to thank the gentleman from Virginia for his acceptance and his support of this amendment, because it is vital.

When we stop and think about it, little children whose organs are still growing, it really is a different medical situation than it is with adults like ourselves where our organs are finished growing. It makes a difference what type of organ they get more than it does with adults.

It is more important that we do it right with children who have a whole life ahead of them, not just a couple of years but a whole life. As we heard the sad story a short while ago, I think the gentleman from Oregon or Wisconsin, I forget which it was, who lost his son because a heart was not available, I think it is important that an emphasis be put, that the studies be done, that we analyze the needs of children, that we know exactly what works best from the experts who do it and that we make sure that we follow all of those guidelines, that we make sure we get those children's organs to children when possible and we give them their very best chance at living an entire life because of that organ.

Mr. Chairman, this whole debate today is about extending life and delaying death, with children and with adults. We need to have the very best medical evidence possible as we make each and every one of those decisions.

Mr. BLILEY. Mr. Chairman, I urge the adoption of the amendment.

Mr. Chairman, I have no further requests for time, and I yield back the balance of my time.

The CHAIRMAN pro tempore. The question is on the amendment offered by the gentlewoman from Colorado (Ms. DEGETTE).

The question was taken; and the Chairman pro tempore announced that the ayes appeared to have it.

Mr. LAHOOD. Mr. Chairman, I demand a recorded vote.

The CHAIRMAN pro tempore. Pursuant to House Resolution 454, further proceedings on the amendment offered by the gentlewoman from Colorado (Ms. DEGETTE) will be postponed.

The CHAIRMAN pro tempore. It is now in order to consider amendment No. 2 printed in House Report 106–557.

AMENDMENT NO. 2 OFFERED BY MR. LUTHER

Mr. LUTHER. Mr. Chairman, I offer an amendment.

The CHAIRMAN. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 2 offered by Mr. LUTHER:

Page 8, after line 14, insert the following subsection (and redesignate subsequent subsections accordingly):

''(c) COMPLIANCE WITH ORGAN ALLOCATION POLICIES.—No State or local governing entity shall establish or continue in effect any law, rule, regulation, or other requirement that would restrict in any way the ability of any transplant hospital, organ procurement organization, or other party to comply with organ allocation policies of the Network.

The CHAIRMAN pro tempore. Pursuant to House Resolution 454, the gentleman from Minnesota (Mr. LUTHER) and the gentleman from Virginia (Mr. BLILEY) each will control 5 minutes.

The Chair recognizes the gentleman from Minnesota (Mr. LUTHER).

Mr. LUTHER. Mr. Chairman, I yield myself 2½ minutes.

Mr. Chairman, first let me thank the gentleman from California (Mr. DREIER), the gentleman from Massachusetts (Mr. MOAKLEY), and the Committee on Rules for making this amendment in order.

This amendment is very simple. It prohibits State and local laws from interfering with the allocation policies of the National Organ Transplant Network. In particular, the amendment addresses what has become known as organ hoarding laws in this country. These laws mandate that organs procured within a particular State must stay within that particular State. They contradict the very purpose behind a national system of organ procurement and allocation. This amendment ensures that medical science, not local politics, determines who shall receive a precious organ in this country.

In 1984, Congress enacted the National Organ Transplantation Act in order to create a national system, and I emphasize national, whereby organs are allocated on the basis of medical necessity and compatibility, not on geographic residence.

□ 1300

Since then, organ procurement organizations across the country have endeavored to cooperate with each other in local sharing arrangements. They have largely served patients well; however, in the last 3 years, seven States in our country have passed organ hoarding laws, the consequences of which could be absolutely devastating.

These laws dictate that a less needy patient in the home State could actually have priority over a patient with greater need in another State.

Whether you are on the side of HHS or UNOS in this ongoing battle, such an outcome is at complete odds with the very purpose of our national system. And it undermines the cooperative spirit transplant centers have developed across the Nation.

I want to make it clear, this amendment in no way affects the power struggle between the transplant community and the Department of Health and Human Services. It would not affect the local sharing agreements between procurement organizations. In fact, the amendment ensures that such arrangements remain intact and retain their medical authority.

In this debate, instead of focusing on where we disagree, let us focus on where we agree. Mr. Chairman, local politics should play no role in this important matter. Let doctors and transplant experts make the decisions on organ allocation in this country.

I urge Members to support this simple amendment.

Mr. Chairman, I reserve the balance of my time.

Mr. BLILEY. Mr. Chairman, I yield myself such time as I consume.

Mr. Chairman, this amendment is rather simple in its effect. It would eliminate those State laws giving priority for citizens in a given State before an organ would be transferred across State lines for someone else.

These laws were passed as a response to the administration's very controversial regulation of April 2, 1998. Many States that have invested time, talent, and treasure to increase their donation rates saw in the Secretary's new policies a drive to take away the fruit of their labors. In order to protect their citizens from an unfair rule, States started passing laws giving their citizens a right of first refusal for organs available.

My answer to my colleagues who oppose these State laws is that these laws would not be in effect had the Secretary of HHS not tried to overturn 16 years of deliberations over organ policymaking.

I ask my colleagues to vote no on the amendment of the gentleman from Minnesota (Mr. LUTHER).

Mr. Chairman, I reserve the balance of my time.

Mr. LUTHER. Mr. Chairman, I yield 1 minute to the gentleman from Pennsylvania (Mr. PETERSON).

Mr. PETERSON of Pennsylvania. Mr. Chairman, I thank the gentleman from Minnesota (Mr. LUTHER) for yielding me this time.

Mr. Chairman, I live in a State that has two organ centers, Philadelphia and Pittsburgh, both near the State lines. There are many States that have large centers very near State lines.

Should a person's determination of whether they get an organ when they truly need one depend whether they live 5 miles down the road in the wrong State? Think about it. What if you live in the wrong State?

I commend the States that have done a better job. Part of it, to be fair, is because they have younger populations. They have more accidents where young people die and organs are usable. Part of it is that, and part of it may be that they have a better system. I commend them. And we need to increase that system so we do not have a shortage.

We should not have a system that would deny someone life and give them death because they lived 5 miles across the State line.

Mr. BLILEY. Mr. Chairman, I yield myself such time as I may consume.

I would answer the last speaker by simply saying what the gentleman from Oklahoma (Mr. ISTOOK) said earlier under general debate, are we going to give authority over body parts of the dead to the Federal Government?

I do not think we want to do that. We have had a program that has worked well for 16 years. We have had States that have been very aggressive in obtaining donors. Why should they be punished to take care of populations in other States that have not been as aggressive? I think that we should reject this amendment.

Mr. Chairman, I yield back the balance of my time.

Mr. LUTHER. Mr. Chairman, I yield myself such time as I may consume.

I will be very brief. The battle that is going on between the Department of Health and Human Services and UNOS is very unfortunate. I think it is terrible when an issue as serious as this has gotten involved in the kind of controversy that it is currently involved in. UNOS does terrific work in this country, and the people and the Department of Health and Human Services are very well-intentioned.

What we need to do is rise above that, as Members of this Congress; and we need to recognize that life and death does not know geographical boundaries. Organs do not know geographical boundaries.

Let us let the experts, the medical professionals, make these decisions. Let us not have someone not get an organ in this country because they happened to be on the other side of a geographical boundary and some decision was made that controls over medical science in this country. That is why I offer this amendment.

I ask my colleagues to support this amendment and bring a better rational system to this country than this underlying bill would bring if it would be passed by this body.

Mr. Chairman, I yield back the balance of my time.

The CHAIRMAN pro tempore (Mr. EWING). The question is the amendment offered by the gentleman from Minnesota (Mr. LUTHER).

The question was taken; and the Chairman pro tempore announced that the ayes appeared to have it.

Mr. BLILEY. Mr. Chairman, I demand a recorded vote.

The CHAIRMAN pro tempore. Pursuant to House Resolution 454, further proceedings on Amendment No. 2 offered by the gentleman from Minnesota (Mr. LUTHER) will be postponed.

It is now in order to consider Amendment No. 3 printed in House Report 106–557.

AMENDMENT NO. 3 OFFERED BY MR. LAHOOD

Mr. LAHOOD. Mr. Chairman, I offer an amendment.

The CHAIRMAN pro tempore. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 3 offered by Mr. LAHOOD:

Page 14, strike line 21 and all that follows through page 17, line 17, and insert the following:

''(h) CERTAIN SCIENTIFIC AND ADMINISTRATIVE PRINCIPLES.—

''(1) SCIENTIFIC PRINCIPLES.—Policies under subsection (b) for the allocation of organs—

''(A) shall be based on sound medical principles;

''(B) shall be based on valid scientific data;

''(C) shall be equitable and seek to achieve the best use of donated organs;

''(D) shall be designed to avoid wasting organs, to avoid futile transplants, to promote patient access to transplantation, and to promote the efficient management of organ placement;

''(E) shall be specific for each organ type or combination of organ types;

''(F) shall, where appropriate for the specific organ, provide status categories that group transplant candidates from most to least medically urgent;

''(G) shall not use patient waiting time as a criterion unless medically appropriate; and

''(H) shall be designed to share organs over as broad a geographic area as feasible, consistent with subparagraphs (A) through (G).

''(2) PATIENT LISTING AND STATUS.—Policies under subsection (b) for listing patients shall address the suitability of patients for transplants, appropriate priority status of each candidate, and the situations for removing candidates from the waiting list. Such policies shall be uniform for each organ type, objective, and medically appropriate.

''(3) REVIEW AND APPROVAL OF POLICIES; CONSISTENCY WITH SCIENTIFIC PRINCIPLES.—The policies and rules established by the Network shall be subject to review and approval by the Secretary (after consultation with the advisory committee under paragraph (4)), and no policy or rule established under subsection (b) may be inconsistent with paragraph (1) or (2). The applicability of sanctions under subsection (g) to any Network participant is subject to review and approval by the Secretary.

''(4) INDEPENDENT SCIENTIFIC REVIEW.—The Secretary shall establish (consistent with the Federal Advisory Committee Act) an advisory committee to provide recommendations to the Secretary on the policies and rules of the Network, and on such other matters as the Secretary determines to be appropriate.

''(5) PATIENT LISTING AND OTHER FEES.—

''(A) AVAILABILITY; RESTRICTION.—Fees collected by the Network—

''(i) are available to the Network, without fiscal year limitation, for use in carrying out the functions of the Network under this section; and

''(ii) may not be used for any activity for which contract funds awarded under subsection (a) may not be used.

''(B) APPLICABILITY.—Subparagraph (A) applies only to patient listing fees of the Network and to fees imposed as a condition of being a Network participant, and such fees are subject to the approval of the Secretary. Such subparagraph does not prohibit the Network from collecting other fees and using such fees for purposes other than those specified in such subparagraph.

''(C) GIFTS.—This section does not prohibit the Network from accepting gifts of money or services, including for purposes other than those specified in subparagraph (A). The Network may accept gifts of money or services to carry out activities to provide for an increase in the rate of organ donation.

''(6) INFORMATION.—The Network shall provide to the Secretary such information and data regarding the Network and Network participants as the Secretary determines to be appropriate. The Network shall provide data in a timely manner, with suitable patient confidentiality protections, to independent investigators and scientific reviewers.

''(7) LIMITATION ON AMOUNT OF CONTRACT.—The amount provided under a contract under subsection (a) in any fiscal year may not exceed $6,000,000 for the operation of the Network, including the scientific registry under subsection (c). Such limitation does not apply to amounts provided under the contract for increasing organ donation and procurement.

The CHAIRMAN pro tempore. Pursuant to House Resolution 454, the gentleman from Illinois (Mr. LAHOOD) and the gentleman from Virginia (Mr. BLILEY) each will control 30 minutes.

The Chair recognizes the gentleman from Illinois (Mr. LAHOOD).

Mr. LAHOOD. Mr. Chairman, I yield myself such time as I may consume.

We are offering this amendment to prevent a very bad piece of legislation from going forward today. This bill, in essence, would set up a single-source agency to make all of the determinations about where transplanted organs would go. That is very, very bad public policy. It is bad public policy because no one agency should be in charge of such an important medical procedure and such an important aspect of health care in America today.

Mr. Chairman, we have had a good system. I know it is very in vogue and very favorable to talk in bad terms about bureaucrats and to label HHS a very bureaucratic agency, but who will look after the taxpayers' dollars? Who will look after how the money is being spent? If it is not HHS, it will be no one. This bill allows for one agency to

have total control over the transplants, over the procedures, over the organs and have no accountability to anybody, and that is wrong. We should not allow that kind of public policy to pass this House of Representatives.

Mr. Speaker, our amendment, which has strong support from some very distinguished colleagues who will speak on it, would make several recommendations made by the Institute of Medicine, which did a study on the organ allocation process, and it ensures that organ allocation policies are based on sound medical principles and valid scientific data.

Now, is there anybody here that does not believe that HHS has that kind of capability? Because they are a part of the Federal bureaucracy, does that mean they do not have capable people? Of course they do. They have as capable people medically as any agency or any program anywhere in the country. They can make good decisions. There should be some oversight. To hand this over to one agency that will have God-like powers to tell everybody in America who can get an organ and who cannot will revert back to an old system where favorable people and prominent people will get the organs and common, ordinary citizens will be left behind to die. That is wrong. I do not think anybody in this House wants that kind of policy.

Now, I have a letter here that was referred to earlier that actually is from the UNOS agency, and what they are saying in the first paragraph, the letter is to the gentleman from Michigan (Mr. DINGELL), and what it says is that ''we are working with HHS.'' This letter is dated March 15, and it simply says, ''we are working with HHS. Congress do not need to pass any legislation, we do not need legislation. We are working with HHS and UNOS to try and work out an agreeable kind of a program.''

Why pass legislation to give favorable consideration to one agency? For what purpose? I do not know, except that somebody has favorable consideration from certain Members of Congress around here. This is bad public policy.

There is also a letter from the Department of Justice, and I will make these a part of the RECORD when we go back into the House, that says that with regard to the relationship between the Secretary, meaning the Secretary of HHS, and the network, the bill provides that administrative and procedural functions for the network shall be carried out in accordance with mutual agreement of the Secretary and the network.

So there has to be some kind of a relationship. We cannot give one agency carte blanche, say, over these kinds of procedures and transplants.

There is also a letter from OMB, which I will also make a part of the RECORD, which simply says that there are things being worked out by the administration and by UNOS, and they are going to veto this bill if it would ever see the light of day, which it probably will not in the Senate; but we should not have Members voting on such lousy, bad policy.

Now, if my colleagues do not believe all of that and if they do not agree with my argument, then what we ought to do is have Members call back to their hospitals, call back to their local health providers. They will tell my colleagues that they do not want one agency in America deciding these things; they want some oversight. So if my colleagues do not believe me, then call back to the local providers who provide these transplant capabilities in their own districts, and they will find out what the truth is.

No single agency should have this kind of power. If we want to revert back to the old ways of doing things where prominent people in America get these transplants, then vote for this legislation. If we want to have a good system with oversight, vote for the LaHood-Moakley-Rush-Peterson amendment, which does an awful lot to maintain credibility and honesty and integrity.

Mr. Speaker, I reserve the balance of my time.

Mr. BLILEY. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, this amendment is a radical departure from 16 years of congressional legislation on organs. It would make all organ procurement and transplantation network policies and rules subject to review and approval by the Secretary. This flies in the face of the present statute.

The LaHood-Moakley amendment is not just a little amendment to H.R. 2418, it is a gutting amendment. It overturns 16 years of deliberation by the Nation's top transplantation experts who have labored and debated over the most complicated issues any person would ever encounter and turns it over to the whims of the Secretary. Just imagine if you were put in the shoes of being Secretary of HHS under the LaHood amendment with no prior awareness or experience in this area.

Organ allocation is a very difficult task. There are no easy answers. The hard truth is that there are not enough organs available for people who need them. A poll conducted a few months after the administration's organ regulation was released yesterday by an advocacy group found that Americans hold very strong opinions on what they believe to be fair organ allocation policies.

The problem is that some of those opinions seem contradictory. The poll found that 83 percent agreed that an organ from a donor should go to the sickest patient in the U.S., no matter where they live, under our national sickest-first policy. Status one patients who are under intensive care and who may die within a week would have priority. Those with a greater chance of survival would not enjoy the same access to organs.

That number may have been much less if people were informed about the direct relationship between increased organ delivery time and the likelihood of organ rejection.

□ 1315

While expressing preference for the ''sickest first'' poll, respondents also believe organs should be transplanted into patients with the best chance of surviving surgery. Those with the best chance of surviving are the so-called Status 3 patients, who are terminally ill but do not need hospitalization. If this preference were followed, Status 1 patients would not be preferred to receive lifesaving organs nor would the intermediate Status 2A and Status 2B patients.

It is the less sick Status 3 patients who have the best chance of surviving with a transplant and the lowest chance of rejecting the transplanted organ. This preference contradicts the first one.

To complicate the story further, the ''sickest first'' policy was not the top choice of respondents. In fact, 86 percent want those patients who have been on a waiting list the longest to get an organ. After all, what could be more fair than waiting in line and taking turns? This response is very embarrassing to the organizations that paid for the poll, because the so-called first-in, first-out policy comes down on the other side of the ''sickest first.''

The most popular preference would have the unintended consequence of giving organs to those who could survive the longest without a transplant. Thus, some of the sickest patients would die, contrary to the ''sickest first'' preference held by the same group.

These inconsistent polling results call to mind a quotation by Edmund Burke: ''Your representative owes you not only his industry but his judgment, and he betrays, instead of serving you, if he sacrifices it to your opinion.''

No President, no legislature, no judge, and certainly no bureaucracy has the competence to make the life and death decisions for allocating organs. There are too many competing scientific and ethical considerations for government to devise a fair system to allocate too few organs among too many people.

America needs a special institution to sort through people's competing passions and positions and to render a sensible and well-informed decision. That is why Congress clearly put this decision-making into the hands of those who know best, the transplant community. When Congress passed the National Organ Transplant Act, it established a private entity to coordinate a consensus position within that community.

But the system that has grown under the watchful eye of the entire transplant community ought not be uprooted by regulatory whim or bumper sticker slogans. Vote ''no'' on the LaHood-Moakley amendment.

Mr. LAHOOD. Mr. Chairman, I yield 3½ minutes to the gentleman from Chicago, Illinois (Mr. RUSH).

Mr. RUSH. Mr. Chairman, I thank the gentleman for yielding time to me.

Mr. Chairman, I rise in strong support of the amendment sponsored by myself, the gentleman from Illinois (Mr. LAHOOD), the gentleman from Massachusetts (Mr. MOAKLEY), and the gentleman from Pennsylvania (Mr. PETERSON).

Mr. Chairman, this amendment is designed to put some accountability back into the organ donation and allocation system, accountability which the bill before us, H.R. 2418, would eliminate.

Mr. Chairman, this bill, H.R. 2418, is indeed bad policy. It is an atrocious bill that will further exacerbate the misfortunes of many of America's citizens.

In the last 2 years, the U.S. Department of Health and Human Services has made several attempts to implement a new organ donation and allocation regulation designed to improve the system of organ allocations in the country. The HHS regulation incorporates many of the sound recommendations of the National Academy of Sciences' Institute of Medicine's recommendations for improving the organ donation and allocation system.

This regulation, the subject of opposition by those groups which would maintain the status quo, has twice been delayed by congressional action.

Finally, last month, the regulation went into effect. Not one month later, this House is debating a bill that would vitiate all of the public good intended by the rule.

Mr. Chairman, the HHS regulation directs the national organ donation and allocation contractor to revise its rules to provide for broader organ sharing. The regulation permits the Secretary to revise any proposed rules that are deemed inappropriate.

Most of the debate about the HHS regulation has been focused on the allocation section and the Secretary's authority to review any new allocation policies.

In Illinois, we are fortunate to have nine transplant centers which perform 745 organ transplants alone. However, despite the work of these centers and a strong organ donation program, the waiting list for transplantation in Illinois grows longer every day.

The new HHS rule would help this situation by authorizing the Secretary to change any regulation that might disadvantage States like Illinois. That is what our amendment does, it guarantees that organ allocation systems would be fair to all, and strike the proper balance between medical judgments and public accountability.

Mr. Chairman, furthermore, I want to say that the Institute of Medicine, in the 1999 report to the Congress, and also Secretary Shalala, have all indicated that women, minorities, and the poor are disadvantaged under this current system. Mr. Chairman, I urge all of my colleagues to support our amendment.

Mr. BLILEY. Mr. Chairman, I yield such time as he may consume to the gentleman from Florida (Mr. BILIRAKIS), the chairman of the Subcommittee on Health and Environment of the Committee on Commerce.

Mr. BILIRAKIS. Mr. Chairman, I thank the gentleman for yielding this time to me.

Mr. Chairman, I would just say to the gentleman from Illinois, who is really a very good friend, and I know there is nothing personal in it, but this atrocious bill, as he calls it, merely basically says that what has taken place over the last 16 years, which everybody basically agrees has been working pretty darned well, not perfectly, that is for sure, will continue to be the case. It is not a power grab on our part, it is a power grab on the part of HHS.

We are basically saying what has worked and worked well, keep it in place. Despite the fact, Mr. Chairman, that NOTA neither explicitly nor implicitly delegates policy-making authority to the HHS Secretary, she has promulgated, and after three congressional moratoria, implemented regulations which assume just such authority.

Under her final rule, which became effective on March 16, she claims the authority to overrule or even rewrite national organ transplant policy. The last time I checked, Secretary Shalala, with all due respect, is not carrying a medical license.

No president, no legislature, and no Federal bureaucracy is competent to make the complicated medical and ethical decisions required to allocate organs for transplantation. To foster public trust, it is important that allocation remain one step removed from the political sphere. That is what Congress intended in 1984. That is the way it has been all along until just the last couple of years. We should ask ourselves, what has happened just in the last couple of years that requires supposedly some sort of a change?

The OPTN is made up of physicians, of patients, and other transplant community representatives. It is not an agency, as has been mentioned here by the gentleman from Illinois (Mr. LAHOOD) a couple of times, more than once. It is not an agency. They and not Secretary Shalala know best when it comes to deciding transplant policies. Their careful, deliberate decisions should not be uprooted by regulatory whim.

Let us not be misled, Mr. Chairman. Although the Secretary does not have policy-making authority under current law nor under H.R. 2418, the Secretary does have adequate authority to oversee compliance of the network. Under current law, the Secretary has significant power over the contractor which runs the network. The Secretary created the network, if you will. The Secretary determined that UNOS would be the private entity that would be responsible for this.

The Secretary drafts the terms and conditions of the contract which set forth the administrative responsibilities of the network, and will ensure that the network complies with the obligations of the statute. If the contractor does not comply with the terms of the contract, there are a number of remedies, including, if appropriate, use of the False Claims Act and government contracting remedies.

Furthermore, the Secretary retains the authority, authority to terminate the contract. The Secretary retains the authority to terminate the contract. Under this bill, the Secretary shall conduct public hearings and receive comments from the public about the performance of the network.

In addition, the General Accounting Office shall conduct, under the bill, required regular evaluations of the network to ensure that it is complying with the terms of the statute. So if UNOS is not doing the job adequately, the Secretary now has the authority to do something about it. The Secretary has the authority to do something about it.

What would the LaHood amendment do? It would require policies to be designed to allocate organs ''in order of decreasing medical urgency status over the largest geographic area, so that neither place of residence nor place of listing shall be a major determinant.''

Even HHS has admitted in the preamble to the rule that this policy, that this policy, would reduce survival rates and the number of patients transplanted, while increasing organ wastage and transplant costs. Even HHS admits that that policy would do that.

It would also require that kidneys be allocated to patients solely on the basis of waiting time, and that intertransplant waiting time variance be as small as possible.

There are a lot of things that this does. I am here to tell the Members, just finishing it up, the LaHood-Rush amendment, the substitute, completely surrenders all policy-making authority to the HHS Secretary and mandates allocation to the sickest patients first on a national list. Now that is mandated on a local, if you will, or in a regional list, but that would mandate it on a national list.

If it is possible to draft a bill that gives even more power to Secretary Shalala over organ transplant policies than her final rule, then the gentlemen from Illinois, Mr. LAHOOD and Mr. RUSH, with all due respect, have done just that.

Mr. LAHOOD. Mr. Chairman, I yield 2 minutes to the gentleman from California (Mr. WAXMAN), a distinguished member of the committee.

Mr. WAXMAN. Mr. Chairman, I thank the gentleman for yielding time to me.

Mr. Chairman, I think this proposal, this amendment, is a very constructive one. I think it meets a lot of the concerns that have been expressed on all sides on this issue.

After the Secretary of HHS proposed regulations that many people fear

would be deciding the allocation system from the top down, rather than have the decisions by the medical people who work on these issues day-today, the Institute of Medicine looked at the matter. They gave us some recommendations.

The LaHood amendment adopts the recommendations of the Institute of Medicine. It in effect says that we ought to ensure that the bill reflects the best scientific and medical thinking on the issue of organ transplantation. Then, in terms of public accountability, they recommended an independent board to oversee the system, which is what is in the LaHood amendment.

I just want to read to the Members from an organization, the American Liver Foundation. They represent the beneficiaries of transplantation.

They say that, in their view, ''It is important to continue to balance the interests, on the one hand, for physicians to make medical decisions, but also for the Federal government to address and provide leadership regarding matters of equity and fairness. ALF,'' the American Liver Foundation, ''would therefore not support the elimination of an oversight role for the Federal government. At the same time, we would stress the importance of establishing a prestigious and independent advisory body to help resolve disputes that may arise between the transplantation network and the Federal government.''

The LaHood amendment I think is the answer to concerns that everyone has expressed on this issue. It would provide commonsense and scientific decisions made by the medical experts. I would urge my colleagues to support the LaHood-Rush-Moakley-Peterson amendment.

Mr. BLILEY. Mr. Chairman, I yield 4 minutes to the gentleman from Wisconsin (Mr. RYAN).

Mr. RYAN of Wisconsin. Mr. Chairman, I thank the gentleman for yielding time to me.

Mr. Chairman, let me just be brief. This is a gutting amendment. If Members are against States' rights, if they want to turn this over to the Department of Health and Human Services, to the political appointees to run this process, then they should support this amendment.

But if Members are in favor of States doing a good job in administering their own organ transplant systems, if Members are in favor of incentivizing good States to do a good job in putting their own organ programs together, then they should be against this amendment.

In short, I come from Wisconsin. It is a good State that has done a good job putting our own organ transplant system together. But by passing this amendment and turning this over to the Department of Health and Human Services to be run by political appointees in Washington, we will be basically saying to those States that have done so much work on behalf of the organ transplant community, do not bother. You will not be rewarded for that good behavior.

□ 1330

It will be telling those other States that are not doing a very good job that need room for improvement, they do not have to do well because we are nationalizing the whole system and will go to the lowest common denominator. In short, the LaHood-Rush amendment incentivizes the States that need to do better to not do better. It places a disincentive on the States that are doing a good job to cease from doing that good job that they are doing.

We need to let States experiment. We need to let States do a better job and, more importantly, let us let the medical professional people decide how this is done. Let us make sure that organ transplant decisions are going to be exercised by medical professionals, by the data, by scientific research, by physicians, not by political appointees in Washington.

The problem with this amendment is that it will turn over every bit of decision-making to the Department of Health and Human Services, and I only ask my colleagues to take a look at what they are doing to the Medicare program today. All of us see the problems that we are experiencing in Medicare today, much of which comes from the Department of Health and Human Services; their lack of responsiveness to problems we have in Medicare. We do not want to subject a very life-saving, important, timely issue such as organ transplants to the Department of Health and Human Services to be subject to the same kind of bureaucratic ineptitude that Medicare is now suffering from.

In short, Mr. Chairman, I urge a no vote on this amendment. I believe the sponsors are very well intended. I think that their intentions are good, but I think the logic behind this amendment is very bad. It will penalize the States that are doing well, and it will do nothing to help the States that need room for improvement. And the net result will be less organs to go around, on average, throughout the country.

So I urge defeat of this amendment and passage of 2418 because that will do everything to continue to build on the success we have and the success we have been reaching through other States.

Mr. LAHOOD. Mr. Chairman, I yield 3 minutes to the gentleman from Michigan (Mr. DINGELL), the dean of the House and the ranking member of the Committee on Commerce.

(Mr. DINGELL asked and was given permission to revise and extend his remarks.)

Mr. DINGELL. Mr. Chairman, I rise in support of the LaHood-Moakley-Rush-Peterson amendment. It is a commonsense measure, and it is one which sees to it that we implement the principles that were recommended by the Institute of Medicine in response to a congressional instruction to review organ allocation issues. In a nutshell, all this amendment does is say the Department of Health and Human Services shall exercise legitimate oversight responsibilities assigned to it by the National Organ Transplant Act as articulated in the Final Rule in order to manage the system of organ procurement and transplantation in the public interest.

Now, this has been a day when the smell of red herrings has hung rich in this Chamber. We have heard talk about how there is going to be a huge number of bureaucrats from the Federal Government telling UNOS what to do. The simple fact of the matter is, UNOS is a contractor which is paid in part by the Federal Government to do its job. The simple fact of the matter is that UNOS has not done a very good job. The request from the Secretary of HHS is for them to simply examine and to come forward with regard to allocation of organs.

Now, why is this necessary? Let us take a hard look. Let us look at several States. Kentucky, in one center, 38 days is the median waiting time; 226 days is at another. In Louisiana the median waiting time at one center was 18 days while at another it was 260 days. In my own State of Michigan, the numbers were 161 days and 401 days at another center.

People are dying because of that. Without needed transplants, people are not getting their problems addressed. People who should probably rank lower in the priority of things are getting transplants while people who desperately need them and are liable to die without those transplants and are being denied those transplants. That is what this amendment is about. It is to correct a major defect in the bill.

The charge was made that this is a gutting amendment. It is not. It is a perfecting amendment. It is one which permits the government of the United States to see to it that everyone is treated fairly with regard to allocation of organs when they need them, and to assure that to the best degree possible that people who have need of organs and who will die if they do not get them are more likely to get them and less likely to be denied those organs.

It is something which goes to basic fairness. It is also something which sees to it that a contractor is not going to be given an absolute and untrammeled monopoly over the availability of organs to people who will die if they do not get them and also to assure something else, and that is to assure that the contractor is under reasonable scrutiny and supervision so that he will behave in an appropriate and a decent and a responsible fashion in terms of carrying forward its responsibility.

There has never been any attempt by the Secretary of HHS to in any way intrude into scientific judgment. That

argument is nothing but a red herring. I urge support of the amendment.

Mr. BLILEY. Mr. Chairman, I yield 5 minutes to the gentleman from Louisiana (Mr. TAUZIN).

(Mr. TAUZIN asked and was given permission to revise and extend his remarks.)

Mr. TAUZIN. Mr. Chairman, I would like to submit a written statement of support for the underlying bill.

Mr. Chairman, first of all, let me correct a reference to the Kentucky Transplant Centers on behalf of my good friend, Mr. WHITFIELD. Reference was made to the different waiting times between two of those transplant centers in Kentucky. Both centers are in the same organ procurement area. The difference in the waiting times are actually a result of the different status levels of individuals on the waiting list, such as seriousness of condition, not time on the list, is a determining factor who gets an organ in that area.

An IOM report stated that the aggregate waiting time is in fact a poor measure of equity of treatment in the transplant field, and I would like to correct the record for those reports on the Kentucky centers.

Mr. Chairman, it is important to understand how we got to this amendment today. We got here because the Department has actually held public hearings on a rule that would, in fact, do what this amendment provides, giving the Secretary the power over decisions made in this critically sensitive and important area of organ transplant allocation.

We got here because the Secretary insisted on moving forward with that rule, despite the fact that 85 percent of those who commented on it objected to it. Nevertheless, the Secretary proceeded with this rule to override the decisions being made by the network, our local doctors and our local communities. Not only had the Department the gall to move forward despite an 85 percent record against this usurpation of Federal Government authority over this sensitive issue but three times this Congress had to pass moratoriums preventing that from happening.

Three times this Congress went on record telling the Secretary to stop what she was doing. Nevertheless, we are now faced with an amendment now that would in fact, although it is cloaked in the form of an amendment, adopt the Secretary's position, despite the moratoriums we have adopted, despite the fact that 85 percent of the people commenting on this authority have commented against the Federal Government taking over this role in its bureaucratic manner that it often does.

Speaking of red herrings, as this bill is progressing through the Congress, as we are indeed fighting this effort of the Federal Government to take over the terribly sensitive and delicate decisions of how organs are allocated in our transplant system, as we are debating it, the Justice Department sends this letter out questioning the constitutionality of the delegation of authority to the network.

Talk about red herrings. This letter appears from the Justice Department saying this may not be constitutional. The Justice Department did not mention that the two cases they cited were over 60 years old. They did not mention that over the last 60 years there have been new cases deciding the capacity of our Congress and our government to delegate authorities to organizations like the network, and in all of those cases the constitutionality of those delegations have been upheld.

For example, in 1984 in the case of Cospito v. Heckler, the courts upheld the constitutionality of the Congress delegating the authority to the Joint Commission on Accreditation of Health Care Organizations. In American Association of Physicians and Surgeons v. Weinberger, the court upheld the delegation of authority on a statute which delegated professional standards of review organizations with Federal authority over Medicare and medicaid programs. In Corum v. Beth Israel Medical Center, the same thing happened again.

The history of jurisprudence is replete with authority of Congress to delegate the things like our network. The history is replete with judicial judgments in favor of what has been the practice for 16 years of delegation to doctors and local communities, this very sensitive issue of organ allocation.

Let me say, as my friends have said, the adoption of this amendment would gut this bill. It would destroy the incentives built in here for organ donors to come forward and make organ donor allocations in a way that is fair and sensible and determined on a local basis with the advice of doctors and patients. It would put a government bureaucracy in charge. It is literally the administration's, the Secretary's, position in emperor's clothes and it is a naked attempt at government usurpation of power over this very delicate and sensitive issue that attacks us and taunts us ethically and responsibly at every level.

This is so delicate, so important. Why would we want to give it to a Federal bureaucrat? Why would we adopt this amendment and let someone in Washington, who thinks they know better than the doctors and the local organizations as to what should be done in this sensitive area?

Defeat this amendment. Pass the bill.

Mr. LAHOOD. Mr. Chairman, I yield 3 minutes to the gentleman from Pennsylvania (Mr. KLINK).

(Mr. KLINK asked and was given permission to revise and extend his remarks.)

Mr. KLINK. Mr. Chairman, I rise today in opposition of H.R. 2418 and in favor of the LaHood-Moakley amendment that goes some ways in correcting this flawed piece of legislation. If ever there were an issue that deserves to be protected from political maneuvering it is the issue of organ allocation.

This is one of the few issues that we will discuss on the floor that really means the difference between life and death. If one is waiting for an organ transplant and they do not get that transplant, it is very simple. They will die. Whether they get an organ or not that will save their life should not depend on where they live, but under the current system depending on where the organ was harvested it could be given to someone with many years to live, someone who could be pulled off of a golf course, while someone in the next town on the wrong side of a border could be lying there dying waiting for that organ.

As we know, the Department of Health and Human Services is trying to increase organ sharing; but ever since this proposed rule was announced last April, opponents have argued vigorously that the Secretary does not have the authority to set organ allocation policy because it involves a medical question, and that should best be left to those in the transplant community.

I have to tell my colleagues I am very troubled by this argument. I agree that the views of those in the transplant community should be given great weight, but I disagree with the notion that the Secretary should be forced to turn over scientific, clinical, and medical functions of the organ procurement transplant network to a private contractor.

Leaving aside the fact that Medicare and medicaid pay for more than 50 percent of the transplants in this country, I do not understand how an agency, which we allow to decide whether it is safe to put new drugs on the market, new devices on the market, an agency that decides what criteria NIH researchers should use, an agency that decides what procedures could be covered by Medicare now is somewhat less able to decide the qualifications dealing with how organs should be shared.

As I see it, if we give this sole discretion over such an important medical decision to a private contractor, it would really be an unconstitutional delegation of our legislative authority. What would happen if the OPTN were to suddenly change their allocation policy to give preference only to younger patients saying that people over the age of 65, for example, are too old for transplants? Or that they would decide they would prohibit the sharing of organs between people of different races?

We would agree that those things would be wrong, but under this bill the Secretary would be powerless to do anything about it.

Mr. Chairman, I think this wholesale privatization of organ sharing is a dangerous and a slippery slope. Nowhere else in society would we allow a monopoly like this to continue, let alone have the government sanction it.

People are dying because they happen to live in the wrong zip code and

instead of fixing the problem with this monopoly situation on organ allocation, this bill would protect it.

□ 1345

The Moakley-LaHood amendment is a good amendment, and it corrects this flaw.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from Louisiana (Mr. VITTER).

Mr. VITTER. Mr. Chairman, I rise in opposition to this amendment that reverses 16 years of legislative intent and rips decisions on organ donations from the hands of doctors and local transplant centers, placing them, instead, in the arms of Federal bureaucrats. Putting medical decisions about organ donations in the hands of doctors and transplant centers, not the Federal Government, was the intent of the law when it was created in 1984 and remains so, properly so in H.R. 2418.

In my State of Louisiana, organ and tissue donations are increasing in large part thanks to a new and innovative computerized database that shares information on donated organs with members of the medical community and their patients.

In 1999, 900 organs were donated in Louisiana, coming close to matching the approximately 1,100 Louisianans awaiting transplants. This represents real progress. I am proud my State is helping lead the way.

But this administration's answer to the growing national shortage of organs is very different. It is not to aggressively increase organ donation but to focus, instead, energy on how a static number of organs are allocated and to do that in a way that actually increases rejection rates. This would be a terrible mistake and undercut the successful efforts of local organizations to increase donations, which is the ultimate answer.

Instead of giving bureaucrats the right to dictate organ allocation policies, we should lend our voice to increasing organ donations nationwide.

Oppose this amendment and support H.R. 2418 as it is.

Mr. LAHOOD. Mr. Chairman, how much time is remaining?

The CHAIRMAN pro tempore (Mr. EWING). The gentleman from Illinois (Mr. LAHOOD) has 13½ minutes remaining. The gentleman from Virginia (Mr. BLILEY) has 10 minutes remaining.

Mr. LAHOOD. Mr. Chairman, I am pleased to yield 2 minutes to the gentleman from Pennsylvania (Mr. COYNE).

Mr. COYNE. Mr. Chairman, I rise today in opposition to the underlying legislation, H.R. 2418, and in support of the LaHood amendment.

The system for allocating donor organs for transplant operations has long needed major reforms. The current system has failed hundreds of Americans who have died waiting for a compatible organ to become available. Waiting times across the country vary dramatically. Under the existing regime, people who are not that sick sometimes receive organs ahead of people who will die without getting the organs. This is not right.

I have been working for a number of years to get the Department of Health and Human Services to issue regulations changing the way the organs are allocated. Several years ago, Health and Human Services actually issued draft regulations that would make significant improvements in the organ allocation process. Unfortunately, a series of misguided legislative riders were attached to appropriations bills preventing HHS from issuing its final regulation for over a year.

HHS was finally allowed to issue these regulations last month, and I believe that those regulations will substantially improve the organ allocation process. Today we are considering legislation reauthorizing the National Organ Transplantation Act. We need to reauthorize this important piece of legislation.

But this bill contains a number of provisions that should not be allowed to become law. This bill would maintain existing failings in the organ allocation process rather than repairing them. Enactment of this bill in its current form could hurt sick people in need of transplants.

Specifically, H.R. 2418 would not require the standardization of patient listing practices and greater allocation of organs outside the regions in which they originate. The bill also reduces the Federal Government's ability to oversee the private network which administers the organ allocation process.

Mr. Chairman, I rise in support of the LaHood amendment and in opposition to H.R. 2418.

Mr. BLILEY. Mr. Chairman, do I have the right to close?

The CHAIRMAN pro tempore. The gentleman from Virginia (Mr. BLILEY) has the right to close.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from Wisconsin (Mr. BARRETT), a member of the Committee on Commerce.

Mr. BARRETT of Wisconsin. Mr. Chairman, I rise in opposition to this amendment. In the early days of kidney dialysis, there was a limited number of people who could benefit from kidney dialysis. So a patient in the hospital would have to go to the ethics committee of that hospital to get permission to receive it. These ethics committees became known as death squads because they would literally decide who would live or die.

Were it so easy in this debate today. Because with that problem, we solved it by saying the Federal Government would pay for dialysis. We cannot do that here because we have a limited number of organs.

Now, we can go down two roads here. We can go down the road that this amendment goes down, which says let us take this group of organs that exists right now and divide them differently. Because there are some people who are being treated fairly, some people who are being treated unfairly, so the argument goes.

If my colleagues like what UNOS is doing, they say that the Federal Government is playing God. If they do not like what UNOS is doing, they say UNOS is playing God. The fact of the matter is we are all trying to play God because we have got a limited number of organs.

But there is a danger lurking here. Under the current system, the system that the Department is trying to overturn and that this amendment is trying to overturn, the assumption is that the number of organs will remain constant. I differ with that immensely, because what this approach does is it takes away the only incentive that States have right now to procure organs. So the supply will not remain static.

If a State knows that the organs it is currently procuring under the current system are going to be shipped out of State, they are going to react like normal human beings; and they are going to put less effort into this. So we are going down a dangerous path with this amendment.

Those proposing this amendment are arguing that the number of organs will not change, we are just distributing them differently. But the fact of the matter is we are taking away all incentives for States to come in and to procure those organs. It is a dangerous, dangerous road.

What I think it is going to do is it is going to decrease the supply of organs in this country at exactly the time we should be working to increase it.

Mr. LAHOOD. Mr. Chairman, I am pleased to yield 1 minute to the gentleman from Maryland (Mr. CARDIN).

(Mr. CARDIN asked and was given permission to revise and extend his remarks.)

Mr. CARDIN. Mr. Chairman, I rise in support of the LaHood-Moakley-Rush-Peterson amendment and would urge my colleagues that, if this amendment is not adopted, to oppose the bill.

We all talk here about having a cost effective quality health care system in our country. Centers of excellence help us to achieve those results. Yet, we are allowing with the underlying bill geographical politics to affect proper medical judgment.

Without this amendment, a person who is entitled to receive an organ could be denied having that procedure at his or her choice facility. That is wrong. We should not be playing geographical politics with the lives of our constituents.

I urge my colleagues to adopt the amendment or to reject the underlying bill.

Mr. Chairman, I rise in opposition to the bill before us today.

It is a basic tenet of health care that decisions should be guided by medical necessity and quality of care.

Here in Congress, we praise centers of excellence—facilities that provide the highest quality medical care and, in doing so, attract patients from across the Nation.

We speak about the importance of allowing medical necessity determinations to be made based on the patient's condition, rather than financial consideration. In fact, this House voted overwhelmingly in support of this concept when we passed comprehensive managed care reform legislation last fall.

These are central tenets of good medicine.

H.R. 2418 violates these tenets. It locks in the current system—where geography, not the patient's medical condition, is the prime determinant for organ allocation. This is fundamentally unjust in a nation where we seek to treat all Americans equally.

We should have a national organ sharing system where, whenever possible, the sickest American receives any available organ that could save his or her life.

This bill turns life-and-death decisions over to the politics of geography. How can we play politics with the lives of critically ill patients?

Regional boundaries should be limited only by the distance that organs can be safety transported, and these boundaries should be defined so the waiting times can be minimized.

Today's limited boundaries have led to great disparities between States—with Americans in some States experiencing waiting periods as much as 10 times longer than in other States. This means that transplant patients with similar cases could wait for 5 years on one State's list or 6 months on another's. This is not a system we should defend or lock into place.

For some time now, the administration has been trying to improve the way that organs are distributed to patients across the Nation. The Department of Health and Human Services tried to issue new regulations last year. But this Congress delayed that directive from going into effect.

The Institute of Medicine, which Congress directed to study this issue in depth, affirmed the need for more active Federal oversight of the process, not less. This bill goes in the wrong direction. It reduces the Federal role in overseeing the process and delegates total authority to a private organization to establish standards governing organ transplants. That is why I oppose H.R. 2418. I urge my colleagues to vote for quality of care, for the more than 5,000 critically ill Americans who are awaiting transplants, and against this bill.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from Oklahoma (Mr. ISTOOK).

Mr. ISTOOK. Mr. Chairman, I thank the gentleman from Virginia for yielding me this time.

Mr. Chairman, is it possible, should it be possible to make a life and death decision without getting the Federal Government involved? Do we have freedom, if the Federal Government says wait a minute, you cannot make these decisions, you might decide wrong, as though the Federal Government is not capable of making mistakes, as though Federal bureaucrats are the source of all wisdom and all knowledge and all pure motives and nobody else in the country possesses them?

People are trying to make very difficult decisions the best way that they can, and to do it in a way, as the gentleman from Wisconsin (Mr. BARRETT) was saying, that does the most to induce people to be organ donors.

This is going to help someone in one's community or in one's State or perhaps in one's region, and it could still end up going across the country if that is the way that it works out where the person actually is a match that qualifies best.

But to say that it all has to go through the filter of the Federal Government is saying the Federal Government does not trust everyone else in the country. It denies us freedom over life and death decisions.

People are doing the best they can with a challenging situation. By letting people try different approaches in different parts of the country, we find out what things work and what things do not work.

If my colleagues impose regimentation, uniformity imposed by Federal bureaucrats, let me tell them, any wrong mistake is a killer mistake instead of finding different ways and different approaches in different parts of the country.

The Federal Government does not need to be in charge of what happens to one's body when one dies. To be told one cannot donate one's organ unless one donates it to a system where Uncle Sam has control, that is wrong. Congress should not try to claim that control. The people should not be subjected to it.

Oppose the amendment, but support the underlying bill.

Mr. LAHOOD. Mr. Chairman, I yield 1 minute to the gentleman from Pennsylvania (Mr. DOYLE).

Mr. DOYLE. Mr. Chairman, I rise today in strong support of the LaHood-Rush-Moakley-Peterson amendment, and I commend the bipartisan manner in which this amendment was drafted.

This amendment includes recommendations made by the Institute of Medicine on organ allocation policies, recommendations from a study that was mandated by Congress. Mr. Chairman, this amendment is about maintaining public accountability for taxpayer funds and ensuring that medical professionals establish organ allocation policies.

I have heard arguments that, for the past 16 years, the public has been content with the present organ allocation system. How many sick patients have died on long waiting lists watching healthier and wealthier patients receive organs? Are those the individuals that do not have a problem with the present policy?

Mr. Chairman, if my colleagues' constituents want a private organization who could care less about holding themselves accountable to the public for transplant decisions, then vote for H.R. 2418. But if my colleagues' constituents want to put a public accountable organization and medical professionals in charge of such decisions, then vote for the LaHood amendment.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from Texas (Mr. GREEN), a member of the Committee on Commerce.

(Mr. GREEN of Texas asked and was given permission to revise and extend his remarks.)

Mr. GREEN of Texas. Mr. Chairman, I rise in opposition to the LaHood-Moakley amendment and in support of the bill.

This amendment would create a rubber stamp National Organ Transplant Advisory Board to be selected by the Secretary to meet at her request and advise her on transplant policies with none of the independent review authority recommended by the Institute of Medicine.

The LaHood-Moakley amendment would replace today's flexible evidence-based approach to making and updating transplant policies with a statutory requirement that all organs be allocated where appropriate, in other words, the sickest-first approach that the Secretary originally advocated.

The amendment also would require by law the transplant policy to allocate all organs over the largest geographic area, a formulation that would throw out the current local, regional national approach. This requirement, together with other language in the amendment, obviously has its goal as a single national list approach.

Finally, the amendment would require by law that where transplant policies based on medical urgency are not appropriate, such as in kidney transplants, all organs be allocated among individuals based on their time on the waiting list, coupled with the requirement that waiting time differences between programs be as small as possible.

The last provision means that parts of the country that have worked hard to achieve good organ donation rates would be penalized for their success.

While I appreciate the efforts of the gentleman from Illinois (Mr. LAHOOD) and the gentleman from Massachusetts (Mr. MOAKLEY), their amendment would make matters worse for transplant centers and the medical center in Houston, Texas.

The solution is more organ donations, Mr. Chairman, not more rationing. That is what this amendment would allow us to do.

Mr. LAHOOD. Mr. Chairman, I yield 4 minutes to the gentleman from Pennsylvania (Mr. PETERSON), one of the authors of our amendment.

Mr. PETERSON of Pennsylvania. Mr. Chairman, I thank the gentleman from Illinois for yielding me the time, and I thank him for his leadership on this issue.

It is important that we focus back to what we are really talking about today, fine-tuning a system that is not perfect. If we allow the organ system to be totally independent, as many want, we will allow a total monopoly to chart its own course without any adequate oversight.

□ 1400

How many monopolies have served us well? Is the system perfect today? The

recent Forbes report says the following: ''Realizing that UNOS is out of control, Shalala has put out feelers for a replacement. 'I hope we have some bidders this time,' sighs Claude Fox, a physician who, as administrator of the Health Resources & Services Administration, oversees transplants. The only prospect so far is Santa Monica-based Rand. Determined to see that Rand does not walk off with a contract, UNOS' lobbyists are pushing for a law that would ensure that Graham's group will keep the contract forever; a bill that would require the organ rationing contractor to have experience, something nobody but UNOS has. It would also allow the UNOS board members to vote on the choice.''

My colleagues, do we want to give something that is as important as life and death to a group that we have no control over if it goes wrong? We will fix it in time, but how many lives will be lost. Are doctors free to speak up today if they do not like the system? Most doctors interviewed by the Forbes report say, ''most doctors involved in the business fear offending UNOS, lest their organ supply be affected.''

I'm an organ donor. If I were to lose my life in an accident somewhere, and I am 50 miles from Ohio, 50 miles from New York, but I live in Pennsylvania, do I care where my organs go? I want them to go where they will save a life, where the match will be quick, where they will be handled quickly. If I was in California visiting my granddaughter and lost my life in an accident, and my organs were harvested, they would probably be used best on the West Coast not in Pennsylvania. Do we want a system that benefits people who live in the right place?

Listen to the LaHood amendment. ''Shall be based on sound medical principles.'' Anybody disagree with that? ''(B) shall be based on valid scientific data.'' Anybody disagree with that? ''(C) shall be equitable and seek to achieve the best use of donated organs. (D) shall be designed to avoid wasting organs to avoid futile transplants to promote patient access to transplantation and to promote the efficient management of organ placement.'' Anybody disagree with that? ''Shall be specific for each organ type or combination of organ types. Shall, where appropriate for the specific organ, provide status categories that group transplant candidates from most to least medically urgent. Medical. Shall not use patient waiting time as a criterion.'' We have heard that how many times today? ''Unless medically appropriate. Shall be designed to share organs over as broad a geographic area as feasibly consistent.'' Not hard-lined rules, feasibly consistent.

This is an amendment that fine tunes the system, allows adequate oversight into the system, maximizes the saving and extension of life in America, and it does not matter where anyone lives. And it should not matter where anyone lives. If a State happens to harvest a lot, let us copy what they do and let us try to harvest a lot. But a lot has to do with demographics and the age of the population. States with older populations will not be served as well with the current system.

Each of us hopes we never need a transplant. Only my friend, the gentleman from Massachusetts (Mr. MOAKLEY), can know what that really feels like. This is a multibillion dollar business and it should not be a part of the decision-making process. We should design a system where good medicine saves the maximum number of lives with the number of organs available.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from New Jersey (Mr. MENENDEZ).

(Mr. MENENDEZ asked and was given permission to revise and extend his remarks.)

Mr. MENENDEZ. Mr. Chairman, I thank the gentleman for yielding me this time, and I rise in opposition to the LaHood amendment because it fundamentally changes the underlying bill which seeks to protect organ recipients in regional transplant centers that provide local access to life-saving organ transplantation.

We have a system that works, and it has worked well for years. I fail to see, for example, why residents of my home State of New Jersey should be forced to travel long distances to feed major transplant centers because local programs have been snuffed out. This bill would protect those residents. In my mind, feeding major transplant centers to the virtual exclusion of others is playing geographic politics. In essence, we create a funnel to certain hospitals, which create, in my mind, longer waits.

Decisions regarding organ allocations should be based on sound scientific and medical decisions. This bill seeks to do that. These decisions should be made by medical and transplant officials at the local level. This bill seeks to do that.

There is no question that we must do more to increase organ donations and make more organs available for the many Americans who need transplants, and I hope that many Americans will do what I and others have done in signing a donor card and giving of themselves. But completely uprooting the current allocation system does not address the issue of overall supply.

Let us work to increase organ donations. Let us also protect medical judgment and local programs that are saving lives. Let us vote for the underlying bill, and let us oppose the LaHood amendment.

Mr. LAHOOD. Mr. Chairman, I yield the balance of my time to the gentleman from Massachusetts (Mr. MOAKLEY) to close the debate on our side, on what I believe is a good amendment.

The gentleman has experienced a transplant, experienced organ donation, and experienced the life- saving experience of going through and receiving an organ, the ranking member of the Committee on Rules and a survivor here to tell us about it and tell us about this important amendment.

Mr. MOAKLEY. Mr. Chairman, I thank my friend and colleague, the gentleman from Illinois (Mr. LAHOOD), for his leadership on this issue; and I thank him for yielding me this time.

Mr. Chairman, I am very sorry that we must debate this matter at all, but until more Americans become organ donors, until more people tell their families they want to donate a part of themselves to others, there will be a disagreement over whether organs should go to the sickest person or to the closest person.

Mr. Chairman, I was once one of those sickest persons. As I said earlier, 5 years ago I was given 2 months to live. But a family from Virginia, who I probably will never meet, donated their son's liver and, in doing so, saved my life. And for that I will be forever grateful. But, Mr. Chairman, I am one of the lucky few. There are now 67,000 people waiting somewhere for an organ transplant, and there just are not enough organs to go around.

In response to this organ shortage, the Department of Health and Human Services has issued regulations which attempt to save as many lives as possible. Those regulations, Mr. Chairman, were established by medical professionals. They require organs to be given to the sickest patients who may benefit, rather than keep them within artificial geographic boundaries. But this bill attempts to sabotage those regulations by preventing the Department of Health and Human Services from making health care decisions that affect thousands upon thousands of people.

This bill gives a private contractor authority over billions and billions of dollars of Medicare and Medicaid money, not to mention people's lives. This is all done without one scintilla of regulation. This private contractor, embodied with God-like powers over who lives, over who dies, powers over which transplant centers stay open and which transplant centers close, is an agency which will answer to no one but itself.

This amendment allows the Department of Health and Human Services to continue its oversight on this issue. This amendment simply requires a small measure of public accountability and oversight in a process that means life or death for thousands upon thousands of Americans.

Mr. Chairman, what this bill really does is it takes the public voice out of the public health. The LaHood-Rush-Peterson-Moakley amendment puts it back in. Where an individual lives should not determine how they live or if they live or if they die.

Mr. BLILEY. Mr. Chairman, I yield myself the balance of my time.

First of all, Mr. Chairman, let me say this. There has been a lot of discussion about the fact that the Secretary has no authority.

The Secretary has oversight authority. The Secretary can abrogate the contract. Indeed, UNOS' contract has been renewed several times. They brought in Rand Corporation. Rand withdrew. UNOS has done a fine job and is doing a fine job.

To my good friend from Massachusetts, who got his life-saving transplant at the University of Virginia Medical Center in Charlottesville, under this amendment that transplant center may not exist any more because it will not be in a big population center. So it could very well not be available for some future transplant.

This is a bad amendment, and I urge its rejection.

Mrs. MALONEY of New York. Mr. Chairman, I rise in support of the LaHood Amendment to H.R. 2418, The Organ Procurement and Transplantation Network Amendments of 1999.

This amendment keeps critical public health decisions where they belong—under the purview of The Department of Health and Human Services.

Instead of turning these decisions over to a private organization holding less accountability and substantial financial stakes in how the organ-allocation system operates.

The decisions that the base bill, H.R. 2418 would transfer to a private organ network are too important to go unchecked.

They are unquestionably life and death decisions.

New organ-allocation regulations proposed by the Administration and three times delayed by Congressionally mandated moratoriums, we developed by Secretary Shalala and leading experts in the field of organ transplantation.

And they are supported by an Institute of Medicine study completed last July.

But H.R. 2418 would throw out the Secretary's regulations which make the organ-allocation system fairer.

The revised regulations get organs to patients based on medical need, as opposed to geography and politics, and the financial interests of individuals.

Furthermore, H.R. 2418 ignores scientific evidence calling for new regulations in favor of maintaining an outdated and inefficient system which serves business, and political interests instead of public health and patient needs.

Already more than two years of a more equitable and efficient system has been lost to political maneuvering over this issue.

In November of last year, The Washington Post published a cogent op-ed titled "Organs Held Hostage" which reprimanded this Congress for doing just that—keeping live-saving organs from getting to the sickest patients, in the most timely manner, and perpetuating an unfair and inefficient system which favors wealthier patients who can get on multiple waiting lists and fly to wherever a needed organ becomes available.

Isn't it time we allowed the world-class doctors and transplant centers that we take so much pride in, to get on with the saving of lives?

I urge my colleagues to vote for the LaHood Amendment.

Mr. BLILEY. Mr. Chairman, I yield back the balance of my time.

The CHAIRMAN pro tempore (Mr. EWING). All time has expired.

The question is on the amendment offered by the gentleman from Illinois (Mr. LAHOOD).

The question was taken; and the Chairman pro tempore announced that the noes appeared to have it.

RECORDED VOTE

Mr. LAHOOD. Mr. Chairman, I -demand a recorded vote.

A recorded vote was ordered.

The CHAIRMAN pro tempore. This will be a 15-minute vote on the LaHood amendment, followed by two 5-minute votes on the amendments for which demands for recorded votes were postponed earlier today in the following order:

Amendment No. 1 offered by the gentlewoman from Colorado (Ms. DEGETTE); and amendment No. 2 offered by the gentleman from Minnesota (Mr. LUTHER).

The vote was taken by electronic device, and there were—ayes 160, noes 260, answered "present" 1, not voting 13, as follows:

[Roll No. 98]

AYES—160

Ackerman
Baca
Barrett (NE)
Bartlett
Becerra
Bereuter
Berman
Biggert
Blagojevich
Boehlert
Bonior
Bono
Borski
Brown (OH)
Capps
Capuano
Cardin
Carson
Castle
Clay
Clayton
Condit
Conyers
Costello
Coyne
Crowley
Cummings
Davis (IL)
DeGette
Delahunt
DeLauro
Dicks
Dingell
Dixon
Doggett
Dooley
Doyle
Dreier
Ehrlich
Engel
English
Eshoo
Etheridge
Evans
Ewing
Farr
Filner
Forbes
Frank (MA)
Frost
Gejdenson
Gekas
Gephardt
Gilchrest
Goodling
Gutierrez
Hall (OH)
Hinchey
Hoeffel
Holden
Horn
Houghton
Hoyer
Hunter
Hyde
Jackson (IL)
Johnson, E. B.
Jones (OH)
Kanjorski
Kennedy
Kildee
King (NY)
Klink
Kucinich
LaFalce
LaHood
Lantos
Larson
Lee
Levin
Lipinski
Lofgren
Lowey
Luther
Maloney (CT)
Maloney (NY)
Markey
Mascara
Matsui
McCarthy (MO)
McCarthy (NY)
McDermott
McGovern
McIntyre
McNulty
Meehan
Meeks (NY)
Millender-McDonald
Miller, George
Moakley
Mollohan
Morella
Murtha
Nadler
Napolitano
Neal
Oberstar
Olver
Owens
Payne
Pelosi
Peterson (PA)
Phelps
Pomeroy
Porter
Price (NC)
Quinn
Radanovich
Rahall
Rangel
Regula
Rodriguez
Roybal-Allard
Rush
Sabo
Sanchez
Sanders
Sawyer
Schakowsky
Serrano
Sessions
Sherman
Sherwood
Shimkus
Slaughter
Smith (WA)
Stabenow
Stark
Stenholm
Strickland
Stupak
Tauscher
Thompson (CA)
Thompson (MS)
Tierney
Toomey
Towns
Udall (CO)
Udall (NM)
Velazquez
Visclosky
Waters
Watt (NC)
Waxman
Weiner
Weldon (PA)
Weller
Weygand
Woolsey
Wynn

NOES—260

Abercrombie
Aderholt
Allen
Andrews
Archer
Armey
Bachus
Baird
Baker
Baldacci
Baldwin
Ballenger
Barcia
Barr
Barrett (WI)
Barton
Bass
Bateman
Bentsen
Berkley
Berry
Bilbray
Bilirakis
Bishop
Bliley
Blumenauer
Blunt
Boehner
Bonilla
Boswell
Boucher
Boyd
Brady (TX)
Brown (FL)
Bryant
Burr
Burton
Buyer
Callahan
Calvert
Camp
Canady
Cannon
Chabot
Chambliss
Chenoweth-Hage
Clement
Clyburn
Coble
Coburn
Collins
Combest
Cooksey
Cox
Cramer
Cubin
Cunningham
Danner
Davis (FL)
Davis (VA)
Deal
DeFazio
DeLay
DeMint
Deutsch
Dickey
Doolittle
Duncan
Dunn
Edwards
Ehlers
Emerson
Everett
Fletcher
Foley
Ford
Fossella
Fowler
Franks (NJ)
Frelinghuysen
Gallegly
Ganske
Gibbons
Gillmor
Gilman
Gonzalez
Goode
Goodlatte
Gordon
Goss
Graham
Granger
Green (TX)
Green (WI)
Gutknecht
Hall (TX)
Hansen
Hastings (FL)
Hastings (WA)
Hayes
Hayworth
Hefley
Herger
Hill (IN)
Hill (MT)
Hilleary
Hilliard
Hinojosa
Hobson
Hoekstra
Holt
Hooley
Hostettler
Hulshof
Hutchinson
Inslee
Isakson
Istook
Jackson-Lee (TX)
Jefferson
Jenkins
John
Johnson (CT)
Johnson, Sam
Jones (NC)
Kasich
Kelly
Kilpatrick
Kind (WI)
Kingston
Kleczka
Knollenberg
Kolbe
Kuykendall
Lampson
Largent
Latham
LaTourette
Lazio
Leach
Lewis (CA)
Lewis (GA)
Lewis (KY)
Linder
LoBiondo
Lucas (KY)
Lucas (OK)
Manzullo
McCollum
McCrery
McHugh
McInnis
McIntosh
McKeon
McKinney
Meek (FL)
Menendez
Metcalf
Mica
Miller (FL)
Miller, Gary
Minge
Mink
Moore
Moran (KS)
Moran (VA)
Nethercutt
Ney
Norwood
Nussle
Obey
Ortiz
Ose
Oxley
Packard
Pallone
Pascrell
Pastor
Paul
Pease
Peterson (MN)
Petri
Pickering
Pickett
Pitts
Pombo
Portman
Pryce (OH)
Ramstad
Reyes
Reynolds
Riley
Rivers
Roemer
Rogan
Rogers
Rohrabacher
Ros-Lehtinen
Rothman
Royce
Ryan (WI)
Ryun (KS)
Salmon
Sandlin
Sanford
Saxton
Scarborough
Schaffer
Scott
Sensenbrenner
Shadegg
Shaw
Shays
Shows
Simpson
Sisisky
Skeen
Skelton
Smith (MI)
Smith (NJ)
Smith (TX)
Snyder
Souder
Spence
Spratt
Stearns
Stump
Sununu
Sweeney
Talent
Tancredo
Tanner
Tauzin
Taylor (MS)
Taylor (NC)
Terry
Thomas
Thornberry
Thune
Thurman
Tiahrt
Traficant
Turner
Upton
Vitter
Walden
Walsh
Wamp
Watkins
Watts (OK)
Weldon (FL)
Wexler
Whitfield
Wicker
Wilson
Wise
Wolf
Wu
Young (AK)
Young (FL)

ANSWERED "PRESENT"—1

Kaptur

NOT VOTING—13

Brady (PA)
Campbell
Cook
Crane
Diaz-Balart
Fattah
Greenwood
Martinez
Myrick
Northup
Roukema
Shuster
Vento

□ 1433

Messrs. WALDEN of Oregon, Mrs. CUBIN, and Messrs. FRELINGHUYSEN and BISHOP changed their vote from "aye" to "no."

Mr. BLAGOJEVICH, Ms. WOOLSEY, and Mr. MEEKS of New York changed their vote from ''no'' to ''aye.''

So the amendment was rejected.

The result of the vote was announced as above recorded.

ANNOUNCEMENT BY THE CHAIRMAN PRO TEMPORE

The CHAIRMAN pro tempore (Mr. EWING). Pursuant to House Resolution 454, the Chair announces that he will reduce to a minimum of 5 minutes the period of time within which a vote by electronic device will be taken on each amendment on which the Chair has postponed further proceedings.

AMENDMENT NO. 1 OFFERED BY MS. DEGETTE

The CHAIRMAN pro tempore. The pending business is the demand for a recorded vote on Amendment No. 1 offered by the gentlewoman from Colorado (Ms. DEGETTE) on which further proceedings were postponed and on which the ayes prevailed by voice vote.

The Clerk will redesignate the amendment.

The Clerk redesignated the amendment.

RECORDED VOTE

The CHAIRMAN pro tempore. A recorded vote has been demanded.

A recorded vote was ordered.

The CHAIRMAN pro tempore. This will be a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 420, noes 0, not voting 14, as follows:

[Roll No. 99]

AYES—420

Abercrombie
Ackerman
Aderholt
Allen
Andrews
Archer
Armey
Baca
Bachus
Baird
Baker
Baldacci
Baldwin
Ballenger
Barcia
Barr
Barrett (NE)
Barrett (WI)
Bartlett
Barton
Bass
Bateman
Becerra
Bentsen
Bereuter
Berkley
Berman
Berry
Biggert
Bilbray
Bilirakis
Bishop
Blagojevich
Blumenauer
Blunt
Boehlert
Boehner
Bonilla
Bonior
Bono
Borski
Boswell
Boucher
Boyd
Brady (TX)
Brown (FL)
Brown (OH)
Bryant
Burr
Burton
Buyer
Callahan
Calvert
Camp
Canady
Cannon
Capps
Capuano
Cardin
Carson
Castle
Chabot
Chambliss
Chenoweth-Hage
Clay
Clayton
Clement
Clyburn
Coble
Coburn
Collins
Combest
Condit
Conyers
Cooksey
Costello
Cox
Coyne
Cramer
Crowley
Cubin
Cummings
Cunningham
Danner
Davis (FL)
Davis (IL)
Davis (VA)
Deal
DeFazio
DeGette
Delahunt
DeLauro
DeLay
DeMint
Deutsch
Dickey
Dicks
Dingell
Dixon
Doggett
Dooley
Doolittle
Doyle
Dreier
Duncan
Dunn
Edwards
Ehlers
Ehrlich
Emerson
Engel
English
Eshoo
Etheridge
Evans
Everett
Ewing
Farr
Filner
Fletcher
Foley
Forbes
Ford
Fossella
Fowler
Frank (MA)
Franks (NJ)
Frelinghuysen
Frost
Gallegly
Ganske
Gejdenson
Gekas
Gephardt
Gibbons
Gilchrest
Gillmor
Gilman
Gonzalez
Goode
Goodlatte
Goodling
Gordon
Goss
Graham
Granger
Green (TX)
Green (WI)
Gutierrez
Gutknecht
Hall (OH)
Hall (TX)
Hansen
Hastings (FL)
Hastings (WA)
Hayes
Hayworth
Hefley
Herger
Hill (IN)
Hill (MT)
Hilleary
Hilliard
Hinchey
Hinojosa
Hobson
Hoeffel
Hoekstra
Holden
Holt
Hooley
Horn
Hostettler
Houghton
Hoyer
Hulshof
Hunter
Hutchinson
Hyde
Inslee
Isakson
Istook
Jackson (IL)
Jackson-Lee (TX)
Jefferson
Jenkins
John
Johnson (CT)
Johnson, E. B.
Johnson, Sam
Jones (NC)
Jones (OH)
Kanjorski
Kaptur
Kasich
Kelly
Kennedy
Kildee
Kilpatrick
Kind (WI)
King (NY)
Kingston
Kleczka
Klink
Knollenberg
Kolbe
Kucinich
Kuykendall
LaFalce
LaHood
Lampson
Lantos
Largent
Larson
Latham
LaTourette
Lazio
Leach
Lee
Levin
Lewis (CA)
Lewis (GA)
Lewis (KY)
Linder
Lipinski
LoBiondo
Lofgren
Lowey
Lucas (KY)
Lucas (OK)
Luther
Maloney (CT)
Maloney (NY)
Manzullo
Markey
Mascara
Matsui
McCarthy (MO)
McCarthy (NY)
McCollum
McCrery
McDermott
McGovern
McHugh
McInnis
McIntosh
McIntyre
McKeon
McKinney
McNulty
Meehan
Meek (FL)
Meeks (NY)
Menendez
Metcalf
Mica
Millender-McDonald
Miller (FL)
Miller, Gary
Miller, George
Minge
Mink
Moakley
Mollohan
Moore
Moran (KS)
Moran (VA)
Morella
Murtha
Nadler
Napolitano
Neal
Nethercutt
Ney
Norwood
Nussle
Oberstar
Obey
Olver
Ortiz
Ose
Owens
Oxley
Packard
Pallone
Pascrell
Pastor
Paul
Payne
Pease
Peterson (MN)
Peterson (PA)
Petri
Phelps
Pickering
Pickett
Pitts
Pombo
Pomeroy
Porter
Portman
Price (NC)
Pryce (OH)
Quinn
Radanovich
Rahall
Ramstad
Rangel
Regula
Reyes
Reynolds
Riley
Rivers
Rodriguez
Roemer
Rogan
Rogers
Rohrabacher
Ros-Lehtinen
Rothman
Roukema
Roybal-Allard
Royce
Rush
Ryan (WI)
Ryun (KS)
Sabo
Salmon
Sanchez
Sanders
Sandlin
Sanford
Sawyer
Saxton
Scarborough
Schaffer
Schakowsky
Scott
Sensenbrenner
Serrano
Sessions
Shadegg
Shaw
Shays
Sherman
Sherwood
Shimkus
Shows
Simpson
Sisisky
Skeen
Skelton
Slaughter
Smith (MI)
Smith (NJ)
Smith (TX)
Smith (WA)
Snyder
Souder
Spence
Spratt
Stabenow
Stark
Stearns
Stenholm
Strickland
Stump
Stupak
Sununu
Sweeney
Talent
Tancredo
Tanner
Tauscher
Tauzin
Taylor (MS)
Taylor (NC)
Terry
Thomas
Thompson (CA)
Thompson (MS)
Thornberry
Thune
Thurman
Tiahrt
Tierney
Toomey
Towns
Traficant
Turner
Udall (CO)
Udall (NM)
Upton
Velazquez
Visclosky
Vitter
Walden
Walsh
Wamp
Waters
Watkins
Watt (NC)
Watts (OK)
Waxman
Weiner
Weldon (FL)
Weldon (PA)
Weller
Wexler
Weygand
Whitfield
Wicker
Wilson
Wise
Wolf
Woolsey
Wu
Wynn
Young (AK)
Young (FL)

NOT VOTING—14

Bliley
Brady (PA)
Campbell
Cook
Crane
Diaz-Balart
Fattah
Greenwood
Martinez
Myrick
Northup
Pelosi
Shuster
Vento

□ 1442

Mr. NORWOOD changed his vote from ''no'' to ''aye.''

So the amendment was agreed to.

The result of the vote was announced as above recorded.

Stated for:

Mr. BLILEY. Mr. Chairman, on rollcall No. 99 I was inadvertently detained. Had I been present, I would have voted "yes."

AMENDMENT NO. 2 OFFERED BY MR. LUTHER

The CHAIRMAN pro tempore. The pending business is the demand for a recorded vote on Amendment No. 2 offered by the gentleman from Minnesota (Mr. LUTHER) on which further proceedings were postponed and on which the ayes prevailed by voice vote.

The Clerk will redesignate the amendment.

The Clerk redesignated the amendment.

RECORDED VOTE

The CHAIRMAN pro tempore. A recorded vote has been demanded.

A recorded vote was ordered.

The CHAIRMAN pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 137, noes 284, not voting 13, as follows:

[Roll No. 100]

AYES—137

Ackerman
Allen
Baldacci
Barrett (NE)
Becerra
Bereuter
Berman
Biggert
Blagojevich
Blumenauer
Boehlert
Bonior
Borski
Brown (OH)
Capps
Capuano
Cardin
Carson
Castle
Clay
Clayton
Costello
Coyne
Crowley
Cummings
Davis (IL)
DeGette
Delahunt
DeLauro
Dicks
Dingell
Dixon
Dooley
Doyle
Dreier
Engel
English
Eshoo
Etheridge
Evans
Farr
Filner
Forbes
Frank (MA)
Gejdenson
Gekas
Gephardt
Gilchrest
Goodling
Gutierrez
Hinchey
Hoeffel
Holden
Hoyer
Inslee
Jackson (IL)
Johnson (CT)
Johnson, E.B.
Jones (OH)
Kanjorski
Kennedy
Kildee
Klink
LaHood
Lantos
Larson
Lee
Levin
Lipinski
Lofgren
Lowey
Luther
Maloney (CT)
Markey
Mascara
Matsui
McCarthy (MO)
McIntyre
McNulty
Meehan
Meeks (NY)
Millender-McDonald
Miller, George
Minge
Moakley
Mollohan
Morella
Murtha
Nadler
Napolitano
Neal
Oberstar
Olver
Owens
Payne
Pelosi
Peterson (PA)
Phelps
Pomeroy
Porter
Price (NC)
Quinn
Rahall
Rangel
Roybal-Allard
Rush
Sabo
Sanchez
Sanders
Sawyer
Schakowsky
Serrano
Sessions
Shays
Sherman
Sherwood
Slaughter
Snyder
Stabenow
Stark
Strickland
Stupak
Terry
Thompson (CA)
Tierney
Toomey
Towns
Udall (CO)
Visclosky
Walden
Waters
Waxman
Weiner
Weygand
Wise
Woolsey
Wynn

NOES—284

Abercrombie
Aderholt
Andrews
Archer
Armey
Baca
Bachus
Baird
Baker
Baldwin
Ballenger
Barcia

Barr
Barrett (WI)
Bartlett
Barton
Bass
Bateman
Bentsen
Berkley
Berry
Bilbray
Bilirakis
Bishop
Bliley
Blunt
Boehner
Bonilla
Bono
Boswell
Boucher
Boyd
Brady (TX)
Brown (FL)
Bryant
Burr
Burton
Buyer
Callahan
Calvert
Camp
Canady
Cannon
Chabot
Chambliss
Chenoweth-Hage
Clement
Clyburn
Coble
Coburn
Collins
Combest
Condit
Conyers
Cooksey
Cox
Cramer
Cubin
Cunningham
Danner
Davis (FL)
Davis (VA)
Deal
DeFazio
DeLay
DeMint
Deutsch
Dickey
Doggett
Doolittle
Duncan
Dunn
Edwards
Ehlers
Ehrlich
Emerson
Everett
Ewing
Fletcher
Foley
Ford
Fossella
Fowler
Franks (NJ)
Frelinghuysen
Frost
Gallegly
Ganske
Gibbons
Gillmor
Gilman
Gonzalez
Goode
Goodlatte
Gordon
Goss
Graham
Granger
Green (TX)
Green (WI)
Gutknecht
Hall (OH)
Hall (TX)
Hansen
Hastings (FL)
Hastings (WA)
Hayes
Hayworth
Hefley
Herger
Hill (IN)
Hill (MT)
Hilleary
Hilliard
Hinojosa
Hobson
Hoekstra
Holt
Hooley
Horn
Hostettler
Houghton
Hulshof
Hunter
Hutchinson
Hyde
Isakson
Istook
Jackson-Lee (TX)
Jefferson
Jenkins
John
Johnson, Sam
Jones (NC)
Kaptur
Kasich
Kelly
Kilpatrick
Kind (WI)
King (NY)
Kingston
Kleczka
Knollenberg
Kolbe
Kucinich
Kuykendall
LaFalce
Lampson
Largent
Latham
LaTourette
Lazio
Leach
Lewis (CA)
Lewis (GA)
Lewis (KY)
Linder
LoBiondo
Lucas (KY)
Lucas (OK)
Maloney (NY)
Manzullo
McCarthy (NY)
McCollum
McCrery
McDermott
McGovern
McHugh
McInnis
McIntosh
McKeon
McKinney
Meek (FL)
Menendez
Metcalf
Mica
Miller (FL)
Miller, Gary
Mink
Moore
Moran (KS)
Moran (VA)
Nethercutt
Ney
Norwood
Obey
Ortiz
Ose
Oxley
Packard
Pallone
Pascrell
Pastor
Paul
Pease
Peterson (MN)
Petri
Pickering
Pickett
Pitts
Pombo
Portman
Pryce (OH)
Radanovich
Ramstad
Regula
Reyes
Reynolds
Riley
Rivers
Rodriguez
Roemer
Rogan
Rogers
Rohrabacher
Ros-Lehtinen
Rothman
Roukema
Royce
Ryan (WI)
Ryun (KS)
Salmon
Sandlin
Sanford
Saxton
Scarborough
Schaffer
Scott
Sensenbrenner
Shadegg
Shaw
Shimkus
Shows
Simpson
Sisisky
Skeen
Skelton
Smith (MI)
Smith (NJ)
Smith (TX)
Smith (WA)
Souder
Spence
Spratt
Stearns
Stenholm
Stump
Sununu
Sweeney
Talent
Tancredo
Tanner
Tauscher
Tauzin
Taylor (MS)
Taylor (NC)
Thomas
Thompson (MS)
Thornberry
Thune
Thurman
Tiahrt
Traficant
Turner
Udall (NM)
Upton
Velazquez
Vitter
Walsh
Wamp
Watkins
Watt (NC)
Watts (OK)
Weldon (FL)
Weldon (PA)
Weller
Wexler
Whitfield
Wicker
Wilson
Wolf
Wu
Young (AK)
Young (FL)

NOT VOTING—13

Brady (PA)
Campbell
Cook
Crane
Diaz-Balart
Fattah
Greenwood
Martinez
Myrick
Northup
Nussle
Shuster
Vento

□ 1450

So the amendment was rejected.

The result of the vote was announced as above recorded.

PERSONAL EXPLANATION

Mrs. NORTHRUP. Mr. Chairman, I was unavoidably detained and unable to record a vote by electronic device on the LaHood amendment to H.R. 2418. However, had I been present, I would have voted "no."

I was unable to cast a vote on the DeGette amendment to H.R. 2418. Had I been present, I would have voted "aye."

I was unable to case a vote on the Luther amendment to H.R. 2418. Had I been present, I would have voted "no."

The CHAIRMAN pro tempore (Mr. EWING). It is now in order to consider Amendment No. 4 printed in House report 106–557.

AMENDMENT NO. 4 OFFERED BY MR. BARRETT OF WISCONSIN

Mr. BARRETT of Wisconsin. Mr. Chairman, I offer an amendment.

The CHAIRMAN pro tempore. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 4 offered by Mr. BARRETT of Wisconsin:

Page 28, after line 3, insert the following subsection (and redesignate subsequent subsections accordingly):

''(c) GRANTS TO STATES.—The Secretary may make grants to States for the purpose of assisting States in carrying out organ donor awareness, public education and outreach activities and programs designed to increase the number of organ donors within the State, including living donors. To be eligible, each State shall—

''(1) submit an application to the Department in the form prescribed;

''(2) establish yearly benchmarks for improvement in organ donation rates in the State;

''(3) develop, enhance or expand a State donor registry, which shall be available to hospitals, organ procurement organizations, and other States upon a search requests; and

''(4) report to the Secretary on an annual basis a description and assessment of the State's use of these grant funds, accompanied by an assessment of initiatives for potential replication in other States.

Funds may be used by the State or in partnership with other public agencies or private sector institutions for education and awareness efforts, information dissemination, activities pertaining to the State organ donor registry, and other innovative donation specific initiatives, including living donation.

Page 28, line 12, strike ''$10,000,000'' and insert ''$15,000,000''.

The CHAIRMAN pro tempore. Pursuant to House Resolution 454, the gentleman from Wisconsin (Mr. BARRETT) and a Member opposed each will control 10 minutes.

Mr. BLILEY. Mr. Chairman, I rise to claim the time in opposition, although I am not in opposition.

The CHAIRMAN pro tempore. Without objection, the gentleman from Virginia (Mr. BLILEY) will control the time in opposition.

There was no objection.

The CHAIRMAN pro tempore. The Chair recognizes the gentleman from Wisconsin (Mr. BARRETT).

Mr. BARRETT of Wisconsin. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, this amendment provides a direct mechanism to foster State organ donor awareness, public education and outreach activities and programs designed to increase the number of organ donors within the State, including living donors. Stated simply, the amendment provides a financial incentive for States to tackle creatively the challenges inherent in organ donation awareness and education.

States can play a pivotal role in organ donation success, despite the huge geographic variations and differences across State lines. This amendment authorizes direct grants to States and allows partnerships with other public agencies or private sector institutions within States to mutually undertake organ donation activity.

Under this amendment, States must submit applications in the form prescribed by the Secretary of Health and Human Services and shall establish yearly benchmarks for improvements in organ donation rates in the States. States would be required annually to provide a report to the Secretary, including a description and assessment of the State's use of grant funds and identification of initiatives for potential replication in other States.

Mr. Chairman, this amendment correctly recognizes that States need flexibility designed to address their own organ donation priority areas of concern, yet provides the necessary challenge and financial incentives to address the underlying reason for the organ allocation program in America today, namely, the scarcity of donated organs.

Mr. Chairman, I reserve the balance of my time.

Mr. BLILEY. Mr. Chairman, I yield myself such time as I may consume.

I rise in support of the amendment offered by the gentleman from Wisconsin (Mr. BARRETT) and the gentleman from Wisconsin (Mr. KLECZKA).

This amendment would provide financial incentives for States to creatively tackle the challenges inherent in organ donation awareness and education. It would also authorize direct grants to States to allow partnerships with other public agencies or private sector institutions within States to mutually undertake organ donation activities.

As I have said many times before, Americans who donate their organs, tissue, bone marrow or blood to save another's life are heroes. But, despite the generosity of the American people and improvements in medical treatments for transplant patients, the supply of organs continues to be tragically short of the need for transplantation among patients with in-stage organ disease and organ failure.

Every year, the number of patients who die while waiting for a transplant increases, as does the national waiting

list, which now exceeds 65,000 patients waiting for various organ transplants. We must do more.

As many know, the Committee on Commerce has spent a great deal of time and effort in the last year working to develop good solutions to the difficult problem of increasing the supply of donated organs while safeguarding the system from unintended bureaucratic interference that would dramatically harm efforts to increase donations. Many of these ideas are embodied in H.R. 2418. I believe this amendment will strengthen our public education campaign with respect to organ donation and ultimately increase the amount of organs, tissue, bone marrow, or blood in our transplant centers. Organ donation and awareness is half the battle, and I applaud the gentleman from Wisconsin for tackling the inherent challenges in organ donation activities.

Mr. Chairman, I urge my colleagues to support this amendment.

Mr. Chairman, I reserve the balance of my time.

Mr. BARRETT of Wisconsin. Mr. Chairman, I yield 1½ minutes to the gentleman from Indiana (Mr. ROEMER).

(Mr. ROEMER asked and was given permission to revise and extend his remarks.)

Mr. ROEMER. Mr. Chairman, I rise in strong support of this amendment on education, information, and inspiration.

There is a true story about a family, Reg and Maggie Green, who took their young sons to Italy on vacation, and one of them, Nicholas, was tragically killed in a shooting on the highway, on the super highway. This couple, instead of sprinting, leaving out of Italy, decided to donate seven of Nicholas' organs to citizens of Italy. In the first few days after Nicholas' death, the number of people signing organ donor cards in Italy quadrupled, quadrupled; and donations there last year were more than double the rate that they were in the year before he died.

Mr. Chairman, this is an inspirational story about Nicholas Green, his family, and now the ''Nicholas Effect.'' When we can get these kinds of stories shared, a foundation started, the Nicholas Green Foundation, more people aware of the importance of organs and organ donation programs, sharing of inspiration, sharing of these true stories, we will help address this program and this problem.

So no matter where one is on the question of medical necessity versus location or geography, support this good amendment and support efforts to get information, education, and inspirational stories out there.

Mr. Chairman, I include the following for the RECORD:

Warm, moving, and uplifting . . . a father's story of how a boy's life helped save thousands.

Reg Green knows sorrow. He also knows, first-hand, of people around the world who have risen to the challenge of tragedy with acts of compassion and greatness. Here is the intimate story (behind the headlines and talk shows) of the Greens' fateful trip to Italy: how a botched robbery changed their lives and how Reg and Maggie's private decision to donate their son's organs thrust them into the world spotlight.

The world's response to the Greens' personal tragedy is called the Nicholas effect. No matter their nationality or calling, people respond from the heart—presidents, movie stars, schoolchildren, grandmothers, Boy scouts, soccer players, surgeons, and organ recipients. Organ donor cards are signed. Poems are written, pictures painted, parks dedicated, scholarships established, medals given, children hugged.

The effect continues today, stronger than anyone could have predicted. More than a tale of loss, this is a testament to the power of healing and love.

AN INTERVIEW WITH REG GREEN

(By Doug Hill)

Reg Green is a British-born financial writer who lives in Bodega Bay, California. On the night of September 29, 1994, he was on vacation in southern Italy with his wife and two children when highway robbers shot out the windows of their rented car. Nicholas Green, age 7, asleep in the back set, was hit in the head. Two days later, he was declared brain dead, and the parents agreed to donate his organs for transplant. Nicholas' heart, kidneys, corneas, liver and pancreas cells transformed the lives of seven Italians while the Greens' generosity and spirit inspired the world.

Since then, Reg Green, 70, and Maggie Green, 37, have become international leaders in the movement to promote organ donations, while the power of what is called ''the Nicholas effect'' continues to move anyone who hears their story. They live with their daughter Eleanor, 9, and twins, Martin and Laura who will be 3 in May.

Reg Green has just completed a book which describes the Greens' incredible journey in exquisite and often painful detail. ''The Nicholas Effect'' is to be published by O'Reilly & Associates in April. Recently, Green took time out to discuss ''The Nicholas Effect'' with interviewer Doug Hill.

Hill: What is the Nicholas Effect?

Green: The Nicholas Effect started out by being a very big increase in people in Italy signing their donor cards. Within a few days of Nicholas' death, those signings quadrupled. That was the initial response, and that took our breath away at the time, but I was determined, as Maggie was, that this shouldn't be just a transient thing. We both had this feeling that this could turn out to be one of those things that people would look back on sadly when they remembered it, but would have no real effect on their actions. Some other tragedy would come along that would supersede this one. So we wanted to try to make sure that whatever effect there was would be more lasting. Therefore, we did everything we could to etch it into people's minds. We contacted the media and we gave all the interviews that anybody asked for—we've hardly ever turned down a request for an interview. We made two videos, we've written articles, we dressed up as Santa Claus for an Italian magazine. The main thrust of all this was to remind people of the terrible loss of life around the world because of the low rate of organ donation. There were subsidiary things, however, which we began to see as we got into it. People were being brought closer together by this story. I imagined parents all over the world giving their children an extra hug before they went off to school in the morning or reading an extra page to them at bedtime. So we wanted that to continue as well.

Hill: You've said that the Nicholas Effect is about ''life coming bravely out of death.'' Is that the idea?

Green: Yes. Absolutely.

Hill: That message runs counter to a lot of the cynicism we encounter today, doesn't it?

Green: Yes. I think one of the wonderful things about the Nicholas Effect is that it has uncovered this sense of togetherness—what the Italians call 'solidarity'—that exists between people, people who are often complete strangers. Obviously that's true with organ donation, where you've no idea where the organs are going. White men are walking around with black women's hearts, Anglos are breathing with Mexican lungs, and American children are alive because of donations made by foreign parents—and vice-versa. Human parts are interchangeable. I think that's a wonderful lesson. The differences between us are trifling compared to what we have in common.

Hill: I was struck when reading the book how many times you met someone and then found out quite a bit later that they had experienced some sort of tragedy in their own lives.

Green: Yes, that struck me too, very forcibly. Both in the case of strangers or people I've known for a long time about whom I never suspected anything of that sort. But somehow the barriers come down and they tell us these stories. Just the other day I went into the grocery store and went to the butcher counter. The lady who served me said, 'By the way, you're the father, aren't you?' I said yes, and she said, 'We had a similar incident,' and she proceeded to tell me about a personal tragedy. I've seen that woman a lot of times and that never emerged. She was just the woman who was serving the sausage. Now behind that is the real person.

Hill: How much of the Nicholas Effect has to do with the special qualities of Nicholas himself?

Green: I've often asked myself that. I think quite a lot. I know, of course, that it was our decision to donate the organs, that he wasn't old enough to know what that meant, but somehow with Nicholas you wanted to be your very best. He was a very good little boy and he made you want to live up to his expectations. He stamped his personality on this story. Time and again when reporters would come here, somehow they've been captured by his personality. So the effect was shared according to his own character.

Hill: I must say that as a father I sometimes felt jealous of the bond that you seemed to have with him.

Green: Well, we were very close. I'm quite old, you know, to be the father of a young child. That may have something to do with it. It may be when you're a younger father you've got your own career to worry about, you're very busy, you haven't settled down yet. I work from home, so that helped, also. But, yes, we were very close.

Hill: You describe yourself as an agnostic. Still, do you see a spiritual quality to the Nicholas Effect of any sort?

Green: No, I don't, really, not in any conventional sense. I still don't believe in an afterlife, for example. I've never been tempted to believe in it. It would be nice in a way to think that was true now, but I've never been comfortable with the idea and I've never dabbled at it since Nicholas died. I've always taken hope from the idea that there's a lot you can do here in the world, and that what you do here can be about love rather than hate—kindness rather than cruelty. So my solace comes from what can happen on earth, and I see so much good coming out of all this. Nicholas' example has helped save literally thousands of lives in Italy alone, because the organ donation rates have more than doubled. So that's part of it. The other part of it is that other thing we've been talking about, the sense of people feeling closer together than they did before.

Hill: Was the book difficult for you to write?

Green: I had tears in my eyes many times while I was writing it and some of it was wrenching, going back over Nicholas' death, for example, having to recreate that. But, for the most part, the loss of Nicholas has been so great that talking about it really doesn't make it worse. It was also nice to be able to put down on paper the happier times I remember too.

Hill: What do you hope to accomplish with the book?

Green: Again, there's the two levels of things. On the practical level, I'm hoping it will be another of the building blocks by which organ donation becomes not unusual or horrifying, but the natural thing to do, as natural as putting on a seat belt. And I think it can become as natural as that. There's no organized opposition to organ donation. Whenever they take a poll, eighty percent or more of the people in this country say they are in favor of it and would do it. They don't do it, but not because there's a principled objection to it, but because of circumstances. I think people can be overwhelmed when there is a sudden death. So what I'm hoping to do on that front is make them aware of the importance of it—of the consequences of a refusal. When people are asked to do it, they tend to think of that child or husband of theirs and the organs being taken away from them, and they're frightened or worried by it. I want them to see the other side. If you don't do it, this is what somebody else has to suffer. Somebody else has to go through what you're going through if you don't make that decision. On the organ donation level, that's it. I also wanted to show the sense of solidarity between quite different kinds of people that this incident has produced.

Hill: What specific steps should people take to make sure that their organs will be available for transplant?

Green: The most important is to discuss it with your family so that if there is a brain death in the family, their minds are already attuned to this and it doesn't take them by surprise. There's a new initiative started by the American Society of Transplant Surgeons, and what they ask you to do, instead of signing the donor card, is to just sit down with the family and say, ''Look, if anything were to happen, I'd want you to give my organs and tissues.'' The others in the family who agreed would sign a document, the Family Pledge, and then they'd probably put it away and forget where it was and that would be the end of it. It would have no legal standing, but it would mean that when death did occur, perhaps sooner than anyone expected, that conversation, that joint decision, would come to mind. It wouldn't work every time, but we think in many cases it would have the right effect—people would say, ''Yes, that's just what he wanted.''

Hill: I was struck by your comment in the book that transplantation means we're ''no longer at the mercy of arbitrariness. We have a say in the outcome.'' Could you elaborate on that?

Green: I connect it with the idea that death has a purpose. Death is not simply some terrible thing that happens. None of us is going to like it, but it's there for a reason: the old and the feeble have to be replaced by younger and stronger ones. But people die every day because of the failure of one organ. Many of them are young, some only babies. People with whole lives in front of them are suddenly dead. Transplantation means that we can step in and save such people.

Hill: Did you have any thoughts about donation before your experience with Nicholas?

Green: Not really. I had been very impressed by Christiaan Barnard's early experiments with heart transplants, which seemed like going to the moon. But apart from that, no. I can't recall any conversation that Maggie and I had beforehand. She, it runs out, had signed a donor card and I hadn't.

Hill: So you were pretty much like most of us.

Green: Yes, that's right. It was a revelation to me how much could be achieved. I think in our cases, either one of us would have done it for the other, because it would have been so obvious to us, just as it was in Nicholas' case. And I think many families are like that—they know each other well and would know enough to go ahead and do it, without prior agreement. But still, it's very valuable to have had a discussion, particularly for bigger families, where one person objecting can stop the whole process. This thing has to be done quite promptly—you've only got a short time to make the decision. You may be able to get in touch with your husband, for instance, but suppose you can't get hold of your mother, or his mother? That's what often happens. People take the safe course because it's too difficult to contact everybody, and they're afraid that somebody might object.

Hill: You often describe the decision to donate Nicholas' organs as ''obvious'' or ''easy.'' I think many readers may find that hard to understand—I know I did. Why would it have been that obvious?

Green: It was obvious simply because Nicholas was dead. There was no question in our minds that he wasn't in a coma, for example. Those organs were of no use to him anymore. Not only did Nicholas not need those organs anymore, but the essential Nicholas was clearly not in that body. Whether it was a soul or our memories of him, or the legacy he left behind—that was where Nicholas was. In no way conceivable to us could we be hurting him by using his body, and yet we could be using it to help other people. On top of that, we know that it was a decision he would have approved of. We never discussed it with him, obviously, but if he'd understood the situation, there would have been absolutely no question in Nicholas' mind that that's what he would have wanted us to do.

Hill: The letters chapter in the book is amazing. I was struck by your comment that it isn't possible to read those letters without the sense of a ''momentous event'' having taken place. I assume that's another example of the Nicholas Effect at work?

Green: Yes, on the face of it, it's just one tragedy among many. In terms of numbers, of course, Nicholas' death was a very small tragedy, and yet it had these amazing consequences. The letters we received weren't written the way condolences from strangers often are. They didn't write ''We're sorry your little boy has died . . . He will be in our thoughts and you too . . . Goodbye.'' Instead, their letters talked about big things having happened in their lives because of this event. Some people felt their whole view had shifted, or that they'd taken some quite big action that they hadn't done before. They clearly felt that something had happened of importance that they should pay attention to.

Hill: Why? Why did this one death have that effect?

Green: Well, there must be a lot of elements to that. I think the slaughter of an innocent was part of it—the sheet wantonness of it all.And I think it probably had something to do with the fact that Maggie and I were willing to talk about it to the press right from the beginning, so that Nicholas' personality appeared in the very first stories that were written. He wasn't just figure with a name who was killed: he had a rounded personality. And because there were pictures, there was also a face to go with the story. I think also that having been a journalist, I knew that when you tell a story, you can't wait for two or three days to figure out what you feel about it, or to get it correct to the third place of decimals. You've got to talk right away. Another part of its was the reaction of Italy to it. It took the whole country by storm, and I think that regardless of what we did or didn't do, there would have been that explosion of sympathy. They were horrified that a child had been hurt, many were ashamed. The President and the Prime Minister made it into a national event. All those things together made it an event of importance. When we came back on one of the Italian President's planes, the press was waiting, and the momentum that Italy had given the story continued here, to a higher level still.

Hill: The force of that must have been astonishing to you.

Green: Yes, it was. By now we've grown used to people being moved by this story, but at the beginning we had no idea there'd be this reaction. I remember when we made the decision to donate the organs, we stayed to sign some forms, and then left the hospital. By the time we got back to the hotel, the press already knew. Until then we had thought we were making a purely private decision. Then by the next day there was a sheaf of telegrams from some of the leading figures in Italy.

Hill: As someone who has been a journalist, how well or how poorly did your colleagues in the media handle the story? They come off fairly well in the book, and I wondered if you were bending over backwards to be diplomatic.

Green: No. There were a lot of detailed mistakes, people getting our ages wrong and that sort of thing. A couple of magazines quoted us as saying that ''Nicholas lives''—meaning he lives on through the organ recipients—and we never said that. But, as a whole, people treated the story seriously and they treated organ donation in a very mature and positive way. So we have nothing to complain about. In fact, I'm grateful to the press, because without the mass media this would have been a small story instead of a worldwide story.

Hill: It's unusual for anyone who's been the focus of media attention these days to come out of the experience with much positive to say.

Green: I think they all felt very sorry for us. They didn't want to hurt us anymore.

Hill: How are the recipients doing?

Green: They're all back in the mainstream. There are seven of them and most are in very good shape. Let me think. The two who received corneas, yes, no problems there. Two kidneys, yes, Liver, fine, she just had a baby. So those five definitely. Now what have I missed? The boy with the heart, who had had six previous operations, he worried people for a time. He was in the hospital a lot longer than the others and there were side effects, and I remember hearing there were some concerns about rejection. However, a year or so ago I was on a TV program with his mother, and she said he's fine now. The seventh is Silvia, a long time diabetic, a brutal disease. She had been in a series of comas before her transplant and still has serious complications from that time. However, she has recovered enough that when I saw her last she was able to live in an apartment on her own.

Hill: How are Eleanor and the twins doing?

Green: Fine. Eleanor still says from time to time things like, ''Wouldn't Nicholas have enjoyed this?'' or, ''Do you remember when Nicholas did that?'' But the twins have changed her life beyond recognition. She had become an only child and we began to worry that she would turn inward. But the twins have brought out all her maternal instincts

and she looks after them in a very mature way. They dote on her and love it when she comes home from school.

Hill: And Maggie is well:

Green: Yes, she's fine. Maggie's very strong. If you ever met Maggie, you'd see the gentleness in her, but it's the combination of that and the strength behind it all that's made all the difference.

Hill: What about you, Reg? I have read that you now consider increasing awareness of the need for organ donations as your life's work. Is that accurate?

Green: Yes, that's true. What this has given us is a genuine cause that has got two things going for it. One is, we know if does good. We can feel it in the air when we go places—the things people say to us, the statistics in Italy, the letters we get—we just know that it's having the kind of results we want it to have. Secondly, even though we're amateurs in the world of organ donation, and tens of thousands of other people working on this problem know infinitely more about it than we do, I do feel we have a special message.

Hill: My last question is really about the impact of the Nicholas Effect on you. You said at one time that ''while we lost everything, we did get something back.'' What was it you got back?

Green: I suppose the nub of it is knowing so much good came out of what could easily have been just a sordid tragedy. I often think people don't realize, as we didn't, what a mighty gift they have in their hand when they are faced with a decision about making a donation.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from Wisconsin (Mr. GREEN).

Mr. GREEN of Wisconsin. Mr. Chairman, I thank the gentleman for yielding me this time.

I would like to begin by associating myself with the remarks of my friend and colleague from Milwaukee and congratulate both he and my other colleague from Milwaukee (Mr. KLECZKA) for bringing this amendment forward.

This is the ''good news amendment'' of this process. Up to now, our debate, our battle has been over how to arrange the chairs around the table. This amendment is the first amendment that takes square-on the important challenge of how we make the table bigger, of how we make sure that we have more organs in the donor system.

□ 1500

As we have heard several times today, there is a sad shortage, and the shortage is a matter of life and death. But the good news is that in some parts of the country, like my home State and the gentleman's home State of Wisconsin, we have shown that public education and outreach efforts can work. We can increase the percentage of those who donate their organs. We can raise public awareness.

This amendment is so important because it turns to the States and it challenges the States, and works with and reaches out to the States to do what States like Wisconsin have done so we are not bickering over who sends what where, who will make these decisions, whether or not we are going to bring politics into this, turn this over to bureaucrats.

Instead, we can increase the number of organs donated, number of organs in the system, and that is really what this should be about today. That is the most important thing.

Again, I congratulate my colleague for bringing this amendment forward.

Mr. BARRETT of Wisconsin. Mr. Chairman, I yield 3 minutes to my colleague, the gentleman from Wisconsin (Mr. KLECZKA), a coauthor of this amendment.

Mr. KLECZKA. Mr. Chairman, let me thank my colleague, the gentleman from Wisconsin (Mr. BARRETT) for yielding time to me.

Mr. Chairman, I rise not only to support the amendment, but also to support the underlying bill. The entire issue of organ donation is very near and dear to our family, for it was about 6 years ago that my brother received the gift of life. He received a new lung at a local hospital in my district. Without that, my brother would not be with us any longer, or his four children, or his wife.

When we start talking about the allocation of organs and changing the system, I take a very strong interest in that. It seems that, after listening to the debate from those who oppose the bill, it is more of a question of where the organs are harvested, where they are available, and the fact that they are not necessarily sent to areas of the country where they do not do a very good job of procuring organs.

I am saying the answer to that dilemma, to the most serious problem, is not to throw out the current system that works, but let us adopt the Barrett amendment, which provides more Federal resources to educate and to try to provide more donations from individuals in our country.

It is a very simple step, Mr. Chairman. I wonder how many Members of Congress have affixed to their driver's license the organ donation sticker, or have signed on the back of the driver's license the fact that should something happen to us, our organs should be preserved and not let gone to waste?

The question here is, let us provide the same type of education and programming at States other than those who do a good job, like Wisconsin and Florida and Kentucky, to the other States like Pennsylvania and some others of Members who spoke on the floor today.

One of the Members previously in the debate indicated that there are organs available, so someone calls the local golf course. I thought that was a rather crass statement. No one is going to have an organ transplanted into the body because it is newer than what they got. It is not done like a set of tires on your car which would provide for more mileage for getting around. It is a lifesaving thing.

We are told of the sad statistics where 4,000 people a year die because there are no organs available. The waiting lists are in excess of 65,000 around the country. But Mr. Chairman, even in areas where the organs are available, those waiting lists are there, also. They are doled out on medical need. My brother would probably not have received the lung he needed to live if the decision was made in Washington, because what physician, what bureaucrat, is going to know his condition versus the doctors who have attended him for years and years while he waited?

So those 4,000 who passed away because of unavailability of an organ also come from States where the organs are available because they are not plentiful enough. Adopt the Barrett amendment, provide some needed dollars, so we all can enjoy the gift of life that some States might have a couple more than others.

Mr. BLILEY. Mr. Chairman, I yield 2 minutes to the gentleman from Wisconsin (Mr. RYAN)

Mr. RYAN of Wisconsin. Mr. Chairman, I rise as a cosponsor of the Barrett amendment. I would also like to thank the gentlemen from Wisconsin, Mr. KLECZKA and Mr. BARRETT, the cosponsors, the authors of the amendment, for this excellent amendment. I believe this amendment can do a great deal to improve our Nation's current organ donation system.

We have witnessed in several States innovative programs to encourage increased organ donations that have produced dramatic results. In my home State of Wisconsin, we have developed a highly successful organ donation system that has served as a model throughout the country. I believe that Wisconsin has offered much to those States that currently lack high donation rates.

The Wisconsin State legislature just recently passed a bill requiring teenagers to take 30 minutes of instruction on organ and tissue donation as part of their drivers education program. It is innovative programs like these that keep our rates high.

In addition to this program, Wisconsin has also introduced legislation for a donor registry, and currently utilizes driver's license checkout programs, donor cards, and power of attorney for health care forms to encourage organ donation.

This amendment would provide a cooperative environment that shares successes and helps to diminish failures. We should seek to eliminate our national organ shortage by improving the donation rates in all States, not by penalizing States with more effective programs.

I, too, am an organ donor. On the back of my Wisconsin driver's license, I have this great little sticker. We are doing well in Wisconsin. We have a program we are proud of. This amendment does a lot to improve the base text of a good bill to make sure that the States that are doing well continue to do well, and encourages those States that have room for improvement to improve themselves.

Mr. Chairman, I encourage all Members to vote in favor of the Barrett amendment.

Mr. BARRETT of Wisconsin. Mr. Chairman, I yield 2 minutes to the gentlewoman from Wisconsin (Ms. BALDWIN).

Ms. BALDWIN. Mr. Chairman, I thank the gentleman for yielding time to me.

Mr. Chairman, in my home State, as Members have heard, we are blessed with one of the Nation's most successful organ transplant and procurement programs. People in Wisconsin care about helping their neighbors and loved ones, and we benefit from a very successful education and outreach program.

Everyone is involved in this effort, from families to physicians, small clinics and larger transplant hospitals. Additionally, the local media takes the time to emphasize and praise the actions of organ donors.

For instance, just this past weekend, one of my hometown newspapers featured a front page story on the recent tragic death of a 15-year-old boy in my district from a severe asthma attack. But even in the face of this awful tragedy, the family and the journalist made a point of noting the boy's commitment to organ donation.

Jason Frederick had talked about donating his organs. It was something he felt very strongly about. He wanted to be an organ donor, but he did not yet have his driver's license. His family made sure that his wishes were carried out.

Rules and regulations at the Federal level addressing organ allocation will not address the critical issue of organ shortage. That is why this bill and the Barrett-Kleczka amendment are necessary. I am a cosponsor of this amendment because I want all States across the country to share Wisconsin's success in organ procurement and transplants.

I urge my colleagues to support this amendment and to provide States with the resources to address the underlying reason for the organ allocation problem in America today, the scarcity of donated organs.

Mr. BLILEY. Mr. Chairman, may I ask, do I have the right to close?

The CHAIRMAN pro tempore (Mr. EWING). Under the circumstances, the gentleman from Wisconsin (Mr. BARRETT) has the right to close, since the gentleman from Virginia (Mr. BLILEY) is not opposed to the amendment.

Mr. BLILEY. Mr. Chairman, I yield the balance of my time to the gentleman from Florida (Mr. BILIRAKIS).

Mr. BILIRAKIS. Mr. Chairman, I want to just take a few seconds, really, to commend the gentleman from Wisconsin (Mr. BARRETT). He is on the committee, he is on the subcommittee, and he has heard all of the arguments and debate in the hearings.

In the process, unfortunately, of taking something which should have been worked out by the parties, and this is something we all were strongly hoping for and unfortunately it did not work out, because, as somebody said earlier today, we should not even really have to be doing something like this on the floor. The truth is that we should not have to, but we were forced to.

In the process of all that, however, many people said that what we really have to concentrate on is how to improve the harvesting of organs to get additional donations of organs and whatnot.

I think that the gentleman from Wisconsin (Mr. BARRETT) by his amendment is basically the only one who has addressed that at this point in time. We are hopeful we can work together to improve what he has come up with once this is behind us.

We want to commend him. I support his amendment and I want to publicly say so, particularly to commend him for coming up with these very innovative ideas. They do not go as far as we all would like them to go, but it certainly goes in the right direction. I want the gentleman to know that I appreciate it very much. I do commend the gentleman.

Mr. BARRETT of Wisconsin. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I want to thank the gentleman from Florida. I wish he had more time, because he is so nice to me.

Mr. Chairman, I yield 2 minutes to the gentleman from Wisconsin (Mr. KIND).

(Mr. KIND asked and was given permission to revise and extend his remarks.)

Mr. KIND. Mr. Chairman, I thank my friend for yielding me this time.

For someone just tuning in, Mr. Chairman, they are probably a little surprised to see that we are not actually debating dairy policy right now. Instead, we are talking about the organ donation system in the country. That is because it is very important for the people in Wisconsin, but it is actually as important for people across the country.

I know most of the Members here today are approaching this based on the very local and parochial viewpoint on the issue, but hopefully all of us can see the need and agree to support this very important amendment. I commend my friends, the gentlemen from Wisconsin, Mr. BARRETT and Mr. KLECZKA, for offering this.

This amendment is very simple. It establishes grants to States to foster public awareness, education, and outreach activities designed to increase the number of organ donors within the State. There is a shortage of organ donors across the States. I am very proud that my own State of Wisconsin has an excellent record of organ procurement. In 1999, the University of Wisconsin was one of the top organizations in organ procurement.

In fact, many States across the country including Alabama, California, Hawaii, Indiana, Missouri, Montana, and Texas, just to name a few, have implemented innovative programs to increase organ donation. In fact, Wisconsin has a model intensive education program that works closely with schools, community groups, church groups, and the hospitals to allay individuals' questions and concerns relating to organ donation.

This amendment recognizes the critical role that States can play and are playing in improving organ donation. I would urge my colleagues to support it.

Mr. BARRETT of Wisconsin. Mr. Chairman, I yield back the balance of my time.

The CHAIRMAN pro tempore. The question is on the amendment offered by the gentleman from Wisconsin (Mr. BARRETT).

The amendment was agreed to.

The CHAIRMAN pro tempore. It is now in order to consider amendment No. 5 printed in House Report 106–557.

AMENDMENT NO. 5 OFFERED BY MR. SCARBOROUGH

Mr. SCARBOROUGH. Mr. Chairman, I offer an amendment.

The CHAIRMAN pro tempore. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 5 offered by Mr. SCARBOROUGH:

Page 29, after line 17, insert the following:

SEC. 8. NULLIFICATION OF FINAL RULE RELATING TO ORGAN PROCUREMENT AND TRANSPLANTATION NETWORK.

Notwithstanding any other provision of law, the final rule relating to the Organ Procurement and Transportation Network, promulgated by the Secretary of Health and Human Services and published in the Federal Register on April 2, 1998 (63 Fed Reg. 16296 et seq. adding part 121 to title 42, Code of Federal Regulations) and amended on October 20, 1999 (64 Fed. Reg. 56649 et seq.), shall have no force or legal effect.

Page 29, line 18, redesignate section 8 as section 9.

The CHAIRMAN pro tempore. Pursuant to House Resolution 454, the gentleman from Florida (Mr. SCARBOROUGH) and a Member opposed each will control 15 minutes.

Is there a Member opposed to the amendment?

Mr. BROWN of Ohio. Mr. Chairman, I rise in opposition to the amendment.

The CHAIRMAN pro tempore. The gentleman from Ohio (Mr. BROWN) will be recognized for 15 minutes.

The Chair recognizes the gentleman from Florida (Mr. SCARBOROUGH).

Mr. SCARBOROUGH. Mr. Chairman, I yield myself 5 minutes.

Mr. Chairman, first of all, I rise in strong support of this bipartisan legislation, which obviously is going to reorganize the National Organ Transplant Act of 1984. It is a critical piece of legislation that will obviously save lives, and I want to say right now that I certainly heartily support the bill. I want to thank the gentleman from Virginia (Mr. BLILEY) and the gentleman from Florida (Mr. BILIRAKIS) for their hard work on the bill.

The Scarborough-Thurman amendment is actually a friendly amendment

that preserves the use of real science and medicine in allocating organs. It keeps organ allocation out of the hands of Federal bureaucrats and keeps it with local doctors and also with local communities.

Unfortunately, in 1998, a bureaucratic rule was passed that tried to centralize all the power in the Department of HHS, and also centralize all of the decision-making authority with Donna Shalala and her bureaucracy. It was nothing less than a hijacking of the process, and today, as we talk about passing this important, critical bipartisan legislation, it is important to remember that this centralizing rule that allows bureaucracies to make decisions and not local doctors and local hospitals, local medical providers, and local communities, is still in effect.

□ 1515

The recent Institute of Medicine study concluded that the current organ transplant system is fair and does a very good job of acquiring and allocating organs for transplantation. However, like any system there is room for improvement but those decisions for improvement should be made by the people who are best equipped to make the decisions, the transplant community rather than the HHS bureaucracy.

My amendment clarifies that the authority to set transplant policy rests with the transplant community and results from bottom up consensus driven processes, not by a regulatory fiat.

The Institute of Medicine also contradicted the underlying rationale for the controversial rule on organ allocation proposed by the Department of HHS. In an analysis of 68,000 liver patient records, the IOM panel said, quote, the overall median waiting time that patients wait for organs, the issue that seems to have brought the committee to the table in the first place, is not a useful statistic for comparing access to or equity of the current system of liver transplantation, especially when aggregated across all categories of liver transplant patients.

HHS has vigorously maintained that reducing regional differences in waiting time was the primary goal of the rule on organ allocation, but the practical effect of the rule would be to shift organs that are currently used for transplants in many local or regional transplant centers across the country to just a few very large national centers. This centralization of the process in Washington, D.C. could mean that patients waiting for a transplant at a local center are going to have to wait much longer or actually have to relocate closer to a national center if they hope to get the transplants that they so desperately need.

Now, for many patients, particularly poor, lower income patients, this could present a formidable economic obstacle for them and their families. To make matters worse, States where these national centers are located may not accept Medicaid from the patient's home State. Again, who is penalized? It is the low-income patient. The policy mandated by HHS will impair access to transplantation services for these low-income patients and lack of access to organs may drive some regional transplant centers completely out of business, inflicting a fundamental blow to patient access and, most importantly, to patient choice.

Congress must step in and act to assure that allocation policies that have been developed will not harm patient access to local transplantation services. The amendment that the gentlewoman from Florida (Mrs. THURMAN) and I would offer simply nullifies the final rule issued by HHS Secretary Donna Shalala that gives HHS the sole, centralized bureaucratic authority to approve or disapprove organ allocation policies that are currently established by the private sector transplant community.

It just makes absolutely no sense to centralize this process in one Washington bureaucracy and basically dictate what transplant centers across this Nation will do.

The Shalala rule is a bad rule. It makes no sense. It hurts those that are the lowest income transplant patients and, most importantly, it hurts choice.

Mr. Chairman, I reserve the balance of my time.

Mr. BROWN of Ohio. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I rise in strong opposition to the Scarborough amendment. The Department of Health and Human Services has worked with the transplant community and with UNOS to develop a final rule that reflects the Institute of Medicine recommendations, that reflects common sense.

On what basis should this body nullify those months of work, those hours and hours of time put in by HHS and outside experts?

Let me quote William Payne, MD, the President of UNOS. Dr. Payne, from listening to the debate today, must be quite a special man. After all, proponents of H.R. 2418 are comfortable bestowing upon him authority over matters critical to the public interest and to public health and to ensure that his decision-making is unencumbered by accountability to the public.

Let me quote Dr. Payne. In a letter he wrote a couple of weeks ago to my friend, the gentleman from Michigan (Mr. DINGELL) Dr. Payne said, quote, UNOS and HHS are working closely together to ensure an effective and efficient implementation of the Department's final rule, including the organ allocation provisions.

Let me read that again. UNOS and HHS are working closely together to ensure an effective and efficient implementation of the Department's final rule, including the organ allocation provisions, unquote.

So, even the President of UNOS seems supportive of HHS rule. So why should we overturn those rules?

Mr. Chairman, HHS has worked hard to ensure the final rule reflects Institute of Medicine recommendations. HHS has worked hard to ensure that the final rule reflects the views of patients, of donors, of the medical community, and the current contractor handling organ allocation.

The only reason, the only reason to nullify the HHS rule, is to perpetuate inequities in the system that we have heard so much about today and the lax oversight that has allowed these inequities to become entrenched in our organ allocation system.

Proponents of H.R. 2418 claim that HHS is engaging in a power grab. I maintain HHS is claiming, on behalf of the public, on behalf of taxpayers whom it represents, authority that does not belong to a private contractor.

Again, the right way to serve the public interest is not to protect a private government contractor from public input. It is to ensure that private and public interests work together to build the best, most equitable system possible. That is the fundamental principle articulated in the Institute of Medicine report, and it is a defining principle underlying the HHS final rule.

I urge my colleagues to oppose the Scarborough amendment, which undercuts both IOM, Institute of Medicine findings, and a final rule that is thorough and is fair.

Mr. Chairman, I reserve the balance of my time.

Mr. SCARBOROUGH. Mr. Chairman, I yield 1 minute to the gentleman from Virginia (Mr. BLILEY), the chairman of the committee.

Mr. BLILEY. Mr. Chairman, I thank the gentleman from Florida (Mr. SCARBOROUGH) for yielding me this time.

Mr. Chairman, I rise in support of this very straightforward Scarborough-Thurman amendment which nullifies the administration's organ regulation. This amendment clarifies for HHS that once H.R. 2418 becomes law, the Department must issue a new regulation to comport with the new authorization and to include lessons learned from 2 years of fighting with Congress.

I encourage my colleagues to join me in voting yes on the Scarborough-Thurman amendment.

Mr. BROWN of Ohio. Mr. Chairman, I yield 5 minutes to the gentleman from Pennsylvania (Mr. KLINK).

Mr. KLINK. Mr. Chairman, I thank the gentleman from Ohio (Mr. BROWN) for yielding me this time.

Mr. Chairman, this is a difficult issue because we have good friends who we respect on both sides of this amendment, on both sides of this bill. We come to our decisions with very deep and heartfelt life experiences that we have seen. This, I think, unlike most other pieces of legislation that we should argue and debate about, many of us have had firsthand experience.

I kind of grew up professionally, before I was a Member of Congress, I was

in the news media in Pittsburgh and knew and still know Dr. Thomas Starzel, who is the father of much of the transplant technology that we have not only across this Nation but around this world.

The University of Pittsburgh, where Dr. Starzel and many of the other doctors who he trained and they trained other doctors, really went from an infancy of transplanting where there was seldom people that really survived for very long to the point where it is almost as commonplace as changing a carburetor in an automobile or an engine in a truck or a car to change major body parts and have people survive.

What a miraculous and historic time we live in.

The question here is, who plays God? Let us not make any questions or any qualms about this. It is, where is the authority? The question is, do we take a private contractor, UNOS, and allow them to be the sole decision maker here? Or is there some government oversight?

I have heard much of the rhetoric today that we do not want some centralized, bureaucratic decision-making process based here in Washington, D.C. Well, that is what we typically call folderol in western Pennsylvania, because there is certainly not any monopoly on bad decision-making process in government.

I have been the ranking Democrat on the Subcommittee on Oversight and Investigations that has jurisdiction over, among other agencies, the Health Care Finance Administration. As we looked at the fiscal intermediaries, those insurance companies that we put in place to handle Medicare payments to hospitals, we found vast numbers of them that have ripped off the system for tens of millions of dollars. They have paid criminal and civil penalties for doing it. They have admitted their guilt.

We must have some government oversight. As I said earlier when we were debating the LaHood amendment, we depend on the Secretary and the agency to help us determine what medicines and what medical devices are safe and to tell us what the NIH criteria should be for research, what Medicare should cover. Now all of a sudden we want the government out and we want a private contractor making all of these decisions.

One cannot talk very badly, when they talk about the transplants, about the so-called national centers, whether it is at Pittsburgh, Stanford University, Cedar Sinai because these centers, and I have seen it firsthand, accept the sickest patients, patients quite often that would not be accepted for transplant in some of the smaller institutions around the country.

They accept people not just from their State, not just from their geographic location but from everywhere. We have seen circumstances where patients would come to the University of Pittsburgh, for example, and would not be able to get an organ from their home State because that State wanted to keep those organs in that State. We are simply talking about Health and Human Services, the Federal Government, working with UNOS, working with the transplant community, to set up a better, more definitive decision-making process. It does not have to be all one way or all the other way.

We cannot put private contracting agencies, with no recourse, with no checks and balances, in the position of playing God. That is what this amendment would do.

I must rise in strong, strong objection to this amendment, and I hope that there are Members who are not here that are watching on their TVs in their offices and that they will come here and vote against this amendment. It is not because I have an objection to the authors. I think that they have offered this with the best of aforethought, but on this, Mr. Chairman, we have a very deep-seated disagreement, and this amendment should be voted down.

Mr. SCARBOROUGH. Mr. Chairman, I yield myself 30 seconds.

Mr. Chairman, I would say, first of all, it sounded to me like we were really having to choose between two false choices there because right now the Federal Government does have oversight. HHS does have oversight. It had oversight when this bill was passed into law in 1984.

HHS has oversight, but what has happened now is oversight is not enough. They want to completely hijack the process. They want to be able to dictate whether somebody that dies in the Congressman's district near Pittsburgh can get an organ transplant in Pittsburgh or whether they decide they are going to have to go to Stanford University in California. It is unfair to the poorest people and it is wrong. Donna Shalala does not have a right to hijack the process.

Mr. Chairman, I yield 5½ minutes to the gentlewoman from Florida (Mrs. THURMAN).

Mrs. THURMAN. Mr. Chairman, I thank the gentleman from Florida (Mr. SCARBOROUGH) for yielding and I want to say that he has done a lot of hard work on this and I am proud to be standing here as a cosponsor with him on this floor today.

Mr. Chairman, I am rising in strong support of the underlying bill, H.R. 2418, but as well to this amendment. Some people might say well, why do we have to have this amendment when the bill reauthorizes the pre-HHS rule organ policies? Well, the truth is that this bill will reauthorize and strengthen the organ policies of our country. However, the HHS rule will still be in place and we would need to nullify that rule in order to turn these decisions back over to medical doctors.

So if one is for this underlying bill, they need to be for this amendment.

We have talked about that there are more than 63,000 Americans who are awaiting an organ transplant and each year about 4,000 Americans die because there are not enough donated livers, kidneys, and other organs to go around.

□ 1530

I just might insert here that, under the Health Resources and Services Administration, while they go through talking about reasons that we should improve the Nation's organ transplant, this is a part of HHS, the very last statement that they make is: the primary problem remains the shortage of organs available for transplantation. Absolutely the bottom line of all of this. So we all agree that we must increase the number of organ donations in our country. However, not all of us agree on how to do this.

The Department of Health and Human Services believes the way to solve the problem is to move the organs from one part of the country to another. Although many people think this may help the organ shortage problem, do my colleagues know what I think? I believe this will only change the demographics of where people will die.

As long as there is an unequal number of patients needing transplants compared to organs available, people are going to die.

I do not disagree with Secretary Shalala's assertion that people in different areas of the country are waiting for different lengths of time. However, I have to insert here that it is important to remember that the very sickest patients, those who are in intensive care units, the current waiting period among all transplant centers is very short, less than 6 days in all regions of the country, in all regions of the country. This was publicly acknowledged by HHS officials at the same time that they issued the regulations.

However, we also do not believe, or that it is clearly an oversimplification to think that reallocating the available organs will have a positive impact on the outcome. UNOS says history shows that organ donation is a local phenomena. Organ donations rise in communities that have transplant centers and fall when centers close.

I have also heard several Members rise and talk about how lower-income individuals are not receiving organs in a timely manner. First, my colleagues should know that income is not taken into consideration when a patient is put on a transplant list.

Also, my colleagues should know that HHS regulations could have a negative impact on individuals who will have to travel great distances and be separated from their loved ones at a time when they are needed most.

Under the HHS rule, the additional travel cost could make it impossible for the 20 percent of transplant patients who are on Medicaid actually who would receive a transplant. Now, how would this happen? Because we think, if this rule stays in place, that

in fact there would be centers in their communities that actually would close.

I also have to tell my colleagues, with the rule, there is a further problem generated by these regulations, one that was never taken into account; and that is the patients will have to become extremely ill before they receive a transplant. However, under the current rules and the UNOS policy, an individual's likelihood for a successful transplant is taken into consideration.

Why should the Secretary have the power to determine who gets an organ? UNOS, along with the medical community, needs to determine who needs the organs the most and who will most likely be a successful transplant recipient.

My State of Florida has done an incredible job of increasing the number of individuals who agree to be an organ donor. Why should my State and my local transplant centers be punished for doing a good job? Why should the Federal Government dictate that someone who is a status 2 patient in another State should get an organ before a status 2 patient in Florida?

Allocation policies must be based on sound medical decisions, decisions made by the board of UNOS, not decisions handed down by the Federal Government.

My colleagues might also be interested to learn that kidneys must be compatible, and I do have personal experience on this. With regard to the liver, UNOS has recently taken steps to approve a new liver allocation plan which calls for developing new, more objective criteria for listing patients in the progressive illness categories.

The bottom line is we need to pass this amendment. If my colleagues agree with the underlying bill, then this amendment is what is needed so that we can make sure of what the gentleman from Ohio (Mr. BROWN) said, that UNOS and the Department can sit down and come up with one that is more aggressive for everybody.

Mr. BROWN of Ohio. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I want to recap sort of where we have been with this controversy in the last couple of years. Two years ago, almost exactly to this day, in early April of 1998, HHS promulgated what was called the final rule at that point on this. Soon after, our colleague who has since left, Mr. Livingston, inserted or added in the appropriations process a rider calling for an Institute of Medicine study and saying that he was particularly unhappy, as many Members of Congress were, in some cases legitimately, with what had transpired and with the HHS rule.

The Institute of Medicine study came up with several interesting things. This is the study I hold here. It is 200 pages. It is clearly well thought through and well considered and well constructed with good recommendations. This Institute of Medicine study was factored into revised rules by HHS. The proposed finalized, revised version, which was issued October 20, 1999, included IOM rules. It included some of the considerations and ideas from the public. It included input from UNOS.

That is why, in the end, that Dr. Payne, and I said this earlier, why Dr. Payne, the President of UNOS, has written that UNOS and HHS are working closely together to ensure an effective and efficient implementation of the Department's final rule set for March 16, including its organ allocation provisions.

That is exactly the point. HHS issued a rule. Congress stepped in, said we need this IOM study. We got this IOM study. The study from the Institute of Medicine was incorporated in the new HHS rule. In this proposed finalized, revised version issued October 20, other changes recommended by UNOS, recommended by the public were incorporated.

That is why the very respected Dr. Payne, who is head of UNOS, said that UNOS and HHS is working together. That is why we should oppose this amendment. That is why we should oppose this bill if the amendment is incorporated.

Mr. Chairman, I reserve the balance of my time.

Mr. SCARBOROUGH. Mr. Chairman, can I inquire how much time each side has remaining.

The CHAIRMAN pro tempore (Mr. HOBSON). The gentleman from Florida (Mr. SCARBOROUGH) has 3½ minutes remaining. The gentleman from Ohio (Mr. BROWN) has 5½ minutes remaining.

Mr. SCARBOROUGH. Mr. Chairman, I yield 1 minute to the gentleman from Alabama (Mr. BACHUS).

Mr. BACHUS. Mr. Chairman, March 16, 2000, that was last month. It was a Thursday. HHS and Donna Shalala decided that they knew better than doctors, they knew better than hospitals, they knew better than the entire transplant community. They substituted their opinion for that of patient, for doctor, family, and decided that they would make the call that their opinion was what counted when it came to transplants. It was a day on which they issued a rule that threatens the health of tens of thousands of Americans.

This amendment is necessary because we need to send a strong signal, this body, that medical decisions are not made by Federal bureaucrats that do not have a medical degree. They are made by the medical community. They are made by the hospital. They are made by the patients.

This amendment is a good amendment. On three occasions, the Congress has voted to stop that rule. It is time to put a stake through the heart of that ill-conceived rule.

Mr. SCARBOROUGH. Mr. Chairman, do I have the right to close?

The CHAIRMAN pro tempore. The gentleman from Ohio (Mr. BROWN) has the right to close.

Mr. SCARBOROUGH. Mr. Chairman, I yield the remaining time to the gentleman from Florida (Mr. BILIRAKIS).

Mr. BILIRAKIS. Mr. Chairman, I support the amendment, and I am in support of the final passage of the basic bill.

Really, the transplant community has put it a lot better than any of us could. I would like to just share with my colleagues some excerpts from some of their comments. ''A 'sickest first' policy would increase the number of retransplants as more patients experience graft rejection, and thus reduce the number of organs available for transplantation overall. Patients would have to become 'sicker' in order to receive a transplant, thus reducing their chance for survival. This would be completely counterproductive and result in increased cost with reduced success.'' I quote Dr. R. Robert Higgins, Director of Thoracic Organ Transplantation, Henry Ford Hospital in Michigan.

He went on to say, ''A national list coupled with a sickest-first policy would make it all but impossible for my patients and in particular patients everywhere that are poor or minority patients, to receive a transplant. From a physician's point of view, without available organs, there is nothing I can do to help my patients over the longer term. If the rule were in effect today, the Federal Government would essentially be denying the benefits of organ transplantation to a broader number of patients.'' Dr. Higgins of Henry Ford Hospital made those comments.

Joseph Brand, chairman of the National Kidney Foundation: ''We believe that less patients would receive liver transplants if the OPTN were required to develop policies where organs are allocated to the sickest candidates first. Such candidates are likely to have poor outcomes and require repeat transplants, thus reducing the number of organs available for other candidates. Furthermore, NKF has maintained that a 'sickest first' policy should not be applied to renal transplantation because of the availability of dialysis as an alternative therapy.''

Mr. John R. Campbell, senior vice president and general counsel of LifeLink says, in talking about the great instances of the donations: ''First, costs will dramatically increase, because of the required private jet transportation of hearts and livers. Second, 'warm' time,'' W-A-R-M time, ''or the time from organ procurement to implantation, will increase, and thereby decrease the function of the organs. This will also increase costs. The patients at the 'top' of the transplant list are very sick, and do not do as well with their transplants as other patients. Therefore, retransplants will increase because very sick patients are more likely to experience rejection of the organ, and transplant hospital stays will increase.''

Mr. Chairman, I include all of these comments for the RECORD as follows:

ADMINISTRATION REGULATION WOULD HURT ORGAN SUPPLIES

QUESTION POSED FOR APRIL 15, 1999 HEARING ON: PUTTING PATIENTS FIRST: INCREASING ORGAN SUPPLY FOR TRANSPLANTATION

The proposed HHS regulations to reallocate organs state that ''the OPTN is required to develop equitable allocation policies that provide organs to those with the greatest medical urgency, in accordance with sound medical judgment.'' When President Clinton signed H.R. 3579, the Supplemental Appropriations and Rescissions Act, on May 1, 1998, which extended the public comment period and implementation deadline for the HHS OPTN regulations, he issued a written statement in opposition to extending the comment period on the rule. In stating his reasons for opposing the extension, President Clinton stated that ''The final rule would ensure that organs are allocated to the sickest candidates first.'' What would be the supply-side effects of a policy where organs were to be allocated to ''the sickest candidates first''?

RESPONSES

''A 'sickest first' policy would increase the number of re-transplants as more patients experience graft rejection, and thus reduce the number of organs available for transplantation overall. Patients would have to become 'sicker' in order to receive a transplant, thus reducing their chance for survival. This would be completely counterproductive and result in increased cost with reduced success.''—Dr. R. Robert Higgins, Director of Thoracic Organ Transplantation, Henry Ford Hospital.

''The supply-side effects would result from the increased transplant of sicker patients, at great distance from the location of the donation. First, costs will dramatically increase, because of the required private jet transportation of hearts and livers. Second, 'warm' time, or the time from organ procurement to implantation, will increase, and thereby decrease the function of the organs. This will also increase costs. The patients at the 'top' of the transplant list are very sick, and do not do as well with their transplants as other patients. Therefore, retransplants will increase because very sick patients are more likely to experience rejection of the organ, and transplant hospital stays will increase. Data indicates that a new allocation scheme would substantially increase organ wastage. Also, in States like Florida, the hard work and dramatic success of our local and state organ donation partnership will be diluted by siphoning organs to out-of-state transplant centers. We believe donor families are more likely to donate knowing that the organs will benefit their local community. But we also believe that the staff responsible for acquiring consent and arranging the logistics of organ donation are also motivated by the knowledge that patients in their community are being helped by their hard work. The immediate results are apparent to everyone involved, and give them the greatest incentive to work at their maximum efficiency.''—John R. Campbell, P.A., J.D., Senior Vice President and General Counsel, LifeLink.

''We believe that less patients would receive liver transplants if the OPTN were required to develop policies where organs are allocated to the sickest candidates first. Such candidates are likely to have poor outcomes and require repeat transplants, thus reducing the number of organs available for other candidates. Furthermore, NKF has maintained that a 'sickest first' policy should not be applied to renal transplantation because of the availability of dialysis as an alternative therapy.''—Joseph L. Brand, Chairman, National Kidney Foundation, Office of Scientific and Public Policy.

''UNOS modeling of a 'sicker patient first' policy indicates that more organs would be wasted and fewer patients transplanted with poorer overall results. Unfortunately, sicker patients are more likely to die or lose their transplants to post operative complications. My experience in the private practice of medicine for over 25 years, taught me early on that I couldn't 'cure' everyone; that, unfortunately, not everyone would ever have equal access to medical care, and one had to learn to deal with 'the hand you were dealt.' It is, and always will be, an imperfect world.''—Robert A. Metzger, M.D., Medical Director, Translife.

''The ASTS has made it clear that we believe the impact of such a 'sickest first' policy would be contrary to our goal of insuring that the precious organs presently available provide the maximum benefit to the maximum number of Americans in an equitable fashion. This point was made in testimony presented at two previous Congressional hearings by Dr. Ronald W. Busuttil, President-elect of the Society and director of the world's most active liver transplant center in UCLA, and I am submitting copies of his testimony with this response. I also include a copy of our written testimony to the Institute of Medicine, presented by Dr. Busuttil on April 16th, which expands on these points. Unfortunately, critical care medicine and vital organ transplantation is not an exact science. That is why a significant number of Status 3 liver patients, those thought to be the least sick, die while in that status. We urge the Congress to leave decisions of this kind in the hands of the medical professionals—who battle these life-and-death issues with their patients every day—and not permit them to be imposed by governmental authority far from the trenches where life and death is played out. The simple answer is that there are some changes that must evolve in the distribution of life-saving organs for transplantation, as they have evolved in the past. This can be accomplished with the help of the federal government, but not with the implementation of a radically new OPTN rule which with its current inferences, language, and preamble has resulted in soundbites such as 'sickest patients first.' ''—Joshua Miller, M.D., President, American Society of Transplant Surgeons.

''This has been discussed in detail by PAT Coalition. Allocation to the 'sickest first' on a national level will increase wait list mortalities, waste organs, increase retransplantation rates, disadvantage medically and economically disenfranchised segments of the population by limiting access to transplantation for indigent patients as smaller centers are forced to close their doors. The organs would be diverted to the most critically ill patients first, regardless of their location. While this may sound like a fair and reasonable way to allocate organs, a policy such as this may actually result in lost lives. The immediate and long term survival of liver transplant recipients is directly dependent on their preoperative condition, with significant decompensation adversely affecting survival. Blindly applied legislation may mean that a significant number of organs are given to people with little chance of survival. Organs may not become available for others until they too are critically ill with little chance of survival.''—Amadeo Marcos, Assistant Professor of Surgery, Director of the Living Donor Liver Program, Division of Transplantation, Medical College of Virginia.

''We believe that the current system of policy development is sound. It is based on consensus building and medical judgement. Major changes to the liver and heart allocation policies have been instituted during the past two years by the Organ Procurement and Transplantation Network ('OPTN') contractor, the United Network for Organ Sharing ('UNOS'). This includes standardized listing criteria for patients and changes to the status designations for liver and heart patients. We believe that the current system, while not perfect, is designed to ensure that the sickest patient is offered the organ first. We know in our region that the vast majority of patients receiving heart and liver transplants are transplanted at the highest level of acuity and are the sickest patients in our region. We believe that further changes to mandate a single national list for allocation, may lead to organs being wasted and potential donors lost given the attendant medical and social issues.''—Howard M. Nathan, President and Chief Executive Officer, Coalition on Donation.

ADMINISTRATION REGULATION WOULD HARM LOCAL ACCESS TO TRANSPLANT SERVICES

QUESTION POSED FOR APRIL 15, 1999 HEARING ON: PUTTING PATIENTS FIRST: INCREASING ORGAN SUPPLY FOR TRANSPLANTATION

In your estimation, how would the Department of Health and Human Services regulations published April 2, 1998, affect your patients and your ability to provide the highest quality of medical care for them? What impact will this rule have on local access to transplant services nationwide?

''A national list coupled with a sickest first policy would make it all but impossible for my patients and in particular patients everywhere that are poor or minority patients, to receive a transplant. From a physician's point of view, without available organs, there is nothing I can do to help my patients over the longer term. If the rule were in effect today, the federal government would essentially be denying the benefits to organ transplantation to a broader number of patients.''—Dr. R. Robert Higgins, Director of Thoracic Organ Transplantation, Henry Ford Hospital.

''We believe that our local transplant center patients will be significantly and negatively impacted, as will the vast majority of the country's 120 liver transplant centers. Donated livers will be sent from Florida to a half dozen urban regional transplant centers—none of which are in the southeast. Our community will be deprived of this life-saving resource, a resource which our local citizens and the community have developed together. Highly skilled doctors and nurses will no longer perform the same number of transplants. Local centers may be forced to close their doors. In addition, access for low-income patients may be decreased. Medicaid patients may be unable to obtain transplants outside their home state, and other patient families may not be able to accompany their loved one to support them at a faraway transplant center. Also, organ donation will be affected. Many donor families have stated that a key factor in their decision to donate was the knowledge that they would be helping someone within their community. Eliminating this motivation may substantially reduce voluntary organ donation nationwide.''—John R. Campbell, P.A., J.D., Senior Vice President and General Counsel, LifeLink.

''We are concerned that the April 2, 1998 regulations have politicized the organ donation/organ allocation process since they give the DHHS Secretary veto power over OPTN Policy. Transplantation should be based upon medical science, not politics. We are concerned that the rule may cause some local transplant centers to close and that would make it difficult for low income transplant candidates to receive a transplant. Such candidates may not be able to afford to

travel to distant transplant centers for evaluation, the transplant itself and post-operative care and testing.''—Joseph L. Brand, Chairman, National Kidney Foundation, Office of Scientific and Public Policy.

''The Health and Human Services rule that would mandate 'broader' sharing would result in increased waiting times for Florida recipients as our patients currently have shorter waiting times when compared to the national averages. This could potentially lead to further deterioration in their health prior to transplantation. Local access to local organs, the optimal transplant situation, would occur less frequently.''—Robert A. Metzger, M.D., Medical Director, Translife.

''In general the rule as currently written will impact negatively upon patients nationwide. I personally work in a large transplant center, one of the five largest in the world, and am proud of our record over the years. I also have been proud of our organ procurement agency, the University of Miami OPO. This has repeatedly over the years had one of the most enviable records nation- and worldwide in organ retrieval for life-saving transplantation. This is due to our local OPO Director, Les Olson, with whom I have had the privilege of working for 30 years, first in Minnesota, and then for over 20 years in South Florida. Please make no mistake. Organ donation is a local phenomenon dependent on the expertise of professional personnel. That also accounts for the great records in organ retrieval of Lifelink in West Florida, for Translife in Central Florida, and for the University of Florida OPOs. How could those who drafted the OPTN rule not acknowledge this? Some of the language in the OPTN rule also will have a negative impact on local access to service. I can expand on this, but I refer you to comments already made by our ASTS (enclosed). It is also worth noting that the vast majority of the written comments on the rule, collected by DHHS and not yet described by the Department, are understood to have been negative.''—Joshua Miller, M.D., President, American Society of Transplant Surgeons, University of Miami School of Medicine.

''The portion of the April HHS rule which would create a national wait list will severely limit access to transplantation for the indigent population by forcing small and moderately sized centers to close their doors. This concept is designed to support only a select few very large transplant centers, which would regionalize access to transplantation to only a few places in the entire country. It is obvious that moderately sized centers, such as our own, not only can provide high quality transplant patient services, but also provide the innovative driving force required to develop something like a 'living donor adult-to-adult right lobe' liver transplant program, etc.''—Amadeo Marcos, Assistant Professor of Surgery, Director of the Living Donor Liver Program, Division of Transplantation, Medical College of Virginia.

''Mandating a national allocation system for all organs is likely to spur growth at a few large centers in the country but may impact the viability of smaller programs. This may have the effect of reducing or inhibiting access to services by those recipients and their families who are not able to travel to large centers due to economic and other barriers. Additionally, mandating a national allocation system of organs will eliminate the concept of local neighbor helping neighbor. Complete elimination of the concept of neighbor helping neighbor may adversely impact donation. Finally, a national allocation system disregards differences in medical judgment and opinion. It also disregards the practices of transplant surgeon who perform the organ recovery and view the organ in the donor patient and evaluate biopsy results (for livers) in order to evaluate suitability for transplant generally, as well as suitability for a specific recipient.''—Howard M. Nathan, President and Chief Executive Officer, Coalition on Donation.

Mr. BROWN of Ohio. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, people have sort of heard these debates and arguments on this over and over. I would just like to recap, not just on the Scarborough amendment, but sort of this whole debate, and ask my colleagues to vote ''no'' on Scarborough and ''no'' on final passage.

We have heard Dr. Payne's comments, the president and head of UNOS, and his comments about the importance of these pending negotiations. If my colleagues read what his comments said in his letter to the gentleman from Michigan (Mr. DINGELL) and his other comments, they can clearly see that he wants this process to go on, these negotiations to go on, and not particularly welcoming of congressional interference.

I would also add that we have inserted in the RECORD a statement from the President's advisors that they will recommend a veto on this legislation if, in fact, anything close to its present form reaches the President's desk.

We have also received a letter from the Justice Department reiterating that they strongly believe that this is unconstitutional; and if for some reason, which they do not think would happen, it is not declared unconstitutional, their belief is it shifts power in some sort of the wrong way from the Government to a private sector, private interest group that does not really have any public accountability.

Equally as important, Mr. Chairman, the main argument that the proponents of this bill have made, the proponents of the Scarborough amendment, is that this process, by turning over authority to UNOS, that this process will actually increase the number of donations, organ donations, which is the goal we all aim for.

I would cite from the Institute of Medicine on page 10: ''The committee believes strongly that the effectiveness and productivity of organ procurement is highly dependent on good working relationships at the local level.'' That is clearly what we need to do. But they go on in spite of what we have heard from the other side to say: ''However, our committee finds no evidence that broader organ-sharing arrangements will lead to reduced rates of donation.'' That if organs go farther across the country, it simply does not affect people's proclivity to donate organs. What makes people want to donate organs is that they believe it will save lives.

The Institute of Medicine supports the role of HHS. The Institute of Medicine study here is included in the HHS rules. Shifting power from representatives of the people, from elected and appointed government officials to a private bureaucratic organization is the wrong way to go. The HHS rules will save lives.

We should vote ''no'' on Scarborough. We should vote ''no'' on final passage.

Mr. BILIRAKIS. Mr. Chairman, will the gentleman yield?

Mr. BROWN of Ohio. I yield to the gentleman from Florida.

Mr. BILIRAKIS. Mr. Chairman, I really appreciate the gentleman yielding, because he knows I am going to rebuff some of what he has said.

Basically it is not a shifting of power. For 16 years, it has been UNOS, which is contracted, set up by HHS quite some time ago with the rights to terminate those contracts and that sort of thing.

□ 1545

So it is not a shift of power. In fact, the effort is being made to shift the power from this private agency contractor, from UNOS, back to the Federal Government. That is the shift.

The gentleman from Pennsylvania (Mr. KLINK) talked earlier about all of a sudden. Well, all of a sudden is really what has taken place here. Because for 16 years it was being done a certain way and, all of a sudden, HHS has decided to grab the power.

I appreciate the gentleman yielding.

Mr. BROWN of Ohio. Mr. Chairman, reclaiming my time and in closing, I would reiterate that there is no place in our entire government where the government has abdicated its responsibility and given this kind of authority, this kind of power, with so little government oversight to a bureaucratic organization that is not really accountable to the public.

That is why most of us on this side of the aisle ask for a ''no'' vote on the Scarborough amendment and a ''no'' vote on final passage.

The CHAIRMAN pro tempore (Mr. HOBSON). All time has expired.

The question is on the amendment offered by the gentleman from Florida (Mr. SCARBOROUGH).

The amendment was agreed to.

The CHAIRMAN pro tempore. The question is on the committee amendment in the nature of a substitute, as amended.

The committee amendment in the nature of a substitute, as amended, was agreed to.

The CHAIRMAN pro tempore. Under the rule, the Committee rises.

Accordingly, the Committee rose; and the Speaker pro tempore (Mr. CHABOT) having assumed the chair, Mr. HOBSON, Chairman pro tempore of the Committee of the Whole House on the State of the Union, reported that that Committee, having had under consideration the bill (H.R. 2418) to amend the Public Health Service Act to revise and extend programs relating to organ procurement and transplantation, pursuant to House Resolution 454, he reported the bill back to the House with an amendment adopted by the Committee of the Whole.

The SPEAKER pro tempore. Under the rule, the previous question is ordered.

Is a separate vote demanded on any amendment to the committee amendment in the nature of a substitute adopted by the Committee of the Whole? If not, the question is on the amendment.

The amendment was agreed to.

The SPEAKER pro tempore. The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

The SPEAKER pro tempore. The question is on the passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. BROWN of Ohio. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Evidently a quorum is not present.

The Sergeant at Arms will notify absent Members.

The vote was taken by electronic device, and there were—yeas 275, nays 147, not voting 12, as follows:

[Roll No. 101]

YEAS—275

Abercrombie
Aderholt
Allen
Andrews
Archer
Armey
Bachus
Baird
Baker
Baldacci
Baldwin
Ballenger
Barcia
Barr
Barrett (WI)
Barton
Bass
Bateman
Bentsen
Berkley
Berry
Bilbray
Bilirakis
Bishop
Bliley
Blumenauer
Blunt
Boehner
Bonilla
Bono
Boswell
Boyd
Brady (TX)
Bryant
Burr
Burton
Buyer
Callahan
Calvert
Camp
Canady
Cannon
Chabot
Chambliss
Chenoweth-Hage
Clement
Clyburn
Coble
Coburn
Collins
Combest
Cooksey
Cox
Cramer
Cubin
Cunningham
Danner
Davis (FL)
Davis (VA)
Deal
DeFazio
DeGette
DeLay
DeMint
Deutsch
Dickey
Dicks
Doolittle
Dreier
Duncan
Dunn
Edwards
Ehlers
Emerson
Everett
Ewing
Fletcher
Foley
Ford
Fossella
Fowler
Franks (NJ)
Frelinghuysen
Frost
Gallegly
Ganske
Gephardt
Gibbons
Gillmor
Gilman
Gonzalez
Goode
Goodlatte
Gordon
Goss
Graham
Granger
Green (TX)
Green (WI)
Gutknecht
Hall (TX)
Hastings (WA)
Hayes
Hayworth
Hefley
Herger
Hill (IN)
Hill (MT)
Hilleary
Hilliard
Hinojosa
Hobson
Hoekstra
Holt
Hooley
Horn
Hostettler
Houghton
Hulshof
Hunter
Hutchinson
Inslee
Isakson
Istook
Jackson-Lee (TX)
Jefferson
Jenkins
John
Johnson (CT)
Johnson, E.B.
Johnson, Sam
Jones (NC)
Kaptur
Kasich
Kelly
Kilpatrick
Kind (WI)
Kingston
Kleczka
Knollenberg
Kolbe
Kuykendall
LaFalce
Lampson
Largent
Latham
LaTourette
Lazio
Leach
Lewis (CA)
Lewis (GA)
Lewis (KY)
Linder
LoBiondo
Lucas (KY)
Lucas (OK)
Manzullo
Matsui
McCollum
McCrery
McDermott
McGovern
McHugh
McInnis
McIntosh
McKeon
McKinney
McNulty
Meek (FL)
Menendez
Metcalf
Mica
Miller (FL)
Miller, Gary
Mink
Moore
Moran (KS)
Moran (VA)
Nethercutt
Ney
Northup
Norwood
Nussle
Obey
Ortiz
Ose
Oxley
Packard
Pallone
Pascrell
Pastor
Pease
Petri
Pickering
Pickett
Pitts
Pombo
Portman
Pryce (OH)
Radanovich
Ramstad
Regula
Reyes
Reynolds
Riley
Rivers
Rodriguez
Rogan
Rogers
Rohrabacher
Ros-Lehtinen
Rothman
Roukema
Royce
Ryan (WI)
Ryun (KS)
Salmon
Sandlin
Sanford
Saxton
Scarborough
Schaffer
Scott
Sensenbrenner
Shadegg
Shaw
Shays
Shows
Simpson
Sisisky
Skeen
Skelton
Smith (MI)
Smith (NJ)
Smith (TX)
Smith (WA)
Snyder
Souder
Spence
Spratt
Stearns
Stump
Sununu
Sweeney
Talent
Tancredo
Tanner
Tauzin
Taylor (MS)
Taylor (NC)
Thomas
Thompson (MS)
Thornberry
Thune
Thurman
Tiahrt
Traficant
Turner
Udall (NM)
Upton
Vitter
Walden
Walsh
Wamp
Watkins
Watts (OK)
Weldon (FL)
Wexler
Whitfield
Wicker
Wilson
Wolf
Wu
Young (AK)
Young (FL)

NAYS—147

Ackerman
Baca
Barrett (NE)
Bartlett
Becerra
Bereuter
Berman
Biggert
Blagojevich
Boehlert
Bonior
Borski
Boucher
Brown (FL)
Brown (OH)
Capps
Capuano
Cardin
Carson
Castle
Clay
Clayton
Condit
Conyers
Costello
Coyne
Crowley
Cummings
Davis (IL)
Delahunt
DeLauro
Dingell
Dixon
Doggett
Dooley
Doyle
Ehrlich
Engel
English
Eshoo
Etheridge
Evans
Farr
Filner
Forbes
Frank (MA)
Gejdenson
Gekas
Gilchrest
Goodling
Gutierrez
Hall (OH)
Hansen
Hastings (FL)
Hinchey
Hoeffel
Holden
Hoyer
Hyde
Jackson (IL)
Jones (OH)
Kanjorski
Kennedy
Kildee
King (NY)
Klink
Kucinich
LaHood
Lantos
Larson
Lee
Levin
Lipinski
Lofgren
Lowey
Luther
Maloney (CT)
Maloney (NY)
Markey
Mascara
McCarthy (MO)
McCarthy (NY)
McIntyre
Meehan
Meeks (NY)
Millender-McDonald
Miller, George
Minge
Moakley
Mollohan
Morella
Murtha
Nadler
Napolitano
Neal
Oberstar
Olver
Owens
Paul
Payne
Pelosi
Peterson (MN)
Peterson (PA)
Phelps
Pomeroy
Porter
Price (NC)
Rahall
Rangel
Roemer
Roybal-Allard
Rush
Sabo
Sanchez
Sanders
Sawyer
Schakowsky
Serrano
Sessions
Sherman
Sherwood
Shimkus
Slaughter
Stabenow
Stark
Stenholm
Strickland
Stupak
Tauscher
Terry
Thompson (CA)
Tierney
Toomey
Towns
Udall (CO)
Velazquez
Visclosky
Waters
Watt (NC)
Waxman
Weiner
Weldon (PA)
Weller
Weygand
Wise
Woolsey
Wynn

NOT VOTING—12

Brady (PA)
Campbell
Cook
Crane
Diaz-Balart
Fattah
Greenwood
Martinez
Myrick
Quinn
Shuster
Vento

□ 1614

Messrs. OWENS, DOOLEY of California, PORTER, HINCHEY, and Mr. DELAHUNT changed their vote from ''yea'' to ''nay.''

Messrs. SHAYS, GILMAN, Mrs. MEEK of Florida, Ms. KILPATRICK, Mr. INSLEE, and Mr. MATSUI changed their vote from ''nay'' to ''yea.''

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

□ 1615

AUTHORIZING THE CLERK TO MAKE CORRECTIONS IN THE ENGROSSMENT OF H.R. 2418, ORGAN PROCUREMENT AND TRANSPLANTATION NETWORK AMENDMENTS OF 1999

Mr. BLILEY. Mr. Speaker, I ask unanimous consent that in the engrossment of the bill, H.R. 2418, the Clerk be authorized to correct section numbers, punctuation, and cross references and to make such other technical and conforming changes as may be necessary to reflect the actions of the House.

The SPEAKER pro tempore (Mr. HOBSON). Is there objection to the request of the gentleman from Virginia?

There was no objection.

GENERAL LEAVE

Mr. BLILEY. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and to insert extraneous material on the bill, H.R. 2418.

The CHAIRMAN pro tempore. Is there objection to the request of the gentleman from Virginia?

There was no objection.

REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H.R. 3660, PARTIAL-BIRTH ABORTION BAN ACT OF 2000

Mr. LINDER, from the Committee on Rules, submitted a privileged report (Rept. No. 106–559) on the resolution (H. Res. 457) providing for consideration of the bill (H.R. 3660) to amend title 18, United States Code, to ban partial-birth abortions, which was referred to the House Calendar and ordered to be printed.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H.R. 1824

Mr. MASCARA. Mr. Speaker, I ask unanimous consent to have my name removed as a cosponsor on H.R. 1824.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Pennsylvania?

There was no objection.

MESSAGE FROM THE PRESIDENT

A message in writing from the President of the United States was communicated to the House by Mr. Sherman Williams, one of his secretaries.

REPORT OF THE CORPORATION FOR PUBLIC BROADCASTING—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES

The SPEAKER pro tempore laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, without objection, referred to the Committee on Commerce:

To the Congress of the United States:

As required by section 19(3) of the Public Telecommunications Act of 1992 (Public Law 102–356), I transmit herewith the report of the Corporation for Public Broadcasting.

WILLIAM J. CLINTON.
THE WHITE HOUSE, *April 4, 2000*.

SPECIAL ORDERS

The SPEAKER pro tempore. 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.

STATE DEPARTMENT HAS CERTIFIED CUBA AS CHILD-ABUSER

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

Mr. BURTON of Indiana. Mr. Speaker, I would like to refer to an article that was in Human Events on February 18 of this year entitled ''State Department has Certified Cuba as a Child-abuser'' country. And the article reads as follows, ''the Clinton State Department's most recent annual human rights report describes Fidel Castro's Cuba as a vicious police state where children in particular are targeted for abuse by the government, but that, apparently, means nothing to the Immigration and Naturalization Service, an agency of Attorney General Janet Reno's Justice Department, which remains determined to deny even an initial political asylum hearing to a 6-year-old Elian Gonzalez, the Cuban boy who arrived in Florida on Thanksgiving Day clinging desperately to an inner tube.

An INS spokesman told Human Events last week that the agency will not alter its position because of information in the State Department report. The INS has determined, said spokesman Maria Cardona, that the true will of the boy's father is that he be returned. Is it impossible, she asked rhetorically, that a little boy could grow up in a loving family in Cuba?

President Castro exercises control over all aspects of Cuban life through the Communist Party and the state security apparatus says the State Department report published in February 1999. A new report is due out in a few weeks.

Castro says the report uses agents of the Ministry of the Interior to investigate and suppress all public dissent. The agents recruit informers throughout Cuban society to create a pervasive system of vigilance. Jailed dissidents face a prison system designed to terrorize. Prison guards and state security officials says the State Department also subjected activists to threats of physical violence, systematic psychological intimidation and with detention or imprisonment in cells with common and violent criminals, aggressive homosexuals or state security agents posing as prisoners.

The report also cites widespread tuberculosis, hepatitis, parasitic infections and malnutrition in Castro's prisons. Prison officials, it says, regularly confiscate food or medicine brought to political prisoners by their relatives.

Short of imprisonment, Cuban dissidents are frequently targeted for systematic harassment campaigns or acts of repudiation. Castro routinely conscripts children, get this, conscripts children to participate in these campaigns in which neighbors, fellow workers and members of state-controlled organizations are corralled in front of a target's house. Once in place, they are coached to yell obscenities, damage property, and even physically attack the target.

In 1998, for example, Castro targeted the family of a journalist whom he ordered arrested for allegedly insulting him. Communist Party leaders and government officials conscripted local workers and grade school students and high school students to rally in front of the family's home and shout obscenities at the occupants before plain-clothes security agents bashed down the door and beat family members.

Cuban youths are also forced to provide labor to the state. The government employs forced labor, including that by children reports the State Department.

All students over age 11 are expected to devote 30 to 45 hours of their summer vacation to farm work, laboring up to 8 hours per day.

These are among the reasons that the U.S. Cuban Reconstruction Act has held that Cuban refugees reaching U.S. soil should presumptively be considered political refugees who face a ''well-founded fear of persecution'' back in Cuba.

Janet Reno has short-circuited this law by claiming that only Elian's father has the standing to apply for asylum on Elian's behalf in the United States. If the State Department is right, of course, for Elian's father to apply could lead, at a minimum, to an ''act of repudiation'' in front of his home.

If returned to Cuba as Janet Reno wishes, Elian also would have to repudiate his mother, who in her own eloquent act of repudiating Castro gave her life to bring her son to freedom.

These are things I think the American people ought to think about before they make judgment about whether or not this boy should be sent back to a Communist prison in Cuba.

The SPEAKER pro tempore (Mr. HOBSON). Under a previous order of the House, the gentlewoman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

(Ms. KAPTUR 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 Georgia (Mr. NORWOOD) is recognized for 5 minutes.

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

TRIBUTE TO THE LATE SENATOR MAURINE NEUBERGER

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Wisconsin (Ms. BALDWIN) is recognized for 5 minutes.

Ms. BALDWIN. Mr. Speaker, I rise today to pay tribute to a former member of the other body who passed away in February, former Senator Maurine Neuberger. My interest in Senator Neuberger stems not only from her achievements as a legislator but also because we share a family connection, albeit somewhat distant. Senator Neuberger was my great uncle's sister-in-law.

Maurine Neuberger served one term in the U.S. Senate from 1961 to 1967, one of the most significant periods in our Nation's history. She was known as an outspoken advocate for consumers, candid and brutally honest in her views, and unafraid to take on even the most entrenched interests. The author of a 1961 Saturday Evening Post article described her as, quote, a woman of independent spirit who feels it is more important to be herself than to bow to the demands of conformity.

Maurine Neuberger was born in 1907 in Cloverdale, Oregon. The daughter of a doctor and dairy farmer, she became a teacher in the Portland school district. It was there that she met her husband and future political partner, Richard Neuberger. Dick Neuberger was already making a name for himself as a journalist and a legislator, and after serving in World War II as a captain, he ran for and was elected to the Oregon Senate. When the couple was returning from an East Coast trip a year later, Dick mentioned that the State House seat in their area was opening up and Maurine said, ''I wish I'd known that. I would have run for it.'' Dick took the offhand comment very seriously and after a long conversation over a few hundred miles of road, the couple pulled over and they

called a friend back in Oregon who filed the necessary papers to make Maurine Neuberger a candidate for the Oregon legislature.

Maurine won that House seat, making the Neubergers the first husband and wife team in U.S. history to serve in the State legislature at the same time. They were both progressive liberals of the day, fighting for consumers, the environment, and civil rights. Maurine never stayed in her husband's shadow and even got more votes than him when they ran for reelection in 1952.

Maurine championed many causes as a State legislator but became known as the champion of the housewife for one cause in particular, overturning a ban on food coloring in margarine. This may sound like a frivolous cause to take up in these days, but to a woman in the 1950s, this was no silly battle. The Oregon dairy industry had lobbied for a ban on yellow food coloring in margarine. This required housewives to add the coloring themselves to improve the look of the whitish margarine for the dinner table. This was a hard and cumbersome task and virtually unknown to the all-male Oregon House. So in 1951, she walked into a crowded Agriculture Committee hearing room, donned an apron and proceeded to demonstrate the difficult process of adding a pellet of food coloring to a pound of margarine. The act made the statewide papers and the ban on food coloring was soon repealed.

When her husband, Dick Neuberger, was elected to the U.S. Senate in 1960, Maurine came to Washington not just as a spouse but as a political adviser and aide. She often attended hearings on her husband's behalf during absences and advised him on pending legislation. But even as a senatorial spouse Maurine could not hide from the limelight.

She created a mini-scandal in 1953 when she participated in a charity modeling show with other Senate wives, wearing a bathing suit. As it was described in the articles of the day, ''the somewhat leggy picture'' caused a stir back home in Oregon. Maurine found the incident amusing, brushing off criticism by saying, ''Well, what do people think Senators' wives wear when they go swimming?''

Dick Neuberger's death in 1960 on the eve of the election's filing deadline came as a shock to both his wife and the State. Maurine was urged to run for the seat by columnists, State politicians, and even her husband's colleagues in the Senate. Minnesota Senator Hubert Humphrey, in an appeal for her to run for the seat, sent a telegram saying, ''I cannot imagine the Senate of the United States without a Neuberger in it.'' She decided to put her grief aside and filed the necessary papers within hours of the deadline.

Maurine Neuberger easily beat the ''caretaker'' replacement who had been appointed by the governor to fill out the term of her husband and in January of 1961 she was sworn in as the third woman in U.S. history elected in her own right to serve in the United States Senate.

□ 1630

In an early interview as Senator-elect, she demonstrated her forward-thinking values, favoring medical coverage for senior citizens, Federal aid for more teachers and classroom construction, pollution controls for automobiles, and a strong civil rights bill.

In her 6 years as Senator, she fought for environmental protections, challenged the meat industry for adding water to hams, and took the bedding manufacturing industry to task for selling flammable blankets. But she will probably be best known for her early and outspoken opposition to the tobacco industry.

Mr. Speaker, 1963 was a time when the dangers of tobacco were just becoming clear. The industry, the Government and even the medical profession fought controls against its sale. Senator Neuberger fought these interests in every arena and even wrote a book on the topic, Smoke Screen: Tobacco and the Public Welfare. She said in the text, ''I have undertaken to write this book because I believe that the moral and intellectual poverty that has characterized our approach to the smoking problem must no longer be shrouded in the press-agentry of the tobacco industry, nor the fancy of bureaucratic footwork of government agencies charged with the responsibilities of guarding our Nation's health.''

She called for major legislation to combat what she considered a national health risk. Her program included an education program to convince children not to take up smoking, expanded research into making cigarettes safer, reform and curtailment of cigarette advertising, and warning labels on cigarette packages.

As an early advocate for a common sense approach to tobacco policy, she would persuasively lobby her smoking colleagues of the Senate, often describing in vivid detail the results of the latest medical study on the hazards of tobacco.

Maurine Neuberger decided not to run for reelection, dissuaded by the amount of money she said she would have to raise to win the seat, a lesson that even this Congress could well consider as we ask ourselves, how many other great Americans turn down the responsibility of public office because of the demands of our current campaign finance system.

After remarrying and leaving the Senate, citizen Maurine Neuberger went back to the classroom. She taught at Boston University and Radcliffe College. Then she became an opponent of the Vietnam War and supported Robert Kennedy in his 1968 presidential race.

Eventually, she moved back home to Portland, Oregon, but stayed active in public affairs, serving on presidential commissions for Presidents Johnson and Carter. Friends say she remained interested in politics and lived an active life up until 2 months before her death at age 93. Senator RON WYDEN said he talked to former Senator Neuberger after he had cross-examined tobacco executives with tough questions before a congressional panel, and she told him, ''Stay after them.''

Maureen became well known in Portland circles, not just for her political acumen and her bridge-playing, but as an avid gardener. In fact, she became so well known for her green thumb that a rose was named after her, a miniature rose called the ''Maureen Neuberger.'' The American Rose Society describes it as ''red, a reliable bloomer.''

The seeds that this reliable bloomer planted in Congress have taken many forms in the 34 years since she served here, in stronger civil rights laws, protections for consumers, and honest recognition about the dangers of smoking. I am honored to share a family connection to this remarkable woman and public servant, and I applaud the spirit that she brought to this Congress and to her life.

DECREASING OUR DEPENDENCE ON FOREIGN OIL

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

Mr. METCALF. Mr. Speaker, before 1995, the United States banned the export of oil produced on Alaska's North Slope, feeling we should supply our own national needs first. In 1995, Congress, with the full support of the current administration, voted to change the law and allow companies to export North Slope oil. At the time, I believed that lifting the ban was a bad mistake, that it would raise gasoline prices on the West Coast, and I said so on this floor. Now, with regular gasoline costing over $2 per gallon in some places on the West Coast, I have unfortunately been proven correct.

Refineries on the West Coast depend on North Slope oil for much of their production. A single company, British Petroleum, controls an overwhelming share of the oil. In a recent complaint, the Federal Trade Commission alleges that British Petroleum manipulates oil prices on the West Coast by exporting to Asia at lower prices than it could get for the same product from West Coast refineries.

When the ban on North Slope oil exports was lifted, Americans were told that the action would benefit the oil industry and the American consumer. However, they did not say how it might help the American consumer. North Slope oil exports has only benefited one company, British Petroleum, and have contributed to the tremendous fuel price increases experienced by West Coast consumers.

Mr. Speaker, I have introduced H.R. 4017, which would reinstate the ban on North Slope oil exports. I believe we should not export any oil when the U.S. must import oil for our own Nation's use. I hope that those of my colleagues who are interested in lowering fuel prices, ending discriminatory pricing, and decreasing our dependence on foreign oil will join me in cosponsoring this important legislation.

HONORING SENATOR MAURINE NEUBERGER

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

Mr. WU. Mr. Speaker, it is a pleasure for me to follow the gentlewoman from Wisconsin (Ms. BALDWIN) and to precede the gentlewoman from Oregon (Ms. HOOLEY) in honoring former Senator Maureen Neuberger, an accomplished Oregonian and a true trail blazer.

Senator Neuberger made her mark nationally when her husband, Dick Neuberger, died and she beat five opponents to fill the vacant Senate seat. However, she was already familiar to Oregonians as a State legislator, party organizer, and as a teacher.

Senator Neuberger was a trail blazer because she was not only the third woman elected to the other body, but also because she championed many of the same issues which continue to bedevil us today, like education and health care reform. She sponsored one of the first bills to mandate health warning labels on cigarettes, a measure which is commonplace today. Senator Neuberger is an inspiration to women, to Oregonians, and to all Americans.

On a more personal note, Senator Neuberger came to a function in support of me early during my campaign, and I was deeply honored that she was there. Quite frankly, I was a little bit mystified because she has such a large presence in the State, and I was such a dark horse candidate. It was just a sign of her genuine interest in public affairs in Oregon that she came that day to that event, and she came with her great friend, Bud Forrester, also a gentleman who had been very active in our community for many, many decades.

She and Mr. Forrester passed away on the same day very recently; and in passing away, these two great public servants on the same day, they are, in essence, an Oregon version of the Jefferson and Adams story where two great Americans died on the same day, the 4th of July, over 150 years ago.

Mr. Speaker, Senator Neuberger will be greatly, greatly missed by me, by Oregonians, and by all Americans; but her devotion to civil service and her strength and determination will be remembered in Oregon and around the country for years to come.

REAUTHORIZATION OF THE VIOLENCE AGAINST WOMEN ACT

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

Mrs. KELLY. Mr. Speaker, in the 5 years I have served in the House of Representatives and thinking back on all of the public meetings I have held, I can think of few that are as poignant as the one I held yesterday concerning the reauthorization of the Violence Against Women Act.

Years ago I witnessed firsthand the mental and physical damage caused by domestic violence and sexual assault. As a patient advocate and rape counselor, I was on the front lines in emergency rooms when victims were brought into the hospitals for treatment. Unfortunately, though, for many, domestic violence was a dirty little secret with which they lived. Fear of their abusers, fear for their children and families, a lack of self-esteem, as well as fear that no one in authority could offer guaranteed safety and security, kept them from speaking out.

In 1994, Congress addressed this problem head on through the creation of the Violence Against Women Act known by the acronym VAWA. This landmark legislation was the first time the specific needs of victims of violence were directly addressed by the Federal Government. Yesterday, I brought together advocates, law enforcement officials, and those who work with victims' services, to discuss the reauthorization of the Violence Against Women Act. In addition, I asked New York State Senator Vincent Leibell, Putnam County District Attorney Kevin Wright, and Westchester County Deputy District Attorney MaryEllen Martirano to join us so the group could benefit from the exchange of ideas from their experiences as well. Also the mayor of Mount Kisco, New York, Pat Riley, was with us, so we had all levels of government.

The fight against domestic violence cannot be won alone. It is only through the cooperative effort of Federal, State and local people that we can assist victims of violence so that we can begin to end the cycle of violence. Yesterday, we began that effort.

Mr. Speaker, there is violence in one out of every four American homes. One of the most alarming things I found while working in New York's emergency rooms was that many women are sometimes unable to receive treatment. Services were not available in many areas. Today, however, thanks to the Violence Against Women Act, services have become more common; yet without reauthorization of this critical legislation, these shelters will have to shut down.

Another topic we discussed during this meeting was legislation I introduced last fall, the READY Act. This bill, entitled Reducing the Effects of Abuse and Domestic Violence on Youth, speaks to the effects on children of witnessing and experiencing domestic violence. Between 20 and 40 percent of chronically violent children have witnessed extreme parental conflict. One study has found that boys who witness their fathers batter their mothers have a 1,000 percent higher battering rate themselves than those who did not.

In order to try to address these problems and end the cycle of violence, the READY Act creates a grant program for multilevel interventions to create a more supportive, cooperative system in communities. Another gives grants for age-appropriate curriculum developed in coordination with community agencies and schools to teach children about how to deal with violence.

Through encouraging partnerships between entities like the courts, schools, physical and mental health care providers, child protective services and battered women's programs, we can build upon the existing services to develop programs to specifically address the special needs of children in domestic violence situations.

In addition, the READY Act creates a grant program for safe havens, for visitation and visitation exchange. Sadly, children are often used as pawns in these situations; and, therefore, visitation exchange is one of the most dangerous times for battered women. Supervised visitation programs would greatly enhance the safety of both the mother and the child and help ease the potentially volatile situation.

Mr. Speaker, as we look to reauthorize the Violence Against Women Act, I hope we will be able to recognize the need to expand the programs under it, to include the important measures. Some of these successes of the Violence Against Women Act include the Mount Kisco New York Police Department's implementation of a bilingual domestic violence hotline, as well as their implementation of a primary aggressor checklist for responding officers when arriving at the scene of a domestic dispute. VAWA funds have been used by the New York district attorney's office to hire seven additional staff people to address the special prosecutions division.

Thanks to VAWA grants, the Pace University Women's Justice Center has been able to institute a program training public safety workers about sexual assault and public service announcements about the full faith and credit provisions included in the VAWA Act.

Other VAWA grants have provided victims' agencies like the Northern Westchester Shelter, legal service assistance, which otherwise their clients would have to do without. Beyond formal legal assistance, the Violence Against Women Act enables trained volunteers to act as legal advocates.

□ 1645

My Sister's Place in White Plains used grants to train volunteers who will accompany women to court when

an attorney's presence is not essential. Mr. Speaker, these programs are just a sample of the good, solid programs of the Violence Against Women Act.

We stand at a crossroads. Great work is being done with VAWA money. However, without our continued commitment here in this House to these programs, all of this work will come to an end.

I include for the RECORD the statements of those who were able to join me yesterday to discuss this important issue.

The statements referred to are as follows:

RICHARD A. FLYNN POLICE HEADQUARTERS, VILLAGE/TOWN OF MOUNT KISCO, POLICE DEPARTMENT,

Westchester County, NY, March 31, 2000.

Congresswoman SUE W. KELLY,

19th District, New York, Mount Kisco, NY.

Thank you for your invitation to attend the public forum on domestic violence to be held on April 3rd, 2000 in Mount Kisco. The following information regarding the Mount Kisco Police Department's advances in addressing domestic violence issues is provided to assist you and your colleagues in your decision to reauthorize the Violence Against Women Act, and hopefully, to pass the READY Act.

BACKGROUND

Domestic violence is an extremely important subject to the administration and officers of the Mount Kisco Police Department. The Department was fortunate to receive a Domestic Violence grant in 1996. This was a direct result of the police department's aggressive posture in dealing with domestic violence issues.

ACCOMPLISHMENTS

As a result of the grant the Mount Kisco Police Department has accomplished the following:

Aggressive Domestic Violence Policy: The Mount Kisco Police Department was among the first to develop and put into place a stringent policy on domestic violence. The policy is reviewed on a regular basis in order to be current as the new laws are enacted.

The Department also generated a ''Primary Aggressor Checklist'' which assists responding officers in gathering facts and identifying and arresting a perpetrator of domestic violence. The form becomes a permanent part of the domestic violence case file and provides valuable information to officers making follow up contacts.

Coordinating the Mount Kisco Domestic Violence Coalition: This group is comprised of representatives from law enforcement, clergy, mental health, the Mount Kisco Drug and Alcohol Abuse Protection Council, the Northern Westchester Shelter, and the Northern Westchester Hospital emergency room. Meetings are held periodically to discuss needs and set goals.

Mr. Mel Berger of the Mount Kisco Drug and Alcohol Abuse Prevention Council, is an important member of our coalition. He regularly attends all local court proceedings and has the ability to request court ordered drug/alcohol abuse evaluations prior to the adjudication of defendants' charged in crimes involving domestic violence. These evaluations allow the court to make a more appropriate decision regarding such defendants.

Installation of local Domestic Violence Hotline: Located in the Department's Domestic Violence office, the hotline provides the means for victims to receive non-emergency assistance and advice. The recorded message is in both English and Spanish.

Since follow up calls are made in almost all reported domestic incidents, the domestic violence office and hotline allow officers to make such calls to victims without interruption.

Hotline Brochure: To provide public awareness of the domestic violence hotline the Department published a brochure in English and Spanish. Not only does it contain important phone listings but provides valuable information to victims.

Advanced training for bilingual police officers: In order to meet the needs of Mount Kisco's growing Hispanic population, the Department has provided advanced domestic violence training to five bilingual police officers that act as first responders when a domestic incident is reported. To ensure availability for calls one officer is assigned to each patrol squad. In addition to completing the domestic incident report and other necessary paperwork, these officers are each assigned a Polaroid camera and will photograph and record any injuries, property damage or other evidence crucial to the case.

Two Day Seminar: In November of 1997, the Department hosted a two-day domestic violence seminar which was attended by over 140 professionals who deal in domestic violence issues. This was well received and we hope to provide another such seminar in the near future.

FUTURE GOALS

Intensify Domestic Violence Training: Providing frequent and structured domestic violence training to all Mount Kisco Police officers will improve efficiency in responding to and documenting domestic violence incidents. This will ensure that all reports are properly completed and that victims are provided with the proper referrals.

Assistance with Grant Writing: In the recent past the Department has not been able to research and take advantage of available grants. This is due in large part to a decrease in staffing do to attrition. Qualified assistance and advice in the grant process is needed.

Partnerships in Teen Violence Prevention: The Department has already worked with local school administrators and other organizations, such as the Junior League of Northern Westchester. We wish to expand our proactive approach in addressing students on the issues of teen violence.

Aiding Children Affected by Violence in their Homes: In working together with our Youth Bureau and other agencies, we can address the needs of children who have been traumatized while witnessing domestic violence incidents in the home. We see this as a most important issue since many children who are raised in an abusive home atmosphere grow up to become abusers or victims themselves.

Providing Equipment to Local Hospital: The Department is seeking ways to share the cost of a valuable piece of medical equipment with the Putnam County Women's Resource Center. This device, known as a Culpascope, would be used by the emergency room attending physician or nurse, in the collection of evidence in a rape case. The cost of the Culpascope is $10,000.00.

Full Time Domestic Violence Officer: An officer assigned to domestic violence, working on a full time basis would be ideal. The officer would focus his/her attention on a structured training course for police officers, networking with local, county and state agencies on a regular basis, reviewing all domestic incident reports and maintaining contact with victims throughout any referral and/or court proceedings.

The Mount Kisco Police Department is proud of its accomplishments in combating domestic violence. It is through your support of acts such as the VAWA and READY Act that we may continue to make advances in this area.

I appreciate the opportunity to provide this information, and hope it will assist you.

Sincerely,

SGT. GLORIA M. BUCCINO.

I am Maryellen Martirano, Second Deputy District Attorney for the Westchester County District Attorney's Office and Chief of the Special Prosecutions Division. I am proud and honored to be here to represent D.A. Jeanine Pirro. I have been a prosecutor for 20 years and I have been prosecuting Domestic Violence and Child Abuse cases for 17 of those years. And I can tell you, I've seen many, many, changes throughout the years—all for the good.

D.A. Pirro has been an innovator in the field of Domestic Violence. She started the model for prosecution of domestic violence cases in 1978 and that same model is used today and helps thousands of women every year. When DA Pirro started the Domestic Violence Unit back in 1978, there was one lawyer—Jeanine—two Domestic Violence workers and one secretary. Today, we have 26 people and are about to add 2 more. We are eleven, soon to be twelve attorneys, seven DV workers; two Criminal Investigators, a Child Abuse Coordinator and several support staff. Obviously the caseload has vastly increased in the domestic violence area and we have also greatly expanded the categories we deal with in the Special Prosecutions Division. The Division has three bureaus: the Domestic Violence and Special Crimes Bureau, the Child Abuse Bureau and the Sex Crimes and Elder Abuse Bureau. In addition to domestic violence, child abuse, sex crimes and elder abuse, we handle stalking cases. We do vertical prosecution of all felony cases, i.e., we handle all felony cases from investigation through trial and we monitor the lower level crimes from their inception as well. To give you an idea of the volume we handle, there were nearly 2100 criminal charges filed in Westchester County in 1999 in the domestic violence area alone.

In addition, we investigated 850 child abuse cases in 1999 and charges were filed in more than 400 child abuse cases. In the sex crime area the investigations numbered 89 and 128 charges were filed; in the elder abuse area, 74 charges were filed and 30 investigations were conducted. Therefore, more than 3,000 cases were handled by the Special Prosecutions Division staff in 1999 alone.

I must say that much of our expansion in staff and services is a direct result of funds generated by the Violence Against Women Act. Not only have VAWA monies enabled us to add seven staff; it has also enabled us to collaborate with victim agencies and police departments to help fight domestic violence.

The first year of VAWA funding enabled us to concentrate more on police training. We conducted a comprehensive ''Train the Trainer'' domestic violence program for several Westchester police departments—those in jurisdictions with the largest volume of domestic violence cases. The SPD continues to conduct training to individual police departments on a regular basis.

We have been able to send domestic violence workers, Spanish speaking, out in to the communities with the highest volume of domestic violence cases to speak with victims and follow up cases. We have a full time case worker in Yonkers where approximately ½ of our domestic violence cases arise every year and a second aide who goes out to several other busier jurisdictions. As a result of the additional workers provided by VAWA, our other workers have been able to reach out to elder abuse and sexual assault victims and to monitor cases involving them.

As part of our effort to reach out to victims in their own communities, we have networked, with the help of VAWA monies, with My Sisters' Place and Victims Assistance Services. Victims Assistance Services has been able to open an office in the Mt. Vernon Police Department to be available for all crime victims and particularly domestic violence victims. In addition, my office has arranged with police departments throughout Westchester County to send all their Domestic Incident Reports to us. We, in turn, screen these reports and forward to VAS and MSP those DIRs where no criminal charges were filed. VAS gets those for Mt. Vernon; MSP gets those from the remaining forty-odd police departments who send them. These agencies then reach out to every victim for the purpose of offering them services. Since the inception of our grant, we have received and forwarded thousands of DIRs.

We have an Assistant District Attorney who travels out to the local courts throughout Westchester County to conduct trials of misdemeanor domestic violence and sex crimes cases.

With VAWA money, we have an additional Assistant District Attorney to handle felony sex crimes cases. As a result, we have been able to conduct some lengthy and complicated investigations such as those involving correction officers who sexually assault prison inmates.

We would not have an Elder Abuse Bureau without VAWA. We have an Assistant District Attorney and a criminal investigator who investigate and prosecute elder abuse cases and whose secondary aim is to educate professionals in the field and the community about the existence of elder abuse and what they can do about it. Another part of our elder abuse program, which is called SAVES, is networking with VAS. With the help of VAWA monies, VAS has been able to hire a community resources person to reach out to and educate the elder community about elder abuse.

Finally, VAWA money has enabled us to set up a designated D.V. Court in Westchester County. The D.V. Court is the first designated D.V. court in New York State to handle both felony and misdemeanor D.V. cases, and the cases stay in that court from inception to disposition. The court is staffed with members of the DA's office, a victim advocate, a resource coordinator and, of course, a specific judge.

You can see—by how long I've gone on—just how important VAWA money has been to the Westchester County District Attorney's Office and ultimately to the people of Westchester County.

I also would like to note that one main thrust of our VAWA programs has been to discourage withdrawal of D.V. charges and proceed with prosecution of the offender, with or without a victim. We can only do that with the help and proper training of our police departments; with judges who are aware of the dynamics and devastation of family violence; with trained, skilled interviewers to talk to and work with the victims; with trained attorneys—knowledgeable, sensitive, feisty—to convince our juries and the public that they need to be concerned about Domestic Violence.

With lowering the withdrawal rate as one of our objectives, I am happy to report that preliminarily we have succeeded. In 1998, just 1 year after the start of the grant—the rate of withdrawal was 39%, in 1999 it was 36%. To put this in perspective, the withdrawal rate between 1995 and 1997 was 51%.

I look forward to seeing the numbers for 2000 and sincerely hope that VAWA Funding continues.

PUBLIC FORUM ON DOMESTIC VIOLENCE

(Outline of Comments by Victoria L. Lutz)

I. VAWA PROGRAMS OF THE PACE WOMEN'S JUSTICE CENTER

Project D.E.T.E.R.—24/7 attorney link between the battered woman who calls 911 and the Family Court

Federal Civil Legal Assistance Practicum—externship providing legal representation to the most marginalized of domestic violence victims

Sexual Assault Training Program—CLE programs for prosecutors in rural New York

Public Education—Public service announcements about the VAWA's full faith and credit provision

Bench Manual Funding—Domestic Violence and Sexual Assault Bench Manuals will be printed this year (partnership with Westchester Department of the Probation)

Cayuga Community Response Training and CD-Rom production—Rural trainings targeted for specific disciplines and then made into interactive online programs

Gender Violence Trainings—CLE programs on domestic violence trial advocacy skills tailored for prosecutors in each borough of New York City

2. DESIRABLE CHANGES IN AND EXPANSIONS OF THESE PROGRAMS

Project D.E.T.E.R.—Should be extended to all 42 police departments in Westchester and beyond; could be adapted to provide parallel services for victims of domestic violence who are present in hospital emergency rooms

Federal Civil Legal Assistance Practicum—Should be augmented so that the externship can also provide legal assistance via a satellite office to Putnam residents

Public Education—A ''legal info'' public service announcement campaign is a necessary component of any domestic violence intervention strategy and, at this time, does not exist

3. THE READY AND STALKING ACTS: A FEW COMMENTS FROM THE CENTER'S PERSPECTIVE

Mental Health: Multi-System Interventions for Children Who Witness Domestic Violence—Special attention should be given to the need for training concerning the interface between the courts and children of divorce (e.g., about the dangers of mediation; mandatory parenting classes; joint custody; what parental alienation means and does not mean; Family Court neglect adjudications against the victim of domestic violence because the abuser was violent in the home)

Violence Against Women Prevention in Schools—All school children desperately need this type of multi-layer training. This approach should reach bus drivers and cafeteria workers as well as those listed in the bill materials. Whenever practicable, trainers should include peers, whether they be teens who help train teens or parents who help train parents. To do this, a ''train the trainer'' entre program is important. Last, but not least, domestic violence education must be available to ALL students; ironically, those most left out of the training loop may be the private schools. We have trained all boys private schools and it is scary how little they know and how much they need.

Safe Havens—Transportation exchange services (''supervision transportation'') never seems to come up but is a continual problem for clients, rich and poor. Supervised visitation funding should include, wherever possible, funding for safe exchange opportunities.

The Stalking Protection and Victim Protection Act—The email provision has been pointed out to us frequently as a desirable amendment.

I thank Congresswoman Kelly for her work on behalf of victims of domestic violence. Hundreds of our clients and our students could never have received representation or training without the assistance of those in Congress who continue to see the job of ending domestic violence as a national, rather than a merely local, priority. Much has been done, but domestic violence continues to be a national epidemic. We still need your help!

VAWA REAUTHORIZATION AND PRIORITY ISSUES

(The New York State Coalition Against Domestic Violence)

Through the Violence Against Women Act of 1994, millions of dollars have gone out to communities in New York State and across the nation, creating programs that have made a difference in the lives of millions of women. Such programs have bolstered prosecution of domestic violence and sexual assault, increased victim services, increased resources for law enforcement, and created a National Domestic Violence Hotline. With the funding for these programs scheduled to run out in October of this year, it is imperative that Congress support efforts to reauthorize VAWA programs now for a full five years by passing the VAWA reauthorization bill, H.R. 1248, early this year. This reauthorization package will continue the congressional commitment to making our streets and homes safe for women and children.

It is also essential that Congress recognize other crucial needs in combating domestic violence that are not included in the reauthorization package. The following needs must also be addressed:

Transitional Housing—Transitional housing is a key factor in meeting battered women's needs for self-sufficiency and safety. Authorizing committees should take this opportunity to incorporate into reauthorization initiatives housing beyond shelters so that survivors have a place to live while they get on their feet and put their lives back together. While a family earning the minimum wage cannot afford a two-bedroom apartment at fair market rent in any state, the shortage of affordable housing is especially serious, and well-documented, in New York (National Low Income Housing Coalition. Out of Reach: Rental Housing at What Cost?). Such a housing crisis has dire implications for abused women and their children. In a recent survey, 57% identified domestic violence as a primary cause of homelessness (U.S. Conference of Mayors, A Status Report on Hunger and Homelessness in America's Cities: 1999, December 1999, p. 94). Abused women show great courage in uprooting themselves and their children to go into a domestic violence shelter. We need to ensure that, at the end of their limited emergency stay, we provide them with options more viable and attractive than returning to the batterer.

Civil Legal Assistance—This program is currently funded through VAWA appropriations, but is not authorized by statute. The need for civil legal assistance is so acute, it should not be left vulnerable to the appropriations process. Victims of domestic violence are often inundated with legal problems, included the need for restraining orders, custody and visitation orders, reimbursement for medical bills and property damage, resolution of landlord-tenant disputes, and assistance with complicated divorce cases. Victim demand for such services far exceeds their availability. The dearth of competent, affordable legal services directly and adversely impacts the safety and well being of women and children across the nation. Civil legal assistance should be a permanent component of the statute and receive substantially higher levels of funding.

Battered Immigrant Women's Legislation—Language that is targeted towards addressing the unique needs of battered immigrant women and eliminating obstacles to gaining assistance is needed to ensure that battered immigrant women and children are not forced to remain with abusive partners. Despite the successes of the immigration provisions of VAWA 1994, subsequent immigration reform bills drastically reduced access to VAWA immigration relief for battered immigrants. H.R. 8083 seeks to restore and expand access to a variety of legal protections for battered immigrants so they may flee violent homes, obtain court protection, cooperate in the criminal prosecution of their abusers, and take control of their lives without the fear of deportation.

Definition of Domestic Violence—The federal definition of domestic violence needs to be corrected to include dating violence. Not all abused women marry their abusive partners or have children in common with them. Too many victims of domestic violence are denied equal protection of the law because the law fails to recognize the full spectrum of domestic violence victims. Non-married, non-parent victims of domestic violence need equal protection under the law.

Full Faith and Credit—While the goal of the federal statute and the conforming statute New York passed in 1998 is straightforward, implementation has been problematic. Many jurisdictions have done nothing to implement full faith and credit. In varying degrees in different jurisdictions, police officers, court personnel, and judges often refuse to enforce the orders of other state and tribal courts. The problems in Indian Nations are especially difficult since most of the violations on Indians lands are by non-native batterers. Battered women travel for all the ordinary reasons people travel, and they often cross state and tribal jurisdictional lines in flight for their safety. Battered women need the protection the full faith and credit statute was supposed to provide, and further clarification and funding for training and implementation is needed to support that goal.

Children and Domestic Violence—There are many levels at which the NYSCADV is concerned about children and domestic violence. Prevention and education aimed at children are essential components to any response to domestic violence. Programs for teen and college aged victims of domestic violence and sexual assault are also grossly under-funded. The need for supervised visitation centers far exceeds the number of available programs, resulting in courts ordering unsupervised visitation and endangering women and children. Services for children exhibiting symptoms of the stress of violence in the home need appropriate services. A Sense of Congress regarding the inappropriateness and danger of forcing shared custody over the objection of one or both parents or making friendly parent provisions a factor in determining custody would be very helpful in addressing the abuse many batterers continue to afflict through custody and visitation litigation. Despite the perception that mothers always win custody cases, studies show that fathers who contest custody win sole or joint custody in 40 to 70 percent of cases (Report of the Gender Bias Study of the Supreme Judicial Court of Massachusetts, 1989, Abrams and Greaney).

We are currently supporting an initiative in New York that would mandate domestic violence training for child protection workers and would support a complementary federal initiative. While the NYSCADV has not taken a formal position on the READY Act, we are grateful for the leadership of Representative Kelly in this effort to address these important issues. Our concern over any initiative addressing children and domestic violence results from the devastating and dangerous trends evolving in current responses to domestic violence by child protection systems. Abused women are being charged with neglect based on the actions of the perpetrator. They are having their children taken from them and placed in foster care. They are being forced to take actions over which they have no control, such as obtaining an order of protection or being accepted into shelter, and the outcomes of their cases often hinge on such actions. Domestic violence is not and should not be per se neglect. The child protection actions described above are having an, understandably, chilling effect on abused women's willingness to seek assistance—to call the police, go to Family Court, seek services—in short, reversing decades of work encouraging women to break their silence and seek assistance. The short-term knee-jerk responses by child protection we are witnessing are counterproductive to crafting meaningful long-term responses that take the needs of the non-offending, primary caretaker parent into account. And that is hardly in the best interests of the children. Any legislation passed on behalf of children must take these serious circumstances into account. In our zeal to protect and assist children, we mustn't handicap their long-term chances of safety and security by revictimizing their abused mothers.

VAWA FUNDED PROJECTS IN NEW YORK STATE

VAWA funded projects have had an enormous impact on abused women and their children in New York. Since there is no one agency in New York that keeps track of all the VAWA funds in New York, it is difficult to assess the amount of those funds. The New York State Department of Health, for example, has VAWA contracts for sexual initiatives that are not reflected in the figures below. Additionally, many projects are funded directly through federal agencies. However, the following are rough estimates of VAWA funds, provided to us by the New York State Division of Criminal Justice Services.

Projects/Programs	Year	Amount
S.T.O.P	1997	$7,257,050
	1998	7,426,150
	1999	7,537,300
Discretionary Office of Justice Programs	1998	2,180,904
Department of Justice	1998	429,900
Grants to Encourage Arrest (directly to projects)	1998	3,980,000
Civil Legal Projects	1998	3,930,000

The NYSCADV also has several VAWA funded projects:

We are in the fourth year of funding of our S.T.O.P project, which is a comprehensive training series of domestic violence program staff across the state. These trainings has been very well received and covered topics ranging from basic domestic violence issues to more complex challenges in service provision, such as reaching underserved populations and welfare and immigration issues. In addition to ongoing technical assistance, we provide six one-day trainings and four two-day trainings each year. This is one of our most successful and sought after projects.

We are entering the second cycle of a Department of Justice, Rural Domestic Violence and Child Victimization Enforcement Grant project. We are working with ten rural counties to help them improve their coordinated community response to domestic violence by working with them to promote participation in county task forces, identify strengths and weaknesses in their individual and coordinated agency responses and develop written protocol to guide future responses. We also hosted two Full Faith and Credit conferences for New York/Connecticut/Vermont/Massachusetts border counties and Indian Nations under this initiative to promote better understanding, cooperation and enforcement around this important federal and state law.

We are also working under an Office of Justice Programs, Grants to Encourage Arrest Policies initiative, in which our part is to develop and implement a statewide conference for child protection, law enforcement and domestic violence systems to promote a coordinated community response between the above systems on behalf of abused mothers and their children. A workgroup will be formed to identify conference outcomes and address them in furtherance of the above goal. Under this initiative we are also working with the NYS Office for the Prevention of Domestic Violence and the NYS Division of Probation and Correctional Alternatives on a work team to provide training and technical assistance for probation personnel and to help develop protocol. To date domestic violence liaisons in probation departments have been identified and trained in 99% of the counties in New York.

VAWA is a great success story—it is a success story of federal commitment to ending violence against women, of state and local partnerships, of innovative collaborative initiatives and of a public waking up to the everyday reality of violence in the home. But there is much work to be done. Violence against women has not ended and the great work that VAWA launched must be continued to further that goal.

We urge Congressional support on these issues and anticipate continued efforts on behalf of anti-domestic violence legislation. Across the country, advocates for battered women and battered women themselves are asking Congress to continue its dedication to ending violence in the homes of our nation's women. We urge that a VAWA reauthorization bill be passed early this year and that the other pressing needs mentioned above be addressed.

NYSCADV NON-RESIDENTIAL DOMESTIC VIOLENCE SERVICES FUNDING SURVEY 2000 RESULTS

The New York State Coalition Against Domestic Violence conducted a survey of all non-residential domestic service providers across the state to determine their need for additional funding and resources. The following charts depict the current inadequacy of resources and the necessity of increased funding to support the provision of core services.

County Contracts: 62.5% of programs have county non-residential contracts with DSS/HRA that are less than $50,000.

Insufficient Contract Funds: 85.1% of programs report that their county contracts are not sufficient to cover core services.

Additionally, 42.6% of programs report that they do not have sufficient staff to provide their core services.

High Staff Turnover: Programs are reporting high turnover for many core staff positions.

Low Pay and Staff Turnover: 61.5% of programs report that staff are leaving for better paying positions.

DOMESTIC VIOLENCE PUBLIC FORUM ORGANIZED BY CONGRESSWOMAN SUE KELLY—APRIL 3, 2000

(Presentation by CarlLa Horton, MPA, Executive Director of the Northern Westchester Shelter)

INTRODUCTION

Good morning. I'm CarlLa Horton, and it is my privilege to serve as the executive director of the Northern Westchester Shelter, a

non-profit, community based organization that serves victims of domestic violence. In addition to our shelter services, we provide community education programs and offer an array of services to child, teen and adult survivors of domestic violence. This includes legal services, counseling, support groups, education and self-efficiency initiatives. The latest addition to our roster of programs is Student Terminating Abusive Relationships, a school-based outreach and peer leadership program. This Friday, we will help co-sponsor with the Junior League of Northern Westchester the second annual conference in the county on teen dating abuse.

COMMENTS ON VIOLENCE AGAINST WOMEN ACT AND ITS REAUTHORIZATION

The Northern Westchester Shelter is extremely grateful to Congress and the taxpayers for their support of the Violence Against Women Act and strongly recommends that it be reauthorized and strengthened.

I remember when I first came to the Northern Westchester Shelter, three years ago today, and began a needs assessment. I spoke with survivors, our state coalition's executive director, other advocates and my board and staff. It was clear to all of us that next to an adequate number of shelter beds that legal services was the greatest unmet need in our county for battered women and their children.

Armed with that information, we applied for a VAWA grant and we were awarded $80,000 for what became the first year of a legal services program. In the second year, that support dropped to $60,000 and in this, the third year, the support plummeted to $45,000.

During the first two years, we provided legal advice to 229 victims, 156 of whom were selected for ongoing legal representation as allowed by VAWA. Of these, 136 secured temporary orders of protection—94 in Family Court and 42 in Criminal Court. Over time, 74 permanent orders of protection were secured—53 in Family Court and 21 in Criminal Court. Of the 42 women who selected Criminal Court as their avenue to safety and accountability, only two have dropped the charges against their abusers.

And that's just the work as allowed and funded by VAWA. As or more importantly, the program funded by VAWA served as a gateway to the other programs offered by my agency. Women may have come through the door seeking help with legal issues, but they and their children stayed for counseling, support groups, educational services and the like. Indeed, we experienced a 100% increase in the number of survivors coming to us for non-residential services in the first year that we had VAWA funding.

We have struggled to maintain our level of service in spite of the decreasing funding levels. But, decreased funding is not the only problem. The current legislation prohibits us from helping battered women secure divorces. In our first year, we had to tell 52 women seeking divorces that our lawyers (funded by VAWA) could not help them. This is ludicrous. The common refrain from those not in the know is that battered women ''should just leave.'' Yet, VAWA does not allow severing the legal ties that bind women to husbands who are desperate to maintain power and control.

Not only must VAWA funding be continued. It should be enhanced and the prohibition against divorce should be lifted.

COMMENTS ON THE READY ACT

The Northern Westchester Shelter would like to thank Congresswoman Kelly and her cosponsors for their leadership in advancing protections for abused women and children through the READY Act. I cannot say enough about the torture inflicted on children who watch in horror as their fathers slap, kick, punch and stomp on their wives in front of the children.

Think for a moment about torture of political prisoners. If the abuse gets too intense, the prisoner can die or pass out. That's why abusers in those situations stop torturing the primary victim and torture someone that person cares about but can't do anything to protect. That's what happens to children who witness violence. Their bodies cannot ''pass out'' from the abuse they witness, but their minds suffer terribly about their inability to do anything to stop the violence or to protect their mother.

But consider the many children who do try to stop the violence. Think of a young boy—7, 8 maybe 9 years old—throwing himself between his father's fists and his mother's face. These young children make a valiant but almost hopeless effort to protect their mother. Consider one study of young men (boys, really) in jail for murder. In this study, 63% of them were there for killing the man who was abusing their mother. This is a travesty.

This is what we particularly like about the READY Act:

The READY Act would create multi-level interventions that promote collaboration and safety planning among domestic violence providers, the police, courts, child protective services, schools and other community based and mental health organizations.

The READY Act would provide women who flee from domestic violence across state lines with a defense. We have a former client who was in our shelter almost eight years ago who fled to a New England state. She was finally tracked down by her child's father and is now embroiled in a legal battle to defend her actions—actions taken to save her life and that of her child.

The READY Act would mandate domestic violence factors have precedence in custody proceedings. Currently, states are to base child custody on the ''best interests of the child'' and with considerations for domestic violence as a ''factor.'' We wholeheartedly support the language that domestic violence factors have ''precedence'' as we have seen time and again the ''factor'' being ignored, particularly for wealthy, powerful and/or well-connected men.

We applaud the READY Act's emphasis on ''predominant aggressor.'' Factors such as the history of abuse, the relative severity of injuries, the likelihood of future injury are particularly needed. I was also heartened to see the language that talked about ''the degree to which one of the persons has acted with more deliberate intent to control, isolate, intimidate, emotionally demean or cause severe pain or injury, or fear of harm to the other or a third person.'' We had similar concerns in this state after mandatory arrest was initiated and this resulted in ''primary aggressor'' legislation.

We applaud the strategy to address violence against women by funding school-based prevention programs. Last May, we cosponsored with the Junior League of Northern Westchester a teen dating abuse conference, 260 tenth graders came together and talked about their experiences. Over and over, we heard chilling stories about what's going on in the schools, and in the cars and in the homes of these young people. Meanwhile, many school administrators continue to claim that their school doesn't have this problem. Yes, they do, and we must develop strategies to help these young people (and those that serve them) understand how to identify abuse and how to access services when needed.

IN CLOSING

Innocent, bewildered and traumatized children have become pawns in the abusers' last, desperate struggles to maintain power and control. This must stop. If we have learned anything in our movement, it is that safe moms make for safe kids. Thank you for your efforts to make the victims safe and the abusers accountable.

STATEMENT ON BEHALF OF MY SISTERS' PLACE

Good morning Congresswoman Kelley and distinguished members of the panel. I am Amy Paul. With me is Lisi Lord. We are Assistant Executive Directors of My Sisters' Place, an agency dedicated to ending domestic violence and assisting victims of domestic violence since 1978. My Sisters' Place provides comprehensive services throughout Westchester to people living with abusive partners. Our many services include 2 emergency shelters, a 24 hour toll free hotline for information and assistance, individual counseling and advocacy, 20 support groups located in community sites in 10 different Westchester towns, a Legal Centers with three attorneys providing free legal advice and representation, court accompaniment, a Life Skills program to help women renew the skills they need to live independently, and a children's program, called Robbie's Room, both at our shelters and in the community. Our services are provided in English and Spanish. We have counselors available who also speak Hebrew, Japanese, French, Portuguese, Arabic and who sign for the hearing impaired community. We also have an extensive community education program which includes a school-based domestic violence education and prevention curriculum which reaches over 4000 Westchester students each year, a health care provider education program, professional and lay trainings, and a community speakers bureau program.

My Sisters' Place is pleased to have the opportunity today to comment on H.R. 3315, the Ready Act, and H.R. 1248, the violence Against Women Act, and to lend our support for both bills. We commend Congresswoman Kelly for calling these hearings and for directing the public's attention to an issue which has, for too long, gone unaddressed. As we are all aware, domestic violence is a most insidious and pervasive social problem, one which affects not only the targeted victim, but the children who witness the abuse, and the community at large. Whereas home is considered to be the sanctuary of peace from the outside world, for too many women, it is the most dangerous and uncomfortable place of all. It is estimated that over 50,000 women in Westchester are living with an abusive partner. Our own experience bears out the enormity of the problem as last year alone, we assisted over 3000 women, provided shelter to over 150 people, but had to turn away over 500 women, not counting, their children, because we were full. A victim of domestic violence is faced with challenges and worries of safety for herself and her children every day. Leaving the relationship would seem from the outside to be an easy solution but, in fact, 'leaving' poses a most dangerous threat to her immediate safety. Moreover, despite the services available through agencies like ours, 'leaving' is made exceedingly difficult by the lack of overall, ongoing community support to help her and her children make the transition to safety and security after 'leaving.' And, 'leaving' requires that the victim tell someone about her plight, about something which still today is a social taboo and is shameful to talk about. For married victims, 'leaving' also means getting and paying for legal advice in dissolving the marriage and arranging for child custody, as well as in obtaining an order of protection. Most victims do not have the money to retain legal counsel and, if they do initially, our experience is that the legal fees

eat up any savings they have accumulated otherwise needed to start a new life.

With the initial enactment of the Violence Against Women Act, our government took an important, pioneering stand against domestic violence and provided much needed funds to support efforts to help women facing life with an abusive partner. My sisters' Place was the beneficiary of this funding under the STOP Violence Against Women program through which we developed a lay legal advocate program. This program enables trained volunteers to accompany women to court, when an attorney's presence is not essential, such as when filing papers, and the like. Our advocates provide emotional support and court experience to make an otherwise daunting and scary trip to the court house less frightening and more successful. Over 50 women have worked with our advocates to date. On this coming Wednesday, our program will be recognized for an award by The Fund for Modern Courts for the important contribution we have made. Without the VAWA funding, we could not have developed this program.

Re-authorization of VAWA is critical to organizations like ours which are working on the front line every day with women in crisis and afraid for their lives. It is well known that the VAWA program has provided financial support for a wide array of services nationwide. For this reason, re-authorization of VAWA should be passed as soon as possible, hopefully in this Spring. To wait any longer than that places in jeopardy all of the worthy programs which may expire over the summer and may not be able to bridge the funding gap if VAWA reauthorization is delayed into the Fall.

We also lend our support to The Ready Act and thank Congresswoman Kelly for crafting a bill which addresses domestic violence prevention as well as some of the difficult, attendant issues a victim and her children face. In particular, we appreciate the bill's funding for supervised visitation centers in recognition that men who abuse their partners often also abuse the children living with them. We have supported the Junior League in Westchester in developing a supervised visitation program here in the county and support the Ready Act in providing funding for such programs nationwide. We support the Act's provisions which permit a defense to a kidnapping charge for a woman who flees the state to escape domestic violence. And, we have long supported the notion that a history of domestic violence should be made a part of the court's consideration when determining a child custody matter.

We also support the Ready Act funding for services for children, in recognition that witnessing abuse performed by the perpetrator takes a long term toll on the health of the children. In this regard, we believe that the perpetrator must be held accountable for these actions if we are to see a change in the incidence of domestic violence both in individual cases and on a societal scale. We must find ways to articulate a national policy statement that domestic violence is unacceptable and that we are seriously committed to holding perpetrators accountable for their actions and the consequences of their actions.

We also believe, and it is our mission, that we must educate and expand awareness of the issues underlying domestic violence-education is the key to reducing the incidence of domestic violence and protecting our children. As we mentioned earlier, My Sisters' Place has developed a program of educational materials for students in Westchester schools which we have been presenting since 1990. Our successes in that program encourage us to believe that such programs are essential and that funding for such programs nationwide, as set forth in the Ready Act, should be available.

In closing, we wish to reiterate the importance and urgency in reauthorizing VAWA this Spring and in using the re-authorization as a means to communicating the seriousness with which we, as a nation, are committed to helping victims and holding batterers accountable. There is much to do to properly address this devastating social problem which impacts on the civil order and social fabric affecting all of us. The VAWA Act and the Ready Act are, together, important building blocks toward creating a safer, more secure world for our families.

Thank you, again, for the opportunity to present our views.

[From the New York Times, Apr. 2, 2000]

ADVICE TO TEENAGERS ON DATE ABUSE

(By Donna Greene)

There is growing awareness that prevention is the best way to fight domestic violence, and that teenagers, in particular, need preventive services, said Lisi Lord, an assistant executive director of My Sisters' Place, a White Plains-based agency that runs programs to help battered women.

As part of her duties, Ms. Lord supervises a program that goes to Westchester middle schools and high schools to talk to students about domestic violence, stalking and date abuse.

While many teenagers feel it could never happen to them, almost all say they know someone who has been a victim of domestic abuse, Ms. Lord said. And even parents who suspect that their teenager is having difficulties do not often know how to help, she said.

Ms. Lord, who will move to North Salem next month, has a master's degree in counseling and previously worked as a psychotherapist with agencies in Yonkers. Here are excerpts from a recent conversation:

Q. How early do children need to learn about domestic violence and stalking?

A. Getting to these kids before they have formed their attitudes about what it means to date and what it means to be a boy or girl is important. A big part of what we talk about is gender role and expectations. Girls don't have to look for someone big and strong and tough who will take care of them because that's potentially a setup for them.

A lot of what we see on the junior high school and high school level are kids who are already being abused by their boyfriends. So we like to do some real education about what it means to be part of a healthy relationship. We talk about what domestic violence is, what the early warning signs are, what healthy relationships are, how you can help a friend if you know someone who is living with this problem. We talk about child abuse issues as well, and what to do if your mom is being abused.

And at the end of our program, the kids are asked to fill out an evaluation and asked if they would like someone from My Sisters' Place to contact them. As many as 3 to 5 percent check that box. So we go and meet with them individually.

Q. Who are the teenagers who are asking for further help?

A. The kids generally fall into about three or four categories: kids who are growing up with abuse, kids who just need to tell us about one bad thing that happened to them 10 years ago but that they never told anyone about, kids who are being abused by their boyfriends and kids who have friends who are being abused by their boyfriends and they're afraid for them and they want to know what to do to help them.

Q. Why do you think parents are so unaware of what is going on in their child's life?

A. Sometimes abuse is really dangerous and obvious. But an awful lot of it is not so obvious. Perhaps there is a boyfriend who seems like he is just very attentive and caring and checking on her to see that she's O.K. It's not going to be that evident to the parent that this is actually a control * * * your 16- or 17-year-old comes home with unexplained bruises, the parents may very well have a clue what's going on, but still have no clue what to do about it and how to help. Another early warning sign is if the boyfriend is much older than the girl. That's a trend we're very concerned about.

Q. You said that counselors talk to teenage groups about how to recognize signs of potentially dangerous relationships. Describe what these counselors say.

A. First of all, we want to debunk the idea that it can't happen to them. A lot of teenagers—both boys and girls—feel that when they hear of someone who is beaten up, ''Well I'd never let anyone treat me like that.'' We have to say: ''No, that's not how it happens. It happens so subtly you're not going to see it coming.'' We talk a lot about jealousy and possessiveness. That when someone is jealous of you talking to your friends or other boys, this isn't a sign of love, this is possessiveness. And jealousy is often an early warning sign. If he gives you a beeper on the second date—and this happens to girls regularly—then he is someone who wants to know your whereabouts. That's the kind of behavior that could later become stalking.

Q. What is the reaction of the teenage boys in your audiences?

A. Often good. Sometimes we have the most difficulty with the girls. Sometimes the girls are the ones who are most judgmental about other girls. ''Well, there's something wrong with her,'' they'll say. ''That would never happen to me.'' That's a defensive reaction. They want to believe they could never be in that situation.

Q. Do any of the boys admit to recognizing in themselves some of the signs of abusive behavior?

A. Very often they will disagree with us on some of the early warning signs. They say, ''I am not an abuser and will never hit a girl,'' but also: ''No girlfriend of mine can talk to another guy. That's disrespectful.'' So they hold some of the attitudes but they don't see them as abusive or controlling.

Q. What should parents do if they are concerned about their daughter's boyfriend?

A. The most important thing is to keep the communication open with your teen. If you put down your foot, and say, ''Stop seeing that boy,'' you're going to lose that line of communication. I see this all the time. If she feels she's being listened to, she'll be much quicker to come to her own conclusion that what is going on is not O.K. but if it becomes: ''I love him and they don't get that I love him,'' then she is going to get more secretive.

At the same time this doesn't mean parents shouldn't address these issues with their daughters. Raise the issues. ''I've noticed you're very nervous about whether you're home when he calls and expects you to be home. What's going on?''

Also many kids have a lot of time on their hands in the afternoon and the truth is that many parents think that their children, when they become 14, 15, 16, need less supervision. But they need to know that there is someone there keeping an eye on things, not in a harsh way but just in a sense of safety that they're not just out there on their own. I think boys need this too. Obviously the girls are the ones who tend to pay the price in terms of getting pregnant or getting beaten.

Q. It is said about domestic violence that these kinds of attitudes cross all socioeconomic boundaries. Is that the same at the teenage level?

A. Absolutely. I find the audiences will be more outspoken in certain groups than in others but they're saying the same thing. The only difference is that if you're growing up in a society where violence is something you're seeing in the streets and you're seeing it at home and you're seeing it at school and you don't feel safe anywhere, safety planning takes a whole new meaning. It's pretty meaningless to talk to a 16-year-old girl who has grown up with violence and sees it when she walks down the street, ''You need to leave your boyfriend and get safe.'' Where is she going to get safe? There has to be a more communitywide response. We need to work very hard to help her find someone in her life who is safe.

TRIBUTE TO FORMER SENATOR MAURINE NEUBERGER

The SPEAKER pro tempore (Mr. HOBSON). Under a previous order of the House, the gentlewoman from Oregon (Ms. HOOLEY) is recognized for 5 minutes.

Ms. HOOLEY of Oregon. Mr. Speaker, along with my colleagues, I, too, want to recognize Maurine Neuberger. The State of Oregon has lost a great friend recently when former Senator Maurine Neuberger lost her battle with cancer at age 94. We lost a true pioneer when Maurine passed away. She was an advocate, a leader, and a great woman.

Mr. Speaker, I was very fortunate to know this woman. She was an inspiration to me. There are so many wonderful stories about her, but I would just like to mention a couple.

Her mother was a dairy farmer, yet she took on the dairy farmers, and she said, when they outlawed making margarine yellow, so you have this white lard piece, one day on the floor of the House she demonstrated to all of her male colleagues how to make it yellow with food coloring in it, and stirred it around. She took on the dairy farmers again, though her mother was a dairy farmer, and she won that battle.

She also made a real splash in the papers when her husband was serving in the U.S. Senate. The Democrats were doing a fundraiser. They asked the Democratic wives if they would come and model clothes from their home State. Maurine, who was in very good state, modeled a swimsuit from Jansen's swim wear. There were photographs of her all over the United States. When asked the question why she chose to wear that, she said, that is what I wear when I go swimming.

She was a wonderful woman, and there are wonderful stories about this woman, but none more than what she accomplished during her one and only term in the U.S. Senate.

After her husband, U.S. Senator Richard Neuberger's, sudden death in 1959, Maurine Neuberger ran for and won her late husband's seat in the U.S. Senate. She became only the second woman in the entire country to be elected to the U.S. Senate, and the only woman from Oregon who has ever served in the U.S. Senate.

During her tenure in the United States Senate, she became famous for her fighting spirit and tireless crusade on behalf of consumer rights. She was always looking out for the consumer, for public health, campaign finance reform, some of these still sound familiar, civil rights, and environmental conservation. She also played a critical role in President Johnson's war on poverty.

She became known as a principled consensus-builder with the political will to tackle the country's most pressing problems. After cancer took her husband's life, Maurine Neuberger led the fight in the Senate to put warning labels on all the cigarette packages, so when we read those today, that the Surgeon General has determined smoking may be hazardous to our health, she wrote that and made that happen.

At the time of her fight against the tobacco companies in the early sixties, her efforts were considered bold and radical first steps in educating the public on the dangers of smoking.

Senator Maurine Neuberger epitomized what public service is all about. We are going to miss her in this State. Again, she was a role model for the Nation. If all of us would just follow in her footsteps, we would have a better Nation.

THE HIGH COST OF HEALTH INSURANCE AND PRESCRIPTION DRUGS

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

Mr. GUTKNECHT. Mr. Speaker, earlier today I had a group of small business people in my office. One of the concerns that they talked about was the high cost of health insurance. Recently, I have had several meetings with senior citizens. One of the things they talk about is the high cost of prescription drugs. The two issues are related, whether we realize it or not.

Over the last 4 years, for example, the cost of prescription drugs in the United States has gone up by 56 percent. In fact, in the last year alone, the cost of prescription drugs here in the United States has gone up by 16 percent. One of the reasons that health insurance costs are going up so much in the last year or two here in the United States is the cost of prescription drugs.

While we are talking about what we can do to make prescription drugs more available to seniors through Medicare, it seems to me we also have to be looking at why is it that prescription drugs are so expensive in the United States.

I have been doing some research. I have gotten a lot of help from my friends, some friends at the University of Minnesota, the Minnesota Senior Foundation. We have heard a lot about these bus trips that are going up into Canada to buy drugs. The more I have studied it, the more I realize that we in the United States are paying far too much for prescription drugs.

I believe in a reasonable profit. I do not believe in additional government regulation. But I also do not believe that we should be taken for fools by the large prescription drug companies.

Let me give some examples. One of the most commonly prescribed drugs in the United States is a drug called Prilosec. Prilosec is given to people who have ulcer conditions and some other acid reflux conditions and so forth. A 30-day supply of Prilosec in Minneapolis, Minnesota, sells for $99.50. That same drug made in exactly the same plant with the same FDA approval in Winnipeg, Manitoba, sells for $50.88. That is a tremendous bargain. Interestingly enough, that same drug in Guadalajara, Mexico, made in exactly the same plant under exactly the same FDA approval, sells for $17.50.

Mr. Speaker, it really is time for Congress to do what we thought we did with the North American Free Trade Agreement. That is to open up our borders. My vision is that American consumers, and particularly seniors, could go to their local pharmacy with their local pharmacist who could set up a correspondent relationship with a pharmaceutical supply house in either Canada or Mexico, and ultimately we would force the drug companies to allow Americans to enjoy world market prices for prescription drugs.

Let me give some more examples of commonly-prescribed drugs. I might say to Members, this is available. Just call my office. This is a newsletter that was put out by an independent group called the Life Extension Foundation, the title of which is, ''Are We to Become Serfs of the Drug Monopoly?''

They talk about what is happening here in the United States compared to the rest of the world in terms of the prices we pay for prescription drugs. For example, a commonly-prescribed drug, Synthroid, in the United States, a 30-day supply sells for an average of $13.84. That same prescription for exactly the same drug made in exactly the same plant in Europe sells for $2.95.

Coumadin, which is a drug my dad has to take, it is a blood thinner. In the United States, coumadin, the average price for a 30-day supply is $30.25. In Europe, that same drug made by the same company in the same plant with the same FDA approval sells for $2.85.

Mr. Speaker, it is time for the Congress to take action. The first thing I would recommend Members to do is call my office and we will send them out a copy of this newsletter. They can find out for themselves the difference we see in prescription drugs.

Secondly, I would ask Members to sign on to my bill, H.R. 3240, which simply allows for the importation of drugs into the United States without FDA intervention, drugs that are currently approved by the FDA.

Mr. Speaker, do not take my word for it. Actually, the Canadian government

has done some of the research for us. The latest research, and I have a copy of it, from the Canadian government, confirms that drug prices in Canada on average are 56 percent less than they are in the United States.

The Federal government last year spent $15 billion on prescription drugs. If we could realize just some of the savings by opening up our markets to competition and bringing our prices into line with world prices, we could have more than enough money to open up the benefit to people who are currently not covered for prescription drugs on Medicare. If we could save 30 percent, 30 percent of $15 billion, Mr. Speaker, is $4.5 billion. That would go a long way to making certain that every American had access to affordable prescription drugs.

The time has come to take action. I encourage my colleagues to join me in support of H.R. 3240.

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

THE MILITARY FAMILY FOOD STAMP ACT

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

Mr. JONES of North Carolina. Mr. Speaker, back in March I introduced H.R. 1055. The title is, the Military Family Food Stamp Act. I sent last week a Dear Colleague to my colleagues in the Congress, both Republican and Democrat, asking them to join me in this effort. As of today, we have 91 cosponsors from both sides of the political aisle.

Mr. Speaker, I bring this photograph of this Marine, who is getting ready to deploy for Bosnia, because he represents 60 percent of the families in the United States Armed Forces who are married. He has standing on his feet his daughter Megan, and also in his arms he has his daughter Bridget.

According to a 1995 Pentagon study, we have an estimated 12,000 military families on food stamps. Mr. Speaker, I personally feel that one family on food stamps is one too many. It is unacceptable.

Last week I received a letter from the Fleet Reserve Association endorsing this bill. I would like to read parts to the Members. It is written and signed by the National Executive Secretary, Charles Calkins.

He wrote, and I quote, ''The Fleet Reserve Association strongly supports your bill, H.R. 1055, the Military Family Food Stamp Tax Credit Act. The legislation would amend the Internal Revenue Code to allow a $500 refundable tax credit to certain low-income members of the Uniformed Forces.

''The unfortunate fact that junior enlisted members must rely on food stamps reflects the inadequacy of military compensation. Although there was progress toward closing this significant pay gap between military and civilian pay levels last year, more must be done, and this legislation helps address this reality.''

I further quote Charles Calkins. He says, ''Petty officers and noncommissioned officers are the backbone of the military services. They deserve fair compensation.''

Mr. Speaker, I also want to read from the transcript of the television program 20/20, from June 25 of 1999. The show addresses the subject of our military families on food stamps, and the title of the show was ''Front Lines, Food Lines.'' The reporter was Tom Jarriel.

Tom Jarriel talked to a number of military families during this interview who are struggling to make ends meet. I want to share with the Congress part of the transcript from this show.

I first start by quoting Tom Jarriel: ''Captain Elliott Bloxom presents the Pentagon's point of view that while some families are struggling, they are the exception and not the rule.''

I further quote Tom Jarriel: ''We're talking to people who cannot buy an ice cream for their kids when the truck passes outside their home.

Elliott Bloxom says, and I quote him, ''These junior people, we feel their entry wage levels are adequate. They are very competitive with the private sector. We find that there are other complicating factors—oftentimes a larger-than-average size family—which places an additional burden on that service member to manage their finances accordingly.''

Now I go back to Tom Jarriel. Tom Jarriel says, ''Still, the Pentagon has pushed for an overall 4.8 percent pay raise, up to 10 percent for selected troops—a measure now being considered by Congress. And this would be the largest military pay raise in almost 20 years.''

Now back to Elliott Bloxom: ''We believe that that amount of money, in addition to other services that we provide, should go a long way towards solving the economic problems of some of our most junior people.''

Tom Jarriel: ''Not so says Congressman DUNCAN HUNTER,'' one of our colleagues on the floor of the House. ''DUNCAN HUNTER says, 'I think our military people have been betrayed. The pay raise will be 4.8 percent. The services are 13.5 percent below the private sector. We need at least another 8 percent pay increase to close that pay gap.'''

Tom Jarriel: ''As an 18-year member of the House Armed Services Committee, HUNTER's district includes many of those on the food lines in California.''

''DUNCAN HUNTER,'' and I quote the gentleman from California (Mr. HUNTER) again, Mr. Speaker, he says, ''These are our best citizens. If we don't take care of our finest citizens, some day we're going to ring the bell for war and the folks aren't going to show up.''

Mr. Speaker, I mention that as I close to say that we in America are extremely lucky to have the men and women in uniform who are willing to die for this country. I want to encourage the leadership, both Republican and Democrat, and my colleagues on both sides of the aisle, to join me in this effort to say to those in uniform who are on food stamps, we care about you and we are trying to help you.

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

(Mr. BARCIA 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 gentlewoman from California (Ms. MILLENDER-MCDONALD) is recognized for 5 minutes.

(Ms. MILLENDER-MCDONALD addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

PRAISING THE FLORIDA GATORS

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Florida (Mrs. Thurman) is recognized for 5 minutes.

Mrs. THURMAN. Mr. Speaker, I am really here tonight to say how proud I am of the Florida Gators who played, I believe, their hearts out last night in the final game of the NCAA basketball tournament.

While the University of Florida lost 89 to 76 after a hard fight, they proved to everyone what they are capable of accomplishing. After all, seven members of the young team's ten man rotation are freshmen and sophomores, and their starting line-up blows from the energy of three sophomores and one freshman.

Despite this relative lack of experience, the Gators finished their most successful season in the school's history at 29 wins and only 9 losses.''

□ 1700

Hopefully, all of these fine young men will be back to lead the Gators to victory next season but for now last night's game showed how far the Florida basketball program has come in recent years. The Gators made their first Final Four appearance in 1994, and last night marked the school's first title game appearance ever. No loss can possibly take away from that great accomplishment. This team has spirit and get up and go, and I know they will use this experience to gain even more ground in the future.

Following the game, Florida coach Billy Donovan summed up his team's

loss against Michigan State veteran senior players like this, he said, ''You have every reason to be proud of yourselves. You lost to a better team. Let this be a tremendous motivating experience for you.''

I would like to encourage all Gator fans to attend the celebration at 7:00 p.m. Thursday night at the O'Connell Center at the University of Florida campus in Gainesville to pay tribute to this fine team. They deserve all the cheers and hurrahs they can get for their remarkable record-setting season, and we in Florida always look forward to saying there will be a next year. Go Gators.

BALANCING THE FEDERAL BUDGET AND PAYING DOWN THE FEDERAL DEBT

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

Mr. SMITH of Michigan. Mr. Speaker, I ask everybody to sort of hold on to their hats and prepare for a presentation that could be a little boring but very important to everybody's future, to the future of our kids, to the future of our retirees that have already turned past 62 or 65 and maybe gone on Social Security, because what we do in this budget is going to make the decision whether or not future generations have to pay huge amounts of tax to pay for our overspending in this generation, and it is also going to determine whether existing seniors might have their Social Security and Medicare coverage reduced because of the unwillingness of the President and this Congress to face up to some tough decisions on keeping these programs solvent.

Let me start out with what is happening to our Federal budget. Our Federal budget this year is $1.8 trillion. The debt that we have accumulated so far that we are passing on to our kids now amounts to $5.7 trillion. That compares to $1.8 trillion total annual spending.

Who is going to pay back this debt? It looks like every man, woman, and child in the United States owes now approximately $20,000 to accommodate the debt that has been run up in this country.

Congress has a tendency, a propensity, to spend because usually it is to the political advantage of Members of Congress, it is to the political advantage of the President, to increase spending, to do more things to more people. So, therefore, when taxes became a negative because people did not want to pay their taxes, we started borrowing money. We have kept borrowing money.

Now, for the first time we are starting to reverse that course. Last year we had a balanced budget for the first time in 40 years. This year is going to be a truly balanced budget, and we are going to start paying down the approximately $3.6 trillion that is owed to Wall Street.

Let me go back to the total public debt, $5.7 trillion. Of that $5.7 trillion, $3.6 trillion is what we borrow from insurance companies, from banks, from investors, all the Treasury bills that you, I, investment firms, retirement firms decide to buy Treasury bills for. That is $3.6 trillion.

Then we owe approximately $1 trillion to the Social Security, Social Security money that over the years we borrowed and used it for other government spending. Then the rest is what we owe the other 112 trust funds that we have in government.

Look at this chart just a second. This is where we are going on reducing the on-budget surplus. The on-budget surplus was a negative and for the first time ever there is going to be a real on-budget surplus. That means over and above Social Security, over and above the rest of the trust funds, we are going to have a real actual surplus and start having a total reduction in the Federal debt.

I think one area that has not been covered as much as it needs to be covered is government waste. If you divide up the $1.8 trillion that we are spending every year by the 435 Members of the House, 100 members over in the Senate, there still is not enough people in government to keep track of all of that spending.

So what we have found and what we are starting to dig into on the Committee on the Budget is to try to identify some of the significant waste in Federal Government, and believe me there is a lot of waste. Our General Accounting Office now claims that five agencies are not capable of auditing because they do not keep good books.

I would like to call on a colleague that has been active in budget issues. We also share two other committees. We are both on the Committee on Science; we are both on the Committee on Agriculture. The gentleman from Minnesota (Mr. GUTKNECHT) has been one of the dedicated individuals looking at, and excuse the word, frugality in government spending, trying to be respectful of the tax dollars that Americans send in for this Chamber to spend.

Mr. GUTKNECHT. Mr. Speaker, will the gentleman yield?

Mr. SMITH of Michigan. I yield to the gentleman from Minnesota.

Mr. GUTKNECHT. Mr. Speaker, I thank the gentleman from Michigan (Mr. SMITH) for yielding.

Mr. Speaker, I must first of all apologize. I made the gentleman from Michigan agree not to talk about what happened in last night's basketball game; but I am willing to at least allow him 2 or 3 minutes to talk about it because I am a huge basketball fan myself, particularly college basketball, and I predicted early in the season that if Mateen Cleaves came back in full health and strength that they clearly were the most powerful basketball team that I saw play. And I watched them play four or five, maybe six, seven times on television. So I would yield back to the gentleman from Michigan for a little bragging.

Mr. SMITH of Michigan. Mr. Speaker, I thank the gentleman from Minnesota (Mr. GUTKNECHT).

Mr. Speaker, anybody that would like to walk down the third floor corridor of the Cannon Building next to room 306, several of my staff are also from Michigan State. We have a Michigan State banner out there. Michigan State played an exceptional game. The Gators were good, but Michigan State prevailed. Congratulations, Michigan State Spartans.

Mr. GUTKNECHT. Mr. Speaker, I have to say, being a Big Ten fan from Minnesota, having had a chance to watch them all year, they were not just a great basketball team but they were a great group of young men and really demonstrated what college athletics is all about, and that is pursuing excellence and they did it at every level. They clearly were the best team in the NCAA tournament.

There were a lot of great teams. I congratulate the gentleman and all the Michigan State fans, particularly the players and coaches.

Mr. SMITH of Michigan. Mr. Speaker, it is a good lesson for us. It is a good lesson for Congress. If we have the will, if we have the fight, if we have the intelligence and if we have the heart, we can do anything we want to and in this case on the budget what we should be doing is making sure that we do not pass on a huge debt to our kids and our grandkids.

We are from farming communities. I am a farmer. It is our tradition that we try to pay down the mortgage; but in this government, what we have been doing is adding to the mortgage that we are going to pass on to our kids; and that is part of our discussion tonight.

Mr. GUTKNECHT. Well, pursuing that analogy, and comparing the youngsters who played for Michigan State Spartans and won the national championship, I think there are parallels. Essentially, a number of years ago they set a goal. It was a big goal, and I suspect at the time they decided that one day they were going to win the national championship, if they would have talked about that too much publicly a lot of people would have laughed up their sleeves.

I remember 6 years ago we had an election in this country in 1994, and that is when I and 73 of my colleagues came as freshmen Members of this Congress and changed the leadership of this Congress. For many years, the Congress just, as a matter of fact procedure, would raise the debt ceiling and spend more money than they took in. Some of us decided back in 1994 that we were going to run for Congress to make a difference, and that the idea of leaving our kids a debt which they could never pay was just unthinkable.

Coming from a farming background, the history of this country and part of the American dream was that one would pay off the mortgage and leave their kids the farm. What we had been doing as a country and what the Congress was doing year after year after year was in effect they were selling the farm and leaving our kids a bigger mortgage.

We reached a point, Mr. Speaker, and we need to go back to where we were in 1994. We were quickly reaching a point where interest on the national debt was going to be the largest single entry in the Federal budget. We were going to be spending more for interest on the debt than we were going to be spending for all of national defense.

Mr. SMITH of Michigan. Just statistically, we brought down the interest on the national debt from about 18 percent of the total budget down to approximately 13 percent of the total budget. So we are on the right track.

Mr. GUTKNECHT. We are making enormous progress. Going back to this analogy about setting big goals, when we came to town in 1994 a lot of people in this town said we could not balance the budget; we will be lucky if we can just reduce the projected deficit. They were projecting deficits, and if anybody wants to check on this we will send them the information because the Congressional Budget Office, after the President submitted his budget early in 1995, they said we were looking at deficits of $240 billion to $250 billion every year well into the future for; as far as the eye could see, we were looking at $200 billion deficits as far as the eye could see.

Mr. SMITH of Michigan. Not only $200 billion but $200 billion plus what we were borrowing from Social Security, because they were talking about a total everything in, everything out at that time.

Mr. GUTKNECHT. So literally we were talking about deficits of over $300 billion. Actually, we are looking at deficits of over $350 billion in real terms. That is how much we were borrowing from the taxpayers and from Social Security. And people in this town said, well, we cannot balance the budget. Some of us said, and I will never forget, one of the real, I think, prophets of all of this was Congressman Mark Neumann who came with me, served on the Committee on the Budget and he was one of the first to say, just listen, if we just simply slow the rate of growth in Federal spending to roughly the inflation rate we cannot only balance the budget in less than 7 years, we can begin a process of actually paying down the debt that is held by the public.

Talk about big goals, talk about ridiculous dreams. A lot of people in this town said we could do that. Then we went further, though, and if we remember one of the other things we said not only are we going to dramatically slow the rate of growth in Federal spending, not only are we going to eliminate over 400 Federal programs, not only are we going to try to consolidate some of those Federal programs, we are going to go one step further. We are going to allow Americans to keep more of what they earn and the earnings they get on their investments.

For example, we said we are going to take the capital gains tax rate and we are going to cut it by over a third. We are going to cut it down to 20 percent. The cat calls that came from the galleries on the House floor said we were going to blow a hole in the budget. That is risky tax scheme number one, and we have heard that every year. We did lower the tax on capital gains. Guess what? We actually raised more revenue.

We also said it is wrong to make families continue to pay more and more and more, and we said we ought to give families a little bit of a break. Let us have a $500 per child tax credit. Again, the calls of risky tax scheme and this will blow a hole in the budget, then came choruses down upon us and they said, wait a second, you are going to balance the budget while you are giving tax relief to the American people? It cannot be done.

Well, it can be done and it has been done.

Mr. SMITH of Michigan. Well, add to that these other issues of tax fairness, I mean how do we have a Tax Code that is fair enough that people respect the government enough to fill out their income taxes in the best possible way?

So a couple issues that we brought up this year is the so-called marriage penalty tax where government actually have a policy, the way they implement their taxes, that those individuals that are working that are not married end up paying less tax than if they were to get married. So we not only have young couples that are encouraged by the Tax Code not to get married because they end up being penalized by the Federal Government, but there are seniors in my area of Michigan that question whether they should be married or just rather live together simply because their taxes would be less. We have passed that bill now through the House. We hope it is going to move on. We hope the President will reconsider and sign that legislation. Add to that the legislation that we passed in terms of doing away with the penalty on seniors that decide to keep working.

□ 1715

So we have lifted the earning limits on seniors that decide that they want to keep earning because they want some additional income, or they want to pass additional income on to their kids and grandkids.

But right now we discourage them from working, from continuing to work and pay taxes, simply by penalizing and taking away part or all of their Social Security benefits. Now we have moved ahead with those changes.

So I think tax fairness has got to be part of the debate. We have got to make sure we are going to pay down the debt, because that is the biggest challenge that we have in a Congress that has found it to their advantage to spend more.

Mr. Speaker, I yield to the gentleman from Minnesota (Mr. GUTKNECHT).

Mr. GUTKNECHT. Mr. Speaker, I thank the gentleman for yielding to me. That is sort of where we were. We were at this mind-set that, A, we cannot control spending; and, B, we cannot allow Americans to keep more of what they earn. We certainly cannot balance the budget while we are doing those two things.

We have proven that, over the last several years, that those things can be done and, more importantly, that if we give Americans, business people, farmers, average Americans, if we give them the right incentives, they will do the right things.

Unfortunately, and I say this back in my district, the unwritten rule of Washington for so many years was no good deed goes unpunished. If one works, one gets punished. If one invests, one gets punished. If one saves, one gets punished. If one creates jobs, one gets punished.

Look, the gentleman from Michigan (Mr. SMITH) was just talking about the marriage penalty tax. I mean, how ludicrous, the fact that 21 million American couples in the United States are paying an average penalty of over $1,200; in fact I think it works out to about $1,400. The latest calculations, we have got 21 million American couples paying a penalty of $1,400 in extra taxes just because they are married. That is not just bad tax policy. It is not just bad family policy. It is fundamentally immoral.

Much of what we are talking about, whether it is transferring the debt on to our children and grandchildren or whether it is taxing married couples more than they would be taxed if they lived together without the benefit of marriage or whether we are talking about a confiscatory tax on inheritance taxes, death taxes, I mean these are not just tax issues. They are really issues about fundamental morality.

Mr. SMITH of Michigan. Morality, Mr. Speaker, that is right.

What I would like to do with the gentleman from Minnesota (Mr. GUTKNECHT) is play a little game here. I have come up with some specific items that are wasteful government spending, fraud, abuse, waste in government. Maybe we will just take turns. I will come up with one, then the gentleman from Minnesota can come up with one. Then I will come up with one. This will just give the listeners, Mr. Speaker, some idea of the tremendous waste that happens when we have a bureaucracy that is so huge, that is so gigantic, so big.

Mr. GUTKNECHT. Mr. Speaker, will the gentleman yield just for a moment to sort of set this up?

Mr. SMITH of Michigan. I yield to the gentleman from Minnesota.

Mr. GUTKNECHT. Mr. Speaker, now we are at a point where our colleagues are once again saying it cannot be done, we cannot limit the growth in Federal spending. I am going to come back to a chart that the gentleman from Michigan has got up right now.

Mr. SMITH of Michigan. If the cameras can focus on this chart.

Mr. GUTKNECHT. Mr. Speaker, it tells a wonderful story. It is a story that I do not think most Americans understand or realize or even believe.

I started telling the story last year. I was out in front of a group, and I am telling them about, for the first time, we are actually balancing the budget, we are paying down debt, and we are going to provide them some tax relief while we are strengthening Social Security. They all looked at me and said, yeah, right. I thought about it for a minute; and if I had been them, I would not believe it either because it is sometimes hard to believe. But let me give my colleagues a couple of statistics.

Mr. SMITH of Michigan. Mr. Speaker, I would like to call to the Speaker's attention and everybody's attention that this actually is a chart developed by the gentleman from Minnesota.

Mr. Speaker, I yield to the gentleman from Minnesota.

Mr. GUTKNECHT. Mr. Speaker, if people listening to this discussion tonight will remember only a couple of numbers, I hope they will remember these: in fiscal year 2000, which we are currently in right now, the Federal Government will spend $1,780 billion. All right. What we are proposing next year under the House resolution which we passed a week and a half ago, we are proposing to spend $1,820 billion. That is total Federal spending.

Sometimes this gets confused with domestic, discretionary, and entitlement spending and mandatory spending; and there are a lot of different categories. But in total spending, let us look at it this way: last year we are spending $1,780 billion. Next year we are going to spend $1,820 billion. What that works out to is a 2.2 percent increase in total Federal spending.

Now, as that chart demonstrates, as my colleagues look at our projected spending over the next 5 years, we are talking about total Federal spending increases of about 2.9 percent per year. Now, the Bureau of Labor Statistics, as it says on the chart, projects that the average family budget over the next 5 years is going to go up 4.6 percent.

So literally for the first time I think in my adult lifetime, we are looking at Federal budgets that are going to grow at slower rates than the average family budget. That means that, gradually, we are allowing families and the American economy to sort of catch up. That is a wonderful thing because we know that, if we allow families to keep more of what they earn, they will spend it a whole lot smarter than the people in Washington will spend it on their behalves.

That is where it gets back to this discussion about waste, fraud and abuse. I wanted to set this up because there are people already saying, well, we cannot limit the growth in Federal spending to only 2.2 percent next year and 2.9 percent over the next 5 years. That cannot be done. Well, the truth of the matter is it can be done. It must be done.

If we begin to do our work as Members of Congress, whether we are on the Committee on Budget, the Committee on Appropriations, or on any of the policy committees, and we begin to actually get inside the Federal budget, do the oversight responsibility that the American people expect us to do, we are going to find a whole lot of waste, fraud, and abuse.

Just finally to say this, we asked the General Accounting Office and the Congressional Budget Office as well as staffers from the House Committee on Budget to do, really, a relatively quick research of some of the waste that is in the Federal Government today. After their very short review, they came up with over $19 billion.

Now in Washington, we kind of let millions of dollars sort of fall off the table, but a billion dollars gets our attention. So in their very quick study, we came up with over $19 billion worth of waste. We are going to talk about some of those examples.

Mr. SMITH of Michigan. Okay. Here is some of them. What we are going to do with the gentleman from Minnesota, first Michigan will come up with a waste-in-government example. Then we will pass it to the gentleman from Minnesota. We will go back and forth a few times.

Number one, the National Park Service spent $1 million to build an outhouse at Glacier National Park in Montana. It is 6.5 miles from the nearest road, a climb of 700 feet. It took hundreds of horse trips and more than 800 helicopter drops to get the construction materials to the site. Amazingly, it is adjacent to two privately operated chalets which taxpayers recently paid $3 million to renovate. It is one example of waste, fraud, and abuse.

Mr. Speaker, I yield to the gentleman from Minnesota.

Mr. GUTKNECHT. Well, Mr. Speaker, another example that was in the GAO audit that talked about, once again, the Defense Department, we have heard about hundred-dollar hammers, well, they had an example where the Department of Defense was spending over $50 for set screws which one can buy at the local hardware store for 57 cents. It happens even today.

Mr. SMITH of Michigan. Mr. Speaker, in Lansdown, Pennsylvania, when dozens of homeowners learned that their homes built in the 1920s had been constructed using materials contaminated by radioactive radium and therum, the EPA got to work decontaminating some properties and demolishing others. Some residents wanted to stay.

So rather than pay market value for contaminated homes, the EPA agreed to build replicas for the homeowners. In order to do that, the EPA constructed 10 custom homes at a total cost of $6.5 million. That is for 10 homes. One modest home valued at $141,000 was demolished and replaced with a customized replica at the cost of $422,000. Another house valued at $161,000 was replaced with a replica costing almost a million dollars.

It is a government that, when it does not come out of one's own pocket, when one is simply there spending some other people's money, one is more generous. In fact, probably when we negotiate with many of these contractors, the contractors are willing to stay there all night getting the best deal. Government employees too often want to go home at 5 o'clock, so they close the deal, and it is the taxpayers that usually suffer.

Mr. Speaker, I yield to the gentleman from Minnesota.

Mr. GUTKNECHT. Mr. Speaker, this really runs across every department. We are not going to pick on just one program or one department. But in 1997, the Education Department paid 102,000 students Pell Grants totalling $109 million in overpayments. The audit also found that 1,200 students falsely claimed veteran status to increase their eligibility to the program, that costing taxpayers an additional 41.9 million.

Let me just add about the Department of Education, and I think every taxpayer should be outraged by this, and we in Congress are not doing our job in terms of oversight, because for the second year in a row, we have a $37 billion agency who, according to our own auditing team, the General Accounting Office, says that their books are ''unauditable.'' Now, could my colleagues imagine a corporation of any size, particularly a $37 billion corporation, where, for 2 years in a row, their books were unauditable.

Mr. SMITH of Michigan. Mr. Speaker, that same report said that the agencies were unable to account for over $800 billion, unable to account for $800 billion in government assets.

Mr. KINGSTON. Mr. Speaker, will the gentleman will yield?

Mr. SMITH of Michigan. Certainly. I yield to the gentleman from Georgia.

Mr. KINGSTON. Mr. Speaker, the biggest problem we are up against really I think is this unaccountability. The fact that they cannot be audited is typical. But beyond that what we are saying is private businesses and mom and dad back home know where every penny is because they work hard to earn it. Government thinks it comes from the sky.

An example of waste that this Republican conference actually has corrected now was that the supplemental security income, it pays people of disability kind of a little sustenance, but we were paying it, the Department of Justice was paying it to people who were in prison.

Now, one is not supposed to be eligible if one is in prison. So to determine

if one was eligible or not, what did the Gore-Clinton team do? They left it up to the convicted criminals who were already in jail. So they are supposed to say, hey, I am in jail for 30 years, you all are sending me this check. But do you know what, I am going to send this back to you because Al Gore told me this is the right thing to do.

It is absurd. But this is the culture we are up against.

Mr. SMITH of Michigan. Mr. Speaker, it is the kind of testimony we heard in the Committee on the Budget where individuals that were receiving a check from SSI, supplemental security income, that were alcoholics or addicted, the check had to go to a third party. What we found out in testimony that, often, the third party was the bartender. So it should make us very nervous as to the way we spend taxpayer dollars.

Our Committee on the Budget is looking into some fraud, waste, and abuse. We are looking into the kind of oversight that Congress has got to be more diligent of.

I will read one more on the Pentagon. We want a strong military; but here again, a tremendous amount of waste in the Pentagon. The Pentagon had to report as missing two $4 million aircraft engines, two of them that they could not find; $850,000 tugboats; and a $1 million missile launcher. When the GAO auditor was there, they could not find them. They did not know where they were.

Somehow we have got to do a more diligent job of protecting taxpayer dollars. Part of that I think that is a huge, giant step forward is the decision that we made a year and a half ago not to spend any of the Social Security surplus for other government programs. That is a very good start that moves us down the road of making some of the decisions to make sure that we save and protect Social Security.

Mr. Speaker, I yield to the gentleman from Minnesota (Mr. GUTKNECHT).

Mr. GUTKNECHT. Mr. Speaker, I am going to have to leave. I will leave it to the gentleman from Michigan (Mr. SMITH) and the gentleman from Georgia (Mr. KINGSTON). But I just want to say that we are going to continue to hear these shrill calls from some of our colleagues that we cannot balance the budget, we cannot save Social Security, we cannot strengthen Medicare, we cannot pay down debt and provide tax relief for American families. It simply is not true. The reason is, there is still an enormous amount of waste and mismanagement.

They will say and they have said and will continue to say that it is a risky scheme to allow American families, American business people, American farmers, American couples to keep more of their own money. Well, I submit that it is a risky scheme to allow government to keep more of that money because we know what government will do.

The real issue is this: we know that individuals are much more careful about how they spend their own money than how people spend somebody else's money. Now, we have a responsibility, and I think we have done a pretty good job up to this point, but there is still a whole lot of waste, of fat, of misappropriation of money here in the Federal Government.

If we continue to apply the kind of oversight on the Federal budget and among the departments and continue to try and ring out that fat, I think that most Americans, most people beyond the Beltway believe that we could easily take another 10 percent out of the Federal budget today without anybody really feeling the pain.

□ 1730

There is an awful lot of waste in this Federal budget. So we need to continue.

And I want to thank the gentleman for having this special order. There are lots of examples. We should be doing this every week to call to the attention of our colleagues and to the American people that there is an awful lot of waste still in the Federal budget and that we can, with proper oversight and doing the job that the American people sent us here to do, we can balance the budget, we can pay down debt, we can strengthen Social Security and Medicare, we can do all of that and provide tax relief, if we continue to squeeze more of that fat and waste out of the Federal budget.

I think these special orders are a giant step in that direction. So I congratulate my colleague from Michigan. We continue to set big dreams and big goals, but I think if we work together we can make those dreams become reality.

Mr. SMITH of Michigan. I thank the gentleman from Minnesota, Mr. Speaker. It is going to be a challenge.

I think, Mr. Speaker, everybody should know the controversy that we are now talking about in terms of whether or not we get some of this surplus money out of town. The surpluses coming in are significant. There is going to be an anticipated surplus of $26 billion this current fiscal year for on budget; an estimated surplus this year of $153 billion in the Social Security Trust Fund.

The challenge has always been what do we do with that money. Some of us are saying we should be paying down the debt; some say we should have a bigger tax increase. But the challenge is, and there is no question in my mind after looking at what has happened in the debate between Democrats and Republicans over the last couple of months, that if we do not get some of that money out of town, if we do not get some of that money locked up, then it will be spent. That is the danger.

I yield to the gentleman from Georgia, Mr. Speaker.

Mr. KINGSTON. Mr. Speaker, I think the gentleman from Michigan made two very important points. Number one, many of us came to town to cut spending and put some common sense back into our spending process, and yet it seems like the government is always fighting us and resistant on that. It is a little disappointing, though, just at large, outside of Washington, that now we have a surplus and everybody wants to spend it rather than return it to the taxpayers.

I think about the middle class taxpayers I see every Monday and Friday back home in the car pool line. These are people who drive two or three extra blocks if they can save 2 cents a gallon on gas that they pump themselves. These are people who do not buy new clothes unless the clothes are on sale. My daughter has a big senior prom coming up, and she tried on three dresses the other day and asked me which one was the prettiest. Well, they all looked pretty on her, but I wanted to know which one was the cheapest. As a 16 year old, that was not her highest priority, but I have three other kids I have to allocate things for.

And that is the problem with the government. They are always into aesthetic; what is the nicest. They do not ever ask the other question; what is the cheapest.

Americans buy shoes. I like to jog, and I need to jog more, but I can always buy the cheapest shoes when they are discontinued. And they are just as good, but it is last year's model. And if Americans go through that all over this country, why can we not do that in this little tiny area that we call Washington, D.C.?

Another troubling thing is that we, as Americans, do not lose our money. But, and just as an example, the IRS only collects 11 percent of over $222 billion which is delinquent. That is $222 billion. That would pay for a tax reduction. That would pay for a new school program. That would pay for all kinds of other things that could be very helpful for people.

The U.S. Marshals Service was unable to locate 2,776 pieces of property worth over $3.5 million. That was according to the suspicion audit in 1997. In addition, the agency's inventory contained nearly 5,070 different items valued at over $4 million that were unused.

Now, imagine going out and buying something that you keep in your garage and saying, listen I have so many things I cannot even use but I bought them because the money was appropriated to me. That is ridiculous. And the examples just go on and on and on.

Mr. SMITH of Michigan. Well, I have a couple more in front of me. Approximately 26,000 deceased persons received $8.5 million in food stamps, and that was another GAO finding.

Mr. KINGSTON. If they were the Democrat dead, particularly in the Chicago area, they were probably still voting, so maybe they should be getting entitlements.

Mr. SMITH of Michigan. Here is another one. SSI fraud exceeds $1 billion

a year, including a convicted murderer, who received more than $75,000 in SSI disability during his 14 years on death row.

Look, we can give lots of examples, and we need to dig into it more, but part of the danger that I see is the bureaucracy, number one, has gotten so big. The oversight of the legislative branch over the administrative branch is diminishing as we put more of our spending programs on automatic pilot. The entitlement programs.

The two financial challenges facing this Congress are certainly Medicaid-Medicare and Social Security. They are not solvent over the next several years. The Social Security Administration and the Medicare actuaries and trustees just gave a report this past week. They suggest because of good economic times there is going to be a little extra money coming in in the short run.

But I would just like to stress that because the benefits that will eventually come to those people that are earning money, because benefits are based on how much our earnings are, that means that the outgo from Social Security eventually is going to be greater. So the economy, without structural changes in the program, is not going to keep the program solvent. That is the challenge.

One of the disappointing things to me in my last couple of years has been the unwillingness of the President to give some leadership to some of the tough decisions. And I would just like to make it very clear on Social Security and Medicare that the longer we put off the solution, the more drastic those changes are going to have to be.

So I say to young people, Mr. Speaker, it is their future at risk and their taxes at risk. And if we do not make those changes, then within 40 years the estimate is that payroll tax, what is taken out of every dollar earned, in addition to the income tax and everything, the FICA tax, the payroll tax, is going to grow from the existing 15 percent up to 40 percent.

And let me just call to the attention of the seniors what the government did in 1997, what it did in 1987, and again in 1983, when they were short of funds in those programs. They reduced benefits and increased taxes.

I yield to the gentleman from Georgia.

Mr. KINGSTON. What is disappointing, as much work as the gentleman has done on Social Security, and many people have, last year, in 1998 that is, the Social Security Administration spent erroneously $3.3 billion in supplemental Social Security income overpayments, $3.3 billion to people that were not eligible for the money. I would like to think my grandmother's money is going to be spent out very carefully and guarded very carefully, yet they squandered $3.3 billion of it.

On this subject, what I want to say I am disappointed about is that I served in the State legislature, and there were always issues where there were Democrats versus Republicans and urban versus rural. It was kind of like Atlanta versus the rest of the State. Many issues fell along party lines or geographical lines, but still we came together on other issues that were central to the well-being of the State of Georgia, like education or health care.

I assumed, naively, when I came to Washington, that we would have a few issues that, obviously, we could have real philosophical debates on, and then just basically partisan-based debates. And that is part of politics. But what I did not know is that even the more sacred issues, such as Social Security, such as defense, such as Medicare, would become partisan. And this is totally contrary to what I believe American seniors want.

There is nothing partisan about somebody on a fixed income in their golden years who needs health care. Nothing partisan about that whatsoever. Yet here it does seem like it is often the President trying to get one up on Congress in order to embarrass us. Yet, I think our attitude has always been, look, we want to work to solve these problems. We do not want partisan politics over Social Security. It is too important.

Mr. SMITH of Michigan. Mr. Speaker, one of the people on the firing line, on the front line on Social Security, has been the gentleman from South Carolina (Mr. SANFORD), and the gentleman has joined us and I yield to the him.

Mr. SANFORD. I thank the gentleman, Mr. Speaker, and I just wanted to add my two cents.

I was hearing a very interesting conversation really built around one simple thought, and the simple thought that I heard both gentlemen talking about was if the money stays in Washington we will find a way of spending it. So what I think is interesting is one of the latest things we have been working on on the Social Security front, and again the gentleman from Michigan is a co-sponsor of this bill, is a simple idea called the personal lockbox bill.

Republicans in the last session of this Congress passed the idea of a lockbox, of really locking down Social Security surpluses. Because the first part of saving Social Security is making sure that social security taxes stay with Social Security. Not enough to fix it, not nearly enough as, for instance, what the gentleman's plan does with Social Security, again, we have to go a lot further than this down the road to truly save Social Security, but a very modest first step is simply making sure that social security taxes stay with Social Security.

Presently Congress can be endlessly creative in emergency spending and a lot of other designations and basically peeling the lid off the lockbox and finding ways to reach in. So this bill says the one thing that in the long run will protect Social Security surpluses is the simple idea of private property rights. So this bill would take the Social Security surplus, whatever that happens to be, and simply rebate it back to the people paying social security taxes. Not to go out and fix up the car or buy a refrigerator with, but instead to go into their own personal Social Security savings accounts that would be held by a fiduciary.

Mr. SMITH of Michigan. So, in effect, it is almost like a tax cut. Because it is saying, look, here is some of the tax money sent to Washington. We will send some of it back. It goes into a personal savings account where the individual will have control; where if that person dies, unlike Social Security and they do not get anything, this is part of the estate.

Mr. SANFORD. And what is interesting is, not unlimited control. A lot of people rightfully are concerned about will Social Security money be there when they retire. This money would be held by a fiduciary so individuals could not get their hands on the money until they turned 65, but they would at least get a monthly statement and know to the penny how much money was in the account. By doing that, I think for the first time we would be creating a fire wall between Social Security money and political forces in D.C.

To give my colleagues an idea of how this would work, last year, through the unified budget, Washington borrowed $100 billion from Social Security. It was replaced with nonnegotiable U.S. treasuries, as we both know. Now, that cushion of $100 billion went to additional spending. If that same $100 billion had been housed in personal Social Security accounts across this country, and Washington bureaucrats overspent to the tune of $100 billion, then said, Look, we are going to need to borrow some Social Security money. Imagine they said to the gentleman from Michigan, You are a great patriot. Your share of our overspending will be $473.27. Would you mind cutting a check out of your personal Social Security account back home and sending it to Washington? I can only imagine the reaction of the gentleman, as I can imagine the reaction of a lot of other folks.

So the gentleman is exactly right. In other words, this is, A, like a tax cut in that it gets the money out of town; but, B, it is in an awfully safe place out of our hands.

Mr. SMITH of Michigan. It strikes me that property tax has been lowered pretty much all across the country because taxpayers have had to reach into their own pockets at tax time and pay that property tax. The result has been outrage by a lot of taxpayers the way property tax went up, and so it was reduced.

What do my colleagues think would happen if individuals, if there was not payroll deductions and individuals had to reach in their pocket April 15, and people are filling out their taxes now,

if they had to go into their pocket and pay all of the Federal income tax? They would raise holy heck, I guaranty my colleagues. But I just urge that taxpayers start looking at their W–2 forms, looking at the amount that is deducted from their paychecks on a weekly, biweekly, monthly basis that is coming to this Chamber, to the Federal Government, so other people can decide how to generously spend their money.

Mr. SANFORD. And I would just ask the gentleman to yield for just two more seconds worth of time to say, and I think the gentleman's expression was to raise holy heck, or something along those lines, in terms of voter outrage. I would just ask folks to do that with regard to this simple idea of a personal lockbox.

To the gentleman's credit, he is a cosponsor on this bill, and I have not talked to the gentleman from Georgia yet about the bill, but I would suggest to taxpayers that they ask their representative to sign onto this bill, because I think it is a very modest first step not towards saving Social Security but towards saving the Social Security surplus, which I think again is a first step in that direction.

□ 1745

Mr. SMITH of Michigan. Mr. Speaker, there is $153 billion extra coming in this year for the Social Security surplus, and anybody that is nervous about government spending, and I refer to this chart, what we came up with is saving 100 percent of the Social Security surplus; but what the President sent us on a budget is only saving 62 percent of the Social Security surplus.

There is the long arm of the taxers and spenders that would like to come up with more programs, doing more good things for people. I think anybody that thinks that this Chamber is going to be more frugal as they need to be with your tax dollars is mistaken. We have to find some way to lock it aside; and not spending the Social Security trust fund is a good start.

I yield to the gentleman from Georgia (Mr. KINGSTON).

Mr. KINGSTON. Mr. Speaker, if the gentleman will yield, I wanted to ask the gentleman from South Carolina (Mr. SANFORD), just to kind of reiterate, as I understand it, what the gentleman is saying. We have this big Social Security trust fund, right, kind of a general pot of money. Now, in the private sector, you really do not combine all the retirement plans into one jumbo plan, I have my account, the gentleman from South Carolina (Mr. SANFORD) has his and the gentleman from Michigan (Mr. SMITH) has his, and what the gentleman is saying is let us have it both ways, let us have the big account roped off so we cannot get to it, any future Congress cannot touch it; but, in addition, for the individual taxpayer, myself, the gentleman from South Carolina (Mr. SANFORD) and the gentleman from Michigan (Mr. SMITH) and our loved ones and our grandparents, you would have, like you would in a private pension fund, your own account, and that money could not be dipped into either.

So what the gentleman is suggesting is not only a vault for the big account, but then a bunch of individual vaults with individual keys, so it would be that much harder for Congress to irresponsibly break into this big vault of money and start spending it on roads and bridges and other needs.

Mr. SANFORD. Mr. Speaker, the gentleman from Georgia (Mr. KINGSTON) is right. To the Republican Caucus' credit, they created a lock with one big vault; the problem is, if you happened to find the key, you can get into it. And as the gentleman correctly pointed out, if you got this into 70 million different vaults, you may find one key, but you are not finding all 70 million keys.

And the gentleman raised another interesting point, which is, in the corporate world, if we did what we are doing at the Federal Government, and not the three of us, but what the Congress as an institution, what the Federal Government overall is doing, you go to jail based on Federal law, and, that is, via the unified credit, we borrow from our retirement reserves to pay for the current operations of government. If you borrowed from your retirement reserves in the corporate world to pay for the current operations of the company, you go to jail based on Federal law.

Mr. KINGSTON. Mr. Speaker, if the gentleman will yield, under this system, would I get a monthly or an annual statement that shows how much I have in my own retirement account? Then let us say mine says I have $38,028 in mine. If the government raided that account, would my next statement show that my $38,000 had fallen to 35,000?

Mr. SANFORD. Mr. Speaker, yes, that is one of the important points about a personal account which the bill of the gentleman from Michigan (Mr. SMITH) does, again, which is actually reforming Social Security which is what has to happen in the long run. This very modest step, you never have $8,000, because it only deals with the Social Security surplus; but what it would show is the point that you raise, which is, right now one of the reasons it is so easy for government to borrow Social Security money is that nobody has any clue as to what they sent in over all the years they have been working in Social Security taxes, and, as a result, if you do not even know how much you have got in your account town, it is very easy to borrow.

If, instead, you knew to the penny how much was in your account, immediately you would detect borrowing and, again, help to create some kind of political firewall between political forces in D.C. and this money.

Mr. SMITH of Michigan. Mr. Speaker, I say to the gentleman from South Carolina (Mr. SANFORD), I think what is another positive of this approach or an approach to start some kind of a pilot program that I am introducing is to get our foot in the door, to give some possession of that Social Security money that is being paid in back to the taxpayers, the workers of America that are paying it in.

Let me just reinforce the positive aspects of the gentleman's proposal, my proposal, referring to what a couple of the Supreme Court decisions have been. Two Supreme Court decisions have now said there is no connection, there is no entitlement to anybody receiving a Social Security benefit. The taxes that are paid in, the Supreme Court said, are simply another tax; the benefits from Social Security are simply another program that Congress and the President have decided on, so there is no right to Social Security benefits.

It seems to me like Americans should be saying in this election to their candidates that are running for Congress, to the presidential candidates, look, what are you going to do about Social Security? I do not want just words that say, boy, Social Security is important; we have to put it at the top of our list. How are you going to keep Social Security solvent? How are you going to make sure that future Congresses, when they start running short of money, are not going to again reduce benefits and increase taxes like they did in 1977, like they did again in 1993?

Mr. SANFORD. Mr. Speaker, the gentleman raises a very interesting point, and, that is, the thing to remember about what we are talking about here is that last year about $400 billion in Social Security taxes came to Washington, about $300 billion we were required to pay for current retirees, my grandmother, maybe the gentleman's mother, I mean different folks out there. And about the other $100 billion is what is called the Social Security surplus, and all this particular bill gets at is that $100 billion, rather than being borrowed by the rest of government, it would go into these personal accounts; but what we are not talking about is that other $300 billion that currently goes to pay for retirees across America.

Mr. SMITH of Michigan. Mr. Speaker, as we start wrapping up this 1-hour session, the gentleman from Georgia (Mr. KINGSTON) is the chairman of our communications effort in the Republicans in Congress, and I think that is so important, because generally Republicans have been very good on policy. I think our marketing has been a little weak. We look to the gentleman for guidance on that marketing.

I yield to the gentleman from Georgia.

Mr. KINGSTON. Mr. Speaker, unfortunately, one of the gentleman's biggest problems is that the communications channel, i.e. the major networks are not going to give Republicans a fair shake.

Last week, as the gentleman knows, we had Bob Dole who spoke to our communications group, and he said that 68 percent of the single candidate coverage in his presidential bid that was only on Bob Dole was negative, but 67 percent of the only Bill Clinton news was positive.

Now, one just cannot go up against those odds. The other day, AL GORE, here is a guy that invented the Internet; here is a guy who goes to the Buddhist temple, comes back, shakes downs these Buddhist monks, sworn to poverty, for $300,000, does not recognize it as a fund-raiser, and says he is one of the more intelligent of the presidential candidates. He said the population of America is 250 million people; therefore, we need sampling for Census as a way, instead of head-by-head count, he wants to guess at it.

Well, the interesting thing is he said it was 250 million people. The population of America is 274 million. He was 24 million people off.

Now, if Dan Quayle had said that, we would bet that the national media would have had a heyday. But since it was AL GORE, one of their own, they were not going to worry about it.

So a lot of the problems that we are up against is we cannot get our message out when we have an unwilling messenger, and that bias of the major networks or some of the newspapers is that way.

That is why I get down on my knees and thank the Lord for C-SPAN because people can hear things; and if they do not like me for my own merits, which I am sure many do not, that is fine; but at least they do not have to have Dan Rather interpret it for them.

Mr. SMITH of Michigan. Mr. Speaker, reclaiming my time, I think probably one thing that disturbs a lot of Americans that observe this Chamber is the partisanship between one side of the aisle and the other. Somehow we have got to figure out a way to reduce that partisanship. Somehow we have got to find a way to communicate the whole truth, and nothing but the truth, to the American people.

I think information technology, I think the Internet, I think some of the talk shows are going to be the way that we are able to communicate exact information. But if we are going to solve some of the tough problems, there is no question that Republicans and Democrats and the President, whichever side of the political fence he might be on, are going to have to work together to solve the tough problems of Social Security and Medicare.

Mr. SANFORD. Mr. Speaker, if the gentleman will continue to yield, I would just say, following up on the need to be bipartisan, if there is ever a need that we need to move off dead center on, it is this one.

It is interesting, there was a report this week that basically looked at the insolvency date, if you will, of Social Security. And what the report showed was that the actual insolvency for the ''fund'' was, moved back from about 2034 or so to 2037, something along those lines, but moved back a couple years. People say, that is way down the road. I do not need to think about it.

The more interesting number is, when does Social Security begin to run shortfalls? In other words, when is more money going out of the system than is coming in? And that number was moved from about 2012 to about 2015 in what they call the intermediate set of assumptions. And if we look at a worst-case scenario, it is about 2008 or so, which is only 8 years away.

This is an issue that we have got to deal with now. And I think that some in the administration are saying hear no evil, see no evil, speak no evil; and some in my own party are saying that, as well. It is something we can worry about later on.

It is so long to look at that 2030-something number, and here is why. If we would imagine a family that lived in Michigan or lived in South Carolina or lived in Georgia that saved $100 a month every month towards their retirement, clearly, at the end of the year, they would have $1,200 in their retirement account.

Now, this family also loved to take a cruise every year. So they would go over to their retirement account jar, they would take the $1,200 of real cash out, they would write themselves an IOU, put back the IOU in the jar, saying, we owe our retirement account $1,200.

At the end of 40 years, that family would have some wonderful memories in terms of great cruises that they took. But in terms of retirement security, they would not have a whole heck of a lot because they would have a jar filled with IOUs. And in retirement, they cannot spend IOUs. If they go down to the drugstore or the grocery store, they will not take an IOU. They want cold hard cash.

So what we have to look at is, the way our present system is configured with this odd notion of a trust fund, we are really misleading the American public because that money is borrowed; it is spent by the rest of government; and all we have in its place is this IOU.

We cannot spend money twice. We may try to in Washington, but gravity dictates that we cannot. So it is important that we not get lulled into complacency thinking about 2030-something and look at how immediate this problem is. That is why I again would commend the gentleman for what he has done on this subject.

Mr. SMITH of Michigan. Mr. Speaker, maybe we have made a significant difference in our yelling and screaming and getting on our soapbox and saying we have got to be fiscally responsible, because even now the Democrats are saying we should not spend the Social Security surplus, a huge change from where we have been for the last 40 years.

I know the gentleman from South Carolina (Mr. SANFORD) is keeping his commitment to have a citizen legislator on his term limits that he has imposed on himself and is leaving after this term. It would be so good if we can, at least, move a little bit in the direction of accountability and having some kind of personal accounts.

I chaired the Social Security Task Force, bipartisan. It is interesting that we agreed on 18 findings. I think we are coming closer. I think the Chamber is realizing more and more, simply because the people of America are insisting that we face up to some of the tough problems, that we get rid of the partisan bickering, and that we deal with the problems of Social Security, Medicare, and education.

We have decided in this budget that education is going to be one of our top priorities. We have increased the money for IDEA and other education provisions. Because, look, the problems we are running into Social Security and Medicare, if we do not have a top-notch educated workforce in this country, then we are going to lose out to other countries of the world.

Mr. Speaker, I would ask the gentleman from Georgia (Mr. KINGSTON) if he would like to make a final statement.

Mr. KINGSTON. Mr. Speaker, let me encourage both of my colleagues to keep up the good work on Social Security. But, also, let us continue to ferret out the waste and fraud in government and try to do a better job for the hard-working American people. Put common sense in the process.

□ 1800

EDUCATION

The SPEAKER pro tempore (Mr. SIMPSON). Under the Speaker's announced policy of January 6, 1999, the gentleman from North Carolina (Mr. ETHERIDGE) is recognized for 60 minutes as the designee of the minority leader.

Mr. ETHERIDGE. Mr. Speaker, I rise today to speak about one of the most critical issues facing our Nation today, and, that is, the education of our children. As a former superintendent of my State's schools for 8 years in North Carolina, I know firsthand how important it is and I know about many of the amazing stories, wonderful stories that have occurred and are occurring every single day in our public schools. Too many times we hear about the problems, and we do not hear about the successes. We tend to want to talk about those problems and not acknowledge that the majority of our children are good youngsters, they do a good job, they work hard, our teachers are working hard and they deeply care about the young people they work with. Just this past weekend, I had the opportunity to be with almost 100 of them in a group in North Carolina, and I will talk about that again in just a few minutes. But I would say to my colleagues that if America is going to

seize the opportunity of this new economy we talk about, the digital age that we are entering, Congress must provide some national leadership in this most vital effort. Too many times we say, well, it really is not a national issue, we ought not to get involved in it, we ought to be doing something else, and education is important but it ought to be left here or there.

The truth is it is all of our responsibilities, Federal, State and local, and having been at the State level as a county commissioner prior to being a State legislator and a superintendent, I can tell my colleagues that the bulk of the money continues to come from the local and State level, it always will as it should and the decisions by and large will be made there. But if we had not had programs at the Federal level for children with special needs, then they would not be taken care of the way they are today and we still are not funding that adequately. There are a lot of other areas that we need national leadership on. Certainly education is one of those areas that I think that we need it.

There was a time in this country when we did not pay a lot of attention to roads or water and sewer and then we recognized it was an important national issue and it still is today, and education is one of those. Across this great country, the American people are calling for a greater investment in our public education system. They are also calling for accountability. This Congress had an opportunity to do that last year and would not step up the way they should.

This past week, we talked about the whole issue of the Republican leadership. And last year they dealt with it, the Republican leadership wanted to put together a voucher plan, providing vouchers which in my opinion is not the way to improve education for all of our children. It is really a joke and a hoax on most of them. It will provide an opportunity for only a few and it will pump billions of dollars of tax money into financing areas that is so badly needed for our children in the public schools. I happen to believe that that is absolutely wrong. It would drain those resources from the public sector that is badly needed and leave too many children behind, in my opinion, condemned to a bleak future of failure.

As I was starting to say a few minutes ago, with about 90 some young people, high school students I was meeting with this weekend, a variety of young people across our district where we were talking about the needs of what we ought to do about school violence.

It was amazing the answers these young people came up with. One of the issues they focused on was the need for quality facilities and resources in those schools. How do you tell a student that education is important when they do not get a textbook until 3 or 4 months into the year? How do you tell them it is important when the toilets do not work in the bathroom? How do you tell them education is important when all they have in the classroom on a fairly regular basis are substitute teachers because they do not have enough regular teachers in the classroom for a variety of reasons. We are not paying them enough, we are not attracting them, we are not making the quality of where they work and that is where teachers work and students learn and work. They have to be quality facilities. That is important.

You can say, That isn't the most important thing. I would say to you if you look across this country at what we value, we normally have nice buildings, the buildings that we value. They say a lot about what we care. Young people can pick that up very quickly.

My colleagues and I who are participating in this 1-hour special order this evening, we happen to have, I think, a better idea. We want to invest in a national commitment to educational excellence where schools are accountable to taxpayers for raising standards and every child has an opportunity to learn. My colleagues who have heard me talk about this before know that I not only believe that but I have worked that as a State official and as a State legislator because if you look at North Carolina, you are looking at one of the school systems in this country that really is holding our system accountable. And of all the States in the Nation, they are showing some of the highest growth in academic scores and accountability of any State in the Nation.

It takes a total commitment on the part of everyone. Improving education in this country is about creating a classroom environment where children can learn and teachers can teach. We need to foster greater connection between students, teachers, and parents and I might say the broader community. Schools in most communities are, have been and still are, that center focal point; and they need to be more so in the future. Our schools can do better, and with our help they will do better. Because that is where the future of America is, that is where the future of our States are and where the future of our communities are. They are in our classrooms today.

Children do not know what they need many times unfortunately in school. They only know what they get. Unfortunately in some cases, they are not getting what they ought to get, for a variety of reasons, one of which may be the community does not have the resources to invest. In other cases the community is not willing to invest those resources. That in my opinion is shameful if that should happen.

One of the best ways that we can improve education is to help provide smaller class sizes that are orderly and disciplined and where children can get additional attention from their teachers who really can ignite that spark of learning, the thing that teachers call the teachable moment, when the child really gets turned on to learning.

As I met with those roughly 80 to 90 students this weekend and we were talking about school violence, one of the issues they talked about was how do we get smaller class sizes, how do we get in a class where we really know that our teachers care and gives us the time? We know they care about us but she has so many students to take care of, she cannot give me the individual attention that I need.

These were some pretty bright students, as are most of our students, but there are some who need that special attention to catch up and to keep up. Not all of us learn math as fast as others. Not all of us do as well on composition. So there are a lot of ways that we need it, but if we have smaller class sizes, we can do a better job for our children. I happen to believe we do a better job for ourselves because the information age of the 21st century is going to require that all of us be able, whether we want to or not, no matter what our age is incidentally, we are going to have to be able to be on the Internet, we are going to have to be able to type, we are going to have to be able to compose, and we are going to have to send information back and forth. It is so critical and so important. I think one of the best ways we can do it is follow through on our commitment to reduce class sizes.

We started that with the President's initiative a couple of years ago, we have to fight for it every year, and certainly what we do here, it will set the tone for the country. It is not the dollars that we need because they still are going to come at the local level but we can leverage the Federal money to make a difference, and I think that is important. We need a new national commitment to the notion that parents in America have the right to expect that their children will have the best teacher in the world. How do we do that? We certainly do not do it by cutting education funding. That is the first thing we do not do. We do not do it by talking about how bad our teachers are. We talk about how do we make them better, how do we provide staff development for those teachers that are in the classroom. We can do that.

I know as a State superintendent, one of the things that once you have a tight budget, one of the first things you start to see is staff development gets cut, retraining of teachers. No business in this country in their right mind would cut out the resources to retrain their staff, especially at a time when they want to expand their product line.

What are we saying to our teachers and students? You have got to teach technology, you have got to teach math, you have got to teach computer skills, you have got to do composition. We keep adding more on, but we do not want to give them the resources to get the job done. Too many times we say, well, what we really need to do is you

need as a teacher to go after school and learn how to be a better teacher. That is what we do in many places in America. Or you do it on a weekend, or you do it in the summer on your own time. The last time I checked, teachers are not paid 12 months of the year in most places in this country, they are paid either 9 months and if they are real lucky, they may get paid 10 months and spread it out.

Mr. Speaker, we have to get serious about this business of educating our children. If we are going to be serious, then we have to make a new, renewed national commitment to education in this country. Providing support for our teachers is more than just providing resources. That is one of the most critical, one of the toughest tasks that anyone will do. I would challenge every Member of the United States Congress if they really think education is an easy job, go in the classroom and spend a week. Do not go spend an hour as a visitor and walk through and smile and say, I'm glad to be here, and have someone put on a performance for you.

Go in at 7 or 7:30 in the morning and have bus duty. When you finish bus duty, then you go to the classroom and you teach. When you get a break, you have hall duty. You get through with hall duty and get ready to go to the cafeteria and your children are eating, you have lunchroom duty because you stand around and watch the students and make sure the paper gets picked up and they are behaving in that, depending on their age level. Then when you finish, depending on the school, you may have tutoring duties after school is over in the afternoon.

And, oh, by the way, then if there is a basketball game or a football game that night, you may have duties assigned to you for that. Oh, and by the way there is not additional money for that, that is just part of your duties of being a teacher. Thank God that we have people who are willing to do it and teach our young people. When we see those yellow buses running up and down the road on the weekend, they may be going to a band concert or they may be coming back from an athletic event or they may be going to a science fair or a math fair or any number of things that our young people participate in on the weekends and the teachers and staff are volunteering.

Yes, there are parents, and I am grateful for those parents who take the time and are willing to do it, because we need parents. We need every parent engaged. I have often said if every child in America had one adult mentor, be it one of their parents or their grandparents or someone who really and truly was their one individual, that other person that would stand up and fight for them and make sure they got in the right class, they got the right attention and they were on a track to be all that they could be, it would be a different education system in America and we would have a different country. But not all children have that. They depend on their teachers and counselors and others to help them.

So rather than these things that we talk about in this Congress many times, many of my colleagues on the other side of the aisle want to bash teachers, want to bash education, I say we ought to hold them up and help them. We ought to encourage them. Yes, we ought to challenge them and when they are wrong we ought to point it out but not always bash them because they have too tough a job. And we ought not be talking about block grants, because I think block grants are many times in, my opinion, an irresponsible way to get out of our duties of providing the true resources that are needed in the classroom and in other areas for education.

□ 1815

I believe that we do not have in this country any children that we can give up, nor any children we can waste.

Mr. Speaker, America is a great country. I get frustrated sometimes when I hear people talking about how great the economy is, what a terrific job this country is doing, and how bad our public schools are. Really? Who are most of the people who are running our industries and doing all of these jobs in America? They went to the public schools of this country.

What we need to do is help those who are there today so we will continue to have that growth. We have more young people in public schools in America today than ever in the history of this country. And that is why classrooms are just bulging at the seams; schools are overcrowded and overloaded. I went into a school in my district just last week; the school is in its third year and they have 18 trailers outside the school. Now, that is because it is growing so rapidly. The communities are growing. People are moving there. As I often tell people from time to time, we are glad to have people moving and we are proud to have them come to our State.

We have a great growth economy in the Research Triangle Park area, one of the great dynamic, high-tech centers in America. But there is something about when people move there, they have a tendency to bring their children with them, as they should. And that puts additional pressure on our schools and local governments, and that is true across America because we have a very mobile society, a more mobile society today than we have ever had in history. We have to make sure that our systems fit it and that we have opportunities for young people.

Mr. Speaker, as we talk about this idea of vouchers and block grants, I think we need to get that out of our vocabulary and get back to what is really important: how do we help teachers, how do we help children, and how do we help our educational system become what it needs to be to provide for the challenges that we are going to face in the 21st century. We must make every neighborhood public school in America work. We must make every neighborhood public school in America work, and we can. If we are supportive and engage the community, the business community, the civic community, and the parents in those schools, we can make them work.

Mr. Speaker, I have a bill and a number of my colleagues have others, like the school construction bill that I have that will provide resources to the local units of government. What it does is that the State governments will have it, and they will not have to pay the interest. That will be picked up at the Federal level. They only pay back the principle. They decide where the schools are going to be built and how they are going to be built. It will not solve the whole problem of $100-plus billion that are needed for our schools for renovation and new schools; but what it will do, it will send a powerful signal to America that our public schools are important and we are going to engage at the Federal level and we do care and we are going to make a difference.

I have another bill that many of my colleagues on both sides of the aisle have signed on to, and it is entitled Character Education. I will talk about that again in just a few minutes. A third one that we are involved in on both sides of the aisle, the Speaker and Minority Leader Gephardt; and Speaker Hastert appointed 24 Members on a Youth Violence Task Force. I want to talk about that also in a few minutes. I think these items are very important to us as we look at education and where we want to go.

Mr. Speaker, this whole issue of character education is a critical piece, and what this legislation does, and let me hold up for my colleagues a chart, because we have used this, and we really started this in North Carolina in about 1989. We did a survey at that time of our public schools. We surveyed about 25,000 students; and one thing we found from that survey is a large number of our students did not respect, number one, their fellow students and in some cases their teachers. It was an alarmingly high percentage. So we felt it was something we ought to do.

So we started out with a panel of citizens, teachers, superintendents, judges, lay people, ministers and others and we came up with what we call ethics education. Well, we did not really like what we were doing on that; we kept playing with it. In about 1993, we finally finalized it to be ''character education'' at the Vanderbilt University and other places, and came up with a number of character traits that we felt were the core issues and shared it with all of our public schools. There are seven of these. Now the truth is that systems can enlarge on it, and did. The basic ones that we laid out were respect, citizenship, justice and fairness, honesty, caring, responsibility, and trustworthiness.

So what we did as we worked on our curriculum, we asked that each school

that was involved integrate that into their curriculum. We did not want to have an additional add-on for the teachers. They had enough to do. So what they have done is tied that into when they are teaching math, when they are teaching history or science, or whatever they may be teaching that day, they pick out one of these characteristics, and as the year goes on, whichever ones they have agreed on, that becomes an important part of the students curriculum, and they have signs that they put in the school.

But let me say to my colleagues, before they agree to do it, the community comes in and agrees on the numbers of the different items of the character traits that they are going to use, in that individual school system.

Now, normally it winds up being the whole LEA; and it may be, depending on the size of it in North Carolina, anywhere from 3,000 all the way up to the biggest school system with about 110,000. But what it does is amazing. We see the discipline problems go down in those schools. I was in one in Four Oaks about a month ago talking with the principal. The number of discipline problems have gone down by almost a third, and the academics went up on the part of the students in that school. We say well, why would that happen? Easy. When they start respecting one another, they respect their teachers, they understand they have a responsibility to do their homework, they have a responsibility to one another, they care about themselves, they have citizenship responsibilities, and this starts to be a part of what we are talking about.

Mr. Speaker, there is nothing wrong with this being a part of public education, as it should be, of every education, of a good education. We get away from these issues that tend to divide us, when we talk about whether or not we can have prayer in school or whether or not we can have these other issues that become constitutional issues. What we ought to be talking about is something we can do something about to make a difference for children in America and make sure that our education system is the best it can be. Because when we talk about public education, we ought not to be dealing with division; we ought to be dealing with addition. How do we add to what we have done to make it better for all children?

Mr. Speaker, we have a chance in this Congress, now that we have some resources, to make sure that Social Security is fixed, we start paying down the debt, and we invest in the future of our children; and we can do it by putting resources out there and do some school construction. I am going to talk about that in a minute.

At this time I want to yield to the gentleman from Wisconsin (Mr. KIND), my friend who has been a real leader in this Congress, who serves on the Committee on Education and the Workforce and has been a real leader in public education because, number one, he knows what it takes; and, number two, he cares about it and is committed to it.

Mr. KIND. Mr. Speaker, I thank the gentleman for yielding. I want to commend the gentleman, especially for the leadership that he has brought to the United States Congress on this very important issue on education, bringing his experience as former State superintendent of the school system down there in North Carolina, and his active role within our caucus, but within this body generally in trying to elevate this issue and the importance of this issue for the rest of our colleagues. It has been a great privilege for me personally over the last 3, a little over 3 years now as a Member of this Congress to serve on the Committee on Education and the Workforce.

During the first term, 2 years ago, the focus on the Committee on Education and the Workforce was reauthorizing the Higher Education Act. This is the panoply of Federal programs that assist students if they want to go on and receive a postsecondary education, whether it is technical school or colleges or universities, the financial aid packages that are available, the grants and loans and the work study programs, the Gear Up for High Hopes Program that another Member, the gentleman from Pennsylvania (Mr. FATTAH), was a champion on. This session, we are in the middle of reauthorizing the Elementary and Secondary Education Act, and that is the Federal involvement in K through 12, and also some preschooling programs, early childhood education programs, after-school programs as well.

Mr. Speaker, this is vitally important. It is no surprise that this has consistently ranked as one of the top issues for the American people that they are concerned about, whether it is an election year or not. It is certainly showing up right now in the election year polls, that education is a top, top priority for them. They want to hear what we as policymakers are going to do to improve the quality of education and implement the reforms that are needed in order to give our children the best chance and the best hope that they have to become productive members of our country and this society.

I also want to commend the gentleman for speaking out about the need for character education and the role that that plays, because again, this is a growing concern that many of us share in regards to our own children and to the younger generations, that there should be an important character education role in this.

Tomorrow, in the Committee on Education and the Workforce, we are actually going to be moving and marking up another aspect of the Elementary and Secondary Education Act. I hope we get it right. Last year, we had some education initiatives that I think we can be proud about, such as the Education Flexibility Act which was passed which provides greater flexibility for local school districts and being able to use the Federal monies designated for specific programs, for targeting it to areas that they feel they need extra help on or areas of innovation or creativity that they have working at the local level. And I was very supportive of that fine legislation.

We also passed the Teacher Empowerment Act last year, which will provide resources for professional development programming, the important aspect of making sure we have the most talented and most qualified teachers sitting there in the classroom teaching our children. Outside of the active involvement of parents in their children's upbringing and especially in their education studies, the next most important determinant of how well a child is going to perform is the quality of teacher in the classroom. So I am glad to see that we had a heavy emphasis on the Teacher Empowerment Act and the professional development aspect that that brought.

I also included a provision in that bill that would provide professional development assistance for principals and superintendents and the administrators of our school districts realizing the all-important role that they play as, so to speak, the quarterback of the school district, being the leader and being able to implement the reforms and knowing what reforms are going to work at the local level. But there has been a real, I think, lack of a good, quality pool of talent to draw from into the principals and superintendent ranks. Now we are hoping that as that legislation moves forward, that is going to be an important part of it.

We also reauthorized the Title I funding last year, which is the targeted funding to the most disadvantaged students in our country. So I think there has been progress made.

The Senate has taken another course of action. Tomorrow will be an indication of how well we can reauthorize the Elementary and Secondary Education bill. I am offering a bill that my friend from North Carolina is an original sponsor on that would provide more resources back to local school districts to enable teachers to better integrate technology into the classroom curriculum.

Mr. Speaker, we all understand the important role that technology now plays in this global new economy that we find ourselves in. Virtually all of the jobs that are being created today require some form of technology literacy, and we just cannot afford as a Nation to underinvest in this area when it comes to being able to deliver in important and powerful new learning tools, technology and the Internet, and make that an integral part of a child's learning process.

So we are going to be offering that up tomorrow during the markup. Hopefully, it will be adopted, because I think that is clearly the direction we need to be going in as far as education policy in this country.

I am hoping that as the presidential election season moves forward too that we are going to have an honest and healthy discussion about education and education reform in this country, because it is so vitally important. We are already starting to see the differences between the candidates, whether it is Governor Bush or Vice President Gore, some distinct differences in direction, in vision, in what their agenda would offer. In fact, Governor Bush just late last week was campaigning in my congressional district in western Wisconsin and visited an early elementary school and a Head Start Program there; and he was talking a little bit about his education initiatives, one of which was a new program that he is proposing that would offer $5 billion in spending for early childhood literacy programs. Unquestioningly, this is something that I think all of us should be able to come together on in a bipartisan manner, because it is something that we need a healthy investment in.

□ 1830

But quite frankly, this has already been implemented back in 1996. It is called the Reading Excellence Program, something that Vice President GORE had already championed and helped usher through the United States Congress, and that President Clinton in fact signed into law. It was a commitment for more resources for early childhood literacy programming.

In fact, the State of Texas happens to be the largest recipient of those funds for the Reading Excellence Program, so perhaps that is where he got his idea from. If that is the case, so be it. I just say, welcome aboard. We are glad to have you there.

There are areas I think that there are some deficiencies in where Governor Bush would take the Nation or fight for when it comes to educational programming that provides a distinct difference from where Vice President GORE is. Vice President GORE is a strong proponent and advocate for the need for doing everything we can to reduce class sizes in this country.

If we can develop an education system with a better teacher-to-pupil ratio, there are just a multitude of benefits that derive from that: more personalized attention; better discipline in the classroom; teachers that are not overburdened, overworked, having to take home assignments and papers that they have to grade until the wee hours of the morning.

Anyone who harbors the illusion that teaching is a 7 a.m. until 2:30 p.m. job is sadly mistaken, because that job continues after the final bell rings, and they are either working with students on an individualized basis or grading papers throughout the night and over the weekend. It is a major, major commitment.

As we talk to teachers about what we can possibly do to help them do their jobs better with the increasing demands that we are placing on them for better student performance, this is one area that they continuously come back to us on; that is, reduce the class sizes, give us the chance to work in a more personalized and individual manner with these kids in the classroom, and we will produce the results.

We have a very successful program in the State of Wisconsin called the SAGE program. It is a pilot program, not universal yet in the State. I would like to see it made universal. It is for reduced class sizes. In fact, last year the University of Wisconsin at Milwaukee just released a study showing the benefits of reduced class sizes under SAGE in the State of Wisconsin.

In the State of Tennessee, we have had hearings before the Committee on Education and the Workforce. They are very proud of the Star Program they are able to implement on a universal State-wide basis. The results speak for themselves. Governor Bush is not talking at all about the need for class size reduction, whereas this administration and Vice President GORE have been willing to fight to try to maintain a separate funding stream for that very purpose, to hire teachers to reduce class sizes.

I think another very important missing component in Governor Bush's education plan has to do with school modernization and school construction. Again, he is silent on this issue, when, if we travel throughout the country, not just in our own congressional districts but throughout the country, there is an overwhelming need for an increased investment in modernizing today's school, the need for more school construction to deal with the demands of overcrowding, but also to deal with the technology and infrastructure that really has to be put in place.

Vice President GORE has a distinct idea and plan on how to get there. Perhaps the greatest difficulty that I have with Governor Bush's education agenda is that I do not see how we could fund it. I do not see how, even if he comes up with a lot of great ideas on that, where he can have some meaningful and credible funding commitment for these programs. That is because in his fiscal policy for the Nation that he has laid out, he is proposing a $2.1 trillion tax cut over the next 10 years.

Last year, this body moved about an $800 billion tax cut. They tried selling it to the American people at home, and they were not buying it. It is because I think people are generally fiscally conservative with these matters, fiscally responsible, and they understand that we already have existing obligations that we need to live up to: shoring up social security and the Medicare programs, paying down the $5.7 trillion national debt, having a greater commitment to education funding and education programs within this country.

But with a $2.1 trillion tax cut, if enacted, that would virtually make that impossible. In fact, the most rosy economic scenarios that economists are giving us right now show that maybe if we are lucky an $800 to $850 billion surplus over the next 10 years might appear. So it does not take a third grade math education to do the revenues and realize there would be a serious revenue shortfall which would require one of two things, either dipping back into the social security trust fund to finance a tax cut of that magnitude, which I feel is very risky and very irresponsible, or basically an across-the-board spending reduction in virtually all the programs and important investments that we have to make as a Nation, somewhere to the tune of 25 to 30 percent cuts in programs such as education.

So he really cannot have it both ways, by being out there on the stump talking about this huge, fiscally irresponsible $2 trillion tax cut, while at the same time also saying, but I support a $5 billion 5-year initiative for early childhood literacy programs, which I would hope would receive good bipartisan support but hopefully within the context of fiscal responsibility.

Let me just end with this one last point. In my district, in the Third Congressional District in western Wisconsin, we kind of are blessed with a mecca of higher education and learning. We have five State universities, seven technical school campuses, a private college right in my hometown of Lacrosse. Higher ed issues are very important.

As I travel around the campuses and meet with students, asking them, what can we do to make secondary education an opportunity for you and other students, their constant complaint is that there is a greater and greater reliance on loans and requiring them to take out more and more loans to finance their education, which leaves them with a mountain of debt as soon as they graduate, just as they are starting their lives and starting families and starting their careers, which places an incredible financial burden upon them.

It was not so long ago, and my friend, the gentleman from North Carolina, probably remembers, where the priority on the Federal level was an emphasis on grants to students. In fact, as recently as a decade or two ago, the ratio was roughly 80 percent grants to 20 percent loans that the students were asked to do. That has been inversed now, and it is just the reverse, where 80 percent of the reliance is on loans and only 20 percent in the grant program.

I think we need to do more in the grant area in order to alleviate this financial burden on students and their families. Unfortunately, Governor Bush disagrees with that. In fact, when a reporter up in Eau Claire asked him specifically where he was on loans versus grants, his response, well, the headline I think says it all, ''Bush Averse to More College Grant Funding.''

During the question period, it was quite illuminating where he stands on this issue. The reporter in the article

wrote, ''Governor Bush, who attended both Yale and Harvard, conceded that some people have complained that those loans carry a repayment burden.'' His response: ''Too bad. That's what a loan is.'' Then he went on to say, ''There is a lot of money available for students and families who are willing to just go out and look for it.''

I get the feeling that there is a serious disconnect between the reality of having to finance higher education opportunities and how he perceives the issue right now.

Just recently I had a group of students from back home who were in my office, and they delivered basically debt scorecards of what their own individual debt was going to be like once they finish school. On the average, at least in the Third Congressional District, the average debt burden was over $16,000 by the time they got done with school. It is an incredible burden.

I think we should be moving in the direction of being able to alleviate that, and opening up the doors to higher education to more students, and especially the more disadvantaged low-income students. But obviously, Governor Bush sees a different tack to take, one which will, I feel, exacerbate the situation and make it more difficult for students to go on, rather than easier for them to go on.

We just cannot afford to leave students behind, especially when we have a tight labor market right now. We have a shortage of well-educated, skilled workers to fill the growth needs of many, many, many companies out there. I think this, too, is going to be a distinct difference when it comes to education policy between what Governor Bush envisions what is needed versus where Vice President GORE is.

Mr. ETHERIDGE. When the gentleman is talking about young people, I think that is interesting. Sometimes if we ask them, it is amazing what we find out.

This past weekend, and I try to keep in touch with them, as the gentleman does in his district, I convened what I call my District Youth Advisory Committee. Really, we brought them together to deal with this issue of youth violence, similar to the conference we convened here, and I convened one at home.

We wanted to discuss a number of issues that were reported in the Second Congressional District of North Carolina, and hopefully that was somewhat representative of North Carolina.

We had a great meeting, of course. When we get young people together, if Members really want to be energized, they will give us an awful lot of energy. They have a lot of it, and they are very bright. They were engaged on the issues. The sessions were very informative.

We sort of gave them some room. They went in some directions and some places where, I guess I was not surprised, having worked with them for 8 years as superintendent, but it was good to be reminded.

The students said, ''We need more counselors in our schools. The counselors we have are tied up doing other things, and with testing and with paperwork. When we have a problem, we need someone to go talk with in confidence. Our teachers are overloaded because of class sizes. The classes are too large,'' because lots of young people come to school with more problems than they did years ago. They recognize the need for more support from their communities.

They talked about teacher qualifications. They said, we want qualified, devoted teachers in the classroom, people who really care about us; the same thing we want as adults. A strange thing, we think students want something different.

They want people who care about them, and they realized one thing, that resources translate into money. We as adults sort of skirt around money. They said, that translates into money. It was amazing to me, the things they were able to talk about saving that we as adults talk about spending in school. They really said, we ought to save those.

One of the interesting things they came up with, I am almost embarrassed to bring it up, somebody might rap my knuckles because I was involved in doing it, was name badges. When I asked all the students, and we had 85 or 90 of them, I said, raise your hand, how many have name tags? Many. Now, how many of you wear them? Three raised their hands. I hope their administrators are not listening.

And then I said, why do you not wear them? They said, nobody checks, so they figured out that was not an important issue with adults. They said, why do we not take that money and buy textbooks?

I think we as adults, if we listen to our young people more often, we will learn a great deal. The diversity of this group that we had, they came from some of the poorer communities in the district. We met in one of the most modern high-tech high schools in North Carolina, with Internet hook-ups in every classroom. It was remarkable. Some of those students' eyes were just sort of marveling. They went into the media center and saw all the things they had that they did not have.

But all of them, every student that was there, whether they were from a large, modern high school or a rural, poor school, said, we want reduced class sizes. And these were high school students, not elementary students.

We here in Congress are talking about how do we help reduce class sizes, and the President's initiative is to reduce class sizes in K through 3, for obvious reasons. You will have more student time, you will have reading comprehension, and have children prepared by the third grade. If children are behind by the third grade, they are likely to stay behind.

That is why, as the gentleman well knows, I started a Congressional Reading Program in my district. If a child reads 100 books they get a certificate and some other stuff. It is amazing.

Mr. KIND. Mr. Speaker, if the gentleman would yield for a point, another thing class size reduction brings is the interest level of the students in the classroom. One of the great challenges, again when we talk to parents or teachers or administrators, one of the great challenges we face in the education system is challenging the students enough in order to avoid boredom in the classroom.

Through lower class sizes, more additional attention, more individual participation of the students, many times that helps overcome that boredom factor that can really stifle the learning process for these kids.

The other thing, too, and it is interesting, in studies coming back now, that also helps in battling the evil of boredom for students is the technology and the Internet, and using these powerful new learning devices that they have available. Students now are responding, saying, this is cool. This is neat stuff. We like using it. We like learning on it.

To me, that is a sure signal, then, that we should step back and listen to what they are saying, because they get it, they like it, they understand it. One of the unfortunate facts we have in the country is oftentimes the students are way ahead of the curve when it comes to the use and comfort level of the technology than the rest of us really need to be.

But the more we can do to encourage an active and energized, engaged student body in the classroom, we should sit up and take notice of that.

Mr. ETHERIDGE. Mr. Speaker, one of the issues these students have, and remember, we are talking about high school students 9 through 12, technology was a big concern. What they were talking about is not just the number of computers in the classroom. Their point was, they wanted the teachers to have the time to get up to speed on the computers, and be able to integrate that in the curriculum.

On Saturday of this past week, we went into a boys and girls club in a YMCA that does computer training and tutoring after school in the evenings and even on Saturday, for that matter.

□ 1845

I must confess, these computers have come out since I left 4 years ago. They had little computers for little tots in kindergarten where they would get at a bench, and they were telling me that in this boys and girls club as they put these children in front of these computers, they were like beginning computers, not big ones that we see but similar to the stuff they play games on, but they were math, helped them in the math, helped them in their composition. I asked them, I said now how many students will be here? They had a bench and they said there will be three on the bench trying to help the

one using the computer and you will see others standing around wanting to help.

The point of the gentleman was they are engaged in it. He said as soon as they get off the bus in the afternoon, they are there. This is a learning experience.

Mr. KIND. That is right.

Mr. ETHERIDGE. It is important because what the gentleman is talking about in these two areas, the boys and girls club in Raleigh and the YMCA, they are doing a tutorial for a lot of children who have special needs. What this will mean 5, 6 years from now, these students most likely will be in the mainstream, they will make it and be productive citizens in the future and make major contributions. The truth is, they did not get an early start.

North Carolina, and the gentleman was talking about in his State, the governor had kicked off a smart start for pre-school to get kids ready, but these are the kind of things we do.

Mr. KIND. I think we are entering this phenomenal new era when it comes to teaching and learning in our country and it is because of the advent of technology and the availability of technology. Of course, one of the great concerns that we share is the growing digital divide that exists between the haves and have-nots, those who have access to the technology and those who do not. We are talking about, by and large, large inner city schools that are pulling up a little short when it comes to the resources of getting the technology there, a lot of rural areas as well. We need to think creatively on how to overcome that. Because of this exciting new innovation, it is not something that we should be fearful of but rather embrace and try to encourage.

I guess I am speaking a little bit from personal experience as a father of two little boys at home, Johnny who is going to be 4 the end of August and Matthew who is going to be 2 in May, and it is amazing watching how they are absorbing and learning information, which is completely different from when we were toddlers growing up in that. Johnny, for instance, will hop on the computer and do his blues clues program or Sesame Street program and learn the numbers and the alphabet and the shapes and sizes and colors and a lot of the different math programs that they have available, and Matthew will, the 2-year-old, will pull up a chair next to him and see what his older brother is up to. It is kind of fun watching this, and one can just see the wheels turning and they are comfortable with it and they are using that as a learning device.

One of the great fears I have as a member of the Committee on Education and the Workforce is that we may be a little bit slow in realizing the power of this potential that exists out there. We may not be thinking creatively enough or encouraging that type of activity enough in the classroom and doing everything we can to make sure that they have access to this technology but also have the well trained and qualified teachers who are comfortable in using this technology in the classroom as well, because, shoot, that is the future. It is coming. It is here already and we cannot afford to be asleep at the wheel and we need to encourage this type of activity with our kids.

Mr. ETHERIDGE. The gentleman is absolutely correct. When we start talking about children, it becomes very personal, as it should. With our three, they are fortunate. I wish all children had the opportunity to have those resources. Two of our children are engaged in public education. Our son is a fourth grade teacher in Wake County and listening to him talk about what happens in the classroom and this learning experience and how children need this help, and our daughter taught high school and is now back at the university. My wife is still in the public schools.

Even though I left the superintendent's office, I did not get away from it. I get a dose of it every weekend I go home, but it is so important that we reach out and give children every opportunity.

I happen to believe, as the gentleman does, if we have a good, clean environment for our children to go to school, we reduce those class sizes, we have the space that children need to go to school, then this whole issue that we are dealing with on school violence will go down, the temperature will go down tremendously. I really believe that.

If one goes into a school that they have excess capacity, as I started talking earlier, even if it is a new school and it is a beautiful building outside but they have 30, 40 percent more students than the cafeteria is supposed to have and the bathrooms are supposed to have, the media says they are supposed to have, they start changing classes and when young people go down those halls someone is going to bump into someone and someone is having a bad day and they are going to react to it, as do adults.

So I think there is something we can do and we have a chance to do something about that this year. We ought to be ashamed of ourselves if we adjourn and go home, be more than ashamed, we ought to be held accountable because we have a chance to pass a school construction bill in this Congress to provide resources to the States and to those local schools to renovate and repair worn out buildings that have, in some cases, have leaking roofs, that are not wired to take care of the computers and the technologies that other students have and in some cases those systems that do not have the resources to take care of adding the facilities to make sure we have a good place for teachers to teach.

I always remind folks that of the years I was superintendent and I went into a modern business, there was one thing I found on every desk of every modern business and this was a computer. When I went into schools, that was not necessarily true. When I went to see a teacher in the classroom, the best thing they could hope for in some cases was a computer lab down the hall, where they took their children to once a week.

I ask folks if they had an automobile and they only drove that car once a week, how good a driver are they going to be, especially when they went there once a week and they only got so many minutes to drive that vehicle? I do not need an answer for that. I know the answer.

We have within our power the ability to change that, and the Members of this Congress cannot do it all but we can do that little small part that says we are important.

Mr. KIND. I commend the gentleman, too, for the leadership and effort he has put in behind the school construction bill. It is something we can act on in this session before we adjourn this year. It is a tax credit on local bond issues for school construction costs and modernization costs. I never thought that on the Federal level we could have in whatever way some impact on local property tax burdens but it is a fact that throughout the country in many regions it is reliance on local property taxes that help finance these school costs and education costs, and it is something that it is very, very important.

Just to bring it back home again for me, I represent an urban, slash, rural district in western Wisconsin. Hopefully the rest of the nation is awake in realizing that there is a crisis in rural America right now; farmers going out of business in droves, three to four family farms a day in the State of Wisconsin alone. Because of the low commodity prices, their cash flow is severely pinched and hindered and it is making it virtually impossible to pass local school referendums in rural parts of the district, not because the farmers are adverse to education or the need for education investment but they are just trying to survive and keep the family farm going and being able to provide for their family. So this is another area where we can, as a Congress, come together, do the right thing, provide some assistance with these tax credits to local school districts so they can meet the all-important school construction and modernization needs that they have back home. I certainly hope that we are able to accomplish that.

So, again, I thank my friend for letting me participate here tonight. I commend him for everything that he does in the area of education for this body and for the people back home.

Mr. ETHERIDGE. To my friend, the gentleman from Wisconsin (Mr. KIND), before we close out let us hit one more point. I think it is important to this Congress. I hope we will address it and

hopefully get a chance in the Committee on Education and the Workforce, and that is this issue on character education. I talked about it as I opened how much it counts as it moves into the 21st Century. As we talk about our children, we know these items are important: Respect, citizenship, justice and fairness, honesty, caring, responsibility and trustworthiness. These are things we can agree on as we talk about this whole issue of school violence, because we want our children to be safe and we need to take aggressive action I think as parents so that they will know that every school in America is a safe haven for our children. That should happen; that they are in good order, and discipline is there so it creates a good learning environment, where young minds can flourish and young souls can be nourished. We can do that. We really can if we work together and reach out and make a difference.

I think character education is one of those components that the gentleman has been working with us on to make a difference and Secretary Riley now has endorsed it, and what this new bill will do is give the Secretary additional discretion to make grants to States and to individual schools if they want to participate, to implement a program after they have worked with the total community. I think it is important for that total community to be involved and be a part of it, and that is why I introduced this bill this year, H.R. 3681, called Character Counts in the 21st Century, and many of my colleagues and the gentleman and others are cosponsors on that legislation for which I thank the gentleman, but I think if we will do that we can help parents, teachers and community leaders not just to implement character education. That is just one of the components to making education more comprehensive and make our communities safer and so that our teachers can teach and children can learn and certainly that is what the gentleman has been about as he has served and provided leadership on education in this Congress, and I thank him for it.

Mr. KIND. In conclusion, obviously there is a lot of work that still needs to be done but I think we can accomplish these goals in a fiscally responsible manner at the same time. There is a role, I believe, for Congress to perform. Sometimes we get into this old stale debate as far as what the proper role is of Federal, State, local authorities. I think what we need to instead concentrate on is what are the desired objectives and then how do we in working together in leveraging the resources we have available at the local, State and Federal level, of attaining that objective and getting the job done? Because our kids deserve nothing less. It is the future of the country we are talking about. If we are able to maintain economic growth and economic opportunities in this country, it starts with a healthy and an honest investment in the education area. Part of that includes the character education that the gentleman has been advocating. So there is an important role here and it is something that we should be able to move forward on, I feel, too, in a bipartisan manner rather than these oftentimes silly partisan debates that we have on education issues.

So, again, I thank the gentleman for his comments tonight and for the work that he has provided and the leadership that he has offered to this Congress.

Mr. ETHERIDGE. I thank the gentleman for his time and for his efforts and for his leadership, because he has worked hard to make sure education works and he has taken on the tough issues at the right time for the right reason for the right people who do not have a voice many times.

I say this about children so many times. They do not vote but if they did it would be a different world, and I think they would make a difference.

As we talk about character education, I happen to believe it does work because it recognizes that actions do have consequences and helps young people develop into well-rounded individuals who will, given the right direction, contribute to the strengthening of our social fabric in this country. That is so important as we move into the 21st Century. They are our future.

As Benjamin Franklin said, many years ago, nothing is more important for the public wealth than to form and train youth in wisdom and virtue, and only a virtuous people are capable of freedom. That was true over 200 years ago. It is still true as we move into the 21st Century. We have an opportunity this year, with resources at the Federal level, to invest that money in our seniors in making sure Social Security is safe and secure, taking care of Medicare, paying down the debt, and investing a portion of that money in our children for the 21st Century so those of us when we retire will be secure. That means character education, buildings where children can be safe and secure and have a comfortable place to learn and teachers have a good place to teach, and investing the resources in making sure that they have technology and our teachers are well trained in an ongoing basis to teach our children.

□ 1900

DISCUSSING THE ISSUE OF ILLEGAL NARCOTICS

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

Mr. MICA. Mr. Speaker, and my colleagues, once again, on Tuesday night I come before the House of Representatives and my colleagues to discuss the issue of illegal narcotics and helping to develop our national policy to bring under control what I consider the most serious social problem facing our Nation and the Members of Congress today.

Tonight I am going to talk a little bit about the problem, again, that we face as a Nation and as a Congress relating to illegal narcotics. I want to spend some time tonight talking about the debate that took place for 2 days last week on the floor of the House of Representatives which has consumed much of the time of the Congress in the past several weeks relating to, in particular, an emergency supplemental appropriations to provide some assistance in the war on drugs and, particularly, assistance to the country of Colombia and their effort to combat illegal narcotics.

Mr. Speaker, tonight I also would like to correct some of the misstatements that were made in that debate. I have gone through some of the RECORD, and I think that it is important for the future RECORD of the House that the facts and statistics and the history of this debate about how we deal with the problem of illegal narcotics is, in fact, documented. Those will be a couple topics of conversation.

In particular, I will focus on Colombia. I will also talk, hopefully, if we get time, about Mexico and the administration's policy towards Mexico as it is now developing in the post-certification process; but, indeed, there is no more serious problem facing our Nation.

The last statistics I have as chairman of the Subcommittee of the Criminal Justice, Drug Policy and Human Resources of the House of Representatives is that in 1998, 15,973 Americans lost their lives as a direct result of illegal narcotics. It is estimated by our national drug czar, Barry McCaffrey, that, in fact, over 50,000 Americans each year lose their lives for various reasons that are related to illegal narcotics, and some of these are not counted in the statistics, the hard statistics.

In that 15,973 figure, there are individuals who we read about. Again, I point to the news of the last month or so with a 6-year-old child going into a classroom in Flint, Michigan, killing a 6-year-old with a gun. Everyone has focused in the media and the Congress and the administration on the issue of more regulation and legislation dealing with gun control; but, in fact, the article that I have here says that the child came from what is quoted as a dangerous environment, the police have said that the residence was used for drug dealing; the father was in jail.

Mr. Speaker, here is an instance in which they focused on the handgun that was taken to school and used in this murder and failed to focus on the core problem, again, illegal narcotics in this home, if you would call it a home, in this setting, this young 6-year-old was forced to deal with, where he lived in a crack house, where his father was in jail. The topics that, again, the media, the Congress, the administration does not really want to talk

about. We also know this problem, and we know it too well.

Another example, and this is Lisbon, Ohio, I am sure a nice community, in the center heart of our Nation, a 12-year-old student brought a gun to school, the boy and everyone focused on this 12-year-old bringing the gun to school just recently; but the boy said, according to this news account, his biological mother was in jail, and he wanted to visit her and be with her, said the young man.

Authorities did not release the information on the mother's situation, but the Akron Beacon Journal said she was in prison on drug-related charges. Again, the focus on a young individual bringing a weapon into school, but the sad part about this story and so many others that we hear that illegal narcotics were at the root of the problem.

Here, the mother was in jail, a young 12-year-old wanted to be with his mother who was in jail, because of a drug-related offense. This is a serious situation, which has, again, impacted our country dramatically. The cost that we heard in some of the debate last week and some of the figures estimate from $150 billion a year to $250 billion a year, if we take into account the death, the destruction, the unemployment, the costs on our judicial system, the tremendous toll that this takes on our Nation and the very social fabric of our society.

So we have an annual cost, not only in lost lives, but in dollars and cents to this Nation and to our economy. It is absolutely astounding to see where we have gone in the war on drugs. And I will talk a little bit more about the death of the war on drugs and how I believe it was sabotaged by this administration in 1993; but the effects are very far-reaching.

In 1998, there were 542,540 drug-related emergency room episodes again in that year. This also is somewhat misleading, because many of these drug overdoses never make it to the emergency room. And as I said, there are 15,973 deaths. Those individuals died and some of them are not counted in these statistics. The toll of illegal narcotics to our Nation, again, goes on and on. Illegal drug users constituted 18.2 percent of the unemployed in 1998. It was up from 13.8 percent in 1997.

In 1999, Americans spent $63.2 billion on illegal drugs. So the impact on our society is well documented, and that is not what I came here to debate or discuss tonight. It is a matter of record.

What I wanted to talk about is really part of the debate that took place last week on the floor of the House of Representatives. What does this Congress, what does this House of Representatives do to deal with the narcotics problem that is mushrooming out of control across our land?

First of all, I think it is incumbent on every Member to ask a simple question: Where are the illegal drugs coming from? What is the base of the problem? Where are these narcotics coming from? If we take two of the most abused drugs in our Nation today that have caused so much devastation, heroin and cocaine, we have only to look now at really one major producing country in this hemisphere; and that is the country of Colombia.

We have made tremendous progress in a program that was instituted by the Republican majority just several years ago by the gentleman from Illinois (Mr. HASTERT), the Speaker of the House, when he chaired the subcommittee that I now chair.

That particular responsibility led him to begin a program and build on a program that was formulated again after the new Republican majority to go after illegal narcotics at their very source.

The source is not very difficult when it comes to cocaine. It is three countries. It is Peru, Bolivia, and Colombia. Peru and Bolivia were producing 95 percent of the cocaine in 1992, 1993. Again in 1996, 1997, under the Republican-controlled Congress, programs were reinstituted that were cut by the Clinton administration in those early Clinton years to eradicate illegal narcotics in the countries of Peru, Bolivia, and Colombia.

I must report that, as of this year, we have been successful, particularly in Peru, with a 66 percent decline in coca production in that country and a 55 percent decline in Bolivia. Most of the production has shifted to Colombia.

So today Colombia now accounts for nearly 90 percent of the cocaine that is entering the United States. That is factual, and that is documented. That was brought out by many in the debate last week. So we know that Colombia is the major source of cocaine coming into the United States. We also know that Colombia is now the major source of heroin.

Back in 1992, 1993, there was almost zero heroin produced in Colombia. Almost no heroin came into the United States, almost no poppy production and heroin production in Colombia.

In the past 6 or 7 years, through the direct policy of this administration, Colombia has turned into now, not only the major cocaine and coca producer, but also the major heroin producer. This was not easy, but they managed to do it; and it was through a number of very specific steps that were taken. I want to outline a couple of those here.

First of all, in 1993, 1994, the administration made some of their first blunders. The blunders that they made actually were not mentioned in the debate that took place last week.

Some of the major blunders were a complete shift in policy. The shift in policy was to stop the source-country programs and to stop the eradication programs and to stop the interdiction programs, take the military out of the surveillance business, which provided intelligence and information to stop drugs at their source, stop the Coast Guard, cut their budget, and also to again cut any type of international programs or interdiction programs that had been established back in the Reagan and the Bush administration. That was the policy. They, again, put their eggs in the basket of treatment back then.

I will bring this chart out tonight to show what their policy has been. In fact, if we go back to 1992, in this area, in 1991, and we look at treatment, we see that treatment dollars have doubled. Some of the argument that was made in the debate was that treatment would be much more effective.

I went back and pulled a record, since I have served since 1993 on most of these subcommittees that deal with this issue, and was appalled and spoke out against what the administration was doing back in 1993, and pulled up some of the rhetoric that came before the National Security Subcommittee on which I served that formerly had this responsibility.

Let me just read a little bit of what was said in 1995:

> Moreover, while the subcommittee heard expert testimony in support of drug treatment, it also received expert testimony severely questioning program effectiveness. Finally, since the public rationale for the Clinton administration shift toward treatment repeatedly came back to the June 1994 Rand study, this study was reviewed and found to be a weak basis for guiding national drug policy.

This last part is an analysis of this.

But in 1995, they used the same study that they used in the year 2000 for the rationale of where we should be putting our dollars.

□ 1915

Accordingly, Lee Brown, who was then Clinton's drug czar, testified that the President was seeking $2.8 billion for treatment, this was in 1995, for the fiscal year 1996 Federal budget, for what Brown said were 1 million drug users in this country who need and can benefit by treatment but cannot get it. Brown testified that the best way to reduce overall demand for drugs and related crime and violence is to reduce the number of hard core drug users, adding that treatment works. This was his testimony to us.

What is interesting is that I took some of the words from the gentlewoman from California (Ms. PELOSI): ''As the distinguished ranking member referred to earlier,'' and she was referring to the gentleman from Wisconsin (Mr. OBEY), who was the ranking member on the other side, when he referred to the Rand report which was put together again back in 1994. The gentlewoman from California (Ms. PELOSI) said, again on March 29, 2000, ''Yes, we have an emergency in our country, Mr. Speaker; 5.5 million, as I said, Americans are in need of substance abuse treatment.''

So we have back here Mr. Brown, President Clinton's drug czar, saying that if he got this money in the budget he proposed back then, the best way to reduce overall demand for drugs and related crime was to spend the money on

treatment, and he testified, ''There are 1 million drug users in this country who need and can benefit from treatment but cannot get it.'' And that policy has gotten us up to 5.5 million Americans, according to the gentlewoman from California (Ms. PELOSI) and others who testified, and the gentleman from Wisconsin (Mr. OBEY) who also testified before the House of Representatives.

So the policy that was advocated by the administration in 1994 and 1995 was followed by the Congress. We have nearly doubled the amount of money in treatment, and we have nearly five times the number of people needing treatment.

Now, what did they do that was different from the Bush and the Reagan administration? Let me just pull up this chart that I have used before. This is really the most telling chart about long-term trends in prevalence of drug use, and it shows that during the Reagan administration years a steady decline in drug use and abuse and all the way down here to 1992. This is where they changed the policy. We went up that treatment ladder, we cut source country programs, we slashed interdiction programs, we took the military, the Coast Guard out of the war on drugs, and we put our eggs in the treatment basket recommended here in 1995. And it was recommended here again in an unending debate on treatment for nearly 2 days where we heard the comments of the other side.

In the Clinton administration what took off like a rocket was drug use and abuse. It took off in every category. It is amazing how the people on the other side are in such denial. And this drives the liberals crazy, to look at this chart. Again, I did not produce these charts. They were produced by the scientific community and somebody monitoring the future. They are by the University of Michigan. Again, we look at the Reagan administration. And this is in one category, cocaine. We see what was happening here.

The Reagan administration, at the beginning, was hit with cocaine coming into the country. They took steps and they started the Andean strategy, the source eradication, the vice president's task force, and we see a dramatic reduction in cocaine use. There was less cocaine coming into the country. Less tolerated.

Then we get into the Bush era, and we see a dramatic increase. Again, he was vice president. As president, he did an incredible job in also curtailing the production of cocaine. And we see a beginning of a leveling off and then a takeoff in the Clinton administration.

This, again, is the policy that has been rejected by the other side, going after drugs at their source and stopping the flow. What we have right now is an incredible flow because this administration has, in fact, taken every step to make certain that any aid in any form to Colombia does not get there, or has not been able to get there, because of their direct policy.

These are a couple of charts and, again, if we look at what we did here with the Bush administration, this is Federal spending in international programs. That is stopping drugs at their source. This is how money was expended by the Congress for stopping drugs at their source. Dramatic cut when the other side took control, putting the money in treatment. And we can take this chart back up here, which is our treatment chart. We go up in treatment, continue to go up in treatment. We cut the international programs and, voila, what do we get? More and more drugs flooding into the country.

That is why the statement by the gentlewoman from California (Ms. PELOSI) that we have now 5.5 million Americans that need treatment conflicts with just a few years before when the administration said that we only had 1.1 that were in need of treatment and they were requesting money for that and cutting money in this.

Now, we do see, with the advent of the Republican majority, efforts to get our international programs back to the level of 1991–92. If we look at this chart, the 1991–92 levels, to get back to those dollars, we have to get to this level. So we are barely back at 1991–92 levels.

The problem we have had is that we know where the illegal narcotics are being produced. I went over this with my colleagues before. They are produced now, heroin and cocaine, in one place. Two drugs in one place. They have managed to actually narrow it down to Colombia. So that is why we are here and that is why the situation has spiraled out of control. That is why that region is now in total disruption. That is why 35,000 Colombians have died in that area. And that war that has been going on there is now financed, according to the administration's own drug czar, by narcoterrorism. They fund the violence by drug profits. Very simple.

So we know, one, that the drugs are produced there, heroin and cocaine; 80, 90 percent coming into the United States. We know this policy did not work. We know that we can, first of all, wipe out illegal narcotics at their source, and we have effectively done that. We have two great examples, Peru and Bolivia, their next door neighbors. Cocaine cannot be grown all over the place, poppy cannot be grown all over the place. Coca is a little more difficult than poppies. But we do know where it is coming from, and we know that it is financing the disruption in that region and violence to those people.

Unlike the other part of the supplemental that we were funding here at some $4 plus billion, and we have probably spent another $10 billion on, in Kosovo and Bosnia, and some of these other missions, not one American life has been lost. There has been civil conflict; there has been civil war by all kinds of factions when we stepped in. But there is a slaughter on the streets of America and yet there is a reluctance to step in.

The other side again focused for nearly 2 days of debate on treatment; we have to spend more money on treatment. And they based it all on this failed study of 1994 that Lee Brown, the former drug czar, based his request on; how he would clear that up if we just increased the money in drug treatment programs. I say to my colleagues that by the time we get to treatment, we have a very, very serious problem.

Talk to anyone involved in law enforcement. Talk to anyone involved in drug treatment programs. First of all, treatment indicates addiction. And when someone is addicted to illegal narcotics, they have had a drug habit. A drug habit results in that individual supplying a habit at a cost of anywhere from $100 to $500 a day. We have heard even higher figures from some of the addicts that we have interviewed. That means they are already committing felonies and misdemeanors and serious crimes, sometimes under the influence of these hard narcotics, committing serious crimes not only against the public but against their families. Almost all the cases of child abuse, almost all the cases of spousal abuse involve substance abuse in this country.

So, again, they put all their eggs in the basket of treatment. They cut the international programs, the programs for interdiction using the military. And, again, and we must make it very clear, some of my colleagues I do not think even understood this, our military is not a police force. Our military does not get involved in a police action. In fact, that is banned by the Constitution. Our military does not arrest anyone in the drug war. What our military does is it uses surveillance. We are continually flying planes and using resources to protect our borders against incoming potential threats.

Now, I submit there is no threat greater than a lob of illegal narcotics that has killed 15,973 in 1998 and over 50,000 each year in our country in drug-related deaths. Is there anything that is killing more Americans that is coming in from a foreign source? I submit that there is not.

So the mission of our military is to provide surveillance intelligence information, and that information is going to other countries. It is also going to some of our enforcement people to keep track of people who are dealing with deadly substances which are poised against the United States, against our families, against our children, and killing our people in unprecedented numbers. There are wars, major wars, that this Nation has fought that we have not had the casualties of this war on drugs.

Again, the other side says, well, we should only be spending money on treatment; only treat the people that are wounded; only treat the people who have been victimized; only treat the people who have been the victims and wounded by that incoming foreign substance. If it was a missile, they would

speak quite differently. They would go after the target. They would want to destroy the target.

□ 1930

It does not take a complicated plan to go after the target. We know where the illegal narcotics are. They will tell us it does not work. Well, it worked in Peru. It worked in Bolivia. They will say there is so much violence in Colombia that it will not work in Colombia.

I submit, any of these Members should go back and look. Because in 1990, 1991, I flew into Lima, Peru. In Lima, Peru, I flew in and the airport was sandbagged. The military was on every street. There was gunfire at night. We could not walk through the streets. The buildings were boarded up. The Indian peasant population was sleeping in the parks.

The Shining Path, as ominous a force as the FARC ever was, was slaughtering people. And there were right-wing bands also returning the slaughter on the other side roaming through the towns and villages of Peru in a slaughter across that land. So do not tell me that we cannot bring this violence under control.

Then they get into the argument, well, 75 percent of the paramilitary killed civilians in this, and the other side says 52 percent of the deaths were caused by the FARC Marxist guerrillas.

Well, I do not care if they are paramilitary, and I do not care if they are Marxist guerrillas. They are slaughtering people. They are using the proceeds from their conflict to slaughter our families here.

So that is why interdiction is so important. That is why part of our package deals with interdiction in trying to, again, bring under control some of the illegal narcotics as they leave the source and come out of the source country, the most cost-effective way we can go after these illegal narcotics. And we do not have to use one American service man or woman or put anyone at risk in this process that is providing some of the information.

What is sad is that this administration just does not learn. They shut down information going to Colombia back in 1994. And, of course, the Republicans were outraged. In 1994, we were in the minority; we could not do a whole lot. But my colleague, the gentleman from California (Mr. HORN), and I pulled this quote up from 1994. It said, ''As you recall, as of May 1, 1994, the Department of Defense decided unilaterally to stop sharing real-time intelligence regarding aerial traffic in drugs with Colombia and Peru. Now, as I understand it, that decision, which has not been completely dissolved, has thrown diplomatic relations with the host countries into chaos.''

That is the gentleman from California (Mr. HORN) in 1994, my colleague. We served on the committee together.

Now, we would think that they would learn. And we were able to change this after we got support from the other side of the aisle. And even the Democrats were appalled. I brought this up before from the Washington Post: ''U.S. Refusal to Share Intelligence in Drug War Is Called Absurd.''

This is the next direct step in the Clinton liberal administration towards illegal narcotics. Back in 1994, they got us in a situation where, in 2000, we are debating on the floor of the House of Representatives a billion-plus, a billion-and-a-half-plus package to bring under control the situation with illegal narcotics coming out of Colombia. These are the series of mistakes.

This is Thursday August 4, 1994. It says, ''Chairman of the two House subcommittees again blasted the Clinton administration yesterday for its continuing refusal to resume intelligence sharing data with Colombia and Peru.''

Now, we would think they would have learned by the mistakes that they made. Even members of their own party in 1994 chastised them for this horrible mistake in not providing information so that they could go after drug traffickers. But, now, these people do not learn.

This is an incredible story that just appeared a week or two ago; and in it was a report according to Claudio de la Puente, who is the charge d'affaires at the Embassy of Peru. This particular attache said, cocaine trafficking has increased due to new air trafficking routes, increased land and maritime transportation; and he said that, in 1999, there was again reduced surveillance which the United States of America, which, again, the repeated requests for assistance, repeated requests for surveillance data and information to that country have not been provided by the United States and, in fact, they are now seeing a recent increase in production of coca cultivation in Peru.

Here we have had in place a program that works. We provide information to Peru. Peru has taken action and swift action and, in fact, shooting some of the planes, drug traffickers, after numerous warnings, out of the sky. We had a 66 percent reduction in the last 4 years. We intercepted 91 aircraft involved in drug trafficking between 1992 and 1997.

And unfortunately, it says, since 1998, the Peruvian Air Force has not been able to continue its interdiction operations because of lack of U.S. monitoring provided by U.S. AWACS and other surveillance planes.

Unfortunately, the administration, starting with the Vice President, who took some of the AWACS out of the South American drug trafficking pattern and put them to check on oil spills and the President moved some of these assets to Kosovo to deal with one of his many deployments there. In the meantime, cocaine production and trafficking is up. We would think that we would learn from 1994.

Then the latest news is, and this is March 22, I believe, last week, prices of cocaine and heroin have fallen to record lows. When we have an increased supply and nothing stopping the supply, prices fall down. Easy economics. This was predicted not only by those in the Congress some years ago but those who are charged with overseeing policy for the United States in that country.

I have a report that was provided to me just a few months ago, December of 1999, asking about what United States military assets are used on the war on drugs. The report was prepared by the General Accounting Office. It says, ''Assets DoD contributes to reducing illegal drug supply have declined.'' Then it goes on to document that decline.

And oddly, on page 17, it has a statement from the United States ambassador to Peru. Our ambassador to Peru warned in an October 1998 letter to the State Department that the reduction in air support could have a serious impact on the price of coca.

Well, surprise, President Clinton. Surprise, administration officials: cocaine and heroin prices fall.

The other reason that we have had heroin prices fall is because the United States gave up its forward operating location, which was really the center of our entire antinarcotics effort for the whole Caribbean and South America at Howard Air Force Base.

They knew this was going to happen. We held hearings. We went down. We asked them to make certain there were in place some type of agreement either with Panama to continue drug forward surveillance operations or relocate those activities.

Unfortunately, they failed in the negotiation. They failed to keep even the presence of our antidrug monitoring activities in Panama. We were completely kicked out last May 1. And to date, and soon we will be approaching the first-year anniversary, we still do not have in place even a fraction of the capability to detect illegal narcotics coming from their source and go after them.

We have friends and allies who will go after them. Peru will go after them. Their charge d'affaires cites that they shot down 91 planes until 1998. Their own ambassador tells them a disaster is heading our way. And they pay no attention to it.

Instead, they drag up this trivia that again that treatment is the answer, the more we spend on treatment. And again we go back to the statements of Lee Brown, our drug czar, in 1994, 1995: give us more in drug treatment. We will treat those 1.1 million untreated individuals, to the statement made to the gentlewoman from California (Ms. PELOSI) last week on the floor of the House of Representatives, we will treat those people who are drug addicted, all 5.5 million we are up to now, as the drugs come in unabated to the United States and the policy of the administration, the mistakes that they made in 1994 getting us into this mess, they are repeating again today, and the supply of illegal narcotics is coming into the United States.

We also had in this report that I cited, I requested an assessment of our narcotics effort with the military; and they will tell us that there has been a war on drugs. In fact, there has been no war on drugs. How can we possibly have a war on drugs when we take the assets out from the war?

This report again provided to me about the assets that were used in the war on drugs, again, I did not prepare it, the GAO prepared it just a few months ago, says that flying hours dedicated to tracking suspect shipments in transit to the United States declined from 46,264 to 14,770, or 68 percent from fiscal years 1992 to 1999.

Let us see if we can find our chart here again. This is what they did to us. From 1992 to 1999, a 68 percent decline of our assets in tracking suspected drug shipments. Look at what has happened here, a dramatic increase in drugs coming into the country.

So as they have closed down the war on drugs, now, it would not be bad enough if we just took out our military efforts to do surveillance from the air. This report also detailed to me the ship days devoted to supporting interdiction of suspected maritime illegal drug shipments declined 62 percent from 1992 to 1999.

Now, they wanted to make sure, if we closed down the war on drugs, we closed down completely, well, not completely, 68 percent as far as flight time, 62 percent as far as maritime efforts. Again, they did not talk about this last week. They talked about how the war on drugs is a failure.

I submit, my colleagues, the war on drugs is not a failure. The war on drugs was sabotaged. The war on drugs was closed down. This report unquestionably documents it.

The situation got so bad and out of hand that they have had to do something. But it was a series of very calculated moves. First, seizing the exchange of intelligence and surveillance information, and they are repeating that again. Then decertifying Colombia without a national-interest waiver. They decertified Colombia.

□ 1945

By not granting a national interest waiver which they can do under the law, they really banned all assistance going to Colombia for 1996, 1997. Almost all of the aid that we have requested, and we have had repeated requests from 1995, 1996 to get aid, helicopters in particular because of the high altitude cultivation of the crop and also access to the remote areas where the narcoterrorists are plying their trade. Simple equipment requests. We even passed more than a year and a half ago an appropriation of $300 million to get assistance there.

What is funny is some of the reporters and others who report on this $300 million, Colombia is now the third largest recipient of U.S. aid. First of all, that aid has barely gotten there even at the beginning of this year, less than half of the $300 million, and most of that was in three or four helicopters, Blackhawk helicopters and several other pieces of equipment we promised 3, 4 years ago. That equipment in almost comical fashion was delivered to the Colombians without the proper armoring so it could not be used, the ammunition was delivered to the loading dock of the State Department in again a farcical move.

The equipment that we have requested, the appropriations that we have made, have been blocked from getting to Colombia. Many of those liberals on the other side of the aisle have blocked that aid and equipment. They do not want the hair on the back of one liberal Marxist leftist guerilla harmed under any circumstances. They can slaughter 32 percent or 55 percent or whatever the percentage is, but that is okay. It is the right-wing paramilitary that we have to be concerned about because they are killing, too.

I do not think we need to be in that debate. I think we need to provide the resources to stop those that are dealing with it, in both the production and transit of illegal narcotics into the United States. So yes, this has created an emergency. They are dying in our streets. People do not want to talk about it. We say treatment is the answer. More gun control legislation. We get those guns under control; we will be in great shape. But do not worry about the narcotics, just treat more people. After we get them addicted, then we can treat them.

Of course they do not tell you that 70 percent of the public treatment programs are a failure. They do not tell you the statistics we heard in Baltimore a few weeks ago that 50 percent of those that are supposed to go to treatment do not even show up for treatment and of the few that end up getting treatment and it is successful, there is still a pretty serious failure rate even with those individuals. But the answer is just more treatment.

Again, treatment assumes that we have already gotten to the point where we have failed with a human being, they become addicted and now they are telling us we have five times the number of addicted people we had when they said treatment was the answer some 5 years ago, and I presented their testimony again today. So time after time this administration and the well-intended liberals and really the saddest part about this was to see some of the minority Members of the House of Representatives here engaged in that debate, just give us more money for treatment for our people, just treat these folks and that is the answer.

They forget that in our Nation's capital we have been killing on average 400 young black African American males a year for the last 10 years. We have just first made a dent in it in the last year or two. That is 4,000 human beings slaughtered. In Baltimore, 300 on average slaughtered in that city. Until Mayor Giuliani took over in New York with his tough enforcement policy, they were killing on average 2,000 people a year. He has gotten that down to the mid-600 range. Look at the heat he has taken for a tough enforcement policy.

But here the liberals in the House and the minorities in the House are saying, just give me more treatment, more treatment money. We get those people treated and everything will be fine. But the deluge of illegal narcotics, and we know where they are coming in from, we know the source they are coming in from is Colombia, no question about it. Yet they are reticent to pass this legislation. Now it may be blocked because the hour is so late.

The submission of this is almost farcical. I asked my staff on the subcommittee to prepare a time line. July 28, 1999, the U.S. drug czar visits Colombia and declares an emergency. We will soon be up to July. The 21st of September, 1999, President Clinton meets with President Pastrana in New York City, endorses Plan Colombia. That is September 21, last fall. The 24th of October, 1999, 10 million Colombians march for peace. January 11, 2000, the White House announces the Colombia aid package. Finally, February 7, a little over a month ago, President Clinton submits the Colombia aid proposal along with his fiscal year 2001 budget.

People are saying, Why now may it be in the cycle, the regular cycle? It is not an emergency because we will only lose another, in the 16,000 range of Americans dying but they die quiet deaths in those little communities and they are buried in some little family plot, it really does not matter. And the other 50,000 drug-related deaths, we can blame it on guns.

Here, this is a great cover. We will pass more gun legislation and that will cover up the problem. And then we will come to Congress and we will ask for more treatment, because we asked for more treatment in 1994 and we told how that was going to solve the problem and we doubled the amount of money in treatment, but we can come here and do that again and that will keep our people sort of in their place.

The saddest part about this is the minorities are dying by the thousands and the percentage in jail are the minorities, the Hispanics and the blacks in this country being slaughtered with this. It is unfortunately also now in the urban centers. The latest reports are it is absolutely ravaging our rural areas.

So this is the policy of the Clinton administration, a failed policy. If I came here and just said that we had stood by and let this happen, I would be as guilty as they. We have put in place some effective programs. We have a multitiered, a multifaceted approach that involves source country eradication, cost effectively, interdiction as it is coming from the source, engaging, using our military for their surveillance.

Prevention. Prevention is a big element. We have passed under Republican leadership one of the largest prevention and education increases in the history of any Congress, and those programs are now under way. And, of course, even under the Republican control of the House since 1995, we have increased treatment some 26 plus percent. That is only the direct funds. There are many other indirect funds. But treatment again is not the only answer.

The other part of this equation, of course, is Mexico. I have been a critic of Mexico because of two things. First, United States policy towards Mexico which is a failed policy has been, is and continues to be a failed policy, and Mexico is also the main trafficking route of that illegal narcotic that is produced in Colombia. In fact, we now know there are relationships of drug traffickers for both of those countries.

What is amazing is that this administration just weeks ago certified Mexico as cooperating in the war on drugs. General Barry McCaffrey went down to Mexico City, I have a report from the news, and he told reporters that Panama in particular faced a full scale assault from narcotics traffickers since last December's handover of the canal. Where were they then? He says, ''They're switching back. There's a lot more now showing up in Haiti, Dominican Republic, Jamaica. Haiti is the problem.''

General McCaffrey said in a briefing in the United States ambassador's residence in Mexico City on last Wednesday night. So he is down in Mexico, and he is saying Haiti is the problem on February 11. On February a few days later, I get the interim report from the drug czar's office, the highlights of the National Drug Threat Assessment for the year 2000, and the executive summary. Let me read some of it. It talks about cocaine.

Chicago has become a major source of cocaine, a hub for Mexican organizations. Then it goes on to heroin. It says, the average size of the heroin shipment is increasing and more Colombian heroin is being smuggled through Mexico. Then it goes on to methamphetamine. Florida has become an eastern hub for Mexican national methamphetamine organizations. Next on methamphetamine threat, it says Mexican organizations are expanding manufacturing and distribution eastward. The next one says the average purity of Mexican methamphetamine, it goes on and talks about that.

It talks about cocaine and crack findings. Mexican and Colombian groups control most of the cocaine transportation to the United States. It goes on and says Mexico remains the primary conduit for cocaine to the United States. The next sentence, there are two primary corridors for movement from South America to the U.S. One is the Mexico-Central American corridor. The next part of the assessment, threat assessment to the U.S. The Mexico-Central American corridor accounted for 55 percent of the detected cocaine shipments for the first half of 1999. Then it goes on, Mexican traffickers generally control wholesale cocaine distribution.

Trends. Now we are up to trends. Mexican and Dominican trafficking groups are assuming a more prominent role in distribution. Trends. The DEA reports that Chicago has become a major distribution hub for Mexican organizations. It goes on.

Heroin. Mexico is one of the four major sources for heroin found in the U.S. Heroin. Heroin production for Mexico in 1998 is estimated at six metric tons. He does not tell you the figures we have gotten is that probably a 20 percent increase in heroin production in Mexico. Nearly all the heroin produced in Mexico is destined for the United States.

Mexican heroin is dominant in the West. Mexican traffickers rely on entrenched polydrug smuggling. Mexican organizations move heroin. Trends. The U.S. through Mexico. Mexican organizations. The average size of heroin shipments originating in Mexico. Projections. Mexican heroin. And then methamphetamine. It ends with Mexican national organizations.

But a few days before, Barry McCaffrey is in Mexico and he said Haiti is the problem, he said in a briefing in the U.S. ambassador's residence in Mexico. This same administration certified Mexico as cooperating. That certification gives them trade, finance, aid, and assistance, U.S. aid and assistance.

Do you know what the response from the administration is and from other groups and Mexicans? We should not have the United States certify whether we are cooperating. That should be given to another party, to a third party, to an international organization. So an international organization would decide whether or not Mexico is eligible to get continued trade, aid, and financial benefits from the United States of America.

Have we gone cuckoo? Here is the report that is given to me on the overall drug problems and trends. Mexico's name time after time, yet this President, this administration certified Mexico as cooperating and fully eligible for all the trade and finance estimates. I could blame this just on the administration, but there are too many others on both sides of the aisle who are willing to turn their back and take a dollar while illegal narcotics are pouring into our country.

The sad part about this, the saddest note about this is Mexico is slowly losing its grip on its national sovereignty. Corruption has turned to violence, and they are slaughtering in Mexico at an unprecedented rate in almost every state which is now controlled from the lowest police officer to the president's office in Mexico with illegal narcotics.

A sad tale but a tale that needs to be told to the Congress and the American people.

SLAVERY IN SUDAN

The SPEAKER pro tempore (Mr. TOOMEY). Under the Speaker's announced policy of January 6, 1999, the gentleman from New Jersey (Mr. PAYNE) is recognized for 60 minutes.

Mr. PAYNE. Mr. Speaker, this evening I would like to address the House about a problem that has been around for the last 40 years at least in the country of Sudan, and that is the question of slavery, chattel slavery, out and out selling of men, women, and children in that part of the world.

□ 2000

First of all, let me just say that there are throughout the world problems as they relate to the abuse of children and the practice of slavery. We see it in Nepal, we see it in Burma, we see it in Bangladesh and Mauritania. But there is a tremendously extreme practice. They are all bad, they should all be corrected; but tonight I would like to deal with the country of the Sudan. The Sudan, one of the richest countries in the world with natural resources, but one of the most impoverished countries because of the practice of its government, a government which has been a brutal dictatorship, the al-Bashir government and Turabi, but ever since the independence of Sudan. Actually the first African nation to become independent on the continent back in January of 1956, even prior to its independence, there was a problem between the north and the south and from these many years of struggle, this question of slavery continued on, and today it continues. It is actually a travesty today to think that as we move into the new millennium, we have slavery being practiced in the world.

Mr. Speaker, I have had the opportunity to visit Sudan on a number of occasions. My first visit to Sudan was in 1993 when I visited there with Harry Johnston, a former Member who then chaired the Subcommittee on Africa, and we traveled to the south to the Sudan to explore and to see firsthand this problem. I have been back many times since. We saw the conditions there. In my recent trip just in June of last year with the gentleman from Colorado (Mr. TANCREDO) and Senator BROWNBACK when we traveled to Loki in Kenya, which is a Sudanese refugee camp in Kenya, and then into the south of Sudan to Yei and Labone in southern Sudan to see again the terrible conditions by the NIF-lead government, the National Islamic Front government of al-Bashir and Turabi.

So we thought that we would have a dialogue this evening about this particular situation. I will begin by yielding such time as she may consume to the gentlewoman from the District of Columbia, and then she can yield back to me as I will continue on; and I am sure that she may have some additional comments as we move through almost in a colloquy, but to bring this dastardly situation to the attention of the public of the United States and the

world, because we cannot live in the new millennium and have practices that go back to medieval days.

So at this time I yield to the gentlewoman from the District of Columbia (Ms. NORTON).

Ms. NORTON. Mr. Speaker, I thank the gentleman for yielding. If I may, I would like to begin by acknowledging the work of the gentleman from New Jersey. He is a former chair of the Congressional Black Caucus and a senior member of the Committee on International Relations. He has indicated he has traveled to Sudan on a number of occasions. He has met with former slaves. He has pressed this Congress; he has pressed the administration. I have been bothered for years by slavery around the world. The gentleman has indicated that it is not confined to Sudan, tragically. But I have been, as he has been, particularly drawn to slavery in an African nation. He and I are two of almost 40 Members of this body who are direct descendents of African slaves, so it is perhaps natural that we would be drawn especially to slavery in any part of Africa.

Because I had been so concerned and could think of very little to do, I passed the gentleman in the hall and indicated to him that perhaps he and I might do a Special Order, because I felt so powerless and I felt his leadership and knew that there were many others like him; but that this problem simply had not had the voice that I think it is beginning to get tonight. Our voices represent the entire Congressional Black Caucus, many Members of this House and the Senate, as I shall indicate in a moment.

I should also acknowledge the work of our former colleague here in the House who is now in the Senate, Sam BROWNBACK. I have not spoken to Senator BROWNBACK, but I do know that he has taken slavery, and especially slavery in Sudan, as a cause of his own. He is not of our party, but the gentleman from New Jersey and I cannot imagine that slavery would be a partisan issue, and we are so pleased to see that there has been bipartisanship on this issue. This is, after all, April 4.

April 4 is a somber day for America, because it is the day, of course, that Martin Luther King, Jr., was gunned down. So it is a day that lives in infamy, and it lives in remembrance. I have just come from a radio program where I was speaking to young people who know nothing of that day, but if there is any way to remember that day, it is certainly to remember that slavery still exists in this world, and discrimination and racism still exist in this country.

Mr. Speaker, as we look to Africa in ways that were unheard of, such as the Africa trade bill, we should also look at the forgotten submerged people of Africa who cannot think of trade today, but can only think of being traded person to person. We are, after all, more than 130 years after the 13th amendment to the Constitution was passed, and many of us in this country thought that that was the end of slavery and the last we would hear of it. The fact is that in our own homeland in Africa, there still exists slavery.

I would say to the gentleman from New Jersey, what heartens me is the joint resolution that has been passed by the House and the Senate deploring government-sponsored slave raids in southern Sudan. This resolution was passed by this House, I believe it was in June, calling upon the Sudan government to cease the practice of slavery. It passed in this House by a vote of 416 to 1, and the Senate has passed a similar bill, or a similar resolution, 97 to 2. So we have the administration, we have both houses, and we have both parties raising their voices this evening. The gentleman from New Jersey and I speak for the Members of this House and the Senate, we feel confident to say, when we say that slavery exists in Sudan and slavery will not be condoned in Sudan by public officials in this country or by the American people.

I recognize, Mr. Speaker, that the slavery is a by-product of the civil war there that has gone on for 32 of the 42 years that the Sudan has been independent, and that if we talk to people there of the government in northern Sudan, they will say that they do not have slavery; there may have been some hostage-taking. Well, Mr. Speaker, when they, in fact, take women, children, young boys, work them, engage in rape, people who were not involved in combat, you are not taking hostages, you are taking slaves.

Before I turn back to the gentleman from New Jersey, I would just like to indicate one or two features of the resolution that we passed. In our resolution, virtually unanimously in this House, we indicated that there was a genocidal war in southern Sudan, a war, in other words, to wipe out the people or, in a real sense, to convert them culturally and religiously away from their own religion. There are Christians and animists.

In our resolution, we indicate that the declaration of principles of the intergovernmental authority for development mediators is the most viable negotiating framework to resolve the problems of Sudan. We talk about the prolonged campaign and human rights abuses of the National Islamic Front government. We indicate what is surely the case and must be acknowledged, and that is that the gentleman from New Jersey and I, and the House and the Senate, and the Republicans and the Democrats, do not stand alone, that the National Islamic Front government is considered by much of the world community to be a rogue state because of its support for international terrorism and its campaign of terrorism and slavery against its own people. Those words need to be said. We do not need to soft pedal what is happening in Sudan. We need to wake up people here and around the world to what is happening so that we can all engage in whatever is necessary to bring it to an end.

Mr. Speaker, I yield back to the gentleman from New Jersey.

Mr. PAYNE. Mr. Speaker, I appreciate the gentlewoman from the District of Columbia for her many years of work. As she has indicated, she has been involved for many, many years, and of course her outstanding record as she lead the civil rights movement in this country, and the tremendous amount that she has contributed, not only to civil rights but to the rights of women. It is certainly indeed an honor for me to be joined by her this evening.

As I have indicated, the Congressional Black Caucus has been looking at this problem for some time. After my 1992, 1993 visit to southern Sudan, we had at my international affairs brain trust, which I conduct every year with a number of members of the Congressional Black Caucus at our annual legislative conference, we had the question of slavery in the Sudan as a major issue. We had people who are slaves who showed their backs where they had been whipped. We had the outstanding well-renowned model from southern Sudan Alex Wek, who last year came and talked about visiting her village, seeing her grandmother for the first time in many years and talked about the abuse of the government. As we indicated, the colonial administration did very little investment in trying to bring this country together and when the colonial powers left, there was this split between the north and the south. The al-Bashir government today continues its war policy in southern Sudan, unmercifully condones slavery, and it is the number one supporter of State-supported terrorism.

As we know, Dr. Martin Luther King said that injustice anywhere is a threat to justice everywhere, and I think history will judge what we do or do not do here in order to free the slaves and in order to bring this question to the attention of the American people. A decade ago, a radical faction took power in Khartoum and forced and turned Africa's largest nation into a killing field.

□ 2015

It conducted a self-declared holy war by preventing food deliveries to starving people, bombing villages, and taking slaves.

Slave-raiding is the terror weapon of choice. Arab militias storm African villages, killing the men, taking the women and children. Escaped and redeemed slaves tell of being ripped from their homes, roped by the neck, and forced to march in columns north where they are raped, branded, and forcibly converted.

The Sudan government, like Stalin and Pol Pot's use of famine to kill its enemy, has been one of the real tragedies. The government of Khartoum uses food as a weapon. It has been estimated that close to 2 million people have died in Sudan, catastrophes that

make Kosovo and Chechnya look like just small incidents. Two million people died of starvation, malnutrition, because of this government in Khartoum.

Actually, in 1998, tens of thousands of Africans died a slow death when Operation Lifeline failed to break the food blockade and allow food to go into the south of Sudan. There is a U.N.-operated Operation Lifeline Sudan, OLS. But in order for food to pass through, the government of Khartoum must give permission for the food to be delivered. When they want to wreak more havoc on the people of the south, where the civil war is raging, they simply will not allow the U.N. and humanitarian organizations to bring the food to the south.

Dr. John Garang, who has been fighting with the south Sudanese liberation movement, SPLA, has asked that food be allowed to come in without the approval of the government. But that is still, working through UNICEF and the Coalition of Food Agencies, Operation Lifeline, Sudan, that is the only way that food can get into the south of Sudan. A hostile government that is hostile against its own people makes the determination.

Then we have heard about the bombings, where these old Russian planes, Antonovs, fly over the villages. Only 2 months ago, while our envoy was in Khartoum, Special Envoy Harry Johnston was meeting with the al-Bashir government, bombs were dropped on a hospital killing 16 people, mainly women and children.

When I visited at my last trip, we had to look and listen to hear whether the Antonovs were coming. We came in from the south, and they say if they come, there is a little place you can dive into a hole. The people in the villages, they look at the chickens, because the chickens actually are the first to be able to detect that the planes are coming. When the chickens start to react, then the children begin to run and move around in a kind of frenzied way.

That is when the adults, the elderly, the other people, know that the bombs are coming. Is that not a horrible way to spend day after day; peaceful villages trying to scrape out an existence, a life, have to keep their eyes on the chickens because the children watch the chickens, and then you watch the children because then you know that they may be raining bombs on you. It is, as I indicated before, it is even premedieval behavior from the government that sits in Khartoum.

What we have done, we have started an educational system there. There are youngsters all over the country who are starting to learn things. As a former teacher, I know that one of the strongest elements is to get this information in the hands of children.

There is a class out in Denver that has raised $100,000. The class, and I have spoken to them on the phone and her name will come to me soon, but they know who I am talking about. They call themselves the Little Abolitionists, and that is how they got involved. That is one of the reasons the gentleman from Colorado (Mr. TANCREDO), who is their member, who heard about this at a church and then knew about Mrs. Fogel's class, he heard about what they were doing and got involved in this issue.

There are students from over 100 schools around the country. As a matter of fact, this little school from Denver got letters from Japan, people writing them asking them about how to get involved. Then in Newark, we started to introduce this throughout the country. Black churches in Los Angeles and Newark have started to raise their voices in a chorus of outrage, and are talking about this question of Africans being enslaved today.

There is a national divestment campaign, and we were very pleased that at Paradise Baptist Church, actually as we talk about Dr. King, and this was the infamous day, the day he was struck down in 1968, and as a matter of fact, Dr. King had just visited Newark, New Jersey. This was the last visit he made on his way back to Atlanta and on to Memphis.

I was with him that morning at a school that I had taught at, then the South Side High School, where he came and spoke to the students in 1968. Then that evening at Abyssinia Baptist Church, when Dr. King left and went back home and then to Memphis, we know what happened then.

But on January 16, celebrating Dr. Martin Luther King's life, I was invited by Reverend Jethro James at the Paradise Baptist Church in Newark to come to his church. Rather than talk about domestic issues and civil rights in this country, and the question of affirmative action and the talk about police misconduct, the issue was about slavery. I was very pleased to be asked to deliver the sermon at that Sunday morning.

From that morning, we have had a move on this national divestment campaign. See, there is a company called Talisman Energy, a Canadian company. They are drilling oil in Sudan. They are in partnership with the Malaysians and the Chinese.

What this oil is doing, now that they have completed the oil lines, is to bring more money to the government. Black gold is like blood oil.

This company, the Talisman Energy, a Canadian company, has investments all over the country. We have started a divestment program in this country. I was proud, as we pressured the State of New Jersey, that they sold 850,000 shares several weeks after the attention and the news media and the newspaper accounts of that Dr. King program, where various persons came and spoke and talked about this terrible travesty that is going on in the world today.

We are saying that we should target companies. Just as we have had this divestment program in South Africa with apartheid, the Dellums bill, and the gentleman from New York (Mr. RANGEL) and Bill Ray had the divestment, we are saying this Talisman Energy Company should be targeted and they should be penalized for cooperating with a pariah government that wreaks havoc on its own people.

We can go on about that, but I will ask the gentlewoman from the District of Columbia (Ms. NORTON) if she has any other comments she would like to make at this time. I yield to the gentlewoman from the District of Columbia (Ms. NORTON).

Ms. NORTON. I thank the gentleman for yielding, Mr. Speaker.

The gentleman has indicated that he has seen with his own eyes and felt the terror himself. That is an amazing experience, especially since there have been denials by the government, even some in this country, that there is slavery in the Sudan. This gentleman has seen it with his own eyes.

Later on, I would like to indicate some of the testimony from ex-slaves, former slaves, in the Sudan so as to make more vivid why this is such a pressing issue for decent people around the world.

The gentleman has indicated that there are schoolchildren in this country so moved that they have started their own abolitionist movement. We have churches and other Americans who just feel they cannot stay still. Actually, we do not know how many slaves there are. They are African slaves, we know that. The estimates go from 20,000 to 100,000. With all the chaos and civil war in Sudan, no one has kept a record, although, amazingly, there are villages where they literally keep close records of people who have been stolen.

We know they are Christians and they are animists. Animism simply is a kind of native African religion. These are the two groups that are targeted here. The Sudan is 70 percent Muslim. Only about 5 percent are Christian. Apparently they are seen as some kind of threat.

What we have in the Sudan is a kind of cultural war, a desire to wipe out the culture of these people, the religion of these people. Nobody should feel as strongly as Americans, where people fled precisely because people were trying to convert them to a religion that was not their own. If they have a religion, they have to remain with that religion, so a civil war breaks out.

When we say to people, you cannot have your religion or you cannot have your culture, you have to have some other culture, as the gentleman has said, this has been going on for a very long time, here. In a real sense, the animus between these two groups precedes their independence, and is ancient. Nevertheless, it has become absolutely intolerable in our world today.

The antislavery movement, as it were, involves everything from classrooms and schoolchildren to a Swiss

group that makes it its business to go around essentially buying back slaves. They have freed, that is to say, bought back, upward of 20,000 slaves.

At the same time, I have to report that the antislavery movement that buys back slaves has become controversial, at least in some official circles. When we hear that people are buying back slaves, the first instinct is to say, thank goodness. UNICEF and some others have indicated some compunctions, however, about buying back slaves, because they think that it motivates the slave raiders to capture more African slaves and drives up the prices.

We can imagine, though, how the schoolchildren and groups who are buying back slaves respond to that. Nobody else is doing anything about it. If you were a slave, I guess you would figure if anybody comes along that can get me out of this and free me, then please let them do so.

Until we find a governmental solution, we are leaving these slaves either to rot in slavery or to some self-help escape, or, of course, to whatever help private individuals can bring to them.

The argument on the other side, from those who have been buying slaves, is that there has been no increase in the slave trade as a result of buying back slaves. In fact, they say that during period of intense liberation, when slaves had been brought back in large numbers, the raids have decreased.

I am not certain, and there are no official objective observers that can tell us one way or the other. I do know that the slaves are between a rock and a hard place. Nobody has come up with a solution. We can understand why people would step forward and say, we have to do whatever we can do.

Please remember slavery in this country. Please remember John Brown. Please remember the abolitionists, who were considered extremists because when slavery was the official policy of the United States and nobody would do anything about it, people were driven to do whatever they could.

At least what is happening with churches here, with the schoolchildren, with the Swiss movement that is buying back slaves, is peaceful and is liberating people. It puts a price on people's heads, but they, of course, are free.

The gentleman has also spoken about another movement. There is the liberation movement and there is the divestment movement. I agree with him, that at the very least the divestment movement is called for. I do believe that with what has happened in New Jersey to divest in Talisman Energy, which is Canada's oldest independent oil company, what has happened there is likely to catch fire everywhere else.

In neighboring New York, the first elected black official State-wide, the Comptroller, Carl McCall, is leading his State towards the same kind of disinvestment that New Jersey has begun. I must say to the gentleman from New Jersey, I cannot help but believe that it is the gentleman's work that has led his State to be the first to come forward and say to Talisman, not in this country. I think the gentleman deserves much of the credit for what has happened in New Jersey.

I want to tell the gentleman that he has inspired me to look into the pension funds of the District of Columbia, and to ask my counsel and my mayor to look to see if we are invested in Talisman Energy. I hope that, at least out of what we are doing this evening, and out of what the gentleman has encouraged to happen already in New Jersey, we can encourage Americans and others around the world to engage in a divestment movement.

I do not know if there are other companies. Talisman Energy has, of course, caught the attention of the country, and they deserve the disinvestment they are receiving.

I would say to the gentleman, I do have more to say, but in the spirit of going back and forth in the colloquy in which we are engaged, I yield back to the gentleman at this time.

Mr. PAYNE. I thank the gentlewoman very much.

The points that the gentlewoman from the District of Columbia brings out are very, very cogent points. We are encouraging Comptroller Carl McCall to take a look at the State of New York and the expanse of investments that that State has, and also the teachers' annuity funds nationwide.

Teachers have probably the largest annuity and pension funds, and we want those representatives to take a look at their portfolios, because we need to let people know that there is no profit in dealing in human misery. You cannot have a bonus by virtue of your behavior in dealing with an unjust system.

So as we target the Talisman Company, we will continue to, one, generate more involvement from the church movement throughout the country. We will continue with Mr. Jacobs and his antislavery movement, which has printed material, has become involved in getting material to children, to schools, to churches, and has done a very good job.

The gentlewoman does bring up an issue that UNICEF and the antislavery movement have had a debate about, whether to purchase the slaves is the right policy. We who want to see the policy ended do not want to get good groups battling each other about what is the right way to go. We should focus on the pariah government and determine ways that government should be brought down UNICEF wants to do it, the antislavery group wants to. I support all of the efforts that are going on.

I do believe, though, that in the legislation recently passed, in the Sudan Peace Act, there was a provision that we put in that would enable the President to block American investment in Sudan and also to break the food blockade to feed starving southern Sudanese.

There has been some controversy about having food go into Sudan in ways other than the Operation Lifeline Sudan, but we think that that is an imperfect way. We think that food should be made available from whatever means necessary, and that food should get to the people in the South who are starving. There has been some opposition to having food go into the country in ways other than the established OLS, but we think that that is really not working and, therefore, something else should happen.

As we have seen in Bosnia recently and in Serbia with the arrest of people for war crimes, people being brought before the International Court of Justice, we have seen in Arusha, the Rwandan genocide trials going on by the United Nations, we think that the Khartoum government must cease in its criminal acts or it needs to be held accountable for its actions.

We are holding Milosevic accountable in the Balkans for his war crimes, and the al-Turabi and al-Bashir governments must also be judged accordingly as crimes against humanity. We need to take a look at an indictment of these people who have continued the plight, as I mentioned, of 4 million people. As I mentioned, 4 million people have been displaced, and 2 million people have died over the course of 40 years.

Although these gentlemen have only been involved in the last decade or so, we need to start holding heads of state accountable. We saw what happened in Europe as related to Argentina's former dictator, where until his health became an issue there was an indictment being charged against him.

I think that the time has come that we need to tell criminal heads of state that they are going to be held accountable, that they are going to be indicted, and they need to be brought to trial.

□ 2030

It makes no sense that we tolerate this. Up to now, we just had Band-Aid approaches to fix some of these problems and so if we are going to be effective we must go to the root causes and the root cause is the government of the north.

Now, I do have to applaud the administration for applying sanctions almost two years ago on the government in the north, and they have held to most of the sanctions. Of course, many corporations are opposed to sanctions but I think that in this extreme situation that that is the least that these corporations can do. Invest somewhere else until we change that government. We cannot reward this government for its continued use of these terrible practices. In addition to what they have reeked on their own people, Sudan has also destabilized her neighbors. In Uganda, the Sudanese government gives direct support to the Lord's Resistance Army, a rebel base group that kills and tortures its own people. The

Lord's Resistance Army abducts children also, sort of the same practice of what is allowed by the Khartoum government. They will go in and they will kidnap children and then make these children in the front line of any attack that is coming. So the Army of Uganda that is trying to stamp out this group is confronted with the fact that there are children sort of shielding the soldiers of the Lord's Resistance Army. This is condoned by the government of Sudan.

We have had allegations of terrorism, and terrorists are harbored there in Sudan.

Back, as I indicated, to my visit to Sudan in 1992, 1993, when I returned I introduced the first piece of legislation that I did on slavery in the Sudan. I cannot even believe that it has been almost 7, 8 years ago but I introduced legislation on slavery in Sudan and that legislation called for the State Department to list all covert and overt forms of slavery in the region. It also called for the U.S. to cut off aid to countries that aid in selling or buying any Dinka men, women or children. The Dinka tribe is the tribe in the south, basically Christian.

Many of them are animists, as has already been indicated by the representative of the District, that there is just a small number of people who are in other religions, and this has been where we have seen the north reap its vengeance on these people in the south. That legislation also called for the administration to report to Congress within 3 months about the U.S.'s efforts to end slavery and it called on the United Nations Security Council to impose an arms embargo on the government until they condemn the enslavement of innocent civilians and take appropriate measures against the perpetrators of the crime.

Let me just say that removing it to a new millennium, as I said, we have human beings still being enslaved, branded like cattle, used as chattel and property. Sometimes children are sold for as little as $15 apiece. The government tolerates, if not condones, the kidnapping and enslavement of these women and children. They have ways of brutalizing where a child is afraid to try to escape because if they catch one they will cut his foot or sever his Achilles tendon, or brutal things that will just prevent the next one from trying to leave. Even in some countries, some of the oil rich countries, young boys are brought to their countries as slaves for camel racing, because they need light-weight persons to be the jockeys on the camels.

This is another inhumane situation that goes on today and is tolerated by heads of state. So we have a very serious situation. We have been trying to work at peace in Sudan. We have had President Moi who heads a group called the IGAD group which are made up of states in the Horn, Ethiopia, Eritrea, Egypt, countries in that region to try to work out some solution with the government in Khartoum in ending the bombings and stopping the safe raids but to date they have been unsuccessful.

I have to commend President Moi who comes under criticism in his country for things that are happening there, but I have to commend him for his attempt. I spoke to him face-to-face just a month and a half ago about the problem in Sudan and he is very troubled by it and he is also troubled by the lack of progress that has been made as he has been attempting to have a change of heart with the government.

So we certainly will continue to fight. We will continue to raise this issue. We will continue to bring this issue before the persons of this Nation, before the children of our schools, before the churches in our communities. We have seen people become interested. We get phone calls from people who want more information and we send them or we refer them to an organization like the Anti-Slavery Movement or other groups that are working with this issue, but I must say that we are growing in numbers.

I used to say before the gender question, start me with ten who are stout-hearted men and I will soon give you 10,000 more. Of course, today I will say 10 who are stout-hearted men or women, and we will see this grow until we have an army of people of goodwill that will say we will no longer tolerate these injustices. Start me with 10 and I will soon give you 10,000 more, and that is what is going and they said shoulder to shoulder we grow bolder as we meet this foe, that must be taken out.

I once again appreciate the interest of the gentlewoman from the District (Ms. NORTON). As she indicated, she saw me in the hall and said we just have to talk about it; it is on my chest. We have to get it off. Let us just discuss it, and that is what we are doing here at this time.

Since we have maybe 15 minutes left, I will yield to the gentlewoman and then I will conclude after she completes her remarks.

Ms. NORTON. Mr. Speaker, I thank the gentleman from New Jersey (Mr. PAYNE) for yielding. Once again, I thank him for his consistent leadership on this issue, for his work not only in the Congress but throughout the Nation.

This evening, what he is doing, I think, his 10,000 men to join him, his 10,000 women, I think has indeed some possibility. I certainly want to join.

The gentleman knows that the Khartoum government had long denied that there was slavery at all in the Sudan. It is interesting that just last year, when the evidence began to be overwhelming because journalists from around the world had documented endlessly the slavery because the slaves themselves were offering irrefutable testimony, then Khartoum said that, yes, there is slavery but only independent Arab tribes operating without Khartoum's approval are engaged in slavery.

□ 2045

I mean, that is like the United States Government, I will say to the gentleman from New Jersey (Mr. PAYNE), telling us in 1920 that these people who are going around lynching blacks are operating without their approval. All they had to do was arrest someone. I think the message would have gone throughout the south. There would have been thousands of black people who would have been saved from lynching.

The fact is that this is a militaristic government. If it wanted to stop the slavery, it knows how to do so. It does not want to do so. It condones it. It is involved up to the teeth in this cultural war. It is a civil war, and their way of dealing with it is to strip these people of their religion and of their culture. That is uncivilized. That cannot be condoned anywhere on the planet under any circumstances today.

I would say to the gentleman from New Jersey that I would like to close and give him the opportunity to close this special order by simply referring to some of the testimony so that it will be clear that we are speaking here for slaves and ex-slaves who cannot speak for themselves, who do not have access to the podium that we come before tonight.

I was particularly struck by words from the Calgary Herald in Africa, December 26, and I would like to quote because this was an article that involved an interview of a former slave Natalinia Yoll. Here the article said, ''She could hear the galloping horses in the distance. She had lost her shoes in her rush to escape the Arab marauders. As she headed for the deep undergrowth, she knew she would eventually be safe and avoid being taken as a slave.

''But she was still running, and screaming, trying to find out if her mother was close by. Looking back would cost her precious seconds.

''Running, running, running. Then, as though someone had made an opening, she found solace in the deep, thick bushes. Alone, scared, tired, but safe—for now.''

Running, Mr. Speaker, like an animal. This was a human being. Somehow this reporter makes me feel what it must have been like.

He goes on to say, ''This is where she would remain for days, weeks, until it was safe to return to her village. This is where other members of her village would join her.''

The woman is now married. She married an African in Nairobi, Kenya. These are her own words: ''Will I ever be able to sleep without disruption? The memories are vivid, I can still smell the horses chasing me. How can I possibly forget?''

She indicates that the marauders take young boys. They want young boys, because they want young boys

who have no memory of their culture so they can completely convert them, get them to speak another language, Arabic, as it turns out, get them to forget that they ever had their own religion. Then they take girls and women, because girls and women are always helpless in every society, or at least more helpless than men. Then they sell them, apparently, to Arab merchants and put them to work on farms.

This woman, Natalinia Yoll, spoke of being placed in a circular compound, fenced off with thorns. She talks of vile health conditions. She spoke of working with livestock.

Now I am quoting her, ''Escape is the most important issue on their minds.'' ''Every day they plan, strategize. Getting out of this hell hole is the only thing that occupies their thoughts. But so many don't make it.''

Natalinia Yoll's father and two brothers did not make it.

I am particularly moved by the Dinka youth who apparently are among the targeted prey, because these children are captured so young that their marauders turned them against their own people. They are enslaved so young, they do not have any idea where they came from, where their birth family might be, so they simply speak the oppressor's language. Did not we learn to speak the oppressor's language? We have forgotten the language of our forbearers. We know, we feel what that is about.

I do want to say something about after freedom. One would think, well, when people are free, that is it. These people, when they are free, when they are bought back apparently are terribly damaged, humiliated, broken.

They are often walked back to their villages in 110-degree heat. They are surely grateful to be freed. But they walk hundreds of miles back from the north to their home region that they have been bought for $50 a head. They are stripped of their religion.

They go back, not at all certain that they will remain free. The marauders can come again. They can be sold back again. That is why people are buying these slaves.

Mr. Speaker, when you face this kind of desperation, at least in the United States, if you could get North, away from slavery, apparently, if you get South, back to where you came from, the marauders can come and get this again. This is intolerable. This is hell.

What to do? I do want to say something about that. Our country is trying. Obviously, we cannot go there. This is not a situation where we can simply storm the country and do something about it. This is not that kind of situation. It is not what the American people want, and that is not what we want.

I do applaud Secretary Albright for what she is trying to do. There is some notion that one way to, perhaps, bring Sudan to its senses, make it into a civilized nation, would be to reward the country for progress towards any peace that it moves toward. If you see them ending human rights abuses by easing off the economic sanctions imposed in 1997, I have to say one would have to see very strong evidence in order for any of us to believe that that is what should happen, but you have to begin to find a way.

Ms. Albright has suggested that this country would pick up the costs of the next round of regional peace talks in Sudan, and the administration did appoint a peace envoy to Sudan, but, of course, that did not get very far, because the adamants against moving towards peace could not be stronger.

I do want to end, finally, with what I have to say with some evidence of what it is like to be a slave in Sudan. Here I am quoting from a slave, we were roped together, 16 people to a rope, and marched to the land of the Arabs. There some of us were sold to a farmer, Ali Mohammed, who made us servants to his wives, Fatima and Zenib. I worked dawn to night but was never given even a coin. My food was table scraps. Zenib beat me with a stick if I moved too slowly or broke a jug. But Fatima was kind and took pity. Once she gave me a sugar piece.

Another detail that particularly strikes home, as far as I am concerned, they said I must be a Muslim, that I must pray on Fridays, and that also I must be cut like an Arab lady. This ex-slave is talking about female circumcision.

Reverend William Chan, a Dinka Roman Catholic priest, remains there and somehow has survived in Southern Sudan. Mr. Speaker, I would say with gratitude to the gentleman from New Jersey (Mr. PAYNE) that I would like to end with words from this priest. Reverend William Chan, we pray for our brothers and sisters who are slaves. We pray that the ears of the world will one day open to the cries from Sudan. We rejoice in the knowledge that God, our father, hears us.

Mr. Speaker, I yield to the gentleman from New Jersey (Mr. PAYNE).

Mr. PAYNE. Mr. Speaker, let me thank the gentlewoman from the District of Columbia (Ms. NORTON) for that very moving and personal report of people who have simply told it like it is. I think that we have to remember that no one is free until everyone is free, and that the government has lied that truth.

Of course, the earth will rise again, because no lie can live forever, and, finally, that the arch of the moral universe is long, but it bends towards justice.

As we look at the situation there, as we look at the continent and we see this year 2000, hopefully a settlement to the tragic conflict. For example, in Ethiopia and Eritrea with two good leaders, like Prime Minister Meles and President Isaias who are intelligent, bright men, will hopefully continue to cease-fire and come up with a peace plan.

We are hoping that the Kabila government would move towards elections in the Democratic Republic of the Congo, and that those folks who are on other sides, Uganda with Museveni and Rwanda with Kagame and Burundi with Buyoya, on one side, fighting against Zimbabwe, Mugabe's group and Namibia with Sam Nujoma and Angola with President dos Santos, that that cease-fire will hold.

We are seeing Sierra Leone, the brutal mutilation by the RUF, but that government hopefully having a government of reconciliation, and that brutality will end there. We hope that Cote D'Ivoire will have an election this spring after the cue that recently took place.

We have some bright spots. We see the government of Senegal who just had an election and had a positive transference of government. We have seen South Africa move from Mr. Mandela to Mr. Thabo Mbeka.

We have seen Botswana that has been very stable for decades with the new President there, Festus Mogae. We see positive movement on the continent, still very difficult, still a long way to go, but we are seeing, at least, an attempt and some positive steps.

As we conclude, we must also expect to see some positive results in Sudan. We must not continue to allow children to be sold and to be raped and to be beaten and to be tortured. We can no longer let governments sit in high places without having to pay the consequences.

We can no longer allow leaders to feel they can do what they want any time they want to and go above the law. We have to have the prosecutions by the International Court of Justice. We can no longer allow medieval times in our supersonic era. These things must stop. We will continue to fight.

We are on the right side. We know that we are going to win, but it is going to be the work of all of us, the children, the church people, the politicians, the investors, the housewives, just everyone saying that enough is enough.

I cannot thank the gentlewoman from the District of Columbia (Ms. NORTON) enough for her joining me in this colloquy-type special order. The fact that we are now moving forward to see victory, I think, is the right way to go, the right direction.

Once again, I thank the gentlewoman from the District of Columbia (Ms. NORTON) and the gentleman from Virginia (Mr. WOLF), the gentleman from Ohio (Mr. HALL), Senator BROWNBACK, the gentleman from Colorado (Mr. TANCREDO), the gentleman from Louisiana (Mr. COOKSEY), who has a very strong interest, the gentleman from California (Mr. ROYCE), chairman of the Subcommittee on Africa, who has done tremendous work, the gentleman from California (Mr. CAMPBELL), who I have traveled with in the South of Sudan, these are people who are saying enough is enough, and the gentleman from New York (Mr. MEEKS) and the gentlewoman from California (Ms. LEE), those who are on our committee.

□ 2100

THE NATION'S FIRST RESPONDERS

The SPEAKER pro tempore (Mr. KUYKENDALL). Under the Speaker's announced policy of January 6, 1999, the gentleman from Pennsylvania (Mr. WELDON) is recognized for 60 minutes.

Mr. WELDON of Pennsylvania. Mr. Speaker, I rise this evening to thank our colleagues for action taken in this body last Thursday when we made an historic vote and, for the first time in the history of this Congress, voted money in the emergency supplemental legislation for our Nation's first responders, our Nation's fire and emergency management personnel.

I rise tonight to pay tribute to and to discuss that legislation, but also to clarify one part of that legislation which I had to remove because of confusion and misrepresentation stated on the House floor in what was a very limited debate.

First of all, Mr. Speaker, the legislation itself is appropriate for an emergency supplemental bill because it, in fact, is aimed at our domestic emergency responders. Also in that legislation was $4 billion for our military, which was desperately needed and which I heartily supported, to help them overcome the shortfall in funding because of the level of deployments that the President has gotten our military involved in. But for the first time in this legislation the Congress voted by a margin of 386 to 28, a very lopsided margin, to support my amendment which would provide $100 million to the Nation's fire and emergency services.

Now, let me discuss why this is so important, Mr. Speaker. Over the last 10 years, we have seen unprecedented increases in the number of disasters in this country. Hurricanes, floods, tornadoes, earthquakes, wild lands fires, the World Trade Center bombing, the Oklahoma City bombing, the Atlanta Olympic bombing, numerous HAZMAT incidents, high-rise buildings, and other incidents involving potential and real situations where lives have been lost and people have been injured.

Now, admittedly, Mr. Speaker, responding to local disasters is a local responsibility, and as a conservative Republican on fiscal issues, I do not want to change that. As a former mayor, having been before that a local volunteer fire chief, and a director of fire training for some 80 fire companies as a volunteer, and then going back and working in my own community and then going on to serve on my county council, county commission, I understand that life safety is a local responsibility, and my amendment did not intend to change that. This was not an attempt, as some would say, to federalize the fire service. It was not an attempt to have the Federal Government move in to take over jurisdiction or responsibility for what should be a State and local issue. But, Mr. Speaker, we have to understand some hard facts.

First of all, the fire service of this country, which consists of 32,000 fire departments, 85 percent of whom are volunteer in every State in the union, and including 1.2 million men and women, have responded to disasters in America longer than the country has been a country. Two hundred fifty years ago this organization of dedicated men and women sprang up to basically protect our towns and cities. And all across America, for the past 250 years, these men and women have protected us from every type of disaster known to mankind, from those that are natural to those that are man-made. And they have done it very well.

In fact, it is the only profession that I can think of where the bulk of those involved are volunteers and that loses, on average, 100 of its members every year; that are killed in the line of duty. Now, we have police officers that are killed, we have military personnel that are killed, but they are paid. That does not make any difference. It is still a tragic loss when that occurs. But with the fire service, each year, on average, 100 of them are killed, and the bulk of those who are killed are volunteers. They are doing what they do because they want to protect their communities. Yet, Mr. Speaker, at the Federal level, we have done little to assist these people because it has been thought of in America as a local jurisdictional responsibility.

But, Mr. Speaker, some things have been changing. First of all, the size of the disasters in recent times have been unprecedented. The floods of the Mississippi River in the Midwest, the Loma Prieta and Northridge earthquake, Hurricanes Floyd and Andrew and Hugo. All of these incidents involved a massive impact on ordinary people. The first responders to every one of these incidents was not the military, it was not the FEMA bureaucrat, it was not the civil defense person in the county courthouse. The first responder in every incident that we have faced as a Nation has been the local fire and EMS person, be he or she paid or volunteer.

And, Mr. Speaker, these disasters have had a terrible impact on the ability of these first responders to replace equipment that was ruined, to buy new equipment that is needed, or to deal with the kinds of tragedies that these natural and man-made disasters have caused.

But there is something else that is happening, Mr. Speaker. In the 1990s, we began to see a new threat emerging, a threat involving weapons of mass destruction: Chemical, biological or perhaps even small nuclear devices. And all of a sudden the buzzword around the beltway is that we should provide more support for our military, for our civil defense community to respond to terrorism that would include a weapon of mass destruction. But, Mr. Speaker, again, the first responder to a terrorist act will not be a military unit, it will not be a National Guard unit, it will not be a FEMA bureaucrat. The first responder in any city, in any town, in any county across America to a terrorist incident will be a locally-based fire and/or emergency responder.

So now we at the Federal level are asking our country to prepare, and yet we have not given any supportive substance to these men and women who we are asking to respond to a different type of threat to our stability, and that is the threat from the use of a weapon of mass destruction. For these reasons, Mr. Speaker, it is totally appropriate that we at the Federal level provide some help to our emergency response community.

Now, those who would say that the Federal Government's support of $100 million for the fire service is simply an attempt to federalize them could not be further from the truth. First of all, the volunteer fire service in this country, which makes up 85 percent of those 32,000 departments and 85 percent of those 1.2 million men and women, has no interest in being federalized. They have no interest in being taken over by the State or their county. It is a proud tradition.

Having been born and raised in a fire service family, and having risen to the position of president of my fire company and then chief of a volunteer fire department, and training director of an academy for 80 of those companies, I understand the fire service mentality. These are proud Americans. They want to protect their communities, and they do not want government to become involved. However, Mr. Speaker, they are facing some very unique challenges that require us to provide some assistance.

First of all, the volunteers are having an extremely difficult time recruiting new volunteers. They are spending so much of their time raising money, through tag days and chicken dinners and bingos in the fire hall, that they are taking away from their ability to train and to take care of the apparatus and prepare for the kinds of situations they have to respond to. So fund-raising is becoming a larger and larger part of the requirement of the volunteer firefighter to meet the needs of the fire department. We need to provide some assistance in that effort.

Recruitment is a big problem all over America. I have traveled to all 50 States, I have spoken to every State fire and EMS group in the country. And in every State I have heard the same message: We are having a tough time recruiting young people. Money from the Federal Government can provide the assistance necessary to recruit young volunteers.

Let me just give my colleagues a piece of frustration that I have heard around the country. This President and this administration, largely supported by the liberal wing of this body and the other body, a few years ago created a well-intentioned program called AmeriCorps. We were told by President Clinton that AmeriCorps was going to

be great because it was going to give people a sense of commitment back to their community. He told us it was going to create volunteers in our towns and our cities. Well, here we are, Mr. Speaker, several years after AmeriCorps has been funded. And guess what, Mr. Speaker. We are spending almost a half a billion dollars a year on AmeriCorps, and yet not one of those 32,000 fire departments can qualify for AmeriCorps funding.

Even worse than that, Mr. Speaker, when the Presidential Summit on Volunteerism was held in Philadelphia a few years ago, the National Volunteer Fire Council, which represents all the volunteer fire organizations in America, was not even invited to attend. I had to threaten the administration, threaten to hold a counter demonstration in Philadelphia if they at least did not invite the national volunteer fire council, which they eventually did. But the point is, here we are at the Federal level spending a half a billion dollars a year on supposedly creating volunteers, which by the way, Mr. Speaker, are paid a salary and are given health care benefits and, in some cases, are given college tuition, and yet we have done nothing for the volunteer fire service, which for the past 250 years has protected this country, and which in every one of those 32,000 departments has volunteered completely, without any active support from any level of government.

It is time we helped these people, Mr. Speaker. It is time we understand that we in Washington do not have to find ways to create volunteers and pay them. The volunteers are already there. And I would also offer this, Mr. Speaker. I cannot think of one AmeriCorps volunteer who risked losing his or her life in the course of his or her duties. Again, 100 of the Nation's fire and EMS personnel every year are killed in their line of duty, and yet we at the Federal level have done nothing for them.

Mr. Speaker, those who would say that we are trying to pay volunteers could not be further from the truth. I will outline what this money is going to be used for. It is going to be used to help recruit new volunteers, to help better train to deal with incidents involving terrorist activity. It is going to be used to help create loan programs and matching programs to buy new equipment, to buy turnout gear, to buy breathing apparatus, to make sure that our volunteers and our paid firefighters nationwide are properly protected and able to respond to incidents that they will be facing throughout this year and in ensuing years.

Mr. Speaker, that is what my amendment was all about. And for those who think that we are trying to undermine volunteers, let me just say this. The worst way to undermine volunteers is to do nothing. Let the volunteers continue to be frustrated, let them continue to spend all their time raising money until there are no more volunteers. Then what will we have to do, Mr. Speaker? We will have to spend billions of dollars of taxpayer money to replace the volunteers. Billions of dollars. In fact, one estimate done by a research agency came up with a figure of $36 billion a year. That is what it would cost to replace the volunteer fire service of this Nation.

□ 2115

It is in our interest to provide a small sum of money to help these people to continue to protect their towns, to help them continue to do the kinds of things they have been doing for 250 years.

Now we have a similar problem with the paid fire service. The paid firefighters, who largely protect our inner city areas and our more urban areas in the suburban districts around our cities, are finding it extremely difficult to protect the constituents of their geographical areas because of the kinds of new threats that we see emerging.

The World Trade Center bombing, where we had 100,000 people at risk, was totally dealt with by the very professional New York City Fire Department, yet they did not have the communications equipment they needed. And, in fact, the fire commissioner at that time, a friend of mine who is currently the police commissioner in New York, told me that the single biggest need they had was an integrated communications capability to be able to communicate among themselves as well as with State and Federal agencies.

Chief Mars, the chief of the Oklahoma City Fire Department, another paid department, a very capable department, came in and testified before my committee 1 year after the Murrah Building bombing in Oklahoma City and he told me the story of the communications system in Oklahoma City, which is typical of communication systems across America.

He said, when he arrived on the scene, his radio system very quickly became overtaxed and he could not communicate with the police or with the FBI or ATF or the other agencies because they were all on different frequencies. Some were on high-band frequencies. Some were on low-band frequencies. But they could not communicate with each other.

Because of the impending threat to hundreds of people that were trapped in the building or who were unaccounted for, time was of the essence and the chief had to respond quickly. So he switched to portable cellular phones. And there on the scene, law enforcement agencies and Federal agencies were communicating with the fire chief through cellar telephones until the cell became overtaxed and the system failed.

So then the chief of Oklahoma City Fire Department, a very capable paid department in this country, had to resort to handwriting messages and have firefighters and EMS personnel carry those messages to other line officers.

What a terrible waste of time, Mr. Speaker, and what a terrible waste of resources to have an inner city chief have to write down messages when people's lives are at risk.

Mr. Speaker, that is not the exception. That is, unfortunately, more common all over this country as we lack as a Nation an integrated coordinated communications network. Mr. Speaker, we need to understand that our domestic defenders deserve as much attention as our international defenders.

Now, as a senior member of the Committee on Armed Services, I support the military, I support the $4 billion add-on in the supplemental. We spend almost $300 billion a year on our Nation's international defenders, and we value every life that is put on the line when they go into harm's way to protect America. Mr. Speaker, it is about time we put the same value on the lives of those people who defend our cities every day of the year.

Now, Mr. Speaker, these fire and EMS personnel respond to every disaster that we can think of, from toxic materials in our chemical plants and our oil refineries to hazmat explosions on our highways to the kinds of natural disasters that I discussed early on in my comments this evening. And they are faced with more and more technical challenges as they try to deal with these difficulties in saving people's lives.

For all of these reasons, Mr. Speaker, it is important that this body made the statement that it made last Thursday. In fact, Mr. Speaker, the paid and volunteer fire, an EMS community of this country, are the true American heroes. If we want to take one group of people that perhaps better than any other group exemplified what America is all about, it is the men and women of the emergency fire and EMS services across this country.

Now, they do not wave their flags and stand up and come lobby the Hill. They do not have high-powered lobbyists to put big money into the pockets of people running for office. But they are out there every day of the year, 24 hours a day, protecting our towns and our cities; and they have done that well before the country was an actual nation, over 250 years.

In fact, our volunteers are oftentimes the backbone of their community. It is the hall where we go to vote on election day. It is the group that organizes the July 4 parades, Memorial Day celebrations, the Christmas parties for the kids in the community. It is the group that we all call when the cat is in the tree, when the cellar has been flooded, and when we need a search party to find a lost child. And if we allow this group of people to have their needs unmet, America is going to be torn apart because it will tear apart the fabric of our local towns and cities.

There is no group of people that we can find in 32,000 departments across this country in Democrat and Republican strongholds that are there day in

and day out to protect their communities.

For all of these reasons, Mr. Speaker, I offered the amendment that I did last Thursday, an amendment that said that we should step in and provide emergency help for these emergency responders. And this House voted overwhelmingly, Democrats and Republicans joined together hand-in-hand and said, we agree. Three hundred eighty-six Members voted yes. Twenty-eight voted no. Mr. Speaker, this strong show of support is the strongest indication we have ever had in Washington that it is time we help these brave men and women.

Now, some would say, wait a minute, $100 million is a lot of money. Let me make some comparisons, Mr. Speaker.

I have listened to this President stand up in this podium eight times now. I have heard him talk about the importance of our Nation's teachers. As a teacher by profession, I agree with him. I have heard him look us in the eye and talk about how we need to put funding for another 100,000 teachers to help our kids. I understand his message. I have heard this President stand up in that podium and talk about the need to help police officers around the country, to put 100,000 cops on the street.

Mr. Speaker, in our budget each year we provide over $3 billion for local law enforcement efforts nationwide. Again, Mr. Speaker, that is over $3 billion a year. We even match the local towns to buy the costs of the police vests, the bulletproof vests that protect police officers if in fact they are shot.

I support those efforts, Mr. Speaker. But is a police officer more important, is a teacher more important than a paid or volunteer firefighter, a paid or voluntary EMS person, especially when the bulk of them are volunteers?

In the 8 years I have heard that President speak from that well, I have not heard one word from that podium about the Nation's first-responders, not one word about the fire and EMS personnel, who are the first thing in our inner cities on drug deals that have gone sour, who are the first responders when a person has a heart attack or a stroke, or when an accident occurs and there has got to be a rescue, or when people are fleeing a refinery and they are running in to protect the property and the lives of the people around that facility. Not one word.

Well, this Congress spoke up last Thursday and it spoke up in a bipartisan way and it said it is about time America recognizes these unsung heroes who have asked for so little.

What will that $100 million do, Mr. Speaker? Well, first of all, $10 million will fund for the first time the rural volunteer fire protection program. Now, this administration, which talks about being supportive of fire service, especially when they had their budget director go before the IAFF union meeting here in Washington, this administration cut the funding for the rural volunteer fire program from $3.5 million to $2.5 million in 1 year. That is not a commitment to helping the fire service.

My amendment fully funds the rural fire protection act to provide matching dollars for those small rural departments across America in our farmlands, in our rural areas where they really need to buy that antique or used truck, where they need to buy that extra set of turn-out gear. It provides matching funds. So the money they raise from chicken dinners and tag days can be matched now with $10 million of funding from the Federal Government.

The second $10 million, Mr. Speaker, goes through FEMA to provide burn research. Nothing is more important to a firefighter. And let me say this, Mr. Speaker, that there is no injury more traumatic than a burn. Having been a fire chief, having responded to numerous situations where both innocent people and fire and EMS personnel have been burned, I can tell my colleagues there is nothing more traumatic than that type of injury.

We need to do more in the area of research for burn treatment, burn prevention, and the cosmetic surgery necessary after a burn to allow a person to live a normal life.

The $10 million in our amendment last week is used to match money from local nonprofit burn foundations all across America, not just to benefit firefighters but to benefit those children who might dump over a scolding pot of coffee or hot water and cause themselves to be burned. That burn research money is absolutely essential, and even 10 million is not really enough.

The biggest part of the $100 million, Mr. Speaker, $80 million dollars, goes to create a program administered by FEMA of competitive grants that any one of the 32,000 fire and EMS departments in America can compete for. They have to match it dollar for dollar.

Some of our States have low-interest loan programs. They can use this money. Some of our towns put some local tax money in. They can use those dollars. Or, again, those fire departments can use the money they raise from their bingos, from their tag days, from their chicken dinners, from all the other fund-raisers they hold.

That $80 million, by being doubled and matched dollar for dollar, will create $160 million of additional spending to help the men and women of the fire service of this Nation. The money can be used to help create programs that will help them recruit new volunteers, that will help our paid departments reduce casualties and reduce injuries.

Mr. Speaker, nothing could be more important than this commitment of funding for our real American heroes. That is what the amendment did, and that is why it received such broad bipartisan support.

But, Mr. Speaker, in the brief amount of time we had to discuss the amendment, which was 10 minutes, even though I had broad bipartisan support on both sides of the aisle for the initial amendment, there were 5 minutes called for by an opponent who rose at the eleventh hour at the last minute while the amendment was on the floor objecting to one provision in my legislation, and I want to discuss that tonight because I could not clarify it in the minute that I had to respond to what was 3 minutes of accusations.

Mr. Speaker, there was an objection raised to one part of my amendment that would have changed the language dealing with how local communities can spend Federal community development block grant monies.

As my colleagues know, Mr. Speaker, Federal community development block grant funds, which I strongly support, are designed to help low- and moderate-income Americans. In fact, we spend $4.8 billion a year on the CDBG program.

Now, Mr. Speaker, the town that I used to be the mayor of, which before that I was the fire chief of, is one of the most distressed towns in Pennsylvania. We were a prime target of CDBG funds before I became the mayor and while I was the mayor. I understand the role of CDBG dollars in poor areas.

After serving as mayor, I served as a county commissioner over a county of almost 600,000 people in suburban Philadelphia county, again with a large concentration of impoverished people along our water front. I was again a strong supporter of the CDBG program. But, Mr. Speaker, I saw some problems and some opportunity with that program that I want to discuss and which were a part of my amendment.

Current regulations, Mr. Speaker, specifically define what kinds of activities CDBG funds can be used for.

□ 2130

The ultimate decision is not done by the Federal Government but rather the funds are passed to the States and passed to our towns on a formula basis and our counties, and they must prove that 70 percent of those funds are being used to benefit low and moderate income personnel. I support that ratio. I am not opposed to that. But, Mr. Speaker, let me talk about some inequities in the program. There is nothing more important to a poor person than having their life saved, than being rescued from a burning building, than being pulled from a traffic accident or a HAZMAT incident. In fact, Mr. Speaker, across America, the largest concentration of heavy industry as it was in my hometown where half of my town was made up of oil refineries, the largest concentration of hazards are in poor areas. But yet even though the CDBG dollars are designed to be modified and doled out at the local level by local officials, there has been a prohibition against local county commissioners and mayors and city councils from using the CDBG dollars for fire and life safety unless it is totally confined to the impoverished area of that

jurisdiction. My amendment sought to clarify that, Mr. Speaker. My amendment simply said that there are examples where a jurisdiction has low and moderate income people who have needs of fire and life safety that we need to broaden and specifically define the uses of CDBG dollars for. Some examples, Mr. Speaker. If we wanted to establish in my home county of Delaware County, which is typical of many counties across America, has a small concentration of low and moderate income people along the waterfront, if we wanted to use CDBG dollars for a countywide training facility that would respond to those incidents in the impoverished communities where the heavy industry is, we could not do it, because under current regulations by HUD, those CDBG dollars could not be used for a training facility unless it was totally in the area of the poverty and only used by those fire departments within the area of jurisdiction of the impoverished community, not broader than that area alone. So it is not cost effective. So it does not get done. And the CDBG money that could be doing a lot more to help the poor cannot do it. In fact, we should be able to assist those fire and EMS departments that regularly respond to impoverished communities. Now, in my home county, if there is a major fire in an oil refinery which is in a poor area, all the fire departments around our area come in with them. Those fire departments are all volunteer. They are coming from communities that might not be low and moderate income. But they are protecting the lives of poor people. Yet the current CDBG regulations, Mr. Speaker, specifically prohibit the use of those dollars to benefit the lifesaving activities of fire and EMS departments that are called into impoverished areas. Mr. Speaker, that does not make any sense at all. There is an accident on a major highway going through a city and a volunteer fire department from a neighboring community responds and rescues the people. There is a prohibition against using those CDBG dollars to help that fire or EMS department out. That was what my amendment was about, Mr. Speaker. It was not, as some of my colleagues said, an attempt to undermine the CDBG program. That was hogwash. In fact, it was an out-and-out lie. Some of my colleagues knew it was a lie. There was no attempt to undermine the CDBG program. I take my commitment to poverty very seriously. I was born the youngest of nine children in a poor town. I have supported every effort by this Congress to help empower poor people. I was the coauthor of legislation 3 years ago that this administration objected to to increase our community services block grant program by $100 million, and we did it. We led the effort on the Republican side of the aisle, not the Democrat side of the aisle, for that $100 million increase. So when Members stood up with 1-minute soundbites and said this amendment was out to gut the CDBG program or undermine CDBG, it offended me. In fact, it outraged me. That was not the intent and that was not the substance of the legislation. The people who made those statements, Mr. Speaker, owe the fire service of this Nation an apology. I hope every firefighter and EMS person in this country who heard the kind of comments made last week will let their feelings be known to their Member of Congress to our colleagues that that was uncalled for. Our effort was to provide flexibility for local town councils and for local mayors to clarify the use of CDBG dollars for fire and EMS purposes and to allow CDBG funds to be used for programs that ultimately benefit low and moderate income people as well as those areas around there where the emergency response groups go in from time to time or assist in the effort of providing life safety measures for our low and moderate income Americans. That was what my amendment was about. And anyone who attempts to try to characterize that amendment in a different manner was just being untruthful. It was unfortunate that my colleagues, largely on the minority side, got cold feet. And instead of doing what our majority whip wanted, the gentleman from Texas (Mr. DELAY) for whom I have the highest respect, and that was to leave that provision in the amendment, I felt it would have jeopardized the overall amendment itself and, therefore, I asked unanimous consent to modify the amendment and remove that provision. I wish I had not had to do that, Mr. Speaker, because then instead of $100 million for the fire and EMS community, we could have had access to several hundred millions of dollars, perhaps even up to $1 billion of available dollars going to our local towns to give our local county council members and our mayors and city council members the authority to use some of that money to help provide more protection, not less, for low and moderate income Americans. In my own county, those funds could have been used for enhancing our countywide fire training to benefit our low and moderate income people. It could have been used to set up a countywide HAZMAT team that could have responded to those incidents in those low and moderate income areas. It could have been used to provide an emergency response antiterrorism unit to respond again to low and moderate income areas. But it was shot down, or it was forced on me to withdraw that amendment because of misstatements that were made on this House floor in a brief 5-minute period of time. My colleagues, especially on the other side, did not want to have a vote that they could not properly explain to their folks back home and did not want to be perceived to perhaps be antipoverty, antipoor when that was not the issue at all.

But I say this, Mr. Speaker. There will be another day. I am not going to let this CDBG issue die. Because I want to give my colleagues some examples that my colleagues on the other side and a couple of my colleagues on my side should have been talking about. You want some undermining of the CDBG program? Let me just give my colleagues two examples as someone who served as the mayor of a poor town for 5 years and a county commissioner and chairman of the county commission for 5 years overseeing CDBG dollars. My colleagues on the floor said, we don't want to use this money for fire and life safety and for emergency response. But you did not hear them mention that it is allowable under the law to use that same money for historic preservation in the richest towns in America. You cannot use the money to provide life safety but you can use it to restore old buildings in the richest towns in our counties.

Mr. Speaker, there is a second allowance of that CDBG money under current Federal guidelines, under HUD's stupid rules, you can use that money to cut curbs and sidewalks. Mr. Speaker, I am not against cutting curbs and sidewalks. I want to see people who are challenged and are confined to wheelchairs be able to get up and down on curbs and sidewalks throughout my town and throughout my county and throughout my State, but as a former county commissioner, I can tell you that that was one of the only eligible programs besides historic preservation that could be used in any town in our county, even the richest one. So what did we do? We did like every other county does, we cut every curb and sidewalk in every town we could. And so hundreds of thousands of curbs were cut in towns all across America, in many cases where no handicapped person would ever travel. I remember the former mayor of Philadelphia, the current chairman of the Democratic National Committee, Ed Rendel, a good mayor, once stating his frustration with Federal funds, that they had cut every curb on the major expressways going to the city, yet it would be impossible and unsafe for any handicapped person to cross that street, but he did it because it was one of the only ways to spend CDBG dollars to help in curb improvements.

So, Mr. Speaker, the irony of the amendment I offered last week was my colleagues were saying to me we do not want to support your effort to help rescue poor people, to help rescue handicapped people trapped in high-rise buildings. We want to use the money to cut curbs on sidewalks where a handicapped person may never ride or may never go or we want to use it to restore historic buildings in our wealthiest towns. My goal was to help use those dollars and help give that local flexibility for county commissioners and council members and mayors to help

save those handicapped people, to develop training mechanisms and response to enter those buildings, to rescue those people from floods and tornadoes and earthquakes. But unfortunately, my colleagues, again largely on the minority side, said to me, ''If you keep that in, we can't support your amendment.'' And so as a result, I pulled that provision from my amendment and I had to offer the amendment in an amended form with only the $100 million of funding.

Mr. Speaker, I hope our colleagues, in reading both my statement last Thursday and my comments here tonight, understand what really happened with the provision for CDBG. It was not an attempt to undermine the CDBG program. It was not an attempt to get our foot in the door, as one of my colleagues said. Mr. Speaker, there is no better way to help poor people than to provide life safety for poor people. Today HUD has a system of measures that do not make sense, that are ridiculous, that are outrageous, as I just cited in two instances are a gross waste of taxpayers' money. I think, Mr. Speaker, the program needed reform and I will continue this effort, hopefully with my colleagues' support. Mr. Speaker, again I want to thank our colleagues who voted for the amendment. For those who did not I would ask them to reconsider. I now want to focus the attention of our colleagues on the other body.

Mr. Speaker, we need to create an awareness among our Senate colleagues that this issue is extremely important. I would ask my colleagues to lobby the leaders in the other body on the need to move this legislation to provide this $100 million of funding. On the way home from Washington last week, Mr. Speaker, I had the pleasure of a phone conversation with a distinguished Senator from Delaware, BILL ROTH, who this year is chairman of the Congressional Fire and EMS Caucus which I formed 13 years ago. Senator ROTH has said that he will champion this issue in the Senate and even though Senator LOTT has said he will not bring up an emergency supplemental bill as an individual piece of legislation, Senator ROTH has said he will champion the amendment that I offered as a separate freestanding effort in the Senate. Mr. Speaker, we need our colleagues to use every bit of energy to convince every member of the other body to support Senator ROTH's efforts in moving this $100 million piece of legislation through in a very quick and timely manner. I would encourage our colleagues to enlist the support of their constituents all across America.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mr. KUYKENDALL). The Chair must remind the gentleman that he is to not ask for action in the other body.

Mr. WELDON of Pennsylvania. I am asking our colleagues, Mr. Speaker, to respond. I am not asking for action in the other body. I am asking our colleagues to use their influence and their influence with other individuals to support legislation that we have passed here.

The SPEAKER pro tempore. The gentleman should refrain from urging any particular action on the part of the Senate.

Mr. WELDON of Pennsylvania. I am not asking the Senate to do anything, Mr. Speaker. I am asking our colleagues who are in the House to take appropriate action. I am not challenging the other body to do anything. If the parliamentarian would listen to my statement, I am challenging the Members of this body who happen to be our colleagues in the House to take action and support the legislation we passed last Thursday.

□ 2045

Mr. WELDON of Pennsylvania. Mr. Speaker, so I do not get the Parliamentarian upset again, I will just say that to all of our colleagues who supported the amendment last week, I would encourage them to continue to exert their full influence in having the legislation that we passed not just leave this body quickly with the support of the Speaker, but to also be joined in a bipartisan effort to become law. I would urge our Members to use their voice to convey that message to their constituents all across America, because passage in this body is not enough. It is a nice message, it is a great win, but it does not, in fact, become law until the entire process is completed.

So, Mr. Speaker, I encourage our colleagues to use their voices with their constituents and interact with their constituents across America to get the message of the importance of fire and life safety across this Nation.

Mr. Speaker, again I want to thank all of our colleagues on both sides of the aisle for their actions. I want to thank them for their support. This measure is historic. It is an unprecedented event and is one that I hope will eventually become law, and with the support of the Nation's First Responders, I am confident that will happen.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. DIAZ-BALART (at the request of Mr. ARMEY) for today on account of official business in his district.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. MCNULTY) to revise and extend their remarks and include extraneous material:)

Ms. KAPTUR, for 5 minutes, today.

Ms. BALDWIN, for 5 minutes, today.

Ms. HOOLEY of Oregon, for 5 minutes, today.

Mr. WU, for 5 minutes, today.

Mr. PALLONE, for 5 minutes, today.

Mr. BARCIA, for 5 minutes, today.

Ms. MILLENDER-MCDONALD, for 5 minutes, today.

Mrs. THURMAN, for 5 minutes, today.

(The following Members (at the request of Mr. JONES of North Carolina) to revise and extend their remarks and include extraneous material:)

Mr. NORWOOD, for 5 minutes, today.

Mr. BURTON of Indiana, for 5 minutes, April 11.

Mr. METCALF, for 5 minutes, today.

Mrs. KELLY, for 5 minutes, today.

Mr. GUTKNECHT, for 5 minutes, today.

Mr. JONES of North Carolina, for 5 minutes, today.

ADJOURNMENT

Mr. WELDON of Pennsylvania. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 9 o'clock and 46 minutes p.m.), the House adjourned until tomorrow, Wednesday, April 5, 2000, at 10 a.m.

EXECUTIVE COMMUNICATIONS, ETC.

Under clause 8 of rule XII, executive communications were taken from the Speaker's table and referred as follows:

6931. A letter from the Chief, Programs and Legislation Division, Office of Legislative Liaison, Department of Defense, transmitting the Secretarial Determination To Temporarily Waive The Applicability Of 10 U.S.C. Subsection 2466(a); to the Committee on Armed Services.

6932. A letter from the Assistant Secretary, Force Management Policy, Department of Defense, transmitting the annual report on Access and Purchase Restrictions in Overseas Commissionary and Exchange Stores; to the Committee on Armed Services.

6933. A letter from the Director, Office of Legislative Affairs, Federal Deposit Insurance Corporation, transmitting the Corporation's final rule— Loans in Areas Having Special Flood Hazards—received January 21, 2000, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Banking and Financial Services.

6934. A letter from the Office of Postsecondary Education, Department of Education, transmitting the Department's final rule—Preparing Tomorrow's Teachers To Use Technology (RIN: 1840–AC81) received January 21, 2000, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Education and the Workforce.

6935. A letter from the Chairman, Board of Trustees, Harry S. Truman Scholarship Foundation, transmitting the Foundation's annual report for 1999, pursuant to 20 U.S.C. 2012(b); to the Committee on Education and the Workforce.

6936. A letter from the Acting Director, Office of Administration, Executive Office of the President, transmitting the White House personnel report for the fiscal year 1999, pursuant to 3 U.S.C. 113; to the Committee on Government Reform.

6937. A letter from the Secretary, Department of Health and Human Services, transmitting a report of surplus real property

transferred in FY 1999 for public health purposes, pursuant to 40 U.S.C. 484(o); to the Committee on Government Reform.

6938. A letter from the Executive Director, Committee For Purchase From People Who Are Blind Or Severely Disabled, transmitting the Committee's final rule—Additions and Deletions—received January 20, 2000, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Government Reform.

6939. A letter from the Assistant Secretary for Planning and Analysis, Department of Veterans Affairs, transmitting notification that the inventory of commercial activities currently being performed by Federal employees has been completed; to the Committee on Government Reform.

6940. A letter from the Administrator, Environmental Protection Agency, transmitting the FY 1999 report pursuant to the Federal Managers' Financial Integrity Act, pursuant to 31 U.S.C. 3512(c)(3); to the Committee on Government Reform.

6941. A letter from the Chairwoman, Equal Employment Opportunity Commission, transmitting the 1999 Assurance Statement and Report; to the Committee on Government Reform.

6942. A letter from the Inspector General, General Services Administration, transmitting the Audit Report Register; to the Committee on Government Reform.

6943. A letter from the Chairman, National Transportation Safety Board, transmitting the Inventory of Commercial Activities; to the Committee on Government Reform.

6944. A letter from the Secretary of Education, transmitting the Federal Managers' Financial Integrity Act Report for Fiscal Year 1999; to the Committee on Government Reform.

6945. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Amendment to Class E Airspace; Cameron, MO [Airspace Docket No. 99–ACe-49] received February 11, 2000, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

6946. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Amendment to Class E Airspace; Estherville, IA [Airspace Docket No. 99–ACE–54] received February 11, 2000, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

6947. A letter from the Under Secretary, Personnel and Readiness, Department of Defense, transmitting the response to the Report of the Congressional Commission on Servicemembers and Veterans Transitions Assistance; to the Committee on Veterans' Affairs.

6948. A letter from the Secretary of Defense, transmitting the report entitled, ''Outreach to Gulf War Veterans''; jointly to the Committees on Armed Services and Veterans' Affairs.

REPORTS OF COMMITTEES ON PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XIII, reports of committees were delivered to the Clerk for printing and reference to the proper calendar, as follows:

Mr. COMBEST: Committee on Agriculture. H.R. 728. A bill to amend the Watershed Protection and Flood Prevention Act to authorize the Secretary of Agriculture to provide cost share assistance for the rehabilitation of structural measures constructed as part of water resource projects previously funded by the Secretary under such Act or related laws; with an amendment (Rept. 106–484 Pt. 2).

Mr. LINDER: Committee on Rules. House Resolution 457. Resolution providing for consideration of the bill (H.R. 3660) to amend title 18, United States Code, to ban partial-birth abortions (Rept. 106–559). Referred to the House Calendar.

Mr. SHUSTER: Committee on Transportation and Infrastructure. H.R. 2328. A bill to amend the Federal Water Pollution Control Act to reauthorize the Clean Lakes Program; with an amendment (Rept. 106–560). Referred to the Committee of the Whole House on the State of the Union.

Mr. SHUSTER: Committee on Transportation and Infrastructure. H.R. 1775. A bill to catalyze restoration of estuary habitat through more efficient financing of projects and enhanced coordination of Federal and non-Federal restoration programs, and for other purposes; with an amendment (Rept. 106–561 Pt. 1).

DISCHARGE OF COMMITTEE

Pursuant to clause 5 of rule X the Committee on Resources discharged from further consideration. H.R. 728, a bill to amend the Watershed Protection and Flood Prevention Act to authorize the Secretary of Agriculture to provide cost share assistance for the rehabilitation of structural measures constructed as part of water resource projects previously funded by the Secretary under such Act or related laws referred to the Committee of the Whole House on the State of the Union, and ordered to be printed.

TIME LIMITATION OF REFERRED BILL

Pursuant to clause 5 of rule X the following action was taken by the Speaker:

H.R. 1775. Referral to the Committee on Resources extended for a period ending not later than June 9, 2000.

H.R. 3615. Referral to the Committee on Commerce extended for a period ending not later than April 5, 2000.

PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XII, public bills and resolutions were introduced and severally referred, as follows:

By Mr. JACKSON of Illinois:

H.R. 4161. A bill to strengthen the rights of workers to associate, organize and strike, and for other purposes; to the Committee on Education and the Workforce.

By Mr. JACKSON of Illinois (for himself, Mr. FATTAH, Ms. NORTON, Mr. BARRETT of Wisconsin, Mr. CLAY, Mr. DAVIS of Illinois, Mr. FARR of California, Ms. JACKSON-LEE of Texas, Mr. MEEKS of New York, Ms. SCHAKOWSKY, and Ms. CARSON):

H.R. 4162. A bill to assure protection for the substantive due process rights of the innocent, by providing a temporary moratorium on carrying out of the death penalty to assure that persons able to prove their innocence are not executed; to the Committee on the Judiciary.

By Mr. HOUGHTON (for himself, Mr. PORTMAN, Mr. HAYWORTH, Mr. COYNE, Mr. RANGEL, Mr. CRANE, Mr. THOMAS, Mr. SHAW, Mrs. JOHNSON of Connecticut, Mr. HERGER, Mr. MCCRERY, Mr. CAMP, Mr. RAMSTAD, Mr. NUSSLE, Mr. SAM JOHNSON of Texas, Ms. DUNN, Mr. COLLINS, Mr. ENGLISH, Mr. WATKINS, Mr. WELLER, Mr. HULSHOF, Mr. MCINNIS, Mr. LEWIS of Kentucky, Mr. FOLEY, Mr. MATSUI, and Mr. BECERRA):

H.R. 4163. A bill to amend the Internal Revenue Code of 1986 to provide for increased fairness to taxpayers; to the Committee on Ways and Means.

By Mr. BACHUS (for himself, Mr. PAUL, Mr. DELAY, Mr. JONES of North Carolina, Mr. BARR of Georgia, and Mr. RILEY):

H.R. 4164. A bill to prohibit the Board of Governors of the Federal Reserve System from implementing certain proposed revisions to Regulation B of the Board that would allow the race, color, religion, national origin, or sex of an applicant for a nonmortgage credit product to be noted on the application with the applicant's consent; to the Committee on Banking and Financial Services.

By Mr. CANNON (for himself, Mr. GEORGE MILLER of California, Mr. BILBRAY, Mr. FILNER, Mr. HANSEN, Mrs. NAPOLITANO, Mr. HUNTER, Ms. BERKLEY, Mr. DREIER, Mr. PASTOR, Mr. SHADEGG, Mr. BERMAN, Mr. SALMON, Mr. UDALL of Colorado, Mr. GIBBONS, Mr. UDALL of New Mexico, Mr. KOLBE, Mr. BACA, Mr. STUMP, Ms. PELOSI, Mr. HERGER, Mr. SERRANO, Mr. HAYWORTH, Ms. SCHAKOWSKY, Mr. MCINNIS, Mr. ORTIZ, Mr. HORN, Ms. VELAZQUEZ, Mr. CUNNINGHAM, Mr. BLUMENAUER, Mr. RADANOVICH, Ms. BALDWIN, Mr. COOKSEY, Mr. BRADY of Pennsylvania, Mr. CAPUANO, Mr. SESSIONS, Mr. WEINER, Mr. BECERRA, Mr. GONZALEZ, Mr. GUTIERREZ, Mr. HINOJOSA, Mr. REYES, Mr. ROMERO-BARCELO, Ms. ROYBAL-ALLARD, Mr. UNDERWOOD, Mr. LIPINSKI, Mr. FORBES, Mr. CUMMINGS, Mrs. MEEK of Florida, and Ms. MILLENDER-MCDONALD):

H.R. 4165. A bill to assist the economic development of the Ute Indian Tribe by authorizing the transfer to the Tribe of Oil Shale Reserve Numbered 2, to protect the Colorado River by providing for the removal of the tailings from the Atlas uranium milling site near Moab, Utah, and for other purposes; to the Committee on Armed Services, and in addition to the Committees on Commerce, and Resources, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. CONDIT:

H.R. 4166. A bill to amend title 18, United States Code, to provide criminal penalties for the harassment of victims of Federal offenses by the convicted offenders; to the Committee on the Judiciary.

By Mr. DELAHUNT (for himself, Mr. LAHOOD, Mr. CONYERS, Mr. SCARBOROUGH, Mr. SCOTT, Mr. HOUGHTON, Mr. STUPAK, Mr. BOEHLERT, Ms. SCHAKOWSKY, Mr. BARRETT of Wisconsin, and Mr. HASTINGS of Florida):

H.R. 4167. A bill to reduce the risk that innocent persons may be executed, and for other purposes; to the Committee on the Judiciary.

By Mr. DOGGETT (for himself, Mr. GEPHARDT, Mr. BONIOR, Mr. FROST, Mr. MENENDEZ, Mr. RANGEL, Mr. NEAL of Massachusetts, Mr. STARK, Mr. MATSUI, Mr. COYNE, Mr. LEVIN, Mr. CARDIN, Mr. MCDERMOTT, Mr. KLECZKA, Mr. LEWIS of Georgia, Mr. MCNULTY, Mr. JEFFERSON, Mrs. THURMAN, Mr. BECERRA, Ms. DELAURO, Ms. PELOSI, Mr. HOYER, Mr. ABERCROMBIE, Mr. ACKERMAN, Mr. ALLEN, Mr. ANDREWS, Mr. BACA, Mr. BAIRD, Mr. BALDACCI, Ms. BALDWIN, Mr. BARRETT of Wisconsin, Ms.

BERKLEY, Mr. BERRY, Mr. BLAGOJEVICH, Mr. BLUMENAUER, Mr. BOSWELL, Mr. BROWN of Ohio, Mrs. CAPPS, Mr. CAPUANO, Mrs. CLAYTON, Mr. CLYBURN, Mr. CROWLEY, Ms. DANNER, Mr. DAVIS of Illinois, Mr. DAVIS of Florida, Mr. DEFAZIO, Mr. DELAHUNT, Mr. DEUTSCH, Mr. DICKS, Mr. DINGELL, Mr. DIXON, Mr. DOOLEY of California, Mr. EDWARDS, Mr. ENGEL, Ms. ESHOO, Mr. ETHERIDGE, Mr. EVANS, Mr. FARR of California, Mr. FILNER, Mr. FORBES, Mr. FORD, Mr. FRANK of Massachusetts, Mr. GEJDENSON, Mr. GONZALEZ, Mr. GREEN of Texas, Mr. HALL of Ohio, Mr. HASTINGS of Florida, Mr. HILL of Indiana, Mr. HILLIARD, Mr. HINCHEY, Mr. HINOJOSA, Mr. HOEFFEL, Mr. HOLT, Ms. HOOLEY of Oregon, Mr. INSLEE, Mr. JACKSON of Illinois, Ms. JACKSON-LEE of Texas, Ms. EDDIE BERNICE JOHNSON of Texas, Mrs. JONES of Ohio, Mr. KANJORSKI, Ms. KAPTUR, Ms. KILPATRICK, Mr. KIND, Mr. KUCINICH, Mr. LAMPSON, Mr. LANTOS, Mr. LARSON, Ms. LEE, Ms. LOFGREN, Mrs. LOWEY, Mr. LUTHER, Mrs. MALONEY of New York, Mr. MARKEY, Mrs. MCCARTHY of New York, Ms. MCCARTHY of Missouri, Mr. MCGOVERN, Ms. MCKINNEY, Mr. MEEHAN, Mrs. MEEK of Florida, Mr. MEEKS of New York, Ms. MILLENDER-MCDONALD, Mr. GEORGE MILLER of California, Mr. MINGE, Mrs. MINK of Hawaii, Mr. MOAKLEY, Mr. MOLLOHAN, Mr. MOORE, Mr. NADLER, Mrs. NAPOLITANO, Mr. ORTIZ, Mr. OWENS, Mr. PALLONE, Mr. PASCRELL, Mr. PAYNE, Mr. PETERSON of Minnesota, Mr. PHELPS, Mr. POMEROY, Mr. PRICE of North Carolina, Mr. REYES, Ms. RIVERS, Mr. RODRIGUEZ, Mr. ROTHman, Mr. RUSH, Mr. SABO, Ms. SANCHEZ, Mr. SANDERS, Mr. SANDLIN, Mr. SAWYER, Ms. SCHAKOWSKY, Mr. SERRANO, Mr. SHOWS, Ms. SLAUGHTER, Mr. SMITH of Washington, Mr. SNYDER, Mr. SPRATT, Ms. STABENOW, Mr. STENHOLM, Mr. STRICKLAND, Mrs. TAUSCHER, Mr. THOMPSON of Mississippi, Mr. THOMPSON of California, Mr. TIERNEY, Mr. TURNER, Mr. UDALL of New Mexico, Mr. UDALL of Colorado, Ms. VELAZQUEZ, Mr. WAXMAN, Mr. WEINER, Mr. WEXLER, Mr. WEYGAND, Ms. WOOLSEY, Mr. WU, and Mr. WYNN):

H.R. 4168. A bill to amend the Internal Revenue Code of 1986 to require increased reporting by political organizations; to the Committee on Ways and Means.

By Mr. GIBBONS (for himself and Ms. BERKLEY):

H.R. 4169. A bill to designate the facility of the United States Postal Service located at 2000 Vassar Street in Reno, Nevada, as the ''Barbara F. Vucanovich Post Office Building''; to the Committee on Government Reform.

By Mr. HAYWORTH (for himself, Mr. GIBBONS, and Mr. YOUNG of Alaska):

H.R. 4170. A bill to amend the Internal Revenue Code of 1986 to treat gold, silver, and platinum, in either coin or bar form, in the same manner as stocks and bonds for purposes of the maximum capital gains rate for individuals; to the Committee on Ways and Means.

By Mr. HUTCHINSON:

H.R. 4171. A bill to amend title 49, United States Code, relating to the transportation of hazardous materials; to the Committee on Transportation and Infrastructure.

By Ms. JACKSON-LEE of Texas (for herself, Mr. GUTIERREZ, Ms. ROYBAL-ALLARD, Mrs. MEEK of Florida, Mr. MEEKS of New York, Mr. SERRANO, Mrs. NAPOLITANO, Ms. LOFGREN, Mr. STARK, Mr. RODRIGUEZ, Mr. BECERRA, Ms. BERKLEY, Mrs. MALONEY of New York, Mr. WEXLER, Mr. MATSUI, Ms. SCHAKOWSKY, Mr. ORTIZ, Ms. LEE, Mr. FRANK of Massachusetts, Mr. MENENDEZ, Mr. JACKSON of Illinois, Mr. RANGEL, Mr. REYES, Mr. ENGEL, and Ms. KILPATRICK):

H.R. 4172. A bill to amend section 249 of the Immigration and Nationality Act to permit the Attorney General to create a record of lawful admission for permanent residence for certain aliens who entered the United States prior to 1986; to the Committee on the Judiciary.

By Mr. KUYKENDALL (for himself, Mr. BILBRAY, and Mr. SAM JOHNSON of Texas):

H.R. 4173. A bill to amend title 5, United States Code, to provide that members of the uniformed services may participate in the Thrift Savings Plan; to the Committee on Government Reform.

By Mr. KUYKENDALL (for himself, Mr. BILBRAY, Mr. WELLER, Mr. HOUGHTON, and Mr. SAM JOHNSON of Texas):

H.R. 4174. A bill to amend the Internal Revenue Code of 1986 to exclude from gross income certain retention and reenlistment bonuses for members of the Armed Forces; to the Committee on Ways and Means.

By Mrs. LOWEY (for herself, Ms. DELAURO, Mr. WAXMAN, Ms. LEE, Mrs. MEEK of Florida, Mr. BROWN of Ohio, Ms. KAPTUR, Ms. ROYBAL-ALLARD, Mr. HINCHEY, Ms. NORTON, Ms. PELOSI, Mr. KUCINICH, and Mr. FOLEY):

H.R. 4175. A bill to amend the meat and poultry inspection laws to extend the mandatory nutrition information labeling requirements of the laws to single-ingredient, raw meat and poultry products; to the Committee on Agriculture.

By Mr. NADLER (for himself, Mr. POMEROY, and Mr. BACA):

H.R. 4176. A bill to provide grants to partnerships to establish and carry out information technology training programs and to provide incentives for educators to obtain information technology certification, and for other purposes; to the Committee on Education and the Workforce.

By Mr. TRAFICANT:

H.R. 4177. A bill to amend the Fair Labor Standards Act of 1938 to increase the minimum wage by $1 over 2 years; to the Committee on Education and the Workforce.

By Ms. JACKSON-LEE of Texas:

H.R. 4178. A bill to establish a crime prevention and computer education initiative; to the Committee on Education and the Workforce, and in addition to the Committee on the Judiciary, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. BAKER:

H. Res. 458. A resolution expressing the sense of the House of Representatives that a commemorative postage stamp should be issued on the subject of autism awareness; to the Committee on Government Reform.

By Mr. SCHAFFER (for himself, Mrs. ROUKEMA, Mr. DEMINT, Mr. SAM JOHNSON of Texas, Mr. PAUL, Mrs. CHENOWETH-HAGE, Mr. LARGENT, Mr. CHABOT, Mr. BARTLETT of Maryland, Mr. NORWOOD, Mr. COBURN, Mr. LINDER, Mr. TANCREDO, Mr. HOEKSTRA, Mr. TERRY, Mr. GREEN of Texas, Mr. KUCINICH, and Mr. MCCOLLUM):

H. Res. 459. A resolution expressing the sense of the House of Representatives with respect to promoting the use of proven academic and classroom-management solutions for problems of behavior, attention, and learning in school children; to the Committee on Education and the Workforce.

MEMORIALS

Under clause 3 of rule XII, memorials were presented and referred as follows:

304. The SPEAKER presented a memorial of the House of Representatives of the State of Michigan, relative to House Resolution No. 183 memorializing the Congress and the President of the United States to maintain or improve our Nation's commitment to military retirees to provide lifetime health care; to the Committee on Armed Services.

305. Also,a memorial of the Legislature of the State of Oregon, relative to House Memorial 1 memorializing the President and Congress of the United States to reject and condemn any suggestions that sexual relationships between children and adults are anything but abusive, destructive, exploitive, reprehensible and punishable by law; to the Committee on Education and the Workforce.

306. Also,a memorial of the Legislature of the State of Oregon, relative to House Joint Memorial 9 memorializing the Congress of the United States and the President to prohibit federal recoupment of state tobacco settlement recoveries; to the Committee on Commerce.

307. Also,a memorial of the Senate of the State of Michigan, relative to Senate Resolution No. 119 memorializing the National Institutes of Health to withdraw its proposed guidelines for federally funded research using stem cells harvested from human embryos; to the Committee on Commerce.

308. Also,a memorial of the House of Representatives of the State of Michigan, relative to House Resolution No. 253 memorializing the National Institutes of Health to withdraw proposed guidelines for Federally funded research using stem cells destructively harvested from human embryos; to the Committee on Commerce.

309. Also,a memorial of the Legislature of the State of Oregon, relative to House Joint Memorial 4 memorializing the President and the Congress of the United States to ensure protection and respect for the State of Oregon's authority to allocate water and to determine and administer rights to the use of water and to promote the expeditious completion of the adjudication of the Klamath River; to the Committee on Resources.

310. Also,a memorial of the Legislature of the State of Idaho, relative to Senate Concurrent Resolution No. 129 memorializing the Congress of the United States to purpose an amendment to the Constitution of the United States of America requiring, in the absence of a national emergency, that the total of all federal outlays for any fiscal year shall not exceed the total of all receipts for that fiscal year, which amendment may also limit the power of Congress to increase federal taxes, and remit it to the several states for ratification; to the Committee on the Judiciary.

311. Also,a memorial of the Legislature of the State of Oregon, relative to House Joint Memorial 8 memorializing the United States Congress to take whatever steps are necessary to ensure the 2000 federal decennial census is conducted fairly and legally; jointly to the Committees on Government Reform and the Judiciary.

PRIVATE BILLS AND RESOLUTIONS

Under clause 3 of rule XII,

Mr. HASTINGS of Florida introduced a bill (H.R. 4179) for the relief of Sophonie Telcy; which was referred to the Committee on the Judiciary.

ADDITIONAL SPONSORS

Under clause 7 of rule XII, sponsors were added to public bills and resolutions as follows:

H.R. 22: Mr. KASICH.
H.R. 123: Mr. HASTINGS of Washington.
H.R. 323: Mr. OWENS.
H.R. 371: Mr. WEINER.
H.R. 534: Mr. SANDERS and Mr. LATOURETTE.
H.R. 721: Mr. NUSSLE.
H.R. 732: Mr. KLINK.
H.R. 750: Ms. ROYBAL-ALLARD.
H.R. 786: Mr. STUMP.
H.R. 852: Mr. SMITH of Texas.
H.R. 870: Mr. WAMP.
H.R. 957: Mr. SHIMKUS, Mr. GILCHREST and Mr. BRADY of Texas.
H.R. 979: Mr. HOLT, Mrs. THURMAN, and Mr. HASTINGS of Florida.
H.R. 1032: Mr. MCKEON and Mr. GREENWOOD.
H.R. 1070: Mr. ISAKSON.
H.R. 1102: Ms. LOFGREN.
H.R. 1112: Mr. GONZALEZ.
H.R. 1195: Mr. ANDREWS.
H.R. 1322: Mr. DAVIS of Virginia, Mr. SCARBOROUGH, Mrs. JONES of Ohio, Mr. ROHRABACHER, Mr. SMIGH of Washington, and Mr. YOUNG of Florida.
H.R. 1396: Ms. VELÁZQUEZ and Mr. BOUCHER.
H.R. 1590: Mr. TOWNS.
H.R. 1611: Mr. HERGER.
H.R. 1621: Mr. FORD, Ms. VELÁZQUEZ, Ms. BERKLEY, and Ms. SANCHEZ.
H.R. 1708: Mr. MANZULLO.
H.R. 1781: Mr. RAHALL, Mrs. JOHNSON of Connecticut, Mr. CROWLEY, and Mr. DEFAZIO.
H.R. 1871: Ms. SCHAKOWSKY.
H.R. 1912: Mr. ABERCROMBIE.
H.R. 2120: Mr. DAVIS of Illinois.
H.R. 2265: Mr. GREEN of Texas.
H.R. 2340: Mr. TURNER, Mr. BLAGOJEVICH, Mr. HUTCHINSON, Mr. LIPINSKI, Mr. SNYDER, Mr. BACHUS, and Mr. LARSON.
H.R. 2451: Ms. DUNN.
H.R. 2544: Mr. HASTINGS of Washington.
H.R. 2594: Mr. FRANK of Massachusetts and Ms. SCHAKOWSKY.
H.R. 2686: Mrs. MORELLA.
H.R. 2727: Mr. PETERSON of Pennsylvania.
H.R. 2736: Mr. KIND, Mr. ROMERO-BARCELÓ, Mr. HOLDEN, and Ms. DELAURO.
H.R. 2789: Mr. WISE.
H.R. 2814: Ms. JACKSON-LEE of Texas.
H.R. 2858: Mr. WHITFIELD.
H.R. 2919: Ms. LEE.
H.R. 2966: Mr. NUSSLE.
H.R. 3004: Ms. CARSON, Mrs. MCCARTHY of New York, Mr. MCGOVERN, Mr. BERMAN, Mr. KLINK, Mr. SMITH of Washington, and Ms. BERKLEY.
H.R. 3065: Mr. KUCINICH.
H.R. 3083: Mr. LAFALCE.
H.R. 3140: Mr. RODRIGUEZ.
H.R. 3143: Mr. ABERCROMBIE.
H.R. 3173: Mr. THUNE and Mr. GREEN of Wisconsin.
H.R. 3192: Ms. LEE, Ms. SCHAKOWSKY, Mr. BLUMENAUER, Mr. LIPINSKI, Mr. FILNER, Mr. MADLER, Mr. VENTO, and Ms. DANNER.
H.R. 3193: Mr. TIAHRT and Mr. QUINN.
H.R. 3225: Mr. FROST and Mr. PICKERING.
H.R. 3235: Ms. ROYBAL-ALLARD and Mr. GARY MILLER of California.
H.R. 3293: Mr. MURTHA, Mr. DICKEY, Mr. PASTOR, Mr. WATTS of Oklahoma, Mr. WU, Mr. DEUTSCH, AND Mr. GEPHARDT.
H.R. 3294: Mr. MANZULLO.
H.R. 3301: Mrs. THURMAN, Mrs. LOWEY, Ms. PRYCE of Ohio, and Mrs. KELLY.
H.R. 3392: Mr. SKELTON.
H.R. 3418: Mr. DEFAZIO and Mr. THORNBERRY.
H.R. 3439: Mr. WAMP, Mr. LAMPSON, and Mr. PITTS.
H.R. 3500: Mr. HOEFFEL, Mr. SWEENEY, Ms. BALDWIN, Mr. WOLF, and Mr. BLUMENAUER.
H.R. 3561: Mr. WU.
H.R. 3573: Mr. COBURN, Mr. JACKSON of Illinois, and Mr. SCHAFFER.
H.R. 3580: Mr. WEINER, Mr. SMITH of New Jersey, Mr. GEKAS, Ms. JACKSON-LEE of Texas, Mr. SANDLIN, Mr. FORBES, Mr. CROWLEY, Mr. NADLER, Mr. RILEY, Mr. WAMP, Mr. FATTAH, Mr. OXLEY, Mr. BASS, Mr. HOLDEN, Mr. REYNOLDS, Mr. BOUCHER, Mr. CRAMER, Mr. LANTOS, Mr. VENTO, Mr. EWING, Mr. BROWN of Ohio, Mr. GONZALEZ, Mr. UDALL of Colorado, Mr. WELDON of Pennsylvania, Mr. SAXTON, Mr. SOUDER, Mr. JENKINS, Mr. ACKERMAN, Mr. FORD, Mr. SHAYS, and Mr. HINCHEY.
H.R. 3594: Mr. KENNEDY of Rhode Island and Mr. ANDREWS.
H.R. 3610: Mr. OWENS and Mr. WEYGAND.
H.R. 3660: Mr. PETERSON of Pennsylvania and Mr. TERRY.
H.R. 3680: Mr. MINGE, Mr. GILMAN, Mr. NEY, Mr. MATSUI, Mr. KENNEDY of Rhode Island, Mr. GRAHAM, Mr. BOEHLERT, Mr. WEXLER, and Mr. DINGELL.
H.R. 3686: Mr. GEORGE MILLER of California.
H.R. 3766: Mr. PASCRELL.
H.R. 3807: Mr. ROTHMAN.
H.R. 3812: Ms. ESHOO and Ms. LOFGREN.
H.R. 3880: Mr. GREEN of Wisconsin, Mr. PALLONE, and Mr. KENNEDY of Rhode Island.
H.R. 3896: Ms. PRYCE of Ohio.
H.R. 3901: Ms. JACKSON-LEE of Texas, Mr. JACKSON of Illinois, Mr. JEFFERSON, and Mr. GUTIERREZ.
H.R. 3915: Mr. STUMP, Mr. TAYLOR of Mississippi, and Mr. FILNER.
H.R. 3916: Ms. BERKLEY, Mr. PASTOR, Mr. STEARNS, Mr. ISTOOK, and Mr. COLLINS.
H.R. 3983: Mr. BONILLA, Mr. WEXLER, Mr. DAVIS of Florida, Mr. UPTON, and Mr. SANDLIN.
H.R. 4006: Mr. MCINNIS.
H.R. 4017: Mr. DEFAZIO.
H.R. 4018: Mr. CASTLE and Mr. GUTKNECHT.
H.R. 4033: Mr. LANTOS, Mr. BOEHLERT, and Mr. HORN.
H.R. 4036: Mr. TRAFICANT and Ms. KILPATRICK.
H.R. 4041: Mr. HOEFFEL.
H.R. 4042: Mr. HOEFFEL, Mr. DINGELL, and Mr. GANSKE.
H.R. 4051: Mr. TALENT and Mr. LEWIS of Kentucky.
H.R. 4057: Mr. LATOURETTE, Ms. WOOLSEY, Mr. EHLERS, and Mr. SMITH of Washington.
H.R. 4076: Mr. GREEN of Wisconsin and Mr. LARGENT.
H.R. 4124: Mr. SMITH of Washington, Mr. COMBEST, and Mr. BARTON of Texas.
H.R. 4149: Mr. UPTON and Mr. PICKERING.
H. Con. Res. 77: Mr. HUTCHINSON.
H. Con. Res. 181: Mr. LEWIS of Kentucky.
H. Con. Res. 229: Mr. SCARBOROUGH.
H. Con. Res. 249: Mr. KUCINICH.
H. Con. Res. 266: Mr. DEUTSCH, Mrs. MYRICK, Ms. SCHAKOWSY, and Mr. STEARNS.
H. Con. Res. 271: Mr. BLUNT, Mr. WAXMAN, Mr. HALL of Ohio, Mr. SAXTON, Mr. LUCAS of Oklahoma, Mr. MCGOVERN, Mr. BEREUTER, Mrs. MALONEY of New York, Mr. SHAYS, Mrs. KELLY, Mr. OWENS, Mr. KING, Mr. SANDERS, Mrs. MINK of Hawaii, and Mr. ROMERO-BARCELO.
H. Con. Res. 275: Mr. GOODLING, Mr. CROWLEY, Mr. TANCREDO, Mr. MCINTOSH, and Mrs. MEEK of Florida.
H. Con. Res. 285: Mr. GIBBONS and Mr. HOSTETTLER.
H. Con. Res. 286: Mr. PALLONE, Mr. WYNN, Mr. BRADY of Texas, and Mr. PRICE of North Carolina.
H. Res. 437: Mr. GREENWOOD, Ms. RIVERS, Mr. BALDACCI, and Mr. GEJDENSON.
H. Res. 443: Mr. ABERCROMBIE.
H. Res. 425: Mrs. JONES of Ohio, Mr. FRANK of Massachusetts, Mr. PHELPS, and Ms. CARSON.

DELETIONS OF SPONSORS FROM PUBLIC BILLS AND RESOLUTIONS

Under clause 7 of rule XII, sponsors were deleted from public bills and resolutions as follows:

H.R. 1824: Mr. MASCARA.

PETITIONS, ETC.

Under clause 3 of rule XII, petitions and papers were laid on the clerk's desk and referred as follows:

83. The SPEAKER presented a petition of the Asociacion de Pensionados del Gobierno de Puerto Rico, relative to Resolution No. 5 petitioning the President of the United States and the Congress to hear the voice of the People of Vieques, cancel permanently the warfare practices in Vieques and order the U.S. Marines to leave Vieques in a reasonable time; jointly to the Committees on Armed Services and Resources.

84. Also,a petition of the City Council, Canton, Ohio, relative to Resolution No. 79 petitioning the U.S. Congress to fully fund CDBG in the year 2000, at a minimum, at the FY 1999 level; jointly to the Committees on Banking and Financial Services and the Budget.

AMENDMENTS

Under clause 8 of rule XVIII, proposed amendments were submitted as follows:

H.R. 1776

OFFERED BY: MS. JACKSON-LEE OF TEXAS

AMENDMENT NO. 2: Page 59, after line 23, insert the following new section:

SEC. 212. TASK FORCE ON SUB-PRIME AND PREDATORY LENDING.

(a) ESTABLISHMENT.—Not later than 3 months after the date of the enactment of this Act, the Secretary of Housing and Urban Development shall establish, and appoint members under subsection (b) of, a task force (in this section referred to as the ''Task Force'') on sub-prime and predatory lending practices.

(b) MEMBERSHIP.—The Task Force shall consist of not less than 10 members appointed by the Secretary who shall include—

(1) not less than 2 individuals who represent lending institutions;

(2) not less than 2 individuals who represent community development interests or community development organizations;

(3) not less than 2 individuals who represent older Americans or organizations for older Americans;

(4) not less than 2 individuals who represent the interests of States or municipalities; and

(5) not less than 2 individuals who represent national civil rights organizations that emphasize or are involved in fair housing or fair lending issues.

In making appointments under this subsection, the Secretary shall give preferential consideration to individuals who, or who represent organization that, have experience and knowledge regarding the issues of subprime and predatory lending practices.

(c) DUTIES.—The Task Force shall study and examine—

(1) the extent, methods, and detrimental effects on residential mortgage lending, housing availability and affordability, and existing homeowners, of—

(A) sub-prime lending practices in residential mortgage lending, including any practices under which borrowers who have impaired credit or are not considered prime credit risks are charged higher rates of interest or higher fees; and

(B) predatory lending practices in residential mortgage lending, including high-pressure tactics, door-to-door solicitations, targeting of vulnerable populations, steering to higher-cost loan products regardless of qualification for lower-cost products, excessive refinancing (known as flipping), fraudulent home improvement loan practices, charging of excessive interest rates and fees (including 'packing' loans with unnecessary fees and padding closing costs or third party fees), use of loan terms that trap borrowers into unaffordable financing (including such use of balloon payments, negative amortization, prepayment penalties, and asset-based lending), and other fraudulent or deceptive practices;

(2) the extent of the use of such practices in connection with mortgages insured by the Secretary under the National Housing Act and the effects of such practices on the mortgage insurance programs and funds of the Secretary; and

(3) the implications of civil rights laws, fair lending laws, and fair housing laws on such practices.

(d) REPORT.—Not later than one year after the date of the enactment of this Act, the Task Force shall submit a report to the Congress and to the Secretary regarding the results of the studies and examinations conducted under subsection (c), which shall include any recommendations, including recommendations for administrative and legislative actions, for reducing the extent and detrimental effects of sub-prime and predatory lending practices.

H.R. 1776

OFFERED BY: MS. JACKSON-LEE OF TEXAS

AMENDMENT NO. 4: Page 78, after line 20, insert the following new section:

SEC. 408. FAIR HOUSING COMPLIANCE.

(a) IN GENERAL.—Section 104 of the Housing and Community Development Act of 1974 (42 U.S.C. 5304) is amended by adding at the end the following new subsection:

''(n) FAIR HOUSING COMPLIANCE.—To ensure compliance with the certifications made under sections 104(b)(2) and 106(d)(5)(B), each grantee under section 106 and each unit of general local government receiving grant amounts pursuant to section 106(d) shall maintain, and update annually, an analysis of impediments to fair housing and a fair housing action plan. The Secretary shall monitor compliance with the requirement under the preceding sentence and may, by regulation, establish standards and requirements for such analyses and plans and penalties for failure to comply with this subsection and with such standards and requirements.''.

H.R. 1776

OFFERED BY: MS. PELOSI

AMENDMENT NO. 4: Page 28, line 24, after the comma insert ''except that elementary education shall include pre-Kindergarten education, and''.

H.R. 3671

OFFERED BY: MR. UDALL OF COLORADO

AMENDMENT NO. 1. Page 30, after line 6 insert the following:

SEC. 304. IMPLEMENTATION REPORT.

(a) TIMING.—At the time the President submits a budget request for the Department of the Interior for the first fiscal year beginning after the date of enactment of this Act, the Secretary of the Interior shall inform the Committee on Resources of the House of Representatives and the Committee on Environment and Public Works of the Senate about the steps taken to comply with this Act.

(b) CONTENTS.—The report required by this section shall indicate—

(1) the extent to which compliance with this Act has required a reduction in the number of personnel assigned to administer, manage, and oversee the Federal Assistance Program for State Wildlife and Sport Fish Restoration Programs;

(2) any revisions to this Act that would be desirable in order for the Secretary to adequately administer such programs and assure that funds provided to state agencies are properly used; and

(3) any other information regarding the implementation of this Act that the Secretary considers appropriate.