

ending September 30, 2001, and for other purposes; from the Committee on Appropriations; placed on the calendar.

By Mr. MCCONNELL:

S. 2522. An original bill making appropriations for foreign operations, export financing, and related programs for the fiscal year ending September 30, 2001, and for other purposes; from the Committee on Appropriations; placed on the calendar.

By Mr. CONRAD (for himself and Mr. MURKOWSKI):

S. 2523. A bill to amend title XVIII of the Social Security Act to provide for reimbursement of certified midwife services, to provide for more equitable reimbursement rates for certified nurse-midwife services, and for other purposes; to the Committee on Finance.

By Ms. SNOWE:

S. 2524. A bill to amend title XVIII of the Social Security Act to expand coverage of bone mass measurements under part B of the Medicare Program to all individuals at clinical risk for osteoporosis; to the Committee on Finance.

By Mrs. FEINSTEIN (for herself, Mr. LAUTENBERG, Mrs. BOXER, and Mr. SCHUMER):

S. 2525. A bill to provide for the implementation of a system of licensing for purchasers of certain firearms and for a record of sale system for those firearms, and for other purposes; to the Committee on the Judiciary.

By Mr. CAMPBELL (for himself and Mr. INOUE):

S. 2526. A bill to amend the Indian Health Care Improvement Act to revise and extend such Act; to the Committee on Indian Affairs.

By Mr. GRASSLEY:

S. 2527. A bill to amend the Public Health Service Act to provide grant programs to reduce substance abuse, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. BIDEN:

S. Res. 304. A resolution expressing the sense of the Senate regarding the development of educational programs on veterans' contributions to the country and the designation of the week that includes Veterans Day as "National Veterans Awareness Week" for the presentation of such educational programs; to the Committee on the Judiciary.

By Mr. NICKLES (for himself, Mr. KYL, Mr. LIEBERMAN, Mr. GRAHAM, Mr. GRASSLEY, and Mr. LUGAR):

S. Con. Res. 111. A concurrent resolution expressing the sense of the Congress regarding ensuring a competitive North American market for softwood lumber; to the Committee on Finance.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. VOINOVICH (for himself, Mr. REID, Mr. DEWINE, Mr. KENNEDY, Mr. BRYAN, Mr. MCCONNELL, Mr. HARKIN, Mr. THOMPSON, Mr. FRIST, and Mr. BUNNING):

S. 2519. A bill to authorize compensation and other benefits for employees of the Department of Energy, its con-

tractors, subcontractors, and certain vendors who sustain illness or death related to exposure to beryllium, ionizing radiation, silica, or hazardous substances in the performance of their duties, and for other purposes; to the Committee on Health, Education, Labor, and Pension.

ENERGY EMPLOYEES OCCUPATIONAL ILLNESS COMPENSATION ACT OF 2000

Mr. VOINOVICH. Mr. President, over the last half century, and at facilities all across America, tens of thousands of dedicated men and women in our civilian federal workforce helped keep our military fully supplied and our nation fully prepared to meet any potential threat. Their success is measured in part with the end of the Cold War and the collapse of the Soviet Union. However, for many of these workers, their success came at a high price; the sacrifice of their health, and even their lives, for our liberty. I believe we have a federal obligation to live up to our responsibilities with these Cold War veterans.

The bill I am introducing today, along with Senators REID, DEWINE, KENNEDY, MCCONNELL, BRYAN, HARKIN, THOMPSON, FRIST, and BUNNING is titled the "Energy Employees Occupational Illness Compensation Act of 2000." This bill will provide financial compensation to Department of Energy workers whose impaired health has been caused by exposure to beryllium, radiation or other hazardous substances while working for the defense of the United States. The bill will also provide compensation to survivors of workers who have died while suffering from an illness resulting from exposure to these substances.

Many will express concern that it will be hard to prove if someone was made chronically ill by their work environment, however, such concerns can be refuted. For example, beryllium disease is a "fingerprint" disease, in that it leaves no doubt as to what caused the illness of the sufferer. Additionally, the only processing of the materials that cause Chronic Beryllium Disease is unique to our nuclear weapons facilities. Skepticism is understandable in many cases of radiation exposure at DoE facilities because the records may not generally reflect employee exposure to radioactive materials. However, concerns have been raised that the DoE destroyed or altered workers' records. Additionally, dosimeter badges, which record radiation exposure, were not always required to be worn by workers. When they were required to be worn, they were not always done so properly or consistently. DoE plant management would even "zero" dose badges. Therefore, many records do not exist, and where they do exist, there is adequate reason to doubt their accuracy. That is why this bill places the burden of proof on the government to prove that an employee's illness was not caused by workplace hazards.

As one who believes we should rely on sound science, I would certainly

support a method for compensation based on this principle if it was available. Unfortunately in this case, sound science either does not exist in DoE facility records, or it cannot be relied upon for accuracy. That's precisely what happened in my state of Ohio.

In a series of newspaper articles from the Columbus Dispatch, it was shown that for decades, some workers at the Portsmouth Gaseous Diffusion Plant in Piketon, Ohio—a plant which processes high-quality nuclear material—did not know they had been exposed to dangerous levels of radioactive material. That's because until recently, proper safety precautions were rarely taken to adequately protect workers' safety. Even when precautions were taken, the application of protective standards was inconsistent. In addition, workers at the Piketon plant have stated that plant management not only did not keep adequate dosimetry records, in some cases, they changed the dosimetry records to show lower levels of radiation exposure. If consistent, reliable and factual data is not available, then it will be quite difficult to utilize sound science.

Similar occurrences have been reported at the Fernald Feed Materials Production Center in Fernald, Ohio and the Mound Facility in Miamisburg, Ohio as well as other facilities nationwide.

The DoE has admitted that at some facilities, workers were not told the nature of the substances with which they were working, nor the ramifications that these materials may have on their future health and quality of life. It is unconscionable that DoE managers and other individuals in positions of responsibility could be so insensitive and uncaring about their fellow man.

Last year, the Toledo Blade published an award-winning series of articles outlining the plight of workers suffering from Chronic Beryllium Disease (CBD). While government standards were met in protecting the workers from exposure to the beryllium dust, many workers still were diagnosed with CBD. The stories of these workers who are suffering from this often debilitating disease are heart-wrenching. It is estimated that 1,200 people have contracted CBD, and hundreds have died from it, making CBD the number one disease directly caused by our Cold War effort.

Title one of this bill provides compensation to individuals suffering from Chronic Beryllium Disease (CBD). Beryllium, which is a toxic substance, can cause major health problems if proper precautions are not taken while it is being handled. Individuals who suffer from Chronic Beryllium Disease experience a loss of lung function, and in many cases face a painful death. While there is a blood test that can detect CBD, and there are treatments for it, there is no cure. Under this bill, if the disease is confirmed, it is presumed work-related and workers compensation at benefit levels established under