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No. 76

## House of Representatives

The House met at 2 p.m. and was called to order by the Speaker pro tempore (Mrs. BIGGERT).

### DESIGNATION OF THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,  
June 5, 2001.

I hereby appoint the Honorable JUDY BIGGERT to act as Speaker pro tempore on this day.

J. DENNIS HASTERT,  
*Speaker of the House of Representatives.*

### PRAYER

The Chaplain, the Reverend Daniel P. Coughlin, offered the following prayer: Blessed be the Lord, the God of Israel, from all eternity and forever.

Happy the man who cares for the poor and the lowly; the Lord will save him in time of trouble. The Lord protects him and gives him life, making him treasured throughout the land.

The Lord will help him even on his sickbed surrounding him with loving care. The Lord will keep him and preserve him until the Lord's full work is accomplished.

To be loved and respected from all corners shields the just man from his enemies. Because one found integrity, he is permitted to stand before the Lord forever.

It is friendship that merits loyalty; friends in their laughter gain perspective.

In the loss of a dear colleague, Lord, this psalm comes to mind; This Chamber and this country, so blessed in John Joseph Moakley, finds voice:

Blessed be the Lord, the God of Israel from all eternity and forever.

### THE JOURNAL

The SPEAKER pro tempore. The Chair has examined the Journal of the

last day's proceedings and announces to the House her approval thereof.

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

### PLEDGE OF ALLEGIANCE

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

Mr. GEORGE MILLER of California 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.

### COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,  
HOUSE OF REPRESENTATIVES,  
Washington, DC, May 29, 2001.

Hon. J. DENNIS HASTERT,  
*The Speaker, House of Representatives,*  
Washington, DC.

DEAR MR. SPEAKER: Pursuant to the permission granted to Clause 2(h) of Rule II of the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on May 26, 2001 at 1:45 p.m.

That the Senate passed without amendment H. Con. Res. 139.

That the Senate passed without amendment H. Con. Res. 146.

*Appointments:*

Advisory Committee on the Records of Congress

Parents Advisory Council on Youth Drug Abuse

Commission on Indian and Native Alaskan Health Care

Coordinating Council on Juvenile Justice and Delinquency Prevention

With best wishes, I am

Sincerely,

JEFF TRANDAHL,  
*Clerk of the House.*

### COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,  
HOUSE OF REPRESENTATIVES,  
Washington, DC, June 4, 2001.

Hon. J. DENNIS HASTERT,  
*The Speaker, House of Representatives,*  
Washington, DC.

DEAR MR. SPEAKER: Pursuant to the permission granted to Clause 2(h) of Rule II of the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on May 31, 2001 at 4:23 p.m.

That the Senate agreed to conference report H.R. 1836.

With best wishes, I am

Sincerely,

JEFF TRANDAHL,  
*Clerk of the House.*

### ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 4 of rule I, the Speaker pro tempore signed the following enrolled bill on Friday, June 1, 2001:

H.R. 581, to authorize the Secretary of the Interior and the Secretary of Agriculture to use funds appropriated for wildland fire management in the Department of the Interior and Related Agencies Appropriations Act, 2001, to reimburse the United States Fish and Wildlife Service and the National Marine Fisheries Service to facilitate the interagency cooperation required under the Endangered Species Act of 1973 in connection with wildland fire management.

And the Speaker signed the following enrolled bill on Monday, June 4, 2001:

H.R. 1836, to provide for reconciliation pursuant to section 104 of the concurrent resolution on the budget for fiscal year 2002.

□ This symbol represents the time of day during the House proceedings, e.g., □ 1407 is 2:07 p.m.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.



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H2851

RESIGNATION FROM THE HOUSE  
OF REPRESENTATIVES

The SPEAKER pro tempore laid before the House the following resignation from the House of Representatives:

CONGRESS OF THE UNITED STATES,  
HOUSE OF REPRESENTATIVES,  
Washington, DC, May 25, 2001.

Hon. DENNIS HASTERT,  
Speaker of the House,  
The Capitol, Washington, DC.

DEAR SPEAKER HASTERT: I am writing to formally notify you that I will be retiring from my position as the United States Representative for Florida's First Congressional district, effective September 6, 2001. A similar letter has been sent to the Honorable Jeb Bush, Governor of the State of Florida.

Sincerely,

JOE SCARBOROUGH,  
Member of Congress.

CONGRESS OF THE UNITED STATES,  
HOUSE OF REPRESENTATIVES,  
Washington, DC, May 25, 2001.

Hon. JEB BUSH,  
The Capitol,  
Tallahassee, FL.

DEAR GOVERNOR BUSH: I am writing to inform you that I am irrevocably resigning my position as United States Representative for the First District of Florida, effective September 6, 2001. A similar letter has been sent to the Honorable J. Dennis Hastert, Speaker of the United States House of Representatives.

I appreciate your friendship and the support you have shown Northwest Florida.

Sincerely,

JOE SCARBOROUGH,  
Member of Congress.

TAX CUTS

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

Mr. PITTS. Madam Speaker, last week Congress passed the biggest tax relief package since the start of the Reagan administration. Every American taxpayer is going to get a refund check in the mail this summer. Over the coming years, rates will decline, the death tax will be repealed, the marriage tax penalty will be partially fixed, we will be able to put more in our retirement plans, and be able to deduct more for the cost of college education. This is real help for real Americans.

But the American taxpayers deserve to know that there were a lot of big-spending liberals who thought they did not deserve these tax cuts. Even though we have been running multi-billion dollar surpluses for several years, some people in Washington did everything they could to stop this tax relief. In fact, the only way to get it done at all was to use what we call "budget reconciliation," which cannot be filibustered in the other body and requires only 51 votes since they could not get to 60.

But budget reconciliation only lasts for 10 years. Before the 10 years is up, Congress must extend the tax relief. I hope that Congress will do that. In the

meantime, I hope all the big spenders in Congress who voted against this cut will donate their \$300 refund check back to the Treasury.

WE NEED THE PRESIDENT'S VI-  
SION FOR THE ENVIRONMENT,  
NOT JUST A VISIT TO ANOTHER  
NATIONAL PARK

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

Mr. GEORGE MILLER of California. Madam Speaker, Americans of all political stripes place a very high value on the protection of our environment and public lands.

President Bush recently visited the Everglades National Park in Florida, and previous to that he visited Sequoia National Park in California. These photo opportunities are intended to portray an image of a President who cares about the environment. But these Presidential visits are inadequate; and they are also inaccurate because, while the President visits two of our most treasured parks, he and his administration are planning to throw open the door of the public lands of this Nation to increased drilling, mining, logging, road building and contamination of these very public lands.

Madam Speaker, these public lands are every bit as important as the national parks that the President has visited. His administration continues to threaten the very stewardship of those public lands and opportunities for American citizens to enjoy them not only throughout the summer months but year around. His administration continues to threaten the Sierra Nevada Conservation Plan, which is about the integrity and the survival of the Sierra Nevada Mountains, and the forest in those mountains in California.

Madam Speaker, the President refuses to move forward on the Giant Sequoia National Monument proposal.

Mr. President, what we need is your vision for the environment, not just another visit.

ANNOUNCEMENT BY THE SPEAKER  
PRO TEMPORE

The SPEAKER pro tempore. Members are reminded to address the Chair as they address the House.

HELP IS ON THE WAY

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

Mr. GIBBONS. Madam Speaker, national tax freedom day, that day that we start working for ourselves instead of the tax collector, fell on May 4 this year, and that is the latest date in history according to the tax foundation.

Many Nevadans found this to be not only unbelievable, but unconscionable.

It is unconscionable that the typical and average American family pays more than 38 percent of its income in taxes. That is more than it spends on food, clothing, and shelter combined.

Madam Speaker, over the past 8 years, personal income of Americans has grown by more than \$2.8 trillion, yet nearly half of all this new wealth went to pay tax bills. Is it any wonder why Americans feel they are working harder than ever but cannot seem to get ahead? Thankfully, this Congress listened to Nevada families and their pleas for help in paying this crushing tax burden, and soon Nevadans will be getting some much-needed relief in the form of a tax rebate check; and may I say, it is about time.

Madam Speaker, Nevadans, and indeed all Americans, should not be working for Washington; Washington should be working for Nevadans and Americans. Mailing out those tax rebate checks is simply the first step in putting working Americans ahead of government bureaucracy.

AMERICA'S FIRST FEMALE PROM  
KING

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

Mr. TRAFICANT. Madam Speaker, a high school in Washington has crowned America's first female prom king. No joke. Now, I do not care what anyone's sexual preference is, but enough is enough. What is next: beauty pageants for cross-dressers? Think about it. America has guns, drugs, rape, and even murder in school, and now a lesbian is a prom king.

If that is not enough to titillate J. Edgar Hoover, prayer and God are still not allowed in America's schools. Beam me up, Mr. Speaker. A Nation that allows lesbians to be prom kings in our schools, but denies the Lord access to our schools, is a Nation headed for stone-cold disaster.

I yield back one ray of hope there is a new policy at Ferndale High School: all future prom kings shall be male. Hallelujah.

□ 1415

THE IMPORTANCE OF SCIENCE  
AND MATH EDUCATION

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

Mr. SMITH of Michigan. Madam Speaker, high school seniors from all over the United States will be graduating and receiving their diplomas at this time of year. Recently I have been named chairman of the Subcommittee on Research in the Committee on Science. I have told the administration as we talk about national security that I think probably the second greatest threat to national security is where we

are going in our performance in science and math education in our schools. We now rank below any of the other G-7 countries of the industrialized world. We have got to be more aggressive in moving ahead in our efforts to interest and performance with science and math education.

In my subcommittee, we will be holding hearings this week on legislation that will help us do a better job in this area. Science teachers need to be encouraged. But also we need to encourage the parents and the teachers of those students in the first 3 or 4 years of school if we are to be successful. This world is getting more complicated with biotechnology, information technology and other science based technology. Those kids are going to be better served if they have a better math and science education.

I commend these graduating students throughout the Nation for what they have achieved so far but encourage them to study a little more math and science, as they enter college or the job market. It will pay big dividends.

#### ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mrs. BIGGERT). Pursuant to clause 8 of rule XX, the Chair announces that she will postpone further proceedings today on each motion to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote is objected to under clause 6 of rule XX.

Any record votes on postponed questions will be taken after debate has concluded on all motions to suspend the rules, but not before 6 p.m. today.

#### COMMENDING CLEAR CHANNEL COMMUNICATIONS AND AMERICAN FOOTBALL COACHES ASSOCIATION FOR THEIR DEDICATION AND EFFORTS FOR PROTECTING CHILDREN

Mr. OSBORNE. Madam Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 100) commending Clear Channel Communications and the American Football Coaches Association for their dedication and efforts for protecting children by providing a vital means for locating the Nation's missing, kidnapped, and runaway children, as amended.

The Clerk read as follows:

H. CON. RES. 100

Whereas children are the Nation's greatest asset for the future and are essential for the Nation's strong and vital growth;

Whereas more than 800,000 children disappear each year in the United States, and the problem of missing, kidnapped, and runaway children potentially affects every community in the Nation;

Whereas the United States is committed to the protection of its children;

Whereas the American Football Coaches Association is a leader in the protection of children and has provided 60 million Inkless Child Identification Kits for use by parents;

Whereas these kits allow parents to keep vital information, current photographs, and fingerprints readily available to provide to law enforcement agencies throughout the Nation in the event of an emergency; and

Whereas the American Football Coaches Association displays outstanding dedication to the children in communities throughout the Nation: Now, therefore, be it

*Resolved by the House of Representatives (the Senate concurring)*, That the Congress commends the American Football Coaches Association for its dedication and efforts to protect children and locate the Nation's missing, kidnapped, and runaway children.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Nebraska (Mr. OSBORNE) and the gentleman from Michigan (Mr. KILDEE) each will control 20 minutes.

The Chair recognizes the gentleman from Nebraska (Mr. OSBORNE).

GENERAL LEAVE

Mr. OSBORNE. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks on House Concurrent Resolution 100.

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

There was no objection.

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

Madam Speaker, I rise in strong support of House Concurrent Resolution 100 which recognizes the American Football Coaches Association for its dedication and efforts to protect children by providing inkless child identification kits for use by parents. In the past 4 years, over 4.2 million identification kits have been passed out at college football stadiums. As a member of the American Football Coaches Association and a former football coach, I have participated in this program myself and know that the kits can be useful tools for parents. My former university, the University of Nebraska, has participated in this program since the program's inception in 1997. In the spring of 1999, 60,000 ID kits were distributed to Nebraska's school children in grades kindergarten through the fourth grade.

Statistics about missing children in the United States are staggering. According to the FBI and the National Center for Missing and Exploited Children, 750,000 children were reported missing last year. Approximately 450,000 of these children ran away, an additional 350,000 were abducted by a family member, and over 4,500 were abducted by a stranger. This works out to be about 2,100 children missing each day. In 1999, the last year with statistics available, almost 3,000 cases of on-line child exploitation were prosecuted.

No place in America is immune from child abductions or exploitation. Earlier this year in a high profile case, a teenager in my district was kidnapped by an escaped fugitive in the parking lot of a shopping mall in Kearney, Nebraska. Fortunately, this kidnapping

ended peacefully with the kidnapper's surrender, but many children are not as lucky.

If the worst happens and a child is abducted or decides to run away, parents need to have tools to help police locate and identify their children. Because less than 2 percent of parents have a copy of their child's fingerprints to use in the case of an emergency, the American Football Coaches Association created the National Child Identification Program with the goal of fingerprinting 20 million children. The program provides a free inkless fingerprint kit for each child. The inkless ID kit allows parents to take and store their child's fingerprints in their own home. The card remains in the parents' possession. But if it is ever needed, this card will give authorities vital information to assist them in their efforts to locate a missing child.

To fund the program, the coaches association has teamed up with local and national businesses and media. In my previous occupation, I signed several hundred football helmets to auction off to raise money for this worthy cause.

I believe we must approach the protection of our Nation's youth from a variety of angles. These kits are a start, and they may open the doors of communication for parents to talk to their children about the rules of safety advocated by the National Center for Missing and Exploited Children and discuss ways to address family problems. I also am a longtime supporter of youth mentoring projects. I believe mentors can provide youth a positive role model and a line of communication with a caring adult. Quality mentoring programs can prevent youth from ever running away from home in the first place.

I am pleased to support this resolution that commends the work of the American Football Coaches Association for its efforts to locate missing, kidnapped, and runaway children through the distribution of the inkless fingerprinting kits. I urge my colleagues to support this resolution.

Madam Speaker, I reserve the balance of my time.

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

Madam Speaker, I rise in support of this resolution and join the gentleman from Nebraska (Mr. OSBORNE) and its author, the gentleman from Tennessee (Mr. DUNCAN), in commending the American Football Coaches Association for its important work to help make our children safer.

The American Football Coaches Association has provided 60 million inkless child identification kits for use by parents. These kits allow parents to keep vital information, current photographs, and fingerprints readily available to provide to law enforcement agencies throughout the Nation in the event of an emergency. The program is expected to reach several million children this year, making it the largest identification drive ever conducted.

At a time 800,000 children become missing each year in the United States, more needs to be done to address this horrible issue. Our law enforcement agencies and personnel continue to need the help of parents when children are missing. Efforts like those of the American Football Coaches Association and other public-private partnerships are essential if we are to ensure that no child becomes missing and suffers from the separation of their parents.

Madam Speaker, I urge all Members to support this resolution.

Madam Speaker, I reserve the balance of my time.

Mr. OSBORNE. Madam Speaker, I yield 5 minutes to the distinguished gentleman from Tennessee (Mr. DUNCAN), the sponsor of this resolution.

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

Mr. DUNCAN. Madam Speaker, I thank the gentleman from Nebraska (Mr. OSBORNE) for yielding me this time.

Madam Speaker, every Saturday in the fall, football coaches across America are cheered on by thousands of fans for their work on the field.

Today we have a resolution on the House floor which honors them for their work off the field. The resolution that I have introduced, H.Con.Res. 100, recognizes the American Football Coaches Association and its efforts to protect our country's children.

The American Football Coaches Association has teamed up with Clear Channel Communications, one of our Nation's leading companies, to distribute child identification kits to thousands of parents every year.

These kits, which are handed out at no cost to families, allow parents to fingerprint their children and keep the prints at home. Should their child ever become missing, parents can turn over these fingerprint records to local law enforcement authorities who use the information to help locate the missing children.

The National Child Identification Program distributes these free kits to parents and guardians at college football games across the Nation.

This program began in 1997. In that year alone, 2.1 million of the child ID kits were given to parents. Since then, over 8 million kits have been distributed at football games. The stadium effort was so successful that the coaches have worked with Clear Channel Communications to reach even more families and more people in their communities.

Football coaches across America have promoted this program on the more than 1200 radio stations owned or operated by Clear Channel Communications. Clear Channel has been instrumental in providing the program publicity as well as recruiting other sponsors to help finance the purchase of these kits.

Unfortunately, 800,000 children are reported missing each year in the

United States. This is a tragedy that should never happen. The American Football Coaches Association and Clear Channel Communications have taken the initiative to try to help parents and authorities return missing children to their homes.

In my district, the coach of the University of Tennessee football team, my good friend Phillip Fulmer, has taken an active role in promoting this program. Hundreds of thousands of these kits have been handed out at Neyland Stadium in Knoxville, Tennessee. Other individuals who have helped with this effort include coaches and athletes like Grant Teaff, R.C. Slocum, Nolan Ryan, Joe Montana, Cal Ripken, David Robinson, and many, many others.

I should mention that my colleague, the gentleman from Nebraska, who is a former college football coach, has very actively participated as well, as he has just mentioned. He has helped raise funds as well as handed out personally some of the first kits in Nebraska. In addition to his work on this resolution, I want to thank him for his efforts on this very worthwhile program.

I also want to take this opportunity to thank Lowry Mays and Mark Mays for their leadership in bringing Clear Channel Communications on board with this effort.

In Tennessee, Governor Don Sundquist proclaimed March as Child Identification Awareness Month to raise awareness of the need for fingerprinting children. And as the governor of Texas, President Bush helped raise funds for the National Child Identification Program.

Madam Speaker, I am from Tennessee which is known as the Volunteer State. I am happy to see that volunteers from all across the country have come together to support this important program that helps bring children home to their parents.

Finally, I want to thank the gentleman from Ohio (Mr. BOEHNER) and the gentleman from California (Mr. GEORGE MILLER) for allowing this, what I believe to be a very non-controversial resolution, to come to the House floor today. I want to thank the gentleman from Michigan (Mr. KILDEE) for his support.

I hope that all of my colleagues will join me by supporting H. Con. Res. 100 and recognize those who have helped make our country a safer place for children.

Mr. KILDEE. Madam Speaker, I yield 4 minutes to the gentleman from Texas (Mr. EDWARDS).

Mr. EDWARDS. Madam Speaker, I want to thank the gentleman from Tennessee (Mr. DUNCAN) for sponsoring this resolution and the gentleman from Nebraska (Mr. OSBORNE) and the gentleman from Michigan (Mr. KILDEE) for their leadership in its passage.

Public service comes in many forms. When individuals and groups provide extraordinary services to our Nation, they deserve the appreciation of our Congress and our country. Such is the

case today with Clear Channel Communications and the American Football Coaches Association. With the generosity of these two organizations, 60 million child identification kits will be given to parents all across our country.

□ 1430

These kits will help parents keep vital information and current photographs and fingerprints of their own children to be used in cases of missing, kidnapped or runaway children. In such emergencies, this information can be instrumental in helping law enforcement agencies bring children and their parents back together.

Madam Speaker, I speak today as a parent of two sons, ages 3 and 5. I cannot imagine anything worse for my wife and me than to find one day our children are missing.

Every parent, every parent, knows the fear of turning around in a playground or at a public meeting or event and momentarily not finding his or her child. Unfortunately, that fear is not just momentary for many parents. In fact, nearly 800,000 children disappear every year in the United States. That would be the equivalent of approximately 8 times the entire population of my hometown of Waco, Texas, where the American Football Coaches Association has its office.

These 800,000 are not just statistics. They are real children of real parents, a nightmare many of us can only imagine.

Madam Speaker, I have known Lowery Mays, CEO of Clear Channel Communications, and Grant Teaff, executive director of the American Football Coaches Association, for well over a decade. They are individuals of great integrity and compassion. Knowing them personally, frankly, it does not surprise me that their organizations are providing American families with this terribly important service. However, that lack of surprise does not reduce whatsoever my deep gratitude to them for their generosity in reuniting thousands of American families with their children.

Madam Speaker, Winston Churchill once said, "We make a living by what we get, but we make a life by what we give."

Based on that high standard, Lowery and Mark Mays, Coach Grant Teaff and all those they represent in their respective organizations have lived an extraordinary successful life. They have earned and deserve the gratitude of not only this Congress, but American families across this great land of ours. I urge every Member to vote for this resolution.

Mr. OSBORNE. Madam Speaker, I yield 3 minutes to the gentleman from Delaware (Mr. CASTLE), the chairman of the Subcommittee on Education Reform.

Mr. CASTLE. Madam Speaker, I thank the distinguished gentleman from Nebraska (Mr. OSBORNE), the wonderful coach himself, for yielding me

this time. I also want to particularly thank the gentleman from Tennessee (Mr. DUNCAN) for putting this work together.

Madam Speaker, I am pleased to rise in very strong support of H. Con. Res. 100, a resolution commending the American Football Coaches Association and others for their efforts in helping to recover our Nation's missing, kidnapped, and runaway children.

According to recent data, an estimated 3,200 to 4,600 short-term, non-family abductions are reported in law enforcement each year. Of these, an estimated 200 to 300 are stereotypical kidnappings where a child is gone overnight, killed, or transported a distance of 50 miles or more.

For these reasons, the first 48 hours following the disappearance of a child are the most critical in terms of finding and returning that child safely, and the child's descriptive information, including height, weight, and eye and hair color, and an updated photograph are the most important tools a parent has to bring their missing child home.

Far too often, though, the search for missing children is slowed by an incomplete physical description and outdated photographs.

For this reason, the American Football Coaches Association, in conjunction with Clear Channel Communications, has proudly sponsored the National Child Identification Program, a community service project which distributes free child ID kits at community events.

These child ID kits help ensure that families have updated pictures, fingerprints and a complete physical description of their child in the event of an emergency.

According to the National Center for Missing and Exploited Children, current photographs and physical descriptions help return 1 out of 7 featured children, often as a result of tips received from members of the public who have recognized the missing child and then notified the authorities.

Under the leadership of the American Football Coaches Association, I am especially pleased to report that Delaware State University and many other colleges and universities have handed out millions of child ID kits at college football games and other athletic events across the country.

In closing, I want to commend the gentleman for his resolution and, again, commend the American Football Coaches Association and the many others who have made it their mission to help ensure the mission of safety of our children. It is my experience that being prepared for the worst possible scenario and possessing the necessary tools to help prevent a greater tragedy makes a world of difference to parents and children in a time of crisis.

For all these reasons, I urge an aye vote on this resolution.

Mr. KILDEE. Madam Speaker, I yield 3 minutes to the gentleman from Texas (Mr. LAMPSON).

Mr. LAMPSON. Madam Speaker, I thank the gentleman from Michigan (Mr. KILDEE) for yielding me this time, and I also thank the gentleman from Tennessee (Mr. DUNCAN) and other leaders on this important piece of legislation.

As chairman and founder of the Congressional Caucus on Missing and Exploited Children, I have much too often had the occasion to look into the eyes of a parent who has lost a child. I spend a great deal of my time, along with so many of my other colleagues, trying to ask parents to be prepared, and hopefully not ever have to need to have been prepared, and therefore I rise today to commend the American Football Coaches Association and Clear Channel Communications for their dedication and efforts that they are making in protecting children by providing a vital means for locating the Nation's missing, kidnapped, and runaway children, and to urge a yes vote on this important resolution.

The National Child Identification Program was created in 1997, with the goal of fingerprinting 20 million children. This program provides a free fingerprint kit to parents who then take and store their child's fingerprints in their own homes. If this information is ever needed, fingerprints would be given to the police to help them in locating a missing child, being prepared and hoping they do not ever have to be.

The American Football Coaches Association, in partnership with Clear Channel Communications, a large chain of radio stations, has pledged to raise funds to help provide such a fingerprint kit for every child in America.

Well, having just recognized National Missing Children's Day on May 25, the thought of keeping our children safe remains fresh in our minds. We must all work together to raise awareness about the power of fingerprinting in the search for missing children.

Clear Channel Communications and the American Football Coaches Association have taken raising the importance of fingerprinting to a whole new level, and they are to be commended for their leadership in the broadcast and sports industries. Once again, I urge a yes vote on this important resolution.

Mr. KILDEE. Madam Speaker, I yield back the balance of my time.

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

Madam Speaker, I would particularly like to thank the gentleman from Tennessee (Mr. DUNCAN) for his efforts on this resolution, and the gentleman from Michigan (Mr. KILDEE) for his efforts as well.

Mr. HASTERT. Madam Speaker, today, I would like to join with my colleagues in commending the American Football Coaches Association for providing parents with identification kits to locate children who are missing.

In 1997, the American Football Coaches Association—concerned about the 800,000 children who disappear every year—launched the

National Child Identification Program. Their group distributes millions of identification kits that can be used as a means to locate lost children. Parents use the kits to make ID cards for their children, containing important identifying information, such as a picture, fingerprints and the location of a child's medical and dental records.

The American Coaches Association deserves to be recognized for taking the lead on this important issue. This respected group saw that they could help American families, and they have worked long and hard to achieve that goal. Through the National Identification Program, they are providing a valuable resource for parents who are looking for missing, kidnapped or runaway children. These kits provide parents with the peace of mind of knowing that they have their child's vital statistics at their fingertips in the event of an emergency.

I want to thank the American Coaches Association for handing out kit after kit at churches, schools and community events. Their work could be essential in returning missing children back to their families. They have made a generous contribution to our nation, particularly, to our nation's children.

Mr. LARSON of Connecticut. Madam Speaker, I rise today in strong support of this resolution commending Clear Channel Communications and the American Football Coaches Association for their efforts in providing a means for locating the nation's missing, kidnapped, and runaway children. As a member of the Missing and Exploited Children's Caucus, I have witnessed the dedication of both Clear Channel Communications and the American Football Coaches Association and am pleased to say their efforts have been outstanding.

In 2000, an estimated 750,000 children were reported missing. This figure marks a decrease of twelve percent since 1997, when the number of missing children was at an all time high. In my home state of Connecticut, 293 children were reported missing as of May 7, 2001. Connecticut is fortunate in that there are few non-family child abductions. Clear Channel Communications and the American Football Coaches Association have greatly contributed to increase awareness and parental education in our effort to safely return missing children.

In September of 2000, the American Football Coaches Association collaborated with Clear Channel Communications to raise millions of dollars to provide free fingerprint kits for parents. Using the ID kit, parents can take and store their children's fingerprints in their own home. Their efforts were part of the National Child Identification Program created in 1997. In the program's first year, two million kits were distributed to parents at college football games, and 8 million kits were distributed overall.

Programs such as these are invaluable to our nation as we try to locate our nation's missing, kidnapped, and runaway children. I urge all of my fellow Members to vote with me in support of H. Con. Res. 100 and commend Clear Channel Communications and the American Football Coaches Association for their service to our country and reaffirm Congress' commitment to missing and exploited children.

Mr. OSBORNE. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mrs. BIGGERT). The question is on the motion offered by the gentleman from Nebraska (Mr. OSBORNE) that the House suspend the rules and agree to the concurrent resolution, H. Con. Res. 100, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds of those present have voted in the affirmative.

Mr. OSBORNE. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

#### ELWOOD HAYNES "BUD" HILLIS POST OFFICE BUILDING

Mr. OTTER. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 2043) to designate the facility of the United States Postal Service located at 2719 South Webster Street in Kokomo, Indiana, as the "Elwood Haynes 'Bud' Hillis Post Office Building".

The Clerk read as follows:

H.R. 2043

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

#### SECTION 1. ELWOOD HAYNES "BUD" HILLIS POST OFFICE BUILDING.

(a) DESIGNATION.—The facility of the United States Postal Service located at 2719 South Webster Street in Kokomo, Indiana, shall be known and designated as the "Elwood Haynes 'Bud' Hillis Post Office Building".

(b) REFERENCES.—Any reference in a law, map, regulation, document, paper, or other record of the United States to the facility referred to in subsection (a) shall be deemed to be a reference to the Elwood Haynes "Bud" Hillis Post Office Building.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Idaho (Mr. OTTER) and the gentleman from Illinois (Mr. DAVIS) each will control 20 minutes.

The Chair recognizes the gentleman from Idaho (Mr. OTTER).

#### GENERAL LEAVE

Mr. OTTER. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on H.R. 2043.

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

There was no objection.

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

Madam Speaker, House Resolution 2043, introduced by the gentleman from Indiana (Mr. BUYER) on May 25, 2001, designates the facility at the United States Postal Service located at 2719 South Webster Street in Kokomo, Indiana, as the Elwood Haynes "Bud" Hillis Post Office Building.

Pursuant to the policy of the policy of the Committee on Government Re-

form, all Members of the House delegation of the State of Indiana are cosponsors of the measure.

Bud Hillis is a native Hoosier. He was born in Kokomo and attended public schools there. He was a graduate of Culver Military Academy. At the age of 18, he enlisted as an infantryman in World War II and served in Europe for 27 months. When he returned, he received his bachelor's degree from Indiana University and, continuing his studies there, he earned a law degree.

He practiced law in Indiana and was chairman of the Howard County Bar Association. He was elected to the Indiana State House of Representatives and served for two terms. Because of a vacancy in the Fifth Congressional District when the incumbent was chosen to fill a United States Senate seat, Bud Hillis was selected to run for the House seat and was elected to the 92nd Congress in 1970, and he served there until 1986.

Representative Hillis was a member of the Committee on Armed Services and the Committee on Veterans' Affairs. He was a founding member of the Congressional Auto Task Force and a strong advocate of the Congressional Steel Caucus.

Madam Speaker, it is a fitting tribute to name a post office in Kokomo, Indiana, after the distinguished gentleman from that city who selflessly served the interests of his constituents in the State house and in Congress for many years.

I urge our colleagues to support House Resolution 2043.

Madam Speaker, I reserve the balance of my time.

Mr. DAVIS of Illinois. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, H.R. 2043 to designate the U.S. Post Office at 2719 South Webster Street in Kokomo, Indiana, as the Elwood Haynes "Bud" Hillis Post Office Building was introduced by the gentleman from Indiana (Mr. BUYER) on May 26, 2001. This measure has the support and cosponsorship of the entire Indiana delegation.

Of course, former Congressman Elwood "Bud" Hillis served honorably and with great distinction, representing Indiana's Fifth District from 1971 to 1986. He was an outstanding member of the House, well loved by his constituents, well loved by the people in the communities that he represented and that he served, and I think it is altogether fitting and proper that we bestow upon him and upon his memory the honor of naming one of our institutions in his honor.

I certainly join in sponsorship, as well as in support of this resolution.

Madam Speaker, I yield back the balance of my time.

Mr. OTTER. Madam Speaker, I yield 2 minutes to the gentleman from Indiana (Mr. PENCE).

Mr. PENCE. Madam Speaker, I thank the gentleman from Idaho (Mr. OTTER) for yielding me this time.

Madam Speaker, I would like to thank my friend and colleague, the gentleman from Indiana (Mr. BUYER), for his leadership on this measure and the balance of the Indiana delegation for their efforts in designating the Kokomo Post Office in honor of Congressman Bud Hillis.

Madam Speaker, many Hoosiers might be deserving of this honor, but few are more deserving than Congressman Hillis. His career and distinguished record of public service testify to his dedication to the United States and the State of Indiana.

As a member of this Chamber, he was instrumental in saving thousands of Hoosier jobs through the Chrysler bailout, and his membership on the Committee on Armed Services ensured that Indiana's sons and daughters who served in the military were well equipped to face the threats across the world.

□ 1445

Madam Speaker, on a personal note, as a young candidate during my first bid for Congress in 1988, I looked at the service and the career and the integrity of Congressman Bud Hillis, and I pledged to myself then that if ever elected to serve in this body, it would be my purpose to serve as a man of integrity and commitment, to serve as did Congressman Bud Hillis. Thirteen years later, Congressman Hillis still stands as an example for all of us who seek to be men and women of integrity in the United States House of Representatives.

It is said that a good name is more precious than rubies. Madam Speaker, I believe I speak for every Member of the Indiana delegation when I say we are proud to put the good name of a great Hoosier Congressman, Bud Hillis, on the Post Office on South Webster Street in Kokomo, Indiana.

Mr. OTTER. Madam Speaker, I yield such time as he may consume to the gentleman from Indiana (Mr. BUYER).

Mr. BUYER. Madam Speaker, I thank both gentleman for coming to the House floor with this bipartisan legislation, and I also want to thank my good friend the gentleman from Indiana (Mr. PENCE) for his eloquent words. I think he said it very well, and I feel sort of awkward here following him.

Madam Speaker, I rise to honor who I believe is one of the most distinguished men ever to represent the State of Indiana in the United States House of Representatives, my dear friend and former Congressman, Elwood Haynes Bud Hillis. Those of us that know this gentleman the best, I suppose, all refer to him as "Bud."

Bud honorably and effectively served the people of Indiana's fifth district in the House of Representatives from 1971 to 1986, 16 years of dedicated service to his country. During his time in the House of Representatives, he was a reasonable and authoritative voice on matters of national security, trade, and veterans' issues.

He is a graduate of Indiana's Culver Military Academy, and he enlisted to fight in World War II at the age of 18. He served as an infantryman in the European Theater for 27 months, leaving active duty as a first lieutenant.

After the war, Bud attended Indiana University and Indiana University School of Law. He came back to his home community and set up a law practice right on the courthouse square in Kokomo. He then went on to become chairman of the County Bar Association. In November of 1970, he was elected to served two terms in the Indiana House of Representatives. He then went on to serve here in the United States Congress.

While in Congress, Bud was known for a unique combination of genteel civility and firm resolve. During his years in Washington, he was noted for his leadership on several issues of vital importance to Hoosiers and to the Nation as a whole.

As a Member of the Committee on Armed Services, Bud was instrumental in the development and deployment of the M-1 tank, for it to be built here in the United States. When I returned after my service during the Persian Gulf War, I never realized until I sat down with Bud how eager he was to discuss the Persian Gulf War, because a decade or 15 years earlier he sat down and he worked on the development of the M-1 tank. And he believed in that tank, and then he had the opportunity to see some of it on CNN, like a lot of the country observed the Gulf War. But he was anxious to hear firsthand of the use of a weapon system that he was so instrumental in deploying.

He also took a very serious interest in the automobile industry. It is very fitting he would do so, because well over 100 years ago there were two brothers, Elmer and Edgar Apperson, who, along with Bud's grandfather, Elwood Haynes, who invented the automobile, something that we just take for granted today, which revolutionized the transportation system of this country. And Bud's grandfather invented the automobile.

So when he came here to serve in Congress, he was a founding Member of the Congressional Automobile Task Force. And he was the leading advocate for the rescue of Chrysler as a corporation, and what a viable corporation it is today. He was also a strong force in the Congressional Steel Caucus as vice president of its executive committee.

Bud also took seriously our Nation's commitment to our veterans. As a Member of the Committee on Veterans Affairs, he was a leader in caring for not only our country's veterans, but he was also instrumental in the construction of a VA outpatient clinic in Crown Point, which is Lake County, Indiana.

Bud also had a very strong impact upon me. At age 32, when I returned from the Gulf War, I saw life in a different dimension and sought to yet serve my country in a different perspective. I went and sat down with Bud

Hillis, and through all the way up to even today, he continues to give me great counsel and advice.

The impact that he had upon Joni and the Buyer family was that Bud raised his family in Indiana, and for 16 years he commuted. So I could see firsthand many Members raise their families, and this is not a family-friendly institution. And I followed, not necessarily his advice, because that is not the way Bud is, but I chose then to raise my family in Indiana, and I do the commute back and forth. And it was probably the best thing for me, because it does not let this town overtake you, and it keeps you well-grounded when your children are raised in the district which you represent.

Bud is a family man. Carol and their children, I wish them the very best. Bud has a distinguished record of service to his country, in war and in peace and here in the halls of Congress.

To the people that Bud represented here in Indiana, I offer this bill with great pride on behalf of the entire Indiana delegation. It is because of the dedication of his service to his country that the Kokomo Post Office on Webster Street will be a fitting tribute to such an honorable and accomplished Hoosier.

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

Madam Speaker, that concludes the remarks that we have on Mr. Hillis. I would like to thank the gentleman from Indiana (Mr. BUYER) for introducing the legislation and the gentleman from Illinois (Mr. DAVIS) and the gentleman from Indiana (Mr. PENCE) for their kind remarks in the dedication for and paying tribute to Mr. Hillis on this occasion.

Mr. ROEMER. Madam Speaker, I rise today in support of the resolution designating the Elwood Haynes "Bud" Hillis Post Office Building in Kokomo, Indiana. This tribute will serve to commemorate the 20 years of distinguished public service that Congressman Hillis provided to the state of Indiana in both the Indiana General Assembly and the United States House of Representatives.

A native of Kokomo, Indiana, Congressman Hillis graduated from Culver Military Academy in 1944 before entering the Army. He served in the European theater during World War II, and ended the war with the rank of first lieutenant. After retiring from reserve infantry duty with a rank of captain in 1954, he attended Indiana University and the Indiana University School of Law. Hillis then began practicing law in Howard County, where he was active in the community from the beginning. Hillis' involvement in charitable causes in his hometown of Kokomo earned him the admiration of his peers in the community. Among the organizations that he has helped over the past four decades include the United Way, the YMCA, the YWCA, and the Salvation Army.

Hillis' reputation as a man who embraced his causes and worked for them eventually encouraged him into politics. He made his initial venture into politics when he was elected to begin his first term in the Indiana House of Representatives in 1967. After serving two terms in the Indiana General Assembly, Hillis

was elected to the 5th district seat in the U.S. House of Representatives in 1970. As a member of the U.S. Congress, he became heavily involved with military and veterans affairs. Among his committee assignments were the Veterans Affairs and Armed Services Committees, where he was instrumental in upgrading Grissom Air Force Reserve Base to make that an integral part of our nation's defenses. Bud always seemed to be supportive of our nation's veterans. Even in the period of immediately following the Vietnam War, Bud recognized the need to stand by American forces here and abroad. Although he was in the minority for a number of years following that tumultuous time in American history, his efforts certainly showed him to be a man of principle.

His soft-spoken polite nature was admired by many of his peers in the House of Representatives, and he gained great respect in Washington for his 16-year legislative record. Although he was popular in his district, Hillis voluntarily stepped down in 1987 after serving eight terms.

This dedication of the Kokomo post office certainly would be a fitting tribute for a distinguished gentleman representing the state of Indiana in the U.S. House of Representatives.

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

The SPEAKER pro tempore (Mrs. BIGGERT). The question is on the motion offered by the gentleman from Idaho (Mr. OTTER) that the House suspend the rules and pass the bill, H.R. 2043.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds of those present have voted in the affirmative.

Mr. OTTER. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

#### G. ELLIOT HAGAN POST OFFICE BUILDING

Mr. OTTER. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 1183) to designate the facility of the United States Postal Service located at 113 South Main Street in Sylvania, Georgia, as the "G. Elliot Hagan Post Office Building".

The Clerk read as follows:

H.R. 1183

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

#### SECTION 1. G. ELLIOT HAGAN POST OFFICE BUILDING.

(a) DESIGNATION.—The facility of the United States Postal Service located at 113 South Main Street in Sylvania, Georgia, shall be known and designated as the "G. Elliot Hagan Post Office Building".

(b) REFERENCES.—Any reference in a law, map, regulation, document, paper, or other record of the United States to the facility referred to in subsection (a) shall be deemed to be a reference to the G. Elliot Hagan Post Office Building.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Idaho (Mr. OTTER) and the gentleman from Illinois (Mr. DAVIS) each will control 20 minutes.

The Chair recognizes the gentleman from Idaho (Mr. OTTER).

## GENERAL LEAVE

Mr. OTTER. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on H.R. 1183.

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

There was no objection.

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

Madam Speaker, H.R. 1183, introduced by my distinguished colleague, the gentleman from Georgia (Mr. KINGSTON), on March 22, 2001, designates the facility of the United States Postal Service located at 113 South Main Street in Sylvania, Georgia, as the G. Elliot Hagan Post Office Building. All Members of the House delegation from the State of Georgia are original cosponsors of this legislation and support for the post office naming bills from the entire State delegation is the policy of the Committee on Government Reform.

G. Elliot Hagan was born in Sylvania, Screven County, Georgia, in 1916. He studied in public schools in Sylvania and then attended the University of Georgia. He also attended Emory University and John Marshall Law School. His varied career included the life insurance and estate planning business, editor of a weekly newspaper, livestock raising, and a member of the Board of Trustees of Tift College.

Mr. Hagan served as a representative in the Georgia State House for five terms, and one term in the State Senate. He resigned from the State legislature at the outbreak of the Second World War to serve in the Army Signal Corps for 2 years.

Mr. Hagan later became secretary-treasurer and deputy director of the State Board of Workmen's Compensation in 1946, member of the National Council of the State Governments, and a district director of the Office of Price Stabilization for southern Georgia. He was an active member of the American Legion, the Farm Bureau, and the Million Dollar Round Table and was also a Mason, a Shriner, a Rotarian, and an Elk.

Mr. Hagan was elected to the 85th Congress in 1961 and served for six terms in Congress until 1973. He was a member of the Committee on Armed Services and chairman of the Public Health and Welfare Subcommittee of the House District of Columbia committee. He died in the town of his birth in 1990.

It is appropriate that a post office be named in his honor, a true son of Sylvania, Georgia.

Madam Speaker, I urge my colleagues to support H.R. 1183, a bill to

designate the facility of the United States Postal Service located at 113 South Main Street in Sylvania, Georgia, as the G. Elliot Hagan Post Office Building.

Madam Speaker, I reserve the balance of my time.

Mr. DAVIS of Illinois. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I join with my colleague in providing support to H.R. 1183, to designate the U.S. Post Office at 113 South Main Street in Sylvania Georgia as the G. Elliot Hagan Post Office Building.

This legislation was introduced by the gentleman from Georgia (Mr. KINGSTON) on March 22, 2001. This measure has the support and cosponsorship of the entire Georgia State delegation.

The former and late Congressman G. Elliot Hagan represented the First Congressional District in Georgia from 1961 until 1973. Prior to his election to the U.S. House of Representatives, Congressman Hagan served five terms in the Georgia House of Representatives and one term in the Georgia State Senate.

A native of Sylvania, Georgia, Congressman Hagan provided tremendous leadership to that community and to the area surrounding it. As a matter of fact, he was fondly known and well liked by all of those who came into contact with him.

Congressman Hagan passed on December 28, 1990. Of course, people still remember his work, they still remember his contributions, and they still remember what he meant to their community.

Therefore, I am pleased to join in support of this resolution, and urge its swift adoption.

Madam Speaker, you might note that I am wearing this lovely flower that was given to me at the E. Franklin Frazier Elementary School, where I was their commencement speaker. I want to thank them for this flower but also want to congratulate them; and I want to congratulate all of the graduates throughout the country who are finishing up their elementary school, high school, kindergarten, or college education and getting ready for the summer. I also want to thank them for this tremendous badge of honor that they gave me this morning.

Madam Speaker, I urge adoption of this resolution.

Madam Speaker, I yield back the balance of my time.

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

Madam Speaker, this concludes the formal remarks that we have for this tribute and this dedication. I should like to thank the gentleman from Illinois (Mr. DAVIS) for his kind remarks. He truly did bring Mr. Hagan's life to life on this floor, and this tribute for Mr. Hagan is most appropriate.

Mr. KINGSTON. Madam Speaker, it is my great pleasure and honor to introduce and ask that the House of Representatives pass H.R.

1183, legislation to name the Post Office in Sylvania, Georgia in Screven County for former Congressman G. Elliot Hagan.

Mr. G. Elliott Hagan served Georgia as a Democrat in the U.S. House of representatives from 1961–1973. Mr. Hagan was born in Sylvania, Georgia on May 24, 1916. He had a long and distinguished career in public service after graduating from the University of Georgia.

Mr. Hagan loved America and served his country when it was in peril. At the outbreak of the Second World War, he resigned from the Georgia State House of Representatives and served two years in the Army Signal Corps.

He loved Georgia and worked to serve his fellow Georgians. He served as Secretary-Treasurer and Deputy Director of the State Board of Workmen's Compensation, and District Director of Office of Price Stabilization for southern half of Georgia in 1951 and 1952 and Deputy Regional Director, Atlanta Regional Office. Mr. Hagan also served five terms in the Georgia State House of Representatives and one term in the Georgia State Senate.

G. Elliot Hagan was also a businessman and farmer. He engaged in life insurance-estate planning as well as general farming and kept livestock.

Mr. Hagan was a public servant for the nation. He was elected as a Democrat to the Eighty-seventh and to the five succeeding Congresses (January 3, 1961–January 3, 1973) serving the people of southern Georgia extremely well. He faithfully represented the views of the Georgians whom he served.

I am pleased to ask the Congress bestow this honor on Mr. Hagan by passing this legislation. He is deserving of this honor. Mr. Hagan served his God, country, state and family. G. Elliot Hagan was a hero and naming the Post Office in Sylvania is a fitting testament to his public service. I ask all my colleagues to vote for H.R. 1183.

□ 1459

The SPEAKER pro tempore (Mrs. BIGGERT). The question is on the motion offered by the gentleman from Idaho (Mr. OTTER) that the House suspend the rules and pass the bill, H.R. 1183.

The question was taken; and (two-thirds having voted in favor thereof) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

## RECESS

The SPEAKER pro tempore. Pursuant to clause 12 of rule I, the Chair declares the House in recess until approximately 6 p.m.

Accordingly (at 3 p.m.), the House stood in recess until approximately 6 p.m.

□ 1800

## AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mrs. BIGGERT) at 6 p.m.

**REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H.R. 1699, COAST GUARD AUTHORIZATION ACT OF 2001**

Mrs. MYRICK, from the Committee on Rules, submitted a privileged report (Rept. No. 107-86) on the resolution (H. Res. 155) providing for consideration of the bill (H.R. 1699) to authorize appropriations for the Coast Guard for fiscal year 2002, which was referred to the House Calendar and ordered to be printed.

**REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF MOTIONS TO SUSPEND THE RULES**

Mrs. MYRICK, from the Committee on Rules, submitted a privileged report (Rept. No. 107-87) on the resolution (H. Res. 156) providing for consideration of motions to suspend the rules, which was referred to the House Calendar and ordered to be printed.

**ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE**

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will now put the question on the motions to suspend the rules on which further proceedings were postponed earlier today in the order in which that motion was entertained.

Votes will be taken in the following order:

House Concurrent Resolution 100, by the yeas and nays; and

H.R. 2043, by the yeas and nays.

The Chair will reduce to 5 minutes the time for the second electronic vote in this series.

**COMMENDING CLEAR CHANNEL COMMUNICATIONS AND AMERICAN FOOTBALL COACHES ASSOCIATION FOR THEIR DEDICATION AND EFFORTS FOR PROTECTING CHILDREN**

The SPEAKER pro tempore. The pending business is the question of suspending the rules and agreeing to the concurrent resolution, H. Con. Res. 100, as amended.

The Clerk read the title of the concurrent resolution.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Nebraska (Mr. OSBORNE) that the House suspend the rules and agree to the concurrent resolution, H. Con. Res. 100, as amended, on which the yeas and nays are ordered.

The vote was taken by electronic device, and there were—yeas 405, nays 0, not voting 26, as follows:

[Roll No. 150]

YEAS—405

Abercrombie	Armey	Baldwin
Aderholt	Baca	Ballenger
Akin	Bachus	Barcia
Allen	Baker	Barr
Andrews	Baldacci	Barrett

Bartlett	Filner	Larson (CT)
Barton	Flake	Latham
Bass	Fletcher	LaTourette
Becerra	Foley	Leach
Bentsen	Ford	Lee
Bereuter	Fossella	Levin
Berkley	Frank	Lewis (CA)
Berman	Frelinghuysen	Lewis (GA)
Berry	Frost	Lewis (KY)
Biggert	Gallegly	Linder
Bilirakis	Ganske	Lipinski
Bishop	Gekas	LoBiondo
Blagojevich	Gephardt	Lofgren
Blumenauer	Gibbons	Lowey
Blunt	Gilchrest	Lucas (KY)
Boehler	Gilman	Lucas (OK)
Boehner	Gonzalez	Luther
Bonilla	Goodlatte	Maloney (CT)
Bonior	Gordon	Maloney (NY)
Bono	Goss	Manzullo
Borski	Graham	Markey
Boswell	Granger	Mascara
Boucher	Graves	Matheson
Boyd	Green (TX)	McCarthy (MO)
Brady (PA)	Green (WI)	McCarthy (NY)
Brady (TX)	Greenwood	McCollum
Brown (OH)	Grucci	McCrery
Brown (SC)	Gutierrez	McDermott
Bryant	Gutknecht	McGovern
Burr	Hall (OH)	McHugh
Buyer	Hall (TX)	McInnis
Callahan	Hansen	McIntyre
Calvert	Harman	McKeon
Camp	Hastings (FL)	McKinney
Cannon	Hastings (WA)	McNulty
Cantor	Hayes	Meehan
Capito	Hayworth	Meek (FL)
Capps	Hefley	Meeks (NY)
Capuano	Herger	Menendez
Cardin	Hill	Mica
Carson (IN)	Hilleary	Miller (FL)
Carson (OK)	Hilliard	Miller, Gary
Castle	Hinchey	Miller, George
Chabot	Hinojosa	Mollohan
Chambliss	Hobson	Moore
Clay	Hoefel	Moran (KS)
Clayton	Hoekstra	Moran (VA)
Clement	Holden	Morella
Clyburn	Holt	Murtha
Coble	Honda	Myrick
Collins	Hooley	Nadler
Combest	Horn	Napolitano
Condit	Hostettler	Neal
Conyers	Houghton	Nethercutt
Cooksey	Hoyer	Ney
Costello	Hulshof	Northup
Cox	Hunter	Norwood
Coyne	Hutchinson	Nussle
Cramer	Hyde	Oberstar
Crane	Inslee	Obey
Crenshaw	Isakson	Olver
Crowley	Israel	Ortiz
Cubin	Issa	Osborne
Culberson	Istook	Ose
Cummings	Jackson (IL)	Otter
Cunningham	Jackson-Lee	Owens
Davis (CA)	(TX)	Oxley
Davis (FL)	Jefferson	Pallone
Davis (IL)	Jenkins	Pascarell
Davis, Jo Ann	John	Pastor
Davis, Tom	Johnson (CT)	Paul
Deal	Johnson (IL)	Pelosi
DeFazio	Johnson, E. B.	Pence
DeGette	Johnson, Sam	Peterson (MN)
DeLauro	Jones (NC)	Petri
DeLay	Jones (OH)	Phelps
DeMint	Kanjorski	Pickering
Deutsch	Kaptur	Pitts
Diaz-Balart	Keller	Platts
Dicks	Kelly	Pomeroy
Dingell	Kennedy (MN)	Portman
Doggett	Kennedy (RI)	Price (NC)
Dooley	Kerns	Pryce (OH)
Doyle	Kildee	Putnam
Dreier	Kilpatrick	Quinn
Duncan	Kind (WI)	Radanovich
Dunn	King (NY)	Rahall
Edwards	Kirk	Ramstad
Ehlers	Kleczka	Rangel
Emerson	Knollenberg	Regula
English	Kolbe	Rehberg
Eshoo	Kucinich	Reyes
Etheridge	LaFalce	Reynolds
	LaHood	Riley
	Lampson	Rivers
	Langevin	Rodriguez
	Lantos	Roemer
	Largent	Rogers (KY)
	Larsen (WA)	Rogers (MI)

Rohrabacher	Skeen	Tierney
Ros-Lehtinen	Skelton	Toomey
Ross	Slaughter	Towns
Rothman	Smith (MI)	Trafficant
Roukema	Smith (NJ)	Turner
Roybal-Allard	Smith (TX)	Udall (CO)
Royce	Smith (WA)	Udall (NM)
Rush	Snyder	Upton
Ryan (WI)	Souder	Velazquez
Ryun (KS)	Spratt	Visclosky
Sabo	Stark	Vitter
Sanchez	Stearns	Walden
Sanders	Stenholm	Walsh
Sandlin	Strickland	Wamp
Saxton	Stump	Watkins
Schaffer	Stupak	Watt (NC)
Schakowsky	Sununu	Watts (OK)
Schiff	Sweeney	Waxman
Schrock	Tancredo	Weiner
Scott	Tanner	Weldon (FL)
Sensenbrenner	Tauscher	Weller
Serrano	Tauzin	Whitfield
Sessions	Taylor (MS)	Wicker
Shadegg	Terry	Wilson
Shaw	Thomas	Wolf
Shays	Thompson (CA)	Woolsey
Sherwood	Thompson (MS)	Wu
Shimkus	Thornberry	Wynn
Shows	Thune	Young (AK)
Shuster	Thurman	Young (FL)
Simmons	Tiahrt	
Simpson	Tiberi	

**NOT VOTING—26**

Ackerman	Hart	Sawyer
Baird	Kingston	Scarborough
Brown (FL)	Matsui	Sherman
Burton	Millender	Solis
Doolittle	McDonald	Spence
Ehrlich	Mink	Taylor (NC)
Engel	Payne	Waters
Gillmor	Peterson (PA)	Weldon (PA)
Goode	Pombo	Wexler

□ 1829

So (two-thirds having voted in favor thereof) the rules were suspended and the concurrent resolution, as amended, was agreed to.

The result of the vote was announced as above recorded.

The title of the concurrent resolution was amended so as to read: "Commending the American Football Coaches Association for its dedication and efforts to protect children and locate the Nation's missing, kidnapped, and runaway children."

A motion to reconsider was laid on the table.

**ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE**

The SPEAKER pro tempore (Mrs. BIGGERT). Pursuant to clause 8 of rule XX, the Chair will reduce to 5 minutes the minimum time for electronic voting on the next motion to suspend the rules on which the Chair has postponed further proceedings.

**ELWOOD HAYNES "BUD" HILLIS POST OFFICE BUILDING**

The SPEAKER pro tempore. The pending business is the question of suspending the rules and passing the bill, H.R. 2043.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Idaho (Mr. OTTER) that the House suspend the rules and pass the bill, H.R. 2043, on which the yeas and nays are ordered.

This is a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 407, nays 0, not voting 24, as follows:

[Roll No. 151]

YEAS—407

Abercrombie	DeMint	Johnson (CT)	Otter	Ryan (WI)	Tanner
Aderholt	Deutsch	Johnson, E.B.	Owens	Ryun (KS)	Tauscher
Akin	Diaz-Balart	Johnson, Sam	Oxley	Sabo	Tauzin
Allen	Dicks	Jones (NC)	Pallone	Sanchez	Taylor (MS)
Andrews	Dingell	Jones (OH)	Pascarell	Sanders	Terry
Army	Doggett	Kanjorski	Pastor	Sandlin	Thomas
Baca	Dooley	Kaptur	Paul	Saxton	Thompson (CA)
Bachus	Doyle	Keller	Pelosi	Schaffer	Thompson (MS)
Baker	Dreier	Kelly	Pence	Schakowsky	Thornberry
Baldacci	Duncan	Kennedy (MN)	Peterson (MN)	Schiff	Thune
Baldwin	Dunn	Kennedy (RI)	Peterson (PA)	Schrock	Thurman
Ballenger	Edwards	Kerns	Petri	Scott	Tiahrt
Barcia	Ehlers	Kildee	Phelps	Sensenbrenner	Tiberi
Barr	Emerson	Kilpatrick	Pickering	Serrano	Tierney
Barrett	English	Kind (WI)	Pitts	Sessions	Toomey
Bartlett	Eshoo	King (NY)	Platts	Shadegg	Towns
Barton	Etheridge	Kirk	Pomeroy	Shaw	Traficant
Bass	Evans	Kleczka	Portman	Shays	Turner
Becerra	Everett	Knollenberg	Price (NC)	Sherwood	Udall (CO)
Bentsen	Farr	Kolbe	Pryce (OH)	Shimkus	Udall (NM)
Bereuter	Fattah	Kucinich	Putnam	Shows	Upton
Berkley	Ferguson	LaFalce	Quinn	Shuster	Velazquez
Berman	Filmer	LaHood	Radanovich	Simmons	Visclosky
Berry	Flake	Lampson	Rahall	Simpon	Vitter
Biggert	Fletcher	Langevin	Ramstad	Skeen	Walden
Bilirakis	Foley	Lantos	Rangel	Skelton	Walsh
Bishop	Ford	Largent	Regula	Slaughter	Wamp
Blagojevich	Fossella	Larsen (WA)	Rehberg	Smith (MI)	Watkins
Blumenauer	Frank	Larson (CT)	Reyes	Smith (NJ)	Watt (NC)
Blunt	Frelinghuysen	Latham	Reynolds	Smith (TX)	Watts (OK)
Boehler	Frost	LaTourette	Riley	Smith (WA)	Waxman
Boehner	Galleghy	Leach	Rivers	Snyder	Weiner
Bonilla	Ganske	Lee	Rodriguez	Souder	Weldon (FL)
Bonior	Gekas	Levin	Roemer	Spence	Weldon (PA)
Bono	Gephardt	Lewis (CA)	Rogers (KY)	Spratt	Weller
Borski	Gibbons	Lewis (GA)	Rogers (MI)	Stark	Whitfield
Boswell	Gilchrest	Lewis (KY)	Rohrabacher	Stearns	Wicker
Boucher	Gilman	Linder	Ros-Lehtinen	Stenholm	Wilson
Boyd	Gonzalez	Lipinski	Ross	Strickland	Wolf
Brady (PA)	Goodlatte	LoBiondo	Rothman	Stump	Woolsey
Brady (TX)	Gordon	Loftgren	Roukema	Stupak	Wu
Brown (OH)	Goss	Lowe	Roybal-Allard	Sununu	Wynn
Brown (SC)	Graham	Lucas (KY)	Royce	Sweeney	Young (AK)
Bryant	Granger	Lucas (OK)	Rush	Tancredo	Young (FL)
Burr	Graves	Luther			
Buyer	Green (TX)	Maloney (CT)			
Callahan	Green (WI)	Maloney (NY)			
Calvert	Greenwood	Manzullo			
Camp	Grucci	Markey			
Cannon	Gutierrez	Mascara			
Cantor	Gutknecht	Matheson			
Capito	Hall (OH)	McCarthy (MO)			
Capps	Hall (TX)	McCarthy (NY)			
Capuano	Hansen	McCollum			
Cardin	Harman	McCrery			
Carson (IN)	Hastings (FL)	McDermott			
Carson (OK)	Hastings (WA)	McGovern			
Castle	Hayes	McHugh			
Chabot	Hayworth	McInnis			
Chambliss	Hefley	McIntyre			
Clay	Hergert	McKeon			
Clayton	Hill	McKinney			
Clement	Hilleary	McNulty			
Clyburn	Hilliard	Meehan			
Coble	Hinchee	Meek (FL)			
Collins	Hinjosa	Meeks (NY)			
Combest	Hobson	Menendez			
Condit	Hoeffel	Mica			
Conyers	Hoekstra	Miller (FL)			
Cooksey	Holden	Miller, Gary			
Costello	Holt	Miller, George			
Cox	Honda	Mollohan			
Coyne	Hoolley	Moore			
Cramer	Horn	Moran (KS)			
Crane	Hostettler	Moran (VA)			
Crenshaw	Houghton	Morella			
Crowley	Hoyer	Murtha			
Cubin	Hulshof	Myrick			
Culberson	Hunter	Nadler			
Cummings	Hutchinson	Napolitano			
Cunningham	Hyde	Neal			
Davis (CA)	Inslee	Nethercutt			
Davis (FL)	Isakson	Ney			
Davis (IL)	Israel	Northup			
Davis, Jo Ann	Issa	Norwood			
Davis, Tom	Istook	Nussle			
Deal	Jackson (IL)	Oberstar			
DeFazio	Jackson-Lee	Obey			
DeGette	(TX)	Olver			
Delahunt	Jefferson	Ortiz			
DeLauro	Jenkins	Osborne			
DeLay	John	Ose			

NOT VOTING—24

Ackerman	Hart	Sawyer
Baird	Johnson (IL)	Scarborough
Brown (FL)	Kingston	Sherman
Burton	Matsui	Solis
Doolittle	Millender-	Taylor (NC)
Ehrlich	McDonald	Waters
Engel	Mink	Wexler
Gillmor	Payne	
Goode	Pombo	

□ 1839

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

Stated for:

Mr. JOHNSON of Illinois. Madam Speaker, on rollcall No. 151. I was inadvertently detained. Had I been present, I would have voted "yea."

#### MAKING IN ORDER MOTIONS TO SUSPEND THE RULES ON WEDNESDAY, JUNE 6, 2001

Mr. EHLERS. Madam Speaker, I ask unanimous consent that it be in order at any time on the legislative day of Wednesday, June 6, 2001, for the Speaker to entertain motions that the House suspend the rules relating to the following measures: H.R. 1000, H.R. 37, H.R. 640, H.R. 1661, H.R. 1209, H.R. 1914, and H. Con. Res. 150.

The SPEAKER pro tempore (Mrs. BIGGERT). Is there objection to the request of the gentleman from Michigan?

There was no objection.

#### PERMITTING USE OF ROTUNDA OF CAPITOL FOR PRESENTATION POSTHUMOUSLY OF CONGRESSIONAL GOLD MEDAL TO CHARLES M. SCHULZ

Mr. EHLERS. Madam Speaker, I ask unanimous consent that the Committee on House Administration be discharged from further consideration of the concurrent resolution (H. Con. Res. 149) permitting the use of the Rotunda of the Capitol for a ceremony to present posthumously a gold medal on behalf of Congress to Charles M. Schulz, and ask for its immediate consideration in the House.

The Clerk read the title of the concurrent resolution.

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

Mr. HOYER. Madam Speaker, reserving the right to object, and of course, I shall not object and, in fact, I will urge the support for this request, I yield to the gentleman from Michigan (Mr. EHLERS) for an explanation of the concurrent resolution.

Mr. EHLERS. Madam Speaker, I thank the gentleman from Maryland (Mr. HOYER) for yielding.

Madam Speaker, this resolution commends Charles Schulz, better known as "Sparky," creator of the Peanuts comic strip which ran for nearly 50 years, which continues to be appear in reruns, and is extremely popular with all ages in this country.

The comic strip appears in 2,600 newspapers and 21 different languages. It is estimated that 350 million readers in 75 different countries read the strip.

Mr. Schulz announced his retirement in December 1999, and he died shortly thereafter on February 12, 2000, in Santa Rosa, California. His death came just hours before his final Sunday strip ran. He personally drew the final strip, as he had every strip over the previous 5 decades, refusing to let anyone else draw the characters created, because, he said, "The strip is me and I am the strip."

In his farewell message printed in the strip, Schulz wrote, "I have been grateful over the years for the loyalty of our editors and the wonderful support and love expressed to me by fans of the comic strip. Charlie Brown, Snoopy, Linus, Lucy; how can I ever forget them?"

Well, we will never forget them either, and we are grateful to you, Charles Schulz, for enriching our lives with these wonderful characters.

I would like to add a personal note as well. First of all, Mr. Schulz was born in St. Paul, Minnesota, a few years, in fact 12 years, before I was born in Edgerton, Minnesota. I spent the first 14 years of my life there. Neither of us, of course, knew of each other's existence at that time, but our paths crossed when I was a student at the University of California at Berkeley, and I met him.

In fact, my first meeting was when he attended a Bible study that I was

meeting with regularly, and he came to talk about his personal faith. He was a very devout believer and also, frankly, a rather good amateur theologian. He gave a very good explication of his faith and it was very inspiring to all of us there. He was a wonderful person in many different ways and part of the charm of his strip is that his characters also were amateur theologians and amateur philosophers.

I find that very fascinating. In fact, it was so fascinating that a young seminary student in the 1970s wrote a book entitled, *The Gospel According to Peanuts*. It was a charming little book written on the basis of the strips. The author reproduced a number of the strips, performed exegesis, and explained the theology of the Peanuts group.

He was a wonderful person. It was a loss for all of us that his life was cut short and we could not enjoy a fresh comic strip every day, Sunday, but the purpose of this resolution is to acknowledge all that he has done and to recognize his achievements by allowing the use of the Rotunda to present him a Congressional Gold Medal posthumously.

Mr. HOYER. Madam Speaker, further reserving the right to object, the Capitol rotunda has been the scene of many ceremonies in our Nation's history, some jubilant, others more somber. The rotunda has witnessed the awarding of Congressional Gold Medals to 34 worthy Americans who have distinguished themselves in various ways in service to our country. I think most of us can think of no American who has brought more smiles to more faces of children and adults alike, and thus deserves to join the pantheon of distinguished gold medal honorees more than the late Charles Schulz.

In recognition of Mr. Schulz' lifetime of service, last year Congress enacted and President Clinton signed legislation authorizing this honor, which is Congress' greatest expression of national appreciation for civilians.

□ 1845

A gold medal, Madam Speaker, is entirely appropriate for a tireless man who drew every frame of his Peanuts comic strip for nearly half a century.

His cartoonist career followed his service in the infantry in World War II, during which he entertained his comrades with cartoons about military life. I am certain that his cartoons helped many soldiers endure the horrors and hardships that confronted them during that time.

I think all of us regret that Charles Schulz cannot be present to enjoy the honor that the Congress has bestowed. Although Mr. Schulz left us early last year, his work, of course, is timeless.

Fortunately for us and for generations yet unborn, Charlie Brown, Snoopy, Linus, Lucy, and the rest of the Peanuts gang will always be here to amuse us and, yes, to teach us. They have become, as last year's legislation

noted correctly, part of the fabric of our national culture.

Madam Speaker, there could be a no more fitting use of the rotunda than to honor Charles Schulz in this way.

Madam Speaker, further reserving the right to object, I yield to the sponsor of the resolution and last year's legislation, the gentleman from California (Mr. THOMPSON), in whose district Mr. Schulz lived.

Mr. THOMPSON of California. Madam Speaker, I rise today to ask the House to approve House Concurrent Resolution 149 to allow us to use the rotunda on June 7 to honor Charles Schulz, Sparky Schulz, who not only is an institution in this country and all the other countries where his comic strip was printed daily in all of the different newspapers, but also a very good personal friend and a constituent.

Scott Adams, who is the creator of the Dilbert cartoon, once remarked about Sparky's passing, "It's the end of an era, and it's hard to imagine that cartooning will ever be the same. In basketball, you can say that Michael Jordan was the greatest ever. In cartooning, Charles Schulz was the greatest ever and probably the greatest there will ever be."

I think it is most fitting that this Congress chose to bestow on Mr. Schulz the Congressional Gold Medal, and I think it speaks more to, than just to his cartooning. He was a great American, a great citizen. For 50 years, every day he drew his own Snoopy cartoon. He was also there, it was mentioned, in World War II entertaining the troops. It is also important to note that this great American was there on D-Day on the front lines.

Charles Schulz is most deserving of this recognition; and it is appropriate, I believe, that we allow the rotunda to be used for this purpose. I would ask all of my colleagues to support this effort.

Mr. HOYER. Madam Speaker, further reserving the right to object, I thank the gentleman from California (Mr. THOMPSON) for his remarks and for his personal observations with regard to Mr. Schulz.

Madam Speaker, I urge support for the measure.

Madam Speaker, I withdraw my reservation of objection.

The SPEAKER pro tempore (Mrs. BIGGERT). Is there objection to the request of the gentleman from Michigan?

There was no objection.

The Clerk read the concurrent resolution, as follows:

H. CON. RES. 149

*Resolved by the House of Representatives (the Senate concurring), That the Rotunda of the Capitol is authorized to be used on June 7, 2001, for a ceremony to present posthumously a gold medal on behalf of Congress to Charles M. Schulz. Physical preparations for the ceremony shall be carried out in accordance with such conditions as the Architect of the Capitol may prescribe.*

The concurrent resolution was agreed to.

A motion to reconsider was laid on the table.

#### GENERAL LEAVE

Mr. EHLERS. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on H. Con. Res. 149.

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

There was no objection.

#### ELECTING MEMBERS TO SERVE ON JOINT COMMITTEE ON PRINTING AND JOINT COMMITTEE OF CONGRESS ON THE LIBRARY

Mr. EHLERS. Madam Speaker, I ask unanimous consent that the Committee on House Administration be discharged from further consideration of the resolution (H. Res. 148) electing Members to serve on the Joint Committee on Printing and the Joint Committee of Congress on the Library, and ask for its immediate consideration in the House.

The Clerk read the title of the resolution.

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

There was no objection.

The Clerk read the resolution, as follows:

H. RES. 148

*Resolved,*

#### SECTION 1. ELECTION OF MEMBERS TO JOINT COMMITTEE ON PRINTING AND JOINT COMMITTEE OF CONGRESS ON THE LIBRARY.

(a) JOINT COMMITTEE ON PRINTING.—The following Members are hereby elected to the Joint Committee on Printing, to serve with the chair of the Committee on House Administration:

- (1) Mr. Doolittle.
- (2) Mr. Linder.
- (3) Mr. Hoyer.
- (4) Mr. Fattah.

(b) JOINT COMMITTEE OF CONGRESS ON THE LIBRARY.—The following Members are hereby elected to the Joint Committee of Congress on the Library, to serve with the chair of the Committee on House Administration:

- (1) Mr. Ehlers.
- (2) Mr. Hoyer.
- (3) Mr. Davis of Florida.

The resolution was agreed to.

A motion to reconsider was laid on the table.

#### COMMUNICATION FROM CHAIRMAN, JOINT COMMITTEE ON THE LIBRARY

The SPEAKER pro tempore laid before the House a communication from the Honorable VERNON J. EHLERS, Member of Congress:

HOUSE OF REPRESENTATIVES,

Washington, DC, June 4, 2001.

Hon. DENNIS HASTERT,  
Speaker, House of Representatives,  
Washington, DC.

DEAR MR. SPEAKER: Pursuant to Public Law 100-696 Section 801 (40 USC para. 188a(b)) the Chairman and Vice-Chairman of the Joint Committee of the Library are provided positions on the Capitol Preservation Commission.

I am appointing Mr. John Mica of Florida to be my designee as provided for in Public Law 100-696 Section 801 (40 USC para 188a (c)).

Thank you for your attention to this matter.

Sincerely,

VERNON J. EHLERS,  
Chairman, Joint Committee on the Library.

#### APPOINTMENT OF MEMBERS TO UNITED STATES CAPITOL PRESERVATION COMMISSION

The SPEAKER pro tempore. Without objection and pursuant to Section 801(b) of Public Law 100-696, the Chair announces the Speaker's appointment of the following Members of the House to the United States Capitol Preservation Commission:

Mr. TAYLOR of North Carolina;

Mr. LATOURETTE of Ohio.

There was no objection.

#### MEDICARE PRESCRIPTION DRUG BENEFIT NEEDED

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

Mr. BACA. Madam Speaker, Congress needs to adopt a Medicare prescription drug benefit, rather than making false promises to American seniors.

The Republican plan will not guarantee affordable prescription drug coverage for our seniors. The Republican plan takes its first step toward privatizing Medicare, forcing seniors to deal with private insurance companies.

Those of us can remember what happened in California when they said that we would have plenty of energy. We deregulated, and yet we do not have the energy, yet the prices continued to go up.

We do not want prices to go up for a lot of our seniors. More than one-third of the 35 million Medicare beneficiaries currently have no prescription drug insurance coverage.

I did a study in my district that shows that seniors are being impoverished by drug prices. San Bernardino seniors pay an average of 90 percent more than seniors in Canada and Mexico.

Individuals should not be sacrificing their fixed income for the sake of protecting themselves instead of spending it on leisure or other items. What they have to do now is budget themselves. It becomes very difficult, and yet they do not want to continue to suffer.

I plan to have a press conference on prescription drugs on June 18 at the Rancho Cucamonga Senior Citizens Center from 8 a.m. to 12 noon to address these needs.

I ask that we adopt affordable, voluntary, reliable Medicare prescription drug coverage for all seniors. It is our responsibility to protect them. It is America's responsibility to see that they can all afford medical coverage.

#### WILLIAM HOLMES BROWN, FORMER PARLIAMENTARIAN OF HOUSE PASSES

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

Mr. WOLF. Madam Speaker, I am saddened today to announce to our colleagues the passing on May 27 of William Holmes Brown, who served as parliamentarian of the House from 1974 to 1994. He was 71 years of age. Not only did I have the pleasure of working with Bill Brown in the House, but I was also privileged to be his Congressman. He lived at Oakland Green Farm in Lincoln in Loudoun County, Virginia, property which had been in the family for more than eight generations.

Bill began his service in the Parliamentarian's Office in 1958 when he was appointed Assistant Parliamentarian by Speaker Sam Rayburn. In 1974, he was named to the position of Parliamentarian by Speaker Carl Albert. He succeeded the legendary Lewis Deschler, with whom he had collaborated in volumes of "Precedents of the House of Representatives," referred to in the House as the Deschler-Brown Precedents. During his years in the House, he served under six Speakers. Besides Speaker Sam Rayburn and Carl Albert, he served under John McCormack, Tip O'Neill, Jim Wright, and Tom Foley. He retired from the House in 1994.

During his service in the House, he worked to develop parliamentary projects in newly emerging democratic republics in Eastern Europe, participating in seminars and training programs for representatives of other national legislative bodies. After he retired as Parliamentarian in 1994, he worked for the Agency of International Development on a parliamentary development project in the Ukraine.

Members today can thank Bill Brown and thank his staff, many here today, for organizing the Office of the Parliamentarian, moving it into the Computer Age and making the House precedents available online for all to access.

Bill was the ultimate professional and dedicated public servant. He was held in the highest regard by Members on both sides of the aisle because his work reflected his dedication to the proposition that the rules of the House should be applied and enforced without political considerations.

Bill was born in Huntington, West Virginia. He was a 1951 graduate of Swarthmore College and received his law degree from the University of Chicago. He served on active duty in the Navy from 1954 to 1957 and then served in the Naval Reserve from 1954 to 1974, retiring as a lieutenant commander.

He was director of the Conversations at Oatlands organization and the Loudoun Museum and a member of the Catocin Farmers Club and Goose Creek Friends Meeting.

On behalf of the House, and on behalf of Members on both sides of the aisle,

and on behalf of Members who served here many, many years ago, Madam Speaker, we send our deepest sympathies to Bill's wife of 30 years, Jean Smith Brown, and their daughter, Sara Holmes Brown.

RESIGNATION OF THE PARLIAMENTARIAN, THE HONORABLE WM. HOLMES BROWN, AND APPOINTMENT OF THE HONORABLE CHARLES W. JOHNSON AS PARLIAMENTARIAN

(HOUSE OF REPRESENTATIVES—SEPTEMBER 20, 1994)

The SPEAKER laid before the House the following communication from the Parliamentarian of the House of Representatives, which was read:

Hon. THOMAS S. FOLEY,  
Speaker, House of Representatives, Washington, DC.

DEAR MR. SPEAKER: In March of this year, I completed my thirty-sixth year with the House of Representatives. In July, I completed my twentieth year as Parliamentarian.

In the past few months, circumstances, both personal and professional, have focused my attention on retirement. It has been a difficult decision to reach, but I have concluded that it's time for a change.

The office which I have been privileged to hold continues to be both challenging and rewarding. It is fascinating to encounter—almost daily—fresh interpretations of rules and bill language which require constant evaluation of yesterday's assumptions and conclusions. The House changes from year to year, with new Members and staff and circumstances always reshaping this institution; what does not change is the reservoir of intellect and inventiveness which characterizes those who work in the legislative branch of our government. Daily interaction with such talented people makes the congress a uniquely fascinating place to work.

I could not have done this job without a lot of help, without the love and support of my family, who have learned to live with long hours and erratic schedules; without the teamwork at the rostrum and in all the support offices of the House; without the reservoir of personal commitment and professional strength from my colleagues in the Office. Among the deputy and the assistant parliamentarians there is a wealth of experience and talent. Their accumulated service totals over 80 years. Each is dedicated to the proposition that the rules of this great institution should be applied and enforced without political considerations. All are open to Members and staff with respect to the rules and precedents which govern and guide the deliberations of the House and its committees. They are all exemplary public servants; they can and will continue to carry out the responsibilities of the Office in a manner which reflects the best traditions of the House. We share a lasting bond and I will miss these friends whom I admire and care for so deeply.

I owe a great debt of gratitude to all the Speakers whom I have been fortunate to know: Sam Rayburn, who first appointed me as an assistant parliamentarian on the recommendation of my legendary predecessor as Parliamentarian, Lewis Deschler; John McCormack, who shared his anecdotes and love of the House during long evening conversations in the Speaker's Rooms; Carl Albert, who had faith enough in my abilities to appoint me as Parliamentarian during a very tumultuous time in the history of the House and has continued to be a valued mentor since his retirement; Thomas P. 'Tip' O'Neill, whose good humor and warmth toward me survived some parliamentary decisions which he must have found vexing; Jim

Wright, whose eloquence and courage are unflagging. Finally, Mr. Speaker, I must say how much I have valued your friendship and support. You have always been sensitive and faithful to the distinctions between political and parliamentary decisions and your gavel has been both firm and impartial. The opportunities you have given me to interact with other parliamentary institutions, particularly with the newly emerging democratic republics in eastern Europe, have revealed new horizons which I hope to explore more fully in the future. Programs to encourage and foster parliamentary democracy in that area of our world are of critical importance. The House can be proud of the contribution it is making to this effort and if I can be of assistance in these endeavors I will be available to do so.

I must acknowledge the courtesies and cooperation shown me by the distinguished Minority leader, Bob Michel. He has always shown an appreciation of the role of our office and he and his staff have been of inestimable support. To have known so many of his predecessors, such distinguished men as Joe Martin, Charley Halleck, John Rhodes and Gerald Ford, has been a rare privilege. All of these Leaders have made the House a better place and have left an indelible mark on its history.

I will miss the many friendships with Members that have formed over the years. May I extend to them, through you, my appreciation for their kindnesses.

With your concurrence, my termination as Parliamentarian will be effective on September 15, 1994.

Very respectfully yours,  
WM. HOLMES BROWN.

The SPEAKER. It is with great regret that the Chair accepts the resignation of the distinguished Parliamentarian of the House Wm. Holmes Brown.

Pursuant to the provisions of 2 U.S.C. 297a, the Chair announces that on September 16, 1994, he appointed Charles W. Johnson as Parliamentarian of the House of Representatives to succeed Wm. Holmes Brown, resigned.

A WARM FAREWELL TO WILLIAM H. BROWN,  
PARLIAMENTARIAN  
(HOUSE OF REPRESENTATIVES—SEPTEMBER 20,  
1994)

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

Mr. MICHEL. Mr. Speaker, I think the news that was just announced here, that the Parliamentarian of the House is going to retire, comes as a sad note for many of us who have known Bill through all of these years, although I am happy that he is leaving in a commensurate year with my own retirement. He could not be leaving at a better time, from that standpoint.

However, things have changed since I first started in this House. At that time the Parliamentarian was Lou Deschler, referred to by those who dared to call him 'the Judge.' He was a tough old bird. He would not talk to staff, and he would hardly talk to Members.

I remember one time I took him five different versions of an amendment prohibiting food stamps for strikers and said, 'Okay, Judge, one of these has got to be in order.' And you see, he had the only copy of all the precedents of the House from 1936 on in his office, and he had all the power.

Bill Brown has changed all that. He and his staff have done a magnificent job in compiling and publishing those the Judge had kept hidden. He has done an excellent job organizing the Office of the Parliamentarian and helping the membership. Many of the

precedents are now 'on-line', available through the House Information System.

Bill was born in West Virginia, receiving a bachelor of science degree from Swarthmore College in Pennsylvania in 1951. He received his law degree from the University of Chicago, out our way in Illinois, and served in the Naval Reserve with active duty in the Persian Gulf, returning as a lieutenant commander in 1974.

Bill was first appointed Assistant Parliamentarian by Speaker Sam Rayburn, and then became Parliamentarian in 1974 under Speaker Albert, and has served under six Speakers of the House.

Bill has been a great Parliamentarian, but most do not realize that he is also a farmer. He lives in a 200-year-old home on the Oakland Green Farm, has expanded the log cabin with a stone addition, and later a brick addition. Bill, I am not sure about the aluminum siding you and your lovely wife Jean have now added.

The Browns do have one daughter, Sarah, who is currently studying in Kenya.

Being a farmer and a Parliamentarian involves a lot of work. He is often late coming in, as he has been birthing calves, or on snowy days he has had to drive his tractor to a main road to get a ride. You cannot miss his car in the Rayburn garage, as it looks like he keeps it in the chicken coop all night.

Bill, we are sorely going to miss you, and can imagine your reciting precedents to your cows as the Congress continues writing new ones. I believe we will still use your expertise in attempting to finalize the publishing of the Deschler-Brown precedents, which I will always consider the 'Brown volumes.'

Taking Bill's place in the top spot is someone who I also have known and argued with many a time, Charlie Johnson.

We have had a good laugh telling the story of when Charlie first was working for the Judge, and Lou assigned Charlie the responsibility of compiling old contested election cases. Charlie worked for weeks, researching and writing, only to find out later that they were all neatly compiled in Cannon's precedents.

Charlie still works harder than he needs to. He is a good guy and a dedicated worker. He is the perfect choice. Charlie, I hope you will last longer than Lehr Fess, who some of you may not know lasted just a year.

Best to you, Bill, and we know, Charlie, John, Tom, and Muftiah will carry on the strong tradition of professionalism and cooperation that you started.

TRIBUTE TO THE HONORABLE WILLIAM HOLMES  
BROWN, PARLIAMENTARIAN, ON HIS RETIREMENT  
(HOUSE OF REPRESENTATIVES—SEPTEMBER 20,  
1994)

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

Mr. FOLEY. Mr. Speaker, nothing gives me greater satisfaction than to hear on this day of retirement of Bill Brown these wonderfully warm words from the Republican leader, because I think the lifeblood of any parliamentary body is the sense that our debates and discussions, the votes and actions taken here, are taken in a context of rules and observance, conventions and procedures, that are fair to each Member of the body. Indeed, I think the history of our House of Representatives, certainly in this recent period, has been one of scrupulous adherence to the rules.

As Speaker I have tried to follow that guide of fairness and objectivity in every ruling I have made, and if I had any tendency to veer from that, I would find resistance, very

strong resistance, from the Parliamentarians of the House, who are committed in an almost religious sense to ensuring that the rules are absolutely impartially observed here, I think there is a record, perhaps, of the fact that this body has hardly ever overruled the Chair, and that in those cases where there sometimes has been a question of moving to override the Chair, Republican leadership has often joined with our Members and Republican Members have joined with Democratic Members in supporting the Chair.

Certainly no small part of the credit for this belongs to Bill Brown. He has been an absolutely sterling Parliamentarian in every way. He has served six Speakers. He has been in this body for almost a longer period than virtually anyone. There are few Members and very few professional staff who have served as long.

He begins his retirement with the best wishes and warm affection of an overwhelming number of Members and those who serve with him in aiding this body to achieve its objectives. He has compiled, as Bob Michel says, the precedents of the House. They are now available for all. He has in recent months been a special resource of assistance to emerging parliamentary democracies in Eastern Europe. I think he has found great satisfaction and opportunity for additional service in that work.

Charlie Johnson, his very long-time Assistant Parliamentarian, has our full confidence on both sides of the aisle, and I have made his appointment with great satisfaction; and if it is time, in Bill Brown's judgment, to leave, that a successor as worthy and able and committed and dedicated as Charlie Johnson stands ready to assume the responsibilities.

Mr. Speaker, I want to extend again, not only on my own behalf but on the behalf of all Members of this House, my thanks and my appreciation and my warmest best wishes to Bill Brown, and every success and happiness for him and Jean in the years that lie ahead.

Mr. MONTGOMERY. Mr. Speaker, I want to join you and the minority leader in recognizing the more than 36 years of service parliamentarian Bill Brown has given to this House.

Bill is retiring this week after serving in the Parliamentarian's office since 1958. He was Assistant Parliamentarian from 1958-1974 and then was appointed to the position of Parliamentarian by House Speaker Carl Albert in 1974. During those years, Bill served under six House Speakers, including Sam Rayburn, John McCormack, Carl Albert, Tip O'Neill, Jim Wright and Tom Foley.

Bill has been successful over the years in making sure the Parliamentarian's office remained nonpartisan in its duties of advising the Speaker, all Members of Congress, committees and staff on Constitutional questions and rules of order within this House. He is held in high regard by Members on both sides of the aisle.

In addition to those responsibilities, Bill was involved in recent years in projects involving parliamentary development in several Eastern European republics. He and his support personnel have participated in seminars and training programs in Poland, Estonia and Romania, as these countries and others move toward democracy.

Bill is a graduate of Swarthmore College, Pennsylvania and the University of Chicago Law School. He served on active duty in the U.S. Navy from 1954-57 and then served in the naval Reserve from 1954-74, retiring as a lieutenant commander.

It has been a great honor to get to know Bill Brown on a personal level. I consider

him a close friend and certainly will miss the wise counsel he has given me over the years. He is one of the true unsung heroes who make things work around the people's House. We will miss Bill, but he has earned his retirement. I salute Bill Brown on a job well done and wish Bill, Jean, and Sara the best in the future.

WILLIAM HOLMES BROWN; HOUSE  
PARLIAMENTARIAN

[From the Washington Post, Tuesday, May 29, 2001]

William Holmes Brown, 71, parliamentarian of the U.S. House of Representatives from 1974 until 1994 and author of "House Practice: A Guide to the Rules, Precedents and Procedures of the House," died of a vascular ailment May 27 at Loudoun Hospital Center.

He lived at Oakland Green Farm, the Lincoln property his family has owned for more than eight generations.

Mr. Brown served under six speakers of the House as an adviser on procedure and practice. He began as assistant parliamentarian in 1958 and collaborated with parliamentarian Lewis Deschler in volumes of "Precedents of the House of Representatives." They are referred to in the House as the Deschler-Brown Precedents.

Mr. Brown also worked on behalf of the House on parliamentary development projects in Eastern Europe and Mozambique. He participated in seminars in Poland, Estonia, Slovakia, Albania and Romania and in training programs in the United States for representatives of other national legislative bodies.

After he retired, he worked for the Agency for International Development on a parliamentary development project in Ukraine.

Mr. Brown was a native of Huntington, W.Va. He was a graduate of Swarthmore College and the University of Chicago's law school. He served in the Navy in the Middle East and the Mediterranean and remained in the Navy Reserve until 1974.

He was a director of the Conversations a Oaklands organization and the Loudoun Museum and a member of the Catocin Farmers Club and the Goose Creek Friends Meeting.

Survivors include his wife of 30 years, Jean Smith Brown, and a daughter, Sara Holmes Brown, both of Lincoln.

#### SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2001, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

#### THE NATURE AND IMPORTANCE OF ENERGY

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

Mr. EHLERS. Madam Speaker, I would like to say a few words about the energy issues that face this country. I believe that energy is one of the most misunderstood topics in this Nation, and I believe that is largely because energy is so hard to describe and define.

Most of us do not know what it is. We cannot see it, we cannot feel it, we cannot touch it, we cannot weigh it. When you were a little kid, your mother never sent you to the store for a bottle

of energy. You cannot buy energy that way. Yet, somehow we know what it is, because we talk about it when we get up in the morning, saying "Oh, we do not have much energy;" or, "Oh, we really have a lot of energy today;" we are raring to go. And that is a pretty good perception of what energy actually is.

I happen to be a physicist, and energy in physics is defined as the ability to do work. So that fits our everyday conception of energy, the ability to do work.

Now, in today's society, we depend a lot on energy to do our work. We use energy constantly in transportation, in the workplace, in so many different ways, and it is extremely important. So often we forget the importance of energy, because we are so used to it.

But if you look at the major historical revolutions, the nonmilitary revolutions, you will find that the first major revolution, the agriculture revolution, occurred when people, for the first time began using labor other than their own, namely the labor of animals. The agriculture revolution did not succeed until people began using animals for plowing, for milling, and for other works of labor.

The second major revolution, the industrial revolution, took place when, for the first time, we began using non-human energy and non-animal energy, but instead used mechanical energy and heat energy, and that has led to the world we enjoy today, with its many different sources of energy, used for many, many different purposes.

But we tend to take energy for granted and do not realize its importance until there is a shortage, particularly when prices go up, because when the prices go up, it affects the economy. Energy is so vital to our economy that whenever we have a shortage of energy and prices go up, the economy is affected dramatically. It is no coincidence that the last three major recessions we have had in this country have followed on the heels of energy shortages.

Now, what is energy? I said you cannot feel it, touch it, handle it. As a physicist, I understand what energy is, but it is hard to explain it to a lay person, and for that reason sometimes I wish that energy were purple.

If it were purple, we could see it, we could understand it. If we could drive up to our homes and see purple energy leaking out from around the windows during the winter and we would see purple oozing through the walls, we would recognize we are wasting money, because we have not insulated the house well enough or sealed the windows well enough.

Or suppose we are driving down the highway: if we see a little car going by with just a little bit of purple around it, and then see an SUV going by with just clouds of purple around it, we would immediately recognize that one uses far less energy than another. That is the type of awareness we have to build in the people of this country.

Let me relate that to one specific State. We all know that California is having tremendous energy problems. There are many reasons for it and many possible solutions, but I can tell you that the fastest, cheapest solution of all is energy conservation and energy efficiency. That can be implemented quickly. It can be used to solve the crisis, it can be used to reduce demand and drive the prices down in California, and certainly put the State on a better keel. I hope that California pursues it, and I hope that our Federal government helps them pursue that alternative.

Now, there is so much more I could say about this, and I plan to do a 1 hour speech on this later on. But I wanted to give this introductory speech at this point, outlining some of the characteristics of energy, how important it is to our Nation and our economy, and how totally dependent we are on it.

It is an issue that we must deal with. We must deal with it intelligently, using every possible means; not just energy conservation and energy efficiency, although I think they are extremely important, but also looking at alternative sources of energy and more wisely using the resources we have now.

The answer is not simply drilling holes in the ground, the answer is not simply insulating houses, but looking at every aspect of our use of energy and saying how can we use it better, how can we use it more efficiently, how can we really accomplish something worthwhile in our energy use, without depleting our natural resources.

One last comment about energy. There are two very important aspects you must remember about energy. First, energy is our most basic natural resource, because without energy, we cannot use any of our other basic resources. We cannot use iron, steel, copper and so forth, without digging it out of the ground and forming it and fabricating it. All of this requires energy.

The second important point about energy is that it is the only non-renewable resource. Once you use it, it is gone. We can renew all our other resources; that one we cannot. So let us be certain to use energy right and not waste it.

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#### THE CONTINUING CRISIS OF HIV/ AIDS

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

Mr. DAVIS of Illinois. Mr. Speaker, I take this moment because of the fact that the AIDS/HIV epidemic continues to plague America and, in actuality, continues to plague much of the world. I take this opportunity to commend the Congressional Black Caucus, the Congressional Hispanic Caucus, and the

Congressional Pacific American Caucus for holding a joint hearing regarding this very important issue on June 12, that is, the issue of the HIV/AIDS epidemic that continues to threaten communities not only in our country, but throughout the world.

Mr. Speaker, 20 years ago the term HIV/AIDS was unknown. Since that time, over 19 million people worldwide have died of HIV/AIDS, and approximately 34 million people continue to live with the disease. The Surgeon General, David Satcher, stated in a recent report that HIV/AIDS could be the worst epidemic ever recorded in history.

Many people believe that this is an issue that does not really affect our country. It is true that the poorest regions in the world have been hit the hardest; yet the United States of America, the most technologically proficient Nation on the face of the Earth, has not been able to escape the devastation of this deadly disease. In this country alone, over 400,000 people have died, while 900,000 people are living with HIV/AIDS. The Centers for Disease Control recently released a report stating that each year there are 40,000 new cases of HIV/AIDS.

What concerns me the most about this issue is the growing impact that the disease is having on minority communities in our country. The 2000 Presidential Advisory Council on HIV/AIDS Report to the President stated that "in the United States, disproportionate numbers of new infections are found in poor communities, communities of color, among young gay men, among drug users, and among African American and Latino women populations who have rarely been embraced by this Nation as a whole."

In 1999, the AIDS incident-rate per 100,000 people among Hispanics was 25.6. The rate for African Americans was 66. The rate for whites was 7.6. These statistics clearly demonstrate the large racial gaps that exist among aids cases. The HIV/AIDS pandemic has reached my own district in Chicago, Illinois. The city has seen an overwhelming increase in the number of minorities infected with the disease. This past February, researchers in Chicago reported that fully 30 percent of young gay African American men are infected with HIV/AIDS. The infection rate for gay blacks is twice that of any other ethnic group. Nationwide, 14.7 percent of gay black men are infected with the disease.

In addition to the African American community, the Hispanic population has also seen an increase in the number of HIV/AIDS cases. In 1999, Hispanics made up 13 percent of the entire United States population. At the same time, however, Hispanics also made up 19 percent of the total number of new United States AIDS cases reported that year.

Research has shown that these trends are continuing to worsen. The HIV/AIDS epidemic has continued to spread

throughout minority communities. We can no longer sit and simply wait for a cure to be found. We must increase our work to educate the public on AIDS prevention, while continuing to study new ways to combat the disease.

Again, I want to commend my colleagues in the CBC and the CHC and the CPA for their vigilance on this issue. This hearing is an excellent way to keep the spotlight on the HIV/AIDS pandemic and an excellent way for us to come up with effective ways to solve this very important and growing problem.

#### TWENTIETH ANNIVERSARY OF DISCOVERY OF HIV/AIDS

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. PELOSI) is recognized for 5 minutes.

Ms. PELOSI. Mr. Speaker, I rise to join the gentleman from Illinois (Mr. DAVIS), my colleague, in observing the 20-year anniversary of the discovery of the HIV virus. This was a terrible time. In our community in San Francisco, at the University of California San Francisco, we were hearing rumors 20 years ago about illnesses that had not been seen since the Middle Ages, or read about or heard about; that immune systems were so devastated that people were susceptible to afflictions that were grotesque. It was frightening. We knew we had to do something about it. It never dawned on us then that 20 years later, projecting into the future 20 years, that we would be here still talking about funding for research, prevention, and care.

A lot has been accomplished in the past 20 years, but a lot needs to be done. I want to associate myself with the comments that the gentleman from Illinois (Mr. DAVIS) made about work of the caucuses in the Congress, in the House, the Hispanic Caucus, the Congressional Black Caucus and the Asian American Pacific Islander Caucus and the work that they have done to recognize the changing face of AIDS.

In the beginning, it started as a gay men's disease; now we know it permeates our society, and it is taking a very big bite out of the minority community. Just last week we were all saddened by the news that new HIV infections among young gay men, particularly among young, gay African American gay men, had risen dramatically. Many young people have come of age in a world where protease inhibitors are extending life. They do not remember the terror that we went through 20 years ago and since; and these treatments that we have now, while important, are not a cure. Until we have a true cure, an effective vaccine prevention is our best weapon. We must intensify our prevention efforts, including targeted education about behavioral risk and research for a vaccine.

Mr. Speaker, I just want to observe some of the contributions of some of the Members of this body. Ted Weiss,

who passed away some years ago, but was one of the leaders in the Congress on this issue; certainly the gentleman from California (Mr. WAXMAN), our colleague, not only made a tremendous contribution in his own right, but served as mentor to so many of us who have worked on this issue over the years.

Under his leadership and that of others, we were able to pass the Ryan White Care Act and its reauthorization. We increased the funding dramatically in research, prevention, and care for people with HIV and AIDS. We have funded housing opportunities for people with AIDS. We have spent money on international global AIDS issues. Not enough, but certainly tremendous increases in this regard. Our biggest lack, of course, is on the international AIDS issues, and many people in our minority caucuses are taking the lead, the gentlewoman from California (Ms. LEE) for one, who will be speaking later; and the gentlewoman from California (Ms. WATERS), and many others who have been leaders in this arena.

Today, the gentleman from Missouri (Mr. GEPHARDT), the Democratic leader, and I introduced legislation which would qualify people with HIV for Medicaid. Many uninsured Americans still do not have access to AIDS medications because HIV-positive individuals do not meet Medicaid requirements until they are disabled by full-blown AIDS. Everything we know about HIV and AIDS is early intervention, early intervention, early intervention; and yet under the law, if one is just HIV infected, one cannot qualify for Medicaid until one has a full-blown case of AIDS. Under our legislation, which I am proud to say on this 20-year day of memory, is that we will have over 100 cosponsors for the legislation.

Early treatment saves lives, improves the quality of life, and reduces health care costs as progression from HIV to full-blown AIDS is prevented or delayed. It also strengthens our economy as healthy individuals return to work, increasing both productivity and tax revenue. So we can make a very strong business case for this.

I mentioned some of the initiatives, whether it is housing, international, prevention, care and treatment. One other initiative, the minority AIDS initiative, which is a very important one, deserves double funding this year; and I want to associate myself with that aspiration, bringing it up to over \$500 million.

The observance of this occasion for us is not only a time to remember and celebrate the lives of loved ones we have lost, it is an opportunity to measure our progress and renew our commitment to ending the HIV/AIDS pandemic. That must include sufficient funding in the budget, leadership in the fight against AIDS in the developing world, and access to health care for all Americans who are living with this disease.

Two young people become infected with HIV in this country every hour, and there are 11 new infections worldwide every minute. The figures that the gentleman from Illinois (Mr. DAVIS) used were that around 450,000 people have died in the U.S. of AIDS, 22 million worldwide. We must do more to protect this new generation from suffering. That is all too familiar to previous generations.

Mr. Speaker, I call on my colleagues to work with us to increase the funding, to improve the quality of life, to end the scourge of AIDS.

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

(Mr. DEFAZIO addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

#### HEALTH CARE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2001, the gentleman from New Jersey (Mr. PALLONE) is recognized for 60 minutes as the designee of the minority leader.

Mr. PALLONE. Mr. Speaker, once again this evening, as we are back from the Memorial Day break, I would like to take up the issue of health care. As my colleagues know, I have been down here with many of my Democratic colleagues many times over the last few months since the session began and since this new administration began in January, basically speaking out on three major health care issues that have not been addressed, in my opinion, by the President and the Republican leadership in the Congress, and that is the need to reform HMOs and the need to pass a Patients' Bill of Rights that would reform HMOs.

There are so many problems that people now have with their HMO or their managed care organization in not having proper access to care, not being able to go to the hospital of their choice, not being able to, if they have a grievance, have an independent review of the decision by the HMO to deny them care; and I will get into this more this evening.

The second issue is the need for a Medicare prescription drug benefit. When I go home, and I was home for the last 10 days in New Jersey, my seniors and my constituents complained more about the high cost of drugs and how they cannot pay for prescription drugs and that it should be included in Medicare. I agree, and that needs to be addressed.

The third issue is access for the uninsured. More Americans every day have no health insurance. Most of those are working people, and we need to find ways to address those concerns and have them insured and covered for their health care.

My point tonight, and I would like to yield now to some of my colleagues,

but my point tonight is that we really face, I hope, a different situation tomorrow here in the Congress, here in Washington, because of the change in the other body, in the Senate. I have watched over the last 4 or 5 months, and during the course of the campaign, President Bush mentioned many times that he was going to pass a Patients' Bill of Rights and reform HMOs, that he was going to have a prescription drug benefit, that he was going to address the problem of people who do not have health insurance. Yet over the last 4 or 5 months of this administration, these issues have not come to the floor, they have not been moved in committee in either House. The Republican leadership, in conjunction with the Republican President, have simply dropped the ball on these issues.

I was heartened to find that during the break with the changeover in the Senate to Democratic control tomorrow, that the leaders in that body, the Democratic leaders in that body have said that the first order of business when they come back next week most likely, next week is going to be to move the Patients' Bill of Rights in the other body, and that that will be followed soon with these other health care issues.

So finally now we may have an opportunity to get legislation passed, at least in the other body, on some of these issues by the Democrats that will come over here and force the hand, I hope, of the Republican leadership here and the Republican President.

With that, Mr. Speaker, I would like to yield to the gentleman from Rhode Island (Mr. LANGEVIN).

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Mr. LANGEVIN. Mr. Speaker, I am pleased to rise and join my colleague, the gentleman from New Jersey (Mr. PALLONE) on this important topic.

Mr. Speaker, I rise to address in particular the skyrocketing price of prescription drugs, which is making this essential component of our Nation's health care system inaccessible to those who need it most.

Older Americans, who make up 13 percent of the U.S. population, account for 34 percent of all prescriptions dispensed and 42 cents of every dollar spent on prescription drugs. The average Medicare beneficiary fills 18 different prescriptions per year.

Obtaining prescription drugs is a clear necessity for our senior citizens. Yet, the annual spending per capita in the Medicare population for prescription drugs has jumped from \$674 in 1996 to \$1,539 in the year 2000, and is expected to climb to over \$3,700 in 2010.

Overall, prescription drug prices rose 306 percent between 1981 and 1999, while the Consumer Price Index rose just 99 percent during that same period. In the year 2000, total spending in the U.S. for prescription drugs was \$116 billion, more than twice the \$51 billion spent in 1993. That amount is expected to triple to \$366 billion by 2010. These escalating prices can and must cease.

For every dollar that a consumer pays for a prescription drug at the pharmacy, 74 cents goes to the drug manufacturer, 3 cents goes to the wholesale distributor, and 23 cents goes to the pharmacy. In 2000, pharmaceutical companies had after-tax median profits of 19 percent, compared with 5 percent for all other Fortune 500 companies combined.

While I recognize the importance of researching and developing technological advancements that have helped numerous Americans, and of course we all want to see this continue, I know drug manufacturers do not need such astronomical profits to ensure continued research.

Mr. Speaker, let us face facts: most core research for prescription drugs is funded through NIH. In addition, pharmaceutical companies dedicate more than 18 percent of revenues to profits and 30 percent to marketing and administration, compared with just 12 percent to research and development. In fact, the 12 drug companies with the highest revenues spent three times as much on marketing as on R&D in 2000.

Mr. Speaker, access to prescription drugs is critical to the survival and maintenance of an accessible quality of life for millions of our senior citizens. As we know, Medicare does not offer any prescription drug program, and most seniors have found that the Medicare+Choice program has not provided the kind of opportunities Congress thought it would.

As a result, today at least one in three people in the Medicare population have no drug coverage at all in the course of a year, and nearly half have no coverage for at least part of an entire year. These Medicare beneficiaries spend on average 83 percent more for their medications than those with drug coverage. Moreover, almost half of Medicare beneficiaries without any form of prescription drug coverage have incomes less than 175 percent of the poverty level. That means they had incomes of \$15,000 in 2001.

That, Mr. Speaker, is why we need to require drug companies to give local pharmacies the best price they give their most favored customers, or the average foreign price, and reinstate the requirement for reasonable pricing on products that were researched and developed using taxpayer money via NIH.

Moreover, we need to authorize the Federal government to buy drugs in bulk and at a discount for Medicare beneficiaries.

And most of all, we must provide a Medicare prescription drug plan. While the administration's budget includes \$153 billion over 10 years to provide for prescription drug coverage and Medicare reforms, this plan falls far short of a comprehensive drug coverage program.

The 4-year Immediate Helping Hand proposal provides block grants to the States to help low-income seniors purchase prescription drugs, and then an unspecified Medicare prescription drug

benefit is to be developed, along with Medicare restructuring.

According to the administration's own cost estimates, adjusted by CBO's projections of drug inflation, covering only the low-income population's prescription drugs would cost over \$200 billion, almost \$50 billion more than what has been provided in the budget.

Furthermore, the Immediate Helping Hand program would deny eligibility to about 20 million Medicare beneficiaries, most of whom lack affordable, dependable prescription drug coverage.

For instance, under the administration's plan, an 85-year-old widow with an annual income of \$17,000 would receive no assistance with her prescription drug costs. Now that we have passed what I believe is an irresponsible and partisan budget, providing the kind of comprehensive and effective drug benefit our seniors need appears to be next to impossible.

Mr. Speaker, I urge my colleagues not to forget our seniors, and to not neglect the American public, who is counting on us to follow through on a promise that was made by Democrats and Republicans alike to provide a quality prescription drug plan for Medicare beneficiaries.

Mr. PALLONE. Mr. Speaker, I want to thank my colleague, the gentleman from Rhode Island, for his statement.

If I could just mention two things that he brought up, which I think are so crucial, the whole issue is affordability. Prescription drug affordability is really of the utmost importance to seniors and to people with disabilities.

This is what I have heard back at home the last 10 days, the last week or so, that seniors that have major financial problems with purchasing their necessary medications, they have to choose between paying the rent or buying food, and it is basically because of growing out-of-pocket expenses. Even people that have some sort of limited coverage because they are in an HMO or because of some kind of benefit they received on the job that they get in their retirement are finding that the out-of-pocket costs just continue to rise exponentially every year.

We have done a number of studies with the Committee on Government Reform with the gentleman from California (Mr. WAXMAN) in various States, in various congressional districts, that have shown that drug manufacturers engage in widespread price discrimination, so that seniors are paying significantly more for their drugs than they would if they were in another country.

I want to thank our colleague, the gentleman from Rhode Island (Mr. LANGEVIN), for what he brought up. I think it is so important.

I know our colleague, the gentleman from Maine (Mr. ALLEN), has a bill called the Prescription Drug Fairness Act or Fairness for Seniors Act that would link the price to the average farm prices in certain countries. Maybe he might discuss that.

I yield to the gentleman from Maine (Mr. ALLEN) to have him talk about that. I know he has other health care issues to bring up as well.

Mr. ALLEN. Mr. Speaker, I thank the gentleman from New Jersey (Mr. PALLONE) for yielding to me, and I thank particularly our friend, the gentleman from Rhode Island (Mr. LANGEVIN), for coming here tonight and speaking on this particular topic.

We really have built strong support on the Democratic side of the aisle for the discount, which would be about 35 percent for all Medicare beneficiaries in the cost of their prescription drugs reflected in the bill that I have sponsored, the Prescription Drug Fairness for Seniors Act. Also, we know that seniors ultimately need a Medicare prescription drug benefit, not a private insurance company prescription drug benefit. That is really the choice that is presented between the Democratic side of the aisle and the Republican side of the aisle.

If I could say a couple of things, I guess I want to go beyond the prescription drug issue for a moment and talk about Medicare generally. The American public has every reason to feel a bit confused because in the last election there was all this talk about prescription drug coverage for seniors, and there has been talk for years about Medicare reform. The question always is, what is contained in those little words "Medicare reform."

Well, today there is breaking news, Mr. Speaker, on health care, breaking news on Medicare. I guarantee the Members, it will not be on the evening news, it will not be covered on the front page of any newspaper tomorrow, but still, it is breaking news.

It comes in a story by Robert Pear in the New York Times this morning. The headline is significant: "Medicare Shift Toward HMOs Is Planned." So the question is, planned by whom? Well, planned by the Bush administration. Now at last we can see a little more clearly what this administration is up to when it comes to Medicare.

There are many people on the Republican side of the aisle who have never liked Medicare because, after all, it is a government health care program. It takes care of our seniors. It has been there since 1965. It was put in place because in 1965 only one-half of all of our seniors had any health insurance at all. Medicare stepped in where the private insurance industry simply would not provide coverage to our seniors. It has been a success. It is there in every State. It is equal. It is trusted by our seniors. It is respected by our seniors.

Well, the President has appointed and the Senate has confirmed a new administrator of the Health Care Financing Administration, the organization that runs Medicare. His name is Thomas Scully, and he made his first speech, significantly, at the United States Chamber of Commerce.

Here is what he said: "The government is better in the long run when it

is a buyer of insurance, rather than an insurer." What did Mr. Scully mean by that? He meant that it would be better for our seniors to have private insurance than it would be to be under Medicare, under a Federal health care plan.

Let us look at some of the facts. I am interested in this because the program that allows some, about 14 or 15 percent, of our seniors to get their Medicare benefits through a private insurance company has a name. It is called Medicare+Choice. What that Medicare+Choice refers to is coverage that will be obtained through HMOs.

Now, this is wonderful, I suppose, in a few places in this country, particularly in our big cities, because there we may have several competing plans that are there to try to provide more choices to seniors, and in some big cities in this country it works, with an exception which I will note later.

But in my home State of Maine, we do not have a single, not one, HMO providing insurance for our seniors. We did last year. We had one company which had about 1,700 beneficiaries. Two of them were my parents. But the insurance company decided it could not make money in Maine, and so it pulled out. My parents had to go looking for another supplementary health care insurance, causing all sorts of confusion and upset.

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Well, what is happening across the country? Medicare, I would note, Medicare does not pull out of a State when it is not making money, but private insurance companies do.

In fact, in the last 3 years, managed care plans have dropped more than 1.6 million Medicare beneficiaries; 1.6 million beneficiaries dropped. Why? Because the company could not make money off them, could not make money in a particular area, could not make money off some of our seniors who are sicker and need more help than others.

Now, until Mr. Scully was chosen and confirmed as the administrator of the Health Care Financing Administration, Medicare officials have historically professed to be neutral. They have said we are not taking sides between traditional Medicare fee-for-service, which is there for about 75 percent of all Medicare beneficiaries, and the 15 percent who get their coverage through an HMO. They are trying to, over the last few years, the goal has been, under the Clinton-Gore administration, to make sure that there was a level playing field.

But as I said, that has all changed. That has changed because Mr. Scully has made it perfectly clear that the government is better in the long run when it is a buyer of insurance rather than an insurer. In other words, traditional Medicare that Americans have come to rely on and respect and depend on because they know the benefits will not change every year, they know Medicare will not pack up and leave a

State when it is not making money, that system is now under attack from the administration.

Because what Mr. Scully wants to do is he wants up to 30 percent of elderly patients in managed care by 2005. That means we have to reverse this trend of managed care companies simply dropping people. But it is far more significant than that.

Mr. Scully, I suggest, has not done his homework. Why do I say that? Because he does not yet understand that these managed care plans cost more than traditional fee-for-service Medicare. As Dave Berry says, I am not making this up, it is right here. In a GAO report published in August of 2000, this is a review of Medicare+Choice plans. This is a review of how managed care is working in Medicare. Here is the title, "Payments Exceed Cost of Fee-for-Service Benefits, Adding Billions to Spending." Adding billions to spending.

What the GAO did was to do a comparison between traditional old fee-for-service Medicare and these new health maintenance organization managed care plans for our seniors. They make the point, the GAO makes the point that Medicare+Choice was designed to expand beneficiaries' health plan options, and it was supposed to improve Medicare's financial posture by better controlling spending growth.

Well, lately, the industry has been saying over and over again the payments that we get that the health insurance industry gets under Medicare+Choice plans are too low. We cannot make money. That is why we are dropping people in Maine and all across the country.

Well, the GAO looked at 210 of the 346 Medicare+Choice plans that were in operation in 1998. These plans enrolled 87 percent of all beneficiaries in Medicare+Choice plans. What did they find? I quote, "Medicare+Choice, like its predecessor managed care program, has not been successful in achieving Medicare savings. Medicare+Choice plans attracted a disproportionate selection of healthier and less-expensive beneficiaries relative to traditional" fee-for-service Medicare, "while payment rates largely continued to reflect the . . . costs of beneficiaries in average health."

Here is the key, this is a quote right out of the GAO: "Instead of paying less for health plan enrollees, we estimate that aggregate payments to Medicare+Choice plans in 1998 were about \$5.2 billion . . . or approximately \$1,000 per enrollee, more than if the plans' enrollees had received care in the traditional" fee-for-service program. "It is largely these excess payments, and not managed care efficiencies, that enable plans to attract beneficiaries by offering a benefit package that is more comprehensive than the one available to FFS," fee-for-service, "beneficiaries, while charging modest or no premiums."

What does that mean? It means that traditional fee-for-service Medicare is

cheaper, \$5.2 billion in 1998 alone for 15 percent of the elderly population. Fee-for-service is cheaper than Medicare managed care. So those managed care beneficiaries in this country who are getting prescription drug benefits are getting it, not because the managed care company is saving money, they are getting it because the managed care company is getting more money over and above what it would get for traditional fee-for-service beneficiaries. It is out of that money that the additional benefits are coming.

We are making a huge mistake in this country because we have devised a system through Medicare+Choice which is going to drag the insurance industry into Medicare, will provide our seniors with less effective and fair and beneficial services at a higher cost to the taxpayer.

Now we have the Bush administration stepping up and saying, what we really need in this country is more health insurance companies taking over Medicare. Mr. Scully is wrong. Fee-for-service Medicare, traditional Medicare works. What our seniors need is a system that is reliable and predictable and stable, something they can count on. They do not need insurance companies changing the benefits, reducing benefits one year, raising premiums the same year, pulling out of a State because they are not making enough money.

Medicare needs reform, but it does not need to be taken over by HMOs. That is what, in his first major speech, Mr. Scully of the Health Care Financing Administration is saying is his goal for Medicare, to turn it over, to turn more and more of it over to our insurance companies. If he succeeds in doing that, our seniors will be worse off than they are today. Our taxpayers will be worse off than they are today. But the health insurance industry will be making more money and their stocks will be higher than they are today. That is what this is all about.

At the end of the day, what Mr. Scully is suggesting is not the best system for our seniors, it is not the best system for consumers, it is the best system for the health insurance industry. That is what it is about. Those who gave money in the past election campaign will get their reward if this administration can succeed in undermining, changing our Medicare system that seniors have grown to depend on, and turning it over to private industry to make more money, more profits than ever before. It is abomination.

This Congress, if we do nothing else, has got to stop this administration from taking Medicare apart and turning it over to the private sector.

I have gone on some period of time. This is an issue I care deeply about. I certainly want to thank the gentleman from New Jersey (Mr. PALLONE) for holding this event this evening and allowing all of us to come forward and express our views.

Mr. PALLONE. Mr. Speaker, I want to thank the gentleman from Maine

(Mr. ALLEN) for what he said this evening. I think it is so important. I am amazed because I watched the Republican leadership and the Republican President, and it just seems sometimes I think that they are motivated, as the gentleman said, just because of special interests. In other words, the health insurance companies give a lot of money to their campaigns, so they want to support them.

Other times, I think they are just stuck in this sort of right-wing antigovernment ideological cloud of some sort, that they are just not thinking about what is practical. They just think anything that the government does has to be bad because ideologically they do not believe in the government.

So when we have a good program like Medicare, traditional Medicare fee-for-service that works as effective and is actually saving money is a bargain, they do not want to use it, they want to tear it down. Whether it is their ideology, which I think is very backward, or it is the special interest money they are getting from the insurance company, the bottom line is they are just not being practical.

If my colleagues remember last session in the previous Congress, the House Republican leadership tried to establish what they call a prescription drug-only insurance policy. In other words, rather than expanding Medicare and have a guaranteed benefit under Medicare for prescription drugs, they wanted to give people money so they can go out and buy a prescription drug-only policy which, again, harkens back to this ideology that government and Medicare cannot do the job.

The insurance companies came before the various committees of jurisdiction and said, well, we do not want you to do that. We are not going to sell you that insurance. We had an example in the State of Nevada which basically did that, Republican-controlled legislature, that passed a bill and said, we will give you money, you go out and buy these drug-only policies, and nobody would sell them. So for the life of me, I cannot understand what they are up to.

The same thing, as the gentleman from Maine said, with the HMOs. The HMOs we know are getting out of the Medicare business. They are either dropping seniors, or they are increasing out-of-pocket cost for prescription drugs so that the prescription drugs are unaffordable even for seniors that have the HMO.

Why in the world would we want to go out and encourage HMOs as the way to address the need for prescription drug benefit? Why in the world would we want to suggest these insurance policies that only cover prescription drugs? I have not heard much about that in this Congress. I guess maybe they dropped that; although I am sure there are some out there that still want to do that.

I mean, what the Democrats have been saying is that we want Medicare

to be expanded to include prescription drugs as a guaranteed benefit, universal benefit. When I go and talk to my seniors in New Jersey, they are not interested in this low-income benefit because most low-income seniors get some kind of drug benefit if they are covered by Medicaid. And in a lot of States now, not all, but many States have expanded coverage to cover the low income even a little bit above Medicaid, as is the case in New Jersey.

The problem, though, is for the middle class, the middle-class senior who does not get Medicaid, is not covered by their State program because their income is a little too high or they do not have a State program, and at the same time cannot get a decent HMO policy that is going to cover their prescription drugs.

So when the President says that he wants to do this low-income benefit, I think he calls it the helping hand, immediate helping hand, and it establishes block grants for States to provide for prescription coverage for some low-income seniors and some seniors with catastrophic drug costs, he would limit full prescription drug coverage to Medicare beneficiaries with incomes up to 35 percent above the poverty level, which is \$11,600 for individuals, \$15,700 for couples, and seniors with out-of-pocket prescription spending of over \$6,000 per year.

Again, this is not the problem. The middle-income senior falls above that \$11,000 for individual, \$15,000 for couples in most cases, and they do not have the out-of-pocket catastrophic expenses of over \$6,000 per year. Most seniors are not going to benefit from this, even if it got passed.

I do not even see any movement on the part of the Republican leadership in either House or the President to move this anyway, so I do not even know why I am talking about it, because he talks about it during the campaign, but I do not even see an effort to move that.

Hopefully with the Democrats now in the majority starting tomorrow in the other body, in the Senate, we will now see a decent prescription drug benefit move, get passed in the other body, and come over here where we can try to persuade the House Republican leadership to take it up.

Let me just, Mr. Speaker, if I could give a little indication of what the Democrats here in the House and in the other body would like to see as a prescription drug benefit. We have certain principles that we have been espousing.

First of all, this prescription drug benefit must be part of Medicare. Medicare works. It is cost effective. Let us include a guaranteed benefit for those who want it under Medicare.

Secondly, it should be voluntary, just like one opts and pays a premium so much per month for one's doctor bills, for one's coverage of one's doctor bills, expenses. We would have this be a voluntary program where one pays a certain premium and one gets one's prescription drugs.

Thirdly, the Democrats have been saying that the prescription drug benefit for seniors has to be affordable. Obviously, the premium has to be fairly low per month. One cannot be expected to pay a significant amount of money out of pocket when one goes and gets each individual prescription.

It goes back to what my colleague from Rhode Island was saying about affordability for seniors. I also think it is important that this benefit be defined. In other words, Medicare beneficiaries, regardless of where they live, should be guaranteeing access to a defined drug benefit at the same standard premium.

□ 1945

You know, people have to know that the prescription drugs they need are included in the program. This is what the Democrats have been talking about.

And we also want to build into our proposal an end to price discrimination. We talked a little before about the bill of my colleague, the gentleman from Maine (Mr. ALLEN); about how he wants to link the price more towards that charged in other countries that are developed countries like the United States. There are ways of dealing with the price discrimination issue, and that is certainly one of them.

Another is to basically have the government, through benefit providers in each region, purchase and negotiate prices for the drugs so that we are getting volume discounts. That is certainly another way to try to deal with the price issue. This has got to be done.

I was home again last week, for the last 10 days, and this is what our seniors are talking about. We need to take it up. Hopefully, now that the Democrats are in the majority in the other body, they will send a bill over here; and we will be able to pressure the Republican leadership here in the House to take up a prescription drug bill that helps all Medicare recipients.

Now, I wanted to talk, if I could, Mr. Speaker, before I conclude this special order this evening, about two other health care issues which I mentioned at the beginning of this special order, and one of them, because of what is happening in the Senate, in the other body, is likely to move even quicker than a prescription drug benefit. And that is fine, I would like to see these important health care issues and this legislation get over to the House as soon as possible, and that is the Patients' Bill of Rights, or HMO reform.

Again, when I talk to my constituents, regardless of age, about HMOs, because many people in New Jersey are in HMOs and they have become very concerned because many times they are denied the care that they think they need. Either they cannot go to a particular hospital in an emergency, they cannot get access to a specialist, or they are denied a particular operation or procedure because the insurance company, the HMO, says that it is too innovative. What they really mean is it is too expensive and they do not want to pay for it.

The two issues that I think are so important with HMO reform, and which are addressed in the Patients' Bill of Rights in sort of a general way, is the definition of what is medically necessary; who is going to define whether an operation, a procedure, a hospital, a stay in a hospital is necessary; is it going to be the insurance company, which wants to save money; or is it going to be the patient and the physician. Because, after all, you and your physician care about your health.

Basically, what the Patients' Bill of Rights does is to say that in general that decision is made by the physician, the health care professional, and the patient, not by the insurance company. They are the ones that that decide what is medically necessary.

The second is if someone has been denied care, the HMO says they cannot have a particular procedure, they have to leave the hospital, what then does that individual do; how do they redress their grievances; where do they go. Now, unfortunately, in many cases, they can only go to the HMO, who have said, no, we made that decision and too bad. We want a procedure which allows an individual to go to an independent board outside the HMO that has the power to overturn that decision or we want to be able to go to court as a last resort.

Now, let me just talk about some of the little more specific although still general points about the Patients' Bill of Rights and the real Patients' Bill of Rights. And I do not want to put him on the spot, but I see one of my heroes over here on this issue, the gentleman from Iowa (Mr. GANSKE), and he along with the gentleman from Michigan (Mr. DINGELL), a Democrat, and this is really a bipartisan effort because there are some Republicans that support this bill, a lot of them frankly, but, unfortunately, not the leadership in the Republican Party, have put together a bill called the Dingell-Ganske bill, or the Ganske-Dingell bill, which is the real Patients' Bill of Rights that I would like to see and that most if not all Democrats would like to see passed.

Just to give you an idea of some of the principles that are in here, first of all it has to protect all patients with private insurance, not just some. Some of the Republican bills only protect certain types of people. All patients with private insurance. There has to be the ability to hold the plans accountable, which I discussed. There has to be a fair definition of medical necessity, which means that it has to be up to the physician and the patient to determine that.

There has to be guaranteed access to specialists, access to out-of-network providers. If there is not someone available who can handle a patient's situation, they can go out of the network.

There also has to be a prohibition on improper financial incentives. The HMO cannot encourage the doctor to deny care or not provide certain care

and get some sort of financial incentive to do so. There has to be access to clinical trials. There has to be a prohibition on gag rules. In other words, some of the HMOs say that the doctor cannot tell a patient if they need a particular treatment in his or her opinion because it is not covered. So if it is not covered and he or she thinks a patient needs it, they are not allowed to tell because the insurance company will not pay for it. That is ridiculous.

Emergency room access if it is needed. If something happens, an individual has a heart attack, they have an accident, that that person can go to the nearest emergency room rather than go to one 50 miles away and die or become seriously injured on the way. And the list goes on.

What I am fearful of, and I guess I am a little less fearful now that the Democrats are in the majority in the other body, is that even though President Bush said he would support a Patients' Bill of Rights and said in fact that he would support a Patients' Bill of Rights very similar to what they have in the State of Texas, he has essentially said that he opposes the Dingell-Ganske bill, which in the other body, the Senate, is sponsored again on a bipartisan basis by Senator MCCAIN and Senator KENNEDY. The President has been variously quoted over the past few months saying this bill that so many of us support in the House and in the other body is too costly and that he would veto it.

He said his primary objection to these bills currently in the Congress is that they do not contain reasonable caps on damage awards against health insurance organizations or insurance. He wants to have caps, and not very high caps in terms of the amount of money that a person can recover if they go to court. And then he has other concerns; that he does not like the particular court that should be allowed to sue under the Dingell-Ganske bill.

The point of the matter is, Mr. Speaker, that the President and the Republican leadership in both bodies have been fiddling with this issue for the past 4 or 5 months. They say they are for a patients' bill of rights, but they do not articulate exactly what they want. All they do essentially is say they do not like the bill that most of us support, the Dingell-Ganske bill. I am hopeful now that the other body becomes Democratically controlled tomorrow, that as the new majority leader, Mr. DASCHLE, said, this is going to be on the agenda probably next week.

Now, if and when it passes over in the other body and it comes over here, that will allow us to pressure—

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mr. ISSA). It is not in order in a debate to specifically urge the Senate to take certain actions, and the gentleman will be aware of that.

Mr. PALLONE. Mr. Speaker, I was not aware, and I will not cite that again.

The point I am trying to make, though, is that we really need a good Patients' Bill of Rights. I suspect I am going to be hearing more about it later this evening from my colleague, the gentleman from Iowa (Mr. GANSKE), and I think I will stop with that particular issue for now.

I did want to spend a little time tonight, though, talking about the problem of the uninsured, the number of people who are uninsured. That number continues to grow and needs to be addressed as well here in the Congress.

Mr. Speaker, I see one of my colleagues, who has been very active on the health care issue, and who is a member of our health care task force on the Democratic side, is here; and I would like to yield to him at this point.

Mr. RODRIGUEZ. First of all, Mr. Speaker, once again let me thank the gentleman for his efforts in the area of health care. As the gentleman mentioned, the problem that we encounter now is with the uninsured, and that number continues to grow. We have over 44 million uninsured.

I think that one of the dilemmas we face as we look throughout this country, there are hardworking people that are not poor enough to qualify for Medicaid, not old enough to qualify for Medicare, and yet find themselves working for small companies that do not give them an opportunity to have access to insurance coverage. And I can attest to the gentleman that if someone is not working for government or a major corporation, they do not have any access to health care. So that we have a real dilemma, because we do provide it for the indigent, we do provide it for the elderly to some extent, but when it comes to those working Americans out there trying to make ends meet, we have a difficulty in terms of providing access to health care.

There is a real need for us to come to grips with that issue. We have not done that in the past, unfortunately, and we need to do so. We are hoping that the administration can start moving in this direction as they dialogued about the issue of health care during the campaign. We hope they will come up to meet those promises that they made on health care and the uninsured, not to mention those that are insured but who are what we call the underinsured, the ones that have access to some degree but yet do not have full coverage, such as prescription coverage.

I know that the gentleman has covered the issue of prescription coverage, but I just want to keep mentioning it because we need to keep that issue on the forefront. It is an issue that continues to be one of the key issues in America and it is one of the problems that we were elected to respond to and we have not yet done so. We are hoping that we will begin to cover that.

When we look at prescription coverage under Medicare, there is no doubt that when we devised Medicare, from

the very beginning, that at that point they did not see the importance of prescription coverage. We know now that prescription coverage is key for access to good quality care. We know the importance of that, and so we need to look at that issue. And the responses that we have before us from the administration have not been adequate.

There is only one State that has tried it, and it has not been that successful, and that is because our seniors are the ones that utilize prescriptions the most. That is where the private sector will make the less amount of profit in any area, and so it is an area where we all need to participate and make sure that we can help out when it comes to prescription coverage. It does not make any sense for us to make the diagnosis, to find out that they are in need, when we do not provide them the prescriptions that are needed to be able to cover some of those needs.

The other thing that just does not make any sense is that we provide prescription coverage for Medicaid, for the indigent, yet we do not provide it for our seniors. So there is a real need for us to kind of come to grips on that issue of not only prescription coverage but the uninsured. I know there are a couple of proposals out there, and we are hoping that we can begin to go throughout the country to dialogue about the importance of health care in this country. The fact is, we still have a long way to go. We have not come to grips with these issues, and we need to get more pressure on the politicians up here to make some things happen.

The only reason we had the Patients' Bill of Rights the last time, as the gentleman well knows, is because we decided to do a discharge petition that forced the Congress to have to deal with it. Because of that, I think we were able to make that happen, and we did pass a good bill. Unfortunately, it was killed during conference and so that did not materialize. So what is important now is that we have a new session, and we need to move forward in that area.

So I just wanted to take this opportunity now to thank the gentleman for what he has been doing on health care. I will be talking later on on the issue of AIDS, and I look forward to the gentleman's participation in that area.

Mr. PALLONE. Mr. Speaker, I want to thank my colleague from Texas. And I do appreciate the fact that the gentleman is going to spend the hour later this evening talking about AIDS and what we need to do further. There has been a lot of attention paid to the fact, and during the break over the last week I read a number of articles, about the increased incidence of AIDS, particularly amongst African American gay men; that there was just an incredible increase in the incidence of AIDS and HIV. People think that the crisis has subdued somewhat in the United States but it is still out there, and in many communities it is actually getting worse.

□ 2000

The other thing if I could, I am so glad the gentleman mentioned the uninsured, and I know that the gentleman has mentioned it many times and the need to address that issue.

Once again, I want to point out that even though the President talked about this problem during the campaign, I do not see any effort on the part of President Bush or the Republican leadership to address the issue.

One of the things that the President talked about was this idea of a tax credit. The basic design of the Bush plan was an individual credit of \$1,000 for those with an annual income up to \$15,000. That phases down to zero at \$30,000, and a family credit of \$2,000 with income up to \$30,000 that phases down to zero. That sounds good in theory to get a \$1,000 credit toward health care insurance, but it will not solve the problem of the uninsured.

First, I do not see the President trying to accomplish this. He talked about it during the campaign, but there is nothing happening. We do not see it moving in committee or any effort being made.

Beyond that, it is available only to those not enrolled in employer-sponsored insurance or Medicaid policy and available only to those who purchase nongroup insurance.

Basically we are talking about an individual who has to be able to afford to buy insurance in the private individual market, and that individual is going to get \$1,000 tax credit. That is not going to solve the problem.

Mr. Speaker, people who do not have health insurance, it could cost them \$5,000 or \$6,000 a year to buy a policy; and they are not able to shell \$4,000 or \$5,000 out of pocket because they are going to get a \$1,000 tax credit when their income is somewhere under \$30,000 a year, basically under 15, and it phases down to 30. It is not going to happen.

This policy will not accomplish something. I do not want to be critical of something that is being proposed, I wish it would move; but what needs to be done is to expand the number of people that can get health insurance through some of the government programs.

Mr. Speaker, we looked at the problem of the uninsured in our task force, and the biggest group were children and the second group was near elderly, people over 65 but not eligible yet for Medicare. We tried to adjust the problem of the children through the CHIP program, and that basically provides health insurance at government expense and it has been great. It has enrolled millions of kids around the country that did not have health insurance.

Now you have to expand that program to the adults. In other words to households, to the adult parents, if you will, of those children, to other people in those lower-income brackets that are working but are not eligible for

Medicaid regardless if they have children. That is the type of thing that should be done: expand on the CHIP program to include the parents, and even include single people who cannot afford to buy health insurance in the private individual market and are not going to be able to do it with a \$1,000 tax credit. That is what the Democrats have been proposing. I do not see any movement in that respect.

The other thing that the Democrats have said, with regard to the near elderly, the people between 55 and 65, is that they be able to buy into Medicare for a standard premium every month or every year. That is another way of trying to address that problem.

But if we keep getting hung up on the ideology that the Republicans and the President have that everything the government does is not good, and the only answer is to throw a tax credit here or there, we are not going to cover any more of the uninsured. That is my fear right now.

I know that we have other things to get to tonight, and certainly the AIDS issue is super-important.

Mr. Speaker, I do want to say in conclusion, these health care issues, we as Democrats are going to continue to bring up frequently over the next few weeks because we do want to see action, and we are not seeing it on the part of the Republican leadership or the President.

#### TAX CUTS AND PATIENTS' BILL OF RIGHTS

The SPEAKER pro tempore (Mr. ISSA). Under the Speaker's announced policy of January 3, 2001, the gentleman from Iowa (Mr. GANSKE) is recognized for 60 minutes as the designee of the majority leader.

Mr. GANSKE. Mr. Speaker, I want to talk a little bit tonight about two issues: first, about the tax cuts that passed the House and the Senate just before Memorial Day recess; then I will talk a little bit about the patients' bill of rights.

Mr. Speaker, I remember in early 2000, it was before the Iowa caucuses, it was cold, I remember, and I was traveling around the State of Iowa, my home State, with then-Governor Bush.

We had spent the morning together, and then returned to Des Moines where he was going to address the Des Moines Chamber of Commerce and give a major address on cutting taxes.

So Governor Bush asked me if I would sit in and listen to him give his speech in preparation. There was just myself and one staffer. We were at the Marriott Hotel in Des Moines, and they had the rest of the doors closed off. Then-Governor Bush practiced his speech. I sat there listening to at that time Governor Bush lay out his tax cut plan.

Afterwards the Governor invited me upstairs and we had a hamburger together, just the two of us. Then-Governor Bush asked me, Well, what do

you think? Well, we had been through here in the House a major tax cut bill not too long before that. It was in the range of about \$790 billion, and President Clinton had promised a veto of that bill. In addition, we were doing that tax cut not in the context of a budget plan, and certainly not in the context of how much we were going to reduce the national debt.

Once President Clinton declared that he was going to veto that tax cut, then it gave free rein to every Member of this House and the other body to add every piece of special-interest tax cut legislation they could to that bill. It became what we would call here in Washington a Christmas tree on which Members could hang every little piece of special-interest ornamentation, with the full realization that in the end there would be no harm because the President said he was going to veto that bill.

Mr. Speaker, sure enough, the final project, the bill, it was full of special-interest provisions. And so in the light of that, when then-Governor Bush asked me over our cheese burgers what I thought of his bill, I said, I think it holds together. You do it in the context of reducing some debt, providing for some educational funding, and it will be okay. But my one piece of advice would be keep it free of all of those special-interest perks and special-interest items that got added to the last bill we dealt with. Focus on eliminating the marriage penalty tax. Focus on killing the death tax. Focus on reducing rates and make it a progressive cut. And if you handle that, if that is what the bill is, and it does not have all of these special-interest perks, then I think the American public is going to be happy with it.

Then-Governor Bush said I assure you, I will do everything in my power if I am elected President to make sure that we do not load that bill up with a bunch of special-interest provisions that expand that Tax Code out, little pieces of tax legislation that act for individual families or individual businesses. We will work to keep that out and keep it clean. You know what, Mr. Speaker, that is what we did.

Now, I would be the first to admit that I have not read every single line of that tax cut. To be quite frank, unless you have the whole Tax Code with you and can reference things, it is difficult to read and understand what every single sentence means. But I do know that a whole bunch of people have been looking at that tax cut, the one that we just passed, and the one that this week the President in a Rose Garden signing ceremony is going to sign into law.

There was a report in the New York Times just a few days ago that said they could only find one item that was a special-interest item in the Tax Code, and that was a repeal of a prior special-interest item for JCPenney. So the

only thing that I am aware of that anyone has found that was a special-interest piece of legislation in this was a repeal of a prior piece of special-interest tax legislation.

I think, Mr. Speaker, that is a remarkable accomplishment. I think it is remarkable the leadership the President showed on this issue. This is a victory for him; but more importantly, it is a victory for the American taxpayer because clearly with the amount of surplus that we have projected, surplus taxes, it is reasonable to return some of that to the American people; and it is reasonable to fix certain inequities in the Tax Code.

It is unfair that for a couple who is living together but not legally married, that when they decide to formalize that relationship and they get married, that they should end up paying more taxes than if they just filed separately. We fixed that in this bill.

I have hundreds if not thousands of small businesses in my district, which is Des Moines, Iowa, and southwest Iowa, that are going to benefit from the provisions on killing the death tax.

There are thousands of people in Iowa, and I think millions in the United States, that when you add in the fact that we are reducing the bottom rate from 15 percent to 10 percent, that we are doubling the child tax credit, that we are allowing for increased deductibility in pensions, they will find that they are not going to pay any Federal taxes, and they are also going to get a rebate this year; and I think that is good for the economy, too.

Mr. Speaker, I am looking forward to that Rose Garden signing ceremony, and I am also looking forward to flying back to Iowa with President Bush to hold a rally on exactly this tax cut. I think it is really important to my State and to the country. I think it is important because it helps restore consumer confidence. It will get some funds, needed funds, back into people's pockets and it sets up tax reductions that people can make plans, financial plans on for the next 10 years.

Mr. Speaker, I feel privileged that I was able to participate in a very small sense with the President when he was running for the Presidency, and on the very day that he gave his tax cut talk. And I feel privileged also that I will be able to spend this coming Friday with the President when he returns to my home State to talk a little more about this tax cut.

□ 2015

Mr. Speaker, I want to talk a little bit about the need for a patients' bill of rights. If you will remember, Mr. Speaker, a number of years ago, there were a whole bunch of jokes and cartoons about HMOs. If you look through a magazine like *The New Yorker* today or other magazines or even watch some of the late night shows, you rarely see or hear HMO jokes anymore.

I remember a few years ago when this joke was going around. There were

many variations on it. You had three people who died and went up to heaven and they were waiting at the pearly gates. One was a nurse, one was a doctor and one was an HMO reviewer.

St. Peter asked the nurse, "Well, what did you do in order to gain access to heaven and pass the pearly gates?"

She said, "I took care of patients for 40 years. I counseled their families. I gave them all the loving care I could."

St. Peter said, "Enter."

Then he asked the doctor, a neurosurgeon, "What do you think you did to deserve entry into heaven?"

She said, "I got up in the middle of the night and I took care of some of the most horrific head injuries, frequently never got paid because many times those poor victims never had any insurance, but I didn't care because it was my Hippocratic oath duty to take care of those people who were injured."

St. Peter said to her, "Enter the pearly gates."

He asked the HMO manager, "And what did you do to merit entry into heaven?"

The HMO manager said, "I managed to save the company millions and millions of dollars by denying care. So it really helped the stockholders."

St. Peter looked at that person for a little bit and said, "Enter, but only for 3 days."

Now, that joke has had a lot of permutations, it is an old joke, probably most people have heard it, it is not even that funny anymore, because you knew the punch line.

Remember when Helen Hunt in the movie *As Good As It Gets* appeared with Jack Nicholson? She was talking about her son who had asthma and how her son was being denied necessary medical care. Then she went into a long string of expletives about that HMO. And I saw something happen I had never seen before. My wife and I were at a theater in Des Moines and people actually stood up and applauded. I had never seen that before.

Mr. Speaker, that movie today would not get the same response, because in order for something to be sort of funny or humorous, there has to be maybe a little bit of an element of surprise or a twist, something that catches you by surprise. Anymore, Mr. Speaker, it is hard to do a joke about HMOs because nothing is surprising anymore about the abuses or the denials of care that we continue to see year after year.

Back then, Mr. Speaker, a few years ago, 4 years ago maybe, people were seeing headlines like this from the *New York Post*: "HMO's Cruel Rules Leave Her Dying for the Doc She Needs."

Or here was a headline from a few years ago in the *New York Post*: "What His Parents Didn't Know About HMOs May Have Killed This Baby."

So this was all very topical as these stories of HMO abuses became known to the public. *Time Magazine* had a cover story on this. It was topical. It was the type of thing that you would see in *The New Yorker* in a cartoon, be-

cause this was somewhat new, it was new material, and there was something of a surprise. You could put a twist on it.

I remember a few years ago when the story came out about an HMO requiring same-day discharge, the so-called drive-through deliveries. That surprised people. They thought, that is awful, that is outrageous. And so you saw a cartoon.

Here is the maternity hospital. You have got the drive-through window, "Now Only 6-Minute Stays for New Moms." The hospital employee saying, "Congratulations. Would you like fries with that?" And you have got a mother, her hair all frazzled with the crying baby as they are driving the car through. Kind of funny but also not so funny. Today this would not be as funny and you would not see this so much, because it is not new. Everyone knows this.

Mr. Speaker, before I came to Congress, I was a reconstructive surgeon in Des Moines, Iowa. I took care of farmers who put their hands into machines. I took care of women who had breast cancer. I took care of a lot of children with cleft lips and palates and other craniofacial deformities that they were born with, like this baby here.

Mr. Speaker, in the last few years, more than 50 percent of the surgeons who take care of congenital deformities like this have had cases denied by HMOs because these are, quote, cosmetic cases. I think that is awful. But also, Mr. Speaker, I would say anymore it almost does not shock anyone to hear this, because people have known about this now for years. People are also wondering why Congress has not dealt with this for years.

This was a cartoon from a few years ago. Here we have a doctor in the operating room and we have the HMO bean counter next to him. The doctor says, "Scalpel." The bean counter HMO member says, "Pocket knife." The doctor says, "Suture." The bean counter says, "Band-Aid." The doctor says, "Let's get him to intensive care." The HMO employee says, "Call a cab."

Another cartoon from a few years ago. "Your best option is cremation, \$359 fully insured." And the patient is saying, "This is one of those HMO gag rules, isn't it, doctor?"

This was very topical a few years ago, because the news was that HMOs were telling doctors they could not tell a patient all of their treatment options without first getting an okay from them. In other words, I as a doctor could see a woman for a breast tumor, listen to her story, do an examination, but before I could sit down and tell her what her treatment options were, if I had a certain type of contract from an HMO, I would have to say, "Excuse me," leave the room, get on the phone and ask the HMO if it was okay if I told that patient all of her treatment options. That is clearly wrong. It was clearly news. That news generated this type of response.

A few years ago, we did a full debate here on the floor of Congress on the Norwood-Dingell-Ganske bill and actually brought to the floor this particular patient. A number of years ago, a young mother had about a 6-month-old son who was really sick in the middle of the night. He had a fever of about 104. Mom did what she was supposed to do. She phoned the HMO 1-800 number, got a reviewer on the phone, said, "My baby is really sick and needs to go to the emergency room. What should I do?" The reviewer said, well, take him to such and such a hospital. Now, Mom and Dad lived clear on the south side of Atlanta, Georgia. The reviewer told them the name of a hospital. The mother said, "Well, where is it?" The reviewer said, "Well, I don't know. Find a map." It turned out that the hospital was clear on the other side of metropolitan Atlanta. So Mom and Dad, not being medical professionals, wrapped up little James in a blanket, got him in the car in the middle of the night and started out for the designated hospital. In the process, they passed several emergency rooms, but they were not health care professionals, they were just average people without a medical background. They did not know exactly how sick he was, but they were following orders because they knew that if they had stopped at an emergency room that was not authorized, then the HMO would not pay for the hospitalization. They would be stuck maybe with thousands of dollars of bills. So they moved on.

Before they get there, the little baby had a cardiac arrest and stopped breathing. So imagine Dad driving frantically while Mom is trying to keep this little baby alive. They pull finally into the emergency room entrance. Mom leaps out of the car saying, "Save my baby, save my baby," a nurse comes running out, they get the baby resuscitated, they start the IV lines, they start antibiotics and they manage to save this little baby's life.

But because of that HMO's medical judgment over the telephone when they never examined the baby, they made a medical judgment. The judgment was that baby is well enough to go 50 miles. Instead of saying, "Take that baby to the nearest emergency room," they said, in essence, "Our judgment is, it's all right, you can take him a long ways." That was the medical judgment. That medical judgment by that HMO resulted in this. Yes, we saved James' life; but because of that cardiac arrest and the delay in treatment, he developed gangrene in both hands and both feet and both hands and both feet had to be amputated.

This little boy is growing up to be a fine young man. He sat right in this chair right in front of me during the debate. He is able to pull on his leg prostheses, and he can walk okay. He needs help to get his bilateral hook prostheses on. Sometimes he uses them and sometimes he does not. But he will never be able to play basketball, he

will never be able to touch the face of the woman he loves and marries with his hand. If he had a finger and you pricked it, he would bleed.

This little boy is not an anecdote. I hear a lot of opponents to the Patients' Bill of Rights saying, "Oh, you're just talking about anecdotes. We shouldn't legislate around here on the basis of anecdotes." Those anecdotes are real live people, if they survive the HMO care. And a funny thing is that under a Federal law that was passed 25 years ago, in situations like this where the insurance is from the employer, that health plan, that HMO, is liable, this is under a Federal law, is liable for nothing other than the cost of care denied, or in this situation the cost of his amputations. I would ask you something. I mean, is that justice? Does that set up a proper incentive for the HMO not to cut corners but to provide the necessary treatment right from the beginning so that you prevent cutting the corners so tight?

A judge reviewed this case. The judge said that this HMO's margin of safety was razor thin, quote-unquote. Razor thin. I would add to that as razor sharp as the scalpel that had to amputate little James' hands and his feet.

And so as cases like this became known to the public, they continued to spawn cartoons. Some of the cartoons were what I would say black humor. Let me give you an example. Here is a medical reviewer. Maybe it was the medical reviewer who was a thousand miles away for that little boy who I just showed you. The medical reviewer saying, "Cuddly care HMO. How can I help you?" The next one is, "You're at the emergency room and your husband needs approval for treatment? Gasping, writhing, eyes rolled back in his head? Doesn't sound all that serious to me. Clutching his throat? Turning purple. Uh-huh."

Down here. "Well, have you tried an inhaler?" The next one is, "He's dead?" And the next one is, "Well, then he certainly doesn't need treatment, does he?"

And finally the last one in the corner says, "People are always trying to rip us off."

□ 2030

I guess this young lady must have been trying to rip off her HMO. She was hiking about 70 miles west of Washington, D.C., with her boyfriend. She fell off a 40-foot cliff. She had a fractured pelvis, a broken arm, a fractured skull. Luckily, her boyfriend had a cell phone.

He pulled it out. They called an emergency number, got a helicopter to fly in. Here she is. She is strapped into a gurney about ready to be taken onto the helicopter. She is taken to the emergency room. She is treated in the intensive care unit for a month or so. She is semicomatose. She is certainly on significant doses of pain medicine.

What does the HMO do? The HMO refuses to pay her bill. Why? Well, be-

cause she did not phone ahead for prior authorization.

Now think about that for a minute. Was this lady supposed to be so clairvoyant that she knew she was going to fall off a 40-foot cliff so that she could phone ahead and let the HMO know? I do not think so, but that was their excuse for not paying her bill.

So it is real life stories like that that would generate a cartoon like this. This is the HMO Claims Department. The reviewer is saying, no, we do not authorize that specialist; no, we do not cover that operation; no, we do not pay for that medication. Then apparently the reviewer hears something, shakes her head and then she says, no, we do not consider this assisted suicide.

Well, as I said earlier, these are not just anecdotes. This is a family that was featured on the cover of Time Magazine a few years ago. This woman had breast cancer. Her physician recommended a certain type of treatment. So she went to a major, well-known medical center in the country and they were going to do it. They agreed, until they got a phone call from the HMO saying we do not think you should do that; that is very expensive treatment, and we will evaluate whether we continue our contract with your medical center.

So she did not get all the information that she needed. She did not get her treatment and, at least according to what was thought to be appropriate medical care at that time, she did not get the appropriate medical care and she died. Today, her little boy and her daughter and her husband do not have this young mother. She did not have the type of appeals process to handle a denial of care that was very likely inappropriate, at least for that time.

We want to do something about that. That is one of the reasons why we need to pass at the Federal level a patient bill of rights.

Now I am going to go into some detail on the Ganske-Dingell bill here that will come up here in the House, and its companion bill, the McCain-Edwards bill in the Senate, but before I get into all the details and they get a little bit dry, I think it is important for me to do them, to share the details with my colleagues, if any are watching. I think it is also important just to briefly go over some of the major issues of contention.

Number one, the opponents to our legislation say well, this will drive up health care costs. Now this is sort of an interesting criticism in light of the fact that in the last few years, the HMOs have increased their premiums very significantly, and it was not because of any patient bill of rights. It was because their shareholders said they needed more profit, and it was also because the cost of prescription drugs is going up a lot. We have seen premium increases, significant ones, in the last few years and it sure was not because of Congress passing a patient bill of rights. So do not believe all of that sky-is-falling stuff.

What would the cost of our legislation be? The Congressional Budget Office scored our bill. It would cost a total of 4 percent over about 5 years, and the major items of cost are not the liability at all, but the dispute resolution on internal and external review. In fact, the liability provision that would return responsibility to the health plans, fix something that Congress took away from the States 25 years ago, would cost a total of about .9 percent; that is .9 percent, less than 1 percent cumulative over 5 years. That amounts to the cost of about one Big Mac meal per month per employee.

In fact, that has been very, very close to the cost of the patient protection bill in the State of Texas, which our bill is modeled after, and which President Bush, on many occasions during the campaign, bragged about as saying that that patient bill of rights down there in Texas has worked just fine, and it has. We wrote our bill based on that.

So do not believe the exaggerated, hyperinflated, sky-is-falling claims on costs. Look at the HMO's claims with a bit of a jaundiced eye, particularly in light of what they have been doing with their premiums on their own, primarily for stockholder value.

Another major issue is, well, if the health plans are liable where should that liability be? Because Congress basically 25 years ago said, you are not liable for any of your decisions other than the cost of care denied.

Well, what we want to do is we want to build on a Supreme Court decision that basically says if it is a matter of medical judgment, then it goes to the State where it has been for several hundred years.

As a physician, I am liable for any malpractice under State law. I believe that an HMO, which is making medical decisions, should have that same responsibility.

Now there will be some who will say, no, let us have all of that liability on the Federal side of the ledger, not at the State level. My response to that is, well, number one, it is not a very Republican, and that is with a capital "R" idea. I always thought my party stood for States' rights and having responsibility closer to the people.

Take somebody in certain parts of Iowa and require them to go to a Federal court, and a long trip has been added, and a lot of expense. The same thing would go for Michigan or Nevada or other places. There is also such a thing as the tenth amendment to the United States Constitution, and that says that unless the Constitution has specifically given a power to the Federal Government, then the power should reside at the State level.

We have had that responsibility. It has traditionally been the responsibility of States to regulate insurance. In fact, we have even passed laws here in Congress like the McCarran-Ferguson Act to that extent, and we think that it should be that way also.

If all that case law was moved to the Federal side, it would be a usurpation and, I think, unconstitutional. It would also be something that the Federal judges are telling us do not do this. The Federal judges have seen some of these cases. They think that we should fix ERISA, the Federal law 25 years ago that took the jurisdiction from the States. They say move it back.

So when we look at this issue of Federal-versus-State jurisdiction, we need to look at a few questions: whether the proposed legislation is within the core functions of the Federal system; whether the Federal courts have the capacity to take on new business without additional resources or restructuring and the extent to which proposed legislation is likely to affect the caseload in the Federal courts; whether the Federal courts have the capacity to perform their core functions and fulfill their mandate for "just, speedy and inexpensive determination of actions."

I respect judges like Judge Pickering of Mississippi, the father of one of our colleagues, Congressman PICKERING. What Judge Pickering says is get this to the State level. That is where it belongs when you are talking about medical judgments. If you are talking about benefit decisions, then that is fine, leave it at the Federal level under ERISA so the plans can devise their own benefit packages, so that plans do not have to follow individual State mandates. But if you are talking about medical judgment decisions, it should be at the State level.

Here is what Judge Gorton in Turner versus Fallon Community Health Plan said in 1977:

Even more disturbing to this court is the failure of Congress to amend a statute, that due to the changing realities of the modern health care system, has gone conspicuously awry from its original intent.

Here is what Judge Bennett said in Prudential Insurance versus National Park Medical Center:

If Congress wants the American citizens to have access to adequate health care, then Congress must accept its responsibility to define the scope of ERISA preemption and to enact legislation that will ensure every patient has access to that care.

Here is what Judge Garbis in Pomroy versus Johns Hopkins said:

The present system of utilization review now in effect for most health care programs may warrant a reevaluation of ERISA by Congress so that its central purpose of protecting employees may be confirmed.

Here is the 1999 proposed long-range plan for the Federal courts. This is something that Chief Justice Rehnquist has been involved with. It says Congress should commit itself to conserving the Federal courts as a distinctive judicial forum of limited jurisdiction in our system of Federalism. Civil and criminal jurisdiction should be assigned to the Federal courts only to further clearly define and justify national interests, leaving to the State courts the responsibility for adjudicating all other matters.

In other words, do not give us an area of law that has traditionally, for 200-plus years, been at the State level.

In 1998, the year-end report of the Federal judiciary, Justice Rehnquist says this:

This principle was enunciated by Abraham Lincoln in the 19th century and Dwight Eisenhower in the 20th century. Matters that can be handled adequately by the State should be left to them. Matters that cannot be so handled should be undertaken by the Federal Government.

Why do the Federal judges not want this jurisdiction? Number one, it has never been in the Federal courts. It has always been in the States.

Number two, practically speaking, they do not think they can handle this. If one wants a speedy adjudication and a speedy determination to resolve a dispute, do not go to the Federal courts, believe me, particularly if they would like to avoid costly litigation, because it is lengthy and costly in the Federal courts and anyone who proposes moving all of this to the Federal courts is ignoring a fact in this country.

□ 2045

In the Federal courts, by the Speedy Trial Act of 1974 the Federal courts have to give priority to criminal cases. The criminal case filings were up 15 percent in 1998. This means that all of those drug cases that the Federal judges are charged to adjudicate come before anyone who has a problem on a civil case related to health care.

This was the situation in the Federal courts just a few years ago: they had 65 vacancies, 22 emergencies, 16 anticipated. It is more than that. We are going to have a big debate in the Senate about the appointment of Federal judges. But everyone agrees that the Federal bench is significantly understaffed, so the last thing that they need is for us to do something unconstitutional and move something that should reside at the State level. All of that.

I mean, are we in Congress going to rewrite all the statutes, the evidentiary rules on State tort and move it into the Federal courts? I know an awful lot of conservative Republican Congressmen who should have a lot of heartburn with that, because they know what certain Federal court jurisdictions which have been very liberal might do with this type of jurisdiction. It all goes to show, you had better be very, very careful what you ask for.

Mr. Speaker, in the remaining time that I have, I want to talk just a little bit about the bill itself, the Ganske-Dingell bill in the House, the McCain-Edwards bill in the Senate. This is not the same bill that we voted on in 1999. We made a good faith effort to come to some significant compromises with our opponents on this legislation. We used, for instance, exact language or modified language from a number of bills, including the opponents', the opposition bills, to try to meld a compromise on this piece of legislation.

There are some significant differences which I want to get into in some detail between the Ganske-Dingell bill and the Norwood-Dingell-Ganske bill that passed in 1999, but we still think this is a strong bill and a necessary bill.

With utilization review, we use language from the Norwood-Dingell bill. For prior authorization, we establish basic standards and time frames for the initial review of claims for benefits. We say that prior authorization determination should be made in a timely fashion according to the medical facts of the case. For normal cases, an insurer should respond within 14 days from the date the plan receives the information, but in no case later than 28 days. If an insurer requests information from a patient-provider, they have 5 days from the request to submit such information.

The bill ensures that requests for care are handled quickly. In instances where the insurer and the doctor disagree about a patient's treatment, the insurer must disclose the reason for the decision and inform the patient of the right to appeal that decision. You know what, Mr. Speaker? That language is adopted from the Nickles amendment in the Senate.

We then have a section on internal appeals, so that if a patient's doctor recommends a type of treatment, but then the health plan, the HMO, says, no, you have a certain procedure to go through in the plan to get a hearing, some due process. We used the language from the Nickles amendment there. This was a Republican Senator's amendment.

On external appeals, let us say that a patient is denied treatment they think is necessary and their doctor thinks is necessary. They go through an internal appeals process. The plan still continues to deny the care. Then we set up a way for the patient to go outside of the health plan to get an external review, an external appeal. We looked through all of the language, and we basically use language for our section 104 language that was adopted from the Nickles amendment.

In the access to care section, we say that the bill provides the right for individuals to elect a point of service option guaranteeing access to any doctor, regardless of whether or not that doctor is in the plan's network. But we say also that the patient would be responsible for the additional cost of that provision. In that instance we use language from the Norwood-Dingell bill.

But then we talk about emergency care. We say that the bill gives patients the right to go to the closest emergency room for an emergency room. Like that little boy. If this bill had been law, then those parents would not have needed to phone that 1-800 number. If they had, they could have still known that instead of going so far, they could have just taken that sick little baby directly to an emergency room. For our bill, the Ganske-

Dingell bill, we used language from the Goss-Coburn-Shadegg substitute that was debated on this floor.

We have a provision in there for access to specialty care, so that people can get access, can go to the appropriate specialist. We use language adopted from the Nickles amendment. We have a provision in this bill for access to obstetrical-gynecologic care and pediatric care, and we used language adopted from the Nickles amendment for that.

We have a provision on continuity of care. The bill would allow a patient who has an ongoing and serious medical problem to continue to see their provider, their doctor, for up to 90 days, in the event that that doctor is no longer with that health plan. We have specific protections for individuals who are pregnant or terminally ill or are scheduled to have surgery, and we use language adopted from the Nickles substitute for that.

We have access to non-formulary drugs. The bill provides a provision to allow doctors to prescribe a drug that is not on the health plan's, the HMO's formulary, when a non-formulary drug is medically necessary. That protection is very important for a lot of individuals who may have allergies to certain types of medications, who have tried the HMO's formulary drug, but have not had success; and we used language adopted from the Nickles amendment for that.

We have a provision that would allow access to clinical trials, so that patients would have greater access to certain clinical trials, patients with Parkinson's disease, Alzheimer's, cancer and other serious diseases that are life-threatening and for which no standard treatment is effective. Some in the consumer groups would like to see that provision expanded and made more broad, but we used language from the Norwood-Dingell bill for that.

We have a provision in the bill for women's health and for cancer protection, important provisions relating to women's health, that guarantee the women the right to have a doctor decide the appropriate length of stay, for a woman who has a mastectomy, for instance. Remember when the HMOs were saying gee, you can have your breasts removed as an outpatient? Well, I have done a lot of breast surgery, and I will tell you what, it is the rare patient that could tolerate that as an outpatient. Furthermore, it would be the very rare patient where I think that that would be safe. So we used language adopted from the Nickles amendment for that provision.

In fact, at least 50 percent of the language in our compromise bill is language from the Nickles amendment, the Republican Senate substitute that was debated 2 years ago. The same thing goes for access to information, information disclosure, language adopted from the Nickles amendment.

Now, one thing that we did keep from our bill was we have language to en-

sure that doctors are free to discuss all treatment options with their patients, and we used the language from the Norwood-Dingell-Ganske bill for that.

We have language that protects health care professionals from discrimination based on their license. We used language from the Nickles amendment.

We can go through a whole bunch of further issues, but I think it is important to talk about the liability provisions in the Ganske-Dingell bill and to share this, because there will be a lot of debate about this issue when this comes to the floor. This will come to the floor in the Senate either this week or next week, and I think it will probably come to the floor here in the House pretty soon thereafter.

Title III in the Ganske-Dingell bill applies standards to the Employee Income Retirement Security Act, ERISA. For self-insured health plans regulated by the Department of Labor, our bill would be both a floor and a ceiling. Let me explain that.

As under current law, States cannot place further regulations on ERISA-based health plans. A key attribute of ERISA is that it provides for a uniform set of rules for health benefit plans operating across several States. We think it should stay that way. Yet under current law, practicing health care professionals are subject to the varying laws of each specific state.

The new provisions of our bill strike a solid compromise, recognizing that employers should expect uniform rules for administrative processes, but that any "medically reviewable decisions" would be subject to State law, just as doctors are.

This new bifurcated Federal-State structure is a significant modification from the purely State cause of action that was in the original Norwood-Dingell-Ganske bill.

The original language did not change the current law remedy in section 502 of ERISA, but rather simply clarified that State causes of action were not preempted. The business and insurance community voiced concerns that this approach would inhibit their ability to administer a multi-State employee health benefit plan. By leaving suits involving benefit administration decisions in Federal court under section 502 in our current version in the Ganske-Dingell bill, employers and insurers will have relative uniformity for administering their health plans across State lines.

The first piece of the bill liability package adds to the existing Federal remedy under ERISA section 502. ERISA section 502 is amended to provide a cause of action in Federal court for a patient who has been injured or killed by a negligent denial of a claim for benefits that does not involve a medically reviewable decision.

Under this new Federal cause of action, a plaintiff may seek both economic and non-economic damages. By excluding medically reviewable decisions from the Federal remedy, group

health plans will only be subject to liability under section 502 for benefit administration decisions that cause harm or death. Those include decisions such as whether an employee is eligible for coverage, whether a benefit is part of the plan or other purely administrative contractual decisions.

Punitive damages are not allowed under the Federal cause of action. A civil assessment may be awarded upon showing clear and convincing evidence that the plan acted in bad faith and with flagrant disregard. Those are high standards.

This standard carries a high burden of proof and is consistent with State statutes. This standard ensures that a health plan will not be subject to these damages for simply making a wrong decision. A plan must show flagrant disregard for the health and safety of others. Before exercising that legal remedy, the patient has to exhaust both internal and external appeals processes. If the patient suffers irreparable harm or death prior to the completion of the review process, the patient or heirs of the plan can elect to continue the review process and the court can consider the outcome. That is from language adopted from the Goss-Coburn-Shadegg substitute that was debated on this floor 2 years ago and which received a lot of support from the Republican Members.

The second piece of the bill liability package amends ERISA section 514 to allow causes of action in State court for a denial of a claim for benefits involving a medically reviewable decision that causes harm or death to a patient.

□ 2100

Punitive damages are prohibited in cases where the plan properly followed the requirements of the appeal processes and followed the determination of an external review. However, as in the Federal cause of action, punitive damages are available in cases where there is a clear and convincing evidence that the plan exhibited a willful or wanton disregard for the rights and safety of others.

I want to ask my colleagues something: Do we want to vote for a bill that says if a plan exhibits willful or wanton disregard for the safety or rights of others that they should not have any responsibility? I mean, do any of my colleagues want to bring a bill to the floor that would say that if a tire explodes and people are killed and that company that made that tire showed a willful and wanton disregard for the safety of the purchaser, that they should not be liable? Well, I do not know about my colleagues, but I sure do not want to go home and campaign with that on my record.

In our bill, before exercising this legal remedy, the patient has to exhaust both internal and external appeals. But if the patient suffers irreparable harm or death prior to the completion of the review process, either

the patient or heirs or the plan can elect to continue the review process and the court can consider the outcome. But we do not want to pass a law that says that a plan can slow-walk an appeals process, delay treatment, make this thing go on and on, and then have the patient die in the meantime, and then be liable for nothing; at least I do not want to.

Now, the Norwood-Dingell bill removed the ERISA section 514 preemption of State law for all torts and allowed injured patients to bring a cause of action in State court for injuries caused by a medical decision or an administrative decision. Our new bill is different. Our new bill says, and it is a significant compromise, it limits the scope of actions that can be filed in State court to only those involving medically-reviewable decisions. That is a major compromise. We made this step towards the opponents to our bill.

This bifurcation of the remedy into a State component and a Federal component holds to the principles underlying ERISA. The existing Federal cause of action under ERISA affords health plans a set of uniform standards for making administrative decisions. That is what ERISA was intended to do. That is why it was originally designed to be a bill for the benefit of employees, not employers. However, when a health plan makes a decision that involves medical judgment, that plan, in my opinion, should be subject to the State laws, and recent Supreme Court decisions and the 5th Circuit decision upholding the Texas health plan liability would allow for the continued development of State laws.

Mr. Speaker, I will summarize here. There are a number of States that have passed health plan liability laws: Arizona, California, Georgia, Louisiana, Maine, Oklahoma, Tennessee, Texas, Washington. The Ganske-Dingell bill, the McCain-Edwards bill recognizes that. The bills that would move all liability into Federal courts would preempt those States. We provide a floor; they preempt.

Finally, let me just say a word about the employer protections, because we have a significant compromise in this bill from the last time around. The last time around we said an employer could be liable if they exercise discretion or authority; and the business community said, we think that that standard is a little loose, so we changed it. We use now a standard that was proposed by opponents to our bill last time that says, only if we directly participate can one be held liable.

Mr. Speaker, there are very few that do that. We have a big bill coming up for debate. I hope my friends and colleagues will look at this bill in detail.

#### AIDS EPIDEMIC

The SPEAKER pro tempore (Mr. ISSA). Under the Speaker's announced policy of January 3, 2001, the gentleman from Texas (Mr. RODRIGUEZ) is recognized for 60 minutes.

#### GENERAL LEAVE

Mr. RODRIGUEZ. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on the Special Orders of today.

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

There was no objection.

Mr. RODRIGUEZ. Mr. Speaker, today we mark the 20th year of the AIDS epidemic. On June 5, 1981, the Centers for Disease Control published a morbidity and mortality weekly report on the diseases which affect AIDS. I spoke at the rally this past Sunday.

Mr. Speaker, I yield to the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN).

Mrs. CHRISTENSEN. Mr. Speaker, I want to thank the gentleman for providing this hour for us to discuss this important issue and remember and look back over the 20 years since the first cases of then an unknown disease was being discovered.

The gentleman and I were fortunate today to be able to spend some time at a symposium in Washington that was sponsored by the Kaiser Family Foundation and the Ford Foundation to look back over those years to see how far we have come and how far we have yet to go. I want to take this opportunity to thank the Kaiser Foundation and the Ford Foundation for their work, the support that they provide to research, the support that they provide to community organizations and this country and around the world, to address this disease.

We also heard the gentlewoman from California (Ms. PELOSI) earlier talk about the people who preceded her and we mentioned today how fortunate we were as we came to Congress in 1997 to have the work of the gentlewoman from California (Ms. PELOSI), the work of the gentleman from Washington (Mr. McDERMOTT), Lou Stokes, and the gentlewoman from California (Ms. WATERS), and many, many others to build upon.

We have really seen a lot of wonderful advances in the last 20 years, but we still have a lot more that has to be done. We have seen the identification of what was then an unknown disease to advanced therapies that have transformed what was a death sentence to now what is almost a chronic disease. We have an improved quality of life for those who have been diagnosed with HIV. They can live comfortable and quality lives rather than just having to wait to die.

Mr. Speaker, I am going to turn this Special Order back to the gentleman from Texas (Mr. RODRIGUEZ), and I will join him again later at the conclusion of his comments.

Mr. RODRIGUEZ. Mr. Speaker, let me thank the gentlewoman from the Virgin Islands. I know that from the Black Caucus the gentlewoman has been working diligently, and as chairman of the Hispanic Caucus on Health,

I want to thank her specifically for the work that she has been doing on this issue and all issues on health, so I thank the gentlewoman. I look forward to continued dialogue.

Let me just make a few comments. We have other fellow colleagues that are here with us today, but I want to take the opportunity to just say that it is hard for me to believe that it has been 20 years, and as the sign back here says, "Twenty Years is Enough." Twenty years later, HIV/AIDS has taken the lives of close to 22 million people worldwide. It is hard for me to also believe that 15 years ago, I was in the Texas legislature listening to my fellow colleague denounce the spending money on AIDS prevention because of narrow bigotry. In essence, he would say, these people deserve it. I only mention that because thank God that we have really come a long way from that perspective, and I am proud to stand here today and see how far we have come, although we have a lot more to do.

I would like to recognize the countless individuals and organizations that are out there working on issues such as research on AIDS trends that affects new drugs, the advocacy groups that are out there working, the advocacy groups that are working for children with AIDS, the foundation activities that are raising awareness in the area of AIDS, the key components and the global effort in the area of AIDS. The Hispanic Caucus, the Black Caucus and the Asian Pacific American Caucus are working together to find solutions to specific communities of color also. As chairman of the Congressional Hispanic Caucus Task Force on Health, I have had the opportunity to work with many of my friends and colleagues on efforts to increase resources for AIDS prevention, education, and treatment. It affects the lives of the rich, the poor, the famous, the not-so-famous, the blacks, the browns, the whites. It affects all of us.

Let me take this opportunity, since we have some of our colleagues here today, to recognize them. We have two people from California, and I want to take the pleasure of recognizing the gentlewoman from California (Ms. SANCHEZ), who also sits with me on the Committee on Armed Services. I thank the gentlewoman for being here this evening, and I yield to the gentlewoman.

Ms. SANCHEZ. Mr. Speaker, I thank the gentleman from Texas (Mr. RODRIGUEZ), my fellow caucus member from Texas.

Mr. Speaker, AIDS is something that tends to be pretty foreign to people until it touches someone in your family. In my particular case, in 1990 I had a cousin, a very close cousin, who died of AIDS. This was a cousin that I used to visit every Sunday. In a Hispanic family we tend to be very, very close; and your cousins tend to be the friends that you have. The family is so large, you never have to go outside of the

family to find playmates and people that you hang out with.

This particular cousin used to do my hair at his own company, at his own salon. He was a successful businessman, not too far away from where I lived; and at one point he got sick. As AIDS progressed with him, I and many of the members of my family got to understand what it was like then to live under those conditions, and then for a society that really did not understand what HIV and what AIDS was about. You would think that in a Hispanic culture, we are a little afraid of things like this, we do not like to talk about these things, but one of the great things that I think my cousin had was an ability to come together and to help with the situation.

I had a cousin who was an outstanding member, who was a great family person but, at the same time, was a business owner. I saw him lose his business because he could not work; and because he could not work, he lost the business. I saw him lose his home. I saw him go, and we would take him to the hospital sometimes with some affliction, and I saw doctors who were afraid to treat him or would turn him down to treat him. I saw the red tape and what it took to get him into a hospital, to get him back on his feet. I saw a society that did not understand what was happening and refused to put the money and refused to treat somebody who had AIDS. I thought, you know, in that last year of his life, here is someone who is dying, and the thing that they should have most intact is a dignity about life. I saw a world that did not understand and did not want to treat him with dignity. That was in 1990.

Now, I am glad to report that just this past month, we in Orange County cut the ribbon on Emanuel House, a living house for 21 people who will come and live in an environment that will be a positive environment for those who have HIV or have AIDS. It is a great collaborative effort by homebuilders and by mercy housing and by one of the priesthoods there, Catholic priesthood in Orange County, to build this home in a neighborhood, in a family neighborhood in Santa Ana who worked with us and who welcome these new residents who will come to this beautiful, beautiful home called Emanuel House.

□ 2115

I have seen a change in the funding levels. I have seen a change in the breakthroughs that we have had for medicine for AIDS. I have seen even a change over the years in the walk for AIDS that happened this past Sunday in Orange County, where we had over 15,000 people participate to walk on Sunday morning, and where we raised almost \$1 million in Orange County, California, for research and for help on AIDS, to help these people who lose their jobs, who lose their homes, many who still lose their families. It is a very positive thing.

Probably the most negative thing that I have seen in the last few years with respect to HIV and AIDS is that the infection is growing highest and at an alarming rate in the Hispanic community across the Nation. In particular, women who believe they are in a monogamous relationship, i.e., they are married and they believe that they are okay, are the ones that we are seeing most often the rate going up in the rate of HIV, the HIV disease.

So we have more to do. We need to get information out, and many of the people who work on HIV and AIDS in Orange County are working on campaigns to get the information out to our minority communities.

I thank my colleague, the gentleman from Texas, for taking this hour. I think this is a very important milestone, but there is so much more to do still. I thank the gentleman.

Mr. RODRIGUEZ. Mr. Speaker, I thank the gentlewoman from California for her comments. There is no doubt this is an area and issue that confronts our community.

The gentlewoman mentioned disproportionately how it hits the Hispanic population. There is no doubt that we represent 13 percent of the population, yet we represent more than 20 percent of the new cases. So I want to thank the gentlewoman for being here tonight.

I yield to the gentlewoman from California (Ms. WOOLSEY), and I thank the gentlewoman for being here tonight.

Ms. WOOLSEY. Mr. Speaker, I thank the gentleman from Texas for yielding to me, and for putting this all together. He has done us all a great favor this evening.

Mr. Speaker, 20 years ago, HIV and AIDS was thought to affect only gay, white men. Time has proved otherwise. We now know that HIV and AIDS does not discriminate. It reaches out to men, women, and children of all ages in every social and economic group of every race and in every country in the world.

I live in Petaluma, California. A good friend of mine was the first woman to die of AIDS in Sonoma County 10 years ago. I can remember when the subject of AIDS first came up 10 years before that. She and I had lunch together, and we were sitting and talking, and trying to figure out actually what this disease was and how to prevent it, and why it was spreading so rapidly around the country.

Twenty years ago, people afflicted with HIV-AIDS had little or no chance to enjoy a good quality of life. Thankfully, scientific research has led to successful life-prolonging therapies, but the epidemic is far, far from over.

I am proud to represent a district that is committed to fighting the spread of the HIV virus. Marin and Sonoma Counties, the two counties just north of San Francisco across the Golden Gate Bridge, have one of the Nation's highest incidences of HIV/

AIDS. But these counties provide comprehensive services for people living with HIV/AIDS. They have consistently pushed forward aggressive public policy initiatives such as the needle exchange programs.

The boards of supervisors in both Marin and Sonoma Counties passed needle exchange regulations and acceptance when it was illegal in the State of California.

Advances in treatment, coupled with effective public policy, remind us that good things happen when government and the public health community work together, and when education is made abundant so that people understand what they are up against, what the challenges are, and what prevention must be taken.

Today we must recall the lessons we have learned in the 20-year-long fight against HIV/AIDS, and pledge to build upon that knowledge to take us forward, not backward. The treatment of HIV/AIDS has changed, but its fatal consequences have not.

It is time to reeducate our Nation. A new generation faces the threat of HIV/AIDS, a generation that never knew the devastation that this disease creates. We must not allow them to repeat the mistakes that contributed to the rapid spread of HIV/AIDS in the first place.

Nor can individuals currently receiving HIV/AIDS therapies believe that their medications are in any way a cure. That challenge still awaits us. Until then, we must exercise every precaution to slow the spread of this disease.

As we debate HIV/AIDS policy and funding, we must be motivated by the many changes that still lie ahead. If we do, we will accomplish more in the next 5 years than we did in the last 20 years. And Mr. Speaker, we must, because lives depend on it.

Mr. RODRIGUEZ. Mr. Speaker, I thank the gentlewoman from California (Ms. WOOLSEY) for coming out here.

We have gotten so much interest that we have a good number of people out here, so I want to take this opportunity to yield to the gentlewoman from North Carolina (Mrs. CLAYTON).

Mrs. CLAYTON. Mr. Speaker, I thank the gentleman for yielding to me, and I thank my colleagues who organized this with the gentleman from Texas (Mr. RODRIGUEZ), who chairs the Hispanic Caucus Health Task Force, and the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN), the Chair of the Congressional Black Caucus Health Brain Trust. I thank the gentleman for organizing this very important special order on HIV and AIDS.

Mr. Speaker, this week is the 20th anniversary of the discovery of the virus. After 20 years, a vaccine is still not on hand, and 20 years later, the African American population is disproportionately affected by this virus.

Mr. Speaker, my colleagues have mentioned some of the devastating sta-

tistics: worldwide, 36 million people are now infected, and 21.8 million have died, including 3 million last year. Each year, 5.5 million new people are infected. That figure represents more than 15,000 victims a year.

However, I wish to focus on my State of North Carolina. According to figures from last year, North Carolina ranked 23rd among 50 States and the District of Columbia in terms of the number of AIDS cases. Most North Carolina HIV disease reports highlight the male population; 65.5 percent were African American, and 72.1 percent of them fell between the ages of 30 and 39 years of age.

The statistics from my district are even more unsettling. African Americans accounted for 87 percent of cases reported in my district in 2000. I will let the Members know that African Americans only represent 50.6 percent of my district.

I have spoken with many people who presently are suffering from HIV/AIDS, as well as health care providers, case-workers, representatives from community-based organizations in my congressional district. I have heard moving testimony about the lack of resources to adequately address this public health crisis. There is a great need to focus on prevention and accessible and affordable treatment.

According to a recent article in the New York Times, while AIDS no longer makes the Federal government's list of the 15 leading causes of death in the United States, it is the leading cause among African Americans ages 25 through 35. HIV infections are rising more among heterosexual women, particularly in the rural south, where Federal health officials say an influx of crack and the sex-for-drug trade is fueling the spread of the virus.

Treatment and prevention comes in all forms as fighting this disease takes a comprehensive approach. We know that HIV/AIDS has affected many people through the practice of those addicted to drugs exchanging used needles. We need to address the drug addiction problem. We need to focus on prevention of drugs. We need to have a needle exchange program that makes sense.

We need to give all American a healthy start so that risky behavior such as drug use and abuse and prostitution can be decreased. A decrease in this unhealthy and risky behavior can help prevent the spread of HIV and AIDS, and other STDs will also be diminished.

In the same article mentioned earlier, it stated that AIDS in this country is increasingly an epidemic of the poor, which means it is increasingly an epidemic of minorities. African Americans, who make up just 13 percent of the population, now account for more than one-half; 13 percent, but one-half of all HIV infections.

We need to get our churches involved. In the African American community, the church is the focal point.

We need to reach out to our citizens, regardless of how we feel about their sexual orientation or their background. Our churches need to employ a nonjudgmental approach so that it is easy for people in need to seek assistance from the church community. We cannot shut our doors because someone does something or looks in a certain way. Our churches should and must be in the vanguard in addressing this issue.

Twenty years after AIDS, we know that this is no longer a gay disease. We know it is not a disease that just affects an urban population. As the figures that I mentioned about my district in North Carolina demonstrate, this disease is affecting rural citizens in record rates without the appropriate infrastructure or resources to address it, particularly among African Americans.

I am hopeful that before the onset of a 25th anniversary of this devastating disease, a vaccine will be available and accessible. I am hoping that before the 25th anniversary occurs, the number of the newly affected will be greatly diminished. I am hopeful before the 25th anniversary occurs also that the worldwide pandemic of HIV/AIDS will have a death blow to far less individuals. We have already lost 21 million people to this pandemic. I am hopeful that good news indeed is on the horizon. I thank the gentleman for bringing this to the attention of the American people.

Mr. RODRIGUEZ. I thank the gentlewoman from North Carolina for being here tonight, and I thank her for the words she has said. As she talked about the fact that we have reached a point where it impacts a whole bunch of other people, one of the worst statistics to see is that minority children make up an astonishing 82 percent of the new AIDS cases. These are our children that are being hard hit.

I yield to the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN).

Mrs. CHRISTENSEN. Mr. Speaker, I thank the gentleman from Texas for yielding to me. It is great to see how many people are coming out to address this issue. It is the tip of the iceberg for the real concern and commitment that many of our colleagues, particularly those in both the Hispanic and Black Caucus, have to addressing this disease in our communities and really around the world.

I wanted to make mention of some of the things that have been said. The gentlewoman from California (Ms. SANCHEZ) talked about her family member. In these 20 years that have passed since the first cases were reported, there is hardly a family that has not been touched by this disease.

In those 20 years, over 750,000 persons have been diagnosed and reported with AIDS, and about half a million have died. These are all people who are brothers, sisters, wives, mothers. We cannot forget, as we look at the large numbers, that these are human beings that all have people who care about

them and love them, and are affected when they are infected.

The gentlewoman from North Carolina (Mrs. CLAYTON) talked about our rural areas. That is an area that needs some special attention, because a lot of the programs that we do have and have brought about in these 20 years address the larger urban areas, but our rural areas are left out. That is a challenge for us as we go into the next decade.

The gentlewoman mentioned the needle exchange. We talked about the fact that we went to the Kaiser Family Foundation and Ford Foundation symposium today, and one of the things that they report in their survey is that more than 58 percent of the people that they surveyed, a good statistical component that represents the American public, 58 percent supported needle exchange programs.

□ 2130

Because we understand that it does prevent the spread of AIDS; therefore it prevents sickness and death. Many studies have proven, I think, conclusively that it does not increase the tendency to drug abuse, and indeed it brings people into treatment further.

So I turn it back over to the gentleman from Texas (Mr. RODRIGUEZ).

Mr. RODRIGUEZ. Mr. Speaker, nobody knows this issue better than the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN), being a practitioner also. I want to thank her for her hard work.

Mrs. CHRISTENSEN. Mr. Speaker, as a social worker, the gentleman from Texas (Mr. RODRIGUEZ) has had a lot of experience with it as well. That is why we are glad to be able to collaborate with him on these and other health care issues.

Mr. RODRIGUEZ. Mr. Speaker, we are looking forward to working with the gentlewoman.

Mr. Speaker, I yield to the gentlewoman from Houston, Texas (Ms. JACKSON-LEE). She is a dynamic person, always on the issues, and we thank her for being here tonight.

Ms. JACKSON-LEE of Texas. Mr. Speaker, let me thank the gentleman from Texas (Mr. RODRIGUEZ) for his leadership, leadership of being chair of the Hispanic Caucus Health Committee, the work he has done. We have done work together on immunization and children's health issues. I thank the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN) who chairs the Congressional Black Caucus Task Force on Health.

It is important that we are here today. But I imagine that all of us would wish that we were not. I think, as evidenced by our message "20 years of AIDS is enough", it points to the fact that we are only here to be able to highlight the need for greater focus and emphasis and recognition that it is not my problem, it is our problem. It is not his problem or her problem, it is our problem.

I will try to focus on where do we go from here and some of the things and

the efforts that we have made collaboratively together. I am very proud to have joined the gentlewoman from California (Ms. LEE), one of the speakers that will come forward, and those of us on the floor of the House as we worked on issues like debt relief and also the Marshall plan.

But as we have done that, we are continuing to work and to talk about questions of prescription drugs or the issue of being able to provide generic drugs in a way that all people can have access to them.

Particularly, I want to note that this is a worldwide issue. Though we have highlighted the continent of Africa, knowing that 40 million children by 2005 will be orphaned by those who are HIV infected and will have died in sub-Saharan Africa, I also realize that this disease is spreading to India, it is spreading to China, some of the largest population centers in the world. If we were to take it back home, it is particularly devastating to note that women are the highest numbers of HIV infected, particularly African-American women and Latino women.

It is important to note that States where one would not think or would possibly begin to want to isolate States, so that is an urban problem versus a rural problem, there are over 50,000 reported AIDS cases in Texas alone. Over half of these are among blacks and Hispanics or over 50 percent of those with AIDS.

In my district in particular in Texas, African Americans represent a staggering 64 percent reportable HIV infections and 57 percent of the total cases diagnosed in 2000. Even more frightening statistics is the fact that 84 percent of the adolescents with reportable HIV infection are African American.

Women represent an estimated 30 percent of new HIV infections in the United States and a growing share of newly reported AIDS cases each year. In 1986, women accounted for 67 percent of the new AIDS cases. By 1999, women accounted for nearly a quarter of all AIDS cases in this country. Worldwide, women account for 42 percent of all AIDS cases which is nearly triple the number 10 years ago. Although African Americans and Latinos represent less than a fourth of all women in the United States, they account for more than a third of all reported AIDS cases. Women in the 18th district of Texas and throughout Texas have not escaped the epidemic. The percentage of Texas women with AIDS increased from 14.3 percent to 15.4 percent just between 1997 and 1999.

It is important just to lay these particular issues on the table because I hope that, as we emphasize 20 years of AIDS is enough, again I say that we focus on where do we go in the future.

What we have tried to do, Mr. Speaker, is to talk about prevention and to break down the barriers that keep people from understanding what AIDS is and how it can be prevented.

So in my community, let me applaud a number of initiatives by Magic 102, a

radio station. With their general manager, we have created a whole series of sessions or fares or programs or efforts throughout the community to focus on testing, HIV testing. Have you been tested? Therefore we are going around the community focusing on, encouraging people to be tested privately, of course; and we are doing that in conjunction with the City of Houston health department.

I want to thank Dr. Kendricks and Marilee P. Brown for acknowledging and declaring Houston as an emergency center, an emergency crisis, if you will, regarding AIDS about a year ago. Out of that, the consciousness of people in the community have been raised up to begin to talk about it in the religious community as well as throughout the community.

Our churches are engaged in talking about how do we prevent the infection of HIV/AIDS, because we are finding that it is being promoted or it is being encouraged by economic, cultural, legal and religious factors where people have no control of it.

About a quarter of all women report postponing medical care due to barriers such as sickness or lack of transportation or lack of health care. It is tragic to know that research, prevention efforts, education, substance abuse treatment, and prevention programs need to be targeted towards women, especially African-American and Hispanic women. So we need culturally sensitive programs. The same thing in India and China as it moves throughout the world, culturally sensitive programs.

When we went to Africa, one of the issues that we discussed in Zambia and Uganda was programs that related to the culture of Africans so that they would be eager to come and find out information.

When I was in Botswana just a few weeks ago, we found a center where a gentleman living with HIV/AIDS was the chief spokesperson and outreach coordinator. He was able to speak to his fellow Botswanans about the importance of prevention, but also testing and removing the shackles and the barriers from that. Clearly, much remains to be done to fight the disease, and many look to African-American leaders in Congress for this guidance.

A New York Times columnist recently demanded that the so-called leaders of the black community, the politicians, the heads of civil rights organizations, the preachers step forward and say in thundering tones that it is time to bring an end to this destructive behavior.

Let me answer that by saying we are all collectively standing up in the fight. What we must do is collaborate with government to be able to have the resources and create the research and have the CDC continue to do its work along with the NIH on finding a cure for AIDS.

Our voices have risen, and we need to be listened to. In this Congress, as we

begin to appropriate dollars, as we appropriate the Ryan White treatment dollars, for all of us, we must ensure that those dollars will reach out to culturally sensitive organizations such as the Donald Watkins organization in Houston that responds to the needs of our particular cultural communities along with all of our others.

Let me close by mentioning a gentleman in my community that I pay tribute to as a symbol of someone who has lived with AIDS and fights it every day. David Swem in Houston, who is at 6 feet tall and a mere 122½ pounds has been able to fight AIDS, and he has been fighting it since his diagnosis in 1987 by taking 50 pills per day. That is overwhelming that that is what has to happen for people who are living with AIDS. That is why it is so very important for prevention and so very important ultimately to find a cure.

Might I also say, as noted by the gentlewoman from North Carolina (Mrs. CLAYTON), as chair of the Congressional Children's Caucus, there is nothing more devastating than an HIV-infected child or a child that has full-blown AIDS.

Nkosi Johnson in South Africa, a young man that we got to know some 2 years or so ago, recently died just a week or so ago, born with HIV from an HIV mother, transmitted through that HIV mother who could not take care of him, adopted by a loving South African woman.

Nkosi became the symbol of a precocious child who wanted to stand up and tell the world that he deserved dignity although he lived with full-blown AIDS. Children such as Nkosi should be enjoying a life filled with joy and laughter and happiness. Mandela said in a recent statement, "On a frightening scale, HIV/AIDS is replacing that joy, laughter and happiness with paralyzing pain."

Nkosi collapsed with brain damage and viral infections. But before that, in his short life, he contested the policies that kept HIV-infected children out of public schools in South Africa. He talked about his infection, challenging people to reexamine their fear of those inflicted with AIDS. He spoke at the World AIDS Conference in South Africa, woke our collective consciences up, and began to acknowledge that it was important to be able to fight this disease in dignity.

To Nkosi Johnson, in his loss, a South African child but a child of the world, I believe that it should be our tribute tonight that 20 years of HIV/AIDS, full-blown AIDS is enough.

So to the gentleman from Texas (Mr. RODRIGUEZ) and the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN), might I say that tonight, as we speak in acknowledgment of 20 years of HIV infection in this country and discovery of the AIDS virus, that we also commit ourselves, if we will, to continued legislative initiatives that collectively fights this devastating disease.

Mr. Speaker, I rise today on an occasion that perhaps none of us foresaw in 1981 and

certainly none of us welcomes now—the 20th year of the HIV/AIDS epidemic. Instead of the eradication of the disease, we continue to face 40,000 new infections per year, an increase in the disease among women, an infection rate at plague proportions in Africa and a possible upswing in the disease among gay men. It has left behind people such as David Swem at Houston, who at 6 feet and a mere 122½ pounds, has been able to fight AIDS since his diagnosis in 1987 by taking 50 pills per day. But he has lost about 300 friends to the disease. I will continue to cry out about this disease until it no longer exists.

More people have died from HIV/AIDS over the last twenty years than from any other disease in history—21.8 million people. In this country we have been able to slow the rate of AIDS' deaths, but the disease is at crisis proportions in sub-Saharan Africa, where four-fifths of those deaths have occurred—an average of one death every eight seconds. The Houston Chronicle reports that 95 percent of all AIDS cases are in the developing world, and that this strain of AIDS could cause a drastic explosion if it jumps to the Western world. More than 70 percent of all people living with the disease, or 25.3 million HIV-positive individuals, live in Africa. Over 10 percent of the population is infected in sixteen African nations. The U.S. Census Bureau calculates that by 2010, average life expectancy will be reduced by 40 years in Zimbabwe and Botswana, and in South Africa by 30 years. The disease destabilizes these nations by decimating its workforce, destroying any economic prosperity, depleting its military and peace-keeping forces and leaving thousands of orphans.

The epidemic is not limited to Africa. Indeed, the fastest growing front of the epidemic is now in Russia, where the number of new infections last year exceeded the total from all previous years combined. In 2000, the number of Russians living with HIV/AIDS skyrocketed from 130,000 to 300,000.

The statistics are alarming in this country as well. In its June 1, 2001 report, the CDC noted that AIDS in the United States remains primarily an epidemic affecting gay men and racial and ethnic minorities. Rates are high among minorities because factors such as high poverty rates, unemployment, and lack of access to health care form barriers to HIV testing, diagnosis and treatment. The CDC study also noted the alarming figure of an infection rate of 14 percent of young black gay or bisexual men, based on a study in seven cities.

There are over 50,000 reported AIDS cases in Texas alone, and over half of these are among blacks and Hispanics are over 50 percent of those with AIDS. In my district in Texas, African Americans represent a staggering 64 percent of reportable HIV infections and 57 percent of the total cases diagnosed in 2000. An even more frightening statistic is the fact that 84 percent of the adolescents with reportable HIV infection are African-American.

Women represent an estimated 30 percent of new HIV infections in the United States and a growing share of newly reported AIDS cases each year. In 1986, women accounted for 7 percent of new AIDS cases. By 1999, women accounted for nearly a quarter of all new AIDS cases in this country. Worldwide, women account for 42 percent of all AIDS cases, which is nearly triple the number ten years ago.

African Americans have been hardest hit women. Latinas have also been heavily affected. Although African Americans and Latinas represent less than a fourth of all women in the U.S., they account for more than a third of all reported AIDS cases.

Women in the 18th District of Texas, and throughout Texas, have not escaped this epidemic. The percentage of Texas women with AIDS has increased from 14.3 percent to 15.4 percent just between 1997 and 1999, 1999 being the last full year for which data is available. In my district, currently about 27 percent of new HIV infections are among African-American women. A staggering 82 percent of all HIV infections among women were in the African-American community. Similarly, 79 percent of the reported AIDS cases in women were among African-American women.

Despite these steady increases in HIV/AIDS cases among both women and children, funding for these groups has decreased. In FY1999, women and youth received 2.87 million in funding via Title IV of the Ryan White CARE act, and 2.72 million in FY2000.

Many factors exacerbate women's risk of HIV infection. Many women, particularly in areas such as sub-Saharan Africa, are especially vulnerable to HIV infection because economic, cultural, legal or religious factors may limit control over their lives and their ability to protect themselves from infection, or to gain access to treatment. About a quarter of all women report postponing medical care due to barriers such as sickness or lack of transportation.

What more needs to be done? Research, prevention efforts and education and substance abuse treatment and prevention programs must be targeted towards women, especially in the African-American and Hispanic communities. These programs should include research into female-controlled barrier methods, prevention efforts targeting young women, early comprehensive sex education and substance abuse treatment and prevention programs targeted to women.

We can also take an example from places such as the Thomas Street Clinic in Houston, the nation's first freestanding HIV/AIDS treatment facility. Thomas Street Clinic provides patients with access to a full range of services, including medical services, counseling, housing, job placement assistance and child care. This clinic is a model for our nation, particularly for providers in disadvantaged, urban and minority areas.

Clearly, much remains to be done to fight the disease, and many look to African American leaders in Congress for this guidance.

I am here to say that we are here, and we are pleading for an end to behaviors that lead to HIV/AIDS, for better health care, for more funding for research, treatment and prevention and for desperately needed social services for those whose lives have been upended by the infection. Congress cannot fight this disease alone, but we are firmly committed to the battle.

Mr. Speaker, I include the following article for the RECORD as follows:

[From the Washington Post, June 2, 2001]

NKOSI JOHNSON, 12, DIES; S. AFRICAN AIDS ACTIVIST

BOY BORN WITH HIV URGED OPENNESS

(By Susanna Loof)

JOHANNESBURG.—Nkosi Johnson, who was born with HIV and became an outspoken

champion of others infected with the AIDS virus, died Friday of complications of the disease he battled for all 12 of his years.

Nkosi was praised for his openness about his infection in a country where people suspected of carrying the AIDS virus often are shunned by their families and chased from their communities. Former South African president Nelson Mandela called him an "icon of the struggle for life."

"Children, such as Nkosi Johnson, should be enjoying a life filled with joy and laughter and happiness," Mandela said in a recent statement. "On a frightening scale, HIV/AIDS is replacing that joy, laughter and happiness with paralyzing pain and trauma."

Nkosi collapsed in December with brain damage and viral infections. His foster mother, Gail Johnson, said he died peacefully in his sleep in the morning.

"It is a great pity that this young man has died. He was very bold," Mandela said Friday.

During his short life, Nkosi successfully contested the policies that kept HIV-infected children out of public schools. He talked about his infection, challenging people to re-examine their fear of those afflicted with AIDS.

"He had an awareness of the threat to his life and the importance of his life in lessening the threat to other people with AIDS," Constitutional Court Justice Edwin Cameron, who is also infected with the virus, told the Associated Press in January.

Parliament passed motions Friday expressing regret and sadness at Nkosi's death, and the Congress of South African Trade Unions said Nkosi "inspired all people suffering from the disease."

Nkosi was born Feb. 4, 1989, with the virus that causes AIDS. His mother could not afford to bring him up, and Johnson became his foster mother when he was 2. Nkosi's mother died of AIDS-related diseases in 1997.

That same year, Johnson and Nkosi successfully battled to force a public primary school to admit him. The fight led to a policy forbidding schools to discriminate against HIV-positive children and to guidelines for how schools should treat infected pupils.

Nkosi became internationally known with a speech at the opening of the 13th International AIDS conference last July in Durban, South Africa, in which he asked that AIDS sufferers no longer be stigmatized.

Nkosi helped raise money for Nkosi's Haven, a Johannesburg Shelter for HIV-positive women and their children. He was crushed when a 3-month-old baby his foster mother cared for died of AIDS-related illnesses.

"He hated seeing sick babies and sick children," Johnson said.

The experience led to his speech at the AIDS conference, where he urged the South African Government to start providing HIV-positive pregnant women with drugs to reduce the risk of transmission of the virus during childbirth. About 200 HIV-positive children are born in South Africa each day, but most die before they reach school age.

A year later, the government is still studying proposals to use the drugs.

Johnson said Nkosi did more for AIDS sufferers in South Africa than anyone else.

"Nkosi wanted people to know that infected people, and especially children, deserve everything in the world," she said. "His legacy is that we will care for them."

Mr. RODRIGUEZ. Mr. Speaker, I thank very much the gentlewoman from Texas (Ms. JACKSON-LEE). I want to thank her also because I think she mentioned some real key issues. One of them deals with cultural sensitivity.

I recall back when we had some testimony regarding AIDS, one of the

things that was mentioned by one of the doctors was that she had a particular client that was told, and only knew Spanish, and was told that she was positive. She understood that as—(the gentleman from Texas spoke in Spanish). She went ahead and had children. One of her children would up with AIDS. The importance of cultural sensitivity and language understanding I think is key.

I want to thank the gentlewoman from Texas for the other comments that she made. One of the key things I think that is important also is to understand that this is devastating throughout all our communities, not only in this country, but throughout the world when we look at sub-Saharan Africa, when we look at the province in China, when we look at Brazil, when we look at the border in Mexico.

So it is a disease, it is a world disease. It is a disease that we need to go fight it wherever it is and that applies to all the infectious diseases, and that is very important.

Mr. Speaker, I yield to the gentlewoman from California (Ms. LEE) who is here with us, and we continue to get people that are coming in. I am real pleased to see the number.

Ms. LEE. Mr. Speaker, I rise this evening to join my colleagues to acknowledge the 20th anniversary of the first HIV/AIDS diagnosis in the United States. I first want to thank the gentleman from Texas (Mr. RODRIGUEZ), my fellow social worker, and the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN), our physician, who is leading this very valiant effort on behalf of the Congressional Hispanic Caucus and the Congressional Black Caucus, because I believe in unity that we will win. So I am very sober tonight and very humbled by the joint efforts that we are mounting. I want to thank them for their leadership in this.

Twenty years ago, the world learned about a new disease. All that was known then was that this disease destroyed the human immune system, and its ultimate outcome was unknown. Unfortunately, because this disease emerged in the United States primarily in the gay community, very little was done to curb the rate of new infections because, quite frankly, of political policies during the Ronald Reagan era. That is when we began to really wonder about this disease. But we did not do much then. We put our head in the sand.

Since then, we have learned that this disease could be transmitted through exposure to HIV-infected blood. We learned that transmissions were occurring through unprotected sex with HIV-infected partners. We learned that transmissions were occurring through blood transfusions where HIV-tainted blood products were used. We learned that exposure to HIV was occurring through shared needles and intravenous drug use. We learned that in the United States, poor minority communities were at a greater risk for new

HIV infections than the white community.

□ 2145

Ms. LEE. And we learned that this disease was a global pandemic. It is disproportionately affecting people of color, Latinos, African Americans. It is devastating the continent of Africa, the Caribbean, Latin America, and it is a ticking time bomb in many developing countries.

The most important lesson we have learned is that HIV can be prevented and it starts with breaking the silence. And once again I want to commend my colleagues for helping us do that once again tonight on the floor of Congress.

Now, in my district in Alameda County, California, HIV/AIDS has disproportionately affected the African American community. While the number of new diagnoses for virtually every segment of the population was declining, it was rapidly moving in the opposite direction for African Americans in Alameda County and also for the Latino community.

According to data provided by the Alameda Department of Health and Human Services in 1998, nearly 60 percent of the new HIV infections were occurring among African Americans, even though African Americans account for only 18 percent of the county's population. Of the new infections in Alameda County, a growing number of infections are occurring among women. Through a community-wide initiative, a state of emergency task force was formed, and on November 4, 1998, the Alameda County Public Health Officer declared a public health emergency on AIDS in Alameda County's African American community.

This designation led to Alameda County's designation by the Department of Health and Human Services as one of the 20 targeted metropolitan statistical areas and the disposition of a crisis response team to aid in this effort. And I would suggest to my colleagues in the Congressional Black Caucus and the Congressional Hispanic Caucus to challenge your counties to declare states of emergencies, because this is what we have on our hands and we should have nothing less than a formally declared state of public health emergency where this pandemic is wreaking havoc on our communities.

Also, because of this designation, several community-based organizations and AIDS service providers in my district have been awarded additional resources, not enough, but additional resources to assist them in bringing our local crisis to an end. In the 3 years since Alameda County declared a public health emergency, HIV and AIDS prevention efforts have been widely expanded, and it is working. Some of our community-based organizations are reporting that they are now able to reach many highly vulnerable populations, such as sex workers, the incarcerated populations, and youth to provide HIV and AIDS prevention and education.

The Highland Hospital and the Magic Johnson AIDS Clinic have expanded their care and treatment services, including providing lifesaving anti-retroviral treatments to people living with AIDS that were not receiving these treatment services because they could not afford them. They are now receiving them, and this has happened in the last 3 years. AIDS organizations and the county health department have been able to step up their surveillance efforts in order to have a more clear picture of who in Alameda County remains at high risk for contracting AIDS.

According to the Alameda County Department of Health and Human Services, in 1997, the risk for African Americans to contract HIV was five times higher as compared to whites. In 2000, that number has decreased to 4 to 1. This is slowly decreasing. And it is a positive sign, but it is not zero yet. And that is where we want it. Increases in funding for surveillance have showed that women account for 12 percent of all AIDS cases in Alameda County. However, what was not known was that the incidence of transmission of AIDS through heterosexual sex is 47 percent.

Now, this year, the administration's budget actually flat-funded our domestic HIV and AIDS programs, including the minority health initiative, which was led by the Congressional Black Caucus, and we put in many hours, many years of work under the leadership of the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN), and we must not let this be reversed back to the days when our heads were in the sand.

The United States must move forward, and we must not become complacent. We must increase funding for HIV/AIDS education and treatment programs, and we must advocate for the highest level of funding possible to address our domestic AIDS crisis. Yes, 20 years of AIDS is really enough. Let us wipe it out.

Mr. Speaker, I yield back and want to once again thank the Congressional Hispanic Caucus and the Congressional Black Caucus for again breaking the silence.

Mr. RODRIGUEZ. Mr. Speaker, I thank very much the gentlewoman from California (Ms. LEE).

Next, Mr. Speaker, I want to ask our District of Columbia representative (Ms. NORTON) to come over. I had the pleasure of being with her on Sunday on the lawn where we had a march that came in. We had several hundred people that came in, and it was a pleasure there being with the gentlewoman. I know that we had a large number of people trying to bring the news about the fact that 20 years is enough, and so I thank her for being here tonight with us.

Ms. NORTON. Well, let me first thank the gentleman from Texas (Mr. RODRIGUEZ), and I want to thank my good colleague as well, the gentlewoman from the Virgin Islands (Mrs.

CHRISTENSEN), for her leadership in bringing to the attention of the Congress and of bringing our two caucuses together to focus on where AIDS has spread and the changing face and color of AIDS.

I want to thank the gentleman from Texas especially for being at the Sunday 20-year celebration, because I think his speaking and my speaking made the point we are trying to make here, and that is that this disease has changed radically in 20 years and we are here this evening to make that point. I appreciate that there will be other Members, so I will, therefore, speak rapidly.

The theme of what I want to say is that after 20 years, we owe it to the almost million who have been infected in this country, almost half of them dead of the disease, to stress prevention over every other issue, because this is indeed a preventable disease. Members know the fight I have personally had in my own district just to get needle exchange, something that every scientific organization believes is an important way to prevent AIDS, especially since today 30 percent of the new cases are women. That is something that is radically different from 20 years ago. And these women, of course, are getting AIDS largely through infected drug transmission.

The fact that at a time when we need to be turning our attention to the developing world, and many of us in the Congressional Black Caucus, for example, have been working on AIDS in Africa because the continent is being devoured by the disease, the whole notion that we would have to turn back to teach some of the lessons of 20 years ago is absolutely heartbreaking. Parts of our community, particularly Hispanics and blacks, were never reached because they were never targeted. One of the reasons they were not targeted is because of the opprobrium that attended AIDS because it was seen as a homosexual disease.

In both our communities there is homophobia. And we in the Congressional Black Caucus and in the Congressional Hispanic Caucus have an obligation to stand against homophobia first and foremost so that people can come out and understand that this disease can be prevented and so that they can acknowledge the need for safe sex. But today we are having to teach the lessons to black and Hispanic gays that we taught, we thought, to white gays 20 years ago, because the lessons were not learned by them.

We have one of the best, indeed a world-renowned AIDS clinic here, the Whitman-Walker Clinic. It should be downsizing. Instead of reaching to white gay and bisexual men it is now having to reach to black gay and bisexual men. How heartbreaking it was to read that gay men in San Francisco, the most conscious gay population in the world, is having an uptick in the epidemic. These are white gays.

What this teaches us is that every 3 or 4 years we better teach the same les-

son. Because we have youngsters who were 13 then, they are 17 now, and they did not learn it then. We cannot assume that this lesson has ever been taught.

In the Congress, my colleagues know that we have been successful with the new treatments, and there may be some irony in that. It costs \$10,000 to \$12,000 a year per person. This is a preventable disease. That is not the best use for the health care dollars in our communities or in our country. We must teach the lesson of prevention so the health care dollars are not used for preventable diseases, but more often for many who suffer in our communities and our country from diseases we still do not understand.

We have been unwilling to get at the explicit nature of the education that needs to take place. This is a country that does not mind talking about sex very explicitly. We show sex, the sex act, to young children on TV in the daytime, but we will not talk about condoms, we will not talk about safe sex, we will not explain that to children. If we are not explicit about sex to teens, they are not listening to us. They get those messages from their media. They need to get it from us so that we can prevent this preventable disease.

Our goals, as we continue the fight 20 years later, are laid out for us. Upgrade the downgraded White House AIDS Office, search for a cure, search for a vaccine, get prescription drugs, get needle exchange, fight for hate crimes legislation, and for ENDA. But, above all, remember those who died before the message of safe sex was even understood, and remember those who died before there were protease inhibitors.

The only way to remember them is not simply by grieving for them, and tonight we do grieve for them, but by pledging to them that we will move to make sure that the 20-year anniversary is the beginning of yet another downturn in the prevalence of this disease and that we ourselves will lead the downturn by making that message clear not only in this Congress but in our own communities.

Again, I thank both of my colleagues for the service they have rendered the Congress and the Nation this evening.

Mr. RODRIGUEZ. I want to thank the gentlewoman once again. It was real exciting to be out there with those marchers that came in on Sunday. It was a great opportunity to participate and to begin to bring to light the fact that we still continue to fight on this issue. The Center for Disease Control has estimated that we still have over 900,000 people in the United States that are infected with AIDS.

I also want to take this opportunity to recognize one of my colleagues from Texas, the chairman of the Congressional Hispanic Caucus, and to thank him for his leadership in the caucus and for his being here tonight.

Mr. REYES. Mr. Speaker, I want to thank my colleague, the gentleman

from Texas (Mr. RODRIGUEZ), chair of the Congressional Hispanic Caucus Health Task Force, for all his hard work and leadership on this issue and other issues that affect his community and minority communities all across the country. The gentleman has demonstrated true passion and determination in ensuring that the health needs of Hispanics and all minorities all across the country are met.

In addition, I want to thank the gentlewoman from Texas (Ms. EDDIE BERNICE JOHNSON), the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN), of the Congressional Black Caucus, and the gentleman from Oregon (Mr. WU) and the gentleman from Guam (Mr. UNDERWOOD), of the Congressional Asian Pacific American Caucus, for their leadership and collaboration that has brought us here today to reflect on the importance of this date.

As chair of the Congressional Hispanic Caucus, I am here to commemorate the first reported AIDS cases in our country some 20 years ago. On this date, we not only remember those who have died and those whose lives are being affected by HIV/AIDS but also to continue to raise awareness about the devastating impact this disease has had on minority communities across the country.

According to the Centers for Disease Control and Prevention, AIDS has taken the lives of more than 21 million people around the world, including 450,000 Americans, since it was first diagnosed in 1981. An estimated 1 million Americans have been infected since the virus began spreading quickly in the early 1980s through unprotected sex, intravenous drug use, blood transfusions, and other workplace accidents.

I have heard others say that this deadly virus does not care about the color, age, gender or sexual preference of individuals. However from July 1999 to June of 2000, African Americans and Hispanics have accounted for nearly 70 percent of new HIV infections. The disproportionate effects of the virus among Hispanics and other minorities today continue to grow. Hispanics currently represent 20 percent of all new AIDS cases, even though we only make up 13 percent of the United States population.

□ 2200

Hispanics are the fastest growing segment of the U.S. population and the Centers for Disease Control report that HIV exposure risks for U.S.-born Hispanics and Hispanics born in other countries vary greatly, indicating a need for specifically targeted prevention efforts consistent with the values and beliefs of these communities. These include language-appropriate educational materials and health care professionals who have had training on the cultural factors that can make a difference in the treatment and prevention of this disease among Hispanics and minorities all across the country and the world.

The Congressional Hispanic, Black, and Asian Pacific Caucuses have responded to the need for targeted initiatives by collaborating to establish the Minority HIV/AIDS Initiative, which addresses the critical need for prevention and care resources in communities of color, where the majority of new AIDS cases are occurring.

Our caucuses, along with other policymakers, health care professionals and advocates will continue to work to increase Federal spending for HIV/AIDS programs, such as the Minority AIDS Initiative and Ryan White Care Act. I urge my colleagues to support the \$540 million request for fiscal year 2002 for Minority HIV/AIDS Initiative and other resources needed in the fight against this deadly disease. These resources must be dramatically increased to keep pace with the changing epidemic and to work toward the elimination of both the health disparities between ethnic and racial groups and the disease all together.

Again I thank my colleagues, the gentleman from Texas (Mr. RODRIGUEZ) and the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN).

Mr. RODRIGUEZ. Mr. Speaker, I thank the gentleman from Texas (Mr. REYES), who has been very instrumental in pushing for an additional \$540 million, and I thank the gentleman for taking the leadership. Both the Hispanic and Black Caucus will be holding hearings next week on this issue, and we will continue to move forward.

Mr. Speaker, tonight we have the distinct pleasure of having the gentlewoman from California (Ms. PELOSI). Today alone, over 100 colleagues joined the gentlewoman in her efforts to reintroduce the early treatment of HIV/AIDS.

We know that too many underinsured and uninsured Americans do not have access to life-saving medications. We need to eliminate the barriers to early drug therapy for vulnerable populations, and this legislation would give the States the option to add HIV/AIDS to eligible categories for Medicaid coverage. It is a very important piece of legislation.

Ms. PELOSI. Mr. Speaker, we have talked about early intervention, early intervention; and this legislation would enable this to happen.

Mr. Speaker, I rise as a member of the Asian Pacific American Islander Caucus in joining my colleagues and commending the gentleman from Texas (Mr. RODRIGUEZ) and the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN) for their leadership on this important issue.

This Special Order tonight represents the changing face of AIDS. When I came to Congress 14 years ago this week, thousands of people had already died in my district. It was largely a gay man's disease.

We tried to teach the rest of the country what we learned about prevention, care, and research. Some of the

legislation we are putting forth today is bearing the fruit of that.

I join the gentleman in putting forth the \$540 million request for the Minority AIDS Initiative. I do not want anybody to think that any minority access to AIDS is only to that pot of money. That is the entry level to the bigger pot of money. So it opens the door to all of the other billions of dollars that are available. It is necessary to have that door opening, and I thank my colleagues for that.

Mr. Speaker, I did have an opportunity to speak on the floor earlier today on this, but I wanted to commend the caucuses for their leadership on this; and I look forward to working with them as an appropriator and as a member of one of the caucuses, for increased funding, for improving the quality of life, and for ending this terrible pandemic.

Mr. RODRIGUEZ. Mr. Speaker, I want to ask the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN) if she would like to make any closing remarks.

Mrs. Christensen. Mr. Speaker, there is one area of the world which has been left out of this discussion tonight, and that is the Caribbean. It is second only to Sub-Saharan Africa in terms of the rates of HIV and AIDS. 35 percent of those infected are women compared to 23 percent in this country, and that number is rising. It is the leading cause of death between the ages of 15 and 44.

Mr. Speaker, of the United States territories in the Caribbean, both the Virgin Islands and Puerto Rico are in the top five in terms of incidence for AIDS. I want to make sure that the Caribbean is not left out of the discussion.

Mr. RODRIGUEZ. Mr. Speaker, I yield to the gentlewoman from Texas (Ms. JACKSON-LEE).

Ms. JACKSON-LEE of Texas. Mr. Speaker, I congratulate both of my colleagues for this outstanding hour. Mr. Speaker, I also want to congratulate the gentlewoman from California (Ms. PELOSI). When people hear numbers like 500 million, then begin to suggest exaggeration, this is a crisis.

I think it is important to note the leadership of Dr. Satcher, the U.S. Surgeon General, his leadership on this issue, and the Office of Minority Health; and it will be very important that the Secretary of Health and Human Services works with this team, the gentlewoman from California (Ms. PELOSI) and the gentleman from Texas (Mr. RODRIGUEZ) and the gentlewoman from the Virgin Islands and the rest of us on pursuing this effort in making sure that we have these funds to solve this problem. I simply wanted to say that.

I thank my local community as well, Ernie Jackson and others for their great leadership.

Mr. RODRIGUEZ. Mr. Speaker, I thank all my colleagues who have participated. It is an issue on which we all need to take ownership. It is about all

of us. It has an impact on all of us. It is throughout the world. If we have these kinds of dangerous, infectious diseases throughout the world, we need to go after them.

Ms. MILLENDER-MCDONALD. Mr. Speaker, today I rise to express my concern about the HIV/AIDS global pandemic. While this disease devastates the citizens of Sub-Saharan Africa, we also need to direct our attention to the rising numbers of HIV/AIDS cases in the U.S. Today, Mr. Speaker, in addition to accounting for more than half of the cumulative HIV/AIDS cases, people of color also represent two thirds of new HIV/AIDS cases reported in this country.

In the U.S., two lives are lost every hour in the war against HIV/AIDS. Twenty years ago today, the CDC reported 5 cases of AIDS. However, as of June 2000, there were seven hundred fifty three thousand nine hundred and seven reported cases of AIDS in the U.S. Of these reported cases, AIDS has claimed the lives of four hundred and thirty-eight thousand nine hundred and seventy-five American citizens. World-Wide the figure is twenty-two million.

The exponential growth in deaths, clearly indicate that the time for action is now. Although technology, medicine, and research have increased the life span of HIV positive victims, I am concerned about the staggering number of new AIDS cases in the US. In the last decade, the proportion of all AIDS cases reported among adult and adolescent women more than tripled, from 7 percent in 1985 to 23 percent in 1999, with the most dramatic increase occurring among women of color. Among 15–24-year-olds, AIDS is the 7th leading cause of death. These figures highlight the gravity of the crisis related to HIV/AIDS and its impact on our country.

Mr. Speaker, we are at a crucial time in this war against HIV/AIDS. Tragically, this disease debilitates everyone it infects. The most troubling fact is that there are few of us who have been unaffected in some way by this disease. Today as we approach the 20th anniversary of HIV/AIDS in the US, I would like to alert my fellow Americans of the persistent nature of this disease. Unfortunately, it has become a familiar part of America's culture. I believe we must reassess our efforts and recommit ourselves to fighting this illness. We must work collectively to promote education, prevention and treatment of HIV/AIDS. Finally, I ask each of us to stand together to remember the victims who have succumbed to this disease, and those individuals who wage valiant and courageous battles to overcome their affliction.

Mr. RUSH. Mr. Speaker, today marks the twentieth anniversary of the first reported HIV/AIDS cases in the United States. On June 5, 1981 Federal researchers reported a baffling new disease that, over the next 20 years, would claim more than 20 million lives worldwide, including nearly 11,000 in Chicago and 40,000 in Illinois. The last 20 years have taught this country many hard lessons, some of which we continue to fail to grasp.

The first lesson we learned was that HIV/AIDS disproportionately impacts minority communities and women. HIV/AIDS has become the leading cause of death for African-American men ages 25–44. Gay black men are contracting HIV/AIDS at rates comparable to

those seen in sub-Saharan Africa. A recent CDC study reported that 30 percent of gay black men between ages 23 and 29 were HIV-positive. Among HIV-positive women in Illinois, more than 80 percent are non-white—a statistic that could not more starkly demonstrate the disproportionate havoc that HIV/AIDS is wreaking in communities of color.

While I commend the administration for its focus on HIV/AIDS in Africa, more must be done to treat and prevent HIV/AIDS in minority communities in this country. The President's budget takes a step backwards in the fight against HIV/AIDS by freezing the Ryan White AIDS program funding. This is the first time Ryan White funding has not been increased since the programs inception.

The second lesson we learned from the is that HIV/AIDS knows no national boundaries. Sub-Saharan Africa is being ravaged by HIV/AIDS. More than 25 million Africans are now living with HIV and last year alone, 2.4 million Africans died from the disease. We must assist Africa in its fight against HIV/AIDS or we will reap what we sow.

The third lesson HIV/AIDS taught us is that HIV/AIDS is that no group is protected. During the early stages of the HIV/AIDS epidemic many naively believed that HIV/AIDS was a "gay man's disease." This mistake led to a false sense of security among many who were actually engaging in risky behaviors such as IV drug use and unprotected sex. Unfortunately, many were infected before they realized they were at risk. We must not make this same mistake again. Any increased incidence of HIV/AIDS amongst a segment of the population is unacceptable.

Finally, the fourth lesson HIV/AIDS has taught us is that our discomfort with addressing taboo issues can result in the loss of many lives. It is clear that HIV/AIDS is transmitted through unprotected sex and IV drug use. However, due to this country's inability to address many of these sensitive issues, preventive efforts have suffered. We must openly address risk factors of HIV/AIDS. To let our personal discomfort with these subjects stymie prevention and education is unacceptable.

We hold the keys to our fate based on these lessons of the past. If we learn from these lessons, we can defeat HIV/AIDS. But, if we fail to heed our mistakes, we will ultimately suffer more death and destruction over the next twenty years. The future is ours to shape.

Mr. TOWNS. Mr. Speaker, today is a very sad day as we remember what it was like before that time twenty years ago when our friends and neighbors, acquaintances and co-workers began to fall gravely ill in what should have been the prime of their lives. It is hard to remember that time before we had parades, rallies, walks and forums specifically devoted to raising desperately needed awareness and money to pay for potential remedies to battle this global pandemic. In the early days it seemed that we fought fear, discrimination, rumors and gossip almost as much or more than the virus itself. Today, while we are still fighting those battles, there have been great strides in the efforts to control this insidious illness. Nevertheless, this is no time for backslapping as the strides that were made are falling victim to the misguided belief—particularly among young people—that HIV/AIDS is

no longer a serious threat. Moreover, while those strides were real, the medical miracles that were discovered were not available to everyone. The high cost of drugs and the lack of availability of adequate quality healthcare remain significant barriers to real progress.

As we look back over these twenty years we see an all too real killing field of lives lost across the globe. An estimated 21.8 million people have died as a result of this virus. Currently, 36.1 million people are living with HIV/AIDS; almost half of those diagnosed are women, and over 1.6 million are children. I applaud the recent efforts of major pharmaceutical companies through the "Accelerating Access" and "Secure The Future" initiatives that offer hope to African patients in nine countries both in terms of access to new medications at realistic costs and the development of an infrastructure system that can deliver care. I am also encouraged to see and hear the commitment of this Administration to the cause of fighting HIV/AIDS in Africa.

In the United States the casualty list from HIV/AIDS is smaller yet no less significant. According to the latest study released by the CDC, almost 754,000 people are living with HIV/AIDS in the US: 438,795 people have died from HIV/AIDS over the past twenty years. HIV/AIDS has become the leading cause of death for African Americans between the ages of 25 and 44. African Americans are 10 times more likely than whites to be diagnosed with HIV/AIDS and also 10 times more likely to die from it.

New York State and New York City still have the largest number of HIV/AIDS in the country and, my congressional district has the highest incidence of new HIV/AIDS cases of any area in New York City. For example, Brownsville has more people living with HIV/AIDS than 12 states. It has the second highest number of blacks living with HIV/AIDS in all of New York City. In addition, East New York has the third highest population of women living with HIV/AIDS. As much as we have done to combat this virus, both in the US and abroad, we must do more. That is why I am pleased that local community based organizations like New World Creations Resource Center, Inc. are sponsoring a rally and march, "the AIDS walk for the Caribbean" on July 1 to highlight the continuing HIV/AIDS crisis in African-American and Caribbean-American communities in New York.

I hope that in five years when we mark the next milestone in the history of this dreaded disease, we have something positive to report. Until that time, I urge my colleagues to join me in redoubling our efforts to promote prevention, education and treatment for HIV/AIDS. This is a battle that we must continue for the future of our nation and for the world at large.

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#### LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. SHERMAN (at the request of Mr. GEPHARDT) for today on account of business in the district.

Mr. BURTON of Indiana (at the request of Mr. ARMEY) for today and the

balance of the week on account of personal reasons.

Mr. POMBO (at the request of Mr. ARMEY) for today on account of official business.

#### 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. PELOSI, for 5 minutes, today.

Mr. DAVIS of Illinois, for 5 minutes, today.

Mr. DEFAZIO, for 5 minutes, today.

(The following Members (at the request of Mr. EHLERS) to revise and extend their remarks and include extraneous material:)

Mr. KIRK, for 5 minutes, June 7.

Mr. MORAN of Kansas, for 5 minutes, June 6.

Mr. PAUL, for 5 minutes, June 6.

Mr. HORN, for 5 minutes, June 7.

Mr. EHLERS, for 5 minutes, today.

#### ENROLLED BILLS SIGNED

Mr. Trandahl, Clerk of the House, reported and found truly enrolled bills of the House of the following titles, which were thereupon signed by the Speaker:

H.R. 581. An act to authorize the Secretary of the Interior and the Secretary of Agriculture to use funds appropriated for wildland fire management in the Department of the Interior and Related Agencies Appropriations Act, 2001, to reimburse the United States Fish and Wildlife Service and the National Marine Fisheries Service to facilitate the interagency cooperation required under the Endangered Species Act of 1973 in connection with wildland fire management.

H.R. 1836. An act to provide for reconciliation pursuant to section 104 of the concurrent resolution on the budget for fiscal year 2002.

#### BILLS PRESENTED TO THE PRESIDENT

Jeff Trandahl, Clerk of the House reports that on June 1, 2001 he presented to the President of the United States, for his approval, the following bill.

H.R. 581. To authorize the Secretary of the Interior and the Secretary of Agriculture to use funds appropriated for wildland fire management in the Department of the Interior and Related Agencies Appropriation Act, 2001, to reimburse the United States Fish and Wildlife Service and the National Marine Fisheries Service to facilitate the interagency cooperation required under the Endangered Species Act of 1973 in connection with wildland fire management.

Jeff Trandahl, Clerk of the House reports that on June 4, 2001 he presented to the President of the United States, for his approval, the following bill.

H.R. 1836. An act to provide for reconciliation pursuant to section 104 of the concurrent resolution on the budget for fiscal year 2002.

#### ADJOURNMENT

Mr. RODRIGUEZ. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 10 o'clock and 6 minutes p.m.), the House adjourned until tomorrow, Wednesday, June 6, 2001, 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:

2240. A letter from the the Mayor of the District of Columbia, transmitting the District of Columbia Fiscal Year 2002 Budget Request Act, pursuant to Public Law 105-33 section 11701(a)(1) (111 Stat. 780); (H. Doc. No. 107-81); to the Committee on Appropriations and ordered to be printed.

2241. A communication from the President of the United States, transmitting a request for FY 2001 supplemental appropriations for the Departments of Agriculture, Defense (including the Army Corps of Engineers), Energy, Health and Human Services, Housing and Urban Development, the Interior, Transportation, the Treasury, and Veterans Affairs; International Assistance Programs; and the National Aeronautics and Space Administration; (H. Doc. No. 107-80); to the Committee on Appropriations and ordered to be printed.

2242. A letter from the Alternate OSD Federal Register Liaison Officer, Department of Defense, transmitting the Department's final rule—Civilian Health and Medical Program of the Uniformed Services (CHAMPUS)/TRICARE; Partial Implementation of Pharmacy Benefits Program; Implementation of National Defense Authorization Act Medical Benefits for Fiscal Year 2001 (RIN: 0720-AA62) May 30, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Armed Services.

2243. A letter from the General Counsel for Regulations, Department of Housing and Urban Development, transmitting the Department's final rule—Screening and Eviction for Drug Abuse and Other Criminal Activity [Docket No. FR-4495-F-02] (RIN: 2501-AC63) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Financial Services.

2244. A letter from the President and Chairman, Export-Import Bank of the United States, transmitting a report involving U.S. exports to Taiwan, pursuant to 12 U.S.C. 635(b)(3)(i); to the Committee on Financial Services.

2245. A letter from the Deputy Secretary, Securities and Exchange Commission, transmitting the Commission's final rule—Electronic Recordkeeping by Investment Companies and Investment Advisers [Release Nos. IC-24991 and IA-1945; File No. S7-06-01] (RIN: 3235-AI05) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Financial Services.

2246. A letter from the Deputy Secretary, Securities and Exchange Commission, transmitting the Commission's final rule—Electronic Recordkeeping by Public Utility Holding Companies [Release No. 35-27404; File No. S7-07-01] (RIN: 3235-AI12) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Financial Services.

2247. A letter from the Regulations Coordinator, Department of Health and Human Services, transmitting the Department's final rule—Medicaid Program; Use of Restraint and Seclusion in Psychiatric Residential Treatment Facilities Providing Inpa-

tient Psychiatric Services to Individuals Under Age 21 [HCFA-2065-IFC2] (RIN: 0938-AJ96) received May 29, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

2248. A letter from the Regulations Coordinator, Department of Health and Human Services, transmitting the Department's final rule—Protection of Human Research Subjects: Delay of Effective Date (RIN: 0925-AA14) received May 29, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

2249. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule—Approval of Section 112(I) Authority for Hazardous Air Pollutants; Chemical Accident Prevention Provisions and Risk Management Plans; Delaware; Approval of Accidental Release Prevention Program [DE001-1000; FRL-6988-3] received May 30, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

2250. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule—Approval and Promulgation of Air Quality Implementation Plans; Rhode Island; Post-1996 Rate of Progress Plan [RI-022b; A-1-FRL-6990-6] received May 30, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

2251. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule—Maryland: Final Authorization of State Hazardous Waste Management Program Revisions [FRL-6938-8] received May 30, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

2252. A letter from the Secretary, Federal Trade Commission, transmitting the Commission's final rule—Rules and Regulations Under the Fur Products Labeling Act—received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

2253. A letter from the Director, Lieutenant General, USAF, Defense Security Cooperation Agency, transmitting the listing of all outstanding Letters of Offer to sell any major defense equipment for \$1 million or more; the listing of all Letters of Offer that were accepted, as of March 31, 2001, pursuant to 22 U.S.C. 2776(a); to the Committee on International Relations.

2254. A letter from the Acting Assistant Secretary for Legislative Affairs, Department of State, transmitting certification of a proposed request for the sale of defense articles or defense services sold commercially to Brazil [Transmittal No. DTC 055-01], pursuant to 22 U.S.C. 2776(c); to the Committee on International Relations.

2255. A letter from the Acting Assistant Secretary for Legislative Affairs, Department of State, transmitting certification of a proposed Manufacturing License Agreement with Japan [Transmittal No. DTC 045-01], pursuant to 22 U.S.C. 2776(d); to the Committee on International Relations.

2256. A letter from the Acting Assistant Secretary for Legislative Affairs, Department of State, transmitting certification of a proposed Manufacturing License Agreement with Switzerland [Transmittal No. DTC 041-01], pursuant to 22 U.S.C. 2776(d); to the Committee on International Relations.

2257. A letter from the Acting Assistant Secretary for Legislative Affairs, Department of State, transmitting certification of a proposed license for the export of defense articles or defense services sold commercially under a contract to Hong Kong, the United Kingdom, Australia, and Canada [Transmittal No. DTC 042-01], pursuant to 22

U.S.C. 2776(c); to the Committee on International Relations.

2258. A letter from the Acting Assistant Secretary for Legislative Affairs, Department of State, transmitting certification of a proposed Manufacturing License Agreement with Canada [Transmittal No. DTC 043-01], pursuant to 22 U.S.C. 2776(d); to the Committee on International Relations.

2259. A letter from the Acting Assistant Secretary for Legislative Affairs, Department of State, transmitting a report to Congress on the Republic of Korea's status as an adherent to the Missile Technology Control Regime (MTCR), pursuant to 22 U.S.C. 2797e-2; to the Committee on International Relations.

2260. A letter from the Acting Assistant Secretary for Legislative Affairs, Department of State, transmitting the Department's final rule—Documentation of Immigrants and Nonimmigrants Under the Immigration and Nationality Act, As Amended—Refusal of Individual VISAS—received May 25, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on International Relations.

2261. A letter from the Executive Director, District of Columbia Retirement Board, transmitting the personal financial disclosure statements of Board members, pursuant to D.C. Code section 1-732 and 1-734(a)(1)(A); to the Committee on Government Reform.

2262. A letter from the Chairman, Board of Governors of the Federal Reserve System, transmitting the semiannual report on the activities of the Office of Inspector General for the period October 1, 2000 through March 31, 2001, pursuant to 5 U.S.C. app. (Insp. Gen. Act) section 5(b); to the Committee on Government Reform.

2263. A letter from the Assistant Director for Executive and Political Personnel, Department of Defense, transmitting a report pursuant to the Federal Vacancies Reform Act of 1998; to the Committee on Government Reform.

2264. A letter from the Chairman, National Endowment for the Arts, transmitting the semiannual report on the activities of the Office of Inspector General for the period October 1, 2000 through March 31, 2001, pursuant to 5 U.S.C. app. (Insp. Gen. Act) section 5(b); to the Committee on Government Reform.

2265. A letter from the Director, Peace Corps, transmitting the semiannual report on the activities of the Office of Inspector General for the period October 1, 2000 through March 31, 2001, pursuant to 5 U.S.C. app. (Insp. Gen. Act) section 5(b); to the Committee on Government Reform.

2266. A letter from the Director, Financial Services, Library of Congress, transmitting a report on the Capitol Preservation Commission's Financial Statements for March 31, 2001; to the Committee on House Administration.

2267. A letter from the Executive Director, American Chemical Society, transmitting the Society's annual report for the calendar year 2000 and the comprehensive report to the Board of Directors of the American Chemical Society on the examination of their books and records for the year ending December 31, 2000, pursuant to 36 U.S.C. 1101(2) and 1103; to the Committee on the Judiciary.

2268. A letter from the Acting Director, Office of Workers' Compensation Programs, Department of Labor, transmitting the Department's final rule—Performance of Functions Under This Chapter; Claims for Compensation Under the Energy Employees Occupational Illness Compensation Program Act (RIN: 1215-AB32) received May 25, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on the Judiciary.

2269. A letter from the Secretary, Federal Trade Commission, transmitting the Com-

mission's final rule—Federal Civil Penalties Inflation Adjustment Act of 1990, as Amended by the Debt Collection Improvement Act of 1996—received May 30, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on the Judiciary.

2270. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Safety Zone; New York Harbor, Western Long Island Sound, East River, and Hudson River Fireworks [CGD01-00-221] (RIN: 2115-AA97) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2271. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Safety Zone; Crescent Harbor, Sitka, AK [COTP Southeast Alaska; 01-002] (RIN: 2115-AA97) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2272. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Jamaica Bay and connecting waterways, NY [CGD01-01-045] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2273. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Manitowoc River, Wisconsin [CGD09-01-001] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2274. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Safety Zone; Queens Millennium Concert Fireworks, East River, NY [CGD01-01-015] (RIN: 2115-AA97) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2275. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulation; Chef Menteur Pass, LA [CGD08-00-005] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2276. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Oakland Inner Harbor Tidal Canal, Alameda County, California [CGD11-99-013] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2277. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Newton Creek, Dutch Kills, English Kills and their tributaries, NY [CGD01-01-032] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2278. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Cerritos Channel, Long Beach, CA [CGD11-01-006] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C.

801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2279. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Hackensack River, NJ [CGD01-01-025] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2280. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Potomac River, between Alexandria, Virginia and Oxon Hill, Maryland [CGD05-01-009] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2281. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Sacramento River, CA [CGD11-01-005] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2282. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Long Island, New York Inland Waterway from East Rockaway Inlet to Shinnecock Canal, NY [CGD01-01-031] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2283. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Harlem River, NY [CGD01-01-030] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2284. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Hutchinson River, (Eastchester Creek), NY [CGD01-01-040] (RIN: 2115-AE47) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2285. A letter from the Chief, Office of Regulations and Administrative Law, USCG, Department of Transportation, transmitting the Department's final rule—Drawbridge Operation Regulations; Chelsea River, MA [CGD01-01-036] (RIN: 2115-AE47) received May 24, 2001; to the Committee on Transportation and Infrastructure.

2286. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Establishment of Class E Airspace; Egegik, AK [Airspace Docket No. 00-AAL-21] received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2287. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Revision of Class E Airspace; Ketchikan, AK [Airspace Docket No. 00-AAL-19] received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2288. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Establishment of Prohibited Area P-49 Crawford; TX [Docket No. FAA-2001-9059; Airspace Docket No. 01-AWA-1] (RIN: 2120-AA66) received May 24, 2001, pursuant to 5 U.S.C.

801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2289. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Establishment of V-611 and Revocation of V-19; NM [Docket No. FAA 2001-8682; Airspace Docket No. 01-ASW-1] (RIN: 2120-AA66) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2290. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Airworthiness Directives; McDonnell Douglas Model DC-8 Series Airplanes [Docket No. 99-NM-276-AD; Amendment 39-12197; AD 2001-08-20] (RIN: 2120-AA64) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2291. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Airworthiness Directives; Bombardier Model CL-600-2B19 Series Airplanes [Docket No. 2001-NM-32-AD; Amendment 39-12154; AD 2001-06-07] (RIN: 2120-AA64) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2292. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Airworthiness Directives; Eurocopter France Model SA.315B, SA.316B, SA.316C, SE.3160, and SA.319B Helicopters [Docket No. 2000-SW-13-AD; Amendment 39-12132; AD 2001-04-13] (RIN: 2120-AA64) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2293. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Airworthiness Directives; PIAGGIO AERO INDUSTRIES S.p.A. Model P-180 Airplanes [Docket No. 2000-CE-67-AD; Amendment 39-12140; AD 2001-05-04] (RIN: 2120-AA64) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2294. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Airworthiness Directives; Boeing Model 727-100, -100C and -200 Series Airplanes [Docket No. 99-NM-74-AD; Amendment 39-12219; AD 2001-09-12] (RIN: 2120-AA64) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2295. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Airworthiness Directives; Rolls-Royce Corporation (formerly Allison Engine Company) AE 3007 Series Turbofan Engines [Docket No. 2000-NE-29-AD; Amendment 39-12192; AD 2001-08-15] (RIN: 2120-AA64) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2296. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Airworthiness Directives; Construcciones Aeronauticas, S.A. (CASA), Model CN-235, Series Airplanes [Docket No. 2000-NM-263-AD; Amendment 39-12213; AD 2001-09-08] (RIN: 2120-AA64) received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2297. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Standard Instrument Approach Procedures; Mis-

cellaneous Amendments [Docket No. 30235; Amdt. No. 2040] received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2298. A letter from the Program Analyst, FAA, Department of Transportation, transmitting the Department's final rule—Standard Instrument Approach Procedures; Miscellaneous Amendments [Docket No. 30234; Amdt. No. 2039] received May 24, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

2299. A letter from the Director, Office of Regulations Management, Department of Veterans' Affairs, transmitting the Department's final rule—Schedule for Rating Disabilities: Disabilities of the Liver (RIN: 2900-AK12) received May 25, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Veterans' Affairs.

2300. A communication from the President of the United States, transmitting notification of his determination that a continuation of a waiver currently in effect for the People's Republic of China will substantially promote the objectives of section 402, of the Trade Act of 1974 (Presidential Determination 2001-16), pursuant to 19 U.S.C. 2432(c) and (d); (H. Doc. No. 107-79); to the Committee on Ways and Means and ordered to be printed.

2301. A communication from the President of the United States, transmitting notification of his determination that a continuation of a waiver currently in effect for Vietnam will substantially promote the objectives of section 402, of the Trade Act of 1974, (Presidential Determination 2001-17), pursuant to 19 U.S.C. 2432(c) and (d); (H. Doc. No. 107-82); to the Committee on Ways and Means and ordered to be printed.

2302. A letter from the Acting Commissioner, Social Security Administration, transmitting the 2001 Annual Report of the Supplemental Security Income Program, pursuant to Public Law 104-193, section 231 (110 Stat. 2197); to the Committee on Ways and Means.

2303. A letter from the Chief, Regulations Division, Bureau of Alcohol, Tobacco and Firearms, Department of the Treasury, transmitting the Department's final rule—Labeling Proceedings; Delegation of Authority [T.D. ATF-449] (RIN: 1512-AC21) received May 29, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Ways and Means.

2304. A letter from the Chief, Regulations Division, Bureau of Alcohol, Tobacco and Firearms, Department of the Treasury, transmitting the Department's final rule—Delegation of Authority (2000R-415P) [T.D. ATF-451] (RIN: 1512-AC38) received May 29, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Ways and Means.

2305. A letter from the Chief, Regulations Division, Bureau of Alcohol, Tobacco and Firearms, Department of the Treasury, transmitting the Department's final rule—Manufacturers Excise Taxes-Firearms and Ammunition; Delegation of Authority [T.D. ATF-447] (RIN: 1512-AC18) received May 29, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Ways and Means.

2306. A letter from the Regulations Coordinator, Department of Health and Human Services, transmitting the Department's final rule—High Performance Bonus Awards Under the TANF Program (RIN: 0970-AC06) received May 15, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Ways and Means.

2307. A letter from the Deputy Under Secretary, Policy Support, Department of Defense, transmitting an Annual Report on Agreements for the Exchange of Defense Personnel Between the U.S. and Foreign Countries; jointly to the Committees on Armed Services and International Relations.

2308. A letter from the Assistant Secretary, Legislative Affairs, Department of the Treasury, transmitting a report entitled, "The Operation of the Enterprise for the Americas Facility and the Tropical Forest Conservation Act"; jointly to the Committees on International Relations and Agriculture.

2309. A letter from the Acting Director, National Institute of Standards and Technology, Department of Commerce, transmitting the Department's final rule—Procedures for Implementation of the Fastener Quality Act [Docket No. 980623159-0166-04] (RIN: 0693-AB47) received May 29, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); jointly to the Committees on Science and Energy and Commerce.

2310. A letter from the Regulations Coordinator, Department of Health and Human Services, transmitting the Department's final rule—Medicare and Medicaid Programs: Hospital Conditions of Participation: Anesthesia Services: Delay of Effective Date (RIN: 0938-AK08) received May 29, 2001, pursuant to 5 U.S.C. 801(a)(1)(A); jointly to the Committees on Ways and Means and Energy and Commerce.

2311. A letter from the Chair, Medicare Payment Advisory Commission, transmitting a report entitled, "An Analysis of Medicare Payments to Skilled Nursing Facilities in Alaska and Hawaii"; jointly to the Committees on Ways and Means and Energy and Commerce.

#### 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. SENSENBRENNER: Committee on the Judiciary. H.R. 718. A bill to protect individuals, families, and Internet service providers from unsolicited and unwanted electronic mail; with an amendment (Rept. 107-41 Pt. 2). Referred to the Committee of the Whole House on the State of the Union.

Mrs. MYRICK: Committee on Rules. House Resolution 155. Resolution providing for consideration of the bill (H.R. 1699) to authorize appropriations for the Coast Guard for fiscal year 2002 (Rept. 107-86). Referred to the House Calendar.

Mr. HASTINGS of Washington: Committee on Rules. House Resolution 156. Resolution providing for consideration of motions to suspend the rules (Rept. 107-87). Referred to the House Calendar.

#### PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XII, public bills and resolutions were introduced and severally referred, as follows:

By Mr. COBLE (for himself, Mr. BERMAN, and Mr. CONYERS):

H.R. 2047. A bill to authorize appropriations for the United States Patent and Trademark Office for fiscal year 2002, and for other purposes; to the Committee on the Judiciary.

By Mr. COBLE (for himself and Mr. BERMAN):

H.R. 2048. A bill to require a report on the operations of the State Justice Institute; to the Committee on the Judiciary.

By Mr. SMITH of Michigan:

H.R. 2049. A bill to authorize the National Science Foundation to undertake certain activities in support of research on learning; to the Committee on Science.

By Mr. SMITH of Michigan:

H.R. 2050. A bill to authorize the National Science Foundation to undertake certain activities in support of research on learning; to the Committee on Science.

By Mr. SMITH of Michigan:

H.R. 2051. A bill to provide for the establishment of regional plant genome and gene expression research and development centers; to the Committee on Science.

By Mr. TANCREDO (for himself, Mr. ARMEY, Mr. WOLF, Mr. PAYNE, Mr. WATTS of Oklahoma, Mr. LANTOS, Mr. BENTSEN, Mr. CLEMENT, Ms. JACKSON-LEE of Texas, Mr. MCGOVERN, Ms. PELOSI, Mr. UPTON, Mr. WELDON of Florida, Mr. BRYANT, Mr. GOODLATTE, Mr. CAMP, Mr. PITTS, Mr. LAMPSON, Mr. LEWIS of Kentucky, Ms. RIVERS, Mrs. TAUSCHER, and Mr. SHAYS):

H.R. 2052. A bill to facilitate famine relief efforts and a comprehensive solution to the war in Sudan; to the Committee on International Relations, and in addition to the Committee on Financial Services, 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. GONZALEZ (for himself and Mr. RODRIGUEZ):

H.R. 2053. A bill to prohibit offering homebuilding purchase contracts that contain in a single document both a mandatory arbitration agreement and other contract provisions, and to prohibit requiring purchasers to consent to a mandatory arbitration agreement as a condition precedent to entering into a homebuilding purchase contract; to the Committee on Financial Services.

By Mr. HANSEN (for himself and Mr. GIBBONS):

H.R. 2054. A bill to give the consent of Congress to an agreement or compact between Utah and Nevada regarding a change in the boundaries of those States, and for other purposes; to the Committee on the Judiciary.

By Mr. SAM JOHNSON of Texas (for himself, Mr. BOEHNER, Mr. ARMEY, Mr. HAYWORTH, Mr. BALLENGER, Mr. GRAHAM, Mr. NORWOOD, Mr. ISAKSON, Mrs. BIGGERT, Mr. KELLER, Mr. CULBERSON, Mr. PAUL, Mr. HALL of Texas, Mr. SESSIONS, Mrs. NORTHUP, Mr. LINDER, and Mr. SOUDER):

H.R. 2055. A bill to preserve open competition and Federal Government neutrality towards the labor relations of Federal Government contractors on Federal and federally funded construction projects; to the Committee on Government Reform.

By Ms. KAPTUR (for herself, Mr. FROST, Mr. RANGEL, Mr. GONZALEZ, and Mr. PITTS):

H.R. 2056. A bill to amend the Public Health Service Act to revise the filing deadline for certain claims under the National Vaccine Injury Compensation Program; to the Committee on Energy and Commerce.

By Mr. LATOURETTE:

H.R. 2057. A bill to amend title XVIII of the Social Security Act to provide for coverage under the Medicare Program of immunosuppressive drugs for Medicare beneficiaries who receive an organ transplant without regard to when the transplant was received; to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, 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. LEVIN (for himself, Mr. FOLEY, Mr. STARK, Mr. LEACH, Mr. ABERCROMBIE, Mr. BALDACCIO, Mr. CARDIN, Mr. COYNE, Mr. CROWLEY, Ms. DEGETTE, Mr. HINCHEY, Mr. HOEFFEL, Mr. HORN, Mr. KILDEE, Ms. LEE, Mr. McNULTY, Mr. PASTOR, Ms. ROYBAL-ALLARD, Mr. SANDERS, Mr. SERRANO, Mr. SIMMONS, Mrs. THURMAN, and Mr. WAXMAN):

H.R. 2058. A bill to promote primary and secondary health promotion and disease prevention services and activities among the elderly, to amend title XVIII of the Social Security Act to add preventive health benefits, and for other purposes; to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, and Rules, 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. MCDERMOTT:

H.R. 2059. A bill to amend the Public Health Service Act to provide for human embryonic stem cell generation and research; to the Committee on Energy and Commerce.

By Mr. NETHERCUTT:

H.R. 2060. A bill to prevent plant enterprise terrorism; to the Committee on the Judiciary, and in addition to the Committee on Science, 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 Ms. NORTON:

H.R. 2061. A bill to amend the charter of Southeastern University of the District of Columbia; to the Committee on Government Reform.

By Mr. OLVER (for himself, Mr. SIMMONS, Mr. NEAL of Massachusetts, Mr. BASS, Mr. SANDERS, Mr. LARSON of Connecticut, Ms. DELAUNO, Mr. MALONEY of Connecticut, Mrs. JOHNSON of Connecticut, and Mr. SHAYS):

H.R. 2062. A bill to extend the effective period of the consent of Congress to the interstate compact relating to the restoration of Atlantic salmon to the Connecticut River Basin and creating the Connecticut River Atlantic Salmon Commission, and for other purposes; to the Committee on Resources, 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 Ms. PELOSI (for herself, Mr. GEPHARDT, Mr. WAXMAN, Mr. BROWN of Ohio, Mrs. MORELLA, Ms. LEE, Mr. BONIOR, Mrs. CHRISTENSEN, Mr. RODRIGUEZ, Mr. UNDERWOOD, Ms. MILLENDER-MCDONALD, Mr. CLYBURN, Mrs. LOWEY, Mr. CUMMINGS, Mr. HORN, Mr. CROWLEY, Ms. BALDWIN, Mrs. TAUSCHER, Mr. CAPUANO, Ms. SCHAKOWSKY, Mr. MCDERMOTT, Mr. DICKS, Mr. TOWNS, Mr. SERRANO, Ms. ROYBAL-ALLARD, Mr. HINCHEY, Mr. BLAGOJEVICH, Mr. GREEN of Texas, Mr. GONZALEZ, Ms. CARSON of Indiana, Mr. FILNER, Mr. JACKSON of Illinois, Mrs. THURMAN, Mr. FROST, Mr. GUTIERREZ, Mr. FRANK, Mr. LANTOS, Ms. RIVERS, Mrs. CAPPS, Mr. MALONEY of Connecticut, Mr. BRADY of Pennsylvania, Mr. DELAHUNT, Ms. WOOLSEY, Mr. OWENS, Ms. SOLIS, Mr. STARK, Ms. DELAUNO, Mr. CONYERS, Mr. WYNN, Ms. ESHOO, Mr. NEAL of Massachusetts, Ms. BROWN of Florida, Mr. SCHIFF, Mr. MARKEY, Mr. OLVER, Ms. WATERS, Mr. CLAY, Ms. SLAUGHTER, Mr. RUSH, Mr. INSLEE, Mr. FARR of California, Mr. RANGEL, Mr. MEEHAN, Mrs. CLAYTON, Mrs. JONES of Ohio, Mr. PALLONE, Ms. MCCOLLUM, Mr. ACKERMAN, Ms. JACKSON-LEE of Texas, Mr. HASTINGS of Florida, Mr. GEORGE MILLER of California, Mr. ABERCROMBIE, Mrs. MEEK of Florida, Mr. PAYNE, Ms. VELAZQUEZ, Mrs. MINK of Hawaii, Mrs. NAPOLITANO, Ms. NORTON, Mr. THOMPSON of Mississippi, Mr. HILLIARD, Mr. WEINER,

Ms. KILPATRICK, Mr. DEFAZIO, Mr. DAVIS of Illinois, Ms. SANCHEZ, Mr. EVANS, Mr. UDALL of New Mexico, Mr. ENGEL, Mr. BENTSEN, Mr. BERMAN, Mr. TIERNEY, Mr. HOLT, Mrs. MCCARTHY of New York, Mr. NADLER, Mr. GORDON, Mr. BAIRD, Mr. MATSUI, Mr. MCGOVERN, Mr. SANDERS, Mr. KILDEE, Mr. HONDA, Mr. SHERMAN, Ms. LOFGREN, Mrs. MALONEY of New York, Mr. KLECZKA, Ms. BERKLEY, Ms. DEGETTE, Mr. FORD, Mr. FALOMAVAEGA, and Mr. LARSON of Connecticut):

H.R. 2063. A bill to amend title XIX of the Social Security Act to permit States the option to provide Medicaid coverage for low-income individuals infected with HIV; to the Committee on Energy and Commerce.

By Mr. QUINN (for himself, Mr. MEEHAN, Mr. MCHUGH, and Mr. MCGOVERN):

H.R. 2064. A bill to provide for comprehensive brownfield site assessment, cleanup, and redevelopment; to the Committee on Financial Services, and in addition to the Committees on Small Business, Transportation and Infrastructure, and Ways and Means, 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. RADANOVICH:

H.R. 2065. A bill to amend the Workforce Investment Act of 1998 to expand the flexibility of customized training, and for other purposes; to the Committee on Education and the Workforce.

By Mr. TANNER (for himself and Mr. BLUNT):

H.R. 2066. A bill to extend the tax benefits available with respect to services performed in a combat zone to services performed in the Sinai as part of the Multinational Force and Observers of the United Nations; to the Committee on Ways and Means.

By Mr. VITTER:

H.R. 2067. A bill to amend the Internal Revenue Code of 1986 to provide that certain deductions of school bus owner-operators shall be allowable in computing adjusted gross income; to the Committee on Ways and Means.

By Mr. ROHRABACHER (for himself and Mr. BROWN of Ohio):

H.J. Res. 50. A joint resolution disapproving the extension of the waiver authority contained in section 402(c) of the Trade Act of 1974 with respect to the People's Republic of China; to the Committee on Ways and Means.

By Mr. THOMPSON of California:

H. Con. Res. 149. Concurrent resolution permitting the use of the Rotunda of the Capitol for a ceremony to present posthumously a gold medal on behalf of Congress to Charles M. Schulz; to the Committee on House Administration, considered and agreed to.

By Mr. LANGEVIN (for himself, Mr. TANGREDO, Mr. UDALL of Colorado, Mrs. NAPOLITANO, Mr. PASCRELL, Mr. FILNER, Mr. TOWNS, Mr. HINCHEY, Mr. CAPUANO, Ms. KILPATRICK, Mr. PAYNE, Mr. UDALL of New Mexico, Mr. PALLONE, Mr. DAVIS of Illinois, Ms. MCKINNEY, Ms. MILLENDER-MCDONALD, Mr. WYNN, Mr. JACKSON of Illinois, Ms. DEGETTE, Mr. MCINNIS, Mr. WOLF, Mr. FARR of California, Mr. HEFLEY, Mr. KELLER, Mr. WAXMAN, Mr. MALONEY of Connecticut, Mr. WALSH, Mr. GONZALEZ, and Mr. EHRlich):

H. Con. Res. 150. Concurrent resolution expressing the sense of Congress that Erik Weihenmayer's achievement of becoming the first blind person to climb Mount Everest demonstrates the abilities and potential of all blind people and other individuals with

disabilities; to the Committee on Education and the Workforce.

By Ms. JACKSON-LEE of Texas (for herself, Ms. LEE, Mr. WYNN, Mr. WEINER, Mr. TOWNS, Mr. BISHOP, Mr. CROWLEY, Ms. MCKINNEY, Mr. LAMPSON, Mr. LEWIS of Georgia, Mr. HILLIARD, Mr. RUSH, Mr. DAVIS of Illinois, Mrs. MEEK of Florida, and Mrs. JONES of Ohio):

H. Con. Res. 151. Concurrent resolution expressing continuing sympathy for the victims of the devastating earthquake that struck the Republic of India on January 26, 2001, and support for ongoing aid efforts; to the Committee on International Relations, and in addition to the Committee on Financial Services, 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. ROGERS of Michigan:

H. Con. Res. 152. Concurrent resolution encouraging States bordering the Great Lakes, and the Canadian Province of Ontario to prohibit off-shore drilling in the Great Lakes for oil and gas, and for other purposes; to the Committee on Resources, and in addition to the Committee on International Relations, 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.

#### MEMORIALS

Under clause 3 of rule XII, memorials were presented and referred as follows:

95. The SPEAKER presented a memorial of the General Assembly of the State of Illinois, relative to House Joint Resolution No. 27 memorializing the United States Congress to strongly urge the Government of the People's Republic of China to respect the well-being and safety of the crew in accordance with international practices; to the Committee on International Relations.

96. Also, a memorial of the House of Representatives of the State of Illinois, relative to House Resolution No. 126 memorializing the United States Postal Service to issue a postage stamp honoring coal mining and coal miners, commemorating their contributions to our nation and its citizens; to the Committee on Government Reform.

97. Also, a memorial of the House of Representatives of the State of Illinois, relative to House Resolution No. 187 memorializing that they have declared April 15, 2001, as Harold Washington United States Commemorative Stamp Day, and urge all citizens of Illinois to be aware of the contributions of Mayor Harold Washington and to write to the United States Postal Service Citizens' Stamp Advisory Committee urging them to issue a commemorative stamp in honor of Mayor Harold Washington; to the Committee on Government Reform.

98. Also, a memorial of the House of Representatives of the State of Missouri, relative to Resolution 23 memorializing the United States Congress to rescind the Windfall Elimination Provision or amend it so that it does not bear disproportionately upon teachers and others who have modest salaries earned in non-Social Security-covered service; and amend the government pension offset so that it will not bear disproportionately upon teachers and others whose government pensions are based on modest salaries; to the Committee on Ways and Means.

99. Also, a memorial of the House of Representatives of the State of Illinois, relative to House Resolution No. 107 memorializing the United States Congress to support Hennepin Works' fight against the unfair trade

of foreign steel that has damaged our economy; to the Committee on Ways and Means.

100. Also, a memorial of the House of Representatives of the State of Illinois, relative to House Resolution No. 96 memorializing the United States Congress to support the Railroad Retirement and Survivors Improvement Act; jointly to the Committees on Transportation and Infrastructure and Ways and Means.

101. Also, a memorial of the General Assembly of the State of Illinois, relative to House Joint Resolution No. 9 memorializing the United States Congress to support the Railroad Retirement and Survivors Improvement Act; jointly to the Committees on Transportation and Infrastructure and Ways and Means.

#### ADDITIONAL SPONSORS

Under clause 7 of rule XII, sponsors were added to public bills and resolutions as follows:

H.R. 7: Mr. RADANOVICH, Mr. PICKERING, and Ms. HART.

H.R. 15: Mr. COX and Mr. REYNOLDS.

H.R. 17: Mr. SPRATT.

H.R. 36: Mr. RAHALL, Mr. STRICKLAND, and Mr. HILLIARD.

H.R. 40: Ms. WATERS, Mr. DOOLEY of California, and Mr. BONIOR.

H.R. 41: Mr. REHBERG, Mr. CANTOR, and Mr. OSE.

H.R. 61: Ms. SOLIS.

H.R. 97: Mr. GORDON, Mr. SCHIFF, Mr. CROWLEY, Ms. WOOLSEY, Mr. LARSEN of Washington, and Mr. LARSON of Connecticut.

H.R. 122: Mr. LANTOS, Mr. SMITH of Texas, Mr. TIBERI, Mr. GRUCCI, Mr. SHADEGG, Mr. HALL of Texas, and Mr. VITTE.

H.R. 157: Mr. JEFFERSON, Mr. LAHOOD, Mr. GILMAN, and Ms. MCKINNEY.

H.R. 168: Mr. MOORE and Mr. TIBERI.

H.R. 175: Mr. TIAHRT.

H.R. 189: Mr. EVERETT.

H.R. 210: Mr. FILNER.

H.R. 236: Mr. SMITH of New Jersey.

H.R. 250: Mr. TAUZIN, Mr. MENENDEZ, Mr. REHBERG, and Mr. SCHAFFER.

H.R. 267: Mr. SCHIFF and Mr. BERMAN.

H.R. 281: Mrs. CHRISTENSEN, Mr. ISAKSON, Mr. BLAGOJEVICH, and Mr. FILNER.

H.R. 303: Mr. POMBO and Mr. SAM JOHNSON of Texas.

H.R. 361: Ms. SOLIS.

H.R. 389: Ms. DELAURO.

H.R. 436: Mr. HINOJOSA, Mr. TOOMEY, Mr. MCDERMOTT, Ms. SCHAKOWSKY, and Mr. RILEY.

H.R. 448: Mr. COMBEST.

H.R. 481: Mr. THOMPSON of California.

H.R. 491: Mr. SCOTT, Ms. SOLIS, Mr. HOYER, and Ms. SANCHEZ.

H.R. 510: Mr. PASTOR, Mr. ETHERIDGE, Ms. MCCARTHY of Missouri, Mr. FARR of California, and Mr. WELLER.

H.R. 527: Mr. UPTON.

H.R. 570: Mr. BAKER.

H.R. 571: Mr. OWENS.

H.R. 572: Mr. SANDLIN.

H.R. 598: Mr. COSTELLO, Mr. ISRAEL, and Mr. SHADEGG.

H.R. 608: Mr. NUSSLE.

H.R. 609: Mr. SANDLIN.

H.R. 612: Mr. RADANOVICH, Mrs. CAPITO, Mr. DEFAZIO, Mr. GRAVES, Mr. LARGENT, Mr. HINCHEY, Mr. CAPUANO, Mr. TOWNS, Mr. CHAMBLISS, Ms. DELAURO, Mr. CARSON of Oklahoma, Ms. EDDIE BERNICE JOHNSON of Texas, Ms. LOFGREN, Mr. OLVER, and Mr. COYNE.

H.R. 623: Mr. JACKSON of Illinois.

H.R. 638: Ms. KILPATRICK.

H.R. 668: Mr. PETERSON of Pennsylvania, Mr. OWENS, Mr. MANZULLO, Mr. MATSUI, Mr.

CLEMENT, Ms. PRYCE of Ohio, Mr. WEXLER, Ms. HOOLEY of Oregon, Mr. RILEY, Mr. PETRI, Mr. GIBBONS, Mrs. JO ANN DAVIS of Virginia, Mr. JONES of North Carolina, Mr. SHAYS, Mr. PETERSON of Minnesota, Mr. BISHOP, Mr. FOLEY, Mr. BRYANT and Mr. MCNULTY.

H.R. 699: Mr. PASTOR.

H.R. 717: Mr. RYAN of Wisconsin and Mrs. BIGGERT.

H.R. 718: Mr. SOUDER, Mr. GILMAN, Mr. DINGELL, Mr. DELAY, Mr. BROWN of South Carolina, Mr. RILEY, Mr. GRUCCI, Mr. WALSH, Mr. SHERWOOD, and Mr. SHUSTER.

H.R. 742: Ms. MCCARTHY of Missouri.

H.R. 748: Mr. LEACH.

H.R. 757: Mrs. MALONEY of New York.

H.R. 786: Mr. CONYERS, Mr. NADLER, and Mr. OWENS.

H.R. 805: Mr. TURNER.

H.R. 808: Mr. UDALL of Colorado, Mr. BURTON of Indiana, and Mr. ETHERIDGE.

H.R. 826: Mr. BENTSEN.

H.R. 827: Mr. BURR of North Carolina.

H.R. 831: Mr. BALLENGER, Mr. SHAYS, Mr. THOMPSON of California, Mr. LIPINSKI, Mr. PLATTS, Mr. TANCREDI, Mr. PETERSON of Pennsylvania, Mr. PETERSON of Minnesota, Mr. GOODLATTE, Ms. DEGETTE, Ms. DUNN, Mrs. CLAYTON, Mr. COSTELLO, Mr. MURTHA, Mr. PASCRELL, Mrs. JO ANN DAVIS of Virginia, Mr. BUYER, Mr. BONILLA, Mr. CRENSHAW, Mr. OSBORNE, Mr. SCARBOROUGH, Mr. COLLINS, Mr. ALLEN, Mr. DOYLE, Mr. MALONEY of Connecticut, Mr. BARCIA, Mr. HONDA, Mr. BOUCHER, Mr. CAPUANO, Mrs. MORELLA, Mr. FILNER, and Mrs. MINK of Hawaii.

H.R. 835: Ms. JACKSON-LEE of Texas.

H.R. 854: Mr. BAIRD, Mr. RADANOVICH, Mr. CALVERT, Mr. TURNER, Ms. RIVERS, Mr. LEWIS of Kentucky, Ms. JACKSON-LEE of Texas, Ms. SCHAKOWSKY, Mr. DOYLE, Mr. HONDA, Mr. GILLMOR, and Mr. CAPUANO.

H.R. 862: Mr. SANDLIN.

H.R. 876: Mr. PAYNE, Mr. WAMP, Mr. SABO, Mr. FARR of California, Mr. PASTOR, Mr. LARSEN of Washington, Mr. ALLEN, Mr. NUSSLE, Mr. DOGGETT, Mr. DEUTSCH, Mr. SIMMONS, Mr. BOEHLERT, and Mr. LUTHER.

H.R. 877: Mr. MORAN of Kansas.

H.R. 910: Mr. KUCINICH and Ms. NORTON.

H.R. 912: Mr. OXLEY and Mr. SPRATT.

H.R. 915: Mr. PASCRELL.

H.R. 936: Ms. ROYBAL-ALLARD.

H.R. 938: Mr. COYNE.

H.R. 950: Mr. LUCAS of Kentucky and Mr. NEY.

H.R. 959: Mr. SCHIFF and Mr. RAHALL.

H.R. 978: Mr. ROGERS of Michigan, Mr. EVANS, and Mr. GREENWOOD.

H.R. 981: Mr. MCCRERY, Mr. CONDIT, Mr. WATTS of Oklahoma, and Mr. MCINNIS.

H.R. 990: Mr. NETHERCUTT, Mr. GRAHAM, Ms. HOOLEY of Oregon, and Mr. COYNE.

H.R. 1001: Mr. DOYLE.

H.R. 1003: Mr. SOUDER.

H.R. 1011: Mr. PRYCE of North Carolina.

H.R. 1029: Mr. RYAN of Kansas.

H.R. 1037: Mr. COX.

H.R. 1071: Mr. PETERSON of Pennsylvania, Mr. GRUCCI, Mr. GREENWOOD, Mr. FARR of California, and Mr. GUTIERREZ.

H.R. 1073: Mr. WEINER, Mr. HYDE, Mr. MEEHAN, Ms. KILPATRICK, Mr. OBERSTAR, Mr. THOMPSON of Mississippi, and Mr. SERRANO.

H.R. 1076: Mr. DAVIS of Illinois, Mr. MEEHAN, Ms. LOFGREN, Mr. HALL of Ohio, Mr. DICKS, Mr. RUSH, Mrs. MCCARTHY of New York, Mr. KIND, Mr. SERRANO, Mr. UDALL of Colorado, Mr. SPRATT, Mr. BOSWELL, Mr. MORAN of Virginia, Mr. SCOTT, Mr. MASCARA, Ms. NORTON, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. COSTELLO, Mr. LARSON of Connecticut, Mr. JACKSON of Illinois, and Mr. SANDERS.

H.R. 1086: Mr. SCHIFF.

H.R. 1089: Mr. TANNER, Mr. LEWIS of Kentucky, and Mr. SNYDER.

- H.R. 1110: Mr. EDWARDS, Mr. PITTS, Mr. RAMSTAD, Ms. MCKINNEY, and Mr. PETERSON of Minnesota.
- H.R. 1126: Mr. TIAHRT.
- H.R. 1149: Mr. LARSON of Connecticut, Mr. ABERCROMBIE, Mr. ENGEL, Ms. BALDWIN, Ms. LOFGREN, Mr. ISSA, Ms. ROYBAL-ALLARD, and Ms. NORTON.
- H.R. 1164: Mr. MCDERMOTT, Ms. MCKINNEY, and Mr. FRANK.
- H.R. 1170: Mr. PALLONE, Mr. HONDA, and Mr. MEEHAN.
- H.R. 1177: Mr. EDWARDS.
- H.R. 1181: Mr. GRAVES.
- H.R. 1182: Mr. JONES of North Carolina, Mr. BARTON of Texas, and Mr. TIAHRT.
- H.R. 1192: Mr. SNYDER, Ms. SOLIS, and Ms. SANCHEZ.
- H.R. 1217: Mr. BONIOR and Mr. SANDLIN.
- H.R. 1252: Mrs. TAUSCHER, Mr. CROWLEY, Mr. WEXLER, and Mr. MCNULTY.
- H.R. 1254: Mr. GILLMOR, Mr. PALLONE, Mrs. KELLY, Mr. WELDON of Pennsylvania, Mr. HILLIARD, and Mr. HOLDEN.
- H.R. 1255: Mr. ALLEN.
- H.R. 1266: Mr. DOYLE, Mr. FILNER, Ms. NORTON, Mr. PASTOR, Ms. SOLIS, and Ms. VELAQUEZ.
- H.R. 1280: Ms. BALDWIN and Mr. CLEMENT.
- H.R. 1295: Mr. LANGEVIN and Ms. PELOSI.
- H.R. 1304: Mr. RAHALL, Ms. SLAUGHTER, and Mr. SIMMONS.
- H.R. 1305: Mr. MALONEY of Connecticut, Mr. BLAGOJEVICH, Ms. BALDWIN, Mr. HONDA, Mr. GREENWOOD, and Mr. HOEFFEL.
- H.R. 1307: Mrs. JO ANN DAVIS of Virginia, Mr. GILMAN, Mr. TIERNEY, Mr. BARCIA, Mr. LANTOS, and Ms. BALDWIN.
- H.R. 1328: Mrs. MINK of Hawaii and Mr. CONYERS.
- H.R. 1340: Mr. SHIMKUS.
- H.R. 1344: Mr. FILNER.
- H.R. 1351: Mr. HYDE and Mr. RAHALL.
- H.R. 1353: Mr. HYDE, Mrs. MINK of Hawaii, Mr. HILLEARY, Mrs. JO ANN DAVIS of Virginia, Ms. HART, Mrs. EMERSON, Mr. REYNOLDS, Mr. DEFAZIO, Mrs. CHRISTENSEN, and Mr. HINCHEY.
- H.R. 1354: Mrs. LOWEY, Mr. DOYLE, Mr. BONIOR, Mrs. CLAYTON, and Mr. GREEN of Texas.
- H.R. 1377: Mr. CONDIT, Mr. SMITH of Texas, Mr. TIAHRT, Mr. TAYLOR of Mississippi, and Mr. GREEN of Texas.
- H.R. 1388: Mr. FROST, Mr. UDALL of Colorado, Mr. BOSWELL, Ms. BALDWIN, and Mr. HAYES.
- H.R. 1400: Mr. BARCIA.
- H.R. 1402: Mr. OTTER.
- H.R. 1403: Mr. OTTER.
- H.R. 1404: Mr. OTTER.
- H.R. 1406: Mr. SANDLIN and Mr. ABERCROMBIE.
- H.R. 1427: Mr. SESSIONS, Ms. KILPATRICK, Mr. LANTOS, Mr. CULBERSON, and Ms. MCKINNEY.
- H.R. 1433: Ms. BALDWIN and Ms. DELAURO.
- H.R. 1434: Ms. CARSON of Indiana and Mr. LEWIS of Georgia.
- H.R. 1449: Ms. MCKINNEY.
- H.R. 1464: Mr. BONIOR.
- H.R. 1484: Mrs. LOWEY.
- H.R. 1487: Mr. CANTOR and Mr. DAVIS of Florida.
- H.R. 1492: Mr. CROWLEY.
- H.R. 1509: Mr. REYES, Mr. RUSH, Mr. CLEMENT, Mr. BERMAN, and Ms. WATERS.
- H.R. 1522: Mr. ALLEN, Mrs. MINK of Hawaii, Ms. JACKSON-LEE of Texas, Mr. SANDLIN, Ms. NORTON, Mr. LEWIS of Georgia, Mr. LAFALCE, and Mr. DEFAZIO.
- H.R. 1536: Mr. BARCIA, Mr. MCINTYRE, Mr. KUCINICH, Mr. JACKSON of Illinois, Ms. BALDWIN, and Mr. BLAGOJEVICH.
- H.R. 1541: Mr. SANDLIN.
- H.R. 1553: Mr. SHAYS and Mr. SIMPSON.
- H.R. 1556: Mr. MORAN of Virginia, Mr. HILLEARY, Mr. RANGEL, Mr. TURNER, Ms. SLAUGHTER, Mr. WEINER, Mr. OLVER, Mr. LEWIS of Kentucky, Mrs. LOWEY, Mr. DOYLE, Mr. STUPAK, Mr. SERRANO, Mr. PAUL, Ms. JACKSON-LEE of Texas, Mr. KOLBE, and Mr. GILLMOR.
- H.R. 1581: Mr. CHAMBLISS and Mr. SUNUNU.
- H.R. 1585: Mr. HASTINGS of Florida, Mrs. LOWEY, and Mrs. MEEK of Florida.
- H.R. 1589: Mr. FILNER.
- H.R. 1592: Ms. HART.
- H.R. 1602: Mr. BACHUS, Mr. PAUL, and Mr. ISAKSON.
- H.R. 1609: Mr. PAUL, Mr. TURNER, Mr. LEWIS of Kentucky, Mr. BARCIA, Mr. GILLMOR, Mr. THOMPSON of Mississippi, Mr. HALL of Texas, Mr. WICKER, and Mr. WATTS of Oklahoma.
- H.R. 1623: Mr. WATTS of Oklahoma.
- H.R. 1624: Mr. KING, Mr. DOYLE, Mr. ACKERMAN, Mr. QUINN, Mr. CAPUANO, Mr. MCNULTY, Ms. RIVERS, Mr. SCHIFF, Mrs. CHRISTENSEN, Mr. CUMMINGS, Mr. BROWN of Ohio, Mr. COSTELLO, Mr. GEORGE MILLER of California, Mr. WYNN, Mr. ROGERS of Michigan, Ms. NORTON, Mr. NADLER, Mr. WICKER, Ms. LEE, and Mr. SAXTON.
- H.R. 1644: Mrs. CUBIN, Mr. SESSIONS, Mr. BARCIA, Mr. GRUCCI, Mr. CRANE, Mr. WELLER, Mr. WICKER, Mr. NETHERCUTT, and Mr. DELAY.
- H.R. 1650: Mrs. MEEK of Florida and Mr. DAVIS of Illinois.
- H.R. 1661: Mr. BAIRD.
- H.R. 1689: Mr. PICKERING, Mr. CONDIT, and Mr. ABERCROMBIE.
- H.R. 1693: Mr. BENTSEN, Ms. LOFGREN, and Mr. SCHIFF.
- H.R. 1700: Ms. MCCOLLUM, Mr. KOLBE, Mr. COYNE, Mr. SERRANO, Mr. POMBO, Mr. OBERSTAR, Mr. HINCHEY, Ms. SCHAKOWSKY, Mr. THOMPSON of Mississippi, Ms. PELOSI, Mrs. MINK of Hawaii, Mr. KENNEDY of Rhode Island, Mr. OWENS, and Ms. LEE.
- H.R. 1707: Mr. GOODLATTE.
- H.R. 1711: Mr. JONES of North Carolina.
- H.R. 1716: Mr. DAVIS of Illinois, Mrs. MINK of Hawaii, and Mr. ISSA.
- H.R. 1717: Ms. WATERS and Ms. JACKSON-LEE of Texas.
- H.R. 1718: Ms. SLAUGHTER, Mr. HOLT, Ms. SANCHEZ, Mr. HUTCHINSON, Mr. RODRIGUEZ, Mr. WAXMAN, Mr. SNYDER, Mr. PORTMAN, Mrs. LOWEY, Mr. BARCIA, Mr. ROEMER, and Mr. ENGEL.
- H.R. 1723: Ms. SCHAKOWSKY, Mr. OLVER, Mr. SANDERS, Mr. WAXMAN, Mr. UDALL of Colorado, Mr. PALLONE, Mr. DOYLE, Mr. LARSON of Connecticut, Mrs. THURMAN, Mrs. MCCARTHY of New York, Ms. RIVERS, Mrs. JO ANN DAVIS of Virginia, Mr. FARR of California, Mr. DEFAZIO, and Mr. GREEN of Texas.
- H.R. 1733: Mr. GUTIERREZ, Ms. RIVERS, Ms. SCHAKOWSKY, Mr. BONIOR, Mr. GREEN of Texas, and Mr. MCGOVERN.
- H.R. 1759: Mr. INSLEE, Mrs. JONES of Ohio, and Mrs. THURMAN.
- H.R. 1780: Mr. LAMPSON, Mr. COYNE, and Mr. BALDACCII.
- H.R. 1781: Mr. LAMPSON, Mr. BARCIA, Mr. UDALL of Colorado, Mr. FRANK, and Mr. BERMAN.
- H.R. 1782: Mr. GILLMOR.
- H.R. 1798: Mr. FRANK and Mr. NEAL of Massachusetts.
- H.R. 1805: Mr. KELLER.
- H.R. 1810: Ms. MCCOLLUM, Ms. BALDWIN, Ms. SLAUGHTER, Mr. SERRANO, Mr. FRANK, Ms. WOOLSEY, Mr. DOYLE, Mr. SANDERS, Mr. COYNE, Mr. BLAGOJEVICH, Mr. RAHALL, Mr. MCDERMOTT, Mr. ACKERMAN, Mr. PETERSON of Minnesota, Mr. DEFAZIO, and Mr. MCNULTY.
- H.R. 1834: Mr. GRUCCI, Ms. HART, and Mr. UPTON.
- H.R. 1839: Mr. UDALL of New Mexico and Mr. DOYLE.
- H.R. 1842: Mr. DAVIS of Illinois and Mr. MCDERMOTT.
- H.R. 1847: Mr. TERRY.
- H.R. 1848: Mrs. THURMAN, Mr. BLUNT, and Mr. BOUCHER.
- H.R. 1861: Mr. PICKERING and Mr. JOHNSON of Illinois.
- H.R. 1864: Ms. KILPATRICK.
- H.R. 1872: Mr. WOLF, Ms. ROS-LEHTINEN, Mr. GOSS, Mr. WELDON of Florida, and Mr. SPENCE.
- H.R. 1879: Mr. DREIER.
- H.R. 1909: Mr. LEVIN.
- H.R. 1910: Mr. CRANE, Mr. SHERMAN, Mr. BRADY of Pennsylvania, Mr. VISCIOSKY, and Mr. SMITH of New Jersey.
- H.R. 1911: Mr. MANUZULLO.
- H.R. 1927: Mr. CAMP and Ms. KILPATRICK.
- H.R. 1928: Ms. NORTON, Mr. COYNE, Mr. ENGEL, and Ms. RIVERS.
- H.R. 1939: Mr. FILNER.
- H.R. 1943: Mr. CARSON of Oklahoma.
- H.R. 1945: Mr. SANDERS and Mr. NADLER.
- H.R. 1948: Mr. SANDLIN, Mr. ABERCROMBIE, and Mr. KILDEE.
- H.R. 1950: Mrs. ROUKEMA and Mr. BONILLA.
- H.R. 1954: Mr. BURR of North Carolina, Mr. CALVERT, Mr. CRAMER, Mr. KELLER, Mr. KENNEDY of Minnesota, and Mr. ROSS.
- H.R. 1956: Mr. CALLAHAN, Mr. ROSS, and Mr. PRICE of North Carolina.
- H.R. 1957: Mr. SIMMONS, Mrs. JOHNSON of Connecticut, and Mr. SHOWS.
- H.R. 1964: Mr. OBERSTAR and Ms. LEE.
- H.R. 1975: Mr. SHIMKUS.
- H.R. 1979: Mr. DELAY, Mr. MORAN of Kansas, Mr. PICKERING, Mr. SHOWS, Mr. RYUN of Kansas, Mr. JONES of North Carolina, Mr. WELDON of Florida, Mrs. THURMAN, and Mr. THORNBERRY.
- H.R. 1982: Mr. CRANE and Mr. MANZULLO.
- H.R. 1986: Mr. NORWOOD.
- H.R. 1990: Ms. LEE.
- H.R. 1994: Ms. MCKINNEY.
- H.R. 2025: Mrs. BIGBERT.
- H.R. 2029: Mr. WICKER.
- H.J. Res. 6: Mr. RANGEL, Mr. LARSON of Connecticut, and Mr. MCHUGH.
- H.J. Res. 36: Mr. SHUSTER, Mr. POMBO, Mr. PITTS, and Mr. BALENGER.
- H. Con. Res. 42: Mr. BARCIA, Mr. ISRAEL, Mr. MATHESON, Mr. LANGEVIN, and Mr. PAYNE.
- H. Con. Res. 45: Mr. CLAY.
- H. Con. Res. 85: Mrs. CAPPS, Mr. DAVIS of Illinois, and Mr. LANTOS.
- H. Con. Res. 100: Mr. WAMP, Mr. HILLEARY, and Mr. OSBORNE.
- H. Con. Res. 103: Ms. BALDWIN.
- H. Con. Res. 104: Mr. HYDE, Mr. CRENSHAW, Mr. ENGEL, and Mr. ISRAEL.
- H. Con. Res. 116: Mr. CLEMENT, Mr. HEFLEY, Mr. GOSS, Mr. LAMPSON, Mr. BILIRAKIS, and Mr. CAMP.
- H. Con. Res. 142: Mr. WEINER, Mr. BOYD, and Ms. WATERS.
- H. Con. Res. 145: Mr. MEEHAN, Mr. ROYCE, Mr. HILLIARD, Ms. LOFGREN, Mr. DOOLITTLE, Mr. LEVIN, Ms. CARSON of Indiana, Mrs. LOWEY, Mr. DOYLE, Mrs. THURMAN, Mr. KNOLLENBERG, Mr. ISSA, and Mr. DEFAZIO.
- H. Con. Res. 148: Mr. EHLERS.
- H. Res. 17: Ms. SCHAKOWSKY.
- H. Res. 18: Mr. MATSUI.
- H.R. 49: Mr. OWENS, Mr. JACKSON of Illinois, Mr. CLAY, Ms. KILPATRICK, Mrs. CHRISTENSEN, Mr. THOMPSON of Mississippi, Mr. MEEKS of New York, Mr. HASTINGS of Florida, Ms. NORTON, Mr. HILLIARD, Mrs. MEEK of Florida, Ms. JACKSON-LEE of Texas, Ms. MILLENDER-MCDONALD, Mrs. CLAYTON, Ms. WATERS, Mr. CUMMINGS, Ms. EDDIE BERNICE JOHNSON of Texas, and Mr. FATTAH.
- H. Res. 87: Ms. MCCARTHY of Missouri and Mr. CONYERS.
- H. Res. 101: Mr. MORAN of Virginia.
- H. Res. 105: Mr. ENGEL.
- H. Res. 120: Mr. BLAGOJEVICH and Ms. BALDWIN.

## PETITIONS, ETC.

Under clause 3 of rule XII, petitions and papers were laid on the clerk's desk and referred as follows:

18. The SPEAKER presented a petition of the Council on Administrative Rights, relative to a Resolution petitioning the United States Congress to seek redress from a failing educational system; to the Committee on Education and the Workforce.

19. Also, a petition of the Council on Administrative Rights, relative to a Resolution petitioning the United States Congress to seek redress from crime at all levels; to the Committee on the Judiciary.

20. Also, a petition of the Council on Administrative Rights, relative to a Resolution petitioning the United States Congress to seek redress from the current slowdown in the economy of the United States; jointly to the Committees on Financial Services, Ways and Means, and Education and the Workforce.

21. Also, a petition of the Council on Administrative Rights, relative to a Resolution petitioning the United States Congress to provide universal healthcare coverage to all American citizens; jointly to the Committees on Energy and Commerce, Ways and Means, and Education and the Workforce.

22. Also, a petition of the Council on Administrative Rights, relative to a Resolution petitioning the United States Congress to seek redress from the arcane voting procedures and barriers to ballot access; jointly to the Committees on House Administration, Government Reform, and the Judiciary.

23. Also, a petition of the Council on Administrative Rights, relative to a Resolution petitioning the United States Congress to seek redress from gender discrimination and pay inequity against women; jointly to the Committees on the Judiciary, Education and the Workforce, and Energy and Commerce.

24. Also, a petition of the LaSalle County Board, Illinois, relative to Resolution No. 01-45 petitioning the United States Congress to pass the Steel Revitalization Act of 2001 and to support the Steelworkers fight against the unfair trade of foreign steel that has damaged our economy; jointly to the Committees on Ways and Means, Financial Services, and Education and the Workforce.

25. Also, a petition of the Council on Administrative Rights, relative to a Resolution petitioning the United States Congress to

seek redress from ineffective environmental and energy policies; jointly to the Committees on Energy and Commerce, Resources, Transportation and Infrastructure, Agriculture, and Ways and Means.

## AMENDMENTS

Under clause 8 of rule XVIII, proposed amendments were submitted as follows:

H.R. 1699

OFFERED BY: MRS. BIGGERT

AMENDMENT NO. 1: At the end of the bill add the following:

**SEC. . ASSISTANCE FOR MARINE SAFETY STATION ON CHICAGO LAKEFRONT.**

(a) ASSISTANCE AUTHORIZED.—The Secretary of Transportation may use amounts authorized under this section to provide financial assistance to the City of Chicago, Illinois, to pay the Federal share of the cost of a project to demolish the Old Coast Guard Station, located at the north end of the inner Chicago Harbor breakwater at the foot of Randolph Street, and to construct a new facility at that site for use as a marine safety station on the Chicago lakefront.

(b) COST SHARING.—

(1) FEDERAL SHARE.—The Federal share of the cost of a project carried out with assistance under this section may not exceed one third of the total cost of the project.

(2) NON-FEDERAL SHARE.—There shall not be applied to the non-Federal share of a project carried out with assistance under this section—

(1) the value of land and existing facilities used for the project; and

(2) any costs incurred for site work performed before the date of the enactment of this Act, including costs for reconstruction of the east breakwater wall and associated utilities.

(c) AUTHORIZATION OF APPROPRIATIONS.—In addition to the other amounts authorized by this Act, for providing financial assistance under this section there is authorized to be appropriated to the Secretary of Transportation \$2,000,000 for fiscal year 2002, to remain available until expended.

H.R. 1699

OFFERED BY: MR. HOEKSTRA

AMENDMENT NO. 2: At the end of the bill add the following:

**SEC. . COAST GUARD AIR SEARCH AND RESCUE FACILITIES FOR LAKE MICHIGAN.**

AUTHORIZATION OF APPROPRIATIONS.—In addition to the other amounts authorized by this Act, there are authorized to be appropriated to the Secretary of Transportation for operation and maintenance of the Coast Guard air search and rescue facility in Muskegon, Michigan, \$2,028,000 for fiscal year 2002.

H.R. 1699

OFFERED BY: MR. SHADEGG

AMENDMENT NO. 3: At the end of the bill add the following new section:

**SEC. . STUDY OF RISK OF CARBON MONOXIDE POISONING ON RECREATIONAL VESSELS.**

(a) STUDY.—The Secretary of the department in which the Coast Guard is operating shall use amounts available under this Act to carry out a study of structural designs of recreational vessels, for the purpose of identifying and addressing structural defects that are likely to create conditions that pose a risk of carbon monoxide poisoning.

(b) CONTENT.—The study shall—

(1) include examination of various methods of—

(A) carbon monoxide detection and warning on recreational vessels; and

(B) ventilation and exhaust routing on recreational vessels, including side venting, wet/dry stacks, catalytic converters/afterburners, and such other designs as the Secretary determines may correct structural defects identified in the study;

(2) include examination of changes to the design of new recreational vessels and retrofits of existing recreational vessels; and

(3) develop recommendations for improving the effectiveness of such methods, designs, and retrofits.

(c) REPORT.—The Secretary shall submit a report to the Congress on the findings, conclusions, and recommendations of the study under this section within 60 days after the date amounts are available to carry out this section.

(d) RECREATIONAL VESSEL DEFINED.—In this section the term "recreational vessel" has the meaning given that term in section 2101 of title 46, United States Code, and includes houseboats.