

more Americans will be denied their basic right to health care. The Catholic Health Association represents facilities across this country that provide a safety net for uninsured and underinsured citizens in need of medical care. Led by the Reverend Michael D. Place, its president and chief executive officer, CHA is working actively to increase awareness of this crisis. I urge all my colleagues to heed their timely call to action.

[From the Baltimore Sun, Feb. 19, 2002]
**RESCUE THE UNINSURED FROM SEA OF
 UNCERTAINTY**

(By Michael D. Place)

WASHINGTON.—In Manchester, N.H., a 6-year-old girl arrives at Catholic Medical Center unable to eat for several days because of medical complications from dental pain.

Why the wait? The little girl's family did not have health insurance.

This child, and so many others across the country, represent the crisis of vulnerability endured by 38 million Americans without any health insurance.

While the girl in Manchester was fortunate enough to live in proximity to a Catholic health facility with high quality emergency care, there are 22 million Americans who live in rural areas that the federal government calls "health profession shortage areas."

Many of these citizens are without health insurance and without access to medical care of any kind. They are at the apex of this health care crisis of vulnerability.

As we struggle to cope with burgeoning numbers of uninsured across the country, rural areas highlight a disturbing trend of funding "drift"—a drift away from subsidized health care coverage for the poor, the unemployed and the disabled.

Rural hospitals were hit hard by the Balanced Budget Act of 1997. It has been estimated that of the \$118 billion that the law directed to be cut over five years, \$16.8 billion was cut from Medicare funds intended for rural areas. Legislation in the past two years has restored only about \$3.8 billion of this money.

For skeptics who believe that rural health care may not be as vital as has been reported, a quick look at a sample state's mortality statistics may be convincing.

In Illinois, rural death rates from all causes from 1992 to 1996 were 1,106.7 deaths for every 100,000 people. This figure compares with 853.8 deaths in Illinois' urban areas.

Sadly, the rural patient base tends to be older, poorer and less medically privileged. For such patients, the small rural hospital is indeed a lifeline in need of preservation.

Whether in rural or urban areas, our cities have no shortage of uninsured and desperate families. In Des Moines, Iowa, a single Catholic hospital—Mercy Medical Center—operates a free clinic through its House of Mercy program. More than 600 people a month come in without insurance, many with acute illness.

In the South Bronx, the Dominican Sisters Family Health Services is a safety net provider in what has been designated the nation's poorest congressional district. Hospital admission rates in that community for children with asthma and pneumonia—conditions that can be prevented with adequate primary care—are five to seven times the rates in more affluent areas of New York City.

Emergency access to basic health care is a stopgap. The emergency room or free clinic is not a substitute for health insurance coverage for access to the same health-care services enjoyed by the more privileged in our society.

And such access is critical not only to ensuring quality of life but also term of life.

The heart or cancer patient, treated early and with our best tools, can be offered a much different prospect than the critical care patient who arrives without benefit of early therapy.

During this congressional legislative session, it is increasingly important that we tackle the health care needs of our nation's uninsured. When Congress failed to adopt an economic stimulus package in February, the growing numbers of the recently unemployed and uninsured were dealt a dose of legislative paralysis.

Added to the diminishing set-asides for the "permanent" uninsured, the health care outlook for our nation's poor, uninsured, and under-served population is truly bleak.

We must and can do better.

American society must ensure that each person has access to affordable health care. At a crossroads moment, let us engage in a new national conversation on systemic health care reform, a dialogue from Main Street to Pennsylvania Avenue.

It is time for our nation's public and private leadership, health care providers and faith-based groups to come together and to join all Americans in a search for real and meaningful solutions to this health care challenge.

**CONGRATULATING REVEREND
 BOBBY RAY MORRIS**

HON. SAM GRAVES

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 5, 2002

Mr. GRAVES. Mr. Speaker, I rise today to congratulate Reverend Bobby Ray Morris of Lawson, Missouri. Reverend Morris has been the pastor of the Lawson Assembly of God Church for the past 42 years, providing spiritual leadership to generations of Missourians.

In addition to caring for his congregation, Reverend Morris is a positive influence on the community of Lawson. During his distinguished tenure, 25 individuals became pastors, youth leaders, and missionaries. The dedication and guidance of Reverend Morris enabled these individuals to answer their calls to the ministry.

This well-loved and respected man of God is retiring on March 16. Although the Reverend will relinquish his role as leader of the Lawson Assembly of God Church, he will remain a spiritual leader in the community and continue to guide and inspire future generations. Please join me in honoring Reverend Bobby Ray Morris for his life of service to the community of Lawson.

PERSONAL EXPLANATION

HON. HILDA L. SOLIS

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 5, 2002

Ms. SOLIS. Mr. Speaker, during rollcall vote number 46 on H. Con. Res. 305 I was unavoidably detained. Had I been present, I would have voted "yes".

PERSONAL EXPLANATION

HON. RUBÉN HINOJOSA

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 5, 2002

Mr. HINOJOSA. Mr. Speaker, I regret that I had to travel to my Congressional District for an important event on February 28, 2002. Had I been present, I would have voted "yes" on rollcall 46.

HONORING ABRAHAM FROST

HON. PETER DEUTSCH

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 5, 2002

Mr. DEUTSCH. Mr. Speaker, today I rise to honor the memory of Abraham Frost, who came to this country from Poland in 1912. Mr. Frost was an individual who was constantly in awe of everything he saw in the United States. For his entire life, he had a deep appreciation for the opportunities this great nation provided to him, and truly enjoyed his work and time spent raising his family. Mr. Frost marveled at the development of modern conveniences such as automobiles and airplanes. He was truly captivated with the possibility of realizing the American Dream. Abraham Frost died in 1976 in Miami Beach, Florida.

Mr. Speaker, the accomplishments of Abraham Frost are a testament to his dedication and his passion for life. He leaves a lasting legacy for both his family and friends.

HUNTING MADE EASY

HON. SAM FARR

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 5, 2002

Mr. FARR of California. Mr. Speaker, I encourage you to read the Time Magazine article entitled "Hunting Made Easy" which describes the "slaughter" of "captive animals to mount their heads on a wall."

It is a very disturbing article which also raises the question, "Should Congress step in?" The answer is a resounding yes. You can step in by cosponsoring H.R. 3464, the "Captive Exotic Animal Protection Act of 2001", a bill to combat the unfair and inhumane practice of "canned hunting." Even hunters are objecting to this gruesome practice.

HUNTING MADE EASY

(By Jeffrey Kluger)

The exotic Corsican ram trotting about the 100-yard-long pen in central Pennsylvania paid little mind to the men approaching across the field. People were always walking in and out of the pen, as often as not with food for the flock. So the ram didn't resist when the men drove all the animals toward one end of the enclosure. It was only when the first arrow—fired from just yards away—struck it in the haunch that it realized something was up. The ram hobbled off and was struck by a second arrow, then a third. It stood for a moment staring beyond the fence line and then settled onto its haunches, bleeding. A gunshot to the abdomen finished it off—preserving its head as a trophy.