

this is not the case, and variations in quality of care can have dire outcomes. A recent study found that women on Medicaid are likely to be diagnosed with cancer at a later stage and are three times more likely to die of breast cancer than women not on Medicaid.

The problem: Even with tremendous advancements in treatment and diagnosis, individuals with cancer are still not receiving quality care. Due to lack of data, the magnitude of the problem of inadequate care is not known. Comprehensive data systems do not currently exist with which to measure quality and there is no national cancer care program or system of care within the United States.

Our solution: Collect better information to discover where problems exist and create statewide plans to address the problems. The bill will draw together Federal agencies and private entities to coordinate the development and collection of information on quality of care. States will receive funds to expand state cancer registries to collect information on quality of care and develop and improve state-wide cancer control programs that address particular needs for each state.

The Problem: Individuals with cancer often have difficulties negotiating through a complex system of care. Like other chronic illnesses, efforts to diagnose and treat cancer are centered on a variety of individual physicians and can be in multiple settings. Coordination between these entities is often lacking, and the responsibility for navigating through the system often rests on the individual with cancer. Improving coordination can save lives. Research has shown that cooperation among pediatric oncologists has resulted in cure rate increases of 30 percent even in the absence of new therapeutics to treat disease.

Our Solution: Provide case-managers to guide patients during treatment and improve the coordination of care. Two programs will be developed to help individuals with cancer receive coordinated cancer care. The first provides individual case-managers to help get patients into the system or to act as contacts throughout their care and assist with information, referrals, and care coordination within the system. The second improves coordination between doctors, hospitals, and other health care professionals so that individuals with cancer receive seamless care throughout their treatment.

The Problem: While research has produced new insights into the causes and cures of cancer, efforts to manage the symptoms of the disease and its treatments have not kept pace. Palliative care, which includes pain and symptom management and psychosocial care, is an area where individuals with cancer have traditionally received relatively poor quality care. For example, less than half of individuals with cancer who suffer from pain receive adequate relief of their pain, and only a very small percentage of cancer patients are offered referrals for palliative care.

Our Solution: Improve palliative care. The bill will develop programs to provide palliative care and train professionals to provide better palliative care for both adults and children with cancer.

The Problem: Cancer survivors continue to need quality care while living with, through, and beyond cancer. Although 1,500 people die each day from cancer, increasingly, individuals with cancer survive their disease. The more than nine million cancer survivors in the United States face unique care needs, including post-treatment programs and support, which are often inadequately addressed by a system focused on diagnosis and disease treatment.

Our Solution: Initiate programs to address the unique needs of survivors. The bill devel-

ops post-treatment programs including follow-up care and monitoring to improve the long-term quality of life for cancer survivors, including children.

The Problem: Insufficient attention is being paid to individuals with cancer in the final stages of their disease. One-half of those diagnosed with cancer die of the disease. Unfortunately, appropriate end-of-life medical and social support, which would help maximize the quality of life for these individuals and their families, is often unavailable. This is particularly true for children. Most physicians do not receive adequate training on the provision of appropriate end-of-life care. A 1998 study found that 100 percent of residents and 90 percent of attending physicians wanted more support in dealing with issues surrounding the death of a patient.

Our Solution: Avoid needless pain and suffering by improving end-of-life care. The bill provides grants to coordinate end-of-life cancer care and train health care providers in end-of-life care. Pilot programs will also be developed to address the special needs of children.

#### QUALITY OF CARE FOR INDIVIDUALS WITH CANCER ACT—KENNEDY-FRIST, SECTION-BY-SECTION SUMMARY

##### TITLE I—MEASURING THE QUALITY OF CANCER CARE

Seeks to facilitate a contract to a national consensus organization to investigate the validity of existing quality measures and to then establish recommendations for core sets of quality cancer measures. These recommendations would be published within AHRQ's annual report and, after four years, the General Accounting Office will evaluate the extent to which Federal and private sector health care delivery programs have incorporated these quality measures.

##### TITLE II—ENHANCING DATA COLLECTION

Serves to reauthorize the CDC's National Program of Cancer Registries, including new provisions to monitor and evaluate quality cancer care and to increase linkages with various entities to examine disparities in quality cancer care. It also authorizes the CDC's National Program of Cancer Registries—Cancer Surveillance System to advance the development, expansion, and evaluation of State registries and encourages CDC to work with states to meet North American Association of Cancer Registries certification.

##### TITLE III—MONITORING AND EVALUATING THE QUALITY OF CANCER CARE AND OUTCOMES

Supports research to measure, evaluate, and improve the quality of cancer care, and funds private/public partnerships to enhance the usefulness of such information, including fostering the development or adoption of model systems of care or speeding the pace of improvement in quality of cancer care.

##### TITLE IV—STRENGTHENING COMPREHENSIVE CANCER CONTROL

Authorizes the CDC's Comprehensive Cancer Control Program to develop an integrated and coordinated approach to cancer. The Program will establish guidelines regarding the design and implementation of state comprehensive cancer control plans, and awards grants to develop, update, implement, and evaluate such plans.

##### TITLE V—IMPROVING NAVIGATION AND SYSTEM COORDINATION

Provides grants to develop, implement, and evaluate case management programs to enhance the quality of cancer through improved access and navigation. Grants are also awarded to develop coordinated systems of health care providers. Finally, this title

defines "palliative care" and "quality of cancer care."

##### TITLE VI—ESTABLISHING PROGRAMS IN PALLIATIVE CARE

Provides grants to improve palliative care for adults and children with cancer by: integrating programs, conducting outreach and educational activities, providing education and training to health care providers; designing model programs; creating pilot programs for children; and for other activities.

##### TITLE VII—ESTABLISHING SURVIVORSHIP PROGRAMS

Establishes demonstration programs to develop post-treatment public health programs and services including follow-up care and monitoring to support and improve the long-term quality of life for cancer survivors, including children. A focus on cancer survivorship is also added to cancer control programs.

##### TITLE VIII—PROGRAMS FOR END-OF-LIFE CARE

Provides grants to develop, implement, and evaluate evidence-based programs for the delivery of quality cancer care during the end-of-life to individuals with cancer (with a special emphasis on children) and their families.

##### TITLE IX—DEVELOPING TRAINING CURRICULA

Provides grants for the development of curricula for health care provider training regarding the assessment, monitoring, improvement, and delivery of quality of cancer care.

##### TITLE X—CONDUCTING REPORTS

Requires IOM reports to: evaluate Federal and State Comprehensive Cancer Control programs; evaluate the quality of cancer care medicare and medicaid beneficiaries receive and the extent to which coverage and reimbursement policies affect access to quality of cancer care; evaluate access to clinical trials; and analyze gaps in and impediments for quality of cancer care. An additional long-range IOM report will provide a follow-up assessment of the bill's success in achieving its initiatives.

#### ORGANIZATIONS SUPPORTING THE KENNEDY-FRIST, QUALITY OF CARE FOR INDIVIDUALS WITH CANCER ACT

Alive Hospice;  
American Cancer Society;  
American Pain Foundation;  
American Society of Breast Disease;  
The Children's Hospital at the Cleveland Clinic;  
Colorectal Cancer Network;  
Intercultural Cancer Council;  
Lance Armstrong Foundation;  
Oncology Nursing Society;  
Pain Care Coalition;  
Research Triangle Institute International;  
Stanford University Center for Biomedical Ethics; and  
Vitas Healthcare Corp.

#### SUBMITTED RESOLUTIONS

##### SENATE CONCURRENT RESOLUTION 140—RECOGNIZING THE TEAMS AND PLAYERS OF THE NEGRO BASEBALL LEAGUES FOR THEIR ACHIEVEMENTS, DEDICATION, SACRIFICES, AND CONTRIBUTIONS TO BASEBALL AND THE NATION

Mr. SANTORUM submitted the following concurrent resolution; which was referred to the Committee on the Judiciary:

S. CON. RES. 140

Whereas even though African-Americans were excluded from playing in the major

leagues of baseball with their Caucasian counterparts, the desire of some African-Americans to play baseball could not be repressed;

Whereas African-Americans began organizing their own professional baseball teams in 1885;

Whereas 6 separate baseball leagues, known collectively as the Negro Baseball Leagues, were organized by African-Americans between 1920 and 1960;

Whereas the Negro Baseball Leagues included exceptionally talented players;

Whereas Jackie Robinson, whose career began in the Negro Baseball Leagues, was named Rookie of the Year in 1947 and subsequently led the Brooklyn Dodgers to 6 National League pennants and a World Series championship;

Whereas by achieving success on the baseball field, African-American baseball players helped break down color barriers and integrate African-Americans into all aspects of society in the United States;

Whereas during World War II, more than 50 Negro Baseball League players served in the Armed Forces of the United States;

Whereas during an era of sexism and gender barriers, 3 women played in the Negro Baseball Leagues;

Whereas the Negro Baseball Leagues helped teach the people of the United States that what matters most is not the color of a person's skin, but the content of that person's character and the measure of that person's skills and abilities;

Whereas only in recent years has the history of the Negro Baseball Leagues begun receiving the recognition that it deserves; and

Whereas baseball is the national pastime and reflects the history of the Nation: Now, therefore, be it

*Resolved by the Senate (the House of Representatives concurring),* That Congress recognizes the teams and players of the Negro Baseball Leagues for their achievements, dedication, sacrifices, and contributions to baseball and the Nation.

**SENATE CONCURRENT RESOLUTION 141—CONGRATULATING THE LAWRENCE LIVERMORE NATIONAL LABORATORY, ITS STAFF, AND FORMER EMPLOYEES, ON THE OCCASION OF THE 50TH ANNIVERSARY OF THE FOUNDING OF THE LABORATORY, FOR ITS OUTSTANDING CONTRIBUTIONS TO NATIONAL SECURITY AND SCIENCE IN SERVICE TO OUR NATION**

Mrs. FEINSTEIN submitted the following concurrent resolution; which was referred to the Committee on the Judiciary:

S. CON. RES. 141

Whereas the Lawrence Livermore National Laboratory was established in 1952 as part of the University of California Radiation Laboratory to augment the efforts of the Los Alamos National Laboratory to meet an urgent national security need and has since made important advances in nuclear weapons science and technology to keep the Nation at peace and secure;

Whereas advances by the Laboratory in nuclear weapons technology strengthened the ability of NATO to deter aggression in Europe during the Cold War and have ensured the continuing safety, security, and reliability of our Nation's nuclear weapons stockpile in the absence of nuclear testing;

Whereas the Laboratory has provided technical support to arms control negotiations

and treaty implementation, including negotiations and treaties to reduce the size of nuclear arsenals, prevent the proliferation of nuclear weapons and technologies, and limit nuclear weapons testing;

Whereas the Laboratory has greatly contributed to efforts of the United States intelligence community to understand nuclear-weapons related activities worldwide, as well as to respond to nuclear emergencies through its participation in the Nuclear Emergency Search Team, its development of the National Atmospheric Release Advisory Center, and its other emergency response capabilities, which are now contributing to the war against terrorism;

Whereas Laboratory researchers have made many scientific advances, including work that won a Nobel Prize for Physics in 1998 and numerous advances in astrophysics, such as contributions to understanding supernovas, high resolution mapping of the moon, the search for dark matter in the universe, and the development of advanced technologies to improve the performance of terrestrially-based telescopes;

Whereas technology development of the Laboratory has broadly contributed to the Nation's technical prowess and the competitiveness of United States industry, as evidenced by the winning of 85 prestigious R&D 100 awards, the most by any institution, as well as by very effective long-term partnerships with the computer industry and laser and electro-optics industries;

Whereas the Laboratory has contributed to the development of technologies that offer the promise of providing energy security in the long term, including technology development for coal gasification, significant advances in fusion energy science, and international leadership in inertial confinement fusion research, and construction of large inertial confinement fusion lasers including ongoing work on the National Ignition Facility;

Whereas the Laboratory has developed novel environmental restoration technologies that are being used to rapidly clean up groundwater contamination at Superfund sites and is at the forefront of the development of simulation capabilities to better understand the Earth's climate and how it may change;

Whereas technologies developed at the Laboratory contributed to the Department of Energy's decision to launch its Human Genome Initiative in 1987, which evolved into the international Human Genome Project, the Laboratory participated in the project by mapping and sequencing chromosome 16, and continuing genetics work at the Laboratory is leading to the identification of the source of genetic diseases and to the development of improved detectors of biological agents;

Whereas the Laboratory is a valuable part of the University of California, working cooperatively with its many campuses to further higher education, contributing broadly to elementary and secondary educational efforts throughout Northern California and educational outreach directed at minority groups nationwide; and

Whereas the Laboratory has been a national resource for science and technology for 50 years dedicated to serve our Nation: Now, therefore, be it

*Resolved by the Senate (the House of Representatives concurring),* That Congress, on the occasion of the 50th anniversary of the founding of the Lawrence Livermore National Laboratory, congratulates the Laboratory, its staff, and former employees for its dedicated service to our Nation, with its outstanding contributions to national security, its tradition of scientific and technical excellence, and its continuing efforts to

make the world more secure and a better place to live.

**AMENDMENTS SUBMITTED & PROPOSED**

SA 4563. Mr. BAYH (for himself, Mr. SHELBY, Mr. SESSIONS, Mr. HUTCHINSON, Mr. MCCONNELL, and Mr. DURBIN) submitted an amendment intended to be proposed to amendment SA 4471 proposed by Mr. LIEBERMAN to the bill H.R. 5005, to establish the Department of Homeland Security, and for other purposes.

SA 4564. Mr. FEINGOLD submitted an amendment intended to be proposed to amendment SA 4471 proposed by Mr. LIEBERMAN to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4565. Mr. FEINGOLD (for himself, Ms. COLLINS, and Mr. CARPER) submitted an amendment intended to be proposed to amendment SA 4471 proposed by Mr. LIEBERMAN to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4566. Mr. LEVIN (for himself, Mr. GRASSLEY, Mr. AKAKA, and Mr. LEAHY) submitted an amendment intended to be proposed to amendment SA 4471 proposed by Mr. LIEBERMAN to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4567. Mr. LEVIN (for himself and Mr. MCCONNELL) submitted an amendment intended to be proposed by him to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4568. Mr. HOLLINGS (for himself, Mr. MCCAIN, Mr. REID, Mr. JEFFORDS, Mr. CARPER, and Mr. TORRICELLI) submitted an amendment intended to be proposed to amendment SA 4471 proposed by Mr. LIEBERMAN to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4569. Mr. FEINGOLD submitted an amendment intended to be proposed to amendment SA 4471 proposed by Mr. LIEBERMAN to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4570. Mr. FEINGOLD submitted an amendment intended to be proposed to amendment SA 4471 proposed by Mr. LIEBERMAN to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4571. Mr. NELSON, of Nebraska submitted an amendment intended to be proposed by him to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4572. Mr. CLELAND submitted an amendment intended to be proposed to amendment SA 4471 proposed by Mr. LIEBERMAN to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4573. Mrs. BOXER (for herself, Mr. INOUE, and Mr. CAMPBELL) proposed an amendment to amendment SA 4472 proposed by Mr. BYRD to the bill H.R. 5093, making appropriations for the Department of the Interior and related agencies for the fiscal year ending September 30, 2003, and for other purposes.

SA 4574. Mr. BURNS (for Mr. BROWNBAC) proposed an amendment to amendment SA 4472 proposed by Mr. BYRD to the bill H.R. 5093, supra.

SA 4575. Mr. NELSON, of Nebraska submitted an amendment intended to be proposed by him to the bill H.R. 5005, to establish the Department of Homeland Security, and for other purposes; which was ordered to lie on the table.

SA 4576. Mr. NELSON, of Nebraska submitted an amendment intended to be proposed by him to the bill H.R. 5005, supra; which was ordered to lie on the table.

SA 4577. Mr. WYDEN submitted an amendment intended to be proposed to amendment SA 4471 proposed by Mr. LIEBERMAN to the