

applicable to The Wisconsin Heart Hospital, a hospital which is currently under construction in the state of Wisconsin. This facility is scheduled to open in January of 2004.

My understanding is that this provision will not apply to facilities which are "under development" as of June 12, 2003. The following is a summary of the status of the development of The Wisconsin Heart Hospital:

One, architectural plans for the hospital have been completed.

Two, construction of the facility is approximately 55 percent to 60 percent complete as of June 12, 2003. This estimate can be supported by invoices for materials, labor and planning, as well as the timeline for completion dictated by the projected opening date of the hospital. Furthermore, more than \$13.3 million in construction costs have been expended.

Three, all applicable zoning requirements have been satisfied by local governing authorities and can be supported by documentation. In addition, The Wisconsin Heart Hospital has committed \$260,000 to improve the fresh water supply to surrounding community, unrelated to the hospital construction.

Four, State and local building approval processes are ongoing. The facility is subject to monthly inspections by state and local officials.

Five, nearly \$20 million in equipment purchases and/or vendor contract commitments can be documented by officials from the facility.

Six, medical staff bylaws, policies and procedures have been adopted by The Wisconsin Heart Hospital Board.

Seven, all equity funding has been received. In excess of \$35 million in temporary debt financing has been secured for the facility. Of that \$35 million, approximately \$10 million has been borrowed; the remaining \$25 million will be borrowed prior to the end of 2003. Permanent bond financing for the facility has already been initiated and is expected to be secured by November 2003. This permanent bond financing will be used to replace the temporary financing referred to above, as well as to provide additional financing for the facility.

Based on the information stated above, is it your understanding that the "exception" language would apply to The Wisconsin Heart Hospital?

Mr. BAUCUS. Yes, it was clearly not the intent of the Senate Finance Committee in adopting this amendment to apply the prohibition to specialty hospitals that already exist nor was it the intent of the Committee to apply the prohibition to those facilities which, meeting specified criteria, are under construction currently.

Mr. KOHL. Additionally, the language of the bill specifically states that in determining whether a hospital is "under development as of June 12, 2003, the Secretary shall consider whether . . . necessary approvals from appropriate state agencies have been received." You are probably aware that laws in many states, including Wisconsin, prohibit hospitals from receiving

a license to operate from relevant state agencies until the facility is structurally complete and fully capable of operating as a hospital. Would you please clarify the Committee's intent with respect to this potential licensure issue for hospitals which are already under development?

Mr. BAUCUS. The committee certainly understands that many states will not license a hospital as operational until the facility is constructed. I believe the committee's intent was to ensure that approvals with respect to the construction of the hospital (i.e., building permits, etc.) have been secured by June 12, 2003. The lack of a license to operate would certainly not prohibit a hospital, which is deemed to be "under development," from the purpose of the statute.

Mr. FEINGOLD. Furthermore, is it the Senator's understanding that for facilities falling under the "Exception" provision, language speaking to the number of "beds" would relate to the number of beds a facility currently under development expects to license upon completion? When fully operational, The Wisconsin Heart Hospital will operate a maximum of 52 inpatient beds. State regulation requires the facility to be open and operational before any beds can be licensed.

Mr. BAUCUS. Yes, again, in adopting the amendment, it was the understanding of the Senate Finance Committee members that this provision would not apply to facilities which, provided they meet certain criteria, are already under development.

Mr. KOHL. I thank my distinguished colleagues for the clarification.

ADDITIONAL STATEMENTS

SAIL SAN FRANCISCO

• Mrs. BOXER. Mr. President, I want to express my support for Sail San Francisco—a nonprofit organization that provides a range of services to visiting international tall ships and training ships.

These services, which include docking, technical assistance, and hospitality, were formerly provided by the U.S. Navy in the Bay Area. In the wake of the base closure process, this assistance is no longer available. Over the past several months, Sail San Francisco has coordinated with foreign consulates to facilitate the visit of several foreign navies, playing a valuable role that is filled by the U.S. Navy at other ports throughout the country.

It is my hope that when the fiscal year 2004 Defense appropriations bill is considered in conference, it is possible to provide \$800,000 for Sail San Francisco's naval/tall ships education programs.●

OREGON HEALTH CARE HERO

• Mr. SMITH. Mr. President, I rise today to salute Ms. Janice Kane, an outstanding health care worker from my home State of Oregon. Ms. Kane is a model for all registered nurses, not

just in the state of Oregon, but across the country. Her commitment to serving Oregonians is a shining example to us all.

Like many in her field, Ms. Kane has gone above and beyond the call of duty to help patients in need. In addition to healing broken bodies, she has also worked to support the spirits of those in pain. Over the past two years, Ms. Kane has sewn over 6,000 multi-colored pillows to help comfort patients at the Good Samaritan Regional Medical Center in Corvallis.

However, Ms. Kane's benevolence is not limited to Oregonians; she recently offered boxes of pillows to soldiers wounded in Operation Iraqi Freedom. Her gift to our country's soldiers is one of immeasurable value. By offering her time and talent to this cause, Ms. Kane has helped remind American soldiers abroad that their sacrifices are not being forgotten at home.

Despite the hardships currently facing the nursing profession, Ms. Kane has not failed in her drive to serve those in need. All states are experiencing an increasing shortage of health care workers, and particularly, of nurses. Last year, the Senate passed the Nurse Reinvestment Act to better recruit and retain nurses. Nevertheless, we can and should do more. Our country's health care system needs more people like Ms. Kane, and we should do everything in our power to ensure that we support America's nurses.

I salute Janice Kane for her exceptional work as a registered nurse and wish to dignify her contribution to our great state and to our nation by naming her an Oregon Health Care Hero.●

IN RECOGNITION OF THE 100TH ANNIVERSARY OF SAINT HEDWIG CATHOLIC CHURCH

• Mr. LEVIN. Mr. President, it is my great pleasure to congratulate an outstanding and historic church from my home State of Michigan. This year, Saint Hedwig Catholic Church, located in southwest Detroit, is celebrating its centennial anniversary.

Saint Hedwig Catholic Church grew out of a flourishing Polish neighborhood in 1903 and has continued to serve those in the community ever since. Over the course of the next 100 years, the church supported a school, a convent, and many civic organizations. The church community provided a safe haven of support for many Polish immigrants as they fled Europe during the first half of the twentieth century—a time when war ravaged the continent. During the mid-1950s, Saint Hedwig was one of the largest Polish-speaking parishes in the United States. Weekly services were delivered to 1,500 families and the church's school population grew to nearly 3,000 students.

Today, the church and rectory still stand at the corner of Junction and St.