

(C) impose record keeping requirements on local exchange carriers and providers of interconnected VoIP service related to any grants of affirmative consent by consumers.

(c) EFFECTIVE DATE.—The Federal Communications Commission shall prescribe that any rule adopted under subsection (b) shall become effective for a local exchange carrier or provider of interconnected VoIP service not later than the date that the carrier's or provider's contractual obligation to permit another person to charge a customer for a good or service on a bill rendered by the carrier or provider expires, or 180 days after the date of enactment of this Act, whichever is earlier.

SEC. 4. RELATIONSHIP TO OTHER LAWS.

(a) NO PREEMPTION OF STATE LAWS.—Nothing in this Act shall be construed to preempt any State law, except that no State law may relieve any person of a requirement otherwise applicable under this Act.

(b) PRESERVATION OF FTC AUTHORITY.—Nothing in this Act shall be construed as modifying, limiting, or otherwise affecting the applicability of the Federal Trade Commission Act (15 U.S.C. 41 et seq.) or any other law enforced by the Federal Trade Commission.

SEC. 5. SEVERABILITY.

If any provision of this Act or the application of that provision to any person or circumstance is held invalid, the remainder of this Act and the application of that provision to any other person or circumstance shall not be affected thereby.

By Mr. REED (for himself and Mr. BLUNT):

S. 1152. A bill to amend the Public Health Service Act to help build a stronger health care workforce; to the Committee on Health, Education, Labor, and Pensions.

Mr. REED. Mr. President, I am pleased to be joined by Senator BLUNT in the introduction of the Building a Health Care Workforce for the Future Act.

According to the Association of American Medical Colleges, by 2020, there will be a shortage of 91,000 physicians. Approximately half of the shortage, 45,000, will be in primary care.

Individuals and families living in underserved areas, urban and rural, will continue to be those most disadvantaged by this shortage. According to the Pew Research Center, roughly 10,000 baby boomers will become eligible for Medicare every day through 2030. The most recent estimates from the Congressional Budget Office predict that 27 million individuals will gain access to health insurance by 2017 as a result of the Affordable Care Act. With an aging population and increasing number of individuals with health insurance, the gap between patients and providers is expected to widen. The Affordable Care Act took steps to address this shortage, but we can do more.

The Building a Health Care Workforce for the Future Act would authorize programs that would grow the overall number of health care providers, as well as encourage providers to pursue careers in geographic and practice areas of highest need.

Building on the success of the National Health Service Corp, NHSC,

Scholarship and Loan Repayment Programs, and State Loan Repayment Program, this legislation would establish a state scholarship program. Like the NHSC State Loan Repayment Program, States would be able to receive a dollar-for-dollar match to support individuals that commit to practicing in the State in which the scholarship was issued after completing their education and training. At least 50 percent of the funding would be required to support individuals committed to pursuing careers in primary care. The States would have the flexibility to use the remaining 50 percent to support scholarships to educate students in other documented health care professional shortages in the state that are approved by the Secretary of Health and Human Services.

The Building a Health Care Workforce for the Future Act would also authorize grants to medical schools to develop primary care mentors on faculty and in the community. According to the Association of American Medical Colleges, graduating medical students consistently state that role models are one of the most important factors affecting the career path they choose. Building a network of primary care mentors in the classroom and in a variety of practice settings will help guide more medical students into careers in primary care.

The legislation would couple these mentorship grants with an initiative to improve the education and training offered by medical schools in competencies most critical to primary care, including patient-centered medical homes, primary and behavioral health integration, and team-based care.

It would also direct the Institute of Medicine (IOM) to study and make recommendations about ways to limit the administrative burden on providers in documenting cognitive services delivered to patients. Primary care providers treat patients in need of these services almost exclusively, and as such, spend a significant percentage of their day documenting. That is not the case for providers who perform procedures, like surgeries. This IOM study would help uncover ways to simplify documentation requirements, particularly for delivering cognitive services, in order to eliminate one of the potential factors that may discourage medical students from pursuing careers in primary care.

I am pleased that providers across the spectrum of care recognize that this bipartisan legislation is part of the solution to addressing the looming health care workforce shortage and have lent their support, including: the Alliance of Specialty Medicine, the American Association of College of Osteopathic Medicine, the American College of Physicians, the American Osteopathic Association, the Association of Academic Health Centers, the Association of American Medical Colleges, and the Society of General Internal Medicine.

I look forward to working with these and other stakeholders as well as Senator BLUNT and our colleagues to pass the Building a Health Care Workforce for the Future Act in order to help ensure patients have access to the health care they need.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 168—DESIGNATING JUNE 2013 AS “NATIONAL APHASIA AWARENESS MONTH” AND SUPPORTING EFFORTS TO INCREASE AWARENESS OF APHASIA

Mr. JOHNSON of South Dakota (for himself and Mr. KIRK) submitted the following resolution; which was considered and agreed to:

S. RES. 168

Whereas aphasia is a communication impairment caused by brain damage that typically results from a stroke;

Whereas aphasia can also occur with other neurological disorders, such as a brain tumor;

Whereas many people with aphasia also have weakness or paralysis in the right leg and right arm, usually due to damage to the left hemisphere of the brain, which controls language and movement on the right side of the body;

Whereas the effects of aphasia may include a loss of, or reduction in, the ability to speak, comprehend, read, and write, but the intelligence of a person with aphasia remains intact;

Whereas, according to the National Institute of Neurological Disorders and Stroke (referred to in this preamble as the “NINDS”), strokes are the third-leading cause of death in the United States, ranking behind heart disease and cancer;

Whereas strokes are a leading cause of serious, long-term disability in the United States;

Whereas the NINDS estimates that there are approximately 5,000,000 stroke survivors in the United States;

Whereas the NINDS estimates that people in the United States suffer approximately 750,000 strokes per year, with about 1/3 of the strokes resulting in aphasia;

Whereas, according to the NINDS, aphasia affects at least 1,000,000 people in the United States;

Whereas the NINDS estimates that more than 200,000 people in the United States acquire aphasia each year;

Whereas the people of the United States should strive to learn more about aphasia and to promote research, rehabilitation, and support services for people with aphasia and aphasia caregivers throughout the United States; and

Whereas people with aphasia and their caregivers envision a world that recognizes the “silent” disability of aphasia and provides opportunity and fulfillment for people affected by aphasia: Now, therefore, be it

Resolved, That the Senate—

(1) designates June 2013 as “National Aphasia Awareness Month”;

(2) supports efforts to increase awareness of aphasia;

(3) recognizes that strokes, a primary cause of aphasia, are the third-largest cause of death and disability in the United States;

(4) acknowledges that aphasia deserves more attention and study to find new solutions for people experiencing aphasia and their caregivers;

(5) supports efforts to make the voices of people with aphasia heard, because people with aphasia are often unable to communicate with others; and

(6) encourages all people in the United States to observe National Aphasia Awareness Month with appropriate events and activities.

SENATE RESOLUTION 169—DESIGNATING THE MONTH OF JUNE 2013 AS “NATIONAL POST-TRAUMATIC STRESS DISORDER AWARENESS MONTH”

Ms. HEITKAMP (for herself, Mr. BOOZMAN, Mr. ROCKEFELLER, Mr. TESTER, Mr. BLUMENTHAL, Mr. BEGICH, Ms. HIRONO, Mrs. MURRAY, Mr. JOHANNIS, Mr. FRANKEN, Mr. DONNELLY, Mr. MORAN, Ms. STABENOW, Mr. SANDERS, Mr. HELLER, Mr. LEAHY, Mr. HOEVEN, and Mr. BROWN) submitted the following resolution; which was considered and agreed to:

S. RES. 169

Whereas the brave men and women Armed Forces of the United States, who proudly serve the United States, risk their lives to protect the freedom of the United States, and deserve the investment of every possible resource to ensure their lasting physical, mental, and emotional well-being;

Whereas more than 2,000,000 service members have deployed overseas as part of overseas contingency operations since the events of September 11, 2001;

Whereas the military has sustained an operational tempo for a period of time unprecedented in the history of the United States, with many service members deploying multiple times to combat zones, placing them at high risk of post-traumatic stress disorder (referred to in this preamble as “PTSD”);

Whereas the Department of Veterans Affairs reports that—

(1) since October of 2001, more than 286,000 of the approximately 900,000 veterans of Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn who have used Department of Veterans Affairs health care have been coded for PTSD;

(2) in fiscal year 2011, more than 475,000 of the nearly 6,000,000 veterans from all wars who sought care at a Department of Veterans Affairs medical center received treatment for PTSD; and

(3) of veterans who served in Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn who are using Veterans Affairs health care, more than 486,000—or 54 percent—have received a diagnosis for at least 1 mental health disorder;

Whereas many cases of PTSD remain unreported, undiagnosed, and untreated due to a lack of awareness about PTSD and the persistent stigma associated with mental health conditions;

Whereas PTSD significantly increases the risk of depression, suicide, and drug- and alcohol-related disorders and deaths, especially if left untreated;

Whereas symptoms of PTSD or other mental health disorders create unique challenges for veterans seeking employment;

Whereas the Departments of Defense and Veterans Affairs have made significant advances in the prevention, diagnosis, and treatment of PTSD and the symptoms of PTSD, but many challenges remain; and

Whereas the establishment of a National Post-Traumatic Stress Disorder Awareness Month will raise public awareness about issues related to PTSD, reduce the stigma

associated with PTSD, and help ensure that those suffering from the invisible wounds of war receive proper treatment: Now, therefore, be it

Resolved, That the Senate—

(1) designates June 2013, as “National Post-Traumatic Stress Disorder Awareness Month”;

(2) supports the efforts of the Secretary of Veterans Affairs and the Secretary of Defense to educate service members, veterans, the families of service members and veterans, and the public about the causes, symptoms, and treatment of post-traumatic stress disorder; and

(3) respectfully requests that the Secretary of the Senate transmit a copy of this resolution to the Secretary of Veterans Affairs and the Secretary of Defense.

AMENDMENTS SUBMITTED AND PROPOSED

SA 1226. Mr. MANCHIN submitted an amendment intended to be proposed by him to the bill S. 744, to provide for comprehensive immigration reform and for other purposes; which was ordered to lie on the table.

SA 1227. Mr. HELLER (for himself and Mr. REID) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1228. Mr. VITTER submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1229. Mr. WICKER submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1230. Mr. WICKER submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1231. Mr. WICKER submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1232. Mr. WICKER submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1233. Mr. REED (for himself, Mr. SCHUMER, and Mr. CASEY) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1234. Mr. HELLER submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1235. Mr. HELLER submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1236. Mr. TOOMEY submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1237. Mr. MERKLEY submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1238. Mr. RISCH (for himself and Mr. CRAPO) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1239. Mr. KIRK (for himself and Mr. COONS) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1240. Mrs. BOXER (for herself and Ms. LANDRIEU) submitted an amendment intended to be proposed by her to the bill S. 744, supra; which was ordered to lie on the table.

SA 1241. Mr. UDALL of New Mexico (for himself and Mr. HEINRICH) submitted an

amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1242. Mr. UDALL of New Mexico (for himself and Mr. HEINRICH) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1243. Mr. ISAKSON submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1244. Mr. ISAKSON submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1245. Mr. ISAKSON submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1246. Mr. HATCH (for himself and Mr. RUBIO) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1247. Mr. HATCH (for himself and Mr. RUBIO) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1248. Mr. HATCH (for himself and Mr. RUBIO) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1249. Mr. HATCH (for himself and Mr. RUBIO) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1250. Mrs. FEINSTEIN (for herself and Mr. COONS) submitted an amendment intended to be proposed by her to the bill S. 744, supra; which was ordered to lie on the table.

SA 1251. Mr. CORNYN (for himself, Mr. CRAPO, Mr. BLUNT, Mr. KIRK, Mr. HATCH, Mr. ALEXANDER, Mr. ISAKSON, Mr. ROBERTS, Mr. BURR, Mr. CHAMBLISS, Mr. JOHANNIS, and Mr. BARRASSO) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1252. Mr. CASEY (for himself, Mr. SCHUMER, and Mr. REED) submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1253. Mr. NELSON submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1254. Mr. VITTER submitted an amendment intended to be proposed to amendment SA 1251 submitted by Mr. CORNYN (for himself, Mr. CRAPO, Mr. BLUNT, Mr. KIRK, Mr. HATCH, Mr. ALEXANDER, Mr. ISAKSON, Mr. ROBERTS, Mr. BURR, Mr. CHAMBLISS, Mr. JOHANNIS, and Mr. BARRASSO) and intended to be proposed to the bill S. 744, supra; which was ordered to lie on the table.

SA 1255. Ms. COLLINS submitted an amendment intended to be proposed by her to the bill S. 744, supra; which was ordered to lie on the table.

SA 1256. Mr. MORAN submitted an amendment intended to be proposed by him to the bill S. 744, supra; which was ordered to lie on the table.

SA 1257. Mrs. BOXER submitted an amendment intended to be proposed by her to the bill S. 744, supra; which was ordered to lie on the table.

SA 1258. Mrs. BOXER submitted an amendment intended to be proposed by her to the bill S. 744, supra; which was ordered to lie on the table.

TEXT OF AMENDMENTS

SA 1226. Mr. MANCHIN submitted an amendment intended to be proposed by