November 18, 1999

CONGRESSIONAL RECORD—SENATE

COMPENSATING CERTAIN DEPARTMENT OF ENERGY WORKERS

Mr. THOMPSON. Madam President, yesterday, my colleague from New Mexico, Senator BINGAMAN, and I introduced legislation that is, frankly, long overdue.

For more than 2 years, I have been concerned that the Department of Energy was not taking seriously the complaints of a number of workers in Oak Ridge, Kentucky, who were exposed to plutonium and other radioactive materials without their knowledge, and who believe that their illnesses are linked to their employment at the DOE site in Oak Ridge. In November of 1997, two years ago, I wrote to the then-Surgeon General, Dr. David Satcher, to request that the Centers for Disease Control, CDC, come to Oak Ridge to try to determine whether a pattern of unexplained illnesses was present and, if so, if its cause could be determined. The CDC study, like others before it, looked at a narrow sample of individuals and did not produce conclusive results.

I am committing the Wage and Hour Division and the Solicitor’s Office to carefully review our policy with respect to the compensability of unauthorized break time under the FLSA. Our review will specifically include cases in which employees exceed the time allowed for a rest break. We will also consider what outcome is in the best interests of the employee if the employer exceeded the time allowed for a rest break, including the option of deducting compensation for the time taken in excess of the allotted break time.

As part of our review, we will consider the statutory text, relevant legislative history and regulatory material, case law, previous Wage and Hour Opinion Letters, changing technology, and any information that your office or a member of the public may provide. We will complete our review of this matter by February 1, 2000, and transmit our conclusions and supporting rationale to the Chairman and Ranking Members of the relevant committees in the House and the Senate.

It is important that all officials of the Wage and Hour Division interpret and apply the law in a uniform manner, and so advise the public. I will instruct the Wage and Hour Division to consider the resolution of any cases in which unauthorized break time are at issue is consistent with the outcome we reach in our overall review.

I very much appreciate your interest in these important questions.

Sincerely,

ALEXIS M. HERMAN.

PAIN RELIEF PROMOTION ACT

Mr. NICKLES, Madam President, on June 23, 1999, Senator LIEBERMAN and I introduced S. 1272, the Pain Relief Promotion Act, which addresses two specific concerns. First, it provides federal support for training and research in palliative care. Second, it clarifies federal law on the legitimate use of controlled substances. On October 27, 1999 the House passed its companion measure H.R. 2260 by the resounding bipartisan vote of 271 to 156. It is my hope that the Senate will soon have the opportunity to debate and vote on this important legislation.

In anticipation of that debate, and in light of inaccurate characterizations of the second aspect of our bipartisan legislation, I believe it is important for me to ensure that the record reflects precisely how this bill will—and will not—affect current federal law with regard to Drug Enforcement Administration (DEA) oversight of the use of federally controlled substances.

To understand the effect the Pain Relief Promotion Act will have on pain control, we must begin with what the law is now. The Controlled Substances Act, CSA, of 1970 charged the DEA with the responsibility of overseeing narcotics and dangerous drugs—including powerful prescription drugs which have a legitimate medical use but can also be misused to harm or kill. In asserting its authority over these drugs, Congress declared in the preamble of the Controlled Substances Act of 1970 that “Federal control of the intrastate incidents of the traffic in controlled substances is essential to the effective control of the incidents of such traffic” (21 U.S.C. 801 (6)).

In 1984, Congress amended the CSA in part to a specific concern regarding the misuse of prescription drugs in lethal overdoses. The then-Democratic-controlled House and a Republican Senate further strengthened the Act, empowering the DEA to revoke a physician’s federal prescribing...