

abroad program in France focusing on political science and the French language. Upon graduation, she was a fluent speaker of Chamorro, English and French.

In 1977, Lou returned to Guam to work as a reporter for the Pacific Daily News. She later served as liaison to Guam's overseas residents and coordinator of federally funded programs from 1979 to 1982. She did this while working as special assistant to the Lieutenant Governor of Guam in his San Francisco, California office. In 1983, Lou worked on national research studies on the effectiveness of U.S. health programs with the U.S. Department of Health and Human Services in Seattle, Washington.

Lou was back on Guam in 1984, serving as executive assistant to then Guam Senator Joseph Ada. While employed by the senator's legislative office, she was placed in charge of developing legislation, conducting research, disseminating public information, and handling constituent services. Upon Senator Ada's election as governor of Guam in 1994, Lou was appointed his chief of staff. In addition to being the governor's chief assistant on policy development and implementation, she also had purview over the Cabinet and the governor's staff.

Between January 1995, and February 1996, Lou was employed by the Superior Court of Guam. At this point she has served in top level management positions in all three branches of the island's government. As the Deputy Director/Director of Communications, she managed the operations of Guam's trial court. In addition, she facilitated judges' requirements and acted as liaison to the Guam Legislature on budget and policy matters. During her service with the government of Guam, she represented the island in key meetings and hearings before the United States Congress and the United Nations Committee on Decolonization.

Lou's involvement with the SPC dates back to the early years of the organization's development. Representing the island of Guam, she served as Chairperson of the Committee of Representatives of Governments and Administrations in May 1989. For the past decade, she played an active part in the organization's growth. Her command of the French language, her vision, her technical knowledge, and her leadership capabilities made her an ideal candidate for a leadership post within the SPC. Prior to landing the top job, she served as the organization's deputy director general. Upon becoming a member of SPC's executive team, Lou was given oversight over the Social Resources Division, Support Services Programme and Finance/Administration. As Director General, Lou is in the best position to facilitate and convey the island of Guam's commitment and support as the SPC charts its course for the new millennium.

Through her distinguished career and outstanding achievements, Lou has brought recognition upon herself, the island of Guam, and its people. Having been granted the honor and opportunity to be instrumental in the future growth and development of the Pacific Region, I am sure that Lou will successfully meet the challenge. She has always made us proud.

I join her family in celebrating her extraordinary accomplishments. On behalf of the peo-

## EXTENSIONS OF REMARKS

February 10, 2000

ple of Guam, I extend my sincerest congratulations to Lou on this recent accomplishment. I wish her and the SPC continued success in the years to come,

### TRIBUTE TO STEVE LEW

**HON. HOWARD L. BERMAN**

OF CALIFORNIA

**HON. BRAD SHERMAN**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, February 10, 2000

Mr. BERMAN. Mr. Speaker, we rise to pay tribute to our good friend, Steve Lew, who has just completed a two-year term as Chairman of the Valley Industry and Commerce Association. Steve is a man of immense charm, business smarts and considerable political skills. He is, in short, a born leader. He will be sorely missed at VICA.

During his two-year tenure as chairman, VICA became much more active in state, local and federal affairs. Steve expanded VICA's sphere of influence; the organization now covers eight congressional districts, six State Senate districts and ten Assembly districts. He made a point of attending many meetings of the various government committees.

In 1999, Steve led VICA's year-long 50th anniversary celebration, which included a new graphics campaign, newsletter, logo and website. He also helped spur a 25 percent rise in revenues to VICA, which enabled the organization to initiate new advocacy programs.

In 1975, Steve took a job with Universal Studios, where he has held several executive positions. These include Vice President, Government and External Affairs, Universal Studios, Inc; Senior Vice President, Universal Studios Recreation Group and President and CEO, Universal Studios Florida.

In addition to his professional duties and his work with VICA, Steve is Chair of the City of Los Angeles Volunteer Advisory Council, a member of the Executive Board of the Economic Alliance of the San Fernando Valley and Past President of the Hollywood Chamber of Commerce.

We ask our colleagues to join us in saluting Steve Lew, whose commitment to helping business and his dedication to the community are second to none. We are honored to be his friends.

### LEADERSHIP COUNCIL OF AGING ORGANIZATIONS: PRINCIPLES FOR MEDICARE PRESCRIPTION DRUG LEGISLATION

**HON. FORTNEY PETE STARK**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, February 10, 2000

Mr. STARK. Mr. Speaker, following is a letter I submit for the RECORD that was sent to Members of Congress by the Leadership Council of Aging Organizations signed by 32 groups, on the principles that Medicare prescription drug legislation should meet.

If one compares the principles with the various bills that have been introduced, it is clear that the President's proposal; the Stark-Dingell-Kennedy proposal meet the criteria.

All others bills that I am aware of do not meet the criteria—they are either means-tested, unaffordable, don't provide catastrophic protection, fail to improve quality, do not buy drugs cost-effectively, and so forth.

The LCAO has performed a valuable service in laying out what good pharmaceutical health insurance policy should be.

Congress should proceed accordingly.

LEADERSHIP COUNCIL OF AGING ORGANIZATIONS,

HORACE B. DEETS, CHAIRMAN,

February 7, 2000.

U.S. House of Representatives,  
Washington, DC.

DEAR REPRESENTATIVE: The undersigned members of the Leadership Council of Aging Organizations (LCAO) look forward to working with the Congress on the creation of a Medicare prescription drug benefit.

As you consider current proposals and draft new prescription drug proposals, we would like you to consider the following issues that are of the highest priority to our organizations and the millions of Americans that we represent.

#### BENEFITS

Medicare should guarantee access to a voluntary prescription drug benefit as a part of its defined benefit package.

Medicare's prescription drug benefit should provide comprehensive coverage, including the most current, effective, and individually appropriate drug therapies.

Medicare's contribution toward the cost of the prescription drug benefit must keep pace with the increase in prescription drug costs and not be tied to budgetary caps.

Adding a Medicare prescription drug benefit must not reduce access to other Medicare benefits.

#### COVERAGE

The Medicare prescription drug benefit should be available to all Medicare eligible older Americans and persons with disabilities, regardless of income or health status.

The Medicare prescription drug benefit must be voluntary and must provide safeguards against the erosion of current prescription drug coverage provided by others.

#### AFFORDABILITY

The financing of a new Medicare prescription drug benefit should protect all beneficiaries from burdensome out-of-pocket expenses and affordable cost sharing, particularly low-income beneficiaries.

The new benefit must protect individuals from extraordinary expenses for prescription drugs.

The government subsidy must be sufficient to guard against risk selection and to provide an attractive benefit design.

Sufficient subsidies should be provided for low-income beneficiaries to ensure that they have access to the benefit.

#### ADMINISTRATION

The new prescription drug benefit should be efficiently managed, include appropriate cost-containment, and reflect the purchasing of the Medicare beneficiary pool.

#### QUALITY

The new Medicare prescription drug benefit must meet rigorous standards for quality of care, including appropriate monitoring and quality assurance activities.

The Medicare program should work to prevent the overuse, underuse, and misuse of prescription drugs.

*February 10, 2000*

We request that you carefully consider the issues presented above as you develop your Medicare prescription drug proposals. We look forward to working with you to ensure that the Medicare program is strengthened by your efforts.

Sincerely,

AARP; AFSCME Retiree Program, Alzheimer's Association, American Association for International Aging, American Association of Homes and Services for the Aging, American Federation of Teachers Program on Retirement and Retirees, American Society of Consultant Pharmacists, Asociacion Nacional Pro Personas Mayores, Association for

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Gerontology and Human Development in Historically Black Colleges and Universities, Association of Jewish Aging Services, B'nai B'rith Center for Senior Housing and Services, Eldercare America, Inc., Families, USA, The Gerontological Society of America, Gray Panthers, National Academy of Elder Law Attorneys, National Asian Pacific Center on Aging, National Association of Area Agencies on Aging, National Association of Foster Grandparent Program Directors, National Association of Nutrition and Aging Services Programs, National Association of Retired and Senior Volunteer Program Direc-

tors, Inc., National Association of Senior Companion Project Directors, National Association of State Long-Term Care Ombudsman Programs, National Association of State Units on Aging, National Caucus and Center on Black Aged, Inc., National Committee to Preserve Social Security and Medicare, National Council of Senior Citizens, National Council on the Aging, Inc., National Hispanic Council on Aging, National Indian Council on Aging, Inc., National Osteoporosis Foundation, National Senior Citizen Law Center, Older Women's League.

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