

we have yet to grasp. Plans can be made for the mining of water on the moon and its processing into rocket fuel. Your advice is sought on the best type of lunar development and rocket program that can take advantage of the discovery of water on the moon.

For example, a lunar development program could encompass the parallel development of: a) the mining and processing of water at the lunar poles, b) a lunar observatory on the backside of the moon, c) the development of an earth-moon transportation system going from the moon's surface to Low Earth Orbit for the transport of water, rocket fuel (hydrogen and oxygen), and other items. Of course, other facilities and operations could be added later, once this basic infrastructure is established. Your thoughts on this subject would be most welcomed.

#### NUCLEAR ENERGY

The commercial use of nuclear energy on earth has received less than enthusiastic support in some quarters as the use of nuclear energy brings with it legitimate safety and environmental concerns. The use of nuclear energy in space, however, appears to mark an appropriate and beneficial application for nuclear energy.

Most space systems will be closed environments where nuclear reactors will have a natural, physical detachment, softening safety and environmental issues. In many circumstances nuclear waste products can be shipped to the sun without excessive effort. Your advice is sought on the types of nuclear reactors we should develop for use in space and their potential application with a lunar base.

Your advice is also sought on how we can achieve controlled fusion energy. The continuation of existing programs and appropriations will, apparently, not get the job done. The promise of fusion energy remains unfulfilled. What types of programs do we need to bring this hope to fulfillment? Please bear in mind that the potential use of fusion energy may also find its application in space. It has been pointed out how a lunar economy could mine Helium-3 for fusion energy.

#### NAVAL WARFARE

The efforts of the United States in developing new aspects of naval warfare appear to be constricted. Your advice is sought on an expansion of the vision and imagination we have for naval warfare to include new concepts (in some cases, old concepts with new technology).

Your advice is sought, for example, on the development of diesel powered and AIP (Air Independent Propulsion) submarines, in addition to nuclear powered submarines, that would be used for anti-submarine warfare, and for training of U.S. nuclear attack submarines in anti-submarine warfare.

Your advice is also sought on the development of submarines equipped with UAVs for reconnaissance, changing the Cold War vision of a submarine as a permanently submerged vessel to a vessel taking advantage of both the acoustic environment found underwater and aerial reconnaissance independent of an aircraft carrier.

Your advice is also sought on the development of a "quick fix" anti-aircraft defense against the supersonic cruise missiles that attack a surface vessel by very low flight above the water or by a last minute maneuver putting the cruise missile above the surface vessel, attacking at an angle of 90° beyond the reach of Phalanx.

In addition, your advice is sought on the development of naval vessels equipped with high energy lasers or particle beams capable

## EXTENSIONS OF REMARKS

of intercepting cruise missiles or bombs much like the Nautilus laser being developed for Israel.

Advanced technology can play a pivotal role in our ballistic missile defense program and space program. It can also provide spin-off applications to private industry. I look forward to your response with genuine anticipation.

### PERSONAL EXPLANATION

#### HON. LOUISE McINTOSH SLAUGHTER

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 18, 2000

Ms. SLAUGHTER. Mr. Speaker, I was unavoidably detained on business and unable to be present for rollcall vote No. 192. Had I been present, I would have voted "yes".

#### IN RECOGNITION OF THE STATE CHAMPIONSHIP WRESTLING TEAM OF FARMINGTON HIGH SCHOOL

#### HON. JO ANN EMERSON

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 18, 2000

Mrs. EMERSON. Mr. Speaker, today I congratulate the Farmington High School Wrestling Team for winning the Missouri state championship on February 19, 2000. The Farmington Knights earned their first place position early in the tournament and held this lead to the end. This early lead allowed the four finalists to relax and focus on their final bouts.

Although only one of those finalists won his match for first place, the team sealed the victory against tough odds. You see, the Knights did not have the numbers of wrestlers that some of the other teams had going into the tournament, and they did not have the first place finishes many thought they would need to win a state championship. Because the team was successful as a whole, they were able to take the overall victory.

In addition to the team, I wish special recognition for senior Doug Wiles, who was able to win his first place match for an individual state championship in his weight class. Doug was also the only participant of the tournament with an undefeated season.

Congratulations to Mark Krause, head coach for the Knights, and the members of the Farmington High School Wrestling team as follows:

Cory Husher (finished 2nd in state)  
Justin Peppers  
Nathan McKinney  
James Faulkner (State Qualifier)  
Josh Krause  
Caleb Smith  
Josh Hoehn (finished 3rd in state)  
Darin Johnson  
Barry Watson  
Dustin Wiles (finished 2nd in state)  
Michael Hahn (finished 2nd in state)  
Doug Wiles (finished 1st in state)  
Jared Bornell (finished 5th in state)

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Ryan Todd (finished 5th in state)

Congratulations to all the wrestlers at Farmington High School for these outstanding accomplishments. Each individual on this team played a key part of the success they had as a whole.

#### HONORING THE THUNDERBOLT ELEMENTARY SCHOOL IN THUNDERBOLT, GEORGIA

#### HON. JACK KINGSTON

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 18, 2000

Mr. KINGSTON. Mr. Speaker, today I recognize Thunderbolt Elementary School in Thunderbolt, Georgia. Thunderbolt Elementary has been chosen by the Annual American Set a Good Example Competition to receive one of three national 3rd place awards for the best project completed by students to influence their own peers in a positive way: away from drug abuse, crime and violence while focusing on moral virtues such as honesty, trustworthiness and competence.

Students at Thunderbolt Elementary, under the careful instruction of their teacher, Beverly Small, did a series of projects based on setting good examples over the school year. Some of the accomplishments included weekly reading competitions, planting trees and flowers around campus, holding a canned food drive, essay writings on setting good examples, and establishing Parents are Terrific awards for assisting children with their homework.

The students have worked hard to demonstrate good will and respect for others, and because of these kinds of efforts they are not experiencing drug problems, crime, cheating, or violence in this school. It has become a family school, and parents tell me their children feel loved because the teachers take the time to listen. It is with my utmost admiration and commendation that I recognize Thunderbolt Elementary School students, teachers, and administration for achieving the national honor by setting a good example for all of us.

#### HONORING DR. LOVELL A. JONES, PhD, WINNER OF THE LEGACY OF LEADERSHIP AWARD

#### HON. KEN BENTSEN

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 18, 2000

Mr. BENTSEN. Mr. Speaker, I rise to honor Dr. Lovell A. Jones, for winning Howard University Hospital's Legacy of Leadership Award for Distinguished Health Care Advocate. This award is a fitting tribute to Dr. Jones, who has made outstanding contributions in quality health care and advocacy for the medically underserved and the socio-economically disadvantaged for more than two decades.

Dr. Jones has been a true visionary in Houston's medical community and throughout the nation. I am particularly proud that it was in my Congressional District that Dr. Jones

first began his ground-breaking work to address the unequal science and unequal treatment affecting health care for minorities and the medically underserved.

It was almost 15 years ago that Dr. Jones began planning the first Biennial Symposium on Minorities and Cancer. As a Biochemist and Professor of Experimental Gynecology and Endocrinology at the UT M.D. Anderson Cancer Center, Dr. Jones rolled up his sleeves to research why it was that minorities and the socio-economically disadvantaged were experiencing disproportionately high mortality rates from the diseases. He discovered a variety of reasons why certain communities have to bear the unequal burden of cancer, including the fact that these underserved communities are often diagnosed in later stages of the disease; are provided with only limited access to health care, and are without financial resources. Dr. Jones already understood that poor people, no matter what their ethnic background, place less emphasis on health care when having to deal with the harsh realities of poverty on a daily basis.

Dr. Jones has been on the forefront of activities to address the obstacles that ethnic minorities and medically underserved individuals face in seeking effective treatments for their illnesses. He inspires those of us in Congress to remain committed to helping our medical institutions continue their life-saving cutting-edge research.

Dr. Jones' efforts to help those with cancer in medically underserved and socioeconomically disadvantaged communities have gone beyond study and into heartfelt activism, transforming him into a leading health care advocate. He is establishing a Center of Excellence for Research on Minority Health at the University of Texas M.D. Anderson Cancer Center, and Dr. Jones co-founded the Intercultural Cancer Center (ICC), which has become the largest multicultural and multidisciplinary coalition addressing the unequal burden of cancer in minority and medically underserved areas in the United States. Leading cancer and community experts from academia, federal and state government representatives, clinicians, researchers, public health researchers, survivors and advocates hold Biennial Symposium to address cancer in minority and medically underserved communities throughout the nation. The symposia eventually grew so big that they had to move them from Houston to Washington, DC. This year's symposium, which emphasized the problem of cancer in all ethnic minority communities—African-American, Hispanic, Native-American, Alaskan native, Pacific Islander and Asian-American—attracted more than 1200 people, and marked the largest participation ever.

Mr. Speaker, Howard University Hospital could not have chosen a better candidate to honor for the Distinguished Health Care Advocate Award. Lovell Jones inspires us all to strive to truly live up to the ICC's motto of "Speaking with One Voice," because we believe that the burden of cancer rests with all of us. Throughout his career, Dr. Jones has stressed that in this country, as a united community of Americans, the working poor and minority populations should not have to suffer disproportionately.

Dr. Lovell Jones has said that it is his dream that we will finally "become a society

where we will not tie people's value to their skin color and/or status in life." His hope is that one day we will address the needs of all Americans, so that our efforts to address the special needs of minorities and the medically underserved will no longer be necessary.

But until that day, we can all be grateful that we have Dr. Lovell A. Jones.

INTRODUCTION OF THE INSULIN-FREE WORLD MEDICARE PANCREAS TRANSPLANTATION COVERAGE ACT OF 2000

**HON. GEORGE R. NETHERCUTT, JR.**

OF WASHINGTON

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 18, 2000

Mr. NETHERCUTT. Mr. Speaker, I am pleased to introduce the Insulin-Free World Medicare Pancreas Transplantation Coverage Act of 2000, to provide Medicare coverage for pancreas transplants. I introduce this legislation with my colleagues Mrs. CAPPS, Mr. PORTER and Mr. LAFALCE.

On July 1, 1999, the Health Care Financing Administration (HCFA) announced that the agency would provide coverage for pancreas transplants performed in people who also require kidney transplants. However, the agency continues to deny coverage for transplants in people who have reached kidney failure. Several studies, including one published in the New England Journal of Medicine in July 1998, indicate that a pancreas transplant performed before kidney disease is significant, can eliminate the need for a kidney transplant. My legislation would reverse this shortsighted policy.

While HCFA provides coverage for segmented/split liver transplants, the agency does not provide coverage for a pancreas that is segmented/split. This position should be reversed particularly in light of the profound and well-publicized organ shortage. In practice, Medicare's existing pancreas transplant coverage policy means that a pancreas may not be divided and used for more than one person. In addition, if part of the donor pancreas is found to be damaged, Medicare would not cover transplanting the useable portion. Medicare also would not cover a transplant for a person who has been offered the ultimate gift of life of part of a pancreas from a living relative.

Pancreas transplantation represents the first significant advance toward curing diabetes since the discovery of insulin. I urge my colleague to join me in supporting this legislation designed to give years of life and health back to people with long-standing diabetes.

FLOYD D. SPENCE NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2001

SPEECH OF

**HON. SHEILA JACKSON-LEE**

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 17, 2000

The House in Committee of the Whole House on the State of the Union had under

consideration the bill (H.R. 4205) to authorize appropriations for fiscal year 2001 for military activities of the Department of Defense and for military construction, to prescribe military personnel strengths for fiscal year 2001, and for other purposes:

Ms. JACKSON-LEE of Texas. Mr. Chairman, this amendment authorizes the Department of Defense to assign members of our Armed Forces to assist the Immigration and Naturalization Service and the Customs Service in monitoring and patrolling U.S. borders. I urge my colleagues to vote against this amendment.

At the request of the Congress, the Department of Defense issued a report earlier this week on this very issue. After meeting with senior leadership of the Immigration and Naturalization Service and the U.S. Customs Service to determine a scenario where U.S. military personnel would be assigned to either agency, the report states, in the end, neither the Immigration and Naturalization Service nor the United States Customs Service could envision a scenario which would require such assignments. Instead, both agencies expected that they would use the existing system of plans and procedures to increase the level of support from DoD personnel who would report through existing military chains of command.

This is not necessary because the DoD already have plans in place detailing how DoD supports Federal law enforcement agencies during declared emergency situations. The President of the United States has the authority to declare emergencies and use military personnel to protect our borders. This is already implied in the powers of the Executive Office of the President.

We are a nation of immigrants and a nation of laws. The men and women of the U.S. Border Patrol put their lives on the line every day of their lives. The present force of 8,000 members is responsible for protecting more than 8,000 miles of international land and water boundaries, and work in the dangerous deserts of Arizona and Texas. They are empowered to do this job. We do not need Federal troops at the border just yet. I urge my colleagues to vote "no" on this amendment.

HONORING THE LATE DR.  
CLIFFORD H. KEENE

**HON. SAM FARR**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 18, 2000

Mr. FARR of California. Mr. Speaker, today I honor a man who helped usher in the age of the health maintenance organization. Dr. Clifford H. Keene passed away at the age of 89.

Born in Buffalo, NY on January 28, 1910, Clifford later on went to earn his medical degree from the University of Michigan Medical School in 1934 and was a surgical instructor there until 1939. During World War II Clifford rose to the rank of lieutenant colonel as the surgeon and medical administrator for the 24th Corps in the Pacific Theater. His career with the Kaiser-Permanente Medical Care Program began in 1954 when industrialist Henry Kaiser asked him to join the then-struggling Kaiser