

retain the very best. We must never forget that for all the expensive weaponry and high-tech gadgetry, the men and women who wear the uniforms are the backbone of our military.

In that respect, perhaps the most important provision of this bill is one that makes retroactive an increase in the maximum annuity available to servicemembers' families through the Servicemembers' Group Life Insurance (SGLI). Though this increase was signed into law on November 1, 2000, the effective date of this increase is not until April 1, 2001. Regrettably, for many of our servicemembers and families—most notably, the 21 National Guard members killed in a plane crash earlier this month, the 17 sailors killed in the terrorist bombing of the U.S.S. *Cole*, and personnel lost in training accidents in Hawaii and Kuwait—this is too late.

For all these reasons, I urge my colleague to support H.R. 801. But, I also rise in strong support, Mr. Speaker, of the second veterans' bill on the floor today, the Veterans' Hospital Emergency Repair Act.

The Veterans' Health Administration operates the largest federal health care delivery system in the country with 172 medical centers, 409 domiciliaries, 132 nursing homes, and 829 outpatient clinics. In 1999, these providers treated 3.6 million veterans.

Just as our veterans have been aging, so too has the infrastructure this grateful nation established to care for them. So many of the hospitals and facilities to which these veterans must go for care are simply unsafe or clearly distressed. We must not sacrifice the health and welfare of our veterans in such facilities.

The Veterans' Hospital Emergency Repair Act would complement an ongoing review within the Veterans' Health Administration, the Capital Asset Realignment for Enhanced Services (CARES). To borrow a phrase from the President's address to Congress last month: Our veterans health vision should drive our veterans health budget.

Congress made an informed decision in its last session to move the veterans' health system into the 21st century by enacting the Veterans' Millennium Health Care and Benefits Act. CARES, is a realistic way to determine how we move from the old system of medicine that revolved around hospital-based care to the new which relies upon outpatient and community-based care without sacrificing quality and without sinking dollars into infrastructure that we can reasonably expect to fall by the wayside. H.R. 811 can help to make that happen.

Mr. Speaker, I want to thank Veterans' Committee Chairman CHRIS SMITH and Ranking Member, LANE EVANS, for their leadership in moving both H.R. 801 and H.R. 811 to the floor so quickly. I urge my colleagues to support both these bills.

Mr. REYES. Mr. Speaker, as an original co-sponsor and strong supporter of H.R. 811, the Veterans Hospital Emergency Repair Act, I am pleased that this bill is being considered today. Like any large organization, the Department of Veterans Affairs has many facilities which, as they age, require periodic repairs to assure that patients are cared for in an appropriate, safe, accessible setting.

Our Nation's veterans need to be assured that their care will not be jeopardized because

funds are not available to make necessary and appropriate emergency repairs. This bill will provide that assurance.

I thank Chairman SMITH and our Ranking Democratic Member Mr. EVANS, as well as the Chairman and Ranking Democratic Member of the Subcommittee on Health, Mr. MORAN and Mr. FILNER for this timely bill. I urge my colleagues to support it.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I rise today in support of H.R. 811, Veteran's Emergency Hospital. This legislation cures a shortfall in funding that should have been allocated to veterans last year.

No funding was provided through the appropriation process for Veterans Affairs Department (VA) major construction in FY 2001, despite Congress having authorized \$116 million for four major projects. This occurred partly because the appropriators chose to wait for the VA's "Capital Assets Realignment for Enhanced Services," or CARES initiatives, to deliver a plan for alternative uses of un-needed VA facilities. That plan, however, may take a number of years to complete. In the meantime, the VA is funding its building projects by using the minor-construction, minor-miscellaneous and non-recurring maintenance accounts.

H.R. 811 basically authorizes as much as \$250 million in fiscal year 2002 and \$300 million in fiscal year 2003 to fund various major medical facility construction projects. The measure actually authorizes the VA to select patient care projects for construction and cap project costs at \$25 million for any single project, except for seismic corrections. The bill specifies that the authorized funds should improve, replace, renovate or update facilities, including research facilities that need to be upgraded.

The measure also requires the VA to consider recommendations of the department's independent board for capital investments in selecting projects; to permit it to use the Advance Planning Fund to design projects selected under this bill; and requires the VA and the General Accounting Office to report to Congress on projects selected under the new authority, their purposes and costs, the results of the authorization process, and recommendations for changing this authority as needed.

I urge my colleagues to support the legislation.

□ 1515

Mr. SMITH of New Jersey. Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

The SPEAKER pro tempore (Mr. BASS). The question is on the motion offered by the gentleman from New Jersey (Mr. SMITH) that the House suspend the rules and pass the bill, H.R. 811, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds of those present have voted in the affirmative.

Mr. SMITH of New Jersey. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

GENERAL LEAVE

Mr. SMITH of New Jersey. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on H.R. 811, as amended.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New Jersey?

There was no objection.

REPORT OF CORPORATION FOR PUBLIC BROADCASTING, CALENDAR YEAR 2000—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES

The SPEAKER pro tempore laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, without objection, referred to the Committee on Energy and Commerce:

*To the Congress of the United States:*

Pursuant to section 19(3) of the Public Telecommunications Act of 1992 (Public Law 102-356), I transmit herewith the report of the Corporation for Public Broadcasting covering calendar year 2000.

GEORGE W. BUSH.  
THE WHITE HOUSE, March 27, 2001.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12 of rule I, the Chair declares the House in recess until approximately 4 p.m.

Accordingly (at 3 o'clock and 16 minutes p.m.), the House stood in recess until approximately 4 p.m.

□ 1602

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. PETRI) at 4 o'clock and 2 minutes p.m.

PROVIDING FOR EXPENSES OF CERTAIN COMMITTEES OF THE HOUSE OF REPRESENTATIVES IN THE ONE HUNDRED SEVENTH CONGRESS

Mr. NEY. Mr. Speaker, I ask unanimous consent that it be in order at any time on the legislative day of March 27, 2001, without intervention of any point of order, to consider House Resolution 84; that the resolution be considered as