

light" for the surrounding community. He was relentless and untiring in his efforts to improve the "circle of quality" that are our public schools. He fought against complacency, warning his co-workers that efforts to improve school facilities were never completed, and urging them on with the words, "We must do it for the children."

Born in the Bronx in 1951 into a family of four boys and six girls, James and his family moved to the Borough of Queens in 1953. He is devoted to his wife, Joanne Lonergan, a teacher at Public School 24Q. Together they were blessed with two children, James III, 28 years old, a manager with the Social Security Administration, and Kelly, 26 years old, an attorney.

In keeping with his energetic, can-do disposition, James F. Lonergan is not so much retiring as moving on to other activities. He is earning a second master's degree, in pastoral theology at St. John's University, and will continue to serve as a certified lay minister at Holy Trinity Parish and as a Eucharist minister. He will also remain very active in several veterans' and civic associations, including Vietnam Veterans, American Legion, Veterans of Foreign Wars, Building Owners Management Association, Taxpayers Association, and the Whitestone Booster Association.

Madam Speaker, I ask that my colleagues join me in recognizing the contributions to our civic life made by James F. Lonergan on the occasion of his retirement from a distinguished career as a dedicated and effective public servant.

EXTENSION OF QUALIFIED GREEN BUILDING AND SUSTAINABLE DESIGN PROJECT BONDS AUTHORITY

**HON. JOHN LEWIS**

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

*Friday, October 3, 2008*

Mr. LEWIS of Georgia. Madam Speaker, I support extending authority for the issuance of qualified green building and sustainable design project bonds. I fought for the inclusion of this extension in this bill because of its importance to Atlanta. I fought for this extension because I believe the use of these bonds helps finance cutting-edge, environmentally conscious redevelopment projects like the Atlantic Station project in Georgia. Over and over again businesses and developers are seeing that going green improves their bottom line. Projects like Atlantic Station and green initiatives must be commonplace in the future.

The authority to issue qualified green building and sustainable design project bonds was set to expire in 2009. Unfortunately bond applications were not even approved until 16 months after the legislation creating the authority to issue these bonds passed in 2004. The delay caused setbacks because the technology and engineering behind these projects are groundbreaking. To make up for that lost time, this bill extends the authority to issue qualified green bonds through September 30, 2012. In addition, this legislation clarifies that amounts in a reserve account may be re-

leased to the project five years after the date of issuance of the last bond issue issued with respect to the project. This will make sure that all funding can be made available to these projects in a more timely and efficient manner. While this legislation makes small but important changes, it does so without altering any other aspect of this enormous program, such as the tax-exempt status of these bonds.

I am proud to support this effort and the good work occurring right in the 5th District of Georgia. The Atlantic Station project has been good for Atlanta. It is in the national spotlight. Major efforts like this are necessary to show cities across America there is a better way forward for our environment and our communities. I appreciate the work of my colleagues and the Chairman of the Ways and Means Committee, Chairman RANGEL, for helping make sure these projects are given the opportunity to succeed. I look forward to continuing to work with him on this and welcoming him to Atlanta to witness firsthand the result of this investment.

INTRODUCTION OF THE PROTECTING HOSPITAL OUTPATIENT AND COMMUNITY CLINIC SERVICES ACT OF 2008 (H.R. 7219)

**HON. JOHN M. MCHUGH**

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Friday, October 3, 2008*

Mr. MCHUGH. Madam Speaker, on September 29, 2008, I introduced legislation, the Protecting Hospital Outpatient and Community Clinic Services Act of 2008 (H.R. 7219), which would prohibit the U.S. Secretary for Health and Human Services (HHS) from taking any action before April 1, 2009, to implement a proposed regulation related to the redefinition of Medicaid outpatient hospital services. This initiative was developed by HHS' Centers for Medicare and Medicaid Services (CMS) and was published on September 28, 2007 (72 Federal Register 55158).

The proposal is designed to limit the definition and scope of Federally reimbursable Medicaid outpatient services provided in a hospital clinic or facility as well as those offered in a rural health clinic. CMS has stated that it is unable to determine the fiscal impact of the rule and that they believe this measure would not significantly alter current practices in most states. However, the National Association of State Medicaid Directors (NASMD) reports that the proposed regulation "would significantly affect the Medicaid program in every state." According to one source, in New York State alone, health care providers would lose over \$452 million. It is important to note that this estimate, large as it is, excludes the costs encountered by hospital settings. By way of example, New York's 23rd Congressional District, which I have the privilege of representing, would lose over \$2.6 million in Federal funding. Moreover, even after attempting to fully analyze this complex regulation, New York State is still unable to fully assess the total magnitude of its impact.

Needless to say, such a loss of funding would have a devastating impact upon the

health care infrastructure, and thus the residents, of Northern and Central New York. Specifically, several constituent providers have estimated the proposed rule would not only reduce their ability to provide critical services to some of our nation's most vulnerable individuals but also literally force these providers out of business.

As stated above, CMS readily admits, it does not fully understand the impact of its actions. The State of New York has documented that the proposal would result in significant negative consequences. In the face of such circumstances, prudence demands that the rule's actual consequences be thoroughly examined, and well understood, before its implementation. H.R. 7219 would provide CMS, and Congress, until April 1, 2009, to closely examine the proposed rule and act accordingly. Thus, I urge my colleagues to join with me to enact this legislation before the conclusion of the 110th Congress.

IN SUPPORT OF TITLE H.R. 6503, TO AMEND THE VIOLENT CRIME CONTROL AND LAW ENFORCEMENT ACT OF 1994 TO REAUTHORIZE THE MISSING ALZHEIMER'S DISEASE PATIENT ALERT PROGRAM

**HON. SHEILA JACKSON-LEE**

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

*Friday, October 3, 2008*

Ms. JACKSON-LEE of Texas. Madam Speaker, thank you for your leadership in bringing this bill to the floor. I support H.R. 6503, to amend the Violent Crime Control and Law Enforcement Act of 1994 to reauthorize the Missing Alzheimer's Disease Patient Alert Program. I urge my colleagues to support this bill.

Thousands of vulnerable older adults go missing each year as a result of dementia, diminished capacity, foul play or other unusual circumstances. The Alzheimer's Foundation of America estimates that over 5 million Americans suffer from Alzheimer's disease, and that 60 percent of these are likely to wander from their homes. Alzheimers diseases and other dementia related illnesses often leave their victims disoriented and confused and unable to find their way home. According to the Alzheimers Association, up to 50 of wanderers risk serious illness, injury or death if not found within 24 hours. The problem can be exacerbated greatly by national disasters, such as Hurricane Katrina, that can, in a matter of hours, increase the number of missing persons by the thousands.

H.R. 6503 reauthorizes the existing Missing Alzheimer's Disease Patient Alert Program. The bill authorizes \$5 million for each fiscal year through 2015 for competitive grants to nonprofit organizations. The money may be used to pay for the "costs of planning, designing, establishing, and operating locally based, proactive programs to protect and locate missing patients with Alzheimers disease and related dementias and other missing elderly individuals." The bill states a preference for "national nonprofit organizations that have a direct line to patients, and families of patients,