governmental activity as well as significant area of non-governmental activity. However, individual privacy and freedom from governmental interference in private conduct are also recognized as fundamental values of our free and democratic society. The United States understands that by its terms the Convention requires broad regulation of contraception and abortion in the health care system. In particular, Articles 2, 3 and 5. The United States does not accept any obligation under the Convention to enact legislation or to take any other action with respect to private conduct except as mandated by the Constitution and laws of the United States.

(2) Under current U.S. law and practice, women are voluntary for military service without restriction, and women in fact serve in all U.S. armed services, including in combat positions. However, the United States does not accept an obligation under the Convention to assign women to all military units and positions which may require engagement in direct combat.

(3) The Convention strengthened protections against gender discrimination in the area of remuneration, including the right to equal pay for equal work in jobs that are substantially similar. However, the United States does not accept any obligation under this Convention to enact legislation establishing the comparable worth with that term is understood in U.S. practice.

(4) Current U.S. law contains substantial provisions for maternity leave in many employment settings but does not require paid maternity leave. Therefore, the United States does not accept an obligation under Article 112(b) to introduce maternity leave with pay or with comparable social benefits without loss of former employment, seniority or social allowances.

Section 3. Understandings. The advice and consent of the Senate is subject to the following understandings, which shall be included in the instrument of ratification:

(1) The United States understands that this convention shall be implemented by the Federal Government to the extent that it exercises jurisdiction over the matters covered therein, and otherwise by the State and local governments. To the extent that State and local governments exercise jurisdiction over such matters, the Federal Government shall, as necessary, take appropriate measures to ensure the fulfillment of this Convention.

(2) The Constitution and laws of the United States contain prohibitions of discrimination on the basis of race, color, national origin, sex, age, religion, and disability. Accordingly, the United States does not accept any obligation under this Convention to enact legislation or to take any other action with respect to private conduct, in particular under Articles 5, 7 and 13, to restrict those rights, through the adoption of legislation or other measures, to the extent that they are protected by the Constitution and laws of the United States.

(3) The United States understands that Article 12 permits States Parties to determine the nature of their commitment under the Convention, in particular under Articles 5, 7 and 13, to restrict those rights, through the adoption of legislation or other measures, to the extent that they are protected by the Constitution and laws of the United States.

(4) Noting in this Convention shall be construed to reflect or create any right to abortion and in no case should abortion be promoted as a method of family planning.

(5) The United States understands that the Committee on the Elimination of Discrimination Against Women was established under Article 17 for the purpose of considering the program of implementation of Convention. The United States understands that the Committee on the Elimination of Discrimination Against Women, as set forth in Article 21, reports annually to the General Assembly on its activities, and “may make suggestions and general recommendations based on the information received from the States Parties.” Accordingly, the United States understands that the Committee on the Elimination of Discrimination Against Women has no authority to compel actions by States Parties. Section 4. Declarations. The advice and consent of the Senate is subject to the following declarations:

(1) The United States declares that, for purposes of its domestic law, the provisions of the Convention are not�行通款。(2) With reference to Article 29(2), the United States declares that it does not consider itself bound by the provisions of Article 29(1). The specific consent of the United States to the jurisdiction of the International Court of Justice concerning disputes over the interpretation or application of this Convention is required on a case-by-case basis.

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Mr. DeWINE (for himself and Mr. DINGELL): S. 2913. A bill to amend the Employee Retirement Income Security Act of 1974, the Public Health Service Act, and the Internal Revenue Code of 1986 to provide health insurance protections for individuals who are living organ donors; to the Committee on Health, Education, Labor, and Pensions.

By Mr. CORZINE: S. 2914. A bill to amend title XVIII of the Social Security Act to provide for appropriate incentive payments under the medicare program for physicians' services furnished in underserved areas; to the Committee on Finance.

By Mr. SCHUMER (for himself, Mrs. CLINTON, Mr. TORRICELLI, and Mr. CORZINE): S. 2915. A bill to provide for cancellation of student loan indebtedness for spouses, surviving joint debtors, and parents of individuals who died or became permanently and totally disabled due to injuries suffered in the terrorist attack on September 11, 2001; to the Committee on Health, Education, Labor, and Pensions.

By Mr. BIDEN: S. 2916. A bill to put a college education within reach, and for other purposes; to the Committee on Finance.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. JOHNSON (for himself, Mr. WILLIAMSON, Mr. HARREN, Mr. LUGAR, Mr. DASCHLE, Mr. CONRAD, Mr. DURBIN, Mr. GRAELEY, Mr. DAYTON, Mr. NELSON of Nebraska, Mr. DURBIN, Mr. BAUER, Mr. FALL, Mr. FEINGOLD, Mr. BAYH, Mr. CRapo, Mrs. CARNAHAN, Mr. Bingaman, Mrs. MURRAY, Mr. JEFFORDS, Mr. LEVIN, Mr. LEVIN, Mr. DEWINE, Ms. STABENOW, and Mr. BREAUX): S. Res. 324. A resolution congratulating the National Farmers Union for 100 years of service to farmers, ranchers, and rural communities; to the Committee on Agriculture, Nutrition, and Forestry.

By Mr. REID (for himself and Ms. CANTWELL): S. Con. Res. 138. A concurrent resolution expressing the sense of Congress that the Secretary of Health and Human Services should conduct or support research on certain tests to screen for ovarian cancer, and Federal health care programs and group and individual health plans should cover the tests if demonstrated to be effective, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

ADDITIONAL COSPONSORS

S. 150 At the request of Mr. BINGAMAN, the name of the Senator from Illinois (Mr. DURBIN) was added as a cosponsor of S. 155, a bill to amend title 5, United States Code, to eliminate an inequity in the applicability of early retirement eligibility requirements to military reserve technicians.

S. 561 At the request of Ms. COLLINS, the name of the Senator from Minnesota (Mr. DAYTON) was added as a cosponsor of S. 561, a bill to provide that the Medicare Insurance Premium Conversion arrangements afforded to Federal employees be made available to Federal annuitants and members and retired members of the uniformed services.

S. 572 At the request of Mr. NELSON of Florida, his name was added as a cosponsor of S. 572, a bill to amend title XIX of the Social Security Act to extend modifications to DSH allotments provided under the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000.

S. 611 At the request of Ms. MIKULSKI, the name of the Senator from Minnesota (Mr. DAYTON) was added as a cosponsor of S. 611, a bill to amend title II of the Social Security Act to provide that the reduction in social security benefits which are required in the case of spouses and surviving spouses who are also receiving certain Government pensions shall be equal to the amount by which two-thirds of the total amount of the combined monthly benefit (before reduction) and monthly pension exceeds $1,200, adjusted for inflation.

S. 677 At the request of Mr. HATCH, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 677, a bill to amend the Internal Revenue Code of 1986 to repeal the required use of certain principal repayments on mortgage subsidy bond financing to redeem bonds, to modify the purchase price limitation under mortgage subsidy bond rules based on median family income, and for other purposes.

S. 874 At the request of Mr. TORRICELLI, the name of the Senator from South Dakota (Mr. JOHNSON) was added as a cosponsor of S. 874, a bill to require health plans to include infertility benefits, and for other purposes.
At the request of Mr. Hatch, the name of the Senator from Connecticut (Mr. Lieberman) was added as a cosponsor of S. 1234, a bill to amend title 18, United States Code, to provide that certain sexual crimes against children are predicate crimes for the interception of communications, and for other purposes.

At the request of Mr. Ensign, the name of the Senator from Alaska (Mr. Murkowski) was added as a cosponsor of S. 1234, a bill to amend title 18, United States Code, to provide that certain sexual crimes against children are predicate crimes for the interception of communications, and for other purposes.

At the request of Mr. Conrad, the names of the Senator from South Dakota (Mr. Johnson) and the Senator from New Mexico (Mr. Bingaman) were added as cosponsors of S. 1605, a bill to amend title XVIII of the Social Security Act to provide for payment under the Medicare Program for four hemodialysis treatments per week for certain patients, to provide for an increased update in the composite payment rate for dialysis treatments, and for other purposes.

At the request of Mr. Durbin, the names of the Senator from New Jersey (Mr. Menendez) and the Senator from Nebraska (Mr. Johanns) were added as cosponsors of S. 1655, a bill to amend title XVIII of the Social Security Act to provide for payment under the Medicare Program for four hemodialysis treatments per week for certain patients, to provide for an increased update in the composite payment rate for dialysis treatments, and for other purposes.

At the request of Mr. Kennedy, the name of the Senator from Minnesota (Mr. Wellstone) was added as a cosponsor of S. 2505, a bill to promote the national security of the United States through international educational and cultural exchange programs between the United States and the Islamic world, and for other purposes.

At the request of Mr. Cleland, the name of the Senator from Georgia (Mr. Cleland) was added as a cosponsor of S. 2533, a bill to amend title II of the Social Security Act to provide for miscellaneous enhancements in Social Security benefits, and for other purposes.

At the request of Mr. Baucus, the name of the Senator from Iowa (Mr. Harkin) was added as a cosponsor of S. 2555, a bill to amend title XVIII of the Social Security Act to enhance beneficiary access to quality health care services under the medicare program.

At the request of Mrs. Boxer, the name of the Senator from Oregon (Mr. Wyden) was added as a cosponsor of S. 2596, a bill to amend the Internal Revenue Code of 1986 to extend the financing of the Superfund.

At the request of Mrs. Clinton, the name of the Senator from Minnesota (Mr. Dayton) was added as a cosponsor of S. 2602, a bill to amend title 38, United States Code, to provide that remarriage of the surviving spouse of a veteran after age 55 shall not result in termination of dependency and indemnity compensation.

At the request of Mr. Kennedy, the name of the Senator from South Dakota (Mr. Daschle) and the Senator from New Mexico (Mr. Bingaman) were added as cosponsors of S. 2626, a bill to protect the public health by providing the Food and Drug Administration with certain authority to regulate tobacco products.

At the request of Mr. Ensign, the name of the Senator from Missouri (Mr. Bond) was added as a cosponsor of S. 2735, a bill to amend title 49, United States Code, to provide for the modification of airport terminal buildings to accommodate explosive detection systems for screening checked baggage, and for other purposes.

At the request of Mr. Hatch, the names of the Senator from Wyoming (Mr. Enzi), the Senator from Oklahoma (Mr. Nickles) and the Senator from Alaska (Mr. Stevens) were added as cosponsors of S. 2739, a bill to provide for post-conviction DNA testing, to improve competence and performance of prosecutors, defense counsel, and trial judges handling State capital criminal cases, to ensure the quality of defense counsel in Federal capital cases, and for other purposes.

At the request of Mr. Dodd, the name of the Senator from California (Mrs. Boxer) was added as a cosponsor of S. 2770, a bill to amend the Federal Law Enforcement Pay Reform Act of 1990 to adjust the percentage differentials payable to Federal law enforcement officers in certain high-cost areas.

At the request of Mrs. Boxer, the name of the Senator from Ohio (Mrs. Boxer) was added as a cosponsor of S. 2869, a bill to facilitate the ability of certain spectrum auction winners to pursue alternative measures required in the public interest to meet the needs of wireless telecommunications consumers.

At the request of Mr. Feingold, the name of the Senator from Maryland (Ms. Mikulski) was added as a cosponsor of S. 2908, a bill to require the Secretary of Defense to establish at least one Weapons of Mass Destruction Civil Support Team in each State, and for other purposes.

At the request of Mr. Feingold, the names of the Senator from Nevada (Mr. Reid) and the Senator from Ohio (Mr. DeWine) were added as cosponsors of S. Con. Res. 11, a concurrent resolution...
expressing the sense of Congress to fully use the powers of the Federal Government to enhance the science base required to more fully develop the field of health promotion and disease prevention, and to explore how strategies can be developed to integrate lifestyle improvements into national policy, our health care system, schools, workplaces, families and communities.

S. CON. RES. 94

At the request of Mr. Wyden, the name of the Senator from Iowa (Mr. Grassley) was added as a cosponsor of S. Con. Res. 94, a concurrent resolution expressing the sense of Congress that public awareness and education about the importance of health care coverage is of the utmost priority and that a National Importance of Health Care Coverage Month should be established to promote that awareness and education.

AMENDMENT NO. 4508

At the request of Mr. Feingold, the names of the Senator from Nevada (Mr. Reid) and the Senator from Maryland (Mr. Sarbanes) were added as cosponsors of amendment No. 4508 intended to be proposed to H.R. 5005, a bill to establish the Department of Homeland Security, and for other purposes.

AMENDMENT NO. 4509

At the request of Mr. Feingold, the names of the Senator from Nevada (Mr. Reid) and the Senator from South Dakota (Mr. Duren) were added as cosponsors of amendment No. 4509 intended to be proposed to H.R. 5005, a bill to establish the Department of Homeland Security, and for other purposes.

AMENDMENT NO. 4510

At the request of Mr. Bayh, the name of the Senator from Arkansas (Mr. Hutchison) was added as a cosponsor of amendment No. 4510 intended to be proposed to H.R. 5005, a bill to establish the Department of Homeland Security, and for other purposes.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. DeWINE (for himself and Mr. Durbin):

S. 2943. A bill to amend the Employee Retirement Income Security Act of 1974, the Public Health Service Act, and the Internal Revenue Code of 1986 to provide health insurance protections for individuals who are living organ donors; to the Committee on Health, Education, Labor, and Pensions.

Mr. DeWINE. Madam President, I rise today to raise the awareness of an issue that affects over 22,000 people a year, and that issue is organ donation. The sad fact about organ donations is this: We have the medical know-how to save lives, but we lack the organs. We lack organs because most Americans simply are unaware of the life-giving difference they can make by choosing to become organ donors.

Sadly, each day the waiting list for those needing organs continues to grow. Today, nearly 79,000 people remain on the national transplant waiting list. Right now, more than 50,000 people, alone, are waiting for kidney transplants. That number is expected to double within the next decade. Additionally, between 12 and 16 people die each day just waiting for an available organ.

To remedy the organ shortage, we must increase public awareness. By educating the public and raising awareness, more people will choose to become organ donors. At the very least, through these efforts, we can encourage more families to discuss what their wishes are and whether they would want to be organ donors.

But our efforts must not stop there. We must do more than just implement public awareness campaigns, because the face of organ donation is changing. For the first time ever, the number of living organ donors outnumbered cadaver donors. Last year, there were 6,081 donor cadavers while 6,485 people opted to become donors, usually by giving up a healthy kidney to help a family member or friend.

Recognizing this, my colleague, Senator Durbin, and I introduce a bill today that would help protect living organ donors in the group insurance market. Our bill would ensure that those individuals who choose to be living organ donors are not discriminated against in the insurance marketplace. Our bill builds on the protections provided by the Organ ProcurementPortability and Accountability Act, so that living organ donors are not denied insurance nor are they applied discriminatory insurance premiums because of their living organ donor status.

Quite simply, a brother who donates a part of his kidney to his sister should not be denied health insurance. But tragically, that is what oftentimes happens. Frequently, individuals who are living organ donors are denied health insurance or restricted from the insurance market. Instead, we should celebrate living organ donors and remove obstacles and barriers for the successful donation of organs. Insurers shouldn't undermine someone's decision to be a living organ donor.

Some States are evaluating how living organ donors affect the market. States are amending their Family Medical Leave eligibility so that living organ donors can participate and benefit from their employers' leave provisions. The Federal Government, with the Organ Donor Leave Act of 1999, offered 30 days paid leave to Federal employees who chose to be an organ donor. But, paid leave and job protection doesn't mean much if people are denied health insurance or are given discriminatory insurance premiums because they donated an organ to save another person's life.

The impact of living organ donation is profound. A living organ donor not only can save the life of one patient, but can also take that person off the organ waiting list. For the waiting list, that means the next person on the waiting list is "bumped up" a spot—giving additional hope to the 79,000 persons on the national transplant waiting list.

Living organ donors give family members and friends a second chance at life and the opportunity to reduce the number of people on the waiting list. It is time for Congress to make a sensible decision in support of a person's decision to be a living organ donor. I encourage my colleagues to join me in co-sponsoring this bill.

By Mr. Rockefeller:

S. 2944. A bill to amend title XVIII of the Social Security Act to provide for appropriate incentive payments under the medicare program for physicians' services furnished in underserved areas; to the Committee on Finance.

Mr. ROCKEFELLER. Mr. President, today I introduce the Medicare Incentive Payment Program Refinement Act of 2002. This bill builds on and long-overdue changes to the Medicare Incentive Payment Program, an initiative conceived to address the growing primary care physician shortage in some of our country's most medically underserved communities. While the number of physicians needed to care for all individuals, especially our aging seniors, continues to grow in remote rural areas and in underserved urban areas. However, rising health costs and the difficulties of operating a practice in underserved communities has exacerbated the physician shortage. Although the Medicare Incentive Payment Program aims to address the financial hurdles facing physicians in needy areas, the program has failed to achieve real results. This bill will make fundamental changes to improve the program's effectiveness.

Rural areas, in particular, are in need of efforts to retain primary care physicians, since the difficulties of operating a practice often drive doctors to larger areas with more resources and professional support. According to the Federal Office of Rural Health Policy, over 20 million Americans live in areas that have a shortage of physicians, and between 1975 and 1995 the smallest counties in the U.S., population under 2,500, experienced a drop in their physician-to-population ratio. More than 2,200 primary care physicians would be needed to remove all nonmetropolitan HPSA designations, and more than twice that number is needed to achieve adequate physician staffing levels nationwide.

According to the National Rural Health Association, nonmetropolitan physicians treat a larger number of Medicare and Medicaid beneficiaries than their urban counterparts do, generating less income for physicians per patient. Furthermore, nonmetropolitan physicians are less likely to perform high cost medical services due to their lower patient numbers. Understandably, MIPP monies can affect the quality of life for rural physicians and help prevent the mass migration of...