

Third, we believe specific mention should have been made of the International Labor Organization's decision last June to condemn Burma's continued use of forced labor and forced portage, especially of members of ethnic minorities, for military and civilian infrastructure projects. The ILO recommends, and my government strongly agrees, that Burma should bring both its laws and its practices into compliance with internationally recognized standards of workers' rights.

Finally, we believe that more specific and urgent attention should have been given in the resolution to important events that occurred in Rangoon near the end of last month. I refer, of course, to the withdrawal and subsequent expulsion from the National Convention of delegates from the National League for Democracy.

The governing State Law and Order Restoration Council, or SLORC, has asked the world to view the Convention as a representative mechanism for drafting a new constitution and facilitating a transition to democracy. Clearly, it is not that if the National League for Democracy, which received 60 percent of the votes in the 1990 election, is not free to participate openly, freely and without fear of intimidation. We must remember that the SLORC handpicked all the delegates, greatly under-representing those from the democratic movement.

Following the release from detention last July of Aung San Suu Kyi, there were hopes that the National Convention would, in fact, become a meaningful forum for discussion about Burma's future. Instead, the Government has maintained its habit of rigid control, and the few representatives of the democratic movement and of the various ethnic groups have been prohibited from voicing dissenting views.

The SLORC has said that its goals for Burma include economic prosperity and multiparty democracy. Burma's democratic leaders share those goals. The General Assembly should continue to express strong and unyielding support for actions that would close the great divide that now exists between what the SLORC professes to want and what it has thus far been prepared to do.

In this connection, my Government also wants to express its very great concern about recent statements from Rangoon that brand Aung San Suu Kyi and her supporters as "traitors" and speak of "annihilating" those who criticize the National Convention. The SLORC should have no doubt that it will be held responsible for any actions that result in physical harm or unjust punishment against those who have simply engaged in the peaceful exercise of internationally recognized rights.

In closing, Mr. President, let me once again congratulate the Swedish mission for its leadership on this resolution. Let me restate my Government's strong endorsement of its core recommendations in support of human rights and a substantive political dialogue. And let me re-emphasize my Government's concern about recent events and its hope that the Government of Burma will reconsider its policies and begin now to move down a democratic path.

LET'S HEAR IT FOR QUEEN ISABELLA

HON. JON D. FOX

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, December 13, 1995

Mr. FOX of Pennsylvania. Mr. Speaker, I would like to share with my colleagues the fol-

lowing letter to the Editor in the Trenton Times on November 26, 1995.

LET'S HEAR IT FOR QUEEN ISABELLA

Nov. 26, 1504, is a milestone in history that should never be forgotten, especially by New Jerseyans and Pennsylvanians.

Why? Because that's the date that Queen Isabella of Castile, the great woman who was instrumental in the discovery of America, passed away at her castle in Medina del Campo, Spain.

A year ago, Nov. 6—yes, that far back and the news just reaching our shores—the worldwide BBC/TV in London aired a documentary for their "Time-Watch," its peak-audience program, in which their scholarly panel exonerated Queen Isabella of Spain from historical lies attributed to her regarding the Inquisition.

That Queen Isabella did not act out of any anti-Semitic, racial or religious hatred or bigotry can be firmly substantiated by her unequivocal condemnation and personal interventions to stop riots and acts of violence against Spaniards of Jewish descent even before her formal accession to the throne, and sometimes at the loss of support of wealthy and influential partisans.

Lastly, an intelligent response to the long-time assault upon Queen Isabella and her legacy requires knowledge of the actual history of her now celebrated reign.

So, on this 491st anniversary of her death, let's tip our hats, and on April 22, her birthday, let's let loose with a big "Ole."—John Paul Paine, Philadelphia, PA.

EXPRESSING SORROW AT THE PASSING OF MRS. ELLA H. BECTON

HON. LOUIS STOKES

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, December 13, 1995

Mr. STOKES. Mr. Speaker, It is with great sadness that I rise to announce the passing of Mrs. Ella H. Becton on December 11, 1995. Mrs. Becton formerly served as executive director of the Phillis Wheatley Association. At the time of her death, she was an associate on the staff of the Murtis H. Taylor Multi Services Center. With her passing, the Cleveland community suffers the loss of a dedicated human being. I want to share with my colleagues and others throughout the Nation some information concerning a special individual who touched the lives of many.

Ella Becton was the daughter of Ella H. Wilson and the late Kalep Wilson. She was reared in Birmingham, AL, and went on to earn a bachelor of arts degree in psychology from Wilberforce University. Ella earned a master's degree in psychology and rehabilitation counselling at Wayne State University. After completing her education, Ella Becton began her professional career at the Lapeer State Home and Training School for the Mentally Retarded in East Lansing, MI. She relocated to Cleveland, OH where she married Leroy Becton, and began working for Vocational Guidance Rehabilitation Services.

Ella Becton's most significant career challenge came when she was selected as executive director of the Phillis Wheatley Association. The association is one of the oldest social service organizations in the area. Under Mrs. Becton's leadership, the Phillis Wheatley Association reached out to the elderly popu-

lation, families, and the youth of the community with services and programs to assist them. During her tenure, the organization developed a summer camp, an elderly meals program, a day care program, a music school, and the Youth Computer Center created in conjunction with Case Western Reserve University. Ella Becton was a dedicated individual who sought to improve the lives of others.

During her lifetime, Ella Becton also earned the respect and admiration of her colleagues and others throughout the community. She was the recipient of numerous awards and honors which recognized her commitment and dedication to service.

Mr. Speaker, the passing of Ella Becton brings to a close a life of love and compassion. Those of us who were the beneficiaries of her unselfish devotion will miss our friend and colleague. She was a woman of grace and dignity, and she was very special to all who knew her. I take this opportunity to express my sympathy to Ella's mother, Ella H. Wilson, and her loving husband, Leroy. I also extend my sympathy to her sons, Leroy, Jr., and Aaron, and other members of the Becton family. God has called Ella Becton home to rest, but she will always be in our hearts.

INTRODUCTION OF THE MEDICARE PREVENTIVE BENEFITS IMPROVEMENT ACT

HON. BENJAMIN L. CARDIN

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

Tuesday, December 13, 1995

Mr. CARDIN. Mr. Speaker, today I rise to introduce the Medicare Preventive Benefits Improvement Act. This bill seeks to amend Medicare by adding new preventive benefits to the program—benefits that not only save lives, but improve quality of life, and will save Medicare expenditures in the long run.

My bill would improve Medicare by adding the following new benefits:

Mammography: The benefit would be expanded so that all women over age 50 would be eligible for yearly mammographies and the deductible is waived.

Screening pap smears and pelvic exams: Expands the benefit from the 3-year limitation so that women of childbearing age or at high risk of developing cervical cancer are eligible for yearly pap smears and cervical exams. The deductible is also waived.

Colorectal cancer screening: Adds procedures for the purpose of early detection of colorectal cancer. These tests would include: screening fecal occult blood test, screening flexible sigmoidoscopy, and colonoscopy for high risk individuals. The Secretary also would make a decision within two years about covering screening barium enemas as an alternative to flexible sigmoidoscopy or colonoscopy. In addition, changes in technology would be taken into account to update the benefit in future years.

Prostate cancer screening: Adds procedures for the purpose of early detection of prostate cancer in men. The tests would include a digital rectal examination and a prostate-specific antigen blood test. In addition, changes in technology would be taken into account to update the benefit in future years.

Diabetes screening benefits: Adds two new diabetes benefits. First, coverage of diabetes

outpatient self-management training services which teach people with diabetes how to properly care for their disease and avoid unnecessary medical complications. Second, Medicare would cover the costs of blood-testing strips as durable medical equipment.

Many of you should recognize this package of preventive benefits. It is the same as the benefits we included in the Democratic alternative Medicare proposal that was considered on the House floor earlier this year. In addition, the coalition budget proposal includes a similar package of benefits. President Clinton has also included a preventive benefits package in his new Medicare proposal.

Congress is currently facing the daunting task of making the most dramatic changes to Medicare ever contemplated. We keep hearing the words "Medicare reform" in relation to the variety of plans being put forth at this time. My contention is that if we are to accomplish real Medicare reform, we must make needed improvements to the program.

Medicare is 30 years old and its benefit package shows its age. What I am proposing with these new benefits is not a major cost item for the program. Of course there will be an upfront investment in these new screening procedures—and we expect that cost to be around \$2 billion over the next 7 years based upon CBO analysis of earlier versions of the bill. However, this is a small price to pay at the beginning compared to the benefits Medicare will reap in the long run by covering such procedures. As we all know, preventive medicine saves money as well as lives. Early identification of a disease allows less costly, more effective treatment techniques to be used.

For example, in the area of colorectal cancer, the second deadliest cancer in this country, 138,000 new cases will be diagnosed and 53,300 people will die from this disease this year. Most of these people will be Medicare beneficiaries. These patients often suffer through years of chemotherapy, surgery and hospitalization. In fact, the most recent data has shown that colorectal cancer has led to over 125,000 Medicare hospital admissions in one year. Each of these admissions led to costly diagnostic, surgical and medical therapeutic interventions. Surely, it is both more cost effective and more medically appropriate to prevent than to treat this disease.

To continue using colorectal cancer as the example, this disease is one of the most preventable and curable types of cancer when detected early. Most colorectal cancers develop from benign polyps. Finding and removing these polyps reduces the risk of developing cancer by 90 percent.

Screening for colorectal cancer and other preventive services included in this bill must be covered by Medicare if we hope to stem rising health care costs. We must not continue to be "penny wise and pound foolish" by covering the expensive treatments and ignoring preventive services. These efforts are supported by broad-range of organizations representing consumers and health professionals. The following organizations have endorsed our bill: the American Cancer Society, the American College of Gastroenterology, the American Gastroenterological Association, the American Nurses Association, the Digestive Disease National Coalition, the American Diabetes Association, the American Association of Clinical Urologists, the American Foundation for Urologic Disease, the American

Urological Association, the American Society for Gastrointestinal Endoscopy, the Cancer Research Foundation of America, the Association of American Cancer Institutes, the Association of Pediatric Oncology Nurses, and the United Ostomy Association. I have also attached a letter to the congressional leadership signed by 15 organizations supporting the identical provisions included in my bill.

It is my hope that this legislation will be used as a model for the preventive benefit package that should be added to Medicare as we seek to reform the system. I encourage my colleagues to join me in support of this bill and look forward to continuing to work on this important issue as Congress grapples with the difficult task of reforming Medicare.

NOVEMBER 16, 1995.

Hon. ROBERT DOLE,
Majority Leader U.S. Senate, Washington, DC.

Hon. NEWT GINGRICH,
Speaker, U.S. House of Representatives, Washington, DC.

DEAR SENATOR DOLE AND SPEAKER GINGRICH: In crafting the future Medicare system, the 104th Congress would be remiss to overlook the most significant key to the future health status of our nation's citizens—preventive health services. The undersigned organizations urge you to include preventive services coverage for Medicare recipients during the Reconciliation Conference.

When details of the draft Republican health plan first became known this summer, we applauded the foresight of Congressional policymakers for including Medicare payments for a small number of proven preventive health services. While we recognize the fiscal constraints dominating this first round of Budget Reconciliation decisionmaking, we urge your reconsideration of the critical omission of colorectal cancer screening, mammography expansions, pap smears and pelvic examinations, prostate cancer screening and reimbursement for diabetes care and education. We believe strong bipartisan support exists for including these limited preventive benefits under Medicare.

In revamping Medicare, now is the time to provide reimbursement for:

Annual mammography screening services for all women over the age of 49, without a twenty percent copayment.

Pap smear and pelvic exam screenings as well as clinical breast examinations for female Medicare beneficiaries, without copayments.

Colorectal screening services for Medicare beneficiaries, including screening of fecal-occult blood testing, flexible sigmoidoscopies and colonoscopies.

Prostate cancer screening for men.

Diabetes care and education, specifically the coverage of outpatient self-management training services and blood testing strips for diabetics.

We strongly urge that you include the above screening services as part of the revamped Medicare program. In the long run, providing preventive services to Medicare beneficiaries will save not only money, but more importantly lives. The Senate and House are uniquely poised to better the lives of millions of Medicare beneficiaries who stand so much to lose or gain from this historic legislative opportunity.

We respectfully request the opportunity to meet with you at your earliest convenience to discuss including these preventive benefits in the final package.

Sincerely,

American Cancer Society, American College of Gastroenterology, American Diabetes Association, American Foundation for Urologic Disease, American

Public Health Association, Cancer Research Foundation of America, Digestive Disease National Coalition, Families Against Cancer Terror (FACT).

National Breast Cancer Coalition, National Coalition for Cancer Survivorship, The Oncology Nursing Society, The Association of Pediatric Oncology Nurses, The Susan G. Komen Breast Cancer Foundation, United Ostomy Association, The V Foundation.

A TRIBUTE TO HEMAYETUDDIN

HON. GARY L. ACKERMAN

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, December 13, 1995

Mr. ACKERMAN. Mr. Speaker, I rise to pay tribute to one of the very finest diplomats with whom I have had the pleasure of working during my tenure as former chairman of the House Foreign Affairs Committee on Asia and the Pacific.

Hemayetuddin is truly an outstanding diplomat. He represents his country with dignity, pride, and warmth. His knowledge of the workings of the U.S. Congress and the American body politic would be impressive for a citizen of this country, nonetheless for a foreign diplomat. It was through cooperation with His Excellency Ambassador Humayun Kabir and his very able Minister Hemayetuddin that our Subcommittee on Asia and the Pacific held the very first hearing ever on "The Other South Asia—Bangladesh, Sri Lanka, Nepal, Bhutan, and Afghanistan."

Perhaps Hemayet's greatest contribution to diplomatic life in Washington is his passion for his native Bangladesh. It was through Hemayet and Ambassador Kabir that my staff and I first learned of the tremendous economic reforms and opportunities for American business in Bangladesh. It was from Hemayet and his colleagues that I learned of Bangladesh's commitment to a secular, pluralistic society. And it was from Hemayet and Ambassador Kabir that I learned of the tremendous commitment Bangladesh has made to improve child labor practices in a nation struggling to develop.

While Hemayetuddin is unquestionable a diplomat of the highest caliber, he is also one of the finest gentlemen it has been my pleasure to work with in Washington. He, his lovely wife, Zeenat Jahan, and their beautiful children have indeed left their mark on this town.

I know my colleagues and I on the House International Relations Committee will miss Hemayetuddin and Zeenat. We wish them well at their new post in Beijing. All of us who know and admire Hemayet fully expect to see him back in Washington as his Nation's Ambassador some day.

FOOD AID MUST CONTINUE, H.R.

2775

HON. BENJAMIN A. GILMAN

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, December 13, 1995

Mr. GILMAN. Mr. Speaker, I have worked long and hard on the issue of world hunger. Key U.S. Government initiatives, like the Food for Peace and Food for Progress