

grant funding to States which implement adoption education programs. The Boston Globe, in an editorial highly supportive of this bill in general and the tax credit provision in particular, noted that this was an idea that deserves close study.

Another provision in the Omnibus Adoption Act which the Globe thought worthy of closer study clarifies Federal and military employee adoption benefits. This would allow these families to use sick leave for adoption purposes. They would also be eligible for reimbursement through Federal health benefit plans for the prenatal and maternity care of the birthmother in their adoption plan. The bill specifically prohibits surrogate parenting arrangements with regard to this provision.

The final two provisions of the Omnibus Adoption Act are so critical to the promotion of adoption and the health of birthmothers and their children that I have introduced them as a separate bill as well—the Health Care and Housing for Women and Children Act. These provisions establish material health certificates and grants for rehabilitation of housing for use as maternity homes. Maternal health certificates could be used by low-income pregnant women who seek assistance in carrying their child to term at maternity homes. Here they could get housing, medical care, educational and vocational training, adoption counseling, and other supportive services. To ensure that maternity homes are available to these women, a grant program would be established to give non-profit organizations aid in rehabilitating old housing for use as maternity homes.

The American Enterprise in its January/February 1995 noted the central role which maternity homes once played in helping young, low-income women to carry their pregnancies to term and how that role has unfortunately diminished. Writer George Liebmann observed that:

Current American welfare policy is plagued by an ideology of cash entitlement. What the poor really need today is not a check but a powerful set of rehabilitative social services. These should be offered by private community groups, without any illusion of moral neutrality. Rescuing an underclass is by definition a highly moralistic undertaking.

This is the historical mission of the maternity home. They provide therapy and support through the grouping of several young women in similar circumstances under one roof. They provide rehabilitation through education, vocational training, health care, and counseling. Furthermore, they offer discipline and supervision to women who have often lived on streets and in neighborhoods devoid of such backbone. This is crucial to the health and welfare of both mother and child. And it can all be provided by community groups with a commitment to care.

Over the past two sessions in which I have introduced these bills, they have enjoyed broad bipartisan support from more than one hundred Members. I encourage my colleagues to respond to the needs of homeless children and the families who long to help them by co-sponsoring both the Omnibus Adoption Act and the Health Care and Housing for Women and Children Act.

HONORING THE STUDENTS OF FAIRFAX HIGH SCHOOL

HON. THOMAS M. DAVIS

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Monday, February 27, 1995

Mr. DAVIS. Mr. Speaker, I rise today to pay tribute to some students at Fairfax High School in Fairfax, Virginia. These students represented the Eleventh Congressional District in the We The People Competition on February 14, 1995 in Richmond, Virginia. These students ranked in third place in the statewide competition with a score of 897, studying for months to become experts on the Bill of Rights. This is significant when I remind members that Fairfax County was the home of George Mason, the author of the Bill of Rights. By all accounts, these fine students have demonstrated expertise on those rights.

The We The People program is the most extensive education program in the country developed to teach young people about the Constitution and the Bill of Rights and the principles and values they embody. The course of instruction, using the specially designed With Liberty and Justice for All text, is followed by a test designed to measure the students' constitutional literacy. High school classes may then elect whether to enter a series of competitions at the congressional district, State, and national levels.

Administered by the Center for Civic Education and funded by the U.S. Department of Education by an Act of Congress, the program is currently being implemented in every Congressional District in the country, the four Trust Territories, and the District of Columbia. When combined with the noncompetitive elementary and middle school levels, more than 20 million students have participated in the program over the past 7 years.

Mr. Speaker, I would like to acknowledge these fine students at this time: Pretty Bhatt, Alicia Bridges, Lucy Brown, Paul Cavazos, Maya Crumbaugh, Anita Grover, Brian Johnson, Brooke Kemp, Margarita Koushinova, Christy McMillian, Kevin McPherson, Moghees Nezam, Jonathan Park, Iana Phillips, Jake Spatz, Thanh Tran, Beth Ulan, Patrick Varney, Alex Will, Laurie Wright, and Rabiah Yusef.

Mr. Speaker, I know that all of my colleagues join me in commending these fine students for becoming experts on the Bill of Rights and for joining in the battle of ideas with their peers on all levels of competition.

TRIBUTE TO THE LEAGUE OF UNITED LATIN AMERICAN CITIZENS

HON. ED PASTOR

OF ARIZONA

IN THE HOUSE OF REPRESENTATIVES

Monday, February 27, 1995

Mr. PASTOR. Mr. Speaker, I wish to call my colleagues' attention to the efforts of one organization to prevent the youth of our Nation from becoming school dropouts. The League of United Latin American Citizens (LULAC) will be holding its Annual Youth Leadership Conference on Friday, March 17 on the campus of Pima Community College in Arizona. Approximately 1,500 at-risk 7th through 12th graders

from around the State will be participating in this day of education and motivation. They will be directed by business, government and community leaders through 40 workshop sessions designed to teach goal-setting skills and instill the value that staying in school is a necessity in facilitating their success in life. Muralist, Judith Baca will be this year's keynote speaker. I am confident this program will leave its young participants with a sense of hope for the future and the realization that their education is the cornerstone in their preparation to become tomorrow's leaders.

LULAC, the conference organizer, was founded in 1929 and is the Nation's oldest Hispanic-American civic organization. Its purpose is to assist underprivileged Hispanics through a variety of programs which promote economic development, cultural heritage, and political involvement. For the past 6 years, the League has targeted the prevention of dropouts as a high priority for all volunteer efforts in Arizona. This year it will team up with the Metro Educational Commission, Pima Community College, the University of Arizona, the Tucson Police Department, and the Pima County Sheriff's Department in promoting education as the road to persistence and success in the Hispanic community.

I would like to commend and extend my gratitude to all involved in LULAC for their untiring efforts to preserve the promise of tomorrow by working to keep America's young people in school. I have no doubt that the leadership conference will be resounding success and a model for other events around the country.

SSI FOR SAMOA

HON. ENI F.H. FALEOMAVAEGA

OF AMERICAN SAMOA

IN THE HOUSE OF REPRESENTATIVES

Monday, February 27, 1995

Mr. FALEOMAVAEGA. Mr. Speaker, American Samoa is the only jurisdiction of the United States that is not served by the SSI program, nor its predecessor program, the Aid to the Aged, Blind, or Disabled [AABD]. SSI and AABD are basically the same in design. The only significant difference between the two programs is funding. With SSI, benefits and the cost of administering the program are fully financed by the Federal Treasury. As for AABD, the Federal Government pays 75 percent of benefits up to a specified limit and the States absorb the remaining 25 percent. Administrative cost is shared by both the Federal Government and the States at 50 percent each.

Under current law, in order to receive SSI benefits, a low-income elderly, blind or disabled individual must reside in one of the 50 States, the District of Columbia, or the Commonwealth of the Northern Mariana Islands. For qualified individuals who reside in Guam, Puerto Rico, or the Virgin Islands, similar benefits are available to them through the AABD program. Unfortunately, the elderly, blind and disabled individuals in American Samoa who have low or no income are not covered by either program.

Mr. Speaker, this is yet another example of a vital program extended to all 50 States, the District of Columbia, Puerto Rico, Guam, Virgin Islands, and the Northern Mariana Islands,

but not American Samoa. I believe this may have been an oversight when Puerto Rico and the Virgin Islands were included in the AABD program in 1950, and Guam after 1952.

According to a recent survey in American Samoa, there are now approximately 3,500 elderly, blind and disabled individuals with low or no income. These individuals currently receive some assistance through a nutrition assistance program, but funding for this program is determined on a year-to-year basis.

In addition, Mr. Speaker, the elderly population in American Samoa are caught between two systems. When Social Security went into effect in Samoa, this group of people were too old to contribute long enough to qualify for minimum benefits. On the other hand, the territorial retirement system did not begin until 1971. By that time, many of these people had already left the work force or had so little time remaining that they were also excluded from benefits under this system.

In each Congress since 1990, I have introduced legislation to include Samoa's elderly, blind and disabled population in the SSI program to address their critical financial needs. In 1990, it was estimated that approximately 1,600 such individuals resided in the Territory. The Congressional Budget Office estimated that if SSI was in place in American Samoa in 1993, Federal outlays would be about \$3 million higher than under current law.

Mr. Speaker, I know we are going through a difficult time in budgeting our revenue. I also know all Americans will have to sacrifice to bring our budget into balance. As we go through this process, I simply want to ask my colleagues that we not ask the most vulnerable among us, namely the blind, disabled and

poor elderly, to make a disproportionate share of that sacrifice.

Mr. Speaker, I submit the bill to be printed in the RECORD as follows:

H.R.—

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. EXTENSION OF SUPPLEMENTAL SECURITY INCOME BENEFITS PROGRAM TO AMERICAN SAMOA.

(a) IN GENERAL.—The 7th sentence of section 1101(a)(1) of the Social Security Act (42 U.S.C. 1301(a)(1)) is amended by inserting 'and title XVI (as in effect pursuant to the amendment made by section 301 of the Social Security Amendments of 1972)' before 'also'.

(b) CONFORMING AMENDMENTS.—

(1) Section 1614(e) of such Act (42 U.S.C. 1382c(e)) is amended by inserting ', American Samoa,' before 'and'.

(2) Section 1614(a)(1)(B)(ii) of such Act (42 U.S.C. 1382c(a)(1)(B)(ii)) is amended by inserting 'or national' after 'citizen'.

SEC. 2. EFFECTIVE DATE.

The amendments made by section 1 shall take effect on October 1, 1995.

HEARING CARE FOR FEDERAL EMPLOYEES ACT

HON. BENJAMIN A. GILMAN

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Monday, February 27, 1995

Mr. GILMAN. Mr. Speaker, I rise today to introduce legislation H.R. 1057 which would cover audiology services for Federal employees.

More specifically, this measure would amend the statute governing the Federal Employees Health Benefits Program [FEHBP] by requiring FEHBP insurance carriers to guarantee direct access to, and reimbursement for, audiologist-provided hearing care services when hearing care is covered under a FEHBP plan.

The statute that this legislation would amend is 5 U.S.C., section 8902(k)(1), which allows direct access to services provided by optometrists, clinical psychologists and nurse midwives, yet fails to allow direct access to services provided by audiologists in FEHBP plans covering hearing care services.

My legislation would not increase health care costs since it would not mandate any new insurance benefits. On the contrary, the bill should reduce the costs of hearing care by facilitating direct access to health care providers who are uniquely qualified and generally used to diagnose the extent and causes of hearing impairment.

Accordingly, I urge my colleagues to co-sponsor this measure, H.R. 1057.

At this point in the RECORD I request that the full text of my bill be inserted for review by my colleagues.

H.R. 1057

Be it enacted by the House of Representatives of the United States of America in Congress assembled,

SECTION 1. This Act may be cited as the "Hearing Care for Federal Employees Act".

SEC. 2. Section 8902(k)(1) of title 5, United States Code, is amended by inserting the word "audiologist," after the word "optometrist" wherever it appears in that section.