

BILL wrote the book on kindness and decency. He was a warm, gentle, good person—the kind we need more of these days.

He loved this institution, he loved the people who work here, and he loved representing Missouri's Eighth Congressional District.

BILL EMERSON worked hard and he worked well. Thanks to BILL, the 25 million Americans who rely on food stamps for sustenance will continue to get the Federal help they need to make it from day to day. And that's quite a legacy.

As Malcolm Forbes said, "You can easily judge the character of others by how they treat those who can do nothing for them or to them."

BILL EMERSON treated everyone well—from the Speaker of the House to the congressional pages, and everyone in between.

I am honored to have worked with him and I join the thousands of others in mourning his loss today.

DEATH OF THE HONORABLE BILL EMERSON

SPEECH OF

HON. JERRY F. COSTELLO

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, June 25, 1996

Mr. COSTELLO. Mr. Speaker, I want to rise today to praise my colleague and good friend, BILL EMERSON, who died last Saturday after a brave struggle against lung cancer. BILL EMERSON was a true public servant, who cared deeply about his congressional district as well as issues of global concern.

BILL served with me on the House Transportation and Infrastructure Committee, and we worked together on issues of regional concern for both Illinois and Missouri. Many of those problems which affect the boot heel of Missouri are also endemic to southern Illinois; the need for new infrastructure, good jobs and public health which is accessible and affordable for the people who live there. One project in particular which BILL and I recently worked on was Federal funding for the new Cape Girardeau Bridge; I join my colleagues in asking the House to name this bridge in BILL'S honor.

We had the opportunity to serve together for 8 years, and over those years I learned from BILL'S way of working in a bipartisan fashion. BILL EMERSON knew that progress is not made with just one side of the coin; it takes balance to keep moving forward. By working with both Republicans and Democrats, BILL EMERSON was able to accomplish things for the people of his congressional district as well as the Nation.

And the world. BILL EMERSON, along with our former colleague Mickey Leland, fought for those people who could not fight for themselves—people in Ethiopia, Somalia, and other countries where citizens starved and were too weak to make their case to those who could help. BILL fought for food and nutrition programs, to provide essential sustenance to keep people alive.

His legacy will not soon be forgotten. But his kind manner, his decency, his bipartisan ship, and his commitment to caring for other people will never be forgotten.

CONGRATULATIONS TO ELVIRA GRATTAGLIANO

HON. ROBERT G. TORRICELLI

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 26, 1996

Mr. TORRICELLI. Mr. Speaker, I rise today to pay recognition to a great American citizen who will turn 96 years old on January 1, 1997. Now living in Bergen County, NJ, Elvira Schettino Grattagliano moved to America 85 years ago at age 11 from a small town near Naples, Italy, called Castela Mare Di Stabia. Ms. Grattagliano exemplifies a role model citizen. She is always involved in her surrounding community, and continues to hold a deep interest in community affairs and the Government. During World War II, Ms. Grattagliano became very involved with the Red Cross program while her son Harry served under General Patton, and her other son, Dominick served under General MacArthur.

This leads me to her biggest love; her family. Rocco Grattagliano and Elvira were married on December 27, 1920. They were blessed with three children Harry, Pauline, who is deceased, and Dominick. As a wife and homemaker, Ms. Grattagliano dedicated her life to her 3 children, 6 grandchildren, and 10 great-grandchildren.

Once her children had grown, Ms. Grattagliano went into business as the owner and operator of a grocery and vegetable market in Greenville. Once again, thank you, to Ms. Grattagliano for all her efforts to make her community a better place and I wish her many more happy birthdays to come.

SALUTE TO DR. DALE FRANCIS REDIG

HON. ROBERT T. MATSUI

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 26, 1996

Mr. MATSUI. Mr. Speaker, I rise today to salute Dr. Dale Francis Redig who is retiring from a successful career in dentistry. On June 22, 1996, many of Dr. Redig's friends and colleagues gathered in Sacramento, CA to honor his many contributions to dentistry in California and throughout the world.

Born in Arcadia, IA in 1929, Dr. Redig enlisted in the U.S. Air Force in 1946 and served his country for 3 years before entering college at the University of Iowa. There, he earned his D.D.S. and M.S. degrees, including a stint as a Fulbright Lecturer at the University of Baghdad in Iraq. After graduating, he practiced pediatric dentistry for 14 years and also headed the Department of Pediatric Dentistry at the University of Iowa.

In 1969, Dr. Redig moved his family to San Francisco where he served as dean of the University of the Pacific School of Dentistry for 9 years.

During his career, Dr. Redig has held numerous leadership positions, both academic and administrative. He served as president of the American Society of Constituent Dental Executives and as a consultant for Federation Dentaire Internationale; the University of Riyadh, Saudi Arabia School of Dentistry; the University of Saigon School of Dentistry; and

the United Nations. He has served as chairman of the American Dental Association, president of the American Fund for Dental Health and president-elect of the American Association of Dental Schools. Dr. Redig also holds membership in a myriad of professional and honorary societies.

In perhaps one of his greatest roles in the development of dentistry in this State, Dr. Redig has been the executive director of the 20,000-member California Dental Association since 1978. In this capacity, he has served tirelessly to advance the caliber of dental services throughout California.

In addition to membership in numerous professional and honorary societies, Dr. Redig's volunteer service to his community and his profession is a local commodity. Since 1992 he has served the Board of Regents and the University of the Pacific; Since 1992 he has served on the Golden Gate University's Community Advisory Board; Since 1994 he has served the Sacramento Theatre Company on the Board of Trustees; Since 1994 he has served on the corporate cabinet of the Sacramento AIDS Foundation; and in Iowa he served on the board of the Des Moines Health Center and as chairman of the United Campaign, Dental Division.

Mr. Speaker, it is with great pleasure that I rise today to recognize Dr. Dale F. Redig for his many contributions to the field of dentistry. I ask my colleagues to join me in congratulating him on a sterling career of service to his profession and in wishing him happiness and success in all of his future endeavors.

FOSSTON, MN: AN ALL-AMERICAN CITY

HON. COLLIN C. PETERSON

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 26, 1996

Mr. PETERSON of Minnesota. Mr. Speaker, today I ask my colleagues to join me in congratulating Fosston, MN for being named an All-American City. This is a distinct honor for the state of Minnesota and for all the people of Fosston.

It is difficult for a small town to get the attention of National Civic League jurists, but the citizens of Fosston and their community leaders did just that. As 1 of only 10 small towns selected to receive this award, this town of 1,500 people proved that it is All-American, through and through.

For example, the Fosston school has established a program to keep young people in Fosston after graduation. Today's small town youth often seek opportunities in larger cities, but Fosston has developed a program to demonstrate to high school students that there can be economic opportunities in the town where you grew up.

In addition, school and community leaders have formed a committee to examine both the opportunities and potential problems that could lie ahead for Fosston. This kind of future oriented community program makes Fosston unique among small towns, and a model for others to follow.

My Minnesota district is made up of numerous small towns just like Fosston, and you will find the same kind of community pride and involvement in all of them. I will not be surprised

if Fosston's award inspires many other small Minnesota communities to prove that they too are All-American Cities.

Congratulations to Fosston, MN, and every person in the community who has worked to make the town what it is today.

LANDMINE REMOVAL ASSISTANCE ACT

HON. JAMES P. MORAN

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 26, 1996

Mr. MORAN. Mr. Speaker, I rise today to urge my colleagues to join me and our colleague and my good friend from Maryland, CONNIE MORELLA, in sponsoring legislation to combat one of the most serious crises facing our planet. The earth is covered with hidden, silent killers. This deadly menace is the more than 100 million antipersonnel landmines that are lying in the ground in 64 countries waiting to explode and kill or injure some unsuspecting person.

This terrible tool of war does not distinguish between children and soldiers. These mines only cost between \$3 and \$30 to make. It costs from \$300 to \$1,000 to clear just one landmine. Last year alone, 2 million new mines were laid. That is twenty times the number of mines removed. At the current pace it would take 1,100 years to rid the world of antipersonnel landmines. That is truly disturbing and disheartening.

We must do more to combat this global crisis. The time has come to provide a comprehensive, flexible, and long-term approach to improve the role that the United States plays in international awareness, detection, and clearance of antipersonnel landmines and unexploded ordnance.

The bill we are introducing today takes some important steps toward making U.S. participation in humanitarian demining more effective.

Through measures set forth in this legislation, the United States, working with the international community and nongovernmental organizations, will have the necessary flexibility and ability to provide educational, financial, and technical assistance to those in need of humanitarian landmine removal.

This bill will provide a long-term strategy to guide and sustain U.S. demining programs. We would require a 3-year plan. The report would also include a budget plan for the following 3 years, with recommendations for development of better technologies than exist today.

Currently, landmine funding is largely on an annual basis. This bill does not appropriate any funding but does provide the necessary flexibility to utilize those funds available for humanitarian demining efforts. This bill would make humanitarian demining appropriations "no year" money which is particularly important since most demining projects are multi-year efforts.

Most significantly, this legislation responds to the growing nationwide consensus on the landmine issue. Thanks especially to the tremendous efforts and able leadership of Senator PATRICK LEAHY and our colleague, Representative LANE EVANS, the landmine menace has been under attack here on the Hill; and

this issue is now attracting the Nation's attention. We must keep pressing this growing problem of landmines.

How many years will it be before landmine clearance even equals the number of new landmines? The world may be many decades away from achieving this break-even point. We must speed that day along, so that we may measure it in years and not decades. Momentum is with us on this issue. Much has been done. More needs doing.

I urge you to join me and our colleague from Maryland to help protect the innocent children, the mothers and other unsuspecting civilians, and the peacekeepers in Bosnia and around the globe, by joining with us to move this important bipartisan legislation through Congress as soon as possible to combat the landmine plague. Thank you, Mr. Speaker.

MEDICARE

HON. LEE H. HAMILTON

OF INDIANA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 26, 1996

Mr. HAMILTON. Mr. Speaker, I would like to insert my Washington Report for Wednesday, June 26, 1996, into the CONGRESSIONAL RECORD.

MEDICARE: PROVIDING SECURITY FOR SENIORS

Medicare is a fundamental security net for older Americans that has contributed enormously to the well-being and quality of life for seniors. It is the major source of health care for 38 million older Americans, covering the vast majority of their physician and hospital services. Medicare has its faults, but it has dramatically improved the health care and the longevity of older people in this country. As one older person said to me, "I cannot live without Medicare." There is no question that it must be preserved and protected.

The Medicare system faces financing problems, but it is not in jeopardy of extinction. Medicare will continue to be available for seniors and future retirees despite some of the frightening rhetoric we have heard of late. The issue of Medicare's financing is complex and confusing for many Americans. Seniors already in the system and those planning for retirement are understandably wary.

Medicare is facing short-term financing problems because people are living longer (the number of people over 65 today is some 65% greater than it was in 1970), medical technology continues to explode, and the cost of medical care continues to rise. These cause financing problems that need to be dealt with in order to shore up the system for the near-term. The more difficult issue is the longer-term financing problem caused by the impending baby boomer retirements. As more and more people retire, fewer are left in the workplace to help finance Medicare. There is no easy solution, but there are ways to fix this problem. In the past, Congress has acted to extend the program's solvency, and we will do so again. We must work to find solutions which ensure Medicare's solvency and maintain quality health care for seniors.

MEDICARE'S FINANCING

There are two basic parts of the Medicare system which help seniors meet their health care costs: the Hospital Insurance (HI) trust fund and the Supplementary Medical Insurance (SMI) trust fund. HI, which covers hospitalization costs, is financed through a payroll tax of 2.9% on wages, half paid by em-

ployers and half by employees. SMI, which covers physician and outpatient services, is financed by general tax revenues and monthly premiums paid by beneficiaries. Beneficiary premiums make up about 25% of SMI's costs.

The Medicare trustees recently issued their annual report on the financial status of the HI and SMI trust funds. Even though the trustees have issued ominous projections almost every year since 1970, the latest HI projections were particularly troubling. According to the trustees, the HI trust fund is projected to be insolvent in 2001, a year earlier than expected. The problem is that the payroll tax, which finances the fund, is not sufficient to cover the ever-increasing cost of health care and the increasing number of Medicare recipients—factors which will only continue to strain the system unless changes are made. Unlike HI, SMI is not in danger of bankruptcy, but inflation and an aging society have led to rapidly rising costs. Costs will continue to rise as health care costs in general continue to escalate.

SOLUTIONS

Over the past several years Congress and the President have taken action to extend Medicare's financing in the short-term and prevent bankruptcy of the fund. That has happened nine times in the past and we will certainly do so again. Neither Congress nor the President will allow Medicare to go bankrupt. Medicare is too big, too successful, and too popular for it to fail. Proposals to save Medicare have included curbs on increases in fees to providers, higher premiums and co-payments for better-off beneficiaries, an increase in the eligibility age, new taxes, a range of new options for obtaining health care, and containing costs through market forces. Each of these options, or some combination of them, will have to be considered in the future. The long-term solvency of Medicare will not be easy to resolve, but it must be done.

I have several thoughts about Medicare reform. First, we must preserve doctor choice. I do not want to force older people into managed care. If they want to choose their own doctor, they should have the right to do so. Second, whatever changes are made, we must assure that Medicare delivers good care. I do not want to reduce the quality of health care for older Americans. Third, we should not cut Medicare to provide for a big tax cut. We should separate the Medicare debate from the highly politicized and partisan budget process. We should reform Medicare on its own, and not use Medicare as a piggy bank for making tax cuts. Fourth, a wholesale restructuring of Medicare should be approached with caution. Such a major change would likely be ineffective unless coupled with a restructuring of the entire health care system to hold down escalating costs. It is better to make incremental changes in Medicare aimed at health promotion and disease prevention, increasing efficiency, and reducing fraud and abuse. But we do need to begin making adjustments. The sooner we start the gentler it will be.

A major accomplishment of the 104th Congress has been blocking the plan put forward by Speaker Newt Gingrich to cut back Medicare by \$270 billion. The problem with this plan was not that it squeezed too hard. Savings of that magnitude were estimated to be twice as much as needed to keep the program solvent. Excessive cutbacks could threaten the quality of care. While some cutbacks and some restructuring of Medicare will be necessary, \$270 billion in cut-backs was necessary not to help Medicare, but to help finance huge tax cuts targeted toward well-to-do Americans.