

Jong Il at Panmunjom or at a place to be agreed on after I become my party's presidential candidate. I am confident that we can reach a constructive agreement on an incremental but substantive modality of negotiations and progress towards "security and prosperity for all Koreans."

Because of geopolitics, Korea in the 20th century became a battlefield of power struggle and ideological conflict, but in the 21st century a unified Korea, because of the same geopolitical reason, is expected to play the role of a balancer in power relationship and an important contributor to regional cooperation and world peace.

Next I want to discuss the environmental issues. I have always had a special interest in environment. It seems to me many governments still do not deal with environmental protection as an urgent priority issue. I am particularly concerned about the deteriorating state of environment in North-east Asia. Unless we do something more about it, it will only become worse.

This remarkable economic growth of South Korea, the failure of North Korea's socialist economic system, the rapid industrialization and a huge amount of energy consumption by China all are the culprits contributing to the pollution of environment in East Asia. To discuss these common problems, I am planning to hold a conference to which North Korea, China, Japan, Mongolia, Taiwan, and Russia will also be invited. In this conjunction, I also propose that an Asian environmental summit be held to find better ways to promote cooperation on environmental issues.

Finally, I would like to discuss my views on how we can develop a healthier relationship between the United States and Korea. There is no doubt that many Koreans remain appreciative of many constructive roles that the United States has played in the security and economic growth of their country in modern history. The people of Korea, along with those of the international community, believe that the United States, the only remaining superpower in this post-Cold War era, should play a leading role in the establishment of a new world order based upon a principle of mutual reciprocity.

At the same time, we want to see U.S. policy for Korea become more supportive of Korean unification. It should not in anyway contribute to the perpetuation of the divided Korea.

For the bilateral economic relations, I support Korea's market opening, but I oppose unfair pressure from the United States on the process of market opening.

Before I conclude, I want to say again, "an era of confrontation and conflict is gone." In the new era of political negotiation and democratic compromise, the old political strategy of "all or nothing" will not work. I would not be shy to say that I am the one who can lead Korea towards a better nation in the next century, with a kind of new leadership of vision, open-mindedness, balance and creativity.

I want to create a new political culture of dialogue, through which the nation can build a non-partisan consensus on important national issues. I will pursue a democratic compromise rather than trying to impose a unilateral view of one party or one group on the people.

I also want to mention that Korea's political achievement owes a lot to many supporters from several countries, and particularly from America. I want to lead Korea, and under my leadership, Korea will pay back its debts to many friends of democracy and human rights.

Thank you very much.

CONGRATULATING THE MIDWAY, TX, ALL-STARS BOYS BASEBALL TEAM FOR WINNING THE STATE CHAMPIONSHIP

HON. CHET EDWARDS

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 11, 1996

Mr. EDWARDS. Mr. Speaker, today I congratulate the Midway, TX, 10-year-old All-Stars Boys Baseball Team for an unbelievable comeback on the road to clinching the Texas State Championship.

The 12 young men on this team showed a winning attitude in late July when they were one game away from elimination in the Texas State tournament. The All-Stars lost the first game of the championship and were faced with a difficult situation: win every single game or be eliminated from the tournament.

The Midway All-Stars rose to the challenge. The team battled back to win four straight games, one of which went into extra innings. In the final championship game, the Midway All-Stars won 3-1 to bring home the State championship.

Everyone of these young men showed a can-do, never quit attitude. Even when they were faced with a nearly impossible situation, they showed pride, diligence, and dedication. They played as a team and won as a team.

Members of this championship squad include Tyler Andersen, Scott Boyd, Brady Conine, Craig Cunningham, Stephen Davis, Charlie Hicks, Jake Lee, Alberto Lopez, Ryan Lormand, Brandon Maddux, Jake Reichenstein, and Matt Reinke.

Thanks also go the Manager Brad Davis and Coach Butch Maddux for their work leading these young men.

I ask members to join me in congratulating this championship team and their coaches for this outstanding athletic accomplishment.

MERCY HEALTHCARE CELEBRATES 100 YEARS OF SERVICE

HON. ROBERT T. MATSUI

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 11, 1996

Mr. MATSUI. Mr. Speaker, I rise today to recognize one of northern California's greatest medical resources, Mercy Healthcare, on the occasion of its 100th year of hospital service to this area.

The Sisters of Mercy began making their mark on this area some 140 years ago when they traveled from San Francisco to Sacramento, then an emerging Gold Rush town. Once here, they compassionately administered to the poor and the orphaned, offering basic necessities such as food, clothing and shelter.

Recognizing a greater need for health care, the Sisters quickly embarked on an endeavor to build an institution which would care for the medical needs of the people of Sacramento. Their dream was realized in 1896, when they opened the city's first private hospital.

In 1897, shortly after they opened Mater Misericordiae Hospital, the Sisters started a training school for nurses. Over the next half century, the Mercy College of Nursing would

train more than 600 nurses, including many young women who traveled overseas to care for the injured and dying victims of both World Wars.

Less than 30 years after it opened, the hospital was closed and a new, more modern one took its place. The new hospital opened to the public on February 11, 1925. For the next 42 years, it would serve as the Sisters' only Sacramento area hospital, and the focal point for their evolving healthcare ministry.

Throughout this period, Mercy General would provide many firsts in the local medical community. In 1953, the hospital campus celebrated the opening of Sacramento Valley's first hospital dedicated solely to the care of children, the 40-bed Mercy Children's Hospital. A year later, the hospital dedicated the J.L.R. Marsh Memorial Wing to care for children crippled during the polio epidemic, as well as adults injured in industrial accidents. In 1959, the hospital opened Sacramento's first intensive care unit; in 1964, Mercy installed one of the west coast's first electronic data processing systems for accounting; and in 1968, they dedicated a special unit to provide care for heart patients. Today, Mercy General's tradition of quality continues, hosting one of the Nation's best cardiac surgery programs and a renowned stroke program.

As the region's healthcare needs changed and grew over the years, the Sisters were always poised to respond. Since the opening of their first hospital, Mercy has expanded its service to a number of communities in northern California. In addition to Mercy Healthcare Sacramento, there are now hospitals in Redding, Folsom, and Carmichael. In addition, the Sisters spread their health ministry south in 1993 with an affiliation between Methodist Hospital and Mercy Healthcare Sacramento, the organization that today carries out the Sisters' health ministry. Another affiliation between Mercy and Sierra Nevada Memorial Hospital in Grass Valley was completed in 1995.

Guided by the Sisters' values and compassion for serving those in need, Mercy Healthcare Sacramento is preparing to enter its second century of health ministry to the people of northern California. Mr. Speaker, I ask my colleagues to join me in saluting the tremendous service the Sisters of Mercy have provided this region during the past century, and in wishing them many years of continued growth and success.

UNITED STATES ARMED FORCES PROTECTION ACT OF 1996

SPEECH OF

HON. GLENN POSHARD

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Thursday, September 5, 1996

The House in Committee of the Whole House on the State of the Union had under consideration the bill (H.R. 3308) to amend title 10, United States Code, to limit the placement of United States forces under United Nations operational or tactical control, and for other purposes:

Mr. POSHARD. Mr. Chairman, I rise today in support of H.R. 3308, the U.S. Armed Forces Protection Act. The American people

have made it clear that they want any American role in United Nations peacekeeping missions to be well structured and in the best interests of our country, with the safety of our troops being at the forefront of these considerations. I believe that this legislation goes a long way toward ensuring this by demarcating and preserving the role of Congress in the process of placing American troops in such situations. The intent of this measure is to be absolutely certain that when U.S. troops are involved in U.N. peacekeeping operations that they will be serving under American leadership. Further, the process by which the President will outline such missions to Congress can only aid the planning and support mechanisms critical for success. In my view, H.R. 3308 is not about restricting the actions of any President, but about making sure that the executive and legislative branches are on the same page when U.S. troops take part in actions sponsored by the United Nations.

I have supported provisions of this legislation when they have appeared in other bills, notably H.R. 1530 and H.R. 2540. The spirit of the latter is included in H.R. 3308 via the Bartlett, Chenoweth, and Traficant amendment and prohibits the wearing of the U.N. insignia by U.S. troops without the authorization of Congress. This should prevent future unfortunate incidents such as the events surrounding the dismissal of Michael New.

Mr. Chairman, in closing, I would like to emphasize that my vote today should not be construed as one against the United Nations, as I firmly believe that this body has a role to play in international relations. As evidenced in the Gulf War, the U.N. can be an effective coordinating device for the international community during times of crisis, thereby promoting the interests of the United States at a reduced cost from acting unilaterally. Also, the United Nations provides invaluable leadership on such issues as world hunger, which have historically been embraced by the U.S. populace. Rather, my vote is for the men and women that serve their country bravely as part of the U.S. Armed Forces. I urge my colleagues to support H.R. 3308, and I appreciate the opportunity to share my thoughts on this matter.

REPORT FROM INDIANA—DALE
ANDERSON

HON. DAVID M. MCINTOSH

OF INDIANA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 11, 1996

Mr. MCINTOSH. Mr. Speaker, I'd like to include in the RECORD a very special letter that a constituent sent to me.

The letter was sent by Dale Anderson from Shelbyville, IN. Mr. Anderson wrote about the memory of his late wife, Carla Anderson. He describes Carla's hope of a bright future for our country.

And I would like to share his letter for our friends and colleagues.

Hon. NEWT GINGRICH,
Speaker of the House, House of Representatives,
Washington, DC.

DEAR MR. GINGRICH: I am writing this letter in memory of my wife, Carla. Unfortunately, she passed away on November 15, 1995. She was one of your greatest supporters and in favor of all your legislative agenda.

It was her hope and dream to see this country given back to the people, to protect our

children and grandchildren from the grips of the liberal party of this nation. If everyone was as strong in their conviction to be a conservative Republican as she was, our country would be in better shape today. She wouldn't want the conservative lawmakers to back down on any of their legislative agenda or your contract with America.

We were on a \$900.00-a-month Social Security.

She has your picture hanging above our telephone in the dining room and she was very proud of it. If all the Republicans in this country were as strong in their convictions to get this nation back on its feet as she was, you'd have no trouble passing your legislative agenda.

It would be a great honor to her if you would read this letter on the house floor with all members present. We live in the Second Congressional District of Indiana with the Honorable David McIntosh serving as our representative.

KASSEBAUM-KENNEDY PORTABIL-
ITY FOR MEDIGAP INSURANCE

HON. NANCY L. JOHNSON

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 11, 1996

Mrs. JOHNSON of Connecticut. Mr. Speaker, a few weeks ago, the Congress passed and President Clinton signed into law Federal guarantees that workers with health insurance cannot be denied coverage when changing or leaving jobs because of a preexisting condition. This is an important first step to improving access to health care for those who play by the rules and pay their premiums.

We owe the same guarantees to our senior and disabled constituents, and so today we are introducing a targeted portability bill for Medigap insurance.

People on Medicare who have a Medigap plan, or are in an HMO or Medicare Select plan should be able to purchase the same level of coverage without regard to a preexisting condition when they move out of the service area or if the insurer goes out of business.

Seniors and the disabled who want to try a managed care plan or a Medicare Select policy should have the peace of mind that they can return to their Medigap plan if they change their mind during the first year of their enrollment and have not tried these choices before.

As employers grapple with rising health care costs, their valued retirees should not be left out in the cold if their health plan coverage is terminated.

And very importantly, disabled individuals around the country should have the access to all Medigap choices that Medicare enrollees who are fortunate enough to live in Connecticut have, where we were smart enough to guarantee this access.

Proposals have been made to do more—just as have been made for health insurance reform.

My colleagues in the House and Senate who join me today in this initiative began this process with me last year when Senator CHAFEE and I helped make available nationwide the Medicare Select option which helps seniors save money on their Medigap insurance by using a network of participating providers. During that debate, worthwhile proposals to improve Medigap equity were made,

and I am pleased that this bill moves this debate forward.

Like Kassebaum-Kennedy, our Medigap portability proposal is a first step to create fairness for people on Medicare who play by the rules to cover the costs Medicare does not.

H.R. 4047

MEDIGAP AMENDMENTS OF 1996

Insurers must guarantee issue Medigap insurance—with no preexisting condition limitations—to Medicare beneficiaries provided:

They have had continuous coverage (no break in coverage longer than 2 months/63 days); and

The policy in which they wish to enroll has a comparable or less generous benefits package.

This portability protection would apply to the following Medicare beneficiaries:

Individuals enrolled in a Medicare HMO or Medicare Select plan and who move outside the plan service area, or if the plan goes out of business or withdraws from the market;

Individuals with Medigap policies who move to a state where their carrier is not licensed to do business, or whose carrier withdraws from the market;

Individuals with retiree health plans providing benefits supplemental to Medicare and whose employer terminates or substantially reduces plan benefits; and

Individuals enrolled in a Medicare HMO or Medicare Select plan who, during their first 12 months of enrollment in either plan type, choose to return to Medicare fee-for-service. In these situations, the following may apply:

Medicare beneficiaries will have a one-time option to try both a Medicare HMO and a Medicare Select plan.

Individuals electing HMO or Select coverage when first eligible for full Medicare benefits have up to 12 months to change their minds. During the first 6 months of their Medicare eligibility, they retain their current law ability to enroll in any Medigap plan without regard to preexisting conditions. Between 7 and 12 months, they will be able to obtain coverage comparable to the benefits offered by the plan in which they have been enrolled.

Individuals with coverage from a Medicare HMO or retiree health plan often have supplemental benefits which do not neatly fit one of the standard Medigap "A through J" policy definitions. In these cases, the state insurance commissioner will evaluate the plan to determine the most equivalent Medigap policy into which the individual could transfer.

Insurers may impose no preexisting condition limitation during the initial six-month enrollment period after a beneficiary first becomes eligible for Medicare.

All Medigap plan choices will be guaranteed for the Medicare disabled. Anyone will be able to enroll in a Medigap plan of their choosing without discrimination during the first six months of their eligibility for Medicare benefits, regardless of age. Current Medicare disabled beneficiaries will have a one-time open enrollment period to guarantee their access to all Medigap plan options.

Private organizations will be able to prepare consumer education and information materials through HHS grants funded by an assessment on Medigap insurers and managed care organizations. Information would be made available to Medicare beneficiaries and their families about the Medicare HMOs, Medicare Select policies, and Medigap insurance offered in their areas. Materials would include a comparison of benefits, cost, quality, and performance and the results of consumer satisfaction surveys of each plan.