

Thrift Savings Plan available to Government employees. These choices include investment options which promise higher rates of return than can be earned by the government bonds held in the Social Security Trust Fund. The investment decisions among the fund options are to be made by the parent or guardian until the account holder reaches the age of majority when he or she is able to make such decisions. The account holder, or his or her parent, can add to the principal of the account, up to \$2,000 per year tax free, but even if that never happens the \$1,000, if invested in a stock index fund, can be expected to grow to \$651,683 by the time the account holder is ready for retirement.

It is not a sound financial practice for the Government to sell its assets and use the funds to pay for its current operating costs, as it does now. If we are going to be selling assets anyway we should be reinvesting the funds in something which will pay a return. My bill will accomplish that goal and put more money into the retirement system at the same time. This bill does not replace the Social Security system; it provides more funds for it. The funds in the account are to pay for Social Security benefits for the account holder first, and only if the account is depleted can the account holder draw on the Social Security Trust Fund. If, due to individuals adding to the account, there is more in the account than necessary to pay for Social Security benefits, the account holder will have several lump sum or annuity options for withdrawing the extra funds.

Future workers will not have to worry so much whether or not the Government will keep its promises or that the Social Security system might go bankrupt because each will have an account which is his or her personal property. I don't claim that this program will solve all the financial problems of Social Security but it will certainly help.

ANTITRUST HEALTH CARE ADVANCEMENT ACT OF 1996

HON. ELIOT L. ENGEL

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Friday, September 27, 1996

Mr. ENGEL. Mr. Speaker, I rise in support of H.R. 2925, the Antitrust Health Care Advancement Act of 1996, which would ensure that the antitrust laws permit full utilization of private cooperative initiatives and help make the Nation's health care system more efficient. H.R. 2925 provides that when doctors, nurses, and hospitals form integrated joint ventures to offer health care services, their conduct will be reviewed on the basis of its reasonableness—the rule of reason test—for compliance under antitrust laws. The measure would provide more choices for consumers while allowing for greater competition in the marketplace.

Health care provider networks [HCPN's] comprised of doctors, hospitals and other entities which provide health care services—can produce increased competition for health care services. Their formation can lead to lower costs while providing a high quality of care. Physicians and other health care professionals are more than qualified to strike the proper balance between conserving costs and meeting the needs of the patient.

Current antitrust laws, however, hinder the formation of HCPN's by prohibiting them to engage in joint pricing agreements. H.R. 2925 would eliminate this obstacle by conforming agency enforcement practices to the manner in which courts have interpreted the law.

Antitrust law states that agreements among competitors that fix prices or allocate markets are per se illegal. Where competitors unite in a joint venture, however, agreements or prices or other terms of competition are not generally unlawful. Price setting conduct by these joint ventures should be evaluated under the rule of reason, that is, on the basis of reasonableness, by considering all relevant factors that may affect competition.

H.R. 2925 addresses these concerns by applying the rule of reason test to HCPN's. Enactment of this measure would lead to increased competition, greater choice of services, and the delivery of quality health care at a lower price.

While I urge the House to consider H.R. 2925 before the end of the session, I am encouraged by new guidelines recently released by the Department of Justice which state that the rule of reason test will now be applied to HCPN's. While I would still like to see H.R. 2925 enacted into law, I believe that the new guidelines are a major step towards the recognition of HCPN's as viable entities in the health care field and I commend the Justice Department for its decision.

SOUTHWESTERN PENNSYLVANIA MANUFACTURERS WEEK

HON. RON KLING

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Friday, September 27, 1996

Mr. KLING. Mr. Speaker, I rise today to share with my colleagues that the week of October 6–12, 1996 has been designated Southwestern Pennsylvania Manufacturers Week.

Manufacturing is vital to the economy of southwestern Pennsylvania. This field employs more than 125,000 people in the counties of Allegheny, Beaver, Butler, Washington, and Westmoreland. Local manufacturers finance an annual payroll of nearly \$5 billion, the highest of all employment sectors. In southwestern Pennsylvania, the average wage for a manufacturing job is 40 percent higher than the average wage for all employees in the region.

Manufacturing provides one of every seven jobs for workers in southwestern Pennsylvania, outranking health care, construction, financial services, education, transportation, and government, in total employment. The local manufacturing payroll is crucial to the economy of our area, yielding a greater total economic impact than any other endeavor. Indeed, local manufacturers contribute nearly \$200 million in local, county, and State taxes, to help support our communities and schools in southwestern Pennsylvania.

Our manufacturers continue to uphold the proud industrial heritage of our region, and perform with a work ethic that is second to none productivity and quality. The wide range of goods produced in our region is distributed and used around the world.

The advanced manufacturing network of the Pittsburgh High Technology Council, in partnership with the Southwestern Pennsylvania

Industrial Resource Center is committed to supporting the needs of manufacturers throughout the region.

It is a pleasure and an honor to recognize the contributions of local manufacturers in southwestern Pennsylvania.

HONORING OCTOBER AS CO-OP MONTH

HON. VIC FAZIO

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Friday, September 27, 1996

Mr. FAZIO of California. Mr. Speaker, in the United States, cooperatives celebrate their activities and honor their history every year during October, Coop Month. Today over 40,000 cooperatives and credit unions serve nearly 100 million Americans in almost every community in our nation.

On October 24, 1844, 28 weavers incorporated the Rochdale Society of Equitable Pioneers to start their humble cooperative in Rochdale, England. The principles and practices they formulated ensured the success of the cooperative ideal. The results of their efforts gave rise to the modern cooperative movement which in 1996 counts over 750 million members.

The nearly 30 cooperatives and credit unions in Davis, CA are an important part of the daily lives of its citizens. A number of those cooperatives are unique models of "people helping people" acclaimed throughout the U.S.A. Cooperatives in Davis provide service to children in child-care cooperatives, through students in student housing cooperatives, to seniors in housing cooperatives.

The efforts of the Center for Cooperatives at the University of California at Davis has helped find new opportunities for cooperative development in rural northern California. The center's activities bring together leaders of our rural communities to offer solutions which address unemployment, recycling and sustainable and environmental economic development.

On behalf of the Congress of the United States, I would like to join the citizens of Davis in recognizing and celebrating Co-op Month.

TRIBUTE TO TWA FLIGHT 800 CRASH INVESTIGATION AND RECOVERY OPERATION PERSONNEL

HON. FLOYD SPENCE

OF SOUTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Friday, September 27, 1996

Mr. SPENCE. Mr. Speaker, July 17, 1996, will forever be remembered as a tragic date in American history—a day in which 230 people were killed when TWA Flight 800 exploded over Long Island, NY, and plummeted into the deep water offshore.

Today, I rise to honor the men and women of the Navy, Coast Guard, and National Transportation Safety Board [NTSB] who, throughout the past 2 months, have dedicated their lives daily to recovering the victims of the crash and investigating the cause of the explosion.

First, I would like to express my gratitude to the U.S. Navy personnel working at the crash

site who have been responsible for all underwater recovery operations. In particular, I wish to commend the Navy's divers for their heroic work in some of the most difficult working conditions imaginable. Despite working at depths of over 100 feet, in water in which visibility is measured in inches instead of feet, these Navy divers have logged some 1,300 hours—the equivalent of 54 straight days—searching a 25 square mile patch of ocean floor. These divers are directly responsible for the recovery of nearly half of the victims as well as for the majority of the wreckage salvaged thus far.

I would also like to commend the men and women of the Coast Guard who were involved in the search, rescue, and recovery operation immediately following the crash. Specifically, I wish to recognize those workers who arrived at the crash site within minutes of the explosion to begin searching for survivors. Working tirelessly, Coast Guard personnel recovered victims and pieces of the aircraft throughout the night and the following days. In subsequent weeks, Coast Guard workers have conducted surface recovery operations, centralized search planning, as well as regional environmental operations. In the 2 months since the Flight 800 explosion, the Coast Guard has searched over 3,100 square miles of the ocean's surface, recovering more than half of the victims from the water in the process.

Finally, I would like to recognize the NTSB for its candor, honesty, and tenacity in conducting the investigation effort. The men and women of the NTSB have done an admirable job of keeping the victims' families and the American public well informed of the status of the recovery effort and crash investigation.

Mr. Speaker, I know my colleagues will join me in extending a heartfelt thanks to these exemplary men and women for the time and effort they have selflessly dedicated to the recovery effort. I commend them for a job well done.

As a final note, I would like to recognize Mr. Henry Allen, who correctly pointed out to me that Congress has not yet credited the Navy, Coast Guard, and NTSB personnel working in this investigation for their work. Mr. Allen lost his son and grandson in the TWA crash, but his unselfish and caring character allowed him to ask me to recognize the hard work and dedication of these personnel even in his time of need. I'm proud to serve men like Mr. Allen, and my thoughts, prayers, and condolences are with him and his family.

NATIONAL INVASIVE SPECIES ACT OF 1996

SPEECH OF

HON. ROBERT A. UNDERWOOD

OF GUAM

IN THE HOUSE OF REPRESENTATIVES

Tuesday, September 24, 1996

Mr. UNDERWOOD. Mr. Speaker, I rise in favor of H.R. 3217, the National Invasive Species Act of 1996. This bill would reauthorize funds for the Brown Tree Snake Control Program which seeks to reduce the adverse effects of the nonindigenous brown tree snake to Guam as well as prevent the spread of the species to other outlying areas.

Brown tree snakes have long been identified as the cause of Guam's diminishing bird population and the extinction of some of the is-

land's native species. Due to the lack of natural predators and to the ideal environment Guam provides for the propagation of the snakes, the brown tree snake has continually wreaked havoc on Guam's wildlife. If this present trend continues, we can soon expect the extinction of more of Guam's native birds and the introduction of this pest to snakeless areas such as Hawaii.

Controlling the snake population on Guam is the best approach towards wildlife preservation. In a misguided attempt to save Guam's birds, the U.S. Fish and Wildlife Service has imposed a wildlife refuge in the hopes that such a refuge would reverse the trend of a diminishing bird population. This notion is flawed at best. We know for a fact that the nonindigenous brown tree snakes must be taken out of the habitat in order for birds to thrive. Guam supports saving its endangered species but this must be done through the U.S. Fish and Wildlife Service controlling the brown tree snake population and not by them acquiring more land. After all, a wildlife refuge would only serve to gather the island's remaining bird species in an area that could easily be overrun by the brown tree snake. In a couple of years, this proposed bird sanctuary would surely be nothing more than a snakepit taken right out of an Indiana Jones movie.

The funds reauthorized by H.R. 3217 offer an alternative that imposes the least burden on Guam's limited resources and gives Guam's birds the best chance at survival. Providing for the development of programs to control the snake population also spares Guam's neighbors from the devastation brought about by the brown tree snake. Let us not allow harmful nonindigenous species to take over our fragile ecosystems. I urge my colleagues to support H.R. 3217.

LACK OF HEALTH INSURANCE— HIGHER DEATH RATE

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Friday, September 27, 1996

Mr. STARK. Mr. Speaker, health insurance for everyone isn't just a nice idea, it is a matter of life and death. The data is clear. In 1982, the State of California terminated Medi-Cal benefits for the State's 270,000 medically indigent adults. Some 186 of these adults were then enrolled in a study to examine the effects of this action on the health of these individuals. A comparison group was also established. Within 6 months of termination of health coverage, five individuals died compared to zero deaths for the comparison group. After 1 year of the study, seven individuals from the group whose Medi-Cal benefits had been terminated had died compared to one death in the comparison group.

Investigation of the circumstances of death suggest that lack of access to care played a part in at least four of the deaths in the medically indigent group. At least four deaths that could have been prevented if these individuals had health insurance. And now this Congress is preparing to adjourn without having adequately addressed one of the greatest problems facing our Nation: the lack of health insurance for everyone. How many more people will have to die before we decide to commit ourselves to this problem and find a solution?

Another study used data from 17 hospitals to examine outcomes for patients admitted with pneumonia. Self-pay patients were six times more likely to die with in the hospital compared to those with insurance. A national study determined that the probability of an in-hospital death for uninsured patients was 1.08 to 1.32 times higher than for privately insured patients in 15 of 16 age-sex-rate cohorts.

In another study, a representative cohort of the U.S. population was followed for up to 16 years. The study hypothesis in this case was that a lack of health insurance is causally related to a higher mortality rate, because of decreased access and lower quality of care. Not only is this hypothesis in accordance with the results of previous studies, but it also agrees with the conclusions of our own former Office of Technology Assessment in a report issued in 1992.

Furthermore, the study found that lacking insurance is associated with subsequent higher mortality independent of our risk factors.

INDEPENDENT OF OTHER RISK FACTORS

In one of the same studies mentioned above, fully 68 percent of the study's participants in the medically indigent group reported a specific episode in which they had not obtained care that they believed they needed; of those patients, 78 percent listed the cost as a reason for not obtaining care. We cannot let this problem escalate into a national tragedy of even greater proportions.

The numbers are alarming. The evidence is clear. As members of a civilized society, I would hope that the next Congress has the courage to deal with this issue.

For those who share my concerns, I invite you to reference the following sources:

(1) Lurie, N., Ward, N.B., Shapiro, M.F., Brook, R.H., "Termination from Medi-Cal: does it affect health?" *N Engl J Med.* 1984; 311: 480-484.

(2) Lurie, N., Ward, N.B., Shapiro, M.F., Gallego, C., Vaghaiwalla, R., Brook, R.H., "Termination of medical benefits: a follow-up study one year later." *N Engl J Med.* 1986; 314: 1266-1268.

(3) Weissman, J.S., Epstein, A.M., "Falling Through the Safety Net: The Impact of Insurance on Access to Care." Baltimore, Md: Johns Hopkins University Press; 1994.

(4) Franks, P., Clancy, C.M., Gold, M.R., "Health insurance and mortality: evidence from a national cohort," *JAMA.* 1993; 270: 737-741.

OLYMPIC GOLD MEDALIST CHRYSTE GAINES IS HONORED

HON. EDDIE BERNICE JOHNSON

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Friday, September 27, 1996

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Speaker, I rise to give recognition to a Dallas unsung heroine, Chryste Gaines, a 1996 Olympic Gold Medalist. Ms. Gaines propelled the team to its victory as the first leg of the 4100 women's relay.

Chryste Gaines' fruitful track career began as she set many personal and team records in the State of Texas. She has also received a gold medal at both the world championships 4100 relay and at the Pan Am games in the 100-meter dash. In addition, she has brought