

forced upon the U.S. military that it had to kick out valuable experienced, trained U.S. military personnel if and when they were diagnosed as being HIV-positive.

Upon signing the DOD bill for fiscal year 1996, President Clinton instructed the military that it would be the policy of his administration to not enforce that provision. A bipartisan omnibus appropriations conference committee supported President Clinton's position by including a provision to override the discharge mandate. The current DOD authorization bill for fiscal year 1997 has a rerun of the radically conservative, homophobic and punitive measure that is really only designed to further harass persons because of their sexual orientation. It has been widely publicized that the 1,000 plus active military personnel currently known to be HIV-positive reflect a broad cross-section of American life. There are married men and women, single men and women, gays and straights, mothers and fathers among the HIV-positive currently serving in our military, just like there are all across our great land.

The Americans with Disabilities Act [ADA] passed by Congress and implemented into helpful law all across America, prohibits discrimination against and provides for accommodation for persons who are HIV-positive among the many listed disabilities. Our dedicated military personnel deserve the same fair and culturally competent support as any other person afflicted with a physical or medical disability. Logical persons understand that a person can be HIV-positive for 20 or more years without developing AIDS or any further symptom or manifestation of HIV/AIDS. Reasonable persons have learned that HIV is a sexually transmitted disease that cannot be contracted by simple human contact.

In supporting this Torkildsen/Harman amendment, my colleagues are in good company. Let me just list a few of the people and organizations my colleagues have advised us are in support of this amendment: The American Medical Association [AMA]; the Air Force Association; the Veterans of Foreign Wars [VFW]; Disabled American Veterans [DAV]; the Human Rights Campaign; former Senator and former Senate Armed Services Committee chairman Barry Goldwater; Secretary of Defense William Perry; Secretary of Veterans Affairs Jesse Brown; and Gen. John Shalikashvili, Chairman of the Joint Chiefs.

I urge my colleagues to support the Torkildsen/Harman amendment that eliminates the current bill language requiring that military personnel who are HIV-positive be discharged from the service, and to support fairness for all U.S. citizens, including our dedicated military service members.

RECOGNIZING JAMES R. NUNES

HON. BILL BAKER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 15, 1996

Mr. BAKER of California. Mr. Speaker, for more than three decades, James R. Nunes has served as an officer of the law. Since 1979, he has been chief of the Pleasant Hill, CA Police Department in my home district. Now, after 37 years of service as a police officer, first with the military and then with three different cities, he is retiring from the force.

Throughout his career, Chief Nunes has worked to make our streets safer, our communities stronger, and our children's future brighter. He knows the meaning of long nights, hard work, and personal sacrifice. His many community activities further reflect his commitment to the citizens of the East Bay community, and are indicative of his devotion to the building of a better society.

It is my sincere hope that Chief Nunes will enjoy a well-deserved retirement from the force. His contributions have been both formidable and enduring, and I know all of my colleagues will join me in wishing him every good thing in the days ahead.

TRIBUTE TO BOB SLIVOVSKY AND KENNY WILLIAMS

HON. WILLIAM O. LIPINSKI

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 15, 1996

Mr. LIPINSKI. Mr. Speaker, I wish to pay tribute to two outstanding individuals who have contributed greatly to athletic competition in my district and throughout the Chicago area—Mr. Bob "Slivers" Slivovsky and Mr. Kenny Williams—who were inducted into the Illinois Basketball Coaches Hall of Fame on April 27, 1996.

Slivers Slivovsky has devoted most of his life to athletics at Morton College in Cicero, IL, first as a member of the school's baseball team in the early 1950's, and for the last 24 years as equipment manager, a job title that does not even begin to describe his responsibilities. As Morton Athletic Director George Fejt said of his prized employee: He's our facility manager, sports information director, fundraising coordinator, and goodwill ambassador.

However, it may be Slivers work outside of the school that made the difference in receiving his recognition by the hall of fame as a friend of basketball. For years, he has run and organized the Henry Vais Basketball Tournament at Morton, a two tiered competition for local grade-school players of differing skill levels that is recognized as one of the best tournaments of its kind.

The tournament is his pride and joy—no team is eliminated and the kids enjoy themselves. It provides kids with an opportunity to play and not worry about the wins and the losses, as Slivers describes it.

THE FEDERAL HEALTH PROGRAM BENEFIT CHANGE ACCOUNTABILITY ACT

HON. BENJAMIN L. CARDIN

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 15, 1996

Mr. CARDIN. Mr. Speaker, I rise today with a bipartisan group of Representatives to introduce the Federal Health Program Benefit Change Accountability Act. This legislation would prevent the Office of Personnel Management [OPM] from making significant changes to Federal retirees' health benefits without first reporting to Congress what those changes will entail, how costs to retirees will be impacted, and how quality will be assured.

This legislation comes in direct response to OPM's decision to allow Blue Cross/Blue Shield [BC/BS] to alter the prescription drug benefit of their standard benefit package for Federal retirees on Medicare. Prior to 1996, there was no cost-sharing for prescription drugs purchased at a network retail pharmacy or through the mail order pharmacy. Starting in January 1996, BC/BS began charging Federal retirees on Medicare a new 20 percent copayment for prescriptions purchased at their network retail pharmacies. The only way this new copayment can be avoided is to use the mail order pharmacy program offered by BC/BS.

Many of us heard from constituents who opposed this change. Most seniors live on fixed incomes and are sensitive to sudden increases in the cost of prescription drugs. They are also the segment of our population that uses the most medications. At the same time, seniors tend to have long standing relationships with their local pharmacists who provide important health care services to them. A local retail pharmacist is often willing to perform services such as color-coding their prescriptions, providing special caps for easy opening, and offering important face-to-face counseling. In addition to being health care providers, local pharmacies play an important local economic role. Sending prescriptions to mail order pharmacies takes dollars and jobs out of our communities. The bottom line is that this benefit change by BC/BS hurts both our constituents' health and our local economies.

More than 70 colleagues joined me in writing to OPM in December 1995 opposing this benefit change. We are still awaiting an important report from GAO that will detail the effect of various prescription drug policies on both enrollees and community pharmacies. We asked OPM to delay implementation of this benefit change until the GAO study was complete and until other cost-savings alternatives were investigated. That letter is attached at the end of this statement.

OPM did not agree with our concerns and went ahead with implementing the benefit change as scheduled. What happened then was nothing short of chaos. The mail order pharmacy company was not prepared for the tremendous increase in business resulting from the new 20 percent copayment at retail pharmacies. We received reports of doctors attempting to submit prescriptions being told that the fax machines had been unplugged and they were not accepting new prescriptions, enrollees were reporting delays of several weeks before obtaining their prescriptions, and there were problems with incomplete or incorrect orders. A constituent of mine in Baltimore stated that she had "literally spent one month on this phone with this company." She also said that when her order finally arrived, her bottle was seven pills short, and her husband's was shy two pills.

To OPM's credit, they immediately moved to correct these severe inadequacies of the program. They allowed a limited number of enrollees to temporarily obtain their drugs at their local pharmacies without the copayment penalty. While it does appear that these extreme problems have been corrected, the fact remains that there are still problems and inequities.

Mail order pharmacies are certainly an appropriate option to make available for enrollees. However, this new copayment structure

does not result in a real choice for seniors—it simply increases their out-of-pocket costs. Mail order pharmacies are not an appropriate source for acute drugs because of the length of time it takes to obtain a prescription. This new BC/BS policy imposes a new 20 percent copayment—which can be a significant cost—on enrollees needing acute prescriptions. For them, the mail order pharmacy is not a viable option to avoid this new costs. If the 20 percent copayment is a serious impediment, then the senior may use the mail order option anyway. Their health could be seriously impacted by that decision. In addition, people have been unable to obtain color-coding for their prescriptions—an important service for a frail senior taking a strong regimen of prescriptions.

I, along with several colleagues, have spent months looking into possible remedies to prevent OPM from making decisions on benefit changes in a vacuum as they do today. Our goal is to avoid any repeat performances of the problems we have seen this year. Our legislation is entitled "The Federal Health Program Benefit Change Accountability Act." It details the multiple problems resulting from OPM's decision to make this benefit change and would institute a new reporting process. OPM would be required to provide an annual report to Congress that would describe any significant changes for the upcoming year in Federal retiree health benefits. The report would also provide Congress with the details that were missing this past year. It would explain what cost savings expected to be achieved, how enrollees would be financially affected by the change, and how quality of care would be impacted. Congress would then have time to react if there were concerns with the change.

The bill has been endorsed by the National Association of Chain Drug Stores, the National Association of Retail Druggists, the National Council on Aging, and the National Council of Senior Citizens. The original cosponsors are: Representatives J.C. WATTS, HOYER, GILMAN, MORELLA, PICKETT, LAFALCE, CRAMER, POMEROY, BREWSTER, TIM JOHNSON, MORAN, MEEK, and EHRLICH. We urge our colleagues to join us in preventing OPM from making new benefits changes that negatively impact seniors' health and our local communities.

CONGRESS OF THE UNITED STATES,
Washington, DC, December 15, 1995.

JAMES B. KING,
Director, Office of Personnel Management,
Washington, DC.

DEAR MR. KING: We are writing to raise concerns about the implementation of a new 20 percent copayment for prescriptions filled in local retail pharmacies under the Blue Cross/Blue Shield Federal Employees Health Benefits Program.

As you know, beginning January 1, 1996, this change will make it more costly for almost one million Federal retirees with Medicare Part B coverage if they want to continue to obtain their prescriptions at their neighborhood pharmacy. The only way for Federal retirees to avoid the imposition of this new cost-sharing will be for them to leave their neighborhood pharmacy and send their prescriptions to an out-of-state mail order firm. The rationale for this change is that it is a cost-saving measure. While we commend efforts by BC/BS to lower costs for the Federal Government and their enrollees, we question whether these savings will be passed through to enrollees.

Two aspects of these efforts are abundantly clear to us. Last year, BC/BS's use of

a mail order operation diverted \$400 million from our districts in sales, revenues and jobs from the local pharmacies. If this new change becomes effective, an estimated \$600 million will leave our districts in 1996 and instead be invested in an out-of-state mail order firm. Many local pharmacies are small businesses that cannot afford a shift of their local business to out-of-state mail order firms. Second, Federal retirees, many of whom take multiple prescriptions that require face-to-face pharmacist counseling and close monitoring of prescription use, will lose the medical counseling of their local pharmacists when they switch to the mail order program due to financial constraints.

We have strong reservations about cost-saving solutions that place an economic penalty on the use of local pharmacies. There are alternative approaches that BC/BS could take to achieve cost-savings in the area of prescription drug use. One solution would be to implement a mandatory generic drug program. Another solution could be a reasonable copayment, such as one or two dollars, per prescription drug. Neither of these alternatives would disadvantage our neighborhood pharmacies which play important health care and economic roles in our communities.

You may be aware that the GAO has recently been asked to study the impact of BC/BS's FEHBP's prescription drug program policies on enrollees and community pharmacies. We believe that this is an important study and that the results should be known before this new policy is implemented. Therefore, we ask you to take action to postpone implementation of this change until the GAO study is complete and to consider alternative cost-saving approaches such as those mentioned in this letter.

Sincerely,
Benjamin L. Cardin and 68 Members of Congress.

TRIBUTE TO W.T. WOODSON HIGH SCHOOL CONCERT BAND OF FAIRFAX

HON. THOMAS M. DAVIS

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 15, 1996

Mr. DAVIS. Mr. Speaker, it gives me great pleasure to rise today and pay tribute to the W.T. Woodson Senior High School Concert Band of Fairfax, which will receive one of the most prestigious international awards for high school concert bands. On May 17, 1996, the W.T. Woodson Band will receive the John Philip Sousa Foundation's Sudler Flag of Honor, an award which recognizes high school concert bands that have demonstrated the highest standards of excellence in all respects of their activities. Under the direction of a very dedicated and talented music director, Mr. John Casagrande, it is one of only two bands from the entire United States and Canada to receive this coveted award this year.

Each year, the John Philip Sousa Foundation awards the Sudler Flag of Honor after conducting a rigorous selection process undertaken by a committee made up of nationally known band conductors. The Selection Committee chooses award recipients based on the following criteria: First, the band's music director has been incumbent in his or her own position for at least 7 consecutive years; second, the band has maintained a high standard of excellence in the concert area for several

years; third, the band has received a superior rating at State, regional, or national levels of competition; fourth, the band has performed at significant meetings at State, regional, and national levels; and fifth, a number of students in the band have participated in district and all-State honor bands or similar groups. There is no limit on the number of bands which can receive the Sudler Flag of Honor each year. So indeed, not only is it a remarkable accomplishment that the W.T. Woodson Band earned this honor, it is equally commendable that it is one of only two bands worthy of receiving the award in 1996.

Mr. Speaker, I know my colleagues will join me in applauding the hard work and commitment of Mr. Casagrande and this talented group of young musicians. I congratulate them on receiving this distinguished award and for making their parents, neighbors, and community proud of this exceptional achievement.

50TH ANNIVERSARY OF SACRED HEART CHURCH IN FEEDING HILLS, MA

HON. RICHARD E. NEAL

OF MASSACHUSETTS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 15, 1996

Mr. NEAL. Mr. Speaker, today I would like to recognize the Parish of Sacred Heart Church in Feeding Hills, MA which will be celebrating its 50th anniversary on Sunday, May 19, 1996. For the past half century, Sacred Heart Church has been an integral part of the Springfield Catholic Diocese and a mainstay in the town of Agawam. The church began as a small mission chapel for Mount Carmel Church in Springfield and was run by the Stigmatine Fathers. In 1946, Bishop Thomas M. O'Leary declared Sacred Heart a territorial parish in Feeding Hills to be run by the Stigmatine Order.

Sacred Heart had 175 families in its parish in 1946 but its chapel could only accommodate 125 people. The need for a new larger church was immanent and the parishioners immediately began working together to raise the necessary funds for the new construction. After more than ten years of hard work, the diligence of these parishioners was rewarded in 1959 when Bishop Christopher Weldon dedicated the new Sacred Heart Church. The expansion did not end with the new church, however, and in 1964 the men of the parish built the Sacred Heart Restaurant at the Big "E" in West Springfield and the Parish Center was dedicated in 1971. During this period, an athletic program was established for the young people of the parish and a parish library was added, complete with adult bible classes. The parish had certainly blossomed into a major center for community activity in the Feeding Hills area and was a source of tremendous pride for the citizens of Agawam.

Today the parish has grown to 2,065 families and has been transferred from the Stigmatine Order back to the Springfield Diocese. This tremendous growth and the parish's continued commitment to charitable organizations and community development have made Sacred Heart one of the true gems of the Second Congressional District. I would like to salute Rev. Kenneth Tatro, the Pastor of Sacred Heart; Pastoral Minister Sister Eileen Sullivan, SSJ; Deacon James Martone;