

The following-named officer for appointment to the grade of admiral in the U.S. Navy while assigned to a position of importance and responsibility under title 10 United States Code section 601:

*To be admiral*

Vice Adm. Archie R. Clemens, 000-00-0000

The following-named officer for appointment to the grade of vice admiral in the U.S. Navy while assigned to a position of importance and responsibility under title 10 United States Code, section 601:

*To be vice admiral*

Rear Adm. (selectee) Robert J. Natter, 000-00-0000

The following-named officer for appointment to the grade of vice admiral in the U.S. Navy while assigned to a position of importance and responsibility under title 10 United States Code, section 601:

*To be vice admiral*

Rear Adm. James B. Perkins III, 000-00-0000

The following-named officer for appointment to the grade of vice admiral in the U.S. Navy while assigned to a position of importance and responsibility under title 10 United States Code, section 601:

*To be vice admiral*

Rear Adm. Herbert A. Browne II, 000-00-0000

The following-named officers for promotion in the U.S. Navy Reserve to the grade indicated under title 10 United States Code, section 5912:

*To be rear admiral (lower half)*

Capt. John Nicholas Costas, 000-00-0000, U.S. Naval Reserve

Capt. Joseph Coleman Hare, 000-00-0000, U.S. Naval Reserve

Capt. Daniel Lawrence Kloeppel, 000-00-0000, U.S. Naval Reserve

Capt. Henry Francis White, Jr., 000-00-0000, U.S. Naval Reserve

*To be rear admiral (lower half)*

Capt. John Francis Brunelli, 000-00-0000, U.S. Naval Reserve

The following-named officer for appointment to the grade of admiral in the U.S. Navy while assigned to a position of importance and responsibility under title 10 United States Code, section 601, and title 42 United States Code section 7158:

*To be admiral*

Vice Adm. Frank L. Bowman, 000-00-0000

The following-named officer for reappointment to the grade of vice admiral in the U.S. Navy while assigned to a position of importance and responsibility under title 10, United States Code section 601:

*To be vice admiral*

Vice Adm. Arthur K. Cebrowski, 000-00-0000

The following-named officers for promotion in the U.S. Naval Reserve to the grade indicated under title 10, United States Code, section 5912:

*To be rear admiral (lower half)*

Capt. Vernon Paul Harrison, 000-00-0000, U.S. Naval Reserve

*To be rear admiral (lower half)*

Capt. Clifford Joseph Sturek, 000-00-0000, U.S. Naval Reserve

*To be rear admiral (lower half)*

Capt. Steven Robert Morgan, 000-00-0000, U.S. Naval Reserve

*To be rear admiral (lower half)*

Capt. Robert Charles Marlay, 000-00-0000, U.S. Naval Reserve

The following-named officer for appointment to the grade of admiral in the U.S. Navy while assigned to a position of importance and responsibility under title 10, United States Code, section 601:

*To be admiral*

Vice Adm. J. Paul Reason, 000-00-0000

The following-named officer for appointment to the grade of vice admiral in the United States Navy while assigned to a position of importance and responsibility under title 10 United States Code, section 601:

*To be vice admiral*

Rear Adm. (selectee) Patricia A. Tracey, 000-00-0000

The following-named officer for appointment to the grade of vice admiral in the U.S. Navy while assigned to a position of importance and responsibility under title 10 United States Code, section 601:

*To be vice admiral*

Rear Adm. (selectee) James O. Ellis, Jr., 000-00-0000

By Mr. ROTH, from the Committee on Finance:

Raymond W. Kelly, of New York, to be Under Secretary of the Treasury for Enforcement.

Marcia E. Miller, of Indiana, to be a member of the U.S. International Trade Commission for the term expiring December 16, 2003.

(The above nominations were reported with the recommendation that they be confirmed, subject to the nominees' commitment to respond to requests to appear and testify before any duly constituted committee of the Senate.)

## INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second time by unanimous consent, and referred as indicated:

By Mr. MCCAIN (for himself, Mrs. KASSEBAUM, Mr. MURKOWSKI, Mr. STEVENS, and Mr. SIMON):

S. 1869. A bill to make certain technical corrections in the Indian Health Care Improvement Act, and for other purposes; to the Committee on Indian Affairs.

By Mr. MOYNIHAN:

S. 1870. A bill to establish a medical education trust fund, and for other purposes; to the Committee on Finance.

By Mr. CHAFEE:

S. 1871. A bill to expand the Pettaquamscutt Cove National Wildlife Refuge, and for other purposes; to the Committee on Environment and Public Works.

By Mr. SIMON:

S. 1872. A bill to amend section 922(x)(5) of title 18, United States Code, relating to the prohibition of possession of a handgun by a minor, to change the definition of minor from under 18 years of age to under 21 years of age; to the Committee on the Judiciary.

By Mr. INHOFE (for himself, Mr. CHAFEE, Mr. LIEBERMAN, Mr. FAIRCLOTH, Mr. KEMPTHORNE, Mr. MOYNIHAN, Mr. REID, and Mr. LUGAR):

S. 1873. A bill to amend the National Environmental Education Act to extend the programs under the act, and for other purposes; to the Committee on Environment and Public Works.

By Mr. JOHNSTON:

S. 1874. A bill to amend sections of the Department of Energy Organization Act that are obsolete or inconsistent with other statutes and to repeal a related section of the Federal Energy Administration Act of 1974; to the Committee on Energy and Natural Resources.

By Mr. HATFIELD (for himself and Mr. WYDEN):

S. 1875. A bill to designate the United States Courthouse in Medford, Oregon, as the "James A. Redden Federal Courthouse"; to the Committee on Environment and Public Works.

By Mr. HARKIN (for himself and Mr. BAUCUS):

S. 1876. A bill to amend chapter 89 of title 5, United States Code, to end health insurance portability for Members of Congress and eliminate continued coverage for departing Members of Congress until health insurance portability for other United States citizens is enacted into law, and for other purposes; to the Committee on Governmental Affairs.

By Mr. MURKOWSKI (for himself and Mr. STEVENS):

S. 1877. A bill to ensure the proper stewardship of publicly owned assets in the Tongass National Forest in the State of Alaska, a fair return to the United States for public timber in the Tongass, and a proper balance among multiple use interests in the Tongass to enhance forest health, sustainable harvest, and the general economic health and growth in southeast Alaska and the United States; to the Committee on Energy and Natural Resources.

By Mr. AKAKA:

S. 1878. A bill to amend the Nuclear Waste Policy Act of 1982 to prohibit the licensing of a permanent or interim nuclear waste storage facility outside the 50 States or the District of Columbia, and for other purposes; to the Committee on Environment and Public Works.

## SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mrs. BOXER (for herself and Mr. GREGG):

S. Res. 262. A resolution expressing the sense of the Senate that sanctions should be imposed on the People's Republic of China until the United States Trade Representative certifies that the People's Republic of China is complying with its agreement with the United States regarding the protection of intellectual property rights; to the Committee on Finance.

By Ms. MOSELEY-BRAUN (for herself, Mr. LEVIN, Mr. DASCHLE, Mr. KEMPTHORNE, Mrs. BOXER, Mrs. FEINSTEIN, Mr. KERRY, Mr. WELLSTONE, Mr. LIEBERMAN, Mrs. MURRAY, Mr. PELL, Mr. LAUTENBERG, and Mr. INHOFE):

S. Res. 263. A resolution relating to church burning; ordered held at the desk.

By Mr. MACK (for himself, Mr. LIEBERMAN, Mr. CRAIG, and Mr. JEFFORDS):

S. Res. 264. A resolution to designate May 14, 1997, and May 14, 1998, as "National Speak No Evil Day", and for other purposes; to the Committee on the Judiciary.

By Mr. INOUE (for himself and Mr. AKAKA):

S. Con. Res. 64. A concurrent resolution to recognize and honor the Filipino World War II veterans for their defense of democratic ideals and their important contribution to the outcome of World War II; to the Committee on the Judiciary.

By Mr. PRESSLER (for himself and Mr. LEAHY):

S. Con. Res. 65. A concurrent resolution expressing the sense of the Congress that Members should understand and use the Internet to improve the democratic process and to communicate with the Internet community;

to the Committee on Commerce, Science, and Transportation.

# STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. MCCAIN (for himself, Mrs. KASSEBAUM, Mr. MURKOWSKI, Mr. STEVENS and Mr. SIMON):

S. 1869. A bill to make certain technical corrections in the Indian Health Care Improvement Act, and for other purposes; to the Committee on Indian Affairs.

## THE INDIAN HEALTH CARE IMPROVEMENT TECHNICAL CORRECTIONS ACT OF 1996

Mr. MCCAIN. Mr. President, I rise today on behalf of myself and Senators KASSEBAUM, MURKOWSKI, STEVENS, and SIMON to introduce legislation to make various technical amendments to the Indian Health Care Improvement Act.

The bill we are introducing today will simply make technical changes to certain provisions of the act and extend the authorization for several Indian health care demonstration programs.

Mr. President, the Congress passed the Indian Health Care Improvement Act in 1976 to raise the level of health care provided to American Indians and Alaska Native communities. While the health status of Indian people has generally improved since its enactment, it still lags far behind any other segment of our population. Health crises in every possible problem area continue to afflict many reservation communities at alarming rates. The mortality rate for diabetes exceeds the national average by 139 percent. American Indians are four times more likely to die from alcoholism than other Americans. The incidence rates for fetal alcohol syndrome among native Americans is six times the national average.

The Indian Health Care Improvement Act was enacted to meet the fundamental trust obligation of the United States to ensure that comprehensive health care would be provided to American Indians and Alaska Natives as it is provided to all other Americans. The act was amended in 1992 to extend most of the authorized programs through the year 2000, at which time the Indian Health Service is required to report to Congress on the progress of meeting the health objectives outlined in the act. Until such time, we are seeking to make minor changes to certain provisions of the act to allow maximum flexibility in the delivery of health services to American Indians and Alaska Natives and to ensure that several important tribal programs can continue through the year 2000.

First, the bill amends section 4(n), the Indian health scholarship and loan repayment fund, by modifying the definition of the term "Health Profession." This modification will provide greater flexibility to the IHS to determine eligibility for financial assistance to Indians enrolled in health degree programs. Second, the bill amends section 104(b), the Indian health professions scholar-

ship, to maximize opportunities for scholarship recipients to meet their service obligations to the IHS. It also authorizes the Secretary to waive or suspend a service or payment obligation upon death, extreme hardship conditions or bankruptcy. Next, the bill amends section 206 regarding reimbursement from certain third parties of costs of health services to clarify the provisions for individuals in collection actions for services provided by IHS or tribal health facilities. These provisions were previously adopted by the Senate on October 31, 1995 as part of S. 325, the Native American Technical Corrections Act. However, the House has not yet acted upon S. 325 because the bill contained provisions resulting in joint referrals to a number of House committees. The bill I am introducing today has been drafted to permit referral to just one House Committee.

The bill also amends section 405 to continue the Medicare/Medicaid Demonstration Program for direct billing of Medicaid, Medicare and other third party payers. The demonstration program authorizes up to four tribally-operated IHS hospitals or clinics to participate directly in the billing and receipt of Medicare/Medicaid payments rather than through the current system of channeling payments through the IHS. The four participating tribes including Mississippi Choctaw Health Center, Bristol Bay Area Health Corporation, Choctaw Tribe of Oklahoma and South East Alaska Regional Health Consortium, unanimously report successful results and satisfaction with the program. Collections for some of these tribes have since doubled due to the implementation of the program. I have also received a strong interest from other Indian tribes in expanding this program so that other eligible tribal operators may participate in this direct billing process.

The Medicare/Medicaid Demonstration Program is set to expire on September 30, 1996 at which time the Secretary of the Department of Health and Human Services will evaluate the program and provide a recommendation on whether the program should be made a permanent program. However, without this proposed extension, the four tribal participants will be forced to shut down their direct billing/collection departments and return to the old system of IHS-managed collections.

Given the highly favorable reports of the participating tribal programs, we are proposing to continue the program through the year 2000 and expand the number of eligible tribal facilities from four to twelve. The Congress will evaluate the future of the program when the Secretary has submitted the final report on the project.

Finally, the act extends the authorization for several innovative health care demonstration projects that were established as model programs to be replicated on other Indian reservations. Several of these demonstration projects, including the California Con-

tract Health Services Demonstration Program, the Gallup Alcohol and Substance Abuse Demonstration Program, the Substance Abuse Counselor Education Demonstration Program and the Home and Community Based Care Demonstration Program, are due to sunset in this fiscal year.

While the programs expire in fiscal year 1997, the Secretary is not required to provide a report on these programs until 1999. I believe that these programs should be reauthorized through the year 2000 in order to continue the important health care services provided by these programs and to achieve consistency with other portions of the act. The bill will simply extend the authorization for these programs through the year 2000 until such time that the Secretary prepares his report on the entire Indian Health Care Improvement Act.

Mr. President, this legislation is necessary to ensure the continuation of these important health care programs for Indian people. It is my hope that we can move this bill quickly and favorably. I urge my colleagues to support the immediate passage of this legislation.

I ask unanimous consent that the full text of this bill and the section-by-section summary be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

S. 1869

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

## SECTION 1. SHORT TITLE; REFERENCES.

(a) SHORT TITLE.—This Act may be cited as the "Indian Health Care Improvement Technical Corrections Act of 1996".

(b) REFERENCES.—Whenever in this Act an amendment or repeal is expressed in terms of an amendment to or repeal of a section or other provision, the reference shall be considered to be made to a section or other provision of the Indian Health Care Improvement Act.

## SEC. 2. TECHNICAL CORRECTIONS IN THE INDIAN HEALTH CARE IMPROVEMENT ACT.

(a) DEFINITION OF HEALTH PROFESSION.—Section 4(n) (25 U.S.C. 1603(n)) is amended—

(1) by inserting "allopathic medicine," before "family medicine"; and

(2) by striking "and allied health professions" and inserting "an allied health profession, or any other health profession".

(b) INDIAN HEALTH PROFESSIONS SCHOLARSHIPS.—Section 104(b) of the Indian Health Care Improvement Act (25 U.S.C. 1613a(b)) is amended—

(1) in paragraph (3)—

(A) in subparagraph (A)—

(i) by striking the matter preceding clause (i) and inserting the following:

"(3)(A) The active duty service obligation under a written contract with the Secretary under section 338A of the Public Health Service Act (42 U.S.C. 254l) that an individual has entered into under that section shall, if that individual is a recipient of an Indian Health Scholarship, be met in full-time practice, by service—";

(ii) by striking "or" at the end of clause (iii);

(iii) by striking the period at the end of clause (iv) and inserting "; or"; and