

At worst, complying with my bill will only require a change in the form and minor adjustments to notices and procedures.

Second, consumers who want a choice about the disclosure of their new address can obtain it today. They can keep the Postal Service from releasing their new addresses. My bill will make sure that everyone has that choice. We should not restrict this option to those few who learn of this sneaky method of forcing the Postal Service to do the right thing. Let's tell everyone about this option.

A "SUNSET ACT"

HON. RANDY "DUKE" CUNNINGHAM

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 7, 1997

Mr. CUNNINGHAM. Mr. Speaker, I rise today to introduce the Sunset Act. This legislation, which is similar to H.R. 216 from the 104th Congress, would require Congress to reauthorize Federal programs every 5 years. Programs that are not reauthorized or extended by Congress would be terminated.

Too many Federal programs are automatically reauthorized, often years after they are no longer needed. This legislation will require any new Federal program to terminate no later than 5 years after its date of enactment, unless reauthorized by Congress. Entitlement programs will be exempted from this legislation.

By requiring Congress to reevaluate and reauthorize Federal programs every 5 years, we ensure greater accountability in the programs we create and help curb Government waste. I invite my colleagues to join me in cosponsoring this legislation.

THE HEALTH INSURANCE FAIRNESS ACT

HON. JO ANN EMERSON

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 7, 1997

Mrs. EMERSON. Mr. Speaker, today I proudly introduce legislation of the utmost importance to millions of American small businesses and the self-employed. The Health Insurance Fairness Act will once and for all provide small business owners and the self-employed with the same health insurance tax benefits enjoyed by larger corporations—the ability to deduct 100 percent of their health insurance premium costs.

Making health care costs fully deductible is not an arcane Tax Code issue known only to accountants and IRS auditors. This is an issue that touched the lives of millions of Americans who own or work at a small business. It is especially important to rural areas, like my district in southern Missouri, where small businesses and self-employed individuals, especially farmers and ranchers, form the backbone of the regional economy. However, they have too long been denied access to affordable health insurance for their families, children, and employees because the Tax Code makes it too expensive to purchase. The Health Insurance Fairness Act I am introducing today will help make health insurance

more affordable to the self-employed, small business operators, their employees, and equally important, their families.

The previous Congress took an important first step, Mr. Speaker, by enacting legislation to ultimately increase the insurance premium deductibility to 80 percent by the year 2006. Regrettably, this increase is phased-in too slowly, and will hamper the important work we must do to make health care less expensive and easier to get for all Americans—not through Government-run health care, but through private market incentives.

The Health Insurance Fairness Act will increase the premium deductibility rate to 100 percent in the first taxable year after enactment. Millions of self-employed, small business operators, workers and their families will be able to immediately enjoy the security afforded by a health insurance policy. It represents the type of results-oriented legislation the American public has asked this Congress to produce, and I ask my colleagues to support this important measure.

A BEACON-OF-HOPE FOR ALL AMERICANS: DR. JAMES MALONE

HON. MAJOR R. OWENS

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 7, 1997

Mr. OWENS. Mr. Speaker, with the 1996 election behind us, this Nation has completed another cycle for the ongoing democratic process which makes America great. The electoral process and the public officials selected through this process are invaluable assets in our quest to promote the general welfare and to guarantee the right to life, liberty, and the pursuit of happiness. It is important, however, Mr. Speaker, that we also give due recognition to the equally valuable contribution of non-elected leaders throughout our Nation. The fabric of our society is generally enhanced and enriched by the hard work done year after year by ordinary volunteer citizens. Especially in our inner city communities which suffer from long public policy neglect, local grassroots leaders provide invaluable service. These are men and women who engage in activities which generate hope. I salute all such heroes and heroines as Beacons-of-Hope.

Dr. James A. Malone is one of these Beacons-of-Hope residing in the central Brooklyn community of New York City and New York State. Dr. James Malone currently serves as a professor of counseling and director of the Academy for Intergenerational Education at John Jay College. He taught 2 years in the Newark, NJ public schools before moving to John Jay College where he held the following positions: SEEK director, dean of students and vice president of administrative services.

Throughout the years, Dr. Malone has worked diligently in top positions that uplifted his community. His past civic offices include the president of the board of Weeksville and member of the District School Board #17 and Community Board #9. Dr. Malone is a member and trustee of the Church of the Evangel. In 1971, Dr. Malone developed the city sponsored Hawthorne Corners Day Care Center where he served as the first board president. Dr. Malone also helped to develop the Rutland Road Block Association and was elected the

second president. He headed a research effort, "They're All My Kids," which reaffirmed the necessity of commitment to our children, our schools, and our community.

Dr. Malone received a bachelor of science degree from the University of Akron; master of science in social work from Rutgers University; and a doctorate of philosophy in higher education from Union Graduate in Cincinnati, OH.

James Malone is a Beacon-of-Hope for central Brooklyn and all Americans.

INTRODUCTION OF THE DEVIL'S SLIDE TUNNEL ACT

HON. TOM LANTOS

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 7, 1997

Mr. LANTOS. Mr. Speaker, as we in the West cope with another series of devastating winter storms and floods, residents along the San Mateo County coast are relieved to find that a section of Highway 1, known locally as Devil's Slide, which lies precariously on a sea cliff high above the roaring surf of the Pacific Ocean, is still intact. Devil's Slide is a breathtaking, and all too often lifetaking section of California's scenic coastal highway which has slowly been sinking into the Pacific Ocean as it is battered by waves 600 feet below. Winter storms in previous years have closed Highway 1 at Devil's Slide for up to 6 months, leaving residents and businesses dangerously isolated. This area is 12 miles south of San Francisco in my congressional district.

Perennial closures of Devil's Slide have had a devastating effect on our coastal community. Residents have endured unbearable commutes, access to emergency medical care and other services have been threatened, businesses have lost thousands of customers, and some businesses have failed. For residents and businesses along the San Mateo County coast, it is absolutely essential to have Highway 1 open around Devil's Slide.

Mr. Speaker, 12 years ago, in 1984, Congress closely studied the closure of this vital transportation link and lifeline. After heavy winter rains washed out the road, leaving a 250-foot-long crevice in the road which made the road impassable for 4 months. Then Chairman Glenn Anderson of the Surface Transportation Subcommittee held a series of field hearings in Half Moon Bay and Pacifica, CA, and committee members carefully surveyed the unstable roadway which was sliding 3 inches a day into the sea. Committee members viewed 8-foot-deep cracks and fissures in the roadbed and determined that this vital transportation link was eligible for emergency Federal funds. At my request, the Congress provided funding for the permanent repair of Highway 1 at Devil's Slide.

The California Department of Transportation [CALTRANS] made temporary repairs to the roadway and proposed building a controversial 4.5 mile long bypass around Devil's Slide. Some residents opposed the bypass on environmental and antidevelopment grounds and blocked bypass construction in Federal court for over 10 years. A false sense of security brought on by 10 years of drought ended in January 1995, when heavy rains again closed Devil's Slide for 6 months. For the second time in 12 years this vital transportation link

was severed, again disrupting the lives and livelihoods of tens of thousands of residents and businesses.

Mr. Speaker, after decades of debate and lawsuits, the voters of San Mateo County have put an end to the battle with CALTRANS over how to resolve the problem of Devil's Slide. Voters decided overwhelmingly in favor of a local referendum to approve a mile-long tunnel at Devil's Slide instead of a bypass which would involve extensive cutting and filling of Montara Mountain. The referendum amends the local coastal plan, substituting a tunnel as the preferred permanent repair alternative for Highway 1 at Devil's Slide, and prohibits any other alternative unless approved by the voters. Following the release of a Federal Highway Administration sponsored study which found that the tunnel is environmentally feasible and its costs would not differ significantly from the costs of a bypass, CALTRANS reversed its opposition to a tunnel at Devil's Slide.

Mr. Speaker, today I am introducing important legislation to ensure that funds already appropriated and obligated for Devil's Slide will remain available to CALTRANS to build the tunnel at Devil's Slide. This legislation, entitled the "Devil's Slide Tunnel Act," will provide greater flexibility to State transportation officials to use Federal funds already appropriated by Congress to fix this vital transportation link. Joining me as cosponsors of this legislation are bipartisan members of the bay area congressional delegation whose constituents are most affected by the Devil's Slide highway problem—my colleagues, TOM CAMPBELL, of San Jose, ANNA ESHOO of Atherton, and NANCY PELOSI of San Francisco.

Mr. Speaker, if local and State agencies and the citizens of a region determine that a better transportation alternative exists than the alternative for which funds have been obligated, then the Federal Government should grant greater funding flexibility, as long as all other Federal laws are complied with. It is important that we not permit these funds to lapse. The rebuilding of a severely damaged highway in its existing location may no longer be feasible, and in such cases funds already available to a community should continue to be available.

History tell us that Devil's Slide will wash out again—it is only a matter of time. It is my hope that swift enactment of this legislation will ensure a permanent solution to the residents of the Coastside. I urge my colleagues to support the "Devil's Slide Tunnel Act."

STATEMENT OF THOMAS M. DAVIS
IN HONOR OF MR. EVANS RICHARDSON, III

HON. THOMAS M. DAVIS

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 7, 1997

Mr. DAVIS of Virginia. Mr. Speaker, I rise today to express my deep appreciation for the invaluable service Mr. Evans Richardson III has provided to me and the constituents of the 11th District of Virginia over the past 11 months. An executive manager with McDonnell Douglas in St. Louis, MO, Evans brought a unique and thoughtful perspective to my office in working on legislative and constituent matters as a 1996 Brookings Congressional

Fellow. Almost immediately after he joined my personal staff, he took on a great deal of responsibility, focusing on several key issues such as transportation, environment, affirmative action, and banking. Evans performed his duties with admirable dedication and enthusiasm.

Evans lives in St. Louis, MO, with his wife, Betty and their son Evans IV. He is a graduate of Washington University, and has worked for McDonnell Douglas for 12 years.

Taking an active role in one's community is a responsibility we all share, but which few of us fulfill. Evans actively works for the betterment of his community by serving on the board of directors of several community organizations, including the St. Charles Chamber of Commerce, Herbert Hoover Boys and Girls Club, and the Marygrove Catholic Home for Children.

It has been an honor and a privilege to have Evans Richardson on my staff. I have not only looked to him for legislative counsel, but I trust him as a valued confidante. His candid advice and opinion is always appreciated. I know that my staff and I will dearly miss him. Mr. Speaker, I know my colleagues will join me in thanking Evans for his service to the 104th Congress and wish him continued success in his future endeavors.

FAIR HEALTH INFORMATION PRACTICES ACT OF 1997

HON. GARY A. CONDIT

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 7, 1997

Mr. CONDIT. Mr. Speaker, I have today introduced the Fair Health Information Practices Act of 1997. The purpose of this bill is to establish a uniform Federal code of fair information practices for individually identifiable health information that originates or is used in the health treatment and payment process.

This is the third time that I have introduced a health privacy bill, and I hope that the third time is the charm. In the 103d Congress, I introduced H.R. 4077. The bill was the subject of several days of hearings in 1994. In August 1994, the bill was reported by the Committee on Government Operations and became the confidentiality part of the overall health care reform effort. While my bill died along with the rest of health care reform, it was one of the only noncontroversial parts of health reform. In the 104th Congress, I introduced H.R. 435, a bill that was identical to the version reported by the Committee on Government Operations in 1994. A lengthy explanation of the bill can be found in the Government Operations Committee report, House Report 103-601 part V. That report remains highly relevant to this year's bill as well.

During the last 2 years, most of the action on health privacy took place on the Senate side. The leading Senate bill was S. 1360 which was introduced by Senator BENNETT. His bill and mine have many similarities in language and structure, but there are also numerous smaller but significant differences. In addition, my bill covers several aspects of health privacy that were not included in Senator BENNETT's original bill. I am aware that several interim drafts were developed by Senator BENNETT during the course of the Con-

gress, and these drafts narrowed some of the differences between our two bills. I look forward to the new version of the Senate bill. My bill is largely similar to H.R. 435, but I have made several changes based on new ideas and developments that emerged in the last 2 years. The substantive changes in this year's proposal are:

(1) References to health information service organizations have been dropped. This was a place holder for other institutions that were being developed in the context of broad health care reform. The references are no longer meaningful.

(2) The section on "Accounting for Disclosures" has been retitled as "Disclosure History." Nothing substantive was changed, but the new language is more descriptive.

(3) In section 1.01, I added language to the patient access section making it clear that copies of records have to be provided to the patient in any form or format requested by the patient if the record is readily reproducible by the trustee in that form or format. The language was inspired in part by the recently passed Electronic Freedom of Information Amendments. The purpose is to make sure that a patient can have a record in a format that will be meaningful to the patient or useful to other health care providers.

(4) Also in section 1.01, the exception to patient access for mental health treatment notes has been eliminated. The policy of the bill is that a patient should have broad access to his or her health record. Exceptions are provided only when there is a direct conflict with another interest or when access is meaningless or pointless. The only substantive exception had been for mental health treatment notes. Given the broad sweep of the access provision, I am not sure that this exception can be justified any more. I left it out this year so that the advocates of the exception would have to come forward to argue for its inclusion and make their case on the public record.

(5) New language in section 301(d) creates an Office of Information Privacy in the Department of Health and Human Services. The head of the office is the Privacy Advisor to the Department. This is not really a new office. The Department recently established a private Advocate. The purpose of the new legislative language is to define the health privacy functions of this office with more precision and permanence.

(6) Section 304 of the bill deals with preemption of State laws. This is a difficult subject that clearly need more work and thought. I added one new idea this year. New language provides that the States may impose additional requirements on its own agencies with respect to the use or disclosure of protected health information. The idea is a simple one. If a State wants to impose more stringent restrictions on the ability of State police, State fraud investigators, or other State offices to use or disclose protected health information, it may do so.

In this instance, higher standards will not interfere with access to or use of information by other authorized users or by the Federal Government. The goal is to allow States to set as high a floor as they choose with respect to their own activities. This will not undermine the uniformity principle otherwise reflected in the bill, and it will not affect the drive for administrative simplification or uniform technical standards. Only State agencies will be affected by my new language. I thought that this