

hours following a lymph node dissection for the treatment of breast cancer.

I am also very proud to be a cosponsor of H.R. 164, the Reconstructive Breast Surgery Benefits Act, introduced by my colleague and friend, the gentlewoman from California [Ms. ESHOO]. This bill would require health insurance companies to cover reconstructive breast surgery, if they already pay for mastectomies. I am pleased to stand with my colleagues in support of the one out of every eight women who will get breast cancer in her lifetime.

Right now thousands of women are signing an electronic petition. The online petition drive will enable breast cancer patients to become activists on behalf of this legislation that would provide them with the kind of health care they deserve.

Many have shared their personal stories. One New York woman wrote, and I quote, "On August 25 of this year, I learned that I did have breast cancer. A further study showed that the cancer had traveled to my bloodstream. I am 34 years old. I am undergoing chemotherapy and will also have radiation. It is absolutely necessary for you in government to help women all across the country and to take this disease seriously. We depend on our government to protect us, even when a devastating illness has befallen us."

I quote from another letter. I would like to put a series of them in the RECORD. Quoting, "I was not in any high risk group for developing breast cancer. Yet I was diagnosed with breast cancer in November of 1996. I was shocked and it is still very hard for me to accept this diagnosis. I opted for a mastectomy. I am still in the process of reconstructive surgery. I thank government. You must do more to help women like me."

Mr. Speaker, we need to make sure mastectomies and reconstructive surgery are safe and covered. I thank my colleagues for organizing this special order tonight and I salute the women who are facing these issues every day. You are our inspiration and we will continue fighting for you.

REFORM OF THE IRS

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Texas [Ms. JACKSON-LEE] is recognized for 5 minutes.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I rise today to discuss an issue that has received quite a bit of attention over the last couple of weeks and months. However, many have raised concerns about this for a period of time.

Today, however, I think we can bring this discussion to a higher note in a bipartisan manner that reflects greater interest in saving the voluntary tax-paying system that we have in this Nation, but as well, acknowledging that there have been serious problems that have plagued the Internal Revenue

Service as perceived by taxpayers in the variety of stories that they have been able to share with Congress on this very point.

I felt compelled to address this question in my own district, for it is one thing to hear of a national outcry. It is extremely important to allow your constituents to share their own individual cases that may have occurred.

Not one single witness got up and wanted to declare the abolishment of the IRS or to say that they no longer wanted to share the responsibility of this great government, the government that provides with national security your protection, provides for public education, the safety of our air and water, that provides for our national law enforcement, the beautiful national parks and monuments that we appreciate, the protecting of this capital. Citizens to a one concluded that they wanted to be part of this government and part of supporting it.

But each of them could recount for me an unfortunate set of circumstances that made them feel intimidated and unable to deal with addressing their problems of questions about the taxes that they paid or were alleged to have not paid.

In particular, let me honestly say in this hearing that I held on Friday, October 17th, many citizens and constituents that I asked to participate or suggested that they might were, in fact, frightened and intimidated and did not want to come forward for fear of being targeted. That is not the kind of agency we would like to have.

Let me say in defense that representatives of the IRS employees union also came forward and mentioned the many good and dedicated and sincere employees that want to work within the bounds of the law, want to work with taxpayers and want to ensure that that kind of intimidation does not exist.

With that hearing behind me, I thought it was extremely important to compliment the process today of a bill marked up in the Committee on Ways and Means and offer my own legislation, entitled the Taxpayers Justice Act of 1997. I focus on justice for taxpayers.

I agree with those who are supporting elimination of the marriage tax penalty. My bill includes that. We should encourage those who are married, live together, support families and pay taxes. Why should they be penalized because they are not single?

I also support the creation of civil and criminal penalties for IRS employees who work outside the bounds of their job description and scope, who harass or intimidate taxpayers, do not give them a chance to explain their situation.

I am supporting a two-year commission to help simplify the Tax Code so that we are not going through mounds and mounds of paper, some 9000 pages of the Tax Code. That simply cannot be.

I am also interested in creating a taxpayers advisory board of real, plain,

average taxpayers, not the major giants across the Nation, but just the average citizen who, every day of their life, is trying to comply with the laws of this land.

I want to eliminate potential discrimination, job discrimination at the IRS, and potential discrimination of those who may be targeted because of race, sex or ethnic origin or religion or origin to be audited. I also want to be assured or assure divorced women whose incomes are less than their spouses that they are not penalized with the taxes of past mistakes in marriage so that there is some protection for them. And, yes, rather than rushing a taxpayer to the courthouse where their resources are exhausted, I would like to see the utilization of mediation and dispute resolution so that taxpayers and the IRS can sit down and attempt to resolve their differences. There is some form like that, but it is not where it is moved in a direction that reinforces the taxpayer that this is the right thing to do, to sit down in mediation.

Overall, we have a good system that supports this government. But whenever you call a hearing on the IRS and your constituents run the opposite direction rather than come to the table to provide insight and information, you know you have a problem. The Taxpayers Justice Act of 1997 is to compliment the Act of the Committee on Ways and Means, but also to address your concerns, that of the taxpayers of this country who need justice.

I hope Members will support the Taxpayers Justice Act of 1997.

BREAST CANCER AWARENESS MONTH

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Ohio [Mr. BROWN] is recognized for 5 minutes.

Mr. BROWN of Ohio. Mr. Speaker, I join my Democratic colleagues this evening in a series of special orders during Breast Cancer Awareness Month to discuss what we should do in this Congress and in communities across the country to prevent and to cure this dreadful disease of breast cancer.

Recently, at a breast cancer awareness forum at the Elyria, Ohio WYCA, a woman recounted the story of holding her ailing mother's hand as she was wheeled down a sterile hospital hallway to a surgical room where she was to receive a lifesaving mastectomy. Another breast cancer survivor shared with us the emotional toll this deadly disease took on her and her loved ones.

This type of meeting to promote awareness and education about this deadly disease is not an unfamiliar sight in the industrial communities I represent in northeast Ohio. A study conducted by the Ohio Department of Health estimates that one in three women in Ohio will develop some form of cancer in their lifetimes and one in nine women will develop breast cancer.

Ohio unfortunately ranks 11th in the Nation in breast cancer deaths and 9th in total cancer deaths among women.

Northeast Ohio has been particularly hard hit by this tragedy. There is no magic bullet in our fight against breast cancer. There is no vaccine. There is no guaranteed cure. However, early screening, detection and treatment of breast cancer offer women the best hope of beating breast cancer and leading long, healthy lives.

In an effort to increase local awareness of the importance of early detection and treatment options, I helped found the Northeast Ohio Breast and Prostate Cancer Task Force in 1994.

□ 1800

This dedicated group of volunteers includes cancer survivors, medical researchers, and health care professionals such as doctors and nurses.

The mission of the task force is twofold:

First, it works to support and supplement ongoing public education efforts in breast cancer in northeast Ohio. Last year, the members of the task force put together a comprehensive, easily readable pamphlet to provide information to women on how to prevent breast cancer and the importance of periodic screening. It was packed with information on counseling and whom to talk to about treatment options.

Volunteers distributed these pamphlets to 273 hairdressers and beauty salons in northeast Ohio in a local campaign to eradicate breast cancer. We worked with the Women's Preventive Health Care Services program offered by the Cuyahoga County Board of Health, which provides information on early detection of breast and cervical cancer to medically underserved women, a group historically vulnerable to these killers.

The task force's second mission is to seek out any environmental factors which may cause northeast Ohio's higher than average rates of breast cancer.

To further this mission, my colleague, the gentleman from Michigan [Mr. STUPAK], and I were able to add language to last year's reauthorization of the Safe Drinking Water Act which requires the EPA to test whether certain chemicals found in drinking water cause breast or other forms of cancer.

The stories of the women at the Elyria YWCA and the efforts of the task force are vital because they represent our most important and potent weapon in the battle against breast cancer. Through the tireless efforts of breast cancer survivors, the local health care community, and ordinary residents and business owners, one small community is taking a stand. As their elected officials in Washington, we must do more, however, to help win this battle.

We must support legislation currently before us which would ensure that health insurance companies provide coverage for women who undergo mastectomies and the reconstructive

surgery often required after this procedure.

Furthermore, women must never be forced out of the hospital on the same day a mastectomy is performed unless the patient and the doctor, not the insurance company, the patient and the doctor agree that it is in the patient's best health interest.

Lastly, we must continue to support increased funding for more biomedical research to improve treatment and to find a cure for breast cancer in other terminal and chronic diseases.

Until we are able to find a cure for deadly diseases like breast and prostate cancer, early detection and screening represent the best hope for the millions of men and women who will be diagnosed with these diseases. We should join with the millions of Americans, like the women at the Elyria YWCA and members of the task force, who are on the front lines spreading this life-saving message.

As we listen to stories of hope and sadness by those individuals whose lives have been touched by breast cancer, let us work together in Washington to ensure that patients have access to affordable, quality health care and demonstrate our commitment to winning this battle by providing the research dollars necessary for improving treatment and finding a cure.

SUPPORT OF LEGISLATION TO HELP WOMEN FIGHT BREAST CANCER

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas [Mr. BENTSEN] is recognized for 5 minutes.

Mr. BENTSEN. Mr. Speaker, I rise today in strong support of legislation that will help to fight breast cancer. These bills, including H.R. 1350 and H.R. 164, would ensure that women have sufficient time to recover from breast cancer treatments and ensure that women have the medical treatments they need to fight this difficult and dreadful disease.

Already 135 would ensure that women and doctors can work together to determine what is the best treatment for each woman. I am an original cosponsor of this bill that will require all health plans to provide minimum hospital stays for those women who undergo mastectomies and lymph node dissections. Without this protection, women may have to choose between their health and their treatments. In the past, Congress has acted to provide minimum protections for pregnant women and their children and we should provide the same protections for women with breast cancer.

H.R. 164 would ensure that women with breast cancer would receive the necessary breast reconstruction surgeries they need. This legislation would require all health plans to provide coverage for this surgery. Many health plans do not currently provide this coverage because health plans be-

lieve these surgeries are not necessary. I believe doctors and patients should decide which treatment plan would benefit each patient without interference from their health plans. This legislation would provide this much needed protection for breast cancer patients.

I would like to commend the gentlewoman from Connecticut [Ms. DELAURO] for organizing this special order to highlight these bills as part of Breast Cancer Awareness Month. It is particularly important to me, as the Representative of the Texas Medical Center, that I have many constituents who are active in the fight against the disease that we can defeat.

In honor of Breast Cancer Awareness Month, I would also like to highlight the work of two outstanding individuals who are constituents of mine: One, Dr. Dixie Melillo, a physician who operates the Rose, a clinic targeting women and in particular low-income women to ensure that they receive adequate breast cancer screening and treatment.

After years of hard work, Dr. Melillo has been able to expand her operation to three clinics in and around my district, and I commend her for her work.

Second, I want to honor Dr. Jennifer Cousins, who runs the Women's Health Initiative at Baylor College of Medicine, which recently celebrated its third anniversary.

Three years ago, the National Institutes of Health awarded Baylor College of Medicine a grant of \$11.8 million to conduct the largest, longest clinical trial in Baylor's history. This study is examining the health of more than 5,400 women over a 12-year period, and focuses on diseases that are critically important to the health of women: Cardiovascular, colorectal cancer, osteoporosis and, in particular, breast cancer. Breast cancer is the second killer among cancer in women.

The information provided by the Women's Health Initiative will lead to breakthrough treatments for these diseases and improve the lives of women in Texas and across the Nation. The Baylor Clinical Center has recruited 3,300 women for an observational study to gather information regarding risk factors for these diseases.

The Baylor Clinical Center will also recruit an additional 2,100 women for a clinical trial to research whether diet and hormone replacement therapy will help women lead healthier lives. Information gathered from this clinical study will help women to make informed decisions about which therapies to use to prevent the disease and stay healthy.

I also want to highlight the efforts of Dr. Jennifer Cousins, Director for the Center for Women's Health, to bring this critical WHI study to the Houston area. I believe Dr. Cousins is critical to the success of this study, and she should be commended for her hard work.

Mr. Speaker, to really honor these two women leaders in Houston, the