and in doing so, may fulfill the old cliche of the cure being worse than the illness.

Given that our allies have seen fit to either make their programs voluntary, or eliminate them altogether, we owe our men and women in uniform a closer look at the effects of our program.

Accordingly I urge my colleagues to join in support of this measure, H.R. 2548.

H.R. 2548

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Department of Defense Anthrax Vaccination Moratorium Act''.

SEC. 2. SENSE OF CONGRESS.

It is the sense of Congress that—

(1) a single force protection measure such as the mandatory anthrax vaccine immunization program should not be implemented by the Department of Defense without regard for that measure's own effects on morale, retention, recruiting, and budget; and

(2) an insufficiently proven vaccine should not be advocated as a substitute for research, development, and production of truly effective vaccines and essential antibiotics, adequate personal protective equipment, detection devices, and nonproliferation measures.

SEC. 3. MORATORIUM OF VACCINATION PROGRAM.

The Secretary of Defense shall suspend implementation of the anthrax vaccination program of the Department of Defense. After the date of the enactment of this Act, no further vaccination may be administered under the program to any member of the Armed Forces except in accordance with this Act.

SEC. 4. STUDY BY NATIONAL INSTITUTES OF HEALTH.

(a) STUDY.—

(1) IN GENERAL.—The Director of the National Institutes of Health shall require the appropriate national research institute to conduct or oversee an independent study of the effectiveness and safety of the vaccine used in the Department of Defense anthrax vaccination program.

(2) MATTERS TO BE STUDIED.—The Director shall include in the study under paragraph (1) determination of the following with respect to that vaccine:

(A) Types and severity of adverse reactions.

(B) Long-term health implications, including interactions with other (existing and planned vaccines and medications.

(C) Efficacy of the anthrax vaccine for protecting humans against all the strains of anthrax pathogens members of the Armed Forces are likely to encounter.

(D) Correlation of animal models to safety and effectiveness in humans.

(E) Validation of the manufacturing process focusing on, but not limited to, discrepancies identified by the Food and Drug Administration in February 1998 (especially with respect to the filter used in the harvest of anthrax vaccine, storage times, and exposure to room temperature).

(F) Definition of vaccine components in terms of the protective antigen and other bacterial products and constituents.

(G) Such other matters as are in the judgment of the Director required in order for the Director to make the determinations required by subsection (b).

(3) LIMITATION.—The Director may not use for purposes of the study any data arising from the experience of inoculating members of the Armed Forces with the vaccine studied because of the lack of informed consent and inadequate recordkeeping associated with such inoculations.

(b) REPORT.—Upon completion of the study, the Director of the National Institutes of Health shall submit to the Committee on Government Reform of the House of Representatives and the Committee on Governmental Affairs of the Senate and to the Secretary of Defense a report setting forth the results of the study. The report shall include the Director's determination, based upon the results of the study, as to each of the following:

(1) Whether or not the vaccine used in the Department of Defense anthrax vaccination program has an unacceptably high systemic reaction rate.

(2) Whether or not the vaccine is effective with respect to noncutaneous transfer of anthrax.

(3) Whether or not the vaccine will be produced in a manner acceptable to the Food and Drug Administration.

SEC. 5. GENERAL ACCOUNTING OFFICE STUDY.

(a) IN GENERAL.—The Comptroller General shall conduct a study of the inoculation program referred to in section 3 and of the effect of the use of contractor-operated facilities for that program. As part of the study, the Comptroller General shall study the following with respect to the inoculation program:

(1) Effects on military morale, retention, and recruiting.

(2) Civilian costs and burdens associated with lack of military medical care and loss of civilian sick leave and work capacity for members of the reserve components who experience adverse reactions while not in military status.

(3) A system of accurately recording medical conditions of members of the Armed Forces and other patients before and after inoculation, including off-duty reactions and treatment of reserve component members and including screening for allergens and contraindication, to include prior adverse reactions.

(b) PUBLIC COMMENTS.—The Comptroller General shall publish the study under subsection (a) for public comment.

(b) GAO REVIEW.—The Comptroller General shall review the Secretary's written report and provide comments to Congress within 75 days after the Secretary files the report.

SEC. 6. BOARDS FOR CORRECTION OF MILITARY RECORDS.

The Secretary of Defense shall direct that the respective Boards for Correction of Military Records of the military departments shall, upon request by individual members or former members of the Armed Forces, expedite consideration of applications for remedies for adverse personnel actions (both voluntary and involuntary) that were a result of the mandatory anthrax vaccine immunization program, to including rescission of administrative discharges and separation, rescission of retirements and transfers, restoration of flying status, back pay and allowances, expunging of negative performance appraisal comment or ratings, and granting of physical disability certificates.

SEC. 7. CONTINGENT RESUMPTION OF VACCINATION PROGRAM.

(a) CONTINGENT AUTHORITY FOR RESUMPTION.—If the Director of the National Institutes of Health determines in the report under section 3(b) that the vaccine used in the anthrax vaccination program of the Department of Defense meets each of the criteria stated in subsection (b), the Secretary of Defense may resume the Department of Defense anthrax vaccination program. Any such resumption may not begin until the end of the 90-day period beginning on the date of the submission of the report under section 3(b).

(b) CRITERIA FOR PROGRAM RESUMPTION.—the criteria referred to in subsection (a) are the following:

(1) That the vaccine used in the Department of Defense anthrax vaccination program does not have an unacceptably high systemic reaction rate.

(2) That the vaccine is effective with respect to noncutaneous transfer of anthrax.

(3) That the vaccine will be produced in a manner acceptable to the Food and Drug Administration.

(e) REQUIREMENT FOR USE OF NEW VACCINE.—If the anthrax vaccination program is resumed under subsection (a), the Secretary of Defense may only use newly produced vaccine for vaccinations after the resumption of the program.

DEPARTMENT OF THE INTERIOR AND RELATED AGENCIES APPROPRIATIONS ACT, 2000

SPEECH OF

HON. TOM BLILEY

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, July 14, 1999

The House in Committee of the Whole House on the State of the Union had under consideration the bill (H.R. 2466) making appropriations for the Department of the Interior and related agencies for the fiscal year ending September 30, 2000, and for other purposes.

Mr. BLILEY. Mr. Chairman, section 322 of H.R. 2466 is a funding limitation to prevent monies appropriated under the bill to be used by the National Telecommunications and Information Administration (NTIA) for spectrum purposes, GSA Telecommunication Centers, or the President's Council on Sustainable Development. I rise in opposition to this provision's applicability to NTIA's spectrum functions because of its potential impact on telecommunications policy and efficient use of the radio spectrum by government users.

Spectrum management issues fall within the jurisdiction of the Commerce Committee. As our Members have learned over the years, spectrum management is a complex task that requires detailed and analysis and consideration. Under the current process, the Federal Communications Commission (FCC) oversees the use of spectrum by private entities and NTIA oversees the use of spectrum by government entities, including the Department of Interior.

NTIA currently is required to be reimbursed by all federal agencies for the spectrum management functions NTIA does on behalf of the agencies. Today, federal agencies typically reimburse NTIA for about 80 percent of the costs associated with spectrum management. Since its inception, reimbursement by federal agencies to NTIA for spectrum functions has had a positive impact on the spectrum efficiency of federal agencies. Putting a cost on government spectrum has caused agencies to reassess exactly how much spectrum and what precise frequencies they need to complete their mission. This cost, however, is not an attempt to decrease or interfere with the valuable functions that federal agencies use spectrum for. In practice, the concept has promoted spectrum efficiency and promoted the efficiency of NTIA's spectrum management functions.

Section 322 would, in effect, prohibit the Department of Interior from reimbursing NTIA for spectrum functions. The Department of the Interior has already been required to reimburse NTIA since FY1996 and had to take into account such provisions prior to submitting a budget request to the Congress for FY2000. Section 322 is a direct effort to undermine the reimbursement effort and provides the Department of Interior with extra funding for other purposes for FY2000 that they wouldn't have otherwise. Providing the Department of the Interior with a statutory mechanism to avoid paying its fair share for spectrum management functions is not sound policy.

Further, section 322 could harm the Department of Interior's use of spectrum because under current restrictions NTIA is prohibited from providing any spectrum functions to a federal agency that does not reimburse NTIA for such functions. To the extent that the Department of Interior does not have funding outside of the monies provided in H.R. 2466, the Congress may be limiting the spectrum functions and capabilities of the Department of Interior. In effect, this provision may be prohibiting the Department of Interior from reimbursing NTIA for spectrum functions and as a result preventing the Department of Interior from using spectrum.

The Commerce Committee intends to move legislation reauthorizing NTIA this session. In particular, the Subcommittee on Telecommunications, Trade, and Consumer Protection is considering legislation to codify the current reimbursement practices and expand on the level of reimbursement from federal agencies to 100 percent. If any effort is necessary to adjust, alter, or exempt any federal agency from reimbursing NTIA for spectrum functions it should be through this vehicle and not through an appropriations bill.

Accordingly, I believe that section 322 may have a negative impact on spectrum policy. The Commerce Committee will be active to ensure that the inclusion of any provision within the final version of this bill not interfere or cause harm to telecommunications policy. I respectfully request that these concerns be taken into account during further consideration of this legislation.

PERSONAL EXPLANATION

HON. CHRISTOPHER SHAYS

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Monday, July 19, 1999

Mr. SHAYS. Mr. Speaker, on Thursday, July 15, I inadvertently voted ''nay'' when I meant to vote ''aye'' on rollcall vote 303, the Lowey amendment to H.R. 2490, the Fiscal Year 2000 (FY 00) Treasury-Postal Appropriations Act.

I support the provision in H.R. 2490 to require Federal Employee Health Benefit Plans (FEHBP) which provide prescription plans to include coverage of all FDA-approved contraceptive drugs and devices.

I oppose the amendment offered by Congressman CHRIS SMITH to allow health plans to opt out of providing contraceptive coverage by claiming a ''moral conviction.'' I was happy to see the passage of the Lowey substitute amendment to strike this exemption for health plans.

It is my hope the Lowey amendment will help reduce unwanted pregnancies while providing women with contraceptive coverage. While the FY 00 Treasury-Postal Appropriations Act covers only women in the FEHBP, I believe it is a positive step forward in ensuring contraceptive coverage is available to women in a majority of health plans.

As an original cosponsor of H.R. 2120, the Equity in Prescription and Contraceptive Coverage Act, introduced by Representatives JIM GREENWOOD and NITA LOWEY, I will continue to work to provide access to family planning services.