

He is currently serving an 18-year prison term in a remote area of China. His mother has not seen him in more than 3 years, and officials of the Government of China refuse to allow her to see him.

Mr. Speaker, the Government of China has never produced any evidence whatsoever that Ngawang Choephel engaged in any political or illegal activity. His imprisonment is part of the Government of China's brutal campaign of repression in Tibet, Choephel's home.

We must not let Ngawang Choephel be forgotten. We must continue to use all the means at our disposal to secure his release from an unjust imprisonment on trumped-up charges, and we must continue our efforts to keep human rights high on this country's foreign policy agenda. Until we see genuine progress on human rights in China, we should withhold the granting of Most Favored Nation trading status, and we should urge U.S. corporations to stop investing in China. This kind of effort helped topple apartheid in South Africa, and there is no reason to believe it would not have an effect on the human rights situation in China.

I urge my colleagues to hold the Government of China accountable for its human rights abuses, and hasten the day that Ngawang Choephel is free again.

#### PERSONAL EXPLANATION

### HON. JOSEPH CROWLEY

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 15, 1999*

Mr. CROWLEY. Mr. Speaker, on September 9, 1999, I had to be in New York on official business and missed rollcall votes 399, 400, 401, 402, 403, and 404. I ask that the record reflects that had I been present, I would have voted "nay" on rollcall vote 399, "aye" on rollcall vote 400, "nay" on rollcall vote 401, "aye" on rollcall vote 402—the motion to recommit the VA/HUD Appropriations, "nay" on rollcall vote 403, the FY 99 VA/HUD Appropriations bill, and "nay" on rollcall vote 404, the DC Appropriations Conference Report.

#### ACKNOWLEDGE THE EXCELLENT WORK OF THE COOPERATIVE CENTER FEDERAL CREDIT UNION

### HON. BARBARA LEE

OF CALIFORNIA

### HON. STEPHANIE TUBBS JONES

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 15, 1999*

Ms. LEE. Mr. Speaker, we, Representatives BARBARA LEE and STEPHANIE TUBBS JONES, note that this week, the 29th Congressional Black Caucus Annual Legislative Conference will be taking place in Washington, D.C. An Issue Forum on Credit Unions is being held on September 16, 1999 to expand on the critical knowledge that "Credit Unions Bring Power and Wealth to the Community".

The impetus for, and the success of this Forum is largely the work of Ms. Carole Kennerly, Director of the Cooperative Center Federal Credit Union, and the team that she brought together to develop this issue forum.

Mr. Speaker, I want to acknowledge the work done, and congratulate the members, employees, staff, board of directors and committee volunteers of the Cooperative Center Federal Credit Union (CCFCU) for its initiative in proposing and holding the Credit Union Issue Forum on September 16, 1999 and for bringing it to the attention of the 29th annual legislative conference of the Congressional Black Caucus in Washington, D.C.

Special appreciation is expressed to these individuals:

National Chairperson: Carole Kennerly, CCD, Director, Cooperative Center Federal Credit Union.

Coordinators:

IfeTayo, T.L. Bonner-Payne, Supervisory Committee, Cooperative Center, FCU.

Shirley A. Sheffield, Member, Cooperative Center Federal Credit Union.

Kim Medley, Member, Cooperative Center Federal Credit Union.

Joseph Villa, Former President/CEO, Allen Temple Baptist Church Federal Credit Union.

Barry Kane, V.P., Central Region Branches, Governmental Affairs, Patelco Credit Union.

Chris Kerecman, V.P., Federal Governmental Affairs, California Credit Union League.

Odesa J. Woods-Mathews, member, Social Security Administration Federal Credit.

Dr. Gwendolyn Nurse-Wright, Paragon Federal Credit Union, Englewood Cliff, N.J.

Rosemary George, Communication Specialist, National Credit Union Administration.

Patricia Brownell, V.P., Credit Union Development, National Credit Union Foundation.

N. Sharifah Ibsan, graphic artist.

#### PERSONAL EXPLANATION

### HON. DEBBIE STABENOW

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 15, 1999*

Ms. STABENOW. Mr. Speaker, I rise today to explain my vote regarding H. Con. Res. 180, a resolution that expresses the sense of Congress that President Clinton should not have granted clemency to members of the FLAN. During my tenure in Congress, I have supported strong antiterrorism measures. I oppose the actions of the President and oppose the release of these prisoners. These acts of terrorism are obviously deplorable, and I am especially concerned about the lack of remorse shown by these prisoners. But I also oppose taking this vote before hearings are held and evidence is reviewed, given the fact that this resolution challenges the constitutional authority of the President. Thus, I have voted "present" on this bill.

#### RECOGNIZING NATIONAL POLLUTION PREVENTION WEEK

### HON. ROB PORTMAN

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 15, 1999*

Mr. PORTMAN. Mr. Speaker, I would like to take this opportunity to recognize and support September 20–26 as National Pollution Prevention Week, which will be observed in the Second District of Ohio and throughout the Nation.

One of the most cost-effective ways to have clean streets, drinkable water, and breathable air is to focus on preventing pollution before it is created. Often, this is best achieved locally. The Greater Cincinnati Earth Coalition has done just that by forming a Regional Waste Reduction Group to focus on such things as energy conservation, plastics recycling, and generally reducing waste at the local level. The coalition is also actively involved in the implementation of a regional environmental education and information resource center.

Mr. Speaker, the objective to Pollution Prevention Week is to prevent pollution through education, cooperation, and voluntary recycling rather than through restrictive government regulations. It can encourage us to work for a cleaner environment while maintaining a competitive, prosperous business climate. These are goals we can all rally around, and I hope my colleagues will join me in recognizing Pollution Prevention Week.

#### SHOPPING FOR HEALTH CARE SHOULDN'T BE SO HARD

### HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 15, 1999*

Mr. STARK. Mr. Speaker, we all know the problems that the high cost of health care causes for Americans. What is surprising is how hard it is for a patient/consumer to shop around for the price of a medical procedure.

Shopping for the best price on a standard medical procedure is extremely difficult when one is healthy. It becomes nearly impossible when one is sick. Medicare should lead the way in helping establish pricing information that could help consumer/patients make their health care dollar stretch.

Over the last few weeks, my staff has made calls to various hospitals and doctors' offices to find the cost of an Extracorporeal Shock Wave Lithotripsy (ESWL) procedure. A lithotripsy procedure is one of the best ways to treat kidney stones, one of the more painful types of medical conditions that forces at least 100,000 Americans to require medical attention a year. Lithotripsy, an outpatient procedure which takes about an hour, uses a high energy machine to deliver shock waves to the kidney stone, smashing it to smaller pieces which then gradually pass out of the kidney, and then the body.

The data from these calls about the cost of lithotripsy were eye opening. Not only was the price difference between hospitals and facilities notable, but so was the difficulty in gathering the information, especially the cost of this procedure for Medicare enrollees.

For example, in the Greater Washington area, total cost of lithotripsy varied from approximately \$5,400 at Johns Hopkins USA hospital to approximately \$9,000 at George Washington University Hospital. The following chart lists other hospitals' and doctors' responses to the questions of cost for (1) someone without insurance and (2) someone with Medicare. What was as upsetting as the price differences was the difficulty in finding the cost to Medicare enrollees of this standard procedure. Staff was often told that hospital-using patients would be charged the 20% approved Medicare rate. In fact, patients often pay up to

50% of the Medicare Hospital Outpatient Department (HOPD) approved rate, which is a huge burden to the patient.

Along with the underquoting of a patients' future bill, staff at many hospitals were not able to supply information about what was the approved rate that Medicare would pay, which would make it impossible for patients to plan ahead for their future bill.

Mr. Speaker, Medicare is moving to a Prospective Payment System for Hospital Outpatient Department procedures. Under this new system, over time (unfortunately in many

cases 20–30 years) the patient's share of the total bill will return from today's average of 50–50 to the normal Medicare co-payment of 20%. The establishment of this system will also make it easier for consumers to know what the price for a procedure at a particular institution really is. The calls by my staff show that, if one has a non-emergency medical need, some calling around can save literally thousands of dollars. But this information comparing costs between hospitals and other settings where the procedure can be done (such as an ambulatory surgical center where it is

being proposed to allow lithotripsy to be done) should be more easily available.

I hope that in this age of the Internet and other easier information gathering sources that we will find ways to make this type of basic shopping less of a mystery. Other data will be able to tell us the quality of different providers. Together, this information can help us choose both the quality and the price of the service we seek. This type of information can help reduce some of the outrageous costs of the American health care system and push the overall system toward higher quality.

Name of provider	Approximate cost of facility fees	Approximate doctors cost	Approximate totals
1. Johns Hopkins USA (at Bayview):			
A. Self-Pay .....	\$2200 .....	\$2100 .....	Procedure \$5300
B. Medicare .....			Price changed from call made previously—now is \$5400. Medicare would cover 80% so patients pay \$1080. Anesthesia is separate and very hard to determine—'can't answer,' because cost depends on individual procedure.
2. Bethesda, Maryland Urologist Group Practice:			
A. Self-Pay .....		Initially, office policy to not give price, but then quoted about \$3000.	
B. Medicare .....		Medicare pays 80% of approved cost .....	
3. A Maryland Urologist .....	N/A .....	\$3500 .....	
4. University of VA Medical Center:			
A. Self-Pay .....	UVA is State hospital: one can get help/discounts eligible for financial assistance.		Estimate from \$7000 to \$10,000.
B. Medicare .....	Patient charged 20% of what is approved by Medicare .....	Said Medicare won't approve all of \$10,000 .....	Was "impossible" for hospital to get this information; patient must talk to Medicare about what is approved.
5. George Washington University Hospital:			
A. Self-Pay .....			\$9000. 25% discount for payment up front—[25% discount is \$2250, which lowers facility fee to \$6750]. This is a flat fee—paid up front and there should be no additional fees, but doesn't include anesthesia. Anesthesia is approximately \$409 an hour for this procedure. The non-prepaid rate is \$630.
B. Medicare .....			Was directed to talk to Medicare about what they cover. Despite repeated calls, could not get in touch with insurance/billing department to find out the cost for Medicare enrollees.
6. Georgetown University Medicare Center	Depends on hospital fees. It varies, but assume \$2000 for each half-hour—so assume \$4000–\$5000 for hospital fees.	Fee during procedure is \$3800 .....	
7. Urologic Surgeons of Washington:			
A. Self-Pay .....	N/A .....	Doctors cost: \$3482 .....	
B. Medicare .....		Medicare fee schedule brings down amount so patient ends up paying approximately \$160.	
8. Duke University Medical Center:			
A. Self-Pay .....	Facility fees are approximately \$6500 .....	Doctors fees are approximately \$2500 .....	
B. Medicare .....	Hospital accepts what Medicare pays outside of deductible (\$768).	Need to file claim first; then can tell cost of doctors' fee .....	
9. Midwest Stone Institution (Missouri) .....			Total costs run from \$8000–12,000. Could not find out what Medicare approves.
10. American Kidney Stone Management, Ltd.	Cannot give cost without knowing which hospital is performing operation because there is "great difference between hospital costs."		

TRIBUTE TO CENTRAL BAPTIST CHURCH

HON. PETER J. VISCLOSKY

OF INDIANA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 15, 1999

Mr. VISCLOSKY. Mr. Speaker, It is a great pleasure to congratulate Central Baptist Church in Hobart, Indiana, as it celebrates its 90th anniversary as a parish this Sunday, September 19, 1999. I would also like to take this opportunity to congratulate Reverend Webb, senior pastor, on this glorious occasion.

A church of humble beginnings, Central Baptist Church was established as First Baptist Church in 1909, and celebrated its first service on January 20, 1909, in the home of Mrs. Harriet Cathcart. The parish's first pastor, Reverend George Griffin, having caught a vision while visiting Mrs. Cathcart, helped in the organization of the church. During his six months of service with the church, Reverend Griffin was influential in the purchase of three lots for \$950, which provided a suitable site for the church. After Pastor Griffin left in June 1909, the Indiana State Board (Northern Baptist) sent Reverend J.E. Smith to serve the congregation. The Women's Missionary Board of Indiana lent the church \$5,000 to start con-

structing a building for the new church. Many parishioners contributed time, talent, money, and raw materials to help construct the First Baptist Church. With the help of the parishioners, the first service was held in the new auditorium, which was a basement with dirt floors on December 9, 1909. The furnace was a coke salamander with no stack which regularly filled the room with smoke. In addition to this, the roof leaked when it rained and when the Aetna Powder Company blew up, there were no windows left. Conditions were bleak, but the ministry had survived its first year. Pastor Smith left in June of 1910. Several months passed without a pastor. The church, then made up of 50 members, decided to discontinue services until the Mission Board could send them a new shepherd.

On January 1, 1912, Reverend Wilson was sent to help revitalize the church. With the help of Reverend Wilson the attendance rose from 13 to 128 during the first year of his ministry. Because of the large number of Baptist families arriving to the area, a new building was started in August of 1912 and dedicated in September 23, 1913.

By 1920, the membership had grown to 350 parishioners under the direction of Pastor O.B. Sarber. The church was without a pastor for exactly one year when Pastor William Ayer came to Central Baptist Church in 1927. During Pastor Ayer's tenure with the church, he

started a radio ministry and "The Little Brown Church" was mounted on a Ford and used for street meetings throughout Gary. In 1932, Pastor Ayer left a thriving church with more than 700 members.

Over the years, the church moved from Gary to Portage township due to a shift in population and was led by a variety of pastors. In spite of its many changes, the loyal parishioners continued to grow and prosper. The present facility, including the Sanctuary, was erected in stages. The first stage which included the gym, kitchen, and several classrooms was completed in May 1974 and phase two was completed in October of the same year. Ground was broken in April 1987 and the Hines Sanctuary was dedicated on January 9, 1983.

Mr. Speaker, I ask you and my other distinguished colleagues to join me in congratulating the parish family of Central Baptist Church, under the guidance of Reverend David Webb, as they prepare to celebrate their 90th anniversary. All past and present parishioners and pastors should be proud of the numerous contributions they have made out of the love and devotion they have displayed for their church throughout the past 90 years.