

eight percent of Troop 116's youth have attained the Eagle Scout Rank—about four times the national average. Scout training has also enabled two scouts to receive the Life Saving Awards from the National Council for saving a life while greatly risking their own.

Troop 116 has participated in several activities, and encourages volunteerism. It has sent many members to the periodic National jamborees held at various national historical sites. Scouts have initiated and participated in numerous food and clothing drives for the needy, a variety of clean-up and local improvement projects, as well as volunteering and doing a host of maintenance and upgrading projects in state and federal parks.

The Eagle Scouts will recognize their sponsor, The United Methodist Church of Madera, by presenting an Eagle's Nest as a sign of appreciation for the church's sponsorship over the past 50 years.

Mr. Speaker, I rise today to recognize Boy Scout Troop 116 in their 50th Anniversary for doing its part to positively influence the lives of men and boys in the Central Valley, and contribute to the community. I urge my colleagues to join me in wishing Troop 116 many years of continued success.

MEDICARE MODERNIZATION BILL
NO. 3—RURAL CASE MANAGEMENT ACT OF 1999

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, April 29, 1999

Mr. STARK. Mr. Speaker, it gives me great pleasure to introduce the Rural Case Management Act of 1999, a common sense approach to delivering high-quality, coordinated health care in rural America. This is the third week, and the third bill, in my campaign to modernize and improve Medicare.

Health care needs in rural areas are unique. Whereas many metropolitan areas suffer from an over-supply of providers, often there is only one provider serving a vast number of rural communities. One-size-fits-all solutions do not work for these opposite ends of the health care spectrum.

Yet, Republicans continue to promote managed care as the solution for all problems and people. Most recently, they have asked taxpayers to subsidize private managed care companies in rural counties, despite the widely acknowledged reality that managed care cannot function in rural areas due to the lack of providers. Changes made in 1997 BBA result in outlandish over-payments to private managed care plans that serve rural markets. In some counties, health plans are being paid almost twice as much as it costs traditional fee-for-service Secretary to operate there. Putting more money into an idea that simply cannot work is ridiculous. It's like watering a garden that has no seeds.

The Rural Case Management Act of 1999 would eliminate the waste established in the BBA by making payments directly to rural providers who coordinate care for their patients. This benefit would help coordinate care for the chronically ill, such as diabetes or HIV/AIDS patients, improve notification for preventive services, such as mammograms and flu shots, and provide follow-up care for people who

need it. The choice to participate would be entirely voluntary: no one would be "locked in" to the web of a rural managed care plan that had limited providers and limited budgets.

There is no evidence that managed care is better for consumers than fee-for-service Medicare. In fact, for the frail chronically ill, evidence suggests the contrary. If HMOs were established in rural communities, beneficiaries in the area might be forced to join in order to get any service from the few local doctors and the one local hospital. Then, if they needed expensive care at a specialty center, would their local providers be reluctant to refer them to that center for care, when the cost would come out of the small budget of the local, rural HMO?

In light of the Patients Bill of Rights debate and the managed care horror stories I have shared with my colleagues in the past, I wonder if we should be subjecting rural America to monopolistic "managed care" unless much stronger consumer protections and quality measures are in place.

Providers are also having a difficult time with managed care. In a recent Project Hope survey, providers reported very serious problems with HMO reimbursement, clinical review, and paperwork. We should not encourage the growth of a health system with this many problems.

The most valuable thing managed care offers is coordinated follow-up care. This is an administrative function. Providers in areas without managed care can serve this function effectively. We can reap the benefits of managed care without throwing more money at an idea that simply will not work. The bill I am proposing would pay rural providers a special amount to provide the best thing that managed care has to offer: care management.

Some Members believe that bringing managed care into rural areas would bring prescription drug coverage to rural beneficiaries. This is not likely. Managed care needs competition in order to work. But there will never be competition in many rural areas. The problem is that rural areas do not have "extra" providers to compete against one other.

Competition is also what results in extra benefits in Medicare managed care. Health plans vying for greater enrollment entice beneficiaries to their plan by providing extra benefits, such as prescription drug coverage and zero deductibles. Due to the lack of competition, these extra benefits will seldom be offered in rural areas. A recent GAO report noted that prescription drugs were the only extra benefit for which overall beneficiary access increased in 1999. However, access to prescription drugs actually decreased in lower payment (i.e., rural) areas. This decrease occurred despite the 23 percent payment increase in low-payment counties (compared to only 4 percent increase in all other counties). The GAO report proves that more money will not guarantee extra benefits in rural areas. We must find creative alternatives to solve the unique problems of health access in rural America.

Managed care is not a silver bullet solution for delivering health care. In the best of worlds, managed care can offer coordinated health services for enrollees. The same function can be provided by providers who live in rural areas and have an established relationship with their patients. This bill eliminates the middle man by sending payments directly to

providers in rural areas. Instead of spending money to create managed care plans in areas of provider shortages, this bill helps to improve the quality of care by putting the money where it is needed most. I strongly encourage members' support.

IN RECOGNITION OF OCCUPATION
THERAPY MONTH

HON. ELLEN O. TAUSCHER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, April 29, 1999

Mrs. TAUSCHER. Mr. Speaker, I rise in recognition of Occupation Therapy Month and in recognition of the invaluable services that occupational therapists provide to their patients. Occupational therapists provide people with the support, the rehabilitation, and the medical care that enables them to live full lives and function at the highest possible level, despite disability, illness, injury, or other limitations. Occupational therapists work in nursing homes, support individuals with mental illnesses, assist physically disabled individuals in performing ordinary life activities, and help children in our schools learn at the highest level. Occupational therapy is a necessary component of quality medical care in that it allows individuals who face physical challenges to retain their independence and to perform the daily activities that we all take for granted.

I know from personal experience that this is true. A number of years ago, my father contracted Guillan-Barre Syndrome, a devastating illness which leaves the individual in temporary paralyzed state. We were truly fortunate that we had the highest quality medical care. The doctors saved my father's life. The therapists gave him his life. Their expertise and specialized knowledge allowed him to resume his daily activities and stay independent.

My daughter Katherine is an active, energetic seven-year old who plays soccer and a number of other sports. Seeing her today, you would never guess that as an infant she spent a year of her life in a full body cast because of problems with her hip. Again, we had the most qualified and experienced doctors caring for her, but I believe that it was her therapists who were responsible for assuring that she would remain active and energetic for the rest of her life.

Quality medical care is a composite and I would like to recognize the contribution that occupational therapists make in assuring that our medical system not only cures patients, but allows them to live their lives to the fullest.

THE COURAGE OF ONE'S
CONVICTIONS

HON. CHRISTOPHER H. SMITH

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Thursday, April 29, 1999

Mr. SMITH of New Jersey. Mr. Speaker, I want to call my colleagues' attention to the incisive commentary on the moral and religious dimensions of the horrific tragedy in Littleton, Colorado by Charles W. Colson, who many believe is one of the greatest Christian leaders in the world.

The senseless killings at the Columbine High School are a direct challenge to human decency and powerfully underscore the consequences that can occur when the value of human life is eroded by our society and culture.

Below is the full text of Mr. Colson's analysis of the killings, with a special emphasis on the heroism and courage of Cassie Bernall, who was gunned down, point blank, for merely professing her faith in God publicly.

[BreakPoint Commentary, Apr. 26, 1999]

LITTLETON'S MARTYRS

(By Charles W. Colson)

It was a test all of us would hope to pass, but none of us really wants to take. A masked gunman points his weapon at a Christian and asks, "Do you believe in God?" She knows that if she says "yes," she'll pay with her life. But unfaithfulness to her Lord is unthinkable.

So, with what would be her last words, she calmly answers "yes, I believe in God."

What makes this story remarkable is that the gunman was no communist thug, nor was the martyr a Chinese pastor. As you may have guessed, the event I'm describing took place last Tuesday in Littleton, Colorado.

As the Washington Post reported, the two students who shot 13 people, Eric Harris and Dylan Klebold, did not choose their victims at random—they were acting out of a kaleidoscope of ugly prejudices.

Media coverage has centered on the killers' hostility toward racial minorities and athletes, but there was another group the pair hated every bit as much, if not more: Christians. And, there were plenty of them to hate at Columbine High School. According to some accounts eight Christians—four Evangelicals and four Catholics—were killed.

Among them was Cassie Bernall. And it was Cassie who made the dramatic decision I've just described—fitting for a person whose favorite movie was "Braveheart," in which the hero dies a martyr's death.

Cassie was a 17-year-old junior with long blond hair, hair she wanted to cut off and have made into wigs for cancer patients who had lost their hair through chemotherapy. She was active in her youth group at Westpool's Community Church and was known for carrying a Bible to school.

Cassie was in the school library reading her Bible when the two young killers burst in. According to witnesses, one of the killers pointed his gun at Cassie and asked, "do you believe in God?" Cassie paused and then answered, "Yes, I believe in God." "Why?" the gunman asked. Cassie did not have a chance to respond; the gunman had already shot her dead.

As her classmate Mickie Cain told Larry King on CNN, "She completely stood up for God. When the killers asked her if there was anyone who had faith in Christ, she spoke up and they shot her for it."

Cassie's martyrdom was even more remarkable when you consider that just a few years ago she had dabbled in the occult, including witchcraft. She had embraced the same darkness and nihilism that drove her killers to such despicable acts. But two years ago, Cassie dedicated her life to Christ, and turned her life around. Her friend, Craig Moon, called her a "light for Christ."

Well, this "light for Christ" became a rare American martyr of the 20th Century. According to the Boston Globe, on the night of her death, Cassie's brother Chris found a poem Cassie had written just two days prior to her death. It read:

Now I have given up on everything else
I have found it to be the only way
To really know Christ and to experience

The mighty power that brought
Him back to life again, and to find
Out what it means to suffer and to
Die with him. So, whatever it takes
I will be one who lives in the fresh
Newness of life of those who are
Alive from the dead.

The best way all of us can honor Cassie's memory is to embrace that same courageous commitment to our faith. For example, we should stand up to our kids when they want to play violent video games. We should be willing to stand up to community ridicule when we oppose access to Internet pornography at the local library.

For the families of these young martyrs, I can only offer deep personal sympathy and the hope that they might take strength from the words Jesus spoke to the woman who honored Him by pouring ointment on His head. "Wherever this gospel is preached in the whole world, what she has done will be told in memory of her" (Matthew 26:13).

"Well done, good and faithful servant. Now enter into the joy of your Lord" (Matthew 25:23).

CLEVELAND CATHOLIC BLIND COMMUNITY'S 50TH ANNIVERSARY

HON. DENNIS J. KUCINICH

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, April 29, 1999

Mr. KUCINICH. Mr. Speaker, I rise today to recognize the Cleveland Catholic Blind Community for 50 years of providing support to the city's blind residents.

The Catholic Blind Community, an organization for blind and partially sighted Catholics, was founded in 1949 by Mr. and Mrs. Glenn Hoffman. Because Mr. Hoffman himself was blind and his wife was partially sighted, they clearly understood the needs and challenges faced by the visually impaired. According to Mr. Green, the first president of the Catholic Blind Community, the group represented an effort "to bring blind people into the Church and bring the Church closer to the blind." This mission was achieved with help from members of the St. Vincent de Paul society.

By the mid-1970s, the organization had grown significantly in size and began meeting regularly at the St. Augustine Parish. The Catholic Blind Community soon joined in partnership with the parish and began working with the hunger center, the Deaf Community, and support groups established at the parish for those suffering from mental disabilities and illnesses. The blind quickly became integral members in the parish by singing in the choir, serving as lectors and Eucharistic ministers, serving on the parish council and planning parish activities.

In 1994 the Catholic Blind Community organized the Catholic Blind Association, a voluntary association that is Catholic in character but welcomes members of all faiths. This additional group was organized to provide greater service to the Blind Community. The Blind Community now boasts a membership of 225 blind individuals.

I would like to take this opportunity to commend Mr. Jim Green, the organization's first president who served for nine years and is honored by the group for his 50 years of volunteerism and leadership by voting him president in this anniversary year.

Through its dedicated efforts, the group has worked to improve the quality of life for the blind. On behalf of all those whose lives have been affected by the group, I offer my congratulations to the Cleveland Catholic Blind Community for 50 years of service.

TRIBUTE TO EDWARD BOELE

HON. GEORGE RADANOVICH

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, April 29, 1999

Mr. RADANOVICH. Mr. Speaker, I rise to pay tribute to Ed Boele for his dedicated loyalty to Electric Motor Shop for 53 years. Mr. Boele started working at the Electric Motor Shop on New Year's Day in 1946, and has been employed ever since.

Ed Boele is as enthusiastic today as he was on his first day back in 1946. Electric Motor Shop has been in Fresno since 1913. The need for electric motors flourished in Fresno and the San Joaquin Valley due to the agriculture. Ed Boele hasn't quite figured out what to call himself, he isn't an electrical technician, but he serves a vital purpose at the shop. Customer service is a large part of Boele's daily routine. He also purchases many of the electrical motors for the shop.

When Ed started, he didn't know a nut from a bolt, his knowledge of electrical motors comes from years of working at the shop, and he says he's not done learning. Ed never considered quitting his work at the shop and told Frank that he would give him a years notice when he was ready to retire. In January 1998, at the age of 68, Ed finally gave Frank his years notice.

Mr. Speaker, I rise today to pay tribute to Ed Boele on his retirement from Electric Motor Shop. Mr. Boele has been a dedicated employee from the first day he started. I urge my colleagues to join me in wishing Ed Boele happiness in his retirement.

CELEBRATING A LIFETIME OF ACHIEVEMENTS

HON. JAMES A. BARCIA

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Thursday, April 29, 1999

Mr. BARCIA. Mr. Speaker, it gives me great pleasure today to honor a dedicated father of four wonderful children and three grandchildren, a loyal and supportive friend, an outstanding humanitarian and a fiercely focused hardworking self-made entrepreneur, respected by all of his peers, Paul Mark Monea.

Paul was born in the beautiful countryside of Ohio to George and Sylvia Monea, immigrants from Romania and Switzerland, respectively. George Monea missed his date with destiny by being two days late for the ill-fated Titanic on which he was scheduled to travel. Paul's parents always taught and instilled the virtues of honesty, integrity and family values. Although some individuals and trusted professional advisors over the years have taken incredible unfair advantage of Paul and his family, he has always stood by his upbringing motto, "right will always ultimately win out."

Today I join Paul's children, Andrew, Michele, Brooke and Blake, his three grandchildren, Alex, Sean, and Brandon, his family