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House of Representatives

The House met at 10 a.m. and was called to order by the Speaker pro tempore (Mr. PEASE).

DESIGNATION OF THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,
October 8, 1999.

I hereby appoint the Honorable EDWARD A. PEASE to act as Speaker pro tempore on this day.

J. DENNIS HASTERT,
Speaker of the House of Representatives.

PRAYER

The Chaplain, Reverend James David Ford, D.D., offered the following prayer:

Let us pray using the words of Psalm 92:

It is good to give thanks to the Lord,
To sing praises to Your name, O most high;
to declare Your steadfast love in the morning,
And Your faithfulness by night,
to the music of the lute and the harp,
to the melody of the lyre.
For you, O God, have made me
glad by Your work;
at the works of Your hands I sing for joy.
Amen.

THE JOURNAL

The SPEAKER pro tempore. The Chair has examined the Journal of the last day's proceedings and announces to the House his approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER pro tempore. Will the gentleman from Guam (Mr. UNDERWOOD) come forward and lead the House in the Pledge of Allegiance.

Mr. UNDERWOOD led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 1999, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

U.S. NAVY AND MSC SEND AMERICAN SHIPYARDS JOBS OVERSEAS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Guam (Mr. UNDERWOOD) is recognized for 5 minutes.

Mr. UNDERWOOD. Mr. Speaker, for years in this Nation we have passed all kinds of laws and regulations to help protect American jobs and America's industrial base. Indeed, the U.S. military has long supported this assertion, and has been an integral part of maintaining a high level of readiness through the preservation and maintenance of a strong domestic industrial base. Along with this capacity comes the value and know-how of America's skilled work force.

In a day and age where the American skilled worker has sometimes become an endangered species, the Federal Government, in particular the Department of Defense, should try to preserve and defend these jobs. For 80 years these types of jobs were the backbone of the middle class in many communities throughout our country, including my home island of Guam.

Mr. Speaker, one would think that U.S. tax dollars would be spent here in this country to preserve this legacy. One would think that the Department of Defense would sooner spend these

tax dollars here to preserve American jobs. But sadly, it seems that the U.S. military would rather spend these tax dollars in Japan or Korea or Singapore, to the loss of U.S. jobs.

Here is the outrageous truth, Mr. Speaker: The U.S. Navy and the Military Sealift Command annually send U.S. jobs overseas so they can save a few bucks. This is the truth. The MSC asks every year the Navy permission to have U.S.-flagged, U.S.-crewed, U.S.-owned and operated military ships to be repaired in foreign shipyards because it is cheaper.

We may ask ourselves, well, lower costs to the Navy mean my tax dollars may go further. This is what the Navy and the MSC say. They tell me that they are cost-driven.

The fact is that foreign shipyards can always beat U.S. shipyards in terms of price for several reasons, primarily because foreign shipyards are subsidized by their central governments. Foreign shipyards do not have to pay their workers decent wages. Foreign shipyards do not have to comply with health and safe work environments.

We tried to solve this problem by an amendment that I introduced in the 104th Congress to title X which requires the Navy, including MSC, their vessels, to make sure that their ships are repaired in American shipyards. My amendment added Guam to that, because Guam is part of the United States.

But in recent years, the Navy has adopted a subterfuge in this. They have established an internal waiver policy that essentially defeats the congressional intent of title X, and the Navy has implemented a policy of not designating any home port for Military Sealift Commands, so they can undermine the intent of this law. This has resulted in the denial of Navy MSC work to Guam, Hawaiian, Alaskan, and Californian shipyards.

Mr. Speaker, this sham that the Navy and MSC purports will save

□ This symbol represents the time of day during the House proceedings, e.g., □ 1407 is 2:07 p.m.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.



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money is a farce. It may save money, but at the cost of thousands of jobs. This will then increase reliance on unemployment insurance and welfare rolls, and further erode America's industrial capacity.

In summary, the Navy and MSC are doing two things. They are violating the congressional spirit and intent of the law to preserve jobs and save a few dollars. Two, they are handing U.S. shipyards jobs overseas.

I will be sending a Dear Colleague letter around to sign onto a letter to Secretary of Defense Bill Cohen to tell him that this practice is wrong, it is harmful to the national security of this Nation, and impedes readiness. I hope Members of this body will join me in this endeavor.

THE PROBLEMS WITH THE DINGELL-NORWOOD HEALTH CARE REFORM BILL

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Washington (Mr. NETHERCUTT) is recognized for 5 minutes.

Mr. NETHERCUTT. Mr. Speaker, yesterday the House of Representatives voted on different versions of health care reform. I believe that every one of our colleagues who spoke on this issue and voted on this issue had the best interests of patients in mind as they cast their votes.

There were two issues that were discussed this week in connection with health care reform and patient care. First, we passed legislation this week to increase the access of patients to health care insurance coverage. That was a very important effort that was undertaken by the House of Representatives.

Second and most recently, yesterday we considered changes in the law to deal with the problems that patients have had with their health maintenance organizations, a problem that was illustrated time and time again by Members who stood here on the floor of the House.

For me, I believe insurers should be held accountable for their actions if they cause actions that hurt a patient or inactions that hurt a patient that is covered by a plan. I happen to support the coalition substitute amendment introduced by the gentleman from Florida (Mr. GOSS) and the gentleman from California (Mr. THOMAS), the gentleman from Oklahoma (Mr. COBURN) and the gentleman from Arizona (Mr. SHADEGG), among others.

This legislation provided the protection I felt patients needed, and encourages care rather than lawsuits. It contained an internal and external appeals process that requires a faster response than required by the bill which ultimately passed the House yesterday afternoon, as sponsored by the gentleman from Georgia (Mr. NORWOOD) and the gentleman from Michigan (Mr. DINGELL).

The coalition bill, the bill that I supported, requires expedited appeals to be resolved in 48 hours, as opposed to the 72 hours that are set forth in the Norwood bill. I want my colleagues and others, Mr. Speaker, to understand that there were many similarities in the Norwood bill and the coalition bill, which I will call it.

Both guarantee patients the right to choose a doctor outside their network. Both guarantee women direct access to obstetrical-gynecological care. Both guarantee access to specialists. Both guarantee children direct access to pediatric care. Both guarantee coverage for emergency medical services without prior authorization, which is an important issue. Both guarantee coverage of a terminated provider for patients undergoing a course of treatment. Both prohibit so-called gag clauses. Both forbid insurers from offering providers incentives for denying coverage. Both provided a grievance process for beneficiaries to file complaints.

Both allow patients to appeal denial of benefits, but the coalition bill actually requires a faster response than mandated by the Norwood bill, the difference between the 48-hour expedited appeals process and the 72-hour process in the Norwood bill.

Both allow patients to sue their health maintenance organizations if they are hurt by them. The coalition bill allows patients to sue their HMOs in Federal court once they have exhausted the internal and external appeals process. The Norwood bill allows patients to bring lawsuits in State courts, which have 50 different States with 50 different sets of rules. To me, that was a cumbersome process, and very difficult for employers to try to deal in 50 different States with 50 different laws relative to liability.

The Norwood bill puts employers at risk for lawsuits. I know there was a great deal of debate on that issue, and interpretation of language and counter-interpretation of language. But the facts are that the Norwood bill puts employers at risk for lawsuits, greater risk, without having a more extensive, exhaustive process before we ever get to a lawsuit.

Employers offer health insurance benefits voluntarily. I fear that if the stability of their business is at risk due to a threat of a lawsuit, under the measure that was passed yesterday, employers would just say, no, we are not going to offer health insurance any longer.

Washington State, my State, is currently facing a crisis in its individual insurance market. Excessive regulations have driven insurers out of our State. Those who have remained are no longer taking new enrollees. That is a problem for people in my State who seek insurance coverage. Individuals can no longer buy insurance in most of our State, even if they have the money.

So excessive regulation, frivolous lawsuits, and risk to employers created

by the Norwood bill will create the same problem in the group insurance market across the country. I think that would be an unintended consequence of our debate that occurred here yesterday and earlier this week.

The last thing we need, Mr. Speaker, is a government-run, massively complicated health care program. I fear we are heading toward that if the Norwood bill becomes law.

So my hope would be that those who are conferees on this issue and others who have an interest in this debate would work hard to get the facts out about the potential consequences or unintended consequences of an extensive, mandated legislation for health care that will drive people off the insurance rolls and then lead to, ultimately, the unintended consequence of a massive health care plan run by the Federal Government that was rejected so forcefully in 1993 and 1994.

□ 1015

NORTH CAROLINA IN AFTERMATH OF HURRICANE FLOYD

The SPEAKER pro tempore (Mr. PEASE). Under a previous order of the House, the gentlewoman from North Carolina (Mrs. CLAYTON) is recognized for 5 minutes.

Mrs. CLAYTON. Mr. Speaker, the sunshine is shining in eastern North Carolina, the rivers have crested, and the water has receded. People are beginning to have a sense of hope. But at the same time, there is great devastation as a result of the floods of the century having occurred in eastern North Carolina.

More than 32 counties were affected by Hurricane Floyd. Out of the 32 counties, there was severe flooding in at least 20 or more of those counties. Fourteen of those counties happen to be in my district. At the last count, more than 54,000 persons had called FEMA's telephone on-line intake service indicating they needed service. At the peak of this hurricane, there were more than 46,000 individuals huddled in various makeshift shelters throughout the district. People were sleeping in cars, neighbors took other people in, and roads were in great devastation. The lives that were lost, the last count as of last Friday, there were 48 persons who were dead in North Carolina as a result of Hurricane Floyd. In fact, some 66 from the East Coast, including persons who died in Pennsylvania and New York as well as in Virginia.

This hurricane has brought great devastation and has taken the lives of a lot of people. Teshika Vines I have here is one of those casualties, but her story is the story of a neighbor helping neighbors. The story is that her grandfather had taken she and three other members of the family out on a boat to safety, saw their neighbors and took onto their boat four other persons. When the boat landed on the shore, it was missing six persons. The grandfather and Teshika, one person from