

an enormous financial and time consuming burden to the families of the senior or disabled citizens; and

Whereas, The medicare home health cuts will most likely shift service needs and costs to more expensive state programs, especially long-term care facilities, thus resulting in an unfunded mandate to Kansas and resulting in greater expense to both medicare and medicaid: Now, therefore, be it

Resolved by the House of Representatives of the State of Kansas, the Senate concurring therein: That the Legislature hereby requests Congress to rescind the provisions of the Balanced Budget Act of 1997 related to the interim payment system for medicare home health services; and be it further

Resolved: That the Secretary of State is hereby directed to send enrolled copies of this resolution to the President and President pro tempore of the Senate of the United States, to the Speaker of the House of Representatives of the United States and to each member of the Kansas Congressional Delegation.

POM-57. A joint resolution adopted by the Legislature of the State of Montana; to the Committee on Finance.

JOINT RESOLUTION NO. 5

Whereas, the ever-increasing cost of prescription drugs and long-term care is beyond the income of most senior citizens; and

Whereas, 30 years ago the average monthly Social Security check would more than cover a month's stay in a nursing home as well as pay the cost of prescription drugs, while today the average monthly Social Security check will not pay for 1 week's stay in a nursing home; and

Whereas, prescription drugs can be purchased in either Mexico or Canada for one-fourth to one-third of the cost in the United States; and

Whereas, the cost of research and development of prescription drugs in the United States is so high that pharmaceutical companies must sell their product for as great a price as the market will bear in order to recoup some of those research and development costs; and

Whereas, billions of dollars are wasted because Congress will not allow Medicare to use competitive bidding in ordering supplies and equipment; and

Whereas, according to government estimates, Medicare improperly paid approximately \$23 billion in the 1997 fiscal year because of fraud and abuse: Now, therefore, be it

Resolved by the Senate and the House of Representatives of the State of Montana:

(1) That the United States Congress is urged to enact legislation to place long-term care and prescription drugs in the Medicare program and that in order to pay for these changes to the Medicare program, a serious effort to eliminate fraud and abuse be inaugurated and that Congress give Medicare the right to use competitive bidding for purchasing prescription drugs and other supplies.

(2) That the federal government is urged to take serious measures to eliminate fraud and abuse wherever it may be found in the expenditure of federal tax dollars.

(3) That the United States Congress review the necessity for statutes and regulations that contribute to the high cost of research and development of prescription drugs in the United States and revise or eliminate those statutes and regulations that cause or contribute to the high cost of research and development of those drugs; be it further

Resolved, that the Secretary of State send a copy of this resolution to the President of the United States, the Speaker of the United

States House of Representatives, the President of the United States Senate and to each member of the Montana Congressional Delegation.

POM-58. A resolution adopted by the Council of the City of Cincinnati, Ohio relative to the Social Security system; to the Committee on Finance.

POM-59. A resolution adopted by the Council of the City of Cincinnati, Ohio relative to the decennial census; to the Committee on Governmental Affairs.

POM-60. A resolution adopted by the Senate of the Legislature of the State of Michigan; to the Committee on Commerce, Science, and Transportation.

SENATE RESOLUTION NO. 9

Whereas, The fragile ecology of the Great Lakes has been threatened by new species of fish and plant life introduced into this water system by ships releasing ballast water. In recent years, the zebra mussel, ruffe, and goby have posed significant challenges to the delicate balance of the most important fresh water resource of North America and the largest and most accessible source of fresh water in the world; and

Whereas, With changing technologies in the shipping industry and in the ability to monitor and test water, there are opportunities to make progress in the effort to halt the introduction of more nonindigenous species into the Great Lakes. Congress can contribute enormously to this work through stronger legislation to prohibit the dumping of ballast water in the Great Lakes water system and grants to promote better compliance; and

Whereas, The quality of the Great Lakes will play a large role in shaping the future not only for Michigan and the United States, but for all of North America; now, therefore, be it

Resolved by the Senate, That we memorialize the Congress of the United States to strengthen measures to prohibit the dumping of shipping ballast water into the Great Lakes and connecting waterways; and be it further

Resolved, That copies of this resolution be transmitted to the President of the United States Senate, the Speaker of the United States House of Representatives, and the members of the Michigan congressional delegation.

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second time by unanimous consent, and referred as indicated:

By Mr. BENNETT (for himself, Mr. MACK, Mr. MURKOWSKI, and Mr. SANTORUM):

S. 881. A bill to ensure confidentiality with respect to medical records and health care-related information, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

By Mr. MURKOWSKI (for himself, Mr. HAGEL, Mr. BYRD, Mr. CRAIG, Mr. ROBERTS, Mr. GRAMS, Mr. HUTCHINSON, Mr. ENZI, Mr. SMITH of Oregon, and Mr. MCCAIN):

S. 882. A bill to strengthen provisions in the Energy Policy Act of 1992 and the Federal Nonnuclear Energy Research and Development Act of 1974 with respect to potential Climate Change; to the Committee on Energy and Natural Resources.

By Mr. BIDEN:

S. 883. A bill to authorize the Attorney General to reschedule certain drugs that

pose an imminent danger to public safety, and to provide for the rescheduling of the date-rape drug and the classification of a certain "club" drug; to the Committee on the Judiciary.

By Mr. SARBANES (for himself, Mr. TORRICELLI, and Mr. HUTCHINSON):

S. 884. A bill to establish the National Military Museum Foundation, and for other purposes; to the Committee on Armed Services.

By Mr. BIDEN:

S. 885. A bill to amend the Public Health Service Act and the Federal Food, Drug, and Cosmetic Act to provide incentives for the development of drugs for the treatment of addiction to illegal drugs, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

By Mr. HELMS:

S. 886. An original bill to authorize appropriations for the Department of State for fiscal years 2000 and 2001; to provide for enhanced security at United States diplomatic facilities; to provide for certain arms control, nonproliferation, and other national security measures; to provide for the reform of the United Nations; and for other purposes; from the Committee on Foreign Relations; placed on the calendar.

By Mr. SHELBY:

S. 887. A bill to establish a moratorium on the Foreign Visitors Program at the Department of Energy nuclear laboratories, and for other purposes; to the Committee on Armed Services.

By Mr. MURKOWSKI (for himself, Mr. AKAKA, Mr. STEVENS, and Mr. INOUE):

S. 888. A bill to amend the Internal Revenue Code of 1986 to modify the air transportation tax changes made by the Taxpayer Relief Act of 1997; to the Committee on Finance.

By Mrs. HUTCHISON (for herself, Mr. SANTORUM, and Mr. COCHRAN):

S. 889. A bill to amend the Internal Revenue Code of 1986 to provide tax credit for investment necessary to revitalize communities within the United States, and for other purposes; to the Committee on Finance.

By Mr. WELLSTONE (for himself, Mr. ROBB, and Mr. FEINGOLD):

S. 890. A bill to facilitate the naturalization of aliens who served with special guerrilla units or irregular forces in Laos; to the Committee on the Judiciary.

By Mr. SCHUMER:

S. 891. A bill to amend section 922(x) of title 18, United States Code, to prohibit the transfer to and possession of handguns, semi-automatic assault weapons, and large capacity ammunition feeding devices by individuals who are less than 21 years of age, and for other purposes; to the Committee on the Judiciary.

By Mr. HATCH (for himself, Mr. BAUCUS, Mr. MACK, Mr. BRYAN, Mr. MURKOWSKI, and Mr. BREAUX):

S. 892. A bill to amend the Internal Revenue Code of 1986 to permanently extend the subpart F exemption for active financing income; to the Committee on Finance.

By Mr. GORTON (for himself and Mrs. MURRAY):

S. 893. A bill to amend title 46, United States Code, to provide equitable treatment with respect to State and local income taxes for certain individuals who perform duties on vessels; to the Committee on Commerce, Science, and Transportation.

By Mr. JEFFORDS (for himself, Mr. LEAHY, Mr. SPECTER, Mr. COCHRAN, Mr. MOYNIHAN, Mr. SESSIONS, Ms. SNOWE, Mr. LOTT, Ms. LANDRIEU, Ms. COLLINS, Mr. KENNEDY, Mr. SCHUMER, Mr. SHELBY, Ms. MIKULSKI, Mr. HOLLINGS, Mr. HUTCHINSON, Mr. DODD,

Mr. BREAUX, Mr. THURMOND, Mr. CHAFFEE, Mr. SMITH of New Hampshire, Mr. SARBANES, Mr. COVERDELL, Mr. CLELAND, Mr. GREGG, Mr. REED, Mr. KERRY, Mr. HELMS, Mr. BYRD, Mr. TORRIGELLI, Mr. EDWARDS, Mr. LIEBERMAN, Mr. ASHCROFT, Mr. ROCKEFELLER, Mrs. LINCOLN, Mr. BIDEN, Mr. FIRST, Mr. BOND, and Mr. THOMPSON):

S.J. Res. 22. A joint resolution to reauthorize, and modify the conditions for, the consent of Congress to the Northeast Interstate Diary Compact and to grant the consent of Congress to the Southern Diary Compact; read the first time.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. DURBIN (for himself and Mr. FITZGERALD):

S. Res. 86. A resolution supporting the National Railroad Hall of Fame, Inc. of Galesburg, Illinois, in its endeavor to erect a monument known as the National Railroad Hall of Fame; to the Committee on Commerce, Science, and Transportation.

By Mr. DURBIN (for himself, Mr. BOND, and Mr. MOYNIHAN):

S. Res. 87. A resolution commemorating the 60th Anniversary of the International Visitors Program; to the Committee on Foreign Relations.

By Mr. SMITH of Oregon (for himself, Mr. WELLSTONE, Mr. THOMAS, Mr. SARBANES, and Mr. BROWNBACK):

S. Con. Res. 30. A concurrent resolution recognizing the sacrifice and dedication of members of America's non-governmental organizations and private volunteer organizations throughout their history and specifically in answer to their courageous response to recent disasters in Central America and Kosovo; to the Committee on Foreign Relations.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. BENNETT (for himself, Mr. MACK, Mr. MURKOWSKI, and Mr. SANTORUM):

S. 881. A bill to ensure confidentiality with respect to medical records and health care-related information, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

THE MEDICAL INFORMATION PROTECTION ACT OF 1999

Mr. BENNETT. Mr. President, I rise today to introduce the Medical Information Protection Act of 1999. Trying to find the right balance between legitimate uses of health care data and the need for privacy has been a very difficult road to go down; however, I feel that great progress has been made and that the legislation that I am introducing strikes the right balance between the desire the patient has for increased confidentiality and the need our health care system has for information that will enable it to provide a higher quality of care. I am pleased that Senators MACK, MURKOWSKI and SANTORUM have joined me as co-sponsors of this legislation and I am hope-

ful that a number of other senators will soon join us as well. In addition, I am pleased to include in the record a list of groups that have come out in support of this legislation. I am grateful for the many comments and suggestions I have received from a wide variety of organizations and individuals.

Most of us wrongly assume that our personal health information is protected under federal law. It is not. Federal law protects the confidentiality of our video rental records, and federal law ensures us access to information about us such as our credit history. However, there is no current federal law which will protect the confidentiality of our medical information against unauthorized use and ensure us access to that same sensitive information about us. This is a circumstance that I believe should and must change.

At this time, the only protection of an individual's personal medical information is under state law. These state laws, where they exist, are incomplete, inconsistent and in most cases inadequate. At last check, there were approximately 35 states with 35 unique laws governing the use and disclosure of medical information. Even in those states where there are existing laws, there is no penalty for releasing and disseminating the most private information about our health and the health care we have received.

As our health care delivery systems continue to expand across state lines, efficiency, research advances and the delivery of the highest quality of care possible depend upon the flow of information. This year alone, a large number of states have either considered passing new legislation or have attempted to modify existing laws. As states act to meet the concerns of their residents, the patchwork of state laws become ever more complex. If this trend continues, the high quality care and research breakthroughs we have come to expect and demand from our health care system would be jeopardized because health care organizations would be forced to track and comply with multiple, conflicting and increasingly complex state laws.

Clearly, in today's world, health information must be permitted to flow across state lines if we are to expect the highest level of health care. For example, in Utah, Intermountain Health Care (IHC), the largest care provider based in my state also provides care in four other western states. IHC currently maintains secure databases of patient information which each of its member facilities in Utah, Nevada, Idaho and Wyoming draw upon to provide and improve care. Requiring them to comply with multiple state laws does not add to the quality of health care they provide, but does add to the cost of health care they provide. Many IHC patients live in one state yet their closest hospital, clinic or physicians office is in another state. I am sure this example appears throughout the country in one form or another given

the consolidation of the health care industry and the large percentage of us who live near state lines.

In addition, we are seeing an emergence of telemedicine and health care services over the internet that adds another degree of complexity to this entire circumstance. Technology is not only improving the quality of care and improving patient access to services, it is also making the need for one strong federal law more critical. The majority of providers, insurers, health care professionals, researchers and patients agree that there is an increasingly urgent need for uniformity in our laws that govern access to and disclosure of personal health information.

Mr. President, I remind my colleagues that if we do not act by August of 1999 the Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires the Secretary of Health and Human Services (HHS) to put in to place regulations governing health information in an electronic format. Thus, we could have a circumstance where paper based records and electronic based records are treated differently. I do not believe Congress wants to protect one form of medical records and not another, and I do not think that we should permit the Secretary of Health and Human Services to implement regulations without further direction from the Congress. Congress should not neglect its responsibility and duty to legislate and provide appropriate direction to the executive branch. I urge my colleagues to work with me to pass legislation that would give HHS clear direction and provide each American with greater protection of their health information.

Mr. President, I ask unanimous consent that the bill and a list of groups supporting this legislation be included in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

S. 881

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

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Medical Information Protection Act of 1999".

(b) TABLE OF CONTENTS.—The table of contents for this Act is as follows:

- Sec. 1. Short title; table of contents.
- Sec. 2. Findings.
- Sec. 3. Purposes.
- Sec. 4. Definitions.

TITLE I—INDIVIDUAL'S RIGHTS

Subtitle A—Review of Protected Health Information by Subjects of the Information

- Sec. 101. Inspection and copying of protected health information.
- Sec. 102. Amendment of protected health information.
- Sec. 103. Notice of confidentiality practices.

Subtitle B—Establishment of Safeguards

- Sec. 111. Establishment of safeguards.
- Sec. 112. Accounting for disclosures.

TITLE II—RESTRICTIONS ON USE AND DISCLOSURE

- Sec. 201. General rules regarding use and disclosure.