undergoing high-risk surgery in low-volume hospitals there. In 1 study, 65% of coronary artery bypass graft operations performed in California in 1989 occurred at low-volume hospitals (<200 procedures/year).[10] In New York State, which has stricter Certificate of Need regulations based in part on volume criteria, only 20% of these procedures were performed at low-volume hospitals that year.[10] More information is needed about how other high-risk procedures are being delivered in other parts of the country.

Concentrating surgery in selected referral centers would facilitate the monitoring of outcomes at individual hospitals. Many high-risk procedures are performed too infrequently to achieve statistical precision with mortality rates, particularly at low-volume hospitals. For example, what inferences could be made about outcomes at a hospital performing 3 esophagectomies a year? By concentrating selected procedures in a relatively small number of high-volume hospitals, it would be more feasible to measure outcomes aside from mortality, such as nonfatal complications, patient functional status, and costs. The ability to monitor surgical outcomes systematically would make hospitals more accountable and create ideal platforms for quality improvement initiatives.

How can the proportion of elective but high-risk procedures being performed in high-volume hospitals be increased? The least intrusive approach may be to focus on educating patients about the importance of hospital volume for specific procedures and to recommend that patients acquire this information from the hospital that they are considering for surgery. Although many hospitals do not have data on their own procedure-related morbidity and mortality rates, all hospitals should be able to provide information on the number of procedures (of a given type) they perform each year.

More active strategies also could be implemented. Leaders of large, integrated health plans could designate referral centers for selected procedures and enforce their appropriate use. Professional societies also could take a role in regionalization. For example, the American College of Surgeons Committee on Trauma has established regional trauma networks, encouraging referral of the most severely injured trauma patients to designated trauma centers that meet established process and volume criteria.[11] Through reimbursement mechanisms, large payers (both government and private) have substantial leverage to limit surgery to high-volume hospitals. For example, the Health Care Financing Administration is currently exploring the development of exclusive contracts with ''centers of excellence'' for cardiac surgery and total joint replacement for Medicare patients.[12] In addition, through the Certificate of Need process, states can reduce the proportion of surgery being performed in low-volume hospitals by limiting the proliferation of new surgical centers.[13]

Many would argue that regionalizing high-risk surgery would have adverse effects, particularly in rural areas. For patients living far from referral centers, elective surgery could create unreasonable logistical problems for patients and their families. With excessive travel burdens, some patients may even decline surgery altogether.[14] Regionalizing surgery also could interfere with continuity of care because many aspects of postoperative care, including dealing with the late complications or other sequelae of surgery, would be left to local physicians who were not involved with the surgery. Regionalization could reduce access to health care for rural patients by threatening the financial viability of local hospitals or their ability to recruit and retain surgeons. Even if regionalization had no effect on the availability of local clinicians, it could reduce their proficiency in delivering emergency care that must be handled locally. For example, the local general surgeon no longer allowed to perform elective repair of abdominal aortic aneurysms could be less prepared for emergency surgery involving a ruptured aneurysm.

However, these problems may not be as important as they were once assumed to be. Most low-volume hospitals are not located in sparsely populated rural areas; they are more commonly located in hospital-dense metropolitan areas, often in close proximity to high-volume referral centers.[10] In the analysis by Dudley et al,[9] 75% of California patients undergoing surgery at low-volume centers in 1997 would have needed to travel fewer than 25 additional miles to the nearest high-volume hospital. In fact, 25% of patients traveled farther to undergo surgery at a low-volume hospital. These data suggest that a substantial degree of regionalization could occur without separating patients and surgeons or surgical centers by prohibitive distances.

With any regulatory attempt to regionalize high-risk surgery, policy makers need to be ready for a political firestorm. Many low-volume hospitals, already under significant financial pressures, would balk at relinquishing surgical revenue and would worry that regionalizing selected high-risk procedures would later lead to restrictions on other procedures. These hospitals also would worry about being branded as second class by patients. Many surgeons required to give up part of their practices—even a small part—would view regionalization as an affront to their professional judgment and competence.

Although some physicians and some institutions would resist regionalization, the potential benefits for patients are too large to ignore. Given the current ad hoc approach to delivering high-risk surgery, it seems that almost any effort aimed at concentrating these procedures in high-volume hospitals would be an improvement.

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IN HONOR OF MY FRIEND, THE LATE DICK SELBY

HON. SAM FARR

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 21, 2000

Mr. FARR of California. Mr. Speaker, today I honor a man who dedicated his life to democratic causes and was an avid participant in local Democratic Party politics. Richard Selby passed away unexpectedly on January 6, 2000 at the age of 73.

A native of Oakland, Dick was involved in national as well as international affairs. He was a former representative of the International Monetary fund and also served as a U.S. Foreign Service Officer. On the national front, Dick was a retired lieutenant colonel in the Air Force Reserve and was active in both the National Association of Retired Federal Employees (NARFE) and the Retired Officers Association. In his capacity as legislative liaison for the local NARFE Chapter, Dick kept the membership well-informed about current federal legislative issues. Locally, Dick was the chairman of the Santa Cruz Veterans Memorial Building's board of directors.

Dick was a tireless volunteer in community affairs and Democratic campaigns. He was an avid letter writer and was known for his candor and wit.

Richard Selby will be greatly missed by those who knew him personally and professionally. Dick is survived by his wife Mary Selby of Aptos; five daughters, Leigh and Anne Selby, both of Aptos; Lynn Selby of San Francisco; Cindy Shaner of Wooster, Ohio; Robyn Barker of Sugarland, Texas and his brother Alan Selby of Santa Rosa.

FEC REFORM

HON. STENY H. HOYER

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 21, 2000

Mr. HOYER. Mr. Speaker, today, with my fellow House Administration Committee Democrats, CHAKA FATTAH, and JIM DAVIS, I am introducing a new bill to accomplish FEC reform.

Let me be clear—this bill is not and does not pretend to be campaign finance reform. Instead it is about making the Federal Election Commission more efficient, effective and responsive, and providing the agency with full funding so it can properly carry out its congressional mandate. It is about FEC reform.

The bill consists of provisions sought by the bipartisan FEC Commissioners, including six legislative changes the Republican and Democratic Commissioners agreed were of the highest priority in a letter they sent to the President and the Congress earlier this month. This

is a consensus measure that also incorporates many of the excellent ideas put forth by House Administration Committee Chairman BILL THOMAS in his bill that was unanimously voted out of the House Administration Committee last summer.

In a letter I sent to the Speaker last September, I urged him to take up and pass the similarly bipartisan measure then before the Congress. I urge him again to quickly take up this matter. This bill is an opportunity for us to work together to achieve a type of reform we all agree is both necessary and important, by providing the FEC with the tools and funding to do its job.

TRIBUTE TO DYANNE LADINE

HON. ANNA G. ESHOO

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 21, 2000

Ms. ESHOO. Mr. Speaker, I rise today to honor a distinguished American and proud Californian, Dyanne Ladine, on the occasion of her induction into the San Mateo County Women's Hall of Fame.

For more than three decades, Dyanne Ladine has focused her energy and expertise on helping those in our community who have the fewest resources and face the greatest challenges. Her degrees in law, business and religion have made her an effective and resourceful individual. She practiced law for ten years and today is an Assistant Professor of Business at the College of Notre Dame and serves as a part-time staff member for Supervisor Rose Jacobs Gibson.

In 1986, Dyanne Ladine secured a State grant and created ''Project Success'', which focused on the economic and educational needs of the African-American, Latino and Pacific Islander communities. In 1988, when all but five of the participants had found employment, Dyanne Ladine sold her home in Palo Alto and invested the profit in her principles. She moved to East Palo Alto where she created ''Lettuce Work'', a culturally diverse community cooperative which has employed fifteen women over a six-year period. In 1990, Dyanne Ladine co-convened ''EPA CAN DO'', which continues today as a viable and important community organization. She recently organized a two-day event for 100 East Palo Alto Junior High School girls to tour the College of Notre Dame and participate with the student body in sports and discussion.

Dyanne Ladine has frequently been recognized for her extraordinary work. She is proudest about being chosen ''Teacher of the Year—1998'' by her students and peers. She continues to work on numerous projects aimed at improving the lives of those around her and she is always a voice of wisdom and reason as well as an untiring, passionate crusader for justice.

Dyanne Ladine's life of leadership and community involvement is instructive to us all. Her dedication to the ideals of democracy and public service stands tall and it is fitting that she has been chosen to be inducted into the San Mateo County Women's Hall of Fame. I ask my colleagues, Mr. Speaker, to join me in honoring this great and good woman whom I'm privileged to know and call friend. We are indeed a better county, a better country and a better people because of her.

A SPECIAL TRIBUTE TO DEFIANCE COLLEGE ON THE OCCASION OF ITS ONE-HUNDRED FIFTIETH ANNIVERSARY CELEBRATION

HON. PAUL E. GILLMOR

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 21, 2000

Mr. GILLMOR. Mr. Speaker, I rise today to pay special tribute to an outstanding institution of higher education located in Ohio's Fifth Congressional District. Today, we mark the One Hundred Fiftieth Anniversary of the founding of Defiance College in Defiance, Ohio.

Defiance College is an independent, coeducational institution dedicated to educating today's young people and providing them with a clear understanding of leadership, service, and knowledge. With personal attention and an environment designed to bring out the best in education, Defiance College instills the values of integrity, diversity, and professionalism in its students.

Chartered in 1850, Defiance College continues today as a four-year liberal arts college affiliated with the United Church of Christ. Its forty undergraduate majors and graduate degrees offer students in Northwest Ohio the opportunity to achieve superbly in the classroom while also preparing them to face the challenges of the workplace.

More than one thousand students attend Defiance College with the goals and dreams of learning and understanding more about the world that surrounds them. The faculty and staff at Defiance College work tirelessly to provide a rich academic atmosphere to develop the minds and the character of the student body. Clearly, Defiance College has developed a strong reputation for success in these areas.

Mr. Speaker, education is the foundation upon which the United States rests. Through education, we provide our young people with the tools they need to face the challenges of the future. Defiance College, for one hundred fifty years, has prepared its students to be the leaders of tomorrow. For that, we owe Defiance College our gratitude and congratulations. I would urge my colleagues in the 106th Congress to stand and join me in paying special tribute to Defiance College. May its next one hundred fifty years of service be as successful as its first.

THE SURFACE TRANSPORTATION BOARD

HON. TILLIE K. FOWLER

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 21, 2000

Mrs. FOWLER. Mr. Speaker, the Surface Transportation Board (STB) announced Friday, March 17, 2000, a rulemaking to determine how future rail mergers will be judged. While a longer period of time might have been beneficial, I applaud the Board for taking this appropriate and thoughtful step in response to the concerns voiced by customers, rail employees, Wall Street and communities during its four day hearing on rail industry consolidation.

The Board, recognizing the need for updated merger standards, has moved expeditiously to provide for a much-needed pause in the industry's restructuring to permit these new standards to be developed and applied to all future mergers. The railroads are an important engine in our nation's economy—especially in the 4th District of Florida, which is a center for rail employment and activity. The STB is to be commended in for their action to ensure the industry's continued ability to fulfill that role.

LEGISLATION BENEFITS NEBRASKA AIRPORTS

HON. DOUG BEREUTER

OF NEBRASKA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 21, 2000

Mr. BEREUTER. Mr. Speaker, this Member highly commends the following March 17, 2000, Omaha World-Herald editorial to his colleagues regarding the recently approved, important aviation improvement conference report, also known as AIR21, the Aviation Investment and Reform Act for the 21st century. The editorial acknowledges that it is time for the Aviation Trust Fund to be used solely for airport improvements and maintenance, rather than being considered part of the general budget. This important change will greatly benefit Nebraska airports.

[From the Omaha World-Herald, March 17, 2000]

AIR JUSTICE

The U.S. House of Representatives' overwhelming passage of a bill to spend $40 billion over three years for air-travel improvement is good for airports in general and good for airports in Nebraska and Iowa in particular. It also addresses a point of fundamental fairness.

For years Congress has bottled up money from the Aviation Trust Fund, which takes in about $10 billion a year in user fees. The central purpose of the fund has been to finance airport improvements and maintenance, and in theory it was earmarked for that. But the money was left unspent as a piece of fiscal sleight-of-hand meant to make federal deficits appear smaller.

For Rep. Bud Shuster, R–Pa., chairman of the House Transportation Committee, it became almost a moral crusade to get the fund separated from the general budget, with its revenues to be used solely for airport projects. After years of impasse, the Senate agreed that, without actually separating the funds, spending on airports each year will equal or exceed the fund's revenues and interest.

That looks like a distinction without a difference, but so be it. That's politics. The cork is out of the bottle. At bottom, this was made possible by two factors: (1) The federal government, at least by some accounting methods, is now running surpluses, not deficits. (2) It's an election year—the House passed the measure by better than 3-to-1.

The legislation also raised the cap on airport-imposed passenger fees, from $3 to $4.50. This is mostly to the good, since local airports commonly use them for improvements to benefit those same passengers. For the record, that $1.50 increase is going to look like $6 on a lot of airline tickets.

That's because on a round-trip ticket, the fee gets you literally coming and going, and it can be imposed for a maximum of two segments on each flight. Thus, a passenger flying, say from Omaha to Orlando with a stop