

have ruled 15 times since 1995 that HMOs can be held liable. ERISA does not shield HMOs from medical malpractice liability; it only preempts State laws on coverage of administration of benefits decisions.

Unlimited lawsuits will not improve patient care in America. A recent Harvard University study found that "almost 60 percent of costs to the malpractice system would wind up in bank accounts of lawyers, court administrators and insurance systems."

The goal of patients' rights legislation should be about reducing the ranks of the uninsured and increasing access to health care coverage.

Mr. Speaker, I urge support of the Fletcher bill.

VOTE FOR THE REAL PATIENTS' BILL OF RIGHTS

(Mr. SCHIFF asked and was given permission to address the House for 1 minute.)

Mr. SCHIFF. Mr. Speaker, I rise in support of the Norwood-Dingell-Ganske Patients' Bill of Rights.

For 5 years now, advocates of better health care have advocated for the real Patients' Bill of Rights, only to see that legislation shot down in this House. This year, the fight goes on, and this year, as in the fight with campaign finance reform, opponents of a real Patients' Bill of Rights have offered a phoney. They cannot defeat it directly, so they try to defeat it indirectly with a watered-down, industry-supported version.

Mr. Speaker, we must reject this. To use the parlance of the industry itself, we ought to tell the industry, we need strong medicine to restore the relationship between patients and their physicians, and that bill, that alternative, is simply not on the formulary. That bill exceeds the scope of coverage. That bill simply cannot get in the door without referrals to specialists.

We need a real Patients' Bill of Rights. I worked on a real Patients' Bill of Rights in California and, like my colleague, we passed that bill, as in 30 other States, and now the alternative here, the Fletcher bill, would undermine the work of so many States around the country that have worked to foster the relationship between patient and physician. This cannot be allowed to happen.

NATIONAL MISSILE DEFENSE

(Mr. PITTS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PITTS. Mr. Speaker, one of the marks of a good leader is the ability to make those he leads feel secure from harm.

It has now been 2 decades since President Reagan pointed out that we have no defense from a missile attack. The American people want to be safe from any missile attack, but we still have not deployed a defense system.

President Bush brought implementation of a national missile defense system one giant step closer this week. He met with Russian President Putin to talk about it. President Putin is now more open-minded about that issue, and both leaders will be working hard to reduce the number of nuclear missiles in our national arsenals.

Mr. Speaker, this is a major step forward for our national security. America and the world are a little safer today than we were yesterday. And when Bush and Putin have come to a final agreement on missile arsenals and when we finally have a national missile defense system, every American will sleep more soundly each night with the knowledge that their President is doing everything possible to keep them safe.

SUPPORT GANSKE-DINGELL PATIENTS' PROTECTION ACT

(Ms. WOOLSEY asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. WOOLSEY. Mr. Speaker, after fighting for 5 years, we finally have an opportunity to pass real managed care reform in the House of Representatives. The American people are demanding health care, and it is time for us to stand up and deliver.

By passing the Ganske-Dingell Patients' Protection Act, patients will have access to emergency care, women will be able to see their OB-GYN without health plan interference, and children will have timely access to pediatric specialists.

Mr. Speaker, make no mistake: the Ganske bill is comprehensive, quality health care; a positive step toward improving Americans' health care, putting health care ahead of profits.

When it is time to vote for managed care, I urge my colleagues to vote for the reform that has an option that puts patients and doctors back in charge of their health care.

A TRIBUTE TO FATHER JIM WILLIG

(Mr. CHABOT asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CHABOT. Mr. Speaker, this morning I would like to pay a special tribute to a recently departed friend, Father Jim Willig, a dedicated and dynamic Catholic priest who was called by our Lord last month after a 2-year battle with cancer.

Even while suffering from a debilitating illness, Father Willig continued to give to our community, sharing his memories and his message and inspirational book: *Lessons From the School of Suffering: A Young Priest With Cancer Teaches Us How to Live*.

The Cincinnati Enquirer noted that even while he faced impending death, "his faith remained strong and was an

inspiration to others, like a lighthouse on a dark and storm-tossed sea." The Cincinnati Post accurately stated that "few touched as many lives as Father Jim Willig."

Father Willig will be sorely missed in the Cincinnati community, not only by his parents and 10 brothers and sisters and nieces and nephews, but by the countless people he has touched in his ministry.

Father Jim, your flock deeply misses you, but we know you are with our Lord.

GANSKE-DINGELL-NORWOOD BEST CHOICE FOR AMERICA

(Ms. SOLIS asked and was given permission to address the House for 1 minute.)

Ms. SOLIS. Mr. Speaker, my constituents want a strong and enforceable Patients' Bill of Rights. They are tired of HMOs who deny them the health care that they need. They are tired of insurance company bureaucrats who overrule doctors' decisions. They want a bill like Ganske-Dingell-Norwood and others to protect the patients that they are supposedly required to protect because only this bill gives every American the right to choose their own doctor, the right to see health care specialists, the right to have direct access to an OB-GYN or a pediatrician, and the right to get prescription drugs that their physicians prescribe.

Only this bill holds health care plans accountable when they make a decision that harms or kills someone. Only this bill ensures that external reviews of medical decisions are conducted by independent and qualified experts.

We should take a chapter out of what happened in California. Our Governor there passed major reforms in HMOs, and I think that this House should take a look at what has happened there. They have done a fantastic job in actually being able to negotiate before they actually have to go to the court house.

Mr. Speaker, I ask for the support of my colleagues on this legislation.

V-CHIP TECHNOLOGY UNDERUTILIZED BY AMERICANS

(Mr. STEARNS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. STEARNS. Mr. Speaker, I rise to highlight a study released yesterday by the Kaiser Family Foundation indicating that few parents use the V-chip to block their children from viewing sex and violence on television.

Mr. Speaker, Congress included a provision in the Telecom Act of 1996 that television sets 13 inches or larger sold after January 1, 2000, must be equipped with a V-chip to screen out objectionable programming.

Well, yesterday's study finds that 40 percent of American parents now own a TV equipped with a V-chip. However,

despite high levels of concern about children's exposure to TV sex and violence, just 17 percent of these parents who own a V-chip, or 7 percent of all parents, are using it to block programs with sexual or violent content.

Some of my colleagues are quick to rely on government as a panacea for all of our problems. Yesterday's report reveals that the long arm of government regulation is no substitute for good parenting.

BIPARTISAN PATIENTS' PROTECTION ACT

(Ms. WATSON of California asked and was given permission to address the House for 1 minute and to revise and extend.)

Ms. WATSON of California. Mr. Speaker, I rise today to voice my strong support for the bipartisan Patient Protection Act, H.R. 2563, that will come before the House later this week.

The Ganske-Dingell bill is a step in the right direction for American health care. Doctors and patients must live with the outcome of their decisions. Now it is time for the health maintenance organizations to do the same.

Mr. Speaker, in many instances, HMOs have streamlined services and cut the cost of health administration. Spiraling costs seem to be contained, and medical options seem to be plentiful. However, containment of costs have also adversely affected the quality of patient care.

We now know that reform must happen. We now know that the middleman must be held accountable and liable for medical decisions. We now know that the basic American principles and values must be inherent in medical public policy.

The bipartisan Patient Protection Act gives all Americans the right to choose their own doctors, to hold a plan accountable when the plan makes a decision that could kill.

ENERGY POLICY

(Mr. KNOLLENBERG asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. KNOLLENBERG. Mr. Speaker, Americans are looking for quick answers on the present energy prices and burden that is put on families and farmers. Nuclear power can help lead us in the right direction to address this problem.

Nuclear power plants provide about one-fifth of America's electricity, and about 30 percent of California's electricity. They also run 24 hours a day, 7 days a week, and are not affected by inclement weather, such as solar and wind.

Besides being able to run efficiently, nuclear power has a strong environmental record. For example, nuclear plants are free of numerous gases such as sulfur dioxide, mercury, carbon emissions, and nitrogen oxide.

Mr. Speaker, it is clear that nuclear power is the answer to at least alleviating the current energy crisis. Nuclear power is shown to be a reliable source, which is why the Congress must take the necessary steps to use nuclear power to address the energy shortages, not just in California, but, of course, the rising energy prices across the country.

SUPPORT THE PATIENTS' BILL OF RIGHTS

(Mr. RODRIGUEZ asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. RODRIGUEZ. Mr. Speaker, too many times when Americans get sick, not only do they have to fight their illness, but they also have to fight their managed care company. That is not right. It is up to the Congress now to make things happen.

For the last 2 years, we passed a bill and the Republicans have killed it in conference committee. It is time to pass the bill. If my colleagues agree with me that one should see the doctor of one's choice, then they should vote for this. If they agree that that doctor should have the decision to decide if one should see a specialist or not, then they should be in favor of this. If they agree that we should not have a gag order, that doctors should be able to provide the options that one should have, then my colleagues should vote for the Patients' Bill of Rights.

Mr. Speaker, it is up to us now. It allows a review. We did it in Texas. The then Governor, now President Bush, decided then to allow it to go through. Now he has a problem with it. We are only asking that we do the same thing that we have allowed in Texas and that is to allow an opportunity for people to see a doctor of their choice, to allow an opportunity for the physicians to decide on the specialists, to allow them an opportunity to have an external review.

Mr. Speaker, I ask that my colleagues support the Patients' Bill of Rights.

TIME TO IMPLEMENT COMPREHENSIVE AND BALANCED ENERGY POLICY

(Mrs. CAPITO asked and was given permission to address the House for 1 minute.)

Mrs. CAPITO. Mr. Speaker, I come to the floor today to urge this Congress to act immediately and implement a comprehensive and balanced energy policy.

The Bush administration has provided much-needed leadership on this issue, stepping up to the plate and articulating a clear plan to address our energy needs.

One part of the President's plan calls for the construction of 1900 new power plants to catch up with the current demand for electricity. Yesterday, I introduced a bill that calls for construc-

tion of one of those plants, using clean-coal technology called coal gasification.

Building more coal gasification plants makes sense for a number of reasons. Number one, the process removes virtually all the sulfur, nitrogen, and other pollutants, leaving cleaner air and water for future generations. Two, it uses an abundant resource, coal, which is the dominant source of power in our country; and three, it means jobs. Building new power plants, coal-based or not, creates lots of new jobs, creates rail operators, barge captains, truckers, construction workers, and also those that will be running the day-to-day operations in the plant.

Today, more than ever, the U.S. needs to adopt a policy making advanced clean coal technology easier and more productive. I look forward to working with this Congress to advance this technology.

PASS MEANINGFUL PATIENTS' BILL OF RIGHTS

(Mr. ROSS asked and was given permission to address the House for 1 minute.)

Mr. ROSS. Mr. Speaker, I am proud to be a cosponsor of the Ganske-Dingell-Norwood-Berry managed care reform legislation, H.R. 2563.

I would like to take a moment to talk about one of my constituents in south Arkansas. Her name is Wendelyn Osborne, who provides a real life example of the need for a meaningful Patients' Bill of Rights.

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Mrs. Osborne has a congenital and rare bone disease that involves continuous growth of her jawbone. She was not expected to live past the age of 14. She is now 35.

Wendelyn's disease requires frequent trips to her specialist and surgeries. Unfortunately, each time she has to have an appointment, she must go through her primary care physician. Additionally, her surgeries to correct the continued growth of her jawbone, which are life-threatening, are considered cosmetic, but they are not.

The Ganske-Dingell-Norwood-Berry bill will help Wendelyn in the following ways. It will remove the gatekeeper to her medical care and allow her care to be coordinated by her specialist, and it will give her a fair and timely external appeals process that will allow her to appeal her case to independent medical experts.

Let us pass this bill. Let us pass it for Wendelyn Osborne.

INTRODUCING CHILDREN'S AIR TRAVEL PROTECTION ACT AND PARENTAL RIGHTS PROTECTION ACT

(Mr. PUTNAM asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)