

peaceful and harmonious development of Southeastern Europe. However, until that time comes, our Congress and the international community must avoid the temptation to bend the rules for Belgrade and must hold FRY to the same high standards that have been rightly required of other countries in the area.

On behalf of the National Albanian American Council,

RICHARD LUKAJ,
Chairman, Board of Trustees.

HONORING THE CONTRIBUTIONS OF MR. LES CAMPBELL

HON. JOHN W. OLVER

OF MASSACHUSETTS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 19, 2002

Mr. OLVER. Mr. Speaker, I rise today to recognize the public service contributions of Mr. Les Campbell of Belchertown, MA. Mr. Campbell's work as a nature and wildlife photographer is well known in Massachusetts' First District and throughout New England. In addition to founding several photography organizations and serving as an active or honorary member of countless others, Mr. Campbell is a tireless resource for the young photographers with whom he enjoys sharing his knowledge. Mr. Campbell, now retired, was a lifelong government employee at the Quabbin Reservoir. He has been a champion for keeping that magnificent body of water untouched by development.

On March 29, 2002 The Valley Portfolio, a community photographic resource center in Springfield, MA will present to Mr. Campbell a lifetime achievement award at a reception. On this day, members of our community will gather to celebrate his contributions and accomplishments. Mr. Campbell's awards and citations could fill a gallery. He may be the only photographer ever to receive four awards from the Photographic Society of America: (1) the Buxton Award (1958) as the world's leading exhibitor of nature prints that year, (2) the Stuyvescent Peabody Award (1972) as "the PSA member who has contributed the most to pictorial photography," (3) the Victor H. Scales award (1973) for "diligent and meritorious service to photography and the Society and especially for his untiring efforts to teach and interest young people in photography and the arts," and (4) the Appreciation Award (1981), the Society's highest award and the only one selected by its officers.

Mr. Campbell's organizational skills are legendary among those who have served alongside him in the various clubs and organizations he founded to which he belonged. In 1967 he originated Focus: Outdoors, an annual three-day environmental conference that drew as many as 1,000 participants. Mr. Campbell was named an honorary member of the New England Camera Club Council in 1968, that organization's highest award.

As president of the New England Camera Club Council he took a sleepy organization with only 13 member clubs and increased that number to 83, increased the council's treasury from less than \$25 to more than \$7,000, and created a weekend conference at the University of Massachusetts that grew from 300 to 2,000 participants in five years.

Most recently, Mr. Campbell began the Pioneer Valley Photographic Artists, a group of

talented photographers committed to elevating photography's role as a fine art.

Mr. Campbell's skills also extend to the mechanical side of photography. He invented the Vis-0-Tray slide storage and editing system in the 1960s to facilitate organizing slides for presentations. To photograph water skiers, he created a special platform on the towboat that has since been copied by other photographers.

Mr. Speaker, I take this opportunity to thank Mr. Les Campbell for his creative and positive influence on the art of photography in our community.

GILMAN INTERNATIONAL SCHOLARSHIP PROGRAM

HON. BENJAMIN A. GILMAN

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 19, 2002

Mr. GILMAN. Mr. Speaker, I would like to take this opportunity to inform my colleagues of the success of the Gilman International Scholarship Program established to benefit low income college students receiving benefits in its first year of operation. Our Scholarship Program sponsored by the United States Department of State, Bureau of Educational and Cultural Affairs and administered by Institute of International Education, encourages American students to study abroad by providing specified grants. This is an opportunity to gain knowledge and experience first hand that they may not have otherwise due to the costs.

In the 2001–2002 academic year 302 awards were made to students from among 2,771 applicants from 44 states plus Puerto Rico. The awards were split with 68 percent going to semester long programs, 24 percent to academic year programs, and 8 percent to quarter and other programs. These numbers by themselves are impressive, however, when they are combined with the number of states and institutions represented it gets even better. These students represent 172 different colleges, universities, and community colleges. I am proud that this Scholarship Program has reached such a broad cross-section of eligible students. Moreover, it is gratifying that 32 percent of that cross-section represents minority students.

Our Scholarship Program is placing students in countries other than the more traditional Western Europe states. I am happy to note that only 41 percent of our students have studied in Western Europe. Asia and Oceania drew 28 percent of our participants and the Western Hemisphere drew 17 percent. The remaining 14 percent chose either Africa, Eastern Europe, the Middle East, or had a program that allowed them to travel to multiple regions. It is gratifying that with the world opening to them these participants chose to take advantage of it and study in every region available to them. The idea of an open world also carries over to the fields of study represented. There are 41 different fields represented between the 4 different programs offered.

The I.I.E and State Department have admirably implemented this program, and the reward is with the number of students seeking to participate. With such interest, I hope our scholarship will continue to grow to provide more students with this excellent opportunity.

BENJAMIN A. GILMAN INTERNATIONAL SCHOLARSHIP PROGRAM STATISTICAL OVERVIEW: ACADEMIC YEAR 2002

Total applications received: 2771.

Total awards: 302.

Home States represented: 39 plus DC and PR.

Institutions represented: 170.

Destination countries: 41.

\$5000 awards given 261

\$3000 awards given 41

LENGTH OF STUDY ABROAD

Semester: 69%.

Academic/full year: 25%.

ETHNICITY (AS REPORTED BY APPLICANT)

Asian or Pacific Islander: 12%.

Black/Non-Hispanic: 11%.

Hispanic: 8%.

White: 55%.

Other: 5%.

No answer given: 9%.

WORLD REGION DISTRIBUTION (USING COUNTRY OF DESTINATION)

Africa: 8%.

Asia and Oceania: 29%.

Middle East: 1%.

Europe(including Russia & NIS): 42%.

Western Hemisphere: 20%.

GENDER

Female: 72%.

Male: 28%.

LEVEL OF STUDY

Freshman: 1%.

Sophomore: 10%.

Junior: 53%.

Senior: 36%.

REPRESENTATIVE CAPPS RE- MARKS TO THE AMERICAN MED- ICAL ASSOCIATION

HON. JOHN D. DINGELL

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 19, 2002

Mr. DINGELL. Mr. Speaker, I want to pay tribute to the skill, tenacity, and leadership of our colleague and my friend, Rep. LOIS CAPPS. I have served with many fine people over the course of my career in the House of Representatives and she is among the best. She fights every day for the people of her district, and for causes that affect virtually every member of our society. She does this with great skill and even greater courage. I have come to admire her strength, compassion, commitment, and drive. It is with great respect and affection that I request that a copy of her recent remarks to the American Medical Association be included in the Record. I recommend that all of my colleagues read them with great care.

STATEMENT OF REP. LOIS CAPPS, AMERICAN MEDICAL ASSOCIATION CONFERENCE, MARCH 10, 2002

OPENING

Thank you very much for inviting me here to speak today. It is an honor to spend some time with my colleagues in health care.

I have been asked to speak to you about the Democratic Party's agenda on health care.

But I am not sure there should be a separate "Democratic" or "Republican" agenda on health.

Though politics often suffuses the debate about health care, we should not come at this issue from a political perspective.

I have only recently in my life become an elected official. And I do not consider myself as simply a politician.

Instead, I think of myself in the terms that defined the forty years of my career before I came to Washington.

I am a nurse. I am a health care provider. It is my calling. And I think of myself in my new job as just a different kind of health care provider. I may have traded in my nursing uniform and medical equipment for legislation and committee action. But my goal is still the same. I am obliged to care for the health of my patients, whether they are the students in the Santa Barbara school system, the patients in Yale New Haven Hospital, or the seniors on Medicare across America. And I am proud to bring the benefits of this lifetime of nursing experience to the halls of Congress. And I think my experience has taught me well. As medical professionals we have learned that we need to carefully examine symptoms, check vitals, run tests, and thoughtfully consider our options. Then we select the best course of action we can think of.

We don't look at the label on a medication to see if it has a D or an R on it. We don't look to see if Tom Daschle or George Bush recommended a particular treatment. We call on all of our medical training and professional experience. We often consult other doctors and nurses, because we have learned that health care is better when provided by a team. And this is how the Congress needs to approach the challenges facing today's health care system.

Most of my colleagues, on both sides of the aisle, are genuinely interested in reaching across party lines to come up with good solutions. But a few are more interested in opposing the other party's members than in solving our problems. They are unwilling to engage in a debate on the issues, but would rather stymie their opponents' ideas, be they Republican or Democrat, for political gain.

I am a nurse. Sen. Kyl is a lawyer. My colleague, the Ranking Member of the Health Subcommittee, Sherrod Brown is a teacher. Rep. Ganske is a doctor and Rep. Norwood is a dentist. Some of us are Democrats and some of us are Republicans. It is going to take all of our varied experience, expertise, and perspectives to develop real solutions to the challenges we face today.

OVERVIEW

And we face real challenges. A few minutes ago I suggested that Congress should treat health care problems the way a doctor treats a patient. So let's do that now.

Let's check our nation's health care vital signs and look at some of its symptoms. There are 125,000 vacant nursing positions across the country. Physician fees under Medicare have grown 13% less than the costs of practice since 1992. Approximately 56 million Americans are not protected by any state or federal patient protections. 40 million Americans are on Medicare. 78 million baby boomers will start to join them in the next decade. Annual spending on prescription drugs by seniors has grown 116%, from \$18.5 billion in 1992 to \$42.9 billion in 2000. And 43 million Americans are without health insurance of any kind.

These are not strong and stable vital signs. They point to several problems we must address in order to get our patient, the health of our nation, out of critical care.

NURSING

First of all we have to make sure that the health care infrastructure is there to care for all Americans. This leads us to the nursing shortage. I admit I have a bias when I talk about this issue. I think nurses are terribly important to our health care system.

I know first hand the challenges facing the nursing profession and the consequences if

we fail to meet them. And today the nursing community is facing a dire situation. With an aging nursing workforce approaching retirement, and a dwindling supply of new nurses, we are facing an incredible shortfall of well trained, experienced nurses. To make matters worse this will peak just as the baby boom generation begins to retire and require a greater amount of care.

I have written legislation, the Nurse Reinvestment Act, to deal with both the immediate and the long-term problems we face. This legislation included proposals: To improve access to nursing education, to entice young people into nursing, to create partnerships between health care providers and educational institutions, and to support working nurses as they seek more training.

This past December, the House passed a slimmed down version of my bill, and the Senate passed legislation more like what I originally envisioned. We are now trying to work out the differences.

I deeply appreciate the support of the AMA for my legislation. We are close to finishing it and we would not be here without your support.

PHYSICIAN FEES

And just as we need to make sure patients have nurses, we also need to make sure they can see their doctors. As you are all aware, the reimbursement rates for physicians' services under Medicare saw a disastrous cut of 5.4% this year. This cut has already had a terrible impact on health care in my district and, I am sure, across the country. If these cuts are not corrected quickly they will be devastating to medical professionals and our ability to provide quality health care. I know you have been deeply frustrated by these cuts, as have I. And you have begun changing your practices to accommodate new economic reality.

A doctor's office is usually a small business. But as you well know, unlike most small businesses your decisions have life and death consequences.

Some doctors in my district have left private practice altogether. Others are threatening to. Many who stayed in private practice said that they could no longer afford to accept new Medicare patients. And others simply left Medicare all together.

This has meant that many seniors across the country are scrambling to find new doctors so they can continue to get the care they need and deserve. Along with a couple of my colleagues I introduced legislation to freeze physician fees at the 2001 level until Congress could find a long-term fix. And when Chairman Bilirakis, Ranking Member Brown, Chairman Tauzin, and Ranking Member Dingell introduced their own legislation to keep the cut minimal. I was pleased to join them in their efforts and was able to get 146 of my colleagues to ask the Speaker for a vote on this issue.

But, in spite of the bipartisan agreement on this issue, the bill has not been brought to the House floor. I know you will keep the pressure on the House leadership to bring this issue to a vote. I will too. We need to solve this problem now.

PBOR

But making sure there are enough doctors and nurses will only take us so far. We must also make sure that patients can get access to the benefits they need. We must pass a Patient's Bill of Rights.

Again I want to take my hat off to you and your organization for your steadfast commitment to this. The AMA and its members have been critical to our progress so far toward real patient protections. We live in an era of astounding new medical developments but also rising health care costs. The insurance companies and managed care plans are

understandably looking for ways to control those costs. This can have a positive effect on health care by making it more affordable.

Years ago in California I saw this lead to more coverage of preventive care. But the pendulum has swung too far towards cost control. Now there is too much pressure to cut corners and to skimp on care. Abuses of patients' rights to quality health care are too common. There needs to be a counterforce on the side of quality care—on the side of the patients. And that counterforce is the Patient's Bill of Rights.

We have to make sure that medical decisions are made by medical professionals and their patients, and not by accountants. This is why I have supported this legislation. I am very proud to be standing by the AMA on this issue. And I remain confident that we can get this bill through this year.

MEDICARE RX BENEFIT

Unfortunately, I am not so optimistic about passing a Medicare prescription drug benefit for seniors. In the last twenty years we have seen a revolution because of prescription drugs. They are virtually miracle treatments. But they have also become brutally expensive and are a much larger percentage of health care costs than we ever expected. The high cost of these medications has been a problem for many people. But it has particularly hit our seniors. They routinely take several medications for various everyday health concerns. But their fixed incomes cannot pay for them. And Medicare offers little help. You and I would not even consider taking on health insurance that does not cover prescription drugs. But seniors are left looking to Medicare + Choice to pay for their prescription drugs. Medicare HMOs were promoted as an avenue of hope, but have increasingly cut back on benefits, raised premiums and copayments, and often just packed up and left areas deemed as "unprofitable" leaving seniors with no where to turn.

We hear again and again about seniors choosing between food on the table and life saving medication. We really can and should do better than that for older Americans. They expect it and they deserve it. I believe we must establish a benefit that is universal, voluntary, affordable, and accessible to all. Unfortunately, the Administration has continued to focus on expanding the failed Medicare HMO program and helping the poorest seniors. I think about the countless seniors on the Central Coast of California who have shared their personal stories with me about crushingly high drug prices. I know in my heart that prescription drug coverage is not a political issue. It is simply the right thing to do.

UNINSURED

Another critical issue is the 43 million Americans with no insurance coverage whatsoever. For them, health care, with or without prescription drug coverage, is nothing but a fantasy.

These are people like you and me, who are being forced to gamble with their health and with their livelihoods. They have to bet that they will stay healthy and not require health care. Each day, they wonder if today is the day that their luck will run out. Is today the day that they or a loved one will contract a terrible disease? Will today be the day that they or their family are stricken by something that will fill their life with pain and bankrupt them? They should not have to face these fears without the security that insurance can provide.

In my time as a school nurse in Santa Barbara, I saw too many families without insurance. I saw the defeated look of shame on their faces as they struggled to figure out how to get their children and themselves

necessary health care. This is something we can fix if we put our hearts and minds to it. Some people believe that the best way to address this problem is through tax credits. I have to say that I am skeptical. I am concerned that tax credits might not cover the costs of insurance and may inadvertently draw people out of employer-based insurance, driving up premiums for those left behind.

Others have called for Medical Savings Accounts, but these may end up pulling healthy people out of insurance plans and leaving the ill in, again raising the costs to those most in need of help. I think we might be better off pursuing an expansion of existing health care programs or helping small businesses get access to the low rates that large businesses get. But any of these solutions will cost a great deal of money. And so it is essential that we find the best, most cost-effective method. That is why it is absolutely necessary to keep up dialogue and debate, without shutting out ideas.

You and I may disagree on the best way to help the uninsured. But we will help them faster if we are willing to hear from each other and work towards a consensus. We cannot afford the arrogance of the idea that there is no way but our own.

BUSH BUDGET

We will see this clearly as we set the budget for next year. The President has laid out some laudable priorities in his health care budget. He calls for more funding for the NIH and efforts to prepare communities for bioterrorism. But at the same time the budget cuts funding for community health coordination, chronic disease programs, and efforts to train doctors and other health professionals. I think these cuts are counterproductive. So I will work with the President and my colleagues on this budget, hopefully without the partisan bickering that has filled past debates.

CLOSING

Our patient, the health of America, is faced with too many diseases and conditions to simply lie on its hospital bed as we engage in petty squabbles about who came up with what idea. We will only be able to solve our problems if we are willing to work together, respect and embrace our opponents, and clamber for a common ground to meet on.

I thank you for listening to me, and I look forward to working with you to accomplish these goals.

PAYING TRIBUTE TO THE GENESEE VALLEY ROTARY

HON. MIKE ROGERS

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 19, 2002

Mr. ROGERS of Michigan. Mr. Speaker, I rise today to congratulate the Genesee Valley Rotary Club on their 25th anniversary. It is my wish to commend Jack Hamady, Ray Kelley and Jerry Wittemore for their efforts in founding the club in May, 1977.

The Genesee Valley Rotary Club has lead the community in service for the past 25 years. They participate and operate several community service projects, such as the Salvation Army Christmas Bell Ringing, the WFUM-TV28 telethon, and the Big Brothers/Big Sisters Bowling Challenge.

Mr. Speaker, I ask my colleagues to join me in congratulating the Genesee Valley Rotary Club. May its leadership and all of those in-

volved know of my high regard for this exemplary organization and its excellence in community service.

TRIBUTE TO FRANKLIN H. BERRY, JR.

HON. JIM SAXTON

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 19, 2002

Mr. SAXTON. Mr. Speaker, I rise today to pay tribute to a good friend as he is honored by the Toms River-Ocean County Chamber of Commerce for his extraordinary contributions to the community.

In many fields of service, through business endeavors and volunteerism, Franklin Berry has served the residents of Ocean County faithfully for many years.

Having served in the New Jersey General Assembly as well as Ocean County government, he led the citizens not only of the county, but also of New Jersey with dedication and commitment.

His participation in the Toms River Student Loan Fund as well as the Southern Regional Scholarship Fund has enabled many young people to seek higher education when they might otherwise have been unable to do so.

Franklin Berry serves with many local organizations such as the National Conference of Christians and Jews, Jersey Shore Council Boy Scouts of America and the Toms River Area Family YMCA. His time and efforts have brought about opportunities for understanding and improvement to the community and the families who reside there.

A community mainstay for many years, Franklin Berry's willingness to lend a hand to any worthy group or organization in need of his services is the basis for his selection for the prestigious award for which he is being honored by the Chamber.

I congratulate him and wish him many more years of service to others.

ON THE REALIGNMENT AND CLOSURE OF AMERICA'S MILITARY READINESS

HON. J. RANDY FORBES

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 19, 2002

Mr. FORBES. Mr. Speaker, I am very distraught today over the inclusion of a Base Realignment and Closure provision in last year's National Defense Authorization Act. I do not buy into so-called BRAC 'success' stories. I will be the first to stand up and congratulate sound accounting of our taxpayers' money, however, BRAC does not represent sound accounting. The truth of the matter is that reducing military construction for Fiscal Year 2003 will not solve the Army's financial problems. Furthermore, according to the Government Accounting Office, BRAC cost and savings estimates are imprecise. According to the Congressional Research Service, in the early years of the past four rounds of BRAC, base closure costs greatly exceeded savings. On more than a few occasions, facilities that were closed under BRAC were needed again, and

in some cases, reopened. In 2005, the bases spared by the next round of BRAC will still need the same improvements, but in the meantime, the decision to freeze construction at bases that might be BRACed will only hurt our people living there—hurt our soldiers and their families. We need to protect our soldiers' families. And just as we need to protect them from terrorists, we also need to protect them from the elements—from Mother Nature who reminds them just how leaky their roofs are. We need to protect them from being uprooted in the name of savings that will not materialize for a decade and may, in all actuality, never materialize.

A few weeks ago First Lieutenant Tallas Tomeny was killed in the line of duty. I extend my condolences to his family. While we mourn the loss of all of our soldiers, this loss is so much sadder because Lieutenant Tomeny was not killed in Afghanistan, or the Balkans, or Egypt, or Korea, or any of the other numerous places our soldiers are stationed around the world. He was killed in North Carolina during an exercise held off base, and he was shot by a Sheriff's deputy who mistook him for a criminal. While we sit here and continue to talk about closing Vieques and continue to talk about closing bases, a soldier has lost his life because his training was being held in a civilian community instead of on a military training area. We need to reconsider the decision to close facilities where our forces can train safely.

125TH BIRTHDAY OF THE ADVANCE OF BUCKS COUNTY NEWSPAPER

HON. JAMES C. GREENWOOD

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 19, 2002

Mr. GREENWOOD. Mr. Speaker, I rise today to recognize the 125th birthday of The ADVANCE of Bucks County newspaper. Founded in Hulmeville, Pennsylvania in 1877, the ADVANCE has provided hometown news to its readers in a weekly paper continuously for the past 125 years.

The ADVANCE has been a part of my family's required reading for as long as I can remember. My father's career as a township supervisor and the local district justice were covered, and when my younger brother was riding a pony and it ran away with him, his picture made the paper!

I still depend on the ADVANCE for hometown news, to learn about local community issues and upcoming events.

I would like to offer my heartiest congratulations to Editor Nancy Pickering and the rest of the staff at the ADVANCE, past and present.

TRADE WITH UKRAINE

HON. BOB SCHAFFER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 19, 2002

Mr. SCHAFFER. Mr. Speaker, last week, I posted letters to the President of Ukraine, Mr. Leonid Kuchma, and the Prime Minister of Ukraine, Anatoliy Kinakh regarding a pending incident in Ukraine involving an American-