

governmental activity as well as significant area of non-governmental activity. However, individual privacy and freedom from governmental interference in private conduct are also recognized as among the fundamental values of our free and democratic society. The United States understands that by its terms the Convention requires broad regulation of private conduct, in particular under Articles 2, 3 and 5. The United States does not accept any obligation under the Convention to enact legislation or to take any other action with respect to private conduct except as mandated by the Constitution and laws of the United States.

(2) Under current U.S. law and practice, women are permitted to volunteer for military service without restriction, and women in fact serve in all U.S. armed services, including in combat positions. However, the United States does not accept an obligation under the Convention to assign women to all military units and positions which may require engagement in direct combat.

(3) U.S. law provides strong protections against gender discrimination in the area of remuneration, including the right to equal pay for equal work in jobs that are substantially similar. However, the United States does not accept any obligation under this Convention to enact legislation establishing the doctrine of comparable worth as that term is understood in U.S. practice.

(4) Current U.S. law contains substantial provisions for maternity leave in many employment situations but does not require paid maternity leave. Therefore, the United States does not accept an obligation under Article 11(2)(b) to introduce maternity leave with pay or with comparable social benefits without loss of former employment, seniority or social allowances.

Section 3. Understandings.

The advice and consent of the Senate is subject to the following understandings, which shall be included in the instrument of ratification:

(1) The United States understands that this convention shall be implemented by the Federal Government to the extent that it exercises jurisdiction over the matters covered therein, and otherwise by the State and local governments. To the extent that State and local governments exercise jurisdiction over such matters, the Federal Government shall, as necessary, take appropriate measures to ensure the fulfillment of this Convention.

(2) The Constitution and laws of the United States contain extensive protections of individual freedom of speech, expression, and association. Accordingly, the United States does not accept any obligation under this Convention, in particular under Articles 5, 7, 8 and 13, to restrict those rights, through the adoption of legislation or any other measures, to the extent that they are protected by the Constitution and laws of the United States.

(3) The United States understands that Article 12 permits States Parties to determine which health care services are appropriate in connection with family planning, pregnancy, confinement and the post-natal period, as well as when the provision of free services is necessary, and does not mandate the provision of particular services on a cost-free basis.

(4) Noting in this Convention shall be construed to reflect or create any right to abortion and in no case should abortion be promoted as a method of family planning.

(5) The United States understands that the Committee on the Elimination of Discrimination Against Women was established under Article 17 "for the purpose of considering the progress made in the implementation" of the Convention. The United States understands that the Committee on the Elimination of

Discrimination Against Women, as set forth in Article 21, reports annually to the General Assembly on its activities, and "may make suggestions and general recommendations based on the examination of reports and information received from the States Parties." Accordingly, the United States understands that the Committee on the Elimination of Discrimination Against Women has no authority to compel actions by States Parties.

Section 4. Declarations.

The advice and consent of the Senate is subject to the following declarations:

(1) The United States declares that, for purposes of its domestic law, the provisions of the Convention are non-self-executing.

With reference to Article 29(2), the United States declares that it does not consider itself bound by the provisions of Article 29(1). The specific consent of the United States to the jurisdiction of the International Court of Justice concerning disputes over the interpretation or application of this Convention is required on a case-by-case basis.

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

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

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

S. 2913. A bill to amend the Employee Retirement Income Security Act of 1974, the Public Health Service Act, and the Internal Revenue Code of 1986 to provide health insurance protections for individuals who are living organ donors; to the Committee on Health, Education, Labor, and Pensions.

By Mr. ROCKEFELLER:

S. 2914. A bill to amend title XVIII of the Social Security Act to provide for appropriate incentive payments under the medicare program for physicians' services furnished in underserved areas; to the Committee on Finance.

By Mr. SCHUMER (for himself, Mrs. CLINTON, Mr. TORRICELLI, and Mr. CORZINE):

S. 2915. A bill to provide for cancellation of student loan indebtedness for spouses, surviving joint debtors, and parents of individuals who died or became permanently and totally disabled due to injuries suffered in the terrorist attack on September 11, 2001; to the Committee on Health, Education, Labor, and Pensions.

By Mr. BIDEN:

S. 2916. A bill to put a college education within reach, and for other purposes; to the Committee on Finance.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

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

By Mr. JOHNSON (for himself, Mr. WELLSTONE, Mr. HARKIN, Mr. LUGAR, Mr. DASCHLE, Mr. CONRAD, Mr. DORGAN, Mr. GRASSLEY, Mr. DAYTON, Mr. NELSON of Nebraska, Mr. DURBIN, Mr. BAUCUS, Mr. ALLARD, Mr. FEINGOLD, Mr. BAYH, Mr. CRAPO, Mrs. CARNAHAN, Mr. BINGAMAN, Mrs. MURRAY, Mr. JEFFORDS, Mr. LEVIN, Mr. LIEBERMAN, Mr. DEWINE, Ms. STABENOW, and Mr. BREAUX):

S. Res. 324. A resolution congratulating the National Farmers Union for 100 years of service to family farmers, ranchers, and rural communities; to the Committee on Agriculture, Nutrition, and Forestry.

By Mr. REID (for himself and Ms. CANTWELL):

S. Con. Res. 138. A concurrent resolution expressing the sense of Congress that the Secretary of Health And Human Services should conduct or support research on certain tests to screen for ovarian cancer, and Federal health care programs and group and individual health plans should cover the tests if demonstrated to be effective, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

ADDITIONAL COSPONSORS

S. 155

At the request of Mr. BINGAMAN, the name of the Senator from Illinois (Mr. DURBIN) was added as a cosponsor of S. 155, a bill to amend title 5, United States Code, to eliminate an inequity in the applicability of early retirement eligibility requirements to military reserve technicians.

S. 561

At the request of Ms. COLLINS, the name of the Senator from Minnesota (Mr. DAYTON) was added as a cosponsor of S. 561, a bill to provide that the same health insurance premium conversion arrangements afforded to Federal employees be made available to Federal annuitants and members and retired members of the uniformed services.

S. 572

At the request of Mr. NELSON of Florida, his name was added as a cosponsor of S. 572, a bill to amend title XIX of the Social Security Act to extend modifications to DSH allotments provided under the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000.

S. 611

At the request of Ms. MIKULSKI, the name of the Senator from Minnesota (Mr. DAYTON) was added as a cosponsor of S. 611, a bill to amend title II of the Social Security Act to provide that the reduction in social security benefits which are required in the case of spouses and surviving spouses who are also receiving certain Government pensions shall be equal to the amount by which two-thirds of the total amount of the combined monthly benefit (before reduction) and monthly pension exceeds \$1,200, adjusted for inflation.

S. 677

At the request of Mr. HATCH, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 677, a bill to amend the Internal Revenue Code of 1986 to repeal the required use of certain principal repayments on mortgage subsidy bond financing to redeem bonds, to modify the purchase price limitation under mortgage subsidy bond rules based on median family income, and for other purposes.

S. 874

At the request of Mr. TORRICELLI, the name of the Senator from South Dakota (Mr. JOHNSON) was added as a cosponsor of S. 874, a bill to require health plans to include infertility benefits, and for other purposes.

S. 1234

At the request of Mr. HATCH, the name of the Senator from Connecticut (Mr. LIEBERMAN) was added as a cosponsor of S. 1234, a bill to amend title 18, United States Code, to provide that certain sexual crimes against children are predicate crimes for the interception of communications, and for other purposes.

S. 1394

At the request of Mr. ENSIGN, the name of the Senator from Alaska (Mr. MURKOWSKI) was added as a cosponsor of S. 1394, a bill to amend title XVIII of the Social Security Act to repeal the medicare outpatient rehabilitation therapy caps.

S. 1605

At the request of Mr. CONRAD, the names of the Senator from South Dakota (Mr. JOHNSON) and the Senator from New Mexico (Mr. BINGAMAN) were added as cosponsors of S. 1605, a bill to amend title XVIII of the Social Security Act to provide for payment under the Medicare Program for four hemodialysis treatments per week for certain patients, to provide for an increased update in the composite payment rate for dialysis treatments, and for other purposes.

S. 1761

At the request of Mr. DORGAN, the names of the Senator from New Jersey (Mr. TORRICELLI) and the Senator from Alaska (Mr. STEVENS) were added as cosponsors of S. 1761, a bill to amend title XVIII of the Social Security Act to provide for coverage of cholesterol and blood lipid screening under the medicare program.

S. 1785

At the request of Mr. CLELAND, the names of the Senator from Colorado (Mr. ALLARD) and the Senator from Connecticut (Mr. DODD) were added as cosponsors of S. 1785, a bill to urge the President to establish the White House Commission on National Military Appreciation Month, and for other purposes.

S. 1867

At the request of Mr. LIEBERMAN, the name of the Senator from Nebraska (Mr. NELSON) was added as a cosponsor of S. 1867, a bill to establish the National Commission on Terrorist Attacks Upon the United States, and for other purposes.

S. 2049

At the request of Mr. DEWINE, the name of the Senator from New Jersey (Mr. TORRICELLI) was added as a cosponsor of S. 2049, a bill to amend the Federal Food, Drug and Cosmetic Act to include a 12 month notification period before discontinuing a biological product, and for other purposes.

S. 2215

At the request of Mrs. BOXER, the name of the Senator from Oregon (Mr. SMITH) was added as a cosponsor of S. 2215, a bill to halt Syrian support for terrorism, end its occupation of Lebanon, stop its development of weapons

of mass destruction, cease its illegal importation of Iraqi oil, and by so doing hold Syria accountable for its role in the Middle East, and for other purposes.

S. 2483

At the request of Mr. CLELAND, the name of the Senator from Delaware (Mr. CARPER) was added as a cosponsor of S. 2483, a bill to amend the Small Business Act to direct the Administrator of the Small Business Administration to establish a pilot program to provide regulatory compliance assistance to small business concerns, and for other purposes.

S. 2505

At the request of Mr. KENNEDY, the name of the Senator from Minnesota (Mr. WELLSTONE) was added as a cosponsor of S. 2505, a bill to promote the national security of the United States through international educational and cultural exchange programs between the United States and the Islamic world, and for other purposes.

S. 2533

At the request of Mrs. FEINSTEIN, the name of the Senator from Georgia (Mr. CLELAND) was added as a cosponsor of S. 2533, a bill to amend title II of the Social Security Act to provide for miscellaneous enhancements in Social Security benefits, and for other purposes.

S. 2555

At the request of Mr. BAUCUS, the name of the Senator from Iowa (Mr. HARKIN) was added as a cosponsor of S. 2555, a bill to amend title XVIII of the Social Security Act to enhance beneficiary access to quality health care services under the medicare program.

S. 2596

At the request of Mrs. BOXER, the name of the Senator from Oregon (Mr. WYDEN) was added as a cosponsor of S. 2596, a bill to amend the Internal Revenue Code of 1986 to extend the financing of the Superfund.

S. 2602

At the request of Mrs. CLINTON, the name of the Senator from Minnesota (Mr. DAYTON) was added as a cosponsor of S. 2602, a bill to amend title 38, United States Code, to provide that remarriage of the surviving spouse of a veteran after age 55 shall not result in termination of dependency and indemnity compensation.

S. 2626

At the request of Mr. KENNEDY, the names of the Senator from South Dakota (Mr. DASCHLE) and the Senator from New Mexico (Mr. BINGAMAN) were added as cosponsors of S. 2626, a bill to protect the public health by providing the Food and Drug Administration with certain authority to regulate tobacco products.

S. 2735

At the request of Mr. ENSIGN, the name of the Senator from Missouri (Mr. BOND) was added as a cosponsor of S. 2735, a bill to amend title 49, United States Code, to provide for the modification of airport terminal buildings

to accommodate explosive detection systems for screening checked baggage, and for other purposes.

S. 2739

At the request of Mr. HATCH, the names of the Senator from Wyoming (Mr. ENZI), the Senator from Oklahoma (Mr. NICKLES) and the Senator from Alaska (Mr. STEVENS) were added as cosponsors of S. 2739, a bill to provide for post-conviction DNA testing, to improve competence and performance of prosecutors, defense counsel, and trial judges handling State capital criminal cases, to ensure the quality of defense counsel in Federal capital cases, and for other purposes.

S. 2770

At the request of Mr. DODD, the name of the Senator from California (Mrs. BOXER) was added as a cosponsor of S. 2770, a bill to amend the Federal Law Enforcement Pay Reform Act of 1990 to adjust the percentage differentials payable to Federal law enforcement officers in certain high-cost areas.

S. 2793

At the request of Mr. ENSIGN, the names of the Senator from Ohio (Mr. VOINOVICH) and the Senator from North Carolina (Mr. HELMS) were added as cosponsors of S. 2793, a bill to improve patient access to health care services and provide improved medical care by reducing the excessive burden the liability system places on the health care delivery system.

S. 2826

At the request of Mr. SCHUMER, the name of the Senator from Arkansas (Mrs. LINCOLN) was added as a cosponsor of S. 2826, a bill to improve the national instant criminal background check system, and for other purposes.

S. 2841

At the request of Mr. CORZINE, the name of the Senator from New York (Mrs. CLINTON) was added as a cosponsor of S. 2841, a bill to adjust the indexing of multifamily mortgage limits, and for other purposes.

S. 2869

At the request of Mr. KERRY, the name of the Senator from Arkansas (Mrs. LINCOLN) was added as a cosponsor of S. 2869, a bill to facilitate the ability of certain spectrum auction winners to pursue alternative measures required in the public interest to meet the needs of wireless telecommunications consumers.

S. 2908

At the request of Mr. FEINGOLD, the name of the Senator from Maryland (Ms. MIKULSKI) was added as a cosponsor of S. 2908, a bill to require the Secretary of Defense to establish at least one Weapons of Mass Destruction Civil Support Team in each State, and for other purposes.

S. CON. RES. 11

At the request of Mrs. FEINSTEIN, the names of the Senator from Nevada (Mr. REID) and the Senator from Ohio (Mr. DEWINE) were added as cosponsors of S. Con. Res. 11, a concurrent resolution

expressing the sense of Congress to fully use the powers of the Federal Government to enhance the science base required to more fully develop the field of health promotion and disease prevention, and to explore how strategies can be developed to integrate lifestyle improvement programs into national policy, our health care system, schools, workplaces, families and communities.

S. CON. RES. 94

At the request of Mr. WYDEN, the name of the Senator from Iowa (Mr. GRASSLEY) was added as a cosponsor of S. Con. Res. 94, a concurrent resolution expressing the sense of Congress that public awareness and education about the importance of health care coverage is of the utmost priority and that a National Importance of Health Care Coverage Month should be established to promote that awareness and education.

AMENDMENT NO. 4508

At the request of Mr. FEINGOLD, the names of the Senator from Nevada (Mr. REID) and the Senator from Maryland (Mr. SARBANES) were added as cosponsors of amendment No. 4508 intended to be proposed to H.R. 5005, a bill to establish the Department of Homeland Security, and for other purposes.

AMENDMENT NO. 4509

At the request of Mr. FEINGOLD, the names of the Senator from Nevada (Mr. REID) and the Senator from Maryland (Mr. SARBANES) were added as cosponsors of amendment No. 4509 intended to be proposed to H.R. 5005, a bill to establish the Department of Homeland Security, and for other purposes.

AMENDMENT NO. 4510

At the request of Mr. BAYH, the name of the Senator from Arkansas (Mr. HUTCHINSON) was added as a cosponsor of amendment No. 4510 intended to be proposed to H.R. 5005, a bill to establish the Department of Homeland Security, and for other purposes.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

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

S. 2913. A bill to amend the Employee Retirement Income Security Act of 1974, the Public Health Service Act, and the Internal Revenue Code of 1986 to provide health insurance protections for individuals who are living organ donors; to the Committee on Health, Education, Labor, and Pensions.

Mr. DEWINE. Madam President, I rise today to raise the awareness of an issue that affects over 22,000 people a year, and that issue is organ donation. The sad fact about organ donations is this: We have the medical know-how to save lives, but we lack the organs. We lack organs because most Americans simply are unaware of the life-giving difference they can make by choosing to become organ donors.

Sadly, each day the waiting list for those needing organs continues to grow. Today, nearly 79,000 people re-

main on the national transplant waiting list. Right now, more than 50,000 people, alone, are waiting for kidney transplants. That number is expected to double within the next decade. Additionally, between 12 and 16 people die each day just waiting for an available organ.

To remedy the organ shortage, we must increase public awareness. By educating the public and raising awareness, more people will choose to become organ donors. At the very least, through these efforts, we can encourage more families to discuss what their wishes are and whether they would want to be organ donors.

But our efforts must not stop there. We must do more than just implement public awareness campaigns, because the face of organ donation is changing. For the first time ever, the number of living organ donors outnumbered cadaver donors. Last year, there were 6,081 donor cadavers while 6,485 people opted to become living donors, usually giving up a healthy kidney to help a family member or friend.

Recognizing this, my colleague, Senator DURBIN, and I introduce a bill today that would help protect living organ donors in the group insurance market. Our bill would ensure that those individuals who choose to be living organ donors are not discriminated against in the insurance marketplace. Our bill builds on the protections provided by the Health Insurance Portability and Accountability Act, so that living organ donors are not denied insurance nor are they applied discriminatory insurance premiums because of their living organ donor status.

Quite simply, a brother who donates a part of his kidney to his sister should not be denied health insurance. But tragically, that is what oftentimes happens. Frequently, individuals who are living organ donors are denied health insurance or restricted from the insurance market. Instead, we should celebrate living organ donors and remove obstacles and barriers for the successful donation of organs. Insurance shouldn't undermine someone's decision to be a living organ donor.

Some States are evaluating how living organ donors affect the market. States are amending their Family Medical Leave eligibility so that living organ donors can participate and benefit from the program. The Federal Government, with the Organ Donor Leave Act of 1999, offered 30 days paid leave to Federal employees who chose to be an organ donor. But, paid leave and job protection doesn't mean much if people are denied health insurance or are required to pay higher premiums because they donated an organ to save another person's life.

The impact of living organ donation is profound. A living organ donor not only can save the life of one patient, but can also take that person off the waiting list for a cadaver donation. That means the next person on the waiting list is "bumped up" a spot—

giving additional hope to the 79,000 persons on the national transplant waiting list.

Living organ donors give family members and friends a second chance at life and the opportunity to reduce the number of people on the waiting list to receive an organ. It is time for Congress to make a sensible decision in support of a person's decision to be a living organ donor. I encourage my colleagues to join me in co-sponsoring this bill.

By Mr. ROCKEFELLER:

S. 2914. A bill to amend title XVIII of the Social Security Act to provide for appropriate incentive payments under the medicare program for physicians' services furnished in underserved areas; to the Committee on Finance.

Mr. ROCKEFELLER. Mr. President, today I introduce the Medicare Incentive Payment Program Refinement Act of 2002. This bill makes needed and long-overdue changes to the Medicare Incentive Payment Program, an initiative conceived to address the growing primary care physician shortage in some of our country's most medically underserved communities. The number of physicians needed to care for all individuals, especially our aging seniors, continues to grow in remote rural areas and in underserved urban areas. However, rising health costs and the difficulties of operating a practice in underserved communities has exacerbated the physician shortage. Although the Medicare Incentive Payment Program aims to address the financial hurdles facing physicians in needy areas, the program has failed to achieve real results. This bill will make fundamental changes to improve the program's effectiveness.

Rural areas, in particular, are in need of efforts to retain primary care physicians, since the difficulties of operating a practice often drive doctors to larger areas with more resources and professional support. According to the Federal Office of Rural Health Policy, over 20 million Americans live in areas that have a shortage of physicians, and between 1975 and 1995 the smallest counties in the U.S., population under 2,500, experienced a drop in their physician-to-population ratio. More than 2,200 primary care physicians would be needed to remove all nonmetropolitan HPSA designations, and more than twice that number is needed to achieve adequate physician staffing levels nationwide.

According to the National Rural Health Association, nonmetropolitan physicians treat a larger number of Medicare and Medicaid beneficiaries than their urban counterparts do, generating less income for physicians per patient. Furthermore, nonmetropolitan physicians are less likely to perform high cost medical services due to their limited number of resources. Understandably, MIPP monies can affect the quality of life for rural physicians and help prevent the mass migration of