

to possible cyber attack by terrorists, possibly affecting the economy or other areas of national security. Because of the ubiquitous nature of the Internet, unprotected home computers—often lacking network security features, could be the entree for cyber attacks. Even when national security is not at issue, spyware programs could be used to harvest personal information—such as bank or credit card account number and e-mail addresses—from computers. This information could be used subsequently in fraudulent criminal activities or in the sending of unauthorized SPAM e-mail messages.

Unwanted spyware programs can make changes to a computer that can be annoying and can cause the computer to slow down or crash. These programs have the ability to change the home page of a computer user's Web browser or search page, or add additional components to the browser that are unnecessary or unwanted. These programs could make it very difficult to change the settings back to the way they were originally.

This bill directs the Federal Trade Commission (FTC) to prohibit the transmission of an unauthorized spyware program to a covered computer over the Internet. The bill further establishes requirements for an affirmative agreement by the user of the covered computer to specifically agree the conditions of the transmission with an acknowledgement of the person and address of the transmitter.

The bill provides specific prohibitions on use of any spyware program for collecting any personally identifiable information from the covered computer unless notice is provided. The criminal penalties provided for in this act will help to provide a necessary enforcement mechanism.

I believe this is just one of the steps necessary to secure the nation's critical infrastructure and to help protect the privacy and civil liberties of Americans.

Mr. DINGELL. Madam Speaker, "Barbarians At The Digital Gate" recently warned the front page of the Sunday New York Times Business Section. What elicited this alarming headline? Pernicious computer software commonly called "spyware" and "adware".

These programs sneak onto your computer, and allow a third party to harvest your personal information. It is the equivalent of putting a wiretap on your phone and listening to your conversations. Adware tracks your Web surfing or online shopping so that marketers can send you unwanted ads. Spyware can hijack your computer to pornographic or gambling sites, or steal your passwords and credit card information.

The rapid proliferation of spyware and adware has brought Internet use to a crossroads. It threatens legitimate Internet commerce. Consumer complaints are deluging computer call centers and regulators. The most common complaints are: hijacked home pages, redirected Web searches, a flood of pop-up ads, and sluggish and crashed computers.

The bill, as amended, prohibits a number of deceptive acts or practices related to spyware, and provides for FTC enforcement and enhanced civil fines. It also recognizes that there are legitimate applications of spyware and, thus, exempts law enforcement, national security, network security, diagnostics and repair, and fraud detection from the SPY Act. It is a carefully balanced bill.

Most importantly, this legislation contains opt-in protection for consumers. It requires companies that distribute spyware and adware to obtain permission from consumers through an easily understood licensing agreement before installing spyware or adware on their computers. The programs, once downloaded, would have to provide a means to identify the spyware or adware and easily uninstall or disable it.

I also note that without aggressive enforcement, the goals of this bill will not be met. We are asking the FTC to do a great deal in a very complex area and I trust that the appropriators will provide them with sufficient resources to fulfill these tasks.

This legislation is supported by a coalition that includes: the Business Software Alliance, the Center For Democracy and Technology, the Council for Marketing and Opinion Research, Dell, eBay Inc., Humana Inc., Microsoft, 180 Solutions, Time Warner/AOL United States Telecom Association, WhenU, and Yahoo!—all of whom have submitted letters of support.

The bill has improved at every stage of its consideration, and I want to commend the leadership and hard work of Rep. BARTON, the Chairman of the Committee on Energy and Commerce, Reps. STEARNS and SCHAKOWSKY, the Chairman and Ranking Member, respectively, of the Commerce, Trade, and Consumer Protection Subcommittee, and Reps. BONO and TOWNS, the lead Republican and Democrat sponsors of the bill. I also commend the bipartisan staff team who worked very hard over the last five months to get this bill to the Floor this year; David Cavicke, Shannon Jacquot, Chris Leahy, Brian McCullough, Will Carty, Jennifer Baird, Consuela Washington, Diane Beedle, and Andrew Delia.

I urge my Colleagues to vote "yes" on passage of H.R. 2929. It is a good bill. It's good for consumers. And it is good for honest commerce on the Internet.

Mr. GREEN of Texas. Madam Speaker, my interest in the consumer problem of spyware stems from many years of work on the consumer spam problem.

The anti-spam law was not expected to eliminate unwanted email, but it did draw a line for consumers—that some kinds of privacy invasion are not allowed. Internet Service Providers like Microsoft, AOL, Yahoo, and Earthlink along with State Attorney Generals are bringing serious actions against spammers who violate the law.

Spyware and illegal spam are not just problems of privacy and convenience, both can be the cause of viruses and other computer crimes.

Just like robbery and speeding have not been eliminated, neither will spam or spyware. But when something is harming social welfare and consumers are overwhelmed, and private sector solutions are not enough, then we need an enforceable standard.

This legislation prohibits the most commonly known deceptive acts and practices related to Spyware from tracking your web surfing habits to send you advertising to hijacking your passwords and credit card numbers.

However, while some use this technology to deceive and defraud us, this technology is also used to support our efforts in national security. This important use of technology is taken into consideration by this bill and exempts law enforcement, national security

agencies, network security programs and diagnostics on repairs to our computers from the SPY Act.

In addition, state attorney generals will have the ability to enforce consumer protection laws against spyware and preserves state trespass, contract tort and fraud laws.

This legislation will draw a line that spying on Americans' computers will not be tolerated. Will some people continue to get away with it? Perhaps. But will some people be prosecuted and punished for violating our privacy? Absolutely.

Mr. BARTON of Texas. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mrs. MILLER of Michigan). The question is on the motion offered by the gentleman from Texas (Mr. BARTON) that the House suspend the rules and pass the bill, H.R. 2929.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds of those present have voted in the affirmative.

Mr. BARTON of Texas. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

RECOGNIZING COMMUNITY ORGANIZATION OF PUBLIC ACCESS DEFIBRILLATION PROGRAMS

Mr. BARTON of Texas. Madam Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 250) recognizing community organization of public access defibrillation programs.

The Clerk read as follows:

H. CON. RES. 250

Whereas coronary heart disease is the single leading cause of death in the United States;

Whereas every two minutes, an individual suffers from cardiac arrest in the United States, and 250,000 Americans die each year from cardiac arrest out of hospital;

Whereas the chance of survival for a victim of cardiac arrest diminishes by ten percent each minute following sudden cardiac arrest;

Whereas 80 percent of cardiac arrests are caused by ventricular fibrillation, for which defibrillation is the only effective treatment;

Whereas 60 percent of all cardiac arrests occur outside the hospital, and the average national survival rate for an out-of-hospital victim of cardiac arrest is only five percent;

Whereas automated external defibrillators (AEDs) make it possible for trained non-medical rescuers to deliver potentially lifesaving defibrillation to victims of cardiac arrest;

Whereas public access defibrillation (PAD) programs train non-medical individuals to use AEDs;

Whereas communities that have established and implemented PAD programs that make use of AEDs have achieved average survival rates as high as 50 percent for those individuals who have suffered an out-of-hospital cardiac arrest;

Whereas successful PAD programs ensure that cardiac arrest victims have access to

early 911 notification, early cardiopulmonary resuscitation, early defibrillation, and advanced care;

Whereas schools, sports arenas, large hotels, concert halls, high-rise buildings, gated communities, buildings subject to high-security, and similar facilities can benefit greatly from the use of AEDs as part of a PAD program, since it often takes additional and therefore critical time for emergency medical personnel to respond to victims of cardiac arrest in these areas;

Whereas according to the American Heart Association, widespread use of defibrillators could save as many as 50,000 lives nationally each year;

Whereas the Aviation Medical Assistance Act of 1998 (Public Law 105-170; 49 U.S.C. 44701 note) authorized AEDs to be carried and used aboard commercial airliners;

Whereas the Cardiac Arrest Survival Act of 2000 (Public Law 106-505; 42 U.S.C. 238p-238q) and the Rural Access to Emergency Devices Act (Public Law 106-505, 42 U.S.C. 254c note) provided for the placement of AEDs in Federal office buildings and increased access to AEDs in rural communities;

Whereas the Community Access to Emergency Defibrillation Act of 2001 (Public Law 107-188; 42 U.S.C. 244-245) authorized the development and implementation of PAD projects;

Whereas the Automatic Defibrillation in Adam's Memory Act (presented to the President for his signature on June 20, 2003) authorizes the use of grant funds to establish an information clearinghouse to provide information to increase public access to defibrillation in schools; and

Whereas Summit County, Ohio serves as an inspiring model for communities across the United States by providing access to AEDs in all of the county's 59 middle and high schools, in 47 city buildings and community centers, in 17 police departments, and in seven buildings at the University of Akron: Now, therefore, be it

Resolved by the House of Representatives (the Senate concurring), That Congress—

(1) recognizes the growing number of community activists, organizations, and municipal governments leading the national effort to establish public access defibrillation (PAD) programs; and

(2) encourages the continued development and implementation of PAD programs in schools, sports arenas, large hotels, concert halls, high-rise buildings, gated communities, buildings subject to high-security, and similar facilities to increase the survival rate for victims of cardiac arrest.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Texas (Mr. BARTON) and the gentleman from Ohio (Mr. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from Texas (Mr. BARTON).

GENERAL LEAVE

Mr. BARTON of Texas. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on H. Con. Res. 250.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

Mr. BARTON of Texas. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today in support of H. Con. Res. 250 which recog-

nizes community organization of public access defibrillation programs. The Committee on Energy and Commerce favorably reported this resolution by voice vote last week.

Coronary heart disease continues to be the leading cause of death in the United States. It is often the case that lives are either saved or lost in those first few critical moments when an individual suffers from cardiac arrest. Fortunately, medical technology and life-saving equipment are improving every day. New, portable medical devices called "automated external defibrillators" are often used to deliver life-saving treatment on the scene.

I can give a personal example of an individual in my district, Mr. Gary Terry, who was going through the Austin airport several years ago when he suffered a massive heart attack just as he went through security checkpoint. Luckily, the city of Austin had just installed these defibrillators at the airport, and it has on videotape the emergency technicians grabbing the defibrillator, putting it on Mr. Terry's chest and literally bringing him back to life. Mr. Terry is alive and well today because one of these devices was in the Austin international airport in Austin, Texas.

Over the past 6 years, Congress has enacted several laws to expand the use of automatic external defibrillators. H. Con. Res. 250 recognizes the growing number of community activist organizations and municipal governments leading the national effort to establish public access defibrillation programs and encourages the continued development and implementation of programs in a variety of community venues.

Madam Speaker, I would urge that all Members adopt this resolution. Also, I want to thank my good friend, the gentleman from Ohio (Mr. BROWN), for his sponsorship of this legislation. It shows his commitment to a healthier community that he would take the time to be the leader on this important legislation.

Madam Speaker, I reserve the balance of my time.

□ 1530

Mr. BROWN of Ohio. Madam Speaker, I yield myself 3 minutes.

Madam Speaker, heart disease kills more Americans than any other condition. Nearly a quarter of a million Americans die from cardiac arrest every year. The American Heart Association, which supports this resolution, estimates that with widespread access to and use of defibrillation, 50,000 of those lives could be saved every year.

We are starting to see real success in ensuring that there are defibrillators in major public places in this country. In Summit County, in my district, a successful effort led by Dr. Terry Gordon has resulted in public defibrillators in all of the county's 59 middle schools and high schools, and in 23 other public buildings, coverage that probably is unprecedented in the United States.

As these efforts continue, we are making strides towards public access defibrillation in all major public venues, in schools and sports arenas, in large hotels, in concert halls, in high-rise buildings, in gated communities and high-security companies.

Currently, 60 percent of heart attacks take place in venues like these outside of hospitals, and the survival rate for these attacks is only around 5 percent. Public access to defibrillation programs provide defibrillators to facilities and train nonmedical personnel in how to use a defibrillator. If administered within 3 minutes of a victim collapsing from cardiac arrest, a defibrillator can increase the patient's survival rate, it is estimated, by 70 percent.

Knowing these statistics, Madam Speaker, it is clear we can do better in preventing death from cardiac arrest. This House can begin by fully funding the Community and Rural Defibrillation Program for fiscal year 2005.

My colleagues, the gentlewoman from California (Mrs. CAPPS), the gentleman from Illinois (Mr. SHIMKUS), along with the gentleman from Georgia (Mr. DEAL) and the gentleman from Wisconsin (Mr. KIND), and especially the gentleman from Florida (Mr. STEARNS) have been champions of these important programs, and it is critical their funding levels be maintained.

Madam Speaker, I thank the gentleman from Texas (Mr. BARTON), our chairman, and the ranking member, the gentleman from Michigan (Mr. DINGELL) of the Committee on Energy and Commerce, as well as my colleague and friend, the gentleman from Florida (Mr. BILIRAKIS) for bringing this measure up for consideration before the House today. It is an important bill that will save lives. This will matter to the lives of family members of so many Americans.

Madam Speaker, I reserve the balance of my time.

Mr. BARTON of Texas. Madam Speaker, I yield 3 minutes to the distinguished gentleman from Florida (Mr. STEARNS), one of our subcommittee chairmen.

Mr. STEARNS. Madam Speaker, I thank the distinguished chairman for yielding me this time, and I rise in support and as a cosponsor of H. Con. Res. 250, recognizing public access defibrillation, or PAD, programs.

My colleagues, years ago I had the opportunity and honor to work with the American Heart Association and we developed legislation addressing sudden cardiac arrest along with the gentlewoman from California (Mrs. CAPPS). This cooperation led to the Cardiac Arrest Survival Act. After years of work, the provisions from the Cardiac Arrest Survival Act were combined with other health care provisions in H.R. 2498, and finally enacted in 2000 as the Public Health Improvement Act.

This law directs the Secretary of Health and Human Services to simply

develop guidelines for the placement of defibrillators in public buildings. It also directs Health and Human Services to consult with and counsel other Federal agencies where such devices are to be used.

Now, a number of agencies have initiated the program, including Labor, HHS, Commerce, GSA, and IRS. These public access defibrillation programs, PADs, vary with occupancy of the building, building size and other characteristics.

Since last winter, the gentlewoman from California (Mrs. CAPPS) and I have been working with the Architect of the Capitol and the Office of the Attending Physician to consider the implementation of a PAD program throughout the United States Capitol complex to help save lives for the people that visit our Capitol in and around this area. The hard-working staff, employees of the U.S. Congress, and the many visitors should be afforded the same protection as citizens employed by or visiting other Federal facilities implementing PAD programs.

We are finding that the biggest area of discussion from building supervisors at both the executive branch and here in the Capitol is the ongoing maintenance of the AEDs and the program once they are in place. Now, thanks to our persistence, I am pleased to share that each Chamber's Legislative Branch Appropriations bill for fiscal year 2005 has included \$1 million in funding for installation and annual maintenance of hundreds and hundreds of defibrillators around the Capitol complex.

This is good, good news, and I am very pleased to cosponsor the legislation of my colleague, the gentleman from Ohio (Mr. BROWN), and I commend him for his active participation on this.

Mr. BROWN of Ohio. Madam Speaker, I have no further requests for time, and I yield back the balance of my time.

Mr. BARTON of Texas. Madam Speaker, I yield myself such time as I may consume to just ask that we strongly support the Sherrod Brown bill.

Mr. BARTON of Texas. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mrs. MILLER of Michigan). The question is on the motion offered by the gentleman from Texas (Mr. BARTON) that the House suspend the rules and agree to the concurrent resolution, H. Con. Res. 250.

The question was taken; and (two-thirds having voted in favor thereof) the rules were suspended and the concurrent resolution was agreed to.

A motion to reconsider was laid on the table.

EXPRESSING SENSE OF CONGRESS THAT PRIVATE HEALTH INSURANCE COMPANIES SHOULD TAKE A PROACTIVE ROLE IN PROMOTING HEALTHY LIFESTYLES

Mr. BARTON of Texas. Madam Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 34) expressing the sense of the Congress that private health insurance companies should take a proactive role in promoting healthy lifestyles, and for other purposes, as amended.

The Clerk read as follows:

H. CON. RES. 34

Whereas Secretary of Health and Human Services Tommy Thompson acknowledges that \$270,000,000,000 in health costs are caused by preventable diseases, including \$183,000,000,000 for heart disease alone, and has called current policies of insurance companies "wrongheaded" for not doing more to encourage people to stay healthy to prevent expensive illnesses;

Whereas obesity increases the risk of illness from more than 30 medical conditions, including heart disease, cancer, stroke, chronic obstructive pulmonary disease, and diabetes, which account for 2/3 of all deaths in the United States;

Whereas 61 percent of adults in the United States (120,000,000 people) are above their target weight, and 13 percent of children and adolescents in the United States are obese or overweight, a figure that has tripled since 1980;

Whereas from age 50 to 70, those who do not perform strength training lose a quarter to a third of a pound of muscle every year and gain the same amount in body fat;

Whereas weight training is proven to increase bone density and reduce osteoporosis among men and women over 50 years old;

Whereas if the more than 88,000,000 inactive adults in the United States began regular exercise, national medical costs would decrease by more than \$76,000,000,000 each year;

Whereas on June 20, 2002, President George W. Bush launched the Healthier US fitness initiative to promote a healthy lifestyle and encourage people in the United States to increase their physical fitness; and

Whereas providing incentives for exercise and strength training would help more people become active and healthy and would decrease national medical costs: Now, therefore, be it

Resolved by the House of Representatives (the Senate concurring), That—

(1) the Congress commends Secretary of Health and Human Services Tommy Thompson for his efforts to encourage private health insurance companies to take action to encourage people in the United States to lead active lifestyles;

(2) it is the sense of the Congress that private health insurance companies should—

(A) do more to encourage people in the United States to lead a healthier and more active lifestyle to prevent expensive and painful illnesses;

(B) provide discounted premiums to those who exercise regularly; and

(C) encourage frequent screening for diseases that are easily treatable in their early stages; and

(3) the Congress applauds private health insurance companies that are already taking these actions.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Texas (Mr. BARTON) and the gentleman

from Ohio (Mr. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from Texas (Mr. BARTON).

GENERAL LEAVE

Mr. BARTON of Texas. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on H. Con. Res. 34, the bill now under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

Mr. BARTON of Texas. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I want to thank the gentlewoman from Missouri (Ms. MCCARTHY) for sponsoring this legislation. I think its basic intent, that is, as a Nation we need to do more ourselves to promote healthy lifestyles, is extremely sound. I know insurance companies are already doing just that in this area.

I believe that what the insurance companies are doing is being very constructive. I also know there are limitations on what we can legitimately expect insurance companies to do. Individual and family responsibility remains the key and cannot be replaced by laws and resolutions.

Having said that, I would like to take a moment to thank my good friend, the gentlewoman from Missouri (Ms. MCCARTHY), for her service to this House and her leadership on this issue. She will be leaving us after the conclusion of this Congress, and she will be missed. She has been a valuable member of the Committee on Energy and Commerce. Her brightness and her willingness to work in a bipartisan fashion across the aisle have helped move numerous pieces of legislation, and we will certainly miss her as we hopefully start the next Congress.

Today, we are here to support her as she brings this important resolution to the floor of the House of Representatives. She has been a tireless leader on this issue, and I think it is a fitting tribute to her that we bring this bill to the floor. The people of the Fifth District of Missouri should be very grateful for her service to the country.

Madam Speaker, I reserve the balance of my time.

Mr. BROWN of Ohio. Madam Speaker, I yield myself 2 minutes.

Madam Speaker, I want to join the gentleman from Texas (Mr. BARTON), our chairman, in thanking the gentlewoman from Missouri (Ms. MCCARTHY) for her good work, not just on this legislation, but her years of service to this Congress, and especially her years of participation on the Committee on Energy and Commerce and her good work there on a whole myriad of issues. I especially, as I said, want to thank her for her work on this resolution, which encourages private health insurance companies to take a more proactive role in promoting healthy lifestyles.