

and machine tool shops. They are closing and selling. From North Carolina, public auction. Plant closing. Everything must sell. From Marion, Ohio, complete shop close-out auction. From Cuyahoga Falls, Ohio, in my district, absolute auction. Everything is going. From Scottsboro, Alabama, precision job shop downsizing. Another one here for a CNC machining tool room and production machinery. Excess equipment due to corporate outsourcing.

Excess equipment due to corporate outsourcing. President Bush's top economic adviser the other day said outsourcing is a good thing when these plants move overseas and they ship jobs overseas, because it makes our businesses more efficient. Tell that to the 50 or 60 workers that worked at this plant when the owners of this plant say excess equipment, we are selling due to corporate outsourcing.

From Massachusetts, a large-capacity fabricating and machine shop closing. Another one from Chicago. Six CNC lathes, 12 chucks, 22 bar machines sold. Surplus to the continuing operations. They have lost businesses and they are selling most of their equipment. Here is another one. Three days, two tremendous public auctions. Machinery, equipment, and real estate. Plant's closed, everything must go. Real estate for sale. Here is another one that says Dominion Castings Foundry, equipment machine facility. Plant closed, everything sells. Another one from Baltimore, Maryland. Complete facility selling. Another, 5-day public auction. Plant closing due to relocation. Another one, on and on and on. This company is closing for the same reasons.

Now, Mr. Speaker, it is bad enough that these places are closing and the President's response is more tax cuts. That is not working. More trade agreements hemorrhaging jobs overseas. That is not working. That is bad enough, but there are 800,000 Americans whose unemployment compensation has expired in the last 3 months. That is 800,000 workers, 800,000 families living in communities around this country; and the President and this Congress, the Republican leadership in this Congress, will not extend their unemployment compensation. That is morally wrong. It is bad for our country, it is bad for our communities, it is bad for our families, and it is bad for our workers.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Idaho (Mr. OTTER) is recognized for 5 minutes.

(Mr. OTTER addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

#### RURAL VETERANS HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Michigan (Mr. STUPAK) is recognized for 5 minutes.

Mr. STUPAK. Mr. Speaker, I rise tonight in support of rural veterans and in support of H.R. 2379, the Rural Veterans Access to Care Act of 2003. I would like to thank the gentleman from Nebraska (Mr. OSBORNE) for his leadership on this issue.

No veteran should ever have reason to doubt America's gratitude for his or her service to the Nation and to the cause of freedom. America's veterans deserve nothing less than our highest gratitude, our deepest respect, and our strongest support. Veterans from rural areas, like my district, deserve nothing less than their comrades living in more populated areas.

Michigan's First Congressional District has the highest population in any congressional district in Michigan. There are 65,000 veterans in my district, one-fifth of all the veterans in the State of Michigan.

□ 2030

They live over a huge area. The Upper Peninsula alone spans 450 miles from east to west. While the VA provides wonderful care in northern Michigan, it is far too hard for veterans to access health care. Recently, a Vietnam veteran from the Upper Peninsula had to go to Milwaukee, Wisconsin, for the treatment that he needed. Milwaukee is a long way from home, so our veterans go as far as the Iron Mountain VA Medical Center, and they spend the night there. The next day they are put on a bus and they are shipped down to Milwaukee, Wisconsin. And that is repeated once their treatment is done, whether it is 1, 2 or 3 days. They are put back on a bus, they go back to Iron Mountain, Michigan, and then they spend the night and go on home.

It is outrageous that they have to travel so many miles, in some case 450 miles, just to get treatment. At best the distance is an inconvenience. At worst, it puts veterans' lives at serious risk. I had another case where a retired Navy veteran from Sault Ste. Marie had surgery at the VA Medical Center in Milwaukee to treat his cancer. After surgery, he was transported via van all of the way back to Sault Ste. Marie, 379 miles away. The next morning, his spouse had to take him to the emergency room in Sault Ste. Marie, Michigan, and the emergency room could not help him. The nearest VA medical center in Iron Mountain could not help him either, so he had once again to be shipped by ambulance 379 miles down to Milwaukee, Wisconsin.

Mr. Speaker, we cannot have veterans being shipped back and forth across state lines. It is dangerous, and it is just not right. These two constituents represent the challenges faced every day by rural veterans across this country. Congress needs to act to address the specific needs of rural veterans. That is why I am a cosponsor of H.R. 2379, the Rural Veterans Access to Care Act of 2003. The legislation would allow veterans to enroll in an option to

seek routine health care closer to home.

H.R. 2379 sets aside 5 percent of each VA region's medical care allocation to be used for routine medical care for highly rural or geographically remote veterans. The legislation would allow rural veterans to be closer to their health care providers, rather than traveling hundreds of miles for an appointment at the VA, which could be especially dangerous during inclement weather.

In Michigan, I will also continue to work to open a community-based outpatient clinic in Gladstone. Over 2 years ago, the VA announced to open the CBOC, as we call them, in Gladstone. Yet during every successive round of CBOC openings across the country, somehow our region just cannot seem to get Gladstone funded. It is estimated a Gladstone CBOC would provide much needed basic health care to our veterans, in fact, to approximately 750 veterans alone in its first year of operation. This facility is critical towards keeping our promise to those who serve our country so well.

I think today, Americans have a deeper understanding of the sacrifices of our military personnel than at any time in recent history. Our commitment to veterans must be more than just waving the American flag in times of armed conflict and recognizing them on national holidays. We owe it to our veterans to do more. We must be prepared to take their battle-borne scars of war and military service throughout their lifetime, and make sure they have the quality of service they need.

Today I was visited by a couple from Chassel, Michigan, representing the VFW. They handed me the VFW's priorities for the coming year. We can see here the VFW priority goals for 2004. It says veterans health care now, we earned it. If you look at it, it says the number one priority of veterans is health care. They say underfunding of the VA budget, 6-month waits to see a doctor, denial of care to category 8 veterans, little or no long-term care, little or no mental health care, and millions of fed-up veterans.

Well, those of us who represent rural areas, and no matter where veterans are, we believe they should be taken care of. There are special challenges for rural veterans, and we stand here tonight to urge this Congress to pass H.R. 2379 to take care of all of our veterans, but especially those of us who have veterans who live in our rural districts.

#### CARBON DIOXIDE CONTRIBUTES TO CLIMATE CHANGE

The SPEAKER pro tempore (Mr. BURGESS). Under a previous order of the House, the gentleman from Maryland (Mr. GILCHREST) is recognized for 5 minutes.

Mr. GILCHREST. Mr. Speaker, I did not come here to talk about veterans, but I will add my voice to the chorus of

voices tonight to endorse the legislation put forth by the gentleman from Nebraska (Mr. BEREUTER) and state that veterans deserve fundamental, sound health care in this country. Veterans' families also need that kind of health care because veterans fought for their families in foreign wars. As we move forward with health care, remember the veteran, remember the veteran's mother, remember all those in rural areas that we can work collectively to find ways to manage health care in urban, suburban and rural areas.

However, I came here tonight to talk about this lump of coal. This lump of coal and coal throughout the world for the last several hundred years has provided heat, warmth, security and in recent times electric power which has transformed civilization. Coal has fueled the modern era. Coal is made up mostly of something called carbon. Coal has been developed on our planet naturally by geologic forces over millions of years. As the carbon on the surface in the form of animals, plants, vegetation, rocks, you name it, gradually deteriorated, was forced underground, in some cases in mountainous areas, in other cases, flat areas, but basically was forced underground, sometimes 100 feet, sometimes miles.

When this lump of coal, which is made mostly of carbon, was locked up underground over a long period of time, it took an element out of the atmosphere called carbon dioxide, CO<sub>2</sub>, and locked it away. Over eons of time, these geologic forces, whether there was a lot of CO<sub>2</sub> in the atmosphere or much less CO<sub>2</sub> in the atmosphere, the geologic forces changed the climate.

Now the most recent climate change came about 10,000 years ago when the Ice Age ended. As the Ice Age ended, we moved into a warming trend. Over the last 10,000 years, the rate of warming has been about 1 degree centigrade every 1,000 years on a steady rate. That is 1 degree centigrade every 1,000 years.

Since we have been burning coal, which is carbon and then it turns into CO<sub>2</sub>, we have been releasing into the atmosphere the amount of CO<sub>2</sub> in decades what it took nature to lock up over millions of years.

So in the last 150 years, the earth has warmed about 1 degree centigrade. Previous to that time, the earth had been warming 1 degree centigrade every 1,000 years. Since we have been burning fossil fuel, we have been warming the surface of the earth's temperature, reducing glaciers, thinning the ice cap in the Arctic Ocean by about 40 percent. The American Geophysical Union, the National Academy of Sciences, a group of scientists which President Bush appointed, has confirmed that the earth from human activity has been warming fairly significantly over the last 100 years, but especially over the last 50 years.

Carbon is locked up in this piece of coal. When this piece of coal burns, it releases carbon dioxide which is one of

those elements naturally occurring in the world, naturally occurring in the atmosphere that balances the heat for the climate. When we infuse a significant amount of carbon dioxide into the atmosphere, the climate begins to warm faster. In fact, the EPA and other scientific institutions in the United States say that over 90 percent of the CO<sub>2</sub> released in the United States comes from burning fossil fuel.

What I would like to point out, Mr. Speaker, is this chart that actually goes from 1750 up to the year 2000. We can see from 1750, 1800, 1850, burning fossil fuel was minimal, so we do not increase CO<sub>2</sub> in the atmosphere very much. But once we get into the 1900s, especially 1950, CO<sub>2</sub> increases in the atmosphere from burning fossil fuels has had a dramatic effect. CO<sub>2</sub> is a naturally occurring element in the world. When we increase that element by the magnitude that we have, we have the potential for climate change.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from the District of Columbia (Ms. NORTON) is recognized for 5 minutes.

(Ms. NORTON addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

#### FUND VETERANS HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Virginia (Mr. GOODE) is recognized for 5 minutes.

Mr. GOODE. Mr. Speaker, first, I want to salute coach the gentleman from Nebraska (Mr. OSBORNE) and express my appreciation to him on his leadership on the Rural Veterans Access to Health Care legislation.

A concern that I have with veterans health care is the lack of access rural veterans experience in seeking treatment at a VA facility. I represent a largely rural area of Virginia in which over 60,000 veterans reside. In the Commonwealth of Virginia, over 96,000 veterans were treated last year at a VA facility. There are only three VA medical centers located in Virginia to serve these deserving and eligible veterans. The VA has worked hard to expand their services, and they have opened three community-based outpatient clinics, four vet centers, and six mental health satellite clinics throughout the State. Unfortunately, more is needed.

The Salem, Virginia VA Medical Center, serving southwest Virginia has identified the lack of access to care for rural veterans as a big challenge that it faces. They provide services for at least 11,000 enrollees in my district alone each year. It is essential that more community-based outpatient clinics be established to accommodate our Nation's veterans living in rural and outlying communities.

I am very concerned that the proposed increase for veterans health care

in the fiscal year 2005 budget is only \$1.2 billion over the amount enacted in 2004. It is proposed that we allow \$29.7 billion to meet the medical care needs of the over 4.2 million people treated in VA health care facilities each year across the country.

I believe that we need to take care of our veterans' needs first before we send our money overseas to help foreign countries. Veterans deserve the benefit of full funding of their health care system. I believe, along with a number of my colleagues, that we need to reduce the amount for international affairs in the concurrent budget resolution and increase the funding for veterans benefits and services by at least \$3 billion so that we can improve veterans' health care. I repeat, decrease foreign aid by at least \$3 billion and increase veterans health care by at least \$3 billion.

In fact, I would gladly support increasing VA health care by \$4 billion or \$5 billion. I have had a great deal of contact with many of our veterans over the last few months, and the sentiment among them is that their health care is being shortchanged. Over the years, we have supplied billions in foreign aid to countries like Peru and Iraq. We gave them millions upon millions of dollars. Also Ethiopia, South Africa, Mexico, Indonesia, to name only a few.

In fiscal year 2005, the proposed budget for international affairs will increase discretionary spending to \$31.5 billion, a 7.5 percent increase from fiscal year 2004, and approximately two-thirds of that goes to foreign aid.

I believe that we must carefully evaluate and prioritize our funds. We have a responsibility to support our veterans and to provide them with the best possible health care and to ensure that veterans have access to that care. We need to start prioritizing our needs as a Nation above those of foreign countries which have not always stood by us. The veterans have stood by us. They have carried the fight for us. They have made America great. We need to fund them.

Mr. Speaker, we do not need to fund the foreign countries that have not stood by us. I will not read the whole list, but there is a long list of recipients of foreign aid, and they have not been at our side recently, and have often not been at our side in the past. Let us fund veterans and not fund foreign countries who have not helped us.

#### VETERANS HOSPITALS STRUGGLING TO MEET DEMANDS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maine (Mr. ALLEN) is recognized for 5 minutes.

Mr. ALLEN. Mr. Speaker, the men and women of the Armed Forces serve this country honorably. They put their lives on the line in order to protect our freedom and our values. We owe them our gratitude, and they deserve to be recognized and fairly compensated for their service.