

EXTENSIONS OF REMARKS

IN MEMORIAL OF ED SMITH

HON. BOB ETHERIDGE

OF NORTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 26, 2007

Mr. ETHERIDGE. Madam Speaker, today I rise to honor the life of Ed Smith of Raleigh, North Carolina, who passed away on Sunday, September 19, 2007. In his passing I lost a good friend, and North Carolina lost one of its most outstanding citizens and a man who was instrumental in his community, county, and State.

One of the area's most beloved men, my friend Ed, passed away peacefully with his family by his side following a brief bout with pneumonia. He was only 56. Ed was a happy political warrior who enjoyed being in the middle of the political arena, from voter registration to fighting for the rights of the disabled. At the age of 5, Ed contracted polio which left him confined to a wheelchair, but Ed didn't let his disability slow him down in life. He was among the first severely disabled students to get a driver's license using hand controls. He was one of the first disabled students to attend Ligon High School. Ed also graduated from St. Andrews Presbyterian College in Laurinburg, NC. As a young child Ed learned about politics from his mother, the late Judy Hubbard, a seamstress, who won awards for registering voters. As a teenager Ed helped elect Clarence Lightner in 1967 who became Raleigh's first black mayor.

Throughout the years, it is estimated that Ed worked on over 65 campaigns and political committees. The politicians Ed helped put into office include Vernon Malone, Abe Jones, Bob Hensley, Dan Blue, Henry Frye, Reps. BRAD MILLER, DAVID PRICE, and G.K. BUTTERFIELD, and he also worked on my campaign. The name Ed Smith went beyond the State of North Carolina. President Bill Clinton appointed him to the Home Loan Bank of Atlanta. He was a State co-chairman for the Gore-Lieberman campaign. During the 1992 and 1996 Democratic conventions, Ed was the State delegation whip for the Clinton-Gore campaign, making sure the Tar Heels were working hand-in-glove with the national campaign. Ed is survived by his lovely wife Debra Smith.

Madam Speaker, Ed saw politics as an extension of his activism on behalf of civil rights for African Americans and the handicapped. He was a respected and a successful dedicated public servant, and a great North Carolinian. It is fitting that we honor him and his family today.

HONORING THE 125TH ANNIVERSARY OF THE ST. PAUL PUBLIC LIBRARY AND SCHUBERT CLUB

HON. BETTY McCOLLUM

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 26, 2007

Ms. McCOLLUM of Minnesota. Madam Speaker, today I rise to honor the City of St. Paul Public Library and Schubert Club for their 125 years of service to the community. These two premier cultural institutions share a unique, shared history, and on behalf of residents of Minnesota's Fourth Congressional District, I offer my congratulations on their 125th anniversary and celebration of words and music on September 30, 2007.

Under the leadership of Alexander Ramsey, who had served as mayor, Governor, U.S. Senator, and U.S. Secretary of War, the city's Library Association proposed that St. Paul establish a free public library. The city's first public library was opened in September 1882 with a collection of 8,051 books. Today, the St. Paul Public Library has expanded to 12 branches throughout St. Paul, and a bookmobile. The library now offers more than 1 million items in its collection. The Central Library in downtown St. Paul features magnificent Italian Renaissance architecture, housing approximately 350,000 books and drawing more than 300,000 visitors each year. The St. Paul Public Library continues to provide vital educational and cultural resources and a place for civic engagement for residents of St. Paul.

During the same year the St. Paul libraries were established, Governor Ramsey's daughter, Marion Ramsey Furness, along with her music-loving friends, founded a music club. The club later named in honor of Franz Schubert continues to thrive as one of the oldest musical and arts organizations in the United States. During its 125-year history, the Schubert Club has promoted the art of music and made it accessible to the public through recitals, concerts, a museum and educational programs. The Schubert Club has hosted many of the world's renowned musicians in St. Paul, including Jascha Heifetz, Myra Hess, Artur Rubinstein, Elizabeth Schwarzkopf, Cecilia Bartoli, Bryn Terfel, Vladimir Horowitz, Robert Casadesu, Isaac Stern, Yo-Yo Ma, and Beverly Sills, just to name a few.

Located across Rice Park from each other in downtown St. Paul, the Central Library and the Schubert Club continue to serve the public well through education, art and culture.

Madam Speaker, in honor of the 125th anniversary of the St. Paul Public Library and the Schubert Club, I am pleased to submit this statement for the CONGRESSIONAL RECORD.

TRIBUTE TO THE "AIM HIGHER" AWARD WINNERS

HON. BILL SHUSTER

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 26, 2007

Mr. SHUSTER. Madam Speaker, I rise today to recognize the winners of the "Aim Higher" awards from the HealthSouth Rehabilitation Hospital of Altoona, given to encourage and reward personal achievement within its community. For the past 10 years, HealthSouth has presented rehabilitation awards to members of their community who have overcome a great disability or injury. The "Aim Higher" awards ceremony will take place this year on October 1. I congratulate this year's winners: Karrie Lee, winner of the "Live.Life" Award; and Michael Kiel and William Ricciotti, winners of the "Aim Higher" Personal Achievement awards.

Karrie Lee is the winner of the HealthSouth "Live.Life" Award. Karrie was nominated by her mother for her incredible recovery from a life-threatening car accident. Karrie was hit by a tractor trailer in 2003, halfway through her senior year of high school. She was left in a coma for several days and suffered severe injuries. After undergoing several surgeries Karrie was discharged to the HealthSouth Rehabilitation Hospital, upon which time she began her recovery. While Karrie's life was completely interrupted by her accident, she worked hard and finished her senior year at home while completing her rehabilitation program. She took classes at St. Francis University and is now studying at the University of Pittsburgh, working toward her goal of becoming a nurse practitioner.

Michael Kiel is the recipient of the "Aim Higher" Personal Achievement Award. Michael was nominated for this award by his aunt. During his sophomore year of college, Michael was shot at a convenience store by a man he did not know. As a result, Michael suffered a spinal cord injury which left him paralyzed. While some would be defeated by such a tragic experience, Michael persevered, returning to college 4 months later. He earned a bachelor's degree in psychology and continued on to earn a master's in rehab counseling. He has a love for life and gives back to others who have suffered by working as a rehab counselor in Johnstown, Pennsylvania.

William Ricciotti is also a recipient of the "Aim Higher" Personal Achievement Award. Bill suffered a stroke in 2004 which left him disabled; however he worked through his injuries and gained back much of his mobility. He learned how to walk again and has made tremendous progress in making a nearly complete recovery. Though his left hand was left slightly impaired, he continues to work on improving in therapy. He has continued to enjoy life, participating in activities he has always loved. Bill's visits bring joy to the employees of HealthSouth, as he always exhibits a wonderful attitude.

● This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.

Congratulations to Karrie, Michael and Bill. All of their stories are moving and inspiring, and many others can look up to their examples of personal strength and determination. Their stories will encourage others to never give up, and they may be comforted in knowing that no matter what is thrown their way, they can overcome it and carry on their lives with a positive outlook.

CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2007

SPEECH OF

HON. BOB ETHERIDGE

OF NORTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, September 25, 2007

Mr. ETHERIDGE. Mr. Speaker, I rise reluctantly in opposition to H.R. 976. There is no doubt that the State Children's Health Insurance Program, or SCHIP, which expires at the end of this fiscal year, needs to be reauthorized. Millions of children across the country, including 120,000 in North Carolina's Health Choice, depend on SCHIP to provide cost-effective and high-quality health services. This health care makes a difference to the development of at-risk children and to their leading healthy adult lives. Unfortunately, in its current form, this legislation will excessively burden the Second Congressional District of North Carolina.

By singling out tobacco for a huge tax increase, the provisions of this bill will cost North Carolina's citizens a great deal in direct cost increases. Researchers at North Carolina State University estimate that North Carolina's economy would lose at least \$540 million a year through the tax's indirect impact as well. North Carolina's tobacco farmers grow a legal crop. These hard-working farm families have suffered greatly from transformations in the global economy. Because my district is the second largest tobacco producing district in the country, this bill disproportionately affects my constituents who work hard to be able to pay their bills and provide a better life for their children. This just doesn't pass the fairness test.

I have been a long-time supporter of SCHIP. As a member of the House Budget Committee, I am proud that we provided for an increase of \$50 billion for SCHIP, not just the \$35 billion reflected in the compromise we are considering today. I support reauthorizing and strengthening SCHIP, but North Carolina's citizens pay more than their share for the benefits they receive in this bill.

Mr. Speaker, I want children to receive the health care they need. However, as the bill stands, I must vote no today, and hope that we can come up with a better, more balanced plan in the future.

RECOGNIZING THE HISTORIC NIKE MISSILE BASE PH-07, RICHBORO, BUCKS COUNTY, PA

HON. PATRICK J. MURPHY

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 26, 2007

Mr. PATRICK J. MURPHY of Pennsylvania. Madam Speaker, it is my great privilege to rise

before you today to commemorate the Richboro Bucks County Nike Missile Base PH-07 and the many brave individuals who staffed this base during the cold war. Set in historic Bucks County, Pennsylvania, the now closed base was operational during the cold war in order to protect Philadelphia from Soviet missile attacks. Now, 30 years later, these same individuals are working to ensure this base receives recognition through the Pennsylvania Historical Museum Commission's Historic Site Program.

In a time when fear of missile attacks plagued the entire country, the military built the Nike missile base in our quiet Philadelphia suburb. Currently, the base lies dormant beneath batting cages and other sites from a modern community. Children run over it, unsure of exactly what it is. Though many are unaware of its significant cultural and historical importance, the missile base still retains much of its former integrity. The workers employed there during the cold war underwent extensive military training and carried a strong sense of camaraderie and pride for their country. They worked together to ensure the base was efficiently run and to protect Philadelphia from an imminent Soviet attack.

Madam Speaker, for these reasons, on October 5, 2007, this site will become part of the Bucks County Historical Society. The efforts of the great people who worked here will be forever remembered in a timeless plaque that describes the role of this base and the importance it held for our country during trying times. I ask my colleagues to join me in thanking those who worked tirelessly to make this honor possible and those who fought to protect our community. Madam Speaker, I proudly recognize the Nike missile base for its historical significance.

CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2007

SPEECH OF

HON. JAMES P. MORAN

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, September 25, 2007

Mr. MORAN of Virginia. Mr. Speaker, I rise today in strong support of the Children's Health Insurance Program Reauthorization Act of 2007. Truly, we face a health care crisis in this country—in the richest country on Earth, 46 million Americans do not have health insurance, including 9 million children. Today's bipartisan, bicameral compromise is not a perfect solution to that problem, but is a decisive, strong step towards covering uninsured kids and fulfilling our moral obligation to our children.

In my home State of Virginia, the CHIP program, known as FAMIS or Family Access to Medical Insurance Security, currently provides coverage to 137,642 low-income children each year. The current population survey estimates that 171,642 children in Virginia remain uninsured, and the CHIP Reauthorization Act will help us cover 74,200 of these children in Fiscal Year 2008. The CHIP Reauthorization Act will ensure that these children have access to high quality health insurance, including the preventative services that children need to be healthy and successful in school and later in

life. This bill will provide dental and mental health benefits on par with medical and surgical services—truly ensuring that the whole child's health is provided for.

The CHIP Reauthorization Act does not increase the deficit, through a 61-cent-per-pack increase in the Federal excise tax on cigarettes. In my view as chairman of the Congressional Prevention Caucus, an increase in the Federal tobacco tax is sound public health policy. On the one hand, it provides a reliable revenue source to offset the costs of expanding coverage to low-income children. On the other, given that 70 percent of health care spending in the U.S. can be attributed to chronic diseases, many of which are linked to smoking, measures which reduce tobacco use, particularly among young people, are responsible ways to improve public health and reduce the overall costs of our healthcare system.

The CHIP Reauthorization Act also addresses a serious problem arising from the implementation of the Deficit Reduction Act of 2005. Opponents of this responsible, common-sense, humane adjustment claim that language in the 2005 Deficit Reduction Act (DRA) that imposed harsher citizenship verification requirements on State Medicaid programs is the only barrier protecting taxpayer dollars from being spent on healthcare for illegal immigrants. Empirical evidence from the first 9 months of the implementation of this rule demonstrates, in fact, that nothing could be further from the truth.

First and foremost, existing Federal law and provisions in the CHIP Reauthorization Act prevent Federal funds from being spent to provide benefits for illegal immigrants. Section 605 specifically states that "nothing in this act allows Federal payment for individuals who are not legal immigrants." Illegal immigrants have never been eligible for Medicaid, and nothing in the CHIP Reauthorization Act would change that fact.

Secondly, the DRA requirements have overwhelmingly failed to meet their objective—producing cost savings for the Medicaid program. Instead, they have imposed substantial additional costs on taxpayers while reducing health care benefits available to poor children. Wait times have skyrocketed, and measures to streamline the application process have been rendered impossible. In the first 9 months of the implementation of this requirement, six States spent a combined \$16.6 million in State and Federal dollars, and found just eight undocumented immigrants out of a pool of 3.6 million Medicaid applicants. The DRA requirements have effectively led States and the Federal Government to spend millions of dollars in additional administrative expenses, funds which have ultimately been put to use denying care to tens of thousands of otherwise eligible American children.

Third, these draconian requirements, which are far stricter than those employed by other government programs, have caused tens of thousands of U.S. citizen children to lose health insurance coverage. In Virginia, there was a net decline of more than 11,000 children enrolled in Medicaid during the first nine months of implementation. Had growth in enrollment continued at the same rate it had during the previous 2 years, the State would have seen an increase of 9,000 poor children in the program during this same time period. Kansas has seen a net decline of 14,000 children. The Virginia State Medicaid Office has