

By Mr. MENENDEZ (for himself, Mr. BROWNBACK, Mr. FEINGOLD, Mr. LAUTENBERG, Mr. CASEY, Mr. LIEBERMAN, Ms. MIKULSKI, Mrs. DOLE, Ms. COLLINS, and Mr. DODD):

S. Res. 203. A resolution calling on the Government of the People's Republic of China to use its unique influence and economic leverage to stop genocide and violence in Darfur, Sudan; to the Committee on Foreign Relations.

By Mr. FEINGOLD (for himself, Ms. SNOWE, Ms. MIKULSKI, Mr. CARDIN, Mr. LAUTENBERG, Mrs. LINCOLN, Mr. SANDERS, Mrs. FEINSTEIN, Mrs. CLINTON, Mr. BROWN, and Mr. BINGAMAN):

S. Res. 204. A resolution expressing the sense of the Senate with regard to the importance of National Women's Health Week, which promotes awareness of diseases that affect women and which encourages women to take preventive measures to ensure good health; considered and agreed to.

By Ms. MURKOWSKI (for herself, Mr. WHITEHOUSE, Mr. STEVENS, Mr. VITTER, Mr. CRAIG, Mrs. HUTCHISON, Mr. CRAPO, Mr. BAUCUS, Mr. LEAHY, Mr. LIEBERMAN, Mr. OBAMA, Ms. LANDRIEU, Mr. COLEMAN, Mr. BAYH, Mrs. LINCOLN, Mr. SCHUMER, Mr. THUNE, and Mr. DOMENICI):

S. Res. 205. A resolution designating June 2007 as "National Internet Safety Month"; considered and agreed to.

ADDITIONAL COSPONSORS

S. 67

At the request of Mr. INOUE, the name of the Senator from Missouri (Mrs. MCCASKILL) was added as a cosponsor of S. 67, a bill to amend title 10, United States Code, to permit former members of the Armed Forces who have a service-connected disability rated as total to travel on military aircraft in the same manner and to the same extent as retired members of the Armed Forces are entitled to travel on such aircraft.

S. 150

At the request of Mrs. BOXER, the name of the Senator from Maryland (Mr. CARDIN) was added as a cosponsor of S. 150, a bill to amend the Safe Drinking Water Act to protect the health of pregnant women, fetuses, infants, and children by requiring a health advisory and drinking water standard for perchlorate.

S. 340

At the request of Mrs. FEINSTEIN, the names of the Senator from Pennsylvania (Mr. CASEY) and the Senator from Indiana (Mr. BAYH) were added as cosponsors of S. 340, a bill to improve agricultural job opportunities, benefits, and security for aliens in the United States, and for other purposes.

S. 368

At the request of Mr. BIDEN, the name of the Senator from Minnesota (Mr. COLEMAN) was added as a cosponsor of S. 368, a bill to amend the Omnibus Crime Control and Safe Streets Act of 1968 to enhance the COPS ON THE BEAT grant program, and for other purposes.

S. 558

At the request of Mr. DOMENICI, the name of the Senator from Kentucky

(Mr. BUNNING) was added as a cosponsor of S. 558, a bill to provide parity between health insurance coverage of mental health benefits and benefits for medical and surgical services.

At the request of Mr. KENNEDY, the name of the Senator from Illinois (Mr. OBAMA) was added as a cosponsor of S. 558, *supra*.

S. 626

At the request of Mr. KENNEDY, the name of the Senator from South Dakota (Mr. JOHNSON) was added as a cosponsor of S. 626, a bill to amend the Public Health Service Act to provide for arthritis research and public health, and for other purposes.

S. 694

At the request of Mrs. CLINTON, the name of the Senator from Arkansas (Mr. PRYOR) was added as a cosponsor of S. 694, a bill to direct the Secretary of Transportation to issue regulations to reduce the incidence of child injury and death occurring inside or outside of light motor vehicles, and for other purposes.

S. 831

At the request of Mr. DURBIN, the name of the Senator from Texas (Mrs. HUTCHISON) was added as a cosponsor of S. 831, a bill to authorize States and local governments to prohibit the investment of State assets in any company that has a qualifying business relationship with Sudan.

S. 849

At the request of Mr. LEAHY, the name of the Senator from Vermont (Mr. SANDERS) was added as a cosponsor of S. 849, a bill to promote accessibility, accountability, and openness in Government by strengthening section 552 of title 5, United States Code (commonly referred to as the Freedom of Information Act), and for other purposes.

S. 901

At the request of Mr. KENNEDY, the names of the Senator from South Dakota (Mr. JOHNSON), the Senator from Louisiana (Ms. LANDRIEU) and the Senator from Michigan (Mr. LEVIN) were added as cosponsors of S. 901, a bill to amend the Public Health Service Act to provide additional authorizations of appropriations for the health centers program under section 330 of such Act.

S. 935

At the request of Mr. NELSON of Florida, the name of the Senator from Missouri (Mrs. MCCASKILL) was added as a cosponsor of S. 935, a bill to repeal the requirement for reduction of survivor annuities under the Survivor Benefit Plan by veterans' dependency and indemnity compensation, and for other purposes.

S. 971

At the request of Mr. BOND, the name of the Senator from Indiana (Mr. BAYH) was added as a cosponsor of S. 971, a bill to establish the National Institute of Food and Agriculture, to provide funding for the support of fundamental agricultural research of the highest quality, and for other purposes.

S. 1003

At the request of Ms. STABENOW, the name of the Senator from Washington (Ms. CANTWELL) was added as a cosponsor of S. 1003, a bill to amend title XVIII of the Social Security Act to improve access to emergency medical services and the quality and efficiency of care furnished in emergency departments of hospitals and critical access hospitals by establishing a bipartisan commission to examine factors that affect the effective delivery of such services, by providing for additional payments for certain physician services furnished in such emergency departments, and by establishing a Centers for Medicare & Medicaid Services Working Group, and for other purposes.

S. 1060

At the request of Mr. BIDEN, the name of the Senator from Massachusetts (Mr. KERRY) was added as a cosponsor of S. 1060, a bill to reauthorize the grant program for reentry of offenders into the community in the Omnibus Crime Control and Safe Streets Act of 1968, to improve reentry planning and implementation, and for other purposes.

S. 1175

At the request of Mr. DURBIN, the name of the Senator from Pennsylvania (Mr. CASEY) was added as a cosponsor of S. 1175, a bill to end the use of child soldiers in hostilities around the world, and for other purposes.

S. 1183

At the request of Mr. HARKIN, the name of the Senator from South Dakota (Mr. JOHNSON) was added as a cosponsor of S. 1183, a bill to enhance and further research into paralysis and to improve rehabilitation and the quality of life for persons living with paralysis and other physical disabilities, and for other purposes.

S. 1224

At the request of Mr. ROCKEFELLER, the names of the Senator from Hawaii (Mr. INOUE) and the Senator from Rhode Island (Mr. WHITEHOUSE) were added as cosponsors of S. 1224, a bill to amend title XXI of the Social Security Act to reauthorize the State Children's Health Insurance Program, and for other purposes.

S. 1226

At the request of Mr. BAYH, the name of the Senator from Massachusetts (Mr. KERRY) was added as a cosponsor of S. 1226, a bill to amend title XIX of the Social Security Act to establish programs to improve the quality, performance, and delivery of pediatric care.

S. 1232

At the request of Mr. DODD, the name of the Senator from Illinois (Mr. DURBIN) was added as a cosponsor of S. 1232, a bill to direct the Secretary of Health and Human Services, in consultation with the Secretary of Education, to develop a voluntary policy for managing the risk of food allergy and anaphylaxis in schools, to establish school-based food allergy management grants, and for other purposes.

S. 1328

At the request of Mr. LEAHY, the name of the Senator from Ohio (Mr. BROWN) was added as a cosponsor of S. 1328, a bill to amend the Immigration and Nationality Act to eliminate discrimination in the immigration laws by permitting permanent partners of United States citizens and lawful permanent residents to obtain lawful permanent resident status in the same manner as spouses of citizens and lawful permanent residents and to penalize immigration fraud in connection with permanent partnerships.

S. 1379

At the request of Mrs. FEINSTEIN, the names of the Senator from Massachusetts (Mr. KENNEDY), the Senator from Wisconsin (Mr. FEINGOLD) and the Senator from New Jersey (Mr. LAUTENBERG) were added as cosponsors of S. 1379, a bill to amend chapter 35 of title 28, United States Code, to strike the exception to the residency requirements for United States attorneys.

AMENDMENT NO. 1094

At the request of Mr. KERRY, the name of the Senator from Florida (Mr. NELSON) was added as a cosponsor of amendment No. 1094 proposed to H.R. 1495, a bill to provide for the conservation and development of water and related resources, to authorize the Secretary of the Army to construct various projects for improvements to rivers and harbors of the United States, and for other purposes.

AMENDMENT NO. 1098

At the request of Mr. DURBIN, his name was added as a cosponsor of amendment No. 1098 proposed to H.R. 1495, a bill to provide for the conservation and development of water and related resources, to authorize the Secretary of the Army to construct various projects for improvements to rivers and harbors of the United States, and for other purposes.

At the request of Mr. FEINGOLD, the names of the Senator from Massachusetts (Mr. KENNEDY), the Senator from California (Mrs. BOXER) and the Senator from Iowa (Mr. HARKIN) were added as cosponsors of amendment No. 1098 proposed to H.R. 1495, *supra*.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Ms. STABENOW (for herself and Ms. SNOWE):

S. 1408. A bill improve quality in health care by providing incentives for adoption of modern information technology; to the Committee on Finance.

Ms. STABENOW. Mr. President, the evidence showing the ability of health IT to reduce costs and improve quality of care is simply overwhelming.

That is why Senator OLYMPIA SNOWE and I are reintroducing our Health-Tech legislation to accelerate the adoption of health information technology.

Businesses across the country are struggling to remain competitive in a

global market with skyrocketing health care costs.

The use of electronic medical records could save more than \$80 billion annually, reducing costs for businesses and taxpayers alike. We should be putting these systems in place immediately!

And, despite the best doctors, nurses, hospitals, and other health care providers in the world, some patients just are not getting the care they need.

Often times that is because our health care providers do not have the information they need about their patients, when they need it and where they need it.

And, our health care system are not currently set up to prevent errors; the most common medical errors include medication errors and the extra costs of treating drug-related injuries amount to at least \$3.5 billion a year.

As compelling as the cost savings is the promise health IT holds for improving the quality of our health care system.

Getting health IT into the hands of our doctors, hospitals, nursing homes and community clinics will mean patients get the care they need, at the right time, and in the best setting.

The value of health IT—saving lives and saving money—is well-known.

So why is it not being used more widely?

Health care providers are struggling to keep up with their daily needs; a major barrier to widespread use of IT is the initial investment cost.

The costs of implementing health IT can be staggering.

For example, the cost of an integrated electronic health record system for a three- to six-member physician practice is estimated to be \$70,000–\$100,000.

And, the savings from using health IT go primarily to the patients, employers, and insurers, not the providers.

If a patient needs one less x-ray because a hospital can pull up the x-ray performed by a radiologist in a different setting, that is one less co-payment for the patient, and one less bill to the patient's employer or insurer, or to the Medicare program.

It only makes sense for the Federal Government to invest some seed money.

Every day we delay providing Federal dollars, we delay getting health information technology systems in place, and businesses, taxpayers and patients pay in both dollars and lives.

The bill that Senator SNOWE and I are reintroducing today would address just that: It would put IT systems in the hands of providers by establishing a 5-year, \$4 billion grant program for health care providers and by providing tax incentives and adjusting Medicare payments for providers who use these systems.

The bill will be referred to the Finance Committee; Senator SNOWE and I are both members of the committee and will work to include our legislation

in any appropriate package the committee considers.

We have made an important change to our bill this Congress.

A patient's right to health information privacy is paramount, and is essential to the health care provider-patient relationship.

Therefore we have added a requirement that health IT systems funded by our legislation ensure the privacy and security of personal medical information, and that patients be informed if there is a breach in the privacy of their medical record.

We need to get this done. Widespread use of health information technology can revolutionize our health care system. Getting systems into the hands of providers is the first step.

Our legislation has the support of many consumer, provider, labor and business groups including: AFL-CIO, Altarum, American Academy of Pediatrics, American College of Cardiology, American College of Emergency Physicians, American College of Physicians, American Health Care Association, American Heart Association, American Society of Health-System Pharmacists, Ascension Health, Automation Alley, BlueCross/BlueShield of Michigan, DaimlerChrysler, Detroit Medical Center, e-Health Initiative, Families USA, Federation of American Hospitals, Ford Motor Company, General Motors Corporation, Greenway Medical Technologies, Healthcare Information and Management Systems Society (HIMSS), HR Policy Association, IBM, Marquette General Health System, McLaren Health Care Corporation, Michigan Health and Hospital Association, Michigan State Medical Society, National Association of Children's Hospitals, National Association of Community Health Centers, National Business Coalition on Health, National Business Group on Health, National Partnership for Women and Families, National Rural Health Association, Oracle, Saint John Health, Saint Joseph Mercy Health System—Ann Arbor, Michigan; Saint Joseph Mercy Oakland—Pontiac, Michigan; Saint Mary's Health Care—Grand Rapids, Michigan and Trinity Health.

I urge my colleagues to support this legislation.

Ms. SNOWE. President, today I join my colleague, Senator STABENOW of Michigan, in introducing the Health Information Technology Act of 2007, which will serve to improve the quality of health care through implementation of information technology, IT, in hospitals, health centers and physician practices throughout the country. Our legislation is necessary because as a nation we face two stark problems.

The first of these is a serious patient-safety problem. Indeed if most Americans were told today that 98,000 lives were lost needlessly last year and a cure was available they would undoubtedly call for action. Yet the Institute of Medicine, IOM, has reported that medical errors inflict that toll every