

and initiatives to address racism, discrimination, and inequality.

As I continue to work on these initiatives, I urge my colleagues to join me in supporting this Resolution Recognizing Black Europeans and encourage them to review the statements and submissions from the Helsinki Commission's Black Europe Hearing at www.csce.gov.

EARMARK DECLARATION

HON. MARY FALLIN

OF OKLAHOMA

IN THE HOUSE OF REPRESENTATIVES

Friday, June 26, 2009

Ms. FALLIN. Madam Speaker, pursuant to the Republican Leadership standards on earmarks, I am submitting the following information regarding earmarks I received as part of H.R. 2647, "The National Defense Authorization Act for Fiscal Year 2010."

Title of Project: Advanced Autonomous Robotic Inspections for Aging Aircraft

Amount of Project: \$2,000,000

Account: Air Force, Operations & Maintenance

Project Recipient: Veracity Technology Solutions, LLC 2701 Liberty Parkway, Suite 311, Midwest City, OK 73001

At my request, \$2,000,000 was included in the FY10 NDAA, H.R. 2647, for Veracity Solutions in Midwest City, OK, to implement a fully automated autonomous robotic vehicle that has the capability to inspect for corrosion, as well as crack detection around fasteners for the KC-135 aircraft. Current inspection methods are both antiquated and time consuming, which has increased maintenance downtime and unnecessary refurbishment. A state-of-the-art nondestructive inspection system and training, which decreases maintenance costs and improves safety, will have the ability to detect corrosion and cracking on the KC-135 wing skins (and other aging aircraft). This system will allow for condition assessment of aircraft structures, as well as continuous assessment through the historical comparison of previous and present inspection results.

Specifically, the funding will be used for the technical personnel, facilities, and equipment required to develop an integrated system that includes a medical grade ultrasonic inspection system, an advanced impedance plane analysis eddy current unit, and an autonomous inspection vehicle that will allow engineers and depot crews to accurately and instantly identify defects and that are currently undetectable with traditional nondestructive inspection methods. The end product will provide a permanent record of the structural member which can be stored on the network for future comparison.

Title of Project: E-6B Strategic Communications Upgrade Block 1A (VLF-TX & HPTS)

Amount of Project: \$4,000,000

Account: Navy, Research, Development, Test & Evaluation

Project Recipient: Rockwell Collins, 400 Collins Road, Cedar Rapids, Iowa 52498

At my request, \$4,000,000 was included in the FY10 NDAA, H.R. 2647, to provide modifications to the Navy's E-6B Mercury TACAMO. The E-6B Mercury TACAMO is a manned airborne communications relay platform designed to provide a survivable, reliable, enduring airborne Command and Control communications link between the President,

Secretary of Defense, and U.S. strategic and non-strategic forces, especially in the time of crisis or national emergency. In performing the TACAMO mission, the platform's primary purpose is the relay of messages via survivable Very Low Frequency transmission (VLF-TX).

This funding will provide for the modification of the VLF-TX, in addition to the High Power Transmit Set (HPTS) subsystem. The current VLF-TX is becoming unsupportable for the mission at hand. The money requested would provide for an encryption function which extends the development cycle for deployment of new equipment. In addition, it would be used to upgrade improvement in the HPTS system and improve the wire control system and operational availability.

These upgrades are critical to the E-6B execution of the TACAMO mission located at Tinker AFB and provide communications to the nation's strategic ballistic missile submarine force as a part of the Minimum Essential Emergency Communication Network (MEECN).

Title of Project: FIDO EXPLOSIVE DETECTOR

Amount of Project: \$7,000,000

Account: Army, Other Procurement

Line Number: 135

Project Recipient: ICx Nomadics, 1024 S. Innovation Way, Stillwater, OK 74074

At my request, \$7,000,000 was included in the FY10 NDAA, H.R. 2647, for the FIDO Explosive Detector, which will provide soldiers in combat theater the ability to identify and disable explosive devices and those who manufacture these devices by detecting explosive vapors and residues. Over 1,500 FIDO systems have been fielded in support of current military operations.

The small, lightweight, handheld devices provide the soldier the ability to screen persons, packages, cargo, equipment, vehicles, and buildings and report vapor detections in real time with audio and visual feedback to the operator. The small detection devices can be mounted onto a unit's organic Unmanned Ground Vehicle (UGV) to provide additional force protection, while protecting the safety of the unit. Current FIDO systems have been successful in the field, and advances have been made to increase the ability of the sensor to detect additional substances in use today and into the future. This funding will accelerate the fielding of FIDO's in combat theater and providing explosive detection and protection to men and women in uniform.

Title of Project: Joint Fires and Effects Trainer System Enhancements

Amount of Project: \$2,500,000

Account: Army, Research, Development, Test & Evaluation

Project Recipient: Creative Technologies, 6255 West Sunset Boulevards, Suite 716, Los Angeles, CA

At my request, \$2,500,000 was included in the FY10 NDAA, H.R. 2647, to provide upgrades to the Joint Fires and Effects Trainer System (JFETS) located at Fort Sill, Oklahoma. The current immersive simulation training capability suffers from one significant drawback—the one-to-one instructor/student requirement. The funding provided for this project would increase the ability for this program to upgrade the voice recognition technology of JFETS and allow a single instructor to manage nine concurrent call for fire training sessions in the Open Terrain module simulta-

neously and improve efficiency by 800%. Additionally, the project will develop an interactive application to drill soldiers in the five essential elements of accurate predictive fires to prepare them before they train in the immersive environment and reinforce the training before the deploy.

Title of Project: T-9 Noise Suppressor Support

Amount of Project: \$5,100,000

Account: Air Force, Military Construction

Project Recipient: Tinker Air Force Base, 3001 Staff Drive, Tinker AFB, OK 73145

At my request, \$5,100,000 was included in the FY10 NDAA, H.R. 2647, to fund the construction of foundations and supporting facilities for two T-9 noise suppression systems at Tinker AFB, Oklahoma. This project would consist of the construction of reinforced concrete footings and slabs capable of supporting T-9 style engine testing facilities, a 20,000 gallon jet engine fuel storage and delivery system, utilities, access driveways, and a small office/restroom/break facility. Current engine test facilities are aging and unable to support the current test mission.

With the completion of the new Tinker Aerospace Complex (TAC) and the transfer of engine maintenance to this facility, construction of these test cells near the TAC will allow contiguous support of military jet engine repair, decrease maintenance downtime, and associated cost. This will allow the 76th Maintenance Wing and the 76th Propulsion Maintenance Group the capabilities to meet its mission of delivering engines on time and on cost and position Tinker AFB for increased mission capabilities in the future.

NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2010

SPEECH OF

HON. MELISSA L. BEAN

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 24, 2009

The House in Committee of the Whole House on the State of the Union had under consideration of the bill (H.R. 2047) to authorize appropriations for fiscal year 2010 for military activities of the Department of Defense; to prescribe military personnel strengths for fiscal year 2010, and for other purposes:

Ms. BEAN. Mr. Chair, I rise in support of H.R. 2647, the National Defense Authorization Act and encourage its passage. Earlier this Congress I introduced H.R. 1267, "Captain James A. Lovell Federal Health Care Act of 2009, which provides legislative authority to the Navy and the Department of Veterans Affairs (VA) to jointly operate the new "Captain James A. Lovell Federal Health Care Center." In the other body, Senator DICK DURBIN has been working to include similar language in the Senate version of the National Defense Authorization Act.

After completion, the Lovell Federal Health Care Center will be the first health care facility in the nation to be operated jointly between the VA and the Navy saving taxpayers millions of dollars that would otherwise have been needed to rebuild or renovate the Navy's nearby hospital. Without this legislation, the Center will not be able to provide essential services to

thousands of military beneficiaries in the region. Beneficiaries who had previously received care at the Naval Health Clinic Great Lakes would either be ineligible for care or would be charged a significant co-pay for certain care, including emergency, hospitalization, outpatient, and behavioral health services. The facility is scheduled to begin joint operations on October 1, 2010.

While my legislation was not included in the underlying bill, it is my understanding that Senator Durbin will be able to include similar language in the Senate NDAA. I will continue to work with my colleagues in the Senate on its inclusion, and encourage passage of the underlying bill.

“A VISION FOR HEALTH CARE”
COMMENCEMENT ADDRESS BY
SENATOR RICHARD T. MOORE

HON. MICHAEL E. CAPUANO

OF MASSACHUSETTS
IN THE HOUSE OF REPRESENTATIVES

Friday, June 26, 2009

Mr. CAPUANO. Madam Speaker, my friend, Senator Richard T. Moore was honored recently at the commencement of the New England College of Optometry. I wanted to share his remarks, as his address justly paid tribute to the school, its faculty, and graduates for their commitment to public service.

A VISION FOR HEALTH CARE

President Chen, Chairman Manfredi, Vice Chairman Ferrucci (my friend and personal Optometrist), Members of the Board of Trustees, parents, alumni, friends, and most especially, my fellow graduates of the Class of 2009 . . . I'm honored to share in your celebration today and to receive a degree from this prestigious institution with its well-deserved reputation for improving access to care, enhancing the quality of life by preventing blindness, and developing innovative, economically viable models of eye care.

Visus per mentem, vision through the mind, has long been the motto of this great College. It is a phrase that reflects a sincere commitment to learn the skills and knowledge necessary to serve others, as well as a deeply felt belief that you can help people to see the world with more clarity and purpose—to give in a way, the gift of sight—or at least improved vision. Hopefully, your clinical experience working at the New England Eye Institute and in community health centers and school or elderly vision clinics, has kindled in you to a desire to devote some portion of your time, treasure and talent to bring quality eye care to the underserved of our society.

Few, if any of you, in the Class of 2009 could have attended New England College of Optometry for four or more years without deriving from your studies, from your outstanding instructors and most of all from your own inner hearts some sense of inspiration and idealism as well as an appreciation of your social responsibility as a newly-minted health care professional.

CONTINUE THE LEGACY OF COMMUNITY SERVICE

Graduates of New England College of Optometry who preceded you have blazed a trail of community service through vision research and care that is almost legendary! They left an inspiring legacy upon which you and your classmates can now build. With your OD degree in hand, challenge yourselves to follow in the footsteps of exemplary alumni such as Charlie Mullen OD '69 (who

addressed you a few moments ago) and Kenneth Myers OD '74, who firmly established vision care as a focus of the U.S. Veterans Administration. Their pioneering work is, today, helping wounded veterans of the wars in Iraq and Afghanistan to see beyond the trauma of war and return to productive lives in our communities.

Then, there's Edward Goodnig OD '76. He brought his knowledge and skills to underserved regions expanding primary care opportunities for Alaska's Native American settlements and schools. You may also know of Frank Thorn OD '79, today's Commencement Marshal and an expert on the causes and development of Myopia, who has shared his professional knowledge and restless energy from this campus on the banks of the Charles River to remote villages in the Amazon Rain Forest and—in Marco Polo fashion—from Europe to China. Their exciting and fulfilling careers, chronicled in the College's 2008 Annual Report, offer a glimpse of the potential that awaits you as today's graduates.

Such stories of successful graduates can teach, they can offer hope, they can provide inspiration. But they cannot supply the courage to follow your own path. For that each of you must look into your own hearts. Accept your degrees today with the same pride, enthusiasm, and commitment that launched those pioneers of Optometry into rewarding lives of caring service.

CONTINUE TO LEARN AND SHARE KNOWLEDGE

Never be too busy to keep from learning how to better serve your patients. That includes sharing your real world knowledge of your patients and the condition of their eyes with those involved in academic research here at New England College of Optometry and elsewhere. It also means staying informed about the rapidly changing science of your profession. Each of you, my fellow graduates, as our newest health care professionals, have a responsibility to continue your education by maintaining competency in vision care and in the technology necessary to deliver the best quality of care to all who seek better vision.

Whether your career takes you to remote regions of America or the world, or takes you back to wherever you may call “home,” remember one of the basic concepts that you learned here in the Back Bay, that eye care professionals are an integral part of the team of primary care providers, and deserve to be treated with the same degree of professional respect as any other health care professional! In this era of health care reform, each of you will play an essential role in not only diagnosing and treating conditions of the eye, but you will also serve as part of the team of professional caregivers who assist and support each other for the benefit of every patient.

MASSACHUSETTS AS A MODEL FOR THE NATION

For the past four years, as each of you have been immersed in becoming competent, dedicated vision care professionals in the classrooms at 424 Beacon Street, I've been learning the lessons of health care reform about a mile away in the State House meeting rooms at 24 Beacon Street. The grades are now in, and the results are clearly informing the growing national debate on health care. Massachusetts is leading the way in health care reform! We are:

First in the nation in health care access.

First in electronic health records and e-prescribing.

In the forefront of patient safety, quality improvement, and cost containment.

Leading the way in prescription drug ethics.

In just three years, 432,000 Massachusetts residents, who were previously un-insured,

have gained access to health care and the many stories of lives saved or improved are truly heart-warming.

OPTOMETRY'S CONTRIBUTION TO HEALTH
REFORM

One of the challenges facing Massachusetts and the Nation in fully realizing the health improvement and cost savings benefits of health care reform is the need to expand patient access to primary care. It is just as important—and less expensive—to keep people healthy, as well as to treat those who are ill. We have made great progress in expanding access to health insurance for the people of Massachusetts, but there is still an unmet need for easy access to primary care providers. I believe that optometrists, such as each of you, are ready—even anxious—to help to fill some of that void.

To address this challenge, those who pay for health care need to embrace new payment models that support wellness as well as coordinating care for those who suffer from illness, injury or less than good health. Any such wellness effort needs to include regular screening—such as vision screening—and be coordinated with health information technology such as through a centralized vision care registry.

Major stakeholders in health care reform obviously include the physician community. The Massachusetts Medical Society, the oldest, continuously operating state medical society in the United States, is the primary voice of physicians in the development of public policy. However, it sometimes seems to me that the society's policy positions have evolved far more slowly than the progress of science itself.

An old baseball player once said, “I don't question the integrity of an umpire, just his eyesight.” Similarly, I don't question the integrity of our state medical society, just their vision! As fewer medical doctors enter the field of primary care, the medical profession needs to embrace other health professionals who, with appropriate training such as that provided by the New England College of Optometry, can do much to provide safe, cost-effective care for patients needing attention.

It's high time for all Massachusetts physicians to rise above the tradition-bound guild mentality that confounds health care progress, and respect the education and experience of all health professions in treating the whole person. It's time for Massachusetts to embrace treatment regimens for optometrists that are already fully accepted in 49 other states, if we are to offer quality care that is convenient and affordable for patients. You, the Class of 2009, must make your voices heard as that debate unfolds!

It was Robert Kennedy who once challenged an earlier graduating class at another college—“to decide, as Goethe put it, whether you will be a hammer—or an anvil. The question is whether you are to be a hammer—whether you are to give to the world in which you were reared and educated, the broadest possible benefits of that education.” So I challenge you to get involved in writing the health care policy of your generation—be a hammer!

A VISION FOR HEALTH CARE IN AMERICA

You are graduating at a most exciting time in health care! As you begin your professional careers in vision care, health reform is about to take center stage in the national arena. National health reform is likely to include minimum standards for benefits, an individual insurance mandate, a guaranteed issue requirement for health insurance, a prohibition on excluding coverage of pre-existing conditions, the creation of an insurance exchange where people can sign up for coverage—all factors that are included in the Massachusetts health reform effort.