

would be used to model how blast waves from explosions cause short- and long-term brain injury to warfighters and to develop devices and equipment to mitigate the damage. This research will lead to devices for improved detection and optimized equipment designs to protect against multiple insults to the brain from the blast impact and blast waves.

Requesting Member: Congressman JEFF FORTENBERRY

Bill Number: H.R. 3326, FY10 Defense Appropriations Bill

Account: RDT&E, Air Force, University Research Initiatives, PE 0601102F, Line 2

Project Name: Safeguarding End-User Military Software

Amount: \$1,500,000

Name and Address of Requesting Entity: University of Nebraska-Lincoln located at 302 Canfield Administrations Building, Lincoln, Nebraska 68583

Description: Military software increasingly is being created by "end-user programmers," who use programming tools such as spreadsheets, military planning systems, and Matlab simulations to create software. This unvalidated software runs critical day-to-day operations and often is not dependable. The funding would be used to develop advanced software engineering safeguards that can be embedded in software programmed by military personnel to help them prevent and detect errors and produce more dependable military systems that save lives and money. Prototype safeguards implementing algorithms and mechanisms will be built and validated through carefully designed studies. These safeguards will be convenient for users and help them reason through the dependability of software as they develop it, protecting programmers and operators from errors and saving millions of dollars in programming development costs.

EARMARK DECLARATION

HON. TODD TIAHRT

OF KANSAS

IN THE HOUSE OF REPRESENTATIVES

Thursday, July 30, 2009

Mr. TIAHRT. Madam Speaker, in accordance with the February 2008 New Republican Earmark Standards Guidance, I submit the following in regards to H.R. 3288, the Fiscal Year 2010 Transportation, Housing and Urban Development, and Related Agencies Appropriations Act.

FEDERAL AVIATION ADMINISTRATION—NATIONAL INSTITUTE FOR AVIATION RESEARCH (NIAR) WICHITA STATE UNIVERSITY

H.R. 3288, the Fiscal Year 2010 Transportation, Housing and Urban Development, and Related Agencies Appropriations Act contains \$1,000,000 for facilities and equipment to expand the capabilities of its National Institute for Aviation Research (NIAR) to conduct Advanced Materials Research in support and improvement of its ongoing aviation safety research in the areas of metallic and nonmetallic structures, crashworthiness, and aging aircraft effects. The entity to receive funding for this project is Wichita State University located at 1845 Fairmount St, Wichita, Kansas, 67260.

FEDERAL AVIATION ADMINISTRATION—NATIONAL INSTITUTE FOR AVIATION RESEARCH (NIAR) WICHITA STATE UNIVERSITY

H.R. 3288, the Fiscal Year 2010 Transportation, Housing and Urban Development, and

Related Agencies Appropriations Act contains \$1,000,000 for technical personnel, facilities and equipment at the National Institute for Aviation Research to provide a comprehensive education and training initiative for composite airframe maintenance and airworthiness awareness. The entity to receive funding for this project is Wichita State University located at 1845 Fairmount St, Wichita, Kansas, 67260.

FEDERAL HIGHWAY ADMINISTRATION—INTERSTATE MAINTENANCE DISCRETIONARY—CITY OF WICHITA, KS: INTERSTATE 235/US 54 AND I-235/CENTRAL AVENUE INTERCHANGE

H.R. 3183, the Fiscal Year 2010 Transportation, Housing and Urban Development, and Related Agencies Appropriations Act contains \$750,000 for preliminary engineering and right-of-way costs for the reconstruction of the Kellogg (US-54) and Central interchanges on I-235 in western Wichita. The entity to receive funding for this project is the City of Wichita, located at City Hall, 455 North Main, Wichita, KS 67202.

FEDERAL HIGHWAY ADMINISTRATION—SURFACE TRANSPORTATION PRIORITIES CITY OF WICHITA, KS: 21ST STREET NORTH RAILROAD OVERPASS

H.R. 3183, the Fiscal Year 2010 Transportation, Housing and Urban Development, and Related Agencies Appropriations Act contains \$500,000 for an elevated roadway overpass along 21st Street North from Broadway to I-135 in order to eliminate the lengthy vehicular traffic delays and vehicle entrapment issues associated with multiple at-grade rail crossings located along this segment of a busy east-west arterial city street. The entity to receive funding for this project is the City of Wichita located at 1845 Fairmount St, Wichita, Kansas, 67260.

COMMEMORATING THE VOTING RIGHTS ACT OF 1965

HON. DANNY K. DAVIS

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Thursday, July 30, 2009

Mr. DAVIS of Illinois. Madam Speaker, as we enter into the month of August, I would like to take this opportunity to commemorate the anniversary of The Voting Rights Act of 1965. On August 6, 1965, President Lyndon Johnson signed the Voting Rights Act into law. The date marks a pivotal moment in our country's progress in extending equal membership in the political processes to every American. The right to vote is a fundamental principle of all democracies. Yet, in our great nation whose founding fathers and documents boasted of its creation to promote equality, there was a substantial period of history during which minority men and women were barred from that very right. The Fifteenth Amendment to the Constitution guarantees the right to vote for every citizen, but the discriminatory practices of Jim Crow in the antebellum south used taxes, literacy tests, gerrymandering, and language discrimination to prevent Blacks from voting and taking part in the government. Without the right to vote, many African Americans were subject to intolerable injustices and appalling prejudice.

The Voting Rights Act represents a culmination of the great efforts of civil rights organizations and activists to inform the nation of the extensive disenfranchisement taking place

throughout the country. The anniversary of the enactment of this historic law provides an opportunity to acknowledge these activists. Most notably, their tremendous dedication and uncompromising pursuit of equality took the form of peaceful marches from Selma to Montgomery that were met with vicious attacks by state and local police forces. These events caught the attention of the President and Congress, contributing to a commitment to new civil rights legislation to counter the resistance and discrimination laws within the states. The enactment of the Voting Rights Act in 1965 allowed African-Americans across the country to finally have a say in the functioning of the country. Today, I celebrate the anniversary of this law as a reflection of what our country represents: a nation pledged to representing the views, values, and beliefs of all the people it serves.

DEPARTMENT OF DEFENSE APPROPRIATIONS ACT, 2010

SPEECH OF

HON. EARL BLUMENAUER

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Wednesday, July 29, 2009

The House in Committee of the Whole House on the State of the Union had under consideration of the bill (H.R. 3326) making appropriations for the Department of Defense for the fiscal year ending September 30, 2010, and for other purposes:

Mr. BLUMENAUER. Madam Chair, it was my hope that this year would mark a turning point in the type and amount of we spend on the Department of Defense. Oregonians know I frequently vote against Defense Appropriations bills as spending too much money for the wrong priorities.

I was pleased to see the traditional military pay raise included, as well as an extension of current stop loss compensation to troops extended tours in 2010. I also continue to strongly support provisions that prohibit permanent bases in Iraq and Afghanistan and torture.

Yet the bill also includes funding for programs that have been outdated since the end of the Cold War two decades ago, and which even the Secretary of Defense would like to terminate. The list of these programs funded here is long and runs into the billions: \$80 million for the Missile Defense, Kinetic Energy Interceptor Program, \$369 million for parts for the F-22 and C-17, an extra \$3 billion for Navy ships, and \$674 million for still more unrequested C-17 planes.

These programs come at the expense of other, more worthy projects and investments. I offered two amendments to the Rules Committee for this bill, both of which would have shifted funding to environmental programs. My first amendment would have shifted \$100 million from the unnecessary Joint Strike Fighter (F-35) Alternate Engine Program and toward the chronically-underfunded Defense Department's Environmental Restoration Program. These programs, responsible for the cleaning of toxic wastes and leftover bombs from all active bases and Formerly Used Defense Sites, will receive less funds than they did last year even though the number of sites needing clean up has increased.

My second amendment would have created a small pilot program to fund a practical demonstration of ordnance discrimination technology. Currently over 75 percent of material uncovered during the clearing of leftover and still dangerous bombs and shells is non-dangerous scrap metal. This type of technology, once proven through a live demonstration, would cut cleanup costs by two to three times.

These amendments were commonsense ways to reduce Pentagon liability, save money and resources in the long run, and make our lands safer for our communities and military personnel. I was extremely disappointed that these amendments were unable to receive an up-or-down vote. But I will continue to work to ensure the Federal government is a better partner to communities.

The Administration is moving in the right direction by being willing to make tough decisions to cut or terminate certain favored, yet expensive and unnecessary, programs. It is my hope that Congress can craft a bill in conference that more closely adheres to this principled and practical stance and that meets the needs of our military and our communities.

HEALTH CARE

HON. BETTY MCCOLLUM

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Thursday, July 30, 2009

Ms. MCCOLLUM. Madam Speaker, on July 20th, I held a health care hearing in the Minnesota State Capitol to discuss the challenges and opportunities for health care reform presents for Minnesota. Representatives from patient advocate groups, health plans, hospitals, health plans, County Commissioners, and State House Representatives were in attendance. The speakers discussed the need to expand preventative care, to end the practice of denying coverage for pre-existing conditions, and to improve access to quality, affordable care.

In hearing I heard over and over again that the current flawed Medicare reimbursement formula is harming Minnesota. The people of Minnesota want health care reform that addresses the three major challenges in health care reform—cost, quality, and access—none of which can be addressed without fixing the Medicare reimbursement formula. I support moving towards a system that ensures that all patients will receive evidence-based, quality care as the standard.

OPENING STATEMENT BY CONGRESSWOMAN
BETTY MCCOLLUM

FEDERAL HEALTH CARE REFORM: OPPORTUNITIES AND CHALLENGES FOR MINNESOTA

Good morning. Thank you all for joining me for this morning's hearing.

My goal today is to hear from a distinguished and diverse group of Minnesota experts on the subject of health care reform in Washington. I want to hear not just a view of the need for national reforms—but more specifically—the opportunities, challenges, costs, and consequences for Minnesota as we reform our nation's health care system.

Let me start by saying I support President Obama's goal of reforming health care with a focus on reducing cost, increasing access, and ensuring quality care for all Americans. The current system is not sustainable for our families, businesses, tax payers, or the providers of health care. In addition, almost

50 million Americans are uninsured and too often left to access care in the emergency room where it is too expensive and too late.

As we look ahead I want to maintain a system where people can keep their doctors and private insurance plans if they are working well for them.

I support a public insurance option that will expand the opportunity for coverage and create a competition in the marketplace to keep premium costs down and ensure quality care.

I believe we have both an opportunity and an obligation to ensure every child in America is not only covered by insurance but able to access the care they need to grow up healthy, safe and successful.

We can do all of these things, but I have a concern—a major concern. Comprehensive health care reform in my opinion must mean that all 50 states move forward under any legislation passed by Congress and signed by President Obama. In other words—I want a bill in which no state is left behind—and that means Minnesota.

In Minnesota we are doing a lot of things right. And, each and every one of the people testifying today is contributing to making health care in Minnesota successful. We are not perfect and I want to see even greater strides forward here at home, but when compared to many other places across the U.S. we are doing a good job.

In Congress health care reform is dominating the agenda and we are at a crucial time.

Minnesota's successes must not only be acknowledged, they should be rewarded. Instead, the legislation currently proposed has the real potential to actually harm Minnesota's delivery of health care and that is simply unacceptable.

About fifteen years ago while serving here in the Minnesota House of Representatives I worked on the issue of geographic disparities in Medicare reimbursement. The flawed and discriminatory formula that funds Medicare continues to penalize Minnesota tax payers and patients, doctors, hospitals, counties and the entire health care sector which is providing high quality, low cost care.

If the health care reform legislation moving through Congress simply extends the existing out-of-date Medicare reimbursement system into the future—rewarding high cost, low quality states while continuing to penalize Minnesota—then this is not reform.

Even worse, if this flawed Medicare reimbursement formula is extended as the basis of a public insurance option this will not only penalize Minnesota, it will undermine and deteriorate the very success our state has attained in delivering quality, low cost care.

In Congress, I have been outspoken about Minnesota's unfair treatment among the leaders of the Democratic Caucus and Chairmen Waxman, Rangel and Miller who are writing the bill.

I have distributed a letter I sent to Democratic leadership, signed by 19 other Democrats. Let me read from the letter:

"We represent states in which the quality of care exceeds the national average and per-beneficiary fee-for-service Medicare costs are substantially lower than the national average. Our 'low-cost, high quality' states are setting the national standard for Medicare, yet we are penalized by the current Medicare reimbursement formula. Furthermore, any public insurance option that is based on Medicare's current reimbursement formula would only result in an unacceptable further penalization of our states."

I was pleased to have Congressmen Walz, Ellison, and Oberstar join me on this letter because we got the attention of the leadership.

The next day I was invited by Speaker Pelosi to a meeting with leadership and the three committee chairman—Chairmen Waxman, Rangel, and Miller and Majority Leader Steny Hoyer to discuss this issue. In the meeting a study of the Medicare reimbursement formula was offered ... and quickly rejected. I made it clear that we don't need to study this problem; it has been studied to death. Now is the time to fix the formula.

I'm committed to working with President Obama and leaders in Congress to pass health care reform that works to make our system meet the needs of all Americans. But this doesn't mean I will allow Minnesota to be left behind or disadvantaged because we are a leader.

Our group of twenty Democrats will again be meeting tomorrow. My message to leadership is clear—I want to pass health care reform but I will not vote for a bill that hurts Minnesota while benefiting other states. That is not reform, but rather a recipe for disaster.

In closing, this is the most important legislation I've worked on in my nine years in Congress.

It must meet Minnesota's needs and if it does not it will be difficult for our delegation to support it.

In my first year in Congress—2001—education reform legislation was passed called "No Child Left Behind." It was championed as a bill that would transform public education—except for one thing—I was sure it was going to hurt Minnesota and set back the reforms we already had in place. I was the only Democrat on the Education Committee to vote against "No Child Left Behind" and eventually 8 of the 10 members of the Minnesota delegation voted against it.

I want health care reform but I will not put my constituents and the State of Minnesota at a disadvantage or perpetuate a system that penalizes the excellent health care we deliver in our state.

I feel a sense of urgency as I return to Washington this afternoon. Your testimony today I hope will reinforce the need for reform and the need to ensure Minnesota's best interests are reflected in any legislation that is considered by Congress.

Thank you and I look forward to hearing your testimony.

TESTIMONY FROM BROCK NELSON, REGIONS HOSPITAL, CEO

Thank you Congresswoman McCollum for the opportunity to be here today and share our thought on health care reform legislation currently being debated by the United States House of Representatives.

My name is Brock Nelson. I am the CEO of Regions Hospital in St. Paul. Regions Hospital is part of the HealthPartners family of non-profit health care organizations.

Let me start by stating clearly, We wholeheartedly support President Obama's call for healthcare reform, and agree with his position that "the status quo is the one option that is not on the table". We applaud Congress and the White House for their ongoing efforts to obtain universal coverage for all Americans.

Legislation in the House is bold in its effort to obtain universal coverage through expanded subsidies and requirements on both individuals and business to provide coverage. Bold action is necessary if you want to address the problem of 50 million Americans who currently lack health coverage.

Unfortunately, these efforts to provide coverage for all will ultimately fall short unless Congress takes equally bold action to address how we pay for health care in this country. Our system currently rewards volume over value, and poor outcomes over good outcomes. We must change that equation if we want to make health care affordable in this country.