

manufacture, sale, offer for sale, introduction into commerce, or use of certain fuels and fuel additives, and for other purposes.

S. 2620

At the request of Mr. SCHUMER, the names of the Senator from Connecticut (Mr. BLUMENTHAL) and the Senator from Iowa (Mr. HARKIN) were added as cosponsors of S. 2620, a bill to amend title XVIII of the Social Security Act to provide for an extension of the Medicare-dependent hospital (MDH) program and the increased payments under the Medicare low-volume hospital program.

S. 3280

At the request of Mr. JOHANNIS, the name of the Senator from Iowa (Mr. GRASSLEY) was added as a cosponsor of S. 3280, a bill to preserve the companionship services exemption for minimum wage and overtime pay under the Fair Labor Standards Act of 1938.

S. 3332

At the request of Mr. BEGICH, the names of the Senator from Florida (Mr. NELSON) and the Senator from Mississippi (Mr. COCHRAN) were added as cosponsors of S. 3332, a bill to provide for the establishment of nationally uniform and environmentally sound standards governing discharges incidental to the normal operation of a vessel in the navigable waters of the United States.

S. 3340

At the request of Mrs. MURRAY, the name of the Senator from Alaska (Mr. BEGICH) was added as a cosponsor of S. 3340, a bill to improve and enhance the programs and activities of the Department of Defense and the Department of Veterans Affairs regarding suicide prevention and resilience and behavioral health disorders for members of the Armed Forces and veterans, and for other purposes.

S. 3356

At the request of Mr. PORTMAN, the name of the Senator from Connecticut (Mr. LIEBERMAN) was added as a cosponsor of S. 3356, a bill to strengthen the role of the United States in the international community of nations in conserving natural resources to further global prosperity and security.

S. 3366

At the request of Mrs. FEINSTEIN, the name of the Senator from Illinois (Mr. KIRK) was added as a cosponsor of S. 3366, a bill to designate the Haqqani network as a foreign terrorist organization.

S. 3394

At the request of Mr. JOHNSON of South Dakota, the name of the Senator from North Dakota (Mr. CONRAD) was added as a cosponsor of S. 3394, a bill to address fee disclosure requirements under the Electronic Fund Transfer Act, to amend the Federal Deposit Insurance Act with respect to information provided to the Bureau of Consumer Financial Protection, and for other purposes.

S. 3397

At the request of Mr. HATCH, the name of the Senator from Utah (Mr. LEE) was added as a cosponsor of S. 3397, a bill to prohibit waivers relating to compliance with the work requirements for the program of block grants to States for temporary assistance for needy families, and for other purposes.

S.J. RES. 42

At the request of Mr. DEMINT, the name of the Senator from Kansas (Mr. MORAN) was added as a cosponsor of S.J. Res. 42, a joint resolution proposing an amendment to the Constitution of the United States relative to parental rights.

S.J. RES. 43

At the request of Mr. MCCONNELL, the name of the Senator from Michigan (Ms. STABENOW) was added as a cosponsor of S.J. Res. 43, a joint resolution approving the renewal of import restrictions contained in the Burmese Freedom and Democracy Act of 2003, and for other purposes.

S.J. RES. 45

At the request of Mrs. HUTCHISON, the name of the Senator from Colorado (Mr. UDALL) was added as a cosponsor of S.J. Res. 45, a joint resolution amending title 36, United States Code, to designate June 19 as "Juneteenth Independence Day".

S.J. RES. 46

At the request of Mr. RUBIO, the name of the Senator from Mississippi (Mr. WICKER) was added as a cosponsor of S.J. Res. 46, a joint resolution providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rules submitted by the Department of the Treasury and the Internal Revenue Service relating to the reporting requirements for interest that relates to deposits maintained at United States offices of certain financial institutions and is paid to certain nonresident alien individuals.

S. CON. RES. 50

At the request of Mr. RUBIO, the names of the Senator from Tennessee (Mr. ALEXANDER), the Senator from Wyoming (Mr. BARRASSO), the Senator from Georgia (Mr. ISAKSON), the Senator from Minnesota (Ms. KLOBUCHAR), the Senator from Alaska (Ms. MURKOWSKI), the Senator from Montana (Mr. TESTER) and the Senator from Louisiana (Mr. VITTER) were added as cosponsors of S. Con. Res. 50, a concurrent resolution expressing the sense of Congress regarding actions to preserve and advance the multistakeholder governance model under which the Internet has thrived.

S. RES. 494

At the request of Mr. CORNYN, the name of the Senator from Iowa (Mr. GRASSLEY) was added as a cosponsor of S. Res. 494, a resolution condemning the Government of the Russian Federation for providing weapons to the regime of President Bashar al-Assad of Syria.

AMENDMENT NO. 2556

At the request of Mrs. HUTCHISON, the names of the Senator from Wyoming (Mr. ENZI), the Senator from Tennessee (Mr. ALEXANDER) and the Senator from South Dakota (Mr. THUNE) were added as cosponsors of amendment No. 2556 intended to be proposed to S. 3364, a bill to provide an incentive for businesses to bring jobs back to America.

#### STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. HELLER (for himself and Mr. BURR):

S. 3405. A bill to amend title 38, United States Code, to treat small businesses bequeathed to spouses and dependents by members of the Armed Forces killed in line of duty as small business concerns owned and controlled by veterans for purposes of Department of Veterans Affairs contracting goals and preferences, and for other purposes; to the Committee on Veterans' Affairs.

Mr. HELLER. Mr. President, last month was yet another disappointing month of job growth. Over 12 million Americans are unemployed, close to 6 million have been unemployed for over 27 weeks, and 8 million have been forced to work part time because they have been unable to find full-time work.

To put this in context, since this administration came into office, the number of Americans who are unemployed has increased by 700,000. This is a 5-percent increase in our national unemployment rate. Home values and middle-class income have decreased, and America has dropped from being the most competitive Nation in the world to the fourth most competitive Nation in the world.

After this administration's failed policies of bailout after bailout, Senate Democrats are endorsing the idea of letting America go off the so-called fiscal cliff at the end of this year instead of letting businesses maintain their existing tax rates. This would effectively raise taxes on every American during one of the slowest economic recoveries in modern times.

While I support extending these taxes and giving our Nation's job creators certainty, I believe we need tax reform. Our Tax Code is too complex. We need to close loopholes, broaden the base, and lower rates.

As a member of the Committee on Ways and Means in the House, I worked on this issue, and I will continue to advocate for comprehensive reform while I am in the Senate. While I recognize that sometimes comprehensive policies may be difficult to move forward, especially in an election year, I believe we can find consensus on commonsense solutions.

Since coming to the Senate, I have advocated for policies that create jobs for Nevadans and for all Americans. My State has been one of the hardest hit in this current economic climate. Nevada

has had the distinction of leading the Nation in unemployment for over 2 years, as well as in foreclosures and bankruptcies. One part of our population has been especially hit hard, and that is our veterans.

Over 13 percent of the Nation's bravest who put their lives on the line are unable to find a job in this economy. They come home from overseas to find their homes underwater or chronic unemployment in their communities. While a number of veterans have fallen on tough times financially, some have had difficulty adjusting to civilian life. Congress should make it a priority that necessary resources are made available to those who have bravely served our Nation. We must also not forget the families of our veterans, particularly those who have lost loved ones in combat.

So I am proud to join with Senator BURR to introduce the Veterans Small Business Act, which simply ensures that surviving spouses and children are eligible for small business benefits. Congress has provided numerous benefits to our Nation's veterans who own small businesses, including sole-source contracting, low-interest loans, and other resources in order to help these small businesses grow and create jobs. However, should a spouse or a child of a veteran lose a loved one in combat, they can no longer receive these benefits or enroll in these programs.

My legislation closes this large gap in Federal law that does little for those who own businesses before their activation and were killed in the line of duty. As a Member of Congress, we must honor our Nation's fallen as well as ensuring that the loved ones they leave behind have the same economic opportunities afforded to that veteran.

We should be doing all we can to provide all of our Nation's small businesses with the tools needed to survive in this current economic climate. Congress needs to stop worrying about the next election and put in place policies that will not only ignite economic growth, but also get our country back to work.

While there are larger issues we must address, such as tax reform, there are smaller commonsense measures, such as this bill, that we can pass right now if given the opportunity. Measures such as this will make a big difference in our Nation's veterans and job creators.

If it is any indication of how important these issues are to Nevada, I had a constituent, Dan Lyons, who walked from Reno, NV, to Washington, DC, because he didn't think Washington was doing enough for veterans. This was a 6-month walk from Reno, NV, to Washington, DC. He felt he was not getting through to his elected officials via phone or e-mails. So Dan, with a tent, a map, and a plan, started walking across America to see his elected officials face to face.

He walked 25 miles a day, battling treacherous weather, snakes, long,

lonely miles, and probably a few blisters just for the chance to sit down and ask that we do more to help struggling veterans. I was proud to meet with Dan, and he is a reminder of what is right with society. He reminds us that we must honor our obligation to our veterans. When they have sacrificed so much to preserve and protect our freedoms, we should at least ensure their needs are met when they and their surviving families fall on hard economic times.

By Mr. WYDEN:

S. 3407. A bill to amend the Public Health Service Act to increase the number of permanent faculty in palliative care at accredited allopathic and osteopathic medical schools, nursing schools, and other programs, to promote education in palliative care and hospice, and to support the development of faculty careers in academic palliative medicine; to the Committee on Health, Education, Labor, and Pensions.

Mr. WYDEN. Mr. President, I rise today to discuss the critical need in today's health care workforce for additional training related to palliative care. Palliative care is an interdisciplinary model of care focused on relieving the pain, stress and other debilitating symptoms of serious illness, such as cancer, cardiac disease, respiratory disease, kidney failure, Alzheimer's, AIDS, ALS, and MS. Its goal is to relieve suffering and provide the best possible quality of life for patients and their families.

Many people mistakenly believe that palliative care is only beneficial when a cure is not possible. Actually, palliative care is not dependent on a life-limiting prognosis and may actually help individuals recover by relieving symptoms—such as pain, anxiety or loss of appetite—while they are undergoing sometimes difficult medical treatments or procedures, such as surgery or chemotherapy. Palliative care is provided by a team of doctors, nurses, social workers, and other specialists who work with a patient's other health care providers to provide an extra layer of support, including assistance with difficult medical decision-making and coordination of care among specialists. Palliative care is appropriate for people of any age and at any stage in an illness, whether that illness is curable, chronic or life-threatening.

There is a specific type of palliative care, called hospice, for people for whom a cure is no longer possible and who likely have 6 months or less to live. Hospice care can be provided at one's home, a hospice facility, a hospital or a nursing home. Hospice care is about giving patients control, dignity and comfort so they have the best possible quality of life during the time they have. Hospice care also provides support and grief therapy for loved ones whose struggles are often cast aside or forgotten during treatment.

A growing evidence base has demonstrated that palliative care, includ-

ing hospice, improves quality, controls cost and enhances patient and family satisfaction for the rapidly expanding population of individuals with serious or life-threatening illness. Palliative care may also prolong the lives of some seriously ill patients.

Over the last 10 years, the number of hospital-based palliative care programs has more than doubled due to the increasing number of Americans living with serious, complex and chronic illnesses and the realities of the care responsibilities faced by their families. Studies suggest that in states with more hospital-based palliative care programs, patients are less likely to die in the hospital, are likely to spend fewer days in the ICU, have better pain management and higher satisfaction with their health care.

As usual, Oregon is ahead of the curve and I am proud to say that in a 2011 report ranking states on their citizens' access to hospital-based palliative care programs, Oregon was among the seven states who earned an "A" rating, with 88 percent of Oregon hospitals offering palliative care.

Unfortunately, many seriously ill patients and their families lack the access available to Oregonians. Palliative care is a relatively new medical specialty and more must be done to ensure an adequate, well-trained palliative care workforce is available to provide comprehensive symptom management, intensive communication and a level of care coordination that addresses the episodic and long-term nature of serious, chronic illness. I believe that, with Federal support, we can help address the workforce gap between those currently practicing in palliative care and hospice and the number of health care professionals required to care for this expanding patient population. That is why today I am introducing the Palliative Care and Hospice Education and Training Act or PCHETA. This authorizing legislation focuses on three key areas to grow the palliative care and hospice workforce.

Education centers to expand interdisciplinary training in palliative and hospice care.

Training of physicians who plan to teach palliative medicine and fellowships to encourage re-training for mid-career physicians, and academic career awards and career incentive awards to support physicians and other health care providers who provide palliative and hospice care training.

With this legislation, patients and families who are facing serious or life-threatening illness will have access to the high-quality palliative care and hospice services that can maximize their quality of life. I urge my colleagues to join me in this effort.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 3407

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

**SECTION 1. SHORT TITLE.**

This Act may be cited as the “Palliative Care and Hospice Education and Training Act”.

**SEC. 2. FINDINGS.**

Congress makes the following findings:

(1) Health care providers need better education about pain management and palliative care. Students graduating from medical school have very little, if any, training in the core precepts of pain and symptom management, advance care planning, communication skills, and care coordination for patients with serious, life-threatening, or terminal illness.

(2) Palliative care is interdisciplinary, patient- and family-centered health care for people with serious illnesses. This type of care is focused on providing patients with relief from the symptoms, pain, and stress of a serious illness, whatever the diagnosis. The goal of palliative care is to relieve suffering and improve quality of life for both patients and their families. Palliative care is provided by a team of doctors, nurses, social workers, chaplains, and other specialists who work with a patient’s other health care providers to provide an extra layer of support, including assistance with difficult medical decisionmaking and coordination of care among specialists. Palliative care is appropriate at any age and at any stage in a serious illness, and can be provided together with curative treatment. Palliative care is not dependent on a life-limiting prognosis and may actually help an individual recover from illness by relieving symptoms, such as pain, anxiety, or loss of appetite, while undergoing sometimes difficult medical treatments or procedures, such as surgery or chemotherapy. There were 1,623 hospitals with palliative care programs in 2012.

(3) Hospice is palliative care for patients in their last year of life. Considered the model for quality compassionate care for individuals facing a life-limiting illness, hospice provides expert medical care, pain management, and emotional and spiritual support expressly tailored to the patient’s needs and wishes. In most cases, care is provided in the patient’s home but may also be provided in freestanding hospice centers, hospitals, nursing homes, and other long-term care facilities. In 2010, an estimated 1,580,000 patients received services from hospice or approximately 41.9 percent of all United States deaths. Hospice is a covered benefit under the Medicare program. There were 3,509 Medicare-certified hospices in 2010.

(4) A 2005 study at Michigan State University found that the formal training of United States doctors in palliative care is “grossly inadequate”. When the American Society of Clinical Oncology surveyed their members, 65 percent said they had received inadequate education in controlling symptoms associated with cancer, and 81 percent felt they had inadequate mentoring in discussing a poor prognosis with their patients and families. Training in pediatric palliative care is also seriously lacking according to physicians, residents, and medical students responding to a survey presented at a meeting of American Federation for Medical Research.

(5) The American Board of Medical Specialties (ABMS) and the Accreditation Council for Graduate Medical Education (ACGME) provided formal subspecialty status for hospice and palliative medicine (HPM) in 2006, and the Centers for Medicare & Medicaid Services recognized hospice and palliative medicine as a medical subspecialty in October of 2008.

(6) As of June 2012, there were a total of 86 hospice and palliative medicine training programs. Seventy-eight programs have been accredited by the Accreditation Council for Graduate Medical Education and seven programs have been accredited by the American Osteopathic Association. For the 2011–2012 academic year, these programs were training 176 physicians in hospice and palliative medicine. Some programs include an additional track in research, geriatrics, or public health.

(7) There is a large gap between those practicing in the palliative medicine field and the number of physicians needed. A mid-range estimate by the American Academy of Hospice and Palliative Medicine’s Workforce Task Force calls for 6,000 or more full time equivalents to serve current needs in hospice and palliative care programs. At maximum capacity, the current system would produce roughly 4,600 new hospice and palliative medicine certified physicians over the next 20 years, during which time some 70,000,000 new Medicare beneficiaries will enter the Medicare program. At the same time, there is expected to be increasing acceptance of the hospice and palliative approach to care among the general population and health care providers.

**SEC. 3. PALLIATIVE CARE AND HOSPICE EDUCATION AND TRAINING.**

(a) IN GENERAL.—Part D of title VII of the Public Health Service Act (42 U.S.C. 294 et seq.) is amended by adding at the end the following:

**“SEC. 759A. PALLIATIVE CARE AND HOSPICE EDUCATION AND TRAINING.**

“(a) PALLIATIVE CARE AND HOSPICE EDUCATION CENTERS.—

“(1) IN GENERAL.—The Secretary shall award grants or contracts under this section to entities described in paragraph (1), (3), or (4) of section 799B, and section 801(2), for the establishment or operation of Palliative Care and Hospice Education Centers that meet the requirements of paragraph (2).

“(2) REQUIREMENTS.—A Palliative Care and Hospice Education Center meets the requirements of this paragraph if such Center—

“(A) improves the training of health professionals in palliative care, including residencies, traineeships, or fellowships;

“(B) develops and disseminates curricula relating to the palliative treatment of the complex health problems of individuals with serious or life threatening illnesses;

“(C) supports the training and retraining of faculty to provide instruction in palliative care;

“(D) supports continuing education of health professionals who provide palliative care to patients with serious or life threatening illness;

“(E) provides students (including residents, trainees, and fellows) with clinical training in palliative care in the home, long-term care facilities, home care, hospices, chronic and acute disease hospitals, and ambulatory care centers;

“(F) establishes traineeships for individuals who are preparing for advanced education nursing degrees in palliative care nursing, home care, hospice, in the home, long-term care, or other nursing areas that specialize in palliative care; and

“(G) does not duplicate the activities of existing education centers funded under this section or under section 753 or 865.

“(3) EXPANSION OF EXISTING CENTERS.—Nothing in this section shall be construed to—

“(A) prevent the Secretary from providing grants to expand existing education centers, including geriatric education centers established under section 753 or 865, to provide for education and training focused specifically

on palliative care, including for non-geriatric populations; or

“(B) limit the number of education centers that may be funded in a community.

**“(b) PALLIATIVE MEDICINE PHYSICIAN TRAINING.—**

“(1) IN GENERAL.—The Secretary may make grants to, and enter into contracts with, schools of medicine, schools of osteopathic medicine, teaching hospitals, and graduate medical education programs, for the purpose of providing support for projects that fund the training of physicians (including residents, trainees, and fellows) who plan to teach palliative medicine.

“(2) REQUIREMENTS.—Each project for which a grant or contract is made under this subsection shall—

“(A) be staffed by full-time teaching physicians who have experience or training in palliative medicine;

“(B) be based in a hospice and palliative medicine fellowship program accredited by the Accreditation Council for Graduate Medical Education;

“(C) provide training in palliative medicine through a variety of service rotations, such as consultation services, acute care services, extended care facilities, ambulatory care and comprehensive evaluation units, hospice, home health, and community care programs;

“(D) develop specific performance-based measures to evaluate the competency of trainees; and

“(E) provide training in palliative medicine through one or both of the training options described in subparagraphs (A) and (B) of paragraph (3).

“(3) TRAINING OPTIONS.—The training options referred to in subparagraph (E) of paragraph (2) shall be as follows:

“(A) 1-year retraining programs in hospice and palliative medicine for physicians who are faculty at schools of medicine and osteopathic medicine, or others determined appropriate by the Secretary.

“(B) 1- or 2-year training programs that shall be designed to provide training in hospice and palliative medicine for physicians who have completed graduate medical education programs in any medical specialty leading to board eligibility in hospice and palliative medicine pursuant to the American Board of Medical Specialties.

“(4) DEFINITIONS.—For purposes of this subsection the term ‘graduate medical education’ means a program sponsored by a school of medicine, a school of osteopathic medicine, a hospital, or a public or private institution that—

“(A) offers postgraduate medical training in the specialties and subspecialties of medicine; and

“(B) has been accredited by the Accreditation Council for Graduate Medical Education or the American Osteopathic Association through its Committee on Postdoctoral Training.

**“(c) PALLIATIVE MEDICINE AND HOSPICE ACADEMIC CAREER AWARDS.—**

“(1) ESTABLISHMENT OF PROGRAM.—The Secretary shall establish a program to provide awards, to be known as the ‘Palliative Medicine and Hospice Academic Career Awards’, to eligible individuals to promote the career development of such individuals as academic hospice and palliative care physicians.

“(2) ELIGIBLE INDIVIDUALS.—To be eligible to receive an award under paragraph (1), an individual shall—

“(A) be board certified or board eligible in hospice and palliative medicine; and

“(B) have a junior (non-tenured) faculty appointment at an accredited (as determined by the Secretary) school of medicine or osteopathic medicine.

“(3) LIMITATIONS.—No award under paragraph (1) may be made to an eligible individual unless the individual—

“(A) has submitted to the Secretary an application, at such time, in such manner, and containing such information as the Secretary may require, and the Secretary has approved such application;

“(B) provides, in such form and manner as the Secretary may require, assurances that the individual will meet the service requirement described in paragraph (6); and

“(C) provides, in such form and manner as the Secretary may require, assurances that the individual has a full-time faculty appointment in a health professions institution and documented commitment from such institution to spend a majority of the total funded time of such individual on teaching and developing skills in interdisciplinary education in palliative care.

“(4) MAINTENANCE OF EFFORT.—An eligible individual who receives an award under paragraph (1) shall provide assurances to the Secretary that funds provided to the eligible individual under this subsection will be used only to supplement, not to supplant, the amount of Federal, State, and local funds otherwise expended by the eligible individual.

“(5) AMOUNT AND TERM.—

“(A) AMOUNT.—The amount of an award under this subsection shall be equal to the award amount provided for under section 753(c)(5)(A) for the fiscal year involved.

“(B) TERM.—The term of an award made under this subsection shall not exceed 5 years.

“(C) PAYMENT TO INSTITUTION.—The Secretary shall make payments for awards under this subsection to institutions which include schools of medicine and osteopathic medicine.

“(6) SERVICE REQUIREMENT.—An individual who receives an award under this subsection shall provide training in palliative care and hospice, including the training of interdisciplinary teams of health care professionals. The provision of such training shall constitute a majority of the total funded obligations of such individual under the award.

“(d) PALLIATIVE CARE WORKFORCE DEVELOPMENT.—

“(1) IN GENERAL.—The Secretary shall award grants or contracts under this subsection to entities that operate a Palliative Care and Hospice Education Center pursuant to subsection (a)(1).

“(2) APPLICATION.—To be eligible for an award under paragraph (1), an entity described in such paragraph shall submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require.

“(3) USE OF FUNDS.—Amounts awarded under a grant or contract under paragraph (1) shall be used to carry out the fellowship program described in paragraph (4).

“(4) FELLOWSHIP PROGRAM.—

“(A) IN GENERAL.—Pursuant to paragraph (3), a Palliative Care and Hospice Education Center that receives an award under this subsection shall use such funds to offer short-term intensive courses (referred to in this subsection as a ‘fellowship’) that focus on palliative care that provide supplemental training for faculty members in medical schools and other health professions schools with programs in psychology, pharmacy, nursing, social work, chaplaincy, or other health disciplines, as approved by the Secretary. Such a fellowship shall be open to current faculty, and appropriately credentialed volunteer faculty and practitioners, who do not have formal training in palliative care, to upgrade their knowledge and clinical skills for the care of individuals with serious or life-threatening illness and

to enhance their interdisciplinary teaching skills.

“(B) LOCATION.—A fellowship under this paragraph shall be offered either at the Palliative Care and Hospice Education Center that is sponsoring the course, in collaboration with other Palliative Care and Hospice Education Centers, or at medical schools, schools of nursing, schools of pharmacy, schools of social work, schools of chaplaincy or pastoral care education, graduate programs in psychology, or other health professions schools approved by the Secretary with which the Centers are affiliated.

“(C) CME CREDIT.—Participation in a fellowship under this paragraph shall be accepted with respect to complying with continuing health profession education requirements. As a condition of such acceptance, the recipient shall subsequently provide a minimum of 18 hours of voluntary instruction in palliative care content (that has been approved by a palliative care and hospice education center) to students or trainees in health-related educational, home, hospice, or long-term care settings.

“(5) TARGETS.—A Palliative Care and Hospice Education Center that receives an award under this subsection shall meet targets approved by the Secretary for providing palliative care training to a certain number of faculty or practitioners during the term of the award, as well as other parameters established by the Secretary.

“(6) AMOUNT OF AWARD.—An award under this subsection shall be in an amount of \$150,000. Not more than 24 Palliative Care and Hospice Education Centers may receive an award under this subsection.

“(7) MAINTENANCE OF EFFORT.—A Palliative Care and Hospice Education Center that receives an award under this subsection shall provide assurances to the Secretary that funds provided to the Center under the award will be used only to supplement, not to supplant, the amount of Federal, State, and local funds otherwise expended by such Center.

“(e) PALLIATIVE CARE AND HOSPICE CAREER INCENTIVE AWARDS.—

“(1) IN GENERAL.—The Secretary shall award grants or contracts under this subsection to individuals described in paragraph (2) to foster greater interest among a variety of health professionals in entering the field of palliative care.

“(2) ELIGIBLE INDIVIDUALS.—To be eligible to receive an award under paragraph (1), an individual shall—

“(A) be an advanced practice nurse, a clinical social worker, a pharmacist, a chaplain, or student of psychology who is pursuing a doctorate or other advanced degree in palliative care or related fields in an accredited health professions school; and

“(B) submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require.

“(3) CONDITIONS OF AWARD.—As a condition of receiving an award under this subsection, an individual shall agree that, following completion of the award period, the individual will teach or practice palliative care in health-related educational, home, hospice or long-term care settings for a minimum of 5 years under guidelines established by the Secretary.

“(4) PAYMENT TO INSTITUTION.—The Secretary shall make payments for awards under this subsection to institutions which include schools of medicine, osteopathic medicine, nursing, social work, psychology, chaplaincy or pastoral care education, dentistry, and pharmacy, or other allied health discipline in an accredited health professions school that is approved by the Secretary.

“(f) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section, \$44,100,000 for each of the fiscal years 2013 through 2017.”

(b) EFFECTIVE DATE.—The amendment made by this section shall be effective beginning on the date that is 90 days after the date of enactment of this Act.

#### SEC. 4. APPLICATION TO ADVANCED PRACTICE NURSES.

(a) ADVANCED EDUCATION NURSING GRANTS.—Section 811(a) of the Public Health Service Act (42 U.S.C. 296j(a)) is amended—

(1) in paragraph (1), by striking “and” at the end;

(2) by redesignating paragraph (2) as paragraph (3); and

(3) by inserting after paragraph (1), the following:

“(2) palliative care and hospice career incentive awards authorized under section 759A(e); and”.

(b) IN GENERAL.—Part D of title VIII of the Public Health Service Act (42 U.S.C. 296p et seq.) is amended by adding at the end the following:

#### “SEC. 832. PALLIATIVE CARE AND HOSPICE EDUCATION AND TRAINING.

“(a) PROGRAM AUTHORIZED.—The Secretary shall award grants to eligible entities to develop and implement, in coordination with programs under section 759A, programs and initiatives to train and educate individuals in providing palliative care in health related educational, hospice, home, or long-term care settings.

“(b) USE OF FUNDS.—An eligible entity that receives a grant under subsection (a) shall use funds under such grant to—

“(1) provide training to individuals who will provide palliative care in health-related educational, home, hospice, or long-term care settings;

“(2) develop and disseminate curricula relating to palliative care in health-related educational, home, hospice, or long-term care settings;

“(3) train faculty members in palliative care in health related educational, home, hospice, or long-term care settings; or

“(4) provide continuing education to individuals who provide palliative care in health-related educational, home, hospice, or long-term care settings.

“(c) APPLICATION.—An eligible entity desiring a grant under subsection (a) shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may reasonably require.

“(d) ELIGIBLE ENTITY.—For purposes of this section, the term ‘eligible entity’ shall include a school of nursing, a health care facility, a program leading to certification as a certified nurse assistant, a partnership of such a school and facility, or a partnership of such a program and facility.

“(e) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section \$5,000,000 for each of fiscal years 2013 through 2017.”

By Mr. REID:

S. 3412. A bill to amend the Internal Revenue Code of 1986 to provide tax relief to middle-class families; placed on the calendar.

Mr. REID. Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD as follows:

S. 3412

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

**SECTION 1. SHORT TITLE; ETC.**

(a) **SHORT TITLE.**—This Act may be cited as the “Middle Class Tax Cut Act”.

(b) **AMENDMENT OF 1986 CODE.**—Except as otherwise expressly provided, whenever in this Act an amendment or repeal is expressed in terms of an amendment to, or repeal of, a section or other provision, the reference shall be considered to be made to a section or other provision of the Internal Revenue Code of 1986.

(c) **TABLE OF CONTENTS.**—The table of contents of this Act is as follows:

Sec. 1. Short title; etc.

**TITLE I—TEMPORARY EXTENSION OF TAX RELIEF**

Sec. 101. Temporary extension of 2001 tax relief.

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**TITLE II—ALTERNATIVE MINIMUM TAX RELIEF**

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**TITLE III—BUDGETARY EFFECTS**

Sec. 301. Budgetary effects.

**TITLE I—TEMPORARY EXTENSION OF TAX RELIEF**

**SEC. 101. TEMPORARY EXTENSION OF 2001 TAX RELIEF.**

(a) **TEMPORARY EXTENSION.**—

(1) **IN GENERAL.**—Section 901(a)(1) of the Economic Growth and Tax Relief Reconciliation Act of 2001 is amended by striking “December 31, 2012” and inserting “December 31, 2013”.

(2) **EFFECTIVE DATE.**—The amendment made by this subsection shall take effect as if included in the enactment of the Economic Growth and Tax Relief Reconciliation Act of 2001.

(b) **APPLICATION TO CERTAIN HIGH-INCOME TAXPAYERS.**—

(1) **INCOME TAX RATES.**—

(A) **TREATMENT OF 25- AND 28- PERCENT RATE BRACKETS.**—Paragraph (2) of section 1(i) is amended to read as follows:

“(2) 25- AND 28- PERCENT RATE BRACKETS.—The tables under subsections (a), (b), (c), (d), and (e) shall be applied—

“(A) by substituting ‘25%’ for ‘28%’ each place it appears (before the application of subparagraph (B)), and

“(B) by substituting ‘28%’ for ‘31%’ each place it appears.”.

(B) **33-PERCENT RATE BRACKET.**—Subsection (i) of section 1 is amended by redesignating paragraph (3) as paragraph (4) and by inserting after paragraph (2) the following new paragraph:

“(3) 33-PERCENT RATE BRACKET.—

“(A) **IN GENERAL.**—In the case of taxable years beginning after December 31, 2012—

“(i) the rate of tax under subsections (a), (b), (c), and (d) on a taxpayer’s taxable income in the fourth rate bracket shall be 33 percent to the extent such income does not exceed an amount equal to the excess of—

“(I) the applicable amount, over

“(II) the dollar amount at which such bracket begins, and

“(ii) the 36 percent rate of tax under such subsections shall apply only to the taxpayer’s taxable income in such bracket in excess of the amount to which clause (i) applies.

“(B) **APPLICABLE AMOUNT.**—For purposes of this paragraph, the term ‘applicable amount’ means the excess of—

“(i) the applicable threshold, over

“(ii) the sum of the following amounts in effect for the taxable year:

“(I) the basic standard deduction (within the meaning of section 63(c)(2)), and

“(II) the exemption amount (within the meaning of section 151(d)(1) (or, in the case of subsection (a), 2 such exemption amounts).

“(C) **APPLICABLE THRESHOLD.**—For purposes of this paragraph, the term ‘applicable threshold’ means—

“(i) \$250,000 in the case of subsection (a),

“(ii) \$225,000 in the case of subsection (b),

“(iii) \$200,000 in the case of subsections (c), and

“(iv) ½ the amount applicable under clause (i) (after adjustment, if any, under subparagraph (E)) in the case of subsection (d).

“(D) **FOURTH RATE BRACKET.**—For purposes of this paragraph, the term ‘fourth rate bracket’ means the bracket which would (determined without regard to this paragraph) be the 36-percent rate bracket.

“(E) **INFLATION ADJUSTMENT.**—For purposes of this paragraph, with respect to taxable years beginning in calendar years after 2012, each of the dollar amounts under clauses (i), (ii), and (iii) of subparagraph (C) shall be adjusted in the same manner as under paragraph (1)(C), except that subsection (f)(3)(B) shall be applied by substituting ‘2008’ for ‘1992’.”.

(2) **PHASEOUT OF PERSONAL EXEMPTIONS AND ITEMIZED DEDUCTIONS.**—

(A) **OVERALL LIMITATION ON ITEMIZED DEDUCTIONS.**—Section 68 is amended—

(i) by striking “the applicable amount” the first place it appears in subsection (a) and inserting “the applicable threshold in effect under section 1(i)(3)”,

(ii) by striking “the applicable amount” in subsection (a)(1) and inserting “such applicable threshold”,

(iii) by striking subsection (b) and redesignating subsections (c), (d), and (e) as subsections (b), (c), and (d), respectively, and

(iv) by striking subsections (f) and (g).

(B) **PHASEOUT OF DEDUCTIONS FOR PERSONAL EXEMPTIONS.**—

(1) **IN GENERAL.**—Paragraph (3) of section 151(d) is amended—

(I) by striking “the threshold amount” in subparagraphs (A) and (B) and inserting “the applicable threshold in effect under section 1(i)(3)”,

(II) by striking subparagraph (C) and redesignating subparagraph (D) as subparagraph (C), and

(III) by striking subparagraphs (E) and (F).

(ii) **CONFORMING AMENDMENTS.**—Paragraph (4) of section 151(d) is amended—

(I) by striking subparagraph (B),

(II) by redesignating clauses (i) and (ii) of subparagraph (A) as subparagraphs (A) and (B), respectively, and by indenting such subparagraphs (as so redesignated) accordingly, and

(III) by striking all that precedes “in a calendar year after 1989,” and inserting the following:

“(4) **INFLATION ADJUSTMENT.**—In the case of any taxable year beginning”.

(c) **EFFECTIVE DATE.**—Except as otherwise provided, the amendments made by this section shall apply to taxable years beginning after December 31, 2012.

(d) **APPLICATION OF EGTRRA SUNSET.**—Each amendment made by subsection (b) shall be subject to title IX of the Economic Growth and Tax Relief Reconciliation Act of 2001 to the same extent and in the same manner as if such amendment was included in title I of such Act.

**SEC. 102. TEMPORARY EXTENSION OF 2003 TAX RELIEF.**

(a) **EXTENSION.**—

(1) **IN GENERAL.**—Section 303 of the Jobs and Growth Tax Relief Reconciliation Act of 2003 is amended by striking “December 31, 2012” and inserting “December 31, 2013”.

(2) **EFFECTIVE DATE.**—The amendment made by this subsection shall take effect as if included in the enactment of the Jobs and Growth Tax Relief Reconciliation Act of 2003.

(b) **20-PERCENT CAPITAL GAINS RATE FOR CERTAIN HIGH INCOME INDIVIDUALS.**—

(1) **IN GENERAL.**—Paragraph (1) of section 1(h) is amended by striking subparagraph (C), by redesignating subparagraphs (D) and (E) as subparagraphs (E) and (F) and by inserting after subparagraph (B) the following new subparagraphs:

“(C) 15 percent of the lesser of—

“(i) so much of the adjusted net capital gain (or, if less, taxable income) as exceeds the amount on which a tax is determined under subparagraph (B), or

“(ii) the excess (if any) of—

“(I) the amount of taxable income which would (without regard to this paragraph) be taxed at a rate below 36 percent, over

“(II) the sum of the amounts on which a tax is determined under subparagraphs (A) and (B),

“(D) 20 percent of the adjusted net capital gain (or, if less, taxable income) in excess of the sum of the amounts on which tax is determined under subparagraphs (B) and (C).”.

(2) **MINIMUM TAX.**—Paragraph (3) of section 55(b) is amended by striking subparagraph (C), by redesignating subparagraph (D) as subparagraph (E), and by inserting after subparagraph (B) the following new subparagraphs:

“(C) 15 percent of the lesser of—

“(i) so much of the adjusted net capital gain (or, if less, taxable excess) as exceeds the amount on which tax is determined under subparagraph (B), or

“(ii) the excess described in section

1(h)(1)(C)(ii), plus

“(D) 20 percent of the adjusted net capital gain (or, if less, taxable excess) in excess of the sum of the amounts on which tax is determined under subparagraphs (B) and (C), plus”.

(c) **CONFORMING AMENDMENTS.**—

(1) The following provisions are each amended by striking “15 percent” and inserting “20 percent”:

(A) Section 531.

(B) Section 541.

(C) Section 1445(e)(1).

(D) The second sentence of section 7518(g)(6)(A).

(E) Section 53511(f)(2) of title 46, United States Code.

(2) Sections 1(h)(1)(B) and 55(b)(3)(B) are each amended by striking “5 percent (0 percent in the case of taxable years beginning after 2007)” and inserting “0 percent”.

(3) Section 1445(e)(6) is amended by striking “15 percent (20 percent in the case of taxable years beginning after December 31, 2010)” and inserting “20 percent”.

(d) **EFFECTIVE DATES.**—

(1) **IN GENERAL.**—Except as otherwise provided, the amendments made by subsections (b) and (c) shall apply to taxable years beginning after December 31, 2012.

(2) **WITHHOLDING.**—The amendments made by paragraphs (1)(C) and (3) of subsection (c) shall apply to amounts paid on or after January 1, 2013.

(e) **APPLICATION OF JGTRRA SUNSET.**—Each amendment made by subsections (b) and (c) shall be subject to section 303 of the Jobs and Growth Tax Relief Reconciliation Act of 2003 to the same extent and in the same manner as if such amendment was included in title III of such Act.

**SEC. 103. TEMPORARY EXTENSION OF 2010 TAX RELIEF.**

(a) AMERICAN OPPORTUNITY TAX CREDIT.—

(1) IN GENERAL.—Section 25A(i) is amended by striking “or 2012” and inserting “2012, or 2013”.

(2) TREATMENT OF POSSESSIONS.—Section 1004(c)(1) of division B of the American Recovery and Reinvestment Tax Act of 2009 is amended by striking “and 2012” each place it appears and inserting “2012, and 2013”.

(b) CHILD TAX CREDIT.—Section 24(d)(4) is amended—

(1) by striking “AND 2012” in the heading and inserting “2012, AND 2013”, and

(2) by striking “or 2012” and inserting “2012, or 2013”.

(c) EARNED INCOME TAX CREDIT.—Section 32(b)(3) is amended—

(1) by striking “AND 2012” in the heading and inserting “2012, AND 2013”, and

(2) by striking “or 2012” and inserting “2012, or 2013”.

(d) TEMPORARY EXTENSION OF RULE DISREGARDING REFUNDS IN THE ADMINISTRATION OF FEDERAL PROGRAMS AND FEDERALLY ASSISTED PROGRAMS.—Subsection (b) of section 6409 is amended by striking “December 31, 2012” and inserting “December 31, 2013”.

(e) EFFECTIVE DATES.—

(1) IN GENERAL.—Except as provided in paragraph (2), the amendments made by this section shall apply to taxable years beginning after December 31, 2012.

(2) RULE DISREGARDING REFUNDS IN THE ADMINISTRATION OF CERTAIN PROGRAMS.—The amendment made by subsection (d) shall apply to amounts received after December 31, 2012.

**SEC. 104. TEMPORARY EXTENSION OF ELECTION TO EXPENSE CERTAIN DEPRECIABLE BUSINESS ASSETS.**

(a) IN GENERAL.—

(1) DOLLAR LIMITATION.—Section 179(b)(1) is amended—

(A) by striking “and” at the end of subparagraph (C),

(B) by redesignating subparagraph (D) as subparagraph (E),

(C) by inserting after subparagraph (C) the following new subparagraph:

“(D) \$250,000 in the case of taxable years beginning in 2013, and”, and

(D) in subparagraph (E), as so redesignated, by striking “2012” and inserting “2013”.

(2) REDUCTION IN LIMITATION.—Section 179(b)(2) is amended—

(A) by striking “and” at the end of subparagraph (C),

(B) by redesignating subparagraph (D) as subparagraph (E),

(C) by inserting after subparagraph (C) the following new subparagraph:

“(D) \$800,000 in the case of taxable years beginning in 2013, and”, and

(D) in subparagraph (E), as so redesignated, by striking “2012” and inserting “2013”.

(b) COMPUTER SOFTWARE.—Section 179(d)(1)(A)(ii) is amended by striking “2013” and inserting “2014”.

(c) ELECTION.—Section 179(c)(2) is amended by striking “2013” and inserting “2014”.

(d) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 2012.

**TITLE II—ALTERNATIVE MINIMUM TAX RELIEF****SEC. 201. TEMPORARY EXTENSION OF INCREASED ALTERNATIVE MINIMUM TAX EXEMPTION AMOUNT.**

(a) IN GENERAL.—Paragraph (1) of section 55(d) is amended—

(1) by striking “\$72,450” and all that follows through “2011” in subparagraph (A) and inserting “\$78,750 in the case of taxable years beginning in 2012”, and

(2) by striking “\$47,450” and all that follows through “2011” in subparagraph (B) and

inserting “\$50,600 in the case of taxable years beginning in 2012”.

(b) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 2011.

**SEC. 202. TEMPORARY EXTENSION OF ALTERNATIVE MINIMUM TAX RELIEF FOR NONREFUNDABLE PERSONAL CREDITS.**

(a) IN GENERAL.—Paragraph (2) of section 26(a) is amended—

(1) by striking “or 2011” and inserting “2011, or 2012”, and

(2) by striking “2011” in the heading thereof and inserting “2012”.

(b) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 2011.

**TITLE III—BUDGETARY EFFECTS****SEC. 301. BUDGETARY EFFECTS.**

(a) PAYGO SCORECARD.—The budgetary effects of this Act shall not be entered on either PAYGO scorecard maintained pursuant to section 4(d) of the Statutory Pay-As-You-Go Act of 2010.

(b) SENATE PAYGO SCORECARD.—The budgetary effects of this Act shall not be entered on any PAYGO scorecard maintained for purposes of section 201 of S. Con Res. 21 (110th Congress).

By Mr. INHOFE (for himself and Mr. VITTER):

S. 3415. A bill to require the disclosure of all payments made under the Equal Access to Justice Act; to the Committee on the Judiciary.

Mr. INHOFE. Mr. President, I rise today to introduce the Government Transparency and Recordkeeping Act along with Senator VITTER.

The purpose of this bill is to require that all records of individual payments under 31 U.S.C. 1304, which is the Judgment Fund, are reported to Congress and made available to the public. It further requires that agencies provide this information by keeping accurate and thorough records.

Simply put, most Americans have a checking account. When you write a check, you also record it in your checking book. This checking book is your record of how much you paid and to whom you paid. Simply put, the Federal Government does not do this in terms of the Judgment Fund. The Federal government has not been keeping track of its Judgment Fund payments because they are not required to do so. In this age of technology, shouldn't the federal government keep track of its finances?

If the Federal Government is named as a defendant and the plaintiffs are successful then the plaintiffs may be awarded for certain attorney fees and costs. Such payments are made from the Judgment Fund.

The Judgment Fund was created in 1956 and is a permanent fund available to pay judgments against the government and settlements resulting from lawsuits.

As the Ranking Member of the Senate Environment and Public Works Committee, I had to request that GAO investigate how much the Judgment Fund has paid related to the environmental statutes in our jurisdiction and get back to me. Even GAO had trouble

getting complete records over the past ten years. This is federal taxpayers' money that we are spending without keeping accurate and up to date records. This information needs to be readily available and accessible to the public.

Federal agencies that are impacted by these costs as well as policymakers and taxpayers should be able to track payments from the Judgment Fund to determine who is suing a particular Federal agency, the nature of their claims, how often agencies settle and agree to pay plaintiffs' legal fees, and so forth. If Congress and the public had access to this information in a useable form, they could identify problem areas and work to save taxpayer money by bringing loss rates down.

Article I, section 9 of the U.S. Constitution provides “that a regular Statement and Account of the Receipts of all public money shall be published from time to time.” The operation and payment of Judgment fund monies should not be an exception. This bill will ensure that Congress and the public have access to such information.

**SUBMITTED RESOLUTIONS****SENATE CONCURRENT RESOLUTION 52—SETTING FORTH THE CONGRESSIONAL BUDGET FOR THE UNITED STATES GOVERNMENT FOR FISCAL YEAR 2013 AND SETTING FORTH THE APPROPRIATE BUDGETARY LEVELS FOR FISCAL YEARS 2014 THROUGH 2022**

Mr. LEE submitted the following concurrent resolution; which was placed on the calendar:

S. CON. RES. 52

*Resolved by the Senate (the House of Representatives concurring),***SECTION 1. CONCURRENT RESOLUTION ON THE BUDGET FOR FISCAL YEAR 2013.**

(a) DECLARATION.—Congress declares that this resolution is the concurrent resolution on the budget for fiscal year 2013 and that this resolution sets forth the appropriate budgetary levels for fiscal years 2014 through 2022.

(b) TABLE OF CONTENTS.—The table of contents for this concurrent resolution is as follows:

Sec. 1. Concurrent resolution on the budget for fiscal year 2013.

**TITLE I—RECOMMENDED LEVELS AND AMOUNTS**

Sec. 101. Recommended levels and amounts.

Sec. 102. Social Security.

Sec. 103. Major functional categories.

**TITLE II—RESERVE FUNDS**

Sec. 201. Deficit-reduction reserve fund for the sale of unused or vacant Federal properties.

Sec. 202. Deficit-reduction reserve fund for selling excess Federal land.

Sec. 203. Deficit-reduction reserve fund for the repeal of Davis-Bacon prevailing wage laws.

Sec. 204. Deficit-reduction reserve fund for the reduction of purchasing and maintaining Federal vehicles.

Sec. 205. Deficit-reduction reserve fund for the sale of financial assets purchased through the Troubled Asset Relief Program.