Women, I want to also thank the Dean of the Republican Women, KAY BAILEY HUTCHISON, for always reaching out to work together on the issues that matter most to American women and their families.

Still, Senate passage alone does not assure reauthorization. It is my hope that the strong show of bipartisan support for this bill here in the Senate will encourage the House of Representatives to promptly move forward on this bill. I hope they will follow our lead to ensure a quick reauthorization of MQSA. America's women are counting on it.

Mr. HARKIN. Mr. President, I join Senator MIKULSKI and many of my colleagues today to support reauthorization of the Mammography Quality Standards Act. I want to especially commend Senator MIKULSKI for her invaluable leadership on this issue. She brought the problem of poor quality mammography screening to the Senate's attention several years ago and authored the historic legislation we are today reauthorizing.

As many of you know, I lost my sisters at an early age because of breast cancer. This experience has helped to make me acutely aware of the need for research on and improved early detection of breast cancer. I've always thought if they had had access to quality mammography screening, they would be alive with us today.

Starting in 1990, as chairman of the Labor, Health and Human Services Appropriations Subcommittee, I worked with Senator MIKULSKI and others to start and fund a program at the CDC to provide screening for lower income women without insurance. And in 1992, I offered an amendment to dedicate $210 million in the Defense budget for breast cancer research. Because of this legislation, funding for breast cancer research has been included in the Defense Department budget every year since 1992, and will be included again in Fiscal Year 1998.

It is clear that if we are to win the war on breast cancer we must continue to support research on improved treatments, but we must also ensure that breast cancer is detected early enough to apply these treatments effectively. The need for legislating mammography quality standards is obvious—every year approximately 180,000 women will be diagnosed and 44,000 women will die of breast cancer. We can prolong and save the lives of millions of women if we can detect the cancer early in its development. The earlier we can diagnose breast cancer, the sooner a women can begin to receive appropriate treatment, and the more likely it is that she will survive. It is vital that all women have access to mammograms which are both properly performed and accurately analyzed. This screening is a very powerful weapon in the battle against cancer.

Early diagnosis, and consequently early treatment, depend upon accurate evaluations of breast tissue. This means that the health care professionals taking mammograms and reading mammograms must be properly trained. This Act sets forth requirements that all mammography facilities meet stringent standards in terms of equipment used, personnel, and reporting of mammography findings.

Congress must act quickly to pass this reauthorization so that women throughout our nation can be confident that they are receiving the safest, most reliable mammography available. Without these standards, women do not have such guarantees. They would be forced to place their lives in the hands of a random patchwork of Federal, State, and voluntary standards. This is unacceptable. We cannot return to the days before this law was passed, when women were misdiagnosed because mammography clinics did not have standards for quality control.

Women also deserve the best technology available when it comes to early detection of cancer because advanced technology means more accurate, and therefore earlier diagnosis. One such advance is digital mammography. This screening technique involves the creation of digital images which are more easily visualized and can also be stored and forwarded to other medical sites. This can provide women in rural areas with vital access to expert medical diagnosticians.

When women and their doctors have access to the best technology available, such as digital mammography, it can mean the difference between life and death. It can also mean money saved, because it is cheaper to treat a small, confined tumor than it is to treat a full-blown metastactic cancer which has spread to other organ systems.

Breast cancer is the most common cancer among American women, but it does not have to be the No. 1 cancer killer among women in the United States because we have ways to detect it early on. The National Cancer Institute advises that ''high-quality mammography combined with a clinical breast exam is the most effective technology presently available to detect breast tumors.'' We have an obligation to American women to ensure that the mammographies they receive meet high-quality federal standards. I am proud to be an original cosponsor of this legislation and I look forward to its speedy passage into law.

Mrs. HUTCHISON. Mr. President, I rise today to commend my colleagues for passing the Mammography Quality Standards Act, assuring that national, uniform quality standards will be in place for this lifesaving, preventive procedure.

Experts universally agree that mammography is one of the best ways to detect breast cancer early. Yet, statistics show that the majority of women who need mammograms are not getting them. Nearly 40 percent of women ages 40 to 49, 35 percent of women ages 50 to 64, and 46 percent of women 65 years of age and over have not received a mammogram in the past 2 years. With 44,000 women dying annually from breast cancer, one in three of these might be saved if her breast cancer is detected early.

Since almost 10 percent of breast cancers are not detected by mammography, it's essential to remember breast self-examination and clinical screening as the other important early detection tools we have at our disposal.

This was the first year that the National Cancer Institute joined the American Cancer Society and other breast cancer organizations in support of screening mammograms on a regular basis. Dr. Richard Klausner, NCI Director, announced in March that the mammography recommendations of the National Cancer Screening Board would be adopted by NCI.

Dr. Klausner spoke movingly about NCI-conducted focus groups that found that many women are not aware that breast cancer risks increase with age and that most women who develop breast cancer have no family history of the disease. He is to be commended for launching a new education campaign featuring new breast health and mammogram fact booklets, and breast health information hotline and Internet website.

The passage of the reauthorization of the Mammography Quality Standards Act dovetails nicely with these efforts. The original legislation passed in 1992 has been successful in bringing mammography screening facilities into compliance with a tough Federal standard. Patients can be assured that their mammography procedures and results are provided by qualified technical professionals and with annually inspected radiographic equipment and facilities.

This reauthorization makes some needed improvements to existing law. Facilities are now required to inform the patient as well as the physician about the screening results, and patients may now obtain their original mammogram films and report. Consumers and physicians must now be advised of any mammography facility deficiencies, and both State and local government agencies are granted inspection authority. These improvements were recommended in a GAO report as ways to assure that this vital prevention program continues to protect the public health and address women's health needs.

Last, I want to thank all the countless radiologists, radiologic technicians, and support workers who provide this very worthwhile service and make the time spent undertaking this procedure as pleasant as possible. These are the soldiers in our war against cancer, and their contributions are invaluable. I thank you all for your support.

AMENDING THE INTERNAL REVENUE CODE OF 1986

Mr. THURMOND. Mr. President, I rise today to advise Members of the

Senate why I have objected to the Senate consideration of H.R. 2513. This bill, which was sent by the House to the Senate in the closing days of this session, would provide tax relief for certain matters involving active financing income from foreign personal holding company income and sale of stock in agricultural processors to certain farmers' cooperatives.

First of all, Mr. President, I have no objection to the provisions which provide tax relief in these matters. However, I do object to the manner in which the House has proposed that we pay for these tax reductions. The use of sales of defense stockpiles to finance these tax relief measures is, in my opinion, inappropriate and inconsistent with section 311 of the Budget Act.

While I am removing my objection to the consideration of H.R. 2513, I want to make clear to Members in both the Senate and the House that I do not consider that a precedent is being established for using defense assets as offsets for non-defense-related expenditures. I want to make it clear also that I intend to object to any similar tax relief legislation which is paid for in such a manner in the future.

As the majority leader moves to close out the remaining business so that the Senate can adjourn, I want to take this opportunity to commend him for his superb leadership and the outstanding manner in which he has managed the Senate's business as the majority leader. I look forward to continuing to work with him in the future.

TRIBAL FOSTER CARE AND ADOPTION

Mr. DASCHLE. Mr. President, I would like to bring to the attention of the Senate an issue which, I believe, needs to be addressed. Title IV–E of the Social Security Act, Federal payments for foster care and adoption assistance, does not provide equitable foster care and adoption services for Indian children living in tribal areas. I had hoped we might be able to amend this bill, which is designed to better serve children in need of permanent, loving homes, to include children living in tribal areas. However, it appears that we will be unable to do that at this time. Nonetheless, it is clear that the funding that provides services to Indian children is sufficient to address the compelling needs of children not equivalent to that provided for services to children not living on reservations, and for that reason, I would like to engage in a discussion about how we might address this issue.

Mr. ROCKEFELLER. Mr. President, I am happy to engage in a colloquy with the Democratic leader. Can the leader tell me what constitutes the primary impediment to Indian children and tribal government access to the Federal foster care program and Federal adoption assistance program?

Mr. DASCHLE. Mr. President, the flaw in the statute is that it provides IV–E assistance only to children placed by State courts or agencies with whom States have agreements. In doing so, the law has left out Indian children living in tribal areas who are placed in foster care and adoptive homes by tribal courts. A relatively small number of tribes—50, or 10 percent of the total number of federally recognized tribes—has been able to work out tribal/State agreements whereby foster care payments are made for children placed by tribal courts. These agreements do not provide the full services of the title IV–E program, as they by and large do not include training and administrative funding for tribal governments. A major impediment to reaching even these less-than-ideal tribal/State agreements is that State governments retain liability under the agreements, something that States are reluctant to do.

The result is that Indian children—often the poorest of the poor in our Nation—are sometimes placed in unsubsidized homes without necessary foster care services. This should not be the case. Other children in this Nation who meet the eligibility requirements are eligible for the services of the open-ended Foster Care and Adoption Assistance Entitlement Program. State governments have benefited from large amounts of Federal administrative and training funds for their foster care/adoption assistance programs. Tribal governments and Indian children have not.

The legislation being considered today is designed to improve services and encourage permanent placements for children. Indian children living in tribal areas, however, have not benefited to the same extent as other children under the current program, and we should ensure that that discrepancy is eliminated.

The IV–E program provides help to fund the basics, such as food, shelter, clothing, and school supplies for the children, but this program does not include Indian children. We need to get our priorities in order, and help all children, especially those with special needs, including Indian children. I understand the primary reason for not including an amendment to make Indian children in tribal areas and tribal government eligible for the IV–E program is that no offset was provided for the cost.

Mr. ROCKEFELLER. Mr. President, the Senator is correct. Unfortunately, there are many provisions and new investments that Members wanted to include. But we are running out of time in this session, and securing new funding and appropriate revenue offsets is an overwhelming challenge. I appreciate the concerns the Senator has raised and would like to work with him in the future. As my colleagues know, Indian children are covered under a special law, known as the Indian Child Welfare Act. We should work together to ensure that this law and other Federal programs for abused and neglected children are better coordinated.

Let me assure my colleagues, though, that this package will help Indian children. Within the Promotion of Adoption, Safety, and Support for Abused and Neglected Children, the PASS Act, is a provision to extend the 1993 law to provide funding for family preservation and family support for 3 additional years. This program is designed to support community-based programs to help innovative projects invest in prevention and programs to strengthen families. Within the existing law is a 1-percent set aside for the tribes. This will be extended 3 more years, and I hope this funding will enable the tribes to continue ongoing efforts to help Indian children.

Mr. INOUYE. Mr. President, I, too, want to express my strong interest in amending the title IV–E statute so that Indian children placed by tribal courts have access to this program on the same basis as other children and that tribal governments with approved programs be made eligible for IV–E administrative and training funds on the same basis as States. Senator CAMPBELL and I jointly wrote the Finance Committee on this matter.

I would point out that the Senate Committee on Indian Affairs, in April 1995, held a hearing on welfare reform proposals. At that hearing, a representative of the Department of Health and Human Services, Office of the Inspector General, testified with regard to its August 1994 report: ''Opportunities for Administration on Children and Families to Improve Child Welfare Services and Protections for Native American Children,'' which documented that tribes receive little benefit or funding from the title IV–E Foster Care and Adoption Assistance Program—and other Social Security Act programs. The OIG report states: ''The surest way to guarantee that Indian people receive benefits from these Social Security Act programs is to * * * provide direct allocations to tribes.'' The OIG report also noted that the State officials with whom they talked preferred direct IV–E funding to tribes:

> With respect to IV–E funding, most State officials with whom we talked favored ACF (Administration on Children and Families) dealing directly with Tribes. This direct approach for title IV–E would eliminate the need for Tribal-State agreement, and because title IV–E is an uncapped Federal entitlement, would not affect the moneys available to the States. (p. 13)

Mr. MCCAIN. Mr. President, I share the concerns expressed by my colleagues about basic fairness. Last year during consideration of welfare reform, I advocated that we use that bill as a vehicle to fix the title IV–E law with regard to tribes and Indian children in tribal areas. Under the current law, states cannot even administer a Temporary Assistance for Needy Families [TANF] program unless they have in place a foster care/adoption assistance program. I appreciate the efforts of Representatives HAYWORTH and MCDERMOTT in trying to fix this problem during the Ways and Means Committee consideration of its adoption