

## REFORM THE LAVISH CONGRESSIONAL PENSION PROGRAM

The SPEAKER pro tempore. The Chair recognizes the gentleman from North Carolina (Mr. COBLE) for 5 minutes.

Mr. COBLE. Madam Speaker, I come to the well of the House today to invite support of my bill, H.R. 2357, which addresses the congressional pension program.

The congressional pension program becomes vested after 5 years of service, Madam Speaker. I claim to be no expert on pensions, but I know of no pension that vests after 5 years. This would involve a Member to serve not even three complete House terms and not even one complete Senate term.

My bill would increase the timeframe from 5 years, presently, to 12 years. At least if my bill became law, a Member would be required to serve six full House terms, two full Senate terms, or a combination thereto.

I am disappointed to say, Madam Speaker, that my bill has attracted zero cosponsors, and it has been surfacing for several days now. I am here today to invite every Member of the people's House to warmly embrace and support this bill. You should do so for two reasons:

Number one, it will result in reduced public spending;

Number two, it would send a message back to our constituents that we are willing and able to reduce our own perks and benefits.

I urge every Member of the people's House to come forward, Madam Speaker, and sign his or her name to this bill, and we will go down the path of fiscal sanity and fiscal responsibility before it is too late.

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 END OF LIFE CARE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oregon (Mr. BLUMENAUER) for 5 minutes.

Mr. BLUMENAUER. Madam Speaker, we have a health care crisis in this country, but one few have heard about because we don't think about it until it hits us or our family, but it almost always does.

As we approach the first anniversary of the Boston Marathon bombing, that tragedy might serve as an illustration. Who in that crowd in Boston, almost a year ago, thought they would be facing not just life-or-death medical decisions, but about who would decide whether a leg would be amputated or not?

Who speaks for our loved ones when they can't speak for themselves? Who speaks for us when we are unable to speak? And how would they know what we want? This has profound implications.

Over 80 percent of Americans feel they want to spend their last days at home, surrounded by loved ones, lucid, aware, and enjoying their company.

Unfortunately, about three-quarters of us spend our last days in a hospital, maybe in ICU, with tubes up our noses and heavily sedated. Is that exactly what we want? Who decides? And how will people know what my decisions or your decisions might be?

The failure for us to deal with this issue—whether it is the health care system, the Federal Government, individual families—can lead to tragic consequences. People can get the wrong care, be removed from their loved ones, sometimes get intrusive, expensive, and painful care when that is not their wish, drugged and helpless.

The failure doesn't just lead to unwanted care and pain, denying people the treatment they want, but it can have huge consequences on families. The loved ones left can be racked by guilt and uncertainty that can increase the trauma and the depression after the passing of a loved one. Commentators as diverse as Billy Graham and Dr. Bill Frist have spoken out eloquently about this need for all of us to spare our loved one's doubt and uncertainty.

This is an interesting test for Congress. Can we take steps that are supported by over 90 percent of the population that will lead to better patient care and satisfaction that empowers families to face medical emergencies the way they want?

This is, it should be noted, not just an issue for someone who is elderly with a terminal disease. Any of the bright, young people on Capitol Hill living away from home, perhaps for the first time, perhaps with some friends, can fall and suffer a concussion slipping on the ice or in a soccer game or in a car accident.

What have we done on Capitol Hill to make sure we know in each office who speaks for us and our staff if we are no longer able? One simple solution is to support H.R. 1173, a bipartisan bill cosponsored by over 50 Members that Dr. PHIL ROE and I have introduced. The government that will pay tens of thousands, maybe hundreds of thousands of dollars towards operations would finally pay maybe \$150 or \$200 for a doctor to consult with the patient and their family to find out exactly what their choices might be and make sure their wishes are respected.

Don't just cosponsor the legislation, but use it to have a serious conversation with your staff and your family if you haven't had the discussion. Let's make sure that everyone on Capitol Hill is protected when the inevitable happens, and let's make sure the Federal Government is a full partner. Cosponsor H.R. 1173, and then let us work to enact it.

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 RECOGNIZING ROXCY O'NEAL BOLTON ON BEING RECOGNIZED AS A WOMEN OF CHARACTER, COURAGE AND COMMITMENT HONOREE

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from

Florida (Ms. ROS-LEHTINEN) for 5 minutes.

Ms. ROS-LEHTINEN. Madam Speaker, I rise to recognize Roxcy O'Neal Bolton, a pioneer and champion for the rights of women and an honored constituent in my south Florida congressional district. Yet Roxcy is truly larger than life and belongs to our entire State as well as our Nation.

This week she will be recognized as a Women of Character, Courage and Commitment Honoree by the National Women's History Project. This accolade is a well-deserved acknowledgment of her efforts to lead American women out from lifetimes as second-class citizens into an era of far greater equality between the genders, all while being a committed wife and mother.

Just as she did in her home life, Roxcy demanded equal respect in the workplace. From equal opportunity to equal pay, she knew that if women banded together, we were going to make a difference.

In 1972, she founded Women in Distress, the first women's rescue shelter in Florida to provide emergency housing, rescue services, and care to women who found themselves in situations of personal crisis.

Roxcy was also a fighter on behalf of abused women. At that time, no one talked about rape, much less did anything about alleviating the horrendous trauma that the victim undergoes. Brave crime victims who actually reported their rapes were often treated callously. Roxcy used her amazing presence, her force of will and characteristic personality as aggressive tools for positive change.

As an outspoken woman, she made waves on these topics, and by 1974, her efforts facilitated the creation of the first rape treatment center in the country located in my regional congressional district at Jackson Memorial Hospital in Miami. In 1993, this center was proudly renamed after Roxcy. She is also known for organizing Florida's first crime watch to help curb crime against women.

For all of these efforts and more, Roxcy has been the recipient of numerous civic awards related to her work. That includes the prestigious induction into the Florida Women's Hall of Fame in 1984 for forcing police and prosecutors to make rape crime a priority, as well as illustrating to health departments the need for rape treatment centers.

She is a true champion for woman-kind. Her legacy as a champion for human rights, an end to sexual discrimination in employment and education, as well as in preserving and recognizing women's role in history will forever be remembered.

I am proud to have Roxcy O'Neal Bolton in my congressional district. As Roxcy would certainly say, the struggle for women's equality issues is far from over. Yet, with her example, I am confident that we will continue to push ahead and positively change the future for our daughters and granddaughters.