(Mr. ALEXANDER) was added as a cosponsor of S. Res. 319, a resolution supporting the goals, activities, and ideals of Prematurity Awareness Month.

S. RES. 383

At the request of Ms. KLOBUCHAR, her name was added as a cosponsor of S. Res. 383, a resolution expressing support for the designation of a "Women's Health Research Day".

S. RES. 414

At the request of Mr. DURBIN, the name of the Senator from New Mexico (Mr. UDALL) was added as a cosponsor of S. Res. 414, a resolution condemning the continued undemocratic measures by the Government of Venezuela to undermine the independence of democratic institutions and calling for a free and fair electoral process.

S. RES. 502

At the request of Mr. HATCH, the name of the Senator from South Carolina (Mr. SCOTT) was added as a cosponsor of S. Res. 502, a resolution supporting robust relations with the State of Israel bilaterally and in multilateral fora upon seventy years of statehood, and for other purposes.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Ms. COLLINS (for herself and Mr. CASEY):

S. 2888. A bill to amend Title VII of the Public Health Service Act to reauthorize programs that support interprofessional geriatric education, training, and advance research to develop a geriatric-capable workforce, improving health outcomes for a growing and diverse aging American population and their families, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Mrs. COLLINS. Mr. President, I rise today to introduce legislation, with my colleague from Pennsylvania, Senator CASEY, that would reauthorize the only federally funded programs specifically designed to develop a health provider workforce to care for older Americans. The Geriatrics Workforce Improvement Act would reauthorize the Geriatrics Workforce Enhancement Program, known as GWEP, and also reinstate the Geriatric Academic Career Awards program, known as GACA.

The number of Americans aged 65 and older is growing rapidly. In Maine, we are reaching an aging milestone faster than other States—by 2020, the number of seniors is projected to outnumber children. This is 15 years ahead the national projected date of 2035, at which point the number of Americans 65 and older will outnumber those under age 18 for the first time in U.S. history.

The United States is facing a critical shortage of geriatric health professionals and direct service workers to support our aging population. Today, we need 20,000 geriatricians; however, fewer than 7,300 of our Nation's nearly one million physicians are board-certified geriatricians. By 2030, we will

need 3.1,000 geriatricians and even more geriatric health professionals and direct service workers. We need to train 1,600 geriatricians per year over the next 12 years to reach the targeted need by 2030.

As many as 90 percent of older adults are expected to have one or more chronic health conditions. Multiple chronic conditions, multiple medications, and changes that occur in aging make caring for older adults complex and challenging, yet also rewarding to healthcare professionals who choose this specialty. In any given year, it is expected that 30 percent of older adults and their families will require specialized geriatric care.

Today there are 44 geriatric workforce enhancement programs or GWEPs in 29 states. GWEP sites include 25 schools of medicine, ten schools of nursing, five healthcare facilities, two schools of allied health, a school of social work, and a certified nurse assistant program. GWEPs have the flexibility to tailor training in geriatrics to the unique needs of their own communities.

GWEP programs focus on Geriatric Education by:

1. Changing clinical training environments so that geriatrics is integrated into primary care delivery systems;

2. Training providers to assess and address the needs of older adults, their families, and caregivers at multiple levels within their communities;

3. Delivering community-based programs for patients, families and caregivers; and

4. Providing Alzheimer's disease education for families and caregivers, including direct care workers and other providers.

In 2016, the 44 GWEPs produced significant outcomes. They provided continuing education courses to 94,000 practicing public health professionals, from disciplines such as medicine, nursing, allied health, heath services administration, social work, and psychology. They have also created opportunities for healthcare providers in rural and underserved areas to learn from and consult with top experts in geriatric care through tele-consults, and educational webcasts, as well as online geriatric education programs that are publicly available and accessible online, 24 hours a day, 7 days a week, for free.

GACA programs focus on Resource Optimization. Established in 1998, GACA programs were funded to increase the number of faculty engaged in geriatric education. Transitioning from clinical training and practice into an academic faculty role is particularly challenging, and requires gaining new skills as an educator. These skills are not typically taught in clinical training programs.

Following a restructuring of the geriatric workforce program, GACA has gone unfunded since 2015. GACA would be reauthorized as a stand-alone resource within our legislation in order

to optimize future growth and stability of early-career geriatric faculty. GACA supports early career development for emerging leaders by providing funding that supports 50 percent of their effort to develop skills as an inter-professional educator in geriatrics.

The Geriatrics Workforce Improvement Act would reauthorize the GWEP program at \$45 million per year over the next five years, and reinstate GACA at \$6 million per year. Together, these programs would train the current workforce and family caregivers, while simultaneously developing a cadre of emerging leaders in geriatric education, in a variety of disciplines. By doing both, we will assure that older Americans will be cared for by a health care workforce specifically trained to meet their unique and complex health needs for decades to come. This training to use the most efficient and effective methods for older adults will result in improved care while saving valuable resources, and reducing unnecessarv costs.

Exposure to geriatrics, particularly through pre-clinical and clinical education, has been identified as an important factor for increasing interest in the field. This exposure provides faculty the opportunities needed to demonstrate the specialty is a viable, complex, yet rewarding specialty. The Geriatrics Workforce Improvement Act would provide these critical platforms by creating the infrastructure needed to attract the best and the brightest into the field of geriatrics.

This legislation already has broad support. I ask to enter into the record a letter of support from the National Association for Geriatric Education and the National Association of Geriatric Education Centers.

Mr. President. I urge my colleagues to support this bipartisan legislation that would ensure geriatric education for our current workforce, while optimizing resources to bolster academic careers in geriatrics. Together, GWEP and GACA would develop a high-quality geriatric workforce ready to provide care for Americans as we grow older.

NATIONAL ASSOCIATION FOR GERI-ATRIC EDUCATION, NATIONAL ASSO-CIATION OF GERIATRIC EDUCATION CENTERS,

May 21, 2018.

Hon. SUSAN COLLINS,

Chair, Special Committee on Aging,

U.S. Senate, Washington, DC.

Hon. BOB CASEY,

Ranking Member, Special Committee on Aging, U.S. Senate, Washington, DC.

DEAR CHAIRMAN COLLINS AND RANKING MEMBER CASEY: On behalf of the HRSA Title VII and Title VIII funded Geriatrics Workforce Enhancement Programs (GWEPs) across the country, thank you for your past support of geriatric education and for introducing the Geriatrics Workforce Improvement Act. The National Association for Geriatric Education (NAGE) is pleased to offer our support for this important legislation, which will reauthorize the GWEP and once again make the Geriatrics Academic Career Award program (GACA) a part of the effort to prepare the geriatrics workforce for the aging of our population. We and the growing numbers of older adults, caregivers, and clinicians caring for elders will urge Congress to move quickly to pass your bill and provide the resources to address our nation's growing demand for geriatric care.

We appreciate the many discussions that your staff facilitated with NAGE, as well as with the Eldercare Workforce Alliance, the American Geriatrics Society, and The Gerontological Society of America during the process of developing this legislation. This authorization and related funding is needed for the development of a health care workforce specifically trained to care for older adults and to support their family caregivers. Currently there are only 44 GWEP sites in 29 states. The modest increase in the authorization in your bill will have an important impact on training in geriatric care. Likewise, the funds you have authorized for the GACA program will assist in ensuring that rural and underserved areas will have geriatrics education programs.

NAGE is a non-profit membership organization representing GWEP sites, Centers on Aging, and Geriatric Education Centers that provide education and training to health professionals in the areas of geriatrics and gerontology. Our mission is to help America's healthcare workforce be better prepared to render age-appropriate care to today's older Americans and those of tomorrow.

Thank you for your continued support for geriatric education programs.

Sincerely,

MAURA BRENNAN, MD, FACP, AGSF, FAAHPM, CHMD President NAGE/ NAGEC; Project Director. Baustate Health. Geriatrics Workforce Enhancement Program. Chief. Div. of Geri-Palliative atrics. Care & Post-Acute Medicine; Prof. of Medicine, Univ. of Massachusetts-Baystate; Adjunct Prof. of Medicine. Tufts University School of Medicine.

By Mr. CORNYN (for himself, Mr. KING, and Mrs. GILLIBRAND):

S. 2890. A bill to improve the prosecution of criminal offenses committed by juveniles on military installations, and for other purposes; to the Committee on Armed Services.

Mr. CORNYN. 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. 2890

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

SECTION 1. RELINQUISHMENT OF LEGISLATIVE JURISDICTION OF CRIMINAL OF-FENSES COMMITTED BY JUVENILES ON MILITARY INSTALLATIONS.

(a) IN GENERAL.—In the case of any military installation or portion of a military installation of which legislative jurisdiction of criminal offenses committed by juveniles is retained by the United States as of the date of the enactment of this Act, the Secretary concerned shall seek to relinquish to the State, Commonwealth, territory, or possession concerned legislative jurisdiction of such offenses such that the United States and the State, Commonwealth, territory, or possession, as the case may be, have concurrent legislative jurisdiction of such offenses.

(b) MANNER OF RELINQUISHMENT.—Legislative jurisdiction shall be relinquished pursuant to subsection (a) in the manner provided in section 2683(a) of title 10, United States Code.

(c) DEADLINE.—The Secretaries concerned shall, to the extent practicable, complete relinquishment of legislative jurisdiction pursuant to subsection (a) by not later than one year after the date of the enactment of this Act.

(d) REPORTS.—

(1) IN GENERAL.—Not later than 15 months after the date of the enactment of this Act, each Secretary concerned shall submit to Congress a report on the relinquishment of legislative jurisdiction pursuant to subsection (a).

(2) ELEMENTS.—The report of a Secretary under this subsection shall include the following:

(A) A list of the installations or portions of installations under the jurisdiction of the Secretary of which exclusive legislative jurisdiction of criminal offenses committed by juveniles is retained by the United States as of the date of the enactment of this Act.

(B) A list of the installations or portions of installations listed pursuant to subparagraph (A) for which legislative jurisdiction was relinquished pursuant to subsection (a) as of the date that is one year after the date of the enactment of this Act.

(C) A list of the installations or portions of installations listed pursuant to subparagraph (A) for which legislative jurisdiction was not relinquished pursuant to subsection (a) as of the date that is one year after the date of the enactment of this Act, and, for each such installation or portion of installation, the reasons why legislative jurisdiction was not so relinquished.

(e) SECRETARY CONCERNED DEFINED.—In this section, the term "Secretary concerned" has the meaning given that term in section 101(a)(9) of title 10, United States Code.

SEC. 2. CONSIDERATION OF PROSECUTION BY FEDERAL PROSECUTORS OF FELONY OFFENSES COMMITTED BY JUVE-NILES ON MILITARY INSTALLATIONS WITH CONCURRENT FEDERAL-STATE LEGISLATIVE JURISDICTION WHEN STATE PROSECUTORS DECLINE TO PROSECUTE.

(a) IN GENERAL.—In accordance with such regulations as the Attorney General may prescribe, the Federal Government shall consider the prosecution of charges in each circumstance described in subsection (b).

(b) COVERED CIRCUMSTANCES.—A circumstance described in this subsection is any circumstance involving an alleged felony offense of a juvenile on a military installation for which legislative jurisdiction of such offense of the Federal Government is concurrent with legislative jurisdiction of such offense by a State, Commonwealth, territory, or possession in which—

(1) a recommendation to bring charges is initially made to the prosecutor of the State, Commonwealth, territory, or possession concerned; and

(2) the prosecutor of the State, Commonwealth, territory, or possession declines to bring charges.

(c) FELONY OFFENSE DEFINED.—In this section, the term "felony offense" means an offense punishable by a maximum term of imprisonment of more than one year.

SEC. 3. ANNUAL REPORTS ON DISPOSITION OF FELONY OFFENSES COMMITTED BY JUVENILES ON MILITARY INSTALLA-TIONS.

(a) ANNUAL REPORTS REQUIRED.—Not later than March 31 each year, each Secretary

concerned shall submit to Congress a report on the disposition of alleged felony offenses committed by juveniles on military installations under the control of such Secretary, including installations in foreign countries, during the previous calendar year.

(b) ELEMENTS.—Each report under this section shall include, for the calendar year covered by such report, a list of the alleged felony offenses committed by juveniles on military installations under the control of the Secretary, aggregated by installation, and with the information for each alleged offense as follows:

(1) Nature of the alleged offense.

(2) Age and other appropriate data on the alleged offender, including the connection, if any, of the alleged offender to the Armed Forces.

(3) Age and other appropriate data on each victim, including the connection, if any, of such victim to the Armed Forces.

(4) Results of the investigation, if any, of the alleged offense by any military, Federal, State, or local law enforcement or criminal investigation organization.

(5) If as a result of an investigation as described in paragraph (4), a determination was made not to recommend the bringing of charges against the alleged offender, whether to a Federal prosecutor or the prosecutor of a State, Commonwealth, territory, or possession, the justification for such determination.

(6) If as a result of an investigation as described in paragraph (4), a determination was made to recommend the bringing of charges against the alleged offender to a prosecutor of a State, Commonwealth, territory, or possession, and such prosecutor declined to bring charges, the justification for lack of prosecution.

(7) If as a result of an investigation as described in paragraph (4), a determination was made to recommend the bringing of charges against the alleged offender to a Federal prosecutor, whether or not the prosecutor subsequently met with the victim or victims as provided for in section 3771 of title 18, United States Code.

(8) If a Federal prosecutor declined to bring charges against the alleged offender despite a recommendation for such charges as described in paragraph (7), the justification for lack of prosecution.

(c) COORDINATION WITH ATTORNEY GEN-ERAL.—The Attorney General shall take appropriate actions to ensure that information on actions of Federal prosecutors that is required for purposes of paragraphs (7) and (8) of subsection (b) is submitted promptly to the Secretaries concerned for inclusion in the reports required by subsection (a).

(d) DEFINITIONS.—In this section:

(1) The term "felony offense" means an offense punishable by a maximum term of imprisonment of more than one year.

(2) The term "Secretary concerned" has the meaning given that term in section 101(a)(9) of title 10, United States Code.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 517—DESIG-NATING MAY 2018 AS "OLDER AMERICANS MONTH"

Ms. COLLINS (for herself, Mr. CASEY, Mr. RUBIO, Mr. BLUMENTHAL, Mr. BURR, Mr. NELSON, Mr. TILLIS, MS. CORTEZ MASTO, Mrs. FISCHER, Mr. DONNELLY, Mr. JONES, Ms. WARREN, and Mrs. GILLIBRAND) submitted the following resolution; which was considered and agreed to: