

The SPEAKER pro tempore (Mr. RIGGS). The question is on the motion offered by the gentleman from New Jersey [Mr. SAXTON] that the House suspend the rules and pass the Senate bill, S. 268.

The question was taken; and (two-thirds having voted in favor thereof) the rules were suspended and the Senate bill was passed.

A motion to reconsider was laid on the table.

GENERAL LEAVE

Mr. SAXTON. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on S. 268, the bill just passed.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New Jersey?

There was no objection.

EXTENDING CERTAIN VETERANS' AFFAIRS HEALTH AND MEDICAL CARE EXPIRING AUTHORITIES

Mr. STUMP. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 2353) to amend title 38, United States Code, to extend certain expiring authorities of the Department of Veterans' Affairs relating to delivery of health and medical care, and for other purposes, as amended.

The Clerk read as follows:

H.R. 2353

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

SECTION 1. EXTENSION OF EXPIRING AUTHORITIES OF DEPARTMENT OF VETERANS AFFAIRS.

(a) HOSPITAL CARE AND MEDICAL SERVICES FOR PERSIAN GULF VETERANS EXPOSED TO TOXIC SUBSTANCES.—(1) Section 1710(e)(3) of title 38, United States Code, is amended by striking out "December 31, 1995" and inserting in lieu thereof "December 31, 1998".

(2) Section 1712(a)(1)(D) of such title is amended by striking out "December 31, 1995" and inserting in lieu thereof "December 31, 1998".

(b) CONTRACT AUTHORITY FOR ALCOHOL AND DRUG ABUSE CARE.—Subsection (e) of section 1720A of such title is amended by striking out "December 31, 1995" and inserting in lieu thereof "December 31, 1997".

(c) NURSING HOME CARE ALTERNATIVES.—(1) Section 1720C(a) of such title is amended by striking out "September 30, 1995" and inserting in lieu thereof "December 31, 1997".

(2) The Secretary of Veterans Affairs shall submit to Congress, not later than March 31, 1997, a report on the medical efficacy and cost effectiveness, and disadvantages and advantages, associated with the use by the Secretary of noninstitutional alternatives to nursing home care.

(d) HEALTH SCHOLARSHIPS PROGRAM.—(1) Section 7618 of such title is amended by striking out "December 31, 1995" and inserting in lieu thereof "December 31, 1997".

(2)(A) The Secretary of Veterans Affairs shall submit to Congress, not later than March 31, 1997, a report setting forth the results of a study evaluating the operation of the health professional scholarship program under subchapter II of chapter 76 of title 38,

United States Code. The study shall evaluate the efficacy of the program with respect to recruitment and retention of health care personnel for the Department of Veterans Affairs and shall compare the costs and benefits of the program with the costs and benefits of alternative methods of ensuring adequate recruitment and retention of such personnel.

(B) The Secretary shall carry out the study under this paragraph through a private contractor. The report under subparagraph (A) shall include the report of the contractor and the comments, if any, of the Secretary on that report.

(e) ENHANCED-USE LEASES OF REAL PROPERTY.—(1) Section 8169 of such title is amended by striking out "December 31, 1995" and inserting in lieu thereof "December 31, 1997".

(2) The Secretary of Veterans Affairs shall submit to Congress, not later than March 31, 1997, a report evaluating the operation of the program under subchapter V of chapter 81 of title 38, United States Code.

(f) COMMUNITY-BASED RESIDENTIAL CARE FOR HOMELESS CHRONICALLY MENTALLY ILL VETERANS.—Section 115(d) of the Veterans' Benefits and Services Act of 1988 (Public Law 100-322; 38 U.S.C. 1712 note) is amended by striking out "September 30, 1995" and inserting in lieu thereof "December 31, 1997".

(g) DEMONSTRATION PROGRAM OF COMPENSATED WORK THERAPY AND THERAPEUTIC TRANSITIONAL HOUSING.—Section 7 of Public Law 102-54 (38 U.S.C. 1718 note) is amended—

(1) in subsection (a), by striking out "During fiscal years 1991 through 1995, the Secretary" and inserting in lieu thereof "The Secretary"; and

(2) by adding at the end the following:

"(m) SUNSET.—The authority for the demonstration program under this section expires on December 31, 1997."

(h) HOMELESS VETERANS PILOT PROGRAM.—The Homeless Veterans Comprehensive Service Programs Act of 1992 (Public Law 102-590) is amended as follows:

(1) Section 2(a) (38 U.S.C. 7721 note) is amended by striking out "September 30, 1995" and inserting in lieu thereof "December 31, 1998".

(2) Section 3(a) (38 U.S.C. 7721 note) is amended by striking out "during fiscal years 1993, 1994, and 1995."

(3) Section 12 (38 U.S.C. 7721 note) is amended by striking out "each of the fiscal years 1993, 1994, and 1995" and inserting in lieu thereof "each fiscal year through 1998".

SEC. 2. REPORTS.

(a) REPORT ON CONSOLIDATION OF CERTAIN PROGRAMS.—The Secretary of Veterans Affairs shall submit to Congress, not later than March 1, 1997, a report on the advantages and disadvantages of consolidating into one program the following three programs:

(1) The alcohol and drug abuse contract care program under section 1720A of title 38, United States Code.

(2) The program to provide community-based residential care to homeless chronically mentally ill veterans under section 115 of the Veterans' Benefits and Services Act of 1988 (38 U.S.C. 1712 note).

(3) The demonstration program under section 7 of Public Law 102-54 (38 U.S.C. 1718 note).

(b) REPORT ON SCIENTIFIC EVIDENCE CONCERNING HEALTH CONSEQUENCES OF MILITARY SERVICE IN PERSIAN GULF WAR.—(1) The Secretary of Veterans Affairs shall, in consultation with the National Academy of Sciences and with officials of other appropriate Federal departments and agencies, review the scientific evidence, and assess the strength of such evidence, concerning association between military service in the Southwest Asia

theater of operations during the Persian Gulf War and any disease that may be associated with such service.

(2) The Secretary shall, not later than March 1, 1998, submit to the Committees on Veterans' Affairs of the Senate and the House of Representatives a report on the findings of the review and assessment under paragraph (1).

SEC. 3. REPEAL OF AUTHORITY TO MAKE GRANTS TO VETERANS MEMORIAL MEDICAL CENTER IN THE PHILIPPINES.

(a) REPEAL.—Section 1732 of title 38, United States Code, is amended—

(1) by striking out subsection (b);

(2) by redesignating subsection (c) as subsection (b) and striking out "or grant" both places it appears in that subsection; and

(3) by redesignating subsection (d) as subsection (c) and striking out "and to make grants" in that subsection.

(b) CLERICAL AMENDMENTS.—(1) The heading of such section is amended by striking out "and grants".

(2) The item relating to such section in the table of sections at the beginning of chapter 17 of such title is amended by striking out "and grants".

SEC. 4. DISPLAY OF POW/MIA FLAG AT DEPARTMENT OF VETERANS AFFAIRS MEDICAL CENTERS.

(a) DAILY DISPLAY OF FLAG.—Subsection (a) of section 1084 of the National Defense Authorization Act for Fiscal Years 1992 and 1993 (Public Law 102-190; 36 U.S.C. 189 note) is amended—

(1) by striking out "and" at the end of paragraph (1);

(2) by striking out the period at the end of paragraph (2) and inserting in lieu thereof "and"; and

(3) by adding at the end the following:

"(3) on, or on the grounds of, each Department of Veterans Affairs medical center (except as provided in subsection (e)), on every day on which the flag of the United States is displayed."

(b) EXCEPTION FOR CERTAIN DEPARTMENT OF VETERANS AFFAIRS MEDICAL CENTERS.—Such section is further amended—

(1) by redesignating subsection (e) as subsection (f); and

(2) by inserting after subsection (d) the following new subsection (e):

"(e) SPECIAL RULE FOR DISPLAY AT DEPARTMENT OF VETERANS AFFAIRS MEDICAL CENTERS.—(1) Upon a determination by the director of a Department of Veterans Affairs medical center that the daily display of the POW/MIA flag at that medical center may be detrimental to the treatment of patients at that center, the provisions of subsection (a)(3) shall be inapplicable with respect to that medical center.

"(2) Whenever the director of a Department of Veterans Affairs medical center makes a determination described in paragraph (1), that officer shall submit a report on such determination, including the basis for the determination, to the Under Secretary for Health of the Department of Veterans Affairs."

(c) PROCUREMENT AND DISTRIBUTION OF FLAGS.—(1) Subsection (c) of such section is amended by striking out "Within 30 days after the date of the enactment of this Act, the Administrator" and inserting in lieu thereof "The Administrator".

(2) The Administrator of General Services shall carry out subsection (c) of section 1084 of the National Defense Authorization Act for Fiscal Years 1992 and 1993 (Public Law 102-190; 36 U.S.C. 189 note) with respect to the procurement and distribution of POW/MIA flags for the purposes of paragraph (3) of subsection (a) of such section (as added by subsection (a) of this section) within 30 days after the date of the enactment of this Act.

SEC. 5. CONTRACTS FOR UTILITIES, AUDIE L. MURPHY MEMORIAL HOSPITAL.

(a) **AUTHORITY TO CONTRACT.**—Subject to subsection (b), the Secretary of Veterans Affairs may enter into contracts for the provision of utilities (including steam and chilled water) to the Audie L. Murphy Memorial Hospital in San Antonio, Texas. Each such contract may—

- (1) be for a period not to exceed 35 years;
- (2) provide for the construction and operation of a production facility on or near property under the jurisdiction of the Secretary;
- (3) require capital contributions by the parties involved for the construction of such a facility, such contribution to be in the form of cash, equipment, or other in-kind contribution; and
- (4) provide for a predetermined formula to compute the cost of providing such utilities to the parties for the duration of the contract.

(b) **FUNDS.**—A contract may be entered into under subsection (a) only to the extent as provided for in advance in appropriations Acts.

(c) **ADDITIONAL TERMS.**—The Secretary may include in a contract under subsection (a) such additional provisions as the Secretary considers necessary to secure the provision of utilities and to protect the interests of the United States.

SEC. 6. NAME OF DEPARTMENT OF VETERANS AFFAIRS MEDICAL CENTER, WALLA WALLA, WASHINGTON.

The Department of Veterans Affairs Medical Center located at 77 Wainwright Drive, Walla Walla, Washington, shall after the date of the enactment of this Act be known and designated as the "Jonathan M. Wainwright Department of Veterans Affairs Medical Center". Any reference to that medical center in any law, regulation, map, document, paper, or other record of the United States shall be considered to be a reference to the Jonathan M. Wainwright Department of Veterans Affairs Medical Center.

The **SPEAKER** pro tempore. Pursuant to the rule, the gentleman from Arizona [Mr. STUMP] will be recognized for 20 minutes, and the gentleman from Mississippi [Mr. MONTGOMERY] will be recognized for 20 minutes.

The Chair recognizes the gentleman from Arizona [Mr. STUMP].

GENERAL LEAVE

Mr. STUMP. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on H.R. 2353.

The **SPEAKER** pro tempore. Is there objection to the request of the gentleman from Arizona?

There was no objection.

Mr. STUMP. Mr. Speaker, I yield myself such time as I may consume.

(Mr. STUMP asked and was given permission to revise and extend his remarks.)

Mr. STUMP. Mr. Speaker, H.R. 2353 would extend various authorities of the Department of Veterans Affairs relating to delivery of health care for eligible veterans.

These include: Hospital care and medical services for Persian Gulf veterans; use of nursing home care alternatives; care for homeless veterans; and extension of the VA Health Scholarship program.

H.R. 2353 would also: Provide for the daily display of the POW/MIA flag at VA medical centers; authorize VA to contract for utilities at the Audie Murphy Memorial Veterans Hospital in San Antonio, TX; and, change the name of the Walla Walla, Washington VA Medical Center to the Jonathan M. Wainwright VA Medical Center.

As with all VA medical care authorizations, these provisions would be subject to annual appropriation levels.

The Congressional Budget Office has stated this bill would not affect direct spending or receipts; thus it would have no pay-as-you-go implications under budget rules.

As always, I want to thank the VA Committee's ranking member, my distinguished colleague SONNY MONTGOMERY for his cooperation and assistance on this bill.

I also want to thank CHRIS SMITH, vice-chairman of the VA Committee, the chairman of the Hospital and Health Care Subcommittee, TIM HUTCHINSON, and the subcommittee's ranking member, CHET EDWARDS, for their bipartisan work on this measure.

They worked in a very constructive fashion with other members of the committee to resolve differences of opinion and accommodate Members desires in regard to this legislation.

Mr. FOX, a member of the Hospitals and Health Care Subcommittee should be acknowledged for his instruction of the provision regarding flying the POW/MIA flag at VA medical centers.

Additionally, I would like to acknowledge the contribution of Mr. NETHERCUTT of Washington, for his leadership in renaming the VA medical center in Walla Walla, in honor of Gen. Jonathan M. Wainwright.

General Wainwright was an extremely distinguished military and civic leader, so it is very fitting that we take this action in his memory.

Mr. Speaker, I yield such time as he may consume to the gentleman from New Jersey [Mr. SMITH], the vice chairman of the committee, for an explanation of the bill.

Mr. SMITH of New Jersey. Mr. Speaker, I strongly support H.R. 2353, legislation to extend eight needed expiring authorities for the Department of Veterans Affairs, including other important provisions. Before I summarize the bill I would like to express my sincere appreciation for the bipartisan effort and the outstanding work by those who brokered the compromises reflected in the bill. Through the efforts of Chairman HUTCHINSON and Chairman STUMP, along with full committee ranking member MONTGOMERY, and CHET EDWARDS, the ranking member of the subcommittee, we were able to reach a compromise that reflects not only the specific concerns of each of the members but also the needs of our veteran constituents. We were also, in the spirit of compromise, able to address the concerns of Mr. NETHERCUTT and the entire Washington State delegation to rename the Walla Walla VA

Medical Center for a Great Washingtonian, Gen. Jonathan M. Wainwright.

Under this bill, hospital and medical care services for Persian Gulf veterans will be extended for 3 years, until December 31, 1998.

This bill also extends the following seven authorities: Contract authority for alcohol and drug abuse care through December 31, 1997; the nursing home care alternatives program through December 31, 1997 with an evaluation due to Congress March 31, 1997; The Health Scholarships program to December 31, 1997, with a report by a private contractor due to Congress March 31, 1997; enhanced-use lease of real property authority to December 31, 1997 with a report due to Congress March 31, 1997; the community-based residential care for homeless chronically mentally ill veterans to December 31, 1997; the demonstration program of compensated work therapy and therapeutic transitional housing to December 31, 1997; and the homeless veterans pilot program to December 31, 1998.

Section 2 of the bill requires the VA to submit to Congress by March 1, 1997 a report on the advantages and disadvantages of consolidating the following programs: Alcohol and drug abuse contract care, community-based residential care to homeless chronically mentally ill veterans, and compensated work therapy and therapeutic transitional housing.

Section 2 also includes a compromise provision which authorizes a report on the scientific evidence concerning the health consequences of military service in the Persian Gulf war.

Section 3 of the bill repeals the authority of the VA to provide grants to the Veterans Memorial Medical Center in the Philippines.

Section 4 of the bill permits the daily display of the POW/MIA flag at Department of Veterans Affairs medical centers.

Section 5 authorizes contract authority for utilities at the Audie L. Murphy Memorial Medical Center, San Antonio, Texas.

Finally, Section 6 authorizes the name change of the Walla Walla VA Medical Center to the Jonathan M. Wainwright Department of Veterans Affairs Medical Center, a great American hero and son of the State of Washington.

Mr. Speaker, this legislation is strongly supported by the Department, professional organizations representing the affected groups, and the Committee on Veterans' Affairs. Both the Subcommittee on Hospitals and Health Care and the full committee unanimously reported this measure. I strongly support passage of this legislation.

Mr. MONTGOMERY. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I want to start by thanking the gentleman from Arizona [Mr. STUMP], the chairman of the committee, for bringing this bill to the

floor. I also want to commend the gentleman from Arkansas [Mr. HUTCHINSON], and also the gentleman from New Jersey, [Mr. CHRIS SMITH], who handled the bill today. The gentleman from Arkansas [Mr. HUTCHINSON] is the chairman of the Subcommittee on Hospitals and Health Care, and also, the gentleman from Texas [Mr. CHET EDWARDS], the ranking member on this side, for their work in moving this measure to the House today.

As the gentleman from Texas [Mr. EDWARDS] said last week, along with the gentleman from Arizona [Mr. STUMP], we like to do things that affect veterans in a nonpartisan fashion, and this bill demonstrates our commitment to that principle.

Mr. Speaker, I would like to take a minute or two to talk about two important areas of this legislation. The first is the authority to provide health care on a priority basis to Persian Gulf veterans. Although the vast majority of these veterans do not have health concerns, there has been a great deal of attention paid to those with undiagnosed illnesses.

I would like to point out, Mr. Speaker, that in fact we passed historic legislation last year that if there is an undiagnosed illness of a veteran who was in the Persian Gulf, who served over in that faraway land, that that veteran can draw disability either for his or her family on a temporary basis until the research gets forward and helps us decide what the cause of that illness is. Both the Congress and the President are determined to get answers for those undiagnosed illnesses.

Mr. Speaker, I want to assure those veterans that if they need health care, I would hope they would go to the veterans hospital where they are, and they can try and we will try to search out the answers to some of these cases that have not been solved on the illness.

The second topic that I would like to briefly touch upon is the extension of the authorization for programs addressing the problems of veterans with mental illnesses. This bill authorizes the VA to continue to help veterans who are homeless or who have been recently discharged from the hospital.

The VA has a number of different programs to provide medical care, transitional housing and work therapy for these veterans. These are very important programs because they provide hope and dignity to veterans who have served their country and who are now suffering from the most invisible pain of mental illness. These veterans are very dependent on the Government for basic human needs and we have a special duty to continue to care for them.

Mr. Speaker, I urge my colleagues to support this bill.

Mr. Speaker, I yield such time as she may consume to the gentlewoman from Florida [Mrs. THURMAN].

□ 1615

Mrs. THURMAN. Mr. Speaker, I thank the gentleman from Mississippi

[Mr. MONTGOMERY] for yielding me this time, and I stand here ready to support H.R. 2353 and commend the work that has been done on this by the gentleman from Arizona [Mr. STUMP], the chairman of the committee. However, Members will hear me more than once on this issue for the next, at least for the 104th Congress, because I think there is something that needs to continue to be pointed out about veterans health care.

Mr. Speaker, in the U.S. Senate there was a Member that actually brought this up as well. I think the gentleman from Arizona [Mr. STUMP] might be well aware because he and I actually share some similar problems with Arizona and Florida.

As most of you know, Florida is a very popular veteran's destination. Between 1980 and 1990, the veterans population within my district increased immensely. For example, in Pasco County the number of veterans increased 56 percent; for Gilchrist County, it increased 63 percent; and in Marion County, the number of veterans increased 76 percent.

In the past, the VA has attempted to better allocate limited resources through the resource planning and management system [RPM]. Unfortunately, the Department of Veterans Affairs is reluctant to implement the proposals and findings of the RPM and relocate resources to meet this shifting demand. According to a July 19, 1995, GAO report, the Department has failed to fully implement the new budgeting method known as the resource planning and management system.

The GAO stated:

Because VHA lacked resources to fund all facilities' expected needs, it chose to limit the resources given to facilities with growing workloads. . . . For facilities with decreasing workloads, VHA chose not to reduce their funding in proportion to the expected decreases in workload. These decisions led only to small adjustments in the funding for the projected cost of increased workload, while facilities with decreasing workloads received more resources than they were projected to need.

In other words, those that were decreasing in workload actually were getting almost the same amount, while we that were increasing were getting less, or at least not meeting our needs.

Throughout the country, as well as in my home State of Florida, inequities exist in veterans health funding which need to be addressed. For example, the national average cost per veteran for medical services and administration as contained in the Department of Veterans Affairs Summary of Expenditures by State for fiscal year 1993 was \$574. Florida, however, was allocating \$405 per veteran for a veteran population of 1,719,022, the second largest veteran population in the Nation. Earlier in the summer, I pointed out that the total VA health care expenditures in Florida for fiscal year 1994 were the same as total expenditure levels in Illinois and Pennsylvania, even though Florida's veteran population is 620,000 greater

than Illinois and 330,000 greater than Pennsylvania's. In short, I would just like the chairman and the ranking member to know, I really believe we need to push for the Department of Veterans Affairs to allocate funding to ensure that veterans have equal access to quality health care regardless of what region they live in or which facility provides them services.

I think that is something all of us in this Congress believe we need to do to make sure that those men and women who fought for this country, some which have lost their lives, but those that returned, are given the same opportunities no matter where they live.

Again, Mr. Speaker, I thank the gentleman from Mississippi [Mr. MONTGOMERY] very much for his giving me the opportunity to bring this to the Congress' attention.

Mr. MONTGOMERY. Mr. Speaker, I would like to thank the gentlewoman for her comments. It is a problem we certainly will take a look at, and I think the gentleman from Arizona [Mr. STUMP] has about the same problem as she does as far as veterans moving into your area.

Mr. Speaker, I yield such time as he may consume to the gentleman from Texas [Mr. EDWARDS], the ranking member on the Subcommittee on Hospitals and Health Care. The gentleman from Texas has done a splendid job on that subcommittee and as a committee member of the Committee on Veterans' Affairs.

Mr. EDWARDS. Mr. Speaker, I thank the gentleman from Mississippi [Mr. MONTGOMERY] and I rise in support of H.R. 2353, as amended.

This bill, H.R. 2353, as amended, would extend VA's authority to provide needed services to veterans. Of particular importance, the bill would extend the period during which VA may furnish priority care to Persian Gulf veterans, without regard to whether health problems from which they suffer have been adjudicated as service incurred.

The bill would also permit VA to continue several high-visibility programs which help in rehabilitating homeless and chronically mentally ill veterans. These and other extensions in the bill are needed because in each instance the underlying legal authority to furnish care will expire on or before January 1, 1996.

H.R. 2353, as amended, would also underscore our commitment to achieving a full accounting of the status of American prisoners of war and missing in action by providing for display of the POW/MIA flag at VA medical centers.

Mr. Speaker, I especially want to pay tribute to the gentleman from Pennsylvania [Mr. FOX] for his leadership effort and fighting so that all Americans can be reminded of the fact that we do still have American MIA's and that we should never forget either our MIA's or our American POW's who have served this country. Had it not been for that gentleman's particular

leadership on this effort, I do not think this provision would be in the bill and he deserves our credit and our support for that leadership.

This bill also provides a framework for VA to achieve cost savings at the Audie Murphy VA Medical Center in San Antonio, TX, through contracts with a non-Federal institution for construction and shared use of an energy production facility.

I would like to commend my friend and colleague, the gentleman from Texas [Mr. TEJEDA], for his hard work on this provision. While Mr. TEJEDA is not here on the floor today because of a recent operation, our debt of thanks goes out to him. And if he happens to be watching this today, I know I speak on behalf of all of my colleagues in this House in saying we wish him well and appreciate his leadership and input on this bill.

Mr. Speaker, once again, it must be either a Monday or a Tuesday and it must once again be veterans legislation, because the chairman of the committee, the gentleman from Arizona [Mr. STUMP], and the ranking member, the gentleman from Mississippi [Mr. MONTGOMERY], have done their business one more time. They have crafted, with the help of the gentleman from Arkansas [Mr. HUTCHINSON], a bipartisan piece of legislation that is important to our Nation's veterans and they have brought it to the floor without discord, without fighting.

Mr. Speaker, there will not be anyone in the press gallery reporting on this, but, hopefully, once again, as happened last week and so many times before, the cooperative efforts of Mr. STUMP and Mr. MONTGOMERY have resulted in positive, good, constructive legislation coming through this House that will benefit millions of our Nation's veterans who have served our country.

Mr. MONTGOMERY. Mr. Speaker, will the gentleman yield?

Mr. EDWARDS. I yield to the gentleman from Mississippi.

Mr. MONTGOMERY. Mr. Speaker, I appreciate the gentleman's mentioning the gentleman from Texas [Mr. TEJEDA], who is a member of the committee, and we are certainly pulling for him.

One thing I talked to the gentleman from Arizona [Mr. STUMP] about is, usually veterans bills are always up first in number. This time we are at the bottom, but I am sure that correction will be looked into, and I appreciate the gentleman's yielding.

Mr. EDWARDS. Mr. Speaker, I thank the gentleman. I am sure they just saved the best for last.

Mr. Speaker, I also want to congratulate the gentleman from Mississippi, [Mr. MONTGOMERY] and the gentleman from Arizona, [Mr. STUMP] and I urge support of this bill.

Mr. STUMP. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I would like to acknowledge the very diligent work of

the gentleman from Texas [Mr. EDWARDS]. He is always there, always willing to compromise, and stays right there. I thank both he and the gentleman from Pennsylvania [Mr. FOX] for resolving the issues of the POW-MIT problem of flying the flag at the VA centers and in working out their differences, and I commend both of them.

Mr. Speaker, I yield such time as he may consume to the gentleman from Pennsylvania [Mr. FOX].

Mr. FOX of Pennsylvania. Mr. Speaker, I too want to thank very much the gentleman from Arizona [Mr. STUMP], the chairman of the committee, and the ranking member, the gentleman from Mississippi [Mr. MONTGOMERY], and, of course, my colleague who has worked with me on this bill, the gentleman from Texas [Mr. EDWARDS], for his help in making this day possible, and also to the gentleman from Arkansas [Mr. HUTCHINSON], the chairman of the subcommittee, and to my good friend, the gentleman from New Jersey [Mr. SMITH], for his efforts in moving ahead this important veterans legislation.

In addition to extending expiring health care authorities, we act today to honor our commitment to the 2,202 brave American soldiers who are still missing or unaccounted for, and to their families.

It is our duty to remember these proud warriors and their families and to do everything within our power to obtain a full accounting. Particularly in light of the President's recent normalization of relations with Vietnam, we must ensure that we remain vigilant, Mr. Speaker, in our duty to American POW and MIA's. Today I am proud to join my colleagues on the Veterans' Affairs Committee in offering H.R. 2353, which includes a provision to have the POW/MIA flag flown daily at each Department of Veterans Affairs Medical Center until the President determines that the fullest possible accounting has been made.

As you know, Mr. Speaker, the National League of Families POW/MIA flag has been recognized by law as the Symbol of the Nation's concern and commitment to resolving as fully as possible the data on Americans still prisoner, missing, and unaccounted for. It is appropriate that this flag be flown at the institutions which we have established to care for those who have served our great country.

The POW/MIA flag is already flown daily at the Coatesville VA Medical Center in Coatesville, PA. Veterans there are grateful for this visible symbol of the concern and commitment of the U.S. Government to their missing brethren.

I would like to thank again Chairman STUMP, ranking member MONTGOMERY, Chairman HUTCHINSON, ranking member EDWARDS, with whom I have worked with so long, the gentleman from New Jersey, Mr. SMITH, the American Legion, and the national

POW/MIA legislative network for their support and I urge my colleagues to fully support H.R. 2353.

Mr. MONTGOMERY. Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

Mr. STUMP. Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

The SPEAKER pro tempore (Mr. RIGGS). The question is on the motion offered by the gentleman from Arkansas [Mr. STUMP] that the House suspend the rules and pass the bill, H.R. 2353, as amended.

The question was taken.

Mr. SMITH of New Jersey. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 5 of rule I and the Chair's prior announcement, further proceedings on this motion will be postponed.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12 of rule I, the Chair declares the House in recess until 5 p.m.

Accordingly (at 4 o'clock and 28 minutes p.m.), the House stood in recess until 5 p.m.

□ 1700

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. RIGGS) at 5 p.m.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 5, rule I, the Chair will now put the question on each question on which further proceedings were postponed earlier today in the order in which that question was entertained.

Votes will be taken in the following order:

First, the approval of the Journal, followed by votes on H.R. 2070 de novo and H.R. 2353 by the yeas and nays.

The Chair will reduce to 5 minutes the time for any electronic vote after the first such vote in this series.

THE JOURNAL

The SPEAKER pro tempore. Pursuant to clause 5 of rule I, the pending business is the question of the Speaker's approval of the Journal of the last day's proceedings.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Ms. MOLINARI. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Evidently a quorum is not present.

The Sergeant at Arms will notify absent Members.