

amendment to the concurrent resolution, S. Con. Res. 86, supra; as follows:

At the end of title II, add the following:

**SEC. —. REQUIREMENT TO OFFSET DIRECT SPENDING INCREASES BY DIRECT SPENDING DECREASES.**

(a) **SHORT TITLE.**—This section may be cited as the "Surplus Protection Amendment".

(b) **IN GENERAL.**—In the Senate, for purposes of section 202 of House Concurrent Resolution 67 (104th Congress), it shall not be in order to consider any bill, joint resolution, amendment, motion, or conference report that provides an increase in direct spending unless the increase is offset by a decrease in direct spending.

(c) **WAIVER.**—This section may be waived or suspended in the Senate only by the affirmative vote of three-fifths of the Members, duly chosen and sworn.

(d) **APPEALS.**—Appeals in the Senate from the decisions of the Chair relating to any provision of this section shall be limited to 1 hour, to be equally divided between, and controlled by, the appellant and the manager of the concurrent resolution, bill, or joint resolution, as the case may be. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required in the Senate to sustain an appeal of the ruling of the Chair on a point of order raised under this section.

(e) **DETERMINATION OF BUDGET LEVELS.**—For purposes of this section, the levels of direct spending for a fiscal year shall be determined on the basis of estimates made by the Committee on the Budget of the Senate.

#### AUTHORITY FOR COMMITTEES TO MEET

##### COMMITTEE ON ENERGY AND NATURAL RESOURCES

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Committee on Energy and Natural Resources be granted permission to meet during the session of the Senate on Tuesday, March 31, for purposes of conducting a full committee hearing which is scheduled to begin at 9:30 a.m. The purpose of this hearing is to receive testimony on S. 1100, a bill to amend the Covenant to Establish a Commonwealth of the Northern Marina Islands in Political Union with the United States of America, the legislation approving such covenant and for other purposes; and S. 1275, a bill to implement further the Act (Public Law 94-241) approving the Covenant to Establish a Commonwealth of the Northern Marina Islands in Political Union with the United States of America, and for other purposes.

The PRESIDING OFFICER. Without objection, it is so ordered.

##### COMMITTEE ON FINANCE

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Committee on Finance be permitted to meet Tuesday, March 31, 1998 beginning at 2:00 p.m. in room SH-215, to conduct a markup. Note this markup was originally scheduled to begin at 10:00 a.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

##### COMMITTEE ON LABOR AND HUMAN RESOURCES

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Commit-

tee on Labor and Human Resources be authorized to meet for a hearing on Charter Schools during the session of the Senate on Tuesday, March 31, 1998, at 10:00 a.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

##### COMMITTEE ON VETERANS' AFFAIRS

Mr. DOMENICI. The Committee on Veterans' Affairs requests unanimous consent to hold a hearing on tobacco-related compensation and associated issues. The hearing will take place on Tuesday, March 31, 1998, at 10:00 a.m., in room 106 of the Dirksen Senate Office Building.

The PRESIDING OFFICER. Without objection, it is so ordered.

##### SPECIAL COMMITTEE ON AGING

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Special Committee on Aging be permitted to meet on March 31, 1998 at 10:00 a.m. for the purpose of conducting a hearing.

The PRESIDING OFFICER. Without objection, it is so ordered.

##### SUBCOMMITTEE ON STRATEGIC FORCES

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Subcommittee on Strategic Forces of the Committee on Armed Services be authorized to meet on Tuesday, March 31, 1998 at 9:30 am to receive testimony on strategic nuclear policy and related matters in review of the Defense authorization request for fiscal year 1999 and the future years Defense program.

The PRESIDING OFFICER. Without objection, it is so ordered.

##### SUBCOMMITTEE ON SURFACE TRANSPORTATION/MERCHANT MARINE

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Subcommittee on Surface Transportation/Merchant Marine of the Senate Committee on Commerce, Science, and Transportation be authorized to meet on Tuesday, March 31, 1998, at 2:30 pm on reauthorization of the surface transportation board.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### ADDITIONAL STATEMENTS

##### PEDIATRIC EMERGENCY MEDICAL SERVICES PROGRAM

• Mr. INOUE. Mr. President, the Pediatric Emergency Medical Services Program was enacted into public law on a truly bipartisan basis on October 30, 1984. Children are not "merely little adults." They have their own unique health care needs, respond to illness and trauma in their own individualized manner, and although children constitute between 20 to 35 percent of hospital emergency department services, too often their families are not really considered an integral component of their treatment and eventual rehabilitation. When President Reagan signed Public Law 98-555, a new era of hope and opportunity had arrived.

Over the years, I have been very pleased with the steady growth this

program has experienced. The landmark 1993 Institute of Medicine report reminded us, however, that much more still needs to be done. "Each year, injury alone claims more lives of children between the ages of 1 and 19 than do all forms of illness. . . . Overall, some 21,000 children and young people under the age of 20 died from injuries in 1988. . . . Clearly, preventing emergencies is the best 'cure' and must be a high priority, but as yet, prevention is far from foolproof. When prevention fails, families should have access to timely care by trained personnel within a well-organized emergency medical services (EMS) system. Services should encompass prevention, prehospital care and transport, ED and inpatient care at local hospitals and specialty centers, and assistance in gaining access to appropriate follow-up care including rehabilitation services. For too many children and their families, however, these resources have not been available when they were needed. . . ." I would suggest that the Institute of Medicine has raised a very critical issue for all of us in our nation, and particularly for the well-being of our families.

This year, the Administration in its Fiscal Year 1999 budget requested \$11 million to continue the Pediatric Emergency Medical Services Program. This figure represents a decrease of \$2 million from last year and we might be somewhat distressed by the recommendation. However, I am very pleased that in this time of significant budgetary constraints, Secretary Shalala requested funding. And, I am confident that again this year our colleagues serving on the Appropriations Committees, on both sides of the aisle and in the House and Senate, will enthusiastically respond to the truly pressing needs of our nation's children. I am also confident that we will continue to have the vocal support of the American Academy of Pediatrics and the National Association of Children's Hospitals. But for their active support in the past, it is fair to say that Congressman BILL YOUNG and I would not have been able to be as effective as we have wished.

The Department's budget justification continues to point out all too graphically the real need for this program. They point out that: "Each year over 20,000 children die from injuries. Another 31,447,000 children and adolescents are seen in emergency departments, accounting for \$8.6 billion per year in medical costs. Government sources pay all or part of 40 percent of the pediatric emergency department visits, or about \$3.4 billion. . . ." Without question, having appropriate and high quality care available in a timely fashion is an investment in our nation's future.

Every one of us should be aware that there is still much to be accomplished in our efforts to protect the lives and future of our loved ones. Even today, only two states require that Basic Life Support vehicles carry all the equipment needed to stabilize a child and