

helped people with their travel claims and housing problems. He also has been involved in helping those less fortunate with clothing and food and plays the keyboard and sings every Sunday at his church.

In short, Yeoman First Class Stephen Dykema has earned the recognition he has received as Enlisted Person of 1997. This young man is a credit to the Coast Guard, to South Carolina, and to this Nation.●

SUPPORT OF S.J. RES. 50

● Mr. FRIST. Mr. President, I rise today in support of S.J. Res. 50, which I joined the Senator from Missouri, Mr. BOND, in introducing. This resolution expresses the Senate's disapproval of the rule submitted by the Health Care Financing Administration (HCFA) on June 1, 1998, which requires the acquisition of surety bonds for home health agencies under the Medicare and Medicaid programs. HCFA's rule endangers the existence of small and non-hospital based home health agencies because of the excessive expenses and requirements that are created by this rule. I am concerned that patients will lose access to agencies where they can attain home health services and that many employees will lose jobs because of the financial stress that is created by this rule.

Even the two Congressional leaders, PETE STARK and KAREN THURMAN, who introduced the surety bond regulations, realize that the requirements have gone beyond the original intent of Congress. The initial requirement system was based on the successful Medicaid program in Florida, yet the new requirements proposed by HCFA do not only penalize potentially harmful providers but also many of the health care agencies that deliver essential high-quality care. HCFA's proposal differs from the successful Florida model in many ways. In Florida, bond requirements were required to be capped at \$50,000, yet agencies under the HCFA proposal must purchase 15 percent of its Medicare reimbursement the previous year or \$50,000 worth of bonds, whichever is greater.

A report done by the United States Small Business Administration in its April 15, 1998 letter asking HCFA to remove the 15 percent provision in the surety bond regulation recognizes that HCFA failed to comply with the Regulatory Flexibility Act, which requires agencies to account for the impact of a proposal on all small entities and to consider alternatives to reduce the burden on those agencies. This report states that HCFA did not conduct regulatory flexibility analysis of the proposal's impact on small entities. HCFA was not monitoring the impact of this regulation on all small home health providers but only those with "aberrant billing practices." Therefore, many of the high-quality small home health care agencies are being pushed out of the health care sector because of the outrageous bond requirements.

HCFA also requires all home health care agencies to buy surety bonds regardless of their credit history, whereas in Florida those agencies with at least one year in the Medicare program and no payment history problems were exempted. HCFA also requires these companies to secure bonds every year regardless of performance. These excessive requirements and costs will push many smaller, freestanding home health agencies out of business. If these companies are forced to shut down, the elderly and disabled will lose these essential services. For, this rule should prevent fraud, yet it should not penalize the law-abiding companies for the abuses of less than 1% of the agencies.

Since this rule submitted by HCFA seems to impose conditions that go beyond those bonding companies bear in the course of their normal business, many surety companies are not offering bonds to Medicare home health agencies. Even those offering bonds are creating a prohibitive cost or demanding collateral equal to the face value of the bond or personal guarantees that exceed the face value of the bond. Because of the effects of this rule, small and non-hospital based agencies now risk loss of their Medicare provider number, and their employees and Medicare patients can also be adversely affected.

The capitalization requirement in HCFA's proposal creates a barrier to market entry because entry is based on factors such as overhead costs, location, profit margins, and competition in the area.

With all of these expenses and requirements, one would assume that only health care agencies that have abused the system would be required to abide by this rule. Yet, this system penalizes small home health care agencies that have been serving the elderly and disabled with high-quality for years. This rule should prevent fraud, not limit the access to care for those serviced by the Medicare and Medicaid programs. Because this rule will hurt many small home health care agencies with these exorbitant expenses and requirements, and therefore cause many elderly and disabled people to lose access to health care, I strongly suggest that this rule submitted by HCFA be reworked with consideration given to these responsible, small health care providers that provide essential services for thousands of U.S. citizens.●

USS "BRUCE HEEZEN"

● Mr. CHAFEE. Mr. President, I would like to share with my colleagues the tremendous news of the success of a group of nine fifth grade students from Rhode Island. These students won the U.S. Navy's national competition to be the first group of civilians ever granted the privilege of naming a United States Navy ship. These diligent young people from Oak Lawn Elementary School in Cranston overcame extraordinary com-

petition being selected as finalists from more than 2,000 entries from across the United States.

Last Friday, Secretary of the Navy John Dalton announced the Oak Lawn students' proposal to name the Navy's next oceanographic ship the U.S.S. *Bruce Heezen* was the winner of this competition. Heezen was a pioneer in mapping the ocean floor who died aboard a Navy submarine taking him to look for the first time at the ocean terrain.

I would like to extend my warmest congratulations to these bright students and their teacher for their great achievement. I share with their families and community in recognizing the fabulous work they did in terms of conducting extensive group research and a wide range of individual projects. I also commend them for enthusiastically sharing their discoveries and knowledge with other schools in the area to educate their fellow students.●

EXPANSION OF THE SEABORG CENTER AT NORTHERN MICHIGAN UNIVERSITY

● Mr. ABRAHAM. Mr. President, I rise today to recognize the expansion of the Glenn T. Seaborg Center for Teaching, Learning Science and Mathematics at Northern Michigan University. On Thursday, June 11, 1998, a groundbreaking will take place for the new complex.

The Seaborg Center is named for Nobel Laureate Dr. Glenn T. Seaborg of the Upper Peninsula of Michigan. Dr. Seaborg is perhaps the most important scientist of his time. A native of Ishpeming, he was co-discoverer of Plutonium, ten elements and more than 100 isotopes. Dr. Seaborg's list of achievements extends far beyond these discoveries, therefore, it is quite appropriate for this educational facility to be named after him. The Center will provide educational institutions at all levels with materials, consultative services and training in math and science education. It serves the entire Upper Peninsula of Michigan, over 56 school districts from the Northern Michigan University campus and from three satellite centers.

I personally visited the original facility and recognized the importance of obtaining funding to upgrade the facility. It is for this reason that I submitted a request for funding. I am very pleased to see that this project is getting underway. It could not be happening at a more exciting time, in light of Northern Michigan University's upcoming centennial celebration. I extend my best wishes and congratulations to everyone involved with making the Seaborg Center project possible. I know it will be a great success.●

VISION 2020 NATIONAL PARKS RESTORATION ACT

Mr. THOMAS. Mr. President, I ask unanimous consent that the Senate