

amount to be collected is less than the amount that the program originally set as being needed. It will also not cover all of the requests for the current funding cycle. This means that many projects will not be funded. The FCC has acted courageously in setting even this funding amount in light of the extreme pressure exerted on it from the large TELCOs and other detractors of the program. The TELCOs claimed need to add 5% to long distance rates to cover the costs of Universal Service has been blamed on the Schools and Libraries Discount program. In fact, only a little over one third of that amount (1.5%) would raise more than enough to fully fund the program. With the elimination of local access charges starting in July, the TELCOs will save much more than that amount.

This is a landmark program that will help assure a brighter future for many students who otherwise will not be able to benefit from the rich technology that can transform education in our country. Our community will not be able to provide technology and Internet access for our students and families, of which less than 20% now have access to computers and the Internet at home, without this program. The school may be the only place that the next generation of workers and consumers can get the training and experience they need to compete in the 21st century job market.

We ask for your support for the future of our children and the full funding of the Schools and Libraries Discount Program. We need a strong voice in this debate in favor of the program.

Sincerely,

GAIL M. TISSIER,
Superintendent.

SHADON UNIFIED SCHOOLS,
Shandon, CA, June 18, 1998.

Hon. LOIS CAPPS,
U.S. Congress,
San Luis Obispo, CA.

DEAR CONGRESSWOMAN CAPPS: I want to express my thanks to you for your fine work on behalf of the schools and school children of San Luis Obispo County. We in Shandon have been encouraged by the time you have taken to listen our requests for relief from some of the special problems of the smaller districts in low income areas.

I am alarmed, though, after the wonderful promise offered by the FCC "e-rate" process, that there are those in the Congress that are working to dilute its value to us or to eliminate the program entirely. If there are those who harbor doubts about the worth of this program, I would love to have them visit my schools.

For Shandon children, this program will absolutely offer a chance for technological literacy on a par with school children in the most advantaged schools. Large numbers of our families are at or near the poverty level, and our district has no economies of scale. This program will allow us to acquire nearly \$200,000 worth of services, wiring, and equipment at less than one-fourth the cost. Without this program, we will continue to struggle with what little obsolete facilities and equipment we currently have.

Every one of my employees works very hard to get the most out of what we have. Our students are motivated and eager to learn.

Please, carry this message to your colleagues: Help me to help these people!

Sincerely,

RICHARD L. SUMMERS,
Superintendent.

SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of Jan-

uary 7, 1997, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Kentucky (Mrs. NORTHUP) is recognized for 5 minutes.

(Mrs. NORTHUP addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Michigan (Mr. CONYERS) is recognized for 5 minutes.

(Mr. CONYERS addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Mr. MILLER) is recognized for 5 minutes.

(Mr. MILLER of Florida addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. FILNER) is recognized for 5 minutes.

(Mr. FILNER addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Mr. DIAZ-BALART) is recognized for 5 minutes.

(Mr. DIAZ-BALART addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

INDONESIA'S HUMAN RIGHTS VIOLATIONS IN IRIAN JAYA/WEST PAPUA

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from American Samoa (Mr. FALEOMAVAEGA) is recognized for 5 minutes.

Mr. FALEOMAVAEGA. Mr. Speaker, my remarks, in sharing these thoughts with my colleagues, I have entitled Indonesia's Human Rights Violations to the People of the West Papua, New Guinea.

Mr. Speaker, many of our colleagues are familiar with Indonesia's dismal record of human rights violations in East Timor. The abuses have been well publicized and documented, especially the Dili massacre of 1991, where hundreds of innocent Timorese were killed by government security forces. What has not received much attention, Mr. Speaker, is the tragic story of the people of West Papua, New Guinea, or Irian Jaya, as the people of New Guinea have renamed that province. West Papua, New Guinea, borders the independent nation of Papua, New Guinea, and forms the western half of the world's second largest island.

Mr. Speaker, the recent violence by the Indonesian government against the people of West Papua, New Guinea, is nothing new. It is part and parcel of the long history of Indonesia's oppression of the native Melanesian people of West Papua, New Guinea.

In 1961, the people of West Papua, New Guinea, with the assistance of Holland and Australia, prepared to declare independence from its Dutch colonial master. This enraged Indonesia, which invaded West Papua, New Guinea, and threatened war with Holland. As a Cold War maneuver to counter Soviet overtures for Indonesia to become a member of the Communist block, the United States intervened in the West Papua, New Guinea, issue. After the Dutch were advised that they could not count on the support of the allies in a conflict with Indonesia, Holland seized involvement with West Papua, New Guinea's, independence. Indonesia thus took West Papua, New Guinea, in 1963, suppressing the West Papua, New Guinea, people's dreams of freedom and self-determination.

In 1969, a referendum called the "Act of Free Choice" was held to approve the continued occupation by force of West Papua, New Guinea, by Indonesia. West Papuans called it the "Act of No Choice". Listen to this, Mr. Speaker. Only 1,025 delegates, hand picked by the Indonesian government, were allowed to vote, and bribery and threats were used to influence them. The rest of the 800,000 citizens, the local, or the indigenous Melanesians, the 800,000 West Papua, New Guineans, had no say in the undemocratic process. Despite calling for a one-person, one-vote referendum, the United Nations recognized the so-called vote.

Mr. Speaker, since Indonesia took over West Papua, New Guinea, the native Melanesian people have suffered under one of the most repressive and unjust systems of colonial occupation ever known in the 20th Century. The Indonesian military has waged an ongoing war against the free Papuan movement and their supporters since the 1960s, and against the civilian populace that has objected to Indonesia's plan for development in West Papua. An example of the latter are the thousands of killings associated with the expansion of the Freeport copper and gold mines in West Papua, New Guinea.

Incredible as it may seem, Mr. Speaker, estimates are that between 100,000 to 300,000 indigenous West Papua, New Guineans, have been killed or have simply vanished or disappeared from the face of the earth during Indonesian colonization. Mr. Speaker, the depth and intensity of this conflict, spanning three decades, underscores the fact that the people of West Papua, New Guinea, do not have common bonds with nor accept being part of Indonesia.

The indigenous people of West Papua, New Guinea, are racially, culturally and ethnically different from the majority of Indonesians. West Papuans

are Melanesians, Mr. Speaker, they are not Indonesians. West Papuans practice Christianity. Indonesians practice Islam, or the faith of Islam. West Papuans have a unique language and culture which is distinct and different from the rest of Indonesia.

Mr. Speaker, to make matters worse, the government of Indonesia has chosen a policy of transmigration, or a unilateral forced settlements, where hundreds of thousands of Indonesians have now taken residence in the lands belonging to these 800,000 to 900,000 West Papua, New Guineans, in their own homelands.

Mr. Speaker, the tragic situation in West Papua, New Guinea, greatly concerns me. With the recent shootings over the pro-independence demonstrations in West Papua/Irian Jaya, I would hope all my colleagues in the House would join me in urging the Indonesian government to immediately stop these human rights violations and take steps now to review the status of West Papua, New Guinea, as it should be, especially perhaps it should be considered as a non self-governing territory under the auspices of the United Nations, similar to the territory of New Caledonia, currently a colony of France.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Ohio (Mr. STRICKLAND) is recognized for 5 minutes.

(Mr. STRICKLAND addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

REPUBLICAN TASK FORCE TO RELEASE LANGUAGE ON MANAGED CARE REFORM BILL

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New Jersey (Mr. PALLONE) is recognized for 5 minutes.

Mr. PALLONE. Mr. Speaker, this week the Republican health care task force here in the House is supposed to release the language for its so-called managed care reform bill. And we know from what the task force has already released publicly that this bill will be a farce, a cosmetic fix that lacks some of the most important patient protections.

Despite an avalanche of real-life examples of people who have died because their HMOs refuse to approve needed care, the Republican leadership has kowtowed to the insurance industry. The Republican plan will not allow patients to sue their HMOs when they are denied needed care.

This weekend Senate majority leader TRENT LOTT announced that Republicans in the Senate are following suit. The Senate Republican bill will also deny patients the right to sue their HMOs. Unlike the Republicans' proposals, the Democrats' patient bill of rights would give patients the right to sue their HMOs.

Although this provision is included in the Patient's Bill of Rights, support for giving patients a legal mechanism to hold HMOs accountable is hardly limited to Democrats in Congress. Federal judges around the country are increasingly frustrated by the Employee Retirement Income Security Act, or ERISA law, which is the source of the problem. ERISA shields HMOs and insurance companies from being sued by patients.

I would like to give some examples, Mr. Speaker. Take the case, for example, of a Louisiana woman named Florence B. Corcoran. Miss Corcoran brought suit against her HMO after her fetus died following the HMO's refusal to hospitalize her for a high-risk pregnancy. After the suit was thrown out, the U.S. Court of Appeals for the fifth circuit in New Orleans said the Corcorans have no remedy for what may have been a serious mistake.

□ 2300

The court observed that the death of Mrs. Corcoran's unborn child would seem to warrant a reevaluation of ERISA so that it can continue to serve its noble purpose of safeguarding the interests of employees.

There are other courts around the country, other Federal courts, that have also been critical of ERISA and the fact that patients cannot bring suit against their HMOs.

In Boston, Judge William C. Young of the Federal court expressed his deep concern by the failure of Congress to amend the statute that due to the changing realities of the modern health care system has gone conspicuously awry. "It is deeply troubling," Judge Young said, "that in the health insurance context ERISA has evolved into a shield of immunity which thwarts the legitimate claims of the very people it was designed to protect."

I could give other examples. I will give one more, Mr. Speaker. In San Francisco, the U.S. Court of Appeals for the Ninth Circuit ruled just last month that an insurance company that denied Ms. Rhonda Bast from Seattle treatment for breast cancer. She had died from the disease. "This case presents a tragic set of facts," said Judge David R. Thompson. "Without action by Congress," he added, "there is nothing we can do to help the Basts and others who may find themselves in the same unfortunate situation."

I think that these examples clearly demonstrate the severity of the problem. From coast to coast, Federal courts are forced to tell patients and families of patients who have died that they would like to help but cannot. The law does not allow for it. The law does not allow for a patient to bring suit effectively for damages against an HMO.

And this, I would remind my colleagues, is what the Republicans now are ardently defending. No matter what the cost, the Republican leadership will not break its alliance with

the insurance industry and allow for adequate enforcement of patient protections.

Giving patients the right to sue HMOs is an absolutely vital component of managed care reform. The right to sue is the enforcement mechanism through which all the patient protections we are advocating are to be protected. President Clinton summed it up best when he said the other day that "a right without a remedy is not a right."

The public's support, Mr. Speaker, for true managed care reform I think has translated into an enormous amount of support for the Patients' Bill of Rights, the Democratic proposal, which offers the most comprehensive set of protections of any managed care reform bill in Congress today.

Currently, the Patients' Bill of Rights has the support of over 175 patients, physicians, consumer medical and public health groups. It has 190 cosponsors in the House, including some Republicans.

Despite this groundswell of grassroots support, the Republican leadership is still throwing up roadblocks to progress. Their are reports today that the Republican leadership may bring its sham proposal directly to the floor for a vote as early as next week.

This week, supporters of the Patients' Bill of Rights will be working hard to gather support for the bipartisan Dingell-Ganske discharge petition, which was introduced before Congress adjourned for the July 4 recess. This discharge petition would force the Republican leadership to allow the Patients' Bill of Rights to come to the floor for a vote. The discharge petition will play a crucial role in ensuring Members of this body are given the opportunity to vote on the Patients' Bill of Rights if the Republicans bring their sham proposal to the floor next week.

I think, Mr. Speaker, it is time that we all took stock of the fact that if we are going to pass patient protections, and we certainly should, that it should be patient protections that is real managed care reform.

MANAGED CARE REFORM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Michigan (Mr. STUPAK) is recognized for 5 minutes.

Mr. STUPAK. Mr. Speaker, I would like to pick up a little bit on where the gentleman from New Jersey (Mr. PALLONE) was talking about on managed care.

The leadership of the majority in both the House and the Senate have now finally entered into public discussions on trying to adopt a Patients' Bill of Rights. And I think that is great, because I think, as a country, American families are demanding that we begin to deal with the inequities that we find in health maintenance organizations organizations and managed care plan.