

area exists in my district, the First Congressional District of Illinois. The Englewood community, a poor, urban neighborhood with a high incidence of crime, is primarily served by St. Bernard's Hospital. This small community hospital's emergency room averages approximately 31,000 visits per year; 50% of their patients are Medicaid recipients and 35% receive Medicare.

The Immigration Nursing Relief Act of 1989 created the H-1A visa program in order to allow foreign educated nurses to work in the United States. The rationale for the H-1A program, as acknowledged by the AFL-CIO, the American Nurses Association and others, was to address spot shortage areas. St. Bernard's Hospital utilized the H-1A program to maintain an adequate nursing staff level. The H-1A program was vital to St. Bernard's continued existence. Prior to this program, St. Bernard hired temporary nurses. As a result, the hospital's nursing expenditures increased by approximately \$2 million in an effort to provide health care to its patients in 1992. This additional cost brought St. Bernard's close to closing its doors. The H-1A visa program expired on September 30th of 1997. Currently, no program exists that would assist hospitals such as St. Bernards in their effort to retain qualified nurses.

My legislation merely seeks to close the gap created by the expiration of the H-1A program. H.R. 441, prescribes that any hospital which seeks to hire foreign nurses under these provisions must meet the following criteria: (1) be located in a Health Professional Shortage Area; (2) have at least 190 acute care beds; (3) have a Medicare population of 35%; and (4) have a Medicaid population of at least 28%.

As one who has always fought for the American worker, I can assure you, that this proposal does not have a detrimental effect on American nurses. My legislation sets a cap on the number of new visas that may be issued each year. The legislation also includes processing requirements, that require employers to attest that the hiring of foreign nurses will not adversely affect the wages and working conditions of registered nurses. The Secretary of Labor will oversee this process and provide penalties for non-compliance.

Health care is a basic human right. The hallmarks of civilized nations are health care, education, and democracy.

The state of health care is a grave concern in my district. Hospitals have closed. City health clinics are closing. Payments for Medicare and Medicaid have been cut back.

The legislation we must pass today, is aimed at helping hospitals, like St. Bernard's, keep their doors open to the communities they serve.

Mr. HYDE. Mr. Speaker, I am pleased that we are returning today to some unfinished business from the 105th Congress—non-controversial legislation that provides short-term relief to hospitals with critical needs that cannot recruit and retain adequate numbers of registered nurses. H.R. 441, the "Nursing Relief for Disadvantaged Areas Act of 1999," is designed in response to a crisis facing some large hospitals with high percentages of Medicare and Medicaid patients in areas where there are shortages of health care professionals. The viability of essential health care for large numbers of people is threatened when certain acute care facilities in medically

underserved, impoverished communities are unable to meet their requirements.

H.R. 441 provides such hospitals relief in compelling circumstances by facilitating the temporary admission to the United States of registered nurses in an H-1C nonimmigrant visa category—subject to a nationwide ceiling of 500 visas issued annually and limits of 50 or 25 (depending on a state's population) on the numbers of nurses who can receive visas each year for employment by hospitals in any one state. The legislation includes an exception from per state limits to facilitate the potential use of otherwise unused visas—as long as the annual nationwide ceiling is not breached.

This narrowly focused program for nurses, which will sunset after a four period, addresses urgent needs that cannot be met in any other way. The House bill was introduced by our colleague from Illinois, Mr. RUSH, with my cosponsorship—and its Senate counterpart was introduced by Senator DURBIN with Senator HUTCHISON's cosponsorship.

I became involved in this effort to enact remedial legislation when Saint Bernard Hospital, located in the Englewood Community in Chicago, brought its precarious situation with regard to nursing shortages to my attention during the last Congress. Because I knew the continued functioning of Saint Bernard Hospital would be so essential to the residents of the Englewood Community, I decided to endorse an appropriately limited legislative remedy.

H.R. 441, like the bill that passed the House last year, clearly merits bipartisan congressional support. It provides relief to particularly vulnerable hospitals and incorporates many safeguards designed to protect American jobs.

I commend the gentleman from Texas [LAMAR SMITH], Chairman of the Subcommittee on Immigration and Claims, and the gentleman from Michigan [JOHN CONYERS], Ranking Minority Member of our full committee, for their important contributions to this carefully crafted legislation. Because the language of the bill in its current form reflects a consensus among House and Senate members of both parties, I am hopeful that it can be enacted into law expeditiously. I urge my colleagues to support it.

Mr. CONYERS. Mr. Speaker, I rise in support of this legislation, introduced by Mr. RUSH, which addresses a pressing need for nurses at low income, inter-city hospitals.

When similar legislation was proposed last Congress, I expressed my concerns that it did not include adequate safeguards to protect American workers. Fortunately, the legislation was amended to specify that the relief was only temporary and to allow us to move firmly in the direction of developing a more permanent solution to this problem that will utilize nurses from the American work force instead of continuing to rely on foreign labor. I supported the revised bill which passed the committee and the House last year, before we ran out of time in the Senate.

The legislation being considered today is nearly identical to the legislation the House approved last Congress. It would allow up to 500 fully qualified foreign nurses to enter the United States each year to work for three-year periods at hospitals that have not been able to hire enough nurses from the American work force. Since we are facing a temporary shortage of workers, the legislation sunsets in four years.

The bill also provides for a determination to be made on whether the hospitals are taking reasonable steps to recruit and retain nurses from the American work force. In addition, the Department of Labor and the Department of Health and Human Services would be required to conduct a study to establish ways for these hospitals to meet their staffing needs with nurses from the American work force instead of continuing to rely on foreign labor.

Finally, the legislation also includes a provision creating an abbreviated certification process for foreign nurses who meet specified qualification standards. This change is needed to eliminate unnecessary and inappropriate steps in the certification process for ensuring the qualifications of these nurses to work in the United States.

Mr. ROGAN. Mr. Speaker, I thank my colleagues for their comments.

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

The SPEAKER pro tempore (Mr. PEASE). The question is on the motion offered by the gentleman from California (Mr. ROGAN) that the House suspend the rules and pass the bill, H.R. 441.

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

A motion to reconsider was laid on the table.

COMMUNICATION FROM THE CLERK OF THE HOUSE

The Speaker pro tempore laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,
U.S. HOUSE OF REPRESENTATIVES,
Washington, DC, May 21, 1999.

Hon. J. DENNIS HASTERT,
Speaker, House of Representatives,
Washington, DC.

DEAR MR. SPEAKER: Pursuant to the permission granted in Clause 2(h) of Rule II of the Rules of the U.S. House of Representatives, I have the honor to transmit a sealed envelope received from the White House on May 21, 1999 at 5:30 p.m. and said to contain a message from the President whereby he submits draft legislation entitled, "Educational Excellence for All Children Act of 1999."

With best wishes, I am
Sincerely,

JEFF TRANDAHL.

EDUCATIONAL EXCELLENCE FOR ALL CHILDREN ACT OF 1999—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES (H. DOC. NO. 106-68)

The SPEAKER pro tempore laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, without objection, referred to the Committee on Education and the Workforce, the Committee on Armed Services, and the Committee on Banking and Financial Services and ordered to be printed: