

He continues to confound everyone. Not too much notice was made when he indicated he would like to be re-incarnated as a large bra, but eyebrows did raise when he referred to members of the Armed Forces as Frankenstein monsters that cannot be controlled.

Then, of course, he outdid Oliver Stone by suggesting that President John Kennedy was killed by our own military-industrial complex in order to stimulate business.

Who can forget his plunge into theology? "Organized religion is a sham and a crutch for weak-minded people who need strength in numbers," the Governor said.

□ 1015

So today I am proposing we name a day after Jesse Ventura, and the day I have chosen is April 1. That is right, April Fool's Day, because I can think of no one that so embodies the spirit of that day as the Governor of Minnesota.

AMERICANS SHOULD VOICE THEIR SUPPORT FOR NORWOOD-DINGELL BILL

(Ms. JACKSON-LEE asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. JACKSON-LEE of Texas. Madam Speaker, yesterday I introduced into the RECORD the testimony from Dr. Thomas W. Self, an M.D. educated at Yale and UCLA, but an M.D. that has fallen victim to being terminated because his only grievance and error was spending too much time with patients.

Today, America's voices can be heard, and we ask that all Americans' voices be heard on a revolutionary idea, that is, that the patient and the physician are the two most important individuals who should assess the health condition of American patients on the precipice of the 21st century.

Today we have the opportunity to defeat poison pill bills that will do nothing but undermine the true essence of what we are trying to do. The Norwood-Dingell bill will emphasize the relationship of patient to physician. It will allow individuals to get into an emergency room, allow them to get the care that they need; it will allow women to have a relationship with their OB-GYN, and it will ensure that a patient can press their grievance when medical care is denied.

This is a day when patients will be able to determine that they are not commodities but that they are people. America should, today, let their voices be heard on the floor of the United States Congress that the Norwood-Dingell bill should pass.

TO DETERMINE CREDIBILITY, LOOK TO THE RECORD

(Mr. PITTS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PITTS. Madam Speaker, sometimes it is difficult for people to tell who is being straight with them and who is being misleading or disingenuous. One way to help decide who ought to be believed and who not is to look at the record and the credibility of those making various claims.

Take Social Security, for example. The record will show that the other party controlled this House for 40 years, along with its appropriations process, and not only failed to put aside one dime of the Social Security surplus; but 30 years ago they began the annual practice of raiding the Social Security Trust Fund to pay for things other than Social Security and left us with a huge Federal debt.

Just a few months ago, the other party turned their backs on the President's own Commission on Social Security because bipartisan Social Security reform would take away their ability to scare seniors on the issue in the next election process.

Republicans, on the other hand, have passed Social Security lockbox legislation that locks away 100 percent of Social Security taxes for Social Security and Medicare, and they have been reserving H.R. 1 even to this day for the President's proposal on Social Security reform.

So in judging credibility, look at the record, not just rhetoric.

VOTE AGAINST COBURN SUBSTITUTE AND FOR NORWOOD-DINGELL

(Mr. TURNER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. TURNER. Madam Speaker, as a former member of a State legislature, both the House and Senate, I implore my colleagues today to support the Dingell-Norwood bill because it reserves in the States what for 2 centuries has been a clear right of every State in this Nation, and that is to control the medical malpractice laws of our country.

Why should we be able to sue a doctor for malpractice in State court but have to go to Federal Court to sue a managed care company? That is what the Coburn substitute does. That proposal is wrong; it does injustice to our State legislatures who work hard to be sure that we have malpractice protections for our citizens. It creates a new Federal cause of action that means individuals will have to go into Federal court.

If we read the Coburn substitute carefully, we will find out that it denies due process even after someone gets to Federal court, because the Coburn substitute says that when an individual gets to Federal court, it is the decision of the external review panel that governs and that individual has no right to challenge that once they get to Federal court.

I think it is a travesty of justice to support the Coburn substitute, and I

urge the passage of the Norwood-Dingell bill.

WILDERNESS ISSUES IN THE WEST

(Mr. HANSEN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. HANSEN. Madam Speaker, one of the most contentious issues we have in the West is called wilderness. We find it very interesting, because whole industries have started because of this. They come in and have their attorneys and their accountants, and they come up and do all they can to get all our brethren to sign on to their bills, which everybody knows means nothing. We find it interesting because they start out with a small amount, and it just keeps going up.

Today, I am introducing a bill which will solve many of the problems of the great State of Utah, and I think this particular bill would be something that we could finally resolve this. This bill will call for 2.3 million acres of wilderness in the State of Utah.

But we have to be concerned about the local people there. For some reason, a lot of our people from the East think it is a throw-away vote to give away our western land. The people who live on the land, who make their living there, who recreate on the land should have a hand in this.

Today, I am very concerned about the Utah Test and Training Range. For those of us who sit on the military committees, we realize that the Utah Test and Training Range is the best training range the United States Air Force has. And if another bill goes through, we will find that we are killing the golden goose, and we will not be able to train our pilots. I will assure the military there will be nothing in this bill that will be detrimental to this.

Madam Speaker, I would hope that my colleagues could join us on this good piece of legislation and finally resolve an issue that has been very contentious to the West.

SUPPORT DEMOCRATS' PATIENTS' BILL OF RIGHTS

(Mr. KLINK asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. KLINK. Madam Speaker, back in 1994, the insurance companies of this country spent tens of millions of dollars having Harry and Louise tell us that we did not want the Government to control our health care, and they won. And as a result, now the insurance companies control our health care. Now managed care means if we need health care, we are going to have to learn to manage.

Beginning in early 1997, when I heard complaints from doctors and from patients, I held a series of health care forums across my district. Over 60 hours

of testimony, 1,500 people and horror stories beyond comprehension. I brought those stories and the results of that to the Democratic caucus. We began holding hearings here on the lawn right outside the Capitol. And from that came a series of health care proposals, because we learned that the American people had lost complete confidence in the health care system.

They were screaming for help and could not understand why we as Members of Congress let this go on so long. We had the best health care delivery system in the entire world, and we let it fall apart; and people could not understand why.

Now, today, we have a chance to fix that. We can stop the insurance companies from deciding what doctor we can go to, if we can go to a doctor, what hospital, what kind of treatment we can get. We can put health care back in the hands of doctors and patients by passing Norwood-Dingell.

NATIONAL 4-H WEEK

(Mr. DEAL of Georgia asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. DEAL of Georgia. Madam Speaker, I rise today in honor of the National 4-H Club. October 3 through 9 is designated as National 4-H Week.

Across the country this week, the youth are marking the 97th year of this organization and are asking the question with the theme: Are you into it? The theme is embraced by more than 6.5 million young Americans who take part in 4-H educational programs. It is time to celebrate the diversity of 4-H activities and people, and to recognize the achievements of youth who strive to develop the four Hs: head, heart, hands, and health.

Founded in 1902 as an agricultural youth organization, 4-H is no longer just cows and plows. To keep up with the wide range of interests of today's youth, 4-H programs have diversified and include such things as designing web pages, participating in mock legislatures, community cleanups, and so forth. Since its beginning nearly 100 years ago in rural America, about 45 million Americans from all walks of life have been involved in 4-H.

Madam Speaker, I have authored a resolution in honor of the 4-H clubs of America as we congratulate their members.

SUPPORT NORWOOD-DINGELL PATIENTS' BILL OF RIGHTS

(Mr. ALLEN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ALLEN. Madam Speaker, I rise in strong support of the Norwood-Dingell Bipartisan Consensus Managed Care Improvement Act.

This debate pits doctors and patients against the health insurance industry.

The insurance industry has weighed into this debate to protect its pocket-books, not its patients. In TV ads and on this floor, opponents of a patients' bill of rights have tried to demonize trial lawyers. But this debate is how to encourage HMOs to provide better care to their patients.

The substitutes to Norwood-Dingell preserve some or all of the legal immunity that the insurers now have even when their decisions kill or injure patients. If HMOs can be held liable for their own negligence, they will pay more attention to patients. They will be more careful. That is all. It is simple. That is what this debate is about. Pass the Dingell-Norwood Patients' Bill of Rights.

SUPPORT H.R. 3034, TO EXPAND FLEXIBLE SPENDING ACCOUNTS

(Mr. ROYCE asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ROYCE. Madam Speaker, flexible spending accounts allow employers and employees to contribute pretax money to accounts which they can then use to pay for out-of-pocket medical expenses and insurance costs and to pay for deductibles. But there is a problem in the Tax Code with the way in which these accounts work today, and that is there is a use it or lose it provision where it reverts back to the employer. So, typically, people put down \$750 of pretax to use for these flexible spending accounts, and at the end of the year about \$140 reverts back that they are not able to use.

My bill, House bill 3034, would allow this to be expanded, would allow this to be carried over into the following year so that that would not be lost. A lot more people would utilize this provision if they did not lose it.

Many employees would choose less expensive, high-deductible insurance policies and put the premium savings then in their flexible spending accounts if they knew they could roll that over into the following year. It also reinforces the doctor-patient relationship.

Madam Speaker, I urge support for H.R. 3034.

NORWOOD-DINGELL OFFERS BEST PROTECTIONS FOR AMERICAN FAMILIES

(Ms. DELAURO asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. DELAURO. Madam Speaker, today we have a historic opportunity to pass HMO reform that will ensure that medical decisions are made by doctors and patients and not by insurance companies.

These are sensible patient protections that all parents should have for their families. But to pass them, we are being forced to cross a mine field. The Republican leadership has teamed up

with the insurance industry to obstruct and weaken the Patients' Bill of Rights. The Republican leadership has set up a series of amendments that will undermine the basic provisions of this bill, a bipartisan bill. And I stress bipartisan.

The Patients' Bill of Rights simply ensures that medical decisions are being made by doctors and hospitals and that HMOs are accountable for damages caused by wrongful denials. These provisions are already working for families in California and in Texas; now every family deserves them.

I call on my colleagues to defeat the poison pill amendments, pass the Norwood-Dingell bill, the Patients' Bill of Rights, which today's New York Times says, and I quote, "offers the best place to start in getting strong protections for millions of American families."

SUPPORT A PATIENTS' BILL OF RIGHTS, NOT A LAWYER'S RIGHT TO BILL

(Mr. HAYWORTH asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. HAYWORTH. Madam Speaker, I always enjoy hearing from my colleague from Connecticut, especially her description of a poison pill involving legislation. Madam Speaker, let me suggest to my colleagues the only poison pill is that which would seek to enrich and empower trial lawyers and courtrooms over clinics.

There is much we can agree on in truly a bipartisan fashion. I believe, as I think every Member of this House does, that when it comes to health care decisions, those decisions should not be made by an insurance company bureaucrat any more than they should be made by a Washington bureaucrat. The power should be in the hands of the patients.

The patients I know in the Sixth District of Arizona want to see a doctor, not a lawyer. They want access to a clinic, not a courtroom. And they do not want their estates to sue; they want to live long, productive lives and seek help. That is the essence of what happens today, not demonization of the insurance companies nor a poison pill of freedom for patients.

Let us have a true patients' bill of rights, not a lawyer's right to bill.

LOOK TO TEXAS FOR EXAMPLE OF MEANINGFUL MANAGED CARE REFORM

(Mr. GREEN of Texas asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GREEN of Texas. Madam Speaker, my colleague from Arizona needs to come to Texas, and we will show him what has happened in the real world when we have really had a Patients' Bill of Rights and real effective reform.

We do not have a lot of lawsuits. In 2 years, in fact we have had three, maybe four.