

I wish that I did not have to speak about this gender gap and hope that a day will come when we will no longer need this type of legislation. Until that day, let us do the right thing and prove to everyone that this Congress cares about girls as much as we do boys by adopting this amendment.

PRESIDENTIAL SPOKESMAN'S
COMMENTS ON THE BUDGET

HON. PHILIP M. CRANE

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 26, 1999

Mr. CRANE. Mr. Speaker, last week, Joe Lockhart, the Presidential spokesman, made a number of erroneous statements regarding the budget. Mr. Lockhart called "absurd" the notion that President Clinton has finally come around to the Republican way of thinking by not wanting to touch the Social Security surplus—yet—the facts state differently.

The President's original fiscal year-2000 budget asked to spend some 41 percent of the Social Security surplus.

The President's State of the Union address specifically stated that the President would only commit 60 percent of the surplus for Social Security.

And now, the President tells the bipartisan delegation meeting over the budget that he wants to save 100 percent of the surplus. If that isn't a turnaround to support the Republican position of "lock-box," protecting Social Security, I don't know what is.

Mr. Speaker, I submit for the RECORD this information and other erroneous statements made by Mr. Lockhart last week in his presidential press conference, showing how these inaccuracies have attempted to bias public information against the real facts.

RAPID RESPONSE FROM THE SPEAKER'S PRESS
OFFICE—WEDNESDAY, OCTOBER 20, 1999

"JUST THE FACTS, MR. LOCKHART"

Joe Lockhart says that the idea that President Clinton finally came around to the Congressional Republican's plan of protecting 100 percent of the Social Security surplus is an "absurd notion."

Fact: The President's original budget for FY 2000 spends 41 percent of the Social Security surplus. Also, the President specifically proposed in this year's State of the Union to only commit 60 percent of the budget surplus for Social Security. He told the bi-partisan delegation yesterday that he now wants to save 100 percent of the Social Security surplus.

Joe Lockhart says that CBO says that the Republicans have already spent the Social Security surplus.

Fact: In a September 30 letter to Speaker Hastert, CBO Director Dan Crippen clearly states that the final GOP budget plan "will not use any of the projected Social Security surplus."

Joe Lockhart says our budget is full of "gimmicks" such as using advanced appropriations.

Fact: The President's own budget used \$18.8 billion in advanced appropriations. Furthermore, advanced appropriations simply means that money not spent next year will not be counted towards next year's budget. If the money is not being spent until 2002, it should be counted against the 2002 budget, not the 2000 budget. That's just common sense.

Joe Lockhart says that the Republican budget doesn't make the investments in education that the American people expect.

Fact: The Republican budget has \$300 million more for education than the President's budget. In addition, the Republican budget would let local communities spend this money how they best see fit—including hiring more teachers, if that's what the community needs.

COMMITMENT TO MILITARY
RETIREEES

HON. SILVESTRE REYES

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 26, 1999

Mr. REYES. Mr. Speaker, I enter into the CONGRESSIONAL RECORD a request made by the Texas State Legislature asking that Members of Congress maintain its commitment to America's military retirees over the age of 65; to enact legislation that affords military retirees the ability to access health care either through military treatment facilities or through the military's network of health care providers, as well as legislation to require opening the Federal Employees Health Benefits Program to those uniformed services beneficiaries who are eligible for Medicare on the same basis and conditions that apply to retired federal civilian employees; and to enact any other appropriate legislation that would address these concerns.

Military retirees who have served honorably for 20 or more years constitute a significant part of the aging population in the United States. These retirees were encouraged to make the United States Armed Forces a career, in part by the promise of lifetime health care for themselves and their families.

Prior to age 65, these retirees are provided health services by the United States Department of Defense's TRICARE Prime program, but those retirees who reach the age of 65 lose a significant portion of the promised health care due to Medicare eligibility. Many of these retirees are also unable to access military treatment facilities for health care and life maintenance medications because they live in areas where there are no military treatment facilities or where these facilities have downsized so significantly that available space for care has become non-existent.

The loss of access to health care services by the military has resulted in the government breaking its promise of lifetime health care. Without continued affordable health care, including pharmaceuticals, these retirees have limited access to quality health care and significantly less care than other retired federal civilians have under the Federal Employees Health Benefits Program.

It is necessary to enact legislation that would restore health care benefits equitable with those of other retired federal workers. Several proposals to meet this requirement are currently under consideration before the United States Congress and the federal Department of Defense and Department of Health and Human Services; of these proposals, the federal government has already begun to establish demonstration projects around the country to be conducted over the next three years, which would allow Medicare to reimburse the Department of Defense for the costs of providing military retirees and

their dependent health care; this project would allow a limited number of Medicare eligible beneficiaries to enroll in the Department of Defense's TRICARE Prime Program and receive all of their health care under that program.

Mr. Speaker, I would like to reaffirm the necessity in enacting legislation for military retirees health coverage over the age of 65. These individuals are entitled to fair and equitable access of health care. The principle resources for this to be done would be through proper military treatment facilities supplemented with a choice in a network of health care providers. Opening the Federal Employees Health Benefits Program, which already applies to retired federal civilian employees, should be offered to uniformed services beneficiaries in order to ensure equitable benefits for all federal employees.

A CONSUMER PROTECTION
PROPOSAL

HON. FRED UPTON

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 26, 1999

Mr. UPTON. Mr. Speaker, I rise today to join my colleague and friend, Rep. ANNA ESHOO, in introducing important consumer protection legislation. This legislation addresses the safety of medical devices which are designed to be used once but which are reprocessed for further use.

In correspondence to Rep. ESHOO, the Food and Drug Administration (FDA) "agrees that the reuse of disposable medical devices and devices labeled for a single use is a very important public health issue." The agency further indicates that cleaning and sterilizing these devices can be very difficult and that material properties and device performance can be affected by reesterilization. Yet single use device reproducers, which may be companies specializing in this practice or hospitals or other health care facilities, are unregulated. They are not required to register with the FDA or to provide convincing evidence that the processes they use are appropriate and that the reprocessed devices are safe and effective.

Our legislation would correct this loophole in the Federal Food, Drug, and Cosmetic Act by requiring single use device reproducers to register with the FDA and to demonstrate the safety and effectiveness of reprocessed devices. The bill will also require device users to obtain informed patient consent for the use of the device and establish a system whereby the safety and effectiveness of the devices when actually used in patient care may be tracked.

I urge my colleagues to join me supporting this important consumer protection measure.

THE LIFE AND CONTRIBUTIONS OF
DR. CHARLES STANISLAW

HON. DAVID E. PRICE

OF NORTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 26, 1999

Mr. PRICE of North Carolina. Mr. Speaker, a tragic accident in Macedonia October 16