

There is no question that whoever is elected as the next President of the United States must be ready and prepared to go to work on the morning of November 8. That period between November 8 and inauguration is, indeed, a very critical period of time, not only for the new administration, but for the country as a whole.

So I am pleased to join with the gentleman from California (Chairman HORN) today in urging that this bill be adopted. It is noncontroversial. It is bipartisan. We have introduced it today and move that it be adopted by unanimous consent.

Even though we passed the bill on the floor of this House, we have now incorporated changes suggested by our colleagues in the Senate. I urge that we adopt it today.

Mr. Speaker, I withdraw my reservation of objection.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from California?

There was no objection.

The Clerk read the bill, as follows:

H.R. 4931

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

**SECTION 1. SHORT TITLE.**

This Act may be cited as the "Presidential Transition Act of 2000".

**SEC. 2. AMENDMENTS TO PRESIDENTIAL TRANSITION ACT OF 1963.**

Section 3(a) of the Presidential Transition Act of 1963 (3 U.S.C. 102 note) is amended—

(1) in the matter preceding paragraph (1) by striking "including—" and inserting "including the following:";

(2) in each of paragraphs (1) through (6) by striking the semicolon at the end and inserting a period; and

(3) by adding at the end the following:

"(8)(A)(i) Notwithstanding subsection (b), payment of expenses during the transition for briefings, workshops, or other activities to acquaint key prospective Presidential appointees with the types of problems and challenges that most typically confront new political appointees when they make the transition from campaign and other prior activities to assuming the responsibility for governance after inauguration.

"(ii) Activities under this paragraph may include interchange between such appointees and individuals who—

"(I) held similar leadership roles in prior administrations;

"(II) are department or agency experts from the Office of Management and Budget or an Office of Inspector General of a department or agency; or

"(III) are relevant staff from the General Accounting Office.

"(iii) Activities under this paragraph may include training or orientation in records management to comply with section 2203 of title 44, United States Code, including training on the separation of Presidential records and personal records to comply with subsection (b) of that section.

"(iv) Activities under this paragraph may include training or orientation in human resources management and performance-based management.

"(B) Activities under this paragraph shall be conducted primarily for individuals the President-elect intends to nominate as department heads or appoint to key positions in the Executive Office of the President.

"(9)(A) Notwithstanding subsection (b), development of a transition directory by the Administrator of General Services Administration, in consultation with the Archivist of the United States (head of the National Archives and Records Administration) for activities conducted under paragraph (8).

"(B) The transition directory shall be a compilation of Federal publications and materials with supplementary materials developed by the Administrator that provides information on the officers, organization, and statutory and administrative authorities, functions, duties, responsibilities, and mission of each department and agency.

"(10)(A) Notwithstanding subsection (b), consultation by the Administrator with any candidate for President or Vice President to develop a systems architecture plan for the computer and communications systems of the candidate to coordinate a transition to Federal systems, if the candidate is elected.

"(B) Consultations under this paragraph shall be conducted at the discretion of the Administrator."

**SEC. 3. REPORT ON IMPROVING THE FINANCIAL DISCLOSURE PROCESS FOR PRESIDENTIAL NOMINEES.**

(a) IN GENERAL.—Not later than 6 months after the date of enactment of this Act, the Office of Government Ethics shall conduct a study and submit a report on improvements to the financial disclosure process for Presidential nominees required to file reports under section 101(b) of the Ethics in Government Act of 1978 (5 U.S.C. App.) to the Committee on Governmental Affairs of the Senate and the Committee on Government Reform of the House of Representatives.

(b) CONTENT OF REPORT.—

(1) IN GENERAL.—The report under this section shall include recommendations and legislative proposals on—

(A) streamlining, standardizing, and coordinating the financial disclosure process and the requirements of financial disclosure reports under the Ethics in Government Act of 1978 (5 U.S.C. App.) for Presidential nominees;

(B) avoiding duplication of effort and reducing the burden of filing with respect to financial disclosure of information to the White House Office, the Office of Government Ethics, and the Senate; and

(C) any other relevant matter the Office of Government Ethics determines appropriate.

(2) LIMITATION RELATING TO CONFLICTS OF INTEREST.—The recommendations and proposals under this subsection shall not (if implemented) have the effect of lessening substantive compliance with any conflict of interest requirement.

(c) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as may be necessary to carry out this section.

The bill was ordered to be engrossed and read a third time, was read the third time, and passed, and a motion to reconsider was laid on the table.

**GENERAL LEAVE**

Mr. MCNULTY. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on and to include extraneous material on the special order of the gentleman from California (Mr. FARR) on the subject of the 150th anniversary of the State of California.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

**SPECIAL ORDERS**

The SPEAKER pro tempore (Mr. SHERWOOD). Under the Speaker's announced policy of January 6, 1999, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

**RURAL HEALTH CARE**

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

Mr. THUNE. Mr. Speaker, when I was back in South Dakota over the August recess, I traveled around the State visiting rural hospitals, clinics and nursing homes. I wanted to get a first-hand look at some of the challenges that are being faced by rural health care providers. I also learned about some of the successes that we have been having.

I represent the entire State of South Dakota. That is 66 counties and 77,000 square miles made up primarily of farmland and grassland. When the citizens of South Dakota need access to a health care provider, it is not uncommon for them to drive 100 miles just to make a regular appointment.

Distance really affects how people get health care in South Dakota. If one's elderly mother needs to see the doctor, one may need to take off work and make sure the kids are taken care of while one spends all day traveling back and forth only to spend 20 minutes with a physician. That is when the weather is good. When the weather is bad with the snow and the wind, that trip is just not possible. One's mother would have to make another appointment several days later and wait to get the medical care she needs.

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But in times of tragedy or emergency, rural residents do not have that luxury. Take, for instance, the example of the farmer working in the field. Farm equipment accidents injure and kill rural residents every year. When the accident happens, the victims need medical attention and they need it quickly. If they can get the expert trauma care in their hometown clinic, there is a much better chance of survival. If they cannot get access to the appropriate professionals close by, they would have to drive several hours to get to a large medical center. Chances of a good outcome are much lower.

The health care professionals in my State of South Dakota have been coming up with some innovative ways to deal with the distance problem. They have been using technology to bring patients and doctors together. They call this breakthrough "telehealth."

Telehealth is a method of health care delivery that was at, one time, a new concept in health care, a theoretical way to connect people with providers. But telehealth is no longer an experiment. This is a service being used