

The highly respected winegrowing region in my district owes a lot of its success to the innovative style of Andy Beckstoffer.

Betty Beckstoffer is currently a member of the board of the St. Helena Boys & Girls Club. She works tirelessly to improve the lives of the young people in the Napa Valley. Betty has been a real star in generating support for the Club—she has coordinated fundraising efforts to bring thousands of dollars to support the goal of aiding at-risk children.

The Beckstoffers moved to my hometown, St. Helena, in 1975, the same year Andy became a founding director of the Napa Valley Grape Growers Association. Beckstoffer Vineyards came to life after Andy invested \$7,500 to buy a small grape growing company in 1973. The company has grown under the care of the Beckstoffers to a company that now owns over 2500 acres of Northern California vineyards.

Andy and Betty were married in 1960, and are the proud parents of five children. Our community and our country are fortunate to have citizens like the Beckstoffers promoting the wine industry and working to improve the lives of our nation's youth.

Mr. Speaker, please join me in recognizing the achievements of Andy and Betty Beckstoffer. The town of St. Helena, the entire Napa Valley, and our nation should aspire to achieve the success of these two great Americans.

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ON THE INTRODUCTION OF THE  
"MX MISSILE STAND-DOWN ACT"

**HON. EDWARD J. MARKEY**

OF MASSACHUSETTS

IN THE HOUSE OF REPRESENTATIVES

*Thursday, August 2, 2001*

Mr. MARKEY. Mr. Speaker, today, Rep. TAUSCHER and I are introducing the "MX Missile Stand-Down Act", a measure to take the 50 MX missiles off of hair-trigger alert.

Secretary of Defense Donald H. Rumsfeld announced on June 27 of this year that the Pentagon would seek to dismantle these 50 MX missiles. Yesterday, the House Armed Services Committee passed by voice vote an amendment by Rep. ALLEN to the Defense Authorization bill to allow such dismantlement, which had been previously prohibited by Congress.

The bill we are introducing today augments these recent steps. According to a preliminary plan by the Air Force, these MX missiles would be dismantled over a 3-year timescale. What our legislation is saying is that there is no need to keep the balance of the silo-busting, heavily-MIRVed MX missiles in a state of ready launch during that time, and therefore we direct the Secretary of Defense to stand-down the MX missiles by removing their warheads over FY2002.

This is a simple but important step. Currently, the United States and Russia have a total of about 4,000 weapons on hair-trigger alert, ready to launch within a few minutes. This state of readiness is unnecessary a decade after the end of the Cold War. As then-Governor George W. Bush observed during the recent Presidential campaign on May 23, 2000, "[T]he United States should remove as many weapons as possible from high-alert, hair-trigger status. Another unnecessary ves-

tige of Cold War confrontation, preparation for quick launch within minutes after warning of an attack was the rule during the era of superpower rivalry. But today for two nations at peace, keeping so many weapons on high alert may create unacceptable risks of accidental or unauthorized launch."

There is a real danger that a false alarm could lead to a nuclear exchange, as evidenced by episodes such as the 1995 incident in which the Russians mistook a scientific launch for an attack and began the process of responding. With the Russian early warning systems having deteriorated since that incident, the hazard is all the more plausible. Therefore, we also direct the Secretary of Defense to make yearly reports to Congress on the condition of the Russian early warning systems, as well as the inventory and alert status of the Russian nuclear arsenal.

This bill continues the process of confidence-building, making a definitive, material statement to the Russians that we do not wish to continue to maintain our nuclear weapons in high-alert and thereby encourage them to follow suit.

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ON THE INTRODUCTION OF THE  
"MX MISSILE STAND-DOWN ACT"

**HON. ELLEN O. TAUSCHER**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Thursday, August 2, 2001*

Mrs. TAUSCHER. Mr. Speaker, I am pleased to join Congressman MARKEY today in offering this important bill which I believe would take an important step toward making the world safer from the threat of accidental nuclear war.

As you may know, Mr. Speaker, the United States and Russia maintain between them, over 4000 weapons on high alert. These weapons are capable of being launched in 3 to 15 minutes and have a combined destructive power nearly 100,000 times greater than the atomic bomb dropped over Hiroshima.

Within a few minutes of receiving instructions to fire, American and Russian land-based rockets with over 3,000 warheads could begin their 25 minute flight to their targets. Less than 15 minutes after receiving their attack order, U.S. and Russian ballistic missile submarines could dispatch over 1,000 warheads.

As you know Mr. Speaker, none of these missiles can be recalled or made to self-destruct.

The Cold War is over but the dangers posed by nuclear weapons have increased because of the heightened risk of an attack resulting from accident, miscalculation or unauthorized use. Indeed, I have serious concerns about the steady deterioration of Russia's early warning and nuclear command systems. According to intelligence reports, critical electronic devices and computers sometimes switch to combat mode for no apparent reason. And many of the radars and satellites intended to detect a ballistic missile attack no longer operate.

During the 2000 campaign, President Bush stated that the "U.S. should remove as many weapons as possible from high-alert, hair-trigger status" because an excess number "on high-alert may create unacceptable risks of accidental or unauthorized launch".

This important bill would take a small but significant step toward reducing the risk of accidental nuclear conflict by de-alerting the 50 Peacekeeper Missiles. By building trust with the Russians and showing them we are serious about arms control, this measure is a serious and responsible investment in our country's security.

In 1991, responding to the August Moscow coup, and along with START negotiations, President George Bush took 450 Minuteman II missiles and all strategic bombers off alert.

In response, Russia announced the deactivation of 503 ICBMs and pledged to keep bombers at low readiness levels.

Mr. Speaker, ten years later it is high time we do this again. Let's deactivate the MX Missiles and send the Russians the same message we did in 1991 that we are serious about reducing the threat of nuclear war.

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DISABLED VETERANS SERVICE  
DOGS & HEALTH CARE IMPROVEMENT  
ACT OF 2001

**HON. JERRY MORAN**

OF KANSAS

IN THE HOUSE OF REPRESENTATIVES

*Thursday, August 2, 2001*

Mr. MORAN of Kansas. Mr. Speaker, as Chairman of the Veterans Subcommittee on Health I am introducing the "Veterans Service Dogs & Health Care Improvement Act of 2001." This legislation improves veterans' health care services in several important ways.

It allows the VA to provide service dogs to disabled veterans. It mandates improvement in VA capacity for specialized medical programs for veterans, such as serious mental illness, spinal cord injury, blindness, amputees and traumatic brain injuries. It modifies the VA's "ability to pay" formula so that low-income veterans can receive the care they need. Finally, the bill establishes innovative pilot programs to help us learn how we can improve veterans' benefits in the future.

We all know that dog is man's best friend, but for many disabled veterans, a dog is much more than a friend. Service dogs can greatly enhance the quality of life for many seriously disabled veterans. This bill authorizes the Secretary of Veterans Affairs to provide enrolled veterans with spinal cord injuries, immobility due to chronic impairment and hearing impairment to use service dogs in day-to-day activities. Training, travel, and incidental expenses incurred while adjusting to the dog may also be paid.

This bill also seeks to strengthen mandates for VA to maintain capacity in specialized medical programs, such as serious mental illness, spinal cord injury, blinded veterans, veterans with amputations and veterans suffering from traumatic brain injuries, in each VISN. Although overall capacity has increased in the VA, there has been a decrease in the number of veterans with substance-use and mental illness served in specialized programs. With over 225,000 homeless veterans currently living on our streets, we cannot allow this to continue. Only 11 of 25 spinal cord injury facilities are providing the number of staffed beds specified by a VHA Directive. We must extend the reporting requirement to ensure VA is doing what was directed to care for our at-risk veteran population.

Beyond the VHA Directive regarding capacity, this bill seeks to modify the current VA means-test threshold. For about fifteen years, the VA has determined a nonservice-connected veteran's ability to pay by comparing a veteran's income to a predetermined "means-test threshold." The threshold, expressed in annual household income, is an assumed income level that would be sufficient to a veteran to pay for health care in the community. If a veteran's income is below the "ability to pay" threshold, (currently \$23,688 for a single veteran without dependents) he or she is eligible for VA care, and permits the veteran to avoid the co-payments charged to higher-income veterans for VA health care services.

VA's one national standard income threshold has been criticized for years because of the disparities in living costs throughout the country.

The Department of Housing and Urban Development employs a system of ascertaining poverty levels for subsidized housing that is much more reflective of the cost of living around the country than the VA's means test. The Chairman of the Full Committee and I believe the HUD index should be used by VA to better reflect differences in economic factors.

Another provision of this bill explores improved coordination of VA ambulatory and community hospital care. This calls for a 4-year, 4-site pilot project in which the VA refers enrolled veterans to local community hospitals rather than transporting them to an urban VA facility hours away. This is one more way the VA can work to bring VA services closer to the veterans they serve.

Another pilot program proposed in this bill is a 4-year, 4-VISN program for managed care through an outside contractor in VA's \$500 million fee-basis and contract hospitalization program. A contractor would provide resource information and referral services to eligible veterans, RN staffed advice lines, coordination with assigned VA case managers, and a variety of reports and data on utilization, satisfaction, quality, access, and outcomes. This program provides care to service-connected veterans whose places of residence or health conditions prevents them to be geographically accessible to VA facilities, or available VA facilities cannot furnish the care or services required. This would also provide health care for life threatening emergencies when no VA facility is available.

Mr. Speaker, this bill makes important improvements in our veterans health care system. When Congress returns from the August break, the Subcommittee will consider this important legislation. I urge the members to support the bill on behalf of veterans.

LIFE OF MRS. MAMIE L.  
TOWNSEND

**HON. JULIA CARSON**

OF INDIANA

IN THE HOUSE OF REPRESENTATIVES

*Thursday, August 2, 2001*

Ms. CARSON of Indiana. Mr. Speaker, it is with both sorrow and appreciation that I submit these remarks on behalf of the life and memory of Mrs. Mamie L. Harrington Townsend who departed this life last Saturday, July 28, 2001.

First I am grateful that Mrs. Townsend was loaned to us for such a long time. I feel a spe-

cial kinship to her and was saddened when I learned that she had taken a flight to California and whereupon she took another flight to heaven. We were similar in so many ways: Her mother's name is Julia. We both attended Crispus Attucks High School and IUPUI. We both love children, family, community, state and nation. We have backgrounds that reflect diverse employment and have been honored by many of the same organizations.

Mamie was universal in her commitments and volunteerism. She has been acclaimed Woman of the Year by her sorority and received the prestigious Sagamore of the Wabash; distinguished citizen, outstanding businesswoman, "Who's who among women", Sojourner Truth award, and Mary McCloud Bethune award among her many awards. Her greatest reward is yet to come.

Time and space does not accommodate her many achievements. She was simply a unique, tireless, and selfless person.

Mamie was my friend. She had a beautiful spirit. She was a continuous helper to more than we would ever know about.

The great book reminds us that there is a time for all things under the heaven. That there is a time to be born—she was born not once but twice. There is a time to die—she died—in the arms of Jesus.

She has enriched the lives of many—she inspired me especially.

To her family: thanks for sharing Mamie with us. Be strong and of good courage. You have so much to be proud of and to celebrate.

MOTOR VEHICLE OWNERS RIGHT  
TO REPAIR ACT

**HON. JOE BARTON**

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

*Thursday, August 2, 2001*

Mr. BARTON of Texas. Mr. Speaker, today I am introducing the Motor Vehicle Owners Right to Repair Act. As the name implies, this bill will preserve a vehicle owners' freedom to choose where, how and by whom to repair their vehicles as well as their choice in car parts.

Right now, thousands of vehicle owners who are being turned away from their local repair facility. They are being denied the choice of working on their own vehicles, or the choice of replacement parts because information necessary to make these repairs or integrate replacement parts with the vehicle computer system is not readily available or not available at all. This isn't the way it used to be. Until recently, this information was either not necessary or widely available. But language in the 1990 Clean Air Act mandated that vehicle manufacturers install computer systems in vehicles 1994 and newer to monitor emissions. This law had the unintended consequence of making the vehicle manufacturer the gatekeeper on who can repair, or produce, replacement parts for the vehicle.

This lack of consumer choice will have a huge negative economic impact. An economic study examining this lack of choice's effect on California vehicle owners concluded that motorist repair bills in California alone would increase by 17 billion through 2008. Nation-wide this would equate to a huge tax increase on the American people and severely hurt low and fixed income motorists.

I believe that most vehicle owners who have for years taken for granted that any qualified repair technician of their choice, including themselves, may repair their vehicle have relied heavily on the quality, cost and convenience of the competitive independent aftermarket parts will be surprised to find that in many cases it no longer exists.

With this legislation, we put the motor vehicle owner back in the driver's seat.

MEDICARE REGULATORY AND  
CONTRACTING REFORM ACT OF  
2001

**HON. FORTNEY PETE STARK**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Thursday, August 2, 2001*

Mr. STARK. Mr. Speaker, today I am pleased to join Chairman NANCY JOHNSON (R-CT) in introducing legislation that will improve Medicare's administrative functions. Our bill addresses two very important problems in Medicare. First, it takes important steps to improve outreach and assistance to beneficiaries and providers, and to respond to certain other legitimate concerns raised by physicians and other providers. And second, it includes long overdue contracting reforms that will improve beneficiary and provider services and permit the consolidation of Medicare claims processing. Importantly, however, our legislation does not compromise the government's ability to protect taxpayer dollars from being inappropriately spent under Medicare.

Mr. Speaker, no public program can continue without strong public support, and I suggest that Medicare needs both public support and provider support. The Centers for Medicare and Medicaid Services (CMS), formerly the Health Care Financing Administration (HCFA), is constantly criticized for burdensome regulations and paperwork. Yet polls of physicians and other providers have shown that providers prefer Medicare over other payers because Medicare pays faster and does less second-guessing than other payers.

We need to improve the education and information processes for providers. It is hard for even the most seasoned Medicare analyst to keep track of all the payment and policy changes that have occurred in Medicare in the last few years. How can we expect providers to keep track of all of these changes while continuing to provide services? We need to do a much better job of educating and assisting physicians and other providers about these changes, and this legislation will help the CMS/HCFA do so.

Mr. Speaker, throughout the history of Medicare, we have relied on Medicare contractors—carriers and fiscal intermediaries—to provide information to beneficiaries and providers, but that process is outdated in the face of all of the changes. Although that approach worked well for many years, I think most stakeholders would agree that we need major improvements in the Medicare contracting processes. Every President since President Carter has proposed reforms to the administrative contracting provisions in Medicare, yet they have never been enacted. I hope we succeed this time.

Mr. Speaker, our legislation takes important steps to improve outreach and assistance to