

(2) warmly welcomes His Highness Sheikh Hamad bin Khalifah Al-Thani, Emir of the State of Qatar, to the United States; and

(3) looks forward to broadening and deepening the friendship and cooperation between the United States and Qatar.

SENATE RESOLUTION 140—DESIGNATING THE WEEK OF AUGUST 10, 2003, AS “NATIONAL HEALTH CENTER WEEK”

Mr. CAMPBELL (for himself, Mr. DURBIN, Mr. BOND, Mr. HOLLINGS, Mr. KERRY, Mrs. MURRAY, Mr. BIDEN, Mrs. LINCOLN, Mr. JOHNSON, Mr. INHOFE, Mr. TALENT, Mr. BUNNING, Mr. ALLEN, Mr. ENZI, Mr. SMITH, Ms. LANDRIEU, Mr. DOMENICI, and Mr. CRAPO) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 140

Whereas community, migrant, public housing, and homeless health centers are non-profit, community owned and operated health providers and are vital to the Nation's communities;

Whereas there are more than 1,000 such health centers serving 13,000,000 people at more than 4,000 health delivery sites, in urban and rural communities in all 50 States, the District of Columbia, Puerto Rico, Guam, and the Virgin Islands;

Whereas such health centers have provided cost-effective, high-quality health care to the Nation's poor and medically underserved (including the working poor, the uninsured, and many high-risk and vulnerable populations), acting as a vital safety net in the Nation's health delivery system by meeting escalating health needs and reducing health disparities;

Whereas these health centers provide care to 1 of every 5 low-income babies born in America, 1 of every 8 uninsured individuals, 1 of every 9 Medicaid beneficiaries, 1 of every 9 people of color, and 1 of every 10 rural Americans, and these Americans would otherwise lack access to health care;

Whereas these health centers and other innovative programs in primary and preventive care reach out to almost 750,000 homeless persons and nearly 850,000 farmworkers;

Whereas these health centers make health care responsive and cost-effective by integrating the delivery of primary care with aggressive outreach, patient education, translation, and enabling support services;

Whereas these health centers have increased the use of preventive health services such as immunizations, Pap smears, mammograms, and glaucoma screenings;

Whereas in communities served by these health centers, infant mortality rates have been reduced between 10 and 40 percent;

Whereas these health centers are built by community initiative;

Whereas Federal grants provide seed money that empowers communities to find partners and resources, and to recruit doctors and needed health professionals;

Whereas Federal grants on average contribute 25 percent of a health center's budget, with the remainder provided by State and local governments, Medicare, Medicaid, private contributions, private insurance, and patient fees;

Whereas these health centers are community oriented and patient focused;

Whereas these health centers tailor their services to fit the special needs and priorities of communities, and work together with schools, businesses, churches, community organizations, foundations, and State and local governments;

Whereas these health centers contribute to the health and well-being of their communities by keeping children healthy and in school, and helping adults remain productive and on the job;

Whereas these health centers engage citizen participation and provide jobs for 60,000 community residents; and

Whereas the designation of the week of August 10, 2003, as “National Health Center Week” would raise awareness of the health services provided by health centers: Now, therefore, be it

Resolved, That the Senate—

(1) designates the week of August 10, 2003, as “National Health Center Week”; and

(2) requests that the President issue a proclamation calling upon the people of the United States to observe the week with appropriate ceremonies and activities.

Mr. CAMPBELL. Mr. President, today I am introducing a resolution declaring the week of August 10, 2003, as a National Health Center Week dedicated to raising awareness of health services provided by community, migrant, public housing, and homeless health centers. I am pleased to be joined in this effort by 17 of my colleagues.

The resolution expresses the sense of Congress that these health centers contribute to the health and well-being of their communities by keeping children healthy and in school and helping adults remain productive and on the job.

The resolution also recognizes health centers for providing cost-effective, high-quality health care to the Nation's poor and medically underserved and by acting as a vital safety net in the Nation's health delivery system. These non-profit, community based centers are performing a vital service to our country's more vulnerable populations and they are to be commended for their efforts.

Health centers throughout the country have a 30-year history of success. Studies continue to show that the centers effectively and efficiently improve our Nation's health.

Over the past 2 years, the number of patients seen by community health centers in my state of Colorado has increased 20.8 percent and the number of visits provided has increased by 26 percent over the same period. Of the patients seen in Colorado in 2002, 48 percent had no health insurance, 26 percent were Medicaid recipients and 94 percent had family incomes less than \$36,200 a year for a family of four. Community health centers are truly America's healthcare safety net.

I believe it is important that we support and honor this nation-wide network of community based providers. That is why I urge my colleagues to act quickly on this legislation. Let's show our community health center network that we value its significant contribution to the health of our citizens by declaring the week of August 10, 2003, a National Health Center Week.

AMENDMENTS SUBMITTED & PROPOSED

SA 539. Mr. FRIST (for himself, Mr. DASCHLE, Mr. INHOFE, Mr. DORGAN, Mr. LUGAR, Mr. JOHNSON, Mr. GRASSLEY, Mr. HARKIN, Mr. HAGEL, Mr. DURBIN, Mr. VOINOVICH, Mr. NELSON of Nebraska, Mr. TALENT, Mr. DAYTON, Mr. COLEMAN, Mr. EDWARDS, Mr. CRAPO, Mr. CONRAD, Mr. DEWINE, and Mr. BAUCUS) proposed an amendment to the bill S. 14, to enhance the energy security of the United States, and for other purposes.

TEXT OF AMENDMENTS

SA 539. Mr. FRIST (for himself, Mr. DASCHLE, Mr. INHOFE, Mr. DORGAN, Mr. LUGAR, Mr. JOHNSON, Mr. GRASSLEY, Mr. HARKIN, Mr. HAGEL, Mr. DURBIN, Mr. VOINOVICH, Mr. NELSON of Nebraska, Mr. TALENT, Mr. DAYTON, Mr. COLEMAN, Mr. EDWARDS, Mr. CRAPO, Mr. CONRAD, Mr. DEWINE, and Mr. BAUCUS) proposed an amendment to the bill S. 14, to enhance the energy security of the United States, and for other purposes; as follows:

At the end of title V, add the following:

Subtitle —General Provisions Relating to Renewable Fuels

SEC. 5 1. RENEWABLE CONTENT OF GASOLINE.

(a) IN GENERAL.—Section 211 of the Clean Air Act (42 U.S.C. 7545) is amended—

(1) by redesignating subsection (o) as subsection (r); and

(2) by inserting after subsection (n) the following:

“(o) RENEWABLE FUEL PROGRAM.—

“(1) DEFINITIONS.—In this section:

“(A) CELLULOSIC BIOMASS ETHANOL.—The term ‘cellulosic biomass ethanol’ means ethanol derived from any lignocellulosic or hemicellulosic matter that is available on a renewable or recurring basis, including—

“(i) dedicated energy crops and trees;

“(ii) wood and wood residues;

“(iii) plants;

“(iv) grasses;

“(v) agricultural residues;

“(vi) fibers;

“(vii) animal wastes and other waste materials; and

“(viii) municipal solid waste.

“(B) RENEWABLE FUEL.—

“(i) IN GENERAL.—The term ‘renewable fuel’ means motor vehicle fuel that—

“(I)(aa) is produced from grain, starch, oilseeds, or other biomass; or

“(bb) is natural gas produced from a biogas source, including a landfill, sewage waste treatment plant, feedlot, or other place where decaying organic material is found; and

“(II) is used to replace or reduce the quantity of fossil fuel present in a fuel mixture used to operate a motor vehicle.

“(ii) INCLUSION.—The term ‘renewable fuel’ includes—

“(I) cellulosic biomass ethanol; and

“(II) biodiesel (as defined in section 312(f) of the Energy Policy Act of 1992 (42 U.S.C. 13220(f))).

“(C) SMALL REFINERY.—The term ‘small refinery’ means a refinery for which the average aggregate daily crude oil throughput for a calendar year (as determined by dividing the aggregate throughput for the calendar year by the number of days in the calendar year) does not exceed 75,000 barrels.

“(2) RENEWABLE FUEL PROGRAM.—

“(A) REGULATIONS.—

“(i) IN GENERAL.—Not later than 1 year after the date of enactment of this paragraph, the Administrator shall promulgate