

S. 1110

At the request of Mr. ALLEN, the name of the Senator from Virginia (Mr. WARNER) was added as a cosponsor of S. 1110, a bill to amend the Federal Hazardous Substances Act to require engine coolant and antifreeze to contain a bittering agent in order to render the coolant or antifreeze unpalatable.

S. 1120

At the request of Mr. DURBIN, the name of the Senator from Rhode Island (Mr. CHAFEE) was added as a cosponsor of S. 1120, a bill to reduce hunger in the United States by half by 2010, and for other purposes.

S. 1129

At the request of Mr. LUGAR, the names of the Senator from Mississippi (Mr. COCHRAN) and the Senator from Minnesota (Mr. COLEMAN) were added as cosponsors of S. 1129, a bill to provide authorizations of appropriations for certain development banks, and for other purposes.

S. 1172

At the request of Mr. SPECTER, the name of the Senator from New York (Mr. SCHUMER) was added as a cosponsor of S. 1172, a bill to provide for programs to increase the awareness and knowledge of women and health care providers with respect to gynecologic cancers.

S. 1197

At the request of Mr. BIDEN, the names of the Senator from Michigan (Mr. LEVIN) and the Senator from West Virginia (Mr. ROCKEFELLER) were added as cosponsors of S. 1197, a bill to reauthorize the Violence Against Women Act of 1994.

S. 1223

At the request of Mr. DODD, the name of the Senator from Vermont (Mr. JEFFORDS) was added as a cosponsor of S. 1223, a bill to amend the Public Health Service Act to improve the quality and efficiency of health care delivery through improvements in health care information technology, and for other purposes.

S. 1262

At the request of Mr. FRIST, the names of the Senator from Pennsylvania (Mr. SANTORUM), the Senator from Vermont (Mr. JEFFORDS), the Senator from Missouri (Mr. BOND), the Senator from Connecticut (Mr. DODD) and the Senator from Tennessee (Mr. ALEXANDER) were added as cosponsors of S. 1262, a bill to reduce healthcare costs, improve efficiency, and improve healthcare quality through the development of a nation-wide interoperable health information technology system, and for other purposes.

S. 1308

At the request of Mr. BAUCUS, the name of the Senator from Washington (Ms. CANTWELL) was added as a cosponsor of S. 1308, a bill to establish an Office of Trade Adjustment Assistance, and for other purposes.

S. 1309

At the request of Mr. BAUCUS, the name of the Senator from Washington

(Ms. CANTWELL) was added as a cosponsor of S. 1309, a bill to amend the Trade Act of 1974 to extend the trade adjustment assistance program to the services sector, and for other purposes.

S. 1313

At the request of Mr. CORNYN, the names of the Senator from Pennsylvania (Mr. SANTORUM), the Senator from Idaho (Mr. CRAPO), the Senator from Idaho (Mr. CRAIG), the Senator from Texas (Mrs. HUTCHISON), the Senator from Tennessee (Mr. ALEXANDER), the Senator from Kentucky (Mr. BUNNING) and the Senator from Alaska (Ms. MURKOWSKI) were added as cosponsors of S. 1313, a bill to protect homes, small businesses, and other private property rights, by limiting the power of eminent domain.

S. 1317

At the request of Mr. HATCH, the name of the Senator from Iowa (Mr. GRASSLEY) was added as a cosponsor of S. 1317, a bill to provide for the collection and maintenance of cord blood units for the treatment of patients and research, and to amend the Public Health Service Act to authorize the Bone Marrow and Cord Blood Cell Transplantation Program to increase the number of transplants for recipients suitable matched to donors of bone marrow and cord blood.

S. 1320

At the request of Mr. DEWINE, the names of the Senator from Kansas (Mr. BROWNBACK), the Senator from Minnesota (Mr. COLEMAN) and the Senator from Florida (Mr. MARTINEZ) were added as cosponsors of S. 1320, a bill to provide multilateral debt cancellation for Heavily Indebted Poor Countries, and for other purposes.

S. 1321

At the request of Mr. SANTORUM, the name of the Senator from Nevada (Mr. ENSIGN) was added as a cosponsor of S. 1321, a bill to amend the Internal Revenue Code of 1986 to repeal the excise tax on telephone and other communications.

S. 1332

At the request of Mr. SPECTER, the name of the Senator from Wisconsin (Mr. FEINGOLD) was added as a cosponsor of S. 1332, a bill to prevent and mitigate identity theft; to ensure privacy; and to enhance criminal penalties, law enforcement assistance, and other protections against security breaches, fraudulent access, and misuse of personally identifiable information.

S.J. RES. 15

At the request of Mr. BROWNBACK, the name of the Senator from Louisiana (Ms. LANDRIEU) was added as a cosponsor of S.J. Res. 15, a joint resolution to acknowledge a long history of official depredations and ill-conceived policies by the United States Government regarding Indian tribes and offer an apology to all Native Peoples on behalf of the United States.

S. RES. 171

At the request of Mr. FEINGOLD, the name of the Senator from California

(Mrs. BOXER) was added as a cosponsor of S. Res. 171, a resolution expressing the sense of the Senate that the President should submit to Congress a report on the time frame for the withdrawal of United States troops from Iraq.

S. RES. 173

At the request of Mr. KENNEDY, the name of the Senator from New Jersey (Mr. CORZINE) was added as a cosponsor of S. Res. 173, a resolution expressing support for the Good Friday Agreement of 1998 as the blueprint for lasting peace in Northern Ireland.

S. RES. 177

At the request of Mr. KENNEDY, the name of the Senator from California (Mrs. FEINSTEIN) was added as a cosponsor of S. Res. 177, a resolution encouraging the protection of the rights of refugees.

AMENDMENT NO. 1075

At the request of Mr. VOINOVICH, the names of the Senator from Maine (Ms. COLLINS), the Senator from Kansas (Mr. ROBERTS), the Senator from Montana (Mr. BURNS), the Senator from Wisconsin (Mr. KOHL), the Senator from Wisconsin (Mr. FEINGOLD), the Senator from Washington (Mrs. MURRAY), the Senator from New Mexico (Mr. BINGAMAN), the Senator from New Jersey (Mr. LAUTENBERG) and the Senator from Iowa (Mr. HARKIN) were added as cosponsors of amendment No. 1075 intended to be proposed to H.R. 2360, a bill making appropriations for the Department of Homeland Security for the fiscal year ending September 30, 2006, and for other purposes.

STATEMENTS OF INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. FEINGOLD:

S. 1341. A bill to amend title 10, United States Code, to improve transitional assistance provided for members of the armed forces being discharged, released from active duty, or retired, and for other purposes; to the Committee on Armed Services.

Mr. FEINGOLD. Mr. President, today I am introducing legislation that will enhance and strengthen transition services that are provided to our military personnel.

As the Senate conducts its business today, thousands of our brave men and women in uniform are in harm's way in Iraq, Afghanistan, and elsewhere around the globe. These men and women serve with distinction and honor, and we owe them our heartfelt gratitude.

We also owe them our best effort to ensure that they receive the benefits to which their service in our Armed Forces has entitled them. I have heard time and again from military personnel and veterans who are frustrated with the system by which they apply for benefits or appeal claims for benefits. I have long been concerned that

tens of thousands of our veterans are unaware of Federal health care and other benefits for which they may be eligible, and I have undertaken numerous legislative and oversight efforts to ensure that the Department of Veterans Affairs makes outreach to our veterans and their families a priority.

While we should do more to support our veterans, we must also ensure that the men and women who are currently serving in our Armed Forces receive adequate pay and benefits, as well as services that help them to make the transition from active duty to civilian life. I am concerned that we are not doing enough to support our men and women in uniform as they prepare to retire or otherwise separate from the service or, in the case of members of our National Guard and Reserve, to demobilize from active duty assignments and return to their civilian lives while staying in the military or preparing to separate from the military. We must ensure that their service and sacrifice, which is much lauded during times of conflict, is not forgotten once the battles have ended and our troops have come home.

The bill that I am introducing today, the Veterans Enhanced Transition Services Act (VETS Act), will help to ensure that all military personnel have access to the same transition services as they prepare to leave the military to reenter civilian life, or, in the case of members of the National Guard and Reserve, as they prepare to demobilize from active duty assignments and return to their civilian lives and jobs or education while remaining in the military.

I have heard from a number of Wisconsinites and members of military and veterans service organizations that our men and women in uniform do not all have access to the same transition counseling and medical services as they are demobilizing from service in Iraq, Afghanistan, and elsewhere. I have long been concerned about reports of uneven provision of services from base to base and from service to service. All of our men and women in uniform have pledged to serve our country, and all of them, at the very least, deserve to have access to the same services in return.

I introduced similar legislation during the 108th Congress, and I am pleased that a provision that I authored which was based on that bill was enacted as part of the fiscal year 2005 defense authorization bill.

In response to concerns I have heard from a number of my constituents, my amendment, in part, directed the Secretaries of Defense and Labor to jointly explore ways in which DoD training and certification standards could be coordinated with government and private sector training and certification standards for corresponding civilian occupations. Such coordination could help military personnel who wish to pursue civilian employment related to their military specialties to make the tran-

sition from the military to comparable civilian jobs. I look forward to reviewing this report.

In addition, this amendment required the Government Accountability Office (GAO) to undertake a comprehensive analysis of existing transition services for our military personnel that are administered by the Departments of Defense, Veterans Affairs, and Labor and to make recommendations to Congress on how these programs can be improved. My amendment required GAO to focus on two issues: how to achieve the uniform provision of appropriate transition services to all military personnel, and the role of post-deployment and pre-discharge health assessments as part of the larger transition program. GAO released its study "Military and Veterans' Benefits: Enhanced Services Could Improve Transition Assistance for Reserves and National Guard" in May 2005, and it plans to release its study on health assessments in the near future.

Just yesterday, GAO provided testimony on its transition services report to the House Committee on Veterans Affairs Subcommittee on Economic Opportunity. That hearing could not have been more timely. We owe it to our men and women in uniform to improve transition programs now as we continue to welcome home thousands of military personnel who are serving our country in Iraq, Afghanistan, and elsewhere. We should not miss an opportunity to help the men and women who are currently serving our country.

My bill, which is consistent with GAO's recommendations on transition assistance, will help to ensure that all military personnel receive the same services by making a number of improvements to the existing Transition Assistance Program/Disabled Transition Assistance Program (TAP/DTAP), by improving the process by which military personnel who are being demobilized or discharged receive medical examinations and mental health assessments, and by ensuring that military and veterans service organizations and state departments of veterans affairs are able to play an active role in assisting military personnel with the difficult decisions that are often involved in the process of discharging or demobilizing.

Under current law, the Department of Defense, together with the Departments of Veterans Affairs (VA) and Labor, provide pre-separation counseling for military personnel who are preparing to leave the Armed Forces. This counseling provides servicemembers with valuable information about benefits that they have earned through their service to our country such as education benefits through the GI Bill and health care and other benefits through the VA. Personnel also learn about programs such as Troops to Teachers and have access to employment assistance for themselves and, where appropriate, their spouses.

My bill would ensure that National Guard and Reserve personnel who are

on active duty are able to participate in this important counseling prior to being demobilized. In addition, my bill would require state-based follow-up within 180 days of demobilization to give newly demobilized personnel the opportunity to follow up on any questions or concerns that they may have during a regular unit training period. Currently, most of the responsibility for getting information about benefits and programs falls on the military personnel. The Department of Defense should make every effort to ensure that all members participate in this important program, and that is what my bill would do.

In its recent report on transition services, GAO found that "[d]uring their rapid demobilization, the Reserve and National Guard members may not receive all the information on possible benefits to which they are entitled. Notably, certain education benefits and medical coverage require servicemembers to apply while they are still on active duty. However, even after being briefed, some Reserve and National Guard members were not aware of the time frames within which they needed to act to secure certain benefits before returning home. In addition, most members of the Reserves and National Guard did not have the opportunity to attend an employment workshop during demobilization."

In response to these findings, GAO recommended that "DoD, in conjunction with DoL and the VA, determine what demobilizing Reserve and National Guard members need to make a smooth transition and explore options to enhance their participation in TAP." GAO also recommended that "VA take steps to determine the level of participation in DTAP to ensure those who may have especially complex needs are being served."

In addition to ensuring that all discharging and demobilizing military personnel are able to participate in TAP/DTAP, my bill would help to improve the uniformity of services provided to personnel by directing the Secretary of Defense to ensure that consistent transition briefings occur across the services and at all demobilization/discharge locations. In its report, GAO noted that "[t]he delivery of TAP may vary in terms of the amount of personal attention participants receive, the length of the components, and the instructional methods used." We should make every effort to ensure that those who have put themselves in harm's way on our behalf have access to the same transition services no matter their discharge/demobilization location or the branch of the Armed Forces in which they serve.

My bill would also ensure, consistent with GAO's recommendation, that there are programs that are directed to the specific needs of active duty and National Guard and Reserve personnel. And my bill includes a provision to ensure that personnel who are on the temporary disability retired list and

who are being retired or discharged from alternate locations will have access to transition services at a location that is reasonably convenient to them.

In addition, my bill would enhance the information that is presented to members by requiring that pre-separation counseling include the provision of information regarding certification and licensing requirements in civilian occupations and information on identifying military occupations that have civilian counterparts, information concerning veterans small business ownership and entrepreneurship programs offered by the Federal Government, information concerning employment and reemployment rights and veterans preference in Federal employment and Federal procurement opportunities, information concerning homelessness and housing counseling assistance, and a description of the health care and other benefits to which the member may be entitled under the laws administered by the Secretary of Veterans Affairs including a referral (to be provided with the assistance of the Secretary of Veterans Affairs) for a VA medical and pension examination, as appropriate.

Participation in pre-separation counseling through a TAP/DTAP program is a valuable tool for personnel as they transition back to civilian life. My bill is in no way intended to lengthen the time that military personnel spend away from their families or to provide them with information that is not relevant to their civilian lives or that they otherwise do not need. In order to ensure that this information remains a valuable tool and does not become a burden to demobilizing members of the National Guard and Reserve who experience multiple deployments for active duty assignments, my bill clarifies that participation in the Department of Labor's transitional services employment program will not be required if a member has previously participated in the program or if a member will be returning to school or to a position of employment.

My bill would also require the Secretaries of Defense and Veterans Affairs to submit a plan to Congress for increasing access to the joint DoD-VA Benefits Delivery at Discharge program, which assists personnel in applying for VA disability benefits before they are discharged from the military. This very successful program has helped to cut the red tape and to speed the processing time for many veterans who are entitled to VA disability benefits.

In addition to the uneven provision of transition services, I have long been concerned about the immediate and long-term health effects that military deployments have on our men and women in uniform. I regret that, too often, the burden of responsibility for proving that a condition is related to military service falls on the personnel themselves. Our men and women in uniform deserve the benefit of the

doubt, and should not have to fight the Department of Defense or the VA for benefits that they have earned through their service to our nation.

Since coming to the Senate in 1993, I have worked to focus attention on the health effects that are being experienced by military personnel who served in the Persian Gulf War. More than ten years after the end of the Gulf War, we still don't know why so many veterans of that conflict are experiencing medical problems that have become known as Gulf War Syndrome. Military personnel who are currently deployed to the Persian Gulf region face many of the same conditions that existed in the early 1990s. I have repeatedly pressed the Departments of Defense and Veterans Affairs to work to unlock the mystery of this illness and to study the role that exposure to depleted uranium may play in this condition. We owe it to these personnel to find these answers, and to ensure that those who are currently serving in the Persian Gulf region are adequately protected from the many possible causes of Gulf War Syndrome.

Part of the process of protecting the health of our men and women in uniform is to ensure that the Department of Defense carries out its responsibility to provide post-deployment physicals for military personnel. I am deeply concerned about stories of personnel who are experiencing long delays as they wait for their post-deployment physicals and who end up choosing not to have these important physicals in order to get home to their families that much sooner. I am equally concerned about reports that some personnel who did not receive such a physical—either by their own choice or because such a physical was not available—are now having trouble as they apply for benefits for a service-connected condition.

I firmly believe, as do the military and veterans groups that support my bill, that our men and women in uniform are entitled to a prompt, high quality physical examination as part of the demobilization process. These individuals have voluntarily put themselves into harm's way for our benefit. We should ensure that the Department of Defense makes every effort to determine whether they have experienced, or could experience, any health effects as a result of their service.

In light of concerns raised by many that each service and each installation uses a different process for demobilization physicals, my bill would require the Secretary of Defense to set minimum standards for these important medical examinations and to ensure that these standards are applied uniformly at all installations and by all branches of the Armed Forces. In addition, to ensure that all personnel receive these important exams, my bill stipulates that the exam may not be waived by the Department or by individual personnel.

My bill also would strengthen current law by ensuring that these med-

ical examinations also include a mental health assessment. Our men and women in uniform serve in difficult circumstances far from home, and too many of them witness or experience violence and horrific situations that most of us cannot even begin to imagine. I have heard concerns that these brave men and women, many of whom are just out of high school or college when they sign up, may suffer long-term physical and mental fallout from their experiences and may feel reluctant to seek counseling or other assistance to deal with their experiences.

My bill would improve mental health services for demobilizing military personnel by requiring that the content and standards for the mental health screening and assessment that are developed by the Secretary include content and standards for screening acute and delayed onset post-traumatic stress disorder (PTSD), and, specifically, questions to identify stressors experienced by military personnel that have the potential to lead to PTSD. These efforts should build on—not replace—the mental health questions that the Pentagon is already using as part of its post-deployment health screening process.

Some Wisconsinites have told me that they are concerned that the multiple deployments of our National Guard and Reserve could lead to chronic PTSD, which could have its roots in an experience from a previous deployment and which could come to the surface by a triggering event that is experienced on a current deployment. The same is true for full-time military personnel who have served in a variety of places over their careers.

We can and should do more to ensure that the mental health of our men and women in uniform is a top priority, and that the stigma that is too often attached to seeking assistance is ended. One step in this process is to ensure that personnel who have symptoms of PTSD and related illnesses have access to appropriate clinical services, through DoD, the VA, or a private sector health care provider. To that end, my bill would require that the health care professionals who are assessing demobilizing military personnel provide all personnel who may need follow-up care for a physical or psychological condition with information on appropriate resources through DoD or the VA and in the private sector that these personnel may use to access additional follow-up care if they so choose.

I commend the Assistant Secretary of Defense for Health Affairs for issuing in March 2005 a memorandum to the Assistant Secretaries for the Army, Navy, and Air Force directing them to extend the Pentagon's current post-deployment health assessment process to include a reassessment of "global health with a specific emphasis on mental health" to occur three to six months post-deployment. At a hearing of the Senate Armed Services Committee's Personnel Subcommittee earlier

this year, the Assistant Secretary stated that the services were in the process of implementing a program that would include a "screening procedure with a questionnaire and a face-to-face interaction at about three months" post-deployment. He also noted that the idea for this program came from "front line people" and that he "asked them. . . 'do you think we should make it mandatory?' and the answer was: yes." This sentiment makes it even more important that the initial post-deployment mental health assessment be strengthened and that it be mandatory as well so that health care professionals have a benchmark against which to measure the results of the follow-up screening process.

In order to gain a better understanding of existing programs, my bill requires the Secretaries of Defense and Veterans Affairs to report to Congress on the services provided to current and former members of the Armed Forces who experience PTSD and related conditions. This report will include an analysis of the number of persons treated, the types of interventions, and the programs that are in place for each branch of the Armed Forces to identify and treat cases of PTSD and related conditions.

In addition, in order to ensure that all military personnel who are eligible for medical benefits from the VA learn about and receive these benefits, my bill would require that, as part of the demobilization process, assistance be provided to eligible members to enroll in the VA health care system.

My bill would also make improvements to the DoD demobilization and discharge processes by ensuring that members of military and veterans service organizations (MSOs and VSOs) are able to counsel personnel on options for benefits and other important questions. The demobilization and discharge process presents our servicemembers with a sometimes confusing and often overwhelming amount of information and paperwork that must be digested and sometimes signed in a very short period of time. My bill would authorize a "veteran to veteran" counseling program that will give military personnel the opportunity to speak with fellow veterans who have been through this process and who have been accredited to represent veterans in VA proceeding by the VA. These veterans can offer important advice about benefits and other choices that military personnel have to make as they are being discharged or demobilized.

Under current law, the Secretary of Defense may make use of the services provided by MSOs and VSOs as part of the transition process. But these groups tell me that they are not always allowed access to transition briefings that are conducted for our personnel. In order to help facilitate the new veteran-to-veteran program, my legislation would require the Secretary to ensure that representatives of

MSOs, VSOs, and state departments of veterans affairs, are invited to participate in all transition and Benefits Delivery at Discharge programs. In addition, my legislation requires that these dedicated veterans, who give so much of their time and of themselves to serving their fellow veterans and their families, are able to gain access to military installations, military hospitals, and VA hospitals in order to provide this important service. By and large, these groups are able to speak with our military personnel at hospitals and other facilities. But I am disturbed by reports that representatives of some of these groups were having a hard time gaining access to these facilities in order to visit with our troops. For that reason, I have included this access requirement in my bill.

I want to stress that my bill in no way requires military personnel to speak with members of MSOs or VSOs if they do not wish to do so. It merely ensures that our men and women in uniform have this option.

I am pleased that this legislation is supported by a wide range of groups that are dedicated to serving our men and women in uniform and veterans and their families. These groups include: the American Legion; the Enlisted Association of the National Guard of the United States; the National Coalition for Homeless Veterans; the Paralyzed Veterans of America; the Reserve Officers Association; the Veterans of Foreign Wars; the Wisconsin Department of Veterans Affairs; the Wisconsin National Guard; the American Legion, Department of Wisconsin; Disabled American Veterans, Department of Wisconsin; the Wisconsin Paralyzed Veterans of America; the Veterans of Foreign Wars, Department of Wisconsin; and the Wisconsin State Council, Vietnam Veterans of America.

I urge my colleagues to support the bill and I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1341

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 "Veterans' Enhanced Transition Services Act of 2005".

SEC. 2. IMPROVED ADMINISTRATION OF TRANSITIONAL ASSISTANCE PROGRAMS.

(a) PREPARATION COUNSELING.—Section 1142 of title 10, United States Code, is amended—

(1) in subsection (a)—
(A) in paragraph (1), by striking "provide for individual preparation counseling" and inserting "shall provide individual preparation counseling";

(B) by redesignating paragraph (4) as paragraph (6); and

(C) by inserting after paragraph (3) the following:

"(4) For members of the reserve components who have been serving on active duty continuously for at least 180 days, the Secretary concerned shall require that

preparation counseling under this section be provided to all such members (including officers) before the members are separated.

"(5) The Secretary concerned shall ensure that commanders of members entitled to services under this section authorize the members to obtain such services during duty time."

(2) in subsection (b)—

(A) in paragraph (4), by striking "(4) Information concerning" and inserting the following:

"(4) Provision of information on civilian occupations and related assistance programs, including information concerning—

"(A) certification and licensure requirements that are applicable to civilian occupations;

"(B) civilian occupations that correspond to military occupational specialties; and

"(C)"; and

(B) by adding at the end the following:

"(1) Information concerning the priority of service for veterans in the receipt of employment, training, and placement services provided under qualified job training programs of the Department of Labor.

"(2) Information concerning veterans small business ownership and entrepreneurship programs of the Small Business Administration and the National Veterans Business Development Corporation.

"(3) Information concerning employment and reemployment rights and obligations under chapter 43 of title 38.

"(4) Information concerning veterans preference in federal employment and federal procurement opportunities.

"(5) Information concerning homelessness, including risk factors, awareness assessment, and contact information for preventative assistance associated with homelessness.

"(6) Contact information for housing counseling assistance.

"(7) A description, developed in consultation with the Secretary of Veterans Affairs, of health care and other benefits to which the member may be entitled under the laws administered by the Secretary of Veterans Affairs.

"(8) If a member is eligible, based on a preparation physical examination, for compensation benefits under the laws administered by the Secretary of Veterans Affairs, a referral for a medical examination by the Secretary of Veterans Affairs (commonly known as a 'compensation and pension examination').";

(3) by adding at the end the following:

"(d) ADDITIONAL REQUIREMENTS.—(1) The Secretary concerned shall ensure that—

"(A) preparation counseling under this section includes material that is specifically relevant to the needs of—

"(i) persons being separated from active duty by discharge from a regular component of the armed forces; and

"(ii) members of the reserve components being separated from active duty;

"(B) the locations at which preparation counseling is presented to eligible personnel include—

"(i) each military installation under the jurisdiction of the Secretary;

"(ii) each armory and military family support center of the National Guard;

"(iii) inpatient medical care facilities of the uniformed services where such personnel are receiving inpatient care; and

"(iv) in the case of a member on the temporary disability retired list under section 1202 or 1205 of this title who is being retired under another provision of this title or is being discharged, a location reasonably convenient to the member;

"(C) the scope and content of the material presented in preparation counseling at

each location under this section are consistent with the scope and content of the material presented in the preseparation counseling at the other locations under this section; and

“(D) follow up counseling is provided for each member of the reserve components described in subparagraph (A) not later than 180 days after separation from active duty.

“(2) The Secretary concerned shall, on a continuing basis, update the content of the materials used by the National Veterans Training Institute and such officials’ other activities that provide direct training support to personnel who provide preseparation counseling under this section.

“(e) NATIONAL GUARD MEMBERS ON DUTY IN STATE STATUS.—(1) Members of the National Guard, who are separated from long-term duty to which ordered under section 502(f) of title 32, shall be provided preseparation counseling under this section to the same extent that members of the reserve components being discharged or released from active duty are provided preseparation counseling under this section.

“(2) The preseparation counseling provided personnel under paragraph (1) shall include material that is specifically relevant to the needs of such personnel as members of the National Guard.

“(3) The Secretary of Defense shall prescribe, by regulation, the standards for determining long-term duty under paragraph (1).”; and

(4) by amending the heading to read as follows:

“§1A1142. **Members separating from active duty: preseparation counseling**”.

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 58 of title 10, United States Code, is amended by striking the item relating to section 1142 and inserting the following:

“1142. **Members separating from active duty: preseparation counseling.**”.

(c) DEPARTMENT OF LABOR TRANSITIONAL SERVICES PROGRAM.—Section 1144 of title 10, United States Code, is amended—

(1) in subsection (a)(1), by striking “paragraph (4)(A)” in the second sentence and inserting “paragraph (6)(A)”;

(2) by amending subsection (c) to read as follows:

“(c) PARTICIPATION.—(1) Subject to paragraph (2), the Secretary and the Secretary of Homeland Security shall require participation by members of the armed forces eligible for assistance under the program carried out under this section.

“(2) The Secretary and the Secretary of Homeland Security need not require, but shall encourage and otherwise promote, participation in the program by the following members of the armed forces described in paragraph (1):

“(A) Each member who has previously participated in the program.

“(B) Each member who, upon discharge or release from active duty, is returning to—

“(i) a position of employment; or

“(ii) pursuit of an academic degree or other educational or occupational training objective that the member was pursuing when called or ordered to such active duty.

“(3) The Secretary concerned shall ensure that commanders of members entitled to services under this section authorize the members to obtain such services during duty time.”; and

(3) by adding at the end the following:

“(e) UPDATED MATERIALS.—The Secretary concerned shall, on a continuing basis, update the content of all materials used by the Department of Labor that provide direct training support to personnel who provide transitional services counseling under this section.”.

SEC. 3. BENEFITS DELIVERY AT DISCHARGE PROGRAMS.

(a) PLAN FOR MAXIMUM ACCESS TO BENEFITS.—

(1) IN GENERAL.—The Secretary of Defense, the Secretary of Homeland Security, and the Secretary of Veterans Affairs shall jointly submit to Congress a plan to maximize access to benefits delivery at discharge programs for members of the Armed Forces.

(2) CONTENTS.—The plan submitted under paragraph (1) shall include a description of efforts to ensure that services under programs described in paragraph (1) are provided, to the maximum extent practicable—

(A) at each military installation under the jurisdiction of the Secretary;

(B) at each armory and military family support center of the National Guard;

(C) at each installation and inpatient medical care facility of the uniformed services at which personnel eligible for assistance under such programs are discharged from the armed forces; and

(D) in the case of a member on the temporary disability retired list under section 1202 or 1205 of title 10, United States Code, who is being retired under another provision of such title or is being discharged, at a location reasonably convenient to the member.

(b) DEFINITION.—In this section, the term “benefits delivery at discharge program” means a program administered jointly by the Secretary of Defense and the Secretary of Veterans Affairs to provide information and assistance on available benefits and other transition assistance to members of the Armed Forces who are separating from the Armed Forces, including assistance to obtain any disability benefits for such members may be eligible.

SEC. 4. POST-DEPLOYMENT MEDICAL ASSESSMENT AND SERVICES.

(a) IMPROVEMENT OF MEDICAL TRACKING SYSTEM FOR MEMBERS DEPLOYED OVERSEAS.—Section 1074f of title 10, United States Code, is amended—

(1) in subsection (b), by striking “(including an assessment of mental health” and inserting “(which shall include mental health screening and assessment”;

(2) by redesignating subsections (c) and (d) as subsections (e) and (f), respectively; and

(3) by inserting after subsection (b) the following:

“(c) PHYSICAL MEDICAL EXAMINATIONS.—(1) The Secretary shall—

“(A) prescribe the minimum content and standards that apply for the physical medical examinations required under this section; and

“(B) ensure that the content and standards prescribed under subparagraph (A) are uniformly applied at all installations and medical facilities of the armed forces where physical medical examinations required under this section are performed for members of the armed forces returning from a deployment described in subsection (a).

“(2) An examination consisting solely or primarily of an assessment questionnaire completed by a member does not meet the requirements under this section for—

“(A) a physical medical examination; or

“(B) an assessment.

“(3) The content and standards prescribed under paragraph (1) for mental health screening and assessment shall include—

“(A) content and standards for screening mental health disorders; and

“(B) in the case of acute post-traumatic stress disorder and delayed onset post-traumatic stress disorder, specific questions to identify stressors experienced by members that have the potential to lead to post-traumatic stress disorder, which questions may be taken from or modeled after the post-deployment assessment questionnaire used in June 2005.

“(4) An examination of a member required under this section may not be waived by the Secretary (or any official exercising the Secretary’s authority under this section) or by the member.

“(d) FOLLOW UP SERVICES.—(1) The Secretary, in consultation with the Secretary of Veterans Affairs, shall ensure that appropriate actions are taken to assist a member who, as a result of a post-deployment medical examination carried out under the system established under this section, receives an indication for a referral for follow up treatment from the health care provider who performs the examination.

“(2) Assistance required to be provided to a member under paragraph (1) includes—

“(A) information regarding, and any appropriate referral for, the care, treatment, and other services that the Secretary or the Secretary of Veterans Affairs may provide to such member under any other provision of law, including—

“(i) clinical services, including counseling and treatment for post-traumatic stress disorder and other mental health conditions; and

“(ii) any other care, treatment, and services;

“(B) information on the private sector sources of treatment that are available to the member in the member’s community; and

“(C) assistance to enroll in the health care system of the Department of Veterans Affairs for health care benefits for which the member is eligible under laws administered by the Secretary of Veterans Affairs.”.

(b) REPORT ON PTSD CASES.—(1) The Secretary of Defense and the Secretary of Veterans Affairs shall jointly submit to Congress a report on the services provided to members and former members of the Armed Forces who experience post-traumatic stress disorder (and related conditions) associated with service in the Armed Forces.

(2) The report submitted under paragraph (1) shall include—

(A) the number of persons treated;

(B) the types of interventions; and

(C) the programs that are in place for each of the Armed Forces to identify and treat cases of post-traumatic stress disorder and related conditions.

SEC. 5. ACCESS OF MILITARY AND VETERANS SERVICE AGENCIES AND ORGANIZATIONS.

(a) DEPARTMENT OF DEFENSE.—

(1) IN GENERAL.—Chapter 58 of title 10, United States Code, is amended by adding at the end the following:

“§1A1154. **Veteran-to-veteran preseparation counseling**

“(a) COOPERATION REQUIRED.—The Secretary shall carry out a program to facilitate the access of representatives of military and veterans’ service organizations and representatives of veterans’ services agencies of States to provide preseparation counseling and services to members of the armed forces who are scheduled, or are in the process of being scheduled, for discharge, release from active duty, or retirement.

“(b) REQUIRED PROGRAM ELEMENT.—The program under this section shall provide for representatives of military and veterans’ service organizations and representatives of veterans’ services agencies of States to be invited to participate in the preseparation counseling and other assistance briefings provided to members under the programs carried out under sections 1142 and 1144 of this title and the benefits delivery at discharge programs.

“(c) LOCATIONS.—The program under this section shall provide for access to members—

“(1) at each installation of the armed forces;

“(2) at each armory and military family support center of the National Guard;

“(3) at each inpatient medical care facility of the uniformed services administered under chapter 55 of this title; and

“(4) in the case of a member on the temporary disability retired list under section 1202 or 1205 of this title who is being retired under another provision of this title or is being discharged, at a location reasonably convenient to the member.

“(d) CONSENT OF MEMBERS REQUIRED.—Access to a member of the armed forces under the program under this section is subject to the consent of the member.

“(e) DEFINITIONS.—In this section:

“(1) The term ‘benefits delivery at discharge program’ means a program administered jointly by the Secretary and the Secretary of Veterans Affairs to provide information and assistance on available benefits and other transition assistance to members of the armed forces who are separating from the armed forces, including assistance to obtain any disability benefits for which such members may be eligible.

“(2) The term ‘representative’, with respect to a veterans’ service organization, means a representative of an organization who is recognized by the Secretary of Veterans Affairs for the representation of veterans under section 5902 of title 38.”

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 58 of title 10, United States Code, is amended by adding at the end the following:

“1154. Veteran-to-veteran pre-separation counseling.”

(b) DEPARTMENT OF VETERANS AFFAIRS.—

(1) IN GENERAL.—Subchapter I of chapter 17 of title 38, United States Code, is amended by adding at the end the following:

“§1A1709. Veteran-to-veteran counseling

“(a) COOPERATION REQUIRED.—The Secretary shall carry out a program to facilitate the access of representatives of military and veterans’ service organizations and representatives of veterans’ services agencies of States to veterans furnished care and services under this chapter to provide information and counseling to such veterans on—

“(1) the care and services authorized by this chapter; and

“(2) other benefits and services available under the laws administered by the Secretary.

“(b) FACILITIES COVERED.—The program under this section shall provide for access to veterans described in subsection (a) at each facility of the Department and any non-Department facility at which the Secretary furnishes care and services under this chapter.

“(c) CONSENT OF VETERANS REQUIRED.—Access to a veteran under the program under this section is subject to the consent of the veteran.

“(d) DEFINITION.—In this section, the term ‘veterans’ service organization’ means an organization who is recognized by the Secretary for the representation of veterans under section 5902 of this title.”

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 17 of title 38, United States Code, is amended by inserting after the item relating to section 1708 the following:

“1709. Veteran-to-veteran counseling.”

By Mr. FEINGOLD (for himself and Mrs. LINCOLN):

S. 342. A bill to amend title 38, United States Code, to improve the outreach activities of the Department of Veterans Affairs, and for other purposes; to the Committee on Veterans’ Affairs.

Mr. FEINGOLD. Mr. President, today I am reintroducing legislation that will

help to ensure that all of our veterans know about Federal benefits to which they may be entitled by improving outreach programs conducted by the Department of Veterans Affairs.

I am please to be joined in this effort by the Senator from Arkansas, Mrs. LINCOLN.

Five years ago, the Wisconsin Department of Veterans Affairs (WDVA) launched a Statewide program called “I Owe You,” which encourages veterans to apply, or to re-apply, for benefits that they earned from their service to our country in the Armed Forces.

As part of this program, WDVA has sponsored 20 events around Wisconsin called “Supermarkets of Veterans Benefits” at which veterans can begin the process of learning whether they qualify for federal benefits from the Department of Veterans Affairs (VA). Information about additional benefits through WDVA is also provided. These events, which are based on a similar program in Georgia, supplement the work of Wisconsin’s County Veterans Service Officers and veterans service organizations by helping our veterans to reconnect with the VA and to learn more about services and benefits for which they may be eligible.

More than 18,650 veterans and their families have attended the supermarkets, which include information booths with representatives from WDVA, VA, and veterans service organizations, as well as a variety of Federal, State, and local agencies. I am proud to have had members of my staff speak with veterans and their families at a number of these events. These events have helped veterans and their families to learn about numerous topics, including health care, how to file a disability claim, and pre-registration for internment in veterans cemeteries. According to WDVA, this program has helped Wisconsin to receive approximately \$250 million in additional VA funding and benefits for our veterans each year.

The Institute for Government Innovation at Harvard University’s Kennedy School of Government recognized the “I Owe You” program by naming it a semi-finalist for the 2002 Innovations in American Government Award. The program was featured in the March/April 2003 issue of Disabled American Veterans Magazine. And in August 2003, the Midwestern Legislative Conference of the Council of State Governments named the program a finalist in its 2003 Innovations in American Government Awards Program.

The State of Wisconsin is performing a service that is clearly the obligation of the VA. These are federal benefits that we owe to our veterans and it is the federal government’s responsibility to make sure that they receive them. The VA has a statutory obligation to perform outreach, and current budget pressures should not be used as an excuse to halt or reduce these efforts.

The legislation that I am introducing today was spurred by the overwhelming response to the WDVA’s “I Owe You” program and the super-

markets of veterans benefits. If more than 18,000 Wisconsin veterans want to make sure they know about all the benefits that are owed to them, there must be many more veterans around our country who deserve to be told about the benefits they have earned. We can and should do better for our veterans, who selflessly served our country and protected the freedoms that we all cherish. And it is important to address gaps in the VA’s outreach program as we welcome home and prepare to enroll into the VA system the tens of thousands of dedicated military personnel who are serving in Afghanistan, Iraq, and other places around the globe.

In order to help to facilitate consistent implementation of VA’s outreach responsibilities around the country, my bill would create a statutory definition of the term “outreach.”

My bill also would help to improve outreach activities performed by the VA in three ways. First, it would create separate funding line items for outreach activities within the budgets of the VA and its agencies (the Veterans Health Administration, the Veterans Benefits Administration, and the National Cemetery Administration). Currently funding for outreach is taken from the general operating expenses for these agencies. These important programs should have a dedicated funding source instead of being forced to compete for scarce funding with other crucial VA programs.

I have long supported efforts to adequately fund VA programs. We can and should do more to provide the funding necessary to ensure that our brave veterans are getting the health care and other benefits that they have earned in a timely manner and without having to travel long distances or wait more than a year to see a doctor or to have a claim processed.

Secondly, the bill would create an intra-agency structure to require the Office of the Secretary, the Office of Public Affairs, the VBA, the VHA, and the NCA to coordinate outreach activities. By working more closely together, the VA components would be able to consolidate their efforts, share proven outreach mechanisms, and avoid duplication of effort that could waste scarce funding.

Finally, the bill would ensure that the VA can enter into cooperative agreements with state departments of veterans affairs regarding outreach activities and would give the VA grant-making authority to award funds to State Departments of Veterans Affairs for outreach activities such as the WDVA’s “I Owe You Program.” Grants that are awarded to state departments under this program could be used to enhance outreach activities and to improve activities relating to veterans claims processing, which is a key component of the VA benefits process. State departments that receive grants

under this program may choose to award portions of their grants to local governments, other public entities, or private or non-profit organizations that engage in veterans outreach activities. I want to be clear that it is not my intention that the funding for these grants be taken from existing VA programs.

I am pleased that this bill has the support of a number of national and Wisconsin organizations that are committed to improving the lives of our nation's veterans, including: Disabled American Veterans; Paralyzed Veterans of America; Vietnam Veterans of America; the National Association of County Veterans Service Officers; the National Association of State Directors of Veterans Affairs; the Wisconsin Department of Veterans Affairs; the Wisconsin Association of County Veterans Service Officers; the American Legion, Department of Wisconsin; the American Legion Auxiliary, Department of Wisconsin; Disabled American Veterans, Department of Wisconsin; the Wisconsin Paralyzed Veterans of America; the Veterans of Foreign Wars, Department of Wisconsin; and the Wisconsin State Council, Vietnam Veterans of America.

I hope that my colleagues will support this effort to ensure that our veterans know about the benefits for which they may be eligible as a result of their service to our country. I ask unanimous consent that the text of my bill be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1342

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 "Veterans Outreach Improvement Act of 2005".

SEC. 2. DEFINITION OF OUTREACH.

Section 101 of title 38, United States Code, is amended by adding at the end the following new paragraph:

"(34) The term 'outreach' means the act or process of reaching out in a systematic manner to proactively provide information, services, and benefits counseling to veterans, and to the spouses, children, and parents of veterans who may be eligible to receive benefits under the laws administered by the Secretary, to ensure that such individuals are fully informed about, and assisted in applying for, any benefits and programs under such laws."

SEC. 3. AUTHORITIES AND REQUIREMENTS FOR ENHANCEMENT OF OUTREACH OF ACTIVITIES DEPARTMENT OF VETERANS AFFAIRS.

(a) IN GENERAL.—Chapter 5 of title 38, United States Code, is amended by adding at the end the following new subchapter:

"SUBCHAPTER IV—OUTREACH

"§ 561. Outreach activities: funding

"(a) SEPARATE ACCOUNT FOR OUTREACH ACTIVITIES.—The Secretary shall establish a separate account for the funding of the outreach activities of the Department, and shall establish within such account a separate subaccount for the funding of the outreach activities of each element of the Department specified in subsection (c).

"(b) BUDGET REQUIREMENTS.—In the budget justification materials submitted to Congress in support of the Department budget for any fiscal year (as submitted with the budget of the President under section 1105(a) of title 31), the Secretary shall include a separate statement of the amount requested for such fiscal year for activities as follows:

"(1) For outreach activities of the Department in aggregate.

"(2) For outreach activities of each element of the Department specified in subsection (c).

"(c) COVERED ELEMENTS.—The elements of the Department specified in this subsection are as follows:

"(1) The Veterans Health Administration.

"(2) The Veterans Benefits Administration.

"(3) The National Cemetery Administration.

"§ 562. Outreach activities: coordination of activities within Department

"(a) PROCEDURES FOR EFFECTIVE COORDINATION.—The Secretary shall establish and maintain procedures for ensuring the effective coordination of the outreach activities of the Department between and among the following:

"(1) The Office of the Secretary.

"(2) The Office of Public Affairs.

"(3) The Veterans Health Administration.

"(4) The Veterans Benefits Administration.

"(5) The National Cemetery Administration.

"(b) REVIEW AND MODIFICATION.—The Secretary shall—

"(1) periodically review the procedures maintained under subsection (a) for the purpose of ensuring that such procedures meet the requirement in that subsection; and

"(2) make such modifications to such procedures as the Secretary considers appropriate in light of such review in order to better achieve that purpose.

"§ 563. Outreach activities: cooperative activities with States; grants to States for improvement of outreach

"(a) PURPOSE.—It is the purpose of this section to assist States in carrying out programs that offer a high probability of improving outreach and assistance to veterans, and to the spouses, children, and parents of veterans who may be eligible to receive veterans' or veterans'-related benefits, to ensure that such individuals are fully informed about, and assisted in applying for, any veterans' and veterans'-related benefits and programs (including under State veterans' programs).

"(b) LOCATION OF PROVISION OF OUTREACH.—The Secretary shall ensure that outreach and assistance is provided under programs referred to in subsection (a) in locations proximate to populations of veterans and other individuals referred to in that subsection, as determined utilizing criteria for determining the proximity of such populations to veterans health care services.

"(c) COOPERATIVE AGREEMENTS WITH STATES.—The Secretary may enter into cooperative agreements and arrangements with veterans agencies of the States in order to carry out, coordinate, improve, or otherwise enhance outreach by the Department and the States (including outreach with respect to State veterans' programs).

"(d) GRANTS.—(1) The Secretary may award grants to veterans agencies of States in order to achieve purposes as follows:

"(A) To carry out, coordinate, improve, or otherwise enhance outreach, including activities pursuant to cooperative agreements and arrangements under subsection (c).

"(B) To carry out, coordinate, improve, or otherwise enhance activities to assist in the development and submittal of claims for veterans' and veterans'-related benefits, includ-

ing activities pursuant to cooperative agreements and arrangements under subsection (c).

"(2) A veterans agency of a State receiving a grant under this subsection may use the grant amount for purposes described in paragraph (1) or award all or any portion of such grant amount to local governments in such State, other public entities in such State, or private non-profit organizations in such State for such purposes.

"(e) FUNDING.—Amounts available for the Department for outreach in the account under section 561 of this title shall be available for activities under this section, including grants under subsection (d)."

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 5 of such title is amended by adding at the end the following new items

"SUBCHAPTER IV—OUTREACH

"561. Outreach activities: funding

"562. Outreach activities: coordination of activities within Department

"563. Outreach activities: cooperative activities with States; grants to States for improvement of outreach"

By Ms. STABENOW (for herself and Mr. Levin):

S. 1346. A bill to direct the Secretary of the Interior to conduct a study of maritime sites in the State of Michigan; to the Committee on Energy and Natural Resources.

Ms. STABENOW. Mr. President, I rise today to introduce legislation that will help celebrate Michigan's lighthouses and maritime heritage.

The Great Lakes are an inseparable part of Michigan's identity and cultural history. One of our symbols of that identity are the over 120 lighthouses that define our shorelines—more lighthouses than any other state in the nation.

These beautiful beacons not only serve their purpose as a navigational tool for ships, but they also draw thousands of tourists to Michigan's shores. Our lakeshore communities host visitors from across the country, who travel to view the magnificence of our coastal areas and the lighthouses that illuminate them. Our maritime museums detail the Great Lakes' rich history and unique character.

As the economy in Michigan faces numerous challenges, these small communities are more dependant than ever on tourism dollars. We must help them by ensuring that there are coordinated efforts to protect Michigan's lighthouses and promote the Great Lakes' maritime culture. If we don't, we risk losing these symbols of our history and our future for all time.

The Michigan Maritime Heritage and Lighthouse Trail Act would help develop Federal, State and local partnerships by requiring the National Park Service to work with the State of Michigan and local communities to study and make recommendations to Congress on the best ways to promote and protect Michigan's lighthouses and maritime resources. These recommendations would include specific legislative proposals for the preservation of lighthouses and maritime history. For example, they may call for

the creation of a statewide trail highlighting the historical features of our shorelines and lighthouses. The recommendations would also include the identification of funding sources for Michigan communities, which are critical to this effort.

This bill has strong bipartisan support from all of Michigan's members of Congress. I urge my colleagues to join us in expediting passage of the Michigan Maritime Heritage and Lighthouse Trail Act.

I ask unanimous consent that the text of the legislation be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1346

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 "Michigan Lighthouse and Maritime Heritage Act".

SEC. 2. FINDINGS.

Congress finds that—

(1) surrounded by the Great Lakes, the State of Michigan gives the Midwest region a unique maritime character;

(2) the access of the Great Lakes to the Atlantic Ocean has—

(A) given the shipping industry in the State of Michigan an international role in trade; and

(B) contributed to industrial and natural resource development in the State;

(3) the State of Michigan offers unequalled opportunities for maritime heritage preservation and interpretation, based on the fact that the State has—

(A) more deepwater shoreline than any other State in the continental United States;

(B) more lighthouses than any other State; and

(C) the only freshwater national marine sanctuary in the United States;

(4) the maritime history of the State of Michigan includes the history of—

(A) the routes and gathering places of the fur traders and missionaries who opened North America to European settlement; and

(B) the summer communities of people who mined copper, hunted and fished, and created the first agricultural settlements in the State;

(5) in the 19th century, the natural resources and maritime access of the State made the State the leading producer of iron, copper, and lumber in the United States; and

(6) the maritime heritage of Michigan is evident in—

(A) the more than 120 lighthouses in the State;

(B) the lifesaving stations, dry docks, lightships, submarine, ore docks, piers, breakwaters, sailing clubs, and communities and industries that were built on the lakes in the State;

(C) the hotels and resort communities in the State;

(D) the more than 12 maritime-related national landmarks in the State;

(E) the 2 national lakeshores in the State;

(F) the 2 units of the National Park System in the State;

(G) the various State parks and sites listed on the National Register of Historic Places in the State;

(H) the database information in the State on—

(i) 1,500 shipwrecks;

(ii) 11 underwater preserves; and

(iii) the freshwater national marine sanctuary; and

(I) the Great Lakes, which have played an important role—

(i) for Native Americans, fur traders, missionaries, settlers, and travelers;

(ii) in the distribution of wheat, iron, copper, and lumber;

(iii) providing recreational opportunities; and

(iv) stories of shipwrecks and rescues.

SEC. 3. DEFINITIONS.

In this Act:

(1) **MARITIME HERITAGE RESOURCE.**—The term "maritime heritage resource" includes lighthouses, lifesaving and coast guard stations, maritime museums, historic ships and boats, marine sanctuaries and preserves, fisheries and hatcheries, locks and ports, ore docks, piers and breakwaters, marinas, resort communities (such as Bay View and Epworth Heights), cruises, performing artists that specialize in maritime culture, interpretive and educational programs and events, museums with significant maritime collections, maritime art galleries, maritime communities, and maritime festivals.

(2) **SECRETARY.**—The term "Secretary" means the Secretary of the Interior, acting through the National Park Service Midwest Regional Office.

(3) **STATE.**—The term "State" means the State of Michigan.

(4) **STUDY AREA.**—The term "study area" means the State of Michigan.

SEC. 4. STUDY.

(a) **IN GENERAL.**—The Secretary, in consultation with the State, the State historic preservation officer, local historical societies, State and local economic development, tourism, and parks and recreation offices, and other appropriate agencies and organizations, shall conduct a special resource study of the study area to determine—

(1) the potential economic and tourism benefits of preserving State maritime heritage resources;

(2) suitable and feasible options for long-term protection of significant State maritime heritage resources; and

(3) the manner in which the public can best learn about and experience State maritime heritage resources.

(b) **REQUIREMENTS.**—In conducting the study under subsection (a), the Secretary shall—

(1) review Federal, State, and local maritime resource inventories and studies to establish the context, breadth, and potential for interpretation and preservation of State maritime heritage resources;

(2) examine the potential economic and tourism impacts of protecting State maritime heritage resources;

(3) recommend management alternatives that would be most effective for long-term resource protection and providing for public enjoyment of State maritime heritage resources;

(4) address how to assist regional, State, and local partners in efforts to increase public awareness of and access to the State maritime heritage resources;

(5) identify sources of financial and technical assistance available to communities for the conservation and interpretation of State maritime heritage resources; and

(6) address ways in which to link appropriate national parks, State parks, waterways, monuments, parkways, communities, national and State historic sites, and regional or local heritage areas and sites into a Michigan Maritime Heritage Destination Network.

(c) **REPORT.**—Not later than 18 months after the date on which funds are made available to carry out the study under subsection

(a), the Secretary shall submit to the Committee on Resources of the House of Representatives and the Committee on Energy and Natural Resources of the Senate a report that describes—

(1) the results of the study; and

(2) any findings and recommendations of the Secretary.

SEC. 5. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated to carry out this Act \$500,000.

By Mr. AKAKA:

S. 1347. A bill to authorize demonstration project grants to entities to provide low-cost, small loans; to the Committee on Banking, Housing, and Urban Affairs.

Mr. AKAKA. Mr. President, I rise today to introduce the Low-Cost Alternatives to Payday Loans Act, which would authorize demonstration project grants to eligible entities to provide low-cost, short-term alternatives to expensive, predatory payday loans. Payday loans are small cash loans repaid by borrowers' postdated checks or borrowers' authorizations to make electronic debits against existing financial accounts. Payday loan amounts are usually in the range of \$100 to \$500 with payment in full due in two weeks. Finance charges on payday loans are typically in the range of \$15 to \$30 per \$100 borrowed, which translates into triple digit interest rates in the range of 390 percent to 780 percent when expressed as an annual percentage rate (APR). Loan flipping, which is a common practice, is the renewing of loans at maturity by paying additional fees without any principal reduction. Loan flipping often leads to instances where the fees paid for a payday loan well exceed the principal borrowed. This situation often creates a cycle of debt that is hard to break. Currently, there is a lack of low-cost, short-term credit product alternatives available to consumers. My legislation is intended to encourage the development of products that satisfy the current demand for small loans of a short duration, but at a fair interest rate.

The payday loan business has grown rapidly in recent years, with industry revenues ballooning from \$810 million in 1998 to \$40 billion in 2004. A study by the investment bank, Stephens, Inc., of Little Rock, AK, estimated payday loan volume of \$25 to \$27 billion to 9 to 14 million U.S. households, generating between \$4 and \$4.3 billion in fees. According to a 2004 study conducted by the Consumer Federation of America (CFA), there were an estimated 22,000 payday lender storefronts nationally. Through these storefronts, payday lenders originated an estimated \$40 billion in loans and received \$6 billion in finance charges.

Payday loan providers claim that they are offering a simple financial product that addresses an emergency or temporary credit need that usually cannot be met by traditional financial institutions. An analysis of payday lending statistics by the Center for Responsible Lending indicates that the

majority of payday loan borrowers have multiple loans each year. Two of three borrowers have five or more payday loans annually, and half of these borrowers have 12 or more payday loans annually. Only 33 percent of payday borrowers use four or fewer payday loans annually. Some borrowers seek loans from two or more payday lenders, multiplying the potential for getting trapped in debt. Research by the Community Financial Services Association of America, the payday loan industry's national trade association, found that 40 percent of payday loan customers renew their payday loans five times or more. Many of these customers are lower or middle income working families who need a small amount of money for a short period of time. This becomes a financial bridge to help pay for unexpected expenses.

More and more predatory lenders locate near military installations, targeting vulnerable military servicemembers and their families. The Army has gone to the extent of offering payday lenders some competition through its Army Emergency Relief (AER) initiative. AER, a private, nonprofit organization, has been working on a national program called Commanders Referral that will debut at Fort Hood, Texas, later this year. This program will offer soldiers up to two no-interest, \$500 loans a year, in an attempt to undercut the aggressive tactics of payday lenders. Testifying before the House Subcommittee on Life Issues on February 16, 2005, the Master Chief Petty Officer of the Navy testified that the payday industry "has made it a practice to prey upon our Sailors." He went on to say "it is not being dramatic to state these payday loans to our troops could be a threat to their military readiness." As the ranking member of the Armed Services Subcommittee on Readiness and Management Support, this is an issue of grave concern to me.

I am heartened to see that some federal credit unions have developed alternatives to payday loan products. The Pentagon Federal Credit Union Foundation, Pentagon Federal, and Langley Federal Credit Union, Langley Federal, have each introduced a payday loan alternative. Pentagon Federal offers the Asset Recovery Kit (ARK). For ARK, borrowers must agree to financial counseling, or already be receiving counseling, in order to receive a loan of up to \$500. The borrower pays a \$6 flat fee for the loan and no credit report is required, but financial counseling is mandatory. Langley Federal's QuickCash product features the quick turnaround of a payday loan, but at an 18 percent annual percentage rate. It does not have the financial counseling requirement of the Pentagon Federal's ARK, but is still a viable alternative to a high cost payday loan. In my home state, Windward Community Federal Credit Union, located in Kailua, Hawaii, has developed a payday loan alternative. This credit union is offering

simple short-term loans, with a short approval period, at a fair interest rate. With the demonstration grants offered through my legislation, it is my hope that more credit unions, community development financial institutions and banks will develop and offer similar types of innovative credit products that can serve as alternatives to payday loans.

The payday loan industry exploits people that are in financial need. There is a demand for this type of loan, but these loans are excessively priced. My bill authorizes the Department of the Treasury to award demonstration project grants to banks, credit unions, and community development financial institutions to develop and implement a credit product subject to the APR promulgated by the National Credit Union Administration's Loan Interest Rates, which is currently capped at an APR of 18 percent. The grants would provide consumers with a lower-cost, short-term alternative to predatory payday loans. The demonstration project grants would require individuals seeking a loan through this program to pursue financial literacy and education opportunities that will help them better prepare to manage their finances.

I have a letter in support of my legislation that is signed by the Consumer Federation of America, the U.S. Public Interest Research Group and the Center for Responsible Lending. I ask unanimous consent that it be printed in the RECORD.

I encourage my colleagues to support this legislation so that affordable alternatives to payday loans can be found.

I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

CENTER FOR RESPONSIBLE LENDING,
CONSUMER FEDERATION OF AMERICA,
U.S. PUBLIC INTEREST RESEARCH GROUP,

May 3, 2005.

HON. DANIEL K. AKAKA,
U.S. Senate,
Washington, DC.

DEAR SENATOR AKAKA: Consumer Federation of America, Center for Responsible Lending and U.S. Public Interest Research Group write in support of your legislation to encourage mainstream financial institutions to meet the small loan needs of their own customers. We agree with you that banks, credit unions, and community development financial institutions can and should provide affordable small loans to depositors, along with financial literacy training and asset development to turn debtors into savers.

When consumers turn to the under-regulated small loan market, they typically pay triple-digit interest for very short term loans and risk valuable assets to coercive collection tactics. Last year consumers paid \$6 billion to borrow \$40 billion for check-based small loans from payday loan outlets. National Consumer Law Center and CFA recently reported that low to moderate income consumers paid almost \$1.4 billion to borrow against their anticipated income tax refunds.

The Center for Responsible Lending and CFA report on car title lending describes the booming business of making one-month loans secured by a title to a paid for vehicle.

We believe that the solutions to the use of fringe lenders by low to moderate income consumers include effective state and federal consumer protections, a stronger safety net of financial literacy and credit counseling, and the development of beneficial alternatives by mainstream financial institutions. Your bill seeks to expand mainstream alternatives by authorizing Treasury demonstration grants to non-profit organizations and qualifying financial institutions. It is very important that the bill limits the cost of loans made per these grants to the federal credit union cap of 18% annual interest rate and requires that borrowers also receive educational resources.

Sincerely,

JEAN ANN FOX,
Director of Consumer Protection,
Consumer Federation of America.
EDMUND MIERZOWSKI,
Consumer Program Director,
U.S. Public Interest Research Group.
MARK PEARCE,
President,
Center for Responsible Lending.

S. 1347

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

SECTION 1. GRANT PROGRAM FOR LOW-COST ALTERNATIVES TO PAYDAY LOANS.

(a) **SHORT TITLE.**—This section may be cited as the "Low-Cost Alternatives to Payday Loans Act".

(b) **DEFINITIONS.**—In this Act:

(1) **COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION.**—The term "community development financial institution" means any organization that has been certified as a community development financial institution pursuant to section 1805.201 of title 12, Code of Federal Regulations.

(2) **FEDERALLY INSURED DEPOSITORY INSTITUTION.**—The term "federally insured depository institution" means any insured depository institution (as defined in section 3 of the Federal Deposit Insurance Act (12 U.S.C. 1813)) or any insured credit union (as defined in section 101 of the Federal Credit Union Act (12 U.S.C. 1752)).

(3) **PAYDAY LOAN.**—The term "payday loan" means any transaction in which a small cash advance is made to a consumer in exchange for—

(A) the personal check or share draft of the consumer, in the amount of the advance plus a fee, where presentment or negotiation of such check or share draft is deferred by agreement of the parties until a designated future date; or

(B) the authorization of the consumer to debit the transaction account or share draft account of the consumer, in the amount of the advance plus a fee, where such account will be debited on or after a designated future date.

(c) **ESTABLISHMENT OF PROGRAM.**—The Secretary of the Treasury (referred to in this Act as the "Secretary") is authorized to award demonstration project grants (including multi-year grants) to eligible entities to provide low-cost, small loans to consumers that will provide alternatives to more costly, predatory payday loans.

(d) **ELIGIBLE ENTITIES.**—An entity is eligible to receive a grant under this Act if such an entity is—

(1) an organization described in section 501(c)(3) of the Internal Revenue Code of 1986 and exempt from tax under section 501(a) of such Code;

(2) a federally insured depository institution;

(3) a community development financial institution; or

(4) a partnership comprised of 1 or more of the entities described in paragraphs (1) through (3).

(e) APPLICATION.—An eligible entity desiring a grant under this Act shall submit an application to the Secretary in such form and containing such information as the Secretary may require.

(f) TERMS AND CONDITIONS.—

(1) PERCENTAGE RATE.—For purposes of this Act, an eligible entity that is a federally insured depository institution shall be subject to the annual percentage rate promulgated by the National Credit Union Administration's Loan Interest Rates under part 701 of title 12, Code of Federal Regulations in connection with a loan provided to a consumer pursuant to this Act.

(2) FINANCIAL LITERACY AND EDUCATION OPPORTUNITIES.—Each eligible entity awarded a grant under this Act shall offer financial literacy and education opportunities, such as relevant counseling services or educational courses, to each consumer provided with a loan pursuant to this Act.

(g) LIMITATION ON ADMINISTRATIVE COSTS.—Each eligible entity awarded a grant under this Act may use not more than 6 percent of the total amount of such grant in any fiscal year for the administrative costs of carrying out the programs funded by such grant in such fiscal year.

(h) EVALUATION AND REPORT.—For each fiscal year in which a grant is awarded under this Act, the Secretary shall submit a report to Congress containing a description of the activities funded, amounts distributed, and measurable results, as appropriate and available.

(i) REGULATIONS.—The Secretary is authorized to promulgate regulations to implement and administer the grant program under this Act.

(j) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to the Secretary, for the grant program described in this Act, such sums as may be necessary, which shall remain available until expended.

By Mr. KOHL:

S. 1348. A bill to amend chapter 111 of title 28, United States Code, relating to protective orders, sealing of cases, disclosures of discovery information in civil actions, and for other purposes; to the Committee on the Judiciary.

Mr. KOHL. Mr. President, I rise today to introduce the Sunshine in Litigation Act of 2005, a bill to curb the ongoing abuse of secrecy orders in Federal courts. The result of this abuse, which often comes in the form of sealed settlement agreements, is to keep important health and safety information from the public.

This problem has been recurring for decades, and most often arises in products liability cases. Typically, an individual brings a cause of action against a manufacturer for an injury or death that has resulted from a defect in one of its products. The plaintiff has limited resources and faces a corporation that can spend an unlimited amount of money on delay tactics. Facing a formidable opponent, plaintiffs are discouraged from continuing and often seek to settle the litigation. In exchange for the award he or she was seeking, the victim is forced to agree

to a provision that prohibits him or her from revealing information disclosed during the litigation.

While the plaintiff gets a respectable award and the defendant is able to keep damaging information from getting out, others are forced to pay the price. Because they remain unaware of critical public health and safety information that could potentially save lives, the American public incurs the greatest cost.

Currently, judges have broad discretion in granting protective orders when "good cause" is shown. Too much discretion, however, can sometimes lead to abuse. Tobacco companies, automobile manufacturers and pharmaceutical companies have settled with victims and used the legal system to hide information which, if it became public, could protect the American public. Surely, there are appropriate uses for such orders, like protecting trade secrets and other truly confidential company information. Our legislation makes sure such information is protected. But, protective orders are certainly not supposed to be used to hide public safety information from the public to protect a company's reputation or profit margin.

The most famous case of abuse involved Bridgestone/Firestone. From 1992-2000, tread separations of various Bridgestone and Firestone tires were causing accidents across the country, many resulting in serious injuries and even fatalities. Instead of owning up to their mistakes and acting responsibly, Bridgestone/Firestone quietly settled dozens of lawsuits, most of which included secrecy agreements. It wasn't until 1999, when a Houston public television station broke the story, that the company acknowledged its wrongdoing and recalled 6.5 million tires. By then, it was too late; too many unnecessary injuries and deaths had already occurred.

If the story ended there, and the Bridgestone/Firestone cases were just an aberration, maybe there would be no cause for concern. But, unfortunately, the list goes on. In January 2004, Jodie Lane was walking her dog in Manhattan when she slipped and fell on a Con Edison cable cover. She was electrocuted and killed. It has since been discovered that Con Edison has settled eleven similar cases, all involving secrecy agreements.

Then there is the case of General Motors ("GM"). Although an internal memo suggests that GM was aware of the risk of fire deaths from crashes of pickup trucks with "side saddle" fuel tanks, an estimated 750 people were killed in fires involving these fuel tanks. When victims sued, GM disclosed documents only under protective orders and settled these cases on the condition that the information in these documents remained secret. This type of fuel tank was installed for 15 years before being discontinued.

There are no records kept of the number of confidentiality orders ac-

cepted by state or federal courts. However, anecdotal evidence suggests that court secrecy and confidential settlements are prevalent. Beyond General Motors, Bridgestone/Firestone and Con Edison, secrecy agreements had real life consequences by allowing Dalkon Shield, Bjork-Shiley heart valves, and numerous other dangerous products to remain in the market. And those are only the ones we know about.

While some States have already begun to move in the right direction, we still have a long way to go. It is time to initiate a Federal solution for this problem. The Sunshine in Litigation Act is a modest proposal that would require Federal judges to perform a simple balancing test to ensure that the defendant's interest in secrecy truly outweighs the public interest in information related to public health and safety. Specifically, prior to making any portion of a case confidential or sealed, a judge would have to determine by making a particularized finding of fact—that doing so would not restrict the disclosure of information relevant to public health and safety. Moreover, all courts, both Federal and State, would be prohibited from issuing protective orders that prevent disclosure to relevant regulatory agencies.

This legislation does not prohibit secrecy agreements across the board. It does not place an undue burden on judges or our courts. It simply states that where the public interest in disclosure outweighs legitimate interests in secrecy, courts should not shield important health and safety information from the public. The time to focus some sunshine on public hazards to prevent future harm is now.

By Mr. SMITH (for himself and Mr. ROCKEFELLER):

S. 1349. A bill to promote deployment of competitive video services, eliminate redundant and unnecessary regulation, and further the development of next generation broadband networks; to the Committee on Commerce, Science, and Transportation.

Mr. SMITH. Mr. President, I rise today with Senator ROCKEFELLER to introduce the Video Choice Act of 2005. This bill will promote competition and help bring choice to consumers in the video market. In addition, the bill will further the development of next generation broadband networks and spur economic development in rural areas of the country, like Wallowa, OR.

A recent Government Accountability Office study underscores the benefits of competition in the video market. In August 2004, GAO concluded that cable rates are on average 15 percent lower in markets with a wire-based competitor to the incumbent cable operator. My legislation promotes competition and lowers rates by eliminating redundant and unnecessary video franchises.

Specifically, my legislation permits any company that has already obtained a franchise to build and operate a network to offer video services over that

network without obtaining a second, redundant franchise. These competitive video service providers will still be subject to the important social policy obligations of cable operators, including the obligation to pay fees to local governments; to comply with the retransmission consent and must-carry provisions of the Act; to carry public, educational, governmental and non-commercial, educational channels; to protect the privacy of subscribers and to comply with all statutory consumer protections and customer service requirements.

Importantly, my legislation also preserves State and local government authority to manage the public rights-of-way and to enact or enforce any consumer protection law. In so doing, we have ensured that local communities continue to play a meaningful role in the management of these networks.

We recognize that the video franchising process imposes burdens on cable operators and welcome the opportunity to investigate and address those concerns as this debate moves forward.

I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1349

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 "Video Choice Act of 2005".

SEC. 2. FINDINGS.

Congress finds the following:

(1) Cable rates continue to rise substantially faster than the overall rate of inflation.

(2) Wire-based competition in video services is limited to very few markets. According to the Federal Communications Commission, only 2 percent of all cable subscribers have the opportunity to choose between 2 or more wire-based video service providers.

(3) It is only through wire-based video competition that price competition exists. The Government Accountability Office has confirmed that where wire-based competition exists, cable rates are 15 percent lower than in markets without competition.

(4) It is in the public interest to further wire-based competition in the video services market in order to provide greater consumer choice and lower prices for video services.

(5) To spur competition in the communications industry, Congress has decreased the regulatory burden on new entrants, thereby increasing entry into the market and creating competition.

(6) The United States continues to fall behind in broadband deployment rates. According to a recent study by the International Telecommunications Union, the United States is now ranked 16th in the world in broadband deployment.

(7) The deployment of advanced high capacity networks would greatly spur economic development in rural America.

(8) The deployment of advanced networks that can offer substantially higher capacity are critical to the long-term competitiveness of the United States.

SEC. 3. AMENDMENT TO COMMUNICATIONS ACT.

Title VI of the Communication Act of 1934 (47 U.S.C. 521 et seq.) is amended by adding at the end the following:

"PART VI—VIDEO CHOICE

"SEC. 661. DEFINITION.

"In this part, the term 'competitive video services provider' means any provider of video programming, interactive on-demand services, other programming services, or any other video services who has any right, permission, or authority to access public rights-of-way independent of any cable franchise obtained pursuant to section 621 or pursuant to any other Federal, State, or local law.

"SEC. 662. REGULATORY FRAMEWORK.

"(a) REDUNDANT FRANCHISES PROHIBITED.—Notwithstanding any other provision of this Act, no competitive video services provider may be required, whether pursuant to section 621 or to any other provision of Federal, State, or local law, to obtain a franchise in order to provide any video programming, interactive on-demand services, other programming services, or any other video services in any area where such provider has any right, permission, or authority to access public rights-of-way independent of any cable franchise obtained pursuant to section 621 or pursuant to any other Federal, State, or local law.

"(b) FEES.—

"(1) IN GENERAL.—Any competitive video services provider who provides a service that otherwise would qualify as a cable service provided over a cable system shall be subject to the payment of fees to a local franchise authority based on the gross revenues of such provider that are attributable to the provision of such service within such provider's service area.

"(2) CONSIDERATIONS.—In determining the fees required by this subsection—

"(A)(i) the rate at which fees are imposed shall not exceed the rate at which franchise fees are imposed on any cable operator providing cable service in the franchise area, as determined in accordance with section 622 and any related regulations; or

"(ii) in any jurisdiction in which no cable operator provides service, the rate at which franchise fees are imposed shall not exceed the statewide average; and

"(B) the only revenues that shall be considered are those attributable to services that would be considered in calculating franchise fees if such provider were deemed a cable operator for purposes of section 622 and any related regulations.

"(3) BILLING.—A competitive video services provider shall designate that portion of the bill of a subscriber attributable to the fee under paragraph (2) as a separate item on the bill.

"(c) TERMS OF SERVICE.—A competitive video services provider shall—

"(1) be subject to the retransmission consent provisions of section 325(b);

"(2)(A) carry, within each local franchise area, any public, educational, or governmental use channels that are carried by cable operators within such franchise area pursuant to section 611; or

"(B) provide, in any jurisdiction in which no cable operator provides service, reasonable public, educational and government access facilities pursuant to section 611;

"(3) be subject to the must-carry provisions of section 614;

"(4) carry noncommercial, educational channels as required by section 615;

"(5) be considered a multichannel video programming distributor for purposes of section 628 and be entitled to the benefits and protection of that section;

"(6) protect the personally identifiable information of its subscribers as required in section 631;

"(7) comply with any consumer protection and customer service requirements promulgated by the Commission pursuant to section 632;

"(8) not be subject to any other provisions of this title; and

"(9) not deny services to any group of potential residential subscribers because of the income of the residents of the local area in which such group resides.

"(d) REGULATORY TREATMENT.—Except to the extent expressly provided in this part, neither the Commission nor any State or political subdivision thereof may regulate the rates, charges, terms, conditions for, entry into, exit from, deployment of, provision of, or any other aspect of the services provided by a competitive video services provider.

"(e) STATE AND LOCAL GOVERNMENT AUTHORITY.—Except as provided in subsection (a), nothing in this section affects the authority of a State or local government to manage the public rights-of-way or to enact or enforce any consumer protection law."

SEC. 4. REGULATION OF COMMON CARRIERS.

Section 651(a)(3) of the Federal Communications Act (47 U.S.C. 571(a)(3)) is amended—

(1) in subparagraph (A), by striking "or" after the semicolon;

(2) in subparagraph (B), by striking the period and inserting "; or"; and

(3) by adding at the end the following:

"(C) if such carrier is a competitive video services provider providing video programming pursuant to part VI of this title, such carrier shall not be subject to the requirements of this title but instead shall be subject only to the provisions of part VI of this title."

SEC. 5. EXISTING FRANCHISE AGREEMENTS.

Any franchise agreement entered into by a franchising authority and a competitive video service provider for the provision of video service prior to the date of enactment of this Act shall be exempt from the provisions of this Act for the term of such agreement.

Mr. ROCKEFELLER. Mr. President, I am pleased to join Senator SMITH in introducing the Video Choice Act of 2005. We believe that our bill will increase competition in the video marketplace and spur the deployment of advanced broadband networks.

Cable and telephone companies are competing to offer a bundle of Internet, video and telephone service to consumers. Cable companies are now offering telephone services. Cable companies offer both traditional telephone services over the public switched telephone network and recently have begun a major expansion into offering voice services over the internet. Congress, in an effort to spur entry into the voice market, decided to minimally regulate or deregulate cable companies' entry in these voice services.

As cable enters the voice market, it is driving prices down and creating innovative new voice services and products. At present, cable companies control nearly 70 percent of the multichannel video market and are not subject to effective price competition for video services. The Senate Commerce Committee, of which Senator SMITH and I are both members, spent much of the last Congress examining options to address the ever escalating price of cable television. I recognize that the cable industry has invested heavily in its networks and programming costs continue to rise, but I am hearing from some of my constituents that they feel

captive to the pricing decisions of their local cable company.

I believe the government should encourage facilities-based video competition. The Government Accountability Office has reported that in areas where cable faces competition from a facilities-based competitor, cable television prices are, on average, 15 percent less and as much as 41 percent less than in areas without effective competition.

To compete with cable, traditional telephone companies are slowly entering the video marketplace. Instead of offering video services over cable, the telephone companies will offer it over their high capacity fiber networks. Fiber-optic cables consist of bundles of hair-thin glass strands. Laser-generated pulses of light transmit voice, data, and video signals via the fiber at speeds and capacities far exceeding today's copper-cable systems. Fiber technology provides nearly unlimited capacity, as much as 20 times faster than today's fastest high-speed data connections.

Even more importantly, our bill would speed the deployment of super fast broadband networks. To offer video services, telephone companies will have to either lay fiber optic cables or develop other networks that have enough capacity to transmit hundreds of television channels. These networks will also be able to offer consumers the ability to receive and send vast amounts of data.

Our Nation continues a precipitous decline in the world's broadband deployment rate. As Asian countries develop broadband networks capable of delivering consumers 30 to 100 megabits of data, the United States falls further behind in deployment of next generation broadband technologies. The deployment of fiber optic or technologically equivalent networks would spur economic development as well as consumer choice in the cable television market.

I have worked for almost eight years on legislation to provide incentives to promote the deployment of next generation broadband technology and services. The Senate has adopted this measure numerous times, but because of opposition in the House of Representatives, it has never been enacted into law. We must examine other policies if we are to achieve universal broadband penetration. I believe that our legislation will serve as a catalyst for the deployment of next generation broadband networks that will bring enormous economic benefits to Americans, especially rural Americans.

I know that many local governments are concerned about changing the existing regulatory framework for video regulation. I recognize that municipal governments have an important role to play in the telecommunications debate. As a former governor, I am aware of the important local revenues that cable franchise fees provide local government in West Virginia and across the Nation. I have always supported

the local government's ability to collect local fees and taxes on telecommunications services, and I want to state that I will continue to do so.

Our legislation states that competitive video providers, as defined by the bill, do not have to secure a local franchise agreement to offer competitive video services. However, the legislation mandates that all vital social policy obligations of current cable television operators will also have to be met by the competitive video industry. First and foremost, our bill mandates that competitive video providers pay a franchise fee to the appropriate local government. This fee would be equal to the fee the incumbent video provider pays. Our bill also requires that competitive video providers carry all existing local public, educational, and government use channels; carry all local broadcast stations; carry all noncommercial, educational channels; adhere to strict consumer privacy obligations; and comply with all statutory consumer protections and customer service requirements. The bill explicitly prohibits economic redlining in the provision of competitive video services. Finally, the legislation explicitly states that nothing in the bill affects the authority of a State or local government to manage the public-rights-of-way or to enact or enforce any consumer protection law.

Senator SMITH and I have crafted a narrowly tailored bill to promote the entry of new competitors into the video marketplace. Our legislation balances the need to promote competition in this market with preserving the core social and policy obligations that we have always imposed on providers of video services.

In addition to promoting competition in the video marketplace, this bill gives us the opportunity to foster an exponential growth in advanced broadband networks. By having advanced communications networks that are exponentially faster than our existing networks, we will unleash our economic potential, especially in places like my home State of West Virginia.

Again, I would like to thank Senator SMITH for all of his hard work on this bill.

By Mr. SPECTER (for himself and Mrs. BOXER):

S. 1350. A bill to amend the Communications Act of 1934 to protect the privacy rights of subscribers to wireless communications services; to the Committee on Commerce, Science, and Transportation.

Mr. SPECTER. Mr. President, I seek recognition today to introduce the Wireless 411 Privacy Act. As every Senator is aware, consumers, today rely on their wireless telephones as a vital and important means of communication. Wireless telephones enable families to stay connected, permit commerce to be conducted anywhere at any time, and provide a vital link in the event of an emergency. Some people have even abandoned traditional telephones and

now use their wireless phones as their primary phone service. In fact, when I last introduced this bill in November 2003, the Federal Communications Commission began requiring number portability for wireless phones so that consumers, if they wish, can make their wireless phone their only phone.

The wireless industry is on the verge of introducing a "wireless white pages" service, and though this step could have positive benefits, it raises concerns about how consumers' expectation of privacy will be protected. The legislation I am introducing today, along with Senator BOXER, ensures that consumers' expectations will be preserved.

An important reason that Americans increasingly trust their cell phone service is that they have a great deal of privacy in their cell phone numbers. For more than 20 years of cellular service, consumers have become accustomed to not having their wireless phone numbers available to the public. The protection of wireless telephone numbers is important. For example, wireless customers are typically charged for incoming calls. Without protections for wireless numbers, subscribers could incur large bills, or use up their allotted minutes of use, simply by receiving calls they do not want—from telemarketers and others. Because consumers often take their cell phones with them everywhere, repeated unwanted calls are particularly disruptive, and may even present safety concerns for those behind the wheel.

Since 2003, four States—California, Georgia, South Dakota and Washington—have passed similar laws that prohibit a carrier from divulging a customer's wireless telephone number without permission. While the industry remains poised to introduce wireless directory assistance services as early as this year, it is important for Congress to act now to preserve the expectation of privacy that consumers across the country have in their wireless phone numbers. The legislation I am introducing today strikes an important balance by providing privacy protections that are important to consumers, while enabling those consumers who want to be reached to be accessible.

This legislation permits wireless subscribers to choose not to have their wireless telephone number listed in wireless directory assistance databases. This feature gives consumers the ultimate ability to keep their numbers entirely private. In addition to divulging subscribers' phone numbers, wireless directory assistance services may forward calls to wireless subscribers without prior notice or permission. My bill requires that these services must not divulge a subscriber's wireless number, unless the subscriber consents to disclosure, must provide identifying information to the wireless subscriber so that the subscriber knows who is calling through a forwarding service, and must give a subscriber the option

of rejecting or accepting each incoming call. Finally, this legislation prohibits wireless carriers from charging any special fees to consumers who wish to receive the privacy protections provided by the bill. There should be no "privacy tax" for consumers to continue the privacy protection they have long enjoyed, and this bill ensures that will be the case.

I urge my colleagues to join me in supporting this important legislation. I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1350

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 "Wireless 411 Privacy Act".

SEC. 2. FINDINGS.

Congress finds that—

(1) there are roughly 150 million wireless subscribers in the United States, up from approximately 15 million subscribers just a decade ago;

(2) wireless phone service has proven valuable to millions of Americans because of its mobility, and the fact that government policies have expanded opportunities for new carriers to enter the market, offering more choices and ever lower prices for consumers;

(3) in addition to the benefits of competition and mobility, subscribers also benefit from the fact that wireless phone numbers have not been publicly available;

(4) up until now, the privacy of wireless subscribers has been safeguarded and thus vastly diminished the likelihood of subscribers receiving unwanted or annoying phone call interruptions on their wireless phones;

(5) moreover, because their wireless contact information, such as their phone number, have never been publicly available in any published directory or from any directory assistance service, subscribers have come to expect that if their phone rings it's likely to be a call from someone to whom they have personally given their number;

(6) the wireless industry is poised to begin implementing a directory assistance service so that callers can reach wireless subscribers, including subscribers who have not given such callers their wireless phone number;

(7) while some wireless subscribers may find such directory assistance service useful, current subscribers deserve the right to choose whether they want to participate in such a directory;

(8) because wireless users are typically charged for incoming calls, consumers must be afforded the ability to maintain the maximum amount of control over how many calls they may expect to receive and, in particular, control over the disclosure of their wireless phone number;

(9) current wireless subscribers who elect to participate, or new wireless subscribers who decline to be listed, in any new wireless directory assistance service directory, including those subscribers who also elect not to receive forwarded calls from any wireless directory assistance service, should not be charged for exercising such rights;

(10) the marketplace has not yet adequately explained an effective plan to protect consumer privacy rights;

(11) Congress previously acted to protect the wireless location information of sub-

scribers by enacting prohibitions on the disclosure of such sensitive information without the express prior authorization of the subscriber; and

(12) the public interest would be served by similarly enacting effective and industry-wide privacy protections for consumers with respect to wireless directory assistance service.

SEC. 3. CONSUMER CONTROL OF WIRELESS PHONE NUMBERS.

Section 332(c) of the Communications Act of 1934 (47 U.S.C. 332(c)) is amended by adding at the end the following:

"(9) WIRELESS CONSUMER PRIVACY PROTECTION.—

"(A) IN GENERAL.—A provider of commercial mobile services, or any direct or indirect affiliate or agent of such a provider, may not include the wireless telephone number information of any subscriber in any wireless directory assistance service database unless—

"(i) the mobile service provider provides a conspicuous, separate notice to the subscriber informing the subscriber of the right not to be listed in any wireless directory assistance service; and

"(ii) the mobile service provider obtains express prior authorization for listing from such subscriber, separate from any authorization obtained to provide such subscriber with commercial mobile service, or any calling plan or service associated with such commercial mobile service, and such authorization has not been subsequently withdrawn.

"(B) COST-FREE DE-LISTING.—A provider of commercial mobile services, or any direct or indirect affiliate or agent of such a provider, shall remove the wireless telephone number information of any subscriber from any wireless directory assistance service database upon request by that subscriber and without any cost to the subscriber.

"(C) WIRELESS ACCESSIBILITY.—A provider of commercial mobile services, or any direct or indirect affiliate or agent of such a provider, may connect a calling party from a wireless directory assistance service to a commercial mobile service subscriber only if—

"(i) such subscriber is provided prior notice of the calling party's identity and is permitted to accept or reject the incoming call on a per-call basis;

"(ii) such subscriber's wireless telephone number information is not disclosed to the calling party; and

"(iii) such subscriber has not declined or refused to participate in such database.

"(D) PROTECTION OF WIRELESS PHONE NUMBERS.—A telecommunications carrier shall not disclose in its billing information provided to customers wireless telephone number information of subscribers who have indicated a preference to their commercial mobile services provider for not having their wireless telephone number information disclosed. Notwithstanding the preceding sentence, a telecommunications carrier may disclose a portion of the wireless telephone number in its billing information if the actual number cannot be readily ascertained.

"(E) PUBLICATION OF DIRECTORIES PROHIBITED.—A provider of commercial mobile services, or any direct or indirect affiliate or agent of such a provider, may not publish, in printed, electronic, or other form, or sell or otherwise disseminate, the contents of any wireless directory assistance service database, or any portion or segment thereof unless—

"(i) the mobile service provider provides a conspicuous, separate notice to the subscriber informing the subscriber of the right not to be listed; and

"(ii) the mobile service provider obtains express prior authorization for listing from such subscriber, separate from any author-

ization obtained to provide such subscriber with commercial mobile service, or any calling plan or service associated with such commercial mobile service, and such authorization has not been subsequently withdrawn.

"(F) NO CONSUMER FEE FOR RETAINING PRIVACY.—A provider of commercial mobile services may not charge any subscriber for exercising any of the rights under this paragraph.

"(G) STATE AND LOCAL LAWS PRE-EMPTED.—To the extent that any State or local government imposes requirements on providers of commercial mobile services, or any direct or indirect affiliate or agent of such providers, that are inconsistent with the requirements of this paragraph, this paragraph preempts such State or local requirements.

"(H) DEFINITIONS.—In this paragraph:

"(i) CALLING PARTY'S IDENTITY.—The term 'calling party's identity' means the telephone number of the calling party or the name of subscriber to such telephone, or an oral or text message which provides sufficient information to enable a commercial mobile services subscriber to determine who is calling.

"(ii) UNLISTED COMMERCIAL MOBILE SERVICES SUBSCRIBER.—The term 'unlisted commercial mobile services subscriber' means a subscriber to commercial mobile services who has not provided express prior consent to a commercial mobile service provider to be included in a wireless directory assistance service database.

"(iii) WIRELESS TELEPHONE NUMBER INFORMATION.—The term 'wireless telephone number information' means the telephone number, electronic address, and any other identifying information by which a calling party may reach a subscriber to commercial mobile services, and which is assigned by a commercial mobile service provider to such subscriber, and includes such subscriber's name and address.

"(iv) WIRELESS DIRECTORY ASSISTANCE SERVICE.—The term 'wireless directory assistance service' means any service for connecting calling parties to a subscriber of commercial mobile service when such calling parties themselves do not possess such subscriber's wireless telephone number information."

By Mrs. CLINTON:

S. 1351. A bill to amend title 10, United States Code, to provide for the award of a military service medal to members of the Armed Forces who served honorably during the Cold War era; to the Committee on Armed Services.

Mrs. CLINTON. Mr. President, I ask unanimous consent that a copy of the Cold War Medal Act of 2005, a bill to provide for the award of a military service medal to members of the Armed Forces who served honorably during the Cold War era, be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1351

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 "Cold War Medal Act of 2005".

SEC. 2. COLD WAR SERVICE MEDAL.

(a) AUTHORITY.—Chapter 57 of title 10, United States Code, is amended by adding at the end the following new section:

“§ 1135. Cold War service medal

“(a) MEDAL AUTHORIZED.—The Secretary concerned shall issue a service medal, to be known as the ‘Cold War service medal’, to persons eligible to receive the medal under subsection (b). The Cold War service medal shall be of an appropriate design approved by the Secretary of Defense, with ribbons, lapel pins, and other appurtenances.

“(b) ELIGIBLE PERSONS.—The following persons are eligible to receive the Cold War service medal:

“(1) A person who—

“(A) performed active duty or inactive duty training as an enlisted member during the Cold War;

“(B) completed the person’s initial term of enlistment or, if discharged before completion of such initial term of enlistment, was honorably discharged after completion of not less than 180 days of service on active duty; and

“(C) has not received a discharge less favorable than an honorable discharge or a release from active duty with a characterization of service less favorable than honorable.

“(2) A person who—

“(A) performed active duty or inactive duty training as a commissioned officer or warrant officer during the Cold War;

“(B) completed the person’s initial service obligation as an officer or, if discharged or separated before completion of such initial service obligation, was honorably discharged after completion of not less than 180 days of service on active duty; and

“(C) has not been released from active duty with a characterization of service less favorable than honorable and has not received a discharge or separation less favorable than an honorable discharge.

“(c) ONE AWARD AUTHORIZED.—Not more than one Cold War service medal may be issued to any person.

“(d) ISSUANCE TO REPRESENTATIVE OF DECEASED.—If a person described in subsection (b) dies before being issued the Cold War service medal, the medal shall be issued to the person’s representative, as designated by the Secretary concerned.

“(e) REPLACEMENT.—Under regulations prescribed by the Secretary concerned, a Cold War service medal that is lost, destroyed, or rendered unfit for use without fault or neglect on the part of the person to whom it was issued may be replaced without charge.

“(f) APPLICATION FOR MEDAL.—The Cold War service medal shall be issued upon receipt by the Secretary concerned of an application for such medal, submitted in accordance with such regulations as the Secretary prescribes.

“(g) UNIFORM REGULATIONS.—The Secretary of Defense shall ensure that regulations prescribed by the Secretaries of the military departments under this section are uniform so far as is practicable.

“(h) DEFINITION.—In this section, the term ‘Cold War’ means the period beginning on September 2, 1945, and ending at the end of December 26, 1991.”

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by adding at the end the following new item:

“1135. Cold War service medal.”

By Mr. SPECTER (for himself, Mr. KENNEDY, and Mr. JEFFORDS):

S. 1352. A bill to provide grants to States for improved workplace and community transition training for incarcerated youth offenders; to the Committee on Health, Education, Labor, and Pensions.

Mr. SPECTER. Mr. President, I have sought recognition today to introduce

the Improved Workplace and Community Transition Training for Incarcerated Youth Offenders Act of 2005, which is legislation designed to enhance educational opportunities and reduce recidivism for adult and juvenile offenders. Following the repeal of Pell Grant eligibility for incarcerated individuals, I worked to create the Grants to States for Workplace and Community Transition Training for Incarcerated Youth Offenders program. This program is aimed at providing postsecondary education and workplace and community transition training for incarcerated youth offenders while in prison, as well as employment counseling and other services that continue when the individual is released.

This legislation, which I am introducing today, builds upon my earlier efforts by increasing flexibility and accountability within the Grants to States for Workplace and Community Transition Training for Incarcerated Youth Offenders. This legislation is a positive step forward in providing realistic rehabilitation by increasing access to the current program for incarcerated youth offenders.

With over two million incarcerated adults, the United States has the highest incarceration rate in the world. The National Adult Literacy Study indicates that the majority of prison inmates either are illiterate or have marginal reading, writing, and math skills. This year more than 650,000 inmates will be released from United States prisons. Most of these adults and juveniles will leave correctional institutions having received little to no education and no more skilled than when they arrived. Frustrated by a lack of marketable skills, burdened with a criminal record, and released without transitional services, nearly two-thirds of released prisoners are re-arrested for either a felony or a serious misdemeanor within 3 years of release. It should come as no surprise that an individual who is released and who is illiterate or lacks the necessary skills to get a job returns to a life of crime.

The key to preventing recidivism has proven to be educational access and opportunity. A Correctional Educational Association report published findings from a study of education programs provided in correctional facilities. The findings show a remarkable decrease of approximately 10 percent in recidivism for those inmates that participated in education programs while incarcerated. The study also shows that the higher the education level reached by the offender, the lower the resulting recidivism rate.

Most incarcerated youth offenders will one day return back to their communities, so this legislation is about making sure they have an opportunity to turn their lives around before they are released. It is about focusing on literacy and job training in order to reduce recidivism and prevent incarcerated youth offenders from becoming career criminals. I believe that crimi-

nal offenders, especially juveniles, should be given a chance at rehabilitation and gainful employment. This chance can only come through education.

This legislation would authorize \$30 million to provide incarcerated youth offenders, up to 35 years of age who are eligible for parole or release within 5 years, an opportunity to acquire postsecondary education while incarcerated, as well as employment counseling and other services that continue for up to one year after the individual is released. Currently, the Grants to States for Workplace and Community Transition Training for Incarcerated Youth Offenders program provides formula grant funding to State correctional education agencies to provide postsecondary education and related services to incarcerated youth offenders up to 25 years of age. This legislation would increase eligibility for incarcerated youth offenders to individuals 35 years of age to allow more individuals to participate in the program, as the average age of inmates in most States is 35.

This legislation also aims to increase flexibility with regard to the delivery of postsecondary education and related services to incarcerated youth offenders. To that end, this legislation would raise the allowable expenditure permitted for each youth offender to the maximum Federal Pell Grant level. The current program limits expenditures per youth offender to \$1,500 for tuition and books, and an additional \$300 for related services. Under this legislation, State correctional education agencies have increased flexibility to address the unique needs of each inmate due to the elimination of the caps on funding, which currently dictate the specific amounts permitted to be used for tuition and books, and related services.

Additionally, this legislation requires State correctional education agencies to more thoroughly evaluate the effectiveness of the goals and objectives of the program by tracking and reporting specific and quantified student outcomes referenced to the outcomes of non-program participants. Increased accountability included in this legislation will allow a more in-depth study of the impact of education on key goals, such as, knowledge and skill attainment, employment attainment, job retention and advancement and recidivism rates.

Recognizing the impact that education and job training can have on incarcerated youth offenders, it is my sincere hope that this legislation will encourage incarcerated individuals to achieve independence and to gain the skills necessary to become productive members of society upon their release. With realistic rehabilitation, including literacy training and job training, we can stop the cycle of catch-and-release.

I urge my colleagues to join me in co-sponsoring this legislation, and urge its swift adoption.

By Mr. REID (for himself, Mr. WARNER, Ms. MURKOWSKI, Mr. COCHRAN, Mr. CORZINE, Ms. STABENOW, Mr. BINGAMAN, Mr. DURBIN, and Mr. VITTER):

S. 1353. A bill to amend the Public Health Service Act to provide for the establishment of an Amyotrophic Lateral Sclerosis Registry; to the Committee on Health, Education, Labor, and Pensions.

Mr. REID. Mr. President, I rise to introduce the ALS Registry Act. I am pleased that Senators WARNER, STABENOW, MURKOWSKI, BINGAMAN, COCHRAN, DURBIN, VITTER, and CORZINE are joining me as original cosponsors of this important legislation.

ALS is a fatal, progressive disease where the nerve cells that connect the brain and spinal cord to the muscles slowly die. As the disease progresses, patients slowly lose control of their muscles. Through it all, patients remain completely aware of what is happening to their bodies because ALS does not affect the mind. The harsh reality of ALS is that a person can expect to live on average only two to five years from the time the first signs of the disease appear.

Lou Gehrig brought Amyotrophic Lateral Sclerosis (ALS) to the public's attention more than 65 years ago and his courage put a human face on this terrible disease. Each of us has a Lou Gehrig back in our home State—someone who shows great courage in the face of ALS. Over the years, I have worked closely with the Nevada ALS Association and have met with many Nevadans who have been touched by this devastating illness. One of these Nevadans was a man by the name of Steve Rigazio who was invited to testify before the Labor/HHS/Education Appropriations Subcommittee in May of 2000. Steve was at the height of his career when he was diagnosed with ALS. He worked through the ranks of the Nevada Power Company, the largest utility company in the State, for 16 years until he became President. He coached and played recreational hockey and at one point played semi-pro baseball. After his diagnosis, Steve continued to show up at work at 6 a.m. for as long as he could. Steve Rigazio died of ALS on December 27, 2001 at the age of 47 and left behind a family that included a wife, two children and hundreds of friends. The ALS Steve Rigazio Voice of Courage Award was named in his honor as a living testimony to the life of this special man.

Sadly, every year approximately 5,600 Americans will learn they have ALS. There is no cure for ALS and there is only one FDA approved drug to specifically treat ALS. That drug extends life for only a few months and only works in 20 percent of patients.

ALS has proven particularly hard for scientists and doctors to tackle for a number of reasons; including the fact that there is also not a centralized place where data on the disease is collected and no one place for patients to

go to find out about clinical trials and new research findings. Currently, there is only a patchwork of data about ALS that does not include the entire U.S. population and only includes limited data for specific purposes, such as to determine the relationship between military service and the disease. Perhaps the most obvious example of the limitations of current surveillance systems and registries is that we do not know with certainty how many people are living with ALS in the United States today. Over 136 years after the discovery of ALS, estimates on its prevalence still vary by as much as 100 percent—from a low of about fifteen thousand patients to as many as thirty thousand.

The legislation I am introducing today would create an ALS registry at the Centers for Disease Control and Prevention and will aid in the search for a cure to this devastating disease. The registry will collect data concerning: the incidence and prevalence of ALS in the U.S.; the environmental and occupational factors that may contribute to the disease; the age, race or ethnicity, gender and family history of individuals diagnosed; and other information essential to the study of ALS. The registry will also provide a secure method to put patients in contact with scientists conducting clinical trials and scientists studying the environmental and genetic causes of ALS.

A national registry will help arm our Nation's researchers and clinicians with the tools and information they need to make progress in the fight against ALS. The data made available by a registry will potentially allow scientists to identify causes of the disease, and maybe even lead to the discovery of new treatment, a cure for ALS, or even a way to prevent the disease in the first place.

The establishment of a registry will bring new hope to thousands of patients and their families that ALS will no longer be a death sentence. No one wants to wait another 65 years before a cure is found. I urge my colleagues to support the swift passage of the ALS Registry Act.

I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1353

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 "ALS Registry Act".

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) Amyotrophic Lateral Sclerosis (referred to in this section as "ALS") is a fatal, progressive neurodegenerative disease that affects motor nerve cells in the brain and the spinal cord.

(2) The average life expectancy for a person with ALS is 2 to 5 years from the time of diagnosis.

(3) The cause of ALS is not well understood.

(4) There is only one drug currently approved by the Food and Drug Administration for the treatment of ALS, which has thus far shown only modest effects, prolonging life by just a few months.

(5) There is no known cure for ALS.

(6) More than 5,000 individuals in the United States are diagnosed with ALS annually and as many as 30,000 individuals may be living with ALS in the United States today.

(7) Studies have found relationships between ALS and environmental and genetic factors, but those relationships are not well understood.

(8) Scientists believe that there are significant ties between ALS and any motor neuron diseases.

(9) Several ALS disease registries and databases exist in the United States and throughout the world, including the SOD1 database, the National Institute of Neurological Disorders and Stroke repository, and the Department of Veterans Affairs ALS Registry;

(10) A single national system to collect and store information on the prevalence and incidence of ALS in the United States does not exist.

(11) The establishment of a national registry will help—

(A) identify the incidence and prevalence of ALS in the United States;

(B) collect data important to the study of ALS;

(C) promote a better understanding of ALS;

(D) promote research into the genetic and environmental factors that cause ALS;

(E) provide a means for patients to contact scientists researching the environmental and genetic factors that cause ALS as well as those engaged in clinical trials; and

(F) enhance efforts to find treatments and a cure for ALS.

SEC. 3. AMENDMENT TO THE PUBLIC HEALTH SERVICE ACT.

Part P of title III of the Public Health Service Act (42 U.S.C. 280g et seq.) is amended by adding at the end the following:

"SEC. 3990. AMYOTROPHIC LATERAL SCLEROSIS REGISTRY.

"(a) ESTABLISHMENT.—

"(1) IN GENERAL.—Not later than 6 months after the receipt of the report described in subsection (b)(2)(A), the Secretary, acting through the Director of the Centers for Disease Control and Prevention and in consultation with a national voluntary health organization with experience serving the population of individuals with amyotrophic lateral sclerosis (referred to in this section as "ALS"), shall—

"(A) develop a system to collect data on ALS, including information with respect to the incidence and prevalence of the disease in the United States; and

"(B) establish a national registry for the collection and storage of such data to include a population-based registry of cases of ALS in the United States.

"(2) PURPOSE.—It is the purpose of the registry established under paragraph (1)(B) to—

"(A) gather data concerning—

"(i) ALS, including the incidence and prevalence of ALS in the United States;

"(ii) the environmental and occupational factors that may be associated with the disease;

"(iii) the age, race or ethnicity, gender, and family history of individuals who are diagnosed with the disease; and

"(iv) other matters as recommended by the Advisory Committee established under subsection (b); and

"(B) establish a secure method to put patients in contact with scientists studying

the environmental, and genetic causes of motor neuron disease or conducting clinical trials on therapies for motor neuron disease.

“(b) ADVISORY COMMITTEE.—

“(1) ESTABLISHMENT.—Not later than 60 days after the date of the enactment of this section, the Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall establish a committee to be known as the Advisory Committee on the National ALS Registry (referred to in this section as the ‘Advisory Committee’). The Advisory Committee shall be composed of at least one member, to be appointed by the Secretary, acting through the Director of the Centers for Disease Control and Prevention, representing each of the following:

“(A) National voluntary health associations that focus solely on ALS that have a demonstrated experience in ALS research, care, and patient services.

“(B) The National Institutes of Health, to include, upon the recommendation of the Director of the National Institutes of Health, representatives from the National Institute of Neurological Disorders and Stroke and the National Institute of Environmental Health Sciences.

“(C) The Department of Veterans Affairs.

“(D) The Agency for Toxic Substances and Disease Registry.

“(E) The Centers for Disease Control and Prevention.

“(F) Patients with ALS or their family members.

“(G) Clinicians who have worked with data registries.

“(H) Epidemiologists with experience in data registries.

“(I) Geneticists or experts in genetics who have experience with the genetics of ALS or other neurological diseases.

“(J) Statisticians.

“(K) Ethicists.

“(L) Attorneys.

“(M) Other individuals with an interest in developing and maintaining the National ALS Registry

“(2) DUTIES.—The Advisory Committee shall conduct a study and make recommendations to the Secretary concerning—

“(A) the development and maintenance of the National ALS Registry;

“(B) the type of information to be collected and stored in the Registry;

“(C) the manner in which such data is to be collected;

“(D) the use and availability of such data including guidelines for such use; and

“(E) the collection of information about diseases and disorders that primarily affect motor neurons that are considered essential to furthering the study and cure of ALS.

“(3) REPORT.—Not later than 6 months after the date on which the Advisory Committee is established, the Advisory Committee shall submit a report concerning the study conducted under paragraph (2) that contains the recommendations of the Advisory Committee with respect to the results of such study.

“(c) GRANTS.—Notwithstanding the recommendations of the Advisory Committee under subsection (b), the Secretary, acting through the Director of the Centers for Disease Control and Prevention, may award grants to, and enter into contracts and cooperative agreements with, public or private nonprofit entities for the collection, analysis, and reporting of data on ALS.

“(d) COORDINATION WITH STATE, LOCAL, AND FEDERAL REGISTRIES.—

“(1) IN GENERAL.—In establishing the National ALS Registry under subsection (a), the Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall—

“(A) identify, build upon, expand, and coordinate among existing data and surveillance systems, surveys, registries, and other Federal public health and environmental infrastructure wherever possible, including—

“(i) the Department of Veterans Affairs ALS Registry;

“(ii) the DNA and Cell Line Repository of the National Institute of Neurological Disorders and Stroke Human Genetics Resource Center;

“(iii) Agency for Toxic Substances and Disease Registry studies, including studies conducted in Illinois, Missouri, El Paso and San Antonio Texas, and Massachusetts;

“(iv) State-based ALS registries, including the Massachusetts ALS Registry;

“(v) the National Vital Statistics System; and

“(vi) any other existing or relevant databases that collect or maintain information on those motor neuron diseases recommended by the Advisory Committee established in subsection (b); and

“(B) provide for public access to an electronic national database that accepts data from State-based registries, health care professionals, and others as recommended by the Advisory Committee established in subsection (b) in a manner that protects personal privacy consistent with medical privacy regulations.

“(2) COORDINATION WITH NIH AND DEPARTMENT OF VETERANS AFFAIRS.—Notwithstanding the recommendations of the Advisory Committee established in subsection (b), the Secretary shall ensure that epidemiological and other types of information obtained under subsection (a) is made available to the National Institutes of Health and the Department of Veterans Affairs.

“(e) DEFINITION.—For the purposes of this section, the term ‘national voluntary health association’ means a national non-profit organization with chapters or other affiliated organizations in States throughout the United States.

“(f) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section, \$25,000,000 for fiscal year 2006, and such sums as may be necessary for each of fiscal years 2007 through 2010.”

By Mr. FEINGOLD (for himself, Mr. GRASSLEY, Mr. KENNEDY, Mr. LIEBERMAN, Mr. CORZINE, and Mr. WYDEN):

S. 1354. A bill to establish commissions to review the facts and circumstances surrounding injustices suffered by European Americans, European Latin Americans, and Jewish refugees during World War II; to the Committee on the Judiciary.

Mr. FEINGOLD. Mr. President, today I introduce the Wartime Treatment Study Act. This bill would create two fact-finding commissions: one commission to review the U.S. government’s treatment of German Americans, Italian Americans, and European Latin Americans during World War II, and another commission to review the U.S. government’s treatment of Jewish refugees fleeing Nazi persecution during World War II. This bill is long overdue.

I am very pleased that my distinguished colleagues, Senators GRASSLEY, KENNEDY, LIEBERMAN, CORZINE and WYDEN, have joined me as cosponsors of this important bill. I thank them for their support.

The victory of America and its allies in the Second World War was a tri-

umph for freedom, justice, and human rights. The courage displayed by so many Americans, of all ethnic origins, should be a source of great pride for all Americans.

But, as so many brave Americans fought against enemies in Europe and the Pacific, the U.S. government was curtailing the freedom of people here at home. While, it is, of course, the right of every nation to protect itself during wartime, the U.S. government must respect the basic freedoms for which so many Americans have given their lives to defend. War tests our principles and our values. And as our nation’s recent experience has shown, it is during times of war and conflict, when our fears are high and our principles are tested most, that we must be even more vigilant to guard against violations of the Constitution or of basic freedoms.

Many Americans are aware of the fact that, during World War II, under the authority of Executive Order 9066, our government forced more than 100,000 ethnic Japanese from their homes into internment camps. Japanese Americans were forced to leave their homes, their livelihoods, and their communities and were held behind barbed wire and military guard by their own government. Through the work of the Commission on Wartime Relocation and Internment of Civilians, created by Congress in 1980, this shameful event finally received the official acknowledgement and condemnation it deserved. Under the Civil Liberties Act of 1988, people of Japanese ancestry who were subjected to relocation or internment later received an apology and reparations on behalf of the people of the United States.

While I commend our government for finally recognizing and apologizing for the mistreatment of Japanese Americans during World War II, I believe that it is time that the government also acknowledge the mistreatment experienced by many German Americans, Italian Americans, and European Latin Americans, as well as Jewish refugees.

The Wartime Treatment Study Act would create two independent, fact-finding commissions to review this unfortunate history, so that Americans can understand why it happened and work to ensure that it never happens again. One commission will review the treatment by the U.S. government of German Americans, Italian Americans, and other European Americans, as well as European Latin Americans, during World War II.

I believe that most Americans are unaware that, as was the case with Japanese Americans, approximately 11,000 ethnic Germans, 3,200 ethnic Italians, and scores of Bulgarians, Hungarians, Romanians or other European Americans living in America were taken from their homes and placed in internment camps during World War II. We must learn from our history and explore why we turned on our fellow Americans and failed to protect basic freedoms.

A second commission created by this bill will review the treatment by the U.S. government of Jewish refugees who were fleeing Nazi persecution and genocide. We must review the facts and determine how our restrictive immigration policies failed to provide adequate safe harbor to Jewish refugees fleeing the persecution of Nazi Germany. The United States turned away thousands of refugees, delivering many refugees to their deaths at the hands of the Nazi regime.

As I mentioned earlier, there has been a measure of justice for Japanese Americans who were denied their liberty and property. It is now time for the U.S. government to complete an accounting of this period in our nation's history. It is time to create independent, fact-finding commissions to conduct a full and thorough review of the treatment of all European Americans, European Latin Americans, and Jewish refugees during World War II.

Up to this point, there has been no justice for the thousands of German Americans, Italian Americans, and other European Americans who were branded "enemy aliens" and then taken from their homes, subjected to curfews, limited in their travel, deprived of their personal property, and, in the worst cases, placed in internment camps.

There has been no justice for Latin Americans of European descent who were shipped to the United States and sometimes repatriated or deported to hostile, war-torn European Axis powers, often in exchange for Americans being held in those countries.

Finally, there has been no justice for the thousands of Jews, like those aboard the German vessel the *St. Louis*, who sought refuge from hostile Nazi treatment but were callously turned away at America's shores.

Although the injustices to European Americans, European Latin Americans, and Jewish refugees occurred fifty years ago, it is never too late for Americans to learn from these tragedies. We should never allow this part of our Nation's history to repeat itself. And, while we should be proud of our Nation's triumph in World War II, we should not let that justifiable pride blind us to the treatment of some Americans by their own government.

I urge my colleagues to join me in supporting the Wartime Treatment Study Act. It is time for a full accounting of this tragic chapter in our nation's history.

I ask that the full text of the Wartime Treatment Study Act be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1354

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 "Wartime Treatment Study Act".

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) During World War II, the United States successfully fought the spread of Nazism and fascism by Germany, Italy, and Japan.

(2) Nazi Germany persecuted and engaged in genocide against Jews and certain other groups. By the end of the war, 6,000,000 Jews had perished at the hands of Nazi Germany. United States Government policies, however, restricted entry to the United States to Jewish and other refugees who sought safety from Nazi persecution.

(3) While we were at war, the United States treated the Japanese American, German American, and Italian American communities as suspect.

(4) The United States Government should conduct an independent review to assess fully and acknowledge these actions. Congress has previously reviewed the United States Government's wartime treatment of Japanese Americans through the Commission on Wartime Relocation and Internment of Civilians. An independent review of the treatment of German Americans and Italian Americans and of Jewish refugees fleeing persecution and genocide has not yet been undertaken.

(5) During World War II, the United States Government branded as "enemy aliens" more than 600,000 Italian-born and 300,000 German-born United States resident aliens and their families and required them to carry Certificates of Identification, limited their travel, and seized their personal property. At that time, these groups were the two largest foreign-born groups in the United States.

(6) During World War II, the United States Government arrested, interned or otherwise detained thousands of European Americans, some remaining in custody for years after cessation of World War II hostilities, and repatriated, exchanged, or deported European Americans, including American-born children, to hostile, war-torn European Axis nations, many to be exchanged for Americans held in those nations.

(7) Pursuant to a policy coordinated by the United States with Latin American countries, many European Latin Americans, including German and Austrian Jews, were captured, shipped to the United States and interned. Many were later expatriated, repatriated or deported to hostile, war-torn European Axis nations during World War II, most to be exchanged for Americans and Latin Americans held in those nations.

(8) Millions of European Americans served in the armed forces and thousands sacrificed their lives in defense of the United States.

(9) The wartime policies of the United States Government were devastating to the Italian Americans and German American communities, individuals and their families. The detrimental effects are still being experienced.

(10) Prior to and during World War II, the United States restricted the entry of Jewish refugees who were fleeing persecution and sought safety in the United States. During the 1930's and 1940's, the quota system, immigration regulations, visa requirements, and the time required to process visa applications affected the number of Jewish refugees, particularly those from Germany and Austria, who could gain admittance to the United States.

(11) Time is of the essence for the establishment of commissions, because of the increasing danger of destruction and loss of relevant documents, the advanced age of potential witnesses and, most importantly, the advanced age of those affected by the United States Government's policies. Many who suffered have already passed away and will never know of this effort.

SEC. 3. DEFINITIONS.

In this Act:

(1) DURING WORLD WAR II.—The term "during World War II" refers to the period between September 1, 1939, through December 31, 1948.

(2) EUROPEAN AMERICANS.—

(A) IN GENERAL.—The term "European Americans" refers to United States citizens and permanent resident aliens of European ancestry, including Italian Americans, German Americans, Hungarian Americans, Romanian Americans, and Bulgarian Americans.

(B) ITALIAN AMERICANS.—The term "Italian Americans" refers to United States citizens and permanent resident aliens of Italian ancestry.

(C) GERMAN AMERICANS.—The term "German Americans" refers to United States citizens and permanent resident aliens of German ancestry.

(3) EUROPEAN LATIN AMERICANS.—The term "European Latin Americans" refers to persons of European ancestry, including Italian or German ancestry, residing in a Latin American nation during World War II.

TITLE I—COMMISSION ON WARTIME TREATMENT OF EUROPEAN AMERICANS

SEC. 101. ESTABLISHMENT OF COMMISSION ON WARTIME TREATMENT OF EUROPEAN AMERICANS.

(a) IN GENERAL.—There is established the Commission on Wartime Treatment of European Americans (referred to in this title as the "European American Commission").

(b) MEMBERSHIP.—The European American Commission shall be composed of 7 members, who shall be appointed not later than 90 days after the date of enactment of this Act as follows:

(1) Three members shall be appointed by the President.

(2) Two members shall be appointed by the Speaker of the House of Representatives, in consultation with the minority leader.

(3) Two members shall be appointed by the majority leader of the Senate, in consultation with the minority leader.

(c) TERMS.—The term of office for members shall be for the life of the European American Commission. A vacancy in the European American Commission shall not affect its powers, and shall be filled in the same manner in which the original appointment was made.

(d) REPRESENTATION.—The European American Commission shall include 2 members representing the interests of Italian Americans and 2 members representing the interests of German Americans.

(e) MEETINGS.—The President shall call the first meeting of the European American Commission not later than 120 days after the date of enactment of this Act.

(f) QUORUM.—Four members of the European American Commission shall constitute a quorum, but a lesser number may hold hearings.

(g) CHAIRMAN.—The European American Commission shall elect a Chairman and Vice Chairman from among its members. The term of office of each shall be for the life of the European American Commission.

(h) COMPENSATION.—

(1) IN GENERAL.—Members of the European American Commission shall serve without pay.

(2) REIMBURSEMENT OF EXPENSES.—All members of the European American Commission shall be reimbursed for reasonable travel and subsistence, and other reasonable and necessary expenses incurred by them in the performance of their duties.

SEC. 102. DUTIES OF THE EUROPEAN AMERICAN COMMISSION.

(a) IN GENERAL.—It shall be the duty of the European American Commission to review

the United States Government's wartime treatment of European Americans and European Latin Americans as provided in subsection (b).

(b) **SCOPE OF REVIEW.**—The European American Commission's review shall include the following:

(1) A comprehensive review of the facts and circumstances surrounding United States Government actions during World War II that violated the civil liberties of European Americans and European Latin Americans pursuant to the Alien Enemies Acts (50 U.S.C. 21-24), Presidential Proclamations 2526, 2527, 2655, 2662, Executive Orders 9066 and 9095, and any directive of the United States Government pursuant to such law, proclamations, or executive orders respecting the registration, arrest, exclusion, internment, exchange, or deportation of European Americans and European Latin Americans. This review shall include an assessment of the underlying rationale of the United States Government's decision to develop related programs and policies, the information the United States Government received or acquired suggesting the related programs and policies were necessary, the perceived benefit of enacting such programs and policies, and the immediate and long-term impact of such programs and policies on European Americans and European Latin Americans and their communities.

(2) A review of United States Government action with respect to European Americans pursuant to the Alien Enemies Acts (50 U.S.C. 21-24) and Executive Order 9066 during World War II, including registration requirements, travel and property restrictions, establishment of restricted areas, raids, arrests, internment, exclusion, policies relating to the families and property that excluded and internees were forced to abandon, internment employment by American companies (including a list of such companies and the terms and type of employment), exchange, repatriation, and deportation, and the immediate and long-term effect of such actions, particularly internment, on the lives of those affected. This review shall include a list of all temporary detention and long-term internment facilities.

(3) A brief review of the participation by European Americans in the United States Armed Forces including the participation of European Americans whose families were excluded, interned, repatriated, or exchanged.

(4) A recommendation of appropriate remedies, including how civil liberties can be better protected during war, or an actual, attempted, or threatened invasion or incursion, an assessment of the continued viability of the Alien Enemies Acts (50 U.S.C. 21-24), and public education programs related to the United States Government's wartime treatment of European Americans and European Latin Americans during World War II.

(c) **FIELD HEARINGS.**—The European American Commission shall hold public hearings in such cities of the United States as it deems appropriate.

(d) **REPORT.**—The European American Commission shall submit a written report of its findings and recommendations to Congress not later than 18 months after the date of the first meeting called pursuant to section 101(e).

SEC. 103. POWERS OF THE EUROPEAN AMERICAN COMMISSION.

(a) **IN GENERAL.**—The European American Commission or, on the authorization of the Commission, any subcommittee or member thereof, may, for the purpose of carrying out the provisions of this title, hold such hearings and sit and act at such times and places, and request the attendance and testimony of such witnesses and the production of such books, records, correspondence, memo-

randum, papers, and documents as the Commission or such subcommittee or member may deem advisable. The European American Commission may request the Attorney General to invoke the aid of an appropriate United States district court to require, by subpoena or otherwise, such attendance, testimony, or production.

(b) **GOVERNMENT INFORMATION AND COOPERATION.**—The European American Commission may acquire directly from the head of any department, agency, independent instrumentality, or other authority of the executive branch of the Government, available information that the European American Commission considers useful in the discharge of its duties. All departments, agencies, and independent instrumentalities, or other authorities of the executive branch of the Government shall cooperate with the European American Commission and furnish all information requested by the European American Commission to the extent permitted by law, including information collected as a result of Public Law 96-317 and Public Law 106-451. For purposes of the Privacy Act (5 U.S.C. 552a(b)(9)), the European American Commission shall be deemed to be a committee of jurisdiction.

SEC. 104. ADMINISTRATIVE PROVISIONS.

The European American Commission is authorized to—

(1) appoint and fix the compensation of such personnel as may be necessary, without regard to the provisions of title 5, United States Code, governing appointments in the competitive service, and without regard to the provisions of chapter 51 and subchapter III of chapter 53 of such title relating to classification and General Schedule pay rates, except that the compensation of any employee of the Commission may not exceed a rate equivalent to the rate payable under GS-15 of the General Schedule under section 5332 of such title;

(2) obtain the services of experts and consultants in accordance with the provisions of section 3109 of such title;

(3) obtain the detail of any Federal Government employee, and such detail shall be without reimbursement or interruption or loss of civil service status or privilege;

(4) enter into agreements with the Administrator of General Services for procurement of necessary financial and administrative services, for which payment shall be made by reimbursement from funds of the Commission in such amounts as may be agreed upon by the Chairman of the Commission and the Administrator;

(5) procure supplies, services, and property by contract in accordance with applicable laws and regulations and to the extent or in such amounts as are provided in appropriation Acts; and

(6) enter into contracts with Federal or State agencies, private firms, institutions, and agencies for the conduct of research or surveys, the preparation of reports, and other activities necessary to the discharge of the duties of the Commission, to the extent or in such amounts as are provided in appropriation Acts.

SEC. 105. FUNDING.

Of the amounts authorized to be appropriated to the Department of Justice, \$500,000 shall be available to carry out this title.

SEC. 106. SUNSET.

The European American Commission shall terminate 60 days after it submits its report to Congress.

TITLE II—COMMISSION ON WARTIME TREATMENT OF JEWISH REFUGEES

SEC. 201. ESTABLISHMENT OF COMMISSION ON WARTIME TREATMENT OF JEWISH REFUGEES.

(a) **IN GENERAL.**—There is established the Commission on Wartime Treatment of Jewish Refugees (referred to in this title as the "Jewish Refugee Commission").

(b) **MEMBERSHIP.**—The Jewish Refugee Commission shall be composed of 7 members, who shall be appointed not later than 90 days after the date of enactment of this Act as follows:

(1) Three members shall be appointed by the President.

(2) Two members shall be appointed by the Speaker of the House of Representatives, in consultation with the Minority Leader.

(3) Two members shall be appointed by the Majority Leader of the Senate, in consultation with the minority leader.

(c) **TERMS.**—The term of office for members shall be for the life of the Jewish Refugee Commission. A vacancy in the Jewish Refugee Commission shall not affect its powers, and shall be filled in the same manner in which the original appointment was made.

(d) **REPRESENTATION.**—The Jewish Refugee Commission shall include 2 members representing the interests of Jewish refugees.

(e) **MEETINGS.**—The President shall call the first meeting of the Jewish Refugee Commission not later than 120 days after the date of enactment of this Act.

(f) **QUORUM.**—Four members of the Jewish Refugee Commission shall constitute a quorum, but a lesser number may hold hearings.

(g) **CHAIRMAN.**—The Jewish Refugee Commission shall elect a Chairman and Vice Chairman from among its members. The term of office of each shall be for the life of the Jewish Refugee Commission.

(h) **COMPENSATION.**—

(1) **IN GENERAL.**—Members of the Jewish Refugee Commission shall serve without pay.

(2) **REIMBURSEMENT OF EXPENSES.**—All members of the Jewish Refugee Commission shall be reimbursed for reasonable travel and subsistence, and other reasonable and necessary expenses incurred by them in the performance of their duties.

SEC. 202. DUTIES OF THE JEWISH REFUGEE COMMISSION.

(a) **IN GENERAL.**—It shall be the duty of the Jewish Refugee Commission to review the United States Government's refusal to allow Jewish and other refugees fleeing persecution in Europe entry to the United States as provided in subsection (b).

(b) **SCOPE OF REVIEW.**—The Jewish Refugee Commission's review shall cover the period between January 1, 1933, through December 31, 1945, and shall include, to the greatest extent practicable, the following:

(1) A review of the United States Government's refusal to allow Jewish and other refugees fleeing persecution and genocide entry to the United States, including a review of the underlying rationale of the United States Government's decision to refuse the Jewish and other refugees entry, the information the United States Government received or acquired suggesting such refusal was necessary, the perceived benefit of such refusal, and the impact of such refusal on the refugees.

(2) A review of Federal refugee policy relating to those fleeing persecution or genocide, including recommendations for making it easier for future victims of persecution or genocide to obtain refuge in the United States.

(c) **FIELD HEARINGS.**—The Jewish Refugee Commission shall hold public hearings in such cities of the United States as it deems appropriate.

(d) REPORT.—The Jewish Refugee Commission shall submit a written report of its findings and recommendations to Congress not later than 18 months after the date of the first meeting called pursuant to section 201(e).

SEC. 203. POWERS OF THE JEWISH REFUGEE COMMISSION.

(a) IN GENERAL.—The Jewish Refugee Commission or, on the authorization of the Commission, any subcommittee or member thereof, may, for the purpose of carrying out the provisions of this title, hold such hearings and sit and act at such times and places, and request the attendance and testimony of such witnesses and the production of such books, records, correspondence, memorandum, papers, and documents as the Commission or such subcommittee or member may deem advisable. The Jewish Refugee Commission may request the Attorney General to invoke the aid of an appropriate United States district court to require, by subpoena or otherwise, such attendance, testimony, or production.

(b) GOVERNMENT INFORMATION AND CO-OPERATION.—The Jewish Refugee Commission may acquire directly from the head of any department, agency, independent instrumentality, or other authority of the executive branch of the Government, available information that the Jewish Refugee Commission considers useful in the discharge of its duties. All departments, agencies, and independent instrumentalities, or other authorities of the executive branch of the Government shall cooperate with the Jewish Refugee Commission and furnish all information requested by the Jewish Refugee Commission to the extent permitted by law, including information collected as a result of Public Law 96-317 and Public Law 106-451. For purposes of the Privacy Act (5 U.S.C. 552a(b)(9)), the Jewish Refugee Commission shall be deemed to be a committee of jurisdiction.

SEC. 204. ADMINISTRATIVE PROVISIONS.

The Jewish Refugee Commission is authorized to—

(1) appoint and fix the compensation of such personnel as may be necessary, without regard to the provisions of title 5, United States Code, governing appointments in the competitive service, and without regard to the provisions of chapter 51 and subchapter III of chapter 53 of such title relating to classification and General Schedule pay rates, except that the compensation of any employee of the Commission may not exceed a rate equivalent to the rate payable under GS-15 of the General Schedule under section 5332 of such title;

(2) obtain the services of experts and consultants in accordance with the provisions of section 3109 of such title;

(3) obtain the detail of any Federal Government employee, and such detail shall be without reimbursement or interruption or loss of civil service status or privilege;

(4) enter into agreements with the Administrator of General Services for procurement of necessary financial and administrative services, for which payment shall be made by reimbursement from funds of the Commission in such amounts as may be agreed upon by the Chairman of the Commission and the Administrator;

(5) procure supplies, services, and property by contract in accordance with applicable laws and regulations and to the extent or in such amounts as are provided in appropriation Acts; and

(6) enter into contracts with Federal or State agencies, private firms, institutions, and agencies for the conduct of research or surveys, the preparation of reports, and other activities necessary to the discharge of the duties of the Commission, to the extent

or in such amounts as are provided in appropriation Acts.

SEC. 205. FUNDING.

Of the amounts authorized to be appropriated to the Department of Justice, \$500,000 shall be available to carry out this title.

SEC. 206. SUNSET.

The Jewish Refugee Commission shall terminate 60 days after it submits its report to Congress.

By Mr. ENZI (for himself, Mr. KENNEDY, Mr. GRASSLEY, Mr. BAUCUS, Mr. DODD, Mr. ALEXANDER, Mr. HARKIN, Mr. ISAKSON, Ms. MIKULSKI, Mr. DEWINE, Mr. JEFFORDS, Mr. HATCH, Mrs. MURRAY, Mr. REED, Mr. ALLEN, Mr. BURNS, Mr. CRAPO, Mr. DEMINT, Mr. SANTORUM, Mr. THOMAS, and Ms. CANTWELL):

S. 1355. A bill to enhance the adoption of health information technology and to improve the quality and reduce the costs of healthcare in the United States; to the Committee on Health, Education, Labor, and Pensions.

Mr. ENZI. Mr. President, no matter who we are, where we live or which Party we belong to, one thing we have in common is that all of us have been and will again be patients under the care of a health professional who we may, or may not, have visited before for treatment.

If we have already established a relationship with the doctor who is about to treat us, our problems will either be minimized, or will not exist. But, if this is our first experience with a physician or a specialist, how can we be certain that he or she has all the information that is necessary to prescribe a course of treatment and begin our care?

These are the kind of thoughts that run through every patient's mind as we sit in the waiting room, wondering if the high tech equipment that surrounds us is also reflected in our physician's access to our lab reports and previous examinations. In other words, is there any way for our doctors to get to know us, before we've even set foot in their examining room?

It's ironic that we live in a world where the latest news, sports and weather can make their way from the either side of the world to our computers and television sets as it happens. Our financial information is kept by our banks and is updated continuously throughout the day and is available to us almost instantaneously. Our medical records, however, are still kept the old fashioned way, on paper, and filed away. It is a tedious system, built the old fashioned way, because that's the way it was always done. Well, I am here to announce that the time has come to move to a newer, faster and more reliable system. Imagine a medical network that will reduce errors, help to lower costs and improve the quality of care we receive, all at the same time, by providing a treating physician with the information he needs immediately at the point of care.

Is it possible—yes! Then why hasn't it happened yet?

Why is our medical system surging ahead in the kinds of technology that are available to diagnose and treat disease, when, at the same time, it is falling further and further behind in the creation of electronic medical records and the ability to share that information with health care providers who need that material to make what can all too often be life and death decisions?

Clearly, something has to change when I can carry a fob on my key chain that provides my local gas station owner with instant access to my credit information so I can buy fuel for my car, but providing access to my medical records to my doctor is a much longer and tedious process. This needs to change and it needs to change now.

We can all see how the information revolution has had a dramatic impact on virtually every industry in the United States. Its ability to promote efficiency has helped to reduce costs and increase effectiveness wherever it has been applied. It is now time to bring that technology to bear on our healthcare system.

At present, healthcare expenditures are growing faster than the overall economy. In 2003, we spent more than \$1.7 trillion on healthcare. By 2014, that number is expected to reach \$3.1 trillion. Clearly we need to find ways to increase the efficiency of our health care system and reduce the costs associated with it.

We have all heard it said that, when it comes to our health care system, you can't maintain the current standards of quality and control or reduce costs at the same time. While the implementation of a health information technology system may not dramatically reduce costs, it will help move us further down the road of controlling costs.

If we could manage a quick trip to the future, and pay a visit to the doctor's office when a health information technology system is put in place, we would see some dramatic changes have been made in the ability of our doctor to diagnose, treat and provide warnings of current and future medical problems.

In that future, when I arrived at my new doctor's office I gave the nurse at the front desk my key fob. She took a moment to swipe it past their computer access link. It is soon downloading my medical information and compiling a "health report" that focuses on any trends that are developing as the previous results of my examinations are charted and compared.

Then, as I sit in the waiting room, my physician is already consulting those records and monitoring my current and previous test results which are presented to him in the form of a graph that he has pulled up on his computer screen. With the simple swipe of a mechanical key my future doctor has

been able to unlock my complete medical history, and examined the results of all the tests I had taken over the years, regardless of where I had received care.

If my doctor was concerned about my cholesterol level, for example, he or she could pull up a complete history of blood tests that will enable my physician to track my blood chemistry and note any changes in my cholesterol level over the years.

Later, if my doctor considers writing a prescription for a new drug or medication, he will have the ability to first view all medications I am currently taking in order to make an informed decision regarding any potentially dangerous interactions or adverse side effects that might occur as a result of the new prescription.

Such a system will enable doctors to spend less time gathering information and quizzing patients about past health problems and spend more time listening to patients and ensuring their health care needs are met.

President Bush and Secretary of the Department of Health and Human Services Michael Leavitt have made their support for this clear. They recognize that the increased use of health information technology has the potential of saving this country billions of dollars that are now spent on duplicative tests, unnecessary inpatient admissions, and the costs associated with adverse drug effects. Some estimates suggest that, when an information technology system is established and put into operation, for each dollar we spend on this new technology we will save as much as four dollars in reduced costs. In a system with such high, increasing costs every dollar we can save is magnified.

Fortunately, this is not something that will have to wait for someday until it is technologically possible and practical. There are already medical pioneers in the field who are putting the tools together and working on the network that will be needed to provide for rapid and complete transmission of our medical history when it is needed. One of these innovators currently lives in my home State of Wyoming, in Big Piney, in fact.

The story of Dr. William Close is quite a remarkable one. With a wide and varied background that includes his love for the outdoors and a taste for classical music, Dr. Close has spent his life ensuring that the latest possible technologies were being used to address the health care needs of people all over the world.

Prior to settling down in Wyoming, Dr. Close spent 16 years in Africa battling the illnesses and dealing with the medical problems faced by a nation with a large population of patients, and not enough doctors to go around. His first year there he was one of only three doctors in a 2,000-bed hospital.

It was during those days that Dr. Close determined to find a way to bring the tools of modern technology to the

diagnosis and treatment of disease. Faced with such a huge patient population, he needed a tool that would make the compiling of information and its interpretation easier.

His work led to the creation of a unique software that enabled a doctor to input a series of symptoms and come up with a possible diagnosis. It turned out to be such a valuable tool that it was able to be used on Palm Pilots, which made it an invaluable program for use on our Navy subs.

Upon his return to the United States he continued to work on the development of his computer application so he could track a patient's medical history over several visits, rather than focus on each appointment as a unique set of data. That enabled Dr. Close to spot problems before they became serious and to treat trends before they became life threatening.

Dr. Close has now logged more than 50 years of medical practice and, although he's officially retired, he still finds time to see patients in his office. He still makes house calls, too. That's a rare thing in most States, but a welcome part of life in Wyoming. He continues to work at what he calls his "gentle, limited practice" as he continues to provide an example for other health care providers and health information systems on how to maximize health care choices and treatments for his patients by getting to know the needs of his patients, by tracking their past history so he can help create a plan that will minimize a patient's risk for future health problems.

These are the kinds of things that are possible, if we commit to working together with our nation's health care providers to establish a network of information that will address the needs of the people of our country. I have been pleased to work with my ranking member on the HELP Committee, Senator KENNEDY, and the chair and ranking member of the Finance Committee, Senators GRASSLEY and BAUCUS, on this and other complementary legislation that will promote the use of health information technology today, not tomorrow. We have been putting a considerable amount of time and effort into the crafting of these bills to ensure that they will increase efficiencies, make our health care system more effective and responsive, and provide better care to us all as patients.

I mention the effect our bills will have on individuals because, as with most changes to our health care system, how well the system will work is ultimately determined by how well it works for those who rely on it.

For most Americans, their first and primary concern is the privacy of their records. That is an important provision of the bill and we have included strong language to ensure the privacy and security protection patients were guaranteed under HIPAA, the Health Insurance Portability and Accountability Act, are preserved. As that medical oath says so well, first, do no harm.

At present, most of our medical records are kept by well meaning physicians who, unfortunately, are known for having illegible handwriting. Some of their handwriting is worse than my own. A computerized record will eliminate that problem and provide clear, easily read and interpreted medical data to those who will need it to prescribe a course of treatment.

As with most things, there will be a great deal of concern about the system's cost and the availability of funds to pay for it. Our legislation will award competitive, matching grants to healthcare providers, states and academic programs to facilitate the purchase and enhance the utilization of qualified health information technology.

In the months to come, we will continue to encourage the participation of the private sector in this effort. They have asked for, and I believe they deserve, a seat at the table when standards are being determined and policies are being implemented. There is no question that some of them are closest to the problem at hand and their experience, ideas, and suggestions for innovation will be invaluable as we pursue the implementation of this new technology nationwide.

Secretary Leavitt recently announced the formation of what he is calling the American Health Information Community. He will chair this 17-member public-private collaborative that will help facilitate a nationwide transition to electronic health records, including common standards and interoperability, in a smooth, market-led way. I share his support for such an approach and his efforts to make it a reality.

The implementation of this new technology will make the sharing of health information more efficient between doctors and health professionals. And, most importantly, it will help to make our health care system more effective and provide better care to those who make use of it. It will also help to begin the vital process of controlling health care costs, something we must set as a goal and begin to achieve in the time before us.

This is a vital step in that process. With it, we can continue to make health care services more affordable and available. Without it we run the risk of having the best health care system in the world, with few among us able to afford taking full advantage of it.

I look forward to working with all my colleagues in the months ahead to ensure that meaningful health information technology legislation is signed into law later this year.

I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1355

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 “Better Healthcare Through Information Technology Act”.

SEC. 2. IMPROVING HEALTHCARE, QUALITY, SAFETY, AND EFFICIENCY.

The Public Health Service Act (42 U.S.C. 201 et seq.) is amended by adding at the end the following:

“TITLE XXIX—HEALTH INFORMATION TECHNOLOGY**“SEC. 2901. PURPOSES.**

“It is the purpose of this title to improve the quality, safety, and efficiency of healthcare by—

“(1) protecting the privacy and security of health information;

“(2) fostering the widespread adoption of health information technology;

“(3) establishing the public-private American Health Information Collaborative to identify uniform national data standards (including content, communication, and security) and implementation policies for the widespread adoption of health information technology;

“(4) establishing health information network demonstration programs;

“(5) awarding competitive grants to facilitate the purchase and enhance the utilization of qualified health information technology; and

“(6) awarding competitive grants to States for the development of State loan programs to facilitate the widespread adoption of health information technology.

“SEC. 2902. DEFINITIONS.

“In this title:

“(1) **COLLABORATIVE.**—The term ‘Collaborative’ means the public-private American Health Information Collaborative established under section 2904.

“(2) **HEALTHCARE PROVIDER.**—The term ‘healthcare provider’ means a hospital, skilled nursing facility, home health entity, healthcare clinic, community health center, group practice (as defined in section 1877(h)(4) of the Social Security Act), a pharmacist, a pharmacy, a laboratory, a physician (as defined in section 1861(r) of the Social Security Act), a health facility operated by or pursuant to a contract with the Indian Health Service, a rural health clinic, and any other category of facility or clinician determined appropriate by the Secretary.

“(3) **HEALTH INFORMATION.**—The term ‘health information’ means any information, whether oral or recorded in any form or medium, that—

“(A) is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and

“(B) relates to the past, present, or future physical or mental health or condition of an individual, the provision of health care to an individual, or the past, present, or future payment for the provision of health care to an individual.

“(4) **HEALTH INFORMATION NETWORK.**—The term ‘health information network’ means an organization of health care providers and other entities established for the purpose of linking health information systems to enable the electronic sharing of health information.

“(5) **HEALTH INSURANCE ISSUER.**—The term ‘health insurance issuer’ has the meaning given that term in section 2791.

“(6) **LABORATORY.**—The term ‘laboratory’ has the meaning given that term in section 353.

“(7) **PHARMACIST.**—The term ‘pharmacist’ has the meaning given that term in section 804 of the Federal Food, Drug, and Cosmetic Act.

“(8) **QUALIFIED HEALTH INFORMATION TECHNOLOGY.**—The term ‘qualified health information technology’ means a computerized system (including hardware, software, and training) that—

“(A) protects the privacy and security of health information and properly encrypts such health information;

“(B) maintains and provides permitted access to patients’ health records in an electronic format;

“(C) incorporates decision support software to reduce medical errors and enhance healthcare quality;

“(D) is consistent with the standards recommended by the collaborative; and

“(E) allows for the reporting of quality measures.

“(9) **STATE.**—The term ‘State’ means each of the several States, the District of Columbia, Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands.

“SEC. 2903. OFFICE OF THE NATIONAL COORDINATOR OF HEALTH INFORMATION TECHNOLOGY.

“(a) **OFFICE OF NATIONAL HEALTH INFORMATION TECHNOLOGY.**—There is established within the Office of the Secretary an Office of the National Coordinator of Health Information Technology (referred to in this section as the ‘Office’). The Office shall be headed by a National Coordinator who shall be appointed by the Secretary and shall report directly to the Secretary.

“(b) **PURPOSE.**—It shall be the purpose of the Office to carry out programs and activities to develop a nationwide interoperable health information technology infrastructure that—

“(1) ensures that patients’ health information is secure and protected;

“(2) improves healthcare quality, reduces medical errors, and advances the delivery of patient-centered medical care;

“(3) reduces healthcare costs resulting from inefficiency, medical errors, inappropriate care, and incomplete information;

“(4) ensures that appropriate information to help guide medical decisions is available at the time and place of care;

“(5) promotes a more effective marketplace, greater competition, and increased choice through the wider availability of accurate information on healthcare costs, quality, and outcomes;

“(6) improves the coordination of care and information among hospitals, laboratories, physician offices, and other entities through an effective infrastructure for the secure and authorized exchange of healthcare information;

“(7) improves public health reporting and facilitates the early identification and rapid response to public health threats and emergencies, including bioterror events and infectious disease outbreaks;

“(8) facilitates health research; and

“(9) promotes prevention of chronic diseases.

“(c) **DUTIES OF THE NATIONAL COORDINATOR.**—The National Coordinator shall—

“(1) serve as a member of the public-private American Health Information Collaborative established under section 2904;

“(2) serve as the principal advisor to the Secretary concerning the development, application, and use of health information technology;

“(3) facilitate the adoption of a national system for the electronic exchange of health information;

“(4) facilitate the adoption and implementation of standards for the electronic ex-

change of health information to reduce cost and improve healthcare quality; and

“(5) submit the reports described under section 2904(h).

“(d) **DETAIL OF FEDERAL EMPLOYEES.**—

“(1) **IN GENERAL.**—Upon the request of the National Coordinator, the head of any Federal agency is authorized to detail, with or without reimbursement from the Office, any of the personnel of such agency to the Office to assist it in carrying out its duties under this section.

“(2) **EFFECT OF DETAIL.**—Any detail of personnel under paragraph (1) shall—

“(A) not interrupt or otherwise affect the civil service status or privileges of the Federal employee; and

“(B) be in addition to any other staff of the Department employed by the National Coordinator.

“(3) **ACCEPTANCE OF DETAILEES.**—Notwithstanding any other provision of law, the Office may accept detailed personnel from other Federal agencies without regard to whether the agency described under paragraph (1) is reimbursed.

“(e) **AUTHORIZATION OF APPROPRIATIONS.**—There are authorized to be appropriated such sums as may be necessary to carry out the activities of the Office under this section for each of fiscal years 2006 through 2010.

“SEC. 2904. AMERICAN HEALTH INFORMATION COLLABORATIVE.

“(a) **ESTABLISHMENT.**—Not later than 60 days after the date of enactment of this title, and subject to the provisions of this title, the Secretary shall establish the public-private American Health Information Collaborative (referred to in this section as the ‘Collaborative’).

“(b) **COMPOSITION.**—The Collaborative shall be composed of—

“(1) the Secretary, who shall serve as the chairperson of the Collaborative;

“(2) the Secretary of Defense, or his or her designee;

“(3) the Secretary of Veterans Affairs, or his or her designee;

“(4) the National Coordinator for Health Information Technology;

“(5) the Director of the National Institute of Standards and Technology; and

“(6) one voting member from each of the following categories to be appointed by the Secretary from nominations submitted by the public:

“(A) Patient advocates.

“(B) Physicians.

“(C) Hospitals.

“(D) Pharmacists.

“(E) Health insurance plans.

“(F) Standards development organizations.

“(G) Technology vendors.

“(H) Public health entities.

“(I) Clinical research and academic entities.

“(J) Employers.

“(K) An Indian tribe or tribal organization.

“(L) State and local government agencies.

“(c) **RECOMMENDATIONS AND POLICIES.**—The Collaborative shall make recommendations to identify uniform national policies to the Federal Government and private entities to support the widespread adoption of health information technology, including—

“(1) protecting the privacy and security of personal health information;

“(2) measures to prevent unauthorized access to health information;

“(3) measures to ensure accurate patient identification;

“(4) methods to facilitate secure patient access to health information;

“(5) recommendations for a nationwide architecture that achieves interoperability of health information technology systems; and

“(6) other policies determined to be necessary by the Collaborative.

“(d) STANDARDS.—

“(1) IN GENERAL.—The Collaborative shall, on an ongoing basis—

“(A) review existing standards (including content, communication, and security standards) for the electronic exchange of health information, including such standards adopted by the Secretary under paragraph (2)(A);

“(B) identify deficiencies and omissions in such existing standards; and

“(C) identify duplications and omissions in such existing standards; and recommend modifications to such standards as necessary.

“(2) RECOMMENDATIONS.—The Collaborative shall recommend to the President the adoption by the Federal Government of—

“(A) the standards adopted by the Consolidated Health Informatics Initiative as of the date of enactment of this title; and

“(B) on an ongoing basis as appropriate, any additional standards or modifications recommended pursuant to the review described in paragraph (1).

“(3) LIMITATION.—The standards described in this section shall not include any standards developed pursuant to the Health Insurance Portability and Accountability Act of 1996.

“(e) ACTION BY THE PRESIDENT.—Upon receipt of a recommendation from the Collaborative under subsection (d)(2), the President shall review and if appropriate, provide for the adoption by the Federal Government of such recommended standards.

“(f) COORDINATION OF FEDERAL SPENDING.—Not later than 1 year after the adoption by the Federal Government of a recommendation as provided for in subsection (e), and in compliance with chapter 113 of title 40, United States Code, no Federal agency shall expend Federal funds for the purchase of hardware, software, or support services for the electronic exchange of health information that is not consistent with applicable standards adopted by the Federal Government under subsection (e).

“(g) COORDINATION OF FEDERAL DATA COLLECTION.—Not later than 2 years after the adoption by the Federal Government of a recommendation as provided for in subsection (e), all Federal agencies collecting health data for the purposes of surveillance, epidemiology, adverse event reporting, or research shall comply with standards adopted under subsection (e).

“(h) VOLUNTARY ADOPTION.—Any standards adopted by the Federal Government under subsection (e) shall be voluntary with respect to private entities.

“(i) REPORTS.—The Secretary shall submit to the Committee on Health, Education, Labor, and Pensions and the Committee on Finance of the Senate and the Committee on Energy and Commerce and the Committee on Ways and Means of the House of Representatives, on an annual basis, a report that—

“(1) describes the specific actions that have been taken to facilitate the adoption of a nationwide system for the electronic exchange of health information;

“(2) describes barriers to the adoption of such a nationwide system; and

“(3) contains recommendations to achieve full implementation of such a nationwide system.

“(j) APPLICATION OF FACA.—The Federal Advisory Committee Act (5 U.S.C. App.) shall apply to the Collaborative, except that the term provided for under section 14(a)(2) shall be 5 years.

“(k) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as may be necessary to carry out this section for each of fiscal years 2006 through 2010.

“SEC. 2905. IMPLEMENTATION AND CERTIFICATION OF HEALTH INFORMATION STANDARDS.

“(a) IMPLEMENTATION.—

“(1) IN GENERAL.—The Secretary, based upon the recommendations of the Collaborative, shall develop criteria to ensure uniform and consistent implementation of any standards for the electronic exchange of health information voluntarily adopted by private entities in technical conformance with such standards adopted under this title.

“(2) IMPLEMENTATION ASSISTANCE.—The Secretary may recognize a private entity or entities to assist private entities in the implementation of the standards adopted under this title.

“(b) CERTIFICATION.—

“(1) IN GENERAL.—The Secretary, based upon the recommendations of the Collaborative, shall develop criteria to ensure and certify that hardware, software, and support services that claim to be in compliance with any standard for the electronic exchange of health information adopted under this title have established and maintained such compliance in technical conformance with such standards.

“(2) CERTIFICATION ASSISTANCE.—The Secretary may recognize a private entity or entities to assist in the certification described under paragraph (1).

“SEC. 2906. COMPETITIVE GRANTS TO FACILITATE THE WIDESPREAD ADOPTION OF HEALTH INFORMATION TECHNOLOGY.

“(a) IN GENERAL.—The Secretary may award competitive grants to eligible entities to facilitate the purchase and enhance the utilization of qualified health information technology systems to improve the quality and efficiency of healthcare.

“(b) ELIGIBILITY.—To be eligible to receive a grant under subsection (a) an entity shall—

“(1) submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require;

“(2) submit to the Secretary a strategic plan for the implementation of data sharing and interoperability measures;

“(3) be a—

“(A) not for profit hospital;

“(B) group practice (including a single physician); or

“(C) another healthcare provider not described in subparagraph (A) or (B);

“(4) adopt the standards adopted by the Federal Government under section 2904;

“(5) submit to the Secretary a report on the degree to which such entity has achieved the measures adopted under section 2909;

“(6) demonstrate significant financial need; and

“(7) provide matching funds in accordance with subsection (d).

“(c) USE OF FUNDS.—Amounts received under a grant under this section shall be used to facilitate the purchase and enhance the utilization of qualified health information technology systems.

“(d) MATCHING REQUIREMENT.—To be eligible for a grant under this section an entity shall contribute non-Federal contributions to the costs of carrying out the activities for which the grant is awarded in an amount equal to \$1 for each \$3 of Federal funds provided under the grant.

“(e) PREFERENCE IN AWARDED GRANTS.—In awarding grants under this section the Secretary shall give preference to—

“(1) eligible entities that are located in rural, frontier, and other underserved areas as determined by the Secretary;

“(2) eligible entities that will use grant funds to enhance secure data sharing across various health care settings or enhance interoperability with regional or national health information networks; and

“(3) with respect to an entity described in subsection (b)(3)(C), a not for profit healthcare provider.

“(f) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section, \$25,000,000 for fiscal year 2006, \$75,000,000 for fiscal year 2007, and such sums as may be necessary for each of fiscal years 2008 through 2010.

“SEC. 2907. COMPETITIVE GRANTS TO STATES FOR THE DEVELOPMENT OF STATE LOAN PROGRAMS TO FACILITATE THE WIDESPREAD ADOPTION OF HEALTH INFORMATION TECHNOLOGY.

“(a) IN GENERAL.—The Secretary may award competitive grants to States for the establishment of State programs for loans to healthcare providers to facilitate the purchase and enhance the utilization of qualified health information technology.

“(b) ESTABLISHMENT OF FUND.—To be eligible to receive a competitive grant under this section, a State shall establish a qualified health information technology loan fund (referred to in this section as a ‘State loan fund’) and comply with the other requirements contained in this section. A grant to a State under this section shall be deposited in the State loan fund established by the State. No funds authorized by other provisions of this title to be used for other purposes specified in this title shall be deposited in any State loan fund.

“(c) ELIGIBILITY.—To be eligible to receive a grant under subsection (a) a State shall—

“(1) submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require;

“(2) submit to the Secretary a strategic plan in accordance with subsection (d);

“(3) establish a qualified health information technology loan fund in accordance with subsection (b);

“(4) require that healthcare providers receiving such loans consult with the Center for Best Practices established in section 914(d) to access the knowledge and experience of existing initiatives regarding the successful implementation and effective use of health information technology;

“(5) require that healthcare providers receiving such loans adopt the standards adopted by the Federal Government under section 2904(d);

“(6) submit to the Secretary a report on the degree to which the State has achieved the measures under section 2909; and

“(7) provide matching funds in accordance with subsection (h).

“(d) STRATEGIC PLAN.—

“(1) IN GENERAL.—A State that receives a grant under this section shall annually prepare a strategic plan that identifies the intended uses of amounts available to the State loan fund of the State.

“(2) CONTENTS.—A strategic plan under paragraph (1) shall include—

“(A) a list of the projects to be assisted through the State loan fund in the first fiscal year that begins after the date on which the plan is submitted;

“(B) a description of the criteria and methods established for the distribution of funds from the State loan fund; and

“(C) a description of the financial status of the State loan fund and the short-term and long-term goals of the State loan fund.

“(e) USE OF FUNDS.—

“(1) IN GENERAL.—Amounts deposited in a State loan fund, including loan repayments and interest earned on such amounts, shall be used only for awarding loans or loan guarantees, or as a source of reserve and security for leveraged loans, the proceeds of which are deposited in the State loan fund established under subsection (a). Loans under this

section may be used by a healthcare provider to facilitate the purchase and enhance the utilization of qualified health information technology.

“(2) LIMITATION.—Amounts received by a State under this section may not be used—

“(A) for the purchase or other acquisition of any health information technology system that is not a qualified health information technology system;

“(B) to conduct activities for which Federal funds are expended under this title, or the amendments made by the Better Healthcare Through Information Technology Act; or

“(C) for any purpose other than making loans to eligible entities under this section.

“(f) TYPES OF ASSISTANCE.—Except as otherwise limited by applicable State law, amounts deposited into a State loan fund under this section may only be used for the following:

“(1) To award loans that comply with the following:

“(A) The interest rate for each loan shall be less than or equal to the market interest rate.

“(B) The principal and interest payments on each loan shall commence not later than 1 year after the loan was awarded, and each loan shall be fully amortized not later than 10 years after the date of the loan.

“(C) The State loan fund shall be credited with all payments of principal and interest on each loan awarded from the fund.

“(2) To guarantee, or purchase insurance for, a local obligation (all of the proceeds of which finance a project eligible for assistance under this section) if the guarantee or purchase would improve credit market access or reduce the interest rate applicable to the obligation involved.

“(3) As a source of revenue or security for the payment of principal and interest on revenue or general obligation bonds issued by the State if the proceeds of the sale of the bonds will be deposited into the State loan fund.

“(4) To earn interest on the amounts deposited into the State loan fund.

“(g) ADMINISTRATION OF STATE LOAN FUNDS.—

“(1) COMBINED FINANCIAL ADMINISTRATION.—A State may (as a convenience and to avoid unnecessary administrative costs) combine, in accordance with State law, the financial administration of a State loan fund established under this section with the financial administration of any other revolving fund established by the State if otherwise not prohibited by the law under which the State loan fund was established.

“(2) COST OF ADMINISTERING FUND.—Each State may annually use not to exceed 4 percent of the funds provided to the State under a grant under this section to pay the reasonable costs of the administration of the programs under this section, including the recovery of reasonable costs expended to establish a State loan fund which are incurred after the date of enactment of this title.

“(3) GUIDANCE AND REGULATIONS.—The Secretary shall publish guidance and promulgate regulations as may be necessary to carry out the provisions of this section, including—

“(A) provisions to ensure that each State commits and expends funds allotted to the State under this section as efficiently as possible in accordance with this title and applicable State laws; and

“(B) guidance to prevent waste, fraud, and abuse.

“(4) PRIVATE SECTOR CONTRIBUTIONS.—

“(A) IN GENERAL.—A State loan fund established under this section may accept contributions from private sector entities, except that such entities may not specify the

recipient or recipients of any loan issued under this section.

“(B) AVAILABILITY OF INFORMATION.—A State shall make publically available the identity of, and amount contributed by, any private sector entity under subparagraph (A) and may issue letters of commendation or make other awards (that have no financial value) to any such entity.

“(5) RESERVATION OF AMOUNTS.—A State may reserve not to exceed 40 percent of amounts in the State loan fund to issue loans to recipients who serve medically underserved areas.

“(h) MATCHING REQUIREMENTS.—

“(1) IN GENERAL.—The Secretary may not make a grant under subsection (a) to a State unless the State agrees to make available (directly or through donations from public or private entities) non-Federal contributions in cash toward the costs of the State program to be implemented under the grant in an amount equal to not less than \$1 for each \$1 of Federal funds provided under the grant.

“(2) DETERMINATION OF AMOUNT OF NON-FEDERAL CONTRIBUTION.—In determining the amount of non-Federal contributions that a State has provided pursuant to paragraph (1), the Secretary may not include any amounts provided to the State by the Federal Government.

“(i) PREFERENCE IN AWARDED GRANTS.—The Secretary may give a preference in awarding grants under this section to States that adopt value-based purchasing programs to improve healthcare quality.

“(j) REPORTS.—The Secretary shall annually submit to the Committee on Health, Education, Labor, and Pensions and the Committee on Finance of the Senate, and the Committee on Energy and Commerce and the Committee on Ways and Means of the House of Representatives, a report summarizing the reports received by the Secretary from each State that receives a grant under this section.

“(k) AUTHORIZATION OF APPROPRIATIONS.—

“(1) IN GENERAL.—For the purpose of making grants under subsection (a), there is authorized to be appropriated \$50,000,000 for fiscal year 2006, \$100,000,000 for fiscal year 2007, and such sums as may be necessary for each of fiscal years 2008 through 2010.

“(1) AVAILABILITY.—Amounts appropriated under paragraph (1) shall remain available through fiscal year 2010.

“SEC. 2908. DEMONSTRATION PROGRAM TO INTEGRATE INFORMATION TECHNOLOGY INTO CLINICAL EDUCATION.

“(a) IN GENERAL.—The Secretary may award grants under this section to carry out demonstration projects to develop academic programs integrating qualified health information technology systems in the clinical education of health professionals. Such awards shall be made on a competitive basis and pursuant to peer review.

“(b) ELIGIBILITY.—To be eligible to receive a grant under subsection (a), an entity shall—

“(1) submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require;

“(2) submit to the Secretary a strategic plan for integrating qualified health information technology in the clinical education of health professionals and for ensuring the consistent utilization of decision support software to reduce medical errors and enhance healthcare quality;

“(3) be—

“(A) a health professions school; or

“(B) an academic health center;

“(4) provide for the collection of data regarding the effectiveness of the demonstration project to be funded under the grant in improving the safety of patients, the effi-

ciency of health care delivery, and in increasing the likelihood that graduates of the grantee will adopt and incorporate health information technology in the delivery of health care services; and

“(5) provide matching funds in accordance with subsection (c).

“(c) MATCHING FUNDS.—

“(1) IN GENERAL.—The Secretary may award a grant to an entity under this section only if the entity agrees to make available non-Federal contributions toward the costs of the program to be funded under the grant in an amount that is not less than \$1 for each \$2 of Federal funds provided under the grant.

“(2) DETERMINATION OF AMOUNT CONTRIBUTED.—Non-Federal contributions under paragraph (1) may be in cash or in kind, fairly evaluated, including equipment or services. Amounts provided by the Federal Government, or services assisted or subsidized to any significant extent by the Federal Government, may not be included in determining the amount of such contributions.

“(d) PREFERENCE IN AWARDED GRANTS.—In awarding grants under subsection (a), the Secretary shall give preference to applicants that—

“(1) will use grant funds in collaboration with 2 or more disciplines; and

“(2) will use grant funds to integrate qualified health information technology into community-based clinical education experiences.

“(e) EVALUATION.—The Secretary shall take such action as may be necessary to evaluate the projects funded under this section and publish, make available, and disseminate the results of such evaluations on as wide a basis as is practicable.

“(f) REPORTS.—Not later than 1 year after the date of enactment of this title, and annually thereafter, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions and the Committee on Finance of the Senate, and the Committee on Energy and Commerce and the Committee on Ways and Means of the House of Representatives a report that—

“(1) describes the specific projects established under this section; and

“(2) contains recommendations for Congress based on the evaluation conducted under subsection (e).

“(g) LIMITATION.—Not more than 10 percent of amounts received under a grant awarded under this section may be used for administrative expenses.

“(h) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section, such sums as may be necessary for fiscal year 2006, \$5,000,000 for fiscal year 2007, and such sums as may be necessary for each of fiscal years 2008 through 2010.

“(i) SUNSET.—This section shall not apply after September 30, 2008.

“SEC. 2909. QUALITY MEASUREMENT SYSTEMS.

“(a) IN GENERAL.—The Secretary shall develop quality measurement systems for the purposes of measuring the quality of care patients receive.

“(b) REQUIREMENTS.—The Secretary shall ensure that the quality measurement systems developed under subsection (a) comply with the following:

“(1) MEASURES.—

“(A) IN GENERAL.—Subject to subparagraph (B), the Secretary shall select measures of quality to be used by the Secretary under the systems.

“(B) REQUIREMENTS.—In selecting the measures to be used under each system pursuant to subparagraph (A), the Secretary shall, to the extent feasible, ensure that—

“(i) such measures are evidence based, reliable and valid, and feasible to collect and report;

“(ii) such measures include measures of process, structure, beneficiary experience, efficiency, and equity;

“(iii) such measures include measures of overuse, underuse, and misuse of healthcare items and services; and

“(iv) such measures include—

“(I) with respect to the initial year in which such measures are used, one or more elements of a qualified health information technology system as defined in section 2901; and

“(II) with respect to subsequent years, additional elements of qualified health information technology systems as defined in section 2901.

“(2) WEIGHTS OF MEASURES.—The Secretary shall assign weights to the measures used by the Secretary under each system established under subsection (a).

“(3) MAINTENANCE.—The Secretary shall, as determined appropriate, but in no case more often than once during each 12-month period, update the quality measurement systems developed under subsection (a), including through—

“(A) the addition of more accurate and precise measures under the systems and the retirement of existing outdated measures under the systems; and

“(B) the refinement of the weights assigned to measures under the systems.

“(c) REQUIRED CONSIDERATIONS IN DEVELOPING AND UPDATING THE SYSTEMS.—In developing and updating the quality measurement systems under this section, the Secretary shall—

“(1) consult with, and take into account the recommendations of, the entity that the Secretary has an arrangement with under subsection (e);

“(2) consult with provider-based groups and clinical specialty societies; and

“(3) take into account—

“(A) the demonstrations required under this Act;

“(B) the demonstration program under section 1866A of the Social Security Act;

“(C) the demonstration program under section 1866C of such Act;

“(D) any other demonstration or pilot program conducted by the Secretary relating to measuring and rewarding quality and efficiency of care; and

“(E) the report by the Institute of Medicine of the National Academy of Sciences under section 238(b) of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003.

“(d) REQUIRED CONSIDERATIONS IN IMPLEMENTING THE SYSTEMS.—In implementing the quality measurement systems under this section, the Secretary shall take into account the recommendations of public-private entities—

“(1) that are established to examine issues of data collection and reporting, including the feasibility of collecting and reporting data on measures; and

“(2) that involve representatives of health care providers, consumers, employers, and other individuals and groups that are interested in quality of care.

“(e) ARRANGEMENT WITH AN ENTITY TO PROVIDE ADVICE AND RECOMMENDATIONS.—

“(1) ARRANGEMENT.—On and after July 1, 2006, the Secretary shall have in place an arrangement with an entity that meets the requirements described in paragraph (2) under which such entity provides the Secretary with advice on, and recommendations with respect to, the development and updating of the quality measurement systems under this section, including the assigning of weights to the measures under subsection (b)(2).

“(2) REQUIREMENTS DESCRIBED.—The requirements described in this paragraph are the following:

“(A) The entity is a private nonprofit entity governed by an executive director and a board.

“(B) The members of the entity include representatives of—

“(i)(I) health plans and providers receiving reimbursement under this title for the provision of items and services, including health plans and providers with experience in the care of frail elderly and individuals with multiple complex chronic conditions; or

“(II) groups representing such health plans and providers;

“(ii) groups representing individuals entitled to benefits under part A of title XVIII of the Social Security Act or enrolled under part B of such title;

“(iii) purchasers and employers or groups representing purchasers or employers;

“(iv) organizations that focus on quality improvement as well as the measurement and reporting of quality measures;

“(v) State government health programs;

“(vi) individuals skilled in the conduct and interpretation of biomedical, health services, and health economics research and with expertise in outcomes and effectiveness research and technology assessment; and

“(vii) individuals or entities involved in the development and establishment of standards and certification for health information technology systems and clinical data.

“(C) The membership of the entity is representative of individuals with experience with urban health care issues and individuals with experience with rural and frontier health care issues.

“(D) The entity does not charge a fee for membership for participation in the work of the entity related to the arrangement with the Secretary under paragraph (1). If the entity does require a fee for membership for participation in other functions of the entity, there shall be no linkage between such fee and participation in the work of the entity related to such arrangement with the Secretary.

“(E) The entity—

“(i) permits any member described in subparagraph (B) to vote on matters of the entity related to the arrangement with the Secretary under paragraph (1); and

“(ii) ensures that such members have an equal vote on such matters.

“(F) With respect to matters related to the arrangement with the Secretary under paragraph (1), the entity conducts its business in an open and transparent manner and provides the opportunity for public comment.

“(G) The entity operates as a voluntary consensus standards setting organization as defined for purposes of section 12(d) of the National Technology Transfer and Advancement Act of 1995 (Public Law 104-113) and Office of Management and Budget Revised Circular A-119 (published in the Federal Register on February 10, 1998).

“SEC. 2910. APPLICABILITY OF PRIVACY AND SECURITY REGULATIONS.

“The regulations promulgated by the Secretary under part C of title XI of the Social Security Act and sections 261, 262, 263, and 264 of the Health Insurance Portability and Accountability Act of 1996 with respect to the privacy, confidentiality, and security of health information shall—

“(1) apply to any health information stored or transmitted in an electronic format on or after the date of enactment of this title; and

“(2) apply to the implementation of standards, programs, and activities under this title.

“SEC. 2911. STUDY OF REIMBURSEMENT INCENTIVES.

“The Secretary shall carry out, or contract with a private entity to carry out, a study that examines methods to create effi-

cient reimbursement incentives for improving healthcare quality in community health centers and other Federally qualified health centers, rural health clinics, free clinics, and other programs reimbursed primarily on a cost basis deemed appropriate by the Secretary.”

SEC. 3. CENTER FOR BEST PRACTICES.

Section 914 of the Public Health Service Act (42 U.S.C. 299b-3) is amended by adding at the end the following:

“(d) CENTER FOR BEST PRACTICES.—

“(1) IN GENERAL.—The Secretary, acting through the Director, shall develop a Center for Best Practices to provide technical assistance and develop best practices to support and accelerate the efforts of States and healthcare providers to adopt, implement, and effectively use health information technology.

“(2) CENTER FOR BEST PRACTICES.—

“(A) IN GENERAL.—In carrying out paragraph (1), the Director shall establish a voluntary Center for Best Practices (referred to in this subsection as the ‘Center’) for States and healthcare stakeholders seeking to facilitate mutual learning and accelerate the pace of innovation in, and implementation of, health information technology. The Center shall support activities to meet goals, including—

“(i) providing for the widespread adoption of interoperable health information technology;

“(ii) providing for the establishment of regional and local health information networks to facilitate the development of interoperability across healthcare settings;

“(iii) the development of solutions to barriers to the exchange of electronic health information; or

“(iv) other activities identified by the States or health care stakeholders as a focus for developing and sharing best practices.

“(B) PURPOSES.—The purpose of the Center is to—

“(i) provide a forum for the exchange of knowledge and experience;

“(ii) accelerate the transfer of lessons learned from existing public and private sector initiatives, including those currently receiving Federal financial support;

“(iii) assemble, analyze, and widely disseminate evidence and experience related to the adoption, implementation, and effective use of health information technology;

“(iv) assure the timely provision of technical and expert assistance from the Agency and its contractors;

“(v) accelerate the pace of health information technology innovation; and

“(vi) provide technical assistance to entities developing applications for demonstration grants under subsection (b).

“(C) SUPPORT FOR ACTIVITIES.—To provide support for the activities of the Center, the Director shall—

“(i) modify the requirements, if necessary, that apply to the National Resource Center for Health Information Technology to provide the necessary infrastructure to support the duties and activities of the Network and facilitate information exchange across the public and private sectors;

“(ii) expand the Agency’s focus on the adoption, implementation, and effective use of health information technology through the development of practical implementation guidance based upon existing knowledge and support for rapid-cycle implementation research to address questions for which existing knowledge is insufficient; and

“(iii) develop the capacity to identify and widely share in a timely manner innovative approaches to advancing health information technology and its ultimate goal, the improvement of the quality, safety, and efficiency of health care.

“(3) TECHNICAL ASSISTANCE TELEPHONE NUMBER OR WEBSITE.—The Secretary shall establish a toll-free telephone number or Internet website to provide healthcare providers with a single point of contact to—

“(A) learn about Federal grants and technical assistance services related to health information technology;

“(B) learn about qualified health information software that has been certified to be in compliance with the standards adopted by the Federal Government under section 2904 and is available for commercial use;

“(C) receive referrals to regional and local health information networks for assistance with health information technology;

“(D) provide information regarding—

“(i) the electronic submission of health data collected by Federal agencies; and

“(ii) the uniform and consistent implementation of standards; and

“(E) disseminate additional information determined by the Secretary to be helpful to such providers.

“(4) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this subsection, such sums as may be necessary for each of fiscal years 2006 through 2010.”

SEC. 4. HEALTH INFORMATION NETWORK DEMONSTRATION PROGRAM.

Section 914 of the Public Health Service Act (42 U.S.C. 299b-3), as amended by subsection (b), is further amended by adding at the end the following:

“(e) HEALTH INFORMATION NETWORK DEMONSTRATION PROGRAM.—

“(1) IN GENERAL.—The Director may establish a demonstration program under which grants or contracts shall be awarded to support health information network planning, implementation, and evaluation activities.

“(2) ELIGIBILITY.—To be eligible to receive a grant or contract under the demonstration program under paragraph (1), an entity shall—

“(A) submit to the Director an application at such time, in such manner, and containing such information as the Director may require;

“(B) submit to the Director a strategic plan for the implementation of data sharing and interoperability measures across the various health care settings within the proposed network;

“(C) be a public or nonprofit private entity that is or represents a network or potential network that includes healthcare providers and group health plans in a defined area of geographic proximity or organizational affinity, and that may include for-profit entities so long as such an entity is not the grantee;

“(D) demonstrate, where appropriate, the involvement and commitment of the appropriate State or States;

“(E) specify a defined area of geographic proximity or organizational affinity that the health information network will encompass;

“(F) demonstrate active participation in the best practice network described in subsection (d);

“(G) demonstrate compliance with the data standards and technical policies adopted by the Federal Government under section 2904(e);

“(H) submit to the Secretary a report on the degree to which such entity has achieved the measures under section 2909;

“(I) demonstrate financial need; and

“(J) agree to provide matching funds in accordance with paragraph (4).

“(3) USE OF FUNDS.—

“(A) IN GENERAL.—Amounts received under a grant under this subsection shall be used to establish and implement a regional or local health information network.

“(B) LIMITATION.—Amounts received under a grant under this subsection may not be used to purchase a health information technology system that is not a qualified health information technology system.

“(4) MATCHING REQUIREMENT.—To be eligible to receive a grant or contract under this subsection an entity shall contribute non-Federal funds to the costs of carrying out the activities for which the grant or contract is awarded in an amount equal to \$1 for each of \$2 of Federal funds, provided under the grant.

“(5) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this subsection, \$50,000,000 for fiscal year 2006, \$70,000,000 for fiscal year 2007, and such sums as may be necessary for each of fiscal years 2008 through 2010.”

SEC. 5. EXCEPTION TO FEDERAL ANTI-KICKBACK AND STARK LAWS FOR THE PROVISION OF PERMITTED SUPPORT.

(a) ANTI-KICKBACK.—Section 1128B(b) of the Social Security Act (42 U.S.C. 1320a-7b(b)(3)) is amended—

(1) in paragraph (3)—

(A) in subparagraph (G), by striking “and” at the end;

(B) in subparagraph (H), as added by section 237(d) of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (Public Law 108-173; 117 Stat. 2213)—

(i) by moving such subparagraph 2 ems to the left; and

(ii) by striking the period at the end and inserting a semicolon;

(C) by redesignating subparagraph (H), as added by section 431(a) of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (Public Law 108-173; 117 Stat. 2287), as subparagraph (I);

(D) in subparagraph (I), as so redesignated—

(i) by moving such subparagraph 2 ems to the left; and

(ii) by striking the period at the end and inserting “; and”; and

(E) by adding at the end the following new:

“(J) during the 5-year period beginning on the date the Secretary issues the interim final rule under section 5(c)(1) of the Better Healthcare Through Information Technology Act, the provision, with or without charge, of any permitted support (as defined in paragraph (4)).”; and

(2) by adding at the end the following new paragraph:

“(4) PERMITTED SUPPORT.—

“(A) DEFINITION OF PERMITTED SUPPORT.—Subject to subparagraph (B), in this section, the term ‘permitted support’ means the provision of any equipment, item, information, right, license, intellectual property, software, training, or service used for developing, implementing, operating, or facilitating the use of systems designed to improve the quality of health care and to promote the electronic exchange of health information.

“(B) EXCEPTION.—The term ‘permitted support’ shall not include the provision of—

“(i) any support that is determined in a manner that is related to the volume or value of any referrals or other business generated between the parties for which payment may be made in whole or in part under a Federal health care program;

“(ii) any support that has more than incidental utility or value to the recipient beyond the exchange of health care information; or

“(iii) any health information technology system, product, or service that is not in compliance with data standards adopted by the Federal Government under section 2904 of the Public Health Service Act.”

(b) STARK.—Section 1877(e) of the Social Security Act (42 U.S.C. 1395nn(e)) is amended

by adding at the end the following new paragraph:

“(9) PERMITTED SUPPORT.—During the 5-year period beginning on the date the Secretary issues the interim final rule under section 5(c)(1) of the Better Healthcare Through Information Technology Act, the provision, with or without charge, of any permitted support (as defined in section 1128B(b)(4)).”

(c) REGULATIONS.—In order to carry out the amendments made by this section—

(1) the Secretary of Health and Human Services shall issue an interim final rule with comment period by not later than the date that is 180 days after the date of enactment of this Act; and

(2) the Secretary shall issue a final rule by not later than the date that is 180 days after the date that the interim final rule under paragraph (1) is issued.

Mr. KENNEDY. Mr. President, It is a privilege to join Senator ENZI, Senator GRASSLEY, Senator BAUCUS and many other sponsors on this bill to modernize our health care system with information technology.

The United States has the best doctors and hospitals in the world, but we will soon be left behind other industrialized nations if we fail to adopt modern technology. When enacted, this bill will be the first legislation to address the glaring lack of such technology in U.S. health care. Modern information technology can transform health care as profoundly as any medical discovery of the past, and the American people deserve that transformation.

The Institute of Medicine estimates that as many as 98,000 Americans die in hospitals each year because of medical errors—making it the eighth leading cause of death in the United States. Elderly patients are prescribed improper medication in one out of every 12 physician visits. Adult Americans receive recommended care only 55 percent of the time. Nearly 30 percent of health care spending, \$300 billion a year, goes for treatments that may not improve health, are redundant, or are even wrong for the patient’s condition. Medical experts agree that most of these shameful statistics could be drastically reduced by modern information technology in doctors’ offices, hospitals, nursing homes, pharmacies, clinical laboratories and public health departments across the country.

It is not just quality of care that improves with use of Health IT—the cost goes down as well. National health care spending now exceeds \$1.7 trillion a year—and health spending and health insurance premiums continue to rise at rates much higher than general inflation. The Federal Government estimates that savings in the range of \$140 billion a year, close to 10 percent of total health spending, could be achieved through widespread adoption of health IT. These system-wide savings would reduce insurance premiums by \$700 a year for every family in America.

Some States, including Massachusetts, are leading the way toward a fully interconnected health IT system, with cutting edge projects being conducted by organizations such as the

Massachusetts e-Health Collaborative, the Massachusetts Technology Collaborative, the New England Healthcare Institute and the Center for Information Technology Leadership. But, we still have much to do.

Despite the obvious health benefit, most doctors and hospitals are not using this technology or preparing to do so. In fact, only 10 percent of hospitals are using computerized prescribing. Another 20 percent of hospitals are currently installing them. That leaves 70 percent out. The United States ranks far below other industrial countries on IT in healthcare—lower than 12 out of 15 European nations.

Part of the problem is the up-front cost of these systems. Doctors are not always confident that the system they invest in will be able to talk to other parts of the overall system. We need rules and standards for electronic data sharing to encourage doctors to accept them, as our bill proposes.

The legislation establishes a public-private partnership to create national standards for health IT—a common language for doctors' computer systems to talk to each other. Targeted funding mechanisms will help doctors and hospitals acquire the technology they need for their patients. Grants will be available for cases of special need, such as doctors practicing in underserved areas. Financial assistance will also help establish regional health information technology organizations, such as networks of doctors, hospitals, health plans and pharmacies. These networks will be a crucial testing ground to work out how all parts of the health system can communicate to provide clinical information wherever and whenever it is needed.

The bill also creates a Federal-State public-private loan fund to make loans available at low rates to help health care professionals to acquire the technology. The State fund will accept private sector contributions from health plans and large systems that would benefit from having more doctors using the technology. Insurers and large hospitals stand to gain the most savings from IT, and should contribute to this national effort.

The bill will also help providers improve quality by establishing a Best Practices Center where IT users can learn from the experience of others, and by funding new programs to train health professionals to use the technology.

We have a responsibility to make the miracles of modern medicine available to every American. Rising costs are crushing our health care system. Premiums are going through the roof. The ranks of the uninsured grow every day. Families have to choose between health care and groceries, rent, and college tuition. When millions of Americans struggle to afford health care for their families, it is profoundly wrong to squander more than half a trillion dollars each year on obsolete administrative expenses. That's not

the American dream. We can find a better way.

Other nations are taking action to use this extraordinary technology to cut costs and save lives—but America lags behind. We can't continue to let the high cost of health care price American goods and services out of the global marketplace.

The need for this investment is urgent. In the words of Secretary Leavitt, "Every day that we delay, lives are lost." The proposals we are introducing today will improve care, save lives and make health care more affordable for every American.

I commend Senator ENZI, Senator GRASSLEY and Senator BAUCUS for their leadership, and I look forward to working closely with all our colleagues to see that these important proposals are enacted into law this year.

Mr. REED. Mr. President, I join several of my colleagues in introducing the Better Healthcare Through Information Technology Act. This bill represents a strong step forward in modernizing our health care system and paving the way to greater efficiency and quality in the delivery of care.

Health care costs are becoming an enormous drain on employers, employees, and the Nation as a whole. More Americans are uninsured, and premiums for health insurance are increasing at an unsustainable rate of 20, 30, and even 40 percent per year. Health care reform is needed to address the huge concerns of the American people and our Nation's businesses. Indeed, the fact that companies like GM are losing competitiveness and laying off 25,000 workers, in part due to health costs, is a strong sign that our current health care system is flawed.

Solving these challenges will require new, bold policy initiatives to make health care coverage more affordable for employers, employees, and all Americans. Comprehensive efforts at change must be considered in our approach to health care reform. As a start, there are numerous improvements that can—and should—be made to fully pull the industry into the information age with the widespread adoption of information technology. It is unfortunate, but not surprising, that many of our Nation's other systems, such as our banking systems, are decades ahead in providing a seamless national network facilitating nearly instantaneous and universal access to information. It is high time for this body to act to modernize our health system as well, for its adoption of IT systems has the promise to improve quality while simultaneously reducing cost.

There are significant barriers to the adoption of IT by health care providers, including often-prohibitive costs of capital expenditures needed for hardware and software and a lack of uniform standards for the electronic exchange of information. Systems are prohibitively expensive for many physician practices and there is no guarantee of interoperability with the sys-

tem used at a local hospital, lab, or pharmacy.

The Better Healthcare Through Information Technology Act addresses many of these barriers. It codifies existing efforts by the government to spur the use of health IT. It creates a public-private collaborative to build consensus on a single set of standards. To ensure that these standards will then be embraced, our bill requires Federal procurement of information technology, and data collection by Federal agencies to comply with them.

A similar collaborative on a local scale already exists in Rhode Island. The Rhode Island Quality Institute links providers, hospitals, insurers, government, businesses, and the academic community in the pursuit of improving health care quality. I commend the Rhode Island Quality Institute for its statewide efforts to make Rhode Island a true health care improvement "learning lab," and I believe that the bill we are introducing today will support these and similar efforts around the country.

To do this, our legislation recognizes and aims to address the financing challenges faced by providers. The bill establishes a number of competitive grants and facilitates State loan programs that are designed to get qualified health IT systems in the hands of doctors, hospitals, and clinics. Other provisions, including modifications to Federal anti-kickback and Stark laws and the establishment of a toll-free telephone number or Web site to assist physicians, will accelerate the implementation and integration of health IT.

The combination of uniform standards, help for physicians to purchase health IT systems, and improved exchange of electronic information through a national system will ultimately move us toward a conversion to Electronic Medical Records. Records will seamlessly follow the patient and improve evidence-based medicine by allowing aggregate data to be used in the determination of best treatment practices. Decision support systems will provide doctors with the most up-to-date evidence-based recommendations available.

Perhaps most importantly, though, the use of IT offers the hope of reducing the thousands of medical errors each year that add to both unnecessary pain and suffering and the cost of health care. Computerized Physician Order Entry, or CPOE, could alone bring enormous savings to the health care system by reducing medication errors in hospitals and clinics.

Systemic errors such as these account for many of the medical errors identified by the Institute of Medicine in their seminal study on this topic that estimated up to 98,000 avoidable deaths from medical errors each year. It will take government action and investment to bring about the technological sophistication and interoperability necessary to substantially reduce the incidence of these errors.

I want to thank Senators ENZI, KENNEDY, DODD, and others for their efforts on this bill. I look forward to continuing to work with each of them and the rest of my colleagues to bring our Nation's health system into the 21st century.

By Mr. GRASSLEY (for himself, Mr. BAUCUS, Mr. ENZI, and Mr. KENNEDY):

S. 1356. A bill to amend title XVIII of the Social Security Act to provide incentives for the provision of high quality care under the Medicare program; to the Committee on Finance.

Mr. GRASSLEY. Mr. President, I am pleased to join Senator BAUCUS in introducing the Medicare Value Purchasing (MVP) Act of 2005. Senator BAUCUS shares my strong commitment to ensuring the vitality of the Medicare program for generations of beneficiaries to come. Two years ago, we worked in a bipartisan manner to establish the first ever Medicare prescription drug benefit, to create new coverage choices under the Medicare Advantage program, and to cover more preventive screening tests. The Medicare Modernization Act transformed Medicare benefits and choices.

Over the past 40 years, Medicare has made immeasurable differences in the lives of our Nation's seniors and disabled citizens by providing beneficiaries with access to care. The bill that we are introducing today will ensure that they continue not only to have that access, but also have access to good care. Some folks might think I am saying that beneficiaries don't receive good care today. Nothing could be further from the truth. I know that physicians, hospitals, nurses and other providers across the country work every day to provide quality care. But just like all Medicare beneficiaries have the same benefits, all Medicare beneficiaries should get the highest quality care possible. And today, that's just not the case; there is tremendous room for improvement.

A May 2005 Commonwealth Fund review of more than four hundred studies and data sets painted a mixed picture on the quality of care received by Medicare beneficiaries. The analysis found that many improvements are occurring—breast cancer screening rates have tripled and many patients with diabetes get the tests they need to keep them healthy. At the same time, the review showed that in some parts of the country, beneficiaries get recommended treatments, such as immunizations, but in other parts they don't. They found that improvements in care for Medicare beneficiaries have not kept pace with improvements among other groups. For example, between 1988 and 1994, the percent of forty-five-year-olds to sixty-four-year-olds whose blood pressure was controlled, increased from 33 percent to 40 percent. Among Medicare beneficiaries, it stayed the same—just 24 percent. They also zeroed in on the need to

strengthen programs to care for beneficiaries with a chronic illness. Research shows that twenty percent of Medicare beneficiaries have five or more chronic illnesses. Caring for these beneficiaries accounts for nearly 70 percent of Medicare spending.

One of the study's most disturbing findings was the States with higher spending per Medicare beneficiary tended to rank lower on twenty-two quality-of-care indicators. According to the researchers, this might reflect practice patterns that favor intensive, costly care rather than "effective" care. Simply stated, spending more, does not necessarily translate into better quality care for beneficiaries. Of the \$300 billion Medicare dollars spent last year, I think it is safe to say that in many cases we—beneficiaries and taxpayers—did not get the absolute best value. Not even close.

Why is that the case? In part, it is because of the way we pay for care. I am sure that everyone remembers "To Err is Human" in which the Institute of Medicine reported the startling fact that studies suggest that up to 98,000 Americans die in hospitals each year from medical errors. It was in headlines for months.

I would bet that not as many folks know about the IOM's follow-up report, "Crossing the Quality Chasm." In my opinion, that report is equally, if not more, important because it sets forth a wide-ranging strategy to address the deficiencies in our health care system that undermine the delivery of high quality care. Among the IOM's chief recommendations was a call to both public and private purchasers to examine their current payment methods to remove barriers that currently impede quality improvement, and to build stronger incentives for quality enhancement.

The IOM specifically recommended that payment methods should provide "fair payment for good clinical management." Providers also need to be able to share in the benefits of quality improvement. Consumers and purchasers need opportunities to recognize quality differences and to use quality information when making health care decisions. In simplest terms, we need to better align financial incentives to help promote quality and to achieve better value. The Medicare Payment Advisory Commission (MedPAC) has issued similar recommendations.

Today, Medicare pays the same amount regardless of quality of care. Some people would argue that in fact, the current Medicare payment system rewards poor quality. For example, if a patient suffers a complication from subpar hospital care and ends up back in the same hospital to treat that complication, Medicare will pay the hospital for the patient's rehospitalization. On the other hand, if a hospital follows best practices of care and helps patients avoid complications that could require a rehospitalization, well, that hospital doesn't get anything. The

hospital that provides lower quality care to the beneficiary gets another payment. The hospital that provides higher quality care to the beneficiary gets nothing.

Over time, this perverse situation could disadvantage the hospital that delivers higher quality care to beneficiaries because it will get less revenue, which could compromise its ability to compete against other hospitals. This situation just does not make sense; neither to me, nor should it to beneficiaries. Providing lower quality care can lead to greater revenue, while providing higher quality care can penalize providers financially. It is the exact opposite of what we want and need for Medicare and beneficiaries. Of course, our Nation is blessed with millions of dedicated and qualified health care providers who care deeply about the quality of care they provide to their patients. What we have is a systemic failure of Medicare payment systems to reward quality and provide the incentives to invest more in health care information technology and other efforts to improve health care quality. This bill creates the financial incentives that reward those providers who deliver that quality care today, and to those who make improvements where they are needed.

The MVP Act seeks to remedy this situation and to implement the IOM's and MedPAC's recommendations by creating quality payments under Medicare for physicians and other providers, hospitals, health plans, skilled nursing facilities, home health, and end stage renal disease facilities. Senator BAUCUS and I know that it is a pretty ambitious strategy. We also recognize that this substantial departure from current payment practices cannot and should not happen overnight. Careful consideration of which quality measures that the Centers for Medicare and Medicaid Services (CMS) should use in making quality-based payments will take some time. Providers will play a significant role in determining which measures to use. This is important—we need to make sure that the measures are valid and reliable. In addition, providers will need some time to become more proficient in collecting and reporting quality data for payment purposes.

The MVP Act builds on the small step made in the MMA which established reporting incentives in its early years. Under the MMA, hospitals that report ten quality measures receive a full payment update, those that don't report, receive a smaller update. This approach has been successful. In 2005, 99 percent of hospitals reported the data and CMS has seen improvements in quality among the participating hospitals. Under the MVP Act, using the data from these reporting years, CMS will give providers an idea of where they stand on quality before quality payments will begin. This will allow providers the chance to fine tune their quality practices and data reporting

capabilities before payments will be determined based on a specific provider's quality measures.

For each provider group and facility, as well as Medicare Advantage plans under our legislation, CMS will then begin to make quality payments from a pool that initially will equal one percent of their Medicare payments. Over five years, quality payments will increase to two percent of total payments. Payments will be awarded for meeting performance thresholds and to those who demonstrate a level of improvement specified by CMS. This approach recognizes that we need to offer incentives to a broad base of providers—providers who perform well today deserve recognition; those that might not be performing well, but have improved, also should be recognized. Finally, CMS will report publicly on how various providers, facilities, and plans do with respect to quality. This information will help empower beneficiaries when making their health care decisions and when making informed choices.

Our bill recognizes that the private sector has made a lot of progress in developing and adopting quality measures. There are several value-based purchasing projects underway around the country. We don't want to reinvent the wheel—we want to build on these initiatives. These private projects, along with its own projects, can help inform the Centers for Medicare and Medicaid Services (CMS) as it works out technical details to implement quality-based payments using the framework established by the MVP Act.

This framework is consistent with the thinking of CMS on quality-based payments as expressed by Administrator Mark McClellan. It also is consistent with principles endorsed today by more than twenty of the Nation's leading consumer, employer, and labor organizations. In announcing the principles, Peter Lee, president and CEO of the Pacific Business Group on Health and co-chair of the Consumer-Purchaser Disclosure Project stated, "We must move beyond a system that is performance-blind to one that rewards better quality and gives consumers tools to make informed choices."

Now some folks may think that Medicare shouldn't take on this issue—that it might better for the private sector to do it alone. I respectfully disagree with that view. Medicare is the single largest purchaser of health care in the Nation. The IOM in "Leadership by Example" expressed its opinion that Federal Government health care programs can significantly influence how care is provided by the private sector. The Commonwealth Fund researchers share this view—that adopting quality payments in Medicare can influence the level of quality in all health care, not just care for the elderly.

And there's a lot of health care to be influenced. Our Nation spent \$1.8 trillion on health care last year. Health

care spending is expected to reach more than 15 percent of the gross domestic product. But just like in Medicare, we are not always getting the best value for those dollars. That \$1.8 trillion in spending translated to a 37th place ranking for the United States compared to other countries around the world, in quality, according to the World Health Organization (WHO). Spending more and more money without achieving commensurate improvements in quality is simply wasteful and unsustainable.

Medicare is just one month shy of its fortieth anniversary—a tremendous milestone. It has positively affected the lives of millions of seniors and disabled citizens. We set a goal for ourselves forty years ago—to improve access to care. Providers and policymakers came together to make that goal a reality. It is time for a new goal, a new challenge—to ensure that Medicare beneficiaries and all Americans get the best possible care and that as a nation, we get the highest value for our health care dollars. The MVP Act of 2005 provides us with a road map to live up to that challenge. I urge my colleagues to join me and Senator BAUCUS in advancing this important legislation.

Mr. BAUCUS. Mr. President, I rise as a cosponsor of the "Medicare Value Purchasing Act of 2005."

This bill will establish a new program to link a portion of Medicare's reimbursement for health care services to the quality of that care. This bill takes a crucial step towards improving the value of our health care dollar as well as the safety and quality of our Nation's health care system.

Last week, I gave a statement in this Chamber about America's place in the world. I am proud of our Nation; I am proud of our enterprising spirit, our energy, our diversity, and the hope for a better future that is inherent to our roots. I am proud of this country, but I am disappointed in the state of our health care system and in the impact it is having on the lives of our fellow citizens, as well as on the economy and ultimately on our place in the world. As I look to the future, I see a stronger America, but I know we must work hard to make sure that vision is realized.

We hear about the problem of increasing health care costs nearly every day—in newspaper headlines and in casual conversations. Per capita spending on health care in America is nearly 2½ times the average in the industrialized world. We spend over \$5,000 per person on health care, and premiums for employer-sponsored coverage are rising five times faster than inflation.

With all this money going into health care, one might assume we had the best health care in the world. But that assumption is wrong. Despite spending more per capita than any other developed nation, the World Health Organization ranks the United States 37th in health care quality. As

many as 98,000 patients die each year as a result of medical errors, and research has shown that in some cases more care, more specialists, and more treatments, actually result in worse outcomes for the patient.

Costs are rising, we are not getting high-quality care for the dollars spent, and due to the nature of our health care system much of this burden is borne by employers. For the first time, the Big Three automakers are beginning to charge premiums and scale back benefits for their workers and retirees, because they can't afford the cost of health care. All told, GM estimates that they will spend about \$6 billion in 2005 on health care. This translates into \$1,525 for every vehicle they sell. That is more than the company spends on steel.

By comparison, Toyota's health care costs are about \$1,000 less per vehicle. It is not surprising, therefore, that a recent survey of business leaders found that 65 percent of top Chief Financial Officers in the United States feel that it is very important for Congress to address the cost of health care. Their European and Asian counterparts did not cite the costs of health care among their top concerns.

No other industry tolerates the level of disrepair that can be found in the U.S. health care system today. Many of my colleagues in the Senate agree that in order to improve the system, we need to do more to control health costs through efficient purchasing and the use of health information technology. In other words, we need to create a "culture of efficiency" in health care.

How do we do that? First, we need to begin building a health information infrastructure that can reach providers and patients nationwide, from Manhattan, NY to Manhattan, MT. We must take aggressive steps to establish standards and policies around this infrastructure, and to make initial investments in hardware, software, and training. I applaud my colleagues Senator ENZI and Senator KENNEDY for introducing important legislation on this topic today, the "Health Information Technology and Quality Improvement Act of 2005".

Building a Health Information Infrastructure will facilitate the provision of high-quality care. But we also must begin rewarding quality in the way we pay for health care. Today, Medicare payment policies typically do not include mechanisms designed to encourage quality of care. Medicare does not distinguish between paying for care that is necessary and that which might be unnecessary or inappropriate.

As a result, I worked with Senator GRASSLEY to design a program that will tie a portion of Medicare reimbursement for hospitals, physicians, health plans, renal dialysis facilities, and home health agencies to the quality of care provided in these settings. Payment for these providers, as well as for Skilled Nursing Facilities, would also be linked to reporting data on

quality of care and, after the first year of the program, to making this data available to the public.

The Medicare Value-Based Purchasing program would begin paying for value in the health care system—good care, better patient outcomes, evidence-based medicine, and increased transparency. We have learned a lot from programs such as this that have begun on a smaller scale in the private sector, and we hope that taking this step forward in Medicare will drive the entire health care system toward a system of high-quality, high-value health care.

But designing a program like this one is not easy, and I want to be clear on this point: I don't believe Congress should determine how the quality of health care is measured. That is why my bill sets up a system of stakeholder involvement at every step in the development and implementation of a Quality Measurement System for Medicare—in determining what measures of health care quality are appropriate for each provider group, in implementing a system of data collection and analysis, and in updating the measurement system in accordance with changing science. Providers, payers, patients, and many other groups are the key experts who should be involved in the details of a health care quality system—not Congress.

But it is our job to lay out some of the parameters for the system, and to provide the Secretary of Health and Human Services with the authority to follow them and create this new program. It is also our job to oversee such a program once it is enacted and implemented. Over the last year or so, we have met with provider groups, consumer organizations, researchers and policy experts, and many of the individuals who have built and participated in private-sector programs to drive quality improvement in health care.

As I mentioned, our bill sets up a process by which a quality measurement system is developed in consultation with stakeholders and is uniquely tailored for the different groups of providers who participate in Medicare. This system should measure the quality of health care in a variety of ways, looking at processes of care, health information technology infrastructure, patient outcomes, patient experience of care, efficiency of resource use, and equity. For some groups of providers, only a very few measures of health care quality will be available when the program begins. These providers should not be penalized for that, but rather rewarded for reporting and improving the quality of the care they provide according to those measures. We may start small in some cases, but we can get the ball rolling.

The bill sets up a two-phase approach to quality improvement. In the first phase, the annual update to a provider's reimbursement is tied to reporting data on quality of care. This data would be on the measures included in

the Medicare Quality Measurement System which has been developed by the Secretary with stakeholder involvement. Some providers—such as hospitals, Medicare Advantage Plans, and renal dialysis facilities, are already reporting data on quality of care to Medicare and might move more quickly to the second phase of the program.

In the second phase, those providers who report data on quality of care to the Secretary will be able to participate in value-based purchasing, where a portion of total payments to participants in each provider group is taken to form a quality pool. The funds in this pool are then reallocated to award providers who demonstrate high-quality care, or who show that they are improving. In theory, this sets up a system in which all providers could receive money back out of the pool—in essence it is a system that will "raise all boats." Following the recommendation of the Medicare Payment Advisory Commission, the portion of payments tied to quality in this second phase will be 1 percent in the first year of the program for each provider group, and will increase to 2 percent over five years.

In addition to setting up this program, the "Medicare Value Purchasing Act of 2005" includes additional measures to facilitate quality improvement in the health care system, such as a provision to reduce the legal barriers to health IT adoption that are present in the Federal anti-kickback and Stark laws.

It also includes several studies to look more closely at the true costs of health care, and the benefits—both human and financial—that can be gained from improving quality. The information generated by these studies will be critical in moving forward with value-based purchasing, allowing us to more accurately predict the program-wide savings from efforts to improve quality. Given that the Medicare Part A Trust Fund faces insolvency in 2020—decades earlier than Social Security—identifying these savings will be critical to preserving access, to care for Medicare beneficiaries and adequate reimbursement for providers.

Senator GRASSLEY and I set out to write a bill that would address value-based purchasing, set up a system of measuring quality of care in Medicare, and encourage the adoption of health information technology. We set out to write a bill that, in concert with the bill introduced by Senators ENZI and KENNEDY would create a roadmap to a "culture of efficiency" in health care.

That means that our bill does not put new money on the table to reward health care quality, and it does not fix the problems that currently exist with the physician payment system or with reimbursement updates to renal dialysis facilities. But nor does it mean that we are blind to these issues. Indeed, I know that sustained cuts to the physician fee schedule, which will take effect if current law is not changed—are not sustainable.

I want to work with physicians and practitioners to find a sustainable solution to the problems with the physician fee schedule, and I want to work with the renal dialysis community to make sure that reimbursement is adequate so that facilities—especially those in underserved areas—can keep their doors open. But I also ask these providers to work with me to move Medicare in the right direction—ultimately, better quality and value means better health care, better coverage, and a stronger system for all.

Finally, I believe that quality improvement efforts should extend beyond Medicare, into the Medicaid and SCHIP programs, and into the private sector. Currently, programs at the State level have found ways to improve quality and find efficiencies through health information technology use in Medicaid. Our bill includes State government health program representatives in the process of developing the Quality Measurement System because we believe they have important perspective to share, and also because we believe that quality improvement policies are equally important for their programs. I look forward to working with Chairman GRASSLEY on a bill to address quality of care in the Medicaid and SCHIP programs later this year.

I want to thank my colleagues Chairman GRASSLEY, Chairman ENZI, and Senator KENNEDY, as well as their able health care staff, for their tireless work on this legislation. We feel passionately about this issue because it matters to all of us. We all want to ensure that the best care possible is provided. We know how hard health care providers work for their patients, and we believe they should be rewarded for that work. And we believe this issue should be advanced in the Congress as soon as possible.

As I said, I have a vision of a stronger America. I envision a health care system in which quality and value are rewarded, in which innovative health information technology is accessible to all, in which data systems that can exchange crucial patient information to save lives and prevent mistakes, and in which American companies are not at a competitive disadvantage in the world because of health care costs. I call on my colleagues to support the important steps toward that vision that will be taken under the pieces of this legislation introduced today.

By Mr. HARKIN (for himself, Mr. SPECTER, Mr. KOHL, Mr. DURBIN, Mr. FEINGOLD, Mrs. CLINTON, and Mr. SCHUMER).

S. 1357. A bill to protect public health by clarifying the authority of the Secretary of Agriculture to prescribe performance standards for the reduction of pathogens in meat, meat products, poultry, and poultry products processed by establishments receiving inspection services and to enforce the Hazard Analysis and Critical Control Point (HACCP) System requirements,

sanitation requirements, and the performance standards; to the Committee on Agriculture, Nutrition, and Forestry.

Mr. HARKIN. Mr. President, today I am introducing the Meat and Poultry Pathogen Reduction Act of 2005. This legislation, commonly known as Kevin's Law, is dedicated to the memory of 2-year-old Kevin Kowalczyk, who died in 2001 after eating a hamburger contaminated with *E. coli* O157:H7 bacteria. Passage of this bill is vital because on December 6, 2001, the 5th Circuit Court of Appeals upheld and expanded an earlier District Court decision that removes the Department of Agriculture's authority to enforce its Pathogen Performance Standard for Salmonella. The 5th Circuit's decision in *Supreme Beef v. USDA* seriously undermines the strong food safety improvements adopted by USDA in its 1996 Hazard Analysis Critical Control Point and Pathogen Reduction (HACCP) rule.

In 2003, there was another court case that calls into question USDA's authority to enforce basic sanitation standards. A company called Nebraska Beef sued USDA after the Department tried to shut down the plant for numerous sanitation violations. USDA settled the case because it feared losing yet again in court and having another vital piece of its authority struck down.

According to the 5th Circuit's opinion in the *Supreme Beef* case and the settlement in the *Nebraska Beef* case, today, there is nothing USDA could do to shut down a meat grinding plant that insists on using low-quality, potentially contaminated trimmings. These decisions seriously undermine the new meat and poultry inspection system.

The HACCP rule recognized that bacterial and viral pathogens were the foremost food safety threat in America, responsible for 5,000 deaths, 325,000 hospitalizations and 76 million illnesses each year according to the Centers for Disease Control and Prevention. To address the threat of foodborne illness, USDA developed a modern inspection system based on two fundamental principles.

The first was that industry has the primary responsibility to determine how to produce the safest products achievable. Industry had to examine their plants and determine how to control contamination at every step of the food production process, from the moment a product arrives at their door until the moment it leaves their plant.

The second, even more crucial, principle was that plants nationwide must reduce levels of dangerous pathogens in meat and poultry products. To ensure the new inspection system accomplished this, USDA developed Pathogen Performance Standards. These standards provide targets for reducing pathogens and require all USDA-inspected facilities to meet them. In theory, facilities failing to meet a stand-

ard are shut down until they create a corrective action plan to meet the standard.

So far, USDA has only issued one Pathogen Performance Standard, for Salmonella. The vast majority of plants in the U.S. have been able to meet the new standard, so it is clearly workable. In addition, USDA reports that Salmonella levels for meat and poultry products have fallen substantially. Therefore the Salmonella standard has been successful. The *Supreme Beef* and *Nebraska Beef* decisions threaten to destroy this success because they restrict USDA's ability to penalize meat and poultry plants that violate a pathogen standard.

The other major problem is we have an industry dead set on striking down USDA's authority to enforce meat and poultry pathogen standards. Ever since the original *Supreme Beef* decision, I have spent untold hours trying to find a compromise that will allow us to ensure we have enforceable, science-based standards for pathogens in meat and poultry products. I have introduced bills to address this issue and I have worked with industry leaders trying to reach a reasonable compromise.

However, despite repeated attempts to address industry concerns, industry has continually backtracked and moved the finish line. Many times, I have made changes in my legislation to address their "pressing" concern of the moment only to have them come back and say we hadn't gone far enough. We have to look out for the consumers of meat and poultry so our children, our families are not put at increased risk of getting ill or dying, because some in the industry want to backtrack on food safety.

I plan to seek every opportunity to get this language enacted. I think it is essential, both to ensuring the modernization of our food safety system, and ensuring consumers that we are making progress in reducing dangerous pathogens.

I hope that both houses of Congress will be able to act to pass this legislation without delay. The effectiveness of our meat and poultry inspection system and the public's confidence in it are at stake.

Mr. KOHL. Mr. President, I am pleased to join my colleagues in co-sponsoring the Meat and Poultry Pathogen Reduction and Enforcement Act, also referred to as Kevin's Law. Foodborne disease is a very serious concern for American consumers. According to CDC estimates, 76 million illnesses, 325,000 hospitalizations, and 5,000 deaths occur each year in the United States from foodborne diseases; sadly, the majority of these fatal incidents involve children.

Barbara Kowalczyk, a constituent of mine, has been a true pioneer in fighting to protect Americans from the harmful effects of food pathogens. Mother to 2½-year-old Kevin Kowalczyk, Barbara's dedication stems from personal tragedy. Barbara went

through what no mother should have to go through; she watched in agony as the life faded out of her little boy. Kevin died from an *E. Coli* infection before he even had the chance to step foot into a kindergarten classroom.

Eager to ensure that no other parent suffers as she has, Barbara has become a thoughtful advocate for tougher food-safety laws. She has worked with me personally on the issue, and through her involvement with STOP, Safe Tables Our Priority. Barbara has been instrumental in educating policy makers about the threat of foodborne diseases such as *E. Coli* and *Salmonella*. Barbara's testimony in front of the Committee on Review of the Use of Scientific Criteria and Performance Standards for Safe Food at the National Academy of Sciences helped the NAS write its 2003 report *Scientific Criteria to Ensure Safe Food*. Barbara realizes that these diseases are preventable, that we have technology and understanding to improve the safety of America's meat and poultry, and it is high time that we do it.

Kevin's Law grants the USDA enforcement authority to enhance the regulatory structure for food safety. It includes key provisions that will allow the USDA to conduct scientific surveys to identify the foodborne pathogens that represent the largest threat to our public health and to set and update pathogen reduction standards to reduce the presence of these pathogens in meat and poultry. I applaud Senators SPECTER and HARKIN for their leadership on this issue, and I thank Barbara Kowalczyk for her commitment to keeping American consumers safe from dangerous food products.

By Mr. DURBIN (for himself and Mr. LAUTENBERG):

S. 1358. A bill to protect scientific integrity in Federal research and policymaking; to the Committee on Homeland Security and Governmental Affairs.

Mr. DURBIN. Mr. President, I am pleased to introduce the Restore Scientific Integrity to Federal Research and Policymaking Act. I thank my House colleagues HENRY WAXMAN and BART GORDON, who introduced the original legislation in the House of Representatives. I also thank my colleague, Senator LAUTENBERG, who is an original co-sponsor of this legislation.

This bill prohibits censoring or tampering with government science and protects government scientists who blow the whistle on abuses.

Thousands of scientists—including 48 Nobel Laureates—have come forward to express their concerns that science has been manipulated or silenced by the Bush Administration.

We learned a few weeks ago, for example, that a White House lawyer with no scientific credentials had been revising government scientific reports on climate change to systematically weaken conclusions on global warming.

In May, the *New York Times* reported that the southwestern regional

director of the Fish and Wildlife Service instructed scientists on his staff to ignore the latest genetic data when determining protections for endangered species.

In 2002, a professor invited to join an NIH advisory committee was called and asked for his views on a number of political issues, including whether he supported abortion rights and whether he had voted for President Bush. The professor—who had not voted for President Bush—was not appointed to the committee.

These are disturbing examples of the intrusion of politics into science. We rely on science to give us objective facts, not political spin. The Restore Scientific Integrity Act will help protect science from political interference.

The Act prohibits Federal employees from obstructing or censoring federally funded scientific research and from disseminating scientific information known to be false or misleading.

The legislation prohibits the use of political litmus tests when appointing experts to serve on scientific advisory committees and strengthens protections against conflicts of interest.

The bill extends whistleblower protections to federal employees who report allegations of political interference with science.

The bill establishes that peer review processes should be established by science-based agencies, not by the Office of Management and Budget.

And, the legislation directs the White House Science Advisor to prepare annual reports on scientific integrity in the federal agencies.

These are common sense provisions that help protect government science from political interference. I ask my colleagues to join me in supporting this legislation.

By Mr. SESSIONS (for himself, Mr. CRAIG, Mr. INHOFE, and Mr. ISAKSON):

S. 1362. A bill to provide for enhanced Federal enforcement of, and State and local assistance in the enforcement of, the immigration laws of the United States, and for other purposes; to the Committee on the Judiciary.

Mr. SESSIONS. Mr. President, I rise today to introduce the Homeland Security Enhancement Act of 2005. I am pleased to be joined by Senator CRAIG and Senator INHOFE, who cosponsored an earlier version of the bill in the 108th Congress, and who are original sponsors of this year's legislation. Our bill takes the lead in encouraging a culture of cooperation among all levels of immigration law enforcement—Federal, State, and local—it seeks to build an immigration law enforcement system that is inclusive of all law enforcement officers, has adequate detention bedspace, uses unified databases for information sharing from one level of law enforcement to another, and has adequate detention bedspace.

These elements are a necessary foundation for any future comprehensive

immigration reform and I am pleased that the need for this foundation was recently recognized by Senators KYL and CORNYN in the release of the enforcement principles of the immigration bill they are currently drafting. Changes in substantive immigration law are surely needed, but unless an effective enforcement mechanism is included, the new rules will also collapse under a rising tide of illegality.

More than 15 years of service as a U.S. Attorney in Alabama and then as Alabama's Attorney General—as well as my current role on the Immigration, Border Security, and Citizenship Subcommittee—have taught me that the involvement of State and local law enforcement will be a critical part of any new and successful immigration enforcement scheme. Establishing an effective partnership between the 700,000 State and local law enforcement officers who patrol our streets every day and the small number of Federal immigration officers will be a test of our Nation's will to establish an effective and enforceable legal scheme for immigration.

I care very deeply about the ability of State and local law enforcement to voluntarily aid the federal government in the enforcement of immigration law. As a result, I also care very deeply about tearing down barriers to that voluntary assistance. The need for this voluntary assistance has only grown stronger over the last year and a half, since I first introduced this legislation in the Senate. Over the course of that time we have heard about the need to reform our immigration laws to create a system that is as enforceable as it is generous and workable. Creation of an enforceable immigration system will undoubtedly require increased manpower, streamlined information sharing, and bedspace to hold those we apprehend.

This legislation targets all three of these essential enforcement components, and will go a long way toward fixing our broken immigration enforcement system—the system that is currently allowing people to remain in the U.S. for indefinite time periods, regardless of how they came here.

Let me be clear, this bill is not about the commandeering of State and local police forces or about forcing them to dedicate resources toward immigration law enforcement when they have other priorities, it is simply about welcoming their assistance in the realm of immigration law enforcement if they choose to give it.

We know that Americans strongly value our heritage as a Nation of immigrants. Americans openly welcome legal immigrants and new citizens with character, ability, decency, and a strong work ethic. However, it is also clear that Americans do not feel the same way about illegal immigration. The fact is that a large majority of Americans feel that State and local governments should be aiding the Federal Government in stopping illegal immigration.

A RoperASW poll published in March of 2003 titled "Americans Talk About Illegal Immigration" found that 88 percent of Americans agree, and 68 percent "strongly" agree, that Congress should require state and local government agencies to notify the INS, now ICE, and their local law enforcement when they determine that a person is here illegally or has presented fraudulent documentation. Additionally, 85 percent of Americans agree, and 62 percent "strongly" agree that Congress should pass a law requiring State and local governments and law enforcement agencies, to apprehend and turn over to the INS illegal immigrants with whom they come in contact.

Those numbers speak volumes about the desires of the American population. It is important to note that these responses were collected in response to questions about requiring State and local immigration enforcement action. It is very likely that a poll on this bill, a bill that is about voluntary State and local action, would yield even stronger support.

America's strength is based on its commitment to the rule of law. Inscribed on the front of the Supreme Court Building just down the street are the words, "Equal Justice Under Law."

In the world of immigration laws, the current facade of enforcement that holds no real consequences for law breakers is both dangerous and irresponsible. If the only real consequence of coming to this country illegally is a social label, then our immigration laws are but a brightly painted sepulcher full of dead bones, for it is impossible to be a nation governed by the rule of law, if our laws have no real effect on the lives of the people they govern.

Our illegal alien population was at a record high two years ago and the numbers continue to climb. The lack of immigration enforcement in our country's interior has resulted in 8-12 million illegal aliens living in the U.S. with another estimated 800,000 illegal aliens joining them every year—that is on top of the more than 1 million that legally immigrate each year. These numbers make it easy for criminal aliens and absconders to disappear inside our borders.

Of the 8-10 million illegal aliens present today, the Department of Homeland Security has estimated that 450,000 are "alien absconders"—people that have been issued final deportation orders but have not shown up for their hearings. An estimated 40,000 absconders join that number every year.

An estimated 86,000 of them are criminal illegal aliens—people convicted of crimes they committed in the U.S. who should have been deported, but have slipped through the cracks and are still here.

The next number is perhaps the most concerning—3,000 of the "alien absconders" within our borders are from one of the countries that the State Department has designated to be a "state sponsor of terrorism."

The number of illegal aliens outweighs the number of federal agents whose job it is to find them within our borders by 5,000 to 1. The enforcement arm of the old INS, now called The Bureau of Immigration and Customs Enforcement, ICE, has just over 2,000 interior agents inside the borders. Leaving the job of interior immigration enforcement solely to them will guarantee failure. If each interior agent investigated, arrested, prosecuted and deported an illegal alien every day, it would take almost 14 years to deport the current illegal alien population.

State and local police, a force 700,000 strong, are the eyes and ears of our communities. They are sworn to uphold the law. They police our streets and neighborhoods every day. Their role is absolutely critical to the success of our immigration system.

For that critical role to be effective, a few very important things need to happen: 1. State and local law enforcement officers need clear authority to voluntarily act; 2. the NCIC Immigration Violators File needs to contain all critical immigration information so that officers have quick roadside access to critical immigration information; 3. Federal immigration officials have to take custody of illegal aliens apprehended by State officers, they can not continue to ignore State and local requests for assistance; 4. the Institutional Removal Program has to be expanded so that all criminal aliens are detained after their State sentences until deportation, instead of being released back into the community just to be searched for by Federal officials at a later date; and 5. critically needed Federal bed space has to be given to DHS so that the practice of "catch and release" can be ended and effective removal can begin.

The Homeland Security Enhancement Act that Senator CRAIG, Senator INHOFE, and I are introducing today will do all of those things.

Let me tell you about a few of the problems in immigration enforcement that started my interest in this area and prompted me to author this bill, to push for the hearing on April 22 of 2004 in the Senate Judiciary Committee titled "State and Local Authority to Enforce Immigration Law: Evaluating a Unified Approach for Stopping Terrorists", and to author a law review article in the April 2005 issue of the Stanford Law and Policy Review titled "The Growing Role for State and Local Law Enforcement in the Real of Immigration Law."

A few years ago, police chiefs and sheriffs in Alabama began to tell me that they had been shut out of the immigration enforcement system and that they felt powerless to do anything about Alabama's growing illegal immigrant population.

As I went to town hall meetings and conferences with police, I heard the same story—"When we come across illegal aliens in our normal course of duty, we have given up calling because

the INS tells us we have to have 15 or more illegal aliens in custody or they will not even come pick them up."

Even worse, Alabama police were routinely told that the aliens could not be detained until the INS could manage to send someone. They were told they had to just let them go! They were being told this, even though I believed that the legal authority of State and local officers to voluntarily act on violations of immigration law was pretty clear. If there is any doubt that State and local officers have this authority, Congress needs to remove that doubt which is exactly what this bill will do.

Only two U.S. Circuit Courts of Appeal have expressly ruled on State and local law enforcement authority to make an arrest on an immigration law violation. In 1983, the Ninth Circuit, while not mentioning a preexisting general authority, held that nothing in Federal law precludes the police from enforcing the criminal provisions of the Immigration and Naturalization Act. *Gonzales v. City of Peoria*, 722 F.2d 468 (9th Cir. 1983).

The Tenth Circuit has reviewed this question on several occasions, concluding squarely that a "state trooper has general investigatory authority to inquire into possible immigration violations." *United States v. Salinas-Calderon*, 728 F.2d 1298, 1301 n.3 (10th Cir. 1984). As the Tenth Circuit has described it, there is a "preexisting general authority of state or local police officers to investigate and make arrests for violations of Federal law, including immigration laws." *United States v. Vasquez-Alvarez*, 176 F.3d 1294, 1295 (10th Cir. 1999).

Again, in 2001, the Tenth Circuit reiterated that "state and local police officers [have] implicit authority within their respective jurisdictions to investigate and make arrests for violations of Federal law, including immigration laws." *United States v. Santana-Garcia*, 264 F.3d 1188, 1194 (citing *United States v. Vasquez-Alvarez*, 176 F.3d 1294, 1295).

None of these Tenth Circuit holdings drew any distinction between criminal violations of the INA and civil provisions of the INA that render an alien deportable. It appears that the Ninth Circuit started the confusion regarding the distinction between civil and criminal violations in *Gonzales v. City of Peoria* by asserting in dicta that the civil provisions of the INA are a persuasive regulatory scheme, and therefore only the Federal Government has the power to enforce civil violations. See *Gonzales v. City of Peoria*, 722 F.2d 468 (9th Cir. 1983).

This confusion was, to some extent, fostered by an erroneous 1996 opinion of the Office of Legal Counsel, OLC of the Department of Justice, the relevant part of which has since been withdrawn by OLC.

Why was the Federal agency responsible for interior immigration enforcement telling my police chiefs in Alabama to let illegal aliens go free?

To be fair, ICE still does not have the manpower or detention space to take

custody and detain all illegal aliens. With less than 20,000 appropriated detention beds, ICE tells us over and over again that they do not have the bed space to detain all the illegal aliens that they apprehend; instead, they are forced to give first priority to detaining the worst of the worst individuals such as convicted felon aliens.

It is shocking to me that even though we know that detention is a key element of effective removal, we do not even detain all illegal aliens that have been convicted of crimes for removal. Last February, in a report titled "The Immigration and Naturalization Service's Removal of Aliens Issued Final Orders" the Department of Justice Inspector General found that 87 percent of those not detained before removal never get deported. Even in high risk categories, the IG found that only fractions of non-detained violators are ever removed—35 percent of those with criminal records and 6 percent of those from "state sponsors of terrorism." These percentages have not changed since 1996, when the last IG report issued on the ability to remove aliens found that 89 percent of aliens with final deportation orders that are not detained are never removed.

Just this month, during a joint hearing of the Judiciary Committee Immigration and Terrorism Subcommittees titled "The Southern Border in Crisis: Resources and Strategies to Improve National Security" we learned that in some jurisdictions such—as Harlingen Texas—"no show" rates for immigration hearings are as high as 98 percent. Those numbers speak for themselves about our efficiency in the realm of immigration enforcement. The American people deserve better, they deserve to know that our laws will be enforced instead of ignored without consequence.

But we can not lay all the blame on DHS—they can only detain illegal aliens that they have space to detain. We know that DHS is using all of the bed space that they have and that it is not enough they consistently tell us that they are releasing people that should be detained because there is no more room. The Homeland Security Enhancement Act would add critical bed space DHS needs to fulfill its mission of interior enforcement.

The third problem that was brought to my attention and motivated my desire to introduce this bill, is the inadequate way we share immigration information with State and local police. We have databases full of information on criminal aliens and aliens with final deportation orders, but that information is not directly available to State and local police. They have to make a special second inquiry to the immigration center in Vermont just to see if an illegal alien is wanted by DHS.

The Hart Rhudman Report, "America Still Unprepared—America Still In Danger," found that one problem America still confronts is "700,000 local and State police officials continue to operate in a virtual intelligence vacuum, without access to terrorist

watchlists." The first recommendation of the report was to "tap the eyes and ears of local and State law enforcement officers in preventing attacks." On page 19, the report specifically cited the burden of finding hundreds of thousands of fugitive aliens living among the population of more than 8.5 million illegal aliens living in the U.S. and suggested that the burden could and should be shared with 700,000 local, county, and State law enforcement officers if they could be brought out of the information void.

Without easy access to immigration database information, and with ICE unwilling to come and identify every suspected illegal alien, State and local police can not quickly and accurately identify who they have detained and who they will be releasing back into the community if they follow ICE's instruction to "just let them go."

State and local police are accustomed to checking for criminal information in the NCIC, National Crime Information Center, database, which is maintained by the FBI. They can, and routinely do, access the NCIC on the roadside when they pull over a car or stop a suspect. An NCIC check, which takes just minutes, includes information about individuals with outstanding warrants. Even fugitives that use false identification can be identified on the roadside through use of the NCIC when, as is often the case, a police officer has access to an instant fingerprint scanner in his car.

Separate from the NCIC, ICE operates the Law Enforcement Support Center, which makes immigration information available to State and local police, but requires a second additional check after NCIC that most State and local police either don't know about or don't have the time to perform.

The ability of the NCIC to convey immigration information to State and local police is not being fully utilized. To date, the Immigration Violators File of the NCIC contains just over 150,000 entries and only 39,000 of those are alien absconders. This file should be greatly and rapidly expanded. At the very least, the NCIC should contain information on all illegal aliens who have received final orders of departure, all illegal aliens who have signed voluntary departure agreements, and all aliens who have had their visas revoked. In truth, the NCIC should contain information on all violations of immigration law.

If State and local police are not accessing the immigration information we have worked hard to make available, we must find a way to get the information to them, through systems they are used to using. Our bill will get information to them through the system they are already using—the NCIC.

Our bill will ensure that when an NCIC roadside check is done on an individual pulled over for speeding, police will know immediately if the individual has already been ordered to leave the country, has signed a legal

document promising to leave, has overstayed their visa, or has had their visa revoked.

Understanding the value of getting immigration information to State and local police comes from understanding that they are the ones who will come into contact with the dangerous illegal aliens on a day-to-day basis.

Three 9/11 hijackers were stopped by State and local police in the weeks proceeding 9/11. Hijacker Mohammad Atta, believed to have piloted American Airlines Flight 77 into the World Trade Center's north tower, was stopped twice by police in Florida. Hijacker Ziad S. Jarrah was stopped for speeding by Maryland State Police two days before 9/11. And, Hani Hanjour, who was on the flight that crashed into the Pentagon, was stopped for speeding by police in Arlington, Virginia. Local police can be our most powerful tool in the war against terrorism.

The D.C. Snipers were caught because of the fingerprint collected by local police. John Lee Malvo was identified when the fingerprint collected from a magazine at the scene of the liquor store murder and robbery in Montgomery, Alabama matched with the fingerprints collected by INS agents in Washington State. Had both law enforcement entities not done their job by taking prints, it is possible that the identity of John Lee Malvo could have been a mystery for weeks longer.

In New York a 42-year-old woman sitting on a park bench with her boyfriend was dragged away and gang-raped by five deportable illegal immigrants. Although 4 of the 5 had State criminal convictions and 2 had served jail time, the INS claims they were never told about them—thus, they were not deported as the law requires.

56 illegal aliens were caught by State and local police, and convicted of molestation and child abuse, long before ICE's "Operation Predator" found them living in New York and Northern New Jersey long after they should have been deported. Of the 56 arrested, one had raped his 10-year-old niece; another had sexually assaulted a 6-year-old boy; one had raped his 7-year-old niece; and another had sexually assaulted a 2-year-old.

The 9/11 hijacker cases, the D.C. sniper cases, and a multitude of criminal alien cases clearly illustrate that our State and local police are the front lines of combating alien crime. To leave them out of the enforcement system, as we do now, eliminates our most effective weapon against criminal and terrorist aliens.

Many advocacy groups have vocally opposed the idea of State and local immigration law enforcement over the course of the last year. They would prefer that Congress not clarify this enforcement authority and that we leave State and local officers in the dark.

Such groups contend that if immigration enforcement functions are performed by anyone other than Federal

law enforcement officials, at least three negative consequences will ensue. First, they argue that State and local law enforcement entities will be handed an unfunded mandate and will be forced to enforce immigration law violations against their will and at their expense. Second, they argue that immigrant communities, and the victims and witnesses that live within them, will abandon their trust of, and cooperative partnership with, State and local law enforcement. And third, they argue that State and local law enforcement officers will abuse their inherent enforcement authority to engage in racial profiling, harassment, and discrimination.

By making these claims, advocacy groups seek to maintain the ineffective status quo for enforcement by local officers and thwart the possibility of an effective enforcement partnership between the Federal Government and the States.

The assertions of these advocacy groups are more myth than reality. The first assertion is that the Federal Government is trying to burden State and local governments with an unfunded mandate. Every police and sheriff's department across the country must make choices every day regarding their enforcement priorities and resources. Certainly, their legal authority and law enforcement goals are not served by being shut out of immigration law enforcement. It is a curious argument to say that local police are helped by being denied their lawful powers to voluntarily aid Federal immigration authorities. They should not be forced to ignore laws being broken in their presence and in their communities.

The second myth that anti-local enforcement advocates would have policymakers believe is twofold: that a current cooperative partnership exists between local police and immigrant communities, and that immigration enforcement will cause immigrant victims and witnesses of crimes to abandon these cooperative partnerships. One advocacy group, the American Civil Liberties Union of New Jersey, argues: "These combined measures will ensure that more immigrants will avoid contact with law enforcement, putting entire communities at risk. For instance, immigrant victims of crime will hesitate to report the crimes to the police if they fear adverse immigration consequences from their contact with the officials." Again, the argument fails because State and local police retain their independent power to make prosecution choices. They are not required to report illegal alien victims or witnesses to Federal authorities or to investigate crimes they do not want to investigate. To make sure that this is understood, the authors of this bill have agreed to add language clarifying that nothing in the bill requires State and local officers to report crime victims or witnesses to Federal immigration authorities.

Perhaps the most egregious assertion made by opponents of effective enforcement is the allegation that State and local law enforcement officers will use their inherent enforcement authority as a license to engage in racial profiling, harassment, and discrimination. Specifically, the National Council of La Raza strongly opposes State and local law enforcement participation because it claims such involvement is “likely to result in increased racial profiling, police misconduct, and civil rights violations.” This argument is curious because it would effectively grant more protection to non-citizens here illegally than to citizens, who are subject to arrest by State and Federal law enforcement officers for violations of Federal law. It is curious logic to say that we trust our police to enforce laws against citizens but not against non-citizens here illegally. State and local police are trained to protect the civil rights of all types of suspects and defendants and they do so every day in this country. In Alabama, State troopers receive annual training on racial profiling. In New York, the NYC Police Department Operations Order #11 strictly prohibits racial profiling in law enforcement actions. If Alabama and New York are consistent in how they instruct and train their State and local police with regards to racial profiling, it is safe to assume that the rest of the Nation is as well.

Under this bill, State and local police will have to respect the civil rights of illegal aliens the same way they respect the civil rights of all people against whom they enforce the law. State and local police will continue to be held responsible for violations of civil rights; this bill does not change that fact.

The opposition will say that this bill is expensive; that it costs too much. It is always expensive to enforce the law. I do not think this bill is overly expensive. We have made it as cost affordable as we can by electing to use resources already available to us—facilities closed down under the Defense Base Closure Realignment Act of 1990 and law enforcement officers across America already out on our streets doing their jobs. Law enforcement is not an area where it pays to pinch pennies. In immigration enforcement, it costs us too much not to enforce the law. It is time that Congress take responsibility for providing DHS with the resources they need to do the job we have given them.

When it comes to immigration enforcement in America, the rule of law is not prevailing. If we are serious about securing the homeland, we simply must get serious about immigration enforcement.

It is time to talk about the big picture—time to be honest about what it will really take to fix our broken immigration system. In most cases, we don't need tougher immigration laws, we just need to utilize our existing resources and use some new resources to enforce the laws we already have.

If State and local police are confused about their authority to enforce immigration laws, that authority needs to be clarified. This bill will do that. If State and local police cannot access immigration background information on individuals quickly enough, we should change that. This bill makes that information more accessible through expanding use of the NCIC. If DHS is not taking custody of illegal aliens being apprehended by State and local police, we need to make it possible for them to do so. This bill will address the practice of “catching and releasing” illegal aliens. If we do not have enough detention space to hold people that break the law, then we need more detention space. This bill gives DHS 50 percent more bedspace for immigration enforcement. If illegal aliens are being released back into the community after their prison sentences instead of being deported, we need to fix the system that releases them. This bill will extend the Institutional Removal Program to ensure that custody is transferred from the State prison to Federal officials at the end of the alien's prison sentence.

Once again I would like to thank Senator CRAIG and Senator INHOFE for joining with me to introduce this legislation, and I would like to thank Congressman NORWOOD for introducing companion legislation in the House.

It is imperative that we take critical steps toward regaining control of our borders and that we lay the enforcement foundation for necessary immigration reforms. This bill is a critical step in the right direction. I encourage my colleagues to study this bill and join us in working to pass the Homeland Security Enhancement Act of 2005.

I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1362

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 “Homeland Security Enhancement Act of 2005”.

SEC. 2. STATE DEFINED.

In this Act, the term “State” has the meaning given that term in section 101(a)(36) of the Immigration and Nationality Act (8 U.S.C. 1101 (a)(36)).

SEC. 3. FEDERAL AFFIRMATION OF IMMIGRATION LAW ENFORCEMENT BY STATES AND POLITICAL SUBDIVISIONS OF STATES.

Notwithstanding any other provision of law and reaffirming the existing inherent authority of States, law enforcement personnel of a State or a political subdivision of a State have the inherent authority of a sovereign entity to investigate, identify, apprehend, arrest, detain, or transfer to Federal custody aliens in the United States (including the transportation of such aliens across State lines to detention centers), for the purpose of assisting in the enforcement of the immigration laws of the United States in the

normal course of carrying out the law enforcement duties of such personnel. This State authority has never been displaced or preempted by a Federal law.

SEC. 4. STATE AND LOCAL LAW ENFORCEMENT PROVISION OF INFORMATION REGARDING ALIENS.

(a) VIOLATIONS OF FEDERAL LAW.—A statute, policy, or practice that prohibits a law enforcement officer of a State, or of a political subdivision of a State, from enforcing Federal immigration laws or from assisting or cooperating with Federal immigration law enforcement in the course of carrying out the law enforcement duties of the officer or from providing information to an official of the United States Government regarding the immigration status of an individual who is believed to be illegally present in the United States is in violation of section 642(a) of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (8 U.S.C. 1373(a)) and section 434 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (8 U.S.C. 1644).

(b) PROVISION OF INFORMATION REGARDING APPREHENDED ILLEGAL ALIENS.—

(1) IN GENERAL.—In compliance with section 642(a) of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (8 U.S.C. 1373(a)) and section 434 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (8 U.S.C. 1644), States and localities should provide to the Secretary of Homeland Security the information listed in subsection (c) on each alien apprehended or arrested in the jurisdiction of the State or locality who is believed to be in violation of an immigration law of the United States. Such information should be provided regardless of the reason for the apprehension or arrest of the alien.

(2) TIME LIMITATION.—Not later than 10 days after an alien described in paragraph (1) is apprehended, information requested to be provided under paragraph (1) should be provided in such form and in such manner as the Secretary of Homeland Security may, by regulation or guideline, require.

(c) INFORMATION REQUIRED.—The information listed in this subsection is as follows:

- (1) The name of the alien.
- (2) The address or place of residence of the alien.
- (3) A physical description of the alien.
- (4) The date, time, and location of the encounter with the alien and reason for stopping, detaining, apprehending, or arresting the alien.

(5) If applicable, the driver's license number issued to the alien and the State of issuance of such license.

(6) If applicable, the type of any other identification document issued to the alien, any designation number contained on the identification document, and the issuing entity for the identification document.

(7) If applicable, the license plate number, make, and model of any automobile registered to, or driven by, the alien.

(8) A photo of the alien, if available or readily obtainable.

(9) The fingerprints of the alien, if available or readily obtainable, including a full set of 10 rolled fingerprints if available or readily obtainable.

(d) REIMBURSEMENT.—The Secretary of Homeland Security shall reimburse States and localities for all reasonable costs, as determined by the Secretary of Homeland Security, incurred by that State or locality as a result of providing information required by this section.

(e) TECHNICAL AND CONFORMING AMENDMENTS.—

(1) ILLEGAL IMMIGRATION REFORM AND IMMIGRANT RESPONSIBILITY ACT OF 1996.—

(A) TECHNICAL AMENDMENT.—Section 642 of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (8 U.S.C. 1373) is amended—

(i) in subsections (a), (b)(1), and (c) by striking “Immigration and Naturalization Service” and inserting “Department of Homeland Security”; and

(ii) in the heading by striking “**IMMIGRATION AND NATURALIZATION SERVICE**” and inserting “**DEPARTMENT OF HOMELAND SECURITY**”.

(B) CONFORMING AMENDMENT.—Section 1(d) of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (division C of Public Law 104-208; 110 Stat. 3009-546) is amended by striking the item related to section 642 and inserting the following:

“Sec. 642. Communication between government agencies and the Department of Homeland Security.”.

(2) PERSONAL RESPONSIBILITY AND WORK OPPORTUNITY RECONCILIATION ACT OF 1996.—

(A) IN GENERAL.—Section 434 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (8 U.S.C. 1644) is amended—

(i) by striking “Immigration and Naturalization Service” and inserting “Department of Homeland Security”; and

(ii) in the heading by striking “**IMMIGRATION AND NATURALIZATION SERVICE**” and inserting “**DEPARTMENT OF HOMELAND SECURITY**”.

(B) CONFORMING AMENDMENT.—Section 2 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193; 110 Stat. 2105) is amended by striking the item related to section 434 and inserting the following:

“Sec. 434. Communication between State and local government agencies and the Department of Homeland Security.”.

(f) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated such sums as are necessary to provide the reimbursements required by subsection (d).

SEC. 5. CIVIL AND CRIMINAL PENALTIES AND FORFEITURE FOR ALIENS UNLAWFULLY PRESENT IN THE UNITED STATES.

(a) ALIENS UNLAWFULLY PRESENT.—Title II of the Immigration and Nationality Act (8 U.S.C. 1151 et seq.) is amended by adding after section 275 the following:

“**CRIMINAL PENALTIES FOR UNLAWFUL PRESENCE IN THE UNITED STATES**

“Sec. 275A. (a) IN GENERAL.—In addition to any other violation, an alien present in the United States in violation of this Act shall be guilty of a misdemeanor and shall be fined under title 18, United States Code, imprisoned not more than 1 year, or both. The assets of any alien present in the United States in violation of this Act shall be subject to forfeiture under title 19, United States Code.

“(b) AFFIRMATIVE DEFENSE.—It shall be an affirmative defense to a violation of subsection (a) that the alien overstayed the time allotted under the alien’s visa due to an exceptional and extremely unusual hardship or physical illness that prevented the alien from leaving the United States by the required date.”.

(b) INCREASE IN CRIMINAL PENALTIES FOR ILLEGAL ENTRY.—Section 275(a) of the Immigration and Nationality Act (8 U.S.C. 1325(a)) is amended by striking “6 months,” and inserting “1 year.”.

SEC. 6. LISTING OF IMMIGRATION VIOLATORS IN THE NATIONAL CRIME INFORMATION CENTER DATABASE.

(a) PROVISION OF INFORMATION TO THE NCIC.—

(1) IN GENERAL.—Not later than 180 days after the date of enactment of this Act, the

Under Secretary for Border and Transportation Security of the Department of Homeland Security shall provide the National Crime Information Center of the Department of Justice with such information as the Director may have related to—

(A) any alien against whom a final order of removal has been issued;

(B) any alien who is subject to a voluntary departure agreement;

(C) any alien who has remained in the United States beyond the alien’s authorized period of stay; and

(D) any alien whose visa has been revoked.

(2) REQUIREMENT TO PROVIDE AND USE INFORMATION.—The information described in paragraph (1) shall be provided to the National Crime Information Center, and the Center shall enter the information into the Immigration Violators File of the National Crime Information Center database, regardless of whether—

(A) the alien received notice of a final order of removal;

(B) the alien has already been removed; or

(C) sufficient identifying information is available for the alien, such as a physical description of the alien.

(b) INCLUSION OF INFORMATION IN THE NCIC DATABASE.—Section 534(a) of title 28, United States Code, is amended—

(1) in paragraph (3), by striking “and” at the end;

(2) by redesignating paragraph (4) as paragraph (5); and

(3) by inserting after paragraph (3) the following:

“(4) acquire, collect, classify, and preserve records of violations of the immigration laws of the United States, regardless of whether the alien has received notice of the violation, sufficient identifying information is available for the alien, or the alien has already been removed; and”.

(c) PERMISSION TO DEPART VOLUNTARILY.—Section 240B of the Immigration and Nationality Act (8 U.S.C. 1229c) is amended—

(1) by striking “Attorney General” each place that term appears and inserting “Secretary of Homeland Security”; and

(2) in subsection (a)(2)(A), by striking “120” and inserting “30”.

SEC. 7. INCREASE OF FEDERAL DETENTION SPACE AND THE UTILIZATION OF FACILITIES IDENTIFIED FOR CLOSURES AS A RESULT OF THE DEFENSE BASE CLOSURE REALIGNMENT ACT OF 1990.

(a) CONSTRUCTION OR ACQUISITION OF DETENTION FACILITIES.—

(1) IN GENERAL.—The Secretary of Homeland Security shall construct or acquire, in addition to existing facilities for the detention of aliens, 20 detention facilities in the United States that have the capacity to detain a total of not less than 10,000 individuals at any time for aliens detained pending removal or a decision on removal of such alien from the United States.

(2) DETERMINATION OF LOCATION.—The location of any detention facility built or acquired in accordance with this subsection shall be determined by the Deputy Assistant Director of the Office of Detention and Removal Operations within the Bureau of Immigration and Customs Enforcement.

(3) USE OF INSTALLATIONS UNDER BASE CLOSURE LAWS.—In acquiring detention facilities under this subsection, the Secretary of Homeland Security shall, to the maximum extent practical, request the transfer of appropriate portions of military installations approved for closure or realignment under the Defense Base Closure and Realignment Act of 1990 (part A of title XXIX of Public Law 101-510; 10 U.S.C. 2687 note) for use in accordance with paragraph (1).

(b) TECHNICAL AND CONFORMING AMENDMENT.—Section 241(g)(1) of the Immigration

and Nationality Act (8 U.S.C. 1231(g)(1)) is amended by striking “may expend” and inserting “shall expend”.

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

SEC. 8. FEDERAL CUSTODY OF ILLEGAL ALIENS APPREHENDED BY STATE OR LOCAL LAW ENFORCEMENT.

(a) IN GENERAL.—Title II of the Immigration and Nationality Act (8 U.S.C. 1151 et seq.) is amended by adding after section 240C the following:

“**TRANSFER OF ILLEGAL ALIENS FROM STATE TO FEDERAL CUSTODY**

“SEC. 240D. (a) IN GENERAL.—If the head of a law enforcement entity of a State (or, if appropriate, a political subdivision of the State) exercising authority with respect to the apprehension or arrest of an illegal alien submits a request to the Secretary of Homeland Security that the alien be taken into Federal custody, the Secretary of Homeland Security—

“(1) shall—

“(A) not later than 72 hours after the conclusion of the State charging process or dismissal process, or if no State charging or dismissal process is required, not later than 72 hours after the illegal alien is apprehended, take the illegal alien into the custody of the Federal Government and incarcerate the alien; or

“(B) request that the relevant State or local law enforcement agency temporarily detain or transport the illegal alien to a location for transfer to Federal custody; and

“(2) shall designate at least one Federal, State, or local prison or jail or a private contracted prison or detention facility within each State as the central facility for that State to transfer custody of criminal or illegal aliens to the Department of Homeland Security.”.

“(b) REIMBURSEMENT.—

“(1) IN GENERAL.—The Department of Homeland Security shall reimburse a State or a political subdivision of a State for all reasonable expenses, as determined by the Secretary of Homeland Security, incurred by the State or political subdivision in the detention and transportation of a criminal or illegal alien as described in subparagraphs (A) and (B) of subsection (a)(1).

“(2) COST COMPUTATION.—Compensation provided for costs incurred under subparagraphs (A) and (B) of subsection (a)(1) shall be—

“(A) the product of—

“(i) the average cost of incarceration of a prisoner in the relevant State, as determined by the chief executive officer of a State (or, as appropriate, a political subdivision of the State); multiplied by

“(ii) the number of days that the alien was in the custody of the State or political subdivision; added to

“(B) the cost of transporting the criminal or illegal alien from the point of apprehension or arrest to the location of detention, and if the location of detention and of custody transfer are different, to the custody transfer point.

“(c) REQUIREMENT FOR APPROPRIATE SECURITY.—The Secretary of Homeland Security shall ensure that illegal aliens incarcerated in Federal facilities pursuant to this subsection are held in facilities which provide an appropriate level of security.

“(d) REQUIREMENT FOR SCHEDULE.—

“(1) IN GENERAL.—In carrying out this section, the Secretary of Homeland Security shall establish a regular circuit and schedule for the prompt transfer of apprehended illegal aliens from the custody of States and political subdivisions of States to Federal custody.

“(2) AUTHORITY FOR CONTRACTS.—The Secretary of Homeland Security may enter into contracts with appropriate State and local law enforcement and detention officials to implement this subsection.

“(e) ILLEGAL ALIEN DEFINED.—For purposes of this section, the term ‘illegal alien’ means an alien who—

“(1) entered the United States without inspection or at any time or place other than that designated by the Secretary of Homeland Security;

“(2) was admitted as a nonimmigrant and who, at the time the alien was taken into custody by the State or a political subdivision of the State, had failed to—

“(A) maintain the nonimmigrant status in which the alien was admitted or to which it was changed under section 248; or

“(B) comply with the conditions of any such status;

“(3) was admitted as an immigrant and has subsequently failed to comply with the requirements of that status; or

“(4) failed to depart the United States under a voluntary departure agreement or under a final order of removal.”.

(b) AUTHORIZATION OF APPROPRIATIONS FOR THE DETENTION AND TRANSPORTATION TO FEDERAL CUSTODY OF ALIENS NOT LAWFULLY PRESENT.—There is authorized to be appropriated \$500,000,000 for the detention and removal of aliens not lawfully present in the United States under the Immigration and Nationality Act (8 U.S.C. 1101 et seq.) for fiscal year 2006 and each subsequent fiscal year.

SEC. 9. IMMIGRATION LAW ENFORCEMENT TRAINING OF STATE AND LOCAL LAW ENFORCEMENT PERSONNEL.

(a) TRAINING MANUAL AND POCKET GUIDE.—

(1) ESTABLISHMENT.—Not later than 180 days after the date of enactment of this Act, the Secretary of Homeland Security shall establish—

(A) a training manual for law enforcement personnel of a State or political subdivision of a State to train such personnel in the investigation, identification, apprehension, arrest, detention, and transfer to Federal custody of aliens in the United States (including the transportation of such aliens across State lines to detention centers and the identification of fraudulent documents); and

(B) an immigration enforcement pocket guide for law enforcement personnel of a State or political subdivision of a State to provide a quick reference for such personnel in the course of duty.

(2) AVAILABILITY.—The training manual and pocket guide established in accordance with paragraph (1) shall be made available to all State and local law enforcement personnel.

(3) APPLICABILITY.—Nothing in this subsection shall be construed to require State or local law enforcement personnel to carry the training manual or pocket guide established in accordance with paragraph (1) with them while on duty.

(4) COSTS.—The Secretary of Homeland Security shall be responsible for any and all costs incurred in establishing the training manual and pocket guide under this subsection.

(b) TRAINING FLEXIBILITY.—

(1) IN GENERAL.—The Secretary of Homeland Security shall make training of State and local law enforcement officers available through as many means as possible, including residential training at the Center for Domestic Preparedness of the Department of Homeland Security, onsite training held at State or local police agencies or facilities, on-line training courses by computer, teleconferencing, and videotape, or the digital video display (DVD) of a training course or courses.

(2) ON-LINE TRAINING.—The head of the Distributed Learning Program of the Federal Law Enforcement Training Center shall make training available for State and local law enforcement personnel via the Internet through a secure, encrypted distributed learning system that has all its servers based in the United States, is sealable, survivable, and is capable of having a portal in place within 30 days.

(3) FEDERAL PERSONNEL TRAINING.—The training of State and local law enforcement personnel under this section shall not displace the training of Federal personnel.

(c) CLARIFICATION.—Nothing in this Act or any other provision of law shall be construed as making any immigration-related training a requirement for, or prerequisite to, any State or local law enforcement officer exercising the inherent authority of the officer to investigate, identify, apprehend, arrest, detain, or transfer to Federal custody illegal aliens during the normal course of carrying out the law enforcement duties of the officer.

(d) TRAINING LIMITATION.—Section 287(g) of the Immigration and Nationality Act (8 U.S.C. 1357(g)) is amended—

(1) by striking “Attorney General” each place that term appears and inserting “Secretary of Homeland Security”; and

(2) in paragraph (2), by adding at the end the following: “Such training shall not exceed 14 days or 80 hours, whichever is longer.”.

SEC. 10. IMMUNITY.

(a) PERSONAL IMMUNITY.—Notwithstanding any other provision of law, a law enforcement officer of a State, or of a political subdivision of a State, shall be immune, to the same extent as a Federal law enforcement officer, from personal liability arising out of the enforcement of any immigration law. The immunity provided in this subsection shall only apply to an officer of a State, or of a political subdivision of a State, who is acting within the scope of such officer’s official duties.

(b) AGENCY IMMUNITY.—Notwithstanding any other provision of law, a law enforcement agency of a State, or of a political subdivision of a State, shall be immune from any claim for money damages based on Federal, State, or local civil rights law for an incident arising out of the enforcement of any immigration law, except to the extent that the law enforcement officer of that agency, whose action the claim involves, committed a violation of Federal, State, or local criminal law in the course of enforcing such immigration law.

SEC. 11. PLACES OF DETENTION FOR ALIENS DETERMINED PENDING EXAMINATION OR DECISION ON REMOVAL.

(a) IN GENERAL.—Section 241(g) of the Immigration and Nationality Act (8 U.S.C. 1231(g)) is amended by adding at the end the following:

“(3) POLICY ON DETENTION IN STATE AND LOCAL DETENTION FACILITIES.—In carrying out paragraph (1), the Secretary of Homeland Security shall ensure that an alien arrested under section 287(a) is detained, pending the alien being taken for the examination described in that section, in a State or local prison, jail, detention center, or other comparable facility, if—

“(A) such a facility is the most suitably located Federal, State, or local facility available for such purpose under the circumstances;

“(B) an appropriate arrangement for such use of the facility can be made; and

“(C) such facility satisfies the standards for the housing, care, and security of persons held in custody of a United States marshal.”.

(b) DETENTION FACILITY SUITABILITY.—Notwithstanding any other provision of law, a

facility described in section 241(g)(3)(C) of the Immigration and Nationality Act, as added by subsection (a), is adequate for detention of persons being held for immigration related violations.

(c) TECHNICAL AND CONFORMING AMENDMENT.—Section 241 of the Immigration and Nationality Act (8 U.S.C. 1231) is amended by striking “Attorney General” each place that term appears and inserting “Secretary of Homeland Security”.

SEC. 12. INSTITUTIONAL REMOVAL PROGRAM.

(a) CONTINUATION.—

(1) IN GENERAL.—The Department of Homeland Security shall continue to operate and implement the program known on the date of the enactment of this Act as the Institutional Removal Program which—

(A) identifies removable criminal aliens in Federal and State correctional facilities;

(B) ensures such aliens are not released into the community; and

(C) removes such aliens from the United States after the completion of their sentences.

(2) EXPANSION.—The Institutional Removal Program shall be extended to all States. Any State that receives Federal funds for the incarceration of criminal aliens shall—

(A) cooperate with Federal officials who carry out the Institutional Removal Program;

(B) expeditiously and systematically identify criminal aliens in its prison and jail populations; and

(C) promptly convey such information to the Federal officials who carry out the Institutional Removal Program as a condition for receiving such funds.

(b) AUTHORIZATION FOR DETENTION AFTER COMPLETION OF STATE OR LOCAL PRISON SENTENCE.—Law enforcement officers of a State or political subdivision of a State have the authority to—

(1) hold an illegal alien for a period of up to 14 days after the alien has completed the alien’s State prison sentence in order to effectuate the transfer of the alien to Federal custody when the alien is removable or not lawfully present in the United States; or

(2) issue a detainer that would allow aliens who have served a State prison sentence to be detained by the State prison until personnel from the Bureau of Immigration and Customs Enforcement can take the alien into custody.

(c) TECHNOLOGY USAGE.—Technology such as videoconferencing shall be used to the maximum extent possible in order to make the Institutional Removal Program available in remote locations. Mobile access to Federal databases of aliens, such as the IDENT database maintained by the Secretary of Homeland Security, and live scan technology shall be used to the maximum extent practicable in order to make these resources available to State and local law enforcement agencies in remote locations.

(d) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out the Institutional Removal Program—

(1) \$40,000,000 for fiscal year 2007;

(2) \$50,000,000 for fiscal year 2008;

(3) \$60,000,000 for fiscal year 2009;

(4) \$70,000,000 for fiscal year 2010;

(5) \$80,000,000 for fiscal year 2011; and

(6) \$80,000,000 for each fiscal year after fiscal year 2011.

SEC. 13. CONSTRUCTION.

Nothing in this Act may be construed to require law enforcement personnel of a State or political subdivision of a State to—

(1) report the identity of a victim of, or a witness to, a criminal offense to the Secretary of Homeland Security for immigration enforcement purposes;

(2) arrest such victim or witness for a violation of the immigration laws of the United States; or

(3) enforce the immigration laws of the United States.

SEC. 14. SEVERABILITY.

If any provision of this Act, including any amendment made by this Act, or the application of such provision to any person or circumstance, is held invalid, the remainder of this Act, and the application of such provision to other persons not similarly situated or to other circumstances, shall not be affected by such invalidation.

By Mr. BAUCUS (for himself, Mr. JEFFORDS, and Mr. KERRY):

S. 1363. A bill to amend the Internal Revenue Code of 1986 to prevent dividends received from corporations in tax havens from receiving a reduced tax rate; to the Committee on Finance.

Mr. BAUCUS. Mr. President, today, I am pleased to be joined by my two friends and Finance Committee colleagues, Senator JEFFORDS and Senator KERRY, in filing legislation to close a loophole in the 2003 tax cut bill. The Jobs and Growth Tax Relief and Reconciliation Act of 2003 provided for lower rates of taxation on dividend income. Formerly, taxpayers paid ordinary income rates on dividend income. Now, individuals who receive dividends are taxed at either a 15 percent for upper-income taxpayers, or a 5-percent rate for lower-income taxpayers. Further, in 2008, this lower rate becomes zero before the whole provision expires in 2009.

The demand for lower rates was premised on the claim that dividend income was subject to double taxation; that is, taxed once by the corporate entity and then again by the shareholder. Assuming that is the case, then if we are sure the corporate entity is not subject to tax, the dividend should not be afforded the special rate. In fact, we heard testimony today in the Taxation Subcommittee that corporations with little or no taxes at the entity level really receive an additional benefit from the dividend tax break.

Current law, however, allows dividends from "qualified" foreign corporations to benefit from these lower rates if the company is based in a U.S. possession, or based in a country with which the U.S. has a tax treaty, or has stock which is traded on a U.S. stock exchange. Senator JEFFORDS, Senator KERRY, and I have become concerned that the definition of qualifying foreign corporations is overly broad and may encompass companies in tax haven countries with little or no tax system. Providing this special benefit for such companies simply because its stock is traded on a U.S. exchange does not meet with the original intent of the legislative change. Our bill would shut down this loophole by modifying the "stock exchange" test to only allow this special rate for companies based in countries with a comprehensive income tax system. By doing this, we will address a current inequity between dividend-paying stocks and make sure that only stock of compa-

nies subject to tax at the corporate level enjoys this preferential rate.

With every tax bill we enact, it is important to review the provisions from time to time to make sure the law works as intended. Here, I believe we have found a significant and unintended loophole. Certainly, as we debate whether to extend, expand, or eliminate these preferential rates, we should also be open to improvements in the current law. I encourage my colleagues to join with us in working for such an improvement.

By Mr. REED:

S. 1364. A bill to amend part A of title II of the Higher Education Act of 1965 to enhance teacher training and teacher preparation programs, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Mr. REED. Mr. President, today I am introducing the Preparing, Recruiting, and Retaining Education Professionals, PRREP, Act to improve education and student achievement through high-quality preparation, induction, and professional development for teachers, early childhood education providers, principals, and administrators.

As Congress turns to the reauthorization of the Higher Education Act, we must ensure that educators receive the training and support necessary to thrive in our Nation's early childhood programs, elementary schools, and secondary schools. Improving teacher quality is the single most effective measure we can take to increase student achievement.

With the passage of the No Child Left Behind Act we took an important step toward demanding that all of the Nation's children are taught by highly qualified teachers. To meet the law's definition, teachers are generally required to hold a bachelor's degree, be fully certified by a State, and to demonstrate content knowledge of the subjects they teach. The deadline is looming, and the States are struggling to get all of their teachers deemed highly qualified by the coming school year.

This struggle will not end at the initial deadline. Teacher turnover regularly drains schools of their most important resource, qualified educators. Higher standards for teacher credentials are essential, but at the same time make it even more challenging for schools to staff their classrooms. This is a critical moment for us to tackle persistent teacher attrition and to foment teacher retention. At the same time, we have an opportunity to support the development of educators so they not only have the credentials, but also the skills and training to be truly effective in the classroom. By strengthening the State, partnership, and recruitment grants in Title II of the Higher Education Act, my legislation will accomplish both of these important goals.

Teacher attrition undermines teacher quality and creates teacher short-

ages. According to the National Commission on Teaching and America's Future, one-third of beginning teachers leave the profession within 3 years, and nearly one-half leave within 5 years. In high poverty schools turnover rates are even worse—approximately one-third higher than the rate for all teachers. A recent study in New York found that teachers who leave are likely to have greater skills than those who stay.

The Preparing, Recruiting, and Retaining Education Professionals Act focuses recruitment activities where high teacher turnover and shortages exist, where students are having trouble meeting academic standards, or where there is great difficulty demonstrating that teachers are highly qualified. The grants also allow funds for outreach to encourage recruitment in inner city and rural areas.

Teachers consistently cite lack of administrative support as a primary reason for leaving a school and teaching altogether. My legislation would create a year-long clinical learning experience for prospective teachers, and establish a three-year residency program for new teachers that provides comprehensive induction. The legislation also includes provisions to develop managerial skills among principals so they can provide the most effective instructional leadership and classroom support for teachers during induction and beyond. Research consistently shows that induction programs reduce the number of teachers who leave their schools or the profession. Comprehensive induction programs can cut that number by half or more.

Furthermore, my legislation promotes professional development throughout a teacher's career and strengthens teacher preparation programs so that teachers will reach their maximum potential to positively affect student achievement. A focus on scientific knowledge of teaching skills and methods of student learning will equip teachers to understand and respond effectively to diverse student populations, including students with disabilities, limited-English proficient students, and students with different learning styles or other special learning needs. The legislation also stresses the ability to integrate technology into the classroom, strategies to effectively use assessments to improve instructional practices and curriculum, and an understanding of how to communicate with and involve parents in their children's education.

My legislation further focuses on teaching skills and learning strategies by including in the partnership grants academic departments such as psychology, human development, or one with comparable expertise in the disciplines of teaching, learning, and child and adolescent development. It also ensures that States hold institutions of higher education and entities that provide alternative routes to State certification equally accountable for preparing highly qualified teachers and

highly competent early childhood education providers.

The State, partnership, and recruitment grants are currently funded at only \$68 million a year—far too small of an investment for this critical enterprise. The stakes are too high, not just in terms of meeting the highly qualified requirements of No Child Left Behind, but for real students in real classrooms. My bill significantly boosts this funding, authorizing \$500 million for these vital programs.

The PRREP Act is supported by a diverse array of education organizations, including the American Association of Colleges for Teacher Education, American Psychological Association, Council for Exceptional Children, National Association of Elementary School Principals, National Association of Secondary School Principals, National Association of State Directors of Special Education, National Association for the Education of Young Children, National Council of Teachers of English, National Council of Teachers of Mathematics, and National PTA.

I urge my colleagues to join me in this essential endeavor by cosponsoring this legislation and working for its inclusion in the reauthorization of the Higher Education Act.

Mr. President, I ask unanimous consent that the text of this legislation be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1364

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 “Preparing, Recruiting, and Retaining Education Professionals Act of 2005”.

SEC. 2. PURPOSES; DEFINITIONS.

Section 201 of the Higher Education Act of 1965 (20 U.S.C. 1021) is amended to read as follows:

“SEC. 201. PURPOSES; DEFINITIONS.

“(a) PURPOSES.—The purposes of this part are to—

“(1) improve student achievement;

“(2) improve the quality of the current and future teaching force by improving the preparation of prospective teachers and enhancing ongoing professional development activities;

“(3) encourage partnerships among institutions of higher education, early childhood education programs, elementary schools or secondary schools, local educational agencies, State educational agencies, teacher organizations, and nonprofit educational organizations;

“(4) hold institutions of higher education and all other teacher preparation programs (including programs that provide alternative routes to teacher preparation) accountable in an equivalent manner for preparing—

“(A) teachers who have strong teaching skills, are highly qualified, and are trained in the effective uses of technology in the classroom; and

“(B) early childhood education providers who are highly competent;

“(5) recruit and retain qualified individuals, including individuals from other occupations, into the teaching force for early childhood education programs or in elementary schools or secondary schools;

“(6) improve the recruitment, retention, and capacities of principals to provide instructional leadership and to support teachers in maintaining safe and effective learning environments;

“(7) expand the use of research to improve teaching and learning by teachers, early childhood education providers, principals, and faculty; and

“(8) enhance the ability of teachers, early childhood education providers, principals, administrators, and faculty to communicate with, work with, and involve parents in ways that improve student achievement.

“(b) DEFINITIONS.—In this part:

“(1) ARTS AND SCIENCES.—The term ‘arts and sciences’ means—

“(A) when referring to an organizational unit of an institution of higher education, any academic unit that offers 1 or more academic majors in disciplines or content areas corresponding to the academic subject matter areas in which teachers provide instruction; and

“(B) when referring to a specific academic subject matter area, the disciplines or content areas in which academic majors are offered by the arts and science organizational unit.

“(2) EARLY CHILDHOOD EDUCATION PROGRAM.—The term ‘early childhood education program’ means a family child care program, center-based child care program, prekindergarten program, school program, or other out-of-home child care program that is licensed or regulated by the State serving 2 or more unrelated children from birth until school entry, or a Head Start program carried out under the Head Start Act or an Early Head Start program carried out under section 645A of that Act.

“(3) EXEMPLARY TEACHER.—The term ‘exemplary teacher’ has the meaning given the term in section 9101 of the Elementary and Secondary Education Act of 1965.

“(4) FACULTY.—

“(A) IN GENERAL.—The term ‘faculty’ means individuals in institutions of higher education who are responsible for preparing teachers.

“(B) INCLUSIONS.—The term ‘faculty’ includes professors of education and professors in academic disciplines such as the arts and sciences, psychology, and human development.

“(5) HIGH-NEED LOCAL EDUCATIONAL AGENCY.—The term ‘high-need local educational agency’ means a local educational agency that serves an early childhood education program, elementary school, or secondary school located in an area in which—

“(A)(i) 15 percent or more of the students served by the agency are from families with incomes below the poverty line;

“(ii) there are more than 5,000 students served by the agency from families with incomes below the poverty line; or

“(iii) there are less than 600 students in average daily attendance in all the schools that are served by the agency and all of whose schools are designated with a school locale code of 7 or 8, as determined by the Secretary; and

“(B)(i) there is a high percentage of teachers who are not highly qualified; or

“(ii) there is a chronic shortage, or annual turnover rate of 20 percent or more, of highly qualified teachers.

“(6) HIGH-NEED SCHOOL.—The term ‘high-need school’ means an early childhood education program, public elementary school, or public secondary school—

“(A)(i) in which there is a high concentration of students from families with incomes below the poverty line; or

“(ii) that, in the case of a public elementary school or public secondary school, is identified as in need of school improvement

or corrective action pursuant to section 1116 of the Elementary and Secondary Education Act of 1965; and

“(B) in which there exists—

“(i) in the case of a public elementary school or public secondary school, a persistent and chronic shortage, or annual turnover rate of 20 percent or more, of highly qualified teachers; and

“(ii) in the case of an early childhood education program, a persistent and chronic shortage of early childhood education providers who are highly competent.

“(7) HIGHLY COMPETENT.—The term ‘highly competent’ when used with respect to an early childhood education provider means a provider—

“(A) with specialized education and training in development and education of young children from birth until entry into kindergarten;

“(B) with—

“(i) a baccalaureate degree in an academic major in the arts and sciences; or

“(ii) an associate’s degree in a related educational area; and

“(C) who has demonstrated a high level of knowledge and use of content and pedagogy in the relevant areas associated with quality early childhood education.

“(8) HIGHLY QUALIFIED.—

“(A) IN GENERAL.—Except as provided in subparagraph (B), the term ‘highly qualified’ has the meaning given the term in section 9101 of the Elementary and Secondary Education Act of 1965.

“(B) SPECIAL EDUCATION TEACHERS.—When used with respect to a special education teacher, the term ‘highly qualified’ has the meaning given the term in section 602 of the Individuals with Disabilities Education Act.

“(9) INDUCTION.—The term ‘induction’ means a formalized program designed to provide support for, improve the professional performance of, and promote the retention in the teaching field of, beginning teachers, and that—

“(A) shall include—

“(i) mentoring;

“(ii) structured collaboration time with teachers in the same department or field;

“(iii) structured meeting time with administrators; and

“(iv) professional development activities; and

“(B) may include—

“(i) reduced teaching loads;

“(ii) support of a teaching aide;

“(iii) orientation seminars; and

“(iv) regular evaluation of the teacher inductee, the mentors, and the overall formalized program.

“(10) MENTORING.—The term ‘mentoring’ means a process by which a teacher mentor who is an exemplary teacher, either alone or in a team with faculty, provides active support for prospective teachers and new teachers through a system for integrating evidence-based practice, including rigorous, supervised training in high-quality teaching settings. Such support includes activities specifically designed to promote—

“(A) knowledge of the scientific research on, and assessment of, teaching and learning;

“(B) development of teaching skills and skills in evidence-based educational interventions;

“(C) development of classroom management skills;

“(D) a positive role model relationship where academic assistance and exposure to new experiences is provided; and

“(E) ongoing supervision and communication regarding the prospective teacher’s development of teaching skills and continued support for the new teacher by the mentor, other teachers, principals, and administrators.

“(11) PARENT.—The term ‘parent’ has the meaning given the term in section 9101 of the Elementary and Secondary Education Act of 1965.

“(12) PARENTAL INVOLVEMENT.—The term ‘parental involvement’ has the meaning given the term in section 9101 of the Elementary and Secondary Education Act of 1965.

“(13) POVERTY LINE.—The term ‘poverty line’ means the poverty line (as defined by the Office of Management and Budget, and revised annually in accordance with section 673(2) of the Community Services Block Grant Act (42 U.S.C. 9902(2))) applicable to a family of the size involved.

“(14) PROFESSIONAL DEVELOPMENT.—

“(A) IN GENERAL.—Except as provided in subparagraph (B), the term ‘professional development’ has the meaning given the term in section 9101 of the Elementary and Secondary Education Act of 1965.

“(B) EARLY CHILDHOOD EDUCATION PROVIDERS.—The term ‘professional development’ when used with respect to an early childhood education provider means knowledge and skills in all domains of child development (including cognitive, social, emotional, physical, and approaches to learning) and pedagogy of children from birth until entry into kindergarten.

“(15) TEACHING SKILLS.—The term ‘teaching skills’ means skills—

“(A) grounded in the disciplines of teaching and learning that teachers use to create effective instruction in subject matter content and that lead to student achievement and the ability to apply knowledge; and

“(B) that require an understanding of the learning process itself, including an understanding of—

“(i) the use of teaching strategies specific to the subject matter;

“(ii) the application of ongoing assessment of student learning, particularly for evaluating instructional practices and curriculum;

“(iii) ensuring successful learning for students with individual differences in ability and instructional needs;

“(iv) effective classroom management; and

“(v) effective ways to communicate with, work with, and involve parents in their children’s education.”

SEC. 3. STATE GRANTS.

Section 202 of the Higher Education Act of 1965 (20 U.S.C. 1022) is amended to read as follows:

“SEC. 202. STATE GRANTS.

“(a) IN GENERAL.—From amounts made available under section 211(1) for a fiscal year, the Secretary is authorized to award grants under this section, on a competitive basis, to eligible States to enable the eligible States to carry out the activities described in subsection (d).

“(b) ELIGIBLE STATE.—

“(1) DEFINITION.—In this part, the term ‘eligible State’ means—

“(A) a State educational agency; or

“(B) an entity or agency in the State responsible for teacher certification and preparation activities.

“(2) CONSULTATION.—The eligible State shall consult with the Governor, State board of education, State educational agency, State agency for higher education, State agency with responsibility for child care, prekindergarten, or other early childhood education programs, and other State entities that provide professional development and teacher preparation for teachers, as appropriate, with respect to the activities assisted under this section.

“(3) CONSTRUCTION.—Nothing in this subsection shall be construed to negate or supersede the legal authority under State law of any State agency, State entity, or State

public official over programs that are under the jurisdiction of the agency, entity, or official.

“(c) APPLICATION.—To be eligible to receive a grant under this section, an eligible State shall, at the time of the initial grant application, submit an application to the Secretary that—

“(1) meets the requirements of this section and other relevant requirements for States under this title;

“(2) describes how the eligible State intends to use funds provided under this section in accordance with State-identified needs;

“(3) describes the eligible State’s plan for continuing the activities carried out with the grant once Federal funding ceases;

“(4) describes how the eligible State will coordinate activities authorized under this section with other Federal, State, and local personnel preparation and professional development programs; and

“(5) contains such other information and assurances as the Secretary may require.

“(d) USES OF FUNDS.—An eligible State that receives a grant under this section shall use the grant funds to reform teacher preparation requirements, and to ensure that current and future teachers are highly qualified and possess strong teaching skills and knowledge to assess student academic achievement, by carrying out 1 or more of the following activities:

“(1) REFORMS.—Implementing reforms that hold institutions of higher education with teacher preparation programs accountable for, and assist such programs in, preparing teachers who have strong teaching skills and are highly qualified or early childhood education providers who are highly competent. Such reforms shall include—

“(A) State program approval requirements regarding curriculum changes by teacher preparation programs that improve teaching skills based on scientific knowledge—

“(i) about the disciplines of teaching and learning, including effective ways to communicate with, work with, and involve parents in their children’s education; and

“(ii) about understanding and responding effectively to students with special needs, including students with disabilities, limited-English proficient students, students with low literacy levels, and students with different learning styles or other special learning needs;

“(B) State program approval requirements for teacher preparation programs to have in place mechanisms to measure and assess the effectiveness and impact of teacher preparation programs, including on student achievement;

“(C) assurances from institutions that such institutions have a program in place that provides a year-long clinical experience for prospective teachers;

“(D) collecting and using data, in collaboration with institutions of higher education, schools, and local educational agencies, on teacher retention rates, by school, to evaluate and strengthen the effectiveness of the State’s teacher support system; and

“(E) developing methods and building capacity for teacher preparation programs to assess the retention rates of the programs’ graduates and to use such information for continuous program improvement.

“(2) CERTIFICATION OR LICENSURE REQUIREMENTS.—Ensuring the State’s teacher certification or licensure requirements are rigorous so that teachers have strong teaching skills and are highly qualified.

“(3) ALTERNATIVE ROUTES TO STATE CERTIFICATION.—Carrying out programs that provide prospective teachers with high-quality alternative routes to traditional preparation for teaching and to State certification for well-

prepared and qualified prospective teachers, including—

“(A) programs at schools or departments of arts and sciences, schools or departments of education within institutions of higher education, or at nonprofit educational organizations with expertise in producing highly qualified teachers that include instruction in teaching skills;

“(B) a selective means for admitting individuals into such programs;

“(C) providing intensive support, including induction, during the initial teaching experience;

“(D) establishing, expanding, or improving alternative routes to State certification of teachers for qualified individuals, including mid-career professionals from other occupations, paraprofessionals, former military personnel and recent college graduates with records of academic distinction, that have a proven record of effectiveness and that ensure that current and future teachers possess strong teaching skills and are highly qualified; and

“(E) providing support in the disciplines of teaching and learning to ensure that prospective teachers—

“(i) have an understanding of evidence-based effective teaching practices;

“(ii) have knowledge of student learning methods; and

“(iii) possess strong teaching skills, including effective ways to communicate with, work with, and involve parents in their children’s education.

“(4) STATE CERTIFICATION RECIPROCITY.—Establishing and promoting reciprocity of certification or licensing between or among States for general and special education teachers and principals, except that no reciprocity agreement developed pursuant to this paragraph or developed using funds provided under this part may lead to the weakening of any State certification or licensing requirement that is shown through evidence-based research to ensure teacher and principal quality and student achievement.

“(5) RECRUITMENT AND RETENTION.—Developing and implementing effective mechanisms to ensure that local educational agencies, schools, and early childhood program providers are able to effectively recruit and retain highly qualified teachers, highly competent early childhood education providers, and principals, and provide access to ongoing professional development opportunities for teachers, early childhood education providers, and principals, including activities described in subsections (d) and (e) of section 204.

“(6) SOCIAL PROMOTION.—Development and implementation of efforts to address the problem of social promotion and to prepare teachers, principals, administrators, and parents to effectively address the issues raised by ending the practice of social promotion.”

SEC. 4. PARTNERSHIP GRANTS.

Section 203 of the Higher Education Act of 1965 (20 U.S.C. 1023) is amended to read as follows:

“SEC. 203. PARTNERSHIP GRANTS.

“(a) GRANTS.—From amounts made available under section 211(2) for a fiscal year, the Secretary is authorized to award grants under this section, on a competitive basis, to eligible partnerships to enable the eligible partnerships to carry out the activities described in subsections (d) and (e).

“(b) DEFINITIONS.—

“(1) ELIGIBLE PARTNERSHIP.—In this part, the term ‘eligible partnership’ means an entity that—

“(A) shall include—

“(i) a partner institution;

“(ii) a school or department of arts and sciences within the partner institution under clause (i);

“(iii) a school or department of education within the partner institution under clause (i);

“(iv)(I) a department of psychology within the partner institution under clause (i);

“(II) a department of human development within the partner institution under clause (i); or

“(III) a department with comparable expertise in the disciplines of teaching, learning, and child and adolescent development within the partner institution under clause (i);

“(v) a high-need local educational agency; and

“(vi)(I) a high-need school served by the high-need local educational agency under clause (v); or

“(II) a consortium of schools of the high-need local educational agency under clause (v); and

“(B) may include a Governor, State educational agency, the State board of education, the State agency for higher education, an institution of higher education not described in subparagraph (A) (including a community college), a public charter school, other public elementary school or secondary school, a combination or network of urban, suburban, or rural schools, a public or private nonprofit educational organization, a business, a teacher organization, or an early childhood education program.

“(2) PARTNER INSTITUTION.—In this section, the term ‘partner institution’ means a private independent or State-supported public institution of higher education, or a consortium of such institutions, that has not been designated under section 208(a) and the teacher preparation program of which demonstrates that—

“(A) graduates from the teacher preparation program who intend to enter the field of teaching exhibit strong performance on State-determined qualifying assessments and are highly qualified; or

“(B) the teacher preparation program requires all the students of the program to participate in intensive clinical experience, to meet high academic standards, to possess strong teaching skills, and—

“(i) in the case of prospective elementary school and secondary school teachers, to become highly qualified; and

“(ii) in the case of prospective early childhood education providers, to become highly competent.

“(C) APPLICATION.—Each eligible partnership desiring a grant under this section shall submit an application to the Secretary at such time, in such manner, and accompanied by such information as the Secretary may require. Each such application shall—

“(1) contain a needs assessment of all the partners with respect to the preparation, ongoing training, and professional development of early childhood education providers, general and special education teachers, and principals, the extent to which the program prepares new teachers with strong teaching skills, a description of how the partnership will coordinate strategies and activities with other teacher preparation or professional development programs, and how the activities of the partnership will be consistent with State, local, and other education reform activities that promote student achievement and parental involvement;

“(2) contain a resource assessment that describes the resources available to the partnership, including the integration of funds from other related sources, the intended use of the grant funds, including a description of how the grant funds will be fairly distributed in accordance with subsection (f), and the commitment of the resources of the partnership to the activities assisted under this part, including financial support, faculty participation, time commitments, and con-

tinuation of the activities when the grant ends;

“(3) contain a description of—

“(A) how the partnership will meet the purposes of this part, in accordance with the needs assessment required under paragraph (1);

“(B) how the partnership will carry out the activities required under subsection (d) and any permissible activities under subsection (e) based on the needs identified in paragraph (1) with the goal of improving student achievement;

“(C) the partnership’s evaluation plan pursuant to section 206(b);

“(D) how faculty at the partner institution will work with, over the term of the grant, principals and teachers in the classrooms of the high-need local educational agency included in the partnership;

“(E) how the partnership will enhance the instructional leadership and management skills of principals and provide effective support for principals, including new principals;

“(F) how the partnership will design, implement, or enhance a year-long, rigorous, and enriching preservice clinical program component;

“(G) the in-service professional development strategies and activities to be supported; and

“(H) how the partnership will collect, analyze, and use data on the retention of all teachers, early childhood education providers, or principals in schools located in the geographic areas served by the partnership to evaluate the effectiveness of its educator support system;

“(4) contain a certification from the partnership that it has reviewed the application and determined that the grant proposed will comply with subsection (f);

“(5) include, for the residency program described in subsection (d)(3)—

“(A) a demonstration that the schools and departments within the institution of higher education that are part of the residency program have relevant and essential roles in the effective preparation of teachers, including content expertise and expertise in the science of teaching and learning;

“(B) a demonstration of capability and commitment to evidence-based teaching and accessibility to, and involvement of, faculty documented by professional development offered to staff and documented experience with university collaborations;

“(C) a description of how the residency program will design and implement an induction period to support all new teachers through the first 3 years of teaching in the further development of their teaching skills, including use of mentors who are trained and compensated by such program for their work with new teachers; and

“(D) a description of how faculty involved in the residency program will be able to substantially participate in an early childhood education program or an elementary or secondary classroom setting, including release time and receiving workload credit for their participation; and

“(6) include an assurance that the partnership has mechanisms in place to measure and assess the effectiveness and impact of the activities to be undertaken, including on student achievement.

“(d) REQUIRED USES OF FUNDS.—An eligible partnership that receives a grant under this section shall use the grant funds to carry out the following activities, as applicable to teachers, early childhood education providers, or principals, in accordance with the needs assessment required under subsection (c)(1):

“(1) REFORMS.—Implementing reforms within teacher preparation programs, where needed, to hold the programs accountable for

preparing teachers who are highly qualified or early childhood education providers who are highly competent and for promoting strong teaching skills, including integrating reliable evidence-based teaching methods into the curriculum, which curriculum shall include parental involvement training and programs designed to successfully integrate technology into teaching and learning. Such reforms shall include—

“(A) teacher preparation program curriculum changes that improve, and assess how well all new teachers develop, teaching skills;

“(B) use of scientific knowledge about the disciplines of teaching and learning so that all prospective teachers—

“(i) understand evidence-based teaching practices;

“(ii) have knowledge of student learning methods; and

“(iii) possess teaching skills that enable them to meet the learning needs of all students;

“(C) assurances that all teachers have a sufficient base of scientific knowledge to understand and respond effectively to students with special needs, such as providing instruction to diverse student populations, including students with disabilities, limited-English proficient students, students with low literacy levels, and students with different learning styles or other special learning needs;

“(D) assurances that the most recent scientifically based research, including research relevant to particular fields of teaching, is incorporated into professional development activities used by faculty; and

“(E) working with and involving parents in their children’s education to improve the academic achievement of their children and in the teacher preparation program reform process.

“(2) CLINICAL EXPERIENCE AND INTERACTION.—Developing and providing sustained and high-quality preservice clinical education programs to further develop the teaching skills of all general education teachers and special education teachers, at schools within the partnership, at the school or department of education within the partner institution, or at evidence-based practice school settings. Such programs shall—

“(A) incorporate a year-long, rigorous, and enriching activity or combination of activities, including—

“(i) clinical learning opportunities;

“(ii) field experiences; and

“(iii) supervised practice; and

“(B) be offered over the course of a program of preparation and coursework (that may be developed as a 5th year of a teacher preparation program) for prospective general and special education teachers, including mentoring in instructional skills, classroom management skills, collaboration skills, and strategies to effectively assess student progress and achievement, and substantially increasing closely supervised interaction between faculty and new and experienced teachers, principals, and other administrators at early childhood education programs, elementary schools, or secondary schools, and providing support, including preparation time and release time, for such interaction.

“(3) RESIDENCY PROGRAMS FOR NEW TEACHERS.—Creating a residency program that provides an induction period for all new general education and special education teachers for such teachers’ first 3 years. Such program shall promote the integration of the science of teaching and learning in the classroom, provide high-quality induction opportunities (including mentoring), provide opportunities for the dissemination of evidence-based research on educational practices, and provide for opportunities to engage in professional

development activities offered through professional associations of educators. Such program shall draw directly upon the expertise of teacher mentors, faculty, and researchers that involves their active support in providing a setting for integrating evidence-based practice for prospective teachers, including rigorous, supervised training in high-quality teaching settings that promotes the following:

“(A) Knowledge of the scientific research on teaching and learning.

“(B) Development of skills in evidence-based educational interventions.

“(C) Faculty who model the integration of research and practice in the classroom, and the effective use and integration of technology.

“(D) Interdisciplinary collaboration among exemplary teachers, faculty, researchers, and other staff who prepare new teachers on the learning process and the assessment of learning.

“(E) A forum for information sharing among prospective teachers, teachers, principals, administrators, and participating faculty in the partner institution.

“(F) Application of scientifically based research on teaching and learning generated by entities such as the Institute of Education Sciences and by the National Research Council.

“(4) PROFESSIONAL DEVELOPMENT.—Creating opportunities for enhanced and ongoing professional development for experienced general education and special education teachers, early childhood education providers, principals, administrators, and faculty that—

“(A) improves the academic content knowledge, as well as knowledge to assess student academic achievement and how to use the results of such assessments to improve instruction, of teachers in the subject matter or academic content areas in which the teachers are certified to teach or in which the teachers are working toward certification to teach;

“(B) promotes strong teaching skills and an understanding of how to apply scientific knowledge about teaching and learning to their teaching practice and to their ongoing classroom assessment of students;

“(C) provides mentoring, team teaching, reduced class schedules, and intensive professional development;

“(D) encourages and supports training of teachers, principals, and administrators to effectively use and integrate technology—

“(i) into curricula and instruction, including training to improve the ability to collect, manage, and analyze data to improve teaching, decisionmaking, school improvement efforts, and accountability; and

“(ii) to enhance learning by children, including students with disabilities, limited-English proficient students, students with low literacy levels, and students with different learning styles or other special learning needs;

“(E) offers teachers, principals, and administrators training on how to effectively communicate with, work with, and involve parents in their children’s education;

“(F) creates an ongoing retraining loop for experienced teachers, principals, and administrators, whereby the residency program activities and practices—

“(i) inform the research of faculty and other researchers; and

“(ii) translate evidence-based research findings into improved practice techniques and improved teacher preparation programs; and

“(G) includes the rotation, for varying periods of time, of experienced teachers—

“(i) who are associated with the partnership to early childhood education programs,

elementary schools, or secondary schools not associated with the partnership in order to enable such experienced teachers to act as a resource for all teachers in the local educational agency or State; and

“(ii) who are not associated with the partnership to early childhood education programs, elementary schools, or secondary schools associated with the partnership in order to enable such experienced teachers to observe how teaching and professional development occurs in the partnership.

“(5) SUPPORT AND TRAINING FOR PARTICIPANTS.—Providing support and training for those individuals participating in the required activities under paragraphs (1) through (4) who serve as role models or mentors for prospective, new, and experienced teachers, based on such individuals’ experience. Such support—

“(A) also may be provided to the preservice clinical experience participants, as appropriate; and

“(B) may include—

“(i) release time for such individual’s participation;

“(ii) receiving course workload credit and compensation for time teaching in the partnership activities; and

“(iii) stipends.

“(6) LEADERSHIP AND MANAGERIAL SKILLS.—

“(A) IN GENERAL.—Developing and implementing proven mechanisms to provide principals, superintendents, early childhood education program directors, and administrators (and mentor teachers, as practicable) with—

“(i) an understanding of the skills and behaviors that contribute to effective instructional leadership and the maintenance of a safe and effective learning environment;

“(ii) teaching and assessment skills needed to support successful classroom teaching;

“(iii) an understanding of how students learn and develop in order to increase achievement for all students; and

“(iv) the skills to effectively involve parents.

“(B) MECHANISMS.—The mechanisms developed and implemented pursuant to subparagraph (A) may include any of the following:

“(i) Mentoring of new principals.

“(ii) Field-based experiences, supervised practica, or internship opportunities.

“(iii) Other activities to expand the knowledge base and practical skills of principals, superintendents, early childhood education program directors, and administrators (and mentor teachers, as practicable).

“(e) ALLOWABLE USES OF FUNDS.—An eligible partnership that receives a grant under this section may use such funds to carry out the following activities:

“(1) DISSEMINATION AND COORDINATION.—Broadly disseminating information on effective practices used by the partnership, including teaching strategies and interactive materials for developing skills in classroom management and assessment and how to respond to individual student needs, abilities, and backgrounds, to early childhood education providers and teachers in elementary schools or secondary schools that are not associated with the partnership. Coordinating with the activities of the Governor, State board of education, State higher education agency, and State educational agency, as appropriate.

“(2) CURRICULUM PREPARATION.—Supporting preparation time for early childhood education providers, teachers in elementary schools or secondary schools, and faculty to jointly design and implement teacher preparation curricula, classroom experiences, and ongoing professional development opportunities that promote the acquisition and continued growth of teaching skills.

“(3) COMMUNICATION SKILLS.—Developing strategies and curriculum-based professional development activities to enhance prospective teachers’ communication skills with students, parents, colleagues, and other education professionals.

“(4) COORDINATION WITH OTHER INSTITUTIONS OF HIGHER EDUCATION.—Coordinating with other institutions of higher education, including community colleges, to implement teacher preparation programs that support prospective teachers in obtaining baccalaureate degrees and State certification or licensure.

“(5) TEACHER RECRUITMENT.—Activities described in subsections (d) and (e) of section 204.

“(6) PROGRAM IMPROVEMENT.—Developing, for teacher preparation program improvement purposes, methods and infrastructure to assess retention rates in the teaching field of teacher preparation program graduates and the achievement outcomes of such graduates’ students.

“(f) SPECIAL RULE.—No individual member of an eligible partnership shall retain more than 50 percent of the funds made available to the partnership under this section.

“(g) CONSTRUCTION.—Nothing in this section shall be construed to prohibit an eligible partnership from using grant funds to coordinate with the activities of more than 1 Governor, State board of education, State educational agency, local educational agency, or State agency for higher education.”.

SEC. 5. RECRUITMENT GRANTS.

Section 204 of the Higher Education Act of 1965 (20 U.S.C. 1024) is amended to read as follows:

“SEC. 204. RECRUITMENT GRANTS.

“(a) PROGRAM AUTHORIZED.—From amounts made available under section 211(3) for a fiscal year, the Secretary is authorized to award grants, on a competitive basis, to eligible applicants to enable the eligible applicants to carry out activities described in subsections (d) and (e).

“(b) ELIGIBLE APPLICANT DEFINED.—In this part, the term ‘eligible applicant’ means—

“(1) an eligible State described in section 202(b) that has—

“(A) high teacher shortages or annual turnover rates; or

“(B) high teacher shortages or annual turnover rates of 20 percent or more in high-need local educational agencies; or

“(2) an eligible partnership described in section 203(b) that—

“(A) serves not less than 1 high-need local educational agency with high teacher shortages or annual turnover rates of 20 percent or more;

“(B) serves schools that demonstrate great difficulty meeting State challenging academic content standards; or

“(C) demonstrates great difficulty meeting the requirement that teachers be highly qualified.

“(c) APPLICATION.—Any eligible applicant desiring to receive a grant under this section shall submit an application to the Secretary at such time, in such form, and containing such information as the Secretary may require, including—

“(1) a description of the assessment that the eligible applicant, and the other entities with whom the eligible applicant will carry out the grant activities, have undertaken to determine the most critical needs of the participating high-need local educational agencies;

“(2) a description of how the eligible applicant will recruit and retain highly qualified teachers or other qualified individuals, including principals and early childhood education providers, or both, who are enrolled in, accepted to, or plan to participate in

teacher preparation programs or professional development activities, as described under section 203, in geographic areas of greatest need, including data on the retention rate, by school, of all teachers in schools located within the geographic areas served by the eligible applicant;

“(3) a description of the activities the eligible applicant will carry out with the grant; and

“(4) a description of the eligible applicant’s plan for continuing the activities carried out with the grant once Federal funding ceases.

“(d) **REQUIRED USES OF FUNDS.**—An eligible applicant receiving a grant under this section shall use the grant funds—

“(1)(A) to award scholarships to help students pay the costs of tuition, room, board, and other expenses of completing a teacher preparation program;

“(B) to provide support services, if needed, to enable scholarship recipients to complete postsecondary education programs;

“(C) for followup services (including induction opportunities, mentoring, and professional development activities) provided to former scholarship recipients during the recipients’ first 3 years of teaching; and

“(D) in the case where the eligible applicant also receives a grant under section 203, for support and training for mentor teachers who participate in the residency program; or

“(2) to develop and implement effective mechanisms, including a professional development system and career ladders, to ensure that high-need local educational agencies, high-need schools, and early childhood education programs are able to effectively recruit and retain highly competent early childhood education providers, highly qualified teachers, and principals.

“(e) **ALLOWABLE USE OF FUNDS.**—An eligible applicant receiving a grant under this section may use the grant funds to carry out the following:

“(1) **OUTREACH.**—Conducting outreach and coordinating with urban and rural secondary schools to encourage students to pursue teaching as a career.

“(2) **EARLY CHILDHOOD EDUCATION COMPENSATION.**—For eligible applicants focusing on early childhood education, implementing initiatives that increase compensation of early childhood education providers who attain degrees in early childhood education.

“(3) **PROGRAM IMPROVEMENT.**—Developing, for teacher preparation program improvement purposes, methods and infrastructure to assess retention rates in the teaching field of teacher preparation program graduates and the achievement outcomes of such graduates’ students.

“(f) **SERVICE REQUIREMENTS.**—The Secretary shall establish such requirements as the Secretary finds necessary to ensure that recipients of scholarships under this section who complete teacher education programs subsequently teach in a high-need local educational agency, for a period of time equivalent to the period for which the recipients receive scholarship assistance, or repay the amount of the scholarship. The Secretary shall use any such repayments to carry out additional activities under this section.”

SEC. 6. ADMINISTRATIVE PROVISIONS.

Section 205 of the Higher Education Act of 1965 (20 U.S.C. 1025) is amended—

(1) in subsection (a)—

(A) in the heading, by striking “ONE-TIME AWARDS”;

(B) by striking paragraph (2); and

(C) by redesignating paragraph (3) as paragraph (2);

(2) in subsection (b)—

(A) by redesignating paragraph (3) as paragraph (4);

(B) by striking paragraph (2) and inserting the following:

“(2) **COMPOSITION OF PANEL.**—The peer review panel shall be composed of experts who are competent, by virtue of their training, expertise, or experience, to evaluate applications for grants under this part. A majority of the panel shall be composed of individuals who are not employees of the Federal Government.”;

(C) by inserting after paragraph (2) the following:

“(3) **EVALUATION AND PRIORITY.**—The peer review panel shall evaluate the applicants’ proposals to improve the current and future teaching force through program and certification reforms, teacher preparation program activities (including implementation and assessment strategies), and professional development activities described in sections 202, 203, and 204, as appropriate. In recommending applications to the Secretary for funding under this part, the peer review panel shall—

“(A) with respect to grants under section 202, give priority to eligible States that—

“(i) have initiatives to reform State program approval requirements for teacher preparation programs that are designed to ensure that current and future teachers are highly qualified and possess strong teaching skills, knowledge to assess student academic achievement, and the ability to use this information in such teachers’ classroom instruction;

“(ii) include innovative reforms to hold institutions of higher education with teacher preparation programs accountable for preparing teachers who are highly qualified and have strong teaching skills; or

“(iii) involve the development of innovative efforts aimed at reducing the shortage of—

“(I) highly qualified teachers in high-poverty urban and rural areas; and

“(II) highly qualified teachers in fields with persistently high teacher shortages, including special education;

“(B) with respect to grants under section 203—

“(i) give priority to applications from eligible partnerships that involve broad participation within the community, including businesses; and

“(ii) take into consideration—

“(I) providing an equitable geographic distribution of the grants throughout the United States; and

“(II) the potential of the proposed activities for creating improvement and positive change; and

“(C) with respect to grants under section 204, give priority to eligible applicants that have in place, or in progress, articulation agreements between 2- and 4-year public and private institutions of higher education and nonprofit providers of professional development with demonstrated experience in professional development activities.”; and

(D) by adding at the end the following:

“(5) **PAYMENT OF FEES AND EXPENSES OF CERTAIN MEMBERS.**—The Secretary may use available funds appropriated to carry out this part to pay the expenses and fees of peer review panel members who are not employees of the Federal Government.”; and

(3) by striking subsection (e) and inserting the following:

“(e) **TECHNICAL ASSISTANCE.**—For each fiscal year, the Secretary may expend not more than \$500,000 or 0.75 percent of the funds appropriated to carry out this title for such fiscal year, whichever amount is greater, to provide technical assistance to States and partnerships receiving grants under this part.”

SEC. 7. ACCOUNTABILITY AND EVALUATION.

Section 206 of the Higher Education Act of 1965 (20 U.S.C. 1026) is amended—

(1) in subsection (a)—

(A) in the matter preceding paragraph (1), by striking “Committee on Labor and Human Resources” and inserting “Committee on Health, Education, Labor, and Pensions”;

(B) in paragraph (2), by striking “, including,” and all that follows through the period and inserting “as a highly qualified teacher.”;

(C) in paragraph (3)—

(i) by striking “highly”;

(ii) by striking the period at the end and inserting “that meet the same standards and criteria of State certification or licensure programs.”;

(D) by striking paragraph (4) and inserting the following:

“(4) **TEACHER AND PROVIDER QUALIFICATIONS.**—

“(A) **ELEMENTARY AND SECONDARY SCHOOL CLASSES.**—Increasing the percentage of elementary school and secondary school classes taught by teachers—

“(i) who have strong teaching skills and are highly qualified;

“(ii) who have completed preparation programs that provide such teachers with the scientific knowledge about the disciplines of teaching, learning, and child and adolescent development so the teachers understand and use evidence-based teaching skills to meet the learning needs of all students; or

“(iii) who have completed a residency program throughout their first 3 years of teaching that includes mentoring by faculty who are trained and compensated for their work with new teachers.

“(B) **EARLY CHILDHOOD EDUCATION PROGRAMS.**—Increasing the percentage of classrooms in early childhood education programs taught by providers who are highly competent.”;

(E) by striking paragraph (5) and inserting the following:

“(5) **DECREASING SHORTAGES.**—Decreasing shortages of—

“(A) qualified teachers and principals in poor urban and rural areas; and

“(B) qualified teachers in fields with persistently high teacher shortages, including special education.”; and

(F) by striking paragraph (6) and inserting the following:

“(6) **INCREASING OPPORTUNITIES FOR PROFESSIONAL DEVELOPMENT.**—Increasing opportunities for enhanced and ongoing professional development that—

“(A) improves—

“(i) the knowledge and skills of early childhood education providers;

“(ii) the knowledge of teachers in special education;

“(iii) the knowledge of general education teachers, principals, and administrators about special education content and instructional practices;

“(iv) the knowledge and skills to assess student academic achievement and use the results of such assessments to improve instruction;

“(v) the knowledge of subject matter or academic content areas—

“(I) in which the teachers are certified or licensed to teach; or

“(II) in which the teachers are working toward certification or licensure to teach; or

“(vi) the knowledge and skills to effectively communicate with, work with, and involve parents in their children’s education;

“(B) promotes strong teaching skills and an understanding of how to apply scientific knowledge about teaching and learning to teachers’ teaching practice and to teachers’ ongoing classroom assessment of students; and

“(C) provides enhanced instructional leadership and management skills for principals.”;

(2) in subsection (b)—

(A) in the matter preceding paragraph (1), by striking “for” and inserting “for teachers, early childhood education providers, or principals, as appropriate, according to the needs analysis required under section 203(c)(1), for”; and

(B) by striking paragraphs (1) through (6) and inserting the following:

“(1) increased demonstration by program graduates of teaching skills grounded in scientific knowledge about the disciplines of teaching and learning;

“(2) increased student achievement for all students as measured by the partnership, including mechanisms to measure student achievement due to the specific activities conducted by the partnership;

“(3) increased teacher retention in the first 3 years of a teacher’s career based, in part, on teacher retention data collected as described in section 203(c)(3)(H);

“(4) increased success in the pass rate for initial State certification or licensure of teachers;

“(5) increased percentage of elementary school and secondary school classes taught by teachers who are highly qualified;

“(6) increased percentage of early childhood education program classes taught by providers who are highly competent;

“(7) increased percentage of early childhood education programs and elementary school and secondary school classes taught by providers and teachers who demonstrate clinical judgment, communication, and problem-solving skills resulting from participation in a residency program;

“(8) increased percentage of highly qualified special education teachers;

“(9) increased number of general education teachers trained in working with students with disabilities, limited-English proficient students, and students with different learning styles or other special learning needs;

“(10) increased number of teachers trained in technology; and

“(11) increased number of teachers, early childhood education providers, or principals prepared to work effectively with parents.”; and

(3) in subsection (d)—

(A) by inserting “, with particular attention to the reports and evaluations provided by the eligible States and eligible partnerships pursuant to this section,” after “funded under this part”; and

(B) by striking “Committee on Labor and Human Resources” and inserting “Committee on Health, Education, Labor, and Pensions”.

SEC. 8. ACCOUNTABILITY FOR PROGRAMS THAT PREPARE TEACHERS.

Section 207 of the Higher Education Act of 1965 (20 U.S.C. 1027) is amended—

(1) by striking subsection (a);

(2) by redesignating subsections (b) through (f) as subsections (a) through (e), respectively;

(3) in subsection (a), as redesignated by paragraph (2)—

(A) in the matter preceding paragraph (1), by striking “, within 2 years” and all that follows through “the following” and inserting “, on an annual basis and in a uniform and comprehensible manner that conforms with the definitions and reporting methods previously developed for teacher preparation programs by the Commissioner of the National Center for Education Statistics, a State report card on the quality of teacher preparation in the State, which shall include not less than the following”;

(B) in paragraph (4)—

(i) by striking “teaching candidates” and inserting “prospective teachers”; and

(ii) by striking “candidate” and inserting “prospective teacher”;

(C) in paragraph (5)—

(i) by striking “teaching candidates” and inserting “prospective teachers”;

(ii) by striking “teacher candidate” and inserting “prospective teacher”; and

(iii) by striking “candidate’s” and inserting “teacher’s”;

(D) in paragraph (7), by inserting “how the State has ensured that the alternative certification routes meet the same State standards and criteria for teacher certification or licensure,” after “if any,”;

(E) in paragraph (8)—

(i) by striking “teacher candidate” and inserting “prospective teacher”; and

(ii) by inserting “(including the ability to provide instruction to diverse student populations (including students with disabilities, limited-English proficient students, and students with different learning styles or other special learning needs) and the ability to effectively communicate with, work with, and involve parents in their children’s education)” after “skills”;

(F) by adding at the end the following:

“(10) Information on the extent to which teachers or prospective teachers in each State are prepared to work in partnership with parents and involve parents in their children’s education.”;

(4) in subsection (b)(1), as redesignated by paragraph (2)—

(A) by striking “not later than 6 months of the date of enactment of the Higher Education Amendments of 1998 and”;

(B) by striking “subsection (b)” and inserting “subsection (a)”;

(C) by striking “Committee on Labor and Human Resources” and inserting “Committee on Health, Education, Labor, and Pensions”; and

(D) by striking “not later than 9 months after the date of enactment of the Higher Education Amendments of 1998”;

(5) in subsection (c)(1), as redesignated by paragraph (2)—

(A) by striking “(9) of subsection (b)” and inserting “(10) of subsection (a)”;

(B) by striking “and made available not later than 2 years 6 months after the date of enactment of the Higher Education Amendments of 1998 and annually thereafter” and inserting “, and made available annually”; and

(6) in subsection (e)(1), as redesignated by paragraph (2)—

(A) by striking “not later than 18 months after the date of enactment of the Higher Education Amendments of 1998 and annually thereafter, shall report” and inserting “shall report annually”; and

(B) by striking “methods established under subsection (a)” and inserting “reporting methods developed for teacher preparation programs”.

SEC. 9. STATE FUNCTIONS.

Section 208 of the Higher Education Act of 1965 (20 U.S.C. 1028) is amended—

(1) in subsection (a)—

(A) by striking “, not later than 2 years after the date of enactment of the Higher Education Amendments of 1998,”;

(B) by inserting “and within entities providing alternative routes to teacher preparation” after “institutions of higher education”;

(C) by inserting “and entities” after “low-performing institutions”;

(D) by inserting “and entities” after “those institutions”; and

(E) by striking “207(b)” and inserting “207(a)”;

(2) by redesignating subsections (b) and (c) as subsections (c) and (d), respectively;

(3) by inserting after subsection (a) the following:

“(b) TEACHER QUALITY PLAN.—In order to receive funds under this Act, a State shall submit a State teacher quality plan that—

“(1) details how such funds will ensure that all teachers are highly qualified; and

“(2) indicates whether each teacher preparation program in the State that has not been designated as low-performing under subsection (a) is of sufficient quality to meet all State standards and produce highly qualified teachers with the teaching skills needed to teach effectively in the schools of the State.”;

(4) in subsection (c), as redesignated by paragraph (2)—

(A) in paragraph (1), by striking “of Education”; and

(B) in paragraph (2), by striking “of this Act”; and

(5) in subsection (d), as redesignated by paragraph (2), by striking “subsection (b)(2)” and inserting “subsection (c)(2)”.

SEC. 10. ACADEMIES FOR FACULTY EXCELLENCE.

Part A of title II of the Higher Education Act of 1965 (20 U.S.C. 1021 et seq.) is amended—

(1) by redesignating section 210 as section 211; and

(2) by inserting after section 209 the following:

“SEC. 210. ACADEMIES FOR FACULTY EXCELLENCE.

“(a) PROGRAM AUTHORIZED.—From amounts made available under subsection (e), the Secretary is authorized to award grants to eligible entities to enable such entities to create Academies for Faculty Excellence.

“(b) ELIGIBLE ENTITY.—In this section:

“(1) IN GENERAL.—The term ‘eligible entity’ means a consortium composed of institutions of higher education that—

“(A) award doctoral degrees in education; and

“(B) are partner institutions (as such term is defined in section 203).

“(2) INCLUSIONS.—The term ‘eligible entity’ may include the following:

“(A) Institutions of higher education that—

“(i) do not award doctoral degrees in education; and

“(ii) are partner institutions (as such term is defined in section 203).

“(B) Nonprofit entities with expertise in preparing highly qualified teachers.

“(c) APPLICATION.—An eligible entity desiring to receive a grant under this section shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require, including—

“(1) a description of how the eligible entity will provide professional development that is grounded in scientifically based research to faculty;

“(2) evidence that the eligible entity is well versed in current scientifically based research related to teaching and learning across content areas and fields;

“(3) a description of the assessment that the eligible entity will undertake to determine the most critical needs of the faculty who will be served by the Academies for Faculty Excellence; and

“(4) a description of the activities the eligible entity will carry out with grant funds received under this section, how the entity will include faculty in the activities, and how the entity will conduct these activities in collaboration with programs and projects that receive Federal funds from the Institute of Education Sciences.

“(d) REQUIRED USE OF FUNDS.—Each eligible entity that receives a grant under this

section shall use the grant funds to enhance the caliber of teaching undertaken in preparation programs for teachers, early childhood education providers, and principals and other administrators through the establishment and maintenance of a postdoctoral system of professional development by carrying out the following:

“(1) RECRUITMENT.—Recruit a faculty of experts who are knowledgeable about scientifically based research related to teaching and learning, who have direct experience working with teachers and students in school settings, who are capable of implementing scientifically based research to improve teaching practice and student achievement in school settings, and who are capable of providing professional development to faculty and others responsible for preparing teachers, early childhood education providers, principals, and administrators.

“(2) PROFESSIONAL DEVELOPMENT CURRICULA.—Develop a series of professional development curricula to be used by the Academies for Faculty Excellence and disseminated broadly to teacher preparation programs nationwide.

“(3) PROFESSIONAL DEVELOPMENT EXPERIENCES.—Support the development of a range of ongoing professional development experiences (including the use of the Internet) for faculty to ensure that such faculty are knowledgeable about effective evidence-based practice in teaching and learning. Such experiences shall promote joint faculty activities that link content and pedagogy.

“(4) DEVELOPMENT PROGRAMS.—Provide fellowships, scholarships, and stipends for teacher educators to participate in various faculty development programs offered by the Academies for Faculty Excellence.

“(e) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section \$10,000,000 for fiscal year 2006 and such sums as may be necessary for each of the 5 succeeding fiscal years.”

SEC. 11. AUTHORIZATION OF APPROPRIATIONS.

Section 211 of the Higher Education Act of 1965, as redesignated by section 10, is amended—

(1) by striking “part \$300,000,000 for fiscal year 1999” and inserting “part, other than section 210, \$500,000,000 for fiscal year 2006”;

(2) by striking “4 succeeding” and inserting “5 succeeding”;

(3) in paragraph (1), by striking “45” and inserting “20”;

(4) in paragraph (2), by striking “45” and inserting “60”;

(5) in paragraph (3), by striking “10” and inserting “20”.

By Mr. DORGAN (for himself, Ms. SNOWE, Mr. KERRY, Mr. SMITH, and Mr. SCHUMER):

S. 1366. A bill to amend the Internal Revenue Code of 1986 to allow tax-free distributions from individual retirement accounts for charitable purposes; to the Committee on Finance.

Mr. DORGAN. Mr. President, today I'm pleased to be joined by Senators SNOWE, KERRY, SMITH, and SCHUMER in re-introducing legislation we call the Public Good IRA Rollover Act to allow taxpayers to make tax-free distributions from their individual retirement accounts (IRAs) for gifts to charity. I think that the charitable IRA rollover approach in this legislation, which has received strong support from the charitable community, will encourage significant new giving.

As a Nation, we often look to a strong network of charities, large and

small, to offer financial and other support to families and individuals who need help when government assistance is unavailable. That is why I think it's critically important for Congress to do everything we can to help encourage the work of worthy charities.

Unfortunately, Congress has tried but failed in the past several years to pass major legislation that would be helpful to the Nation's charities. This legislation has stalled, in part, because of the efforts of some in Congress to add controversial measures that undermine the bipartisan support needed to enact this kind of legislation into law.

One of the non-controversial tax incentives included in the Senate's version of that legislation is our measure that would permit individuals to make gifts to charities from their IRAs without adverse tax consequences. I have previously described on the Senate floor that charities are frequently asked by people about using their IRAs to make charitable donations. However, I'm told that many donors decide not to make a gift from their IRAs after they are told about the potential tax consequences under current law.

The Public Good IRA Rollover Act would eliminate this obstacle. Specifically, the bill we are introducing today would allow individuals to make tax-free distributions to charities from their IRAs at the age of 70½ for direct gifts and age 59½ for life-income gifts. These changes to the Tax Code could put billions of additional dollars from a new source to work for the public good.

Tax-favored charitable IRA rollovers have previously garnered broad bipartisan support in both the House of Representatives and the U.S. Senate. In fact, the Senate-passed CARE Act in the last Congress included the provisions of our bill.

The Bush administration also supports charitable IRA rollovers. In his FY 2006 budget submission, President Bush has proposed, once again, to allow individuals to make certain tax-free charitable IRA distributions after age 65. While the President's charitable IRA proposal has merit, the Public Good IRA Rollover Act is superior in one important respect: By allowing tax-free life-income gifts from an IRA. Life-income gifts involve the donation of assets to a charity, where the giver retains an income stream from those assets for a defined period. Life-income gifts are an important tool for charities to raise funds, and would receive a substantial boost if they could be made from IRAs. But life-income gifts are not part of the administration's proposal. Again, the Public Good IRA Rollover Act permits individuals to make tax-free life-income gifts at the age of 59½.

When the Senate Finance Committee crafts charitable giving tax incentive legislation in the 109th Congress, I hope they will adopt, once again, the IRA charitable rollover approach used in the Public Good IRA Rollover Act. The benefits of this approach are two-

fold. First, the life-income gift provision in our bill would stimulate additional charitable giving. The evidence also suggests that people who make life-income gifts often become more involved with charities. They serve as volunteers, urge their friends and colleagues to make charitable gifts and frequently set up additional provisions for charity in their life-time giving plans and at death. Second, this approach comes at little or no extra cost to the government when compared to other major charitable IRA rollover proposals.

In closing, I urge my Senate colleagues to review and consider cosponsoring this bill. With your help, we can help enact into law tax-free IRA rollover provisions that a senior official from a major charity once said would be “the single most important piece of legislation in the history of public charitable support in this country.”

By Mr. ALEXANDER (for himself, Mr. REID, Mr. DEWINE, and Mrs. CLINTON):

S. 1367. A bill to provide for recruiting, selecting, training, and supporting national teacher corps in underserved communities; to the Committee on Health, Education, Labor, and Pensions.

Mr. ALEXANDER. Mr. President, today I am joining with Senator REID, Senator DEWINE, and Senator CLINTON to introduce a bill to authorize funding for the Teach for America program. Teach for America, TFA, calls upon our Nation's most promising future leaders, recent college graduates of all backgrounds and academic majors, to spend two years teaching in schools in lower income areas, usually inner cities or rural communities. Our legislation authorizes up to \$25 million so that the highly successful program, which began as a privately funded, non-profit effort, can rapidly expand.

TFA was founded in 1990 by Wendy Kopp, a young woman who had just graduated from Princeton. It served just six communities in that first year. Today it serves 22, and hopes to keep growing. TFA raises more than 75 percent of its operating budget through non-Federal sources, primarily through philanthropic gifts in the communities it serves.

The results of this program have been notable, as reported in a study last year by Mathematica Policy Research, an independent research firm: “Even though Teach for America teachers generally lack any formal teacher training beyond that provided by Teach for America, they produce higher student test scores than the other teachers in their schools—not just other novice teachers or uncertified teachers, but also veterans and certified teachers.”

Probably more exciting than the success of the program in teaching students is the impact it has had on its “corps members.” Teach for America

isn't just for education majors, it's primarily there to attract highly successful college graduates who wouldn't otherwise go into education. Of its 9,000 alumni, 60 percent are still involved in education today. The 2005 National Teacher of the Year, Jason Kamras, a teacher here in Washington, DC, who was honored in a Rose Garden ceremony by President Bush, is an alumnus of Teach for America. And my own education policy advisor is also an alumna of the program.

So, in addition to providing better education for students in poorer school systems, this program is creating a new cadre of highly talented and highly motivated individuals who now understand what it's like to teach in a classroom and who are dedicated to improving our education system. That's probably the greatest benefit of the program.

And that's why I'm glad to join the Senator from Nevada in introducing this legislation to provide Federal funding to help TFA expand to new communities and recruit even more corps members.

Teach for America is aiming to grow from 3,000 to 8,000 corps members, from 22 to 35 regional sites, and from 250,000 to 700,000 students by 2010. To reach these growth goals, the program must recruit more than 4,000 new teachers each year by 2010, and it must grow its total annual budget from \$40 million today to \$100 million by 2010.

The legislation that Senator REID and I offer today will not turn Teach for America into a Federal program, but it will supplement their privately raised funds to help TFA attain their worthy goals. The bill provides up to \$25 million to that end. Interest by college graduates in TFA is very high—17,000 applied for the 2,100 teaching slots last year. Additional funding will allow more of those 17,000 to serve poorer children in classrooms across the country.

In the upcoming issue of U.S. News and World Report, there is an excellent article about Teach for America by David Gergen. I ask unanimous consent that the article be printed in the RECORD.

I hope other Senators will join with the Senator from Nevada and I in supporting this important legislation. Teach for America has helped more than 1 million students and is creating a highly talented pool of individuals to advance our education system into the next century. Providing Federal support to this non-profit program will help it expand not only to help more students, but also to create an even wider and stronger pool of talented individuals to advocate the best for our schools for decades to come.

There being no objection, the article was ordered to be printed in the RECORD, as follows:

[From the U.S. News & World Report, July 4, 2005]

A TEACHER SUCCESS STORY
(By David Gergen)

With tribal warfare spreading in politics, corporate chieftains heading to jail, the news media sinking, and casualties rising in Iraq, it's easy these days to be discouraged. No wonder over 60 percent of Americans think the country has swerved off track. But hold on. To lift your spirits, just spend a little time with leaders of the younger generation.

This spring on many college campuses, something absolutely remarkable happened: Talented young people lined up by the scores to teach lower-income kids in urban and rural public schools. In years past, investment banks like Goldman Sachs were the recruiting powerhouses at top campuses; this year, they were joined by Teach for America, a program that expresses the fresh idealism and social values of this new generation.

At Yale, no fewer than 12 percent of the graduating seniors—nearly 1 out of every 8—applied. At Dartmouth and Amherst, some 11 percent did; at Harvard and Princeton, 8 percent. Hundreds more signed up at Northwestern, Boston College, the University of Texas, and the University of California-Los Angeles. Altogether, over 17,000 seniors applied for 2,100 openings.

A few words of background: Sixteen years ago, Teach for America was merely an idea in a thesis by a Princeton senior, Wendy Kopp. She thought the country needed an organization modeled after the Peace Corps that would attract top college graduates into classrooms with poor kids. With thesis in hand, she bravely ventured out to raise money, find recruits, and find school superintendents who would hire them. Kopp experienced the bumps and detours of every new start-up, but a year later, she had 500 recruits.

This summer, the newest class of teachers will enroll in a five-week training institute to prepare them for the classroom. In the fall, they will report for work at some of the toughest public schools in America, classified by the federal government as "high need." Some 95 percent of their students will be minorities. Each member of the program is committed to two years of teaching, paid by the local school systems at the same rate as other starting teachers; at the end of their service, they may qualify for a \$9,500 scholarship for graduate study.

As you can imagine, skeptics have popped up all along the way: professors at schools of education scoffing that college graduates who haven't enrolled in formal teacher education will never succeed in the classroom; cynics who say that these are just a bunch of elitist kids punching their tickets to make it into law or business school who will then turn their backs on social reform. Well, the doubters just don't get this young generation.

A year ago, Mathematica Policy Research found that students of Teach for America recruits got better results in math and the same gains in reading as did those of other teachers, including veteran instructors. In math, the TFA students made a month more progress than other students. The results partly reflect the fact that 70 percent of Teach for America volunteers come from among the nation's most highly rated colleges, compared with fewer than 3 percent of other teachers; the results also reflect the passion that these volunteers bring to their work.

Dedicated to the cause. The 10,000 alumni of TFA have not turned their backs after their service, either. The organization says that nearly two thirds still work full time in education, most in low-income communities.

TFA alum Jason Kamras, a math teacher in a Washington, D.C., public school, was just named national teacher of the year. Two other alumni, Mike Feinberg and David Levin, founded and now run what is probably the most successful set of charter schools in the country: the KIPP academies (Knowledge Is Power Program). Started in Houston and New York, the academies have become a network of 38 schools in low-income communities that demand extra studies by students, balance that with extracurricular activities like martial arts, music, chess, and sports, and—guess what?—have achieved the largest and quickest improvement in learning around the country. No fewer than 25 principals in KIPP schools are alumni of Teach for America.

What does all this mean? First, the nation owes a debt of gratitude to Wendy Kopp. She represents the emergence of a new breed of social entrepreneur, talented doers who are unleashing their generation's innovation and idealism to address long-standing social problems. Even as they struggle for the resources to turn their visions into reality, the success of Kopp and others shows that this has the makings of a social movement.

But it also shows that the rest of us need to wake up and see what we can do to help. It's time for the country to embrace the national service movement with serious money—not the cheap change we are putting today into AmeriCorps. It's time to scale up nonprofits so that when 17,000 kids volunteer, there are 17,000 openings. It's time, in short, to recognize the greatness that lies in the next generation.

Mr. REID. Mr. President, I am proud to join Senator ALEXANDER in introducing this legislation authorizing Teach for America to recruit, select, train, and support its national teacher corps in underserved communities.

This bill comes at a crucial time. Federal law now requires more from our teachers, yet we have dwindling resources to draw from.

Many local education agencies are finding themselves having to supplement their teacher corps.

Clark County, NV, is the fifth largest school district in the Nation—in the fastest growing State. As one can only imagine, the influx of new residents has an incredible impact on our public works, especially our schools.

Clark County's outgoing superintendent told me that the district spends close to \$1 million annually for teacher recruitment efforts across the country.

Clark County School District has made great strides in its commitment to reversing the trend of sagging high school graduation rates and college attendance by hiring nearly 2,000 new teachers a year to fill its classrooms.

But, last year, the school district did something that several other urban and rural districts around the country did: they partnered with Teach for America in order to augment their qualified teaching staffs.

Founded by Wendy Kopp, who conceived the idea for the program in her senior thesis at Princeton, Teach for America recruits some of the Nation's best college graduates to become teachers in low-performing urban or rural school districts for 2 years.

From the 500 college graduates who began teaching in its inaugural year,

Teach for America has grown to more than 3,100 corps members teaching in 21 regions across the country.

Indeed, this highly selective program—in which only 2,000 out of 16,000 applicants were accepted in 2003—has a powerful impact on the communities in which it serves.

This legislation authorizes Teach for America to receive \$25 million to execute several activities related to teacher readiness, recruitment, and placement. Reports are also required, citing the progress of the Teach for America corps members.

I would not be Senator if it had not been for a couple of dedicated teachers. One teacher was Ms. Dorothy Robinson. Ms. Robinson pulled me out of class one day and said, "Harry, I've watched your progress and I really think you should go to college and become a lawyer."

I said, "OK," and went back to class. That is why I have dedicated myself at the Federal level to ensure that Teach for America and Clark County have the resources they need to continue this partnership.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 185—EX-PRESSING THE SENSE OF THE SENATE REGARDING REFORM OF THE UNITED NATIONS

Mr. SMITH (for himself and Mr. NELSON of Florida) submitted the following resolution; which was:

S. RES. 185

Whereas, on July 28, 1945, the Senate approved the resolution advising and consenting to the ratification of the Charter of the United Nations by a vote of 89 to 2;

Whereas recent events, including the United Nations oil-for-food scandal and sexual misconduct by United Nations peacekeepers, have led to declining public confidence in the United Nations;

Whereas there is broad international agreement that the United Nations must reform its existing policies, practices, and institutions in order to better manage the interests of its 191 members and address the current threats to international peace and security;

Whereas the future direction of the United Nations has recently been addressed in the report of the Secretary-General's High-level Panel on Threats, Challenges and Change, issued on December 2, 2004, the report of the Secretary-General entitled "In Larger Freedom: Toward Development, Security and Human Rights for All", issued on March 21, 2005, and the report of the congressionally mandated Task Force on the United Nations, convened by the United States Institute of Peace (USIP), entitled "American Interests and UN Reform", issued on June 15, 2005;

Whereas these reports call for comprehensive reform of the United Nations, including overhauling basic management practices and building a more transparent, accountable, efficient, and effective organization;

Whereas these reports highlight the deficiencies in the United Nations human rights bodies, in particular the practice of allowing countries that have violated human rights to sit on United Nations bodies that were established to monitor, promote, and enforce human rights;

Whereas these reports highlight many serious problems with the United Nations peacekeeping operations that need to be addressed while the peacekeepers are deployed in critical situations around the world;

Whereas these reports discuss the question of United Nations Security Council reform in an attempt to increase the effectiveness and credibility of the Security Council and to enhance its capacity and willingness to act in the face of threats;

Whereas the USIP Task Force emphasized the importance that any reform of the United Nations Security Council must enhance its effectiveness and not in any way detract from the Security Council's efficiency and ability to act in accordance with the Charter of the United Nations; and

Whereas the United Nations has an important role to play in providing a forum for countries to discuss issues and resolve differences and to address the pressing humanitarian issues and security threats of the day: Now, therefore, be it

Resolved, That the Senate—

(1) declares that a credible, effective, and reformed United Nations can play an important role in helping promote global peace and security;

(2) reaffirms that reform of the United Nations Security Council would necessitate a revision of the Charter of the United Nations, which would constitute a treaty revision requiring an affirmative vote in the Senate by a two-thirds majority;

(3) states that the United Nations and its subsidiary bodies and agencies must be reformed, refocused, and made more efficient, and must become more transparent and more accountable;

(4) declares that oversight of the United Nations must be improved, that the management systems and budgeting processes of the institution must be updated and modified, and that protections for whistleblowers employed by the United Nations must be implemented;

(5) states that the United Nations Human Rights Commission should be abolished and replaced by a United Nations Human Rights Council or other body composed of governments that are committed to upholding human rights;

(6) declares that the reforms described above must be implemented before the Senate will consider changes to the Charter of the United Nations that require the advice and consent of the Senate; and

(7) urges the Secretary of State—

(A) to provide the Senate the Secretary of State's recommendations for reform of the United Nations; and

(B) to consult fully and regularly with the Senate as deliberations on United Nations reform progress.

SENATE CONCURRENT RESOLUTION 43—WELCOMING THE PRIME MINISTER OF SINGAPORE ON THE OCCASION OF HIS VISIT TO THE UNITED STATES, EXPRESSING GRATITUDE TO THE GOVERNMENT OF SINGAPORE FOR ITS STRONG COOPERATION WITH THE UNITED STATES IN THE CAMPAIGN AGAINST TERRORISM, AND REAFFIRMING THE COMMITMENT OF THE UNITED STATES TO THE CONTINUED EXPANSION OF FRIENDSHIP AND COOPERATION BETWEEN THE UNITED STATES AND SINGAPORE

Mr. BOND submitted the following concurrent resolution; which was re-

ferred to the Committee on Foreign Relations:

S. CON. RES. 43

Whereas Singapore is a great friend of the United States;

Whereas the United States and Singapore share a common vision of promoting peace, stability, security, and prosperity in the Asia-Pacific region;

Whereas Singapore is a core member of the Proliferation Security Initiative, an initiative launched by the United States in 2003 to respond to the challenges posed by the proliferation of weapons of mass destruction, and a committed partner of the United States in preventing the spread of weapons of mass destruction;

Whereas Singapore is a leader in the Radiation Detection Initiative, an effort by the United States to develop technology to safeguard maritime security by detecting trafficking of nuclear and radioactive material;

Whereas Singapore will soon be a partner with the United States in the Strategic Framework Agreement for Closer Cooperation in Defense and Security, an agreement which will build upon the already strong military alliance between the United States and Singapore and expand the scope of defense and security cooperation between the 2 countries;

Whereas Singapore responded quickly to provide generous humanitarian relief and financial assistance to the people affected by the tragic tsunami that struck Southeast Asia in December 2004;

Whereas Singapore has joined the United States in the global struggle against terrorism, providing intelligence and offering political and diplomatic support;

Whereas Singapore is the 15th largest trading partner of the United States and the first free trade partner of the United States in the Asia-Pacific region, and the United States is the second largest trading partner of Singapore;

Whereas the relationship between the United States and Singapore extends beyond the current campaign against terrorism and is reinforced by strong ties of democracy, culture, commerce, and scientific and technical cooperation; and

Whereas the relationship between the United States and Singapore encompasses almost every field of international cooperation, including a common commitment to fostering a stronger and more open international trading system: Now, therefore, be it

Resolved by the Senate (the House of Representatives concurring), That Congress—

(1) welcomes the Prime Minister of Singapore, His Excellency Lee Hsien Loong, to the United States;

(2) expresses profound gratitude to the Government of Singapore for promoting security and prosperity in Southeast Asia and cooperating with the United States in the global campaign against terrorism; and

(3) reaffirms the commitment of the United States to continue strengthening the friendship and cooperation between the United States and Singapore.