

TRIBUTE TO NORTHWEST
COLLEGIATE ACADEMY

HON. PHIL ENGLISH

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, May 9, 2006

Mr. ENGLISH of Pennsylvania. Mr. Speaker, today I rise to commend the Northwest Collegiate Academy's recent success at the 25th Annual United States Academic Decathlon, USAD, in San Antonio, TX.

The USAD is a national competition in which teams of nine students, three from each recognized academic level, compete in 10 separate academic subjects, including mathematics, language and literature, social science, economics, art, music, and science. Each team member has to compete in each of the 10 subjects and their combined scores determine the overall team winner.

Once again, the Northwest Collegiate Academy made Erie and all of western Pennsylvania proud by demonstrating the scholastic excellence of its students. The Academy's team cruised through this year's local and State competitions, winning all three of the local events and the final State wide competition. Along the way, individual team members won numerous awards for excellence in all of the academic subjects and the team as a whole often took all the awards for a given subject.

However, the team's outstanding run did not end at the State level. The team scored 38,992.7 points out of a possible 60,000 during the 3-day national competition in San Antonio. This showing earned the team a well deserved silver medal in competition. Furthermore, the team members continued to show their individual brilliance by winning awards for their proficiency in specific subject areas. Matthew Faytak earned six different awards at the competition, including a gold medal in art and a gold medal for being the highest overall scorer at the honors level. Joining him on the podium was Christina Radder who won the bronze medal in music and the bronze medal for being third highest overall scorer at the honors level. Both Matthew and Christina were also recognized for high scores in economics, mathematics or science, as were four other team members, Greg Nieder, Dan Juilfs, Shane Kelley, and Alexandra Talarico.

Mr. Speaker, I hope my fellow members will rise with me at this time and commend the nine members of the Northwest Collegiate Academy team, Matthew Faytak, Christina Radder, Alexandra Talarico, Shane Kelley, Greg Nieder, Caitlyn Pierce, Dan Juilfs, William Steinbaugh, and David Zielewski. I congratulate each of these students for all of their academic achievements and wish them continued success in their future endeavors.

HONORING DICK KAY

HON. RAHM EMANUEL

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, May 9, 2006

Mr. EMANUEL. Mr. Speaker, I rise today to recognize the long and distinguished career of my friend, Mr. Dick Kay, political editor, and host of the news show "City Desk." Mr. Kay

will retire in June 2006, with the honor of having been the longest-serving reporter in the history of Chicago's WMAQ—Channel 5 TV.

With 46 years in the business, Dick Kay has unparalleled political experience, knowledge and perspective. He arrived at WMAQ—Channel 5 in 1968, initially working as a writer/producer but soon switching to reporting. He later became their political editor as well as the host of "City Desk," the Sunday morning public service program.

Over the years, Dick Kay has interviewed mayors, Governors, Congressmen, Senators, and countless other public leaders. Viewers have come to rely on his thoughtful yet fearless approach to covering politics and public policy.

Dick Kay's hard work and insightful reporting have been recognized by numerous awards over the years. Among others, Dick has received a Peabody Award—the highest honor in TV broadcasting—as well as 11 Emmys, a National Headliner award, and a Jacob Scher award for investigative reporting. In 2001, he was inducted into the Television Academy's Silver Circle Hall of Fame, which honors those who have made major contributions to Chicago broadcasting for 25 years or more.

In addition to his work as a reporter and editor, Dick was the longtime president of the local unit of the American Federation of Television and Radio Artists. In this capacity, Dick successfully persuaded Illinois legislators to ensure that on-air employees had the freedom to move to competing stations.

I am sure Dick's wife, children and grandchildren will be glad to enjoy more time with him. The rest of us will miss his hard-hitting investigative work, insightful commentary, and engaging Sunday morning discussions.

Mr. Speaker, I wish Dick and his family the best of luck during his retirement and throughout his future endeavors. Political reporting in Chicago will not be the same without Dick Kay, dean of Chicago political reporters.

INTRODUCTION OF INDIAN
HEALTH CARE IMPROVEMENT
ACT REAUTHORIZATION

HON. DON YOUNG

OF ALASKA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, May 9, 2006

Mr. YOUNG of Alaska. Mr. Speaker, I am pleased today to introduce legislation to reauthorize the Indian Health Care Improvement Act Reauthorization (IHCIA) with my fellow colleagues.

The Indian Health Care Improvement Act (IHCIA) requires reauthorization. It became Public Law 94-437 in the 94th Congress (September 30, 1976), and has been amended seven times. The IHCIA provides for health care delivery to over 2 million American Indians and Alaska Natives. Congress enacted a one-year extension to extend the life of the Act through FY 2001 but efforts at further extensions were interrupted due to the events of 9/11. Appropriations for the Indian health have continued through authorization of the Snyder Act, a permanent law authorizing expenditures of funds for a variety of Indian programs, including health.

This bill responds to the changes that have occurred in the delivery of Indian Health serv-

ices in the decade since the last reauthorization of the IHCIA. In this period, more than half of the tribes in the United States have exercised their rights under the Indian Self-Determination and Education Assistance Act to assume responsibility to carry out programs of the Indian Health Service (IHS) on their own behalf. This, along with improvements in the IHS direct operations, have led to hospitals being accredited by the Joint Commission on Accreditations of the Healthcare Organizations, and health delivery systems being tailored to expanded outpatient and home and community based services had become commonplace in the private sector. Medicare, Medicaid and other third party revenue were important to achieving these gains and are crucial for retaining them. Equally important is the need to reinforce the authority provided to tribal health programs under self-determination and self-governance to establish their own priorities and to determine the best way to respond to the specific needs of their tribal members.

Some highlights of the ways this bill addresses these changes:

Section 3. Declaration of Health Policy. Declares that it is the priority of the United States that the health status of American Indians and Alaska Natives should be raised by 2010 to the same level as is set for other Americans, instead of establishing lower thresholds as has previously been accepted, and establishes a policy requiring "meaningful consultations" with Indian tribes, tribal health organizations and urban Indian programs.

Section 4. Definitions. Modernizes current IHCIA definitions and makes them consistent with the Indian Self-Determination and Education Assistance Act. Definitions of "health promoting" and "disease prevention" are expanded to encompass the full scope of these activities as recommended by the World Health Organization. Includes a definition of "traditional health care practices" that reflects the value of Native health practices.

Title I, Indian Health, Human Resources, and Development. The purpose of this title is to increase, to the maximum extent feasible, the number of Indians entering the health professions and providing health services, and to assure an optimum supply of health professionals to the Indian Health programs and Urban Indian Organizations involved in the provision of health services to Indians.

Title II, Health Services. The purpose of this title is to establish programs that respond to the health needs of American Indians and Alaska Natives. For example, American Indians and Alaska Natives have a disproportionately high rate of diabetes (death rate for this disease is generally more than 300% of the rate of the U.S. population), so this title has a specific diabetes provision. It also includes the Indian Health Care Improvement Fund through which the Appropriation Act supply funds to eliminate health deficiencies and disparities in resources made available to American Indians and Alaska Native tribes and communities.

Title III, Facilities. The purpose of this title relates to the construction of health facilities including hospitals, clinics, and health stations necessary for staff quarters, and of sanitation facilities for Indian communities and homes.

Title IV, Access to Health Services. This title addresses payments to the IHS and tribes for services covered by the Social Security Act Health Care programs, and to enable Indian