

(Mr. BINGAMAN) and the Senator from New Hampshire (Mr. SUNUNU) were added as cosponsors of amendment No. 4433 proposed to H.R. 3221, moving the United States toward greater energy independence and security, developing innovative new technologies, reducing carbon emissions, creating green jobs, protecting consumers, increasing clean renewable energy production, and modernizing our energy infrastructure, and to amend the Internal Revenue Code of 1986 to provide tax incentives for the production of renewable energy and energy conservation.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. ROCKEFELLER (for himself, Mr. WEBB, Mr. BROWN, and Ms. MILKULSKI):

S. 2824. A bill to amend title 38, United States Code, to improve the collective bargaining rights and procedures for review of adverse actions of certain employees of the Department of Veterans Affairs, and for other purposes; to the Committee on Veterans' Affairs.

Mr. ROCKEFELLER. Mr. President, I rise today to introduce legislation designed to fix the personnel laws that cover the Department of Veterans Affairs, VA, health care professionals, including registered nurses, physicians, physician assistants, dentists, podiatrists, optometrists, and dental assistants. I am proud to have the support of my colleagues, Senators WEBB, BROWN and MIKULSKI. This legislation is the companion bill to the pending House bill sponsored by House Veterans' Affairs Chairman, Congressman BOB FILLNER.

Our goal is to support the VA health care professionals who work hard to provide quality care to our veterans. The bill seeks to return to the partnership agreement of the 1990s between VA management and workforce. Flexible scheduling and basic fairness from management are key issues to recruit and retain a strong workforce.

Almost 22,000 of the registered nurse caring for our veterans will be eligible to retire by 2010. Even more stunning is that 77 percent of all resignations of nurses occur within the first 5 years. This is a clear signal that more must be done to retain VA nurses and quality health care staff. Anyone involved in health care understands the important role that nurses play in the quality of care and patient satisfaction.

The VA has several options. VA could invest more of its precious, limited funding on contract care—or, as we recommend, support this legislation and restore the partnership that will encourage our nurses and other health care professionals to stay in the VA system to care for our Nation's heroes.

West Virginia has four VA Medical Centers, each with a dedicated team of health care professionals. I have met with the nurses and other professionals to hear their requests for flexible

scheduling. I believe that we should restore the management partnership and work hard to retain our dedicated team of health professionals for our aging veterans, and those newly returning from Iraq and Afghanistan with both physical and mental wounds of war that deserved experienced VA care.

By Mr. AKAKA:

S. 2825. A bill to amend title 38, United States Code, to provide a minimum disability rating for veterans receiving medical treatment for a service-connected disability; to the Committee on Veterans' Affairs.

Mr. AKAKA. Mr. President, today I introduce the Veterans' Compensation Equity Act of 2008. This legislation would mandate fair and equitable ratings for veterans whose disabilities require continuous medication or the use of adaptive devices, such as hearing aids.

Specifically, the bill would require that all veterans who receive continuous medication or require use of one or more adaptive devices, such as hearing aids, prescribed by the Department of Veterans Affairs or other licensed health care provider for treatment of a service-connected disability, shall be rated at not less than 10 percent.

The amount of compensation veterans with service-connected conditions receive is based on a disability rating, which VA assigns. VA uses its rating schedule to determine which rating to assign to a veteran's particular condition. Currently the rating schedule provides a minimum compensable rating of 10 percent or higher for most but not all disabilities that require continuous medication. I do not see any reason why one veteran who requires continuous medication for treatment of a service-connected disability, such as diabetes or asthma, should receive a compensable rating and another veteran who requires continuous medication for treatment of another disability, such as hypertension or chronic sinusitis, is assigned a zero percent rating and receives no compensation.

This legislation would also provide a minimum compensable rating when a veteran requires the use of a hearing aid or other adaptive device, but is nonetheless assigned a noncompensable rating under the current rating schedule. The use of adaptive devices prescribed by a Department of Veterans Affairs or other licensed health care provider for treatment of a service-connected condition would result in a rating of at least 10 percent.

It is important that veterans who are disabled as a result of military service are compensated in a fair and equitable manner. Providing different compensation for different medical conditions that all require continuous medication or adaptive devices is not just.

I urge all of my colleagues to support this measure, so that veterans seeking compensation will be treated in a fair and equitable manner.

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

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

S. 2825

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' Compensation Equity Act of 2008".

SEC. 2. MINIMUM DISABILITY RATING FOR VETERANS RECEIVING CERTAIN MEDICAL TREATMENT FOR A SERVICE-CONNECTED DISABILITY.

Section 1155 of title 38, United States Code, is amended by inserting after the third sentence the following new sentence: "For each veteran requiring continuous medication or the use of one or more adaptive devices, such as a hearing aid, prescribed by the Department or other licensed health care provider for treatment of a service-connected disability, the Secretary shall assign a disability rating for such disability of not less than 10 percent."

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 504—CONDEMNING THE VIOLENCE IN TIBET AND CALLING FOR RESTRAINT BY THE GOVERNMENT OF THE PEOPLE'S REPUBLIC OF CHINA AND THE PEOPLE OF TIBET

Mrs. FEINSTEIN (for herself, Mr. SMITH, Mr. BIDEN, Ms. KLOBUCHAR, Mr. BROWN, Mrs. DOLE, Ms. CANTWELL, Ms. SNOWE, Mr. MENENDEZ, Ms. COLLINS, Mr. OBAMA, Mr. BYRD, Mr. VOINOVICH, Mr. SCHUMER, and Mrs. MURRAY) submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 504

Whereas, beginning on March 10, 2008, Tibetans and Tibetan Buddhist monks began demonstrations in Lhasa, the capital of the Tibet Autonomous Region in the People's Republic of China;

Whereas those protests spread to elsewhere in the Tibet Autonomous Region and to Tibetan autonomous areas in the Sichuan, Gansu, and Qinghai provinces of China;

Whereas, long-suppressed resentment prompted violent clashes between demonstrators and government forces in the streets of Lhasa, resulting in innocent civilian casualties, the burning of buildings, and extensive property damage;

Whereas Chinese and Tibetan sources report dozens of fatalities, and the arrest of more than 1,000 protesters in the Tibet Autonomous Region and surrounding Tibetan areas of China;

Whereas Tibet is the center of Tibetan Buddhism and the Dalai Lama is the most revered figure in Tibetan Buddhism;

Whereas, the Government of China continues to restrict the rights of Tibetan Buddhists to practice their religion freely;

Whereas the Dalai Lama has condemned the violence that began on March 14, 2008, and announced his continuing support for the Olympic Games to be held in Beijing, China;

Whereas the Dalai Lama has specifically stated that he does not seek independence for Tibet from China and has called for negotiations to bring about meaningful autonomy for Tibet that allows Tibetans to maintain their distinctive identity within China;