

Whereas in the 110th Congress, the NAACP was prominent in lobbying for the passage of H. Res. 826, whose resolved clause expresses that: (1) the hanging of nooses is a horrible act when used for the purpose of intimidation and which under certain circumstances can be criminal; (2) this conduct should be investigated thoroughly by Federal authorities; and (3) any criminal violations should be vigorously prosecuted; and

Whereas in 2008 the NAACP vigorously supported the passage of the Emmett Till Unsolved Civil Rights Crime Act of 2007 (28 U.S.C. 509 note), a law that puts additional Federal resources into solving the heinous crimes that occurred in the early days of the civil rights struggle that remain unsolved and bringing those who perpetrated such crimes to justice: Now, therefore, be it

Resolved by the Senate (the House of Representatives concurring), That the Congress—

(1) recognizes the 100th anniversary of the historic founding of the National Association for the Advancement of Colored People; and

(2) honors and praises the National Association for the Advancement of Colored People on the occasion of its anniversary for its work to ensure the political, educational, social, and economic equality of all persons.

AMENDMENTS SUBMITTED AND PROPOSED

SA 74. Mr. BUNNING submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table.

SA 75. Mr. ROBERTS (for himself, Mr. HATCH, and Ms. COLLINS) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra.

SA 76. Mr. ROBERTS (for himself and Mr. HATCH) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 77. Ms. MURKOWSKI (for herself, Mr. SPECTER, Mr. JOHANNES, and Ms. COLLINS) submitted an amendment intended to be proposed by her to the bill H.R. 2, supra.

SA 78. Mr. MARTINEZ submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 79. Mr. BROWN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra.

SA 80. Mr. HATCH (for himself, Mr. VITTER, Mr. BROWNBACK, Mr. THUNE, Mr. BENNETT, Mr. JOHANNES, Mr. DEMINT, Mr. ROBERTS, Mr. RISCH, Mr. INHOFE, Mr. BARRASSO, Mr. GREGG, Mr. ENSIGN, Mr. GRASSLEY, Mr. MARTINEZ, Mr. MCCAIN, Mr. ENZI, Mr. CRAPO, Mr. CORKER, Mr. KYL, Mr. GRAHAM, Mr. COBURN, and Mr. CORNYN) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 81. Mr. BUNNING submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

TEXT OF AMENDMENTS

SA 74. Mr. BUNNING submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Beginning on page 75, strike line 18 and all that follows through page 76, line 2, and insert the following:

“(B) INCREASED FUNDING FOR OUTREACH AND ENROLLMENT GRANTS.—

“(i) APPROPRIATION.—In addition to amounts appropriated under subsection (g) of section 2113 for the period of fiscal years 2009 through 2013, there is appropriated, out of any money in the Treasury not otherwise appropriated, the amount described in clause (ii), for the purpose of the Secretary awarding grants under that section.

“(ii) AMOUNT DESCRIBED.—The amount described in this clause is the amount equal to the amount of additional Federal funds that the Director of the Congressional Budget Office certifies would have been expended for the period beginning April 1, 2009, and ending September 30, 2013, if subparagraph (A) did not apply to any State that, on the date of enactment of the Children's Health Insurance Program Reauthorization Act of 2009, has an approved State plan amendment or waiver to provide, or has enacted a State law to submit a State plan amendment to provide, expenditures described in such subparagraph under the State child health plan.”.

SA 75. Mr. ROBERTS (for himself, Mr. HATCH, and Ms. COLLINS) submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; as follows:

Strike section 114 and insert the following:
SEC. 114. LIMITATION ON FEDERAL MATCHING PAYMENTS.

(a) DENIAL OF FEDERAL MATCHING PAYMENTS FOR COVERAGE OF HIGHER INCOME CHILDREN.—Section 2105(c) (42 U.S.C. 1397ee(c)) is amended by adding at the end the following new paragraph:

“(8) DENIAL OF PAYMENTS FOR EXPENDITURES FOR CHILD HEALTH ASSISTANCE FOR HIGHER INCOME CHILDREN.—

“(A) IN GENERAL.—No payment may be made under this section for any expenditures for providing child health assistance or health benefits coverage under a State child health plan under this title, including under a waiver under section 1115, with respect to any child whose gross family income (as defined by the Secretary) exceeds the lower of—

“(i) \$65,000; or

“(ii) the median State income (as determined by the Secretary).

“(B) NO PAYMENTS FROM ALLOTMENTS UNDER THIS TITLE IF MEDICAID INCOME ELIGIBILITY LEVEL FOR CHILDREN IS GREATER.—No payment may be made under this section from an allotment of a State for any expenditures for a fiscal year quarter for providing child health assistance or health benefits coverage under the State child health plan under this title to any individual if the income eligibility level (expressed as a percentage of the poverty line) for children who are eligible for medical assistance under the State plan under title XIX under any category specified in subparagraph (A) or (C) of section 1902(a)(10) in effect during such quarter is greater than the income eligibility level (as so expressed) for children in effect during such quarter under the State child health plan under this title.”.

SA 76. Mr. ROBERTS (for himself and Mr. HATCH) submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance

Program, and for other purposes; which was ordered to lie on the table; as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2007 (CHIPRA II).

The text of the Children's Health Insurance Program Reauthorization Act of 2007 (H.R. 3963, 110th Congress) as passed by the Senate on November 1, 2007, is hereby incorporated by reference.

SA 77. Ms. MURKOWSKI (for herself, Mr. SPECTER, Mr. JOHANNES, and Ms. COLLINS) submitted an amendment intended to be proposed by her to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; as follows:

At the appropriate place, insert the following:

SEC. —. DEVELOPMENT OF BEST PRACTICE RECOMMENDATIONS AND COVERAGE OF LOW INCOME CHILDREN.

(a) DEVELOPMENT OF BEST PRACTICE RECOMMENDATIONS.—Section 2107 (42 U.S.C. 1397gg) is amended by adding at the end the following:

“(g) DEVELOPMENT OF BEST PRACTICE RECOMMENDATIONS.—Not later than 12 months after the date of enactment of this Act, the Secretary, in consultation with States, including Medicaid and CHIP directors in States, shall publish in the Federal Register, and post on the public website for the Department of Health and Human Services—

“(1) recommendations regarding best practices for States to use to address CHIP crowd-out; and

“(2) uniform standards for data collection by States to measure and report—

“(A) health benefits coverage for children with family income below 200 percent of the poverty line; and

“(B) on CHIP crowd-out, including for children with family income that exceeds 200 percent of the poverty line.

The Secretary, in consultation with States, including Medicaid and CHIP directors in States, may from time to time update the best practice recommendations and uniform standards set published under paragraphs (1) and (2) and shall provide for publication and posting of such updated recommendations and standards.”.

(b) LIMITATION ON PAYMENTS FOR STATES COVERING HIGHER INCOME CHILDREN.—

(1) IN GENERAL.—Section 2105(c) (42 U.S.C. 1397ee(c)), as amended by section 601(a), is further amended by adding at the end the following new paragraph:

“(12) LIMITATION ON PAYMENTS FOR STATES COVERING HIGHER INCOME CHILDREN.—

“(A) DETERMINATIONS.—

“(i) IN GENERAL.—The Secretary shall determine, for each State that is a higher income eligibility State as of October 1 of 2010 and each subsequent year, whether the State meets the target rate of coverage of low-income children required under subparagraph (C) and shall notify the State in that month of such determination.

“(ii) DETERMINATION OF FAILURE.—If the Secretary determines in such month that a higher income eligibility State does not meet such target rate of coverage, no payment shall be made as of April 30 of the following year, under this section for child health assistance provided for higher-income children (as defined in subparagraph (D)) under the State child health plan unless and until the Secretary establishes that the

State is in compliance with such requirement, but in no case more than 12 months.

“(B) HIGHER INCOME ELIGIBILITY STATE.—A higher income eligibility State described in this clause is a State that—

“(i) applies under its State child health plan an eligibility income standard for targeted low-income children that exceeds 300 percent of the poverty line; or

“(ii) because of the application of a general exclusion of a block of income that is not determined by type of expense or type of income, applies an effective income standard under the State child health plan for such children that exceeds 300 percent of the poverty line.

“(C) REQUIREMENT FOR TARGET RATE OF COVERAGE OF LOW-INCOME CHILDREN.—The requirement of this subparagraph for a State is that the rate of health benefits coverage (both private and public) for low-income children in the State is not statistically significantly (at a p=0.05 level) less than 80 percent of the low-income children who reside in the State and are eligible for child health assistance under the State child health plan.

“(D) HIGHER-INCOME CHILD.—For purposes of this paragraph, the term ‘higher income child’ means, with respect to a State child health plan, a targeted low-income child whose family income—

“(i) exceeds 300 percent of the poverty line; or

“(ii) would exceed 300 percent of the poverty line if there were not taken into account any general exclusion described in subparagraph (B)(ii).”

(2) CONSTRUCTION.—Nothing in the amendment made by paragraph (1) or this section this shall be construed as authorizing the Secretary of Health and Human Services to limit payments under title XXI of the Social Security Act in the case of a State that is not a higher income eligibility State (as defined in section 2105(c)(12)(B) of such Act, as added by paragraph (1)).

SA 78. Mr. MARTINEZ submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children’s Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 43, between lines 11 and 12, and insert the following:

“(3) EXCEPTION.—

“(A) IN GENERAL.—Notwithstanding paragraph (1)(B), if a State submits, by not later than 18 months after the date of enactment of this paragraph, a plan to the Secretary that the Secretary determines is likely to reduce the levels of improper payments for the State under the Medicaid program under title XIX and the program under this title, such paragraph shall be applied with respect to such State by substituting ‘second succeeding fiscal year’ for ‘succeeding fiscal year’.

“(B) DETERMINATION.—In making the determination under subparagraph (A), the Secretary shall take into account the results of the study conducted under paragraph (4).

“(4) GAO STUDY AND REPORT ON IMPROPER PAYMENTS UNDER THE MEDICAID AND CHIP PROGRAMS AND WAYS TO REDUCE SUCH IMPROPER PAYMENTS.—

“(A) STUDY.—The Comptroller General of the United States shall conduct a study on—

“(i) the mechanisms that States are currently using to reduce improper payments under the Medicaid program under title XIX the program under this title;

“(ii) the levels of such improper payments for each State; and

“(iii) the mechanisms that States should implement in order to reduce such improper payments.

“(B) REPORT.—Not later than 12 months after the date of enactment of this paragraph, the Comptroller General of the United States shall submit a report to Congress on the study conducted under subsection (a) together with such recommendations as the Comptroller General determines appropriate.”

SA 79. Mr. BROWN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children’s Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

After section 622 insert the following:

SEC. 623. ONE-TIME PROCESS FOR HOSPITAL WAGE INDEX RECLASSIFICATION IN ECONOMICALLY-DISTRESSED AREAS.

(a) RECLASSIFICATIONS.—

(1) Notwithstanding any other provision of law, effective for discharges occurring on or after April 1, 2009, and before March 31, 2012, for purposes of making payments under section 1886(d) of the Social Security Act (42 U.S.C. 1395ww(d)) to St. Vincent Mercy Medical Center (provider number 36-0112), such hospital is deemed to be located in the Ann Arbor, MI metropolitan statistical area.

(2) Notwithstanding any other provision of law, effective for discharges occurring on or after April 1, 2009 and before March 31, 2012, for purposes of making payments under section 1886(d) of the Social Security Act (42 U.S.C. 1395ww(d)) to St. Elizabeth Health Center (provider number 36-0064), Northside Medical Center (provider number 36-3307), St. Joseph Health Center (provider number 36-0161), and St. Elizabeth Boardman Health Center (provider number 36-0276), such hospitals are deemed to be located in the Cleveland-Elyria-Mentor metropolitan statistical area.

(b) RULES.—

(1) Except as provided in paragraph (2), any reclassification made under subsection (a) shall be treated as a decision of the Medicare Geographic Classification Review Board under section 1886(d)(10) of the Social Security Act (42 U.S.C. 1395ww(d)(10)).

(2) Section 1886(d)(10)(D)(v) of the Social Security Act (42 U.S.C. 1395ww(d)(10)(D)(v)), as it relates to reclassification being effective for 3 fiscal years, shall not apply with respect to a reclassification made under subsection (a).

SEC. 624. TREATMENT OF CERTAIN CANCER HOSPITALS.

(a) IN GENERAL.—

(1) TREATMENT.—Section 1886(d)(1)(B)(v) of the Social Security Act (42 U.S.C. 1395ww(d)(1)(B)(v)) is amended—

(A) in subclause (II), by striking “or” at the end;

(B) in subclause (III), by striking the semicolon at the end and inserting “, or”; and

(C) by inserting after subclause (III) the following new subclause:

“(IV) a hospital—

“(aa) that the Secretary has determined to be, at any time on or before December 31, 2011, a hospital involved extensively in treatment for, or research on, cancer,

“(bb) that is a free standing hospital, the construction of which had commenced as of December 31, 2008; and

“(cc) whose current or predecessor provider entity is University Hospitals of Cleveland (provider number 36-0137).”

(2) INITIAL DETERMINATION.—

(A) A hospital described in subclause (IV) of section 1886(d)(1)(B)(v) of the Social Security Act, as inserted by subsection (a), shall not qualify as a hospital described in such subclause unless the hospital petitions the Secretary of Health and Human Services for a determination of such qualification on or before December 31, 2011.

(B) The Secretary of Health and Human Services shall, not later than 30 days after the date of a petition under subparagraph (A), determine that the petitioning hospital qualifies as a hospital described in such subclause (IV) if not less than 50 percent of the hospital’s total discharges since its commencement of operations have a principal finding of neoplastic disease (as defined in section 1886(d)(1)(E) of such Act (42 U.S.C. 1395ww(d)(1)(E))).

(b) APPLICATION.—

(1) INAPPLICABILITY OF CERTAIN REQUIREMENTS.—The provisions of section 412.22(e) of title 42, Code of Federal Regulations, shall not apply to a hospital described in subclause (IV) of section 1886(d)(1)(B)(v) of the Social Security Act, as inserted by subsection (a).

(2) APPLICATION TO COST REPORTING PERIODS.—If the Secretary makes a determination that a hospital is described in subclause (IV) of section 1886(d)(1)(B)(v) of the Social Security Act, as inserted by subsection (a), such determination shall apply as of the first full 12-month cost reporting period beginning on January 1 immediately following the date of such determination.

(3) BASE PERIOD.—Notwithstanding the provisions of section 1886(b)(3)(E) of the Social Security Act (42 U.S.C. 1395ww(b)(3)(E)) or any other provision of law, the base cost reporting period for purposes of determining the target amount for any hospital for which such a determination has been made shall be the first full 12-month cost reporting period beginning on or after the date of such determination.

(4) REQUIREMENT.—A hospital described in subclause (IV) of section 1886(d)(1)(B)(v) of the Social Security Act, as inserted by subsection (a), shall not qualify as a hospital described in such subclause for any cost reporting period in which less than 50 percent of its total discharges have a principal finding of neoplastic disease (as defined in section 1886(d)(1)(E) of such Act (42 U.S.C. 1395ww(d)(1)(E))).

SEC. 625. RECONCILIATION AND RECOVERY OF ALL SERVICE-CONCLUDED MEDICARE FEE-FOR-SERVICE DISEASE MANAGEMENT PROGRAM FUNDING.

Notwithstanding any other provision of law, the Secretary of Health and Human Services shall provide for the immediate reconciliation and recovery of all service-concluded Medicare fee-for-service disease management program funding.

SA 80. HATCH (for himself, Mr. VITTER, Mr. BROWBACK, Mr. THUNE, Mr. BENNETT of Utah, Mr. JOHANNIS, Mr. DEMINT, Mr. ROBERTS, Mr. RISCH, Mr. INHOFE, Mr. BARRASSO, Mr. GREGG, Mr. ENSIGN, Mr. GRASSLEY, Mr. MARTINEZ, Mr. MCCAIN, Mr. ENZI, Mr. CRAPO, Mr. CORKER, Mr. KYL, Mr. GRAHAM, Mr. COBURN, and Mr. CORNYN) submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children’s Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 76, after line 23, add the following:

SEC. 116. TREATMENT OF UNBORN CHILDREN.

(a) CODIFICATION OF CURRENT REGULATIONS.—Section 2110(c)(1) (42 U.S.C. 1397j(c)(1)) is amended by striking the period at the end and inserting the following: “, and includes, at the option of a State, an unborn child. For purposes of the previous sentence, the term ‘unborn child’ means a member of the species *Homo sapiens*, at any stage of development, who is carried in the womb.”.

(b) CLARIFICATIONS REGARDING COVERAGE OF MOTHERS.—Section 2103 (42 U.S.C. 1397cc) is amended by adding at the end the following new subsection:

“(g) CLARIFICATIONS REGARDING AUTHORITY TO PROVIDE POSTPARTUM SERVICES AND MATERNAL HEALTH CARE.—Any State that provides child health assistance to an unborn child under the option described in section 2110(c)(1) may—

“(1) continue to provide such assistance to the mother, as well as postpartum services, through the end of the month in which the 60-day period (beginning on the last day of pregnancy) ends; and

“(2) in the interest of the child to be born, have flexibility in defining and providing services to benefit either the mother or unborn child consistent with the health of both.”.

SA 81. Mr. BUNNING submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children’s Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Beginning on page 273, line 8, strike “inserting “\$24.78”.” and all that follows through page 276, line 9, and insert “inserting “\$2.8311 cents”.”.

AUTHORITY FOR COMMITTEES TO MEET

COMMITTEE ON FOREIGN RELATIONS

Mr. MENENDEZ. Mr. President, I ask unanimous consent that the Committee on Foreign Relations be authorized to meet during the session of the Senate on Wednesday, January 28, 2009, at 10 a.m., to hold a hearing entitled “Addressing Global Climate Change: The Road to Copenhagen.”

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON HOMELAND SECURITY AND GOVERNMENTAL AFFAIRS

Mr. MENENDEZ. Mr. President, I ask unanimous consent that the Committee on Homeland Security and Governmental Affairs be authorized to meet during the session of the Senate on Wednesday, January 28, 2009, at 10 a.m. to conduct a hearing entitled “Lessons from the Mumbai Terrorist Attacks, Part II.”

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON THE JUDICIARY

Mr. MENENDEZ. Mr. President, I ask unanimous consent that the Senate Committee on the Judiciary be authorized to meet during the session of the Senate, to conduct an executive business meeting on Wednesday, January 28, 2009, at 10 a.m. in room SH-216 of the Hart Senate Office Building.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON VETERANS’ AFFAIRS

Mr. MENENDEZ. Mr. President, I ask unanimous consent that the Committee on Veterans’ Affairs be authorized to meet during the session of the Senate on Wednesday, January 28, 2009.

The Committee will meet in room 418 of the Russell Senate Office Building beginning at 9:30 a.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

SUBCOMMITTEE ON FEDERAL FINANCIAL MANAGEMENT, GOVERNMENT INFORMATION, FEDERAL SERVICE, AND INTERNATIONAL SECURITY

Mr. MENENDEZ. Mr. President, I ask unanimous consent that the Committee on Homeland Security and Governmental Affairs’ Subcommittee on Federal Financial Management, Government Information, Federal Services, and International Security be authorized to meet during the session of the Senate on Wednesday, January 28, 2009, at 2:30 p.m. to conduct a hearing entitled, “The Impact of the Economic Crisis on the U.S. Postal Service”.

The PRESIDING OFFICER. Without objection, it is so ordered.

SELECT COMMITTEE ON INTELLIGENCE

Mr. MENENDEZ. Mr. President, I ask unanimous consent that the Select Committee on Intelligence be authorized to meet during the session of the Senate on Wednesday, January 28, 2009 at 2:30 p.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

PRIVILEGES OF THE FLOOR

Mr. GRASSLEY. Madam President, I ask unanimous consent that Terri Postma and Rachel Miller, members of my staff, be granted the privilege of the floor during the debate of H.R. 2, the Children’s Health Insurance Program Reauthorization Act of 2009.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

Mr. TESTER. Mr. President, I ask unanimous consent that the Senate proceed to executive session to consider Calendar Nos. 6, 7, 8, 10, and all nominations on the Secretary’s Desk in the Air Force, Army, Marine Corps, and Navy; that the nominations be confirmed, and the motions to reconsider be laid upon the table, en bloc; that no further motions be in order, and any statements relating to the nominations be printed in the RECORD; and that the President be immediately notified of the Senate’s action.

The PRESIDING OFFICER. Without objection, it is so ordered.

The nominations considered and confirmed en bloc are as follows:

IN THE AIR FORCE

The following Air National Guard of the United States officers for appointment in the

Reserve of the Air Force to the grades indicated under title 10, U.S.C., sections 12203 and 12212:

To be major general

- Brigadier General Donald A. Haught
- Brigadier General Thomas J. Haynes
- Brigadier General Craig D. McCord
- Brigadier General Robert M. Stonestreet
- Brigadier General Edward W. Tonini
- Brigadier General Francis A. Turley

To be brigadier general

- Colonel Margaret H. Bair
- Colonel James H. Bartlett
- Colonel Jorge R. Cantres
- Colonel Sandra L. Carlson
- Colonel Stephen D. Cotter
- Colonel James T. Daugherty
- Colonel Gretchen S. Dunkelberger
- Colonel Robert A. Hamrick
- Colonel Chris R. Helstad
- Colonel Cecil J. Hensel, Jr.
- Colonel Frank D. Landes
- Colonel Robert L. Leeker
- Colonel Rickie B. Mattson
- Colonel Maureen McCarthy
- Colonel John E. McCoy
- Colonel John W. Merritt
- Colonel Thomas R. Schiess
- Colonel Rodger F. Seidel
- Colonel Glenn K. Thompson
- Colonel Dean L. Winslow
- Colonel William M. Ziegler

IN THE MARINE CORPS

The following named officers for appointment in the United States Marine Corps Reserve to the grade indicated under title 10, U.S.C., section 12203:

To be major general

- Brig. Gen. John M. Croley
- Brig. Gen. Tracy L. Garrett

IN THE ARMY

The following Army National Guard of the United States officers for appointment in the Reserve of the Army to the grades indicated under title 10, U.S.C., sections 12203 and 12211:

To be major general

- Brigadier General Peter M. Aylward
- Brigadier General Grant L. Hayden
- Brigadier General David L. Jennette, Jr.
- Brigadier General Robert E. Livingston, Jr.
- Brigadier General William M. Maloan
- Brigadier General Randy E. Manner
- Brigadier General Randall R. Marchi
- Brigadier General Stuart C. Pike
- Brigadier General Eddy M. Spurgin
- Brigadier General Charles L. Yriarte

To be brigadier general

- Colonel Dennis J. Adams
- Colonel Robbie L. Asher
- Colonel Christopher D. Bishop
- Colonel Glenn A. Bramhall
- Colonel Dominic A. Cariello
- Colonel Robert C. Clouse, Jr.
- Colonel Robert W. Enzenauer
- Colonel Peter J. Fagan
- Colonel Jack R. Fox
- Colonel Wilton S. Gorske
- Colonel Louis H. Guernsey, Jr.
- Colonel Stephen L. Huxtable
- Colonel Timothy J. Kadavy
- Colonel James E. Keighley
- Colonel Gerald W. Ketchum
- Colonel Leonard H. Kiser
- Colonel Timothy L. Lake
- Colonel Gregory A. Lusk
- Colonel David V. Matakas
- Colonel Owen W. Monconduit
- Colonel Timothy E. Orr
- Colonel William R. Phillips, II
- Colonel Renaldo Rivera
- Colonel Kenneth C. Roberts
- Colonel Stephen G. Sanders
- Colonel William L. Smith