

Tommy's "Peace and Justice" expresses the hope that "understanding and forgiveness will dry all our country's tears"—something to be wished for on both sides of the Atlantic.

The 19th century poet Arthur O'Shaughnessy wrote of the world's musicians:

We are the music makers,  
And we are the dreamer of dreams,  
Wandering by lone sea-breakers,  
And sitting by desolate streams;  
World-losers and world-forsakers,  
On whom the pale moon gleams:  
Yet we are the movers and shakers  
Of the world forever, it seems.

With wonderful deathless ditties  
We build up the world's great cities,  
And out of a fabulous story  
We fashion an empire's glory  
One man with a dream, at pleasure,  
Shall go forth and conquer a crown;  
And three with a new song's measure  
Can trample an empire down.

We in the ages lying,  
In the buried past of the earth,  
Built Ninevah with our sighing,  
And Babel itself with our mirth;  
And o'erthrew them with prophesying  
To the old of the new world's worth;  
For each age is a dream that is dying,  
Or one that is coming to birth.

Mr. Speaker, I sometimes wonder whether our society fully appreciates the importance of our artists, poets and songwriters. Tommy Makem's journey to our shore, his work for peace and the music he has made famous—including the folk songs of both North America and the British Isles—remind us that our nation has been enriched indeed by the men and women who have come here from other lands.

DEPARTMENTS OF COMMERCE,  
JUSTICE, AND STATE, AND JUDI-  
CIARY, AND RELATED AGENCIES  
APPROPRIATIONS ACT, 1999

SPEECH OF

**HON. CONSTANCE A. MORELLA**

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, August 4, 1998*

The House in Committee of the whole House on the State of the Union had under consideration the bill (H.R. 4276) making appropriations for the Departments of Commerce, Justice, and State, the Judiciary, and related agencies for the fiscal year ending September 30, 1999, and for other purposes:

Mrs. MORELLA. Mr. Chairman, I rise in opposition to the Royce Amendment to zero funding for the Advanced Technology Program (ATP).

Zeroing-out ATP would amount to the U.S. government turning its back on its obligations. The problem is that ATP funds long-term (three to five year) research grants. The funding for the remaining years of these multi-year grants is termed a "mortgage."

According to the Administration, ATP is likely to have mortgages totaling just over \$120 million in FY 1999. While these mortgages are not liabilities for the Federal Government, they represent commitments made by the National Institute of Standards and Technology (NIST) to these research projects.

Zeroing-out ATP would break NIST's commitments to its existing ATP partners. It would be like giving a four-year scholarship to a stu-

dent, and then terminate it without cause after his or her freshman year.

Similar efforts to eliminate ATP failed last year by votes of 163 to 261 and 177 to 235. And this House earlier today rejected an amendment to reduce this year's funding. Further, both the House and Senate have passed legislation to specifically authorize the program.

ATP has an important role in bringing companies together, in cooperation with the Federal Government, to bridge the gap between research that creates precompetitive technologies and the commercialization of those technologies.

To date, ATP grants have helped to develop medical equipment that will assist in the fight against cancer and AIDS, increase the capacity of fiber optic cables, improve light-emitting diode (LED) displays, and create a method for combining textile weaving technology with human tissue growth to form biodegradable medical implants.

Mr. Chairman, eliminating all ATP funding in H.R. 4276 is a bad idea. It will force NIST to back-out of commitment it has made to existing ATP grant recipients and it will end a program that has shown promise.

I urge all my colleagues to vote "no" on the Royce amendment.

TRIBUTE TO KENNETH ALLEN

**HON. CHARLIE NORWOOD**

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, August 5, 1998*

Mr. NORWOOD. Mr. Speaker, there has been a lot of talk and even legislation lately concerning the encouragement of Americans to become volunteers in their communities.

I would like to point out to my colleagues that millions of Americans have not waited for the Federal Government to call for volunteerism, they have been doing just that for decades. And nowhere can be found a better example than that of Kenneth Allen, of Dublin, Georgia.

Kenneth became a member of the Boy Scouts of Dublin in January 1976, as Assistant Scoutmaster of Troop 66. He served in that capacity until 1988, when he became head Scoutmaster.

For ten years, from 1988 until this year, Kenneth faithfully served the young men of Troop 66, producing 76 Eagle Scouts. Kenneth earned the Silver Beaver Award in 1988; the District Merit Award in 1991 and 1996; the Scoutmaster Award in 1986, 1989, 1990, and 1994; the Troop Advancement Award in 1990 and 1997, and the Cliff Moye Award in 1988.

This year, Kenneth Allen finally retired from active service with the Boy Scouts. In honor of his years of dedication, the Troop Advancement Award has been renamed the Kenneth D. Allen, Senior Advancement Award, and will be awarded annually to a scout leader in the Central Georgia Council of the Boy Scouts of America.

I'm proud to know Kenneth. He has proven himself as a credit to the Dublin community and a positive role model for hundreds of young men who have passed through Troop 66 over the 22 years he has given to that organization.

I know his wife Claudia, daughter Sharon, and son Kenneth, Junior are also proud of

Kenneth's achievements, although I'm sure they are also glad to have a little more time with Dad now that he has retired.

Mr. Speaker, if we look for examples of volunteerism to serve as a model for what we need more of as a nation, we need look no further than Kenneth D. Allen, Senior, of Dublin, Georgia.

DEPARTMENTS OF COMMERCE,  
JUSTICE, AND STATE, AND JUDI-  
CIARY, AND RELATED AGENCIES  
APPROPRIATIONS ACT, 1999

SPEECH OF

**HON. ESTEBAN EDWARD TORRES**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, August 4, 1998*

The House in Committee of the Whole House on the State of the Union had under consideration the bill (H.R. 4276) making appropriations for the Departments of Commerce, Justice, and State, the Judiciary, and related agencies for the fiscal year ending September 30, 1999, and for other purposes:

Mr. TORRES. Mr. Chairman, I rise in support of the amendment by Congresswoman JACKSON-LEE to increase funding for the Community Relations Service (CRS).

At a time when our Nation continues to see the damaging effects of racial tensions, gang violence, and hate crimes, the demand for skilled professionals trained in conflict mediation has reached a new height. We must acknowledge the services this division of the Department of Justice has brought to mayors, chiefs of police, school superintendents, and concerned citizens of the community. In my home city of Los Angeles, the Community Relations Service played a vital role in resolving the week-long turmoil of the LA riots in the early 1990's. The recent events in Jasper, TX, proved another opportunity to employ these trained professionals to resolve conflict and prevent further tensions from rising. Without their interventions, the unresolved tensions of these conflicts will fester and could continue indefinitely, breeding further hate and violence.

I believe all of my colleagues here can agree that our efforts to alleviate violence in schools and communities is not something we should choose to ignore. This is not an example of a duplicated federally funded program. This is the only Federal agency working to provide this type of assistance in times of need and attempt to prevent further outbreaks of violence and hate crimes. The demand for these services is growing and the Community Relations Service has proven itself successful in what has been deemed the most efficient and desirable approach to conflict resolution within the community; but at the current funding level they are unable to meet the demand for such services. The CRS was forced to decline 40 percent of all the requests for assistance that they received.

We hear members on the other side of the aisle speaking of a more efficient government. The CRS is an example of not only an efficient agency, but one that is cost effective. We can choose to help resolve conflict or we can pay the price of the crimes and convictions that will inevitably follow. I say we must meet the need for this demand and fully fund the CRS.

Mr. Speaker, I urge my colleagues to vote in favor of the Jackson-Lee amendment.

THE MEDICARE SUBSTITUTE  
ADULT DAY CARE SERVICE ACT

**HON. FORTNEY PETE STARK**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, August 5, 1998*

Mr. STARK. Mr. Speaker, I am pleased to rise with my colleagues Representatives CARDIN, KLECZKA, and LEWIS with whom I serve on the Ways and Means Health Subcommittee, to introduce The Medicare Substitute Adult Day Care Services Act.

This bill would update the Medicare home health benefit to incorporate modern setting for rehabilitation. While the home had been the only setting in which a homebound person could reasonably be expected to receive therapy, that is no longer always the case. This legislation would allow patients and their families to choose the best setting for their individual needs. This new choice would be provided at no additional cost to the Medicare program.

Adult day care centers (ADCs) are proving to be effective—often preferable—alternatives to complete confinement in the home. Homebound people can utilize these centers because they provide door-to-door services for their patients. ADCs send special vehicles and trained personnel to a patient's home and will go so far as to get the patient out of bed and transport them to the ADC site in specially-equipped vehicles. Without this transportation component, homebound patients would be not able to utilize such a service.

For certain patients, the ADC setting is far preferable to traditional home health care. The ADC can provide skilled therapy like the home health provider, but also provide therapeutic activities and meals for the patients. These centers provide a social setting within a therapeutic environment to serve patients with a variety of needs. Thus, patients have the opportunity to interact with a broad array of people and to participate in organized group activities that promote better physical and mental health. Rehabilitation can be enhanced in such a setting.

It is also important to note that ADC care provides an added benefit to the caregivers for frail seniors. When a Medicare beneficiary receives home health services in the home, these providers are not in the home all day. They provide the service they are paid for and then leave. Many frail seniors cannot be left alone for long periods of time and this restriction prevents their caregivers from being able to maintain employment outside of the home. If the senior were receiving ADC services, they would receive supervised care for the whole day and the primary care giver would be able to maintain a job and/or be able to leave the home for longer periods of time.

From a cost perspective, an ADC setting can provide savings as well. In the home care arena, a skilled nurse, a physical therapist, or any home health provider must travel from home to home providing services to one patient per site. There are significant transportation costs and time costs associated with that method of care. In an ADC, the patients are brought to the providers so that a provider can see a larger number of patients in a short-

er period of time. That means that payments per patient for skilled therapies can be reduced in the ADC setting compared to the home health setting.

The Medicare Substitute Adult Day Care Services Act would incorporate the adult day care setting into the current Medicare home health benefit. It would do so by allowing beneficiaries to substitute some, or all, of their Medicare home health services in the home for care in an adult day care center (ADC).

To achieve cost-savings, the ADC would be paid a flat rate of 95% of the rate that would have been paid for the service had it been delivered in the patient's home. The ADC would be required, with that one payment, to provide a full day of care to the patient. That care would include the home health benefit and transportation, meals and therapeutic activities.

It is especially important to note that this bill is not an expansion of the home health benefit. It would not make any new people eligible for the Medicare home health benefit. Nor would it expand the definition of what qualifies for reimbursement by Medicare for home health services.

In order to qualify for the ADC option, a patient would still need to qualify for Medicare home health benefits just like they do today. They would need to be homebound and they would need to have a certification from a doctor for skilled therapy in the home.

All the bill would do is recognize that ADCs can provide the same services, at lower costs, and include the benefits of social interaction, activities, meals, and a therapeutic environment in which trained professionals can treat, monitor and support Medicare beneficiaries who would otherwise be at home without professional help. All of these things aid the rehabilitation process of patients.

In order to participate in the Medicare home care program, adult day care centers would need to meet the same standards that are required of home health agencies. The only exception to this rule is that the ADCs would not be required to be "primarily" involved in the provision skilled nursing services and therapy services. They would be required to provide those services, but because ADCs provide services to an array of patients, skilled nursing services and therapy services may not always be their primary activity. Otherwise, all the home health requirements would apply to ADCs.

Here is an example of how the system would work if this bill were law. A patient is prescribed home care by his or her doctor. At that time the patient and his or her family decide how to arrange for the services. They could choose to receive all services through the home, or could choose to substitute some adult day care services. So, if the patient had 3 physical therapy visits and 2 home health aide visits, they could decide to take the home health aide visits at home, but substitute three days of ADC services for the physical therapy visits. On those days, the patient would be picked up from home, taken to the ADC, receive the physical therapy, and receive the additional benefits of the ADC setting (group therapy, meals, socialization, and transportation). All of these services would be incorporated into the payment rate of 95% of the home setting rate for the physical therapy service. It is a savings for Medicare and an improved benefit to the patient—a winning solution for everyone.

While we believe this bill would create savings for Medicare without any additional protections, to make sure that that is the case, we have included a budget neutrality provision in the bill. This provision would allow the Secretary of Health and Human Services to change the percentage of the payment rate for ADC services if growth in those services were to be greater than current projections under the traditional home health program.

This is a small step forward for rehabilitation therapy for seniors. Eligibility for the home health benefit is not changed so it is not an expansion of the benefit. We believe that patients would greatly benefit from the option of an adult day care setting for the provision of home health services and look forward to working with our colleagues to enact this incremental, important Medicare improvement.

CREDIT CARD ON-TIME PAYMENT  
PROTECTION ACT

**HON. JOHN J. LaFALCE**

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, August 5, 1998*

Mr. LaFALCE. Mr. Speaker, I am today introducing the "Credit Card On-Time Payment Protection Act" to address the growing financial penalties imposed on credit card holders who pay their credit card bills in full each month.

While most of the information we see on credit cards and credit card debt is alarming, one positive fact has received little attention. This is the fact that over 40 percent of credit card holders routinely pay off their credit card balances in full each month without incurring finance charges or carrying credit balances. This use of credit cards only for transactions rather than credit has been relatively stable over time. According to the Federal Reserve Bank of New York, 43 percent of households with credit cards routinely paid off their card balances in 1983, with 41 percent continuing to regularly pay off card balances in 1995.

At a time of escalating consumer debt, paying off of credit card debt should be encouraged. But the credit card companies have taken the opposite approach. Rather than encouraging a reduction of debt they are imposing penalties on card holders who pay off their card balances on time. Rather than encouraging responsible use of credit cards and reducing credit card delinquencies, they are creating new disincentives to reduce credit card debt.

Press articles began appearing two years ago describing how one credit card issuer, then another, had begun imposing minimum finance charges or maintenance fees on the accounts of card holders who regularly paid off the card balances each month. Other card issuers began to reimpose annual fees on the "no fee" accounts of card holders who paid in full. The theory behind this was, if consumers were going to have to pay a fee, they might as well carry credit balances and pay interest charges. Our colleague JOE KENNEDY responded to this problem with a bill to prohibit the imposition of a minimum finance charge or fee on a credit card account solely because a card holder paid off any credit extended in full.

Late last year the press reported that several large national retail company chains were