

local law overlap to regulate wetlands, for instance.

During the founding period of this nation, the founders did not want amorphous layers of government whose responsibility for particular impacts was disguised or unclear. They decided that the federal government should rule directly where federal powers applied, rather than coerce the states to pass laws. Today, people have trouble knowing the source of rules regulating their lives. I can describe how federal flood insurance law is carried down through the federal government to the state to the local enforcer, but can one of 100 citizens do this?

The courts have not held that federal incentives to pass state or local laws are unconstitutional, but I believe that these incentives result in a wrongful blurring of responsibility. I think that the same lines of reasoning that argue against the federal government compelling states to regulate apply to the federal government offering or withholding financial aid to persuade States to regulate.

In 1992 when New York blocked the United States government from forcing the State to adopt its own nuclear waste, the U.S. Supreme Court said, " \* \* \* where a Federal Government compel states to regulate, the accountability of both state and federal officials is diminished."

People who have the frustration of dealing with this shuffling of responsibility when federal incentive programs are carried out at the local level do indeed currently experience lack of accountability.

#### SUMMARY

In opposing the American Heritage Rivers program, we have to fight on the basis of an undefined program. We can argue against the American Heritage Rivers program

(1) on the basis that the reasons offered for the program—grants and alleviation of regulatory problems—are not a logical explanation for it;

(2) on the basis of experience with other pre-zoning programs and seeing how pre-zoning designations pan out;

(3) on the basis of who the program's advocates are and what they have been broadly seeking;

(4) on the basis of the involved agencies and how they have already negatively affected private property rights and local representative government and;

(5) and on the basis of the description of the program.

There is no American Heritage Rivers program description which says in the regulatory language normally promulgated that party A writes the grant terms, party B finds the grants for interested entities, and party C sets the terms for modifying local laws and effectuating certain programs in order to get the grants or the regulatory relief.

On another note, there is certainly no party D who holds hearings and lays out the economic implications of the specifics of the program under the requirements of the National Environmental Policy Act, NEPA.

Published descriptions of the program do not spell out how the environmental preservation groups plan to utilize the computerized state of the river information.

There is nothing in writing that spells out how agencies will be more effective. It is supposedly just better internal management. And other agencies say that GIS is supposedly non-threatening.

In opposing the program, as we did in opposing the Congressional program, we argue most simply that the American Heritage Rivers program is a very large scale attempt to impose national zoning. It is a part of a long pattern of unsuccessful and successful steps to impose federal control of land-use.

The 1970's Jackson-Udall Congressional effort at national zoning was defeated, but many subsequent programs with great effectiveness at such federal control of land-use are in place—wetlands and endangered species protection being the most far-reaching.

## STOP THE VIOLENCE IN KOSOVA

### HON. DAVID E. BONIOR

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 8, 1998

Mr. BONIOR. Mr. Speaker, for the past two hundred and fifteen days, the people of Kosova have endured unfathomable brutality and suffering at the hands of Serbian-Yugoslavian authorities.

Over four hundred thousand ethnic Albanians were forced to leave their homes, and more than seven thousand were murdered.

Tragically, these atrocities are still happening.

Homes and villages are being burned, and innocent civilians, including women and children, are being slaughtered.

For nine years, Serbia has repressed and harassed the people of Kosova.

Leaders of the Western world were continuously warned about the distressful situation in Kosova.

But the Western world did not heed those warnings.

In fact, we are still sitting on the sidelines, while we debate what to do.

This indecisive behavior is allowing Slobodan Milosevic to carry out his campaign of ethnic cleansing, violating the human rights of the people of Kosova.

The West must act, and if the West does not act, the United States must act. We cannot wait.

We must remember the commitments that have been made to protect ethnic Albanians in Kosova.

We must not stray away from those commitments now, even though it means making difficult decisions.

We brought peace to the people of Bosnia only after we showed Milosevic that his brute force would be countered with swift and decisive military action.

Now is the time to make sure he knows he faces the same consequences if the violence in Kosova is not put to a stop.

The people of Kosova are being brutalized, and we must not allow it to continue.

HONORING MR. LARRY J. CRISMON FOR HIS 13TH PASTORAL ANNIVERSARY OF BRIGHT TEMPLE CHURCH OF GOD IN SHELBYVILLE, TN

### HON. BOB CLEMENT

OF TENNESSEE

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 8, 1998

Mr. CLEMENT. Mr. Speaker, I rise today in honor of Mr. Larry J. Crismon and his thirteen years of service as the pastor of Bright Temple Church of God in Shelbyville, Tennessee.

On Sunday, October 11, 1998 the congregation of Bright Temple will come together

to honor Pastor Crismon and his wife Audrey for their dedication to the church and their service unto God. I would like to join the congregation in its celebration of the long and distinguished career of Pastor Crismon.

Pastor Crismon's service extends beyond the walls of his church. He has been active in community affairs by serving on the boards of the Red Cross, United Way, Ministerial Alliance, Vocational Advisory Committee, Families First, Child Development Center, Bedford Countains United For a Better Tomorrow, South Tennessee Counseling Association, Tennessee Eastern Second Jurisdiction, and Auxiliaries in Ministry. There is no question that Pastor Crismon's tireless work has made his community a better place for all of its people.

I congratulate Pastor Crismon on his accomplishments and wish him many more years of providing spiritual guidance and community leadership to the people of Shelbyville, Tennessee.

## TRIBUTE TO THE HONORABLE HENRY HYDE

### HON. SONNY CALLAHAN

OF ALABAMA

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 8, 1998

Mr. CALLAHAN. Mr. Speaker, I rise today to share a recent article by syndicated columnist James Pinkerton that pays tribute to the Honorable Chairman of our Judiciary Committee, HENRY HYDE.

The article eloquently points out that Henry is a man of great integrity and unmatched character. Not only has he served us well in the House, but also bravely served our country in combat. I respectfully request that the article be placed in the RECORD so that we can all catch a glimpse into Henry's great contributions and selfless work for this country.

[From the Los Angeles Times]

DON'T ATTACK HYDE FOR INDISCRETIONS OF DECADES AGO, HE'S PAID HIS DUES

(By James Pinkerton)

For two centuries, Henry Hyde said Monday, "Americans have undergone the stress of preserving their freedom." The chairman of the House Judiciary Committee, born in 1924, has been alive for a third of that time, yet most Americans probably didn't know of him until recently.

So who is Henry Hyde? For most of his 23 years as a congressman from Illinois, he has been known for his opposition to abortion. Yet he will also be remembered now as the "family values" conservative who had a four-year affair with a woman other than his wife. Hyde acknowledged the relationship, but the less-than-wisely referred to his 40-something fling as a "youthful indiscretion."

But, if Hyde thinks 40 is young, that might be because he grew up too soon. Because, if what he did three decades ago is of interest, what he did five decades ago, when his country needed him, should be remembered as well.

Hyde joined the Navy at 18, foregoing a basketball scholarship to Georgetown University. For young men such as Hyde, there was no choice after Pearl Harbor. "It was our turn, we did our duty," he said in a recent interview.

Commissioned as an ensign in 1944, he commanded an LCT (landing craft, tank). "A floating bed pan," he called it. His baptism

by fire came on Jan. 9, 1945, when Americans went ashore at Lingayen Gulf, in the Philippines.

Hyde remembers that operation more as hard work than as heroism: "Day and night, loading and off-loading." The hardest part of his job, he added, was finding his mother ship out in the bay at night: "We all had to keep our lights off." Why? "Kamikazes," he answered simply. Indeed about 150 Japanese suicide aircraft hurled themselves at U.S. ships during the Lingayen landing, sinking 17 vessels and damaging 50.

One who also remembers the kamikaze attacks at Lingayen is Bob Stump, now a Republican congressman from Arizona. As a teenager, he was a medic abroad the carrier *Tulagi*. "You'd heard the five (anti-aircraft guns) firing and you'd know they were coming," Stump remembered recently. "Then you'd hear the 40 millimeters firing and you'd know they were close. Then you'd hear the 20 millimeters firing and you'd know they were on top of you." Total U.S. Navy fatalities for the Philippines campaign amounted to 4,336.

Despite spending four years of his young life in the Navy, Hyde graduated from Georgetown University at 23; he was eager, like the rest of the GI generation, to get on with his life. Yet he gets a reminder of the war every time he flies home and lands at O'Hare International Airport, which lies within his suburban Chicago district. It is named for Edward "Butch" O'Hare, a Navy pilot in the Pacific who earned the Medal of Honor in 1942 and was killed the next year. He was 29. "Most people have no idea what he did," Hyde observed, "which is a shame."

A half-century later, some are furious that Hyde is investigating Bill Clinton, who is also a Georgetown alumnus—although one who never let military service interrupt his academic career. *Salon* the online publication, first revealed Hyde's long-ago affair. Mustering up the sort of faux courage appropriate for a faux magazine, the editors declared that they were, in pushing the story, "fighting fire with fire."

Fire? Hyde, Stump and 12 million more were touched by fire during World War II. After surviving the Big One, Hyde regards the word-warriors of Washington as unpleasant, perhaps even stressful, but not particularly intimidating.

Hyde's enemies will no doubt continue to attack, while friends such as Stump, who did not meet his fellow Pacific theater vet until the 1970s, will continue to admire. "Henry is probably the most respected and brightest person here," Stump said.

But Hyde's reputation will surely survive because it is rooted in service to the nation that began before the incumbent president was even born. Asked to sum up his current mission, Hyde said, "We have an obligation to make America the kind of country those guys died for." From most politicians, such talk is cheap. But from Hyde, it is precious, because it was paid for in for in the oft-forgotten currencies of duty, honor and sacrifice.

#### INTRODUCTION OF THE ALL-PAYER GRADUATE MEDICAL EDUCATION ACT

**HON. BENJAMIN L. CARDIN**

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

*Thursday, October 8, 1998*

Mr. CARDIN. Mr. Speaker, I rise today to introduce the All-Payer Graduate Medical Education Act, legislation that I have authored to

improve the funding of America's teaching hospitals and to ease the burden on the Medicare Trust Fund. In introducing this legislation, I do not seek to preempt the important work of the National Bipartisan Commission on the Future of Medicare, but rather, to present a concrete proposal for consideration by Congress.

We have recently learned that medical care costs will double in the next 10 years. Health care budgets, including Medicare, will be caught in the vise of increasing costs and limited resources. We must try to restrain the growth of Medicare spending, while protecting our teaching hospitals that rely on Medicare and Medicaid as major sources of funding for graduate medical education.

America's 125 academic medical centers and their affiliated hospitals are vital to the Nation's health. These centers train each new generation of physicians, nurses and allied health professionals, conduct the research and clinical trials that lead to advances in medicine, including new treatments and cures for disease, and care for the most medically complex patients. To place their contributions in perspective, academic medical centers constitute only 2 percent of our Nation's non-Federal hospital beds, yet they conduct 42% of all of the health research and development in the United States, provide 33% of all trauma units and 31% of all AIDS units. Academic medical centers also treat a disproportionate share of the Nation's indigent patients.

To pay for training the Nation's health professionals, our academic medical centers must rely on the Medicare program. But Medicare's contribution does not fully cover the costs of residents' salaries, and more importantly, this funding system fails to recognize that graduate medical education benefits all segments of society, not just Medicare beneficiaries. At a time when Congress is constantly reviewing and revising the Medicare program to ensure that the Trust Fund can remain solvent for future generations, GME costs are threatening to break the bank.

The All-Payer Graduate Medical Education Act will distribute the expense of graduate medical education more fairly by establishing a Trust funded by a 1% fee on the health care premiums. Teaching hospitals will receive approximately two-thirds of the revenue from the Trust, while the remaining third, approximately \$1 billion yearly, will be used to reduce Medicare's contribution. The current formula for direct graduate medical education payments is based on cost reports generated more than 15 years ago, and it unfairly rewards some hospitals and penalizes others. This bill replaces the current formula with a fair, national system for direct graduate medical education payments based on actual resident wages.

Critics of indirect graduate medical education payments have complained that hospitals are not required to account for their use of these funds. The All-Payer Graduate Medical Education Act requires hospitals to report annually on their contributions to improve patient care, education, clinical research, and community services. The formula for indirect graduate medical education payments will be changed to more accurately reflect MedPAC's estimates of true indirect costs.

My bill also addresses the supply of physicians in this country. Nearly every commission studying the physician workforce has recommended reducing the number of first-year

residencies to 110% of American medical school graduates. This bill directs the Secretary of HHS, working with the medical community, to develop and implement a plan to accomplish this goal within five years. An adequate supply of medical providers is vital to maintaining America's health and containing our health care costs.

Medicare disproportionate share payments are particularly important to our safety-net hospitals. Many of these hospitals, which treat the indigent, are in dire financial straits. This bill reallocates disproportionate share payments, at no cost to the federal budget, to hospitals that carry the greatest burden of poor patients. Hospitals that treat Medicaid-eligible and indigent patients, will be able to count these patients when they apply for disproportionate share payments. In addition, these payments will be distributed uniformly nationwide, without regard to hospital size or location. Rural public hospitals, in particular, will benefit from this provision.

Finally, because graduate medical education encompasses the training of other health professionals, this bill provides for \$300 million yearly of the Medicare savings to support graduate training programs for nurses and other allied health professionals. These funds are in addition to the current support Medicare provides for the nation's diploma nursing schools.

The All-Payer Graduate Medical Education Act creates a fair system for the support of graduate medical education—fair in the distribution of costs to all payers of medical care, fair in the allocation of payments to hospitals. Everyone benefits from advances in medical research and well-trained health professionals. Life expectancy at birth has increased from 68 years in 1950 to 76 years today. Medical advances have dramatically improved the quality of life for millions of Americans. Because of our academic medical centers, we are in the midst of new era of biotechnology that will extend the advances of medicine beyond imagination, advances that will prevent disease and disability, extend life, and ultimately lower health care costs.

Although few days remain in the 105th Congress, the valuable services performed by America's academic medical centers are never-ending. I am introducing this bill today for consideration by Congress, the Bipartisan Commission on the Future of Medicare, and the numerous provider and patient communities who will be affected by its provisions. When the 106th Congress convenes early next year, I will reintroduce the bill.

I urge my colleagues to join me in protecting America's academic medical centers and the future of our physician workforce, the wellsprings of these advances, by cosponsoring the All-Payer Graduate Medical Education Act.

HONORING DR. JUAN ANDRADE, JR.

**HON. PETER J. VISCLOSKEY**

OF INDIANA

IN THE HOUSE OF REPRESENTATIVES

*Thursday, October 8, 1998*

Mr. VISCLOSKEY. Mr. Speaker, it is with great pleasure that I congratulate one of Northwest Indiana's most distinguished citizens. Dr. Juan Andrade, Jr., of Griffith, Indiana, was recently selected to receive the 1998