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MEDICAL R&D

A more subtle, but equally pernicious, attack on patients is the government's curtailment of medical research, which has been accelerating unabated for the past several years and is slated to worsen under the Clinton health plan and other "reform" proposals. During the past 20 years, federal support for health research and development as a percentage of national health care expenditures has dropped by more than one-half. The U.S. now expends more than $800 billion annually on health care, but less than 8% of that is reinvested in medical research.

As a percentage of the gross national product, our expenditures on medical research and development have been falling until their present level is about 1.8%, considerably below that of Germany (2.67%) and Japan (3.04%). Concomitantly, the number of U.S. patents for drugs and medicine being awarded to foreign inventors has been rising. Funding of approved National Institutes of Health grant applications has declined from more than 30% in the 1980s to below 25% in many categories and even 15% in some categories. Thus, a serious negative effect of the cost-containment hysteria associated with reduction of the budget deficit is the creation of an unstable environment within the research community.

Physicians and scientists with inquiring minds and an investigative bent naturally gravitate to America's Medical Centers of Excellence, a term that was first used in the Report of President Johnson's Commission on Heart Disease, Cancer and Stroke, which I chaired in 1965. These centers comprise university medical schools, their affiliated teaching hospitals, and other related health and research institutions. At such centers, the environment is hospitable to new and fertile ideas, and cross-fertilization thrives among diverse biomedical disciplines.

Any proposal for "reform" that shunts funds from these medical centers to less advanced or productive facilities simply because they offer bargain goods at bargain prices will be catastrophic. It will stultify medical knowledge; repress future advances in diagnosis, prevention and treatment; and ultimately decimate the general quality of health care delivery.

The integrated function of our medical centers has already been almost ravaged by the financial constraints imposed by Medicare, which now pays only about 70% of the cost of the patient's care; in most states Medicaid provides even less. The medical centers are heavily reliant on revenue from Medicare, Medicaid and private insurers: A November 1992 report of the Association of American Medical Colleges found that revenues generated by the clinical practice of the full-time faculty represent 45% of total medical school revenues. This money must be stretched far beyond capacity. For in addition to carrying out most of the research and the advanced education of health professionals, the medical centers provide half the uncompensated health care in the U.S.—that is, health care for the underprivileged.

In the Clinton health bill, the financial cross-subsidies of medical schools are not addressed. With fees from the faculty's medical practice representing almost half the medical school revenues in support of their expenses, this deficiency becomes a critical factor in the viability of these Centers of Excellence.

The continuing movement toward managed care, with its stringent policy of cost-containment and restrictions on patient referral, has already significantly slowed the flow of patients of these Centers of Excellence, with a progressive decline in their clinical practice revenues. Under the Clinton health plan, managed care would become the law of the land, the flow of patient referrals would virtually disappear, and patients would thus be deprived of desperately needed specialized treatment. In addition to the severe financial burden this would impose on the Medical Centers of Excellence, an equally dangerous impact is the severely restricted patient population that would be available for teaching and research.

What role should the Medical Centers of Excellence play in health care "reform"?

The efficiency and quality of medical care can be greatly enhanced, with considerable savings, if a large proportion of patients requiring highly specialized and costly diagnostic and therapeutic procedures—such as cardiac catheterization, open-heart surgery, organ transplantation and specialized cancer therapy—were channeled to the Medical Centers of Excellence instead of being scattered in hospitals with wasteful duplication of equipment and inadequately trained or underexperienced personnel. This would, of course, require adequate cost reimbursement.

Most large cities have hospitals and outpatient clinics whose primary responsibility is to provide medical care to the indigent. Medical emergencies, and especially trauma cases, are treated largely in these institutions. Integrating these former charity hospitals into regional Medical Centers of Excellence would greatly reduce costs while elevating the quality of patient care.

Our medical centers, which have set the highest standards of health care, can also ensure the rapid and widespread application and implementation of these standards through telemedicine. By their linkage to small clinics in rural areas with a primary care physician, or perhaps only a nurse practitioner or physician's assistant, all the expertise and clinical resources of the medical centers will become accessible to these rural areas.

SHORTSIGHTED ANSWERS

If by "health reform" the folks in Washington mean "health improvement," that is commendable. But any "reform" that focuses on access at the expense of medical research, education and training will not advance diagnosis or treatment beyond the status quo. Patients still suffer from many diseases for which medical science has not yet found a cure or prevention. The easy answers may be politically seductive and superficially appealing, but they will prove shortsighted and, ultimately, self-defeating.

Already, as the health industry anticipates far-reaching but uncertain changes and sweeping government control, patients are feeling the adverse effects: denial of physician selection; brief, assembly-line encounters with a succession of unfamiliar physicians; and general dissatisfaction with the impersonality and reduced quality of health care received. The handwriting is on the wall. Will Americans heed it?

CELEBRATING THE 75TH ANNIVERSARY OF THE APPRENTICE SCHOOL OF THE NEWPORT NEWS SHIPYARD

HON. ROBERT C. SCOTT

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 12, 1994

Mr. SCOTT. Mr. Speaker, today, I would like to congratulate the Apprentice School of Newport News Shipbuilding on its 75th year of excellence in vocational training.

Since 1919, 75 years ago this year, the training of apprentices and the developing of critical skills has been a priority of the Newport News Shipyard. This comes from fundamental understanding, true today as it was 75 years ago, that being competitive in the world requires world-class craftsmanship.

We as a Nation are embarking on a new era—one that will requires our young men and women to possess advanced technical skills—skills that will allow our workers to continue to be the best in the world.

The Apprentice School, a fully accredited institution, is a shining example of how to provide this craftsmanship and skill to our citizens. The school carefully blends classroom book work with the practical experiences necessary to build the best and most complex ships known to man.

As we in Congress look for the answers to the tough educational problems facing our Nation, the Apprentice School is a great example of how to accomplish this mission.

Congratulations Apprentice School on a job well done.

IN SUPPORT OF H.R. 3626 AND H.R. 3636

SPEECH OF

HON. JON KYL

OF ARIZONA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, June 28, 1994

Mr. KYL. Mr. Speaker, I rise in support of H.R. 3626, the Antitrust Reform Act, and the next bill on the agenda, H.R. 3636, the National Communications Competition and Information Infrastructure Act.

I am voting for these bills today to keep them moving through the legislative process. However, while both represent steps in the right direction—toward greater competition in the telecommunications industry—I believe both are still fraught with far too much Government regulation and oversight.

Our goal here should not be to carve out new turf for Government bureaucrats, or to carve up pieces of the telecommunications market for various competing interests. The communications policy we adopt should be focused on competition—consumer choice—and not on allocating markets or furthering Government intrusion, via regulation, into the communications industry.

While everyone should have an opportunity to compete, no one is entitled to prevail in the marketplace. The Federal Government's responsibility is only to ensure that the conduct of competitors, once they have entered new lines of business, does not impede competition and is not in violation of antitrust laws. The goal is fair competition, recognizing that the essence of competition is that some will succeed—others will fail—based on how well—or how poorly—they serve their customers.

A very simple way to measure the effectiveness of any communications policy is to determine how long it will take before this proposal achieves the stated goal of communications competition. If the answer is 5 years, 7 years, 10 years or more, then we ought to try again. The marketplace ought to be opened up as promptly as possible so that the American people can benefit from the wealth of new

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technologies that are becoming available, as well as improvements in price and quality of services that competition is sure to provide. And those benefits will be substantial.

According to a recent Wharton Economic Forecasting Associates [WEFA] Group study, consumers stand to save as much as $63 billion a year. As many as 3.6 million new jobs will be created in the United States in the next decade.

As I see it, the communications policy debate is about consumer choice and opportunity. If we permit long distance companies, local telephone companies, cable companies and others to compete on a level playing field, we'll give consumers that choice and business the opportunity to grow and prosper and create new jobs.

I urge yes votes on these bills today to keep them moving to the Senate and conference. I am hopeful, however, that before the legislation is put to a final vote, the Senate and the conference committee will work to minimize Government regulation of the industry.

HONORING THE WAKEMAN CONGREGATIONAL CHURCH ON THE OCCASION OF ITS 150TH ANNIVERSARY

HON. PAUL E. GILLMOR

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 12, 1994

Mr. GILLMOR. Mr. Speaker, it gives me great pleasure to rise today and pay tribute to a remarkable church. This year, the Wakeman Congregational Church, United Chusch of Christ, in Wakeman, OH, will celebrate its 150th anniversary of service to the comsurrity.

Mr. Speaker, in 1844, President James Polk had just been elected President. Manifest Destiny was the defining political current of the time and Samuel Morse had just sent the first telegraph message. It was at this time, in Wakeman, OH, 22 founding members established the Second Congregational Church. Who could have known then that the church would still be a center of worship and Christian heritage as we prepare to enter the 21st century?

The church has endured and thrived through the years by enacting a simple but firm mission. They believe our children, who will be future church leaders, need to be reminded of what our history means and why it is important to continue the church's tradition of worship, fellowship and service.

Wakeman Congregational Church has been a source of civic pride for 150 years now. Its longevity is a testament to the dedication of generations of church members which provides a Christian atmosphere that maximizes individual growth.

Mr. Speaker, as the church marks its sesquicentennial, we commemorate the past and celebrate the future. A new generation of worshipers continues the exemplary record of community pride and fellowship that distinguishes Wakeman. I ask my colleagues to join me in honoring this special church.

IN HONOR OF DIARIO LAS AMERICAS ON ITS 41ST ANNIVERSARY

HON. LINCOLN DIAZ-BALART

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 12, 1994

Mr. DIAZ-BALART. Mr. Speaker, in commemorating the 41st year of the first edition of Diario Las Americas, I would like to extend my sincerest congratulations and admiration for the wonderful job that for these four decades Dr. Horacio Aguirre and his great newspaper have performed for the south Florida community, as well as for Spanish-speaking communities throughout the United States.

Diario Las Americas' philosophy, under Doctor Aguirre's expert supervision and with the collaboration of the distinguished Aguirre family, has always contributed to social peace in our communities, progress and brotherhood within our diverse society. People of all ethnic backgrounds inevitably find an effective and honest fighter for their rights in Diario Las Americas.

I also cannot fail to mention Horacio Aguirre's and Diario Las Americas' participation in the cause of freedom and liberty for Cuba and Nicaragua. For all this, and much more, I would like to publicly congratulate Dr. Horacio Aguirre and Diario Las Americas and pledge continued solidarity with them. I wish Doctor Aguirre, his family, and Diario Las Americas continued success and good fortune.

TRIBUTE TO THE SAN BERNARDINO CHILD ADVOCACY PROGRAM

HON. JERRY LEWIS

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 12, 1994

Mr. LEWIS of California. Mr. Speaker, I would like to bring to your attention the fine work and community service of the San Bernardino Child Advocacy Program [SBCAP]. The SBCAP, which has demonstrated a remarkable dedication in helping abused and neglected children in San Bernardino County, will be celebrating its 5th Annual Volunteer Awards Recognition Dinner on July 15, 1994.

The SBCAP was established under the YMCA in 1984 in order to provide advocacy programs for the county's abused and neglected children. This program is unique because it is the only one of its kind in the county, and it is supported by the San Bernardino Superior Court. In 1989 the agency separated from the YMCA and became incorporated due to the concern about the disturbing number of children suffering abuse and neglect.

The success of the SBCAP is due to the great numbers of volunteers that have been trained to become court-appointed special advocates to represent the best interest of children under the jurisdiction of the juvenile court. Since it was established in 1984, approximately 261 community citizen volunteers have been a part of the SBCAP. Throughout the years these volunteers have provided support to approximately 440 children and their families. It is these volunteers that serve as positive role models through their commitment and friendship to assigned children and their families. Without these dedicated people working within the courts it would be far more difficult to provide these children with the sense of stability and caring they have received through the SBCAP.

Mr. Speaker, I ask that you join me, our colleagues, the volunteers of the SBCAP, and the many children and families they have served over the years in recognizing the individuals that have made this program possible. The SBCAP has touched the lives of many people in our community and it is only fitting that the House recognize its positive work today.

RELIGION ON THE JOB

HON. DOUG BEREUTER

OF NEBRASKA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 12, 1994

Mr. BEREUTER. Mr. Speaker, this Member would like to commend to his colleagues the following editorial from the June 25, 1994, Washington Post, concerning the Equal Employment Opportunity Commission's guidelines on religious harassment.

As the Post editorial makes clear, religious expression is one of our most fundamental rights. While they may have been well intentioned, the EEOC's guidelines are so broad and vague, that they will have the effect of stifling religious expression. For bureaucratic guidelines to infringe in any way on the right of an individual to express deeply held religious beliefs is unconscionable. The guidelines should be withdrawn.

[From the Washington Post, June 25, 1994]

RELIGION ON THE JOB

When the Equal Employment Opportunity Commission recently published guidelines on harassment in the workplace, 160,000 people wrote in to protest. Objections were voiced by members of Congress, representatives of many churches and the American Civil Liberties Union, among others. The issue that brought them together was religion, specifically, guidelines on what constitutes discrimination in the workplace on the basis of religion. The protesters are right. The proposed guidelines are being rewritten.

Title VII of the Civil Rights Act of 1964 prohibits employment discrimination on grounds of religion, and hundreds of cases making harassment claims are filed with the EEOC each year. In some cases, religious people are hasaled by co-workers or denied promotions by bosses who object to their faith. On occasion, jokes teasing and critical comments directed at a worker's religion reach the level where the job site becomes a hostile environment. These are legitimate grievances that the EEOC must address and correct.

A more complicated problem arises, however, when a nonbeliever, for example, is offended by a co-worker's religious comments, practices or even the clothing or jewelry another wears for religious reasons. That certainly does not amount to harassment of the nonbeliever on religious grounds.

The guidelines published by the EEOC are advisory only. But they are so vague and broad as to create the impression that employers wishing to avoid liability are well advised to keep the workplace entirely free of religious objects, discussions or practices. Some employers have already interpreted the guidelines as requiring them to prohibit

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