

fought in this war. We need to be able to answer the questions of "How many veterans are ill?" and "Are our ill veterans getting sicker over time?"

We also need to provide a permanent statutory authority to compensate these veterans. That is why I have introduced legislation, S. 1320, that targets these important issues. It took our government 20 years after the Vietnam War to assess the effects of Agent Orange and 40 years after World War II to concede the problems of radiation-exposed veterans. We must learn from the lessons of the past and act. We cannot allow our Gulf War veterans to keep waiting for the benefits and care that they earned seven years ago.

Or take atomic veterans, who were exposed to ionizing radiation during service. I have serious concerns about the way atomic veterans' claims are being handled and the way regulations to administer those claims are being created. These veterans were intentionally placed in harm's way, sworn to secrecy, and abandoned by their government for many years. It is critical that we search for a better way to address their compensation claims.

I recently cosponsored legislation that would authorize health care for veterans treated with nasopharyngeal radium irradiation, veterans who have so far been excluded from access to VA services. These veterans, primarily Navy submariner and Army Air corps pilots, received nasopharyngeal radium treatments in the 1940's and 1950's to treat and prevent inner ear problems that developed due to the inadequate pressurization of their respective vessels. Unfortunately, the health effects of the treatments that were given to these veterans are unknown. However, when such high levels of exposure are sustained, we must be concerned about long-term health effects, and thus, we have a responsibility to ensure these veterans' access to health care. Simply put, it is the right thing to do.

We owe these veterans. They risked everything for us—their health and sometimes even their lives. We should, at least, give them appropriate research, health care, and compensation. At least.

An important issue concerning veterans at this time is the VA budget for benefits and health care. I would like to share with America where these issues stand.

First, the benefits side of the budget. The administration this year requested a very modest increase of \$565 million in funds for benefits payments, just what is needed to cover cost-of-living allowances. VA has also requested \$850 million—\$63.5 million above the FY 98 level—for the account that funds the administration of nonmedical benefits. Although these amounts appear to be an increase, VA's benefits delivery staff will lose 45 FTE. In a time when it takes VA 157 days to decide a new compensation claim, and years longer in appeals cases, it concerns me greatly that VA is seeking funds that will not

allow it even to maintain, at the very least, its current level of staffing.

I am particularly troubled by the proposal by the administration, adopted this very day by the Congress, which cut \$10.5 billion from the veterans' benefit account over the next five years. This was done by removing VA's existing authority to pay compensation to veterans who suffer from tobacco-related illnesses, based on the nicotine dependence they developed while in the service. The money saved from cutting this benefit will be put into more high-way spending.

Although I support a strong highway bill, I firmly believe that it should not be funded by cuts in veterans benefits, particularly a program cut that totally bypassed the Senate Committee on Veterans' Affairs. That is why I offered an amendment to the Budget Resolution to protect the funding to the veterans account. Unfortunately, my amendment was defeated by a vote of 52-46.

On the health care side, the VA budget request for medical care is \$30 million less than last year. The base appropriated funding level of \$17.03 billion would be supplemented by approximately \$560 million from veterans' copays and collections from insurance companies. When the base funding level is combined with these collections, the VA health care system would have \$17.6 billion to spend next year—approximately what it is spending this year. Unfortunately, this flatlined budget makes no allowance for cost-of-living increases for VA employees and other rising costs due to inflation.

The VA health care system is a system in transition. Recent changes in lines of authority, resource allocations, and methods of health care delivery, as well as downsizings and facility integrations, have buffeted the system. While all this reorganization is underway, I am concerned that VA have good systems in place to ensure that high quality health care is the standard practiced at all VA facilities, regardless of where they are located around the country. I will continue my efforts to make sure that VA, as the nation's largest health care provider, upholds the highest standards of quality of care.

What is clear is that we still have a lot of work to do for our veterans. We have come a long way, but there are still many miles to cover.

They promised us they would risk their lives. We promised them we would take care of them. Caring for our veterans is the least we can do.

On this day, ladies and gentlemen, be proud of the men and women—veterans and service members from every branch and action—who have served our nation with courage. And, my colleagues, match your pride with a pledge to maintain the nation's commitment to them.

Veterans have earned our respect and admiration. I am committed to upholding their honor the offering them the

thanks they so richly deserve. I ask you, America, to do no less.●

LEHIGH VALLEY AND HEALTH NETWORK

● Mr. SANTORUM. Mr. President, I rise today to recognize Lehigh Valley Hospital and Health Network, along with the American Nurses Association, who declared May 6-12 National Nurses Week 1998.

The theme of the week, "Nursing: Health Care With a Human Touch," was in commemoration of the ways in which registered nurses strive to provide safe and high quality patient care and find ways to improve our health care system.

The 2.2 million registered nurses in the United States comprise our nation's largest health care profession. The far-reaching duty of the registered nursing profession is to meet the emerging health care needs of the American population, while registered nurses' education focuses on restoring and maintaining the health of the individual.

Registered nurses will continue to be an important component of the U.S. health care system. They play an integral role in the safe, quality care of hospitalized patients, as well as contributing to the growth of home health care services and advancements in life-sustaining technology.

Mr. President, I commend Lehigh Valley Hospital and Health Network and the American Nurse Association for honoring National Nurses Week 1998. I ask my colleagues to join with me in recognizing the registered nurses who care for us all.●

PORT ARTHUR, TEXAS— CENTENNIAL RECOGNITION

● Mrs. HUTCHISON. Mr. President, on May 29th, I will be in Port Arthur, Texas, helping to celebrate the City of Port Arthur's Centennial Day Celebration as well as the tenth anniversary of the Golden Triangle Veterans' Memorial Park. Port Arthur, a city born at the dawn of the 20th century, enters the 21st century confident in its stride as a growing and vibrant community on the Texas' Gulf Coast, not far from my home town of La Marque. Port Arthur, a corner of what some call Texas' Golden Triangle, plays a key role in our national security by contributing to our energy independence through its oil exploration and petroleum refining activities. Nearly every American has benefited from the products that enter the world market from Port Arthur—petrochemicals and oil in particular.

The City of Port Arthur is named for Arthur E. Stillwell, originally of Rochester, New York. In 1895, Mr. Stillwell was searching for a site for the southern terminal of his proposed railroad from Kansas City to the Gulf of Mexico. He chose a site on the north shore of Lake Sabine, where Port Arthur stands today. The railroad to Port Arthur, which eventually became known