

S. 2343. A bill to amend the Radiation Exposure Compensation Act to provide for partial restitution to individuals who worked in uranium mines, or transport which provided uranium for the use and benefit of the United States Government, and for other purposes; to the Committee on the Judiciary.

By Mr. COVERDELL (for himself, Mr. FAIRCLOTH, Mr. LOTT, Mrs. HUTCHISON, Mr. GRAMM, Mr. SHELBY, Mr. LUGAR, and Mr. COCHRAN):

S. 2344. A bill to amend the Agricultural Market Transition Act to provide for the advance payment, in full, of the fiscal year 1999 payments otherwise required under production flexibility contracts; to the Committee on Agriculture, Nutrition, and Forestry.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. MURKOWSKI (for himself, Mr. LOTT, Mr. DASCHLE, Mr. D'AMATO, Mr. HELMS, Mr. GRASSLEY, Mr. HATCH, Mr. BIDEN, Mr. CLELAND, Mr. DURBIN, Mr. TORRICELLI, Mrs. FEINSTEIN, and Mr. INOUE):

S. Res. 257. A resolution expressing the sense of the Senate that October 15, 1998, should be designated as "National Inhalant Abuse Awareness Day"; to the Committee on the Judiciary.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. HARKIN (for himself and Ms. MIKULSKI):

S. 2340. A bill to amend title XVIII of the Social Security Act to provide for coverage of qualified acupuncturist services under part B of the Medicare program, and to amend title 5, United States Code, to provide for coverage of such services under the Federal Employees Health Benefits Program; to the Committee on Finance.

THE PATIENT ACCESS TO ACUPUNCTURE SERVICES ACT OF 1998

Mr. HARKIN. Mr. President, I am pleased today to introduce the Patient Access to Acupuncture Services Act of 1998, to provide limited coverage for acupuncture under Medicare and the Federal Employees Health Benefits Program. This is an important bill that reflects an appropriate and needed response to both progress in science, and to the demand for complementary and alternative treatments of pain and illness.

I would like to acknowledge Senator MIKULSKI, who is cosponsoring this bill with me. Senator MIKULSKI has been a strong supporter of effective alternative therapies and has long realized and appreciated the importance and significance of such therapies to our health care system.

Mr. President, approximately 90 million Americans suffer from chronic illnesses, which, each year, cost society roughly \$659 billion in health care expenditures, lost productivity and premature death. Despite the high costs of this care, studies published in the

Journal of the American Medical Association reveal that the health care delivery system is not meeting the needs of the chronically ill in the United States.

Many of these Americans are looking desperately for effective, less costly alternative therapies to relieve the debilitating pain they suffer. In 1990 alone, Americans spent nearly \$14 billion out-of-pocket on alternative therapies. Harvard University researchers have found that fully one-third of Americans regularly use complementary and alternative medicine, making an estimated 425 million visits to complementary and alternative practitioners of these therapies—surpassing those made to conventional primary care practitioners!

And with good reason. Last November, a consensus conference of the National Institutes of Health approved the use of acupuncture in standard U.S. medical care. It was the first time that the NIH had endorsed as effective a major alternative therapy, and it was just the type of medical breakthrough that I had hoped for and envisioned when I worked to establish the Office of Alternative Medicine at NIH.

The NIH experts cited data showing that acupuncture can effectively relieve certain conditions, such as nausea, vomiting and pain, and shows promise in treating chronic conditions such as lower back pain, substance addictions, osteoarthritis and asthma.

In 1993, the FDA reported that Americans spent \$500 million for up to 12 million acupuncture visits. In 1996, after reviewing the science, the FDA removed acupuncture needles from the category of "experimental medical devices" and now regulates them just as it does other devices, such as surgical scalpels and hypodermic syringes. Acupuncture is effectively used by practitioners around the world. The World Health Organization has approved its use to treat a variety of medical conditions, including pulmonary problems and rehabilitation from neurological damage.

It has been reported that more than 1 million Americans currently receive acupuncture each year. Access to qualified acupuncture professionals for appropriate conditions should be ensured. Including this important therapy under Medicare and FEHBP coverage will promote a progressive health system that integrates treatment from both acupuncturists and physicians. It will expand patient care options. I also believe it will reduce health care costs because of the relatively low cost of acupuncture compared to conventional pain management therapies.

Research is still needed to demonstrate the effectiveness of other alternative therapies. This research is vitally important, but we must act now to help the millions of Americans who can benefit from the knowledge we have already gained.

The 21st century is just around the corner. Less than 50 years ago, treat-

ments that are now considered conventional—organ transplants, nitroglycerin for heart patients, immunology, and x-ray and laser technology—were decried as quackery by the medical establishment. Everyday we face new biological and emotional challenges for which modern Western medicine has no remedy. Now science is revealing the effectiveness of many complementary and alternative treatments, including acupuncture, and increasingly more Americans are choosing them to manage their health and treat their illness.

Let us listen to the science, and heed the urgent need for progress. Mr. President, the nation's leading scientists have demonstrated the safety and effectiveness of acupuncture as a treatment for a wide range of pain and illness. It makes common sense that Medicare and FEHBP cover this legitimate course of therapy.

Mr. President, I ask for unanimous consent that a copy of this bill be entered into the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 2340

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Patient Access to Acupuncture Services Act of 1998".

SEC. 2. COVERAGE OF ACUPUNCTURIST SERVICES UNDER MEDICARE.

(a) IN GENERAL.—Section 1861(s)(2) of the Social Security Act (42 U.S.C. 1395x(s)(2)) (as amended by section 4557 of the Balanced Budget Act of 1997) is amended—

(1) in subparagraph (S), by striking "and" at the end;

(2) in subparagraph (T), by striking the period at the end and inserting "; and"; and

(3) by adding at the end the following: "(U) qualified acupuncturist services (as defined in subsection (uu));";

(b) PAYMENT RULES.—

(1) DETERMINATION OF AMOUNT OF PAYMENT.—Section 1833(a)(1) of the Social Security Act (42 U.S.C. 1395l(a)(1)) (as amended by section 4556(b) of the Balanced Budget Act of 1997) is amended—

(A) by striking "and" before "(S)", and

(B) by striking the semicolon at the end and inserting the following: ", and (T) with respect to qualified acupuncturist services described in section 1861(s)(2)(U), the amounts paid shall be the amount determined by a fee schedule established by the Secretary for purposes of this subparagraph;";

(2) SEPARATE PAYMENT FOR SERVICES OF INSTITUTIONAL PROVIDERS.—Section 1832(a)(2)(B)(iii) of the Social Security Act (42 U.S.C. 1395k(a)(2)(B)(iii)) is amended—

(A) by striking "and services" and inserting "services"; and

(B) by striking the semicolon at the end and inserting the following: ", and qualified acupuncturist services described in section 1861(s)(2)(U);";

(c) SERVICES DESCRIBED.—Section 1861 of the Social Security Act (42 U.S.C. 1395x) (as amended by section 4611(b) of the Balanced Budget Act of 1997) is amended by adding at the end the following:

"Qualified Acupuncturist Services

"(u)(1) The term 'qualified acupuncturist services' means such services (with such frequency limits as the Secretary determines