

involved in assisting me on the Armed Services Subcommittee on Strategic Forces, which I chair. He has provided me with valuable oversight of hazardous and radiological waste programs at DOD and DOE facilities.

Jeff's philosophy as Commissioner will be that the NRC cannot take a solitary role in maintaining full public confidence in the safety of nuclear power. He has said that the nuclear industry must also assume equal responsibility for taking the steps necessary to maintain the trust of the American public.

Mr. President, Jeff has done a great job for me over the years. Although I'm sorry to lose him from my staff, I'm confident that he will provide the NRC with the talents necessary to ensure adequate protection of the public health and safety, the common defense and security, and the environment in the use of nuclear materials in the United States. Jeff is a bright, dedicated and articulate individual who will serve the nation with distinction. I strongly recommend him for the position of U.S. Nuclear Regulatory Commissioner and urge my colleagues to do the same. Thank you, Mr. President.

#### HEALTH PROFESSIONS EDUCATION PARTNERSHIPS ACT OF 1998

Mr. FRIST. Mr. President, I rise to address the Senate today on the passage of the Health Professions Education Partnerships Act of 1998. This bill reauthorizes the programs funded through Titles VII and VIII of the Public Health Service Act. These programs are intended to increase access to primary care and to improve the distribution of members of the health professions—physicians, dentists, pharmacists, nurses, and others—to underserved areas. For many years, this legislation has helped our nation's schools of health serve the needs of their communities better and prepare the health care practitioners of the future. This bill provides a comprehensive and flexible authority to support training programs for health professions and related community-based educational partnerships. It will improve the quality, diversity, and distribution of the work force.

The Senate has worked diligently on this effort for the past four years. Reauthorization has been a priority since the authority expired for Title VII programs in 1995 and for Title VIII programs in 1994. In 1995, Senators Kassebaum, KENNEDY, and I introduced S. 555 to take the 44 programs involved and consolidate them into six groups or clusters. Performance outcomes and improved data collection were added. This approach was used to streamline the granting process, and to allow the Department of Health and Human Services greater flexibility to leverage areas of development; and to align with community workforce needs. It also provided flexibility for strategic planning of the workforce supply, and in-

sured that a greater percentage of program dollars would go directly to grantees versus federal administration.

After this bill, S. 555, passed in the Senate but failed to pass in the House during the 104th Congress, I identified areas of disagreement and developed ways to address these obstacles. At a hearing in April 1997, I had the opportunity to listen to concerned groups and outline possibilities for compromise. My staff has worked very hard to maintain a high level of input from constituency groups. We worked with the Congressional Hispanic Caucus to address their concerns. We worked to ensure that this bill lived up to the goal of increasing the number of underrepresented minorities in the health professions. We are very pleased that the Congressional Hispanic Caucus supports S. 1754.

This bill enjoys broad support in the medical and public health community. The bill is supported by a broad range of professional societies for physicians, nurses, pharmacists, psychologists, dentists, and others.

S. 1754 establishes a program with the flexibility to respond to changes in the workforce. Flexibility is built into the bill over time. As funding lines change, the Secretary's authority to move funds across program lines increases. This revision will allow programs to address the constantly changing health care needs of communities and respond to the changes in the health care delivery system.

Since so much of the Act's flexibility is based on the discretion of the Secretary, we have added advisory councils to ensure that the view points of those providing medical services are considered. This will generate confidence among the grantees and encourage collaboration between agency officers and the programs they manage. In addition, these councils will report back to Congress to ensure oversight of these programs.

However, flexibility alone will not result in successful targeting of resources. As noted by the Government Accounting Office in testimony to the Senate Labor Subcommittee on Public Health and Safety in April 1997, federal efforts should be based on performance measures and achievement of goals. The Secretary of Health and Human Services will ensure that there is an annual evaluation of programs and projects funded through this legislation.

It was very important to maintain the distinct and separate funding for nurse education—Title VIII, the "Nursing Education and Practice Improvement Act of 1998." We wanted to increase the flexibility of the Department of Health and Human Services to target funding and to respond to the nursing workforce needs of a rapidly changing health care system. S. 1754 strengthens the role of the National Advisory Council on Nursing Education and Practice. We rewrote the duties of the Council so that it not only provides

advice and recommendations to the Secretary and the Congress but also to report its findings and recommendations annually. In addition, S. 1754 specifies that the Council include representatives of advanced practice nursing groups, including nurse practitioners.

The bill specifically states that authorized nurse practitioner programs have as their objective the education of nurses who will provide primary health care. For advanced practice nurse traineeships, the Secretary shall give special consideration to those programs that agree to train advanced practice nurses who will practice in health professional shortage areas. The amendment proposed and passed by the House further clarifies how funding for training for nurse midwives, nurse practitioners, and nurse midwives will be allocated. The Department of Health and Human Services, in consultation with individuals in the field of nursing, will develop a methodology, based on data, to allocate training funds. The data for this methodology will include the need for and distribution of services among underserved populations and health professional shortage areas, and the percentage of the population that are minorities, elderly, or below the poverty level. The methodology will be in place by fiscal year 2003. Until the methodology is developed, the funding for nurse practitioners, nurse midwives, and nurse anesthetists will be "held harmless". The House amendment also clarifies the use of the definition of an advanced practice nurse in S. 1754.

Mr. President, this bill creates new partnerships and supports existing ones. It represents the best example of team work among interest groups, agencies and legislators. Through the goals of improving the distribution and quality of health professions in underserved areas and of simplifying the administration of existing programs, this bill fosters change. The Health Professions Education Partnerships Act of 1998 will help underserved areas meet their future health care needs.

Mr. President, I am proud of our work. I would like to take this opportunity to specifically thank, Senators KENNEDY, JEFFORDS, and BINGAMAN, and all their staffs for their efforts to work with us on this bill. I would also like to thank the interest groups which gave so generously of their time and support to help us address the issues involved. Mr. President, I especially thank Dr. Mary Moseley, Dr. Carol Pertowski, Dr. Debra Nichols, and Sue Ramthun of my staff for their dedication and hard work toward the reauthorization of these programs.

#### THE WOMEN'S BUSINESS NETWORK

Mr. CAMPBELL. Mr. President. I take this opportunity to call my colleagues' attention to the role of women owned businesses in our economy, and