

Guard to enforce it. As a result, Governor Sterling was defeated for the Democratic Party nomination in 1932 by former opponent Ma Ferguson.

Out of work and in need of a job, Sterling returned to Houston bankrupt. All he had was a \$100 Liberty Bond and sure determination to build another empire. Sterling decided to return to his first love—oil. Using the Liberty Bond he again founded his own oil company, this time naming it Sterling Oil and Refining Company. By the end of World War II, Sterling had managed to rebuild his fortune. He served as President of Sterling Oil for 13 years until his retirement at the age of 71. Ross Sterling passed away in 1949 at the age of 74.

In all of his endeavors, Sterling found a way to give back to his beloved Houston; leaving a legacy continuing long after his death. Two schools in my district bear his moniker, Ross S. Sterling High School in Baytown and Ross Sterling Middle School in Humble. A library, in Baytown, is also named for him, Sterling Municipal Library. However, one of his most notable contributions in my district was donating his home in La Porte to the Houston Optimist Club. In 1947, The Houston Optimist Club donated Sterling's former mansion to the Boys and Girls Harbor, a home that cares for children in crisis. Sterling also served on the board of trustees for the Hermann Hospital Estate for over 30 years.

The backbone of our Nation is formed from hard-working citizens like Ross Sterling who pull themselves up by their bootstraps when times get tough, and still find ways to give back to their community. Ross Sterling is an example not only to Houstonians, but to all citizens of our great Nation. That is what makes America what it is: the land of the free and the home of the brave.

And that's just the way it is.

**ATHLETIC TRAINERS EQUAL
ACCESS TO MEDICARE ACT**

HON. EDOLPHUS TOWNS

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Monday, August 1, 2011

Mr. TOWNS. Mr. Speaker, I rise today to call attention to the important and essential role that athletic trainers play in providing quality health care across our nation. Our nation's health care system is complex and every day people with many different health needs are served by legions of caring, qualified, and professional athletic trainers.

Athletic trainers are health care professionals who hold at least a bachelor's degree in athletic training. Almost 70 percent of athletic trainers have a master's degree or PhD. Athletic trainers are licensed health care professionals who provide injury prevention, diagnosis, treatment, and rehabilitation to patients of all ages.

Athletic trainers work under the direction of physicians to provide care to patients. Historically, they worked with athletes in secondary schools, colleges, universities and professional sports. Today, about 50 percent work outside of these athletic settings. Many athletic trainers are employed by clinics, hospitals, physician offices, commercial workplaces, the United States Armed Forces, and performing arts companies. The focus of athletic trainers'

care is to prevent injuries and support patients and clients in their rehabilitation efforts to regain function as quickly and safely as possible.

Athletic trainers pass a national certifying exam. In most of the 46 states where they are licensed or otherwise regulated, the national certification is required for licensure. Athletic trainers maintain this certification with required continuing education. They work under a medical scope of practice, and adhere to a national code of ethics.

Unfortunately, in 2005, the Center for Medicare and Medicaid Services (CMS) implemented a policy to prevent physicians from employing anyone other than a physical or occupational therapist and speech language pathologist to provide physical medicine and rehabilitation services in a physician's office.

Due to all of these facts, I have proudly introduced the Athletic Trainers Equal Access to Medicare Act of 2011. This bill would make the following improvements:

Ensure coverage of and improve patient access to physical medicine and rehabilitation services under Medicare Part B;

Allow physicians to choose from a wider range of highly qualified health professionals to serve patients' needs; and

Restore the ability of athletic trainers to provide physical medicine and rehabilitation services incident to a physician's services.

I strongly support the vital role athletic trainers play in our health care system. I urge my colleagues to join me in recognizing this important group of health professionals and co-sponsor the Athletic Trainers Equal Access to Medicare Act.

**INAUGURATION OF LOBSANG
SANGAY, NEW TIBETAN PRIME
MINISTER**

HON. JAMES P. McGOVERN

OF MASSACHUSETTS

IN THE HOUSE OF REPRESENTATIVES

Monday, August 1, 2011

Mr. MCGOVERN. Mr. Speaker, on August 8, 2011, in Dharamsala, India, the home of the Dalai Lama and the Tibetan government in exile, Tibetans from around the world will gather for a historic occasion, the inauguration of their democratically elected Prime Minister (Kalon Tripa).

On March 20, 2011, tens of thousands of Tibetans living in countries around the world went to the polling booths to elect their next prime minister and parliament of the Central Tibetan Administration. Thousands of Tibetan-Americans across the United States also participated in these historic elections, including from my home state of Massachusetts.

In April, Dr. Lobsang Sangay was declared the winner. He has Bay State roots. Raised as a stateless Tibetan refugee in India, his parents saved to get him an education. Through the U.S.-funded Tibetan Scholarship Program, he entered studies at Harvard University. He got a law degree there and stayed on as a research fellow for many years.

The 43-year-old Lobsang Sangay takes over as chief executive of the Central Tibet Administration at a critical point, as much of the political responsibilities for the Tibetan community in exile now reside on his shoulders. In March 2011, the Dalai Lama announced his

decision to devolve his political authority to the elected leadership. These changes were ratified by the Tibetan parliament in May.

At a time when autocrats around the world are clinging to power, the Dalai Lama's voluntary effort to give up power is remarkable. It is the culmination of a decades-long process of nurturing the development of democratic institutions in the Tibetan exile community. This stands in stark contrast to the reality that neither Tibetans in Tibet, nor anyone in China, are allowed fundamental democratic freedoms or free elections. What the Tibetans have accomplished is worthy of our attention and respect.

I had the chance to meet Lobsang Sangay when he came to Capitol Hill in July 2011, during the Dalai Lama's visit to Washington. I look forward to his return to discuss ways the United States can help Tibetans in their endeavor to find a solution for the Tibet issue.

On the occasion of the inauguration of the next Kalon Tripa, Dr. Lobsang Sangay, I send my warm wishes to the Tibetan people and congratulate them on their democratic achievements.

PERSONAL EXPLANATION

HON. KEITH ELLISON

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Monday, August 1, 2011

Mr. ELLISON. Mr. Speaker, on July 13, 2011, I missed rollcall votes No. 564–573 due to a medical injury. I would have voted “no” on rollcall votes No. 564, 566, and 573. I would have voted “yes” on rollcall votes No. 565, 567, 568, 569, 570, 571, and 572.

Mr. Speaker, on July 14, 2011, I missed rollcall votes No. 574–582 due to a medical injury. I would have voted “yes” on rollcall votes No. 574, 575, 576, 579 and 581. I would have voted “no” on rollcall votes on No. 577, 578, 580 and 582.

Mr. Speaker, on July 15, 2011, I missed rollcall votes No. 583–600 due to a medical injury. I would have voted “yes” on rollcall votes No. 584, 586, 590, and 599. I would have voted “no” on rollcall votes on No. 583, 585, 587, 588, 589, 591, 592, 593, 594, 595, 596, 597, 598 and 600.

Mr. Speaker, on July 18, 2011, I missed rollcall votes No. 601–602 for district business. I would have voted “yes” on rollcall votes No. 601–602.

Mr. Speaker, on July 19, 2011, I missed rollcall votes No. 603–607 due to a medical injury. I would have voted “no” on rollcall votes No. 603, 604, 606, and 607. I would have voted “yes” on rollcall vote No. 605.

Mr. Speaker, on July 20, 2011, I missed rollcall votes No. 608–611 due to a medical injury. I would have voted “no” on rollcall votes No. 608, 609 and 611. I would have voted “yes” on rollcall No. 610.

Mr. Speaker, on July 21, 2011, I missed rollcall votes No. 612–621 due to a medical injury. I would have voted “no” on rollcall votes No. 612, 613, 614, 619 and 621. I would have voted “yes” on rollcall votes No. 615, 616, 617, 618, and 620.

Mr. Speaker, on July 22, 2011, I missed rollcall votes No. 622–629 due to a medical injury. I would have voted “no” on rollcall votes No. 622, 623, 624, 625, 626 and 629. I would