

INTRODUCTION OF THE EMPOWERING MEDICARE PATIENT CHOICES ACT ESTABLISHES A PHASED IN PROGRAM TO SUPPORT SHARED DECISION-MAKING IN MEDICARE BY EQUIPPING BENEFICIARIES WITH UNBIASED, EVIDENCED-BASED RESOURCES THAT CAN HELP THEM BE BETTER INVOLVED IN TREATMENT DECISIONS

HON. EARL BLUMENAUER

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 21, 2009

Mr. BLUMENAUER. Madam Speaker, today I am proud to introduce the Empowering Medicare Patient Choices Act of 2009.

The onset of an illness creates intense stress and anxiety for patients and families. In addition to the weight of a diagnosis, patients struggle to learn about their illness and determine which treatments to pursue. During this time, people often feel helpless and unprepared to make such critical decisions, but it doesn't have to be that way. We have the opportunity to improve both the quality of health care and patient satisfaction by better engaging patients and families in treatment decisions.

The Empowering Medicare Patient Choices Act will create a shared decision-making process between physicians and patients within Medicare, offering incentives for doctors to provide resources such as DVD's and web-based, interactive programs. These materials provide unbiased, evidence-based information on treatment options. After reviewing the decision aids, patients and families are better prepared to have meaningful conversations with their doctors to determine the course of action right for them.

The legislation introduces shared decision-making into Medicare in three phases. Phase I is a three-year period pilot program allowing 'early adopting' providers to participate, providing data and serving as Shared Decision-Making Resource Centers. Phase II expands the pilot for a three-year period during which a larger pool of providers will be eligible to receive reimbursement for the use of certified patient decision aids. The final stage requires providers to use patient decision aids for certain conditions as a standard of practice.

Shared decision-making is a common-sense program that will improve quality of care, but more importantly, support patients and families during difficult times.

INTRODUCTION OF THE INDEPENDENCE AT HOME ACT

HON. EDWARD J. MARKEY

OF MASSACHUSETTS

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 21, 2009

Mr. MARKEY of Massachusetts. Madam Speaker, I rise today to introduce the Independence at Home Act. I would like to thank my colleague and fellow co-chair of the bipartisan Alzheimer's Task Force, Mr. CHRIS SMITH of New Jersey, for working with me on this important legislation.

As health care reform efforts move forward, we have a golden opportunity to provide high-

quality care for our most vulnerable seniors right in their own homes at dramatically lower costs. The bi-partisan Independence at Home legislation we are reintroducing today aims to better coordinate care for Medicare beneficiaries with multiple, debilitating chronic diseases, including Alzheimer's, congestive heart failure, diabetes and other chronic conditions.

In many cases, our frail elders prefer to remain in their own homes, in the comfort of familiar surroundings, rather than enter a nursing home or hospital. Our current health care system does a poor job caring for seriously ill Americans, who often are "lost in transition", struggling to manage multiple illnesses as they transition between emergency room, hospital, nursing facility and home. The Independence at Home Act holds great promise for reducing hospitalizations, preventing medication errors, and lifting the spirits of those who, after a lifetime of contributions to our society, deserve the dignity and peace of mind that comes with living independently.

This legislation builds on successful house calls programs operating around the country and at the Department of Veterans Affairs by establishing a 3-year pilot program in Medicare that would enable beneficiaries with chronic, complex conditions to receive the care they need in their own homes. These patients see roughly 14 physicians and fill about 50 prescriptions each year. Due to a lack of coordination between their many doctors, these patients often receive disjointed care, conflicting information, and multiple diagnoses for the same symptoms. At the same time, Medicare beneficiaries with multiple chronic conditions account for a highly disproportionate share of Medicare spending.

The Independence at Home Act creates a three year pilot program that utilizes a patient-centered health delivery model to ensure that Medicare beneficiaries with multiple chronic conditions can remain independent, in their homes, for as long as possible. Our model is a better, more coordinated way of getting these patients the care they need by physicians who know them and are experienced in managing their unique needs.

The Independence at Home care teams tasked with coordinating the care of these patients will be comprised of qualified and experienced physicians, physician assistants, and nurse practitioners. Participating organizations will be required to produce improved health outcomes, demonstrate patient and caregiver satisfaction, and show that their methods result in savings to Medicare. In order to realize these savings, our bill holds participating providers accountable for demonstrating a minimum savings of 5 percent to Medicare. As an incentive, providers are able to keep a portion of savings they achieve beyond the initial 5 percent. Whereas our current health care system runs up costs by reimbursing for the volume of care, the Independence at Home model incentivizes the value of care.

This proposal also encourages the adoption of electronic medical records and other technologies that will result in more efficient and cost-effective care. And, to help address the existing shortage of primary care physicians, this bill develops a new, promising career path for primary care physicians who can own and operate Independence at Home organizations and receive reimbursements for house calls.

The Independence at Home Act addresses the needs of patients with multiple chronic dis-

eases and holds providers accountable for producing savings. As such, I believe this bill to be a critical part of our efforts to reform health care because it will produce better, coordinated care and reduce costs. I look forward to working with my colleagues in the House to turn our "sick-care" system into a true health care system, and I look forward to working on this bill with my colleagues as efforts proceed to pass comprehensive health care reform this year.

CONGRATULATING CHRIS ECONOMAKI, THE 2009 RECIPIENT OF POCONO RACEWAY'S BILL FRANCE AWARD OF EXCELLENCE

HON. PAUL E. KANJORSKI

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 21, 2009

Mr. KANJORSKI. Madam Speaker, I rise today to ask you and my esteemed colleagues in the House of Representatives to pay tribute to Chris Economaki, the dean of motorsports journalists, who has dedicated himself to the promotion of a national sport that has enriched the lives of countless people for more than 60 years.

Mr. Economaki is the first journalist to receive this award, first presented in 1977, which is dedicated to the memory of William H. G. France, the founder of NASCAR. This award is presented annually to a person, organization or corporation that has made outstanding contributions to the sport of NASCAR Sprint Cup Series Racing.

Born in Brooklyn, New York, in 1920, Mr. Economaki's father was a Greek immigrant while his mother was a great niece of Robert E. Lee. He witnessed his first auto race in Atlantic City at the age of nine and was immediately hooked on the sport. He started his career at the age of 13 selling copies of National Speed Sport News newspapers. He wrote his first column at the age of 14 for the National Auto Racing News. In 1950, he became editor of the National Speed Sport News. He began a column for that publication, titled "The Editor's Notebook," that he still writes more than 50 years later. He eventually became owner, publisher and editor of the National Speed Sport News. His daughter, Corinne Economaki, is the current publisher and the paper is still considered "America's Weekly Motorsports Authority."

His autobiography is entitled "Let Em All Go: The Story of Auto Racing by the Man Who Was There."

Mr. Economaki worked as a race track announcer in the 40s and 50s. He covered races at Indianapolis, Daytona, LeMans and many other locations. His motorsports coverage on radio and television became legendary.

Mr. Economaki has been the recipient of numerous major motorsports award and he was inducted into the Motorsports Hall of Fame of America in 1994. The Economaki Champion of Champions Award is named after him. A day at the Dodge Charger 500 at the Darlington Speedway race weekend is named "Chris Economaki Day." The press room at the Indianapolis Motor Speedway was named the "Economaki Press Conference Room" in 2006. He appeared as a pit reporter in two motion picture films, "Stroker Ace" and "Six Pack."

Madam Speaker, please join me in congratulating Mr. Economaki on this notable occasion. His contributions to the motorsports industry have been economically rewarding to countless families across America and have improved the quality of life for so many. Mr. Economaki epitomizes the spirit of American entrepreneurs and his example is inspirational to the generations who will follow him.

IN RECOGNITION OF THE 100TH
BIRTHDAY OF SALLY MATTHEWS

HON. STEVEN R. ROTHMAN

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 21, 2009

Mr. ROTHMAN of New Jersey. Madam Speaker, I rise to recognize the 100th birthday of Mrs. Sally Matthews, which will take place on May 30, 2009. Sally, a lifelong resident of Jersey City, New Jersey, is the proud mother of two sons and six grandchildren. Throughout her life, Sally has been an outstanding public servant and professional. She worked for the New Jersey State Board of Children's Guardians from 1925 to 1942. Sally was subsequently employed as a legal secretary, receiving the distinction of being the Hudson County Legal Secretaries Association's Legal Secretary of the Year in 1970. Sally has always taken the time to give back to her community, having volunteered at St. Aedan's Rectory in Jersey City and having been a charter member of St. Aedan's Golden Club, 41 years ago. As Sally and her friends gather on June 1st to celebrate her 100th birthday, I wish her, on behalf of myself and the people of the 9th Congressional District of New Jersey, the very best as she reaches this exciting milestone in her life.

IN HONOR OF THE GREEK ORTHODOX
CHURCH OF THE ANNUNCIATION AND THE 2009 HELLENIC
HERITAGE FESTIVAL

HON. DENNIS J. KUCINICH

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 21, 2009

Mr. KUCINICH. Madam Speaker, I rise today in honor and recognition of the Greek Community of Cleveland, Ohio, and the members and leaders of the Greek Orthodox Church of the Annunciation of Cleveland as join fellow community members this Memorial Day weekend to celebrate the heritage and culture of Greece at the annual Hellenic Heritage Festival.

The oldest Greek Orthodox Church in Cleveland, the Greek Orthodox Church of the Annunciation was officially incorporated on February 15, 1913. Located on the corner of West 14th Street and Fairfield Avenue in the Historic Tremont District of Cleveland, it was the only Greek Orthodox Church to exist in the Greater Cleveland area until 1937. Today, it remains an active parish with an internationally-accredited Greek School.

For more than thirty years, members of the Greater Cleveland Community have gathered on the grounds of the Greek Orthodox Church of the Annunciation to partake in the annual

Hellenic Heritage Festival, a wonderful community and family event that is enjoyed and shared by Clevelanders of all ethnic backgrounds. The event reflects the values of our community: faith, family, heritage and diversity. The festival is also a time of remembrance and honor—remembering our ancestors and relatives whose struggles, tragedies and triumphs will be remembered and revered from generation to generation, and honoring the numerous and significant contributions made to our community and our nation by Americans of Greek heritage.

Madam Speaker and colleagues, please join me in honoring Greek-Americans throughout our community and throughout our nation. I also stand in recognition of the members and leaders of the Greek Orthodox Church of the Annunciation, whose individual and collective commitment to preserving and promoting the history and heritage of their beloved Greek homeland serves to enrich the diverse fabric of the Greater Cleveland Community.

HONORING SOMPOP JANTRAKA
AND HIS SCHOOL DEPCD

HON. PATRICK J. KENNEDY

OF RHODE ISLAND

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 21, 2009

Mr. KENNEDY. Madam Speaker, I rise today to acknowledge the extraordinary vision and compelling work for peace of Sompop Jantraka and his school, DEPCD—the Development and Education Programme for Daughters and Communities.

Mr. Jantraka understands the necessity for caring intervention in order to save the young, innocent, poverty-stricken masses of the world. He has toiled tirelessly and fearlessly, in the face of danger, organized crime and desperation and oftentimes abandonment by parents of their offspring, to prevent child trafficking in the Mekong sub-region of Thailand's "Golden Triangle." He has made this cause, above many others, one of the main purposes of his life.

DEPCD is Thailand's first pro-active center for the prevention of child trafficking. It began with modest beginnings, nineteen "daughters" in a small house. And because of the incessant commitment to the preservation of children's futures, DEPCD has to-date prevented over 3,000 "daughters" and "sons" from being sold and from other forms of child exploitation. DEPCD has achieved this colossal feat by helping children gain access to adequate schooling and protective, safe sheltering.

Being a man of great humility, Mr. Jantraka has not sought acknowledgement but yet stands as a giant amongst many because of the success of his passion. In September 2008, Mr. Jantraka received a Rockefeller travel grant to participate as a panelist at the "Clinton Global Initiative" Annual Meeting in New York City in order to provide his expertise and insight. In March 2008, the University of Michigan awarded Mr. Jantraka its "Wallenberg Medal" for humanitarian service. It is my hope that Mr. Jantraka's work will continue to bring light to this severe, international pandemic that is encroaching upon and threatening the human rights of children across the globe.

It has been said of Mr. Jantraka that, with few resources and many enemies, he has

been a strong force in the fight against human trafficking. Sompop Jantraka is not only a living example of passion and concern manifesting into tangible humanitarian works, but he also serves an inspiration to the world, reminding us of the great fellow citizens we can be and invoking the compulsion to be the great fellow citizens we should be.

TRIBUTE TO SISTER HELEN
DONOHUE

HON. ANNA G. ESHOO

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 21, 2009

Ms. ESHOO. Madam Speaker, I rise today to pay tribute to Sister Helen Donohue who was called into eternity on Holy Saturday night, April 11, 2009, surrounded by her beloved Sisters, the Religious of the Sacred Heart.

My family was especially blessed to have Sister Helen as our dearest friend for decades. She was gentle, intelligent, loving, wise and holy. The following was read at Sister Donohue's Memorial Mass celebrating her life:

On November 30, 1918, two and a half months premature, Helen Dorothy Donohue, the youngest of ten children, was born into a loving and faith-filled family to Patrick and Frances Brogan Donohue in San Francisco, California. Her father and all her grandparents were immigrants from Ireland. One of her earliest memories was of the family gathering around a large dining room table to say the rosary, a devotion that her father began and which lasted her lifetime.

When she was only four years old, her father died of leukemia, leaving her mother a 41 year-old widow with ten vibrant children. Helen reported that all her siblings were at home until she was six years old, when her oldest brother, Hugh, later a Bishop, entered the seminary. She attended St. Agnes parochial school and Notre Dame High School. During these years two of her older sisters became Sisters of Notre Dame de Namur; two brothers entered the Jesuits; other siblings married. When Helen was seventeen, her mother would not allow her to enter the Notre Dame novitiate, and her brother would not allow her to attend a state college, so she chose the San Francisco College for Women, Lone Mountain, run by the Religious of the Sacred Heart. Helen reported being very aware of how prayerful the nuns were. After three years of college, she wanted to enter religious life, but her mother insisted that she finish college. She even recalled being torn between the Notre Dame Sisters and the Religious of the Sacred Heart. The latter won out.

In August of 1940, she arrived with three other candidates at Kenwood, Albany, New York—the novitiate of the Society of the Sacred Heart. Her eyes were so bad that she ended up working in the sacristy and the library, instead of doing needlework. On February 22, 1943, Helen pronounced First Vows in the Society and returned to the Academy in San Francisco to teach in the elementary school. In May of 1945, she was sent to bed for three months when doctors feared she had incipient tuberculosis. The life of Sister Josefa was a great help during that time. Afterwards, she was sent to recuperate in San Diego, Old