Thurman	Walker	Wicker
Tiahrt	Walsh	Williams
Torkildsen	Wamp	Wilson
Torres	Ward	Wise
Torricelli	Waters	Wolf
Towns	Watt (NC)	Woolsey
Traficant	Watts (OK)	Wyden
Upton	Waxman	Wynn
Vento	Weldon (FL)	Yates
Visclosky	Weldon (PA)	Young (AK)
Volkmer	Weller	Young (FL)
Vucanovich	White	Zeliff
Waldholtz	Whitfield	Zimmer

NOT VOTING—11

Frost	Reynolds	Solomon
Meek	Royce	Tucker
Mineta	Scarborough	Velazquez
Moakley	Sisisky	

☐ 1534

So the bill was passed.

The result of the vote was announced as above recorded

A motion to reconsider was laid on the table.

GENERAL LEAVE

Mr. CLINGER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks, and include extraneous material on the bill just passed.

The SPEAKER pro tempore (Mr. DIAZ-BALART). Is there objection to the request of the gentleman from Pennsylvania?

There was no objection.

AUTHORIZING THE CLERK TO MAKE CORRECTIONS IN ENGROSSMENT OF H.R. 1670, FEDERAL ACQUISITION REFORM ACT OF 1995

Mr. CLINGER. Mr. Speaker, I ask unanimous consent in the engrossment of the bill, H.R. 1670, the Clerk be authorized to make technical corrections and conforming changes to the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Pennsylvania?

There was no objection.

ANNOUNCEMENT BY COMMITTEE ON RULES REGARDING FILING OF AMENDMENTS ON H.R. 927, CUBAN LIBERTY AND DEMOCRATIC SOLIDARITY ACT OF 1995 AND H.R. 1720, THE CAREERS ACT

(Mr. DREIER asked and was given permission to address the House for 1 munute.)

Mr. DREIER. Mr. Speaker, next week the Rules Committee is expected to meet to grant rules for several bills scheduled for floor consideration. As has been the practice in recent times, the Rules Committee may include a provision in these rules giving priority in recognition to Members who have preprinted their amendments in the CONGRESSIONAL RECORD.

On Monday the Rules Committee will meet at 4 p.m. to consider rules on two bills—H.R. 927, the Cuban Liberty and Democratic Solidarity Act, and H.R. 1617, the CAREERS Act. A preprinting option will likely be included in both rules.

With respect to the Cuban Liberty bill (H.R. 927), Members should be advised that the rule will likely make in order a new amendment in the nature of a substitute, taking into account the concerns of committees of shared jurisdiction, as base text for amendment purposes. For the convenience of Members, the text of the amendment will be printed in today's CONGRESSIONAL RECORD.

With respect to the CAREERS Act, Members should be advised that the Rules Committee has been asked by the Economic and Educational Opportunities Committee to make in order as base text an amendment in the nature of a substitute consisting of the text H.R. 1617 combined with the text of H.R. 1720, the Privatization Act of 1995.

That amendment in the nature of a substitute will be placed in today's CONGRESSIONAL RECORD for Members' convenience. It will also be introduced as a new bill for reference in the rule as an amendment in the nature of a substitute for amendment purposes. It is especially important that Members' pre-print their amendments for this bill since it involves several formulas that are complex in nature.

Members are requested to use the Office of Legislative Counsel for drafting their amendments to the new base texts for both bills to ensure they are properly drafted. It is not necessary for Members to file their amendments with the Rules Committee or to testify.

On Tuesday, September 19, the Rules Committee is tentatively scheduled to meet to consider rules on two bills, H.R. 2274, to designate the National Highway System, and H.R. 1323, the Pipeline Safety Act of 1995.

While we have not received specific rule requests on these bills at this time, Members should expect at the least that the amendment preprinting option for priority in recognition may be included in these rules.

As always, the continued cooperation of Members in preprinting their amendments in the CONGRESSIONAL RECORD is appreciated both by the committees of jurisdiction and their colleagues.

LEGISLATIVE PROGRAM

(Mr. BONIOR asked and was given permission to address the House for 1 minute.)

Mr. BONIOR. Mr. Speaker, I ask the gentleman from California [Mr. DREIER], my friend, what the schedule will be for the next week.

Mr. DREIER. Mr. Speaker, will the gentleman yield?

Mr. BONIOR. I yield to the gentleman from California.

Mr. DREIER. Mr. Speaker, I thank my very dear friend, the gentleman from Mount Clemens, MI [Mr. BONIOR], for yielding.

Mr. Speaker, on Monday, September 18, the House will meet at 10:30 a.m. for morning hour and 12 noon for legislative business. We plan to take up the following 11 bills under suspension of the rules: S. 464, extension of district court demonstration projects; S. 532, clarifying rules governing venue; House Resolution 181, encouraging the peace process in Sri Lanka; House Resolution 158, congratulating the people of Mongolia; House Concurrent Resolution 42, supporting dispute resolution in Cyprus; H.R. 1091, the Shenandoah Valley National Battlefields Partnership Act of 1995; H.R. 260, National Park System Reform Act of 1995; H.R. 402, the Alaska Native claims settlement amendments; H.R. 1872, The Ryan White Care Act Amendments of 1995; H.R. 558, The Texas Low-Level Radioactive Waste Disposal Compact Consent Act; and H.R. 1296, providing for the administration of certain Presidio properties.

After consideration of the suspensions, we plan to take up H.R. 39, the Fisheries Conservation and Management Act, subject to a unanimous-consent agreement.

Members should be advised that there will be no recorded votes on Monday; any votes will be postponed until Tuesday. Members should not expect any votes on Tuesday before 11 a.m.

On Tuesday, the House will meet at 9 a.m. for morning hour and 10 a.m. for legislative business. On Wednesday and Thursday the House will meet at 10 a.m. for legislative business. Members should be advised that there will be no votes on Friday, September 22.

The House will consider the following bills next week, all of which will be subject to rules: H.R. 1617, the Careers Act; H.R. 927, the Cuban Liberty and Democratic Solidarity Act of 1995; H.R. 2274, the National Highway System Designation Act of 1995; and H.R. 1323, the Pipeline Safety Act of 1995.

Members should be advised that conference reports may be brought up at any time.

On Monday and Tuesday, we expect the House to conclude its business between 7 and 8 p.m. On Wednesday, we plan on working later, but we hope to adjourn between 10 p.m. and 12 midnight. It is our hope to have Members on their way home to their families and their districts by no later than 6 p.m. on Thursday.

Mr. Speaker, does my friend, the gentleman from Michigan, have any questions?

Mr. BONIOR. I certainly do, Mr. Speaker, I thank the gentleman from California [Mr. DREIER] for reading the schedule to us this afternoon.

Mr. DREIER. My pleasure.

Mr. BONIOR. Mr. Speaker, it would appear from the gentleman's reading of the schedule that it seems like a light week next week. I note that we are not having any recorded votes on Monday or Friday next week, and I was wondering if the leadership on the other side would not entertain a resolution that has been sponsored by over 200 Members of this body that would require

that we have at least 4 weeks of debate and hearings on the Medicare issue since the Medicare issue is indeed the biggest, or if not the biggest, one of the biggest issues we will face not only in this session of Congress, but in the country, and I say to the gentleman to just let me finish, and then I would be happy to get an answer from my colleague here.

Mr. DREIER. If my colleague would yield, I would answer.

Mr. BONIOR. If the gentleman would withhold for a second, I will finish my point, and maybe it will become a little clearer to my friend from California so he can respond in a more full and understanding way.

Mr. Speaker, it seems to me that, if we are going to take this issue up next week after only 1 day of hearing, that when we are talking about the largest increases and cuts in Medicare and Medicaid in the history of this country, it seems to me that we are going to shortchange the American public, and I would ask the gentleman, with over 200 Members supporting this resolution, ask him for at least 4 weeks of debate.

Mr. DREIER. I ask my friend if that is the same question he asked about 90 second ago, or are there two questions?

Mr. BONIOR. This is the same. The gentleman can answer them both, but I have a feeling I know what the answer is.

Mr. DREIER. Mr. Speaker, I would say to my friend that we have gone through exhaustive hearings on the issue of Medicare, and to argue that this issue has not been debated either in Congress or in the public is obviously not the case.

I see the gentleman from Florida, my friend, here, the ranking member of the Committee on Ways and Means, and I understand that this particular piece of legislation will not have had the specific hearings on this bill, but for more than a day or so, but virtually every option, as we have looked at the proposal that came forward on April 3 from the trustees on the prospect of the entire Medicare system being bankrupt within 7 years, virtually every option has been addressed. We know the President has demonstrated a need to deal with this issue, and I believe that it is going to be timely for us to move forward, and so we will be proceeding just as rapidly as possible.

Mr. BONIOR. I am glad my friend, and I thank my friend, for his answer, although I am disappointed in it; I am glad that my friend from California acknowledges the fact that indeed there will be not more than a day or so, whatever or so means. I assume it is a day of hearings on this particular proposal that will be before this country, the biggest cuts in Medicare and Medicaid in the history of the country. But it seems to me that, if we could do a resolution next week congratulating the people of Mongolia, the least we could do is have a resolution on the floor to debate the appropriate amount of time for hearings on this most crucial issue to this country.

Mr. DREIER. If the gentleman would yield for just one clarification on this, the gentleman said that we are going to have the largest cuts when, in fact, we will over the next 7 years see an increase of from $4,800 to $6,700 per beneficiary, which is roughly about a 52-percent increase in the level of expenditures. We will be expending well over $1¼ trillion, or approaching $1¼ trillion, on Medicare over the next 6 to 7 years, and so to call it a cut is obviously an inaccurate statement.

Mr. BONIOR. That is what we would like to have the time to debate and discuss and have hearings about.

Mr. DREIER. We are doing it right now, have been doing it over the last several months.

Mr. BONIOR. We obviously are right now, and only in Republican Washington, DC, would someone characterize an individual having to pay perhaps $500 to $1,000 out of his or her pocket Medicare costs as an increase.

□ 1545

Only in Washington, DC, would that be termed as an increase.

Mr. GIBBONS. Mr. Speaker, will the gentleman yield?

Mr. BONIOR. I yield to the gentleman from Florida.

Mr. GIBBONS. Mr. Speaker, I appreciate the gentleman yielding.

Let me ask my distinguished friend from California a question about this. We have had 2 weeks of Waco hearings here sponsored by my Republican friends, 2 weeks of Waco hearings. We have had so many weeks of Whitewater hearings that everybody has completely lost interest in that nonsubject, and yet we are beginning to take up what I recognize is the toughest vote on the Republican side. How do you take as much money out of Medicare to give to a tax cut as is scheduled to be taken out of Medicare?

The majority has taken all of this money out of Medicare beneficiaries and poor people's pockets to give to the wealthy, and yet we are only entitled to perhaps 1 day of hearing. As of this moment we do not have your plan. The majority has been in charge of this body for 11 months, 10 months now, and we do not have a plan. We have never seen a plan. This is the only copy of your plan I have ever seen, this blank piece of paper that I hold here. Now, when are you going to let the American public in on what you are going to do to them? When are you going to let them see it?

Mr. THOMAS. Mr. Speaker, will the gentleman yield?

Mr. BONIOR. I yield to the gentleman from California.

Mr. THOMAS. Mr. Speaker, I thank the gentleman from Michigan for yielding. The gentleman from Florida [Mr. GIBBONS], if memory serves, in fact sat in with the Subcommittee on Health, not being a member of the Subcommittee on Health, wanting to make sure that any Member who was interested in being informed on the subject matter, sat in on several of the Subcommittee on Health hearings. We had 16 of them over every possible option that could be put into a Medicare package. We had two full Committee on Ways and Means hearings.

Mr. Speaker, we are in the process of compiling that information. The original criticism was that one cannot write a bill without hearing from all of the folks who are going to be affected. We thought that was good advice. So we held hearings to hear from all of the people who were affected. Now we are being criticized because we have been here for 10 months, holding hearings during the first 9 months, and we are now in the process of writing legislation, and we are being criticized because we did not write the legislation before we held the 16 hearings.

Now, you know, you are damned if you do and you are damned if you don't. I understand that is the role of the minority. We played that for a while. But we are in the majority; we have a part A payroll tax trust fund for the seniors that is going bankrupt, and we are putting together a program to make sure that does not go bankrupt, and we have a part B program which is eating up enormous resources from our young people. What we are going to do is create a system, long overdue, which gives seniors choice, and through the exercise of that choice, we will make sure that the part A program does not go bankrupt, and that the demands on the budget will be less.

Now, that is a complicated program. The gentleman from Florida knows all of the parts that would go into that program. His objection is that he has not seen all of the parts assembled. He will, and under the rules of the House, as the ranking minority member of the Committee on Ways and Means, will have the ability to fully exercise his rights to ask for hearings on his side of the House, and we will certainly honor, under the rules, the maximum ability of the ranking member from Florida to exercise his privileges and rights under the rules.

Mr. GIBBONS. Mr. Speaker, if the gentleman will continue to yield, as I understand the proposal, it is that perhaps one day next week we will have a full day hearing on the Medicare proposals. But as everyone who has ever dealt with the subject, and I am sure the gentleman from California is wrestling with the problem right now, the devil of all of this is in the details. These are huge matters that require a great deal of money and a great deal of substantive law, and they require understanding by all of the 40 million people who are on Medicare and their families; and of the hospitals and of the doctors and of other providers, of all of the medical educators, of all of the kidney failure people, of all of the hospitals that get special payments out of Medicare for all of the unpaid patients that they have to treat. These are extremely complicated problems, and

they need a thorough public understanding.

The way I understand it, though, is that we are going to get 1 day of public hearings which will probably be taken up by most of your witnesses and that will not get any chance. I doubt by that time that we will even have a copy of your plan. So that is the problem. We need and the public needs to know.

I can only imagine what is in your plan. I have attended your hearings. With no disrespect to the gentleman from California, the gentleman did the best he could, but we did not have a plan then, and as far as I know, he does not have a plan as of this moment. We have to start voting on this the week after next in the Committee on Ways and Means, and we have seen nothing in writing as to what he plans to do.

Mr. MILLER of California. Mr. Speaker, will the gentleman yield?

Mr. BONIOR. I yield to the gentleman from California.

Mr. MILLER of California. Mr. Speaker, I thank the gentleman for yielding, and I would hope that not only would we get this debate about the debate that we would choose to have, and unfortunately, if the Republicans do not grant us your resolution to have that debate or to provide for several weeks of discussion on these Medicare cuts, then we are left, as the gentleman has said, with 1 day in the Committee on Ways and Means.

We do not know what this plan is. We have seen speculation in the press about this, that there is $110 billion taken from providers and there is an $80 billion black hole that looks back and maybe hits providers or beneficiaries 2 or 3 years from now. But the fact is, as the gentleman from Florida knows, the Medicare system is more than just Medicare, it is teaching hospitals, it is poor widows that have the premium, Medicare premiums, paid for by Medicaid; it is a very complex system. And simply announcing the bill and having the hearing and voting on it a week later does not satisfy our obligation to the people that we represent, because the plan will look very different to different people depending upon where they are in the American health care system, whether they are in an urban hospital or a rural hospital, whether they are poor and their premiums are paid by Medicaid, whether they will be able to continue or not continue on Medicare, whether they are a teaching facility, and that takes time.

I can understand the Republicans not wanting to have this time, either in the Committee on Ways and Means or anywhere else. But the fact is, this is the biggest change we have in the history of American health care since the advent of the American Medicare system, a system that has provided health care to millions of seniors, that their families rely on. We are now seeing a whole series of discussions by medical analysts that families, people my age who are in their 50's, who are in their 40's, whose parents are in their 80's, now have the threat that these Medicaid cuts could mean that hundreds of thousands, if not more, people will not have access to long-term care, or to nursing home care.

Mr. DREIER. Mr. Speaker, I have a parliamentary inquiry.

The SPEAKER pro tempore (Mr. DIAZ-BALART). Does the gentleman from Michigan yield for a parliamentary inquiry?

Mr. BONIOR. No, Mr. Speaker, not at this point.

Mr. MILLER of California. Mr. Speaker, I would like to speak to the gentleman's motion and his inquiry of the minority. Sixty-seven percent of the Medicaid costs to go pay for elderly people's long-term care that their families cannot afford. And that is why we want this discussion. But we want this discussion in front of the Committee on Ways and Means where people can be cross-examined, where their points of view can be examined, their figures can be examined and the American public can then make a determination. Having all of this discussion, have all of this discussion prior to the Committee on Ways and Means hearing has nothing to do with this bill.

We have examined the options for Medicare since 1948. But this is where the rubber hits the road. This may not cut Medicare, that is your claim, but it is going to certainly cut household income for people, and it is going to certainly cut their disposable income as their premiums continue to go up and the cost of their relatives continue to go up and the care of their parents continue to go up.

That is what this debate is about. The gentleman ought to have the courage of your convictions, he ought to put that bill into the Committee on Ways and Means. We have experts on the committee in terms of the Members of the Congress, the staff there, and we ought to cross-examine the different opinions about what this bill is going to do or not do to families in this country who are deeply concerned about their future health care and the health care that their parents and their grandparents are receiving today, because that is what is on the chopping block and we do not know anything about it. But one day's hearing just does not satisfy it.

We had hearings on the Committee on Ways and Means I believe earlier this year on every cockamamie tax loophole that some Member wanted for somebody in their district. Those went on for days. But now we are talking about the largest single change in American health care in the history of this country since the beginning of the Medicare-Medicaid system, and it is one day's worth of hearing.

What we are asking for and the gentleman is asking for is consider a resolution that says we can examine this in the Committee on Ways and Means for 4 weeks, let the people be heard, let the providers be heard, let the beneficiaries be heard, let the teaching hospitals be heard, let the rural hospitals be heard, and then let the American people decide. But apparently, apparently, there is a great fear on the other side of the aisle that the public discussion will not allow their proposal to be successful.

Mr. DREIER. Mr. Speaker, if the gentleman will continue to yield, let me just respond to my very good friend from Martinez who has raised some very, very good questions. The fact of the matter is, as the gentleman from California [Mr. THOMAS] indicated, 16 hearings were held in the Subcommittee on Health of the Committee on Ways and Means.

Mr. BONIOR. Mr. Speaker, reclaiming my time, but they were not on this specific proposal.

Mr. DREIER. Mr. Speaker, if the gentleman will continue to yield, they were on the issue of Medicare reform. Those have come forward. This has been debated in the media, here in the Congress, and I hasten to add that to hear my friends on the other side of the aisle argue that in some way we are going to be not utilizing the proper procedures of the House as we proceed with this really makes one incredulous, in light of the fact that we have seen legislation rammed through here when my friends on the other side of the aisle were in the majority for years and years and years, and we are planning to comply with the rules of the House, and we will continue this debate.

The evidence that we have right here is that during this 1-minute, which has lasted about 20 so far, we have seen a vigorous debate take place, and I suspect that it is going to continue. It will most likely continue this weekend on the television, and I believe that we will see a full airing, and those groups to which my friend referred have been heard from by many of the different committees that have been involved in this.

Mr. BONIOR. But they have not been heard on this specific bill.

Mr. DREIER. That relates to the program itself that we are going to be considering next week.

Mr. BONIOR. Mr. Speaker, reclaiming my time, the people in this country have not been heard on your specific proposal and the resolution which I refer to in the debate that we are having now, the one offered by the gentleman from Michigan [Mr. DINGELL] and supported by over 200 Members of this body calls for hearings of 4 weeks on that specific proposal.

As the gentleman from California [Mr. MILLER] has said, with the largest change in American medical history, the largest, in our view, of cuts in Medicaid and Medicare in the history of this country, it seems to me preposterous to deal with this with 1 day of hearings. It is an outrage, quite frankly, and all we are asking for is a small piece of fairness on behalf of the American people, for all these various groups and individuals who have a huge stake in this.

I mean, I am talking 175,000 people in my State alone not being able to have long-term Medicaid care over the 7-year period if this goes through, 16,000 in the first year.

□ 1600

We are talking perhaps, what we hear, of doubling the premium. And we are talking about people here on Social Security, people who get half of their income, 60 percent of the people on Medicare get over half of their income from Social Security. We are talking primarily about women. We are talking about people with incomes of about $18,000, and absorbing $1,000 extra a year. This is important stuff to important people, and it ought to have more than 1 day of hearings.

Mr. GIBBONS. Mr. Speaker, will the gentleman yield?

Mr. BONIOR. I yield to the gentleman from Florida.

Mr. GIBBONS. Mr. Speaker, I am just incredulously mystified by the arguments I hear here. As the gentleman from California [Mr. THOMAS] said, I attended these meetings, even though I am not a member of the subcommittee. They were pabulum hearings. They had nothing to do with the meat of the program. They were just people making suggestions or complaining.

But nobody yet has seen a plan. And when that plan comes out, it is going to be not just 1 page of paper, but it is going to be 400 or 500 pages of paper, crammed with details.

This is a very complex program. It is more than just medical care for the aged. It is medical care for all of the disabled in the United States, it is medical care for all of the kidney failure patients in the United States, it is all long-term care for aged people or for disabled people. It is medical education. I do not know what can be more important than training doctors, and the Medicare Program trains them. There that is where the money comes from.

What about all of the hospitals that take care of all of these indigent people that do not have any money? That is where Medicare money is spent. We know nothing of what they plan to do in all of this program. They have never mentioned the first line of it.

I ran into a newspaper reporter out here in the Speaker's lobby the other day that was carrying around a copy of your program. I said, ''You know, that is what I put out as to what I thought was going to be in the program.'' He was peddling it to me as if it were the program.

This is ridiculous. I never heard of anybody making as big a change in the economic and social and safety net of this country, and not telling the American people what they plan to do. This is preposterous.

The SPEAKER pro tempore (Mr. DIAZ-BALART). The gentleman from Michigan [Mr. BONIOR] will be advised that his 1-minute is expiring soon.

Mr. BONIOR. Mr. Speaker, I believe my request was to speak out of order.

Mr. DREIER. To inquire of the program for the week.

The SPEAKER pro tempore. That is correct. The Chair would construe and did construe the gentleman's request as the traditional request to speak out of order for 1 minute.

Mr. BONIOR. Mr. Speaker, I do not think I asked for a time.

The SPEAKER pro tempore. To discuss the program for next week.

Mr. BONIOR. I will respect the Chair's views on this and the Speaker's views on this, and would yield if I could for just one more comment to my friend from Michigan, Mr. LEVIN, and to my friend from California, Mr. DREIER, if that would be permissible.

The SPEAKER pro tempore. Having informed the gentleman from Michigan of the reality of the time soon expiring, the Chair would certainly permit that.

Mr. BONIOR. Mr. Speaker, I yield for a short comment or question to my friend from California before we terminate the debate.

Mr. LEVIN. Mr. Speaker, I just want to say in terms of the schedule for next week, I have now read this document, an outline released by the House leadership. I would say to the gentleman from Florida [Mr. GIBBONS], it is worse than a blank piece of paper. It says little, and what it says is often untrue.

For example, it says that there is no change in copayments that is strictly false. Copayments under current law would go up to $61. This plan, apparently, at least from what we have read in the paper, would push this up to $90 or $100 a month over the present $46 in the year 2002.

I simply want to say as to the schedule next week, it is disgraceful. In the Committee on Ways and Means, they have planned one day of hearings, as the gentleman from Florida [Mr. GIBBONS] has said.

We were promised a plan today. We do not have it. I think it is partly you do not want us to have it until the last minute, and it is also because not only is the devil in the details, but they are having a devilish time with the details.

So I am glad the gentleman from Michigan [Mr. BONIOR] asked for the schedule for next week. I just want to say this is a schedule totally inadequate for the mammoth radical changes that have been proposed in general by the majority, the details of which are being held back or scrambled with or both. Here it is Thursday, and we still do not have them.

Mr. DREIER. Mr. Speaker, will the gentleman yield?

Mr. BONIOR. I yield to the gentleman from Pasadena.

Mr. DREIER. Close.

Mr. BONIOR. Close by.

Mr. DREIER. Mr. Speaker, I thank my friend for yielding.

Mr. Speaker, I would simply like to respond to all three of my friends here who are discussing what is clearly a very important issue by saying, first, it has been concluded we will have only one day of hearings. It is possible that there could be an additional hearing. The distinguished ranking minority Member, my friend, the gentleman from Florida [Mr. GIBBONS], is in a position to look towards an additional hearing on this.

I think it is also very sad to take an issue which is so critically important, which we have agreed to step up to the plate and address in response to the Board of Trustees' Report that was signed by Secretary Rubin, Secretary Reich, and the Secretary of Health and Human Services, Ms. Shalala, stating this system will be broke within seven years.

The American people overwhelmingly are supportive of our goal of dealing with this. As I said earlier, the President of the United States has acknowledged that we are going to have to slow this exponential growth in the cost of Medicare, well beyond the rate of inflation, nearly three times the rate of inflation, based on the figures that just came out yesterday.

So it strikes me we are doing the responsible thing. And to have my friends just criticizing willy-nilly, when there is going to be opportunity to look at this issue, and to say that somehow when this hearing opens, it will be the first time that the word ''Medicare'' will have been uttered in any committee, is preposterous, because we for months and months and months have seen this debate raging on. I think we have a very good and adequate schedule put together for next week.

Mr. BONIOR. Mr. Speaker, I would conclude by just saying to my friend on the Medicare Trustee issue, that the Medicare trustees have said that the proposal by the Republicans will not extend the life of Medicare by one day, because that money is going into a special fund for tax cuts that are going primarily to the wealthiest individuals and the wealthiest corporations in America.

ADJOURNMENT TO MONDAY, SEPTEMBER 18, 1995

Mr. ALLARD. Mr. Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet at 10:30 a.m. on Monday next for morning hour debates.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Colorado?

There was no objection.

DISPENSING WITH CALENDAR WEDNESDAY BUSINESS ON WEDNESDAY NEXT

Mr. ALLARD. Mr. Speaker, I ask unanimous consent that the business in order under the Calendar Wednesday rule be dispensed with on Wednesday next.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Colorado?

There was no objection.