

when we talk about a level of \$270 billion in Medicare cuts, it is going to mean more out of pocket for the average American senior and it is going to mean less services.

Mr. Speaker, I am glad to see that over the last few days that we are starting to see more and more media reports explaining that fact. Today in the Washington Times there is an article on the front page. It says: "Medicare Solution Looks Like the Problem. GOP Fears Specter of a Tax Increase."

Already, we have heard about several tax increases or proposals from either the Senate Republicans or the House Republicans that would result in more money coming out of pocket from America's seniors. We have heard Speaker GINGRICH, who last week indicated that the part B premium, the premium that pays for physicians' bills, for doctors' bills, is likely to go up so that within the next 7 years it is doubled and seniors will be paying twice what they are now paying for their part B premiums.

We have also heard about the means testing. That was another proposal that came out of the House Republican plan. So far, they are talking about means testing only people at higher income levels, but I would contend to you that once you start down that slippery slope of means testing and charging people with higher incomes more for their Medicare premiums, their part B premiums, you will see that in future years, Congress will move toward lowering the threshold and that more and more middle class seniors will end up not having any kind of subsidy or any significant subsidy for their Medicare part B premium.

Mr. Speaker, it is mentioned again in today's Washington Times that in the Senate Republican plan, they are talking about increasing copayments. So now we are also hearing proposals with regard to part A that pays for hospital bills to increase the copayment from \$100 to \$150.

The bottom line is no matter how you cut it, we are talking here about more money out of seniors' pockets, and what is it for? All to pay for a tax cut, most of which will go toward the wealthiest Americans.

I was very pleased today to see that there was an article in the Washington Post by the commentator, E.J. Dionne, Jr. It says, "Blue Smoke and Medicare," and if I could just read some relevant sections from it, Mr. Speaker. It says, and I quote:

The Republicans should admit that the Medicare fight is not primarily about the threatened bankruptcy of the Medicare system. The Republicans did not get into these big Medicare cuts because they feared for the system's solvency. If that were true, they would have made a lot of noise last year when Medicare's trustees issued a slightly more gloomy report on its finances.

We know that, in fact, Medicare has never really been in better shape, that the part A trust fund that pays for hospital bills right now has a 7-year life expectancy, which is significantly

more than the 2 or 3 years that was reported by the trustees of Medicare in previous years, and Mr. Dionne goes on to say that:

The Republicans also have to stop denying that there is a link between their tax cutting plans and the Medicare cuts. It is simply true that they need huge cuts in Medicare and also Medicaid to finance their budget balancing promises and their tax cuts. If the Republicans really believe that these tax cuts are as right and as important as they claim, they ought to be shouting from the rooftops that their excellent tax cuts would be impossible without Medicare and Medicaid cuts. The Republicans don't want to admit this for purely political reasons.

Mr. Speaker, I just want to continue to point out on a daily basis how significant the level of these cuts are and what a dramatic impact they are going to have on America's seniors, both by increasing the cost to seniors and providing less quality service.

MEDICARE AND MEDICAID CUTS

The SPEAKER pro tempore. Under the Speaker's announced policy of May 12, 1995, the gentleman from California [Mr. MILLER] is recognized during morning business for 5 minutes.

Mr. MILLER of California. Mr. Speaker, my colleagues from New Jersey and Texas were in the well earlier pointing out the flaws of the yet-to-be-released proposal by the Republicans to cut the Medicare Program in this country and to cut the Medicaid Program in this country. It is very important certainly that the senior citizens of this country, but also that their families, focus on what the Republicans are about to do.

As my colleague from New Jersey just pointed out, these changes in Medicare were not created out of the concern for the Medicare Program or its solvency into the future or for the beneficiaries. These cuts in the Medicare Program were created for one purpose, and that is so that the Republicans can fund a \$245 billion tax cut, the primary beneficiaries of which are the richest people in this country.

Mr. Speaker, they do not have \$245 billion to give away. We have a \$260 billion deficit this year and we have a \$4 trillion deficit in this country. We do not have that money to give away, but they want to give it away. So where have they gone to get the money? They have gone to the Medicare trust funds to get that money and that is why they have a \$270 billion cut in Medicare and a \$182 billion cut in Medicaid.

Now, most people think that somehow they are insulated from those cuts in Medicaid, that this only deals with poor people, this only deals with people of the inner city, somebody that they are never going to be part of. The fact is that over 65 percent of all of the money in Medicaid goes for nursing home and long-term care for people who never thought in their lives they would be in those nursing homes or in long-term care. Medicaid is what stands between not only the people in

the nursing homes and bankruptcy; it stands between bankruptcy and their families, because there are very few, if any, middle income families in this country that can pay the full freight of taking care of the long-term care needs of their parents, if necessary. That is why we have Medicaid.

Now, to be eligible for Medicaid, you have to spend yourself down, get rid of all of your assets, and then we will take care of you, but under this proposal to cut \$180 billion, we may find that situation dramatically changed because they will have to change the benefits dealing with long-term care. They will have to change the benefits dealing with home health care, the idea of having somebody come in instead of putting somebody in a nursing home, have somebody come in and help them throughout the day so that they can live in their own home, live with some dignity, be in the neighborhood that they are familiar with and be taken care of. Those are going to be cut.

These are not charges made by me. These are points made in the National Journal that was delivered to Members of Congress. This is a nonpartisan policy magazine that discusses policy every week, and their point is in fact that the Medicaid cuts are going to have horrific impacts on the States.

They go on to point out that much of the rhetoric about how these Medicaid cuts will not hurt because everybody can be put into managed care, and therefore they can say that Medicaid will not grow more than 4 percent.

Mr. Speaker, the State of Arizona has had everybody in their State in managed care for 13 years and the average increases are 7 percent. That means, under the Republicans' plan, it is twice the growth rate that the Republicans would allow. How do you make that up? You make that up by cutting services, because they have already squeezed all of the savings that they thought were possible by putting people into managed care.

How did the State of California, when it cut Medicaid, how did it make it up? It started reducing payments to doctors. First they told the doctors, "we will pay you 90 percent of what you get in the private marketplace;" then, "we will pay you 70 percent of what you get in the private marketplace" and then pretty soon the doctors told them, "Don't bother bringing Medicaid patients to us. We are not going to take care of these people because we cannot afford to do that."

That is the slippery slope that is started when you start creating a medical system based upon the needs to provide tax cuts as opposed to what is needed to reform and take care of the Medicare system and its recipients, and we have got to understand that the program that the Republicans are putting forth now, according to the Washington Times yesterday, according to the chairman of the Budget Committee, may have the gap of about \$80 billion in it. They do not know where

they are going to get 80 billion dollars' worth of cuts.

So what do they want to do? They want to put the Medicare system on an automatic cut provision that in 3 years, if we are not advancing toward the balanced budget, if the cuts have not been realized in Medicare, then they would have an automatic \$80 billion in Medicare, again, coming out of hospitals, coming out of doctors who pretty soon are going to decide, like they have with the Medicaid patients, that they do not want any, that they do not want any Medicare patients.

Mr. Speaker that simply is an intolerable situation for the elderly in this country and for their families.

Let us understand what Medicare and Medicaid have done. They have allowed families to stay together, to stay intact with confronting what, in some cases, are catastrophic medical costs for our elderly population. As generations mature and they look to their children to help out, there are very few children that can help out with hundreds of thousands of dollars in health care costs as their parents reach 70, 80, 90 years of age.

That is what is happening to the baby boomers. As the baby boomers try to figure out how to buy their homes for their families, how to educate their children, how to preserve a standard of living in this country, they are now confronted with their aging parents. I would look very carefully at this program to slash Medicare and Medicaid by almost \$450 billion.

RECESS

The SPEAKER pro tempore. There being no further requests for morning business, pursuant to clause 12, rule I, the House will stand in recess until 10 a.m. today.

Accordingly (at 9 o'clock and 43 minutes a.m.), the House stood in recess until 10 a.m.

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AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore [Mr. FOLEY] at 10 a.m.

PRAYER

The Chaplain, Rev. James David Ford, D.D., offered the following prayer:

We pray, O gracious God, for those things most immediate to us—for food and shelter, for friends and families, for honorable causes and noble deeds. We offer these petitions to You because You are our creator and You know each of us by name. Yet, above all else, and as our first act of faith, we speak our thanksgivings to You with gratitude in our hearts for Your loving gifts to each person. Teach us, O God, that before we ask, we ought to give thanks and praise and before we receive, we ought

to open our lives to Your gracious presence. Amen.

THE JOURNAL

The SPEAKER pro tempore. The Chair has examined the Journal of the last day's proceedings and announces to the House his approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER pro tempore. The gentleman from Massachusetts [Mr. NEAL] will come forward and lead the membership in the Pledge of Allegiance.

Mr. NEAL of Massachusetts led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair will entertain fifteen 1-minutes on each side.

REPUBLICAN MEDICARE PLAN IS CREDIBLE

(Mr. EHLERS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. EHLERS. Mr. Speaker, for the past several months we have had considerable discussion and debate on the floor of the House regarding Medicare, an extremely important program, particularly to the senior citizens of this Nation. I have been very disappointed in the debate that we have had.

I come from an academic background where you concentrate on the facts and you discuss and debate based on those facts.

One fact is uncontrovertible: The trustees of the Medicare Program have said it will be bankrupt in 7 years if the Congress does not do something about it, and the debate should focus on that. But it has been a very partisan debate. My disappointment is the other side of the aisle has not engaged in a serious debate on the facts.

I turn to the Washington Post, scarcely a conservative paper, but they have written an objective editorial about what has happened in this debate in the past few months. This is what the Post has to say about the Democrats' Medi-scare campaign. These are actual quotes from the editorial, labeled Medigogues: "Crummy stuff; demagoguery big-time; scare talk; expostulation; it is irresponsible." On the Republican side, the Post has this to say: "Congressional Republicans have confounded skeptics. It is credible. It is gutsy."

I think we should all listen to the Washington Post.

SAVING MEDICARE

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

Mr. PACKARD. Mr. Speaker, Medicare is going broke. The Medicare trustees recently reported that the money dries up in only a few short years. Seniors need to understand that once this happens the program they depend on to pay for doctors, hospitals and vital medications will cease to exist.

My Republican colleagues and I recognize that the time to defuse this ticking time bomb is now. This week, we plan to introduce our proposal to save and strengthen Medicare.

We plan to overhaul this 30-year-old program to root out waste and inefficiency. Furthermore, our plan offer's today's seniors the flexibility they need to navigate a fast changing modern medical landscape.

Mr. Speaker, our plan is about choices and freedom and the right to have the same types of health care plans as found in the private sector. Our bill expands options for seniors, combats fraud and abuse, and ensures that the program will be there when seniors need it.

CALL FOR INVESTIGATION OF ACTS OF AGGRESSION BY BELARUSAN MILITARY

(Mr. NEAL of Massachusetts asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. NEAL of Massachusetts. Mr. Speaker, on Tuesday, September 12, 1995, my office was advised that Mr. Michael Wallace, a participant in the Gordon Bennett balloon race, had been forced to land his balloon in Belarus, part of the former Union of Soviet Socialist Republics.

I later learned that a second balloon, flying under the flag of the Virgin Islands, had been shot down and its occupants had been killed.

After numerous contacts with officials of the American Embassy in Minsk, I was advised that Mr. Wallace had been reunited with his chase crew and that he had been accompanied by diplomatic officials to the Poland-Belarus border where he was released to begin his return to the United States.

I met personally with Mr. Wallace yesterday morning and he has been able to provide me with information which confirms my earlier appraisal that these incidents should never have occurred.

Mr. Wallace has provided my office with the formal approval which had been given by Belarus for contestants of this balloon race to fly over their country. Furthermore, Mr. Wallace is convinced that Alan Fraenckel and John Stuart-Jervis, the operators of the Virgin Islands balloon, would most certainly have landed their craft had they been given an opportunity to do so.