

wealthy paying more for Medicare part B. I think they should.

We are not affecting beneficiaries. We are changing the system. How are we changing the system? We are allowing Medicare Plus, we are allowing people to stay in Medicare as they want it now, that typical program, or they can go into any other host of other new programs. They can go into the private sector.

And they can choose to if they want to, but if they do not want to, if they are silent, they do not ask to go into the private sector. They simply remain on Medicare as it exists today, a 1960's system, inefficient, you can choose your own doctor, you can stay there, or you can be attracted over into the private sector and possibly have your premiums reduced, your co-payments reduced, your deductibles reduced and possibly eye care, dental care or prescription drugs. All of those may attract you to leave what you have now. But you can stay. But if you want to pay less, you can get into the private system.

I have heard the reference of saving \$270 billion. On Medicare in the next 7 years, we are going to spend \$1.6 trillion, as opposed to the last 7 years where we spent \$900 billion. We are going to spend over \$600 billion more in the next 7 years than we spent in the last 7 years. That is going to doctors. It is going to hospitals. It is going to, candidly, those who run the systems. It will go to a whole host of different people.

We are going to put 54 percent more into the system. We are going to have the individual payment per beneficiary go from \$4,800 to \$6,700. Only when you spend more and only in Washington when you spend more do people call it a cut. It is not a cut. It is a significant increase.

I just make this last point. As it relates to Medicaid, our colleagues on the other side of the aisle have pointed we need to deal with spousal impoverishment, and we are in our bill. The gentleman from New Mexico [Mr. SCHIFF] has put forward an amendment with me that deals with the criminal statutes. We are going to make it a Federal offense. It is in the rule, a self-enacting rule, and the bill of the gentleman from New Mexico [Mr. SCHIFF] and my amendment will pass, if the rule passes, that will make health care fraud a criminal Federal offense.

#### A VOTE AGAINST REPUBLICAN MEDICARE PLAN

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from West Virginia [Mr. WISE] is recognized for 5 minutes.

Mr. WISE. Mr. Speaker, reflecting the many calls and letters that our office has been getting over the past few months, I am going to be voting no tomorrow against the proposal to cut \$270 billion out of the Medicare plan, much of that money to go to a \$245 bil-

lion tax break essentially for the wealthiest individuals in the country. While I do support the means-testing provisions of part B, I also acknowledge to those who are in the upper income areas, they are going to get far more back in the tax cut than what they ever pay out in part B and they will be the only group so protected under this Medicare plan.

Mr. Speaker, I oppose this for a number of reasons. During my two-day Medicare-A-Van in West Virginia, I learned a lot of things. I learned, for instance, that the first cut by the hospital shows that they will lose roughly \$600 million out of this, and this is just the hospital provision alone, and this does not even include the upcoming \$4.4 billion Medicaid cut that they are going to get. I learned about the hospitals that derive 60 to 65 percent of their revenues from Medicare and Medicaid. I learned about the 300,000 West Virginia seniors that are going to be affected, that could be paying as much as \$1,000 more out of pocket by the end of this 7-year program, by those who will see part B premiums go up and they may lose their low income protection and help in paying for them, those who could be forced into managed care. And, yes, younger families paying more for their loved elder relatives. All of that, Mr. Speaker. On top of that, a last-minute deal with the American Medical Association means that seniors no longer will be protected from doctors who want to charge more than what Medicare permits them to charge presently.

I learned, too, Mr. Speaker, that you have got to look beyond what is being said. When some people say that the trustees make them do it, the trustees said do something about Medicare in 7 years but the trustees also said you can do it with \$90 billion, not \$270 billion of cuts which are being proposed.

I learned, for instance, Mr. Speaker that when those people say that well, Democrats have not done anything about it, nine times since 1980 have Democrats and Republicans taken bipartisan action to save Medicare. We did it again only 2 years ago with \$60 billion of reductions.

Mr. Speaker, the Speaker himself talks about the tax cut being a crown jewel of the Contract With America. Well, Mr. Speaker, this crown jewel is being bought on the installment plan. It is being paid for over 7 years and 100 percent of all senior citizens are paying for a tax cut that basically 1.5 percent of those individuals, those earning over 100,000 will get the benefit of.

This ain't home shopping, it's not cubic zirconium, it's expensive stuff and every senior citizen is going to pay for it. That is why I am voting against a Medicare cut of \$270 billion to pay for a tax break of \$245 billion.

Mr. Speaker, I yield the balance of my time to the distinguished gentleman from Texas [Ms. JACKSON-LEE].

Ms. JACKSON-LEE. I thank the gentleman from West Virginia. I applaud

his willingness to listen to his constituents. I clearly believe that we have a situation where a picture is worth a thousand words. I would simply say that we are now facing tomorrow, October 19, a day of infamy.

What we faced on October 11, 1995, maybe the Republicans do not understand it but Americans do. You simply look at the face of this woman, a senior citizen being locked up in the People's House, the United States Congress, locked up and taken away. Because she simply wanted to protest \$270 billion going for tax cuts to people making up to \$500,000. This is worth a thousand words.

Then we ask the question about whether there have been hearings. I have heard 38 hearings and 40 hearings and on and on and on. Let me tell you that tonight 900 some pages came out at 11:25 tonight, 900 some pages of a bill that is supposed to be voted on tomorrow. We have got a number of hearings for Ruby Ridge, for Waco, for White Water. But for putting senior citizens out on the street for their health care, we have got 1 day of hearing. No democracy exists in this Congress. It is a day of infamy. This is the concern we have. It is time to turn the tide.

#### POINT OF ORDER

Mr. HOKE. Mr. Speaker, I have a point of order.

The SPEAKER pro tempore. The gentleman will suspend. The point of order will not come out of your time. The gentleman will state his point of order.

Mr. WISE. Mr. Speaker, the clock is ticking.

Mr. HOKE. Mr. Speaker, the point of order is that when there is less than 10 minutes left at the end of the hour, before the suspension of the hearings for the day, then that time is supposed to be split evenly between the minority and the majority.

The SPEAKER pro tempore. The Chair has been very diligent in going back and forth between the majority and the minority throughout the time allotted for special orders.

Mr. HOKE. Mr. Speaker, that is not the point. The point of order is that when there is less than 10 minutes remaining—

Mr. WISE. Mr. Speaker, the point is that the time is going until midnight and it is coming out of our time.

The SPEAKER pro tempore. The gentleman's time will be protected.

Mr. HOKE. But when there is less than full time, to be equally divided for 5 minutes on each side, the time must be equally divided on each side.

The SPEAKER pro tempore. The Chair has ruled. We have gone back and forth evenly between the majority and the minority.

Mr. HOKE. Then the time should have expired on that side.

The SPEAKER pro tempore. The time has been shared evenly all evening.

Mr. HOKE. Does that mean you are going to extend beyond the midnight hour?

The SPEAKER pro tempore. No, it does not. On the majority, all requests for the 5-minute time have been used. No other majority Member has requested a 5-minute time slot.

Mr. HOKE. I thank the Speaker.

The SPEAKER pro tempore. The gentlewoman will proceed and her time will be protected.

Ms. JACKSON-LEE. Mr. Speaker, might I conclude simply as I look at this chart, indicating that with the 930-plus-something bill that was just issued tonight, we have 1 day of hearings.

But simply, Mr. Speaker, let me say the Republican plan is going to put at least 1 million citizens in the jeopardy of losing Medicare. It is going to cause hospitals around this Nation through the Medicaid cuts to lose some \$28 million. Then lastly let me say that what are we doing all this for? Why are we locking up this citizen in the U.S. Capitol? Why do we have this 1 day? To give \$19,000 in tax breaks to those making over \$500,000 a year, a travesty, a day in infamy. Tomorrow vote "no" against the Republican Medicare plan.

Mr. Speaker, I include the following statement for the RECORD:

Mr. Speaker, if I could find the words, I would tell you exactly how infuriated I am at the legislation by fiat which seems to be taking place within these noble halls. When the Founding Fathers came together and created the Government that we have today, I am positive that they did not intend to have legislation dictated by the whims and desires of a few individuals. As I recall, wasn't that the very cornerstone of the American Revolution?

I am appalled at the backroom, cloak-and-dagger shenanigans which seem to be the rule of the day. When H.R. 2425 was reported out of committee, I am sure that the members who voted in favor of the bill and its amendment thought that what they were voting on was what would be brought to the floor. I am sure that when Democrats and Republicans alike voted to improve this legislation by approving Mr. GANSKE's amendments, which would have made it more difficult for managed care organizations to deny payment services, they were doing what they were elected to do—represent their constituents to the best of their ability. How dare others within this body assume that responsibility for them.

#### PARTICIPATION

The Republican plan will simply put at least 1 million seniors in jeopardy of losing all health care coverage.

Premiums would increase for all seniors from \$46.01 to at least \$87 by 2002, which is \$26 more than the current law. How many seniors will not be able to afford decent primary care because of this increase?

Deep cuts in reimbursement rates to doctors and hospitals will cause these health providers to turn seniors away—effectively limiting their choice.

The Senate plan also includes higher deductibles and copayments for services such as home health care, lab tests and nursing services.

Seniors will be paying more for less coverage. Medicare payments to beneficiaries will be cut by \$1,700 in 2002, forcing spending to grow 33 percent slower than in the private

sector. What kind of health care can be bought at such low rates.

Not one penny of the increase in beneficiary premiums will help the part A trust fund—all of the savings will go for a tax cut to give a \$19,000 tax cut to those making \$500,000.

Medicaid—The average senior citizen has an annual income of \$13,000 a year and the elderly poor would lose the protection that Medicaid gives them.

Medicaid—Even if the States are able to absorb half of the proposed reductions in Medicaid funding, the system will still have to cut 8.8 million people off of the Medicaid rolls by 2002. That includes 4.4 million children; 920,000 senior citizens; and 1.4 million disabled children and adults.

#### SMALL HOSPITALS

Over the 7 years, a typical urban hospital will lose up to \$28 million.

These reductions will drastically hurt many small hospitals which depend upon Medicaid and Medicare payments for their survival. If these important hospitals should become an endangered species, people in these neighborhoods may be without ready health care.

#### VOTE FOR REPUBLICAN MEDICARE PLAN

Mr. HOKE. Mr. Speaker, I ask unanimous consent to proceed for 5 minutes out of order.

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

Mr. WISE. Mr. Speaker, I object.

The SPEAKER pro tempore. Objection is heard.

Without objection, the gentleman will be recognized for 30 seconds.

There was no objection.

Mr. HOKE. I thank the Speaker.

Mr. Speaker, it looks like we are battling cleanup here and that the evening is done. I think it is obvious that it is really the people of America that will make the choice as to where the truth has been spoken tonight and what the truth is with this issue. The fact is that the Democrats had 40 years to make the changes that need to be made and they refused to do it. Tomorrow we are going to vote on a plan that is going to save Medicare, it is going to preserve it. It is going to protect it, and it is going to strengthen and improve it. I urge all of my colleagues to join me in voting for that plan tomorrow.

#### ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Under the Speaker's announced policy of May 12, 1995, all time for special orders has expired as it is now midnight. The chair will entertain a motion to adjourn.

#### LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. VOLKMER (at the request of Mr. GEPHARDT), after 1:30 p.m. on Wednes-

day, October 18, on account of illness in the family.

#### SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

The following Members (at the request of Mr. DOGGETT) to revise and extend their remarks and include extraneous material:

Mr. BEVILL, for 5 minutes, today.  
 Mr. BORSKI, for 5 minutes, today.  
 Mr. FAZIO of California, for 5 minutes, today.  
 Mrs. CLAYTON, for 5 minutes, today.  
 Mr. LIPINSKI, for 5 minutes, today.  
 Mr. GEJDENSON, for 5 minutes, today.  
 Mr. GENE GREEN of Texas, for 5 minutes, today.  
 Mr. HINCHEY, for 5 minutes, today.  
 Mr. KLINK, for 5 minutes, today.  
 Ms. DELAURO, for 5 minutes, today.  
 Mrs. MALONEY, for 5 minutes, today.  
 Mr. MILLER of California, for 5 minutes, today.  
 Mr. NADLER, for 5 minutes, today.  
 Mr. OLVER, for 5 minutes, today.  
 Mr. PALLONE, for 5 minutes, today.  
 Ms. PELOSI, for 5 minutes, today.  
 Mr. BROWN of Ohio, for 5 minutes, today.  
 Mr. STUPAK, for 5 minutes, today.  
 Mr. WARD, for 5 minutes, today.  
 Mr. WISE, for 5 minutes, today.  
 Ms. WOOLSEY, for 5 minutes, today.  
 Mr. OWENS, for 5 minutes, today.  
 Mr. FILNER, for 5 minutes, today.  
 Mr. FALEOMAVAEGA, for 5 minutes, today.  
 Mr. TANNER, for 5 minutes, today.  
 Mr. STENHOLM, for 5 minutes, today.  
 Mr. PAYNE of Virginia, for 5 minutes, today.  
 Mrs. LINCOLN, for 5 minutes, today.  
 Mr. PETE GEREN of Texas, for 5 minutes, today.  
 Mr. ORTON, for 5 minutes, today.  
 Ms. JACKSON LEE, for 5 minutes, today.  
 Mrs. THURMAN, for 5 minutes, today.  
 Mr. PETERSON of Florida, for 5 minutes, today.  
 Mrs. MEEK of Florida, for 5 minutes, today.  
 Ms. BROWN of Florida, for 5 minutes, today.  
 Mr. HASTINGS of Florida, for 5 minutes, today.  
 Mr. DEUTSCH, for 5 minutes, today.  
 Mr. JOHNSTON of Florida, for 5 minutes, today.  
 Mr. SANDERS, for 5 minutes, today.  
 Mr. MARTINEZ, for 5 minutes, today.  
 Mr. VENTO, for 5 minutes, today.  
 Mr. REED, for 5 minutes, today.  
 Mr. WYNN, for 5 minutes, today.  
 (The following Members (at the request of Mr. HAYWORTH) to revise and extend their remarks and include extraneous material:)  
 Mr. DORNAN, for 5 minutes, today.  
 Mr. METCALF, for 5 minutes, today.  
 Mr. HORN, for 5 minutes, today.  
 Mr. JONES, for 5 minutes on October 19.