Yet American people do not have access to that care, the care that they have paid for through their tax dollars for the research. And yet we beg now and plead with the HMOs and the managed care insurance to allow people to have access to just basic health care. They need access to just needed care. They do not want to be treated one-size-fits-all.

Whether you are 7 or 70 in this country under HMOs, if you have got a certain diagnosis, you all get treated the same. That does not address individual needs. Doctors need the freedom to practice the art and the science that they have learned and that they are capable of doing. They do not have that right under our present system. They are pushed out on the line and given instructions by the HMOs, and yet the HMOs do not even want to be responsible for what they tell the physicians to do.

It is time for change. The American people are calling for it.

□ 1015

FREEDOM FOR EDUCATION

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

Mr. FOSSELLA. Mr. Speaker, the essence of America, as we all know, is freedom, but somehow, that does not apply to education. Because the door slams shut on so many parents across this country when they want to have the freedom to choose the best education possible for their children.

Too often, too many Federal dollars are wasted here in Washington and not enough spent back home in Staten Island and across this country where the parents and the teachers, the local communities know better how to spend their funds.

Well, the Republican Party recently is embarking on a path towards freedom when it comes to education, and that is to allow States the opportunity and local communities to spend the money as they see fit. Can anyone in this country acknowledge that the folks here in Washington are in a better position to spend the money on education than back home where they are? Where the parents and teachers and administrators are? I think not.

Mr. Speaker, let us support freedom for education. Let us support the opportunity to send Federal money back home across America, and not be wasted here in Washington.

MANAGED CARE REFORM

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

Mr. GREEN of Texas. Mr. Speaker, the gentleman from Colorado that said he would bury us as Democrats, I guess going on their experience, they buried managed care reform for 2 years, so they have that kind of experience.

Let me talk this morning about some ads that are in the Washington publications that talk about how the Dingell bill will be more expensive. Well, let me give my colleagues the Texas experience. We have had managed care reform in Texas for 2 years and the reason it is going to be more expensive is that they are going to have to start paying claims. They have lost half of the appeals process, so I would much rather have better than a flip-of-the-coin odds if I am going to managed care for health care.

Mr. Speaker, a 500 percentage may be great if one is a baseball player who will be making $10 million, but when one is deciding whether one is going to have adequate health care, I would rather have a better percentage than a flip of the coin. They are actually going to have to pay those claims.

We need a real patients' bill of rights that has everything in it: accountability, access to specialists, a real appeals process, and no gag rules and medical necessity. That is why I do not think they are going to have the experience in burying this bill any more.

PHARMACEUTICAL BENEFITS FOR MEDICARE PATIENTS

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

Mr. COOKSEY. Mr. Speaker, I am a physician. Thirty years ago when I finished medical school, most of the patient's care was in-patient, and most of the pharmaceutical benefit was in-patient. Today, 25 percent of the cost of health care for Medicare patients is the pharmaceutical benefit. This is because most of health care for seniors and for everyone else is carried out on an outpatient basis today.

I feel that Medicare patients need some help with their pharmaceutical benefits. The truth is, two-thirds of Medicare patients already have a benefit. This two-thirds of the Medicare population does not need a pharmaceutical benefit. That leaves one-third who, in many cases, have high expenses for their pharmaceutical costs and desperately need some help with their Medicare benefits.

Medicare needs an integrated system with Medicare that will pay for these benefits. We have the best pharmaceutical industry in the world. We do not need to put them under the bureaucracy.

Mr. Speaker, this Republican supports a Medicare benefit for pharmaceuticals.

IMPROVING AMERICANS' ACCESS TO HEALTH CARE

(Ms. WOOLSEY asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. WOOLSEY. Mr. Speaker, first it was campaign finance reform, then it was gun safety and school violence, now it is health care reform. There is an unfortunate pattern taking place here with the Republican leadership. On issue after issue, issues that are important to the people, the Republican leadership uses its power to stomp out real discussion.

Fortunately, we have an alternative, and that is the discharge petition, and we are signing it here today. Democrats have been waiting for 2 years to pass the Patients' Bill of Rights, and today we step forward to improve Americans' access to health care. Let us not be fooled by breaking last year's sham bill into eight pieces. The Republican leadership wants health care reform to be in small pieces. This will not sell. The American Medical Association says that the Republican package of bills falls short of the mark and it does not solve any of the problems of doctors and patients.

It is time to put doctors and their patients back in charge of health care reform.

FREE SOCIAL SECURITY LOCKBOX LEGISLATION

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

Mr. HERGER. Mr. Speaker, today is day number 63 of the latest hostage crisis. It is a hostage crisis that is not getting much attention in the mainstream media, but it has grave implications for current and future retirees nonetheless.

Since April 21 of this year, Democrats in the other body have blocked a Herger lockbox proposal, refusing to allow it to even come to a vote.

What is being held hostage is legislation to create a Social Security lockbox; in other words, legislation to create a safe deposit box that would put an end to the time-honored practice in Washington of raiding the Social Security Trust Fund whenever politicians want to expand government.

Republicans in the House of Representatives have passed Social Security lockbox legislation. We want to protect the Social Security Trust Fund from further raids. The other side is adamantly against it. Once we get into the habit of raiding a cookie jar, it is awfully tough to quit. It is time to end the hostage crisis and free the Social Security lockbox and protect seniors from more raids on the Social Security Trust Fund.

FEDERAL RESERVE SHOULD NOT RAISE INTEREST RATES

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

Mr. HINCHEY. Mr. Speaker, last week, the Chairman of the Federal Reserve Board appearing before the Joint