

Mr. DORGAN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DORGAN. Mr. President, I ask unanimous consent to speak for 10 minutes as in morning business.

The PRESIDING OFFICER. Without objection, it is so ordered.

WELFARE REFORM

Mr. DORGAN. Mr. President, after listening to my colleague on the subject of welfare reform, I hope that in the coming days we can have an interesting, thoughtful debate about welfare reform on the floor of the Senate. Much of what he described as a remedy I would support. It is, I suppose, useful to describe the failure of the welfare system through the image of a casket, a symbol of a system that does not work.

There are many pictures that one can use to describe the current welfare system. The only disagreement I have with the previous speaker is the notion that somehow the difficulty with this system is that it is administered by the Federal Government. As most of us in this Chamber know, the current welfare system is largely administered by the States and locally. There is plenty wrong with it. That's why we have on our side of the aisle in the Senate constructed a welfare reform plan that I think makes a lot of sense. It is called Work First.

I say to all those who come to the floor to talk about welfare reform and the need for a crusade against teenage pregnancy and a whole series of other reforms that we must embrace in the Congress, that we should also understand our responsibilities when the appropriations bills come to the floor of the Senate.

Yesterday, I saw the results of a bill which would cut nearly one-third of the funding from the Bureau of Indian Affairs. The Bureau of Indian Affairs is an agency of the Federal Government that can learn a few things about good administration and effective use of taxpayers' dollars. But as a result of where I think spending cuts have been proposed in some of the appropriations bills, especially with respect to native Americans, we will see some of the most vulnerable people in this country suffer some of the largest budget cuts.

I can bring a picture to the floor today of a young woman from Fort Yates, ND, who at age 3 was placed in a foster home by a caseworker who was handling 150 separate cases. She went to a home which had never been previously inspected by the caseworker and, as a result of going to a home where alcoholism and parties were the norm, this young girl during a drunken party was beaten so severely that hair was pulled out of her head by the roots. Her arm was broken. Her nose was broken. This is a 3-year-old young girl consigned to a foster home by a case-

worker who was handling 150 cases and could not bother or did not have the time or the money or the resources to check the homes she was sticking young children in.

I say to somebody who wants to talk about reform in this system, to somebody who believes that one caseworker ought to be able to handle 150 cases, you are consigning the children in those cases to the kind of harm that occurred to this 3-year-old, physical harm from which she will probably never fully recover.

Look into the eyes of Tamara someday and see what was visited upon this young lady, because there was not enough money to hire the two, three, or four caseworkers to check the houses in which they were going to put these kids.

When we talk about welfare reform, we talk about our obligations to people and then say we do not have enough money for social workers to take care of kids, that is not much reform, in my judgment. We say we cannot afford to enroll kids in Head Start, and that we cannot find enough money for WIC. Part of reforming this system is also to understand our obligation to kids and our obligation to some of the most vulnerable people in this country.

I can show you an office in this country where there are stacks of paper on the floor this high of reported abuses against children, of sexual and physical abuse, that have never been investigated—not even investigated. There are reports that a 3-year-old or a 5-year-old or a 7-year-old has been sexually abused that have not even been investigated. Why? Because they do not have people to go out and investigate. And so, today, a 5-year-old is probably at a home where a previous report has been made of sexual violations against this child or of physical abuse against this child. This child is at risk today and every day because somehow there is not enough money to pay a social worker to go out and investigate the reports.

Any country as good as this country, that can afford to find the resources to have caseworkers and investigators to help protect children who are living in the grip of poverty in this country and who are living in the saddle of fear, and in some of the circumstances that I have seen and I think others have seen, has something wrong if its priorities do not include full protection for these children. In any discussion about reform of our welfare system and in any discussion about our obligations as they relate especially to appropriations bills that come to the floor, I hope will include a full discussion among those of us who have different thoughts about our obligations. I hope to be an active participant, because I have some very strong feelings about what is wrong in this country. We will find many areas of agreement. But to talk about reform and then deny the basic resources necessary to hire caseworkers to protect the lives of children

who are gripped by fear and poverty and live day-to-day fearing for their safety is not a priority that I share. I believe the priority must be for us to decide that it matters, we care, and we will do something about it.

Mr. President, we will soon begin discussing specific proposals on how to reform the Medicare system. I do not know exactly when we will discuss them. I heard the majority leader discussing the schedule a few moments ago. I intend to say to him in a meeting with my colleagues soon that I am not very impressed with the schedule. He has an enormously difficult job, and I understand that. But if you are trying to raise a family and work in the U.S. Senate and find that at 8, 9 o'clock every night, you do not know whether there are going to be more votes, in my judgment, there is a better way to do things. I hope we can find a schedule that allows us to do our work in the Senate and still participate in family life, as well. That is a subject for another time and one that a number of us hope to talk to the leadership about on both sides of the political aisle.

When we talk about the issue of Medicare in the coming days—I was noticing today, on the 30th anniversary of the Medicare bill, that the newspaper, USA Today, has an ad by the Republican Party in it. It says, "Too Young to Die." There is a tombstone on the ad. "Medicare 1965–2002." It has a Medicare pledge called The Republican Pledge to Save Medicare. It says, "If Clinton lets Medicare go bankrupt, you can keep your existing coverage, but only for 7 years. If Clinton lets Medicare go bankrupt, you can keep your own doctor for only 7 years." It goes on at great length. This from a party, 97 percent of whom did not support Medicare in the first place. They always opposed Medicare. They fought to the death here to try and prevent a Medicare Program from becoming a part of our law in this country. Now, on the 30th anniversary, most of them want to love it to death.

Thirty years later, has Medicare worked? You ask some 75-year-old person who has new knees, or a new hip, or who has had cataract surgery and is not consigned to blindness or a wheelchair, or who has had open heart surgery. Ask them whether Medicare has worked and if they are free from the fear of whether they will have health care when they grow old.

Ninety-seven percent of our senior citizens are covered with health care coverage. I am proud of that. Before Medicare, less than half of the senior citizens had access to health insurance. Now, almost all of them do. Is that an accident? No, it is not. It is because people in this Chamber in years past had the vision to say we ought to put together a system that frees senior citizens from the fear of when they reach the advancing age of lower income and more health problems, frees them from the fear that they may not be able to get medical help because

they do not have the money. We put together a Medicare Program. I was not here then. But I salute those who led the fight for it in the face of opponents that called it socialism, total socialism.

Well, it is not socialism that the Republicans say they now support Medicare. It is a Medicare Program of which I am enormously proud.

This country spends too little time celebrating its successes. We have had a lot of successes. We spend most of our time talking about failures and what is wrong. The Medicare Program is a success. I am proud to be a part of the political party that fought for it in the face of enormous opposition to create it, and I am proud to be a part of the party that this week celebrates its 30th birthday. Does it have some problems? Yes. There are 200,000 new Americans who become eligible for Medicare every single month. That is the graying of America. There are more elderly in America every month. Health care costs are increasing for everything, including for Medicare.

So, there are some financial problems. But the majority party in Congress has, coincidentally, said in their budget plan for this country this year that they want to have a substantial cut in Medicare funding that is almost equal to the cut they proposed in taxes. Now, they propose that we have what is called a middle-income tax cut of roughly \$270 or \$250 billion. They propose almost an identical cut for the Medicare Program. The so-called middle-income tax cut is an interesting one. The only details we have of the tax cut comes from the House of Representatives. It goes like this—and it would not surprise anybody, I suppose—families under \$30,000 a year get \$120 a year in tax cuts; families over \$200,000 a year get a tax cut of \$11,200 each year. It looks to me like that is kind of a “cake and crumbs” tax cut—cake to the rich, crumbs to the rest. That is not surprising. We have seen that year after year from the majority party.

But it seems to me that if you have a program that works, that is successful, for whom we now celebrate 30 years of success, like the Medicare Program, to suggest substantial cuts in Medicare funding that, coincidentally, equal the proposals to cut taxes, mostly for the wealthy, we do not do this country any major favor.

It seems to me that what we ought to do is evaluate our successes and find ways to strengthen them, not weaken them. There are those who say Medicare turns 30, but it may not live to see 37, and the Republicans are the ones who will save Medicare. I say: Look at the record. Who created Medicare? Who has supported Medicare? Who will nurture Medicare well into the future as a safe, solid, and financially solvent program?

I have a piece of copy from something called Luntz Research Companies by the Republican pollster, Frank

Luntz. It says, “Everything You Wanted To Know About Communicating.” It was not sent to us. It was sent to the Republicans. It is about a 10-page missive on how they should communicate to our country about Medicare. It says, “Seniors are very pack oriented, and are very susceptible to following one very dominant person’s lead.” And then for page after page it says, “You must appear to be bipartisan.” It does not say you should be. It says, “You must appear to be bipartisan.” Page after page is instructing Republicans how to deal with this Medicare problem. What problem?

The problem is they are proposing a very substantial cut in Medicare that is almost exactly the same size as the tax cuts they proposed for the wealthy. It is a problem because senior citizens, I think, in most cases, are scared to death that a program that they think is successful and they have relied on, that has freed them from fear of growing old and not having health care coverage, is about to be dismantled by some who carelessly tell us their real interests. We have some around here who still say that we ought not have the Medicare Program, that we should go back to the “good old days” when half of senior citizens had no health care coverage at all. They do not quite say it that way, but that slips out from time to time. That is their philosophy. They think Government, essentially, should not do anything.

Again, there are 10 pages or so of discussion about exactly how to talk your way out of this situation. It says, “For too many seniors it will be the last word that ultimately sways them.” So make sure you are the last person who talks to them, because that is who they will believe. You know, all of us have stories about our constituents—senior citizens who we have met, and whose life is substantially improved by this program of which I am very proud.

I recall a woman from Mandan, ND. I was at a town meeting in that small community in my home county. She stood up, and she must have been in her midseventies. She said, “I have a new knee and a new hip. I had cataract surgery. I want to tell you, I feel like a million dollars.” Somebody else in the crowd said, “Well, maybe you cost \$1 million.”

Not quite. These medical procedures are not that expensive. I thought to myself, is it not remarkable? If this woman had even come to a meeting 50 years ago, she would have been there in a wheelchair and would not have been able to see much because her knee was gone, her hip was gone, and she had cataracts. Now, through the modern miracles of medicine, she feels like a million dollars.

First of all, this is a remarkable case of breathtaking achievement, attributable to the men and women of vision in our country in the medical field who produce these miracles—things that we had never before expected to be done. Then the Medicare Program provides

access to that new treatment for America’s senior citizens. It is remarkable.

I think most would agree that what we have done in this country in medicine, generally, and for senior citizens through the Medicare Program, is an extraordinary thing. We ought not decide at this point to weaken those kinds of things that represent successes in America.

I want to say again something I have said, I suppose half a dozen times, that people are tired of hearing. It is important. We have so embraced in this country talk about failure and talk about what does not work and what is wrong and scandal, that we just are not willing to talk about success.

It is why, for days, I have talked during the regulatory reform debate about air and water. The air and the water in this country is cleaner than it was 20 years ago. We now use twice as much energy in America than we did 20 years ago. We doubled our use of energy. Yet, we have cleaner air, cleaner rivers, cleaner streams, cleaner lakes.

Now, why would that be the case? Would it be because those who were polluting America, the big polluters, decided one day to just turn off their chimneys and to stop throwing chemicals into rivers, and to stop blowing pollution into the air because they just decided it would be good business? No, that is not why.

It is because we put in place regulations that say you cannot pollute. Clean air and clean water are important to Americans. It is important to our health. It is important to this Earth. You have to stop polluting. That is what we said.

Maybe we ought to celebrate a bit that we are successful after 20 years. Go back to the 1970’s and the first Earth Day, and what you would find is a notion that we are consigning ourselves to a future of increasingly dirty air and increasingly dirty water, and there is not a darned thing anybody can do about it.

The Hudson River was set on fire, so we had the prospect and the sight of a river burning. Why? Because it was so terribly polluted that you could set it on fire. You could light the water.

Back in the 1970’s, the notion was that things are so bad, they will get worse, and there is nothing we can do. Twenty years later, we doubled our use of energy, and those rivers are cleaner and the air is cleaner.

There are those who stand up and say, “the Federal Government cannot do anything right. We hate the Federal Government. Turn it all back to the States.” Some say, “let’s block grant the food stamp program. Send it back to the States.” Apparently, hunger is not a national priority anymore for some. Some of what the Federal Government has done has been enormously successful. We ought to understand that.

One part of that is Medicare. That is why I came to the floor today, to talk about the Medicare Program. We will

have a fight. That is what democracy is about—debate. We will have a debate about the future of these programs, including Medicare. It is a debate I look forward to.

We must fix Medicare with respect to its financial solvency for the long term. That is not a fence that you cannot get over. It is, in my judgment, not a difficult thing to do. But we should not, in ways that some suggest, continually try to weaken a program that works so well.

No one, in my judgment, should lament the fact we are having this kind of debate about whether we spend money on the Medicare Program, whether we give a tax cut to Donald Trump, whether we build star wars—all of which are proposed. No one should lament that. The political system is constructed to have that kind of a debate in our country.

President Kennedy used to say, "Every mother kind of hopes that her child might grow up to be President, as long as they don't have to get involved in politics." The irony is that the political system is a system in which we debate these issues of the day for our country and its future.

I look forward to the coming weeks as we debate the future of Medicare. I hope that this full-page ad in USA Today, with a tombstone for Medicare, in which the Republicans pledge to save Medicare—a political party that opposed it with every bit of their breath and energy 30 years ago—I hope this represents a determination by the Republicans to join us and say Medicare should be available for the long term for America's elderly who need it, not with less coverage and higher costs, but instead with good coverage at modest cost, with a program that celebrates America's success.

I yield the floor. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. DOLE. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

ON THE RETIREMENT OF MARIAM BECHTEL

Mr. DOLE. Mr. President, I rise today to extend my heartfelt thank you to Mariam Bechtel who is retiring after 17 years of loyal service to the Congress.

Mariam has served my Senate office since February 1984. Additionally, she served in the office of Congressman Page Belcher from Oklahoma for 6 years before joining my staff.

Everyone who has come in contact with Mariam Bechtel, and I know that she has many friends throughout the Congress, knows of her warm and cheerful manner. When Members needed a room to host a reception or meet-

ing, they knew that Mariam was the one to call. When Kansans needed to touch base in Washington, they knew to call Mariam.

Mariam has always gone that extra mile—to help a fellow Senator, their constituents, and of course, Kansans.

I ask my colleagues to join me in wishing Mariam and her husband Charlie all the best in their retirement. And thank you Mariam for your dedicated service to me and to the Senate.

PRASAD SHARMA

Mr. DOLE. Mr. President, I rise today to say farewell and thank you to Prasad Sharma who has served my office as a legislative correspondent and staff assistant for the past year. Prasad was recently accepted by the Emory University School of Law, a high honor which he richly deserves.

A Kansan himself, Prasad has been a real asset. He has kept the people of Kansas informed about important events in Washington, served a vital role on my defense and national security team, and Prasad has always been someone to rely on when things needed to get done.

I ask my colleagues to join me in wishing Prasad Sharma all the best at Emory and in his future endeavors. He is someone I know we will hear a lot more from in the years to come, because he is an outstanding young man.

ELDERCARE

Mr. DOLE. Mr. President, this week marks the 30th anniversary of Medicare—the Health Care Program that currently serves 4 million disabled Americans and about 33 million elderly Americans.

Anniversaries are normally a time for celebration. But, this 30th anniversary is a time of great concern.

As we all know, the Medicare trustees, three of whom are members of the President's Cabinet, have warned us that, at best, Medicare has only seven more anniversaries left before going bankrupt.

Mr. President, I believe one of the most important responsibilities of this Congress is to preserve, improve, and protect Medicare so that it does not go bankrupt and will continue to be there for Americans for the next 30 years, and the 30 years beyond that.

Before I look to the future, however, I want to take just a minute to look to the past.

When Medicare was debated in Congress in 1965, I voted against it.

And there are those at the Democrat National Committee who seem to believe that vote is either proof that I am out to gut Medicare, or that it disqualifies me from participating in this debate.

I only wish they would devote as much energy to the search for solutions to Medicare's current fiscal crisis, as they do to questioning the motives of others.

My vote against Medicare was not a decision I made lightly. I knew my vote would lead to a round of criticism. But in the end, I voted against the legislation for several reasons.

The first reason was because I had concerns that we would be establishing an entitlement for many Americans who truly were not in need of Government assistance. We all know that by their very nature, entitlements are designed to grow. And, as we have seen over the past 30 years, the Medicare entitlement has done precisely that.

In 1965, when Medicare was enacted, the House Ways and Means Committee predicted that the part A portion would cost \$9 billion in 1990. Needless to say, they were wrong. By 1974, we were spending \$9 billion—just 8 years after Medicare's passage. This year, Medicare part A will cost \$158 billion—58 times the amount it cost in its first year.

Second, I was concerned that this growing entitlement would be financed either through higher taxes or deficit spending, and that both of these options would compromise the futures of generations to come. Again, by 1974, the tax rate to finance the program was already twice the initial projection.

And the third factor behind my vote was that I shared many of the concerns articulated by the then President of the American Medical Association, Dr. Leonard Larson, who said:

The administration's medical care proposal, if enacted, would certainly represent the first major, irreversible step toward the complete socialization of medical care. The bill does not provide insurance or prepayment of any type, but compels one segment of our population to underwrite a socialized program of health care for another, regardless of need.

Mr. President, the AMA at that time put forward an alternative proposal, called Eldercare, which I supported.

I must say as I look back on that day in 1965 and on the weeks before the debate, and I have gone back to check the CONGRESSIONAL RECORD and some of the statements made by my colleagues, Elder Care had many more benefits than Medicare. We covered prescription drugs in Elder Care, which are still not covered today under Medicare. In addition, that plan would have cost less because it took into account the beneficiaries' ability to pay.

Would Medicare be in better shape today had my concerns been addressed at its creation? I believe it would. And I also believe that if nothing is done and Medicare goes bankrupt, the American public will not look back at 1965 to decide where to fix blame—they will look back to 1995.

So, where do we go from here?

Mr. President, we cannot turn back the clock. But, we can learn from the past. And, that means doing what is necessary to improve Medicare so that it can move successfully into the 21st century.

Despite the rhetoric coming out of the White House and the Democratic