This person deserves better. He fought two wars for our country, and he should not live his golden years in fear of getting sick. With his income, he can't pay more for health care. It is wrong that the new majority is asking people like him to do so.

The second message is from Ethel from San Rafael. She wrote to let me know that ''Medicare is only barely sufficient as it is. (She continued that) ''A cut would be a death knell to help as we know it.''

So, I ask you if Medicare is barely sufficient now, what will it be like if the new majority has its way and cuts $167 billion and weakens anti-fraud laws?

Finally, an elderly gentleman named Vernon, wants all of us to know that he can't afford to pay more for Medicare. He said, ''The old folks need money for food. Cutting Medicare will take away our food money.''

How much food will Vernon give up, Mr. Speaker, when the new majority cuts Medicare by $167 billion? Does this Congress really intend for people like Vernon to give up food in order to pay for a doctor's visit or to pay for prescription drugs?

I hope that our colleagues in the majority listen to the heartfelt pleas of these people. I hope that members of the new majority can open their eyes to the devastation that will occur if their Medicare plan is enacted.

So get a clue, my friends. Listen to the American people and stop raiding Medicare for your special interest tax break. Start working with Democrats.

I'm proud to say that I voted for the President's budget, which preserves the solvency of the Medicare system without damaging cuts to services. This Democratic alternative prevents outrageous increases in premiums and copayments, and maintains strong anti-fraud policies.

Let's work together to strengthen Medicare, and preserve it for future generations.

Again, I want to thank Congressman FRANK PALLONE for his leadership on this issue. You have done a terrific job of protecting Medicare from cuts, and it is always a pleasure to work with you.

□ 2300

The SPEAKER pro tempore (Mr. NEY). Under a previous order of the House, the gentleman from California [Mr. ROHRABACHER] is recognized for 5 minutes.

[Mr. ROHRABACHER addressed the house. His remarks will appear hereafter in the Extensions of Remarks.]

FEDERAL SPENDING

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

Mr. KINGSTON. Mr. Speaker, let me start off by saying I have got great news for Ethel in San Rafael, California and Vern in California also. The Republican plan increases their Medicare from $190 billion to $304 billion. Good news.

Ms. WOOLSEY. Will the gentleman yield?

Mr. KINGSTON. Mr. Speaker, I will be glad to send them the information since they are not getting it from that side of the aisle. I will be happy to. Let me yield to the gentlewoman for 20 seconds. But let the Record show Democrats earlier would not yield to me for even 10 seconds. But I got some other stuff I want to talk about.

Ms. WOOLSEY. Mr. Speaker, I would have yielded for 10 seconds, believe me.

I would like to point out that Medicare is not growing to cover the cost of inflation, nor the cost of the need for the services and the people who will be needing those services. One thing is increasing an amount, the other thing is to increase the amount to cover those who will be using the benefit.

Mr. KINGSTON. Reclaiming the time, I appreciate that point. Our budget increases Medicare from $5,000 to $7,000 per person in anticipation of new enrollees, so that includes new enrollees. Again, I will be happy to send that information to your constituents and work with you on a bipartisan basis.

Let me also, though, address the good old days of Democrat leadership because that is one of the things I really wanted to talk about since the theme on the Democrat side seems to be let us go back to Democrat leadership. What happened when President Clinton, the Democrats controlled the Senate, the House and the White House? The highest tax increase in the history of America, $265 billion. Highest spending, $300 billion increase in spending. A $16 billion stimulus package that President Clinton and the Democrats in the Senate and the Democrats in the House passed, which included, among other important things, is cataloguing fish.

They did not propose a balanced budget when the Democrats controlled the House, the Senate and the White House. The Republicans on the other hand, have passed a balanced budget out of this House for the first time in 26 years. The balanced budget amendment did not get out of the House under Democrat leadership; did pass under Republican leadership.

On welfare reform, the President of the United States in 1992 promised to end welfare reform as we know it, had a Democrat House, a Democrat Senate, and did not introduce a welfare bill. We have passed two out of this body and in the Senate, one passing on a bipartisan vote of 87–12. It was vetoed not once but twice by the President.

On health care, the President of the United States, when he had the two Chambers, tried to pass a nationalized health care plan and increased the bureaucracy by 59 different agencies. It did not move under the Republican House and the Republican Senate. We have health care reform that is making health care more affordable and more accessible. It is now in conference. It looks good.

New bureaucracy, endless growth of the Government under President Clinton , including AmeriCorps, which is a volunteer program that pays volunteers $26,000 per volunteer. Let me repeat that: $26,000 per volunteer. We are trying to downsize the bureaucracy.

Student loans, very little happened under student loans under President Clinton. A lot of defaults, of course, but implemented the first stage of government takeover of the student loan program. We, on the other hand, have a budget that has increased student loans from $24 billion to $36 billion. Be happy to share that with any Democrat who does not have that information.

When the Democrats controlled the Senate and the House and the White House, there were no major reforms of Congress. Under the Republican Congress, we passed Congressional Accountability Act, a gift ban. We have cut the staff by one-third. We have required a two-thirds vote for an increase in taxes. We are considering campaign reform as we speak.

For the senior citizens that the Democrats used to love to say that they are great champions of, under President Clinton and the Democrat House and the Democrat Senate, there was an increase on Social Security taxes, taxes were increased on Social Security. Under the Republican House, we have decreased those taxes. Now, that of course was vetoed by the President.

We have also passed an earnings limitation so that seniors who want to can stay in the workplace longer. Even little things, I am not going to say this is little at all, but I mean, things that are less visible, we have done many, many changes on. I will be happy to share that.

The SPEAKER pro tempore. Under the Speaker's announced policy of May 12, 1995, the gentleman from New Jersey [Mr. PALLONE] is recognized for one-half the time remaining before midnight as the designee of the minority leader.

The Chair recognizes the gentleman from New Jersey.

Mr. PALLONE. Mr. Speaker, I just wanted to begin this special order tonight by pointing out that this evening, when we had the Democratic motion to instruct on the budget, that a major point that was being made in that motion to instruct is that the budget resolution that was adopted here in the House that is put forward by the Republican leadership basically denies basic protection on health care for seniors.

Essentially what we have in this budget resolution are major attacks on the Medicare Program, and also on the Medicaid Program. As a result, in the motion to instruct that was put forward by the Democrats this evening,

we were trying to seek to retain current protections under the law against excessive Medicare charges by doctors and hospitals to preserve Federal nursing home standards and also to make sure that we do not have a recurrence of the spousal impoverishment and liens on homes that occurred before protections were put into place for the Medicaid Program, again to protect seniors.

Part of this motion to instruct was for us as Democrats to make the point that this Republican budget, which we will be considering again probably in conference within the next couple of weeks, essentially takes us down the same path that we were on last year with regard to fiscal priorities, especially with regard to our Nation's seniors. May is Older Americans Month, and I want to emphasize that this Republican budget truly reflects the hurt, if you will, that the Republican leadership seeks to implement on seniors, particularly on the Medicare and Medicaid Programs.

The Republican Medicare plan will result in seniors paying more out of their own pockets for substandard care while cutting over $160 billion to pay for tax breaks for the wealthy. More important than these steep cuts are the extreme structural change that the Republican leadership is trying to impose on seniors. Their plan eliminates the choice of doctors and hospitals that seniors now enjoy by basically forcing them into managed care.

This Republican plan will allow doctors to charge seniors extra money beyond the expenses that Medicare will cover. This means that seniors will have to pay doctors a lot more money out of their own pocket. To compound all of this, the cuts that the Republicans are imposing will force many hospitals to close. The funding that hospitals, home health care service, skilled nursing facilities receive will be sharply reduced. The bottom line is that with that reduced resource, many seniors will suffer.

I have to say once again that I believe very strongly that Medicare should not even be discussed in the context of the budget resolution. If we are looking to improve Medicare, we should increase preventive services and cut the waste, fraud and abuse in the Medicare Program. These are the types of things that will ensure Medicare's future while providing quality health care for our Nation's seniors. Instead, the Republican leadership is essentially going down a path of destroying Medicare and also Medicaid.

I wanted to just point out again, and I know I have a number of speakers here tonight who want to join in this special order, and I would like to yield some time to them. But essentially we went through the same process in 1995 last year with the Republican leadership in their budget trying to essentially change both the Medicare and the Medicaid Programs in very negative ways.

As Democrats, we pointed out that last year, essentially what we tried to do was to prevent the Republicans from doubling Medicare part B premiums, eliminating doctor choice, cutting Medicare premium assistance for low-income seniors, repealing Federal nursing home quality standards, putting homes and family farms of elderly couples at risk for nursing home care. And also the Republicans were trying to force adult children to be financially liable for their parents' nursing home bills.

Mr. Speaker, we were very successful as Democrats in essentially putting to rest these changes that the Republicans were trying to make last year in the Medicare program. We have the same phenomenon again this year. The budget that was already adopted here, the Republican leadership that was adopted already on the floor and which will come up again in a few weeks in conference before it finally is adopted by both the House and the Senate Republican leadership, still plans to eliminate doctor and hospital choice by forcing seniors into Medicare managed care plans. It also allows doctors to charge extra out-of-pocket costs to seniors who remain in medicare fee-for-service, severely cuts Medicare and Medicaid hospital funding, forcing many hospitals to close their doors on seniors, eliminates coverage guarantees for over 4 million elderly Americans who need nursing home care, and also further erodes Medicare's solvency by creating wealthy healthy plans, leaving many seniors with higher costs and less care.

We have the same thing again, which is Medicare cuts to pay for tax care to pay for tax breaks for wealthy Americans, and a continued decline in the quality of service and the ability of our senior citizens to obtain quality Medicare programs and forcing them to pay more out of their own pockets.

So the record, the Republican leadership record is the same. It is just the same old plan that we dealt with last year that we are going to have rehashed again here in the House in 1996.

With that, I would like to introduce and yield some time now to the gentleman from Ohio [Mr. BROWN].

Mr. BROWN of Ohio. Thank you, Mr. PALLONE, for your work in opposing these extreme Gingrich Medicare and Medicaid plans.

What is amazing, and I want to take one small part out of what you said. The Gingrich plan and what they are trying to do in this body today is not much different from when they shut the government down last year. Medicare cuts, student loan cuts, cuts in the environment, all to pay for tax breaks for the richest people in society.

One particular issue that you touched on is what they want to do to nursing home protections. Last year we thought we had won that battle. We thought that they would not try that again. Again, this year in their budget and in our committee, in the Committee on Commerce, and the Health Subcommittee when they are talking about these issues, the Gingrich plan again says let us repeal all the protections for nursing homes that this Congress, with President Reagan, passed 10 years ago.

I though in this society there was a consensus around making sure that there were protections against oversedation, protections against restraints or senior citizens in nursing homes.

□ 2315

I thought there was a consensus in the society that they in fact would be protected if those laws would be in place to make nursing homes safer because clearly those laws passed by the Democratic Congress with the Republican President in the mid-1980's made sense and would stay in place.

Yet the Gingrich extremists, this Congress, has tried to pull that consensus apart when a great majority, probably 90 percent of the public, believes, yes, we should have those protections in nursing homes. Yet this Gingrich extremist group says, ''Let's not; let's repeal it, turn it over to the States.'' That was the problem we had in the beginning where State governments simply were not providing for safe nursing homes with the kinds of regulation that is necessary to protect those senior citizens in nursing homes.

And not only are they making cuts in Medicare and Medicaid to pay for tax breaks for the richest people in society, at the same time they are stripping away those protections for the safety of our parents and our grandparents in nursing homes.

Mr. Speaker, it just simply does not make sense, and they are trying to explode a consensus, these Gingrich extremists are trying to explode this consensus that we have built in this country on this issue, on clean air laws, on safe drinking water laws, on pure food laws, on worker safety laws. They are trying to explode this consensus that society in this great country has built, and I simply do not understand it.

Mr. PALLONE. Well, I think, if the gentleman will yield back, the problem is that they are trying to squeeze all of this money out of the budget through the Medicare and the Medicaid programs, and the gentleman from Ohio [Mr. BROWN] makes the point that essentially what is happening here is they are turning over, if you will, the Medicaid program in a block grant to the States and letting the States essentially do what they want, whether that means no nursing home standards or whatever, in order to try to save money, to squeeze money out of Medicaid again primarily to pay for these tax breaks for the wealthy. That is what motivates this. It is all budget driven.

And I want to thank the gentleman for his statements, and I would like to yield now to the gentlewoman from North Carolina [Mrs. CLAYTON].

Mrs. CLAYTON. Thank you for yielding, and I also want to thank you for

your leadership in keeping us focused on what the implications of these cuts are, and I would just like to make my brief remarks on emphasis of rural communities.

I come from North Carolina, and my district, North Carolina, including my district, is rural and represents a rural America which indeed suffers already from other economic indicators. We are communities that have less of infrastructure. We are communities of lower wages. We are communities having less of conveniences already.

Now, when you combine that with having these indiscriminate cuts of reducing in the amount that senior citizens can get and hospitals can get, that is going to further impact those poorest, must vulnerable of our society, and that means rural hospitals, which are already operating at the margin because they have more than 80 percent of all of their pay coming from either Medicare or Medicaid. So they are already over-dependent on Medicare and Medicaid.

That would mean more closing of hospitals in rural areas, yet this Congress's particular majority say they believe in rural America. They say that, but people will see indeed what they do.

What they want is a cheaper health service, not a better health service, and I think we should make the point that Democrats would like to see that senior citizens have better health care. We would like to see a better health care plan, not necessarily a cheaper health care plan. Cheaper is not always less costly, because in the long run, when the society has less health care, that would mean there will be less providers. Already we are suffering from a disproportion of health providers in hospitals in rural areas.

So cheaper does not mean better. It means always that you get less for the quality of services for the money that you offer.

So we do not want to deny senior citizens quality health care under the disguise of having a cheaper plan. What we want is a better health plan that does not cost as much.

And you are correct. What we should focus on is reducing—reducing the preventive—I mean increasing preventative programs that will give us better quality of health. Then those of us in rural areas can make a better life for ourselves.

So I just want to add to the discussion that those of us who live in rural America will be hurt far greater than those of us who live in the rest of America. Already we are disproportionately suffering from the lack of services, and now to put this greater cut on our rural hospitals, that means that one-fourth of the hospitals in rural America will be finding themselves threatened with closure, and I think that is grossly unfair.

Rural Americans also suffer with high percentage of people who are lower income, and 63 percent of those who are senior citizens in rural areas happen to live in poverty. So you know what the cuts in Medicare and Medicaid will do to that population, and I yield back the time and thank the gentleman for his leadership.

Mr. PALLONE. Mr. Speaker, I think the gentlewoman makes a very good point, and I think a lot of people do not realize that whether it is rural areas, or suburban areas, or urban areas, my district is mostly suburban, but the majority of the hospitals are more than 50 percent Medicare-Medicaid dependent in my area, and so when you talk about cuts in Medicare and Medicaid, even in a suburban district like that I represent, you are talking about most of the income that these hospitals have. They will not be able to continue to operate with the level of cuts that the Republicans have proposed.

And they are trying to say that they are doing this in order to save Medicare. In reality what they are really doing is using Medicare as the focal point of their budget in order to achieve, you know, tax breaks, and to deal with their budget, they are cutting, making these massive cuts in Medicare and Medicaid, and the result is that the hospitals in many areas will close, not only in rural areas, but even in some suburban areas.

Mrs. CLAYTON. I think the American people will judge them by what they do. They say they are for America, but what they really are for is for the richest of America, and they do not mind who suffers in the process, whether senior citizens or whatever.

Mr. PALLONE. Exactly. Thank you.

I like to yield now to the gentleman from Michigan [Mr. BONIOR], our minority whip.

Mr. BONIOR. I thank my friend for taking this time and for laying out for us, I think rather clearly, this evening how the Republican agenda with respect to Medicare—and it really has not changed. You are absolutely right. Although we were able to beat back some of these Draconian measures in terms of cuts and increased charges for our seniors in order to pay for the huge tax breaks that they want to provide for the wealthiest in this country, we will beat that back, get the President to veto that particular provision. They have come back again this year, and they want to do it all over again. It is like deja vu all over again.

And the gentlewoman from North Carolina is absolutely correct in terms of what this is going to do, what their plan is going to do to hospitals, and it is not just rural hospitals, but she is absolutely correct. It is going to really hurt rural hospitals. We are talking roughly about $5 million out of hospitals, and that means many hospitals will be closing in this country, and the services that they provide for those who remain open will be diminished in terms of what they provide today.

But in metropolitan areas in southeastern Michigan where I come from, the Republican proposal last year would have cost those hospitals $2.2 billion over the 7 years of their budget plan. Now, what does that mean? That means 5,000 people with good-paying jobs would have to be laid off in those hospitals. That means poor service for the people who are in those hospitals.

And on top of all of that we learn that the Republican proposal to cut Medicare in order to give tax breaks to the wealthiest in our country today, the extremist Gingrich idea here would also do something that is beyond me. That is, it would allow people to be billed by their doctors above what Medicare allows, and this extra billing is disastrous for our seniors. Sixty percent of our seniors today in this country have incomes of $10,000 a year or less. That includes their Social Security and any annuity or retirement they may have; 60 percent, $10,000 or less. They cannot afford to go to a doctor, have Medicare pick up x amount, and then have the doctor send them a bill, and these bills start piling up on their bureau drawers, and they look at them every day, and they have this terrible feeling they are not meeting their obligations, and these bills are there staring them in the face, hundreds of dollars, thousands of dollars.

This billing practice that they want to institute is not in the best interests of our elderly people in this country. They cannot afford it. Is not fair. And you know this is all part of their plan to put together a pot of money in order to provide tax breaks for the wealthiest individuals in our society today.

So I thank my friend from New Jersey [Mr. PALLONE] for laying these facts out for us today, laying out the fact that what they really want to do is break this system, and they want to do it by moving people into managed care so those people who are left in fee for services are going to have humongous rates charged to them, and they want to do it by providing medical savings accounts which go to the healthy and the wealthy in this country, and not anyone else, and basically take away from the basic structure of Medicare.

They really want to kill Medicare. We know that. I think the general public understands that. They are not interested in reforming it. They want to change it and change it permanently, and you really basically get rid of it.

And Medicare has been a very good system. It has worked for seniors in this country for many, many years. Before we had Medicare in 1965, literally hundreds of thousands of seniors were indigent in this country. A large percentage of them were indigent because they could not afford health care, they have to rely on their families. This has helped bring literally tens of millions of seniors out of poverty and helped them live with dignity in their later years.

We are here to protect that program. We, as you point out correctly, understand that there needs to be some streamlining, we need to make some

savings, we need to get rid of the waste, the fraud and the abuse in the system. And we are committed to do that. But we are not committed to destroy a program that has provided for our seniors in this country.

And I thank my colleague for his determination, for his leadership on this issue and for raising this issue tonight for the American people to focus in on because in fact we are in another battle, and it is a battle to save Medicare for our elderly in this country.

Mr. PALLONE. Mr. Speaker, I want to thank the gentleman from Michigan and just point out again, you know, I know that our colleagues on the other side always say, well, people will have choice, they do not have to go into managed care. But the reality is the way the system is set up by the Republican leadership, people are forced into managed care. You have a rate differential, which means basically that doctors will get reimbursed more or less depending on which system seniors opt for, and then you have this balanced billing. So essentially what happens is seniors find that since they have to spend a lot more money out of pocket to pay the doctor, if they stay in the traditional system where they can choose their own doctor, they are literally forced into the managed care system because under that system they do not have to pay the extra money out of pocket to their doctor.

So when the Republicans say, oh, you have a choice, the reality is you do not have a choice. You are forced into managed care. Otherwise you have to stay in a system where the cost and how much you have to pay out of pocket just gets to be more and more. And so in reality you do not have a choice. You lose your choice of doctor and also maybe your choice of hospital in a lot of cases, and I think that is important to point out.

I yield now to the gentlewoman from Connecticut, who has done so much on this Medicare issue and made the point so well on it.

Ms. DELAURO. It is a pleasure to join my colleagues here tonight, and I just like to pick up a comment that our colleague from Michigan pointed out, and that is, if you need to put the Medicare debate in a context, we live in a great country, we really do, and in 1965 we passed a Medicare system. As a matter of fact as an aside, it was the current Republican candidate for President, BOB DOLE, who said that he was proud of his vote back then and he voted against Medicare because he did not believe that it was a system that worked. And we ought to keep that in mind. This was not a comment that he did not believe it would work in 1965. In 1996, when he was running for President of the United States, he does not believe that this is a system that works. We ought to keep that squarely in mind.

But the fact is that it was passed, and it was a stroke of genius in terms of health care for seniors in this country.

□ 2330

Before Medicare, less than 50 percent of seniors in this Nation had health care coverage in any way. Today, 99 percent of seniors are covered. They have health care. They do not have to worry that they are going to be wiped out because of an illness that they did not create but they were unfortunate enough to get.

I think we need to talk about this debate on Medicare and Medicaid in the context of what this system has meant to people in this country. As my colleagues have pointed out, last year in the Republican budget they intended to make a $270 billion cut in Medicaid to pay for tax breaks, $245 billion in tax breaks for the wealthiest in this country.

What happened around the Nation, the hue and cry of seniors, of their families, of people who believed that this was the wrong thing to do, stopped them from doing the kinds of things that my colleague, the gentleman from New Jersey, has pointed out in his chart. What they wanted to do was to double the premiums, to increase the copayments, increase the deductibles, do away with choice, make it more difficult for hospitals, make it more difficult for rural areas.

Quite frankly, we thought we had beat back the barbarians. But instead, what we see is in the 1997 budget the very same set of premises, the very same policy being brought forward again. This is a new budget, but it is the same set of policies with regard to Medicare and Medicaid and the same sweeping and dangerous cuts.

To quote the gentleman from Georgia, Mr. GINGRICH, he said ''We can't do it all at once.'' The goal for Mr. GINGRICH, he would like to see Medicare wither on the vine, but ''we can't do it all at once. We need to do it in pieces.'' So we tried in 1995 and we got pushed back, so we are going to try again in 1996, and God help us in 1997, because it will come back again.

The Republicans got a little trickier this time in this budget. They learned a lesson: Don't let anything sit around for too long so that the American public has some time to notice what is going on and to learn about it, because if they learn about it and they know about it, they are very smart and they will rise up and they will say that we are not going to do this. Sixty percent of the public said to the President of the United States that they wanted him to veto that budget because it contained these kinds of Medicare cuts.

This new budget, and I put ''new'' in quotes, moved through this House in a week, moved through this House in 1 week because they knew that if they let it stay around long enough, we would see the exact same set of premises, the exact same policy with regard to Medicare and Medicaid that they tried to impose on the American public in the last budget, last year. It is $168 billion in Medicaid and Medicare cuts this time around. It is done in 6 years versus 7 years. It would have sliced 19 percent last year from Medicare. This year it is 17 percent, a 2 percent difference. The American public should not be fooled. It is the exact some policy.

Let us contrast the cut with the amount of the tax break for the wealthy. It is $168 billion in a tax cut in Medicare and it is $176 to $180 billion in a tax break that will benefit the wealthiest in this country. It is the same exact equation that was set up in the last budget. The public should not be fooled.

If we move to Medicaid, or as my colleagues has pointed out, in these areas we have the same things that exist. The restrictions that are now on doctors and hospitals not to overcharge people beyond what Medicare will take care of will be removed: increased bills, out-of-pocket costs for seniors; nursing home standards not enforced. And we know what that means in the quality of life and the quality of care for those we love who go into nursing homes. We know also what they want to do to spouses and children in being able to attack their assets.

The long and the short of it is that we are going to make this fight day in and day out in the next several weeks, in the next several months, because the public should not be fooled by the same set of policies that would foist upon American seniors a second-rate health care system. It is wrong, it is unfair, it is not what this Nation is about. It is not what our values are. It is not what our priorities are. We are going to make the same fight and the same cases that we did over the last several months. This is not going to rest until we turn this policy around and do what is right and do what is best for America's seniors and the American people.

THE ACCOMPLISHMENTS OF THE 104TH CONGRESS

The SPEAKER pro tempore (Mr. NEY). Under the Speaker's announced policy of May 12, 1995, the gentleman from Pennsylvania [Mr. FOX] is recognized for the balance of the time remaining before midnight as the designee of the majority leader.

Mr. FOX of Pennsylvania. Mr. Speaker, I appreciate the opportunity to address my colleagues and speak to the House regarding some important issues. I think it is important at this time, as we approach the end of the week here in the second session of the 104th Congress, to really look at the fine record of achievement in a bipartisan House that we have to this date brought about.

We only have to look at the fact that we have passed $250 billion in reductions of taxes for families here in the United States. We only have to look at the fact that we have reduced Federal spending in duplicative programs, not in worthwhile programs, obviously. We have passed the first balanced budget since 1969, very important to this economy and to this country.