

out at us. There are very many flaws in this bill. Why are we trying to rush this forward without putting it together in a way the military retiree has some comfort? Is it absolutely necessary to tell them that if you enter this program for your own benefit, you have to give up military medical facilities completely, you can never go back?

A lot of times in today's health care system people are saying, I want to be able to choose my own doctor. What this demonstration program says is you have to give up the doctor you had or you cannot get in the program. That makes no sense. But after all, you have X number of cosponsors, you have X number of people whose heart is certainly in it, and my heart is in it, and the reason I am up here today is to tell my colleagues we have to put our heads in it as well as our hearts, and it is not impossible to work these out, but if we are going to move forward and simply say all of these are going to be resolved, unfortunately the end result will be a 3-year program which will fail. If we want a successful program, we ought to sit down and work out these difficulties, we will have a higher chance of succeeding, and perhaps my admonitions will go unheeded, and I am sorry, because it will be the military retirees who will have suffered.

Mr. MORAN of Virginia. Mr. Chairman, will the gentleman yield?

Mr. THOMAS. I yield to the gentleman from Virginia.

Mr. MORAN of Virginia. Mr. Chairman, I was waiting for the gentleman to catch his breath.

Mr. THOMAS. Mr. Chairman, reclaiming my time, when I feel strongly about an issue and I believe that folks are not being treated fairly, I do get impassioned.

Mr. MORAN of Virginia. Mr. Chairman, I am very much impressed, and I appreciate the gentleman bringing up these issues.

What I wanted to say to the gentleman, though, we have talked with the insurance companies. The fact is that with a separate risk pool, given the fact that these people are eligible for Medicare, Medicare is a payer of first resort, the insurance premiums are not going to be exorbitant as the gentleman has suggested, they are going to be quite affordable.

Mr. THOMAS. Mr. Chairman, reclaiming my time, I would inquire of the gentleman, under the current program with military retirees, is Medicare A the first payer?

Mr. MORAN of Virginia. Mr. Chairman, if the gentleman will yield further, if one goes to a military treatment facility, it is not the first payer, but for many, there is about 70 percent of military retirees.

Mr. THOMAS. Mr. Chairman, again reclaiming my time, so for the military retirees who use a military facility, that currently is the first payer, but they are denied the ability to go there; if they enter into this dem-

onstration program, they are forced to find medical services elsewhere if they want to go in the program.

Mr. Chairman, I reserve the balance of my time.

Mr. THORNBERRY. Mr. Chairman, I yield 30 seconds to the gentleman from California (Mr. CUNNINGHAM).

Mr. CUNNINGHAM. Mr. Chairman, the rush is that World War II veterans, the average age is 72 years of age. They are not going to be around. The Thomas-Stump bill I applaud for what they are trying to do. We are both trying to do the same thing to help veterans.

But the Moran bill, the original Moran-Bond bill was limited, it only had two sites. The Thornberry-Watts-Cunningham bill put in \$1.5 billion to a full program. That is what we need to do. This is a compromise between the 2 bills. Subvention does not give them enough care; it is a Band-Aid. They do not have access to TriCare. But I ask my colleagues to support this, and I look forward to working with the gentleman from California (Mr. THOMAS) because he is trying to do the same thing we are.

The CHAIRMAN pro tempore (Mr. PEASE). The Committee will rise informally.

The SPEAKER pro tempore (Mr. MICA) assumed the chair.

FURTHER MESSAGE FROM THE SENATE

A further message from the Senate by Mr. Lundregan, one of its clerks, announced that the Senate passed a concurrent resolution of the following title, in which concurrence of the House is requested:

S. Con. Res. 98. Concurrent resolution providing for a conditional adjournment or recess of the Senate and the House of Representatives.

The SPEAKER pro tempore. The Committee will resume its sitting.

NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 1999

The Committee resumed its sitting.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentleman from the District of Columbia (Ms. NORTON).

Ms. NORTON. Mr. Chairman, I thank the gentleman for yielding me this time, and I rise in strong support of the Moran-Thornberry amendment.

I sat on the Subcommittee on Civil Service, and I have a full appreciation, because I heard the quagmire of technical problems associated with ensuring medical care for Medicare-eligible veterans. There are risks associated with being a part of any control group. I do not for a moment believe that this body is going to leave any veterans who decide to go into this program in a lurch at the end of the period.

I do think it is unthinkable to let this gap in health care for these veterans to go on any longer. I do think this is Congress at its best. We did not

know what to do after we heard this testimony. We said let us do a demonstration project and learn from it; that will allow us to know whether we spread it or change it or fix it.

Moreover, these are the first people to be allowed into the FEHBP program other than the traditional clients programs. I think we will learn something about FEHBP as well, and I think the people to learn it from are veterans who have been left out of their full right to medical care.

Mr. THORNBERRY. Mr. Chairman, I yield 1 minute to the distinguished gentleman from Indiana (Mr. BUYER), chairman of the Subcommittee on Military Personnel.

Mr. BUYER. Mr. Chairman, I would like everyone to recognize, this has been one of the consequences of base closures. Many of the retirees, they located next to these military treatment facilities and now that the bases have closed, they are unwilling to move, and they do not want to move. They are stationed where they are. So we are dealing with some cleanup work to do from base closures, and that is what this is about.

I want to recognize the gentleman from California (Mr. THOMAS) on the Subcommittee on Military Personnel whose letter we received, we made it a part of the RECORD; not only the gentleman from California (Mr. THOMAS), but the gentleman from Texas (Mr. ARCHER), so we are well aware of their objections.

We recognize that the Committee on Commerce and the Committee on Ways and Means were not committees of jurisdiction on this, but what I want to say to the gentleman is that invitations were sent out, there were meetings with CBO and the Committee on the Budget and the Committee on Government Reform and Oversight, and the Committee on National Security on this. The gentleman has raised some very interesting points here today, and what I would like to do between now and conference is for us to work together on this as we move toward a demonstration.

I also want to compliment the gentleman from Virginia (Mr. MORAN) and the gentleman from Oklahoma (Mr. WATTS) and the gentleman from Texas (Mr. THORNBERRY). I appreciate them accepting that one of these sites should also be one of the Medicare subvention sites so we completely understand what we are doing, and I am glad we are not moving to the total phase-in, but only a limited pilot.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentleman from Florida (Ms. BROWN).

Ms. BROWN of Florida. Mr. Chairman, I rise in strong support of this amendment and would like to commend my colleagues, the gentleman from Oklahoma (Mr. WATTS) and the gentleman from Virginia (Mr. MORAN) for their leadership in this area.

As a Member of the House Committee on Veterans' Affairs and a representative from Florida, I am very concerned