

is the freshman bill. That is the first point that he makes.

The second point that he makes that is unique about the freshman bill is that it significantly bans soft money, as the Shays-Meehan bill also does. But the freshman bill bans the soft money to the Federal parties. He points out that the soft money loophole, whereas perhaps well-intentioned at the beginning, over the years has been abused. It has been. That is the greatest abuse in our system, the soft money loophole that allows the money that flows outside the regulated system from corporations, from labor unions, from wealthy individuals. That is what is addressed in the freshman bill very significantly.

A third point that he makes is the political realities. The freshman bill passes the political realism test. We are going to have to avoid the extremes. We do that, whether we are talking about free TV or whether you are talking about public financing. The freshman bill is realistic reform that can pass this body in a bipartisan fashion.

The fourth point that he makes that is significant is that the freshman bill breaks the relationship between the Federal officeholder and the chase for soft money. I believe that is unique about the freshman bill, because we prohibit a Federal candidate from soliciting soft money for the Federal parties, but as well as any State party other than his own, I think for any soft money at all; breaks the link between the Federal candidate and the chase for soft money.

These are four important, unique aspects about the freshman bill. It is good legislation that I urge my colleagues to support. First of all, it strengthens the individual role in our campaign system. It does that by preventing the individual role from being drowned in a sea of soft money, so it strengthens the individual; also by providing more information, increasing disclosure, information as to the timeliness of where the money is coming from. Then it stops the erosion of the value of the individual contribution by indexing benefits to the rate of inflation, indexing the contribution limits. That is what is good.

I urge my colleagues to support the freshman bill when it comes up for a vote on the floor.

AMERICANS NEED A PATIENT BILL OF RIGHTS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 21, 1997, the gentleman from Maine (Mr. BALDACCI) is recognized during morning hour debates for 5 minutes.

Mr. BALDACCI. Mr. Speaker, I am pleased to rise this morning to discuss one of the most important issues facing this Congress, the need to adopt a meaningful, comprehensive Patient Bill of Rights. For too long patients

have been forced to wage lonely battles against sometimes callous managed care companies. We have heard too many cases where insurance actuaries, not doctors, make the final decision about a patient's medical care. This is wrong, and we must change it.

For years we have tried to help in the health care debate, and we have tried to adjust here or there to try to help people, working families, throughout Maine and America. Constantly the boxes have changed, and as soon as we try to work on something, the managed care companies figure out a way around it.

The best thing that we can do is to give every single American a bill of rights as it pertains to their health care policies, so regardless of whether the company is putting forward a PPO, an HMO, or whatever they wanted to call it, every single American will have a bill of rights as it pertains to their health care, so they will have their rights, regardless of the policies that a company or individual government entities would like to put forward; every American would have these basic rights.

It is a very important issue for all Americans. As they are being denied care in emergency rooms, as they are being denied the proper drug treatment that has been prescribed by a physician, and as they have been having insurance company bureaucrats making medical decisions and determining where and when and what type of health care individuals should receive, then those insurance companies, those insurance company bureaucrats, ought to be held medically liable. If physicians have to get medical malpractice insurance to protect themselves in their duties, and if insurance company executives are going to make those same decisions, they should also be held medically liable for that decision.

In my State, where there are many seniors that require many prescription drugs, between Parkinson's and other types of drugs that must be taken, they are expensive, and physicians are saying that the right treatment, the right mix has to be given. If it is upset or they cannot use the right medications, it is going to upset that person's health care.

In many cases, insurance companies give lists of drugs that can be given, and no other drugs. In order to appeal those decisions, to have the right treatment, we need to make sure that we have an enforcement mechanism, holding people medically responsible if they are not going to give seniors the types of prescription medication they need to have.

As far as information, it is so vitally important that a patient have the information as to their health care, as to their needs, and not to have that information kept from the patient because of the agreements and contracts that have been worked out behind the scenes between insurance companies and between some physicians. We as

patients, as health care consumers, need to have that information.

I think this is a very important piece of legislation. I have signed the discharge petition that Members have signed to force this issue, in an unprecedented move to have over 218 Members forcing this issue to be debated before this House this week, because it is the most important issue in America today, to make sure that people have an individual Patient Bill of Rights, regardless of the health care they are being offered.

We must have this. It is a bipartisan effort. It knows no party. It is supported throughout America by Republicans, Democrats, Independents, people of all political stripes. It is something we need to do.

In my own State of Maine, where we have approximately 1.2 million people, over 200,000 are unrolled in HMO plans, and more is yet to come. Medicare is being formed into managed care. Other types of insurance companies and business are grouping together.

It is so important and imperative that we get this passed by this Congress this week. If they are going to make the decisions which harm individuals, then insurance companies are going to have to be held medically responsible and medically liable if they are going to be making these decisions. This will make sure that insurers are accountable for their actions.

As we become increasingly dependent upon computers and computerized records, this legislation makes important steps towards insuring confidentiality of medical records. We cannot allow the misuse of private medical information.

Finally, I am pleased that this bill takes steps to insure that plans which cover the drugs are going to cover all drugs which are medically indicated.

Later this week we are going to have an opportunity to vote on this plan offered by our Republican colleagues. While I am pleased that they have offered a plan, their plan leaves many millions uninsured and uncovered. I believe their plan comes up short because not only does it leave them uncovered, but it also does not have an enforcement mechanism to hold the insurance company and team making the decision to a responsible treatment and liability.

This is a bipartisan, comprehensive bill that will give Americans meaningful rights.

URGING MEMBERS TO STUDY THE ARTICLE "STATESMANSHIP AND ITS BETRAYAL"

The SPEAKER pro tempore. Under the Speaker's announced policy of January 21, 1997, the gentleman from Georgia (Mr. BARR) is recognized during morning hour debates for 5 minutes.

Mr. BARR of Georgia. Mr. Speaker, very infrequently I come across an article written by a person that rises so far above and beyond the normal, mundane literature we read daily in newspapers and see and hear visually and