

PROTECTING MEDICARE
ADVANTAGE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2013, the gentleman from Florida (Mr. MURPHY) is recognized for 60 minutes as the designee of the minority leader.

GENERAL LEAVE

Mr. MURPHY of Florida. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the subject of my Special Order.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Florida?

There was no objection.

Mr. MURPHY of Florida. Madam Speaker, there are currently many concerns regarding health insurance in our country, especially among our Nation's seniors. At this time of major transition in our Nation's health care industry, it is critical that seniors enrolled in traditional Medicare and Medicare Advantage can keep the coverage on which they depend.

Unfortunately, proposed cuts to Medicare Advantage are putting these important benefits at risk. This is a very serious situation across the country, and it is of great concern to me, with Florida being home to over 4 million seniors. My district alone has over 160,000 seniors, with more than one-third of them choosing a Medicare Advantage plan whose coverage would be severely impacted by the proposed cuts released in the draft rule that CMS put out in February.

We are already seeing what last year's cuts to Medicare Advantage have meant: smaller networks of doctors, cuts to add-on benefits, and higher out-of-pocket limits. The additional proposed cuts to the program released in February have raised great concerns from my constituents about their coverage and about the potential of having to pay more and having fewer benefits. That is why we are here today, urging the administration to reverse course and keep rates flat for 2015.

At this point, I would like to yield to my good friend Ms. SINEMA from Arizona, who has been fighting tirelessly to protect the seniors in her area as well.

Ms. SINEMA. Thank you, Congressman MURPHY, for hosting this Special Order so that we can stand up and speak out for seniors in our districts. We are here today because CMS, the Centers for Medicare and Medicaid Services, has proposed cuts to Medicare Advantage.

Next week, CMS will publish its final rule. I urge CMS to not cut Medicare Advantage. These cuts will decrease choice, create uncertainty, and undermine access to care for our seniors.

I oppose these cuts. Like Mr. MURPHY and many of our colleagues participating in this Special Order, I have repeatedly called on the Federal Govern-

ment to reconsider its proposal and make no further cuts to Medicare Advantage.

Medicare Advantage is a popular and effective alternative to traditional fee-for-service Medicare, especially in Arizona, where statewide, 38 percent of Medicare-eligible beneficiaries choose a Medicare Advantage plan. In my district, nearly 43 percent of Medicare-eligible beneficiaries choose a Medicare Advantage plan.

Medicare Advantage plans consistently receive high customer satisfaction ratings and are helping to control cost, drive innovation, and improve health outcomes for beneficiaries. I keep saying "beneficiaries." But what I should say is, our parents, our grandparents, and our loved ones. These plans provide affordable, high-quality care for our loved ones.

Bonnie Grant, a proud Arizonan in my district, is in her sixties and lives in Phoenix. Through her Medicare Advantage plan, she has access to a transportation system called Van Go. Bonnie uses the service to go shopping and to go other places "instead of being stuck at home." She said that it helps because "instead of being holed up in your home," she can be engaged in the community and enjoy her life. The Van Go benefit is the type of creative service offered by Medicare Advantage plans that improves the well-being of enrollees.

Joseph Ford, another constituent, lives in suburban Phoenix. He was disabled in a car accident. The hands-on managed care he receives through his Medicare Advantage plan, including in-home visits, allows Mr. Ford to stay in his home and live a fuller life. Keeping individuals like Mr. Ford in his home instead of in institutional care facilities is better for the beneficiary and presents a significant cost savings to the Medicaid and Medicare programs.

I am concerned that the proposed payment reductions for 2015 will undermine the choices made by my fellow Arizonans, by Ms. Grant, by Mr. Ford, and by others in my congressional district by causing our loved ones to lose needed services and to experience increases in premiums. These cuts could also have the unintended and costly consequence of putting our seniors at risk of being placed in institutions, rather than staying in their homes.

Instead of cutting funding for these popular plans, we should work together to find reasonable solutions that drive down cost, increase choice, address waste, fraud, and abuse, spur innovation, and ultimately improve the quality of life provided to our seniors.

Again, I urge CMS to maintain payment levels for Medicare Advantage so that our loved ones do not experience increased out-of-pocket costs, negative disruptions, or confusion in 2015.

Thank you, Congressman MURPHY, for working with me on this important issue and for hosting this Special Order today.

Mr. MURPHY of Florida. I thank the gentlelady from Arizona for her com-

ments and for reminding us that these aren't simply numbers on a ledger, that all of these beneficiaries are folks we know. These are our parents. These are our grandparents. They are more than just numbers.

And like Ms. SINEMA, I am constantly hearing from residents in my district about the negative impact these cuts would have on the well-being of their spouses, their parents, or personally, including Cheryl from Palm Beach Gardens, in my district.

After doing everything right to plan for her retirement, like many seniors do, Cheryl and her husband saw their savings cut in half during difficult economic times. Now they are seeing their health care options limited and their out-of-pocket costs going up. These are changes they simply cannot afford.

I agree with Cheryl that it is unfair to shift the burden onto those on fixed incomes, those who have little resources to make up the difference. Seniors cannot afford further cuts and the negative consequences if these misguided proposals move forward.

At this point, I would like to take a moment to yield to the general, Mr. ENYART from Illinois, and thank him for his leadership in fighting for seniors on behalf of Illinois and the rest of our country.

Mr. ENYART. I thank the gentleman from Florida.

Madam Speaker, I rise today to show support for the 50 million Americans enrolled in Medicare. Medicare is vital not only to my district, like Mr. MURPHY's district in Florida, but our entire Nation, which is why my fellow colleagues and I should support its promise to all our citizens who have earned it, who have paid for it through their taxes, and who now rely on it for a stable health care system and for their medical care.

Medicare has a long and valued history since its inception in 1965. Social Security recipients have consistently benefited from the opportunity to access quality, affordable health care, a right now guaranteed to those who worked hard for that privilege.

There are 122,380 constituents from the 12th District of Illinois who participate in the Medicare program. That is one out of every seven citizens in my district.

□ 1645

Many of these constituents are disabled, and almost all are on a fixed or limited income. Medicare gives these citizens the opportunity to receive essential medical care and to take part in preventive care programs designed to maintain good health, which lowers the cost of health care—lowers the cost of health care.

Of those 122,000 southern Illinoisans, over 28,000 also participate in Medicare Advantage. That is one in four of those Medicare participants taking part in a program specifically designed for those seniors who have high rates of chronic disease. Medicare Advantage focuses on

prevention and on disease management, which reduces the need for unnecessary hospitalizations—keeping our most vulnerable populations healthier and out of the hospital waiting room.

Medicare and Medicare Advantage serve our seniors, low-income families, and those susceptible to disease. I ask, are these the populations we want to cast aside? Are these the citizens that we need not care for? I say no. Yet, the proposed budget unveiled this week virtually eliminates Medicare for future enrollees. It includes plans to shift health care costs to seniors. It removes the guarantees provided by our current Medicare system to make quality, affordable health coverage available for those who need it most. It undermines the promise our Nation made to its citizens—that if you work hard and you pay your taxes, some day, should you need it, your health care needs will be met.

The recently proposed budget also implements what they label a premium support system. That is a plan to move Medicare to a voucher program. I vehemently oppose this proposition. Our seniors don't need a health care coupon—they need health care.

They need the ability to choose their own doctor. They need the ability to access billions in savings for prescription drugs. They need access to wellness visits—all of which are in jeopardy under this Republican budget plan.

I am tired of hearing proposals to eliminate vital government services simply because of party ideology. Let us not govern blindly through rhetoric and sound bites, but rather, let us work for our constituents to better serve those who have paid into the Medicare system their entire working life and now need it most.

Medicare serves those who have earned it, who have paid for it, and who deserve it. Should we take away that service, I fear what the future may hold for our seniors—seniors like Carolyn Morgan from Du Quoin, Illinois. Carolyn needed Medicare's help in March of 2013, when she became ill and hospitalized, put on oxygen, and given a daily regimen of prescription drugs.

I hold her letter to my office in my hand.

Carolyn states:

I cannot afford out-of-pocket health care. My supplemental insurance is useless without Medicare, so it would have been wasted money every month.

I know I will be spending the remainder of this congressional term fighting for Carolyn and fighting for our seniors and disabled to make sure that the health care promises we made so many years ago are not in danger from partisan budget cuts.

My fellow colleagues, I urge you to join me. Let's avoid a grim future for the elderly, for the disabled, and the fixed-income citizens of this great Nation. Let's help Carolyn and the many more American citizens just like her. Let's fight to keep Medicare.

Mr. MURPHY of Florida. I want to thank the gentleman from Illinois for his generous words and reminding us of the importance of Medicare and Medicare Advantage and what it means to so many folks across our great country.

At this point, I would like to take a minute to let the gentleman from Georgia talk about what is happening in his district. Mr. BARROW has been fighting for years up here in D.C. for Medicare and seniors across the country.

Mr. BARROW of Georgia. I thank the gentleman.

Madam Speaker, I would like to thank my colleague, Mr. MURPHY, for gathering us all here to talk about this important issue. This is an issue that affects folks in every part of this country, and in my view, is one of the most important issues facing seniors in our communities today.

I applaud all of my colleagues gathered here for taking a leadership role in our efforts to fight proposed reductions to the Medicare Advantage program.

Nearly 15 million seniors across the country are enrolled in Medicare Advantage, including more than 300,000 in my home State of Georgia. This program serves our seniors well, particularly those with high rates of chronic disease. Nearly 30 percent of all Medicare beneficiaries turn to Medicare Advantage to cover their health care costs.

By focusing on prevention and disease management, Medicare Advantage plans reduce the need for hospitalization, and that, in turn, reduces health care costs. It is a proven program that folks in my district have come to rely on.

The Centers for Medicare and Medicaid Services recently proposed a 5.9 percent cut to this program, which could result in a reduction of benefits and increased premiums on Medicare beneficiaries by \$35 to \$75 a month. That is an added cost that many seniors simply cannot afford to pay every single month.

My colleague from the other side of the aisle, Dr. BILL CASSIDY, and I have been leading the charge to urge the Federal Government to take any and all steps necessary to preserve this program. Just last month, more than 200 Members of Congress from this House joined us in our effort to urge the Centers for Medicare and Medicaid Services to preserve the standard of care that seniors are currently getting. I, for one, do not want to put our seniors, men and women who have worked their entire lives, in the financial trouble these reductions would cause.

I have urged the administration to take a long, hard look at how these cuts would affect everyday lives of our seniors. If the goal here is to save money, there are better, more suitable ways to do it than on the backs of our seniors.

Again, I would like to thank my colleague for getting folks together to

talk about how we can work together to make sure Medicare Advantage isn't jeopardized. It is an issue that isn't for Democrats or Republicans, but one that we all need to address. I have been proud to work on this issue in a bipartisan fashion with Dr. CASSIDY, and it is my hope that all of our colleagues will get on board and help us preserve Medicare Advantage.

Mr. MURPHY of Florida. I thank the gentleman from Georgia for sharing your thoughts and stories and reminding us that this isn't a partisan issue. It shouldn't be a Republican, Democratic, or Independent issue. These are seniors. These are folks that built this great country, many of whom are veterans who fought for our country and laid the foundation which we have today.

So thank you for reminding us of that and being here today and taking a moment out of your busy schedule to share your thoughts.

I would now like the gentleman from Arizona, who has been championing this issue back home, to talk about what he is doing with Medicare Advantage and why he is here today. Mr. BARBER, thank you.

Mr. BARBER. I want to thank the gentleman for bringing us together tonight to talk about the importance of preserving and protecting Medicare Advantage.

I rise today, Mr. Speaker, on behalf of the citizens that I represent all across southern Arizona—thousands and thousands of seniors who have come to rely on Medicare Advantage to keep them in their homes, to keep them well, and to provide them with the support that they so dearly need as they age in place.

They live in communities all across my district, from Tucson to Sierra Vista, to Douglas, to Benson, to Bisbee, to Willcox, and to "the town too tough to die," Tombstone. And I am determined to fight on their behalf to make sure that Medicare Advantage continues to serve them and does not disappoint the delivery of services by losing funding, as is proposed by the President this month.

Medicare Advantage offers seniors and individuals with disabilities quality and affordable health care that they can depend on. And they depend on us—those of us who represent them—to fight for their right to continue this program.

Medicare Advantage focuses on prevention and innovation. It is a proven fact that this program improves health outcomes and contains costs. Isn't that what we should be doing for our seniors and for everyone in America? But now, as I said, the President is proposing harmful cuts to Medicare Advantage.

So let's examine what these cuts would mean if they go into effect. They will mean fewer benefits, fewer doctors, and less choice. This is wrong, and we cannot let it happen. I oppose these cuts, and I have called upon the President to reverse course and protect this critical program.

For the people in my Second District of Arizona and for seniors all across this great Nation, there are over 390,000 Medicare Advantage enrollees or recipients in the State of Arizona alone, and it is working for them. They will attest to that, and they have to me. They have contacted my office in person and by phone, they have met with me in community gatherings all across the district over the last several weeks, and they have expressed their deep concerns that they will lose this valuable program that they have come to rely upon that keeps them well and keeps them in their homes.

Before I came to the Congress and before I worked for Congresswoman Giffords, I administered a regional and then a State program for people with disabilities that focused on the same kinds of services that are provided to seniors and individuals with disabilities under the Medicare Advantage program—cost effective, in-home support, keeping people well, and preventing more illness. This makes sense. It makes sense for them, it makes sense for our country, and it makes sense for the appropriations that we are trying to protect in this Congress.

I certainly urge the President to reverse course and stop these cuts. We cannot stand for it. I will not stand for it, and I will not back down until we are successful in reversing this impossible and irresponsible decision.

Mr. MURPHY of Florida. I want to thank the gentleman from Arizona for his leadership and for continuing to fight for seniors back home and continuing to be a champion here in Washington, D.C., for those folks. Thank you, also, for reminding us that this is a successful Medicare program that has already had a solid success record at reducing hospital readmissions and improving health outcomes, and continues to be a popular option for seniors, reducing annual out-of-pocket expenses from traditional Medicare and offering expanded benefit packages that include important dental, hearing, vision, and chiropractic care.

Medicare Advantage plans also normally include the successful and cost-saving part D prescription drug plan and come without an annual deductible. By offering great coordinated care and innovative health care approaches, this program is highly effective at keeping seniors out of the hospital. But, if they do end up in the hospital, Medicare Advantage helps them recover more quickly and with less chance of returning. We should be building on this success, not stifling it.

At this time, I would like to take a moment to yield to the gentleman from Florida who, similar to myself, has many seniors in the great State of Florida and will continue to be a champion for the seniors and is going to share with us some stories.

Mr. GARCIA. I would like to thank my colleague from Florida and my good friend, Mr. MURPHY, for his fight for seniors.

I rise today to express my strong support for Medicare and my opposition to any cuts to Medicare. Medicare is one of our Nation's greatest achievements. For half a century, this program has lifted millions of seniors out of poverty and provided seniors with the health care they need, they have earned and they deserve.

In Congress, we have a responsibility to strengthen and modernize Medicare to ensure that it continues to provide seniors who have worked all their lives to receive those Medicare benefits they have earned and they depend on.

Medicare Advantage serves over 1 million seniors in Florida, and it provides innovative treatments and care. In my district, I hear firsthand from so many seniors how well Medicare is serving them.

This is not a political issue. This is not a partisan issue. While outside groups have been misleading my constituents and others on my record on Medicare, I have been working with my colleagues on both sides of the aisle to oppose cuts to Medicare.

My colleagues and I are strongly advocating against changes to Medicare that would disrupt the lives of seniors.

□ 1700

I have spoken to the President about this. I have spoken to the Secretary and CMS about this issue. We have written letters to the administration, and we stand here today. I am committed to continuing to do everything I can to protect Medicare for our Nation's seniors.

With that, I want to again thank Mr. MURPHY for all of his efforts. He has been a leader in our caucus, he has been a leader in this Congress in fighting for seniors, and I am proud to stand by his side, just as I am sure that Mr. MURPHY will fight against cuts like the ones proposed in the Ryan budget, which cuts over \$800 billion from seniors and Medicare, which puts the hole back in the doughnut, and I just want to thank him again for his leadership.

Mr. MURPHY of Florida. I want to thank the gentleman from Florida for continuing to fight for seniors and reminding us of what proposals on the other side might entail.

The political games being played are not necessary in today's environment. These are real people. These are seniors. They are not just numbers on a spreadsheet. These are our grandparents and parents. These are folks who fought for our country and fought for our freedoms.

Thank you for reminding us not to make this a political puck. This is serious, and we must work together as a Congress and the United States Government to ensure seniors are protected.

I want to take a second to look at another scenario, gym memberships. A common add-on benefit for Medicare Advantage plans is free or discounted gym memberships. Cut Medicare Advantage too deeply, too quickly, and

gym memberships are gone. Some think that is a good thing. I disagree.

A recent study found that regular balance exercise for seniors reduces falls that cause injuries by 37 percent and broken bones by 61 percent. Most elderly Americans survive a broken hip, but it often undercuts confidence and diminishes quality of life.

If a fall robs an elderly woman of her independence, it is a financial and emotional hardship. Whether it is the cost of Medicare of a hospitalization or 2 months of therapy, the cost to Medicare and Medicaid for a nursing facility, or most importantly, the cost to the senior of her quality of life and independence, Silver Sneakers doesn't seem like much of a cost at all in comparison.

That is why, even during a time of great partisanship and gridlock in Congress, there is a growing bipartisan coalition calling on the administration to keep the rates flat for this year, putting the well-being of our Nation's seniors before party lines.

Together, we are making several recommendations for changes to CMS' proposals that we believe could contribute to stabilizing the program while preventing devastating impacts on the program and the beneficiaries it serves.

For example, providing more care at home, CMS could narrow the proposals on in-home health risk assessments and protect the benefit of medication management and continuity of care. If the visits are an important component of the disease management and provide value to seniors and taxpayers, they should be maintained. This is exactly the type of innovation we need.

At this point, I would like to take a moment to yield to the gentleman from California who has been a champion for seniors in his great State. He will share with us his leadership and what he has heard back home.

Mr. PETERS of California. I thank you, Mr. MURPHY. I appreciate you and your work on behalf of seniors in Florida and around the country on this important issue.

I just want to recognize you and the bipartisan group we have here standing up for our seniors and Medicare Advantage. I was honored to be part of a group of freshmen in our party who met with Secretary Sebelius yesterday, and we were able to, with the help of our leadership, express to the Secretary our concern about the proposed cuts.

Part of what we told her was that Medicare Advantage continues to offer seniors and individuals with disabilities additional choices for high-quality, coordinated care in their communities.

With a focus on innovative services, prevention, and disease management, these plans have consistently delivered improved health outcomes while containing costs and requiring copayments or deductibles from beneficiaries.

Further, consistent with the goals of HHS, these plans reduce hospitalizations and readmissions, decrease the

length of stay in nursing facilities, and manage high-risk, high-need patients more effectively.

I thank the gentleman for letting me add my voice to folks who don't want to see us do something that is penny-wise and pound foolish. We have a system that is incentivizing well-being and focusing on prevention.

It can really add a lot for the benefit of our seniors, and we all want to see it preserved as it is. Thank you very much for the time.

Mr. MURPHY of Florida. I thank the gentleman from California for taking a minute out of his busy schedule to come and talk about how important Medicare and Medicare Advantage plans are to you and your constituents back home.

Finding ways to collect better and more thorough health information allows for better coordinated care with convenience to our seniors. We should also continue to reward programs that are performing the highest and providing the best care to seniors.

To do that, CMS should also increase the percentage of rebates to reward and promote higher quality while averting negative consequences for beneficiaries.

Other recommendations include keeping beneficiary stability and continuous plan improvement paramount when Medicare Advantage's benchmark calculations and bidding rules.

By rewarding performance, while taking into account the challenges faced in low-income populations, Medicare would accelerate delivery system innovation and keep Medicare Advantage as a viable option.

These are just a few of the smart changes that we should be making to build off the success of this program, instead of cutting these beneficial plans to the detriment of our Nation's seniors.

I am proud to stand with my colleagues today to once again call on the administration to preserve the Medicare Advantage choice for beneficiaries after a lifetime of hard work.

Madam Speaker, we could be facing a serious situation throughout the country. Both sides of the aisle are concerned about the proposed cuts to Medicare Advantage.

Further cuts not only risk new health care efficiencies and innovation, but the health and well-being of seniors who depend on these plans. Simply put, these cuts are counterproductive if it means more hospital readmissions and worse health outcomes.

Cuts already happening this year have resulted in a 10 percent increase in overall out-of-pocket costs for seniors relying on Medicare Advantage, with the annual maximum for these expenses increased by \$560.

For seniors on fixed incomes, that can mean the difference between being able to fill a needed prescription, making a mortgage payment, or putting food on the table.

If further cuts are made to this important program, it would be even

worse, costing seniors an estimated \$50 more a month in out-of-pocket expenses. It is wrong to shift this burden onto seniors.

From Cheryl and her husband from Palm Beach Gardens to Walter from Tequesta to Robert from Palm City to Gary from Port St. Lucie to Lorraine from Fort Pierce, this touches the lives of seniors across my district and across this country.

They deserve better after a lifetime of hard work than having to worry about losing their doctor or the affordable health coverage that works for them.

This doesn't just impact my constituents across the Treasure Coast and palm beaches, but seniors and families across this great Nation.

I thank my colleagues who stood with me today to urge the administration to protect seniors from further cuts, keeping rates flat for this year.

I am committed to fighting for the well-being for seniors on the Treasure Coast and palm beaches, the great State of Florida, and across our Nation, protecting their earned benefits.

Madam Speaker, I yield back the balance of my time.

THE WORLD OF NATIONS HOLDS A MORAL OBLIGATION TO UKRAINE

The SPEAKER pro tempore (Mrs. WALORSKI). Under the Speaker's announced policy of January 3, 2013, the gentlewoman from Ohio (Ms. KAPTUR) will control the remainder of the hour.

Ms. KAPTUR. Madam Speaker, I thank Congressman MURPHY for yielding. You are such a refreshing, brilliant, positive Member of this House, and I thank the people of your State for sending you here.

I thank you for all the citizens you are fighting for to bring new energy and to bring new vision to our country. Thank you so very much.

Madam Speaker, I entitle my remarks this evening "The World of Nations Holds a Moral Obligation"—and underline "moral obligation"—"to Ukraine."

Seventy years after World War II, let us provide some historical context in which to view Russia's illegal invasion of Crimea and potentially other nations.

Scholars, historians, and diplomats still are piecing together the annals of the horrific slaughter and political oppression of the past century that has plagued the region we call Central and Eastern Europe. The full truth of what happened remains to be told as far too much was locked behind the Iron Curtain.

Masterful books like "Bloodlands: Europe Between Hitler and Stalin" by Dr. Timothy Snyder of Yale begin to present the unfathomable dimension of the horror.

If there is any place on the Earth the world community of nations owes a moral obligation and should seek to pull forward, it is Ukraine.

The suffering and death endured by millions of innocent people inside Ukraine and nations in her immediate environs had no equal any place on Earth. There, the crushing of human life and human spirit were so diabolical and of such gigantic proportion, it is hard for us as human beings to wrap our minds around it.

With clarity, let us recall that American soldiers who liberated Europe during World War II never ventured far enough eastward into Soviet-held territory to witness the grip of that tyranny; thus, the West still holds some naivete about the depths of depravity to which millions of innocent civilian people—mothers, fathers, children, grandparents—fell victim.

George Will quotes Dr. Snyder in a recent piece titled, "Russia's brutality with Ukraine is nothing new." During the 1933 Stalinist-forced famine—here is a quote from the book "Bloodlands,"

Boys from another school pulled out the severed head of a classmate while fishing in a pond. His whole family had died. Had they eaten him first? Or had he survived the deaths of his parents only to be killed by a cannibal? No one knew; but such questions were commonplace for the children of Ukraine in 1933. Yet cannibalism was sometimes a victimless crime. Some mothers and fathers killed their children and ate them. But other parents asked their children to make use of their own bodies if they passed away. More than one Ukrainian child had to tell a brother or sister: "Mother says we should eat her if she dies."

Additionally:

In January 1933, Stalin, writes Snyder, sealed Ukraine's borders so peasants could not escape and sealed the cities so peasants could not go there to beg. By spring, more than 10,000 Ukrainians were dying each day, more than the 6,000 Jews who perished daily in Auschwitz at the peak of extermination in the spring of 1944.

Snyder is judicious about estimates of Ukrainian deaths from hunger and related diseases, settling on an educated guess of approximately 3.3 million from 1932 to 1933. He says that when "the Soviet census of 1937 found 8 million fewer people than projected," many of the missing being victims of starvation in Ukraine and elsewhere, and the children that those adults did not have, Stalin "had the responsible demographers executed."

Ukraine was hell on Earth.

With the able assistance of Ukrainian Museum and Archives in Cleveland, Ohio, and its incredible resident scholar Andrew Fedynsky, let us take a look back before we look forward.

Beginning with the year 1933, as millions of Ukrainians were dying of starvation at the hands of their own government in its forced famine genocide, that terror has gone down in history as the Holodomor, murder by famine; yet few in America or anywhere noted them, even fewer spoke out, to condemn the extinction as American and other western companies were working with the Soviet Government to realize its 20th century industrialization campaign glorified recently at the Sochi Olympics.

Soviet industrialization was paid for by the sale of grain brutally seized