put some teeth and power behind the words: All men; and we should say all men and women; are created equal.

It is now time for us to take an additional step in that direction by attaching the Hate Crimes Prevention Act to the Commerce, Justice and the State appropriations bill. This act will make the intent of Congress clear and will put power behind the words that we will not tolerate hate crimes.

In conclusion, Dr. King said:

Injustice anywhere is a threat to justice everywhere.

Let us make our voices loud and clear; let us put power behind our words.

## ANNOUNCEMENT OF INTENTION TO OFFER A MOTION TO INSTRUCT CONFEREES ON H.R. 1501, JUVENILE JUSTICE REFORM ACT OF 1999

Ms. JACKSON-LEE of Texas. Mr. Speaker, pursuant to clause 7(c) of rule XXII, I hereby announce my intention to offer a motion to instruct conferees on H.R. 1501 tomorrow. The form of the motion is as follows:

I move that the managers on the part of the House at the conference on the disagreeing votes of the two houses on the Senate amendment to bill, H.R. 1501, be instructed to insist that the committee of conference should immediately have its first substantive meeting to offer amendments and motions including gun safety amendments and motions; and 2, the committee of conference report a conference substitute by October 20, the 6-month anniversary of the tragedy at Columbine High School in Littleton, Colorado, and with sufficient opportunity for both the House and the Senate to consider gun safety legislation prior to adjournment. H.R. 1501 is the Juvenile Justice Reform act of 1999.

The SPEAKER pro tempore. The form of the motion will appear in the RECORD.

## PASS THE HATE CRIMES PREVENTION ACT AS QUICKLY AS POSSIBLE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 1999, the gentlewoman from Michigan (Ms. STABENOW) is recognized for 60 minutes as the designee of the minority leader.

Ms. STABENOW. Mr. Speaker, first, as we begin this evening, I want to associate myself with the comments of my colleagues this evening concerning Matthew Sheppard and all of those who have found themselves the victims of hate crimes and the great necessity to pass the Hate Crimes Prevention Act as quickly as possible.

This evening I am joining with colleagues to speak out in support of efforts to restore Medicare cuts that have been too deep and have gone on too long, and we have an opportunity in this session before we leave to fix it, and we need to do that as quickly as possible.

The Balanced Budget Act of 1997 included numerous cuts to Medicare payments, to health care providers, and the original intent was to slow the growth of the costs of Medicare by cutting approximately $115 billion over 5 years. Recently the Congressional Budget Office has projected, however, that Medicare spending has been reduced by almost twice that amount. Clearly Congress went too far.

These are not simply numbers that we are talking about. These are people, these are families, these are doctors and nurses trying to provide care, home health care providers, nursing homes that are trying to provide care, hospitals, teaching hospitals that are trying to make ends meet with cuts from the Federal Government that have gone too far.

Earlier this year 80 Members of the House joined me in sending a letter to the President asking him that as he put together his Medicare reform package that he not choose to cut Medicare further. I am very pleased that he heard our message and that in fact he did not choose to cut Medicare further but instead proposed restoring $7 billion worth of cuts. That is a good first step, but it is not enough for us to be able to truly solve the problem that faces our health care providers across the country.

Many of us have cosponsored numerous bills that seek to resolve specific problems that have arisen with the balanced budget agreement. Just this year I have cosponsored 10 bills myself that cover specific issues ranging from hospital outpatient prospective payment systems to the $1,500 cap placed on therapy services. My colleagues joining me tonight are deeply concerned and involved in this issue.

The sheer number of bills alone that have been introduced and cosponsored by people on both sides of the aisle should send a strong message to the leadership that we need to act now. Time is running out. For too many time has already run out, and shame on us if we do not act now.

Just today key members of the Committee on Ways and Means and the Finance Committee on the Senate side have introduced marks for legislation to mark up future bills. I am pleased that Senator DASCHLE has introduced a comprehensive bill that addresses a number of the issues we will speak to this evening.

Tonight is our opportunity to outline our priorities for what this legislation should address. Solving the balanced budget agreement concerns involves dollars, Federal dollars, but as I indicated earlier, we have seen more than twice the amount cut that is necessary for Medicare's portion of the balanced budget agreement, and we are now facing surpluses, we are debating surpluses over the next 10 years. For many of us, we have been fighting to put Social Security and Medicare first. We have an opportunity to do that, and an important part of putting Medicare first is to restore the cuts that have been made and provide an opportunity for people to receive the health care that they need and deserve.

□ 1845

Tonight we are going to talk about real pain that real people are suffering as a result of the deep cuts.

Let me take just a moment in each of the three major areas and then ask my colleagues to respond as well. Let me speak to Michigan. I have had an opportunity to travel across Michigan speaking to hospital providers, nursing homes, home health care providers. Michigan hospitals alone are expected to bear between $2.5 and $3 billion, not million, billion dollars in cuts as a result of the balanced budget agreement. That is a 10 percent cut in their Medicare reimbursements since 1997.

Now, to put that in perspective, 10 percent of the Medicare services to hospitals are providing in-patient care, persons staying overnight. We are talking about a 10 percent cut that could wipe out in-patient care in Michigan. Michigan is already suffering. Schoolcraft Memorial in Manistique, Michigan is suffering devastating losses of the VBA and they recently made the painful decision to close their maternity ward. Now, this is an area where now women are going to have to travel at least 50 miles, travel about an hour in order to deliver their babies. What if there is an emergency? What if that hour is too late?

I have talked with hospitals in Marquette, Michigan in the upper peninsula; in northern Michigan, in my hometown in Sparrow Hospital and the Medical Regional Center and down in the metropolitan area of southeastern Michigan, Detroit Medical Center, Henry Ford Health Systems. In fact, Henry Ford Health Systems located in Detroit announced recently just last week, in fact, that 1,000 employees not directly involved in patient care will be asked to voluntarily retire or will be laid off. One thousand employees, and we have discussions of hospitals, whole hospitals closing.

What is it that we need for our hospitals? We need to repeal the balanced budget agreement transfer provisions. I have cosponsored with colleagues H.R. 405 that would repeal the transfer provision. Currently, hospitals are not discharging patients to nursing homes because the paperwork and regulations are just too difficult. Secondly, we need to limit the reductions for outpatient care. This is a number one concern for hospitals, and I am pleased to