

trillion to \$1.3 trillion. Such a reduction will have a ripple effect on our economy. All Americans stand to gain. Economists believe that this kind of reduction would result in lower interest rates.

**THE 1999 TRADE POLICY AGENDA AND THE 1998 ANNUAL REPORT ON THE TRADE AGREEMENTS PROGRAM—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES**

The SPEAKER pro tempore (Mr. LATOURETTE) laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, without objection, referred to the Committee on Ways and Means:

*To the Congress of the United States:*

As required by section 163 of the Trade Act of 1974, as amended (19 U.S.C. 2213), I transmit herewith the 1999 Trade Policy Agenda and the 1998 Annual Report on the Trade Agreements Program. This report includes the Annual Report on the World Trade Organization, as required by section 124 of the Uruguay Round Agreements Act (19 U.S.C. 3534).

WILLIAM J. CLINTON.

THE WHITE HOUSE, March 9, 1999.

**ANNUAL REPORT OF THE NATIONAL ENDOWMENT FOR THE ARTS, FISCAL YEAR 1997—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES**

The SPEAKER pro tempore laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, without objection, referred to the Committee on Education and the Workforce.

*To the Congress of the United States:*

It is my pleasure to transmit herewith the Annual Report of the National Endowment for the Arts for Fiscal Year 1997.

The Arts Endowment awards more than one thousand grants each year to nonprofit arts organizations for projects that bring the arts to millions of Americans. Once again, this year's grants reflect the diversity of our Nation's culture and the creativity of our artists. Whether seeing a classic theatrical production in Connecticut or an art exhibition in Arizona, whether listening to a symphony in Iowa or participating in a fine arts training program for inner-city students in Louisiana, Americans who benefit from Arts Endowment grants have experienced the power and joy of the arts in their lives.

Arts Endowment grants in 1997 supported:

—projects in theater, dance, music, visual arts, and the other artistic

disciplines, demonstrating that our diversity is an asset—and helping us to interpret the past, understand each other in the present, and envision the future;

—folk and traditional arts programs, which strengthen and showcase our rich cultural heritage; and

—arts education, which helps improve our children's skills and enhances their lives with the richness of the arts.

The arts challenge our imaginations, nourish our spirits, and help to sustain our democracy. We are a Nation of creators and innovators. As this report illustrates, the NEA continues to celebrate America's artistic achievements and makes the arts more accessible to the American people.

WILLIAM J. CLINTON.

THE WHITE HOUSE, March 9, 1999.

**ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE**

The SPEAKER pro tempore. Pursuant to the provisions of clause 8 of rule XX, the Chair announces that he will postpone further proceedings today on each motion to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote is objected to under clause 6 of rule XX.

If a recorded vote is ordered on House Concurrent Resolution No. 28 relating to human rights abuses in China, that vote will be taken today. If a recorded vote is ordered on any remaining motion, those votes will be postponed until tomorrow, Wednesday, March 10, 1999.

**NURSING HOME RESIDENT PROTECTION AMENDMENTS OF 1999**

Mr. BILIRAKIS. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 540) to amend title XIX of the Social Security Act to prohibit transfers or discharges of residents of nursing facilities as a result of a voluntary withdrawal from participation in the Medicaid program.

The Clerk read as follows:

H.R. 540

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

**SECTION 1. SHORT TITLE.**

This Act may be cited as the "Nursing Home Resident Protection Amendments of 1999".

**SEC. 2. RESTRICTIONS ON TRANSFERS OR DISCHARGES OF NURSING FACILITY RESIDENTS IN THE CASE OF VOLUNTARY WITHDRAWAL FROM PARTICIPATION UNDER THE MEDICAID PROGRAM.**

(a) IN GENERAL.—Section 1919(c)(2) of the Social Security Act (42 U.S.C. 1396r(c)(2)) is amended by adding at the end the following new subparagraph:

“(F) CONTINUING RIGHTS IN CASE OF VOLUNTARY WITHDRAWAL FROM PARTICIPATION.—

“(i) IN GENERAL.—In the case of a nursing facility that voluntarily withdraws from par-

ticipation in a State plan under this title but continues to provide services of the type provided by nursing facilities—

“(I) the facility's voluntary withdrawal from participation is not an acceptable basis for the transfer or discharge of residents of the facility who were residing in the facility on the day before the effective date of the withdrawal (including those residents who were not entitled to medical assistance as of such day);

“(II) the provisions of this section continue to apply to such residents until the date of their discharge from the facility; and

“(III) in the case of each individual who begins residence in the facility after the effective date of such withdrawal, the facility shall provide notice orally and in a prominent manner in writing on a separate page at the time the individual begins residence of the information described in clause (i) and shall obtain from each such individual at such time an acknowledgment of receipt of such information that is in writing, signed by the individual, and separate from other documents signed by such individual.

Nothing in this subparagraph shall be construed as affecting any requirement of a participation agreement that a nursing facility provide advance notice to the State or the Secretary, or both, of its intention to terminate the agreement.

“(ii) INFORMATION FOR NEW RESIDENTS.—The information described in this clause for a resident is the following:

“(I) The facility is not participating in the program under this title with respect to that resident.

“(II) The facility may transfer or discharge the resident from the facility at such time as the resident is unable to pay the charges of the facility, even though the resident may have become eligible for medical assistance for nursing facility services under this title.

“(iii) CONTINUATION OF PAYMENTS AND OVERSIGHT AUTHORITY.—Notwithstanding any other provision of this title, with respect to the residents described in clause (i)(I), a participation agreement of a facility described in clause (i) is deemed to continue in effect under such plan after the effective date of the facility's voluntary withdrawal from participation under the State plan for purposes of—

“(I) receiving payments under the State plan for nursing facility services provided to such residents;

“(II) maintaining compliance with all applicable requirements of this title; and

“(III) continuing to apply the survey, certification, and enforcement authority provided under subsections (g) and (h) (including involuntary termination of a participation agreement deemed continued under this clause).

“(iv) NO APPLICATION TO NEW RESIDENTS.—This paragraph (other than subclause (III) of clause (i)) shall not apply to an individual who begins residence in a facility on or after the effective date of the withdrawal from participation under this subparagraph.”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) applies to voluntary withdrawals from participation occurring on or after the date of the enactment of this Act.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Florida (Mr. BILIRAKIS) and the gentleman from Ohio (Mr. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from Florida (Mr. BILIRAKIS).

## GENERAL LEAVE

Mr. BILIRAKIS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on H.R. 540.

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

There was no objection.

Mr. BILIRAKIS. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 540, the Nursing Home Resident Protection Amendments of 1999. This measure will protect the health and dignity of nursing home residents who rely on Medicaid.

In a hearing of my Subcommittee on Health and Environment on February 11, Mr. Nelson Mongiovi described the trauma that his mother suffered when she was targeted for eviction by her nursing home in Tampa, Florida. That facility attempted to evict over 50 Medicaid residents last year under the guise of remodeling their wing.

In fact, those residents were targeted for eviction solely, solely because they relied on Medicaid. Although a court halted the evictions in Tampa, this was not an isolated incident. Discrimination against Medicaid residents has also been reported in other States.

HCFA estimates that an average of 58 nursing homes voluntarily withdraw from the Medicaid program each year. In an informal survey of 47 States' ombudsmen, 15 cited transfer and discharge violations as highly problematic.

To stop this outrageous practice, the gentleman from Florida (Mr. JIM DAVIS) and I worked on a bipartisan basis to draft H.R. 540. Our bill adopts a simple and fair approach. It protects current nursing home residents from eviction when their facility withdraws from Medicaid. It does not, and I repeat, it does not force nursing homes to remain in the Medicaid program, and facilities may continue to decide which residents to admit in the future.

If a facility, however, withdraws from the program, H.R. 540 requires the home to provide clear notice to future residents that it does not accept Medicaid payments. This safeguard will prevent new residents from assuming that they can remain in a facility once they exhaust their assets and become Medicaid-eligible.

This legislation, Mr. Speaker, is necessary to close a loophole that exists under current law. In testimony before my subcommittee, Mike Hash, Deputy Administrator of HCFA, stated clearly, and I quote him, "We do not have the authority to prevent evictions of Medicaid patients if nursing homes leave the Medicaid program."

I represent a district, Mr. Speaker, with one of the highest concentrations of senior citizens in the country. I am

committed to reforming our Nation's long-term care system.

□ 1230

The bill before us is part of a larger effort to remedy these problems. It addresses one serious concern by guaranteeing that nursing home residents and their families will not have to live with a fear of eviction.

H.R. 540 is a responsible measure supported by a broad range of seniors' advocates, including AARP, the Seniors Coalition, and the 60 Plus Association. In addition, the nursing home industry and the administration have endorsed the bill. It is the product of our bipartisan effort to improve safeguards for vulnerable residents of nursing homes.

I am proud to bring H.R. 540 to the floor as the first measure approved by my subcommittee in this Congress. Passage of this bill sends a clear message that we put patients ahead of profits. I urge all Members to vote in favor of H.R. 540.

Before I sign off, Mr. Speaker, I would like to express my gratitude to the gentleman from Virginia (Chairman BLILEY), to the gentleman from Michigan (Mr. DINGELL) and the gentleman from Ohio (Mr. BROWN), and of course to the staffs, Todd Tuten of my personal staff, and Mr. Mark Wheat and Mr. Tom Giles of the committee staff, and of course, Mr. John Ford, the head of the minority staff.

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

Mr. BROWN of Ohio. Mr. Speaker, I yield myself as much time as I may consume.

Mr. Speaker, I commend the gentleman from Florida (Mr. DAVIS) for his hard work and obvious commitment to preempting further mistreatment of low-income nursing home residents.

I would also like to recognize the outstanding efforts of the gentleman from Florida (Mr. BILIRAKIS). Under his thoughtful leadership, this subcommittee worked on a fully informed bipartisan basis to move this important piece of legislation.

H.R. 540 has symbolic as well as practical importance. In practical terms, it tells nursing facilities they cannot provide a home to some patients and a boarding house to others.

There are more than 90,000 licensed nursing home beds in my home State of Ohio. They are licensed for the purpose of providing long-term care. That purpose should not vary with the income status of the patient.

It is abusive to evict a Medicaid or pre-Medicaid patient without notice or without cause. But nursing homes in Florida and Indiana did just that, abandoning their residents along with the premise that long-term care signified anything more than short-term profit making.

The practical purpose of this bill is to prevent that kind of mistreatment

from recurring. Its symbolic purpose is to assert that nursing home residents are not to be mistreated, period.

When Congress repealed the Boren Amendment, it in effect silenced nursing homes, removing their right to appeal inadequate reimbursement. If nursing homes are truly being underpaid, then they are not the only ones to blame for the mistreatment of nursing home residents. We should rethink the 1997 Congressional appeal of the Boren Amendment.

H.R. 540 is a bold effort because it says Congress can, in fact, prevent mistreatment of Medicaid beneficiaries. Congress should pass H.R. 540 for the sake of low-income seniors and their families and because it is the right thing to do.

Mr. BILIRAKIS. Mr. Speaker, I reserve the balance of my time.

Mr. BROWN of Ohio. Mr. Speaker, I yield 7 minutes to the gentleman from Florida (Mr. DAVIS) who worked so hard on this bill.

Mr. DAVIS of Florida. Mr. Speaker, more so than ever before in the history of our country Americans are outliving their savings and good health. Many of these men and women defended our country in times of war and built our country through their hard work and sacrifice. These men and women are our parents and grandparents. Thanks to them, we enjoy a lot of the success and opportunity we have today. Many of these seniors are now in nursing homes across the country, and now it is our turn to care for them.

The issue before us today is protecting Medicaid residents from being evicted from nursing homes. The issue is preventing nursing homes from draining a patient's savings dry and then kicking them out because Medicaid is needed to pay the nursing home bill.

I believe that nursing home residents and their families should not have to live with fear of eviction based on how they pay their bills. It is unfair and flat out wrong that our most vulnerable and frail citizens, and their families, must worry about being evicted in nursing homes in favor of people who can pay higher rates.

The bill before us today provides security for these patients and their families by ensuring that they cannot be evicted from a nursing home in favor of higher paying patients if the nursing home chooses to voluntarily withdraw from the entire Medicaid program. Very simply, Mr. Speaker, our bill will ensure that our nursing homes do not put profits ahead of patients.

In April of 1998, a nursing home in my hometown of Tampa, Florida, in Hillsborough County, tried to evict 54 Medicaid residents, including Adelaida Mongiovi, under the guise of emptying their facility for remodeling. A judge halted the evictions, and the nursing home then told residents they could

stay. If it had not been for the commitment and determination of the Mongiovis, we would not be here today.

Mr. Speaker, I would like to thank Nelson and Geri Mongiovi, Adelaida's son and daughter-in-law, for their commitment for their loved-one and for bringing this issue to the forefront. Although Adelaida Mongiovi passed away late last year, I know that she is proud of her son and daughter-in-law for continuing to volunteer at that nursing home every day and for fighting for the rights of those nursing home residents. I am proud to represent them. The Mongiovis are a clear example of how citizens throughout this country can identify problems that need to be addressed by Congress and persuade Congress to do the right thing.

After the judge halted the evictions in Tampa, an investigation by the Florida Agency for Health Care Administration found the evictions were based solely on the fact that these residents relied on Medicaid to pay their bills. The nursing home was subsequently fined by both the State and Federal Government.

Opponents of this legislation will argue that what the nursing home in Tampa did was illegal and that current law prevents them from evicting Medicaid residents. Mr. Speaker, that is simply not true. Yes, the nursing home in Tampa was fined because they did not follow legal procedures for transferring and discharging patients. However, if they had followed those procedures, it would have been perfectly legal for them to remove these most frail and vulnerable citizens.

Under the current law, one of the criteria for transferring or discharging a nursing home resident is failure to pay. If the national chain that operated the nursing home in Tampa had been honest about what they were attempting to do, withdrawing from the Medicaid program, and had notified the residents and families of their intention to withdraw, they could have legally evicted these Medicaid residents for failure to pay their bills. If a nursing home no longer accepts Medicaid payment and the resident has no other means to pay their bill, they have failed to pay their bills.

According to the Health Care Financing Administration, about 58 nursing homes a year over the last 3 years have voluntarily withdrawn from Medicaid. It has been reported that in one nursing home chain alone, Medicaid residents were evicted in 13 homes in 9 separate States as part of a corporate plan to withdraw an additional 25 homes from the Medicaid program.

This is not just a Florida problem. It is a national problem which must be addressed by Congress. There are incidents of evictions and improper transfers of Medicaid residents in nursing homes in Indiana, California, Tennessee and other States. As a result of

this problem, California passed legislation prohibiting these mass evictions by requiring the nursing homes that withdraw from Medicaid to wait until the patients die or choose to leave the facility.

While the Omnibus Budget Reconciliation Act of 1987 established standards to guard against resident abuse, nothing in current law protects Medicaid nursing home residents who rely solely on Medicaid to pay their bills. Residents who spend their life savings on a lengthy nursing home stay are at the mercy of a facility which could later decide to dump them based solely on the fact that they are using Medicaid to pay their bills.

H.R. 540 is simple and fair. This bill prohibits nursing homes who have already accepted a Medicaid patient or private pay patient from evicting or transferring that resident based on his or her payment status. Nursing homes may continue to decide which residents are admitted to their facility and could withdraw entirely from the Medicaid program. However, they will not be permitted to dump these residents once they are admitted.

Under this bill, nursing homes can still voluntarily leave the Medicaid system, and they should be free to do so. However, residents need minimum protection once they enter these facilities which have left Medicaid.

Many residents enter a facility as private paying clients with the expectation that they will become eligible for Medicaid when they have depleted their personal assets by paying for their care. Sixty-three percent of nursing home residents who enter a nursing home do so as a private pay patient and exhaust their personal savings in just 13 weeks, and 87 percent of them exhaust their savings in just 36 weeks.

H.R. 540 addresses this problem. If a patient enters a nursing home with the expectation that they will be eligible for Medicaid coverage in the future, they will, in fact, be protected should the nursing home withdraw from the Medicaid program in the midst of their spend down of personal assets.

Another protection included in the bill is advance notification when the nursing home decides not to participate in the Medicaid program. Under this provision, if a nursing home no longer participates, it must provide clear and conspicuous notice to future residents that the nursing home does not participate in the Medicaid program and it does not accept Medicaid patients.

Mr. Speaker, fortunately, I have not yet and hopefully will not have to experience having a loved one in a nursing home. I can only imagine what a trying and stressful time that must be. This provision of the bill is intended to relieve some of the stress of that situation. Under our bill, family members will know in advance whether the nurs-

ing home they are choosing to enter their loved one in is the appropriate nursing home for them.

I am pleased this bill has received bipartisan support in the House with 62 cosponsors. I want to thank the gentleman from Florida (Chairman BILIRAKIS) for his support of the legislation and for moving it so swiftly through the House of Representatives. I want to also thank the gentleman from Michigan (Mr. DINGELL), the ranking Democrat on the Committee on Commerce, and the gentleman from Ohio (Mr. BROWN), the ranking Democrat on the Subcommittee on Health and Environment, for their support.

In addition to their support of this bill, the bill is supported by many senior citizen advocacy groups, including the National Senior Citizens Law Center, the AARP, the National Citizens' Coalition for Nursing Home Reform, the Seniors Coalition and the 60 Plus Association.

Mr. Speaker, in closing, 1.6 million nursing home residents are at risk of eviction if this legislation is not approved. To these most vulnerable citizens, their nursing facility is, in fact, their home. Everyone should feel safe and secure in their home, including residents in nursing homes.

I urge my colleagues to join me in passing this bill to prevent our most frail and vulnerable citizens from being evicted from their homes.

Mr. BILIRAKIS. Mr. Speaker, I yield 2 minutes to the gentleman from Michigan (Mr. SMITH).

Mr. SMITH of Michigan. Mr. Speaker, I thank the gentleman from Florida (Chairman BILIRAKIS) for yielding me this time.

Mr. Speaker, let me just say that it would appear that the challenge of future nursing home care is as much a challenge as Social Security or Medicare or Medicaid. As we look at the dramatic demographics in the changes of an increased senior population, the challenge in the future is even going to be more overwhelming.

My neighbor, Eddie Michel, of Addison, Michigan, came to me a couple of years ago concerned about the care that her mother was getting in a nursing home. That was a factor in my request from GAO along with the gentleman from Michigan (Mr. DINGELL) and others that GAO investigate the Federal compliance with our rules in terms of the care in nursing homes. That report, at a press conference, will be released officially on March 18 of this month.

In conclusion, let me say that I compliment the gentleman from Florida (Chairman BILIRAKIS) for bringing this bill forward and for all of the people that have supported this kind of legislation. I hope that we can work together in a bipartisan effort in the future to face the challenge of the tremendous cost of nursing home care in

the future. A logical alternative, of course, is expanding the kind of legislation that is going to make it easier for seniors to live in their own homes. It is going to be a significant challenge. I look forward to working with Republicans and Democrats.

Mr. BROWN of Ohio. Mr. Speaker, I yield 3 minutes to the gentleman from California (Mr. WAXMAN).

Mr. WAXMAN. Mr. Speaker, I rise in strong support of H.R. 540, the Nursing Home Residents Protection Amendments of 1999. This legislation provides new and strengthened authority to protect frail elderly and disabled nursing home residents who rely on the Medicaid program for their support.

This legislation was developed in response to an action by the Vencor nursing home chain to withdraw from the Medicaid program and evict residents in the facility whose care was paid for by Medicaid. The bill was developed by our colleague, the gentleman from Florida (Mr. DAVIS), with strong bipartisan support, including that of the gentleman from Florida (Mr. BILIRAKIS), the chairman of the Subcommittee on Health and Environment of the Committee on Commerce. Further, it has the strong support of the administration, consumer groups, and others.

Yet, during the consideration of this bill, the gentleman from Oklahoma (Mr. COBURN) raised concerns about the unintended consequences that he thought might be possible. He feared States will take advantage of the requirement that nursing homes must continue to care for Medicaid patients once they are a resident in the facility and would reduce their Medicaid payments to those facilities.

I think it is important to separate the issues here. First, there is no question that the residents in the facilities deserve protection, as the bill would give them. What a State may do with its reimbursement rates should not be used as an excuse to put the resident patients at risk.

□ 1245

But the issue of adequate payment to Medicaid nursing homes so that they can provide quality care to their residents is an important issue. And let me remind my colleagues we used to have a provision in the Medicaid law, the so-called Boren Amendment, that required States to pay nursing homes reasonable and adequate rates, rates that would allow an efficiently run facility to provide the required care. That provision was repealed in the Balanced Budget Act.

I believe that was a mistake. I think the concerns some of my colleagues have raised, that State payments might be inadequate to support what we are requiring in this bill, is a strong argument to return to consideration of the Boren Amendment. It should be part of the Medicaid law.

So I urge my colleagues to support this bill that is before us. I urge that we also return to a reconsideration of the Boren Amendment at some time in the future, and the assurance that Medicaid payments are reasonable and adequate to provide the quality care we all support for the frail elderly and disabled people who are in nursing homes.

I urge support for the bill and appreciate this opportunity to make these comments for the RECORD.

Mr. BROWN of Ohio. Mr. Speaker, I yield 2 minutes to the gentlewoman from Texas (Ms. JACKSON-LEE).

Ms. JACKSON-LEE of Texas. Mr. Speaker, I thank my colleague very much for his kindness and thank the chairman and all of the cosponsors for a very needed and instructive piece of legislation.

Mr. Speaker, H.R. 540 is long overdue. This bill prohibits nursing homes from evicting patients who receive Medicaid after the facility has voluntarily withdrawn from the Medicaid program.

Let me say that I have experienced this in recently walking through a nursing home facility in my district, receiving many, many calls from constituents who have loved ones in nursing homes near their community. This was a different set of facts, because this happened to be a nursing home that was being sold, and the word went out that these individuals, these family members, would be dispersed throughout the State, moved away from their particular loved ones. What an enormous burden. What a responsibility. What a feeling of helplessness.

This bill helps in another area, where a particular nursing home no longer uses Medicaid and they seek to replace the Medicaid-based patients with those who can privately pay.

Nursing homes provide long-term medical and residential care to patients with complex medical needs, and these services should not be based on the patient's receipt of Medicaid.

Traditionally, nursing facilities provided long-term custodial services for the elderly. However, age is no longer the predominant factor in determining a patient's need for long-term care. Nursing facilities also care for children and other adults with mental and physical disabilities and other chronic illnesses.

Despite this trend, the elderly continue to need the long-term care services provided by nursing facilities due to chronic illnesses, such as Alzheimer's and Parkinson's disease. So many Americans do not plan for their long-term care and later become impoverished when their private insurance runs out.

Medicaid is the major funding source for long-term care at most nursing facilities. I realized that many of those who I saw were individuals who no longer had any family members.

It covers almost 52 percent of the cost which includes room, board and nursing care.

Although Medicaid will only pay for nursing care for patients who meet a state-determined poverty level, half of the nursing home residents eventually rely on Medicaid because they have depleted their financial resources.

This bill is important to protect the rights of patients who receive Medicaid. Nursing facilities cannot evict patients because it voluntarily chooses to withdraw from the Medicaid program.

This bill is an important bill, Mr. Speaker, to protect the rights of patients who receive Medicaid. I ask my colleagues to join us in supporting H.R. 540.

Mr. BILIRAKIS. Mr. Speaker, I yield myself such time as I may consume.

In closing, I would just merely communicate that we have checked with HCFA. We are trying to address a concern raised by a member of the subcommittee. There is no record of Medicaid reimbursement reductions. Further, in CBO's opinion, and I quote them, "Nursing facilities are highly dependent on Medicaid revenue. Therefore, it is unlikely that there would be a large-scale withdrawal from Medicaid program participation under current law."

And, additionally, something maybe we are overlooking or forgetting, the 1997 Balanced Budget Act, which did repeal the Boren Amendment, directed the Secretary of Health and Human Services to study these concerns. HHS must report to Congress by August 2001 on the effect of States' reimbursement rates on nursing home patient care.

I also would like to read from three comments that we have received in writing from Florida Secretary of Elder Affairs, Secretary Hernandez.

I applaud and strongly support your efforts to provide additional protection to elders. The evidence is overwhelming that, without extraordinary preparatory efforts that are hardly ever made, any move is harmful for the preponderance of the frail elderly; the technical term is "transfer trauma".

And from AARP, Mr. Horace Deets, the Executive Director,

H.R. 540 establishes clear legal authority to prevent inappropriate discharges, even when a nursing home withdraws from the Medicaid program. AARP believes this is an important and necessary step in protecting access to nursing homes for our Nation's most vulnerable citizens.

And from Mr. James L. Martin, President of the 60 Plus Association, in testifying before our committee, when he said,

Nursing homes become just that. They are not a hospital room, nor a hotel room, they are a "home" to these patients. Attrition, not eviction, should be the rule, so indigent patients do not suffer relocation trauma.

Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

Mr. BROWN of Ohio. Mr. Speaker, I yield myself such time as I may consume to simply ask for a "yes" vote on H.R. 540 and again thank the gentleman from Florida (Mr. DAVIS) for his exceptional work.

Mr. STARK. Mr. Speaker, nursing home residents and their advocates welcomes speedy passage of this bill, which is designed to prevent facilities that prospectively withdraw from Medicaid from kicking out frail elderly people whose care is paid for through that program.

Last April, the Wall Street Journal brought national attention to evictions of Medicaid residents from a nursing home in Indiana run by the chain Vencor, Inc. Subsequently, Florida fined a Vencor facility in Tampa \$270,000 for doing the same thing.

The legislation before us today is only a first step. Congress can and should enact additional legislation to confirm the Health Care Financing Administration's authority to prevent nursing homes that are reimbursed by Medicaid from arbitrarily changing the number of beds allocated for residents who are enrolled in this program. If we fail to do this, facilities will continue dumping elderly people who are admitted as private-pay residents, and later told that they must leave once they have "spent down" because "no Medicaid beds are available."

Similarly, we should ensure that seniors are protected who are Medicaid-eligible at the time they seek admission to nursing homes. Too often, facilities tell these folks that their Medicaid beds are full, in hopes that a patient who can afford to pay a higher private rate will soon apply.

Such discriminatory practices, which are unfortunately all too common today, deny needed care and services to vulnerable elderly individuals who deserve our help. Yet under current law, seniors and their families have very limited ability to seek redress. The legislation we are considering today will protect some residents now living in facilities that choose to withdraw from Medicaid. However, few nursing homes voluntarily withdraw from Medicaid. And for those who are denied admission in the first instance as Medicaid enrollees, or who are asked to leave after they have exhausted their resources, this proposal is not an answer.

In the coming weeks, I will introduce legislation designed to add protections to Medicare and Medicaid to bolster enforcement efforts and improve residents' rights. I hope my colleagues will join me in supporting additional efforts to improve the quality of care in our nation's nursing facilities.

Mrs. CAPPS. Mr. Speaker, I rise today in strong support of this important legislation to protect some of the most vulnerable in our society—residents of nursing homes.

This bill would prohibit a nursing home from discharging or transferring a resident if the nursing home voluntarily withdraws from Medicaid. It would also require nursing homes that do not participate in Medicaid to inform individuals who would become residents that it does not participate in Medicaid and that it may transfer or discharge such a resident if he or she no longer is able to pay on their own, even if they become Medicaid-eligible.

The series of events that brought us this legislation are the worst nightmare for nursing home residents and their families. In April, 1998, a Tampa, FL, nursing home attempted to evict 52 Medicaid residents under the guise of remodeling the facility. Eventually, after the

courts and the state intervened, the nursing home relented and invited back all the discharged patients.

But the point is not that the residents are back in their nursing home. The point is that they shouldn't have had to put up with this callous and potentially fatal disruption in their lives. The culmination of a year of confusion came last April. As Nelson Mongiovi of Tampa testified before the Health Subcommittee last month, when he went to the facility where his mother was living after newspaper stories began to appear about Medicaid dumping:

(I) saw many residents being moved out so rapidly that no one knew what was going on. The residents were crying hysterically, not knowing what was happening or where they were going. Within two days, ten residents had been evicted from this facility. . . . There was utter chaos at the facility at this time with everyone, residents and family members, trying to determine what, if anything, would we be able to do.

Mr. Speaker, this legislation will hopefully put an end to scenes like that.

Protection for Medicaid-eligible nursing home residents is critical because of the large proportion of residents, often over 60% of a facility, who eventually end up on Medicaid. Typically, nursing home residents rely on Medicare to finance the first 100 days of nursing home, and then the resident relies on his or her own resources until they become eligible for Medicaid. According to some estimates, 63% of the elderly exhaust their own resources within 13 weeks and 87% within 52 weeks. These residents, who have spent all their own resources, should not be treated as second class citizens in nursing home facilities just because they now fall under Medicaid. This bill offers that protection, for residents now in homes and for future residents.

I am pleased that the Commerce Committee acted swiftly on this legislation and that the House has seen fit to act quickly as well. We must protect our vulnerable seniors in nursing homes, and their families, from the type of callous disruptions that the Mongiovi family faced.

Mr. PACKARD. Mr. Speaker, I rise today in support of H.R. 540, the Nursing Home Resident Protection Amendment. This legislation will prevent nursing homes from discriminating against residents who rely on Medicaid to cover their nursing home costs.

We have all heard the horror stories of seniors who have been evicted because their nursing home decided to withdraw from the Medicaid program. H.R. 540 will protect our seniors from being unfairly removed from their homes. This legislation will also serve to protect the nursing homes ability to withdraw from the Medicaid program, or determine which residents are admitted in the future. Under H.R. 540, nursing homes which choose to leave Medicaid are required to provide a "clear and conspicuous" notice to incoming residents that Medicaid payments are no longer accepted. Facilities will also be allowed to transfer residents who pay with private funds, but later become Medicaid-eligible.

Mr. Speaker, the choice to enter a nursing home is often one of the most difficult decisions to make for individuals and families. Let's not increase the stress associated with this decision by leading our seniors to believe

that they could be evicted simply for the method of payment they choose.

I urge my colleagues to support H.R. 540 and protect our Nation's seniors.

Mr. BROWN of Ohio. Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

The SPEAKER pro tempore (Mr. LATOURETTE). The question is on the motion offered by the gentleman from Florida (Mr. BILIRAKIS) that the House suspend the rules and pass the bill, H.R. 540.

The question was taken.

Mr. BILIRAKIS. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed until tomorrow.

#### REREFERRAL OF H.R. 809, FEDERAL PROTECTIVE SERVICE REFORM ACT OF 1999, TO COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE

Mr. GEKAS. Mr. Speaker, I ask unanimous consent that the Committee on the Judiciary be discharged from further consideration of the bill, H.R. 809 and that it be rereferred to the Committee on Transportation and Infrastructure.

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

There was no objection.

#### THREE-MONTH EXTENSION OF REENACTMENT OF CHAPTER 12, TITLE 11, UNITED STATES CODE

Mr. GEKAS. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 808) to extend for 3 additional months the period for which chapter 12 of title 11 of the United States Code is reenacted, as amended.

The Clerk read as follows:

H.R. 808

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

#### SECTION 1. AMENDMENTS.

Section 149 of title I of division C of Public Law 105-277 is amended—

(1) by striking "April 1, 1999" each place it appears and inserting "October 1, 1999",

(2) in subsection (a)—

(A) by striking "September 30, 1998" and inserting "March 31, 1999", and

(B) by striking "October 1, 1998" and inserting "April 1, 1999", and

(3) by striking subsection (c).

#### SEC. 2. EFFECTIVE DATE.

The amendments made by section 1 shall take effect on April 1, 1999.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Pennsylvania (Mr. GEKAS) and the gentlewoman from Wisconsin (Ms. BALDWIN) each will control 20 minutes.

The Chair recognizes the gentleman from Pennsylvania (Mr. GEKAS).