The MPA requires the Department of Health and Human Services to identify and eliminate these huge losses, including financially rewarding Medicare recipients who report abuses. It makes doctors and hospitals accountable for their actions and imposes stiff new penalties on anyone caught defrauding Medicare.

Another important point is that the portion of Medicare part B costs paid by seniors through premiums, currently 31.5 percent, will not change. Over the past 7 years, part B premiums have nearly doubled, rising from \$24.80 in 1988 to \$46.10 today. Current law, the MPA, and the president's plan all assume similar increases over the next 7 years.

Let me also emphasize that every additional premium paid by Medicare recipients will go directly to Medicare part B, not, as you may have heard, to pay for middle-class tax relief. It can't. It's impossible. It's illegal. Premiums and payroll taxes paid into the Medicare trust funds can only be used for the Medicare Program.

Finally, the wealthiest 2.9 percent of seniors, those single taxpayers with incomes above \$75,000 and couples with incomes above \$125,000, will be required to pay higher part B premiums.

That is the Republican plan. It is innovative, responsible, and cost-effective. Unfortunately, the congressional minority and the president have embarked on a partisan mediscare campaign meant to frighten and exploit seniors for political gain. It appears they have their sights set more on the next election than the next generation. Not only is that bad policy, it's also had politics.

One of the major factors in last November's electoral sweep was that Americans want Representatives who aren't afraid to tackle the tough issues. With our Medicare preservation plan, we have shown that we are willing to do exactly that.

This plan ends a decade-long habit of applying only band-aid solutions to Medicare's fiscal woes. It uses common sense and market forces to save Medicare and bring the program into the 21st century, giving seniors more choices and better care at lower costs. But just as important, it is one more confirmation that the era of politics as usual is over.

A DEMOCRATIC VIEW OF REPUBLICAN MEDICARE PLAN

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Connecticut [Mr. GEJDENSON] is recognized for 5 minutes.

Mr. GEJDENSON. Mr. Speaker, they are back in the back room again. The last time the Republicans went in the back room, the AMA got a fat check and the seniors got left out in the cold.

I do not know how the previous speaker could define what was in the bill because it is my understanding that at this point there is no bill, that the Republican leadership is somewhere in this institution huddled away in a back room of the Committee on Rules trying to write a new bill to buy enough votes to get it on the floor and pass it tomorrow.

What are they trying to achieve? Well, if you think that the Republicans, who have opposed Medicare from its inception, have been opposed to it at every step of the process, are really trying to save it, then you can agree that they are trying to save it. But if you listen to the majority leader of the House, the gentleman from Texas [Mr. ARMEY], you will find out what they really want to do. He says if he had his way, he would not have to be part of Medicare. If you are not part of Medicare, it means seniors get to go out and choose their own program.

My father is 84 years old. Last year he had a heart attack and a stroke and a hernia operation and we are going to give him a check not enough to buy any private health care plan after he has paid for decades into the program, and wish him good luck to buy a plan in the private sector. People in their mid 40's and 50's cannot buy health care on their own. The chances of senior citizens having that freedom means that they will not be covered by health care. Mr. Dole, the majority leader, voted against health care when it came before him when he was in Congress the first time.

If this was an honest debate, most of the people on the other side of the aisle would say they do not believe government ought to be guaranteeing health care to anybody and not even seniors, and they would be for ending the program. But rather than that, they want to bankrupt and destroy the program through subversion.

Let us ask the fundamental question. They keep quoting that the trustees said there was a problem. Indeed, the trustees did say there was a problem, and if they would bother to listen to those trustees for the other half of the sentence, the trustees will tell you that it is an \$89 billion problem. How do you get from \$89 billion to \$270 billion in cuts? It is because you want a \$245 billion tax cut.

Let us take a look at how you manage a society, how you manage a business, how would you take care of your family? Because we remember the contract that was signed on the back side of the Capitol. The contract was they were going to protect family. We now know what family it is. It is the GOPAC contributor's family. If you make \$350,000, the Republican budget says that you need a \$20,000 tax cut. If you live on Social Security, they say you need to spend another \$1,000 and get less coverage in your Medicare.

Is that what government is supposed to be all about? Are we supposed to come here and make it more difficult for the people who fought World War II, who saved democracy for this country and the world, and as they come to the point where they need health care cov-

erage, which we guaranteed them, that you are going to pull the rug out from under them?

Oh, yes, you are going to give them choices. You can have a medical savings account. I know a lot of seniors that can save up \$26,000 to \$30,000 for a 1- or 2-day visit to the hospital. If you are in the \$350,000 category, yes, you can have a medical savings account. If you are living on Social Security and even a small pension, that savings account does not do anything for you. This is about taking from the needy to pay for the greedy. The honest debate here is where should this society go? This society needs to go by providing for senior citizens.

The debate here is very simple. Is this society going to take care of the needs of the greedy, those who can afford to contribute to GOPAC, those who make \$350,000 a year? Are we going to go back in the back rooms as the Republicans are back there tonight trying to buy a few more votes?

Last time it was the AMA at the cost of the seniors. My doctors do not want that deal. My hospitals do not want a deal that will leave seniors further out in the cold. They want to have a health care system that protects seniors and working men and women in this country.

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The SPEAKER pro tempore (Mr. BUNN of Oregon). Under a previous order of the House, the gentleman from California [Mr. RIGGS] is recognized for 5 minutes.

[Mr. RIGGS addressed the House. His remarks will appear hereafter in the Extensions of Remarks.]

REQUEST FOR PERMISSION TO ADDRESS THE HOUSE

Mr. MILLER of Florida. Mr. Speaker, I ask unanimous consent to address the House for 5 minutes.

Mr. GEJDENSON. Mr. Speaker, I object.

The SPEAKER pro tempore. Objection is heard.

ON MEDICARE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas, Mr. GENE GREEN, is recognized for 5 minutes.

Mr. KINGSTON. Mr. Speaker, will

Mr. KINGSTON. Mr. Speaker, will the gentleman yield?

Mr. Speaker, if the gentleman will yield, I will yield back when my time comes to repay him.

Mr. GENE GREEN of Texas. Mr. Speaker, I know there was an objection for a Member, and I hope that we do not see that because there was an agreement earlier tonight. But I would hope we would be able to proceed with the order.

If the gentleman would like to have someone to stand up over there and ask to speak now, I will wait my turn.

PARLIAMENTARY INQUIRY

Mr. KINGSTON. Mr. Speaker, I have

a parliamentary inquiry. The SPEAKER pro tempore. Will the

gentleman from Texas, Mr. GENE GREEN, yield for the purpose of a parliamentary inquiry?

It does count against his time. Will the gentleman yield for the purpose of

a parliamentary inquiry?
Mr. GENE GREEN of Texas. Mr. Speaker, we need to go ahead and go forward with it because I have 5 minutes on Medicare, and it is a concern. I would be more than happy to sit back down, if the Speaker would like to recognize a Member from the other side because I think the objection has been withdrawn.

Mr. KINGSTON. Mr. Speaker, I ask unanimous consent the gentleman yield back his time without having it charged against him in the name of decorum so we can go back and forth.

The SPEAKER pro tempore. Without objection, the special order of the gentleman from Texas, Mr. GENE GREEN, is vacated without prejudice.

There was no objection.

REPUBLICAN MEDICARE REFORM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida [Mr. MILLER] is

recognized for 5 minutes.

Mr. MILLER of Florida. Mr. Speaker, tomorrow is an historic day. It is exciting, the plan that we are going to present on Medicare tomorrow. I am proud of the plan that we are going to present to the American people tomorrow and we will vote and pass it tomorrow. And all we are hearing from the other side is fear and scare tactics. That is sad.

For the seniors of this country, it is one of the most important issues we are facing, and all we are hearing is scare tactics and fear and, oh, my gosh, the sky is falling, the Chicken Little story. This is not the case. We have a good plan with which we all agree on so many things.

There are a lot of things we agree with on this plan. We agree, for example, that Medicare is so important that we have to do something to save it. We agree that it is going bankrupt. It is the Clinton trustees that say it is going bankrupt. We agree that next year for the first time in the history of the plan, less money is coming in than is going out. And in 7 years, the total fund is bankrupt, the part A fund. So there is no disputing that fact. We agree there.

We should agree that we do not want a Band-Aid approach, that we really want to fix the problem because the problem gets really bad in the year 2010 when the baby boomers come along. In year 2010, which is 65 years after World War II, is when the whole thing explodes. And all we are going to do is a Band-Aid approach and putting it off to another day, a major problem when the rest of us start retiring.

I think we should agree that we need to fix the plan and start working on the baby boomer problem. And we should agree on choice. What is wrong with choice? As a Federal employee, all Federal employees have a choice of plans. And all they are doing over there is to ridicule the idea that seniors should have a right to choose. I have a right to choose. Every Member has a right to choose. Every member of the Department of Commerce has a right to choose. Everybody in the Department of Agriculture has a right to choose. Why should not seniors have a right to choose?

Not only do they have a right to choose, they get to stay in the plan they are in right now. They do not have to leave that plan. They keep that plan. But why not let them have a choice? If they want to choose the medical savings account, that is their right to choose. Nothing wrong with that. Why ridicule the idea that some seniors may want a medical savings account?

Why not allow local hospitals and local doctors to go together to form their own plan? Why not allow them, give a choice. Health care is a local issue. Why not allow the groups to work together?

Why not allow HMOs and managed care programs to be offered to seniors. I do not have them in my area very much. What is wrong with giving them the right to choose? Why fight the right to choose idea? It makes no sense.

Our plan has tough waste, fraud and abuse. Who can disagree with fighting waste, fraud and abuse? They cannot get mad at us that we are not increasing copayments and we are not increasing deductibles. What is wrong with that? You have to agree with us on that

All they want to do is start these scare tactics. They say, we are cutting Medicare by \$270 billion. Let us get the facts straight.

The next 7 years we are going to spend \$354 billion more than we spent the last 7 years, \$354 billion more than the next 7 years than the last 7 years. Let us divide that up by the number of people on Medicare. We are spending \$4,800 per person on Medicare today. We are spending \$6,700 per person on Medicare in 7 years. Now, to me it does not take remedial math, it does not take a Ph.D. in statistics to understand that going from \$4,800 to \$6,700 is an increase. It is not a cut. We are increasing spending by \$354 billion over 7 years.

Where does this idea of getting beat up on the cut come from? That is fear tactics; that is trying to scare the seniors. And that is wrong.

And then we start talking about tax cuts. What is wrong with the tax cut? It is a totally separate issue. What happens if we have no tax cuts? We get rid of all the tax cuts? What happens to Medicare? It is bankrupt in 7 years. It has no impact on it.

Medicare part A is a trust fund. The only money going in is a payroll tax and the only money going out is to pay for part A. So it has nothing to do with income taxes. So if we have no tax cut at all, it still goes bankrupt. So that is a phony issue.

Let us debate the tax cut on its own merits. And it really is a tax cut for working families in this country.

Now we talk about the hearings. We have had 38 hearings and we have listened to the American people.

I think in 5 years we are going to reflect back and say, we made a great decision tomorrow to reform Medicare.

MORE ON MEDICARE

The SPEAKER pro tempore. Under a previous order of the House, and without objection, the gentleman from Texas, Mr. GENE GREEN, is recognized for 5 minutes.

There was no objection.

Mr. GENE GREEN of Texas. Mr. Speaker, let me answer my colleague's concern about the right to choose. Seniors have the best right to choose today. They can choose whatever doctor and hospital they want to. But under the plan that is going to pass tomorrow they will not have that right because they will be priced out of the market.

The cuts we have talked about. They discussed the cuts. Well, it is a cut because, if we have a growing senior population by the year 2002, and they are saying, they do not grow as fast with the improvements in that plan, then we are going to diminish the ability of seniors to be able to have access to health care.

That is what they cannot explain. Let us get down to the basics though. We will vote on a \$270 billion slowing of the growth for the year 2002 to pay for a \$245 billion tax cut. I have heard this for months that we paid for that in the spring. We have not paid for anything since the spring. There has not been one appropriations bill passed here. The one that passed was vetoed by the President. They are going to use \$245 billion over the next 7 years to balance off the cuts in Medicare growth, because there are seniors who are going to grow into it.

My dad is 80 years old. He is the growth in Medicare because he is going to need it next year. I hope he needs it in 2002. But they are not planning for it because they want to pay for a tax cut now to pay for political promises. On Monday I visited a senior citizens center in Jacinto City, TX, just outside of Houston. I was presented over 5,000 petitions that I left here this morning on the House floor from senior citizens, working families across my district. This signed their names because they are very concerned about the broad and extreme cuts that the Republicans are talking about that we are going to vote on tomorrow

The cuts, \$270 billion, in it only fixes Medicare to the year 2006. Up until last