

Cross to Lieutenant Colonel Harold Cohen, United States Army Retired, for extraordinary heroism in action. Lieutenant Colonel Harold Cohen distinguished himself by extraordinary heroism on February 25, 1945, when the situation became untenable during his battalion's attack upon Brake, Germany. Small arms, artillery and direct fire came from all directions. Colonel Cohen took a position of high ground in plain view of the enemy. Oblivious to all danger and constant fire that fell all about him, directed tank fire and lifted friendly artillery fire that was falling too close. His personal bravery, inspiring leadership and tactical skill retained the initiative and gained the important objective. Lieutenant Colonel Harold Cohen's quick heroic actions and personal courage reflect great credit on him and the United States Army.

Harold Cohen heads up my military academy appointment committee. I am very proud that Harold Cohen and his wife Bettye are my good friends.

There are two people who tonight are not with us, Gen. George Patton and Gen. Abe Abrams, who are very proud of Harold Cohen. They rolled over tonight and smiled as Harold Cohen received the Distinguished Service Cross from General Reimer. They are proud of you, Harold, as am I.

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

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

#### BILL PASSES HOUSE INCREASING PENALTIES FOR WITNESS AND JURY TAMPERING

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

Mr. FOX of Pennsylvania. Mr. Speaker, I want to take this opportunity to thank you for your support this week of legislation which I brought forward through the Committee on the Judiciary.

I wish to thank the gentleman from Illinois [Mr. HYDE], chairman; the gentleman from Florida [Mr. MCCOLLUM], chairman of the Subcommittee on Crime; the gentleman from Michigan [Mr. CONYERS], ranking member; and the gentleman from New York [Mr. SCHUMER], subcommittee ranking member. Each of them played a part in making sure legislation which I introduced and unanimously passed this week which calls for additional penalties for witness intimidation, as well for juror tampering and juror intimidation.

This legislation was the outgrowth of an article that was part of a series in the Wall Street Journal which outlined a few years ago the fact that some of our Federal defendants saw fit to use self-help and intimidation on witnesses and jurors to get out of the substantive crime for which they were charged, and they had rather do that because the

law actually provided at that time the disincentive to use the tampering and risk maybe being found guilty of tampering, and they were, but they were found not guilty because of self-help, an illegality, of the major charge. Our legislation this week will change all that.

From now on, hopefully with the Senate's approval and the President's signature, our legislation this week will make sure that the penalties will be equal, the substantive events and the offense as well to tamper with witnesses and jurors.

I know that this will do a lot for us across the country. My own District Attorney Michael Marino from Montgomery County, PA, who endorsed legislation early on and also helped us receive the endorsement of the Pennsylvania District Attorneys Association had outlined very well that this legislation would very much help him prosecute criminals because witnesses and jurors would feel more secure.

In our neighboring county in Philadelphia, District Attorney Lynn Abraham had for a long time desired this kind of legislation because she has had difficulty getting the high conviction rate she wants for homicides. While her office does an excellent job, they are plagued with a problem of witness and juror intimidation in their cases.

Legislation like this and similar legislation to be passed in the 50 States for the State courts will go a long way for us in helping to make sure that prosecutions proceed, that justice prevails, and that those who are charged with crimes cannot use self-help any longer to exculpate themselves from those crimes and interfere with the court system.

□ 2230

I also wish to note this week that this was an excellent week for our crime victims because three other bills were passed.

Megan's bill, by DICK ZIMMER of New Jersey; that legislation will require the registration of known sex offenders.

And, as well, legislation from DICK CHRYSLER of Michigan, that is going to add additional penalties for those who would commit violent crimes against children or violent crimes against seniors. They will in fact receive greater sentences than the Federal statutes call for today.

And, finally, legislation from ED ROYCE of California. This was a quest of his constituents, many of whom had come forward to him and especially one witness who appeared this week at the Capitol, explaining to us in very poignant terms about the problems of stalking in her State, the threats to those who are stalked and how we need tough Federal laws to prevent this crime and strong, stiff sentences for those who would commit. ED ROYCE'S bill this week will for the first time put teeth into the law, discourage stalking, and make sure that those who commit such heinous crimes will have to answer for them.

So I am happy to congratulate my colleagues on both sides of the aisle for their bipartisan effort to help us fight crime, improve public safety, and make sure that our courts are in fact free of the intervention by those who would destroy the system, create threatening situations for victims, I think destroy the public's confidence in our own law enforcement. But these bills this week have made a difference.

Mr. Speaker, I thank my colleagues for their support, and I thank the Speaker and my colleagues for your indulgence tonight.

#### REPUBLICAN BUDGET FOR FISCAL YEAR 1997

The SPEAKER pro tempore (Mr. TAYLOR of North Carolina). Under the Speaker's announced policy of May 12, 1995, the gentleman from New Jersey [Mr. PALLONE] is recognized for one half of the time remaining before midnight as the designee of the minority leader.

Mr. PALLONE. Mr. Speaker, I know that the hour is late, but I would like to address the Speaker and my colleagues tonight because today, in fact yesterday but we received more information today, the Republican leadership unveiled their budget, their budget for the next fiscal year. Very upsetting to me and I think particularly to senior citizens throughout this country, once again we see that the budget is very heavily dependent on cuts in Medicare and Medicaid, primarily once again to pay for tax breaks for the wealthiest Americans.

I think that we know that in 1995, all of last year, we went through a series of efforts with the Republican leadership budget to try to oppose what Speaker GINGRICH and the Republican leadership were trying to do to Medicare. They repeatedly came up with budget initiatives that would have cut Medicare and Medicaid severely, again primarily to pay for tax breaks, and again those tax breaks primarily to wealthy Americans.

I had hoped because of the battle that ensued, that was largely taken up by Democrats against this proposal, that we would not see it raise its ugly head again. But in fact it has, and yesterday and today and I am sure over the next few weeks we are going to see again an effort to basically use the budget and use the cuts in Medicare and essentially pay for the Republican-proposed tax breaks on the backs of senior citizens.

Now, I know I am going to hear over and over again from the Republican side that that is not really what is happening here, what we are really trying to do is somehow protect Medicare, or that somehow the level of cuts that are being proposed by the Republican leadership are not that different from some of the things that the President or some of the Democrats have proposed over the years.

But I would point out that there are major changes in the Medicare and

Medicaid program that are being proposed by the Republican leadership, so that it is not just a question of dollars, it is also a question of what the Medicare and Medicaid programs are going to be like. I would venture to say that they are going to be radically different from what seniors expect and have seen in Medicare over the last 30 years. In fact, I would say that the every nature of these changes in Medicare basically destroys the Medicare program and makes it into something which is very different and very radical from what we have today.

I am not surprised by that, because one of the points that I kept stressing throughout the Medicare debate last year was that the Republican leadership really does not like Medicare, really does not care whether Medicare is changed or negatively impacted because many of them never supported Medicare from the beginning.

I would cite a quote that was made by the likely Republican candidate for President, who said, and I quote: "I was there fighting the fight, voting against Medicare, one out of 12, because we knew it would not work," in 1965 when he was then a Congressman here in the House of Representatives. That statement was made by the Republican Presidential candidate just last October 24, 1995.

Similarly, we have the Speaker, the Republican Speaker of the House of Representatives. He made another interesting comment which is very similar, if you will, back in October, on October 26, 1995. He said, "We do not get rid of it," referring to Medicare, "in round one because we do not think that that is politically smart and we do not think that is the right way to go through a transition period. But we believe it is going to wither on the vine because we think people are voluntarily going to leave it."

Well, that was a statement that was made by Speaker GINGRICH again in October of last year. But what we are seeing here, and I think that it is really summed up by the Speaker's statement, is that the changes that are being proposed once again in this budget that we have received over the last couple days, the changes that are being proposed in Medicare by the Republican leadership will ultimately force seniors out of the traditional Medicare program that they are used to. In fact the program, the Medicare as we know it, essentially or eventually does wither on the vine and disappear as an effective and quality health care program for the average American.

Mr. Speaker, I could go on and cite some of the other Republican leaders. Representative DICK ARMEY from Texas, who is the majority leader, made similar types of statements. But I think that I would rather get into the whole issue of what they plan to do it and how they intend to change Medicare and Medicaid so that they are negatively impacted.

Before I do that, though, I just wanted to cite several reasons really why

massive Medicare and Medicaid cuts are harmful, and it really goes back to the original purpose of the Medicare program.

The reason why Medicare was started by President Johnson back in the early 1960's was because of the concern over the fact that many senior citizens simply did not have health care. They were living in poverty. They could not afford private insurance. They could not afford to pay out of pocket for the health care needs that they had.

What we did back in the early 1960's was to essentially make sure that all senior citizens would be guaranteed health care, that everyone, when they got older and over 65, would know that they were guaranteed a certain level of health care. That is what Medicare is all about. But the massive Medicaid cuts, the massive Medicare and Medicaid cuts will basically increase old-age poverty and turn this all around.

Half of all the senior citizens right now have incomes of less than \$17,000 a year. Medicare and Medicaid cuts will increase out-of-pocket health care expenses for seniors, and the result is a massive increase in old-age poverty to the extent that seniors will spend the little money that they have to pay for health care. If it is not covered by Medicare or certain things are not covered by Medicare and they have to spend more out of their pocket, they go further and further into poverty.

Mr. Speaker, it is also true that cuts in Medicare and Medicaid will reduce access to health care and result in an increase in sickness and misery. Particularly hard-hit will be Medicaid nursing homes where already minimal staff will be cut back to skeleton crews. I think a lot of us forget that the Medicaid programs, which is primarily a program for poor people, the majority of the money is spent for senior citizens in nursing homes. So if they cut back severely on the Medicaid program, they negatively impact nursing home care.

Medicare cuts also mean less access to doctors because Medicare, Medicaid pay less for physician services than private insurance companies. Many doctors are simply refusing to accept more Medicare and Medicaid patients. In rural areas, poor areas and areas with large numbers of senior citizens, access to health care will be further restricted by too steep Medicare and Medicaid cuts.

Massive Medicare cuts also mean increased cost shifting to younger people. The elderly use the same nurses, physicians and x-ray machines as everyone else. Right now Medicare is paying health care providers substantially less than the health plans covering the working population. The difference in public and private reimbursement rates has shifted from the elderly to younger patients.

So lest any of the young people feel, "Well, what does it matter to me if Medicare is negatively impacted or Medicaid," they need to know that

what essentially happens is that the hospitals and the health care providers shift the cost to younger people, so they ultimately will suffer.

Medicaid cuts particularly harm poor children. One out of every four children in America is in poverty. Medicaid is the primary health insurance system for America's poor children. Medicaid cuts mean that poor children will have even less access to health care.

Medicare cuts also harm the disabled. More than 4.2 million seriously disabled Americans have their health care needs met by the Medicare system. Hundreds of thousands of very seriously disabled Americans are taken care of in Medicaid nursing homes. Cuts in Medicare and Medicaid will do serious harm to the primary health care systems of America's most disabled.

I think, most important, the level of Medicare and Medicaid cuts that the Republican leadership has proposed will force many hospitals to close. We made this point during the debate last year in 1995. It is just as true now with the cuts that are being proposed by the Republican leadership now. Hospitals depend on Medicare and Medicaid for approximately 45 percent or more of total revenue. If Medicare and Medicaid are cut back, many hospitals will be forced to close and consolidate their patient base. The result will be less access to American medical care and fewer jobs in areas that may already have depressed economies.

Mr. Speaker, I think lastly, and I would like to mention this because I think it goes against what the Republican leadership has said from the beginning, the Republican leadership in the beginning of 1995 talked about and tried to implement their Contract With America. But what we were saying as Democrats throughout that debate is that the Congress cannot make a new Contract With America if it is not willing to make good on the old Contract With America, which is Medicare.

The contract said that working Americans would be taxed their entire working lives in exchange for known and specified benefits in old age, and that contract was broken in 1995 by the Republican leadership. I believe it is broken once again today with the level of Medicare cuts and the changes in the programs that are being discussed or being proposed by Speaker GINGRICH and the other Republican leaders.

Now, let me get into a little analysis of exactly what we received yesterday and today as part of this new Republican budget for 1997. Again, a lot of this is just based on press conferences or press materials. But what was presented by the Republican leadership repeats many of the extreme policies that were proposed in the fiscal year 1996 budget which was vetoed by President Clinton last December.

It maintains the skewed priorities of the early Republican budget: large tax cuts paid for by excessive cuts in Medicare and Medicaid. Medicare is cut by

\$168 billion over 6 years. The numbers have changed slightly, but the impact on people and hospitals is the same as last year's budget. The implications for health care delivery, seniors will have less choice. Many of the hospitals will close, and doctors and hospitals will be able to do balanced billing. That is where they simply charge Medicare recipients more than what Medicare pays.

The Republicans claim that their cuts of \$123 billion—of this \$168, \$123 billion is in part A, which primarily pays for hospitals and health care institutions—the Republicans say that these cuts are necessary to preserve the solvency of the Medicare Trust Fund through the year 2006. In fact, the President's budget proposal, which he unveiled earlier this year, extends the life of the trust fund through 2006 without such deep reductions.

□ 2245

Republicans are clearly using funds cut from Medicare to pay for part of their tax breaks, just as they did in 1995. Now when you go to Medicaid as opposed to Medicare, Medicare being primarily a program for seniors regardless of income, Medicaid primarily for poor people regardless of age, Medicaid spending in this new Republican budget is cut by \$72 billion over 6 years. They block grant Medicaid. It is this idea of sending the money back to the States in a block grant, cutting the amount of money that the States get, because Medicaid, the States have to match what the Federal Government puts up. So if you block grant the money and send the Federal dollars back to the States, you reduce the amount that the States are going to get and you basically say look, you do what you want with it, without any strings attached.

What that means is that Medicaid, as we know it, which entitles certain people, certain poor people, to health care benefits, children, pregnant women, certain people were just automatically eligible because of Federal guidelines, well, with this block grant approach, where the States basically get less money but are free to spend the money as they please, essentially you are eliminating the guarantee of coverage to a lot of low income children, to a lot of nursing home residents, because what the States will do is they will say okay, we are getting less money, we cannot afford to pay as much State money as we used to, and, therefore, we will just say that certain categories of people are not eligible for Medicaid, or even if they are we will not provide certain services.

So the whole block grant approach to Medicaid essentially means a lot of people will not have coverage who have it now, and if they do have coverage, the types and amounts of services will be severely impacted.

In Medicaid, the proposed cuts of the Republican leadership are \$18.5 billion deeper than the reductions proposed by President Clinton. But more impor-

tant, Republicans appear to be proposing a change in the State match rate which could ultimately produce cuts in total Medicaid funding of more than \$250 billion through the year 2002.

I will get into that a little more, in a little more detail later, but essentially right now, the Medicaid program is whatever Federal dollars are put up, the States have to match them essentially 50-50 to achieve a dollar that is spent on Medicaid patients. What the Republicans are proposing to do is to say we will give you more Federal dollars and you do not have to match as much in State dollars. But the point is that the overall amount of money that would be available for Medicaid patients is less, and hence you get the interest in the States in actually spending less or disqualifying certain people who are now eligible for Medicaid.

Now, I wanted to get into a little on Medicare again, what changes are really being made and how radical the Republican changes are to the Medicare program for senior citizens. There are basically three aspects of the current Medicare program for seniors that have existed since it began under President Johnson that are now threatened by the Republican proposal that has been unveiled.

Right now, Medicare offers beneficiaries, seniors, unlimited choice of doctors and hospitals. They can go to any hospital or doctor they want. It offers protections against balanced billing, in other words, limitations on what doctors can charge you beyond what Medicare pays, and, third, guarantees coverage of all Medicare benefits for the premium established by law.

So if you are eligible for Medicare under current law, you are entitled to certain benefits. Well, all these protections are at risk under the budget and under the proposals the Republicans are putting forward.

First of all, let us talk about this unlimited choice of doctors and hospitals. What they are going to do, what the Republicans are proposing to do, is push more and more and eventually most senior citizens into HMO's or managed care systems, where you do not have a choice of doctors or hospitals. The way they do that is through very tight budget caps. They basically put a cap on the overall amount of money that is available in the current fee for service system, where you choose your own doctor. So they say if you go into an HMO or managed care, more money is going to be available for reimbursement to hospitals or to physicians than if you stay in this current system where you choose your own doctor or hospital. So essentially seniors get pushed, if you will, into the HMO's, into the managed care systems, because that is where the money is.

The second thing that I mentioned is this existing protections against balanced billing. Under current law, seniors are protected from balanced billing, in other words, where the doctors

want to charge more than what Medicare provides, and the same with hospitals. Hospitals under current law may not charge seniors one penny more than their allowed fee. Doctors may not charge beneficiaries more than 50 percent above the fee that Medicare pays.

But what they are essentially doing under the Republican plan that is proposed is that doctors and hospitals could charge seniors any amount they want for Medicare services if the senior stays in the traditional fee for service system. So if you want a choice of doctor and hospitals, and you stay in the traditional system, then they can charge you whatever they want over and above Medicare. If you move into the managed care and the HMO, that would not be the case, but again, one more incentive to move to managed care, to HMO, where you do not have your choice of hospital or physician.

The last thing, as I said, under current Medicare law there is guaranteed coverage of all Medicare benefits for the premiums, and so if you know you are in Medicare you get certain benefits under the law. But all of a sudden the Republicans have come up with a new idea called medical savings accounts, and what this does is, this is an untested idea, MSA's, essentially what we are doing here is using senior citizens as guinea pigs for this untried new proposal. Under the Medicare savings accounts proposals, the voucher—

Mr. KINGSTON. Will the gentleman yield?

Mr. PALLONE. My time is limited. I have to go with the time I have. I am sorry, I cannot yield.

Under the medical savings accounts proposal, basically you are going to get a Medicaid voucher that could be used to buy a catastrophic health insurance policy with a high deductible, it might be as high as \$10,000. Any difference between the cost of that policy and the voucher amount would be placed in a tax-favored medical savings account. So if you just want to use your Medicare money, if you will, or a voucher, to have a high deductible account, you can do that. But then if you get sick, of course, you have to pay that out of pocket.

But the problem is that only the healthiest and the wealthiest seniors could afford to gamble with this kind of high deductible policy. Those individuals who buy the MSA's, the healthier and wealthier people, will be outside the traditional pool, so we believe the average costs eventually of those remaining in Medicare would increase. Again, these are significant changes, I believe, and I think it is self-evident, in the Medicare program as we know it.

So that is what we are hearing from the Republicans. Again, they were talking about these proposals last year, and they are coming up again now in the context of the budget.

Let me talk about the changes in the Medicaid program, the program that is

primarily for low income individuals. Right now 36 million Americans receive Medicaid Benefits. Twenty-six million of them are poor children and adults. But, again, when you talk about Medicaid, the majority of the money is spent on nursing home coverage for senior citizens.

So I want seniors to understand that even though Medicaid is for low income seniors, most of the money goes to pay for nursing home care for seniors, many of whom have spent the amount of money they saved for nursing home coverage and then have to go on to what we call Medicaid coverage to pay for the nursing home care.

What we are concerned about here is when you block grant Medicaid under the Republican proposal, and you basically leave it up to the States to decide what to do, large groups of seniors citizens may no longer be eligible for nursing home care, or, if they are eligible for nursing home care, the level of services that is going to be provided to them under Medicaid will be significantly reduced.

Basically states could opt to drop the number of patients they cover, which would cause the number of uninsured Americans to swell, and, if that happens, the Urban Institute predicts that 4 to 9 million Americans will lose health insurance coverage, and every American could feel the effect of these cuts as states are forced to raise other taxes or as insurance companies raise premiums to make up for the increased costs.

So essentially what we are saying is even though you might say to yourself, what does it matter to me if low income people are no longer eligible for Medicaid, it does not have any impact on me, but it could easily have impact if states decide to continue coverage for those individuals because they feel an obligation to, and, therefore, you state taxes or other taxes could rise as a result of the fact that there is a shortfall in the Federal dollars.

I just wanted to read a quote, if I could, because I thought it was such a good one, from the Washington Post back in December, December 12 of last year, when this whole battle over Medicaid was on the floor of the House and was being considered for the last time in a significant way.

What the Post said, on Tuesday, December 12, about the Medicaid block grant, they said:

The Republicans want to go to a system of block grants, cut projected Federal spending sharply, cut what the States must put up to get their Federal funds, and largely let the States decide how and on whom the money will be spent. This would pretty well eliminate the Federal guarantee that the needy, young, and elderly could count on a certain level of care. Medicaid is not just a major Federal cost and major source of aid to state and local governments. It is an insurer of last resort in the health care system. Medicaid needs to be preserved to protect the vulnerable. The alternative is even more people uninsured. The poor, the States and hospitals and other institutions that serve the poor would all be stranded. This fight is not

just about the Federal budget and the Federal role. It is about that.

I need to stress that, Mr. Speaker. We are not just talking about the budget here. I bristle every time I hear that Medicare and Medicaid have become the subject of the battle over the Federal budget, because the bottom line is that this whole Republican proposal to cut Medicare and Medicaid is strictly budget-driven. They are not out to preserve and protect Medicare and Medicaid, they are trying to save money, and they are trying to save money primarily to pay for these tax breaks for wealthy Americans.

I believe very strongly that the whole Medicare and Medicaid debate and any changes to it, any changes to those programs, should be considered outside of the whole budget debate and should be considered separately, but they are not. The Republican leadership constantly brings it up in the context of the budget debate.

I see that my colleague from Ohio, is here and I would certainly like to yield to him.

Mr. KINGSTON. Did the gentleman find some time now to yield, now that we are yielding?

Mr. PALLONE. You have your time on the Republican side of the aisle, after I am done.

Mr. KINGSTON. I will be happy to yield back to you.

Mr. PALLONE. I yield to the gentleman from Ohio.

Mr. BROWN of Ohio. Mr. Speaker, I appreciate the leadership the gentleman has shown in this issue, not just this year but last year. This is sort of "There you go again with the Gingrich budget," or "The same old song," or whatever that we saw in 1995, last year, we saw the same kind of budget, Medicare cuts, Medicaid cuts, student loan cuts, cuts in environmental protection and environmental laws, all in order to pay for tax breaks for the richest people in the country.

Clearly with this budget, it is simply not much different this year than last year. Last year the American people rose up and said no to Medicare tax cuts for the wealthy, no to Medicaid cuts and student loan cuts of \$5 billion in order to give tax breaks to the wealthy, and this year the Gingrich crowd, Gingrich extremists, are basically doing the same thing, trying to sneak in the back door while some of these other issues are going on, trying to sneak in the back door in making these cuts so they can give major tax breaks to the wealthiest people in the country.

The real key I think is what you said, Mr. PALLONE, that they talk out of both sides of their mouth. Speaker GINGRICH himself said that we are trying to save Medicare, yet a year ago, some 6 or 8 months ago, speaking to a group of insurance executives, who stand to make a whole lot of money under the Gingrich Medicare plan, he said, "We do not get rid of Medicare in round 1 because we do not think that is politically smart."

Then he goes on to say, "We believe under our plan Medicare is going to wither on the vine." That is clearly what he thinks about it.

Then the Speaker says, "We are going to save Medicare. This plan is to save Medicare." Obviously it is not. This plan is to weaken Medicare, because he did not believe in it in the first place. As you said, the same with the Senator DOLE, that he saw the same thing, that he was against Medicare 30 years ago as a young House Member, and now that he voted against it then, he led the fight then, he does not want to see that kind of thing happen today.

#### ANNOUNCEMENT OF THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mr. TAYLOR of North Carolina). The Chair would remind all Members that remarks in debate may not include personal references to Members of the Senate.

□ 2300

Mr. BROWN of Ohio. Mr. Speaker, does that mean I cannot mention Speaker GINGRICH?

The SPEAKER pro tempore (Mr. TAYLOR of North Carolina). Members of the Senate.

Mr. BROWN of Ohio. Mr. Speaker, I apologize for that.

At the time about 30 years ago, then Congressman DOLE said that Congress—

Mr. KINGSTON. Mr. Speaker, I have a parliamentary inquiry.

The SPEAKER pro tempore. Does the gentleman from New Jersey [Mr. PALLONE] yield for a parliamentary inquiry?

Mr. PALLONE. I do not, Mr. Speaker. We are just doing special orders. There is no parliamentary inquiry.

Mr. BROWN of Ohio. I would say compliments to Mr. PALLONE on his leadership, not just last year but it seems that we are having the same debate this year. Last year the voters said no to the Gingrich plan of Medicare cuts and Medicaid cuts and draconian student loan cuts in order to give a tax break to the wealthy.

This year it is the same old song. It is coming back saying let us do it again. Last year, Speaker GINGRICH shut the Government down in order to try to get his Medicaid cuts and Medicare cuts and student loan cuts and weakening environmental laws in order to give tax breaks to the rich. He shut down the Government trying to get his way, and clearly the voters and the people of this country said that is not the way it ought to be. He gave up and now he is trying it again.

I cannot believe that we are going to have to go through this same debate. I hope that Speaker GINGRICH is not going to go so far this year that he threatens a Government shutdown to make Medicare wither on the vine and in order to get Medicare and Medicaid