and fine office, we have a balanced budget. We have welfare reform. We have reduced capital gains, which has led to the largest expansion on Wall Street and more income made by Americans in the equity markets than in our history.

We have increased Medicare funding, and we have created a lockbox hopefully for Social Security. We have passed a marriage penalty elimination, but the President vetoed it. We passed estate tax relief, but the President vetoed it. We passed a repeal of a phone tax, but the President vetoed it.

Mr. Speaker, we have restored military funding that was cut by this administration year after year. The White House sent us budgets that were inadequate for our military, and the Republican majority had to step up and make certain that our men and women in uniform were not only properly funded, trained, but that the personnel support that they need, the transportation support that they needed would, in fact, be there in a time of crisis.

People say we are just sitting around doing nothing, I think when you have a fight over real issues, then it is worth staying. We can go back to the ways of yesterday and spend, spend, spend to our heart's content and not care about the voters, because after all it is all about Members of Congress. I have to get elected, so I have to bribe my constituents in order to make sure they vote for me. So they spend money just willy nilly out of the pockets.

It is not theirs to pay, it just comes in the form of borrowed notes; and we fund the government excessively. We are here today over a few very, very minor issues. Yes, it was stated the President is away. He is in California.

There are other Members of their side of the aisle away campaigning, because, after all, control of Congress is more important than doing the people's work, being in charge somehow around here is more important than accomplishment. I always heard from my parents put people before your politics, make certain you take care of those who cannot take care of themselves.

As a Member of Congress, I voted for Head Start and a number of programs that the minority side has asked for. But at the same time, I recognize we have to have some fiscal restraint.

The gentleman from Florida (Mr. Young), the chairman of the Committee on Appropriations, bent over backwards to give the President and the White House and the minority side as much money as we possibly could find in order to make certain that their needs were met. But in the waning hours, it just was not enough, because it was more about shutting this place down, about causing gridlock, about trying to pretend that somehow nothing has been accomplished in this Congress.

Campaign finance reform, we passed in the House. Patients' bill of rights, we passed in this House. I mentioned the tax cuts previously, so there is a record of accomplishment. People do not raise their voices

People do not need to belly ache and browbeat. People need to come together and solve the problems that face America. That is why we were elected. We were elected to make certain, yes, in a partisan sense as a Republican, to represent the core elements of what my party is all about. The gentleman from California (Mr. HORN), who will speak in a moment, and I veer off from time to time on our party for a number of issues, because we believe we have to represent our districts, mine in Florida, his in California. We care enough about our constituents to say we will do what is right, not what is political.

The last 48, 72 hours, I have heard nothing but bellyaching from the other side of the aisle that has made me nauseous. It is not about doing something for people. It is about winning an election. It is about trying to gain power for the shear sake of having power. It is about being called chairman. That is not what this process is about; that will be decided November 7, and God bless America, it will be decided by people who pay taxes, who vote in this country, who make a difference, and who send us the money we spend here.

Let us stop the acrimony. Let us stop the nonsense and let us stop the partisanship from that side of the aisle and recognize there has been a number of good accomplishments by the 106th Congress.

SETTING THE RECORD STRAIGHT

The SPEAKER pro tempore. Under a previous order of the House, the gentle-woman from Texas (Ms. JACKSON-LEE) is recognized for 5 minutes.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I think it is important this evening to be able to set the RECORD straight. I am glad that my colleagues were able to individually really focus us on why we are here. I am here; but, frankly, I will be in my district tomorrow, because the real solution to this problem presented itself on late Monday evening, Sunday night, Monday day of last week, when there was a real agreement that would have brought us to the conclusion of this session.

It is interesting that over the course of debate that we have heard this evening, we have heard someone talk about taxes in upstate New York, not relevant to the American people, dealing with bringing closure to the appropriations process and ensuring that the government can run.

We saw some Members of this House present a map to talk about where the President of the United States, the commander in chief is and other Members of this House, none of that relevant. It has nothing to do with the negotiations process. All of this is dilatory tactics led by the Republican majority to press their points.

One of the leaders of the Republican majority said we are not going to let them go home because they will spend

the weekend demagoguing and talking about trying to take back the House when we know that they will not. Those are not words from Democrats, those are Republican words.

Frankly, Mr. Speaker, I would like us to resolve this. Let me tell you why. Rushing to the airport today to get back for one vote, of course, I thought the Everglades vote would be on the floor tonight, but unfortunately, it is not. I support it and would have looked forward to voting for it and will vote in the RECORD when I return, if I am so elected, that I would have supported it, but on rushing to the airport, I stopped by a senior citizen center and spoke to senior citizens. I am sorry I did not have more time, but, obviously, I had to get back to Washington for important deliberations of which I hoped that I would have been able to participate in and to secure a vote for the future of our great Nation.

I told those senior citizens that we were still trying to work on answering the question why health maintenance organizations, insurance companies, HMOs were closing up in cities and States across the Nation.

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I did not have much time to talk to those seniors, some of them with a number of ailments, some of them confused about why their HMOs closed. But on that very note, they applauded. They wished me well. They said, we know you have to get back to the airport.

That is what we are fighting for, a distinction between giving \$34 billion to HMOs versus giving monies to hospitals in rural and urban centers to keep their doors open, and giving the \$34 billion to HMOs with no accountability whatsoever.

What that means is that we can give them the money to recoup what they say are their losses; but the minute they receive their paycheck, they can immediately close up in Iowa City; Detroit, Michigan; Houston, Texas; New York, New York; Atlanta, Georgia, and leave seniors in a lurch. This is what this debate is about.

So the Republican majority can get up and talk all day about work, work, work. I will not be here. I will be in my district tomorrow, because there is no work. Frankly, I believe if we had work, we would have had the Labor-HHS bill, just as we have heard our colleagues say, the negotiators, negotiated the resolve of this bill.

They had an agreement on education funding. They had an agreement dealing with school construction. They had an agreement on Medicare. But, yet, the special interests took control. The U.S. Chamber of Commerce and others aid we cannot deal with those workplace safety rules. Frankly, I also spoke to my constituents about that.

We use these large terms, "workplace safety." Do my colleagues know what we are fighting about? How many of us have had the carpal tunnel syndrome, where one cannot move the hand? One might be on the computer or word processing or playing the piano, but one may be able to continue to work.

But the factory workers who get this syndrome cannot continue to pluck the feathers off a chicken or put the machine parts together. They cannot continue their work.

The only thing we have asked for is that rules will be implemented after the next President is elected. They squashed it, stomped on it, and said no way. Millions of Americans suffer with this syndrome.

We have been fighting for 3 or 4 years to get these kind of workplace safety rules so that these people who are on this kind of income working in factories in America would have some kind of protection.

But we blew up the last bill, the Labor-HHS appropriations bill, primarily because of that issue. Then of course we have heard all the characterization of immigrants. We are trying to provide opportunity for access to legalization of immigrants who are already in this country working, paying taxes, owning homes, and having children going to school. This is not a blanket amnesty. This is where we messed up, Mr. Speaker.

So to set the record straight, some of us are going home to work. We are going to wait on the Republicans until they find out that we are really working for Americans and get the job done.

H.R. 5622: A NEW VERSION OF THE MEDICARE INFRASTRUCTURE IN-VESTMENT ACT

The SPEAKER pro tempore (Mr. THORNBERRY). Under a previous order of the House, the gentleman from California (Mr. HORN) is recognized for 5 minutes.

Mr. HORN. Mr. Speaker, we all know that Medicare is a vital program for nearly 40 million seniors. But we also know serious management deficiencies continue to plague this program resulting in the waste or misspending of billions of dollars for Medicare.

Last year, the Medicare program made improper payments totaling an estimated \$13.5 billion for claims that were, to quote our auditors in the General Accounting Office, "that it was just not reasonable, not necessary and not appropriate."

In report after report, the General Accounting Office and other government auditors have outlined and detailed the problems in Medicare's financial management, and they repeatedly have offered this key recommendation: Medicare must develop a fully integrated financial management system that is standardized with all of its contractors so that timely, accurate, and meaningful information can be developed to control this \$300 billion-a-year program.

Mr. Speaker, in May of this year, I introduced legislation that I believe would move us toward that goal, the

Health Care Advanced and Informational Infrastructure Act. A similar bill was introduced in the other body by Senator LUGAR. Both of us believed that enacting sound and effective controls on Medicare programs must be made a high priority.

On July 11, 2000, the Subcommittee on Government Management, Information and Technology, which I chair, held a hearing on that bill, and witnesses included representatives from the General Accounting Office, the Health Care Financing Administration that administers Medicare, and the Medicare health providers and those who provide and service the computer systems that currently process Medicare claims and payments. These witnesses pointed out significant concerns. We listened.

We have now introduced tonight a new bill and a new version H.R. 5622. That legislation will address the concerns that were raised at the hearing while retaining the intent of the original proposal.

Similar to H.R. 4401, the new bill is designed to force the creation of an advanced information infrastructure that will allow the Medicare program to instantly process the vast number of straightforward transactions that now clog the pipeline and drain scarce health care resources

This bill is the result of an extensive bipartisan work with both majority and minority staff on our subcommittee and the full committee. In addition, we have consulted with the Health Care Financing Administration's chief information officer as well as the staff in the General Accounting Office to ensure that the provisions of the bill accomplish the worthy goals of the previous bill without inflicting unintended consequences.

This bill establishes a commission to work with the Secretary of Health and Human Services and the chief information officer of the Health Care Financing Administration. We want a modern integrated computer system. This system is to provide Medicare beneficiaries with an immediate point of service verification of insurance coverage and an understandable explanation of benefits.

In addition, the bill would simplify the process for health care providers by giving them immediate information about their patients' Medicare benefits and a detailed explanation of why a benefit has been denied.

Unlike H.R. 4401, this bill does not call for immediate payments to health care providers, which was a significant concern to the General Accounting Office and the Health Care Financing Administration. According to health care providers who testified at the July hearing, Medicare often pays claims more quickly than private insurance companies.

The new bill also eliminates a requirement that the advanced informational system include the Federal Employees Health Benefits Program. We

need to look at that for modeling. It does, however, require that the new system be structured so that it might be expanded for use by other government health plans; if they choose to do so, that is. Indeed, if this system is designed and developed as the bill requires, others will surely want to use it.

In addition, the bill expands the commission to include representatives of health care providers, Medicare information technology suppliers, and Medicare beneficiaries.

This bill is careful to avoid mandates that would undermine privacy rights. The privacy is of paramount concern and must be safeguarded in the design of an advanced network of the financial management systems for Medicare.

When seniors walk into the doctor's office, they deserve to know immediately what their Medicare benefits are and what copayments are or deductibles they will have to pay. When they leave the office, they deserve to have a simple statement explaining what was done and what is owed.

The goal of this bill is to reduce and, where possible, to eliminate excessive paperwork currently required by the Medicare program. Greater efficiency will free doctors to spend more time treating patients.

Mr. Speaker, the legislation could save billions of dollars in needless Medicare paperwork and inefficiencies and put an end to the many time-consuming and confusing complications both for the doctors and for the patients.

Mr. Speaker, Medicare's financial management systems and their annual reports of billions misspent would then be something of the past.

Mr. Speaker, I include a copy of H.R. 5622 for the RECORD as follows:

H.R. 5622

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

SECTION 1. SHORT TITLE; PURPOSE.

- (a) SHORT TITLE.—This Act may be cited as the "Medicare Program Infrastructure Investment Act of 2000".
- (b) Purpose.—The purpose of this Act is to design a strategy for the implementation of an advanced informational infrastructure for the administration of parts A and B of the medicare program in coordination with the Administrator of the Health Care Financing Administration and the Chief Information Office of the Health Care Financing Administration.

SEC. 2. ESTABLISHMENT OF THE HEALTH CARE INFRASTRUCTURE COMMISSION.

- (a) ESTABLISHMENT.—There is established within the Department of Health and Human Services a Health Care Infrastructure Advisory Commission (in this section referred to as the "Commission").
- (1) In conjunction with the Administrator and Chief Information Officer of the Health Care Financing Administration, the Commission shall develop a strategy to create an advanced informational infrastructure for the administration of the medicare program