

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 INVESTMENT 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 mispending 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 Officer 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").

(b) DUTIES.—The Commission shall carry out the following duties:

(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

under parts A and B of title XVIII of the Social Security Act, including claims processing by medicare carriers and fiscal intermediaries and beneficiary information functions.

(2) 18 months after the date all of the members of the Commission are appointed under subsection (c)(2), the Commission shall submit to Congress (and publish in the Federal Register) an initial report that describes a strategic plan to implement an advanced information structure for parts A and B of the medicare program, including a cost estimate and schedule for the plan, that—

(A) complies with all existing Federal financial management and information technology laws;

(B) provides immediate, point-of-service information on covered items and services under the program to each beneficiary, provider of services, physician, and supplier;

(C) ensures that strict security measures are integral to and designed into the system that—

(i) protect the privacy of patients and the confidentiality of personally identifiable health insurance data used or maintained under the system in a manner consistent with privacy regulations promulgated by the Secretary under the Health Insurance Portability and Accountability Act of 1996;

(ii) guard system integrity in a manner consistent with security regulations promulgated by the Secretary under such Act; and

(iii) apply to any network service provider used in connection with the system;

(D) immediately notifies each provider of services, physician, or supplier of any incomplete or invalid claim, including—

(i) the identification of any missing information;

(ii) the identification of any coding errors; and

(iii) information detailing how the provider of services, physician, or supplier may develop a claim under such system;

(E) allows for proper completion and resubmission of each claim identified as incomplete or invalid under subparagraph (D);

(F) allows for immediate automatic processing of clean claims and subsequent payment in accordance with the provisions of sections 1816(c)(2)(B)(i) and 1842(c)(2)(B)(i) of the Social Security Act (42 U.S.C. 1395h(c)(2)(B)(i) and 1395u(c)(2)(B)(i)) so that a provider of services, physician, or supplier may immediately provide the beneficiary with a written explanation of medical benefits, including an explanation of costs and coverage to any beneficiary under parts A and B at the point of care;

(G) allows for electronic payment of claims to each provider of services, physician, and supplier, including payment through electronic funds transfer, for each claim for which payment is not made on a periodic interim payment basis under section 1815(e)(2) of such Act (42 U.S.C. 1395g(e)(2)) for items and services furnished under part A;

(H) complies with all applicable transactions standards adopted by the Secretary under the Health Insurance Portability and Accountability Act of 1996;

(I) provides for system specifications that are flexible, modular in nature, scalable, and performance-based; and

(J) is designed to be used, or easily adapted for use, in other health insurance programs administered by a department or agency of the United States.

(3) Not later than one year after the date the Commission submits the initial report under paragraph (2), the Commission shall submit to Congress (and shall publish in the Federal Register) a final report on the Secretary's progress in developing an advanced informational system.

(4) Each report required under this subsection—

(A) shall include those recommendations, findings, and conclusions of the Commission that receive the approval of at least a majority of the members of the Commission; and

(B) shall include dissenting or additional views of members of the Commission with respect to the subject matter of the report.

(c) MEMBERSHIP.—

(1) COMPOSITION.—The Commission shall be composed of 13 voting members appointed in accordance with paragraph (2) and two ex officio voting members designated under paragraph (3).

(2) IN GENERAL.—Not later than 90 days after the date of the enactment of this Act, members of the Commission shall be appointed as follows:

(A) The Director of the Defense Advanced Research Projects Agency shall appoint one member.

(B) The Director of the National Science Foundation shall appoint one member.

(C) The Director of the Office of Science and Technology Policy shall appoint one member.

(D) The Secretary shall appoint one member who represents each of the following:

(i) Physicians and other health care practitioners.

(ii) Hospitals.

(iii) Skilled nursing facilities.

(iv) Home health agencies.

(v) Suppliers of durable medical equipment.

(vi) Fiscal intermediaries and carriers.

(E) The Secretary shall appoint two members who represent information technology providers, one who represents medicare information technology providers and one who represent health industry information technology providers.

(F) The Secretary shall appoint two members who represent medicare beneficiaries.

(3) EX OFFICIO MEMBERS.—The following shall serve as ex officio members of the Commission:

(A) The Secretary, who shall be the chairperson of the Commission.

(B) The Chief Financial Officer of the Health Care Financing Administration.

(4) QUALIFICATIONS.—Each of the members appointed under paragraph (2) shall be knowledgeable in advanced information technology, financial management, or electronic billing procedures associated with health care benefit programs. One of the members appointed under paragraph (2)(F) shall have expertise in health information privacy.

(d) MEETINGS.—

(1) IN GENERAL.—The Commission shall meet at the call of the chairperson, except that it shall meet—

(A) not less than four times each year; or

(B) on the written request of a majority of its members.

(2) QUORUM.—A majority of the members of the Commission shall constitute a quorum, but a lesser number of members may hold hearings.

(e) COMPENSATION.—Each member of the Commission who is a full-time officer or employee of the United States may not receive additional pay, allowances, or benefits by reason of their service on the Commission. Each member of the Commission shall receive travel expenses and per diem in lieu of subsistence in accordance with sections 5702 and 5703 of title 5, United States Code.

(f) STAFF.—

(1) IN GENERAL.—The chairperson of the Commission may, without regard to the civil service laws and regulations, appoint an executive director and such other additional personnel as may be necessary to enable the Commission to perform its duties.

(2) COMPENSATION.—The chairperson of the Commission may fix the compensation of the executive director and other personnel without regard to the provisions of chapter 51 and subchapter III of chapter 53 of title 5, United States Code, relating to classification of positions and General Schedule pay rates, except that the rate of pay for the executive director and other personnel may not exceed the rate payable for level V of the Executive Schedule under section 5316 of such title.

(3) DETAIL OF GOVERNMENT EMPLOYEES.—Upon request of the chairperson, the head of any Federal department or agency may detail to the Commission, without reimbursement, basis, any of the personnel of that department or agency to the Commission to assist it in carrying out its duties under this Act. Such detail shall be without interruption or loss of civil service status or privilege.

(g) PROCUREMENT OF TEMPORARY AND INTERMITTENT SERVICES.—The chairperson of the Commission may procure temporary and intermittent services under section 3109(b) of title 5, United States Code, at rates for individuals which do not exceed the daily equivalent of the annual rate of basic pay prescribed for level V of the Executive Schedule under section 5316 of such title.

(h) TERMINATION.—The Commission shall terminate on the date that is 60 days after the date the Commission submits to Congress the final report under subsection (b)(3).

(i) AUTHORIZATION OF APPROPRIATIONS.—

(1) IN GENERAL.—There are authorized to be appropriated out of any funds in the Treasury not otherwise appropriated, such sums as may be necessary for the Commission to carry out its duties under this section.

(2) AVAILABILITY.—Any sums appropriated under paragraph (1) shall remain available until the termination of the Commission under subsection (h).

(j) DEFINITIONS.—In this section:

(1) SECRETARY.—The term "Secretary" means the Secretary of Health and Human Services.

(2) ADMINISTRATOR.—The term "Administrator" means the Administrator of the Health Care Financing Administration.

(k) APPLICABILITY OF FACA.—The provisions of the Federal Advisory Committee Act (5 U.S.C. App.) shall apply to the Commission.

SEC. 3. IMPLEMENTATION OF SYSTEM.

(a) ANNUAL REPORTS ON IMPLEMENTATION.—Not later than 6 months after the Commission publishes in the Federal Register the final report required under section 2(b)(3) and annually thereafter until the date of final implementation under subsection (b), the Secretary shall submit to Congress a report on the progress of the Health Care Financing Administration on implementing a modernized advanced, integrated informational infrastructure for the administration of parts A and B of the medicare program.

(b) FINAL IMPLEMENTATION.—Not later than 10 years after the date of the enactment of this Act, the Secretary shall fully implement a modernized advanced, integrated informational infrastructure for the administration of parts A and B of the medicare program.

SEC. 4. ADMINISTRATIVE SIMPLIFICATION.

Section 1173(a) of the Social Security Act (42 U.S.C. 1320d-2(a)) is amended by adding at the end the following new paragraph:

"(4) INTERACTIVE TRANSACTIONS.—If the Secretary adopts a batch standard for a transaction under paragraph (1) that involves a health care provider, not later than 24 months after the adoption of the batch standard, the Secretary shall also adopt an interactive standard that is compatible with the batch standard so that the provider may

immediately complete the transaction at the point of service.”.

CONGRESS STILL WORKING FOR BETTERMENT OF NATION

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

Mr. GILCHREST. Mr. Speaker, we are here Thursday evening, and we all know that we are going to be here tomorrow, Friday. What I would like to tell my colleagues, all of them on both sides of the aisle, is that we are here to continue the process of legislating.

Some of the things that we are trying to work out here, one, for example, is to provide health care prescription drugs for Americans that need that service and do not have it right now.

We are working to create a system where no legal immigrants are turned away from our shores. We are working to ensure worker safety and much-needed, in certain circumstances, compensation for those who are injured in a variety of ways.

We are working to build schools for those municipalities around the country that need new construction. We are working to enhance the economy by stimulating productivity in the private sector. Some of that is by a tax structure. Some of that is opening new markets overseas.

We are working here, Mr. Speaker, to find ways to make this great country energy independent. We are working here, specifically what we will do tomorrow is to ensure that the environment is clean and sustainable.

Now, how do we do all those things while we are here working? Well, it is pretty fundamental. We as Members of Congress, both the Democrats and Republicans, and the two Independents, we come here every day, we exchange information. There is a sense of tolerance for somebody else's opinion. Then we vote. If you get 218 votes, you have the majority. Our fundamental democratic process is based on the majority. So if we have 218 votes, then that bill is passed out of the House and goes over to the Senate.

We hear a lot about gridlock and partisan politics, both here on the House floor and in the media, certainly. Well, I am here to say that partisan politics is actually the strength of our system. That means each of us is allowed to come here and express our deeply felt convictions without fear of any retribution or retaliation.

When we stand here and disagree with the Democrats or Republicans disagree with Republicans, or Republicans disagree with the President, that is the strength of our Nation, which is the diversity of thought.

Now, one cannot express one's difference of opinion in Cuba. One cannot express one's difference of opinion in Iraq to Saddam Hussein because one would disappear and never be seen again. But here on the House floor, the

fundamentals of democratic process is that every individual Member of Congress, whether one is the Speaker or a new freshman, has an opportunity to be a responsible advocate for what one believes. If one can talk to 218 Members, and they see one as credible and one has the right information, then one will get their vote, and one's bill will pass.

So the strength of our country is that we each have the availability to us, because of our Constitution, to express our heartfelt convictions.

There is one other thing that we need to do here on a regular basis, but especially now before this general election, is to tap the energy of the American people with all their diversity and their initiative and innovation. We need to inspire the American people to participate in the democratic process so that all of us collectively together can make the possibilities for this Nation and this world limitless.

PUTTING PEOPLE ABOVE POLITICS

The SPEAKER pro tempore (Mr. PITTS). Under the Speaker's announced policy of January 6, 1999, the gentleman from Georgia (Mr. KINGSTON) is recognized for 60 minutes as the designee of the majority leader.

Mr. KINGSTON. Mr. Speaker, we are joined here tonight by the gentleman from Arizona (Mr. HAYWORTH) and the gentleman from Minnesota (Mr. GUTKNECHT). What we want to talk about is what we have tried to do in our individual careers, and we believe that this Congress has, and that is putting people above politics.

See, when we were elected in Arizona, in Minnesota, and, in my case, Georgia, we did not go out there and say I am going to be a Republican, and I am going to only be a Republican and I am going to only represent Republicans. We went out there to say the American people want a change. We are going to try to put people above politics. We are going to try to stick to that.

Do my colleagues know what, I have found that a lot of times in these negotiations, the Democrats have a lot of good things to offer. What we try to do is put the best of the Democratic ideas and the best of the Republican ideas forward for the best for the American people.

2000

That is one reason why we are still here in Washington after the Senate has already adjourned. It is one reason we are still here to fight for the things that we believe in. It would be a lot more convenient for us during this election time to be back home pounding the streets in our own districts, but there are some things that we need to fight for.

My wife, Libby, often reminds me that she does not mind driving the car pool alone and being alone at parties and taking care of the kids and sitting

down at the dinner table and seeing my empty chair night after night if I am here to make a difference.

But if I am not making a difference and it is politics as usual, then it is time to go home. But so far we are here to put people before politics.

Mr. Speaker, I yield to the gentleman from Arizona (Mr. HAYWORTH).

Mr. HAYWORTH. Mr. Speaker, I thank my colleague from Georgia for yielding.

As he mentioned his beloved spouse, Ms. Libby, my thoughts turn to home and Ms. Mary and a conversation that my bride, Mary, and I had just last night.

This is a great honor to serve in the Congress of the United States. Evoking the memories of one who served at the other end of Pennsylvania Avenue before coming here, John Quincy Adams, he was heard to say, "There is no greater honor than serving in the people's house."

And so, Mr. Speaker, I think back to my conversation last night with Mary when she said, honey, we would love to have you at home. The kids have spelling tests. There is a lot going on. But you and the other Members of Congress need to stay there and complete the work you were sent to do. And as is often the case, Mary provides good advice, the kind of common sense that comes from Main Street, America, that may be disrupted in the Beltway and with the pundits and with the dominant media culture always ready to play a game of gotcha, especially now, Mr. Speaker, when we look at the calendar and see what approaches.

Fast approaching is the first Tuesday following the first Monday, election day, where our constituents, where citizens across America will make a choice. Conventional wisdom, our friends in the fourth estate, indeed our friends on the other side of the aisle, albeit sotto voce, from the other side of the aisle, say, we need to be at home. But the fact is we are here and here we will remain to put people before politics, to complete our work, to understand there are legitimate differences between people of the two major parties and those independents who join us here.

Mr. Speaker, I also think, in a sense, being entrusted with this role is not unlike applying for a job. And I have yet to take a job application and find a place to fill out partisan identification. I never see a spot on the resume or on a job application which asks whether you are a Republican or a Democrat or an Independent.

So putting partisanship aside, I think it is important for every Member who can possibly be here to return to this Chamber. And that is why I noted with great dismay tonight, as we cast the vote to make sure our Government was funded for another day, our friend the gentleman from Missouri (Mr. GEPHARDT), who happens to be the leader of the Democratic party in this Chamber, chose to be out campaigning in Missouri.