

throughout the United States, and indeed, in some of the forums of government in adversarial states and in some of our allied states, with some of our friends around the world.

Mr. Speaker, today it is against the law for the United States of America to defend itself from incoming ballistic missiles. It is against the treaty known as the ABM treaty. That treaty has the force of law in this country.

That means that if Russia, for example, should launch a ballistic missile to the United States, we have agreed, we have promised in a treaty, not to try to destroy that missile but to let it land in the United States and destroy millions of Americans, presumably, if it hits in a major city, or if it hits in a military installation, destroy thousands of American uniformed service personnel.

Now, we made this agreement with Russia, which seems like a stupid agreement, I think, to most people looking at it intuitively for the first time, we made this agreement with Russia when they had an extremely large nuclear arsenal and we had an extremely large nuclear arsenal. We thought that the best way to prevent a war from starting was to say that neither one of us would protect ourselves. So if they threw the first the first rock, we could not stop that rock, but we could respond with an overwhelming fusillade of rocks ourselves, that is, nuclear weapons, and both nations would be totally destroyed by these nuclear explosions.

This doctrine was called the doctrine of MAD, mutually assured destruction. Because of that, we adhered to our treaty not to ever build a defense against an incoming nuclear weapon.

Now, President Reagan did not like that. He said the best way to defend this country is to truly defend it, not simply to wreak vengeance on someone who throws that first nuclear weapon. The way to be most humane and not to destroy cities and not to kill millions of people is to have a shield, to have a shield or a protection against that incoming ballistic missile.

That was some 17 years ago, Mr. Speaker. Today President Bush renewed that idea and that philosophy, and said it will soon be manifested in an American missile defense program.

Now, even for those people who thought that MAD, mutually assured destruction, was a good treaty to have between the United States and Russia, then the Soviet Union, it does not apply anymore. The reason it does not apply anymore is because there are now lots of countries that never signed any treaty with the United States who now are developing missiles with the capability of carrying nuclear, biological, or chemical warheads into the United States.

For example, China never signed that treaty. They are building ballistic missiles right now and aiming them at American cities and telling us, it is your obligation not to defend your-

selves. North Korea now has recently tested a missile which, if we extrapolated its flight, would have enough stretch, enough distance to get to the United States, or at least parts of the United States.

Iraq and Iran are now testing missiles with increasing capabilities. They never signed any ABM treaty or agreement not to defend themselves, or for the United States not to defend itself against incoming missiles. They never signed the ABM treaty. North Korea did not sign the treaty. China did not sign the treaty.

As time goes on, we are going to see that this is the age of missiles. More and more nations are building those missiles. To some degree, we are like this country was in the 1920s when General Billy Mitchell came back to the Coolidge administration and said, "You know something, we live in an age of air power. We had better start building airplanes, because lots of other people, including potential adversaries, are building airplanes. If we do not build airplanes, if we do not get into the aerospace age, we are going to lose a lot of Americans dead on the battlefield of the next war."

We did not pay too much attention to Billy Mitchell. In fact, we court-martialed him for saying the Nation was unready for war. In fact, we were moving into the aerospace age. Although we lagged with our industrial base, we were able to catch up. It was because of American aerospace dominance in World War II that we were able to prevail in that war. Ever since then, our country has dominated the skies with respect to aircraft.

By the same token, Mr. Speaker, we live today in an age of missiles. In fact, it was in the Desert Storm operation that we saw for the first time Americans killed by ballistic missiles; slow missiles, but ballistic missiles.

For that reason, President Bush, in conclusion, Mr. Speaker, is absolutely right on to launch this program that will defend uniformed American servicemen and our citizens against incoming ballistic missiles. The American people should get behind it.

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#### THE MILITARY SURVIVORS EQUITY ACT

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

Mr. FILNER. Mr. Speaker, I would bring my colleagues down to Earth after the last speaker.

I rise today to speak about a bill to restore equity, equity, Mr. Speaker, to the survivors of our Nation's veterans. I call that bill the Military Survivors Equity Act, H.R. 1232.

It is hard to believe that we continue to condone a system that penalizes the aging survivors, mostly widows, of the veterans of our Nation. But that is exactly what the Military Survivors Benefit Plan does. When a member of the

military retires, he or she may join the Survivors Benefit Plan, known as SBP. After paying a premium for many, many years, the retiree expects that his or her spouse will receive, as is claimed in the literature, 55 percent of the retired military pay when that veteran dies.

But it turns out, in a very painful realization, that this is not the case. Most of the survivors who receive SBP benefits are military widows. We may not realize it, but when these widows who are receiving SBP benefits turn 62, what is called a Social Security offset causes their benefits to be reduced from the 55 percent they thought they were getting to 35 percent of their husband's military retired pay. That is quite a shock for widows.

This occurs even when the Social Security comes from the wife's employment. That is, they were entitled to the Social Security, the premium was paid for for their retirement, and yet, they offset one another.

Let me tell Members what this means to a military widow. I have received a lot of letters on this topic from my constituents and from around the country. Here is what one of them says:

My husband, who served in the Army for 20 years, was on Social Security disability because of heart problems and could no longer work. He died when I was 61. I received Social Security income plus my SBP. With those two incomes I was doing fine, paying my monthly bills and having enough left for groceries. But when I turned 62, I was notified that my SBP was reduced from \$476 to \$302. What a shock. That was my grocery money that they took away from me.

Another letter said:

While my husband was alive, we worked out a budget for me in case he died. I felt secure in the knowledge that he had provided for me by joining the Survivors Benefit Plan. I could not believe it when I learned I was not going to get the amount we were promised. I cannot believe that our government would do this to the widow of a veteran.

Mr. Speaker, it is past time to change this misleading and unfair law. We must provide some equity to the survivor spouses of our military retirees. My bill would fix this problem by eliminating the callous and absurd reduction of benefits and give what is expected and what is deserved, 55 percent of the military retired pay. To put it simply: no offset; a simple solution to a difficult problem, but an equitable solution to a mean-spirited practice.

Mr. Speaker, I hope my colleagues will join me in cosponsoring H.R. 1232, the Military Survivors Equity Act. Let us do this for our veterans and for their widows, their surviving spouses. We are causing them great pain and anguish.

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#### FURTHER MESSAGE FROM THE PRESIDENT

A further message in writing from the President of the United States was communicated to the House by Ms. Wanda Evans, one of his secretaries.

PERIODIC REPORT ON NATIONAL EMERGENCY WITH RESPECT TO SUDAN—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 International Relations and ordered to be printed:

*To the Congress of the United States:*

As required by section 401(c) of the National Emergencies Act, 50 U.S.C. 1641(c), and section 204(c) of the International Emergency Economic Powers Act (IEEPA), 50 U.S.C. 1703(c), I transmit herewith a 6-month periodic report on the national emergency with respect to Sudan that was declared in Executive Order 13067 of November 3, 1997.

GEORGE W. BUSH.

THE WHITE HOUSE, May 2, 2001.

SOCIAL SECURITY

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

Mr. SMITH of Michigan. Mr. Speaker, I am going to talk about Social Security, a little bit about the problems, a little bit about the commission that was appointed today by the President of the United States, George Bush, to try to come to a conclusion that is going to keep Social Security solvent.

We have been looking and acknowledging for almost 6 years now the serious problem of Social Security solvency. It has been a problem because when we developed Social Security in 1934, it was set up as a pay-as-you-go program, where current workers pay in their Social Security tax and it is immediately sent out to current retirees.

What we have been experiencing over the last 65 years is a dwindling number in the birth rate and an increasing life-span of seniors. So, for example, in 1942, we had almost 40 people working paying in their Social Security tax for every one retiree. Today, yes, Mr. Speaker, there are three people working paying a much higher Social Security tax to accommodate every one retiree.

The guess is that within 20 years, it is going to be two workers paying their tax for one retiree, so the challenge is increasing the return on that money that is being paid in by employees and employers in the United States.

Right now, the average employee is going to get a 1.7 percent return on the money they have paid in to Social Security in Social Security taxes. Today the President appointed a commission. It was my recommendation that we do not use a commission to further delay the implementation of a solution for this, because the fact is that the longer we put off this decision, the more drastic the changes are going to have to be.

There are only two ways to solve the Social Security dilemma: We either in-

crease the revenues, or we decrease the benefits and the amount of money going out.

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And what some of us have been suggesting for several years is that we increase revenue by getting a better real return on some of that money rather than simply lending it to the Government.

We have heard a lot of bragging that we are paying down the public debt. Actually, we are borrowing the money from Social Security and writing an IOU and then using that money to pay down the so-called debt held by the public, or I call it the Wall Street debt.

I urge the President to urge this commission to move quickly. I urge the commission to look at the legislation that many of us have been introducing over the last 6 or 7 years to make sure we keep Social Security solvent.

I think it is very important for the American people to know, Mr. Speaker, that we should not accept any recommendation from the White House that does not keep Social Security solvent for at least the next 75 years. It is too easy to say let us put Social Security first and then do nothing except add rhetoric and maybe pay down the debt a little bit. But what we have done with the so-called lockbox, with the so-called paying down the debt held by the public, does not help solve the long-term Social Security problem.

So I appreciate this time, Mr. Speaker; and I urge the commission to act as quickly as possible. I do see members of that commission that are going to be on the bottom end of the learning curve. That means that if they are going to understand the complexity and seriousness of the Social Security problem, that they need to do a lot of burning of the midnight oil.

PATIENT PROTECTION AND PRESCRIPTION DRUG COVERAGE LEGISLATION

The SPEAKER pro tempore (Mr. GRAVES). Under the Speaker's announced policy of January 3, 2001, the gentleman from Iowa (Mr. GANSKE) is recognized for 60 minutes as the designee of the majority leader.

Mr. GANSKE. Mr. Speaker, just a heads up, I will probably only take about half of this time, so that if any Members on the other side are going to give a Special Order, they should realize that I will not take the full hour.

Mr. Speaker, I want to talk a little bit about two health care issues that are very important: patient protection legislation and prescription drug coverage. Just last night, Mr. Speaker, I was at an event here in Washington, and a gentleman who is a CEO of one of the world's largest corporations received an award. This gentleman had had, when he was a child, a bilateral cleft lip repaired, and he spoke beautifully. He has risen to the pinnacle of

the business world. He had the advantage of having the appropriate care when he was a baby. And yet if we look at what has happened, my colleagues, around the country, with the advent of managed care, we will see cases like this.

Before coming to Congress, I was a plastic and reconstructive surgeon. I took care of lots of babies that were born with birth defects like this, a cleft lip and a cleft palate. And in the last several years, at least 50 percent of the surgeons who take care of children with birth defects like this have had operations on their patients denied because they were not "medically necessary." Not medically necessary.

Let me give a few other examples. In 1996, Musette Batas was 6 months pregnant when she had an inflammatory bowel disease flare-up. Her insurance company authored a 1-day hospitalization. Her primary care physician asked for a longer stay, but her HMO concurrent review nurse looked at Mrs. Batas' chart and said it was not "medically necessary."

Now, the nurse never consulted with the physician; she never saw the patient. Musette Batas went to the emergency department 10 days later with fever and pain. A physician sought approval for exploratory surgery. Three days later, the doctor still had not heard from the HMO and her intestine burst. Four days after emergency surgery, in which part of her colon was removed, the HMO nurse told her physician she had to be discharged. The physician refused. The nurse reviewed her chart, she consulted Millimen and Robertson's care guidelines, and based on that, the nurse said the HMO would not pay for any more time in the hospital because it was not "medically necessary." So she left the hospital because she could not afford to pay for it herself.

How about down in Texas in the last few years? There is a gentleman named Plocica. Mr. Plocica. He was suicidal. He was in the hospital. His psychiatrist said he needed to stay in the hospital. His HMO said no, we do not think he does. It is not medically necessary. So we are not going to pay for any more hospitalization. And when an HMO does not pay for a hospitalization, most people cannot stay in the hospital because they cannot afford the care.

They could not afford to pay for it out of pocket, so Mr. Plocica went home. His family reluctantly took him home, and that night he drank half a gallon of antifreeze and he committed suicide.

How about Nancy T. Vogel? She had a total abdominal hysterectomy to remove two tumors that weighed more than 3½ pounds. Her doctor said she needed at least 96 hours in the hospital to recover. As a physician, I would say that is the minimum. An HMO nurse looked at Millimen and Robertson's guidelines, guidelines that are used by HMOs, and determined that only 48 hours was medically necessary. So she left after 48 hours.