

we can begin to use the necessary bargaining power to rein in high drug prices.

This is not price controls; it is competition and bargaining. We saw that the Government was effective in negotiating a competitive price for the prescription drug Cipro during the anthrax outbreak. Why shouldn't we do the same for other life saving drugs for seniors?

In contrast to our simple and effective prescription drug benefit, the Republican bill is a complex scheme that would make Rube Goldberg blush. In fact, it is not a drug benefit at all. It is a host of subsidies to private insurers in the hope that they will offer a drug-only benefit to seniors. Will they? Time and again they have told us no.

Why would the Republicans put forward such a model? Well, quite simply they have a larger agenda—they want to privatize all of Medicare, and this is just another step. That is the only reason why seniors are not even given a choice of getting the benefit through their traditional Medicare provider.

And why don't they endorse our plan? Our plan is simple; it is comprehensive; it is what seniors want. The Republicans have raised just one issue: they say it costs too much. Well, I can tell you that we can afford it. It is just a matter of priorities.

To put the costs in perspective, we are told that our bill may cost \$500 billion dollars more than the Republican proposal over 10 years. Well, just a couple of weeks ago our Republican colleagues voted for a bill to make permanent the repeal of the estate tax on the wealthiest people in this country. In the second decade when that permanent repeal kicks in, it will cost the Treasury \$750 billion.

So, yes, this bill may be expensive. Seniors will spend \$1.8 trillion on prescription drugs over the next decade. That is expensive. But we can do something about it. It is a matter of choices.

Our prescription drug benefit has the strong support of organizations representing millions of seniors, such as the National Committee to Preserve Social Security and Medicare, the Alliance for Retired Americans, the National Council on Aging, and AARP. They recognize our benefit is a good value for seniors.

The bill we are introducing today also includes provisions to shore up the Medicare fee-for-service system such as increased payments to hospitals, doctors, and nursing homes. Senior citizens and individuals with disabilities depend on Medicare fee-for-service and ensuring its continued viability has always been a priority for Democrats.

The Medicare Rx Benefit and Discount Act is a solid bill that provides a comprehensive, affordable, and much needed prescription drug benefit in Medicare. It also moves towards ensuring that seniors and those with disabilities can continue to count on the same high quality care from their providers as they receive today.

It is a good bill, and I hope my colleagues in the House will join us in supporting it.

EVERY CONFLICT DEMANDS  
DIFFICULT CHOICES

**HON. MAC COLLINS**

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 26, 2002

Mr. COLLINS. Mr. Speaker, the following article appeared in the May 22, 2002 Griffin

Daily News, Griffin, Georgia. It was so moving that I felt the entire article should be read by every Member of Congress and I would like to submit it for the RECORD.

EVERY CONFLICT DEMANDS DIFFICULT CHOICES

(By Philip Smith)

I will address a subject that has had a special meaning to me. It is called by some as "limited war." It gets started by a stronger country answering the call of a weaker country (or should I say government) to protect and shield it by limited involvement from outside intruders while it has time to organize a means to govern and protect itself. This start had a heavy meaning to this country in the early 1960s, especially on Aug. 5, 1964, when the first U.S. pilot was shot down and taken POW. The U.S. Veterans Administration declares this date as the beginning of the American Vietnam era.

War is born of failure—the failure of nations to resolve their differences diplomatically and peacefully. Furthermore, it is waged with tools of death and destruction so that man may live in peace.

We found out just what was defined and not defined by "limited war" over the next 8.5 years of the Vietnam War. That war, which we lost, ended Jan. 27, 1973. After this decade (now 25 years) to ponder lessons of Vietnam, we can realistically think about the use of force again. It is my purpose to try to show some areas which must not be forgotten and must be completely understood before we can think more clearly about potential future conflicts. It took 10 years after my return from Vietnam before I wanted to read and understand the history of the country and the lessons we learned from the whole war. I have read many books and articles, but I am by no means an expert. I am smart enough to know that experience is the best teacher. We can't let this experience go by without learning her lessons. They were too costly. These are my views, but they are shared by more than 95 percent of all the combat Vietnam vets I have talked with. There is Total War, Limited War and Unilateral in Action. With all the massive destructive power in all the countries of the world, total war is an absurdity, just plain suicide. Unilateral in action is just turning your back as your hear screams of your friends dying because you don't want to get involved. Limited war is between the Fierce Hawk and the coward dove. In any future conflict, or better yet before any future conflict, we need to make some hard choices about (1) what the particular situation requires; (2) what our final objectives are and (3) how valuable are these objectives to the U.S., i.e., is it strategically a necessity to the U.S.? Is it worth the blood of our young men? Is it necessary in the survival of this country? Then, we need to develop appropriate forces.

There are four major mistake areas of concern surrounding Vietnam. (1) Gradualism was a policy that did not work in South Vietnam. We thought that if we kept turning the screws tighter on the North, inflicting enough pain, they would stop their aggression on the South. The politicians felt constrained to this gradually, because of political pressure. We were afraid if we went too fast, the Chinese or Soviets would get directly involved, plus our own critics of the war back home denounced any escalations. Well, every time we tightened the screws, the North adapted to the pressure and was able to endure and build up. Our only deviation from gradualism was Operation Linebacker II, which was around-the-clock surgically precise bombing campaign of Hanoi, Haiphong and other North Vietnamese cities. In mid-December 1972, when the peace talks

broke down, due again to the NVA not negotiating in good faith, President Nixon put the baseball bat to their heads and for the first time brought the North Vietnamese to their knees in Operation Linebacker II.

They signed readily in January to end the war. Linebacker II was a lesson on the use of force. In Vietnam, we pussy-footed around the military power and paid a high price for it. We fought much longer and escalated far higher than we had ever intended, and we lost. Think what might have happened if Linebacker II had been unleashed in 1965 and not 1972.

(2) Attrition and gradualism often are lumped together. Our ability to wear down an enemy whose history since B.C. had been to endure pain, ended ultimately in failure. Small powers can fight big powers in attrition wars and win. The pattern is the same: Initial public support, prolonged struggles without apparent result, decreasing public support, one battle that goes badly, a vote of no-confidence, then withdrawal. But, it is possible to fight a war of attrition if there is total war, mobilization and commitment in the initial public support phase, such as World War I or World War II.

(3) Rules of engagement. We fought within specific rules of engagement while the enemy pursued a total war. As a helicopter pilot, we could not fire on the enemy unless we were not only being fired on first, but only if we had the specific person or persons identified. "Charlie" could fire at us while standing among a group of working peasants or villagers, and we could not return fire. But, he would give a child from this village a live grenade to pull the pin out as he walked up to some G.I. or rode in a helicopter. There were geographical restrictions for us, but none for the enemy. Don't think these rules won't demoralize a soldier fast.

(4) The people. To win any war, the will of the people must identify with the will of the conflict. For a young man to leave home while watching his country protest his leaving to fight an unpopular war and to arrive into that country seeing people protest his being there and fighting in a war where he has "rules of engagement" but the enemy does not, it doesn't take him long to see the futility in that war.

The will of the (Vietnamese) people was not the will of the government, no matter how much military hardware they had. So, without this "will," the enemy could hide in the open all over the country because they were the people. Without this "will of a people" to fight for a change, a change could never survive, an it didn't.

Some of the veterans of World War II and the Korean War have asked what is so special about the Vietnam combat vet. They, too, went through war. War is the same through time; only the weapons change. The horrors and pains and ever-present nightmares of war are the same after all wars. So, why are we, the Vietnam combat veterans, having so much more of a problem after this war?

Two issues keep coming up in talking with Vietnam vets: We Lost; we were defeated. We knew we could have won if only allowed to fight a war that had final objectives and not been a political palm.

(1) To my friends that were lost and all the men who died or were wounded or maimed for life, what is there to show for this sacrifice? These men were some of the finest people to ever live, and they answered their country's call, for what? Not only did we who came home have to live with a losing cause, but we came home to some hostile people who called us child-killers and dope heads, the thanks from a grateful nation.

(2) The second issue was guilt, guilt of taking people and ruining their customs and

form of life so they could wait on the U.S. dollar. Families were broken up, beautiful cities and shrines destroyed, a country which had one of the prettiest coastlines and mountains made to look like the moon with so many craters and sprayed so much that nothing would grow. Yes, this, then seeing a "no win situation," packed up and left only to see the South Vietnamese retreat in 1975. All the good and bad we had done for more than 10 years was gone in less than 10 days.

I have attempted this collection of views many times, but never have been able to get my thoughts or research completed or knew what to do with it after I had completed it until I talked to a grand lady, who is a retired teacher in North Carolina. She is a beautiful, well-educated person, who loves her country. This lady is special to me. Our eyes get watery when we speak to each other. One of the times I was shot down was in Laos along with three other helicopters, a gunship pilot friend of mine helped give us air cover until we could be extracted. He was shot down and killed. This friend of mine was her son. This tore her family apart. She asked the same question after the war: why? What was Fred's life for? What were all Freds' lives for? We can't let a Vietnam ever happen again. We must learn from our experience. We can't turn our heads on another future conflict without these questions answered before. We must demand answers from Washington. If the answers are yes to America's survival and the decision is to go, then the whole country must go for it immediately and completely or not at all.

This next one may be close, and it may have your sons or grandsons in it. If they have to die, we can't let them die in vain or live with guilt and humiliation the rest of their lives.

#### HONORING DR. JAMES E. CARNES

### HON. RUSH D. HOLT

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 26, 2002

Mr. HOLT. Mr. Speaker, I rise today to pay tribute to Dr. James E. Carnes, a constituent of mine who retired earlier this month after a distinguished career of service at the Sarnoff Corporation, the last eleven and a half years as President and CEO.

Dr. Carnes holds nine U.S. patents and is the author of more than 100 papers and presentations. He received the David Sarnoff Award for Outstanding Technical Achievement in 1981. He has made tremendous contributions to science, to Sarnoff and to our central New Jersey community.

Carnes earned his Ph.D. in electrical engineering from Princeton University and B.S. in engineering science from Pennsylvania State University, and served four years in the U.S. Navy.

Dr. Carnes began his career in 1969 when he joined RCA Laboratories as a member of the technical staff. In 1977, he transferred to RCA's Consumer Electronics Division, holding a variety of management positions, including Vice President of Engineering. In 1987, when Sarnoff Carnes became a subsidiary of SRI International, Dr. Carnes was named Vice President of Consumer Electronics and Information Sciences Research.

In addition to serving on the board of directors of SRI International and Sarnoff, Carnes serves on the board of several emerging

growth technology companies including Sensor, Inc., Sarif, Inc., Orchid Biocomputer and Sarnoff Digital Communications.

We in central New Jersey will miss Dr. Carnes and his steady leadership at Sarnoff. I hope that all of my colleagues in the House will join with me in wishing him every success in his future endeavors.

#### MEDICARE RX DRUG BENEFIT AND DISCOUNT ACT

### HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 26, 2002

Mr. STARK. Mr. Speaker, today, House Democrats keep our promise to introduce legislation creating a real Medicare prescription drug benefit.

The Medicare Prescription Drug Benefit and Discount Act is an entitlement that would guarantee affordable, comprehensive prescription drug coverage to all senior citizens and individuals with disabilities who are on Medicare. It also includes provider payment increases and reforms that meet or exceed, in selected areas, those included in the Republican-written Medicare Modernization and Prescription Drug Act. But this debate is not about provider payments. It's about providing beneficiaries with needed prescription drug coverage.

The benefit in this legislation is simple. It has no gaps, and no gimmicks. Beneficiaries will pay a \$25 monthly premium, have a \$100 per year deductible, and 20% co-insurance up to a \$2000 out-of-pocket limit. After a beneficiary spends \$2000, the government pays for all other needed prescription drugs. Under this legislation, a beneficiary will never pay more than \$2000 in a year, and most beneficiaries will pay far less. Beneficiaries whose incomes are under 150 percent of poverty will pay no premiums and no cost-sharing. Those with incomes between 150–175 percent of the poverty level will receive premium subsidies on a sliding scale basis and pay no cost-sharing.

These benefits will be guaranteed for every beneficiary, regardless of where they live. This legislation will reduce costs by using the market clout of 40 million beneficiaries to negotiate lower prices. It will also reduce costs for all Americans by closing loopholes in current law that allow pharmaceutical companies to game the patent system by preventing competition from equally effective, but lower cost, generic drugs.

The Medicare Prescription Drug Benefit and Discount Act guarantees the choices that matter. Under our plan, Medicare will pay toward the cost of every drug, not just those on which the private insurance company cut a special deal. And, under our plan, every pharmacy that is willing to play by the rules will be welcome to participate.

And, importantly, unlike the Republican plan, our plan will never force the elderly or disabled into an HMO or similar private plan in order to get a prescription drug benefit.

The prescription drug coverage in the Democratic bill will seem just like any other Medicare benefit, because it is a Medicare benefit.

Don't be fooled by Republican rhetoric. The motto of the Republican bill ought to be "cheat empor"—let the buyer beware.

Their bill is little more than an attempt to privatize Medicare, while doling out hundreds of billions of dollars in Federal tax dollar giveaways to their friends in the insurance and pharmaceutical industries.

And, no matter which measure you use, beneficiaries will pay more and get less under the Republican plan.

Our legislation will not be cheap. But we don't think twice about the cost of covering doctor visits and hospital stays under Medicare today. I would argue that prescription drug coverage is as essential to good health care in the 21st century as physician and hospital care was in the 20th century when Medicare was created.

Make no mistake: The Republican bill is designed simply to provide political cover for Republican members, not prescription drug coverage for senior citizens and individuals with disabilities.

Our bill meets the needs of the 40 million Americans who depend on Medicare. That's why the leading beneficiary organizations support this legislation. I look forward to the debate. I urge my colleagues to join us in support of a real Medicare drug benefit. Vote "yes" on the Medicare Rx Drug Benefit and Discount Act.

#### RECOGNIZING THE TRICENTEN- NIAL OF ALLEN, MARYLAND

### HON. WAYNE T. GILCHREST

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 26, 2002

Mr. GILCHREST. Mr. Speaker, I rise today to recognize the Village of Allen's 300th birthday. This Maryland community is located in the First Congressional District, which I have the distinct honor of representing. Established in 1702, I recognize this village for its longevity, and through that longevity, for influencing the unique flavor of Maryland's Eastern Shore.

Allen sits in Wicomico County, along Wicomico Creek. Central to its establishment was the Grist Mill, which was originally built and operated by the Brereton family. The mill was fully operational until 1919 when, after 217 years, it finally closed. The mill dam formed Passerdyke Pond, still a local landmark, and it was the spillway, or trap, that gave the settlement its first name. Trap eventually became Upper Trappe, then it was changed to Allen in 1882, named after a prominent resident at the time who was a storekeeper and served as postmaster.

With the mill and its location on the lower Eastern Shore, Allen developed into a considerable market during the 18th and 19th centuries. A post office helped give it status, along with the several general stores that have operated throughout its history and the introduction of the canning industry. And like most settlements on the Delmarva Peninsula, agriculture drove the local economy, and Allen residents have found fame over the years with strawberries, apple and peach orchards, tomatoes, and especially string beans.

The Asbury Methodist Church is another important Allen institution. Founded in 1829, the church helped Allen become one of the earliest free African American communities in the Somerset area of Delamara.