

pushes seniors into HMOs. This is no longer a debate just about including a prescription drug benefit in Medicare. Republicans are trying to dismantle the Medicare program that seniors have known and trusted, again, for 40 years. Mr. Speaker, this is completely unacceptable.

Republicans have been clear. They want to kill Medicare and privatize it. During the debate on the Republican bill this summer, the Republican chairman of the Committee on Ways and Means, the gentleman from California (Mr. THOMAS), said, and I quote: "To those who say that it would end Medicare as we know it, our answer is we certainly hope so." And as my colleagues know, the leadership of this body, the Republican leadership, has been on record as saying Republicans want to see Medicare "wither on the vine," to use their words.

Mr. Speaker, Democrats have been equally clear. We want to save Medicare and protect it. America's seniors see through the Republican rhetoric. This is not the beginning of a real prescription drug benefit under Medicare. This is the beginning of the end of Medicare as we know it.

America's seniors deserve better.

Mr. Speaker, our seniors are smart. They see through this Republican hoax for what it is and for what it is not. It does not put seniors and disabled Americans first. It does not reduce costs. It does not include all seniors and disabled Americans. And it is not under Medicare.

In short, this Republican hoax is not the real guaranteed defined prescription drug benefit under Medicare that our seniors want, that they need, and that they deserve.

Mr. Speaker, our seniors deserve better. They are the Greatest Generation. They have fought our wars. They came home and raised our families. They built a new America. The prosperity and quality of life that we enjoy today is owed to their lives of hard work and sacrifice. But today, seniors and disabled Americans are asking why, why is this, the wealthiest Nation in human history, not keeping its faith with its seniors, the citizens who built this country?

Mr. Speaker, the answer is simple: priorities. Republicans have different priorities, a few Republicans behind closed doors making deals that would rather give massive tax breaks to the wealthiest 1 percent of Americans than give a real prescription drug benefit to seniors who desperately need it. If I can paraphrase Winston Churchill: never in history have so few worked so hard to take away so much from so many. That is the Republican back-door deal-making.

Mr. Speaker, I urge my colleagues to vote against the Republican hoax, and I urge them to demand that Congress keep working to keep its promise to seniors by providing a real guaranteed defined prescription drug benefit under Medicare that our seniors want, need,

and deserve. I hope it is not too late for that. Democrats have been knocking on the door constantly saying, Let us in. Let the Democrats in. Let us work together in a bipartisan way to build a real defined guaranteed benefit under Medicare for our seniors that has bipartisan support and that will be sustainable over time. Instead, the Republicans did not allow House Democrats in the room.

Why is that important? That is important because we represent over 130 million Americans. That is important because within our caucus we have the benefit of the thinking of a large African American Black Caucus, our Hispanic Caucus, our Asian Pacific American Caucus, a large number of women in our caucus. We work hard on the issues here in the Congress. The thinking of this diverse group of people is very dynamic and quite different from the back-room deal makers that the Republicans wrote this bill with.

By excluding Democrats from the room, the Republicans excluded the strength of America, the benefit of the thinking of a very distinguished group of representatives of the American people. No wonder we ended up with a product that, do not take my word for it, read the Wall Street Journal today and see who wins in this bill. It is the pharmaceutical companies; it is the HMOs. The consumer comes in last.

This bill is not a defined real guaranteed benefit under Medicare. It does not meet that standard. It will not have my support, and I hope it does not have the support of a majority of the Members of this body.

#### GENERAL LEAVE

Ms. WATSON. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on the subject of my morning hour speech.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from California?

There was no objection.

#### UNIVERSAL MEDICARE DRUG PLAN IS A PRESCRIPTION FOR DISASTER

The SPEAKER pro tempore. Pursuant to the order of the House of January 7, 2003, the gentleman from Indiana (Mr. PENCE) is recognized during morning hour debates for 5 minutes.

Mr. PENCE. Mr. Speaker, despite the very best efforts of our House Republican leadership, I rise to oppose the prescription drug bill that will be considered before the Congress this week.

It would, in fact, represent the largest expansion of Medicare in 35 years. Nancy-Ann DeParle, President Clinton's Medicare administrator, actually called this legislation the biggest expansion of government health benefits since the Great Society. And so it will be.

I have consistently said that I would support the creation of a national prescription drug benefit in Medicare only if it is fiscally responsible and includes free market reform measures, which this legislation fails to do on both counts.

Only by significantly reforming Medicare along the lines that President Bush initially requested, can we act in a way that is responsible and meet the urgent and real needs of seniors for prescription coverage.

Of course there are seniors near the poverty level who need immediate help with the cost of prescription drugs. Nearly 24 percent of seniors have no access to prescription coverage, and about 5 percent have out-of-pocket costs of more than \$4,000 per year. For those seniors, our national government should respond with a drug discount card or some form of direct subsidy, and I have supported these efforts.

Sadly, the prescription drug plan currently being advanced in the Congress lacks such specificity and focus and actually would create a universal drug benefit that provides a government entitlement for every American over the age of 65, a population of some 37 million today that will grow to some 70 million in the year 2030.

While the need for some type of benefit is real, the need for a universal drug benefit is not. At present, 76 percent of seniors have prescription drug coverage, and the average senior spends less than \$999 per year in out-of-pocket expenses. And as always happens when Congress creates a massive new bureaucracy, there will likely be unintended consequences as well. Mr. Speaker, chief among them could be that millions of Americans with prescription drug coverage from a former employer could lose it. The Congressional Budget Office has estimated that this could happen in the tens of thousands.

But the most ominous consequence of a universal drug entitlement could be that it will usher in the beginning of socialized medicine in America. This type of system which is built on unrealistic fiscal projections and incorrect assumptions about human behavior would invariably lead to escalating costs for which price controls and outright government control would be seen as a last resort. In an America where abortion is legal and euthanasia is increasingly accepted, the American people would do well to ponder the implications of government-run health care in America.

Let us reform Medicare so it will be there for the future without placing an undue burden on our children and grandchildren. But beyond that, let us do no harm to the greatest and most diverse health care system in the history of the world. By agreeing to a prescription drug benefit for all seniors, rather than just those in need, Congress threatens our Nation's fiscal stability, the private prescription plans of