

the experience that I have had, is getting to know Mr. SMITH during these last few months much better than previously and the members of the staff who have worked so hard and so diligently to get us to this point. Last week, or week before, when we marked this up in full committee, we went from 10 in the morning until 2:30 the next morning. And everybody was at work again the next day ready to go.

We get to meet with the troops, we get to see the young people, and some that are not so young, serving us around the world to preserve our freedoms and freedoms of other peoples. And our job is to do all we can to help make their job easier, to help make their job—to help, as I said earlier, give them the equipment, the training, the leadership, the time, all the resources that they need to return home safely to their families.

I think this bill does that. I feel very good about all of the members of the committee, the hard work that they have done to get us to this point. I look forward to the next few days working on the amendments and turning out a final finished product; and, hopefully, then we can encourage the other body to get their work done, and we can get this bill as our 50th bill to the President for his signature.

Mr. KUCINICH. Mr. Chair, to my friends on the other side of the aisle, I am offering an amendment to the Defense Authorization Bill which would defund the war in Libya.

The war is unconstitutional. The President did not come to this Congress, he went to the U.N. Security Council, he went to a number of international bodies, but he didn't come to the United States Congress. Last week, the President did not observe the tolling of the War Powers Act, so he's in violation of the statute.

The action over in Libya has already exceeded the U.N. mandate; it's in violation of the U.N. mandate and there have been violations of international law.

What are we doing there? Why does anyone think we can afford it? Why aren't we trying to find a path to peace so we aren't called upon to spend more money there? These are questions we have to be asking; that's why Congress needs to say we're not going to spend more money there.

People are saying it's not the United States, it's NATO. The Guardian in the U.K. did a study which showed that 90 percent of the cruise missiles are paid for by the U.S. Sixty-six percent of the personnel working against Libya are from the U.S., 50 percent of aircraft, 50 percent of all ships—and our government is saying this is a NATO operation? We have to recognize what's going on here, which is an expansion of the war power by the Executive and it's time we challenge that.

One thing we certainly shouldn't do is to support the amendment offered by my friend, Mr. MCKEON, which will hand over to the President Congress' constitutional authority to declare and authorize war, substantially altering the delicate balance of power the Founding Fathers envisioned.

The annual re-authorization contains unprecedented and dangerous language which gives the President virtually unchecked power to take this country to war and to keep us

there. The bill substantially undermines the Constitution, the institution that the Constitution set up that is Congress and sets the United States on a path to permanent war. Congress has to protect the American people from the overreach of any Chief Executive—Democrat, Republican—any Chief Executive who's enamored with unilateralism, preemption, first strike and the power to prosecute war without constitutional authority or statutory prescriptions.

Permanent global war isn't the answer. It's not going to increase our national security. Far from ridding the world of terrorism, it will become a terrorist recruitment program. The war in Iraq is based on lies; the war in Afghanistan is based on a misreading of history.

Yet in Iraq we'll spend over \$3 trillion. In Afghanistan we've spent over half a trillion dollars.

We have people out of work here. We have people losing their homes, losing their health care, losing their retirement security. All we hear from the White House is "we want more war or more authorization for more war." We have to stop that and while stopping that we have to stop this national security state and stop the extension of the Patriot Act which is also in this bill.

Mr. MCKEON. I yield back the balance of my time.

The CHAIR. All time for general debate has expired.

Under the rule, the Committee rises. Accordingly, the Committee rose; and the Speaker pro tempore (Mr. THORNBERRY) having assumed the chair, Mr. WOMACK, Chair of the Committee of the Whole House on the state of the Union, reported that that Committee, having had under consideration the bill (H.R. 1540) to authorize appropriations for fiscal year 2012 for military activities of the Department of Defense and for military construction, to prescribe military personnel strengths for fiscal year 2012, and for other purposes, had come to no resolution thereon.

REPEALING MANDATORY FUNDING FOR GRADUATE MEDICAL EDUCATION

The SPEAKER pro tempore. Pursuant to House Resolution 269 and rule XVIII, the Chair declares the House in the Committee of the Whole House on the State of the Union for the further consideration of the bill, H.R. 1216.

□ 2001

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole House on the State of the Union for the further consideration of the bill (H.R. 1216) to amend the Public Health Service Act to convert funding for graduate medical education in qualified teaching health centers from direct appropriations to an authorization of appropriations, with Mr. WOMACK (Acting Chair) in the chair.

The Clerk read the title of the bill.

The Acting CHAIR. When the Committee of the Whole rose earlier today, pending was amendment No. 7 printed

in the CONGRESSIONAL RECORD, offered by the gentlewoman from North Carolina (Ms. FOX).
 Mr. WEINER. I move to strike the last word, Mr. Chairman.

The Acting CHAIR. The gentleman from New York is recognized for 5 minutes.

Mr. WEINER. Mr. Chairman, you may recall, I was standing here approximately 2 hours ago waiting to speak with several other Members on the efforts of my Republican friends to eliminate Medicare as we know it, and for reasons that are known only to the Chair, I was denied the ability to do that. Well, I am back.

And just to review the bidding, here is where it was before that order was made. We had the chairman of the Republican Congressional Campaign Committee, a good man, a guy I like, stand down in the well and say, oh, no—and this, by the way, is someone who was elected by the Republican Members to represent him in races all around the country, saying that the Ryan plan wasn't a plan. It was—and I am quoting here—a construct to develop a plan. And he said that the proposal was not a voucher program. And then he said it was a one-size-fits-all, that Medicare was draining our economy is what he said.

Well, ladies and gentlemen, that might be the rationale for our Republican friends wanting to eliminate Medicare, but none of those things are true. It is not a construct to develop a plan. It is the proposal of the Republican Party of the United States of America to eliminate Medicare as a guaranteed entitlement. If you don't believe me, go get the book that they wrote. Go get the budget that they wrote, go get the bill that they wrote.

And if you believe that it's not a voucher program, listen to their own Members talk about it. The Medicare program today is not, I say to my friends, one size fits all. My good friend from Georgia (Mr. GINGREY) was on the floor before talking about how it's one size fits all. How can it possibly be you can be a Member of the United States House of Representatives and not understand how Medicare works?

Each individual senior gets to go to the doctor of their choosing, gets to go to the clinic of their choosing, gets to decide for themselves where they go, and then the doctor and the patient make decisions.

The only question is: Are we going to say to citizens who are 65 and older, Here is a coupon. Go buy private insurance at 25 and 30 percent overhead rather than the Medicare program, which the actuaries say cost 1.05 percent in overhead?

We have also heard them say, You are demagogueing. We don't really want to get rid of it. You do.

Now, there is a saying here in Washington that a gaffe is when the Republicans actually say what they think. So there have been plenty of opportunities to see this gaffe in full play. Now, they

have been tying themselves in intellectual knots trying to get out from under the basic facts.

By the way, I hope your insurance plan, the Ryan plan, covers the twisted arms and limbs you get tying yourselves in knots explaining this.

It is a radical departure from where we are today. Mr. Gingrich was right, even the blind squirrel can find a nut once in a while. He was right. It's a radical departure, but it's yours. Own it. Show a little gumption. Show that you are prepared to own your own proposals. But now that you want to do it and the American people are seeing the difference between Democrats and Republicans, now you are trying to squirrel your way out of it, with no disrespect to squirrels.

You say we don't have a plan. Not only did we pass a health care plan a year ago that extended 10 years the life expectancy of Medicare, but I will go one better. I will give you a plan. How about Medicare not starting at 65? What about 55 or 45 or 35? What is it that health insurance companies do in this country?

Now, I know that my Republican friends are wholly owned subsidiaries of the insurance industry, but that should not mean that our seniors lose their Medicare because of it. So, my friends Mr. SESSIONS and Mr. GINGREY were trying desperately to try to figure out how to get out from under your own beliefs. We believe in Medicare. We created it. We believe in Social Security. We created it. We believe in the health care act. We created it.

As a matter of fact, every improvement to health care in this country, Democrats propose, Republicans oppose. And now they have a chance to get rid of it, and they are doing it. But at least if you are going to do it, at least if you are going to try to do it, don't try to silence people who point it out.

And I think the lesson here is it might be later. If you had me come back at midnight, I would have said it. If I came back at 2 a.m., I would have said it, because the American people are going to see what's going on here.

You have a proposal to eliminate Medicare, a proposal to privatize a portion of Social Security by investing in the stock market, a proposal to roll back the expansion of prescription drug coverage for seniors. You have a proposal to take away the benefits of those 25 and younger to be able to get health insurance. That is your proposal. Own it. Live with it. Embrace it, because we are not going to let you get out from under it.

And you may delay me, you may gavel me, you may tell me you have got to come back at 2 o'clock in the morning. It's not going to change the fundamentals of this debate, that if you believe fundamentally in Medicare, at this point you have got two choices: Tear up your Republican Party membership or give up control of Congress, and, frankly, some of you are going to have to do both.

Mr. PALLONE. Mr. Chairman, I move to strike the last word.

The Acting CHAIR. The gentleman from New Jersey is recognized for 5 minutes.

Mr. PALLONE. I want to continue this debate on the Medicare issue because I do believe, from looking at the Republican budget, that they do intend to end Medicare, it's quite clear. And, you know, the irony of this is that, when the Democrats were in the majority, we were trying to expand health care options, provide everybody with health insurance. And now what we see is just the Republicans, when they take the majority, are trying to get rid of, really, the best health insurance program that the Nation has ever seen, and that's Medicare.

No one would argue that Medicare has not been successful. The fact of the matter is that before we had Medicare—which, as my colleague from New York mentioned, was a Democratic initiative—what would seniors do? Well, seniors couldn't get health insurance because, as you know, when you get to be over 65, or if you are disabled, people don't want to give you health insurance because it costs too much. You are in the hospital too much. You have too many health care needs. And so seniors basically couldn't find health insurance. They were really at the mercy, if you will, of whatever they could find, or if they got sick, they had to go to a hospital or they had to go to a doctor and pay out of pocket in many cases.

And so when the Democrats came along and Lyndon Johnson said, look, this is something that we need because seniors can't get health insurance, well, they initiated Medicare. And the fact of the matter is that almost every Republican voted against Medicare then, and they have never liked it because they know it's a government program. They don't like government programs.

So if anyone on the other side of the aisle is trying to tell me, I don't know that they are, but if they are trying to suggest that if somehow by voting for this budget that ends Medicare that they didn't really mean it, I would say look at their history, look at the history of opposing Medicare, of opposing Medicaid, of opposing even Social Security when Franklin Roosevelt and the Democratic Congress put it together.

□ 2010

Now, I want to point out what happens when seniors don't have Medicare anymore and they have to go buy insurance on the private market. Well, basically, what that does is it puts the insurance companies back in charge again. And that's no surprise. This is what the Republicans want. They always stand with the special interests—Big Oil, big banks, Wall Street and, of course, the insurance companies.

And the insurance companies don't like Medicare because they can't make

any money. They want to be able to make money. They want to take, cherry-pick, if you will. If you're over 65 and they figure you're in good health, then maybe they'll give you insurance if you want to go and buy it because they figure you might be a good risk and they can charge you a lot of money and they can give you a barebones policy that doesn't cover anything.

Remember that Medicare not only provides a guaranteed insurance policy that you can buy, that you get, I should say, from the government when you are over 65 regardless of your health status or of your income, but you also get a pretty generous insurance plan that covers a lot of things. You put the insurance companies back in charge, and not only will they not offer insurance to a lot of seniors at a decent price, but for those who they do sell the insurance to, it's not going to be a package that covers what most seniors are going to need. So it's not only that Medicare is important because it guarantees you coverage, but it also guarantees you a pretty generous coverage which you need when you're 65 or when you're disabled.

Some of the Republicans I hear say, well, don't worry senior citizens, we may be ending Medicare, but it's only going to be ending for those who are now 55. If you're 65 years old, you can continue to have it. But if you're 55 or under, when you get to be 65, it's no longer going to be available. So if you're a senior citizen now, don't worry about it. Well, I don't know too many seniors who think that way, because I know they worry about everybody including not just themselves, but their children and their grandchildren.

But besides that, I would also point out that this Republican budget eliminates two other things. First of all, we, as Democrats, when we were in charge of the House, we put in place a program to close the prescription drug doughnut hole. So that if you reach the doughnut hole now, as of January 1, 50 percent of your costs are covered, and eventually you are going to have no costs in the doughnut hole. It's going to be eliminated completely.

Well, the Republican budget repeals that. So it goes back to leaving this gaping hole; whereas, if your out-of-pocket drug costs in the course of a year are \$2,500 or more, then you're not going to get your prescription drugs covered. So, also for current Medicare holders, senior citizens, it opens up that doughnut hole again so you are going to pay all this money out of pocket.

In addition to that, it repeals a Democratic provision that's now law that says that you don't have copays for preventative care. So if you're a senior or disabled and you need a mammogram, you need a certain kind of testing done, you don't pay a copay. The Republican budget also abolishes that. This is devastating for senior citizens, current and future.

Mr. THOMPSON of Pennsylvania. I move to strike the last word.

The Acting CHAIR. The gentleman is recognized for 5 minutes.

Mr. THOMPSON of Pennsylvania. Mr. Chairman, I do support the Foxx amendment.

I've listened to all the discussion on the floor, much of it dealing, most recently, with not the Foxx amendment, but actually with Medicare, which always catches my attention. You see, Mr. Chairman, I actually have, before I came into this position in Congress just a little over 2 years ago, 3 years ago now, I actually worked in the health care field. I worked specifically serving individuals that utilize Medicare. I was a therapist, a licensed nursing home administrator and manager of rehabilitative services.

At the time of the Balanced Budget Act of 1997, I actually was recruited by the Medicare agency—it was the Health Care Financing Administration then. Now it is the Centers for Medicare and Medicaid Services—to serve on the technical expert panel. So that's why, when I hear this rhetoric on the other side that the Republicans are trying to end Medicare, I find that just not accurate. And that's based on 30 years of experience of working with Medicare and developing an expertise with the Medicare policy, to be invited to be a part of the technical expert panel on Medicare.

The fact is, when I came to Washington in January 2009, I thought all 435 Members of Congress understood that the looming crisis in Washington was Medicare, Medicare was one of them, and that Medicare, frankly, was going to go bankrupt. It was going to become insolvent, and if we didn't reform Medicare, it would go away. And how immoral is that, for all the Americans out there that contribute to Medicare, pay for their Medicare, invest in their Medicare, and that it would not be there when it came time for them to get Medicare?

And so I'm actually just a little shocked, Mr. Chairman, by the rhetoric.

And the fact is, if we want to save Medicare, we need to do exactly what the Republicans are proposing, and that is to reform it, to save it. Even the Medicare trustees just 2 weeks ago came out and they said that the Medicare program was going to be insolvent 5 years sooner than what they originally predicted.

Now, what does insolvent mean, Mr. Chairman? Insolvent means going bankrupt. Insolvent means going away. Insolvent means that for all the seniors that have paid into the system, it won't be there for them.

We have a duty and an obligation, a fiduciary responsibility to make sure that Medicare is there. This side of the aisle is the only one that is working on keeping Medicare for our seniors. What we're proposing, really, is premium support. It's not vouchers. It's not privatizing. It's premium support. And premium support is the best model that you can look at, for that is Medi-

care part D, the pharmaceutical program.

Medicare part D gives seniors the opportunity to pick from plans that work for them that are customized to their needs. Medicare part D, for those who don't know it, has to do with prescriptions for pharmaceuticals. And we provide premium support so that they can pick the plans that work for them, so they can make sure they get the prescriptions that they need to have.

Frankly, it is one of the few government plans that has ever come in under budget. Most government plans don't come in under budget. They come in way over budget. Medicare part D did.

It also speaks to me as Medicare part C, which is Medicare managed care. Medicare managed care, Medicare Advantage, which unfortunately the Patient Protection Affordable Care Act attacked and went after, that Medicare part C program provides for wellness and prevention. Medicare part C has been a program that has been allowed to emphasize prevention and wellness. And the statistics show that the people engaged in that program have been hospitalized fewer times and that those hospitalizations have been for fewer days. And do you know what? It keeps them well. It keeps them healthy. And that's what health care should be all about, keeping people healthy. And the other thing it does is it saves taxpayer dollars. That's a win-win, as far as I'm concerned.

So we're talking about premium supports that take concepts from Medicare part D and Medicare part C, and we're going to apply those premium supports to the Medicare program.

Mr. Chairman, I think it is important that people understand that if we do not reform Medicare, Medicare will go bankrupt, Medicare will be insolvent, and Medicare won't be there. If we don't do this, the fact is that Medicare will go bankrupt. Medicare will be insolvent. And in the end, that is just immoral.

We have a great opportunity here, and we need to address Medicare. I think premium supports are a great way to do that. And I appreciate the opportunity to be able to speak.

The Acting CHAIR. The question is on the amendment offered by the gentlewoman from North Carolina (Ms. FOXX).

The question was taken; and the Acting Chair announced that the ayes appeared to have it.

Mr. PALLONE. Mr. Chairman, I demand a recorded vote.

The Acting CHAIR. Pursuant to clause 6 of rule XVIII, further proceedings on the amendment offered by the gentlewoman from North Carolina will be postponed.

AMENDMENT NO. 1 OFFERED BY MR. WEINER

Mr. WEINER. I rise as the designee of the gentlelady from Florida (Ms. CAS-TOR) to offer an amendment that is satisfied by the preprinting requirement.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 4, after line 12, add the following:

(d) EFFECTIVE DATE.—Subsections (a), (b), and (c) shall not take effect until the date that the Comptroller General of the United States determines there is no primary care physician shortage in the United States.

Mr. GUTHRIE. Mr. Chairman, I reserve a point of order against the amendment.

The Acting CHAIR. A point of order is reserved.

The gentleman from New York is recognized for 5 minutes.

Mr. WEINER. Mr. Chairman, I support this amendment and hope we all vote for it.

I just do want to take an opportunity to respond to the gentleman who was just at the microphone. It is one thing to say you're saving Medicare, but if you leave a different Medicare when you're done than today, if it is entirely different, how have you saved it?

□ 2020

I know "premium support" or "price support" is the term of art that is now trying to take hold as you desperately try to figure out how to explain what you are doing, but let me make it very clear, and if I say anything incorrect, the gentleman can rise and I will permit him to correct me.

Under the proposal of the gentleman from Wisconsin, under the proposal of the Republicans in Congress, that at a certain point in the future, Medicare as we have it today, as a guaranteed entitlement safety net program for seniors, will cease to exist. That is the Ryan plan. I will pause while anyone seeks to correct that.

That silence you hear, ladies and gentlemen of the United States of America, is because I just said something that is factually correct. The Ryan plan, which is now the Republican plan, which is now the plan that has passed the House, would end Medicare as we know it. Now, that has never been something that they have hidden from before. They even had a book, "The Young Guns," or something. Does the gentleman from New Jersey remember what it was called? It was like "The Young Guns." They were parading them all around the country with this book that explained it, this is the way Medicare is going to look.

You say it is price support. Okay. It is price support unless you can't be supported by the price of the voucher. If you are a senior citizen, I say to the previous speaker, if you are a senior citizen and you are given this thing, call it what you want, a coupon, a voucher, a price support document, and you go around and look for insurance in your neighborhood and you can't find it, under the law that you passed, you are out of luck. But you are not entirely out of luck. Your family can go pay out of their own pocket and may be able to buy insurance.

Now, you are a good, fit, healthy man, God bless you, and you should be

so for many years to come. But the fact is that many senior citizens cannot go into the private market and buy insurance with a price support document or voucher or coupon. They won't be able to get it, which is why Medicare was created in the first place, because the conventional way of saying, "You know what; each and every person for themselves is the way we are going to get health care" was leaving senior citizens out.

I want to explain to my Republican colleagues a little something about economics. When we join together as a society, as a large buying pool, we get better treatment as consumers. We get a lower price. Fewer people buying car insurance, prices go up. All of us in a pari-mutuel relationship, prices come down. That is basic economics, but it is being violated by the Ryan plan, which is the Republican plan, which is the plan you now own and have to defend.

But to say, you know, We don't really want to defend it because we are uncomfortable with it, it is yours now. And you say, We are trying to save Medicare. We are trying to save it. If you want to save it, then it has to be a Medicare program. It can't just be some kind of a coupon.

But I want to talk very briefly in my remaining time about this idea that we don't have plans. I have a plan that I want you all to consider. It is taking the efficient program of Medicare, which has managed to keep administrative costs far below any insurance plan in the country, any one of them. If any one of them can come even close to Medicare efficiency, then I would say let's go get that one, but they can't.

Why is it that we say that only people 65 and above should get that efficiency? Why don't we say to the roughly 30 percent profits and overhead insurance companies are taking, Who needs you guys? You are taking our money.

We are giving it to insurance companies. They are not doing any exams. They are not doing any checkups. They are not operating on any people. All they are doing is taking our money, taking 20 percent off the top and then passing some of it along to doctors and hospitals. What are they performing in the economy? Let's take them out of the formula.

Now, we didn't go this way in the ObamaCare plan, which I proudly call it. But I have to tell you, there is a competition going on in this country right now between the for-profit, employer-based model with a 30 percent overhead and Medicare with 1.05 percent overhead. I say Medicare for all Americans. It is an American Democratic plan that we should extend to more people. You want efficiency? Get more people into that buying pool. Let's take advantage of the large numbers of people that we have and cover them with insurance at a lower rate.

But we didn't go that way. We went a Republican way. In the Obama proposal, it was essentially a Republican

proposal that said let's give them all health insurance. Now what you are saying is let's see if we can do that for senior citizens and still call it Medicare. You can't. You can't.

You say you are saving Medicare. You are destroying Medicare, and we Democrats and the people of this country are going to stop you.

POINT OF ORDER

Mr. GUTHRIE. Mr. Chairman, I insist on my point of order.

The Acting CHAIR. The gentleman from Kentucky may state his point of order.

Mr. GUTHRIE. The amendment violates clause 10 of rule XXI of the rules of the House because it has the net effect of increasing mandatory spending.

The Acting CHAIR. Does any other Member wish to be heard on the point of order?

Mr. WEINER. I ask to be heard on the point of order.

The Acting CHAIR. The gentleman from New York is recognized.

Mr. WEINER. It is arguable whether or not this does increase spending because all this does is change the effective date. But I can tell you this: This is the exact same argument we heard today from Mr. CANTOR, who said they would not authorize any spending to help the people who were the victims of that horrible tornado recently because that, too, would need to be paid for.

Sometimes you have things that are emergencies in this country. Sometimes you have things that, frankly, under the emergency powers of this Congress, we should be able to implement.

I believe that while it is arguable that the effective date changes the net expense of this bill, because all this really does, the fact of the matter is that we have a responsibility to seniors in this country. We have a responsibility to those on Medicare to try to save it, just the same way I would say we have a responsibility to the citizens of this country who were ravaged by storm. And to hear your leadership say we would not allocate any funds for that purpose without going through a budget debate is outrageous.

The Acting CHAIR. The Chair is prepared to rule.

The gentleman from Kentucky makes a point of order that the amendment offered by the gentleman from New York violates clause 10 of rule XXI by proposing an increase in mandatory spending over a relevant period of time.

Pursuant to clause 10 of rule XXI and clause 4 of rule XXIX, the Chair is authoritatively guided by estimates from the chair of the Committee on the Budget that the net effect of the provisions in the amendment would increase mandatory spending over a relevant period as compared to the bill.

Accordingly, the point of order is sustained and the amendment is not in order.

Mr. PALLONE. I move to strike the last word.

The Acting CHAIR. The gentleman from New Jersey is recognized for 5 minutes.

Mr. PALLONE. Mr. Chairman, I wanted to go back to the issue of Medicare, but I also wanted to respond to the gentleman from Pennsylvania because he also brought up the issue of Medicaid. I would point out that the Republican budget not only devastates and ends Medicare, but it essentially does the same thing to Medicaid because of the level of cuts that are put in place for Medicaid.

Now, senior citizens are very much aware of the fact, I think, that if Medicare ends, then they are thrown out in the private insurance market, and if they have to buy insurance on the private market at the whim of the insurance companies, that they will be in bad shape. They may not be able to get insurance. If they get it, it will be a very skeletal package. It won't cover and guarantee their benefits.

I think they also realize that the budget, if it repeals the health care reform, will go back to having this huge doughnut hole, which will cause them to pay a lot out of pocket and also will eliminate the lack of copays that now exist for preventive care, such as mammograms and other diagnostic tests that now are free without a copay. So they will pay a huge amount of money out of pocket if the Republicans get their way by ending Medicare.

But the gentleman from Pennsylvania also brought up Medicaid, and I would point out that many seniors are not aware of the fact that most of the money spent on Medicaid actually pays for nursing home care because Medicare doesn't cover nursing home care. Seniors, when they pay out of pocket for nursing home care, usually run out of their money very quickly and end up staying in the nursing home because of Medicaid.

Well, what this budget does is to basically cut Medicaid by almost \$800 billion over the next decade and essentially in half by 2022. That is not sustainable. What that is going to mean is, as I said before, when we didn't have Medicare, seniors couldn't get insurance and they just basically got no health care unless they went to an emergency room. But if you cut Medicaid in half, what is going to happen is there isn't going to be money for the States to pay for nursing home care, and either seniors won't be able to find a nursing home or, if they get one, it is going to be a nursing home that, because it is not getting an adequate payment rate, it is going to be really awful.

In my home State of New Jersey, I remember in the 1970s, going back 30 years ago, when nursing homes were just awful. We had fires. We had people with horrible bedsores.

□ 2030

The bottom line is that, if you really devastate Medicaid, which pays for nursing home care, you're going to also

go back to the days when seniors couldn't find nursing homes.

Mr. WEINER. Will the gentleman yield?

Mr. PALLONE. I yield to the gentleman from New York.

Mr. WEINER. I just want to point out something else. Who is going to be left to pay for it?

Obviously, localities in New Jersey, Pennsylvania, and New York are not going to let people lie sick in the streets. It's just going to mean local taxes are going to get raised and that State taxes are going to get raised because, ultimately, it's not whether people get health care; it's just how it's paid for. Frankly, by cutting it off, it doesn't mean that. It just means that we're passing it along in an unfunded mandate to localities.

I thank the gentleman for yielding.

Mr. PALLONE. I agree.

I also would point out that, many times, the localities, because they have budget problems, may not even pay for it at all, and so we'll end up with awful nursing homes or we'll not even have nursing homes.

The other thing, too, is that Medicaid also has waivers that pay for a lot of senior citizens to stay home and that pay for their personal care when they stay home: for somebody to come in and dress them, to cook meals, to clean the house, that type of thing. That would also be gone or it would be cut in half when you cut Medicaid in half.

Again, as Mr. WEINER said, unless the States stepped in and paid for that, a lot of those senior citizens who don't have to go to nursing homes end up staying home and getting the personal care in their homes or apartments, and those programs are going to be eliminated as well.

So it is amazing what the Republicans are doing in this budget: ending Medicare and cutting Medicaid. What that means for senior citizens is just an awful thing. These cuts to Medicaid go into effect immediately, so they impact seniors immediately, and just get worse and worse over the next 10 years. It also applies to the disabled because these are programs that are paying for the disabled. Everything that I said about people over 65, whether it's regarding Medicare or Medicaid, also applies to people who have disabilities.

I just don't understand. Again, Medicare, Medicaid, Social Security, these are programs that the Republicans never liked, never voted for, never supported, and I'll mention one more. Because of the cuts in Medicaid and also because of the cuts in the SCHIP, which is the family care premium, the budget also makes it so a lot of children who now get health care coverage are not going to get health care coverage.

Again, the Republicans are walking away from the seniors, walking away from the disabled, and walking away from the children.

Mr. WEINER. I move to strike the requisite number of words.

The Acting CHAIR. The gentleman from New York is recognized for 5 minutes.

Mr. WEINER. I say to the Chair, when I was here at 6 o'clock and was cut off by the Chair and was taken off my feet and lost my ability to speak for reasons that are only known to the Chair, I was prepared to make my 5-minute remarks, and the other Members were prepared to do the same.

I want to say that, just as a matter of comity and as a matter of our all getting along, this is an important debate, and if the effort were to try to figure out a way to stymie the debate and to silence some of us, I just want to remind you that it's not going to work and that we're going to find a way to make this debate happen even if it's late into the evening. But I just want to continue on a point that the gentleman from New Jersey made, and I want us to understand a little bit about the basic tenets of how Medicare works.

Many Members on the other side of the aisle came to the floor today and talked about Medicare as being a one-size-fits-all plan. Medicare works because of its flexibility. My father is a member of an HMO. He chose that option. People can go to individual pay-per-service doctors.

Now, there is no disputing that health care—all health care—is on a rising arc that is unsustainable. That's why the Republican strategy of doing nothing and drilling its head into the sand for years was no longer sustainable, and that's why we Democrats, without a single Republican vote, had to do something about it. The arc of cost is strangling our economy. The arc of cost of not having people insured and of passing along the bills to all of us was an unsustainable model. That's why we made changes that made Medicare more efficient.

For example, one of the things that my friends want to eliminate is the idea that, under Medicare now, under the Affordable Care Act, under ObamaCare, preventative services for seniors are reimbursed 100 percent—no copayment. Why do we do that, and how does that save money? It's because of what our parents and grandparents have taught us time immemorial, that an ounce of prevention is worth a pound of cure, and that by providing coverage for that you actually save money in Medicare. How did we extend Medicare by 10 years? That's one of the ways that we did it.

What my colleagues fail to understand is that we acted just last year. You ask, Where is your plan? We acted just last year to extend the life of Medicare; to expand services provided under Medicare; to reduce the cost to the economy; to provide coverage for the uninsured; to reduce the burden on localities and cities that have to pay for the uninsured now. That's what we did.

What are you doing? You're saying let's take not only the Affordable Care

Act and eliminate all of those protections, but let's go back 40-some-odd years, and let's eliminate the Medicare Act, and let's replace it with something that, oh, lo and behold, takes taxpayer dollars and gives it to insurance companies.

Now, anyone watching this movie from the beginning knows that that's your basic modus operandi, that that's what you always seek to do—to enrich insurance companies. But if you want to provide care for seniors—Democrat seniors, Republican seniors, seniors with no party affiliation—Medicare has turned out to be a very efficient way to do it. Does that mean there are not rising health care costs across the board? Yes, but I'm going to tell you something. Here's this for an interesting little fact:

Medicare's rising cost is actually less than that of the private insurance market. Well, how can that be? Because, as I said, Medicare doesn't take money for profits. Medicare doesn't take money for shareholders. Medicare doesn't take money for advertisements. Medicare doesn't take money for giant call centers, where you call them, and they put you on hold and then ultimately don't give you their service. They don't give giant bonuses to their CEOs. Medicare is an efficient program that's well run because that's how we roll, we Democrats. We do efficient programs that are well run.

What do you do? You want to eliminate them. You like that.

That's how they roll. They want to eliminate these programs. We're standing in the way, but we're not standing alone because seniors of all stripes and even people who are young people who want to someday become seniors understand a program that works when they see it. They also understand a party in retreat when they see it, I say to my good friend. We see how you guys are coming down here. Well, it's not a voucher; it's a coupon. It's not a coupon; it's a price support. Earlier in the day, someone said you're draining the Federal Government. One size fits all.

You guys, I have not seen so much defensive talk in years. But you ought to be a little bit defensive about this because we found out what you believe in. You campaigned on what you were against, and this is apparently it. But here it is. Now you've got to defend it. You should do a better job than simply saying, Oh, no, no, no, no. We love this Democratic program. We're not trying to hurt it.

The American people are much too smart for this. They know if you say we're taking away a guaranteed protection and we're replacing it with a price support document, or whatever euphemism you're going to work, that we Democrats are going to stand up and call you on it every day. You can huff and you can puff, but eventually, it's going to be us blowing your house down. Ultimately, it's going to be the citizens of this country saying, You

know what? I remember now why we put Democrats in charge when we wanted to take care of people, because they create programs like Medicare, and Republicans want to eliminate them.

The Acting CHAIR. The time of the gentleman has expired.

Mr. GUTHRIE. Mr. Chairman, I move that the Committee do now rise.

The motion was agreed to.

Accordingly, the Committee rose; and the Speaker pro tempore (Mr. CANSECO) having assumed the chair, Mr. WOMACK, Acting Chair of the Committee of the Whole House on the state of the Union, reported that that Committee, having had under consideration the bill (H.R. 1216) to amend the Public Health Service Act to convert funding for graduate medical education in qualified teaching health centers from direct appropriations to an authorization of appropriations, had come to no resolution thereon.

THE WINNERS OF THE NASA AERONAUTICS SCHOLARSHIP AWARD

(Mr. THOMPSON of Pennsylvania asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. THOMPSON of Pennsylvania. Mr. Speaker, I rise today to recognize two individuals from my district who were recently selected to receive NASA's Aeronautics Scholarship Award—Khalil Ramadi and Robert Schroeder, both of whom are students of Penn State University.

The Aeronautics Scholarships Program, which is in its fourth year, aids students enrolled in fields related to aeronautics and aviation studies. These gentlemen are two of 25 undergraduates and graduate students selected from hundreds of applicants from across the country to receive aeronautics scholarships.

Robert and Khalil will have the opportunity to intern with NASA researchers and to directly work on projects such as managing air traffic more efficiently and improving safety. They will be part of a nationwide team of researchers that is pursuing an ambitious set of aeronautics technology development goals.

Their hard work has gotten them to this point, and through this award, they will now play an even bigger part in contributing to our Nation's pursuit of solutions for some of the most pressing challenges facing the air transportation systems today.

I want to thank Khalil and Robert for their hard work and dedication. Congratulations on receiving this honored distinction.

□ 2040

PEAK OIL

The SPEAKER pro tempore. Under the Speaker's announced policy of January 5, 2011, the gentleman from Mary-

land (Mr. BARTLETT) is recognized for 60 minutes as the designee of the majority leader.

Mr. BARTLETT. Mr. Speaker, I would like to spend just a few moments putting the debate that we are having on Medicare in perspective.

This year, our budget deficit will be close to \$1.6 trillion. That is a really big number. Well, what does it mean? Well, it means that about every 6 hours—as a matter of fact, a little less than that—we accumulate another \$1 billion deficit that adds another \$1 billion to our debt.

This \$1.6 trillion is, as a matter of fact, about a half trillion dollars more than all the money that we come here to vote to spend. We spend the better part of 12 months debating a large number of authorizing bills and voting the appropriations bills to spend just a little over \$1 trillion. Our deficit is \$1.6 trillion. That means it's about a half trillion dollars more than all the money we vote to spend. What that means, Mr. Speaker, is that if we had no military—just don't fund it, send all the service people home—if we had no Department of Education, no Department of Commerce, if we emptied all of those large buildings full of government bureaucrats, we would still have about a half trillion dollar deficit. What that means of course is that there is no chance, no opportunity of balancing the budget by cutting spending in all of those programs that we spend the better part of a year debating here.

Well, if that wouldn't balance a budget, what then must we do? It's very clear that if the deficit is about a half trillion dollars more than all the money we vote to spend, that a lot of the spending that accumulates this deficit is in programs that we don't vote to spend money on. These are programs that pay the interest on the debt, that's kind of mandatory spending—if you don't do that you're in big trouble—and it's Medicare and Medicaid and Social Security.

And so in this debate on Medicare, it's not just the Medicare Trust Fund that we're talking about that will go bankrupt—it will because today and every day, with no time out for holidays or weekends, 10,000 of our baby boomers retire and they stop paying into these funds and they start drawing from these funds. And so as we debate this subject, we need to remember that it's bigger than Medicare, that even if you could agree that Medicare will somehow magically be solvent, it really won't matter if we have a country that's bankrupt, will it? Because you can't have a Medicare program in a country that has no government because it has gone bankrupt, and that's what is going to happen if we don't get a handle on this debt. And it's a huge problem.

Our leadership on our side of the aisle worked very hard to keep the promise that was made during the campaign of cutting \$100 billion from

spending this year. That's a lot of money to cut. But even if we had cut the \$100 billion, that would have been one-sixteenth of the deficit. But it turned out to be an amazing disappearing \$100 billion. It shrunk to \$61 billion, then it shrunk to \$38 billion, and then when CBO looked at the actual outlays this year of how much we would save, it shrunk to \$352 million. That is, Mr. Speaker, about one-third of 1 percent of what we promised. And even if we had delivered what we promised, \$100 billion, that would have been roughly 6 percent of the deficit, one-sixteenth of the deficit.

So when we talk about these individual programs, it's nice to keep in perspective the overall picture of where we are. If you are excited by challenges, you will be exhilarated by this challenge because this is a huge, huge challenge that our country faces.

We now are about a decade into a new century and a new millennium. And it's interesting to look back at the last century and ask ourselves what was probably the most important speech given in the last century. Now if you were to ask that question of 100 people, probably not one of them would cite the speech that I'm going to tell you tonight was the most important speech of the last century, but I think that if you were to ask that question 10 or 15 years from now, that almost all of those 100 people would tell you that this speech is probably the most important speech of the last century. It was given on the eighth day of March in 1956 by a man named Marion King Hubbert—generally known as M. King Hubbert—to a group of oil people in San Antonio, Texas.

At that time, the United States was king of oil. We were the first major industrialized nation in the world. We were pumping more oil, we were using more oil, we were exporting more oil than any other country in the world. And M. King Hubbert told this group of oil specialists that in just 14 years—by 1970—the United States would reach its maximum oil production, that no matter what they did after that, oil production in this country would fall off. That was audacious, it was unbelievable—as a matter of fact, it wasn't believed. M. King Hubbert was relegated to the lunatic fringe. How could it be that a country that had discovered this much oil, was king of oil, producing more oil, consuming more oil, exporting more oil than any other country in 14 years is going to reach its maximum production and then fall off?

You know, if you stop to think about it, oil one day will run out, won't it? I started asking myself that question a lot of years ago when I was teaching school, and I taught a class in biology, and all of the publishers would send me their textbook hoping that I would use it in my class and they could sell it to the members of the class.

□ 2050

And I remember I was asking myself the question, you know, oil can't be