

“voucher” system. Under this plan, seniors would face mounting financial pressures every year to move out of their fee-per-service system and into a managed care plan in which they would not be able to choose their own doctor.

I am a supporter of managed care, and I believe it is a valuable tool for controlling costs and improving quality in our health care system. I believe that seniors should be able to choose to join a managed care plan if they want to, and in fact, more than 70 percent of Medicare enrollees already have that option today. But it must be a choice freely made, not one coerced by financial pressures.

But it is exactly that kind of financial coercion that the House Republican plan would create. Seniors choosing to remain in the fee-per-service part of Medicare would face more than \$1,000 a year or more in added premiums, co-payments and deductibles. Even those beneficiaries who go into managed care will have their current benefits threatened as the proposed cuts squeeze harder and harder and the real value of the voucher declines.

When we hear numbers like these, we must remember who we are talking about here. The median income for Medicare recipients is \$17,000 a year. Seventy-five percent of all seniors make \$25,000 a year or less.

These are the people who would be pounded by a barrage of new expenses if they choose to stay in fee-per-service: higher copayments, higher premiums, higher deductibles.

One Republican proposal would raise the amount seniors pay out-of-pocket for their care from 20 to 25 percent.

The AARP estimates that another of the proposals would increase out-of-pocket deductibles—currently at \$100—to \$270 a year by the year 2002.

The average beneficiary receiving home health care services would pay \$1,020 more in 2002 than they do now.

Another provision of the Republican plan spells out exactly how the Republicans would attempt to stay within their extremely tight budget projections for Medicare. According to an internal memo leaked to the New York Times, “If program spending exceeds growth rates set in law, then outlay reductions will be triggered.”

Under the Republican plan, what if Medicare starts to run out of money at the end of the fiscal year? Will seniors needing medical care in September be told to come back after October 1st? If spending is projected to exceed budgeted amounts, will Medicare announce part way through the year that it will no longer cover mammograms or that recipient copays for doctor visits will double?

The Republican plan would also reportedly include some means-testing to have more affluent seniors pay more for their coverage. I agree that some means-testing of Medicare benefits will probably be necessary in the long run.

We should not kid ourselves, however, about how much savings could be

achieved through means-testing. Eighty-three percent of all Medicare spending is for older Americans earning less than \$25,000 a year. There simply is not that much Medicare spending on wealthy seniors from which we could extract major savings.

CONCLUSION

The American people deserve to know about these changes. Seniors deserve to know. Their children, who could find themselves saddled with more and more of their parents' medical bills, deserve to know.

Everyone deserves to know about these changes for the simple reason that the American people care about Medicare, and they care deeply. A recent poll commissioned by the American Association of Retired Persons, shows that 89 percent of Americans support this program. Ninety-two percent see it as the only way older Americans could possibly have adequate health care. And 9 in 10 older Americans said they do not want to be a burden on their families.

In pushing for passage of Medicare 30 years ago, President Johnson said, “the specter of catastrophic hospital bills can [now] be lifted from the lives of our older citizens.” I hope we will do nothing in this Congress to let that specter again stalk older Americans. I urge the majority to release its Medicare plan to the public immediately.●

IF YOU PICK THE FLOWERS YOU COULD EXPLODE

● Mr. LEAHY. Mr. President, I have often spoken about the horrifying effects of antipersonnel landmines. There are 100 million of these hidden killers in over 60 countries.

Here in the relative security of the United States, we can only guess what it is like to live in places like Cambodia, Bosnia, or Angola, in constant fear of losing an arm or a leg or your life, or your child's life, from a landmine. That is a daily, terrifying reality for millions and millions of people around the world.

A recent article by David Remnick in the New Yorker magazine entitled “A Letter From Chechnya—In Stalin's Wake,” illustrates what I am talking about. The Russians have dropped thousands and thousands of landmines from helicopters over Chechnya. I want to read the opening paragraphs of that article:

“If you pick the flowers, you could explode,” Mayerbek said.

“What?”

“If you go off the road and into the field, there are mines. Russian birthday presents. Step on one, you might explode.”

Twenty miles by mountain road from Grozny, the Chechen capital, it had seemed safe enough to get out of the Zhiguli, a banged-up tuna can of a car, and take a short walk. Apparently not. I backed out of the field of lilies and high grass, one soft step at a time.

“Better,” Mayerbek said. “Much better. Now maybe let's get back in the car and get going.”

Mr. President, if you pick the flowers, you could explode. A horrifying thought. But not really a thought at all. It is happening every 22 minutes of every day of every year. The overwhelming majority of the victims of these indiscriminate, inhumane weapons are innocent civilians.

My legislation, the Landmine Use Moratorium Act, which I plan to offer as an amendment in the coming weeks, aims to exert U.S. leadership to begin to put an end to this scourge. It would impose a 1-year moratorium on the use of most antipersonnel landmines. It has 45 cosponsors.●

THE 30TH ANNIVERSARY OF THE MEDICARE PROGRAM

● Mrs. MURRAY. Mr. President, this Sunday, July 30 marks the 30th anniversary of the establishment of the Medicare Program. As this 30th anniversary approaches, it is important for us to reflect on the reasons this program was enacted, and its successes.

President Truman offered several proposals to Congress, and President Kennedy made health care for seniors an issue in his 1960 campaign. Over and over again, Democrats attempted to pass Medicare legislation. Over and over again, Republicans voted overwhelmingly to defeat it. In 1965, despite a record-setting barrage of advertisements by the American Medical Association and many doctors' threats to boycott elderly patients, President Johnson signed the Medicare bill into law on July 30, 1965. Even then, a majority of Republicans voted against it.

The Medicare Program is an important contract the U.S. Government has made with senior citizens. It is a lifeline for our Nation's elderly. It seems as though times have not changed—Republicans are still fighting against the Medicare Program. The same arguments are being used. And, Democrats are still fighting for seniors, and fighting to strengthen the program.

During this year's budget debate, Democrats tried to put money back into the Medicare Program by eliminating the tax breaks in the budget. We were defeated, time and time again.

I have heard rumors of a Republican plan to save Medicare. I have not seen an official copy of this plan, and this is worrisome. The Senate will be expected to act on the budget reconciliation plan by September 22, which is less than 18 legislative days away. How can we possibly ask our constituents to accept a plan that we have not even debated yet? From the little I have heard, this secret plan relies heavily on a voucher system, which will encourage seniors to buy the least costly health plan. This means losing their family doctor in many instances. If a senior chooses to stay in their current health plan, they will pay more—as high as \$1,000 more in premiums, copayments and deductibles.