

this body to enact term limits, to provide the people of this country with an opportunity to change the Constitution of this country, to reflect the fact that the biggest perk of all in Washington is the perk of incumbency. The playing field is so inordinately tilted toward incumbents that individuals from outside have a very difficult time challenging.

I am glad that the majority leader has expressed his commitment to voting on this sense-of-the-Senate term-limit amendment. We will send an important signal to the American people that we remain serious about serious reform, that we have an agenda which is the agenda of the American people. We will again say that those of us who were sent here in 1994 made promises—promises that we will be keeping.

The promises we made are not options—they are commitments, they are our mandate. We did not cook up the idea of term limits as an election gimmick. Term limits are part of the fabric of the political philosophy of the same American people who have seen it work for hundreds of years at both the State and local level. They have seen it work when voluntarily embraced by Presidents from George Washington forward. They have enacted it into the Constitution of the United States in the 22d amendment. They expect us to make it possible to enact term-limits into the Constitution of the United States and provide real reform in the U.S. Congress.

Promises made, promises kept. These promises are not an option, they are our mandate.

Mr. President, I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. DORGAN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DORGAN. Mr. President, I am recognized for 15 minutes, I understand.

The PRESIDING OFFICER. That is correct.

MEDICARE

Mr. DORGAN. Mr. President, I have listened this morning to a discussion about Medicare, and I want to make a couple of points about it, although that was not why I originally sought to take the floor this morning.

It is interesting to me that people say this is not about politics. This is about the sanctity of the Medicare Program, about the solvency of the Medicare Program. Nothing to do with tax cuts, tax cuts for the affluent, but the Medicare Program and its solvency.

I cannot resist pointing out when Medicare was initially offered, 97 percent of the Republicans voted against it. They did not like it. They did not

want it. We still have some today who think it is a terrible program, that it is tantamount to socialism.

Now, most people, including most Republicans, think the Medicare Program is a pretty decent program and has been very helpful to people in this country.

No one should misunderstand what is going on here. No amount of discussion on the floor of the Senate should be allowed to persuade people this is something other than what it really is.

I brought a chart to the floor that describes what Kevin Phillips, a Republican political analyst, noted author, noted Republican analyst, says: "The revolutionary ideology driving the new Republican Medicare proposal is also simple. Cut middle-class programs as much as possible and give the money back to private sector business, finance, and high-income taxpayers."

That is not from me. That is a description of what this is about from a Republican.

Let me give another comment from Kevin Phillips—again, a Republican. This is not a Democrat, but a Republican speaking. "Let's be blunt. If the Republican Medicare form proposal was a movie, its most appropriate title would be 'Health Fraud II.'"

Do not say that is a Democrat standing up attacking a Republican plan. This is a Republican telling us what the Republican plan is all about.

I flew into Minot, ND, on Saturday morning this week. A lady at the airport asked if she could speak to me, and we stepped off to the side where there was a big crowd. She quietly began to ask me a couple of questions.

She was probably 75 or 80 years old. As she began to speak, her chin began to tremble and quiver and she began to get tears in her eyes. She said, "My husband is in a nursing home and he has been there 3 years. I am paying for the nursing home care. We had a few quarter sections of land. We owned a farm. I have sold most of that farm now to pay for his nursing home care. I cannot get Medicaid help for him, and now I am worried that I will lose my house and not be able to continue to live in my house."

By then she was a person with tears in her eyes and expressing the anguish that a lot of Americans have about what is going on in this country. This is not about statistics or theory; this is about someone who lives on a farm for 55 years, does not take, always contributes, always helps, always extends and reaches out, and then they reach the end of their life and one spouse is in a nursing home and the other is worried about losing their home.

Or an Indian school that I visited not so long ago where children who come from dysfunctional families, from backgrounds of alcoholism and chemical abuse, are trying to make a go of it and get an education, get some therapy, get some help, told me about one little fourth grader who, when she came to the Indian boarding school,

would show up every day down at the school administrative office and ask whether a letter had come from home.

"Has a letter come from home?" Every day they said, "No, no letter for you." Every day for weeks, the same routine. "Has a letter come from home?" Actually, her home was not her parents'. It was her aunt and uncle, because her parents were elsewhere. She was living with an aunt and uncle. Finally, she stopped coming to the office to ask whether a letter had come.

The last week of the school year she got her letter and it was the \$5—\$5 that she was given by her aunt and uncle for the year, \$5 spending money that this poor little girl had counted on because they said they would try to send her some help. Every day she went to see whether that money had come, but it had not. She finally got \$5 at the end of the year.

That is the kind of human condition that exists in this country. Policies are wonderful to debate here on the floor of the Senate, but we are talking about little fourth graders, little kids whose lives are profoundly impacted by public policies. We are talking about senior citizens, 75 and 80-year-olds who fear that they will lose their home, who fear they will not have health care, who fear they will get sick and have no money.

People say we are not cutting Medicare; it is growing. We will cut \$270 billion from what is needed to fund Medicare at its current level. That is a fact.

Yes, it will increase, but the fact is we will have more senior citizens. That is why it is increasing. And you have health care inflation. That is why it is increasing. But the \$270 billion necessary to provide the same kind of care will not be available.

They say this is not about anything other than trying to make the system work. This is about cutting taxes for the rich. That is what Kevin Phillips, a Republican, says it is about. "Let's be blunt. If the Republican Medicare reform proposal was a movie, its most appropriate title would be 'Health Fraud II.'"

We will have more debate on Medicare. Do we need to make some adjustments? Yes. Should we take money out of the Medicare Program, a program that works and is so important to people, in order to provide a tax cut to Donald Trump, Ross Perot, and the folks who have it pretty well in this country? I do not think so. That is not what we need to do at this point.

GROSS DOMESTIC PRODUCT

Mr. DORGAN. Mr. President, let me turn to another subject. One of the things that is interesting to me is why we are told daily in the newspapers that the GDP, the gross domestic product, in America is up, our economy is moving forward and we are doing so well. The economists, some politicians, say, gee, things are really moving along. We measure progress in America