

large city in the United States has. What the control board now finds is that the District has had 4 years of balanced budget with a surplus and a large reserve, and this has occurred 2 years ahead of time. At the same time, the District is in the throes of a complete overhaul of its city government, including every form of service delivery. We have surpassed the wildest expectations of this body.

The same page of the Washington Times reports, Hill Chairman To Keep Riders Off of City Budget. This will be very good news to most Members of the House who have had to consider the D.C. appropriation year after year.

I appreciate that the gentleman from Michigan (Mr. KNOLLENBERG) does not want the smallest budget in the House to take virtually the most time. This year I had to get unanimous consent.

I really thank the gentleman from Illinois (Mr. HASTER) who helped me get unanimous consent to get the District's budget out 6 weeks late, even after it was balanced and had a surplus, but the fact is that it caused a tremendous hardship to have our budget out 6 weeks ago ahead of time. This should not have come here in the first place. This is the District's money raised by the District's taxpayers. This is a terrible anomaly that that the budget comes here.

The hard work that both sides of the aisle put in still makes the Congress look bad because it takes so long to get the matter out. The District of Columbia has shown that it is prepared to uphold its end of the bargain with balanced budgets, with surpluses.

We recognize that the work is not done. This is a city that has had to put itself together again like Humpty Dumpty. I appreciate very much what the Mayor of this city and the revitalized city council has done to make this happen. Nevertheless, this is a city without a State.

I will have not some revenue, but bills on the floor for Members, but rather some notions that allow the District to build back its own tax base. Among the payment solutions I will put forward will be a tax credit that will allow the District to pay for the services that commuters use. Eight out of 10 cars in the District of Columbia come from Maryland and Virginia and outside the District. They tear up our roads and leave a diminished tax base to pay for them.

They call our fire. They call our police. They use our water and do not leave anything here. A tax credit based on the services commuters use which cost commuters nothing is the way to approach this. My colleagues do not want the District to go back down the drain, even given all the streamlining and hard work it has done to pull itself out simply because, unlike your cities and counties, we have no State to back us out.

We are not out of the woods yet, but we are way out of the hole. I come to the floor this evening to thank the

Congress for what they have done to help the District get out of the hole. I think that the Congress would want to thank Mayor Anthony Williams and would want to thank the counsel of the District of Columbia for pulling themselves up by their own bootstraps.

#### COURT RULING ON CLASS ACT LAWSUIT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Mississippi (Mr. SHOWS) is recognized for 5 minutes.

Mr. SHOWS. Mr. Speaker, in a major legal development this past Thursday, a U.S. Court of Appeals ruled in favor of a lawsuit filed by the class act group of the military retirees.

In the case of Schism versus the United States, the court found that there is, in fact, a broken promise between the United States Government and thousands of military retirees and their families.

This suit was filed on behalf of military retirees who were recruited into the service with a promise that lifetime health care would be provided to them if they served a career of at least 20 years.

The class act represents retirees who entered the service prior to June 7, 1956. That was the day Congress enacted the first military retiree health care plan, which today we know it as Champus or TRICARE.

Enactment of those health care plans actually stripped away health care that had been promised to these recruits and which had been routinely delivered.

After June 7, 1956, statutes no longer obligated the government to provide health care to military retirees, but health care that is now provided at military bases on a space-available basis is out of reach for many retirees, due to base closures and downsizing, and that is assuming that space is available which is not always the case.

Here are a few choice quotes from the appeals court decision. The retirees entered active duty in the Armed Forces and completed at least 20 years of service on the good faith that the government would fulfill its promises.

The terms of the contract were set when the retirees entered the service and fulfilled their obligation. The government cannot unilaterally amend the contract terms now.

The government breached its implied-in-fact contract with the retirees when it failed to provide them with health care benefits at no cost.

Congress was without power to reduce expenditures by abrogating contractual obligations of the United States. To abrogate contracts, in the attempt to lessen government expenditure, would not be the practice of economy, but an act of repudiation.

The case has been remanded to a lower court to determine damages. Such damages could result in billions and billions of Federal dollars being

awarded to millions of military retirees and their families, particularly if damages are rewarded to retirees who fall beyond the scope of the class act group.

What does this mean to us in Congress? The court decision validates what I had been saying since 1999 when I introduced the Keep Our Promise to America's Military Retirees Act.

The appeals court decision gives us the opportunity to act now and restore health equity to military retirees who now have the courts on their side, and we can do it without busting our budget.

We must pass H.R. 179, the Keep Our Promise Act.

It acknowledges the broken promise of lifetime health care by providing military retirees within the class act group with fully-paid Federal Employees Health Benefit Plan eligibility, and allows all other military retirees to participate in the FEHBP, just like any other Federal employee.

Mr. Speaker, but if they are happy with TRICARE, the military health plan, they can stay with it, Congress passed that part of the Keep Our Promise Act last year.

If we pass this bill, the U.S. government will have responded to the court, and we will have acknowledged and made good on the broken promise to our America's military retirees.

We must do the right thing and quickly enact H.R. 179 into law.

#### IN SUPPORT OF BIPARTISAN PATIENT PROTECTION ACT OF 2001

The SPEAKER pro tempore (Mr. SIMPSON). Under a previous order of the House, the gentleman from Texas (Mr. GREEN) is recognized for 5 minutes.

Mr. GREEN of Texas. Mr. Speaker, I rise today as an original cosponsor of the Bipartisan Patient Protection Act, which was introduced last week by the gentleman from Michigan (Mr. DINGELL), the gentleman from Iowa (Mr. GANSKE), Senator JOHN MCCAIN, and Senator TED KENNEDY. I am proud to be part of the bipartisan coalition that hopefully will finally enact a strong Patients' Bill of Rights.

Mr. Speaker, Americans have been clamoring for a Managed Care Reform for a number of years. They want Congress to enact legislation that puts medical decision-making back in the hands of doctors and patients. They want legislation that provides meaningful accountability. In short, they want the Dingell-Ganske Bipartisan Patient Protection Act of 2001.

This legislation provides patient protections that are very similar to those that have been the law in my home State of Texas since 1997.

A recent article in Texas in the magazine "Texas Medicine" outlines the success of the independent appeals process as part of the HMO reform. As the article references, a provision of the law has been particularly effective in providing patients with real protections.