

will offer the cards, what the discounts will be, when and for how long the cards will be available. These decisions will be driven by—believe it or not—the self-interest of pharmaceutical companies and other business entities. The potential card issuers are not required to pass along any resulting savings to consumers. Once enrolled, you must stay with the card for at least a year, even if the issuer stops discounting the medication you need.

It gets worse. This bill does not remotely pretend to address the fundamental issue: the crushing cost of prescription medication. Rather than leveraging the enormous buying power of millions of Medicare recipients, the new law actually bars market competition. And, let's be clear, this legislation was authored by partisans who swear by the catechism of the free market. As enacted, the bill explicitly prohibits Medicare from negotiating with the pharmaceutical industry for better prices and deeper discounts. We know negotiated discounts can work. When the VA negotiates on behalf of this country's veterans, their drug prices drop significantly. It is mind-boggling that 40 million seniors are being deprived—by law—of the same leverage.

Moreover, the bill blocks reimportation of U.S.-produced drugs from other countries at lower prices. It claims to allow Canadian imports, but only if the Food and Drug Administration formally certifies their safety, which is unlikely to ever happen. The FDA has already stubbornly resisted reimportation, forcing local Councils on Aging and dozens of cities and States to take matters into their own hands—although there is not a single documented case of injury resulting from U.S.-produced drugs that have been reimported from Canada.

In fairness, the bill postponed a scheduled 4.5-percent cut in physician reimbursement for Medicare services—easing fears of a wholesale abandonment of Medicare patients. The legislation will ensure physicians receive a 3-percent increase in payments over the next 2 years. However, this is not nearly enough to protect Medicare beneficiaries' access to quality health care providers. And, the bill actually complicates problems that oncologists face in getting adequate reimbursement for crucial cancer drugs and obstacles confronting patients who need access to inpatient rehabilitation facilities.

Despite the coverage limits and other shortfalls, the cost of the legislation is spectacular—projected by the nonpartisan Congressional Budget Office to exceed \$2 trillion over 10 years. At the same time, homeland security and recent tax cuts have already forced dramatic increases in the Federal deficit, now almost \$400 billion. That is a shocking number, especially when you consider that just three years ago, the budget was boasting a healthy surplus.

Moreover, many fear this new law could lead down a dangerous road toward privatization of Medicare and even Social Security. We saw a similar experiment fail dramatically with Medicare+Choice several years ago, when HMOs and other providers dropped out of the system as soon as costs escalated—leaving seniors to fend for themselves. This new law poses similar risks.

It breaks my heart that the Congress could not achieve real Medicare reform that addressed prescription drug costs. As I look back on my four House terms, very few votes

stand out as genuinely historic in consequence. Along with Presidential impeachment and the Iraq war resolution, the vote on this bill is such a watershed moment. The White House achieved this “victory” by deluding seniors about the impending relief—in the process, jeopardizing hope of genuine reform in the foreseeable future.

As the House reconvenes, I will resume my work with colleagues on both sides of the partisan aisle to address problems with the new law. Older Americans have raised their voices effectively in the legislative arena before. In 1989, a deeply flawed catastrophic benefits bill was repealed. Almost a decade ago, we struggled successfully to restore Medicare cuts that savaged home health care locally and across the Nation. This time, we can expect a steep uphill battle. In his State of the Union address this week, the President vowed to veto any amendments to the new Medicare law. To amend even the most egregious provisions of this bill will require every ounce of outrage we can collectively muster. As cochair of the Older Americans Caucus, a bipartisan group of colleagues focused on issues of particular significance to seniors, please count on my continued and vigorous commitment. I am already working with key House colleagues on specific legislation to repeal the new law's barriers to drug reimportation and negotiated discounts.

HONORING CHILTON MEMORIAL HOSPITAL'S 50TH ANNIVERSARY

HON. RODNEY P. FRELINGHUYSEN

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Wednesday, January 21, 2004

Mr. FRELINGHUYSEN. Mr. Speaker, I rise today to honor the Chilton Memorial Hospital of Pequannock Township, Morris County, New Jersey, in my congressional district. Chilton Memorial Hospital is celebrating 50 years of providing excellence in community health care.

Despite its humble beginnings, Chilton's history is a proud one. This 256-bed hospital arose from the dream of Dr. Forrest Chilton II and his registered nurse wife, Betty. During World War II, when gasoline was being rationed and people in the area did not have enough for the drive to the hospital in the city of Paterson, Dr. and Mrs. Chilton set up a small maternity hospital above his office in Pompton Plains. Soon, as more and more of his thankful patients availed themselves of his services, it became clear that a full service hospital was desperately needed in this fast-growing area in northern New Jersey.

In 1947, the good doctor and his wife donated 8 acres of land to build a hospital in memory of their son, Forrest Chilton III, and other heroes who served our country and made the ultimate sacrifice for American's in World War II. That same year, Dr. Chilton formed a board of directors to help prepare a building plan. Seven years later, in 1954, thanks to the efforts of Dr. and Mrs. Chilton, the Board of Trustees, the 20 women who were the original members of the Chilton Memorial Hospital Auxiliary and 20,000 community volunteers who gave of their time and financial resources, the Chilton Memorial Hospital, with 31 employees and 50 beds, opened its doors for the first time in Pompton Plains.

Within 2 months the hospital was operating near capacity and expansion plans were already underway. In that first year, Chilton Memorial admitted 2,536 patients, delivered 787 babies and treated 3,317 people in its emergency room.

Fifty years later, Chilton Memorial's 1,400 employees and 575 associated physicians admit more than 11,000 patients each year, deliver 1,200 newborn babies, perform nearly 6,000 same day surgeries, treat 36,000 people in its state-of-the-art emergency department, and treat an additional 81,000 citizens on an outpatient basis.

Indeed, Chilton Memorial Hospital's tradition of caring and its commitment to the surrounding communities has made it one of New Jersey's best hospitals. Today, Mr. Speaker, Chilton Memorial Hospital is credited with being the first hospital in the State of New Jersey to be awarded a perfect score by the Joint Commission Accreditation of Healthcare Organizations, whose surveyors evaluate facilities and procedures at 18,000 healthcare facilities worldwide. Chilton's nursing staff has also won national acclaim for consistently receiving the highest ratings for their competence, compassion, response time, and teamwork.

The future will be no different for Chilton as it continues following in the footsteps of its founder and provides state-of-the-art healthcare to a grateful community. Services like Chilton's family-centered obstetrics program that features home-like labor, delivery and recovery rooms, its renowned pediatric care, free standing same day surgery center, and centers for pain management, endoscopy, cardiac care, sleeping disorders, sports medicine and cancer care, among others, and its strong commitment to health and wellness for older men and women, have helped build Chilton's lasting legacy as a premier quality healthcare provider.

Mr. Speaker, I ask that you and my colleagues in the House of Representatives join with me in congratulating Chilton Memorial Hospital, and all of the hospital's outstanding staff, employees, and volunteers, upon celebrating its 50th anniversary.

HONORING THE ACHIEVEMENTS OF DON SUTTON

HON. JEFF MILLER

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, January 21, 2004

Mr. JEFF MILLER of Florida. Mr. Speaker, I rise today to recognize the achievements of one of my constituents, a 1998 Hall of Fame inductee and now a respected broadcaster for the Atlanta Braves, Mr. Don Sutton.

The Los Angeles Dodgers signed Don as an amateur free agent in 1964. He ended his career in 1998 with 324 wins and struck out 3,574 batters, while never missing his turn in the pitching rotation for the Dodgers, Astros, Brewers, Athletics and Angels.

Don, a four-time All Star and the 1977 All-Star Game MVP, reached double figures in wins in 21 of his 23 seasons and struck out over 100 batters in each of his first 21 campaigns. He pitched in four World Series and posted five career one-hit games.

Don, who never spent one day on the disabled list, kept this body and mind in tip-top