

out at us. There are very many flaws in this bill. Why are we trying to rush this forward without putting it together in a way the military retiree has some comfort? Is it absolutely necessary to tell them that if you enter this program for your own benefit, you have to give up military medical facilities completely, you can never go back?

A lot of times in today's health care system people are saying, I want to be able to choose my own doctor. What this demonstration program says is you have to give up the doctor you had or you cannot get in the program. That makes no sense. But after all, you have X number of cosponsors, you have X number of people whose heart is certainly in it, and my heart is in it, and the reason I am up here today is to tell my colleagues we have to put our heads in it as well as our hearts, and it is not impossible to work these out, but if we are going to move forward and simply say all of these are going to be resolved, unfortunately the end result will be a 3-year program which will fail. If we want a successful program, we ought to sit down and work out these difficulties, we will have a higher chance of succeeding, and perhaps my admonitions will go unheeded, and I am sorry, because it will be the military retirees who will have suffered.

Mr. MORAN of Virginia. Mr. Chairman, will the gentleman yield?

Mr. THOMAS. I yield to the gentleman from Virginia.

Mr. MORAN of Virginia. Mr. Chairman, I was waiting for the gentleman to catch his breath.

Mr. THOMAS. Mr. Chairman, reclaiming my time, when I feel strongly about an issue and I believe that folks are not being treated fairly, I do get impassioned.

Mr. MORAN of Virginia. Mr. Chairman, I am very much impressed, and I appreciate the gentleman bringing up these issues.

What I wanted to say to the gentleman, though, we have talked with the insurance companies. The fact is that with a separate risk pool, given the fact that these people are eligible for Medicare, Medicare is a payer of first resort, the insurance premiums are not going to be exorbitant as the gentleman has suggested, they are going to be quite affordable.

Mr. THOMAS. Mr. Chairman, reclaiming my time, I would inquire of the gentleman, under the current program with military retirees, is Medicare A the first payer?

Mr. MORAN of Virginia. Mr. Chairman, if the gentleman will yield further, if one goes to a military treatment facility, it is not the first payer, but for many, there is about 70 percent of military retirees.

Mr. THOMAS. Mr. Chairman, again reclaiming my time, so for the military retirees who use a military facility, that currently is the first payer, but they are denied the ability to go there; if they enter into this dem-

onstration program, they are forced to find medical services elsewhere if they want to go in the program.

Mr. Chairman, I reserve the balance of my time.

Mr. THORNBERRY. Mr. Chairman, I yield 30 seconds to the gentleman from California (Mr. CUNNINGHAM).

Mr. CUNNINGHAM. Mr. Chairman, the rush is that World War II veterans, the average age is 72 years of age. They are not going to be around. The Thomas-Stump bill I applaud for what they are trying to do. We are both trying to do the same thing to help veterans.

But the Moran bill, the original Moran-Bond bill was limited, it only had two sites. The Thornberry-Watts-Cunningham bill put in \$1.5 billion to a full program. That is what we need to do. This is a compromise between the 2 bills. Subvention does not give them enough care; it is a Band-Aid. They do not have access to TriCare. But I ask my colleagues to support this, and I look forward to working with the gentleman from California (Mr. THOMAS) because he is trying to do the same thing we are.

The CHAIRMAN pro tempore (Mr. PEASE). The Committee will rise informally.

The SPEAKER pro tempore (Mr. MICA) assumed the chair.

FURTHER MESSAGE FROM THE SENATE

A further message from the Senate by Mr. Lundregan, one of its clerks, announced that the Senate passed a concurrent resolution of the following title, in which concurrence of the House is requested:

S. Con. Res. 98. Concurrent resolution providing for a conditional adjournment or recess of the Senate and the House of Representatives.

The SPEAKER pro tempore. The Committee will resume its sitting.

NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 1999

The Committee resumed its sitting.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentleman from the District of Columbia (Ms. NORTON).

Ms. NORTON. Mr. Chairman, I thank the gentleman for yielding me this time, and I rise in strong support of the Moran-Thornberry amendment.

I sat on the Subcommittee on Civil Service, and I have a full appreciation, because I heard the quagmire of technical problems associated with ensuring medical care for Medicare-eligible veterans. There are risks associated with being a part of any control group. I do not for a moment believe that this body is going to leave any veterans who decide to go into this program in a lurch at the end of the period.

I do think it is unthinkable to let this gap in health care for these veterans to go on any longer. I do think this is Congress at its best. We did not

know what to do after we heard this testimony. We said let us do a demonstration project and learn from it; that will allow us to know whether we spread it or change it or fix it.

Moreover, these are the first people to be allowed into the FEHBP program other than the traditional clients programs. I think we will learn something about FEHBP as well, and I think the people to learn it from are veterans who have been left out of their full right to medical care.

Mr. THORNBERRY. Mr. Chairman, I yield 1 minute to the distinguished gentleman from Indiana (Mr. BUYER), chairman of the Subcommittee on Military Personnel.

Mr. BUYER. Mr. Chairman, I would like everyone to recognize, this has been one of the consequences of base closures. Many of the retirees, they located next to these military treatment facilities and now that the bases have closed, they are unwilling to move, and they do not want to move. They are stationed where they are. So we are dealing with some cleanup work to do from base closures, and that is what this is about.

I want to recognize the gentleman from California (Mr. THOMAS) on the Subcommittee on Military Personnel whose letter we received, we made it a part of the RECORD; not only the gentleman from California (Mr. THOMAS), but the gentleman from Texas (Mr. ARCHER), so we are well aware of their objections.

We recognize that the Committee on Commerce and the Committee on Ways and Means were not committees of jurisdiction on this, but what I want to say to the gentleman is that invitations were sent out, there were meetings with CBO and the Committee on the Budget and the Committee on Government Reform and Oversight, and the Committee on National Security on this. The gentleman has raised some very interesting points here today, and what I would like to do between now and conference is for us to work together on this as we move toward a demonstration.

I also want to compliment the gentleman from Virginia (Mr. MORAN) and the gentleman from Oklahoma (Mr. WATTS) and the gentleman from Texas (Mr. THORNBERRY). I appreciate them accepting that one of these sites should also be one of the Medicare subvention sites so we completely understand what we are doing, and I am glad we are not moving to the total phase-in, but only a limited pilot.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentleman from Florida (Ms. BROWN).

Ms. BROWN of Florida. Mr. Chairman, I rise in strong support of this amendment and would like to commend my colleagues, the gentleman from Oklahoma (Mr. WATTS) and the gentleman from Virginia (Mr. MORAN) for their leadership in this area.

As a Member of the House Committee on Veterans' Affairs and a representative from Florida, I am very concerned

with the state of military health care, particularly since so many Floridians are being affected. I have received the letters and the personal visits by military retirees who are concerned about their health care options.

The health care industry is in change and we in Congress need to take some leadership. I support this pilot program 100 percent, and I urge a "yes" on this amendment.

As Memorial Day approaches, let us show our military personnel that we do care and that we as Members of the United States Congress do keep our promises to the veterans.

The CHAIRMAN pro tempore. All time of the gentleman from Virginia (Mr. MORAN) has expired.

Mr. THORNBERRY. Mr. Chairman, I yield such time as he may consume to the gentleman from Florida (Mr. STEARNS).

(Mr. STEARNS asked and was given permission to revise and extend his remarks.)

Mr. STEARNS. Mr. Chairman, I rise in support of the Thornberry-Watts-Cunningham amendment.

Mr. Chairman. Because the need for expanded health care for military retirees is so important, I am pleased to join with my colleagues, Representatives WATTS, THORNBERRY and MORAN in their efforts to permit Medicare-eligible retired members of the Armed Forces and their Medicare-eligible dependents to enroll in the Federal Employees Health Benefits program (FEHBP).

This amendment proposes a three-year demonstration project at six to ten sites in the United States. The cost is offset by the sale of national defense stockpile materials.

We made a commitment to those who chose to serve in defense of our country. Military retirees were promised health care for life. However, there is a Catch-22 situation for Medicare-eligible retired military because once they either turn age 65 or qualify for disability treatment, they lose their CHAMPUS benefits. Unfortunately, they are placed last on the priority for treatment at Military Treatment Facilities, and they are prevented from participating in the new TRICARE program.

Of the 1.2 million military beneficiaries 65 or older who are Medicare eligible, approximately 324,000 receive "space available" care in military treatment facilities.

I want to address the FEHBP Program as a complement to military health care. The FEHBP has been successfully operating over the past thirty years at about one-third of the cost incurred in other private health insurance programs.

Under the FEHBP, a consumer could opt to buy coverage that would include fee-for-service, HMO, PPO, or a union sponsored plan similar to the postal workers, etc.

In order to ensure that our military have the same choice of plans now available to U.S. Senators and Representatives, the President and Vice President, and over ten million federal workers, I urge passage of this amendment that would offer our nation's military and veterans the same basic benefits that we here in Congress have available to us.

This amendment has been endorsed by The Retired Enlisted Association (TREA) and the National Association for Uniformed Services

(NAUS). I agree with these groups and believe we must fulfill our commitment to our nation's military retirees and veterans.

Mr. THORNBERRY. Mr. Chairman, I yield 1 minute to the distinguished gentleman from Florida (Mr. MICA), the chairman of the Subcommittee on Civil Service who has also been a leader in this effort.

Mr. MICA. Mr. Chairman, as chairman of the House Subcommittee on Civil Service, I have worked with the amendment sponsors to make our military retirees eligible for our Federal Employees Health Benefit Program.

While this amendment does not cover dependents and active military and retirees under age 65, which I have advocated, I strongly support this amendment.

This is a reasonable start with a 3-year demonstration project limited to 70,000 individuals. With base closures and military downsizing, our health care system for our military and our retirees has broken down. TriCare has been described to me as try-to-get-care.

As we approach Memorial Day, as we have heard said on the other side, we must remember those who have died in service to our country. How sad it would be if we abandon those who survived and those who have served us on this occasion. This amendment, my colleagues, only allows military retirees over 65 and surviving dependents and those who died in active duty to be eligible for the same benefits as Members of Congress.

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

Mr. Chairman, I rise in support of the amendment. I would like to commend the sponsors for their efforts to fulfill the promise made to military personnel. Since the Second World War, recruits were offered "free health care for life" at a military hospital if they served a 20-year career in the military. These promises were made when the ratio of active duty personnel to military retirees was much greater. However, as we have drawn down the force, base closures, reductions in medical personnel and budget cuts have diminished this health care for retirees, forcing them to rely on Medicare. This amendment will test the FEHBP option for those with the greatest need to improve the viability of the program.

Many of us are worried about the potential costs of this legislation, both to the Defense Department and to the beneficiaries. The Department had predicted that the costs of implementing this program would further reduce the space of available care. I am pleased to note that this proposal would not harm Defense health care program's budget, and it is funded by stockpile sales.

I take this moment to commend the gentleman from Virginia and the other cosponsors for their dedication to this issue.

Mr. Chairman, at this time I wish to make an inquiry of the gentlewoman from Texas (Ms. JACKSON-LEE).

I would like to ask if the gentlewoman supports this amendment, and if so, why?

Ms. JACKSON-LEE of Texas. Mr. Chairman, I thank the ranking member for his leadership. I thank the gentleman from Virginia (Mr. MORAN) and the gentleman from Oklahoma (Mr. WATTS) for their amendment.

I absolutely do support this amendment. I think just a few days away from celebrating our veterans and our men and women in the military that we need to honor our military veterans. This amendment will not impact military readiness and it will not be offset by cuts in discretionary defense funds, but this amendment would ensure that every Medicare-eligible retiree is covered and provided health insurance and would allow Medicare eligible military retirees the option to join the Federal Employees Health Benefits Program through a 3-year demonstration project.

I would simply say that what this does is it answers the questions of all of my veterans, when I go home to my district, asking me about their medical program and how they cannot be in this retiree program.

So I simply say that this is a good amendment supported by the National Military and Veterans Alliance and every major military association. We must also show our support for our military retirees. It is a good amendment, a strong amendment, and the right thing to do.

I strongly support my colleagues' amendment concerning enrolling military retirees in the Federal Employees Health Benefits program.

Currently America's military men and women are denied free accessible and quality health care after they have retired from their dedicated service in the U.S. military.

We should honor our military veterans and we should be committed to ensure that the men and women who fight for and protect our country receive adequate health care. However, in our country, retirees from the military do not receive the same benefits as Federal employees.

This amendment would not impact military readiness and will not be offset by cuts in discretionary defense programs. But, this amendment would ensure that every Medicare eligible retiree is covered and provided health insurance, and will allow Medicare eligible military retirees the option to join the Federal Employees Health Benefits program through a limited 3 year demonstration project.

This amendment is supported by the national military and veterans alliance and every major military association. We must also show our support for our military retirees.

Mr. SKELTON. Mr. Chairman, I thank the gentlewoman for her answer to my inquiry.

I think it is very important that we do follow through on this program to see how it works, because we must do our very best in our committee and in this Congress to fulfill that promise made to military personnel, not just for those who it will affect directly, but to those future soldiers and retirees that we wish to keep the faith with.

□ 1630

Mr. THORNBERRY. Mr. Chairman, I yield 1 minute to the distinguished gentlewoman from Florida (Mrs. FOWLER), a member of the committee. (Mrs. FOWLER asked and was given permission to revise and extend her remarks.)

Mrs. FOWLER. Mr. Chairman, I rise in support of this amendment.

It is common knowledge that many military retirees were promised access to free health care for life. All this amendment does is give military retirees a chance to participate in the same plan that every Federal employee has.

By providing more choices, the FEHBP uses market forces to control costs and ensure high quality. Military retirees should have these choices. This amendment merely provides for a demonstration project. Coupled with the subvention demonstration project that we passed in the Balanced Budget Act, this will provide some insights on how we can correct the current system.

This amendment does not fulfill the promise of free health care for life, but it is a step in the right direction. I urge my colleagues to support this amendment.

Mr. THORNBERRY. Mr. Chairman, I yield 1 minute to the gentleman from Kansas (Mr. RYUN), a member of the subcommittee.

Mr. RYUN. Mr. Chairman, I rise in strong support of this particular amendment.

I know that some of my colleagues oppose this amendment. However, as a member of the subcommittee, I have heard the testimony and I have met with retirees who face a real medical problem. As military installations are closed and downsized, our military retirees are being shut out.

This amendment is a small step forward, keeping the promises that we have made to our military many years ago.

Mr. THORNBERRY. Mr. Chairman, I yield 30 seconds to the gentlewoman from Washington (Mrs. LINDA SMITH).

Mrs. LINDA SMITH of Washington. Mr. Chairman, this is simply about keeping our word. I have no answer when retirees ask me, why when I reenlisted and they promised me lifetime health care, can I not get it? There is no excuse for not keeping our word; and this is a beginning, just a beginning, to do that.

Mr. THORNBERRY. Mr. Chairman, I yield 30 seconds to the gentleman from Missouri (Mr. BLUNT).

Mr. BLUNT. Mr. Chairman, I thank the gentleman for yielding me the time.

I rise in strong support of this amendment, Mr. Chairman. I think, as exactly as the gentlewoman from Washington (Mrs. SMITH) said, it is about keeping our word. This amendment does not keep our word, but it is a step in the right direction. It is a step in doing what we ought to do. We need to look harder for the resources necessary to do exactly what we told veterans we were going to do.

Mr. Chairman, I urge strong support of this amendment.

Mr. THOMAS. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, obviously, what is at debate here is whether or not this program, the way it is currently constructed, is one which has a maximum chance of retaining viability.

One of our colleagues, I believe, got a little carried away in her eloquence and indicated that this was going to be available for every eligible retiree. It is not. It is a very limited program, 70,000. The gentleman from Virginia said it really exposed the trust fund to \$50 million. That is correct. But it is a \$327 million CBO estimate cost over 3 years, 70,000 retirees, \$327 million. It also has no permanent transition.

One of the things we tried to do in the DOD subvention and that Members will see we are doing in the VA subvention is to say that if it is, in fact, successful, this is what occurs as a follow-up.

What we have here is an amendment that started out at more than \$3 billion. In an attempt to get costs under control, although we were not able to work, and I would like to make one brief allusion to the May 4 meeting. That was the one meeting that was held. It was a late Friday night phone call, and my staff was unable to work because they were working on the VA subvention. They did a follow-up on Monday, and that was their only opportunity to try to have some input.

All of us want to help our military retirees and our veterans. We have two solid subvention programs going forward with all kinds of guarantees for the retirees and, if the program is a success, its ability to continue forward.

What we have here, I am sorry to say, is kind of a jerry-rigged program funded out of asset sales for 3 years in which there are a number of questions in terms of the way in which the program blends for the retirees, and it almost guarantees its failure.

What I have been trying to do is to get people to understand that, if we make certain changes in this, if we can sit down and get it to conform more to the kinds of underlying structures we had in the subvention bill, what all of us seem to want, which myself, the gentleman from California wants, is a successful program.

This program as it is currently constructed is doomed to fail. That is not the way we should go forward in terms of our military retirees. We should make the kinds of changes that enhance the chance of this program succeeding. It has fundamental flaws. Obviously, with the number of people who feel the pressure nearing Memorial Day, this measure is going to pass. I hope someone sits down and corrects the flaws. The military retirees deserve better than this amendment.

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

(Mr. SPENCE asked and was given permission to revise and extend his remarks).

Mr. SPENCE. Mr. Chairman, I rise in strong support of the Watts-Moran-Thornberry amendment. Our government is not doing an adequate job of fulfilling the promise of lifetime health care that was made to those who have made a career in our military.

With budget cuts, reductions in military medical personnel, and base closures, access to quality care within the military health care system has become especially difficult for military retirees who are eligible for Medicare.

While Medicare-eligible retirees and their families remain eligible for space-available care in military hospitals, they are not eligible to participate in the Department of Defense Tricare program, and Tricare is reducing the amount of space-available care accessible to those beneficiaries.

As a result, many of these retirees are discovering that the health care benefit they earned through their dedicated service in the military may not be available when they need it most. We need to find a cost-effective way to meet the health care needs of these military retirees, and to fulfill the promise of lifetime health care that was made to them. This amendment is a step in that right direction.

The amendment would allow up to 70,000 Medicare-eligible military retirees in several sites across the country to enroll in the Federal Employees Health Benefits Program, and to receive the same health care benefits as Federal employees and Federal retirees. It has been carefully designed to establish a demonstration program that is large enough to provide for a valid test of this concept, yet keeps annual costs to a reasonable level over the course of the 3-year demonstration. The costs have been offset in full.

I want to commend my colleagues on the Committee on National Security, the gentleman from Texas (Mr. THORNBERRY), the gentleman from Oklahoma (Mr. WATTS), as well as the gentleman from Virginia (Mr. MORAN) for their dedicated efforts on behalf of our military retirees, on behalf of this amendment. They have worked tirelessly to develop a good demonstration program that will help us to begin to restore faith, not only with those who served in the military as a career, but those who will continue to serve to date.

I also want to commend the gentleman from Florida (Mr. MICA) for his longstanding support of improving health care for our military retirees, and the gentleman from California (Mr. THOMAS) for his contribution.

Mr. Chairman, I urge support for this bipartisan amendment.

Mr. WELDON of Florida. Mr. Chairman, will the gentleman yield?

Mr. SPENCE. I yield to the gentleman from Florida.

Mr. WELDON of Florida. Mr. Chairman, I thank the gentleman for yielding me the time. I want to just share with my colleagues here, Mr. Chairman, when I was in the Army Medical Corps, every month at the end of the

month my Secretary would bring me a stack of patients who were unable to get in to see me for an appointment, because we were too busy. We did not have enough doctors in the clinic.

I would go through that stack and I would be able to see which ones were going to end up in the emergency room. I did not like it. I did not like it at all, but at least I knew the emergency room was there when they got sick.

Now, today, we have closed the emergency room to them, or we have closed the whole facility. We have turned our back on these people, Mr. Chairman. I encourage everybody to vote in support of this amendment. If this is a flawed amendment, I say vote for it and let us fix it in conference, and let us move the process along.

When people say, we were not promised medical care when we retired, do not believe that. Everybody said that. I spent 6 years on active duty. We heard it all the time, do your 20 and you will get health care when you retire. We have turned our backs on these people.

I commend all my colleagues for bringing this to the floor, and I encourage everybody to vote in support of this.

Mr. INGLIS of South Carolina. Mr. Chairman, will the gentleman yield?

Mr. SPENCE. I yield to the gentleman from South Carolina.

Mr. INGLIS of South Carolina. Mr. Chairman, I thank the gentleman for yielding to me.

I rise in support of this amendment, Mr. Chairman, and thank all those the gentleman has just mentioned for their good work on this.

I believe it is important for us to realize it is not just a matter of keeping faith with our military retirees, it is also a matter of military readiness, because what I am hearing all around my State is that people who are on active duty now are telling their family members, do not re-up, do not reenlist. The military, the United States government, will not honor its commitments.

So it becomes not just a matter of keeping faith with those who have gone before, but rather, with the military readiness of this Nation. So it is essential, I believe, that we in this Congress rise to the occasion of backing up our commitments to those retirees, not just so we can keep faith with them, but so we can keep faith with this Nation in providing for military readiness.

Mr. FARR of California. Mr. Chairman, will the gentleman yield?

Mr. SPENCE. I yield to the gentleman from California.

Mr. FARR of California. Mr. Chairman, as the largest base closure in the United States, we need this bill.

(Mr. FARR of California asked and was given permission to revise and extend his remarks.)

Mr. FARR of California. Mr. Chairman, I rise today to express my strong support for the Moran-Watts-Thornberry amendment to the Fiscal Year 1999 Defense Authorization Act,

which would create a demonstration project for military retirees to enroll in the Federal Employees Health Benefits Program (FEHBP).

Guaranteeing health care for our nation's military retirees should be one of our nation's top priorities. Yet millions of military retirees are prohibited from receiving Department of Defense health care because they have passed the age of 65 and are eligible for Medicare. As a result, Americans who served in our nation's defense are denied the health care they have more than earned as a result of their sacrifices to our nation.

In my own district, thousands of these retirees—individuals who dedicated many years of their lives to the military—are now without military health care. Denied CHAMPUS or TRICARE, and put last on priority lists for care at Military Treatment Facilities, these brave men and women have an increasingly difficult time obtaining the health care they need. This, Mr. Chairman, is simply unfair.

The amendment before us provides a solution to the problem. It establishes a three-year demonstration project in which up to 70,000 Medicare-eligible military retirees would be permitted to enroll in FEHBP at six test sites. The amendment would also allow dependents of these retirees to be eligible for FEHBP, as well as widows of those who died while on active duty for more than thirty days.

Passage of this amendment will allow military retirees and their immediate families to continue to obtain cost-effective health care from the federal government after the age of 65. It is a fair and flexible solution that will help ensure that these brave and dedicated Americans will not have to worry about obtaining the health care they need and deserve.

Mr. Chairman, next week we celebrate Memorial Day. I cannot think of a more appropriate time in which to act on behalf of our nation's military retirees. Let's pass this amendment today.

Mr. THORNBERRY. Mr. Chairman, I yield myself the balance of my time.

The CHAIRMAN pro tempore. The gentleman from Texas (Mr. THORNBERRY) is recognized for 30 seconds.

Mr. THORNBERRY. Mr. Chairman, I appreciate the gentleman from California (Chairman THOMAS) and his willingness to work with us to make sure that the protections that need to be in this provision are there as we move toward the conference. I think he is right, and I think that is important.

I also believe that it is morally wrong, not to mention detrimental to our country's security, not to treat military retirees at least as well as we treat civilian Federal retirees.

This amendment starts to fix that, and regardless of the other difficulties that have to be overcome, it is the right thing to do. This House ought to pass it.

Mr. NORWOOD. Mr. Chairman, I rise in support of the Watts amendment because I feel it is imperative that Congress do its best to rectify the injustice done to military retirees who were promised, but have not received, the guarantee of lifetime medical care.

Uncle Sam misled America's finest when he recruited them to the military. Therefore, while this amendment does not restore the entire promise, it does provide military retirees over the age of 65 with affordable, accessible, high-

quality health care by allowing them to join the Federal Employee Health Benefit Program. Congress has access to FEHBP, Mr. Chairman, so why shouldn't our nation's military retirees?

The Watts amendment is a step in the right direction—a move toward partially restoring the quality of healthcare at an affordable price that these retirees were promised upon entering the military. We owe them no less!

Mr. ACKERMAN. Mr. Chairman, I rise to express my strong support for the Watts, Moran, Thornberry Amendment to the Defense Authorization Bill. For too long, our nation's military retirees have been denied access to the Federal Employees Health Benefits Plan (FEHBP) even though they have devoted their entire lives to the defense and security of our nation. Most of these individuals entered the military on the premise that they would be entitled to comprehensive, quality health care for the rest of their lives. Unfortunately, our nation has not lived up to this important commitment.

This amendment would create a demonstration program that would enroll 70,000 Medicare eligible members or former members of the armed forces into the FEHBP. The program would be available in six sites around the country. At the end of the project, the Secretary of Defense, and the Director of the Office of Personnel Management will analyze whether or not the demonstration yielded its intended results.

Throughout my tenure in Congress, I have often spoken out in behalf of using the FEHBP to cover the underinsured and the uninsured. The FEHBP is financially sound and in most states, the program provides at least three quality benefit plans for its members. This the least we can do for our armed forces who have stood up to protect the rights and freedoms that we all cherish today. After a long fight, we have taken the first step toward providing comprehensive coverage for such brave and selfless individuals. It is my hope that this provision will remain in the conference report and will be signed into law by the President in the most timely manner possible. Our armed forces deserve nothing less.

Mr. FRELINGHUYSEN. Mr. Chairman, I rise in support of the amendment offered by Congressmen WATTS, MORAN and THORNBERRY to allow military retirees who are eligible to join Medicare to enroll in the Federal Employees Health Benefits Program (FEHBP).

Mr. Chairman, under this amendment, the Department of Defense would be allowed, on a trial basis, to give 70,000 military retirees, their eligible dependents, and certain "Gold Star Widows" the option of enrolling in the FEHBP program.

For too long, the men and women who have served our nation in the armed forces have not been afforded access to the same health care programs that other federal retirees are eligible to join. For the first time, under the provisions of this amendment, they will be offered the choice of enrolling in the FEHBP program for their health care services. These are individuals who are not eligible for TRICARE, which serves active duty and under-65 military retirees.

Our military retirees should have the same quality of health care coverage as other federal retirees, and should pay equitable premiums for that coverage.

Mr. Chairman, this amendment is supported by numerous veterans organizations, including

the Veterans of Foreign Wars, and I want to add my support for the Watts/Moran/Thornberry Amendment. It is a first step toward providing our military retirees with needed, affordable health care coverage.

Mr. DAVIS of Virginia. Mr. Chairman, I rise today in support of this amendment offered by my colleagues, Representatives J.C. WATTS (R-OK), JIM MORAN (D-VA), and WILLIAM "MAC" THORNBERRY (R-TX) that will help provide a portion of the military retiree community with affordable, accessible, high-quality health care by allowing them to join the Federal Employee Health Benefits Program (FEHBP). This amendment authorizes the Department of Defense (DoD) to conduct a demonstration program to enroll Medicare-eligible military retirees in the (FEHBP). The cost of the demonstration program is offset by the sale of the National Defense Stockpile materials. Furthermore, this demonstration project features a three-year program located at 6–10 sites around the nation. It will provide coverage for Medicare eligible military retirees (age 65 and above). This amendment will also cap costs at \$100 million per year.

Mr. Chairman, although adoption of this amendment falls far short of our original commitments to our veterans. I believe that the passage of this amendment will bring a step closer the promise of lifetime health care made to career military and retirees is kept and I urge all of my colleagues to support the passage of this amendment.

The CHAIRMAN pro tempore. All time has expired.

The question is on the amendment offered by the gentleman from Texas (Mr. THORNBERRY).

The question was taken; and the Chairman pro tempore announced that the ayes appeared to have it.

RECORDED VOTE

Mr. MORAN of Virginia. Mr. Chairman, I demand a recorded vote.

A recorded vote was ordered.

The vote was taken by electronic device, and there were—ayes 420, noes 1, answered "present" 1, not voting 11, as follows:

[Roll No. 178]

AYES—420

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|--------------|------------|-------------|
| Abercrombie | Boehlert | Chenoweth |
| Ackerman | Boehner | Christensen |
| Aderholt | Bonilla | Clay |
| Allen | Bonior | Clayton |
| Andrews | Bono | Clement |
| Archer | Borski | Clyburn |
| Armey | Boswell | Coble |
| Bachus | Boucher | Coburn |
| Baesler | Boyd | Collins |
| Baker | Brady (PA) | Combest |
| Baldacci | Brady (TX) | Condit |
| Ballenger | Brown (CA) | Conyers |
| Barcia | Brown (FL) | Cook |
| Barr | Brown (OH) | Cooksey |
| Barrett (NE) | Bryant | Costello |
| Barrett (WI) | Bunning | Cox |
| Bartlett | Burr | Coyne |
| Barton | Burton | Cramer |
| Bass | Buyer | Crane |
| Becerra | Callahan | Crapo |
| Bentsen | Calvert | Cubin |
| Bereuter | Camp | Cummings |
| Berman | Campbell | Cunningham |
| Berry | Canady | Danner |
| Bilbray | Cannon | Davis (FL) |
| Bilirakis | Capps | Davis (IL) |
| Bishop | Cardin | Davis (VA) |
| Blagojevich | Carson | Deal |
| Bliley | Castle | DeFazio |
| Blumenauer | Chabot | DeGette |
| Blunt | Chambliss | Delahunt |

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|---------------|--------------------|---------------|
| DeLauro | Johnson (WI) | Pallone |
| DeLay | Johnson, E. B. | Pappas |
| Deutsch | Jones | Pascarell |
| Diaz-Balart | Kanjorski | Pastor |
| Dickey | Kaptur | Paul |
| Dicks | Kasich | Paxon |
| Dingell | Kelly | Payne |
| Dixon | Kennedy (MA) | Pease |
| Doggett | Kennedy (RI) | Pelosi |
| Dooley | Kennelly | Peterson (MN) |
| Doolittle | Kildee | Peterson (PA) |
| Doyle | Kilpatrick | Petri |
| Dreier | Kim | Pickering |
| Duncan | Kind (WI) | Pitts |
| Dunn | King (NY) | Pombo |
| Edwards | Kingston | Pomeroy |
| Ehlers | Klecza | Porter |
| Ehrlich | Klink | Portman |
| Emerson | Klug | Poshard |
| Engel | Knollenberg | Price (NC) |
| English | Kolbe | Pryce (OH) |
| Ensign | Kucinich | Quinn |
| Eshoo | LaFalce | Radanovich |
| Etheridge | LaHood | Rahall |
| Evans | Lampson | Ramstad |
| Everett | Lantos | Rangel |
| Ewing | Largent | Redmond |
| Farr | Latham | Regula |
| Fattah | LaTourette | Reyes |
| Fawell | Lazio | Riggs |
| Fazio | Leach | Riley |
| Filner | Lee | Rivers |
| Foley | Levin | Rodriguez |
| Forbes | Lewis (CA) | Roemer |
| Ford | Lewis (GA) | Rogan |
| Fossella | Lewis (KY) | Rogers |
| Fowler | Linder | Rohrabacher |
| Fox | Lipinski | Ros-Lehtinen |
| Frank (MA) | Livingston | Rothman |
| Franks (NJ) | LoBiondo | Roukema |
| Frelinghuysen | Lofgren | Roybal-Allard |
| Frost | Lowe | Royce |
| Furse | Lucas | Rush |
| Gallegly | Luther | Ryun |
| Gejdenson | Maloney (CT) | Sabo |
| Gekas | Maloney (NY) | Salmon |
| Gephardt | Manton | Sanchez |
| Gibbons | Manzullo | Sanders |
| Gilchrest | Markley | Sandlin |
| Gillmor | Martinez | Sanford |
| Gilman | Mascara | Sawyer |
| Goode | Matsui | Saxton |
| Goodlatte | McCarthy (MO) | Scarborough |
| Goodling | McCarthy (NY) | Schaefer, Dan |
| Gordon | McCollum | Schaffer, Bob |
| Goss | McCrery | Schumer |
| Graham | McDade | Scott |
| Granger | McDermott | Sensenbrenner |
| Green | McHale | Serrano |
| Greenwood | McHugh | Sessions |
| Gutierrez | McInnis | Shadeegg |
| Gutknecht | McIntosh | Shaw |
| Hall (OH) | McIntyre | Shays |
| Hall (TX) | McKeon | Sherman |
| Hamilton | McKinney | Shimkus |
| Hansen | McNulty | Shuster |
| Hastert | Meehan | Sisisky |
| Hastings (FL) | Meek (FL) | Skeen |
| Hastings (WA) | Menendez | Skelton |
| Hayworth | Metcalfe | Slaughter |
| Hefley | Mica | Smith (MI) |
| Hefner | Millender-McDonald | Smith (NJ) |
| Hergert | Miller (CA) | Smith (OR) |
| Hill | Miller (FL) | Smith (TX) |
| Hilleary | Minge | Smith, Adam |
| Hilliard | Mink | Smith, Linda |
| Hinchee | Moakley | Snowbarger |
| Hinojosa | Mollohan | Snyder |
| Hobson | Moran (KS) | Solomon |
| Hoekstra | Moran (VA) | Souder |
| Holden | Morella | Spence |
| Hooley | Murtha | Spratt |
| Horn | Myrick | Stabenow |
| Hostettler | Nadler | Stark |
| Houghton | Neal | Stearns |
| Hoyer | Nethercutt | Stenholm |
| Hulshof | Neumann | Stokes |
| Hunter | Ney | Strickland |
| Hutchinson | Northup | Stump |
| Hyde | Norwood | Stupak |
| Inglis | Nussle | Sununu |
| Istook | Oberstar | Talent |
| Jackson (IL) | Obey | Tanner |
| Jackson-Lee | Oliver | Tauscher |
| (TX) | Ortiz | Tauzin |
| Jefferson | Owens | Taylor (MS) |
| Jenkins | Oxley | Taylor (NC) |
| John | Packard | Thompson |
| Johnson (CT) | | Thornberry |

| | | |
|-----------|-------------|------------|
| Thune | Walsh | Weygand |
| Thurman | Wamp | White |
| Tiahrt | Waters | Whitfield |
| Tierney | Watkins | Wise |
| Towns | Watt (NC) | Wolf |
| Traficant | Watts (OK) | Woolsey |
| Turner | Waxman | Wynn |
| Upton | Weldon (FL) | Yates |
| Velazquez | Weldon (PA) | Young (AK) |
| Vento | Weller | Young (FL) |
| Visclosky | Wexler | |

NOES—1

Thomas

ANSWERED "PRESENT"—1

Ganske

NOT VOTING—11

| | | |
|--------------|------------|--------|
| Bateman | McGovern | Skaggs |
| Gonzalez | Meeks (NY) | Torres |
| Harman | Parker | Wicker |
| Johnson, Sam | Pickett | |

□ 1702

So the amendment was agreed to.
The result of the vote was announced as above recorded.

The CHAIRMAN. The Committee will rise informally.

The SPEAKER pro tempore (Mr. LAHOOD) assumed the chair.

MESSAGE FROM THE PRESIDENT

A message in writing from the President of the United States was communicated to the House by Mr. Sherman William, one of his secretaries.

The SPEAKER pro tempore. The Committee will resume its sitting.

NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 1999

The Committee resumed its sitting.

PREFERENTIAL MOTION OFFERED BY MR. FRANK OF MASSACHUSETTS

Mr. FRANK of Massachusetts. Mr. Chairman, I move that the Committee do now rise and report the bill back to the whole House with the recommendation that the enacting clause be stricken.

The CHAIRMAN. The gentleman from Massachusetts (Mr. FRANK) is recognized for 5 minutes.

Mr. FRANK of Massachusetts. Mr. Chairman, I have offered the motion to strike the enacting clause to have a chance to protest against the outrageous denial of democratic procedures.

Along with the gentleman from California (Mr. CAMPBELL), the gentleman from Ohio, who chairs the Committee on the Budget, the gentleman from Tennessee (Mr. HILLEARY), the gentleman from California (Mr. CONDIT), and the gentleman from New York (Mr. SERRANO), I offered an amendment to the Committee on Rules to require that American ground troops leave Bosnia by December 31 of this year.

We recently had a supplemental in which we were asked and voted, I did not but the majority did, an additional \$162 million per month for the American ground troops in Bosnia. I believe, and others do, that it is time for the Europeans to step up.

We believe, at the very least, this House ought to vote on whether or not