them for the last 2 months, that comes to about $1,000, we have 200,000 active duty GIs who in the Republican tax bill are not provided the full $1,000 tax credit. Somehow we have put in this administration and in this Congress more priority on the 200,000 no-show Iraqis who are getting $20 a day than our active men and women who are getting shot at and could lose their lives. They deserve a tax cut.

I noted the other day in our commitment to Iraq for reconstruction, we committed to 20,000 units of housing reconstruction; and yet here in America under the President's budget, there are only 5,000 units of public housing. We committed to 13 million Iraqis getting universal health care, half the population, yet not a dime for America for the uninsured who work full time. We committed to rebuilding 12,500 schools in Iraq, yet in many of our schools across this country, there are no dollars for investment in remodernization.

What make Iraqis and the investments in Iraq more important than investments here? I support rebuilding Iraq, given the war; but we should not deconstruct here in America. We have set a set of priorities and principles in place that has put America behind where we put our priorities overseas. This administration needs to remember that here at home working families deserve a tax cut, the 12 million children of working parents, 6.5 million working families who will not get the $1,000 tax cut because this Congress, under the stewardship and leadership of this administration, is too busy.

Yet the Premier of Pakistan came in and walked out with an equal amount of dollars, $3.5 billion. In Iraq, folks will be getting $20 a day who do not show up for work, yet our GIs on active duty will not get the full $1,000 tax cut they are promised. Where are the values? Where are the principles that say you should do that? I think I know a number of my colleagues on the other side of the aisle who have good values. We have talked about our families, our hopes and faith. If their mothers knew what they were doing here, giving 200,000 Iraqis $20 a day, denying a tax cut to our GIs, I think they would have another view because those are not the values their mothers raised them with.

In closing, we make choices. President Kennedy once said to govern is to choose. I am saddened that, as we get ready to start sending out checks to the top 1 percent in the sense of wealth, that the 12 million children of working families will have been forgotten and will go without that tax cut.

Mr. Speaker, we will go home with unfinished business as it relates to our values and our principles. We should remember the folks who get up every morning, go to work, try to make that paycheck stretch all the way to the 31st of the month. We should remember what they are trying to do with their children, to know the difference between right from wrong; and what do we say to them, we are going to keep that speed bump in your way so your day is harder. But somehow, we are putting a better sense of values on the Premier of Pakistan who walked out in one day with $3.5 billion, equal to the amount it would cost to rectify the error in the conference when the Republican leadership of the Senate and the Republican leadership of the House and the Vice President of the United States sat in the room and cut those kids out of the tax cut.

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Texas (Ms. EDDIE BERNICE JOHNSON) is recognized for 5 minutes.

(Ms. EDDIE BERNICE JOHNSON of Texas addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. MILLENDER-MCDONALD) is recognized for 5 minutes.

(Ms. MILLENDER-MCDONALD addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Florida (Ms. CORRINE BROWN) is recognized for 5 minutes.

(Ms. CORRINE BROWN of Florida addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

BETTER PRESCRIPTION DRUG PLAN NEEDED

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Texas (Ms. JACKSON-LEE of Texas) is recognized for 5 minutes.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I wish to join my colleagues tonight. Many of the women of the United States Congress have made a commitment to their constituents to represent them in a very fair manner, but they also recognize the importance of not leaving the sensitivity and the understanding of the needs of the women of America at the door as they take their oath to be Members of Congress.

So today I rise to join my colleagues to emphasize the importance of the Medicare prescription drug debate on the women of America. This is one of the most important debates; and unfortunately, as we rallied today with many of the senior citizens from all over the country, many of them were women. We were not able to say to them that this House had come to a reasonable conclusion and a reasonable proposal that responds to their needs.

The Republican prescription drug plan ignores the needs of our sisters, mothers and grandmothers; and we oppose the passage of such legislation. It ignores the reality that women often outlive their male counterparts, making Medicare beneficiaries disproportionately female. It ignores the points that if these females outlive their spouses, in many instances their income is lower. Many might say does that not give them a double benefit? No it does not. In many instances they may be living on Social Security. That is not enough. They may also be living on a small pension; sometimes one is diminished because of the other. Social Security is lowered because you may have a small pension. Many of them are elderly, and many of them are sick. Some of them face catastrophic illnesses.

In the course of trying to live their life, provide housing, food, they have to make choices. I have seen constituents, particularly in the elderly population, who have had to choose prescription drugs over food and nutrition, who have had to choose prescription drugs over a place to live or the right kind of place to live.

It is very important tomorrow when we debate this issue, if we do, that we concentrate on this enormous deficit as relates to the Republican plan, the doughnut, the hole, if you will, that our dear friend, the gentleman from New Jersey (Mr. PALLONE), has so eloquently articulated, the very large gap between the monies you receive and the amount of monies you will ultimately get at a point when you max out, if you will. $2,000 maybe, and then for a long period of time our senior citizens, those who will be under Medicare, will get no money whatsoever until they reach a certain amount.

Mr. Speaker, this is intolerable. It makes it very difficult for someone on a fixed budget. This makes any decision regarding the future of Medicare critically important to millions of women, and that is because they live in many instances a longer period of time. And many women spend time out of the workforce caring for their children and sometimes for their own parents. Let me add another component. Many women sometimes go into a second generation of raising their grandchildren, and so they have the expenses of their grandchildren; but yet they have the needs of their own health needs. While in the workforce, they often earn less than their male counterparts, and for these reasons women earn less then men over their lifetime and their Social Security monthly benefits are smaller.

As a result, an older woman is more likely to face serious financial pressures, and she needs Medicare to be meaningful. She needs us to close the doughnut. We need a guaranteed prescription drug benefit that provides an even, unending source of guaranteed prescription drug benefit to provide the support that these women need. This is not done by the Republican plan. In fact, what the Republican plan does is it unravels the safety net that has been provided for older women.

The proposal replaces a real safety net with a false sense of security by promising a prescription drug benefit, but allowing women to slip through the doughnut hole, the coverage gap. Imagine a beneficiary's surprise when she discovers that Medicare will not help her cover her prescription drug costs after $2,000. She must wait until she qualifies for catastrophic coverage with a drug cost of over $4,900.

Mr. Speaker, we must work closely with colleagues to craft a bill that answers the question of a guaranteed prescription drug benefit. As I close, this issue is crucial to the American psyche, to the American needs of our elderly citizens.

Finally, I want to add just a moment about affirmative action, the decision that was rendered just a couple of days ago by the Supreme Court. Let me congratulate the interpretation which we felt would have always been the right interpretation, that is, that race can be a factor in equalizing the playing field and that the positions held by the University of Michigan were not quotas.

Mr. Speaker, let me say we need to do a better job in serving the American people with a better prescription drug plan that will deal and address the needs of women of America; and thank goodness for the Supreme Court decision on affirmative action.

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MEDICARE MODERNIZATION LEGISLATION

The SPEAKER pro tempore (Mr. GARRETT). Under a previous order of the House, the gentlewoman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

Ms. KAPTUR. Mr. Speaker, here it is in Washington, nearly 10 o'clock at night and the Republican leadership of this institution does not even have a prescription drug bill ready for us to read as homework tonight. They tell us that we are going to debate this tomorrow, maybe 2 hours at the most, one of the most important changes in our country's history in terms of health care for our seniors. They tell us maybe after midnight tonight we might be able to go up to the Rules Committee to offer our amendments and to have them considered. They will deny most of those amendments, but the interesting thing about going to the Rules Committee after midnight, no press is there. Nobody will know, in one of the most significant pieces of legislation that will be considered in this 21st century. So the American people will not know. The press will not know.

I am here tonight to say I intend to offer an amendment before the Rules Committee that is likely to be rejected, but it is a very important amendment. This amendment says that whatever prescription drug plan is considered here tomorrow, under their very restrictive rules, should do exactly what we do in the Department of Veterans Affairs and exactly what we do at the Department of Defense and that is have negotiated pricing for the drugs that our seniors will buy. Why? You get the best price. Everybody knows when you buy in quantity, you get a cheaper price. It is a very simple concept. But what has the Republican majority in this House, the radical right, done? They have actually put a provision in the bill and here it is. This is the bill that was before the committee and we know this provision will be retained in whatever the Rules Committee considers tonight, but it basically says that it prohibits our government, our Secretary of Health and Human Services from negotiating with the biggest drug companies in the world to get the best price for prescription drugs for our seniors. So what they are going to do, imagine they have got a provision that prohibits what we do at the Department of Veterans Affairs already and it prohibits what we do at the Department of Defense already in our financial purchasing system which gets our people the best prices. That is in the base bill. My amendment would get rid of that and it would say, hey, if you are going to do it and we have success across our government, just like Canada has success in their country by negotiating with the most powerful pharmaceutical companies in the world, why should we treat seniors any differently? Why should we make them pay higher prices? Indeed, in the Republican bill they make seniors pay any cost of drugs over $2,000 a year up to a level of perhaps $3,500 and it might be more because they are drafting the bill somewhere here in the Capitol. I do not know where they are. I went up to the Rules Committee to find the bill and the doors were all locked to the chairman's office.

But in any case here is what is currently being paid, for example, in the United States. Let us just take one of these drugs here, Norvasc, which is for high blood pressure. Normally it sells in one of our pharmacies for about $182.99, the Canadian price is $152.82, and the price at the Department of Veterans Affairs is $102. It is a definite savings. That is true with a whole series of pharmaceutical products that could be available to our seniors. So what the Republicans are basically saying in their bill to our seniors is, you have to pay the higher price because we won't permit you to negotiate price, we won't negotiate it for you, because our bill fundamentally denies it. This provision was written by the pharmaceutical companies themselves. Gee, does that surprise anybody?

I am only one Member of Congress representing 660,000 beautiful people in the northern part of Ohio. I am only one. Do you know there are six lobbyists for the pharmaceutical companies in this town for every one of me that there is? So basically many times I go home at night and I say to myself, folks back home, I am all you got and I am sticking with you. And I say to the pharmaceutical companies, I don't take your money, I don't want your money, but I'll show the public where your money goes. Is it any wonder why they put the provision in the base bill that went through the Committee on Energy and Commerce like lightning the other day?

Let us take a look at PhRMA. This group is so powerful that just in the last election cycle, just in one year, 2002, they contributed over $3 million. Ninety-five percent of it went to, guess, which party? The Republican Party. I happen to be a Democrat. Too bad for the Democrats. They only get 5 percent of the $3,100,000 that was donated just in the fiscal year 2002. Why do you think they gave all that money to the leadership of this institution? Take a look at Pfizer. They gave 80 percent of the $1.8 million they just contributed in 2002 to one party, the Republican Party. You can go down the list. Almost all the money goes to one party. So is it any surprise to us why the bill that we cannot find here in the Capitol and we will not even be allowed to talk about until after midnight and we are all staying up late to do that for our constituents, do you really wonder whether this government is on the level?

I urge my colleagues tomorrow to vote ''no'' on this bill and to vote ''no'' on these pharmaceutical companies until we can get negotiated pricing in this bill.

TITLE VIII—SECTION 1809(C)(1)(D)

Noninterference—In carrying out its duties with respect to the provision of qualified prescription drug coverage to beneficiaries under this title. The Administrator may not:

(i) require a particular formulary or institute a price structure for the reimbursement of covered outpatient drugs;

(ii) interfere in any way with negotiations between PDP sponsors and Medicare Advantage organizations and drug manufacturers, wholesalers, or other suppliers of covered outpatients drugs; and

(iii) other wise interfere with the competitive nature of providing such coverage through such sponsors and organizations.

U.S., CANADIAN, NEGOTIATED VA/DOD PRESCRIPTION DRUG PRICES

Drug name/prescribed for	U.S. retail price	Canadian retail price	FSS negotiated price (VA & DoD)
Glucophage/Diabetes Millitus	$69.99	$30.16	$60.95
K-Dur 20/Low potassium levels	55.99	29.01	25.58
Norvasc/High blood pressure	182.99	152.82	102.11
Prilosec/Heartburn	134.99	67.71	63.32
Prozac/Depression	302.97	140.69	186.98
Synthroid/Hypothyroidism	39.09	17.82	29.73

Comparison is drawn between drugs of equal dosage and quantity.

Sources: Data Compiled from Veterans' Affairs Commission and Alliance for Retired Americans.

2002 PHARMACEUTICAL CONTRIBUTIONS, BY PARTY

Rank	Organization	Amount	Democrats (percent)	Republicans (percent)
1	Pharmaceutical Research & Manufacturers of America	$3,180,552	5	95
2	Pfizer Inc	1,804,522	20	80
3	Bristol-Myers Squibb	1,590,813	16	83
4	Eli Lilly & Co	1,581,531	25	75