

ones I have described in these letters, are getting hit twice.

First, Medicare doesn't cover their prescriptions. When the program began in 1965, it didn't cover the cost of prescriptions. So there is no coverage either under Part A or Part B of Medicare for most of the Nation's seniors.

Second, the seniors end up subsidizing the big business. Big buyers can get discounts.

So you have big buyers, health plans, and a variety of big purchasers using their marketplace clout in order to get a good price, and the senior citizen in Silverton or Pendleton, the Presiding Officer's hometown, who walks in and buys their prescription off the street ends up subsidizing those big buyers. That is not right.

Senator SNOWE and I are going to continue to try as a result of our conversation with colleagues to catalyze a bipartisan effort to address this issue.

I think the question of adding prescription drugs to Medicare would be a real legacy for this session of the Senate.

I think about all of the accomplishments of Senator MOYNIHAN in this health care field over the years, what he has done in terms of graduate medical education, and what he has done in research is extraordinary. I would like to see as part of the great legacy that he leaves for his career in the Senate action on this bipartisan issue before he retires at the conclusion of this session of Congress.

Mr. President, I will be back on the floor—I know Senator SNOWE intends to as well—talking about this issue. We hope seniors send us a copy of their prescription drug bills. We are going to address this issue in a bipartisan way. I will be back on the floor soon to talk about this issue and bring other real, live, concrete cases to the Senate in hopes, as the Presiding Officer of the Senate and I have done at home in Oregon, we can work on this in a bipartisan kind of way.

I yield the floor.

The PRESIDING OFFICER. The Senator from New York.

Mr. MOYNIHAN. Mr. President, I rise once more to thank our dear colleague, the Senator from Oregon, for his remarks and his typically self-effacing mode. He said we may not have the last word. Indeed, we may not. But we have the first word. We have to do this together; that is, both sides of the aisle. We can. He and the Senator from Maine have the votes. But we need a vehicle.

His most important point is that medication is now making that great move from treatment of disease to prevention. That is always the great advance in health for everyone. The single most important health measures that we have done in the last century have been to clean up our water supplies so that we don't get ill. These drugs do the same.

He is right. I am with him.

I yield the floor, sir.

The PRESIDING OFFICER. The Senator from Delaware.

#### UNANIMOUS-CONSENT AGREEMENT—H.R. 434

Mr. ROTH. Mr. President, I ask unanimous consent that the Senate turn to the consideration of H.R. 434 at 10:30 a.m. on Wednesday, notwithstanding rule XXII, and the yeas and nays be vitiated on the motion to proceed.

The PRESIDING OFFICER. Is there objection?

Mr. MOYNIHAN. There is no objection.

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

Mr. ROTH. In light of this agreement, there will be no further votes this evening.

#### MORNING BUSINESS

Mr. ROTH. Mr. President, I ask unanimous consent that there now be a period for the transaction of routine morning business with Senators permitted to speak for up to 10 minutes each.

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

The Senator from New York.

#### IN HONOR OF SENATOR JOHN CHAFEE

Mr. MOYNIHAN. Mr. President, as have so many of our colleagues today, I rise to speak in memory of and in praise of John Chafee. He was my dearest friend for nigh onto a quarter century.

We came to the Senate together in 1977. As it happens, we were both appointed to the same committees. As we all know, the life of a Senator very much depends on the committees he or she is appointed to and the amount of time that they remain on those committees.

We were appointed to the Committee on Finance with its enormous range of jurisdiction, and to the Committee on Environment and Public Works. Only recently at that point had the "environment" come up and made its way onto the title of what had previously been a Public Works Committee. We worked together on both committees from the very first. These are exceptional committees. Possibly because of the great common interests that are dealt with, they have been exceptionally bipartisan committees.

I point out at this point we have three measures before the Senate: The trade legislation which we will go to tomorrow morning, the tax extender legislation which we must get to, and the Medicare and Medicaid amendments to the Balanced Budget Act of 1997. All three of these measures come to the floor with practically unanimous agreement. Two cases were unanimous; on another, just a voice vote with two dissents.

John Chafee, ranking Republican, as Senator ROTH, the chairman, would agree, was part of this consensus development from the first. He was instinctively a man of this body, and the national interests always came first. I can recall an occasion on the Committee on Environment and Public Works when we took a vote and afterwards John said: Hold it, hold it, did we just have a vote along party lines? We haven't had one of those in 15 years on this committee.

It happened we had one, and that moment passed.

He was deeply involved in environmental matters—the world environment as well as our own. I tended to emphasize public works, and we had a remarkably reinforcing and effective time, or so we like to think. Everyone has commented on his work.

On the Finance Committee—which not everyone understands is, in fact, also the health committee of the Senate—we deal with Medicare and Medicaid. John did a great many things. The one that was so typical and wonderful was to transmute gradually—over a quarter century—the Medicaid program from a program of health insurance for persons on welfare under title IV(a) of the Social Security Act such that we confined the population who could benefit to those persons who were dependent on welfare and added another incentive to dependency. He slowly moved this program to a health insurance program for low-income Americans. It was brilliantly done, not least of all because he never said he was instituting it; it just happened at his insistent and consistent behest.

The last great matter we addressed together was the effort to postpone, so as not to reject, the Comprehensive Test Ban Treaty. He was deeply involved with that. It is perhaps not easily accessible to others now that he was of a generation—I suppose I was of that generation—who can very arguably be said to owe their lives to the atom bomb. He was with marines already in the Solomon Islands. I was in the Navy; I would soon be on a landing craft. We were all headed for Honshu. The war would go on but then stopped because of that terrible, difficult, necessary decision President Truman made.

It was the most natural thing in the world for someone such as John Chafee to spend the rest of his life, in effect, trying to ensure that such a terrible act never was repeated. He was deeply attached to maintaining the essentials of the antiballistic missile program and believed that a rejection of the test ban treaty would then lead to our insisting on that. He did not prevail, but he was witnessed, as he was all of his life, as a man of valor, a man of courage, and such a decent man.

He was chairman of the Republican Conference. Around 1990, I believe, he was challenged, and openly—legitimately, in politics of our type—as too