Mr. SHADEGG. But it is fair to ask, is one more subsidy going to solve the problem.

Mr. GUTKNECHT. Right. I think we want to come back to this. We have known for a long time, and certainly the FDA has known for a long time, that there are differentials, so what consumers have done to try and save some money, and sometimes we are talking about thousands of dollars, they have gone to other countries.

So what has this administration done about it? Well, they have done two things, and both of them, in my opinion, have made a bad situation worse. First, they have allowed some of the large pharmaceutical companies, Glaxo and Wellcome, used to be two very large pharmaceutical companies, today they are one. They have allowed these mergers to go on basically unabated.

Mr. COBURN. If the gentleman will yield, they are just about to become GlaxoWellcome SmithKline Beecham.

Mr. GUTKNECHT. We will have taken four huge pharmaceutical companies, and now we will have one. The net result is they will have greater control over markets and products, and we will see even higher prices. They have made a bad situation worse.

Mr. Speaker, let me just talk about these letters. This is a threatening letter. They have sent literally thousands, I have heard estimates as high as 300,000 of these letters have gone to seniors who are threatening them through their own FDA because they tried to save a few bucks by going to Canada or Mexico or Europe to buy prescription drugs.

Mr. COBURN. Mr. Speaker, we are just about out of time and I want to make just kind of a summary statement. The best way to allocate any resource in this country, any resource, is competition. I see the gentleman from New York (Mr. CROWLEY), very influential in our ability to try to reimport wholesale prescription drugs into this country. He understands that. The idea is to allocate resources with competition. That is one of the things we need to do.

The last thing we need is another mandatory, government-run health care program that is already proving to be inefficient, has been tried once and was so expensive they dropped it; and number three, will discourage research, will discourage new drugs, and will cost-shift, and does no benefit for anybody except a senior. Everybody else is going to have a lower benefit, less access to health care through that plan.

I yield the balance of the time to the gentleman from Arizona.

Mr. SHADEGG. Mr. Speaker, I simply want to thank my colleagues for participating in this debate. The letters that my colleague from Minnesota has pointed out have gone to people in my home State of Arizona for just having the temerity to cross the border into Mexico and buy drugs at a fraction of the cost here in the United States.

I think we need to force competition on the drug companies, I think we need to put them in a position where we force them to bring down the prices. I think we need to force them to quit forcing us to subsidize drugs in other countries. I certainly do not believe, and I compliment the gentleman for the facts that he has brought to this debate, I do not believe we should make up facts, I do not believe we should use false information, but I do believe that we should make it clear that a government subsidy, a program the likes of which is being proposed by the Clinton-Gore administration which says you get one chance to opt in or opt out and that is binding on you for a lifetime, and you hand over, by opting in, the right to choose your drugs to a bureaucrat, not a doctor; take it away from yourself, take it away from your family, take it away from your physician and give it to a bureaucrat. I cannot believe that is the best public policy Congress can come up with. I think there are better plans out there. I think the plan that we voted on, while not perfect, is a step in the right direction.

Mr. Speaker, perhaps we should conclude by pointing out that this is an issue that is important and we will not rest until we address this problem for the American people.

Mr. COBURN. Mr. Speaker, I thank my colleagues for participating in this special order with me.

DEMOCRATS' PRESCRIPTION DRUG PLAN BEST FOR AMERICA

The SPEAKER pro tempore (Mr. GILCHREST). Under the Speaker's announced policy of January 6, 1999, the gentleman from New York (Mr. CROWLEY) is recognized for 60 minutes as the designee of the minority leader.

Mr. CROWLEY. Mr. Speaker, I could not think it more apt that we Democrats begin our special order on prescription drugs just after hearing the Republicans finish their remarks on the very same subject of prescription drugs.

I was most interested to listen to the remarks of the Republican House majority leader, the gentleman from Texas (Mr. ARMEY), who ridiculed Democrats like AL GORE and JOE LIEBERMAN for being out in so many words to deprive seniors of prescription drug coverage. This is laughable, and I hope everyone at home will stay tuned and listen. I can think of no better message than letting Americans compare the thoughts of the Republicans on prescription drug coverage for seniors, those of allowing the private sector and the HMOs to continue to drop seniors and let prices for drugs skyrocket, versus the opinions of the Democrats like myself who are working to strengthen Medicare with a drug benefit and work to immediately lower the cost of prescription drugs.

The GOP believes lowering the cost of drugs is wrong and the destruction of Medicare is good. I believe lowering drug prices is the right thing to do for Americans. I hope Americans enjoy this debate and the debates by Mr. Bush and Mr. Cheney and Mr. GORE and Mr. LIEBERMAN over the next 7 weeks. We Democrats gather here to discuss an important issue with regard to lowering prescription drug costs and providing greater access to medications to every American who needs those medications.

As Democrats, we have continually championed the addition of a prescription drug benefit under Medicare, but the Republican majority opposed that plan, believing Medicare has been a failure. We Democrats disagree and believe that Medicare has been an overwhelming success story in the United States.

As Democrats, we have continually come out in support of the Prescription Drug Fairness for Seniors Act sponsored by the gentleman from Maine (Mr. ALLEN). This would pass along to Seniors the same discounts given by the pharmaceutical industry that they give to the Federal Government and HMOs. Under his bill, they would also have to give those same benefits to pharmacies. In turn, they could pass these savings on to their customers. Again, the Republican leadership opposed that. The Republicans apparently believe that seniors are not paying enough for their prescription drugs. Well, my constituents, quite frankly, tell me otherwise.

Now, we Democrats are working to change the Federal law which prohibits the reimportation of safe FDA-approved drugs from countries like Canada back into the United States. We think it is unfair that seniors pay twice as much, on average, for their medications than their counterparts in places like Canada and Mexico. The Republican leadership thinks it is okay to send seniors to jail for trying to obtain more affordable drugs from other countries to improve the quality of their lives.

This chart demonstrates the real price gouging going on in the drug industry here in America. Here I have three of the most popular drugs used by seniors in America.

□ 1600

We see that seniors right here in America, and in my case in Queens County and Bronx County in New York City, pay hundreds of dollars more a year than seniors in Canada for the same FDA approved drugs. Seniors pay $359.93 more annually than their friends in Canada for Zoloft; $793.20 more than their friends in Canada for Prilosec; and $369.42 than their friends in Canada for Zocor.

In fact, I have received many letters from my constituents. I had a letter from a constituent from Jackson Heights who pays $409 for a 3-month supply of Prilosec for his wife. The same drug, the same manufacturer, the same everything costs $184 for the exact same drug in Canada. And why is

this? Because the American pharmaceutical industry is gouging Americans. This is wrong, and we are here to stop it.

Congress has a great opportunity to stop it now. While the GOP has prevented any real action on a drug benefit under Medicare, or the opportunity to pass along discounts to seniors on drugs, we are now working to allow Americans to reimport prescription drugs once they have been exported out of America. Essentially drugs that are researched, patented and made in America oftentimes cost twice as much here in the States than they do when they travel abroad to places like Canada and Mexico. It is like a reverse tariff. Once that drug crosses the international lines, the price for it is drastically reduced.

The drug manufacturers say that Americans' standard of living, our standard of living, is one of the chief reasons for this increase and that America should subsidize international sales of their drugs. I think putting the price burden on American seniors is wrong, and we Democrats are here to say enough is enough to the drug industry.

Right now, even though drug prices are half as much in Canada and Mexico, the only way Americans can take advantage of this is if they slip over the border in the dark of night and sneak some medications over for their own personal use. We should not be making criminals out of our seniors. Therefore, during House debate on the agricultural appropriations act, I offered an amendment to allow for the reimportation of prescription drugs into the U.S. I was pleased that this amendment passed the House with overwhelming support.

Since then, the gentleman from Arkansas (Mr. BERRY), a trained pharmacist, the gentleman from Vermont (Mr. SANDERS) as well as Republicans like to JO ANN EMERSON, TOM COBURN, a medical doctor; and GIL GUTKNECHT) and I have been working together to allow not only individuals to travel across the border to get less expensive FDA-approved drugs of the same quality but also to allow pharmacists and wholesalers to do so as well. This way they can pass on these savings to their customers, ease the financial burden on seniors who must take one or more of these prescriptions on a regular basis, lower drug prices by anywhere from 30 to 50 percent overnight, all without costing the taxpayers a single dime. It is safe. Any change would mandate strict safety standards equal to those we enjoy here in the United States.

Reimportation enjoys the support of groups as diverse as the National Community Pharmacists, AIDS Action, the American Medical Association, former FDA Commissioner David Kessler, and Secretary of Health and Human Services Donna Shalala. I urge my colleagues to ignore the misleading ad campaigns of fear and distortion lead by the Pharmaceutical Research Manufacturers of America, known as PhRMA. By allowing our Nation's citizens, trusted local pharmacists, and certified wholesalers to reimport FDA approved drugs, we can drastically lower the cost of drugs for all Americans who need prescription drug coverage.

Mr. Speaker, at this time, I would yield as much time as he would consume to the minority leader, the gentleman from Missouri (Mr. GEPHARDT).

Mr. GEPHARDT. I thank the gentleman for yielding to me, and I thank the gentleman from Vermont for setting up this special order. I am happy to come to the floor today to make a few comments about this reimportation issue and other issues that I think are related to it.

Let me first cite the fact that we have not passed in this Congress, and I believe we should have passed, an agenda that really puts families first; an agenda that is supported by the majority of our people; an agenda that includes a patients' bill of rights, which is desperately needed by many families; an agenda that includes reducing class size, as we spoke today on the education bills and hiring for teachers; an agenda that includes a real Medicare prescription medicine benefit, a benefit that will work, a benefit that will be there when people need it, that will make a real difference in the lives of millions of Americans. That agenda, in my view, has been blocked in every way in the name of special interests.

The patients' bill of rights, as far as I can tell, has been blocked to protect HMOs and insurance companies. The middle-class tax cuts have been blocked in the name of huge tax cuts to the wealthy. Debt reduction has been blocked in the same name, huge tax cuts for the wealthy. Minimum wage has been blocked as a favor to some businesses that do not want it. Education incentives to modernize our schools and hire new teachers has been blocked for other ideas for private schools. The Medicare drug benefit has been blocked at the behest of the pharmaceutical industry. We need an affordable, meaningful prescription benefit in the reliable world of Medicare, a benefit that guarantees our seniors will have benefits when they need them, and real relief on reducing the cost of drugs.

The special interests have frankly stopped a reliable Medicare prescription medicine benefit. We have squandered every opportunity we have had in this Congress to get this done. But right now we have still in this Congress the ability to do something on price for all of our citizens, not just our senior citizens. I want to remind all of us that the reimportation issue has passed both Houses of the Congress. On the Medicare prescription medicine benefit, we did pass something here. It was not the right bill, but at least we passed something. Nothing has even been brought up or passed in the Senate. But on reimportation we have passed something in both Houses.

What we passed in both Houses would lower the cost of drugs in the United States by between 30 and 50 percent. This is a dramatic reduction. It could affect every American family right now. It would allow the pharmaceutical industry to buy FDA-approved drugs abroad at reduced rates and consumers could realize the savings, at least with the Senate-passed version of this bill. And, remember, we probably could have passed that better version if the rules here had allowed us to do it, but it did not.

But we have in the Senate, in conference, the right provision. It would mean that millions of seniors could buy drugs at a fraction of the current cost. It is sensible, it has bipartisan support in both bodies, it sailed through the Congress, and the American people are for it. It would help seniors and other citizens now, this year. Even the month after we would pass it, people could begin buying drugs at dramatically lower prices.

Now, the reality is the leadership has not allowed this measure to go to conference. It is bottled up in the Ag conference committee. It is languishing. It should not be languishing. Now, what are we doing? Why are we waiting until adjournment comes and we cannot take this up? Why has the measure not gone to conference? Why are we not doing something about this?

It seems to me, and I address this to the gentleman from Vermont, that we have in these remaining weeks the ability to get this up in conference, to decide this in favor of the Senate provision, which gives people the greatest reduction in price and allows companies to actually reimport these products into the United States and get a broader price reduction for more Americans. I would simply ask the gentleman, and the gentleman from New York, who has sponsored the only thing that he could in the House, which was very positive but not as good as he wanted it to be, what we can do in the remaining days to get this done for the American people?

Mr. SANDERS. Well, I just want to thank the minority leader for his very eloquent statement and for his very strong support of legislation that, if passed today, would lower the cost of prescription drugs by between 30 and 50 percent for every man, woman and child in this country. And the fact that the minority leader has now come strongly on board, this legislation makes me more confident that we are going to pass it.

But here is the story, and let us be very clear about it. The pharmaceutical industry is the most powerful industry in this country. Last year it made $27 billion in profits, $27 billion in profits while charging the American people, by far, the highest cost for prescription drugs than any other country in the world.

I live in the State of Vermont. We border on Canada. Last year, I made

two trips over the border with Vermonters to purchase prescription drugs in Canada, and I want to relay one aspect of our trip. We had with us a number of women who are struggling against breast cancer, struggling for their lives, and they take a widely prescribed prescription drug called Tamoxiphen. What we found when we went over the border is that the cost of Tamoxiphen, which saves the lives of women who are struggling with breast cancer, was one-tenth the price than in the United States of America.

Imagine that, women struggling for their lives are paying ten times more for the same exact product in this country than a few minutes away over the border. Now, as the minority leader has indicated, we have strong bipartisan support for this legislation. In my view, if that bill that was passed in the Senate were brought to the House and Senate today, it would pass overwhelmingly. It would not be close. The problem that we are having now is that the pharmaceutical industry is exerting enormous pressure on the Republican leadership. And those of us in Congress and all over America are watching day by day to see if the Republican leadership has the courage to bring this bill on to the floor, which has widespread bipartisan support.

Many Democrats and Republicans, like the gentlewoman from Missouri (Mrs. EMERSON) and the gentleman from Oklahoma (Mr. COBURN) and others, are fighting the right fight. The American people are sick and tired of being played the fool and paying by far higher prices than anyone else. As the gentleman from New York (Mr. CROWLEY) indicated a moment ago, the pharmaceutical industry is spending millions and millions of dollars on radio ads, on television ads, on newspaper ads which are dishonest and misleading.

So I would say to the minority leader that the $64 million question is: Does the Republican leadership have the guts to stand up to the pharmaceutical industry and allow us to pass bipartisan legislation that would overwhelmingly sail through both bodies and lower the cost of prescription drugs by 30 to 50 percent?

And I want to thank the gentleman very much for his active role now in seeing that the legislation is passed.

Mr. GEPHARDT. I thank the gentleman for his eloquent statement, and I hope in a bipartisan way we can do something that will be very, very positive and important for the American people, who are struggling to keep their health and need to have these products at a reasonable price and are happy to pay a reasonable price to be able to get these substances to keep their health.

I thank the gentleman for his hard work and the gentleman from New York and the gentlewoman from Connecticut.

Mr. CROWLEY. I thank the minority leader for joining us.

Mr. Speaker, I now would like to yield to the gentleman from Vermont (Mr. SANDERS).

Mr. SANDERS. Mr. Speaker, when we look at the health care crisis in America, there are many dimensions to it, but clearly one of the dimensions is that in my State of Vermont and all over this country physicians are writing out prescriptions to their patients, but they are saying, what is the sense of me writing out a prescription if my patient cannot afford to get it filled?

So what we are finding is that senior citizens and many, many other people are simply unable to take the prescription drugs that they need, or they are dividing their dosages in half, or they are taking their prescription drugs once every other day.

□ 1615

We hear from pharmacists that our legislation is supported by the Community Pharmacists of America. They stand behind their desks, behind their counters and their hearts are broken when senior citizens cannot afford the products that their doctors are prescribing, when people are dying and when people are suffering and we have the cure right in front of us.

So some of us in this Congress well over a year ago, the gentleman from Arkansas (Mr. BERRY) who is right here, the gentlewoman from Missouri (Mrs. EMERSON), and I introduced legislation which was a very, very simple piece legislation.

What we said is that we are living in an increasingly globalized economy. I must tell my colleagues, I have many problems with the globalized economy. But we are living in that economy. And if we go to a shoe store, the shoe company is able to purchase shoes anyplace in the world. If we go to a pant store, a haberdashery, they purchase their product anywhere in the world.

So we are asking a very simple question. If a prescription drug is FDA safety approved, why cannot a prescription drug distributor or a pharmacist purchase that product anyplace in the world at a significantly lower price than the pharmaceutical industry is selling it to him in the United States right now? Why cannot competition exist, free market exist, global economy exist when we are talking about prescription drugs which are FDA safety approved?

Now, if that legislation were passed today, what we would have is prescription drug distributors testing the market in Canada, they would buy tamoxifen for one-tenth the price they would buy other drugs for 50 percent the price, they would be able to resell it to American consumers for significantly lower prices than we are currently paying.

Now, what is wrong with that legislation?

Nothing is wrong with that legislation. What that legislation would do is lower prescription drug costs in this country from between 30 to 50 percent at almost zero expense to the American taxpayer. It would allow American business people who import drugs to take advantage of the best prices that are available all over the world.

Now, our friends in the pharmaceutical industry who last year made $27 billion in profit, our friends in the pharmaceutical industry who are contributing millions and millions of dollars to both political parties, our friends in the pharmaceutical industry who, if my colleagues can believe it, have 300 paid lobbyists here in Washington, D.C., our friends in the pharmaceutical industry who spent $65 million on advertising last year trying to defeat any legislation that would lower the cost of prescription drugs, well, let me tell my colleagues they are fighting back vigorously. They are putting on dishonest, misleading ads on radio, TV, and in the newspapers and they are saying Members of Congress want to import unsafe, adulterated drugs.

What a horrible, terrible thing to say about Members of Congress who are fighting so that their constituents can afford the prescription drugs that they need. What a disgraceful thing to say about Members of Congress that we would want to see an unhealthy prescription drug come into this country. It is simply untrue.

The legislation that passed in the Senate is very clear. There are strong safety conditions attached to it. The FDA has said that, if they have $23 million to increase their capabilities, they will guarantee that the products coming into this country are safe.

This is not rocket science. It is easily done. The problem is not unsafe drugs that will come in if our legislation is passed. The problem is that today Americans are dying, Americans are suffering because they cannot afford the outrageously high cost of prescription drugs. That is the problem.

And the pharmaceutical industry, which is every day showing the American people how outrageously greedy they are, apparently $27 billion in profits last year is not enough. I guess they need more than that. Apparently, charging Americans 10 times more than Canadians for certain drugs is not high enough prices, they need more than that.

Well, all over this country the American people are saying, enough is enough. Let us lower the cost of prescription drugs. Let us not continue the rip-off of the American people so that our people are paying so much more than the people in Europe, the people in Mexico, the people in Canada.

That is what this legislation is about. Do not believe the dishonest ads that the pharmaceutical industry is publishing.

As I mentioned a moment ago, over a year ago, legislation introduced by the gentleman from Arkansas (Mr. BERRY), the gentlewoman from Missouri (Mrs. EMERSON), and myself set the ground work, started the process for this. And we are making real progress. If that

legislation were put on the floor today, we would have overwhelming bipartisan support.

I challenge the Republican leadership to show the American people that they have the guts to stand up to the pharmaceutical industry, that they will allow the House and the Senate to vote on this legislation.

If they allow us to do it, it will win, we will lower prescription drug prices in this country, and we will have done something that the American people will be very proud of us for doing.

Mr. CROWLEY. Mr. Speaker, I thank the gentleman from Vermont (Mr. SANDERS) for his comments. He and I share border States with Canada. Something I have been saying over and over again, it is time that Americans do not have to go to Canada and Mexico to be treated like Americans when it comes to the cost of prescription drugs. And it is something we do deal with even in the Bronx. There has been a bus that goes from the Bronx to Canada for solely the same point that the gentleman does and he has taken constituents on.

Mr. SANDERS. Mr. Speaker, if the gentleman will continue to yield, it is an outrage, as my friend indicates, that the American people have to flee their own country to purchase prescription drugs manufactured in the United States.

Mr. CROWLEY. Mr. Speaker, I want to thank my friend from Vermont for his words and his leadership on this issue, as well.

Mr. Speaker, I yield to the gentlewoman from Connecticut (Ms. DELAURO).

Ms. DELAURO. Mr. Speaker, I thank the gentleman from New York for yielding to me. I want to congratulate him for pulling several of us together this afternoon to talk about what is probably one of the most critical issues that the American public is facing. So to the gentleman from New York (Mr. CROWLEY), the gentleman from Vermont (Mr. SANDERS), the gentleman from Arkansas (Mr. BERRY), the gentlewoman from Wisconsin (Ms. BALDWIN) and the gentlewoman from Florida (Mrs. THURMAN), who are here on the floor this afternoon, we will continue to be on the floor of this House for as long as it takes to be able to bring some relief to the crushing cost of prescription drugs that people are facing in this country today.

Let me just make one comment, which is that we need to have a prescription drug benefit that is voluntary, that is universal and universal in the sense that it covers all seniors and that, in fact, it ought to be done under the Medicare program that will reach all seniors and provide the opportunity to, in the best way, allow for doctors and their patients, our seniors, to be able to prescribe the drugs that are needed for people to survive and for seniors to be able to get them and not be at the mercy of an insurance company or an HMO to be able to get that prescription drug.

That being said, it is unlikely, sadly enough, that in this House and in this Congress we will be unable to pass a prescription drug benefit through Medicare before we leave this body in the next few weeks.

So what we need to do in these final weeks of the Congress is we have an opportunity to pass this prescription drug reimportation legislation, and we need not to have this legislation slip through our fingers.

It has been stated quite eloquently that we have FDA regulations today that only the manufacturer of a drug can import into the United States. Therefore, the pharmaceutical companies have unfairly used these regulations to control prescription drug distribution in the United States at the expense of seniors.

We have in the United States Senate the agricultural appropriations bill which allows the wholesalers and the pharmacists to reimport or import FDA approved prescription drugs. The bill that we passed in the House, I might add, is not as strong as the one that was passed in the Senate because in the Senate language that protects against the import of counterfeit, mislabeled, or adulterated drugs, and we need to protect this language. It is critical. We are here for the good and not the harm of the American people. We must work together to allocate the $23 million to get this effort started on the right foot.

Let me just tell my colleagues, to make this very simple, we all know and our seniors specifically know that in other countries people pay 20, 30, and even 50 percent less than their prescription drugs. The same medication that costs $1 in America costs 64 cents in Canada, 57 cents in France and 51 cents in Italy.

Let me make the point clearly. Consider Zantac, which is made by GlaxcoWellcome in the United Kingdom. GlaxcoWellcome is based in the United Kingdom.

What we are asking is just the same price that they would sell Zantac to Brits, sell that at the same cost to people in the United States. With regard to Zantac, it is marked up by 58 percent when it is sold in the United States, 58 percent.

Why? Our seniors deserve better. They deserve to have the same medication at the same price.

That is what this bill would allow, pharmacists and wholesalers to purchase medication at the same low prices that people pay in other countries, pass that savings on to America's seniors. It is common sense and it makes the world of difference to people who are struggling. And they are making those awful choices between prescription medications that they need to survive and groceries and heating bills and rent and everything else.

My colleagues have said this. I will mention it briefly. There is an awful disinformation campaign on our airwaves, and people should act more responsibly. They have bought millions and millions of dollars of advertising to sell the American public a bill of goods.

I have done this in my district. I have gone literally from center to center, senior center to senior center, with the ad and pointed out the lies in these ads. The public has got to know the truth. The campaign implies that the importation of pharmaceuticals is unsafe, and nothing can be further from the truth.

Let me just say this to my colleagues today that the pharmaceutical industry already imports 80 percent of the ingredients it uses in the prescription medicines that it sells in the United States, and 20 percent of the medicines it sells in the United States are manufactured abroad. No matter where they are made, all of these drugs are tested by the FDA.

Let me say to my colleagues that we need to call on the pharmaceutical industry. And I will just say straight out, I represent the pharmaceutical industry in my district in Connecticut and I have said plainly to them, take the ads off the air. Reasonable people can come to a table and discuss an issue. They do a wonderful job. And if a lot of it is taxpayer research that we pay for, I am a survivor of ovarian cancer, I understand the benefits of biomedical research and pharmaceutical drugs. They do a good job of producing those. But it does us no good if people cannot afford to get the benefit of this taxpayer research and the work that they did.

Let us come together. Let us make it possible for people to afford the prescription drugs.

I will say, since that has not happened, then we have an obligation to pass this reimportation legislation before we leave this institution in the next 2 or 3 weeks.

I thank my colleague for putting this effort together today.

Mr. CROWLEY. Mr. Speaker, I thank the gentlewoman for her moving remarks and for all her work and leadership on this issue and thank her for being here today.

Let me point out, if I may briefly before I turn the microphone over to the gentleman from Arkansas (Mr. BERRY), that the drug industry's scare tactics are ironic. Because, since 1992, pharmaceutical firms' importation of drugs for consumer consumption have increased by 350 percent, totaling $13.8 billion last year, imports from Canada have grown by 400 percent, and those from Mexico by 800 percent according to the National Community Pharmacists Association.

Here is one of those ads my colleague was talking about. This was in one of the trade magazines down here. It says that 11 former FDA commissioners think all Americans deserve to be protected. Well, we found out that well over the majority, some seven former FDA commissioners now find themselves being employed by the pharmaceutical industry.

Do we expect any other answer but this answer?

Ms. DELAURO. Mr. Speaker, if the gentleman will continue to yield, one of those FDA directors, Dr. David Kesler, former director of the FDA, now dean of the Yale Medical School in New Haven, Connecticut, has written a statement that, in fact, that is inaccurate. He has been very clear.

Mr. CROWLEY. Mr. Speaker, that just adds more weight to my point.

Mr. Speaker, I yield to the gentleman from Arkansas (Mr. BERRY) who himself is a pharmacist.

□ 1630

Mr. BERRY. I thank the distinguished gentleman from New York (Mr. CROWLEY) for his leadership in this matter, and the Democratic leadership for providing this hour for us to discuss this important issue. I appreciate my colleagues from around the country being here this evening to talk about this issue. I also want to thank the many Republicans that have provided leadership on this issue: the gentlewoman from Missouri (Mrs. EMERSON), the gentleman from Minnesota (Mr. GUTKNECHT), the gentleman from Oklahoma (Mr. COBURN), and of course the gentleman from Vermont (Mr. SANDERS), who has worked so hard to see that the American people get treated fairly as prescription drug prices are too high and we try to bring them down. They have done a great job in providing leadership for this issue. We want the prescription drug manufacturers in this country to be successful. We want them to continue to be profitable. But there is something wrong when we allow Americans to have to pay 30 to 40, 50, 60 percent more for their medicine than any other country in the world.

The pharmaceutical manufacturers have engaged in what we try to charitably call a misleading campaign. The fact is the ads that they are running and millions and millions of dollars worth of them that they are running every day now all over the country trying to convince the American people that their safety is threatened, their health is threatened if we import these medicines at the same price that other countries buy them, the fact is that calling them ''misleading'' is being very kind. It is just simply a lie. These companies are simply willing to do anything to continue to be able to rob the American people.

As has already been mentioned, former FDA Commissioner David Kessler who served under both Presidents Bush and Clinton has said in a letter, ''I believe the importation of these products could be done without causing a greater health risk to Americans than currently exists.'' The truth is Secretary Shalala has called the Senate amendment promising and does not oppose it. All Americans need to be protected from outrageously high prescription drug prices. There is no need to allow the pharmaceutical companies to continue to rob the American people.

In June, I was in Cuba to visit with the Cubans primarily to talk to them about buying some of our agricultural products. We had a great discussion. They are certainly willing and interested and desirous of buying our agricultural products. As we concluded our discussions, I said to them, ''We've talked about food, about agricultural products. What about pharmaceuticals? Do you not want to buy our pharmaceuticals?'' And they laughed. These are very nice people. They did not want to do anything to offend us, but they laughed. And they said, ''Why would we want to buy your pharmaceuticals? We can buy your pharmaceuticals anywhere in the world. We can buy them in Canada, we can buy them in Panama, we can buy them in Mexico for half what you're paying for them. Why would we want in on a deal like that?''

And then they asked a question that I could not answer and it is unbelievable to me today that we stand here in an empty House at 4:30 in the afternoon and still we have not answered the question, ''Why do you do that to your people?'' they said. I could not answer that question. There is absolutely no reason why the Congress should not follow through this year and enact this provision that will clearly lower the price of prescription medicine to Americans.

I was disappointed to read yesterday that some powerful Republican Members may try to have this provision removed from the agricultural appropriations bill. They will try to disguise an appropriations bill in some way where we will not be able to tell that it has been removed until the bill has passed. Countries in the EU, the European Union, benefit from international price competition for our pharmaceuticals. They have been doing this for years, and they suffer no ill effects from it. This whole idea that the pharmaceutical manufacturers continue to try to promote that it is unsafe is absolutely ridiculous.

Our senior citizens are crossing our borders en masse to buy prescription drugs they need from Canada and Mexico. The solution we support would give all Americans access to safe and effective FDA-approved drugs made in FDA-approved facilities at international prices and give FDA the oversight it needs to know imported drugs are safe through the use of testing and other means.

It is very deceptive and manipulative for the pharmaceutical industry to claim proposals which require documents, labeling and testing put American patients at risk. That is just simply not true.

From 1991 to 1997, the amount of drugs imported for consumption by global drug makers jumped from $6.1 billion to $12.8 billion. All evidence indicates that these imports have continued to climb. For the drugs we support allowing the importation of, the new standards will be more stringent than those that apply to the billions of dollars' worth of foreign drugs that manufacturers are bringing into this country today.

Another point that is important to remember is that the effect of our legislation is not only to facilitate the importation of reasonably priced medicine; but once U.S. manufacturers are no longer shielded from international price competition, the free market will absolutely demand that these prices go down. Interestingly enough, the same people that talk about a free market, a free market situation day after day on the other side of the aisle, are the very people today that do not want a free market situation. They want to protect these drug companies that have contributed millions and millions of dollars to their campaigns.

Dr. Christopher Rhodes, a University of Rhode Island expert in the field of applied pharmaceutical research, recently testified before the Senate Health, Education, Labor, and Pensions Committee on the issue of safety. He testified that by implementing a system which requires documentation and testing, it was his ''considered professional opinion that the process of using reimported prescription medicine in the United States need not place the American public at any increased risk of ineffective or dangerous products.''

Dr. Sidney Wolfe, a health and safety expert at Public Citizen said, ''It is ironic how PhRMA worries about safety when lower prices are involved. The Prescription Drug Parity Act requires safety precautions above and beyond the FDA requirements and consumer protections Americans rely on when purchasing pharmaceuticals made in foreign countries.''

I would ask you today, where is this House? There is a lot of daylight left today and there is nobody here. Why is the House not here on the floor today? Because we need this legislation today. We have got Americans all over this country paying too much for their medicine, many senior citizens; but all of our citizens are paying more than they should have to pay. It is absolutely outrageous that this Congress allows this to go on and the Republican leadership just simply does not do anything about it.

Ms. KAPTUR. Will the gentleman yield on that point?

Mr. BERRY. I will certainly yield to the gentlewoman from Ohio.

Ms. KAPTUR. I would agree with the gentleman that we came here to Washington this week to do the people's work and already we are finished with the day's business, so to speak; and tomorrow I am told there may be one vote, maybe not more than one vote. Meanwhile, the very bill that this issue is in is stalled. We passed it weeks ago, months ago here in the House; and it went over to the Senate. The leadership of this institution could bring that bill up here so we could vote on this whole prescription drug issue and

whether our people can bring these pharmaceuticals in from other countries like Canada if they are safe and of similar quality. Where is the bill? Even the conferees, the people here in the House who are supposed to sit down with the Members of the Senate to go over this provision, have not been appointed, even though the bill was passed here and it has been passed there. We have got plenty of time today. We have got all day tomorrow. We should have done it weeks ago. We wasted yesterday; we wasted the day before yesterday. I just wanted to affirm what the gentleman is saying and as ranking member on the subcommittee that has jurisdiction over the Food and Drug Administration, we are waiting. We are waiting for this Republican leadership to do its work.

Mr. BERRY. The gentlewoman from Ohio, who has provided great leadership in the Committee on Appropriations on this matter, is absolutely right. It is unforgivable for the Republican leadership to let our senior citizens continue to be robbed on a daily basis while we do nothing. We are gone. No one is here. We should be here working on this legislation and passing it.

I come from a small town in Arkansas. We do not lock the doors or take the keys out of our cars. Everybody knows everyone else. If we had someone going around robbing our citizens, and especially our senior citizens in that community, we would put a stop to it and we would put a stop to it right away. We would not wait until tomorrow or the next day. We would do something about it today. These companies are robbing the American people, and they are robbing our senior citizens. You do not have to assault someone to rob them. These people have figured out a way to rob someone without going into their home or assaulting them.

Ms. KAPTUR. If the gentleman will be kind enough to yield to me again, when he said that there might be a deception and maybe this bill might not come to us in a form that we could even vote on, I have really wondered whether our bill will ever get to this floor again which is under regular order, or whether these provisions and others are being worked on behind closed doors here with no public scrutiny and some of these lobby groups coming in and having an influence when we do not have the ability to bring the influence of our constituents to bear on this important question of prescription drugs, the cost of prescription drugs. I would hope that the leadership of this institution does not pull something like that and allows our Members a vote. The gentleman from New York (Mr. CROWLEY), one of our outstanding new Members of this House, the gentleman from Vermont (Mr. SANDERS), who has been a champion on senior issues, certainly in the other body Senator JIM JEFFORDS, who tried to work with the administration on the safety provisions to make sure that we have like product being brought in here, all these fine Members need to be heard. And we need to bring the weight of their influence and intelligence to bear on a free vote on this floor, not have it buried or altered in some committee room here that none of us have access to.

I would hope that the leadership of the institution hears us and gives us an opportunity to bring these prescription drugs to the American people at affordable prices. I will just tell the gentleman last week when I was doing food shopping at my local supermarket, the cashout clerk told me that every week she has people that come by there and they have to separate out their prescription drugs from their food, and they have to put food back on the counter because they cannot afford to buy both. This should not be happening in the United States of America.

Mr. BERRY. I thank the gentlewoman from Ohio again for her leadership and certainly agree with her comments. I would just make one more plea to the leadership of this House. Back in 1995 and 1996, we had lobbyists in the back rooms here writing legislation. That is absolutely unforgivable. We should not allow this to happen. I hope the American people realize that the leadership in this House today is simply ignoring the great need that we have out there to deal with the prescription drug issue and provide lower-priced prescription drugs and provide a good prescription drug benefit plan for our Medicare recipients.

Mr. CROWLEY. Mr. Speaker, I thank the gentleman from Arkansas (Mr. BERRY). I also want to thank the ranking member of the Subcommittee on Agriculture of the Committee on Appropriations, the gentlewoman from Ohio (Ms. KAPTUR), for her comments as well.

Mr. Speaker, I yield to the gentlewoman from Michigan (Ms. KILPATRICK).

Ms. KILPATRICK. Mr. Speaker, I thank the gentleman from New York for yielding.

I first want to say that I support the pharmaceutical industry and all that they have done in America over all of these 200-plus years. We have second to none the strongest companies who represent and who bring forth medicines that have taken care of America for a long time. I commend them for that. We support them. We want them to grow. We want them to hire American citizens. And we want them to treat Americans who need and must have their products to live. At the same time, we want the product to be affordable. There is no reason that pharmaceutical companies must make 20, 30 percent profit on their medicines when the average Fortune 500 companies make 5 to 10 percent and consider that to be a formidable profit.

The pharmaceutical industry is a strong one, and we want it to remain that. But I come from the State of Michigan. My district borders, the Detroit River borders on the country of Canada. Many of my constituents, seniors, take between four to eight medicines a day. After doing the research, those medicines cost anywhere from $20 to $500 per prescription. Many of them live on fixed incomes. They have to literally choose between eating and getting their medicines. They have to choose between paying their rent or getting their medicines. These are seniors who have built America and, yes, who have built pharmaceutical companies.

□ 1645

We must know that much of the research and development that pharmaceutical companies do are at the taxpayers' expense, and that is one of the great things of our country. We want them to do the R&D necessary so that we can live healthier lives as American citizens.

At the same time that we use our tax dollars to assist private companies to bring product to the market, we want to make sure that those people, seniors or not, disabled maybe sometimes, who must have medicines to survive are able, are able, are able to get them and are affordable.

Mr. Speaker, living on the border of Michigan and Canada, many of my constituents can go across the river in a half hour or less drive and pay one third the cost that prescriptions are being charged here in the country. Why is that? These are, many times, American companies. It has already been stated, that 80 percent of the ingredients in those drugs are imported, that is 20 percent of the drugs are manufactured in other countries. So the whole issue of reimportation, it is already happening.

Mr. Speaker, I would hope we would bring the Ag bill to the floor with the provision of reimportation in the bill. It is the proper thing to do. We hope and we have heard some debate that there is not a backroom going on as we speak with six or eight people deciding what that agricultural bill will look like and whether yea or nay that reimportation provision will be in the bill, we have a responsibility, all 435 of us elected by over 600,000 people in our districts to represent, to speak out, prescription drug access, affordable medicines remain one of the top priorities of those that we represent.

Mr. Speaker, I strongly support the reimportation provision in the agriculture bill. I urge the Republican leadership of this House to bring the issue to the floor. Let us debate it. We want to have our pharmaceutical companies remain strong, but we also want to take care of those many Americans who live from day to day based on the medicines that they must have.

Michigan, Canada, our border, Canada, Michigan, our border, do not make my constituents go over the border, U.S. citizens, tax-paying citizens, raising-family citizens to another country

to get those medicines that their doctor has prescribed for them and that they duly need, and we have a responsibility to see that they get it.

Mr. Speaker, let us work to make sure that we can debate this on an open floor. Let us make sure that the Republican leadership brings this to the floor. Prescription drugs are a necessity. We have to see that they become available to those who need them.

Mr. CROWLEY. I thank the gentlewoman from Michigan (Ms. KILPATRICK) from the Committee on Appropriations for her kind remarks.

Mr. Speaker, I yield to the gentleman from Texas (Mr. GREEN).

Mr. GREEN of Texas. Mr. Speaker, I want to thank the gentleman from New York (Mr. CROWLEY) for yielding to me and putting together this special order.

It is frustrating here we are at almost 5 o'clock on Eastern Time, 4 o'clock Central Time, and the House is not working on this legislation. We are spending an hour talking about it. It is amazing too that our seniors who work very hard to make this country prosperous and successful do not have access to affordable drugs.

H.R. 1885, the International Prescription Drug Parity Act is one way that we can make it available to them by financial relief so they can buy the medication they need to maintain their health.

It is widely reported that prescription drug prices are lower in foreign countries. In fact, studies in my own district show from Houston, Texas, we can go down to Mexico and get the same drug for lower costs; in fact, half the price.

Mr. Speaker, I know that myself, because I have done that myself. When I have been traveling in Latin America, Mexico, Costa Rica, I can buy the same drugs that I buy in the United States for significantly less.

While I would have hoped that by now we would have passed a prescription drug plan that works, why not let us reimport these drugs. My colleagues on the other side of the aisle say that it is unsafe to bring these drugs from other countries. Well, that is jut outrageous, because, frankly, these drugs are made and under FDA standards, and we imported $12.8 billion worth of drugs in the United States in 1997.

Mr. Speaker, that is not about safety, it is about profits and what we need to do is make sure that pharmaceuticals who are opposing this bill know that either they need to support a real prescription drug benefit for our seniors as part of Medicare or we are going to find a way to get cheaper prescriptions for our seniors, including bringing drugs in from other countries that meet FDA approval.

It is not fair that countries in Europe and Japan and other parts of the world have so many more cheaper drugs than our own seniors and yet they have the same standard of living.

If I go to Mexico, because Mexico does not have the standard of living we do, so the prescription drugs are cheaper, but if we go to Europe, who has the same standard of living, or Japan, there the drugs are so much cheaper. I would hope, Mr. Speaker, that we would see that we would have a real prescription drug benefit passed, otherwise we need to support the International Prescription Drug Parity Act so we can have these pharmaceuticals reimported in our country for our seniors.

I'd like to thank Congressman CROWLEY for putting together this special order. It amazes me that our seniors, who worked very hard to make this country prosperous and successful, do not have access to affordable drugs.

H.R. 1885, The International Prescription Drug Parity Act is one way that we may be able to provide them financial relief so that they can buy the medication they need to maintain their health.

It has been widely reported that prescription drug prices are lower in many foreign countries than in the United States. Studies conducted in my district confirm that seniors can buy the same drug in Mexico at a lower cost. However, I didn't need a study to tell me that.

I've talked to the seniors in my district who travel to Mexico and I've been to Mexico myself and know that the same drugs were significantly cheaper in Mexico.

While I would have hoped that by now we would have passed a prescription drug plan that works, why not let us reimport those drugs, that patients from all over can buy at lower cost.

My colleagues on the other side of the aisle claim that it is unsafe to bring drugs from other countries and that this legislation will pose a safety risk to consumers.

This is false. These FDA-approved drugs, manufactured in FDA facilities.

Under H.R. 1885, pharmacies and wholesalers importing drugs would still have to meet the same standards set by FDA, which allowed 12.8 billion dollars' worth of drugs to be imported into the United States by manufacturers in 1997. This is not about safety—its about profits and helping special interest groups. Pharmaceuticals are pressuring them not to allow this because they know that they will lose business very soon.

It is not fair that pharmaceutical companies continue to discriminate against American patients.

It is not fair that countries in Europe and across the world benefit from international price competition for pharmaceuticals. Many of these drugs were researched in the United States and funded by our Federal dollars.

This summer, the Republican leadership forced a prescription drug bill that provides more political cover than insurance coverage for our Nation's seniors. The legislation was designed to benefit the companies who make prescription drugs—not seniors. Instead, they passed a flawed piece of legislation which will cost seniors more each year, but it gives them less.

I have met with many seniors in my district who are in serious financial hardship due to the high costs of their prescription drugs. They have shown me their prescription drug bills and let me tell you, I don't see how they can survive. Seniors are having to chose between paying their bills or buying their medication. Some skip their medication to make it last longer.

We should be putting benefits into the hands of senior citizens, not pharmaceutical manufacturers. We should be providing a secure, stable, and reliable benefit—instead of watered down legislation that does nothing to address the problem. We should be building Medicare up, not trying to tear it down.

I hope this Congress will work across party lines and develop a bipartisan bill that ensures an affordable, available, and meaningful Medicare prescription drug benefit option for all seniors.

In the meantime, lets support the International Prescription Drug Parity Act, to level the playing field for American patients as well as businesses who are struggling to continue providing employees and retirees with quality, private sector coverage for prescription drugs.

This is about fairness and common sense.

Mr. CROWLEY. Mr. Speaker, I yield to the gentlewoman from North Carolina (Mrs. CLAYTON).

Mrs. CLAYTON. Mr. Speaker, I thank the gentleman from New York (Mr. CROWLEY) for yielding to me.

Mr. Speaker, indeed we are talking about something very basic. We are talking about the health care of seniors. We are talking about equity. We are talking about providing opportunities for people to have access to affordable prescription drug.

I come from rural North Carolina basically where the income is not as high as in most areas and also where the senior citizens outnumber in proportion our population and the age factor is greater, so we have a lot of senior citizens living at a lower income, and they are making the election between three basics, shelter, food and prescription.

Yet, we here in the Congress have an opportunity to do something about it, and we are resisting that. We are resisting that. We say because we want safe drugs we want to make sure that the pharmaceutical companies can indeed afford to provide that. Well, I support my pharmaceuticals. I am not against them, but I am also thinking that corporate America can do good and do well, not at the expense of senior citizens.

The bill that the gentleman from New York (Mr. CROWLEY) has introduced, that has passed the House, has been improved in the Senate, so there is no reason to even fear the safety of those drugs.

Mr. Speaker, I just saw a magazine article, already the pharmaceutical companies are attacking the possibility that these drugs will be unsafe, that is a bogus, bogus, bogus claim. No one wants to have unsafe medicine. I urge this House to do the right thing, pass this bill so our seniors indeed can have affordable drugs.

Mr. CROWLEY. Mr. Speaker, I yield to the gentlewoman from Wisconsin (Ms. BALDWIN).

Ms. BALDWIN. Mr. Speaker, I want to thank the gentleman from New York (Mr. CROWLEY), for his incredible leadership on the issue of reimportation and getting a fair price for our seniors for prescription drugs; all people frankly. I wanted to come down to

the floor today on behalf of my constituents, my constituents in Portage, Monroe, and Stoughton, Wisconsin and, all the other cities and towns and rural areas in my district who demand and need affordable, comprehensive prescription drug coverage.

Mr. Speaker, we are playing election-year politics with the health of our grandparents, our parents, aunts and uncles. We are ignoring the voice of the many constituents who have written us, me and all of my colleagues showing us in vivid detail their outrageously high prescription drug bills.

Our seniors need prescription drug coverage now. They need the passage of the bill of the gentleman from New York (Mr. CROWLEY). They need affordable drug coverage now. So no matter who you are, where you are or how sick you are, you will have the health care you need.

Mr. CROWLEY. I thank the gentlewoman from Wisconsin (Ms. BALDWIN) for the remarks. I appreciate that very, very much.

Mr. Speaker, in closing I want to thank you for the patience and your steadfastness, and I appreciate all of the speakers who gave their time this afternoon on the issue of prescription drugs.

Mr. Speaker, I just want to mention that this is not only on one side, there are Members on the other side who I am working with, the gentlewoman from Missouri (Mrs. EMERSON), the gentleman from Oklahoma (Mr. COBURN), the gentleman from Minnesota (Mr. GUTKNECHT), as well as members in the other House. We are all working together to try to get this amendment that has passed here in the House passed in the Senate. It was improved in the Senate, approved in the conference committees, we have to do it now, we do not have much time left.

We are told we will be out of here in a couple of weeks. We need to pass this amendment so that seniors can get the prescription drugs that they need at a rate of 30 percent to 50 percent less than they are paying right now. We need to pass a patients' bill of rights, and we need to improve upon the Medicare coverage that this country provides to seniors throughout this land.

REFLECTING ON EXPERIENCES IN HOUSE OF REPRESENTATIVES

The SPEAKER pro tempore (Mr. CANNON). Under the Speaker's announced policy of January 6, 1999, the gentleman from Florida (Mr. MCCOLLUM) is recognized for 60 minutes.

Mr. MCCOLLUM. Mr. Speaker, I listened intently to what was just being debated, and I have an 85-year-old father, I have my in-laws in their 80s. And I am very much dedicated and understand very much the importance of providing Medicare coverage and prescription drugs. I certainly favor a patients' bill of rights.

Mr. Speaker, rather than talking about those issues today, I have taken my 60 minutes of time, which I do not get an opportunity to do very often, and I will not probably have another opportunity ever in this House of Representatives, to reflect for a few minutes on this institution and on the experiences that I have had here over the years that I have had the privilege to serve, because I am leaving this body at the end of this session of Congress after 20 years in the House of Representatives.

This is my last chance to reflect for a few minutes to my colleagues. I am very much aware of the great importance of the House of Representatives, the People's body.

I read a book recently on the life of John Quincy Adams, and I know that having been the President of the United States, having been a United States Senator, John Quincy Adams, who finished his life in this body as a House Member, always thought of the House of Representatives as his greatest experience, most rewarding experience.

I can assure anybody that this has been a very rewarding experience for me in many ways, satisfying principally because I have been given an opportunity very few people have to serve in public office in the highest positions in this Nation, to make laws, to make life better for our children and our grandchildren, and to do things that many people would like an opportunity to do but very few people have the privilege.

I thank the voters of Central Florida who have given me that opportunity in election after election over the last several years. It has been something to reflect upon the young people that I have come in contact with in those years. It is my observation that while we often talk about our troubled youth that most of America's youth are bright and wanting to learn and very capable and that, contrary to a lot of opinions, the future is bright for this country, because we are the greatest free Nation in the history of the world. Because despite our weaknesses hither and yon, we have the greatest institutions of education and family that exist anywhere.

We need to make them better, but we need to recognize that our children not only are our hope for the future, but we have many who are doing very well, who are even living with single parents at some point, either a mother or a father, and despite all of the difficulties that there may be in that setting, even in the urban areas, in some of the worst living conditions in the country, young people are succeeding. They are learning. They are passing their courses. They are getting into positions of authority later in life. They are making their parents very proud, and I think they should be.

But I have seen quite a number of young people who have come here in this Congress to visit, either working in my office as a staff member, working in the office as a volunteer, as an intern, coming in on a high school intern program, making it to Washington because they have done an artwork for which they are being given some decoration, and in those faces, I have taken the most satisfaction, of knowing we are transferring to each generation a better knowledge of democracy and how it works and handing over to them a lot more of the keys to keeping this country the great free Nation that it is.

□ 1700

We often do not reflect on how much Congressmen do to further that cause and our staffs do to further that cause. Every year, since I have come to Congress, I have, with one exception, I think, the first year perhaps, I have had a high school intern program where one high school junior from every high school in my congressional district has come to Washington and has spent a week here, has spent a week meeting with my colleagues, meeting with various executive branch officials, having an opportunity to really learn what the United States House of Representatives and Senate and our government is all about.

I look back on many of those, and I occasionally run into them and know each one of them not only learned a great deal here but went back to their high school and shared that with their friends, shared it with their family, have actually shared much of what they learned here with them in many ways and will forever carry with them what they learned here in that brief week. I also have sponsored a couple of pages here on the floor of the House. They have been here, some of them for the summer, a couple of them for an entire academic year.

I know from observing those young people and what they have learned how valuable it will be going back into whatever walk of life in the future they are involved with, in school, in college, and in business or whatever, and serve their communities better because of what they have learned here.

We also have had a congressional art program for many years that Congress has sponsored; and in my congressional district we have selected, through a judging process, the art work of many of the high schools. That art work is something to behold. I encourage anyone to go to any congressional district art competition when it is held annually, as it is in most congressional districts, and look at what the young people are producing, what wonderful talent they possess.

The only thing we are able to do with our congressional effort is to encourage that. Encourage it we do, legislatively in certain ways; but we particularly encourage it with our competition, where we take one high school art work out of each congressional district where this competition is held, and bring it to Washington every year as the outstanding work and put it on display in this Capitol so that the entire Nation can see it for a whole year.