

may have been lost. Instead everyone came out okay. No one ever told Annalisha what to do if her dad blacked out but she seemed to know exactly what to do to save his life. The consequences of this event could have been tragic however; Annalisha acted heroically and prevented a disaster.

Mr. Speaker, I ask you to join me and all residents of New Mexico in honoring and thanking Annalisha Labastida.

CELEBRATE 50TH ANNIVERSARY
OF THE ANDERSEN LIBRARY AT
THE UNIVERSITY OF WISCONSIN

HON. TAMMY BALDWIN

OF WISCONSIN

IN THE HOUSE OF REPRESENTATIVES

Wednesday, October 15, 2003

Ms. BALDWIN. Mr Speaker, I rise today to honor and celebrate the 50th anniversary of the Andersen Library at the University of Wisconsin, Whitewater. The library's tradition of excellence well deserves recognition.

Opened on February 25, 1953, the Andersen Library exemplifies the high standards of education valued by the Wisconsin state university system. Throughout its tenure, the library has served the Whitewater community, professors, and students alike in a variety of important capacities. One of the more notable among these capacities has been the library's accumulation of volumes. In 1953, the Andersen library opened its doors with 41,000 volumes. Today, the collection has grown to an impressive 2 million documents including a variety of print, audio-visual, and electronic files. It has been through this accumulation that the outstanding staff has been able to fulfill the library's mission to provide quality research, service, and teaching facilities to the Whitewater community.

Commitment to service is also well demonstrated by the library's annual reception and exhibit of works recognizing UW-Whitewater faculty and staff for their scholarship and creative achievements. Now in its fifteenth year, the program's fascinating exhibits recognize employee work in all media, including print, paint, and photograph.

The library's dedication to service and education is highlighted by the life achievements of its namesake, Harold G. Andersen. Mr. Andersen, a lifelong Whitewater resident and graduate of the class of 1917, was one of the many individuals who committed time and energy to the library's opening. In particular, Mr. Andersen helped move the collection with then-university President Robert C. Williams from the old site to the new library on what I can only imagine was a cold February day.

Perhaps the original dedication program said it best when stating that the Andersen Library was "planned with an eye to the future." Indeed, the library's past, present, and future are vital to the Whitewater community and deserve recognition.

INTRODUCTION OF THE MEDICARE
PRESCRIPTION DRUG PRICE NE-
GOTIATION ACT

HON. JOHN B. LARSON

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Wednesday, October 15, 2003

Mr. LARSON of Connecticut. Mr. Speaker, Hubert Humphrey once said, "The moral test of government is how that government treats those who are in the dawn of life, the children; those who are in the twilight of life, the elderly; and those who are in the shadows of life—the sick, the needy, and the handicapped." Right now we are failing this test.

America has over 40 million elderly and disabled Americans who rely on prescription medication to maintain their way of life. Over the past few years, prescription drug costs have skyrocketed and a prescription drug benefit plan for seniors is long overdue. Many seniors are faced with the choice of paying for the medications they need or paying for the food on their table and the heat in their home. This is not a choice they should be forced to make. The Federal Government should not be turning its back on those who have done so much for this country.

A prescription drug benefit should come under the traditional Medicare program that seniors know and are comfortable with, not placed in the hands of HMOs and private insurers. The experience with Medicare+Choice HMOs leaving Connecticut is proof that private insurers will not buy into this program, at least for an extended period, because drug costs are risky and expensive to cover and because it is not actuarially feasible for them to make a profit. But don't take my word for it, listen to the words of Chip Kahn, former president of the Health Insurance Association of America. He said, "I don't know of an insurance company that would offer a drug-only policy like that or even consider it." He went on to say that it would be like "insuring against haircuts."

Prescription drug prices are virtually unregulated in the United States, as opposed to most other nations. Internationally, seniors pay dramatically less for prescription drugs, while pharmaceutical companies are leaving other countries to enjoy the largely unregulated market in the United States. Nations like Canada are no longer developing innovative drugs. In the European Union, health care quality is diminishing and investors are wary of EU pharmaceutical companies because of the uncertainty of profits due to price controls. Thus, American seniors are shouldering the burden of pharmaceutical research and development for the entire world.

The real problem lies in the cost of prescription drugs. American seniors pay drastically more than in any other place in the world. A solution needs to be identified that reduces this burden without stifling the innovative research that sets America's health care industry apart from the rest of the world.

I believe the solution lies in an idea that is already being used by the Federal Government. Prescription drug prices have been successfully lowered for seniors enrolled in the Department of Veterans Affairs health care system. The secretary leverages the power of the VA purchasing population (6.9 million peo-

ple) to negotiate substantially lower drug prices. The VA also makes heavy use of generic drugs and mail order purchasing. An investigation by the Inspector General of the Department of Health and Human Services in 2001 found that the VA paid, on average, 52 percent less for a list of 24 drugs than did Medicare.

The legislation I am introducing today, the Medicare Prescription Drug Price Negotiation Act, would allow the Secretary of Health and Human Services, in conjunction with the Secretary of Veterans Affairs and the Secretary of Defense, to negotiate the prices of prescription drugs purchased by the Federal Government and by Medicare recipients. By using this successful model, seniors will be able to realize actual savings in their prescription drug costs.

As I noted earlier, the United States is the home of major pharmaceutical innovation, due in part to its largely unregulated market. I think that it is vitally important for the United States to maintain its preeminence in this area and my legislation would require the Secretaries to take into account the goal of promoting the development of breakthrough drugs in negotiations with manufacturers. Pharmaceutical companies should be rewarded for their innovative work and their role in improving the lives of so many Americans. However, American seniors should not be the only ones shouldering this burden. I believe it is incumbent on the Federal Government to step in and provide some relief to seniors, many of who live on fixed incomes, who rely on these drugs to maintain their quality of life.

Additionally, my legislation creates an ombudsman within the Department of Health and Human Services to ensure that savings are being passed along and resolve disputes between the manufacturers, sellers, and purchasers of prescription drugs. Additionally, the Secretary will be required to report to Congress regarding the effectiveness of this act in achieving reduced prices for Medicare beneficiaries.

We now have an opportunity to pass the test Vice President Humphrey handed down to us. My legislation would provide seniors with the relief they need without stifling American innovation and the creation of lifesaving medications. I urge my colleagues to join me in supporting this legislation and treat those in the twilight of life with the respect they deserve.

TRIBUTE TO MOTHER TERESA OF
CALCUTTA

HON. TIM HOLDEN

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, October 15, 2003

Mr. HOLDEN. Mr. Speaker, I rise today to honor Mother Teresa of Calcutta and to recognize the many contributions she has made to the world. She knew no limits in her caring for other people. She offered unconditional love while asking for nothing in return.

Born in Albania on August 26, 1910, Mother Teresa decided to become a Roman Catholic sister in 1928. She went on to create a religious order based on caring for the sick, disabled, or dying, whether it was a gutter in Calcutta, under a thatched roof in Africa, or in an apartment complex in Harlem.