

Gloria Jordan, Alexandra Lofton, Natalie Ruff, Jessie Sadlowsky, Ashley Tabor, Danielle Valentino, and Andrea Wain, Mark Valentino, Manager, Gary Wain, Coach, Mark Ruff, Coach, David Phillips, Coach.

I wish the Altamonte Springs Patriots continued academic and athletic success.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Ohio (Mr. BROWN) is recognized for 5 minutes.

(Mr. BROWN of Ohio addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Kansas (Mr. MORAN) is recognized for 5 minutes.

(Mr. MORAN of Kansas addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. GREEN) is recognized for 5 minutes.

(Mr. GREEN of Texas addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Minnesota (Mr. KENNEDY) is recognized for 5 minutes.

(Mr. KENNEDY of Minnesota addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New York (Mr. HINCHEY) is recognized for 5 minutes.

(Mr. HINCHEY addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. GEORGE MILLER) is recognized for 5 minutes.

(Mr. GEORGE MILLER of California addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. HINOJOSA) is recognized for 5 minutes.

(Mr. HINOJOSA addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Illinois (Mr. EMANUEL) is recognized for 5 minutes.

(Mr. EMANUEL addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentle-

woman from the District of Columbia (Ms. NORTON) is recognized for 5 minutes.

(Ms. NORTON 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 gentleman from New Jersey (Mr. HOLT) is recognized for 5 minutes.

(Mr. HOLT addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

QUESTIONS REGARDING VESTS FOR THE TROOPS IN IRAQ

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Ohio (Mr. STRICKLAND) is recognized for 5 minutes.

Mr. STRICKLAND. Madam Speaker, I rise tonight to talk about something that has been in the news lately. I first became aware of this problem in May when I received a letter from a young soldier in Baghdad, one of my constituents, a young man who attended West Point, a young man who loves the military and loves being in the Army. He wrote me a letter and he said, Congressman, I am so proud to be in the Army. And then later on in his letter, he said, I'm angry because there are two kinds of protective vests that are being issued over here. One of the vests is capable of stopping fragments. The other vest is capable of stopping bullets. I'm wondering why my men do not have access to the best vests, those that can stop bullets. It is called the Interceptor vest. It is made of Kevlar. It has areas where ceramic inserts can be placed. And these Interceptor vests have been credited with saving nearly 30 lives in Afghanistan. Yet, Madam Speaker, it is almost beyond belief that although we had months to prepare for this conflict, months during which we knew that there was a high probability that we would be going to war, we put our young soldiers into harm's way without protecting them with the best vests, bulletproof vests, available to us.

There is a story that has been reported in the press of how one young soldier was on patrol, and he was shot by the enemy four times, twice in the chest and twice in his arms, and he survived. He survived because, although he did not have one of these Interceptor vests to wear, before he went on patrol one of his buddies took off his vest and gave it to him. It was only because he had this Interceptor vest on that he survived being shot in the chest.

But tonight, as we are here in Washington, DC, and those of us who are Members of this Chamber feel safe and secure within the confines of this House Chamber, there are young Americans who are in Baghdad and Tikrit and other parts of Iraq, some 44,000, we believe, who do not have the Interceptor vest. They have Vietnam-era

flak jackets basically, jackets that are incapable of stopping the bullets. I wrote Secretary Rumsfeld, and I asked him some questions which I think I and the American people deserve to have answered. Why were our soldiers not provided with these vests at the very beginning of this war? We had plenty of time to prepare to have these vests manufactured. Why were they sent into harm's way? How many American soldiers have lost their lives? How many have been terribly wounded and injured because of the insensitivity or incompetence or outright shameful behavior of those who decided that for some reason our soldiers did not need or did not deserve this kind of protection? I think the Secretary should answer that question to this Congress and to the American people. It is just almost beyond belief with all the billions of dollars available to the Pentagon that this most basic protection for our soldiers, the vests, the body armor they wear, would not be given to them. General Meyers said, well, it's not a question of money, it's a question of production. We're trying to get as many of these vests produced as possible. In fact, the Pentagon has even enlisted three additional companies to produce these vests. Well, it is about time.

Back in Ohio we have an old saying, it does no good to close the barn door after the horse has left the barn. Why were these protective devices not available before our soldiers were sent into battle? General Abizaid, testifying before a Senate committee, said he did not have an answer to that question. He said, I cannot answer why we went into conflict with an insufficient supply of these vests.

Somebody ought to take responsibility. The President frequently talks about the need for personal responsibility. Who was responsible at the Pentagon, in our defense establishment, for this gross oversight? I think the Secretary owes the American people an answer, and I hope he responds to my letter in an expeditious and prompt manner.

AFFORDABLE PRESCRIPTION DRUGS FOR SENIORS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Minnesota (Mr. GUTKNECHT) is recognized for 5 minutes.

Mr. GUTKNECHT. Madam Speaker, I have come to the well of this House many times in the evening and in the day to talk about the high cost of prescription drugs and how much Americans pay for drugs relative to the rest of the industrialized world. I believe it is a crime, and I believe it is shame on us. I always say it is not shame on the pharmaceutical companies, it is shame on us, because the FDA and the Justice Department work for us. I have been regularly vocal and very critical of our FDA and what they have done in terms of, quote, protecting the public health. I have repeatedly said that a drug you

cannot afford is neither safe nor effective.

Tonight, Madam Speaker, I come to the floor of the House to offer some congratulations, because if you are going to hand out the thorns, I think once in a while you have to hand out the roses. First, I would like to congratulate the people at the FDA because today there was a conference held in Bethesda, and they were participants in that conference. What they talked about was new technologies to make our drug supply safer, so that whether you buy your drugs from Manhattan or Munich, you will be able to get safe drugs. I want to talk about a couple of those technologies and the FDA was there to talk about it. One of them is this tamperproof, counterfeit-proof technology. This packaging is made by a little company out in California called Flex Products. They also make the dye that goes on our \$20 bills that make it almost impossible, although they and I think the Federal Treasury says that this is impossible to counterfeit, the same technology is now available for pharmaceutical companies. And I am told that seven of the largest pharmaceutical companies are already employing this technology.

Let me also talk about another technology. This is the first time I have ever talked about it here on the floor of the House. This is made by a family-owned feed and seed company in Minneapolis, Minnesota, a little company called Cargill. These are microscopic markers. They are edible and they are so small that you cannot even see one. But we now have the ability to apply this to every drug. In fact, we can even apply this to the products that go into the drugs, so that we can know that that drug is in fact what is said that it is very simply. That was also on display today at that conference.

But, Madam Speaker, what I really want to do is say a special thank you to some of the senior groups that have stepped up. I want to single out one in particular, the TREA Senior Citizens League, who is made up of just some of the most wonderful people, and their board is here tonight. I want to show an ad that they ran earlier this year. They were one of the few senior citizens groups that used real money, contributed by their seniors, and they ran this half-page ad encouraging Congress, and I want to make sure that we can put at least the text of this into the CONGRESSIONAL RECORD. I want to thank them, and I want to thank George Smith, their chairman, who serves on their board. What a wonderful board it is. These are people who volunteer. They do not get paid large retainers. All that they do is work on behalf of their members and on behalf of seniors everywhere. When they saw what was happening to the cost of prescription drugs, they stepped up, and they made a difference. I want to thank them. And I want to thank our former colleague Dave Funderburk. Congressman and Dr. Funderburk was a valuable Member of the Congress. He and his wife Betty have just been super

people. They help steer the Senior Citizens League through some of the choppy waters and explain how things happen. It is groups like that that are making a difference. They are stepping up and saying there is something wrong, we need to do something about it. We need to fix it. They have run ads. They have informed their members. They represent 1.2 million members around the country. They are the second largest senior citizens group in the country. I have to take my hat off to them because, as I say, they stepped up, they helped run ads, they used real money, they did not take it from some other special interest group and they are making a difference.

We are going to have to vote here in the next couple of weeks perhaps on a prescription drug bill. We are going to have to ask ourselves some simple questions. One of those questions is why is it that Americans pay so much more than consumers around the rest of the industrialized world? The second question is, what are we going to do about it? I hope you will be able to give us good answers because I think we are going to get a chance to vote on that.

The House has done the right thing. We are waiting on the other body. We hope that we will have a conference committee. People like the TREA Senior Citizens League are watching. They are paying attention. Their members are watching. They are paying attention. They are making a difference. They are counting on us to do the same.

TREA SENIOR CITIZENS LEAGUE AD

Congress: Senior citizens need you to vote "Aye" on H.R. 2427, prescription drug importation legislation.

This week, Congress will have the opportunity to help seniors by voting "aye" on H.R. 2447, legislation to allow America's seniors "market" access to lower priced medicines.

The bill would mean seniors would pay a more reasonable price for their prescriptions, and would mean that many seniors wouldn't have to choose between their medications, and rent and food.

The pharmaceutical industry, however, doesn't want this critical legislation to pass. Some are more concerned about making the best possible profit, rather than making a profit while still allowing seniors to have access to safe, affordable medicines. This is wrong.

Vote for our seniors—not for special interests.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Washington (Mr. MCDERMOTT) is recognized for 5 minutes.

(Mr. MCDERMOTT addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

DECLINING MEDICARE REIMBURSEMENTS FOR PHYSICIANS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Georgia (Mr. GINGREY) is recognized for 5 minutes.

Mr. GINGREY. Madam Speaker, I rise again today, this week, to continue the discussion regarding the de-

clining Medicare reimbursements for physicians. Effective January 1, 2004, physicians and other providers paid pursuant to the Medicare physician fee schedule face at least a 4.2 percent cut in reimbursements.

For nearly 40 years, Medicare has provided necessary health care to those millions of patients across the country, some 40-something million this year. Another steep cut in reimbursement rates is now forcing many physicians who care for Medicare patients to make difficult choices. The scheduled January 1 cut in the reimbursement rate is just one of a string of Medicare payment reductions for physicians. Due to problems in the formula used to set Medicare payments for physicians, this 4.2 percent cut taken with the 5.4 percent decline in 2002 contributes to successive pay cuts reaching more than 10 percent.

To illustrate the Medicare payment history for surgical services, let us take a look at this chart comparing the Medicare economic index to physician payment update. The Center for Medicare and Medicaid Services, CMS, uses this Medicare economic index, or MEI, as a proxy for inflation in the cost of operating a medical practice. The largest component of the MEI is change in hourly earning for the general economy. A proxy for physicians' own time is in this index.

Additionally, the MEI accounts for office expenses, medical materials and supplies, professional liability insurance, now that is a good one, professional liability insurance, and we know what is happening to that, medical equipment expenses and other benefits and various professional expenses.

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Here the yellow line shows a steadily increasing MEI, up about 2 to 4 percent every year starting in 1996. Every year extending out to the present time, a 2 to 4 percent increase.

Now look at the red line. The red line charts an annual Medicare payment update for physicians resembling some sort of a roller coaster starting in 1996 and 1997 with surgical payments slightly under the MEI, and then in 1998 we have a tremendous drop. Look at this drop in 1998, which rebounds the next year, the only year, I point out, that the MEI and the increase in payments are actually matched. Then we have a slight increase in physician payments until we start a disaster downward trend of payment cuts before congressional intervention in 2003.

When I look at this chart, it is clear to me that Medicare is not funded appropriately to ensure access to America's elderly and disabled patients. Without doctors' high levels of participation, the Medicare program would not have been able to serve millions of patients over these last 4 decades.

Madam Speaker, I would like to read and include in the RECORD a letter I received just 2 days ago. Madam Speaker,