

be needed in the future as a result of some activity, other kinds of terrorist activity in other places around the world. We are not prepared. We are not able to engage in deployments with respect to terror in the rest of the world because of the failure of our policies in Iraq and our failure to understand the true nature of what was necessary in Afghanistan.

□ 2030

Mr. DELAHUNT. What is refreshing is within the past 2 or 3 weeks there has been some candor on the part of representatives of the administration. In a recent story in the Washington Post back on November 19, the new U.S. Ambassador to Afghanistan made this acknowledgment: He gave the administration's bleakest assessment yet of security conditions in Afghanistan, saying that a regrouping of the Taliban and al Qaeda, increased drug trafficking, and even common criminals are hampering Karsai in the transition to democracy. Taliban rebels have dramatically stepped up operations in recent months, and Khalilzad, who is our Ambassador, said, "Common criminals and al Qaeda followers are increasingly active."

Just be honest with the American people. Do not talk about Congress not supporting the war on terror or Democrats not supporting the war on terror or selected Republicans not supporting the war on terror. Every American has an interest in defeating those that would attack this country. Do not question motives. Do not question people's patriotism. Do not question the effort to create a policy. Many of us including myself and the gentleman from Hawaii opposed American intervention in Iraq, and I stand by that decision proudly. But now that we are there, do not politicize the efforts that are being made to deal with these egregious conditions in Iraq and in Afghanistan when this administration has made promises to those people and to the American people and are not living up to them.

What I found fascinating was a secret memo, a secret memorandum, that was authored by the Secretary of Defense, Mr. Rumsfeld, who was widely known or at least widely believed to be an ardent hawk about military intervention; who, along with the Vice President and Under Secretary Wolfowitz, told the American people that our military personnel would be greeted with flowers and bands and welcomed as liberators. But now the reality has set in. And in a secret memorandum, Secretary Rumsfeld is expressing concerns about whether we are winning the war on terrorism, and he posed two interesting questions in this secret memorandum that was leaked so the American people could find out what was going on in terms of the administration's honest assessment. "Are we winning or losing the global war on terror?" was one of the questions. And "Is our current situation such that the harder we work, the behinder we get?"

It is indeed unfortunate that politics would be allowed to play a role in decisions where not just America tax dollars of a magnitude that will clearly at a point in our future become a drag on our economy because we are borrowing those dollars, remember, and the grant we gave them, we are not going to get it back. But even more importantly, our men and women find themselves at risk in terms of their personal safety every day. This is not a place for politics. This is not a place for attack ads. And I dare say that if that is the strategy that is being designed by the President's political advisor, it will backfire, because the American people, they get it. They really get it.

Mr. ACKERMAN. Mr. Speaker, will the gentleman yield?

Mr. DELAHUNT. I yield to the gentleman from Hawaii.

Mr. ACKERMAN. The acting Secretary of the Army I am afraid has not gotten that particular message because in relation to right in my own district out in Hawaii, the movement of troops out of the 25th up at Schofield Barracks, out into Asia and into Iraq, the movement of Guard and Reserve troops, indicated that this was justified on the basis that if we did not fight them, presumably whoever these people are, terrorists and opposition, military opposition, fight them over there, wherever "there" is, that we would be fighting them here, that is to say, in the United States. The clear link there obviously is that had we not attacked Iraq, Iraq would somehow be attacking the United States, that somehow we would be the victims of an assault by Iraq or the forces of Iraq and presumably by that meaning Saddam Hussein.

Mr. DELAHUNT. Mr. Speaker, they still cannot find the weapons of mass destruction. And, by the way, I do not know if the American people are aware of this, but it has cost and will cost the American taxpayer simply to look, to secure the experts, secure the expertise, to look for these weapons of mass destruction, which by now there is an overwhelming consensus that they do not exist and that they never existed. It is costing the American taxpayers \$1 billion. Just think of what \$1 billion could do for Hawaii or for Massachusetts. I mean, I guess, that is a subject for another night.

Mr. ACKERMAN. Mr. Speaker, if the gentleman would yield, precisely my point is that it serves little good both to a sensible and reasonable and rational dialogue as to what steps we should take now with regard to our occupation in Iraq and the continuing military operations in Afghanistan, it does little good for us to engage in a dialogue in which these kinds of accusations are made or these kinds of observations such as I have just outlined: If we do not fight them there, we will have to fight them here. This is hardly worthy of the Secretary of the Army let alone any high official of the government. It is hardly worthy of anybody to say some are attacking the

President for attacking terrorists. I mean it is stupid on its face to say something like that, and it is clearly meant to be provocative and political without forming any kind of an enlightenment with respect to the issues at hand. What needs to be done, and I think that the Iraq Watch that we have been engaged in these past weeks is indicative of this, that what needs to be done is to have this kind of dialogue. We do not have the hearings. We do not have the dialogue during the regular course of the day.

We are getting ready to recess. The Congress is going out of business in the midst of this winter. There will be no recess in the wars. There will be no recess in the killing. There will be no recess in the wounding. There will be no recess in the political implications. I can assure the Members of that. We are reaping a whirlwind of hatred and distrust across the world such as we have not faced certainly in my memory. The United States has always represented a beacon of hope to people. In our worst excesses and in times when there has been the most argument, even within the borders of the United States as to what our policy should be or should not be, it has always at least had as our fundamental base that we were trying to do the right thing by way of our cooperation with others, by way of our respect for other people; and yet today our whole policy is we are going to do as we please. We are going to take up the issues as we see fit, and whether anybody else wants to involve themselves with us, that is tough. We do not care. That is not a foreign policy. That way lies blindness and defeat for this country.

Mr. DELAHUNT. Mr. Speaker, I thank the gentleman for his remarks.

THE REPUBLICAN MEDICARE LEGISLATION

The SPEAKER pro tempore (Mr. RENZI). Under the Speaker's announced policy of January 7, 2003, the gentleman from New Jersey (Mr. PALLONE) is recognized for 60 minutes.

Mr. PALLONE. Mr. Speaker, I would like to take to the floor this evening to discuss the Medicare legislation that the President signed today. And needless to say, I am very critical of the legislation which was essentially and primarily sponsored by the Republican leadership, and, obviously, supported by the President of the United States. And I know that the President signed the bill with great fanfare today, but certainly from the reaction that I have been getting in my district and throughout the State, because I was in various locations around the State of New Jersey over the last 2 weeks when we had our Thanksgiving recess, the reaction amongst New Jerseyans has been overwhelmingly against the bill. And I have to say that the concerns that I am hearing from senior citizens in New Jersey, and I am sure this is echoed throughout the country, are

primarily concerned that they have been fooled, that the President and the Republican leadership in the Congress are telling them that the Medicare bill is going to accomplish certain things, particularly with regard to prescription drugs, but the reality is that it is very different from what the Republicans are saying about the Medicare legislation. And I just wanted to go through some of the areas where I think that there is an effort on the part of the Republicans to say what this bill will do in a positive way and point out that the reality is very different.

First of all, I would say that the Republican Medicare legislation tries to fool the seniors by saying that somehow they are going to get a discount. If we talk to seniors and even the public at large, the biggest concern they have about prescription drugs is not only that they cost too much but that the costs keep rising, actually much more than inflation, and the bottom line is the bill does absolutely nothing to bring the cost of prescription drugs down. In fact, there is a provision in the bill, and I would like to make reference to it, called the noninterference clause that was actually the subject of an editorial in the Los Angeles Times within the last few days, and because of the fact that there is this noninterference clause in the bill, the Medicare Administrator, that is the person at the Federal level who administers the Medicare program, will not be able to negotiate prices and bring down prices, because keep in mind, Mr. Speaker, that in many cases if they represent a lot of people, as in the case of the Medicare Administrator who will represent about 40 million seniors in the Medicare program, because they represent so many people, they can negotiate a lower price for them for particular drugs on a given day or a given week or a given year. But what the Republicans put in the bill at the request of the pharmaceutical companies is this noninterference clause. And if I could read it, it says: "Noninterference," in order to promote competition under this part and in carrying out this part, the Secretary, that is of Health and Human Services, the Medicare Administrator, may not interfere with the negotiations between drug manufacturers and pharmacies and PDP sponsors and may not require particular formulary or institute a price structure for the reimbursement of covered part D drugs.

So, essentially, what this clause says is that unlike what we do with the Veterans Administration or what unlike what we do with the military, the Federal Government cannot negotiate, on behalf of all these seniors, lower prices. That is wrong. But more than its being wrong and not making any sense because of the power of the Medicare Administrator to negotiate lower prices, it fools the seniors. It gives the impression to the seniors that the Republicans are giving that somehow there is

some cost containment in this bill and in reality there is not any. There is actually a prohibition on any kind of cost containment on the bill with regard to prices for prescription drugs.

□ 2045

Now, a second way that the Republicans try to fool the seniors is by saying that Medicare is going broke. I have had so many of my colleagues on the Republican side get down on the floor here in the last 6 months and say, well, we have to make changes and reform Medicare because it is going broke.

In fact, Medicare is not going broke. The only reason why there is any problem at all with the Medicare trust fund is because the Republicans have been borrowing from the trust fund in the last 2 years to pay for their tax cuts. So the trust fund has actually lost money because we, the Congress, in basically enacting legislation that would provide for huge tax cuts, primarily for the wealthy or for corporate interests, has not had the money to implement those tax cuts and has been borrowing from the Medicare as well as the Social Security trust funds to pay for those tax cuts.

So, again, another effort to try to fool the seniors, to suggest that somehow Medicare is going broke, when in fact the only problem with Medicare stems from Republican fiscal and tax policies.

The third thing that the Republicans try to do is fool the seniors by saying they are giving seniors a choice. In other words, the theory is that if you privatize Medicare or if you say that in order to get a prescription drug plan you have to join an HMO or you have to go to some kind of drug-only policy essentially outside of traditional Medicare, that somehow you are given a choice.

The reality is the seniors lose their choice, because the most important thing that seniors want is a choice of physicians; and if they have to join an HMO, which is essentially the only way practically speaking you are going to get a prescription drug benefit under this bill, you are going to lose your choice of doctors, you might lose your choice of hospitals, you are certainly going to lose your choice of certain kinds of medical procedures, because the HMOs simply will not cover it.

The ultimate irony was this Sunday in the New York Times there was an article on the front page by Robert Pear that pointed to a little-known aspect of this Republican Medicare bill where they forbid the issuance of Medigap supplemental insurance policies once the drug benefit goes into effect in the year 2006.

Let me tell you, if the Republicans are saying they are going to give seniors choice, how is there choice when they cannot even choose a Medigap supplemental insurance policy? It is the opposite of choice. What the Republicans have done with that provi-

sion is not provide the seniors a choice, but say it is essentially either my way or the highway. You either choose a prescription drug plan under an HMO, or you choose a prescription drug plan under a drug-only private insurance policy. But if you want to stay in traditional Medicare, then not only do you not get the drug benefit, but you cannot even buy supplemental coverage to pay for supplementing the holes, if you will, in your existing Medicare coverage.

What the Republicans are doing is everything possible. They say it is choice, but really what they are doing is denying you a choice by making it almost impossible for you to stay within the traditional Medicare program if you want a prescription drug program, or, maybe even if you do not, because you cannot buy Medigap supplemental coverage.

Already some of my colleagues on the Republican side are saying, well, that prohibition on Medigap insurance does not take effect until 2006, and sometime between now and then we will get to that and change that. Maybe we will repeal that provision. I think they should repeal the whole thing. Frankly, the whole thing that the President signed today is bad. It is bad for Medicare and seniors.

I want to get into a few more areas where I think the President and the Republicans are fooling the seniors. They are not giving them choice; they are denying them choice. But the other way they try to fool the seniors is they say they are getting a benefit, and they suggest it is a very generous drug benefit.

The reality is it is not a meaningful drug benefit, and it is hardly generous. It is ultimately going to cost you. If you decide you want to join an HMO and lose your choice of physicians because you want this benefit, this benefit will, nonetheless, cost you so much out-of-pocket compared to what you are going to get back from the Federal Government that I would venture to say that probably less than 10 percent of the seniors would actually opt for this kind of a benefit, because it is such a meaningless benefit.

Let me give you an idea what I am talking about, because I do not want to talk in general terms. I want to give examples of why I say even if you wanted this benefit, if you decided to get out of traditional Medicare and join an HMO, why you would not want to do this.

Let me give you three examples of a senior with \$2,250 in drug costs in a year. In other words, if your prescription drugs are going to cost you \$2,250 in a given year, you are going to pay \$420 in premiums, that is \$35 each month times 12, a \$250 deductible and \$500 out-of-pocket, which is 25 percent of the drug costs that you have to pay when you first go beyond your deductible of \$251 to \$2,250. You are actually paying \$1,170 for \$2,250 in drugs.

You might say, well, that is not too bad. I am getting less than 50 percent

of my drug costs paid, but maybe it is a good deal. Well, not if you have to lose your doctor and join an HMO. But even with all that, less than 50 percent of your drug costs are being paid for by the Federal Government.

But most seniors are not in the category where their drug bills are \$2,250 a year. More seniors have drug expenses that are larger than that and fall into the so-called donut hole. This is an area where if you have your drug bills above a certain amount, the Federal Government pays no part of the cost of your drug bills. I want to give you an example of that.

Let us talk about a senior whose drug costs fall above \$2,250, or in this donut hole where they have to pay 100 percent of the cost. Say a senior has \$3,500 in annual drug costs. This does not exceed the \$5,100 catastrophic cap, so they would pay \$1,170 for the first \$2,250, and, as I said before, \$1,250, which is 100 percent of the difference between \$2,250 and \$3,500. So if your drug costs were \$3,500, you would be paying \$2,420 for those \$3,500 in drug costs, or 70 percent of the cost.

This is because if your drug costs essentially go between \$2,000 and \$5,000 before you get to this catastrophic level, you are paying 100 percent of the cost. You are actually going to be in a situation where you are paying premiums every month to the Federal Government for this drug benefit, but getting nothing back, because you are at that point after 6 or 7 months in the year where you have exceeded the \$2,250 in costs, but you are not up to \$5,000, so you are paying premiums and getting nothing to cover your drugs. You talk about a benefit and you talk about trying to fool the seniors; it is unbelievable how much deceit is essentially involved in this legislation.

I just want to get a couple more examples, because I see my colleague from Ohio is here. Let me give you a couple more examples of how they try to fool the seniors.

The Republicans say to seniors they will be able to stay in traditional Medicare if they want the prescription drug benefit. As I have said, that is really not true, because they have to join an HMO to get any kind of drug benefit. If they want to buy a drug-only policy, which might be out there, the premiums for that will probably be so high it will not even be available.

But the worse aspect of this when they say you can stay in traditional Medicare is for those seniors who are going to be in these demonstration programs throughout the country, where they are essentially going to give you a voucher and say we are going to give you so much amount of money to pay for your health insurance, but you have got to go to the private market and try to find someone to give that voucher to, that set amount of money, to pay for your health insurance.

This is not even with the prescription drug plan. This is Medicare in general. The Republican leadership, in the

House version of this bill they wanted to essentially privatize all of Medicare by the year 2010, but because the other body, the Senate, would not go along with it, they ended up putting this in certain demonstration programs.

One of these demonstration programs is going to be in the southern part of New Jersey, not in my district, but in the southern part of the State. There are about 200,000 seniors in the southern part of New Jersey that are likely to be in this demonstration program, where they are going to be given a voucher and told you go out and buy your health insurance with this set amount of money and you cannot stay in traditional Medicare.

If you say you want to stay in traditional Medicare, what they are going to do is say, okay, if you want to stay in traditional Medicare, you have to pay the difference in cost between that voucher and what it costs the Federal Government to provide the traditional Medicare, which could be an extra \$500, an extra \$1,000, an extra \$2,000 per year. Essentially, seniors are going to be forced out of traditional Medicare, just the opposite of what the Republicans were saying.

The last thing I want to say, where there is a serious element of deceit, is the Republicans are trying to fool the seniors by saying they are going to get a drug benefit immediately after the bill goes into effect. Practically every Republican who got on the floor the night we debated this bill made that statement in some form or the other, and it is simply not the case, because this drug benefit does not go into effect until the year 2006.

What they are going to do over the next 2 or 3 years before it goes into effect is give you some kind of discount drug card. In New Jersey, we see a lot of these because we have a lot of pharmaceutical companies, and most of them give out a discount drug card. You pay a certain amount of money, and you get anywhere from a 5 to 10 to 15 percent discount on your drugs. But since there is no cost containment, it essentially is a ruse, because the drug companies charge whatever they want for the prescription drugs and give you a 5, 10, or sometimes maybe a 15 percent discount.

So now the Federal Government, according to the President, over the next 2 or 3 years before the drug benefit comes into play, is going to hand out these drug cards to seniors so they can get the slight discount, which is really no meaningful discount at all.

I have to say I was not surprised when I went home over the Thanksgiving recess over the last 2 weeks, all that I heard at the senior centers, even on the street, even at the supermarket, were people coming up to me and being not so much mad as upset in some cases almost to the point of tears over what this Republican bill is going to do to their Medicare.

People are saying to me, Are they going to take my Medicare? What are

they going to do to my Medicare? People personalize Medicare. It is so important to them, and yet all these changes are going to take effect that are against their interests.

I have editorials that are written in my local papers against this. These were not editorials I suggested. These were the newspapers and the local senior groups looking at this Medicare bill and saying how it was going to be detrimental to them and the future of the Medicare program.

I see that my colleague, the gentleman from Ohio (Mr. BROWN) is here. He is the ranking Democrat on the Subcommittee on Health; and he has been outspoken on this issue, particularly in pointing to the conflicts of interest that exists with the drug companies and the insurance companies who stand to benefit from the changes that are in this Republican bill.

I yield to the gentleman.

Mr. BROWN of Ohio. Mr. Speaker, I thank my friend from New Jersey, who has just been dogged in his pursuit of this issue and trying to protect Medicare, trying to write a prescription drug benefit inside Medicare, and not this privatized HMO kind of Medicare inadequate prescription drug plan that the President signed today.

When you listen to the gentleman from New Jersey (Mr. PALLONE), you just keep asking the question, why is it that all this happened this way? Why would such a bill pass the Republican House, pass the Republican Senate, in very close votes, and be signed by the President? Why would they do this?

The answer is pretty clearly the kind of influence that the drug and insurance industries have in this body. The word on the street is that the drug companies, the prescription drug companies, are going to contribute \$100 million towards the President's reelection. It is no surprise that nothing passes this Chamber, nothing gets through both Chambers, nothing gets enacted into law and will be signed by the President unless it has the support of the drug companies.

Let me just talk for a moment about that, and then I want to tell a couple of stories. The 10 biggest drug companies in this country had revenue last year of \$217 billion, more than the entire GDP, gross domestic product, of the country of Austria. These 10 companies posted profits of \$37 billion last year. That is more than the Federal Government spent on the entire VA health care system. It is more than the entire Housing and Urban Development budget for last year.

The drug companies on this year's Fortune 500 list posted profits of more than 17 percent, 5.5 times what the rest of the Fortune 500 profits were. The drug industry led all other Fortune 500 industries on two key profitability indices, return on revenues and return on assets.

Now, I want to get there, even with that, even with the drug industry's iron lock on this institution, the corruption, the incredible influence that

this industry has on this Congress, on Republican leadership, on the President, on the Vice President, on leadership in the other body, in the Senate, even with all that, I think it is important to sort of see how we got here.

At 2:54 in the morning on a Friday in March, this House cut veterans benefits by three votes. At 2:30 a.m. on a Friday in April, in the middle of the night, House Republicans slashed education and health care by five votes. At 1:56 a.m. on a Friday in May, the House passed a leave-no-millionaire-behind tax cut by a couple of votes. At 2:33 a.m. on a Friday in June, House Republicans passed a Medicare privatization and prescription drug bill by one vote. At 12:57 a.m. on a Friday in July, the House Republicans eviscerated Head Start by one vote. Then after summer recess, at 12:12 a.m. on a Friday morning, in the wee hours of Thursday night in October, the House voted \$87 billion for Iraq. Always in the middle of the night, always a contentious bill, always after the press had passed their deadlines, always after the American people had turned off the news and gone to bed.

□ 2100

With that track record, and the gentleman from New Jersey (Mr. PALLONE) has illustrated this, we should not be terribly surprised that when the House passed legislation that privatizes Medicare, that dramatically changes the 38 years of Medicare as we know it, that the House did it at 5:55 on a Saturday morning. The Republican leadership delivered this 100-page Medicare bill to House Members on Friday morning at 1:46 a.m. We voted on it 25 hours later.

But, Mr. Speaker, in a lot of ways I do not blame my Republican colleagues. If I produced that bill, I would not want people to know a lot about it either, because when Republicans sit down behind closed doors with the insurance industry and the drug industry and write a bill to privatize Medicare, of course they do not want the public to know, because this bill is not a prescription drug bill when we really look at it. We could have agreed bipartisanship. The gentleman from New Jersey (Mr. PALLONE) and I and our Republican friends could have written this bill, we could have agreed bipartisanship to deliver a \$400 billion prescription drug benefit inside of Medicare, delivered to people the same way that people get their doctor and hospital and get their choice: they send the bill to Medicare and it would work. But this bill is more about Medicare privatization. For that, Republicans have a long history.

Republicans have never much liked Medicare as a Federal program. Turn the calendar 38 years back to the beginnings of this most popular program perhaps in American history. When Congress passed the legislation creating Medicare in 1965, in the spring of 1965, there were 140 Republicans in the House of Representatives. Only 13 out

of those 140, less than 1 in 10, fewer than 1 in 10 Republicans in this House voted to support it. Every leading national Republican voted no. Future President Gerald Ford, future Presidential nominee Bob Dole, future legislative leaders Bob Michel, John Rhodes; future Defense Secretary Donald Rumsfeld, every leading national Republican voted against the creation of Medicare.

Now, after that passed and they realized the public liked it, there were no major efforts to try to get rid of it until 1995 when Republicans had their first chance to do it when Republicans captured the majority of the House of Representatives. In 1995, Newt Gingrich, Speaker of the House, immediately during the Contract With America tried to cut Medicare \$270 billion to, what do we think, pay for a tax cut for the richest people and the most privileged people in the country. Gingrich in that year, in October of 1995, said, now, we did not get rid of Medicare in round one, we did not think that is politically smart. We do not think that is the right way to go through a transition, but we believe it is going to wither on the vine.

Texas Governor, then Governor George Bush was a strong supporter of that privatization effort. Majority leader Dick Army, another Texas Republican said, Medicare is a program I would have no part of in a Free World. Bob Dole bragged, I was there fighting the fight against Medicare. The gentleman from Georgia (Mr. LINDER), Committee on Rules member, a Republican, told me in a meeting in 2002 at the Committee on Rules, Medicare is a Soviet-style system. It is on and on and on. The gentleman from California (Mr. THOMAS) who, with the drug companies and the insurance industry, wrote this Medicare privatization bill this year, said, to those who say that this bill would end Medicare as we know it, our answer is I certainly hope so.

This bill, as the gentleman from New Jersey (Mr. PALLONE) went through, it jeopardizes employer-sponsored retiree coverage for the 12 million-plus seniors who have this coverage. Understand, as the gentleman from New Jersey (Mr. PALLONE) has said, there are 12 million seniors today who have pretty good prescription drug coverage as part of their retirement plans, retirement packages from their employers. Some, between one-fifth and one-third of those, according to the Congressional Budget Office, will have their employers yank that coverage, and they will then be thrown into this privatized Medicare system.

Now, this bill, in addition to the problems that the gentleman from New Jersey (Mr. PALLONE) mentioned, this bill creates a \$12 billion slush fund for HMOs to encourage them to provide coverage; it increases drug industry profits by \$139 billion, increasing their profits by 40 percent. We could go on and on and on and on. We know, we

know about the profitability of the drug companies; we know about how the drug companies have, by and large, written this bill.

We know that the drug companies benefit from this bill way more than everybody else. They have 675 lobbyists in Congress; 675 drug industry representatives walk the halls of these Chambers. There are 1.3 lobbyists per Member of the House, and they spent \$91 million in lobbying activities. That is just what they disclose; we do not know what they really spent. They spent \$50 million more on everything from ads to direct mail. They spent nearly a half a billion dollars lobbying since 1997. They gave \$30 million overall for the 2002 election cycle; about three-quarters of that to Republicans and, as the gentleman from New Jersey (Mr. PALLONE) and I have talked, we hear on the street that Mr. Bush and Mr. CHENEY are going to receive \$100 million in campaign funds from the drug industry.

But let me, before finishing, let me go back to what exactly happened that Friday night, early Saturday morning when the drug bill passed. The vote started Friday at about midnight, the vote on the Medicare privatization bill. The debate started Friday at about midnight. The rollcall began at 3 a.m. Most of us took our vote cards, our little plastic cards, put them in the little box and pushed either the green or the red button. The clock runs out after 15 minutes, but it is usually kept open for another 2 to 5 minutes. Typically, a vote here is often about 20 minutes.

But the Republicans were behind the entire evening; the vote was losing. At 3:30, 4 o'clock in the morning, the vote was 216 to 218. It was defeated. A majority was voting "no," with only one Member, a Democrat, not yet voted. At about 4 o'clock the vote had stayed open for 1 full hour. That is when the assault began. The gentleman from Illinois (Speaker HASTERT), the gentleman from Texas (Majority Leader DELAY), the gentleman from Missouri (Republican Whip BLUNT), the gentleman from Louisiana (Mr. TAUZIN), the chairman of the Committee on Commerce; the gentleman from California (Mr. THOMAS), the chairman of the Committee on Ways and Means all were walking the floor, surfing for stray Republicans who were most likely to cave whom they could bully or whom they could brow beat. They surrounded the gentleman from Ohio (Mr. CHABOT), trying a carrot and then a stick; but he stood his ground and was defiant. They tried a retiring Republican, the gentleman from Michigan (Mr. SMITH), whose son is running to succeed him. They promised support if he changed his vote to "yes" and threatened his son's future if he refused. He steadfastly, to his credit, showed his integrity and stood his ground.

Many of the two dozen Republicans who had voted against the bill had left the floor hoping to avoid the onslaught

from the gentleman from Illinois (Speaker HASTERT), the gentleman from Texas (Mr. DELAY), the gentleman from Missouri (Mr. BLUNT), and the committee chairmen. One Republican that I saw was hiding in the Democratic cloakroom.

By 4:30, the bullying and the brow beating had moved into the Republican cloakroom, out of sight of the television cameras and of the public. The Republican leaders by then had waked up President Bush, and the White House was passing a cell phone from Member to Member in the cloakroom. At 5:55, 2 hours and 55 minutes after the rollcall began, literally twice as long as a vote had ever taken in the U.S. House of Representatives, 2 obscure Western Republicans emerged from the cloakroom, they walked, ashen and cowed down this aisle, I was sitting right there, down this aisle to the front of the Chamber, they picked up a green card to change their votes, they scrawled their names and district numbers on the cards, and they dispiritedly surrendered the cards to the Clerk. Quickly the Speaker gavelled the bill. Medicare privatization had passed.

Now, imagine an election, an election at home when the polls close at 7:30. Everyone has voted. One candidate trails by a few votes, but election officials, just not liking the outcome, decide to keep the polls open for 3 more hours. They brow beat; they bully. They threaten, they offer jobs, they promise goodies for their neighborhood or for themselves. Finally, lo and behold, the election turns out the way they want.

The new rules in this House of Representatives, Yogi Bera might put it tell us, "It ain't over until the Republicans and the drug companies win." It is sort of Florida all in one night. But the American people should expect more. They should expect the House of Representatives conducted in the open. They should expect Members to honestly, straightforwardly, openly cast their ballots; they should expect a drug pricing policy and a Medicare bill that can hold up, not only in the dark of night, but also in the bright light of the morning.

Mr. PALLONE. Mr. Speaker, I want to thank the gentleman. He made some great statements there; and we will have to develop a few of those, if the gentleman does not mind.

First of all, I wanted to talk a little bit more about what happened that night because, as the gentleman knows, this afternoon, our Democratic leader, the gentlewoman from California (Ms. PELOSI), offered a privileged motion which of course was defeated by the Republicans, and she paid much attention in her privileged motion to what happened that night and how it was very wrong and undemocratic, and I think that the gentleman's analogy about keeping the polls open back at home when we are voting in a congressional or Presidential election is a very good analogy.

But if I could just point to the case again with the gentleman from Michigan (Mr. SMITH), a lot of commentary has been written about that over the last 2 or 3 days, and I wanted to specifically mention a column by Robert Novak which was in the Chicago Sun Times recently. And he mentions what happened with the gentleman from Michigan (Mr. SMITH), and I just wanted to point to that and then I wanted to point out the whole legality of it, because there is a serious question about whether what the Republican leadership did to the gentleman from Michigan (Mr. SMITH) was legal.

In Novak's column he said that SMITH, a self-term-limited Congressman, is leaving Congress; and his lawyer son, Brad, is one of five Republicans seeking to replace him from a GOP district in Michigan's southern tier. On the House floor, NICK SMITH was told business interests would give his son \$100,000 in return for his father's vote. He of course declined, and then fellow Republican House Members told him they would make sure that Brad Smith, his son, never came to Congress. After Congressman NICK SMITH voted "no" and the bill passed, DUKE CUNNINGHAM of California, another Republican Congressman and other Republicans taunted SMITH that his son was dead meat.

I mean, needless to say, it is outrageous that this would even occur, and certainly no one is suggesting that it did not occur. I have not heard anybody suggest that what Novak said is not true; I mean, it obviously is true.

But just earlier this week, there was a watchdog group called the Campaign Legal Center that on December 3 urged the U.S. Department of Justice to investigate whether Members of the U.S. House attempted to bribe a Member of Congress into voting in favor of the recently passed bill. They referenced the gentleman from Michigan (Mr. SMITH), and the group urged the House Committee on Ethics to investigate the matter. They sent a letter to the Justice Department, and they referenced a section under title XVIII, section 201 of the U.S. Code where it says, "A person commits bribery who directly or indirectly, corruptly gives, offers, or promises anything of value to any public official or person who has been selected to be a public official or offers or promises any public official or any person who has been selected to be a public official to give anything of value to any other person or entity with intent to influence any official act such as a vote."

Now, I am sure courts can interpret this thing however they want, but it seems to me on its face that what happened that night that my colleague from Ohio talked about was bribery, and it is going to be very interesting to see. Of course, we have to kind of assume that the Justice Department is going to be a little biased, because it is Republican appointed, but I do not see how they can get away from the fact

that the facts and the circumstances in that case were, in fact, bribery.

The thing that really bothers me, I say to the gentleman from Ohio, he talked about the Republican responses when our leader, the gentlewoman from California (Ms. PELOSI), brought this privileged motion up today, I listened carefully to the debate back in my office, and I was amazed to see how some of my Republican colleagues responded. Essentially, if my colleagues listened to what many of them were saying, it was the ends justify the means. They were saying that this vote was so important and the issue of Medicare's future and the prescription drug benefit were so important, that that justified, in some cases they said, leaving the board open as long as it took until they could get the votes to pass the bill.

Well, that is the most undemocratic thing I ever heard of. Essentially it means that if I believe that something should pass, and I am in the majority, I am just going to keep the board open until I get my way. That is it. It is the end justifies the means.

Mr. BROWN of Ohio. Mr. Speaker, that is exactly right. It is also, if we look at the context of all of this, the context is the huge, enormous influence that the drug industry has on this body. I mean, the drug industry has a strangle hold on the Republican leadership, pure and simple. They give millions of dollars to Republicans, as we have said before, we are hearing as much as \$100 million to President Bush's reelection. Nothing in this Chamber, nothing happens without the drug industry saying it is okay. The drug industry puts millions of dollars in campaigns. They hire so many lobbyists, 670-some I believe at last count, well over 600. They run all kinds of television ads and radio ads under the name of something else. They basically launder their money through the United Senior Association, through other groups, these disease advocacy groups that are not really legitimate, with millions of dollars and hide who they are, the drug industry, and try to communicate with the public that way. I mean, they are so powerful and so strong, but at least we ought to keep them off the House Floor. But in that sense, in the wee hours of the morning on Saturday, that Saturday morning, that late Friday night, while Secretary of Health and Human Services Tommy Thompson was on the floor, which is unusual, I do not ever recall seeing a cabinet member on the floor like that, but that is not a violation of the rules and it is not unethical, either. But we could see the influence of the drug industry on the floor of the House of Representatives.

□ 2115

One could almost see these Members of Congress who have depended on drug company money, who are addicted to drug company money, one could see the kind of way that they were pushing

their fellow Republican Members, the Members whom they lead. So it is not a very long jump from there to what they tried to do apparently with the gentleman from Michigan (Mr. SMITH) who showed a lot of guts and integrity, as I might add.

And so when there is that much money at stake, the drug industry is slated to increase its profits already for 21 years straight, the most profitable industry in America, when the drug industry already so profitable, increased its profits \$140 billion over the next 8 years, 40 percent increase in profits for the most profitable industry in America, not to mention the insurance industry and its impact here. With that kind of money at stake it does not come as a surprise to me that Republican leadership would play that kind of hard ball, do it in the middle of the night, or who knows what.

We do not know what was said to Member after Member after Member to pass this bill. That is not a prescription drug bill; it is a bill that turns the Federal Treasury over to the drug companies and the insurance companies and privatizes Medicare in the bargain. So it is pretty clear to more and more Members of this body and to more and more members of the public that the corruption in this body when it comes to drug money, the corruption is just unbelievable. It has increased every year since I have been here. It is getting to the point that it is almost as if Members have signed their vote card over to the pharmaceutical drug industry lobbying association.

Mr. PALLONE. Mr. Speaker, I wanted to point out another example of what you are talking about too. It has also come to light over the Thanksgiving recess, and this is the people within the Department that were drafting the legislation, as you know, the Federal Government official who runs Medicare and was very much involved in drafting the legislation to put this bill in place, Tom Scully, announced during the break, during the Thanksgiving recess that he was leaving the Medicare program to go into the private sector. And there were serious questions about his whole involvement in this because basically he had been looking for a job in the private industry for something like 6 months.

There is an article that was in the December 3 New York Times where it said that Mr. Scully, this is the Medicare administrator, had made no secret of the fact that he had been looking for jobs outside the government for more than 6 months even as he spent hundreds of hours in closed sessions with House and Senate negotiators working out countless details of the legislation.

Now, again, there are so many conflicts of interest with this administration, it is just unbelievable. This guy, who I do not know him that well, but I understand he is a fairly nice guy, but the idea that 6 months ago he was looking for a job, a job essentially with some of the same law firms that were

negotiating on behalf of the drug companies in order to get a favorable bill, the ethics law actually says, and I will read it because it is in the same article in The New York Times, "The ethics rules issued by the Department of Health and Human Services say that employees who have begun seeking jobs in the private sector must immediately recuse themselves from any official matter that involves the prospective employer."

Now, this covers legislative initiatives and proposed rules. Now, apparently, what Mr. Scully is saying is that he got a waiver from the Department so he would be allowed to work on matters of general applicability like the Medicare reform bill while he talked to potential employers. We have no information about how this waiver was garnished. The waiver has never been made public. The bottom line is the guy is negotiating this bill basically looking for a job with some of the same lobbying firms that are representing the drug companies. And as soon as the bill is passed, within a few days he announces that he is leaving to go join those same law firms. What possible justification?

Mr. Speaker, I yield to the gentleman from Ohio.

Mr. BROWN of Ohio. Mr. Speaker, I saw that article. I like Tom Scully. He came to our committee and he spoke. He is a reasonable, decent guy. I do not accuse him of anything untoward. I do wonder about a system, though, where he announced several months ago he was leaving the Department and going into the private sector. And he intimated, he may have said more specifically, that he would be out doing Medicare-type work, but he stays in the Department during the 6 months he is negotiating with various law firms and Wall Street firms, I believe, his future job and then the Medicare prescription drug bill is in the conference committee and he is in these meetings. Somebody gave him a waiver. I do not quite know what a waiver means.

Mr. PALLONE. They will not tell us specifically what it is.

Mr. BROWN of Ohio. It is okay to be in a conflict of interest but because our administration is so pro-drug company, we give you the waiver? I wish he would answer some questions about what the waiver is all about, because I do not think the people at home understand what the waiver process is. I do not think I understand the waiver process.

Mr. PALLONE. The waiver has not been made public.

Mr. BROWN of Ohio. How a Department gives a waiver to one guy to do this and not that. I think Mr. Scully is a man of integrity, but I do not think the system is quite right that would allow somebody to look for a job, run this Medicare system that has 40 million beneficiaries, that has got about, I think, about \$300 billion roughly running through that system. He runs it. The last 6 months he said he is leaving.

He is talking about companies that have a major interest in Medicare while looking for a job, and then he is helping to write the Medicare bill that will affect those companies in the agency he runs. I do not know what the waiver is all about. I hope he comes and tells us sometime.

Mr. PALLONE. I do not think we are going to find out, to be honest, specifically because he is leaving. But the thing that is most amazing about it is that the time period from when he decided to leave and then he actually left was the very time period when he was negotiating the bill.

Mr. BROWN of Ohio. This goes back to earlier comments that the gentleman from New Jersey (Mr. PALLONE) made just about the unseemliness, the conflicts of interest, the huge numbers of dollars that are at stake in this bill. \$400 billion in taxpayer dollars is going to be distributed in the next 10 years, \$400 billion. Not to mention the amount of out-of-pocket seniors will have, which is a huge amount of money, for their drug cost. So that \$400 billion, we are going to see the drug industry is going to make \$140 billion more; the insurance industry gets a \$20 billion incentive pay, if you will, to write drug insurance. Employers are getting subsidized, so not as many of them, some still will, but not as many employers drop the coverage of their retirees who they have collectively bargained with in many cases.

So there is so much money on the table. The way that the administration has done this has been so untoward, the way that from the minute the bill really was introduced, was written behind closed doors by the drug and insurance industry, to they are not allowing amendments, to speak of, on the House floor, to the conference committee closed out to Democrats who represent in the Senate more than half the population and in the House represent 48 percent of the population; and then all of these kinds of secret deals in the bill with the drug companies and the insurance companies winking and nodding every step of the way.

I think this bill symbolizes the corruption, the sort of pinnacle of the corruption that we have seen in this House of Representatives. We are awash with corporate money, awash with all the kinds of cutting deals and conflicts of interest and billions and billions and billions of dollars available to raid the Federal Treasury. While we cannot probably get this bill repealed in the next year, I think we are going to see this Medicare issue is going to really show what the political parties stand for, what are we going to see in the election next year, where on the one hand Democrats want to see a prescription drug benefit go directly to seniors, Republicans want to run it through the drug industry and insurance industry, enriching their corporate friends and then a little bit of it trickles down to seniors. And thrown into the bargain is a privatized Medicare system.

Mr. PALLONE. Mr. Speaker, I wanted to comment, I know the gentleman raised so many good points, and I know we cannot go through them all tonight, but I wanted to talk a little bit about what I call the insurance scam too. We focused a lot of attention on the drug companies and how they are benefiting, but I think we have to talk a little bit also about the insurance companies that you mentioned.

I wanted to say in my State the pharmaceutical companies have a huge presence and they spend a lot of money on electing candidates. But he was very proud of the fact that within a couple days after this Medicare bill surfaced, that the largest newspaper in my State, the Star Ledger, issued an editorial which was entitled "Reject Medicare Legislation." And the largest newspaper in my district issued another editorial calling the Medicare plan bad medicine. But I wanted to highlight the Star Ledger article. Again, this is the largest newspaper in the State, which probably has percentage-wise the largest presence of pharmaceutical companies. And they wrote this scathing editorial. They focused attention somewhat on the drug companies but even focused more attention on the insurance companies. I wanted to read just the first couple of paragraphs because I think it says it all about how the insurance companies benefited. It is the editorial from November 18. It says, "Reject Medicare Legislation. If profit making insurance companies are so much better and cheaper than the Federal Medicare program, why do we have to give them \$12 billion to help improve it? That subsidy is built into the Medicare compromise plan heading for Congress and is but one of several excellent reasons the plan should be rejected. After handing the industry a \$12 billion gift from the taxpayers, the bill sets up a fixed competition between Medicare and private managed care. They would go head to head in a half dozen communities. Once the games begin, private companies could sign up younger, healthier, cheaper-to-treat seniors and reject the rest. It does not take a genius to predict the result. If Medicare, which must take all comers is left with sicker, more expensive seniors, Medicare will fail. That will give conservatives a chance to settle one of the most successful public programs of all times and replace it with private companies. If we end up with a dead Medicare program and taxpayer subsidized private profits, where is the victory? The insurance industry already can sign up seniors under another Medicare option, that is managed care, but it has never attracted more than a small percentage of Medicare recipients. Year by year it has reduced benefits and dropped hundreds of thousands of policyholders. The companies say the Medicare population costs too much to treat and that government payments are stingy."

I am reading this, but I wanted to explain it a little. We have had such an

experience in New Jersey. We have had something like, I think the figure is 800,000 seniors that joined HMOs, managed care over the last 5 or 10 years who were eventually dropped. And the reason they were dropped, obviously, was because the insurance companies initially took the seniors and then found because of the cost that the seniors incurred in health insurance that they could not make a profit. So they dropped them.

Now, what happened then is that the HMOs came before the Congress, they came before our committee, they said we cannot make enough money with the managed care HMO system the way it is. You do not pay us enough money for Medicare to cover for these seniors, so why do you not give us a windfall. That is exactly what is in the bill. They got a \$12 billion basic windfall to manage care so they could theoretically now sign up seniors and provide seniors with not only the HMO but the prescription drug coverage.

But there is nothing in the bill, just like there was nothing in the previous legislation with Medicare+Choice that says that they have to take whatever senior comes along. So essentially what this Star Ledger article is saying, they are now going to cherry-pick. They realized after being in the Medicare program for a number of years that they could not make a profit because they took all these seniors who were sick and driving up health costs. So now they are going to get this huge \$12 billion subsidy, and they will be able to cherry-pick and essentially take whatever seniors they want and offer a health care plan with this big subsidy and leave the traditional Medicare with the sicker people that drives up the cost.

Mr. BROWN of Ohio. Then they are going to come back in 10 years and say, see, Medicare does not work. Of course it does not work when the insurance company insures you when you are healthy and then taxpayers and Medicare get you when you are old and sick. Of course it is going to work that way.

That is the irony of all this. I hear my friends on the other side of the aisle over and over tell us that seniors, that the private sector can do it better, that government is this huge bureaucracy, that Medicare is inefficient and bloated, that nimble, quick-on-its-feet Medicare, the private insurance system can do it better. So, okay, if that is the case, why, then, does Medicare have lower administrative costs, why does Medicare have lower marketing costs, lower salaries and all that? But if you accept that they can let them compete, so why are we giving the Medicare HMOs \$20 billion and say, yeah, of course one can compete if we give you \$20 extra billion, but if the playing field were really level it is clear that the public system wins.

That is why 38 years ago in the end Medicare was created. Because in 1965 when President Johnson and Democratic majorities in both Houses, be-

cause, as we said, almost no Republicans in either House voted for this bill to create Medicare, in those days half of America's seniors did not have insurance. Why? Because the private insurance market did not find seniors attractive. They did not find seniors attractive because they are older, they are sicker, and they are poorer.

□ 2130

So, maybe somebody 65 could get private insurance, somebody that walked every day, someone in really good shape, but someone 73 or 74 who was diabetic, who had heart problems, who was arthritic, who was not really able to take care of himself or herself, no one will insure that person. No one will under the Republican privatized Medicare program.

The whole point is a government plan with a universal coverage pool that everybody is in so when you are 65 and healthy you are subsidizing, because your health care expenses are not too high, you are subsidizing somebody who is 85 and not as healthy. And then when you get to be 85, some other 65-year-old subsidizes you. That is what the universality of the insurance pool is all about.

The Republicans want to fracture the universality of the insurance pool. They want to skim off for their insurance industry contributors and all the corruption around this place that comes from that. They want to skim off the most healthy seniors, and they want to insure them at great profit and let the government and taxpayers pick up everybody that is sick and more expensive. It is pretty simple what their plan is.

Mr. PALLONE. The gentleman described it so well.

The amazing thing is when we were in our committee and we were marking up the bill, I remember asking questions about, well, what about the fact that you do not have a set premium? In other words, you can charge whatever you want for this, for the health insurance or for the prescription drug benefit. And what if the HMO's do not want to cover the sicker seniors or certain seniors. And the answer I got back from some of my Republican colleagues is, well, if this does not work, giving them this \$12 billion windfall, they can come back in another 2 or 3 years and we will give them more money.

It is incredible how they totally violate the idea of competition and, as the gentleman says, a level playing field, and are willing to give the HMOs or the private insurance companies more and more money if they are not willing to cover the seniors. Where does it end? There is no end to it.

We saw with MediCare+Choice a few years ago, every year they would come back and ask for more and more money. And now they have this windfall, who knows where it will end.

I know our time is almost up. I want to develop one more point that the gentleman raised before we close tonight

because I think it is important. The gentleman talked about the fact that if the Democrats or if, on a bipartisan basis, we had been allowed to develop a bill that kept traditional Medicare and just added a prescription drug benefit, which is what most of my seniors, and I think most seniors expected. I mean, if you talk to the seniors about what they expected with a prescription drug benefit, they figured we were just going to have the traditional Medicare, and we were going to add the benefit.

I think it is important before we close that we point out that, as Democrats, we developed and offered an alternative as a substitute on the floor of the House, exactly that. Basically, what the Democratic Party in the House and what our leadership proposed and what both the gentleman from Ohio (Mr. BROWN) and I supported, was simply adding a prescription drug benefit to traditional Medicare. And we used the Part B, which now pays for seniors' doctors bills, as an example.

Under the current Part B, you pay a premium of about \$55 a month. You have a \$100 deductible. Eighty percent of the costs of your doctor bills are paid for by the Federal Government. Twenty percent by you; that is your copay up to a certain amount catastrophic limit where 100 percent of the cost is paid for by the Federal Government.

That is exactly what the Democrats offered as an alternative. We said that for a \$25 premium you would have a \$100 deductible for your first \$100 in drug costs. Eighty percent of your drug bills would be paid for by the Federal Government. Twenty percent copay. And at a certain level, I forget what it was, \$3,000 maybe \$3,500 catastrophic level, 100 percent of the cost would be paid for by the Federal government. And we had a provision in the bill that specifically said that the Secretary of Health and Human Services, the Medicare Administrator, would negotiate price reductions.

I know some of the Republicans said that would have been a very expensive bill. The bottom line is whatever costs to the Federal Government probably would have been outweighed by negotiated prices, that would have brought the cost down considerably. So there was clearly an alternative out there that would have simply done what most seniors expected and simply added a prescription drug benefit to traditional Medicare.

Mr. BROWN of Ohio. That is a very interesting point. I think seniors in my district and seniors all over the country, because I was hearing this from colleague after colleague, people were wondering why it was so complicated? Why was it so difficult? Why can Congress just not pass a drug benefit?

People understand how Medicare works. You go to a physician. The bill is sent to Medicare to be paid. You go to a hospital. The bill is sent to Medicare to be paid. There is a copay and a deductible. People understand that.

They understand the premium. It is very simple insurance. It is full choice of doctor, full choice of hospital, and why not do the same with a prescription? Then you get the prescription. It is paid for by Medicare. You have full choice of your prescription.

Instead, the Republicans had to make it a lot more complicated. Why? Because they wanted to get their privatization agenda enacted. That means using the insurance companies. It means playing ball with the drug industry. It means a lot of that money, that \$400 billion that should go directly to cover prescription drugs, and very little overhead, the 2 percent overhead that Medicare has been able to keep their overhead at 2 percent. Instead of that, the Republicans are seeing all kinds of money wasted through the insurance and the drug companies.

Frankly, it just kind of amazes me because seniors do think it could be simple. The other part of that \$400, as the gentleman pointed out, that \$400 billion would go a lot further under the Democratic plan because we would do cost controls. We would do various kinds of constraints on costs.

The Canadians, as we have heard many times in this Chamber, the price of drugs in Canada is one-half, one-third, one-fourth of what it is in the United States. Tamoxifen, a breast cancer drug, is one-eighth the cost in France than it is in the United States.

If we could have restrained costs, controlled costs, brought prices down, whatever you want to call it, if we had done that and put this bill into Medicare, put this whole plan into Medicare, a lot less complicated, we could have done it months ago, years ago, we could have done it; and seniors would have a better plan. They would understand what it is about. They would not have all of these questions, but the drug industry and the insurance industry probably would not be so happy, and I guess that is in the end why this body did what it did.

Mr. PALLONE. Mr. Speaker, the last thing I wanted to mention, because I know we only have a few minutes, was the reimportation. I know that many of us saw the reimportation from Canada or other countries as sort of a last-minute effort to try to have some kind of cost controls put into effect. We would rather have cost containment here rather than have to import drugs from Canada or other countries. But the bottom line is that both Houses, both the House and the Senate had passed a provision that would have provided for an essentially legalized drug reimportation, at least from Canada, if not from some of the other countries in Western Europe that were comparable to the United States.

Even though the conference between the House and the Senate had those provisions in both Houses, they ended up essentially eliminating it in the bill. Also, today in the omnibus bill, the appropriations bill that we came back to vote on today, I am sure the

gentleman noticed that that was stripped out of that as well.

So every effort has been made by the Republican leadership and by the Republican President to do everything possible to make sure that there are no cost controls whatsoever. And I still see, and I go back to what I said in the beginning, Mr. Speaker, I still see my colleagues on the Republican side coming down here and saying there is some kind of cost control or savings that the seniors are going to get from this bill.

That is simply untrue. Everything has been taken out. The reimportation language from Canada, specific language that says that you cannot negotiate price. Every effort was made to guarantee that there would be no fiddling whatsoever with the drug companies's ability to simply raise prices as they see fit. That is what we are left to.

It is really sad to think that we have come to that. I know the President signed the bill today, and it is over with in that respect; but, hopefully, and I already see it happening, you will get a groundswell from America's seniors throughout the country over the next few months or the next few years that are going to demand that this bill be repealed or significantly altered. I am convinced that is going to happen.

It is sad to think that there was this huge missed opportunity when we could have actually passed a good prescription drug benefit and done something to help America's seniors, rather than this cruel hoax that has been foisted upon them today.

Mr. Speaker, I want to thank the gentleman from Ohio (Mr. BROWN) for all he has done on this issue over the last few years.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. GEORGE MILLER of California (at the request of Ms. PELOSI) for today and the balance of the week on account of upcoming surgery.

Mr. NADLER (at the request of Ms. PELOSI) for today on account of personal reasons.

Mr. JANKLOW (at the request of Mr. DELAY) for today on account of appearing in court.

Mr. BURTON of Indiana (at the request of Mr. DELAY) for today on account of official business.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. BROWN of Ohio) to revise and extend their remarks and include extraneous material:)

Mr. BROWN of Ohio, for 5 minutes, today.

Mr. MCGOVERN, for 5 minutes, today.
Ms. NORTON, for 5 minutes, today.