

President's proposal to reform Medicare that includes a prescription drug component. These proposals have been under attack recently by the ad campaign that features a woman named "Flo."

These Flo ads are misleading because they give the impression that Flo is a concerned senior citizen. She falsely accuses these proposals of interfering in her medicine cabinet—that big government just won't leave her alone.

Although these adds are convincing, they are untrue. The problem is not big government in people's medicine cabinets. The problem is the insurance industry, the largest and most profitable industry in the country. This industry has put these ads out there to fool people into believing that they are not the problem.

These ads may be convincing to some, but many people understand the importance of some form of prescription drug coverage. We know that there are people who do not have insurance at all and prescription coverage would at least help them to have access to beneficial medication.

As I stated earlier, this is a major problem for the elderly, but this is also a major concern for people who have become disabled. My office received a call today from a woman who worked for many years as a teacher before she was stricken with cancer. She had insurance coverage through her husband's plan, but she was dropped shortly after he passed away.

In addition to the agony of battling cancer, she also has congestive heart failure. She was prescribed medication for these conditions, but unfortunately, she cannot afford them.

She called my office because she hoped to offer her story as a human account of the lack of coverage for prescription drugs. She hopes that her story will spur us to action before it is too late.

Although this woman is not a senior citizen, she is disabled and is unable to work. Her insurance company dropped her from coverage and she has had to struggle to get her prescriptions. This situation should not occur in the United States.

In this country, no one should have to make the choice to live without life-saving prescription drugs. We have the resources to ensure that people eat every day, so there is no reason why we have citizens who live at the mercy of the insurance industry.

We have created some of the best medications and treatments in the world, but if our citizens cannot afford them, then these treatments are useless.

Again, I would like to thank my Colleagues for sponsoring this special order tonight. It is important that we tell the American people the truth about the "Flo" ad campaign.

More importantly, it is important for us to hear the stories of Americans who have had to make agonizing decisions about living with the fear of further illness or even death because of the high cost of prescription drugs.

The proposals that provide for prescription drug coverage, such as H.R. 664 and the President's plan need serious attention if we are committed to an enhanced quality of life for seniors and the disabled. I urge my Colleagues to support these lifesaving measures for our most vulnerable citizens.

GENERAL LEAVE

Mr. BERRY. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on the topic of my special order.

The SPEAKER pro tempore (Mr. GREEN of Wisconsin). Is there objection to the request of the gentleman from Arkansas?

There was no objection.

SENIOR CITIZENS ARE MOST AFFECTED BY HIGH COST OF PRESCRIPTION MEDICATIONS

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

Mr. ALLEN. Mr. Speaker, I rise tonight to talk about a problem that affects millions of seniors across this country and, in fact, millions of other people as well. I am talking about those people who do not have prescription drug coverage. No insurance for their prescription drugs.

This problem affects seniors more than others, because although seniors make up 12 percent of the population, they buy 33 percent of all prescription drugs. And studies done in my district in Maine and, indeed, around the country, in approximately 65 to 70 districts, have shown, on average, that seniors pay twice as much for their prescription medications as the drug companies' favored customers.

Well, who are the favored customers? The favored customers are HMOs, big hospitals and, in fact, the Federal Government, buying either for those who are on Medicaid or for veterans, who get their drugs through the Veterans Administration. That price discrimination has to stop. That price discrimination is making it impossible for many seniors to take the drugs that their doctors tell them they have to take.

What we have in this country now is a situation where many seniors are having to choose between food on the table, the electric bill, the rent, and taking the prescription drugs that their doctors have given them. So some people are taking one pill out of three. Some people are not taking their prescription medications at all.

I have had a couple of women write to me and say, I do not want my husband to know, but I am not taking my prescription medication because he is sicker than I am and we cannot both afford to take our medications. That should not happen in this country, but it happens because under Medicare there is no coverage for prescription drugs.

In fact, 37 percent of all seniors have no coverage at all for their prescription drugs. Twenty-eight percent have some form of private coverage through a retiree plan, but that number is declining and will decline further. About 8 per-

cent have coverage through medigap, but medigap policies are expensive and often are really not worth the coverage. Seventeen percent have coverage under Medicare managed care. But, frankly, the managed care prescription drug benefits are being cut back, people are being dropped from the rolls, and the benefit, where it still exists, is more expensive than it used to be.

Now, what is happening? I have a bill that would lower the cost of prescription drugs for the elderly. It is H.R. 664, called the Prescription Drug Fairness For Seniors Act. It does not cost the Federal Government any significant amount of money and creates no new bureaucracy, but it would reduce the prices by as much as 40 percent.

There are those out there attacking both my discount plan and the President's plan for a prescription drug benefit under Medicare. There are ads. This is a picture of Flo. Flo is appearing in newspaper ads and she is also appearing in television ads. Who is paying for the ads that Flo brings? Well, something called Citizens for Better Medicare. Well, who are Citizens for Better Medicare? What a great name. It is the pharmaceutical industry primarily. The drug manufacturers. What they are telling us all is that we need to keep the government out of the medicine cabinet, but in fact what they are really trying to do is make sure that their profits continue.

This is the most profitable industry in the country, and it spends its money, millions of dollars, \$30 million, to try to persuade people that what they really want is a program that will continue the high prices that people pay for prescription drugs.

Now, Flo, of course, is a fake. She is an actress. She is not a real person. There are lots of real people in my district who are having trouble paying for their prescription drugs, but Flo is one of the 28 percent, arguably, who actually have prescription drug coverage.

□ 2000

But she feels no compunction, her pharmaceutical manufacturer sponsors feel no compunction in trying to make sure that the 37 percent with no coverage at all do not get any further breaks. It is outrageous.

There is price discrimination going on in this industry against seniors right now. It needs to stop. Flo says, "We don't want big government in our medicine cabinet." But without the Food and Drug Administration, we could not be sure that the drugs in the medicine cabinet are safe and effective. Without the government, people on Medicaid would have no drugs in the medicine cabinet at all. So the poorer people in this country are getting their prescription drugs paid for but people who are just above the poverty line are not. They are the people who often