

a way to stop a threatened filibuster and move to the substance of the bill.

CLOTURE MOTION

Mr. LOTT. Mr. President, I send a cloture motion to the desk.

The PRESIDING OFFICER. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

The legislative clerk read as follows:

CLOTURE MOTION

We the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on the motion to proceed to Calendar No. 215, H.R. 434, an act to authorize a new trade and investment policy for sub-Saharan Africa:

Trent Lott, Bill Roth, Mike DeWine, Rod Grams, Mitch McConnell, Judd Gregg, Larry E. Craig, Chuck Hagel, Charles Grassley, Pete Domenici, Don Nickles, Connie Mack, Paul Coverdell, Phil Gramm, R.F. Bennett, Richard G. Lugar.

Mr. LOTT. Mr. President, this cloture vote will occur on Tuesday, October 26. I will notify all Senators as to the exact time of the cloture vote. In the meantime, I now ask unanimous consent the mandatory quorum under rule XXII be waived.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. LOTT. I yield the floor.

The PRESIDING OFFICER. The Senator from Oregon.

Mr. WYDEN. I ask unanimous consent to speak for up to 15 minutes as in morning business.

The PRESIDING OFFICER. Without objection, it is so ordered.

THANKING THE MAJORITY LEADER

Mr. WYDEN. Mr. President, before he leaves the floor, I want to tell the majority leader I very much share his view about this threat of narcoterrorism, and also to express my appreciation to the majority leader for the work he is doing with several of us on this matter of secret holds, which are so relevant at the end of a session. We have made a lot of progress already with the work done by the majority leader and with Senator DASCHLE. The majority leader knows we are trying to work out some of the last kinds of questions. I want the majority leader to know I think we have already made a real difference in this area.

I express my support to him and look forward to wrapping up the last remaining issues. I think we all know, as we go into the last few days of the session, we can have 100 of these secret holds and Senators rushing about trying to figure out what is going on. Senator MOYNIHAN, in his landmark study on secrecy, has really made the case that secrecy is the most expensive kind of regulation we could have.

Before the majority leader leaves the floor, I want him to know I really ap-

preciate all the progress we have made in working with his staff, Mr. Wilkie doing yeomen work on this, and I look forward to wrapping it up.

Mr. LOTT. I thank the Senator.

HEALTH CARE POLICY

Mr. WYDEN. Mr. President, rare is it to have an opportunity to talk about health care policy when the chairman of the Health Care Subcommittee is on the floor with Mr. MOYNIHAN, a long time expert, and Dr. FRIST is in the chair. So you have three of the most influential people in the health care policy field before you.

I will not abuse this opportunity. But I wanted to take just a few minutes to talk about this prescription drug issue and its importance, in terms of coverage under Medicare. There is now one bipartisan bill before the Senate on this issue, and that is the legislation that Senator OLYMPIA SNOWE and I have proposed.

What I have said—this is the fifth time I have come to the floor in recent weeks—is I am actually going to, as this poster says, “Urge Senior Citizens To Send In Copies Of Their Prescription Drug Bills,” so we can show just how critical this issue is and come together on a bipartisan basis before the end of this session and get prescription drug coverage added to Medicare.

What Senator SNOWE and I have proposed, on a bipartisan basis, uses marketplace forces to hold down the cost of these prescriptions. We have an “ability to pay” feature in the program. That is something I have heard Senator MOYNIHAN and Dr. FRIST talk about. My sense is, it is critically important that we get this coverage, not just because senior citizens suffer so, but because this is the next breakthrough in preventive health care. The drugs we are seeing today help to lower blood pressure; they help to lower the cholesterol level.

I have heard Senator MOYNIHAN and Chairman ROTH talk, for example, about how costs are exploding in Medicare, particularly under Part A, the hospital portion of Medicare. It seems to me if we can come together on a bipartisan basis and address this prescription drug issue, a lot of these new drugs, these preventive drugs, will help us save money and hold down some of the costs in Part A of Medicare, the hospital and institutional portion of the program.

The Wall Street Journal pointed out yesterday, again, how staggering some of these costs are and how we might prevent them with thoughtful policy work in the health care area. For example, yesterday in the Wall Street Journal they noted that one-third of all stroke survivors are permanently disabled. But doctors can now prescribe anticoagulants to protect the high-risk patients from stroke. The Journal goes on to say:

The lifetime cost of a severe stroke is \$100,000, while treatment with anticoagulants costs \$1,095. This is a chance to get good coverage for vulnerable people in our country and save taxpayers’ money at the same time.

I am just very hopeful; Senator ROTH’s staff and Senator MOYNIHAN’s staff have spent a lot of time with us already. Senator SNOWE and I want to do this in a bipartisan way. We want to act in this session of Congress, not put it off until after yet another round of electioneering and more slugging back and forth between Democrats and Republicans. I am hopeful seniors, by sending in copies of their prescription drug bills, as Senator SNOWE and I advocate, will help us come together in a bipartisan way.

In wrapping up, as I have indicated to the Senate before, I am going to bring to the floor each time I come three cases of what I am hearing from seniors at home in Oregon, to dramatize how important it is we act on this matter.

I just heard yesterday from a 75-year-old widow from Salem, OR. She wrote me that her income is \$8,218 a year; her prescription drug bill is \$2,289.

She spent that on three drugs—Fosamax, Relafen, and Paxil. Three drugs, \$2,289 from her \$8,118 income. That is an elderly woman in Salem.

A woman in Portland wrote me:

My mother is 97 years old and will soon be required to file for Medicaid because the ever-increasing cost of her care and medications have depleted her savings. Currently, her expenses exceed income by over \$1,000 per month. In some months, her medication costs over \$300. Last year, her prescription drug bill was \$2,746.

As we saw in a recent study, more than 20 percent of the Nation’s elderly are spending over \$1,000 a year out of pocket on their prescription medicines. This story was not at all something we found to be rare or out of the ordinary.

Finally, the third case I want to mention this morning comes from a woman in Seaside, OR. She has an income of just over \$1,000 a month. She wrote me yesterday:

I am supposed to take 20 milligrams of Lipitor, but I do not have enough money to buy it.

These are the kinds of cases I know we are going to hear when seniors send in copies of their prescription drug bills. The question is, Can we come together in a bipartisan way to address this issue?

Senator SNOWE and I used the Federal Employee Health Benefits Plan as our model. There are other good ideas out there. Our bill is called SPICE, the Senior Prescription Insurance Coverage Equity Act. We are not saying this is the last word on how to address this issue, but I would like to see the Senate look at an approach that utilizes marketplace forces, along the lines of what we do in the Federal Employee Health Benefits Plan and one

that will not produce a lot of cost shifting on to other groups of vulnerable people.

For example, there is one proposal going around, certainly well-meaning, which has Medicare buying up all the drugs for the Nation's senior citizens. I am very fearful what will happen under that approach is we may control prices for the elderly, but you could have a divorced woman, a 27-year-old, say, African American woman in my State or the Presiding Officer's State. She could see her drug bill go through the roof because prices would be controlled in just one segment of the pharmaceutical area, the Medicare area, and the costs would be shifted on to somebody else's back.

I know the Senate has a lot of important business. By the way, I am with Senator MOYNIHAN and Chairman ROTH on this great bill as well. I know they want to go on to that important matter. I intend to keep coming to the floor. Senator SNOWE had to be in Maine today and could not be here. We have already done this together. We urge seniors to send in copies of their prescription drug bills.

We hope they will back the bipartisan Snowe-Wyden bill. Frankly, I would rather hear from them so as to bring this Senate together in a bipartisan way and deal with this issue. Let's not let it become fodder for the 2000 election. Let's make this issue a legacy of this Congress where we really came together to do something important, something that is the wave of the future in American health care, which is to give good preventive approaches, wellness-oriented approaches as part of our American health system.

I thank Chairman ROTH and Senator MOYNIHAN and my friend, Senator AKAKA, for indulging me this morning. I yield the floor.

The PRESIDING OFFICER. The Senator from New York.

Mr. MOYNIHAN. Mr. President, before the Senator from Oregon leaves, I express my own personal gratitude to him and to Senator SNOWE for bringing this issue in the congenial, collegial way they do. It must be addressed. I feel presumptuous to speak on such matters in the presence of the Presiding Officer, the Senator from Tennessee, but since the advent of sulfa and penicillin, the great medical revolution has been the development of the array of prescription drugs that prevent disease as against cured, in the case of penicillin. We will one day go this way, and we will have Senator WYDEN and Senator SNOWE to thank and the Senator from Tennessee.

The PRESIDING OFFICER (Mr. ROBERTS). The distinguished Senator from Hawaii is recognized.

Mr. AKAKA. Mr. President, I ask unanimous consent to speak as in morning business for 15 minutes.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. AKAKA. Thank you, Mr. President.

SLAVERY IN AN AMERICAN TERRITORY

Mr. AKAKA. Mr. President, I rise to call attention to a recent announcement by Bill Lann Lee, Acting Assistant Attorney General for Civil Rights. The Justice Department announced the conviction of three individuals charged with luring women from China into slavery and forced prostitution in the Northern Mariana Islands. The three pled guilty in Federal district court in Saipan.

The defendants pled guilty to extortion, transportation for illegal sexual activity, and conspiracy to violate the right of women to be free from involuntary servitude. I ask unanimous consent that a copy of the Justice Department announcement be printed in the RECORD following my remarks.

The PRESIDING OFFICER. Without objection, it is so ordered.

(See Exhibit 1.)

Mr. AKAKA. Mr. President, regrettably, this is not the first incident of such behavior in the Northern Mariana Islands. As Bill Lann Lee said in announcing the pleas:

We have seen too many cases of modern-day slavery.

Nor is it the first incident of sexual slavery in the Northern Mariana Islands. Indeed, slavery and prostitution are endemic to the islands' economy.

According to the Department of the Interior's latest report on working conditions in the Commonwealth "many workers are virtually prisoners, confined to their barracks during non-working hours." There are documented reports of Chinese female workers becoming pregnant and who are pressured to have abortions.

The grave situation in the Northern Marianas is captured by the headlines in the Department of the Interior's report. Here are a few of them: "Local Control Over Immigration Has Led to an Unhealthy, Pervasive Reliance Upon Indentured Alien Workers, The CNMI Garment Industry Has Abused Current Trade Privileges to the Detriment of U.S. Workers," "U.S. Companies and U.S. Taxpayers."

Another one: "Worker Exploitation in the Form of Recruitment Fraud," "Payless Paydays & Coerced Abortions, Ineffective Border Control," and "Smuggling of Aliens and Increased Criminal Activity." This is not a pleasant picture, and it only gets worse. In another report earlier this year, an undercover investigative team sponsored by the Global Survival Network detailed the sex trade and slavery in these once idyllic Pacific islands.

According to their report, "Trapped: Human Trafficking for Forced Labor in The Commonwealth of The Northern Mariana Islands":

Many of the Chinese women working in clubs with local clientele, for example, said they had come to the CNMI ostensibly to work as waitresses, unaware that they would have to work in a nightclub and/or be forced into sexual slavery. These women had been trafficked into the CNMI specifically for sex work without their knowledge or consent.

Given this environment, is it any wonder three people have pled guilty to forcing women into slavery and prostitution?

No. The wonder is that more people have not been so found. Hopefully this will change. As the Department of Justice notes, this prosecution was the result of a new effort to increase resources and oversight in the Commonwealth.

Fortunately, some American clothing retailers are beginning to react to sweatshop conditions in the Northern Marianas. Just the other day, five major retailers—Ralph Lauren, Donna Karan, Phillips-Van Heusen, Bryland L.P., and The Dress Barn—agreed to settle a class-action lawsuit about this deplorable working environment. The settlement with these businesses follows a similar settlement agreed to last June with Nordstrom, J. Crew, Cutter & Buck, and Gymboree. Hopefully this marks a trend toward ending indentured servitude in the Commonwealth.

More needs to be done. The central cause of the slavery and prostitution on this American territory is the lack of any controls on immigration.

For my colleagues who may not be familiar with this U.S. territory, the Commonwealth of the Northern Mariana Islands is located 4,000 miles west of Hawaii. In 1975, the people of the CNMI voted for political union with the United States. Today the CNMI is a U.S. territory.

A 1976 covenant enacted by Congress gave U.S. citizenship to residents of the CNMI. However, the covenant exempted the Commonwealth from the Immigration and Nationality Act. As we now know, that omission was a grave error.

I want my colleagues of the Senate to know that the chairman of the Senate Energy Committee, Mr. MURKOWSKI, and I have introduced legislation to correct fundamental immigration problems in the Commonwealth, such as the ones that led to the convictions obtained by the Justice Department. It was only yesterday, that the Energy Committee approved our CNMI reform bill. I hope that the full Senate will act on our legislation soon.

Our bill stands for the simple proposition that America is one country and we must abide by a single, uniform immigration law. Congress must terminate an immigration system that is fundamentally wrong and incorporate the CNMI under Federal immigration law.

Common sense dictates that our country must have a single, national