

SNOWE and I have said we are going to set aside some of the partisan bickering that has surrounded health care in this session of the Senate in years past; we are going to move forward and try to make sure seniors get some help.

I hope families and seniors who are listening tonight will look at this poster. We are urging that seniors send copies of their prescription drug bills directly to each of us in the Senate here in Washington, DC, and help us in the Senate to come together and deal with the issue that is of such extraordinary importance to our families.

There are a variety of ways this issue could be addressed. I think personally the Snowe-Wyden legislation, because it is bipartisan and because more than half of the Senate has voted for a plan to fund it, is the way to go. But I am sure there are other kinds of ideas.

When seniors send in copies of their prescription drug bills as we try to get action on this issue, I hope they will also let us know their ideas about legislative approaches, be it support for Senator SNOWE, the Snowe-Wyden legislation, or other kinds of approaches. But what to me is unacceptable is just ducking. I do not think there is any excuse for inertia on this issue. I think it is time for the Senate to say we cannot afford, as a nation, to see seniors suffer the way they do when they cannot get prescription drug coverage.

Just as important as the questions of fairness for seniors, it seems to me, are the questions of economics. From an economic standpoint, the need to cover some of these prescription drugs for seniors looks to me like a pretty easy call. With a modest investment, we can save a whole lot of expense that comes about when they suffer strokes and

heart attacks and the like when they cannot get their medicine.

So I hope in the days ahead, Members of the Senate, in senior centers and medical facilities and other places where we all go to visit, will take the time to talk to some of the folks at home about the need for prescription drug coverage and discuss ways we can actually get this benefit added in this session of the Senate. Too many of our seniors now cannot afford their medicine. That is what these bills are all about. What these bills and these letters I am getting from seniors at home in Oregon are all about is that they cannot afford their medicine. These are the people who are told by their doctors to take three prescriptions; they cannot afford to do that and they end up taking two prescriptions. Then they cannot afford to do that; then it is one. Pretty soon, sure as the night follows day, they get sicker and they need institutional care. That is, obviously, bad for their health and it is also bad for the Nation's fiscal health. So I intend to keep coming back to the floor of the Senate.

Since my days with the Gray Panthers at home in Oregon, I felt this was an important benefit for the Nation's older people. All these letters I am receiving as a result of folks sending in copies of their prescription drug bills, if anything, just reaffirms to me how important it is that the Senate act on this issue, and do it in a bipartisan way.

Let's show seniors, let's show the skeptics we can come together around this important priority. This is not a trifling matter. This is, for many, many seniors, their big out-of-pocket expense. Many of them do not have pri-

vate health insurance that covers it. Many of them are simply falling between the cracks in terms of meeting their health care expenses. For many elderly people, as a result of escalating health costs, they are paying more proportionally out of their own pocket today than they were back when Medicare began in 1965. That should not be acceptable to any Member of the Senate.

I intend to come back to the floor again and again and again until this Senate, on a bipartisan basis, looks to addressing this prescription drug coverage. The Snowe-Wyden legislation is bipartisan. It uses marketplace forces. We reject the kind of price control regimes others may wish to pursue. I am hopeful we can get action on this issue because, for the millions of seniors who cannot afford their prescriptions, the Senate's willingness to tackle this issue, and do it on a bipartisan basis and get some relief for the seniors, will help instill a sense of confidence, a sense that the Senate is listening to them, hearing them, and is willing to respond to their most significant needs.

I yield the floor.

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ADJOURNMENT UNTIL 9:30 A.M.  
TOMORROW

The PRESIDING OFFICER. The Senate, under the previous order, will stand adjourned until 9:30 a.m., Wednesday, November 3, 1999.

Thereupon, the Senate, at 6:49 p.m., adjourned until Wednesday, November 3, 1999, at 9:30 a.m.

## HOUSE OF REPRESENTATIVES—*Tuesday, November 2, 1999*

The House met at 9 a.m.

### MORNING HOUR DEBATES

The SPEAKER. Pursuant to the order of the House of January 19, 1999, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning hour debates. The Chair will alternate recognition between the parties, with each party limited to 25 minutes, and each Member except the majority leader, the minority leader or the minority whip limited to 5 minutes, but in no event shall debate continue beyond 9:50 a.m.

The Chair recognizes the gentleman from Oregon (Mr. BLUMENAUER) for 5 minutes.

### ELECTION DAY 1999

Mr. BLUMENAUER. Mr. Speaker, today the issue for the 2000 election is being previewed from coast to coast, that experts term a sleeper issue, hidden just below the surface. That issue, Mr. Speaker, is a welcome change from the nasty and sometimes incomprehensible partisan politics that have characterized contemporary campaigns. The issue instead is one that is positive, inclusive, that brings people together rather than driving them apart for partisan advantage. That issue, of course, is related to livable communities.

How do we make our families safe, healthy and economically secure? Here in the Washington, D.C. metropolitan area, we in Congress have been witness just across the river in Northern Virginia to a variety of spirited campaigns. The hot button issues of these campaigns have been transportation, congestion, air pollution, unplanned growth and gun violence.

At the other end of the country, there are a variety of initiatives that are local responses to the State of California's refusal to have planned State-wide growth management in place. Citizens want more control and predictability.

In the State of Colorado, voters are increasingly concerned about the quality of life issues facing metropolitan Denver. This is understandable when we realize that just a couple of years ago, Colorado citizens discovered that the plans for their urbanized metropolitan Denver would sprawl more than a thousand square miles. That is bigger than Los Angeles, San Diego, Sacramento, San Francisco, San Jose and Long Beach combined.

Today with even a modestly pared down growth management approach and voluntary compliance, Denver is facing a significant referendum for both highway construction and, paired with a light rail referendum, both are expected to pass.

In the State of New Jersey, the State-wide Transportation and Local Bridge Bond Act of 1999 will be public question number 1 on Tuesday's ballot. This is coming hard on the heels of Governor Christine Todd Whitman's pronouncement that the theme of her second term as governor would be livable New Jersey. The already-approved open space bond in New Jersey has received strong support from transit and environmental groups. The New Jersey transportation Commissioner James Weinstein has pledged repeatedly that the dollars from this bond measure will be directed towards fixing existing infrastructure and not used to add new sprawl and traffic-inducing projects.

Greg Meyer of the tri-State transportation campaign was quoted as saying, "If you build it, they will come. If you fix it, they will remain. Preserving the transportation we have already got is the means to focus growth in already-developed areas without encouraging sprawl in the fringe. The bond plan follows this principle."

Mr. Speaker, time does not permit me to deal with even the highlights of initiatives in Arizona, Florida, Maine, Maryland, Michigan, Minnesota, Ohio, Pennsylvania, Texas or Washington State.

I do want to note that the State of Wisconsin just enacted the "growing smart" law, which is that State's first comprehensive growth management act. As one who came to Congress dedicated to having the Federal Government promote closer relations promoting livability, being a better partner, I am excited by what we are seeing from coast to coast. It is time for us in Congress to do our part, whether it is making the post office obey local land use laws and zoning codes, having the Federal Government lead by example with GSA or fully funding the Land and Water Conservation Act or reforming the national flood insurance program so that we no longer are subsidizing people who are living where God does not want them.

I am looking forward to seeing the results of today's election and I am excited for the election to come, because I think livability issues will continue to be the issues that Americans care about, and once again the citizens will be leading the political leaders.

### END AMERICAN TAX SUBSIDIES FOR DRUG DUMPING

The SPEAKER pro tempore (Mr. OSE). Under the Speaker's announced policy of January 19, 1999, the gentleman from Texas (Mr. DOGGETT) is recognized during morning hour debates for 5 minutes.

Mr. DOGGETT. Mr. Speaker, we have all seen the heartbreaking stories of huddled masses of refugees after a flood or hurricane, a civil war, a natural or manmade disaster, searching for food and water and lost family members. It warms our hearts to hear of international aid efforts, frequently led by America, to provide those in need with the assistance that they require. Congress decided long ago that we should reward these outreach efforts through generous tax deductions for property or items that are donated to help those most in need, even if the recipients are at the four corners of our world.

While many of these efforts are truly commendable, like those of the International Red Cross, others simply represent the dumping of worthless products. Under the title, "In a Wave of Balkan Charity Comes Drug Aid of Little Use," the New York Times reported this very summer how camps filled with refugees from Kosovo received anti-smoking inhalers and hemorrhoid treatments instead of much-needed antibiotics.

The Times reported that "the outpouring of aid from corporate America and elsewhere for more than a million refugees who flooded into Albania and Macedonia during the war was indeed vast and included many badly-needed medicines. But the World Health Organization said about one-third to half of all of the shipments were inappropriate and likely to gather dust in warehouses or be destroyed at government expense."

Should American taxpayers subsidize the donations of useless pharmaceutical products to foreign countries? I think the question really answers itself, but this practice continues to occur, encouraged by our U.S. tax laws. Normally when a corporation donates property it may deduct its cost to produce the item.

To encourage donations to a charity for needy causes, as is the case for these drugs that are destined for foreign relief, our tax laws permit a corporation to receive twice its basis. That is fine when the drugs are useful, but it is totally unjustified when they are worthless. I am filing legislation

□ This symbol represents the time of day during the House proceedings, e.g., □ 1407 is 2:07 p.m.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.