

We hope the Senate will pass it, and we hope the President will not veto it as he already has promised to do.

But the second part of that tax relief for tax fairness is to say to a senior, if you are working, you should not be penalized on your Social Security, because people are living longer, the needs are greater, and people need to work and want to work. It is healthy. There are lots of benefits to it. But if they do make this decision, they should not be penalized under Social Security.

The Republican Party will be having this bill in committee today. I hope we get it on the floor soon and pass it so that the Senate can.

□ 1045

MAKE PRESCRIPTION MEDICINE AFFORDABLE AND ACCESSIBLE

(Ms. DELAURO asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. DELAURO. Mr. Speaker, our seniors face skyrocketing prices for prescription drugs. Many of my constituents have written to me about having to choose between buying food and paying for the life-saving medicines that they need. For millions of seniors, a prescription drug benefit is the difference between getting the medicine they need for healthy, independent lives, and pain and suffering. For those who are skipping meals or missing rent payments, a prescription drug benefit is a necessity that would bring dignity to their lives.

I urge my colleagues today to sign the petitions at the desk to allow a debate on proposals that would end price discrimination and provide a prescription drug benefit for all seniors. We have an historic opportunity to make medicine affordable and accessible. We could do this in a heartbeat if the Republican leadership would allow debate on this floor.

Modern science has blessed us with many wonderful new medicines, but if seniors cannot afford them, these medicines are of little use. I implore my colleagues, sign the petitions at the desk. Begin substantive discussion on how to make prescription drugs affordable to the people who need them.

PRESCRIPTION DRUG BENEFIT NEEDED NOW

(Mrs. THURMAN asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. THURMAN. Mr. Speaker, today we have heard about the 24 million people we supposedly helped last week. Well, let us talk about the 39 million people we could help that are under Medicare.

Let me just explain to you that this is a dollars and cents issue for us. We are grappling with the trust fund on Medicare and making sure that the expenses are kept down. Well, there is one way you can do that, and the one way you can do that is to make sure that seniors get their prescription drugs.

Let me just give you an example of what somebody wrote to me in my district. "My mom and dad do not have prescription drugs coverage, therefore must pay full price for all of their drugs. Mom has been cutting her cholesterol pill, Zocor, in half, so it will last two months. The pharmacist says they will not be effective and she is endangering her health. The prescription drug went from \$80.49 at the beginning of last year to \$95.99."

What do you think the cost of this is when this woman ends up in the hospital because she cannot take the medicine that is going to keep her healthy?

We need to make sure Members are signing this discharge petition so we can have an honest debate on this floor to help the 39 million people, and that number is growing.

AMERICA NEEDS A PRESCRIPTION DRUG BENEFIT

(Mr. FORD asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. FORD. Mr. Speaker, I rise today to urge this Congress to take steps towards enacting a comprehensive prescription drug benefit. We have heard from so many of our colleagues why this is important, not only to their constituents, but constituents around the Nation.

Since the creation of the polio vaccine almost 50 years ago, the United States has been the engine of worldwide medical advancement. The finest doctors in the world are trained at our medical schools. Our government funds cutting-edge research at the National Institutes of Health and the Centers for Disease Control.

American pharmaceutical companies are at the forefront of innovation. American innovation in the prescription drug industry is the envy of the world. They are producing new drugs that will allow people to lead healthier, happier, and longer lives.

But in America today, those most in need of those life-sustaining and life-saving drugs frequently find themselves on buses bound for Canada to find affordable prescription drugs.

Prescription drugs are an integral part of health care, especially for seniors. But at least 13 million Medicare beneficiaries have no drug coverage at all. Seniors often have to pay three times as much for drugs than those under the age of 65. It is unfair and it is wrong.

This is an issue that is critical to the citizens of my District and my State. In 1998, Tennessee led the Nation in prescription drug use, with a per capita consumption of 40 percent above the national average.

It is time for a Medicare prescription drug benefit. I urge my colleagues to sign the discharge petition.

PRESCRIPTION DRUG PRICES TOO HIGH FOR SENIORS

(Mr. GREEN of Texas asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GREEN of Texas. Mr. Speaker, this Congress should have an open floor debate on legislation to help seniors afford the high cost of prescription drugs. We cannot sit on this issue any longer.

It is estimated we have 13 million seniors who do not have prescription drug coverage, and the number is increasing rapidly, almost as rapidly as the cost of the drugs they need. These seniors worked hard and paid into the system their entire lives, but now must choose between buying their prescriptions or their groceries. Seniors tell me they have to skip their medication to make it last longer.

I recently sent out a questionnaire to constituents in my District in Houston to learn what they think Congress' priorities should be. I received many responses from seniors saying Congress must act immediately to help them with the high cost of prescription drugs.

I heard from seniors like Norma Keyes of Houston who writes, "I need help with my prescriptions. I spend over half my Social Security on prescriptions. I can't get enough money to pay for my house and taxes."

Joyce Belyeu wrote, "I am now retired after 53 years of working. I have Medicare and a supplement, but no prescription drug benefit at all. I can't afford the \$250 per month for prescription drugs, so I can not take the prescription daily. I skip days."

We need to do better, and this Congress must do it.

TIME TO DO RIGHT BY OUR SENIORS ON PRESCRIPTION DRUGS

(Mr. SHOWS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. SHOWS. Mr. Speaker, I have had the opportunity to visit with many of my senior citizens to talk about the high cost of medicine.

Let me tell you about one of my constituents, Ms. Lucille Bruce. Ms. Bruce lives in Clinton, Mississippi. She enjoyed all the freedoms of being a senior citizen until she started to pay the high cost of prescription medication

and had to move in with her daughter. She pays hundreds of dollars each month for prescription medicine while living on a fixed income.

Ms. Bruce told me without her daughter, she did not know how she would make it, and she wonders and is concerned about seniors who do not have the family support that she has. She often feels a burden on her daughter. She is going to have some more hospital visits, and it may result in more costs to her and her daughter.

Because of Ms. Bruce and millions of others, I am filing a discharge petition today, H.R. 664, the Prescription Drug Fairness for Seniors Act. We cannot wait; our seniors sure cannot wait. For every day of inaction there are seniors out there doing without medication.

It is time to do the right thing and make them favorite customers, just like the large HMOs and the Federal Government.

Mr. Speaker, folks like Ms. Bruce need our help.

PROVIDE A PRESCRIPTION DRUG BENEFIT FOR SENIORS NOW

(Mr. DOGGETT asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. DOGGETT. Mr. Speaker, when two people walk into the same pharmacy and one, who has no insurance, is forced to pay 136 percent more than the other, who is one of the pharmaceutical industry's most favored customers, something is very wrong. That something wrong is price discrimination against seniors for whom these pharmaceuticals are vital to sustain their health.

That is exactly what I found when I surveyed our local pharmacies in Austin, Texas. This occurs, not as a result of any fault on the part of the local business, but because the pharmaceutical industry discriminates against the uninsured.

Last September, I secured the first vote in this Congress to outlaw that type of price discrimination. Unfortunately, the Republican members of the Committee on Ways and Means joined with the pharmaceutical industry to block that initiative. But with today's discharge petition, we are renewing the struggle, the struggle to see that America's seniors are dealt with fairly and that they have access to prescription drugs. We must put a stop to this wrongful price discrimination.

Join us, renew the effort by signing this petition to end the discrimination against seniors.

CONGRESS MUST ACT ON MEDICARE PRESCRIPTION DRUG BENEFIT

(Mr. MCGOVERN asked and was given permission to address the House

for 1 minute and to revise and extend his remarks.)

Mr. MCGOVERN. Mr. Speaker, the time has come to end the excuses and begin the action on providing a prescription drug benefit for all our seniors. The outrageously high cost of prescription drugs is forcing people to choose between their medicines and their groceries.

Congress must act now, because, sadly, we cannot expect the pharmaceutical industry to do the right thing and lower their prices. It is now the responsibility of this Congress to provide a comprehensive Medicare prescription drug benefit and to ensure that all Americans can afford their prescriptions. Our goal should be nothing short of a comprehensive benefit.

The Republican leadership of this Congress has dragged its feet on this issue for too long. The American people want a vote, and they want it now.

I call on my colleagues to join together and sign the discharge petition to force a vote. This leadership must act now. Our senior citizens, who have raised our families, who have worked in our factories, who have fought our wars, deserve nothing less than a comprehensive drug benefit. The excuses must end and the action must begin.

ACTION NEEDED NOW ON PRESCRIPTION DRUGS

(Mr. TIERNEY asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. TIERNEY. Mr. Speaker, today we have heard all stories from our constituents who have to choose between medication and food or rent. We all know that by paying higher prices than individuals anywhere else in the world, Americans are subsidizing the drugs that benefit others. We know that private prescription drug expenditures have been growing at a rate of 17 percent a year.

We do not deny the drug manufacturers, who enjoy the highest profits of any industry profits of any industry, engage in important, sometimes life-saving research that should be encouraged. But the burden should not be on the elderly and those least able to afford it.

Let us clear up one misconception now: H.R. 664 does not mandate price controls, but uses market forces such as volume buying.

The United States makes large public commitments to drug research already, through taxes and the National Institutes of Health research money. While companies in the United States generally face an effective taxation rate of about 27 percent, drug companies, through generous tax credits and benefits, were effectively taxed at roughly 16 percent. Financial encouragement of research should not be eliminated and

would not be under the legislation we seek to bring to the floor.

During the 1984 Waxman-Hatch Act effort and the 1990 Medicaid debate, drug companies complained they would have to cut research, yet they subsequently contradicted themselves by expanding it instead. We merely seek to strike some balance. With the many public benefits received by the drug companies also comes some social responsibility.

PROVIDING FOR CONSIDERATION OF H.R. 2366, SMALL BUSINESS LIABILITY REFORM ACT OF 2000

Mr. LINDER. Mr. Speaker, by direction of the Committee on Rules, I call up House Resolution 423 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 423

Resolved, That at any time after the adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 2366) to provide small businesses certain protections from litigation excesses and to limit the product liability of nonmanufacturer product sellers. The first reading of the bill shall be dispensed with. General debate shall be confined to the bill and shall not exceed one hour equally divided and controlled by the chairman and ranking minority member of the Committee on the Judiciary. After general debate the bill shall be considered for amendment under the five-minute rule. It shall be in order to consider as an original bill for the purpose of amendment under the five-minute rule the amendment in the nature of a substitute recommended by the Committee on the Judiciary now printed in the bill. The committee amendment in the nature of a substitute shall be considered as read. No amendment to the committee amendment in the nature of a substitute shall be in order except those printed in the report of the Committee on Rules accompanying this resolution. Each amendment may be offered only in the order printed in the report, may be offered only by a Member designated in the report, shall be considered as read, shall be debatable for the time specified in the report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against the amendments printed in the report are waived. The Chairman of the Committee of the Whole may: (1) postpone until a time during further consideration in the Committee of the Whole a request for a recorded vote on any amendment; and (2) reduce to five minutes the minimum time for electronic voting on any postponed question that follows another electronic vote without intervening business, provided that the minimum time for electronic voting on the first in any series of questions shall be 15 minutes. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. Any Member may demand a separate vote in the House on any amendment adopted in the