

(iv) development of economically viable cropping systems that improve the conservation and restoration of marginal land; or

(4) Any research and development in technologies or processes determined by the Secretary of Agriculture and the Secretary of Energy, acting through their respective points of contact and in consultation with the Board, to be consistent with the purposes described in subsection (b) and priorities described in subsection (c)(2)(B).

**(e) TECHNOLOGY AND INFORMATION TRANSFER TO AGRICULTURAL USERS.—**

(1) IN GENERAL.—The Administrator of the Cooperative State Research, Education, and Extension Service and the Chief of the Natural Resources Conservation Service shall ensure that applicable research results and technologies from the Initiative are adapted, made available, and disseminated through their respective services, as appropriate.

(2) REPORT.—Not later than 5 years after the date of enactment of this title, the Administrator of the Cooperative State Research, Education, and Extension Service and the Chief of the Natural Resources Conservation Service shall report to the committees of Congress with jurisdiction over the Initiative on the activities conducted by the services under this subsection.

(f) AUTHORIZATION OF APPROPRIATIONS.—In addition to funding provided for biomass research and development under the general authority of the Secretary of Energy to conduct research and development and demonstration programs (which may also be used to carry out this title), there are also authorized to be appropriated \$49,000,000 to the Department of Agriculture for each of the fiscal years 2000 through 2005 to carry out this title.

**SEC. 108. ADMINISTRATIVE SUPPORT AND FUNDS.**

(a) IN GENERAL.—To the extent administrative support and funds are not provided by other agencies under subsection (b), the Secretary of Energy and the Secretary of Agriculture may provide such administrative support and funds of the Department of Energy and the Department of Agriculture to the Board and the Advisory Committee as are necessary to enable the Board and the Advisory Committee to carry out this title.

(b) OTHER AGENCIES.—The heads of the agencies referred to, or appointed under, paragraphs (3) and (4) of section 105(b) may, and are encouraged to, provide administrative support and funds of their respective agencies to the Board and the Advisory Committee.

**SEC. 109. REPORTS.**

For each fiscal year that funds are made available to carry out this title, the Secretary of Agriculture and the Secretary of Energy shall jointly transmit to Congress a detailed report on—

(1) the status and progress of the Initiative, including a certification from the Board that funds authorized for the Initiative are distributed and used in a manner that is consistent with the goals of the Initiative; and

(2) the general status of cooperation and research efforts carried out by each Secretary with respect to sustainable fuels, chemicals, and electricity derived from biomass, including a certification from the Board that the points of contact are funding proposals that are selected on the basis of merit, as determined by an independent panel of scientific and technical peers.

**SEC. 110. SUNSET.**

This title and the authority conferred by this title shall terminate on December 31, 2005.

**TITLE II—AUTHORIZATION OF APPROPRIATIONS FOR ETHANOL RESEARCH PILOT PLANT**

**SEC. 201. AUTHORIZATION OF APPROPRIATIONS.**

There are authorized to be appropriated to construct a Department of Agriculture corn-based ethanol research pilot plant a total of \$14,000,000 for fiscal year 2000 and subsequent fiscal years.

**ORDERS FOR THURSDAY,  
MARCH 2, 2000**

Mr. COVERDELL. Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn until the hour of 9:30 a.m. on Thursday, March 2. I further ask unanimous consent that on Thursday, immediately following the prayer, the Journal of proceedings be approved to date, the morning hour be deemed expired, the time for the two leaders be reserved for their use later in the day, and the Senate then resume debate on the pending Hatch-Mack amendment to S. 1134, the education savings account bill.

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

**PROGRAM**

Mr. COVERDELL. Mr. President, for the information of all Senators, the Senate will resume consideration of the Hatch-Mack amendment No. 2827 regarding the marriage penalty tax at 9:30 a.m. tomorrow. Following 30 minutes of debate, at approximately 10 a.m., the Senate will proceed to a vote on or in relation to the amendment.

The managers are actively working on scheduling the remaining amendments that need to be acted upon. It is possible the bill may be completed as early as tomorrow evening. Therefore, Senators can expect votes throughout the day and into the evening.

**ORDER FOR ADJOURNMENT**

Mr. COVERDELL. Mr. President, if there is no further business to come before the Senate, I now ask unanimous consent that the Senate stand in adjournment under the previous order, following the remarks of Senator WYDEN.

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

The PRESIDING OFFICER. The Senator from Oregon.

**PRESCRIPTION DRUG AFFORDABILITY**

Mr. WYDEN. Mr. President, this morning the Democratic Policy Committee had a very important hearing on the issue of prescription drug coverage under Medicare for the Nation's older people. We heard from senior citizens, we heard from pharmacists, we heard from gerontologists, extraor-

dinarily compelling testimony about why this prescription drug benefit is so important.

Frankly, I do not think there is a single Member of the Senate, whether they are a Democrat or a Republican, who would not be moved by what we heard this morning. The senior citizens, as we hear again and again in townhall meetings at home, are pointing out that they cannot afford their prescription medicines.

The pharmacists went into detail about how frustrated they are that so many of the older people lack bargaining power in the marketplace, bargaining power that can help them drive down the cost of their medicine. I thought the gerontologists we heard from this morning were very compelling in making the case of how so many of these drugs today can promote wellness and help seniors stay healthy and keep from racking up these extraordinary medical bills that are so often incurred and require hospitalization under what is called Part A of the Medicare program.

It is so important that we come together as a body to address this issue. Senator DASCHLE, in particular, mentions to me on almost a daily basis how he wants to reconcile the various bills. He wants to reach out to colleagues on the other side of the aisle. In particular, I praise my colleague, Senator SNOWE. She and I have worked for over a year on a bipartisan effort with respect to prescription drugs.

I know colleagues on the other side of the aisle are interested in this issue as well. Frankly, I think any Member of the Senate who heard what the Democratic Policy Committee heard this morning had to have been moved by how great the need is for prescription drug coverage for seniors.

One of the issues that has come up in recent days is this question of whether private insurance companies are going to be interested in this benefit and whether they are going to be willing to update their policies. We are hearing a lot of talk that maybe they are not and they are not going to come forward.

I guess we are starting to hear from the same crowd who said doctors and hospitals in the early sixties were not going to participate in the Medicare program. It is preposterous to say private insurers are not going to participate once we go forward and enact a responsible bipartisan prescription drug program for seniors under Medicare.

What the Snowe-Wyden legislation does is make it very clear the money that would be earmarked under our bipartisan bill would be made available to pick up the prescription drug portion of a senior citizen's private health insurance bill.

The Presiding Officer, who has great expertise in this area as well, knows that the vast majority of seniors have

these private policies—Medigap policies, HMO policies, a variety of private policies today.

I am absolutely convinced that when we go forward to enact this program on a bipartisan basis, as we heard in the Democratic policy session this morning, private insurance companies all over this country will tear up their existing contracts with older people and add the prescription drug program that we enact this year to their coverage. By the way, they would not be required to do it. Under our legislation and other bills, this would be voluntary for both private insurance companies and for older people.

The reason why I believe private insurance companies are going to be very eager to participate is that they will not be able to be competitive with the various other companies in an area unless they offer the benefit.

If you took a Salt Lake City, UT, or a Portland, OR, or a Denver, CO, where there are a variety of insurers, once we enact this program, seniors are going to go to private insurers and ask: Are you offering this particular benefit? Because we see the Congress has passed a law making available funds to pick up the prescription drug portion of a senior citizen's private health insurance bill.

I think all this talk about how private insurance companies are not going to be interested in offering this benefit is incredibly farfetched. While our proposal and the other good proposals that are offered are voluntary, we are already hearing from insurance companies that they are going to be very interested in offering this benefit. In fact, many of them are going to believe they have to do it in order to be competitive in their community.

I hope—I did want to be brief tonight—we can go forward in the days ahead and act on this matter as priority business before the Senate. I intend to keep coming to the floor to bring to the attention of this body cases from home and from across this country of older people who, when they are done paying their prescription drug bills, literally have only a few hundred

dollars a month to pay for their food and their rent and their utilities. It is outrageous, in a country as good and strong as ours, that we have not updated our health care system to provide this coverage.

Because I have come to the floor now 25 times in 3 months to talk about this issue, and Senator DASCHLE's effort to bring the Senate together, to reach out to colleagues on the other side of the aisle, I am asked all the time: Can America afford to cover prescription drugs for older people? My response is: We can't afford not to cover prescription drugs.

What the gerontologists told us today is that if you want, for the long-term, to promote wellness and to keep seniors healthy, make these drugs—the drugs that lower blood pressure and cholesterol—available to seniors because with them seniors will be able to stay healthy and not rack up these much larger medical bills that are incurred when they are ill.

One of the most striking examples I have seen in this discussion involves the anticoagulant drugs, the drugs that prevent strokes. It might cost \$1,000 or \$1,500 for a senior to get those drugs for a year—certainly that is expensive—but if, through drugs such as that, you can prevent stroke—which will cost upwards of \$100,000—it seems to me it makes a very clear case that we ought to be offering this benefit.

I recognize that colleagues have different views as to how to go about doing it. Several of my Democratic colleagues have bills. I do not expect to have the last word on this subject. I know colleagues on the other side of the aisle have legislation, as well. I am very honored to have been able to team up with Senator SNOWE for 15 months now in an effort to pass this prescription drug benefit on a bipartisan basis.

But let us make sure this issue does get addressed, and addressed in this Congress. Because to let this become fodder for another political season, and to have the back and forth that would go on in a political campaign, where one side blames the other side, is not productive. That is not what Senator

DASCHLE wants to have, as he tries to bring together the various approaches that have been offered by Members of the Senate. I know there are a number of Republicans who want to avoid that kind of train-wreck scenario where you do not act on this issue; instead, it just becomes the fodder for another political campaign.

What the Democratic Policy Committee heard this morning from seniors, from pharmacists, from gerontologists, ought to be compelling to every Member of this body—Democrats, Republicans, liberals, and conservatives.

Let us debate the specifics about how to go about offering this benefit, but let us make sure this issue gets done because I do not think it is right for the country to wait any longer to move forward on an issue that is so vital to health care reform.

I intend to keep coming back to the floor to address this issue. The session held by the Democratic Policy Committee was so compelling this morning that I wanted to take a couple minutes to bring it to the attention of the Senate.

I wish to make it clear that I look forward to working with all of my colleagues on a bipartisan basis. The Presiding Officer—the Senator from Utah—and I have talked about health care on a number of occasions since I have been in the Senate. He has great expertise. We are going to involve him in this cause and get it done in a bipartisan way.

I think this morning's program by the Democratic Policy Committee was another step in the right direction.

With that, Mr. President, I yield the floor.

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ADJOURNMENT UNTIL 9:30 A.M.  
TOMORROW

The PRESIDING OFFICER. Under the previous order, the Senate stands adjourned until tomorrow at 9:30 a.m.

Thereupon, the Senate, at 6:27 p.m., adjourned until Thursday, March 2, 2000, at 9:30 a.m.