

So Mr. Speaker, today we celebrate, for we have achieved something truly notable. However, the struggle for Israeli acceptance continues.

Israel's membership in WEOG is only temporary and must be reevaluated in four years. Additionally, Israel cannot participate as a WEOG member in meetings in Geneva, or on the Human Rights Committee at the United Nations. Although I have a great deal of respect for the human rights efforts of the U.N., they have been particularly unkind to Israel and it is a bitter pill to swallow to have them excluded from this committee.

This legislation, "Commending the member states of the United Nations Western European and Others Group for addressing over four decades of injustice and extending temporary membership to the state of Israel," also mentions the new hurdles that must be overcome to finally gain Israel status as a full member of the United Nations. It urges the WEOG member countries to admit Israel as permanent member, without conditions, until such time as she can play an effective part as a member of the Asian group.

Mr. Speaker, I would ask all of my colleagues to give strong consideration to co-sponsoring this legislation. It took four decades to get Israel this far; it must not take as long to reach the final goal of full membership for Israel.

I would again like to thank my friend and colleague, STEVEN ROTHMAN, for his help and leadership on this issue. I would also like to thank Vice President GORE, along with Ambassador Holbrooke, for working so hard and keeping the pressure on the WEOG member countries. A copy of the legislation follows.

Commending the member states of the United Nations Western European and Others Group for addressing over four decades of injustice and extending temporary membership in that regional bloc to the state of Israel.

Whereas Israel has played an active role in the international community and within the United Nations;

Whereas in order to be a fully participating member of the United Nations countries must serve in a regional group;

Whereas members of regional groups select member states on a rotating basis to serve on important United Nations bodies such as the Security Council and the Economic and Social Council;

Whereas Israel has been denied an opportunity to serve in the Asian States Group at the United Nations, even though it geographically belongs in that block;

Whereas the Western European And Others Group (WEOG) at the United Nations consists of Western European nations, the United States, Canada, New Zealand, Turkey, and Australia and is the only group at the United Nations that is not geographically based;

Whereas Israel was offered membership in the WEOG regional bloc at the United Nations on Friday, May 26, 2000, by the chairman of WEOG at the time, Ambassador Peter van Walsum of the Netherlands;

Whereas that offer was officially accepted by Israeli officials on Sunday, May 28, 2000; and

Whereas Israel is a democracy and an ally and friend of the United States: Now, therefore, be it

*Resolved by the House of Representatives (the Senate concurring), That the Congress—*

(1) commends the Western European and Others Group (WEOG) members for extending temporary membership to Israel;

(2) congratulates Israel on its new-found role in the United Nations;

(3) reaffirms Israel's right to be a full participating member and equal partner in the United Nations; and

(4) urges the members of WEOG to extend full and permanent membership to Israel, without conditions, until such time as Israel can serve as an effective member of the Asian States Group.

#### INTRODUCTION OF MEDICARE PRESCRIPTION DRUG ACT OF 2000

**HON. ANNA G. ESHOO**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 8, 2000

Ms. ESHOO. Mr. Speaker, when Medicare was created in 1965, seniors were more likely to undergo surgery than to use prescription drugs. Today, prescription drugs are often the preferred, and sometimes the only method of treatment for many diseases. In fact, 77 percent of all seniors take a prescription drug on a regular basis.

And yet, nearly 15 million Medicare beneficiaries don't have access to the lifesaving drugs you produce because Medicare doesn't cover them. Countless others are forced to spend an enormous portion of their modest monthly incomes on prescription drugs with 18 percent of seniors spending over \$100 a month on prescriptions.

Seniors want and need prescription drug coverage. Hence, the question before Congress is not whether we should provide a Medicare drug benefit but how to do it?

There are some in Congress who think that the way to do this is to turn the problem over to the private insurance market, but the private insurance market is pulling out from under seniors in the Medigap and Medicare+Choice markets. Others believe that we should limit how much drug companies can charge. I disagree. I understand the investment required for R&D and I believe that price controls will ultimately limit access.

I've devised what I believe is a common-sense approach that incorporates a generous, defined benefit that's easy for seniors to understand with provisions that reduce administrative inefficiencies and increase competition. The result will be a more affordable drug benefit for both beneficiaries and the Federal Government.

The bill is simple. Available to all Medicare beneficiaries, the Federal government will pay half of an individual's drug costs up to \$5,000 a year (when fully phased in). There are no deductibles and a modest premium of approximately \$44 a year. For seniors who exceed \$5,000 in drug expenditures or \$2,500 in out-of-pocket costs—the Federal Government picks up the whole tab.

What about drug costs? By allowing multiple PBM's to participate, my bill will, for the first time, introduce open competition into Medicare

and drive down prices. We know from the private marketplace that simply purchasing a large quantity of drugs does not drive down prices. Drug companies grant discounts when a PBM can show that it will increase its market share. By allowing multiple PBMs, my bill increases competition, lowers prices and provides greater consumer choice.

We also removed administration of the program from HCFA. The healthcare system has evolved rapidly, and regrettably HCFA has not kept pace. HCFA lacks the expertise to run a benefit that relies on private sector competition to control costs. Fortunately, there is another agency that has expertise interacting with private sector health plans, and has proven that it can administer benefits effectively and efficiently with a minimum of bureaucracy. It's the Office of Personnel Management (OPM) which runs the widely acclaimed Federal Employee Health Benefit (FEHB) program. Under OPM's leadership, I'm confident that an efficient and effective competitive benefit can be integrated successfully into the Medicare program.

Congress must enact a Medicare drug benefit this year. For our Nation's seniors, prescription drugs are not a luxury. During these times of historic prosperity and strength, there is absolutely no reason that we should force seniors to make between buying prescription drugs or groceries. In introduction today I urge all of my colleagues to give careful consideration to my bill. It provides a real answer for seniors without price controls and without threatening innovation.

#### TRIBUTE TO FATHER STEPHEN PATRICK (PAT) WISNESKE ON THE OCCASION OF THE GOLDEN JUBILEE OF HIS ORDINATION

**HON. BART STUPAK**

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 8, 2000

Mr. STUPAK. Mr. Speaker, today I honor a most remarkable individual—a dear friend, a counselor, a shepherd, a man of the people and a man of God. I pay personal and heartfelt tribute to Father Stephen Patrick Wisneske, the pastor of Holy Spirit Church of Menominee, MI, on the occasion of the 50th anniversary of his ordination, his golden jubilee.

Father Pat came to Menominee 28 years ago. He came to town at a particularly difficult time for the local Catholic faithful, who were being reorganized from the five traditional congregations—including the old settlement alignments of the French church, the Irish church, the Polish church, and the German Church—to three new congregations, based on neighborhood and proximity. The restructuring made sense in terms of reducing the infrastructure that church members needed to support, but it presented real challenges in forging new congregational bonds and establishing new ministries. Father Pat became pastor of the newly structured Holy Spirit Church.

He brought years of service in other northern Michigan communities to his new task. Born in 1922, Father Pat was raised in a Catholic home, attended Catholic school for