

ought to allow some of those costs to shift to the program itself.

After all, that program is willing to pay for the most costly procedures if prescribed by a physician, but it is not willing to pay for procedures under the direction of a pharmacist. This is absolutely irrational. The cost is greatly out of proportion and is quite outrageous. We will pay for institutional care by allowing a senior to spend down her resources until she gets nursing home care paid for entirely by Medicaid, but we will not pay for a drug benefit that will keep her out of a nursing home altogether.

Seniors cannot possibly take this much longer. I cannot believe that the seniors who have saved colas and social security will not force prescription drugs into their Medicare. If we are going to change how we treat people from invasive procedures and save the taxpayer money, then it seems to me we have a moral obligation to shift some of that savings to seniors who are on limited incomes and cannot possibly continue to shoulder the burden they are shouldering now.

In the report done for my own district, we found that my seniors were paying 137 percent more than preferred customers. An example, and that is six times, by the way, more than they pay for other consumer goods, an example was Synthroid, a thyroid hormone drug where the drug to the preferred customer is \$1.75 a dose, and \$31.43 a dose to the senior.

The gentleman's bill, minimally, must be passed, and it must move us on to making prescription drugs a benefit of Medicare.

Mr. ALLEN. Mr. Speaker, I thank the gentlewoman, and I will return again on another occasion to the gentlewoman from Texas (Ms. JACKSON-LEE).

I want to thank all Members who have been here tonight.

Mr. FROST. Mr. Speaker, I rise today in support of the Prescription Drug Fairness for Seniors Act. This issue is one of great concern to a number of my constituents who are Medicare beneficiaries who use one third of all prescription drugs in the United States.

On average, seniors pay nearly twice as much as the drug companies' favored customers, such as the federal government and large HMOs and 37% of our nation's seniors do not have prescription drug coverage. In my district in Texas alone, many seniors are forced to pay up to 109% or more for the most commonly used prescription drugs. It is time to show our nation's seniors that their health is more important than drug company profits.

I have had a great number of constituents contact me personally to share their concerns for those seniors that are literally having to choose between buying food and buying their prescriptions. An even greater number of individuals endanger their lives every day by not taking the required dosage or only filling some of their prescription medications since they can not afford to meet all of their medical needs.

It is high time that the U.S. Congress address the issue of a Medicare benefit for pre-

scription drugs. How much longer are we going to allow the pharmaceutical industry, which is currently enjoying record profits, to dictate the health care choices of our senior citizens?

I support H.R. 664, the Prescription Drug Fairness for Seniors Act because it allows pharmacies to purchase drugs for Medicare beneficiaries at the best price charged to the federal government though programs such as the VA or Medicaid. This legislation would reduce prescription drug prices for seniors by more than 40%, and without imposing price controls, but putting an end to price discrimination.

It is time to show our nation's seniors that their health is more important than drug company profits.

GENERAL LEAVE

Mr. ALLEN. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on the subject of my special order today.

The SPEAKER pro tempore (Mr. SESSIONS). Is there objection to the request of the gentleman from Maine?

There was no objection.

TRIBUTE TO DR. LOIS MOORE

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Texas (Ms. JACKSON-LEE) is recognized for 5 minutes.

EXPRESSING SUPPORT FOR H.R. 664, LEGISLATION PROVIDING FOR DISCOUNTS ON PRESCRIPTION DRUGS TO SENIOR CITIZENS

Ms. JACKSON-LEE of Texas. Mr. Speaker, I thank the gentleman from Maine (Mr. ALLEN) for his kindness in reaching out to me for time.

I am going to take just a moment, Mr. Speaker, before I begin a tribute to Dr. Lois Moore, because it is absolutely appropriate to acknowledge my support for H.R. 664, the legislation that deals with a discount of prescription drugs for senior citizens.

It is interesting that we find it difficult to get such legislation to the floor of the House. I am very pleased that I am engaging in a study in my district with pharmacies, and I was very glad to hear the gentleman from Maine (Mr. ALLEN) say that this is not an issue dealing with pharmacies. In fact, it is with our large pharmaceutical companies.

In fact, there will be processes under H.R. 664 where the burden would not be heavily on the pharmacies, but it is important that just like they give big discounts to hospitals and HMOs, that they give discounts on prescription drugs as well to our senior citizens.

When I traveled in my district and visited five senior citizen sites, every one of them said, I have to choose between eating, paying light bills, heat bills, and getting my prescription drugs, as we well know, hearing from my mother that there is an enormous amount of prescription drugs, because we are living longer, that many seniors have to take.

It keeps them healthy. It keeps them happy. It keeps them able to do the things that they would like to do. Why should we penalize them? I hope that we can move H.R. 664 to the floor very quickly.

Mr. Speaker, let me acknowledge the purpose of my special order this evening is a tribute to Dr. Lois Moore, a selfless leader in our community who has served the Harris County Hospital District, and we will be losing her expertise.

She is known in our community in Harris County, in Houston, Texas, as one of its greatest leaders in the health care community. Her leadership, expertise, commitment, and presence will be truly missed at the hospital district. However, we know that she will continue on to service.

Under her leadership as the President and Chief Executive Officer of the Harris County Hospital District, the hospital district was named among the top 100 hospitals in the United States in 1994 and again in 1995 by Modern Health Care Magazine.

After graduation from Prairie View A&M School of Nursing 35 years ago, Moore began her public health care service in the Jefferson Davis Hospital emergency room. She soon became the emergency center charge nurse.

Through the 1960s and 1970s she moved from evening shift nursing supervisor to assistant director of nursing at Ben Taub hospital. In 1977 she was named administrator at Jefferson Davis Hospital. During this time she earned a Bachelor of Science degree in nursing and a Master of Education degree.

Moore was appointed chief operating officer for the Harris County Hospital District in 1987, and on February 28, 1999, the Board of Managers of the Hospital District appointed her president and CEO. She has, therefore, served us for 10 years in that capacity.

As president and CEO of the Harris County Hospital District, the 6th largest inpatient health care system in the United States, Moore oversaw three hospitals, 11 community health centers, one freestanding HIV-AIDS treatment center, and eight school-based clinics, two very important things.

School-based clinics, they have been proven to be successful in preventative health care, and 11 community health centers, they also have been proven to be successful in preventing disease, in helping people to understand health care.

With the recent statistics that have suggested to us that it has been very difficult for minorities, Hispanics, African Americans, and Asians, as well, to access health care in America, Lois Moore has been a shining star to ensure that her community gets good health care. She has worked with a very good board. We are looking forward to the fact that the board will continue her leadership and her message, and that they will select a person of quality like Lois Moore.

The district has had an annual budget of approximately \$528 million with more than 50,000 employees. Ben Taub General Hospital and Lyndon B. Johnson General Hospital treat 77 percent of Houston's serious trauma, and I found it very, very exciting to see Ben Taub on one of our major news network shows, I believe Nightline, citing it as one of the best trauma care hospitals in the Nation, maybe the world.

I would simply say, Mr. Speaker, that Lois Moore has served her community as a stellar leader. I am so proud to call Lois Moore my friend. Ms. Moore has testified before national committees on health care reform, served with Governor Ann Richard's Task Force on Health Care, and is a frequent speaker on public health issues and health care reform.

She has a husband by the name of Hard, a daughter Yolanda, son-in-law Mike Williams, and two granddaughters Kendra and Jasmine.

Let me simply close, Mr. Speaker, by saying that all of the Eighteenth Congressional District and I believe all of the State of Texas salutes Lois Moore, our past president of the Harris County Hospital District, a great humanitarian, a great Houstonian, Texan, and great American.

Mr. Speaker, it is my honor to speak on behalf of Lois Jean Moore, a person who exemplifies what the true meaning of commitment, dedication, strength, service and selflessness is. Not only has the Harris County Hospital District lost one of its greatest leaders but also our entire health care community. Her leadership, expertise, commitment and presence will truly be missed.

Under her leadership as the President and Chief Executive Officer of the Harris County Hospital District, the Hospital District was named among the Top 100 Hospitals in the United States in 1994 and again in 1995 by *Modern Healthcare* magazine.

After graduation from Prairie View A&M School of Nursing 35 years ago, Moore began her public health care service in the Jefferson Davis Hospital emergency room; she soon became the emergency center charge nurse. Through the 1960's and 1970's, she moved from evening shift nursing supervisor to assistant director of nursing at Ben Taub Hospital. In 1977, she was named administrator of Jefferson Davis Hospital. During this time, she earned a Bachelor of Science degree in Nursing and a Master of Education degree. Moore was appointed Chief Operating Officer for the Harris County Hospital District in 1987. On February 28, 1989, the Board of Managers of the Hospital District appointed her President and CEO.

As President and CEO of the Harris County Hospital District, the sixth largest inpatient health care system in the U.S., Moore oversaw three hospitals, 11 community health centers, one free-standing HIV/AIDS treatment center, and eight school-based clinics. The District has an annual budget of approximately \$528 million with more than 50,000 employees. Ben Taub General Hospital and Lyndon B. Johnson General Hospital treat 77% of Houston's serious trauma. Under Moore's leadership the Hospital District's programs in outpatient care and disease prevention and

health promotion have been enhanced and expanded. New outreach programs in the community health centers now provide mammography, diabetes screening, immunizations, early disease detection, and health care for the homeless.

As one of the nation's top public health care administrators, Mrs. Moore never loses sight of the Hospital District's mission-quality health care for the underserved. In a changing health care environment, she has managed, year after year, to balance compassion with fiscal prudence. Under Moore's leadership, the district, which has the lowest per capita tax rate of all Texas hospital districts, has nearly doubled its non-tax revenue.

In addition to her responsibilities at the Hospital District, Lois Moore also serves her community selflessly. She serves on numerous boards including the American Red Cross, March of Dimes, United Way, Texas Association of Public and Non-Profit Hospitals, and the National Association of Public Hospitals. She is a Fellow of the American College of Health Care Executives and is included in *Who's Who in America*. Mrs. Moore was awarded in 1994 Tree of Life Award from the Jewish National Fund. In February, 1995, she was named co-recipient of the Houston Area Healthcare Coalition's Healthcare Provider Award. In April of 1996 she was awarded an honorary Doctor of Humane Letters degree from Our Lady of the Lake University of San Antonio, Texas.

Mrs. Moore has testified before national committees on healthcare reform, served on Governor Ann Richard's Task Force on Health Care, and is a frequent speaker on public health issues and health care reform.

With all of this on her plate, Mrs. Moore also found the time to care for her loving family which consists of her husband Hard, daughter Yolanda, son-in-law Mike Williams and two granddaughters, Kendra and Jasmine.

I am stating these things so that they will be inscribed into the CONGRESSIONAL RECORD but her deeds will forever be remembered by those who will try to fill the shoes of this great woman. Congress and the 18th District of Texas is proud to honor Mrs. Lois Moore and we will truly miss her great service.

SETTING THE RECORD STRAIGHT ON THE POLITICS OF THE CENSUS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New York (Mrs. MALONEY) is recognized for 5 minutes.

Mrs. MALONEY of New York. Mr. Speaker, last week Democrats were accused of trying to place politics in the 2000 Census. A Dear Colleague letter was sent out which implied that the Democratic Party, organized labor, and the Census Bureau were involved in a conspiracy to somehow undermine Republicans through the partnership programs being organized to support the 2000 Census.

This claim would be laughable if it were not so destructive. The decennial Census is a national civic ritual. In order to be successful, partnerships with literally thousands of organizations must be established. The Census Bureau is working hard to do that, regardless of the political leanings of any

group. From Fortune 500 companies to the AARP to the NAACP to the National League of Cities, organizational support for the largest national peacetime mobilization in our Nation's history is essential to the success of the 2000 Census.

The claim that it is Democrats who are politicizing the Census is also ironic, coming as it does almost 2 years to the day after the Republican memo which began the blatant politics in the Census.

So I rise today first to set the record straight and share with the Members some of the history of the Republican attempts to place politics in the Census, but also to commend some recent moves by the Speaker which indicate that a more bipartisan spirit may be prevailing over this issue.

On May 20, 1997, 2 years ago, the GOP sent a memo to Republican State chairs. In it, the Chair of the Republican National Committee said that the 2000 Census was, and I quote, "an issue of unusual importance to the future of the Republican Party," and that at stake is "our GOP majority in the House."

In that memo was nothing about the importance of counting all Americans, regardless of race, age, or income; nothing about the impact of the Census on the lives of real people: about how State and local governments use Census information to plan schools and highways, about how the Federal government uses it to distribute funds for health care and other programs; and nothing about how businesses use it in making their economic and marketing plans. Instead, we find only cynical, partisan rhetoric about how to make sure the 2000 Census benefits Republicans.

That was just the beginning. In June of 1997 Republicans tried to ban statistical methods for the Census on the disaster relief bill for the flood victims in the Midwest. Then in September of 1997 the majority put language in the Commerce-Justice-State appropriations bill to ban the use of statistical methods.

They tried again in 1998 to kill the use of statistical methods and failed. Then they turned to the courts. In January they lost that battle, too, when the Supreme Court ruled that the Census Bureau could not use modern scientific methods for apportionment, but they are required to use it for everything else, if feasible. The majority has done everything it can to prevent the most accurate Census possible in 2000.

□ 1930

They have recently begun throwing up legislative obstacles to an accurate census here in the House and have also begun a campaign at the State level to prevent the use of accurate numbers.

The 1990 census had an error rate of over 10 percent. There were 8.4 million missed and 4.4 million people that were counted twice. The 1990 census missed one in 10 African-American males, one