

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. PEASE) is recognized for 5 minutes.

(Mr. PEASE addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

TRIBUTE TO THE LATE HERMAN B. WELLS, LIVING LEGEND OF INDIANA HISTORY

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Indiana (Ms. CARSON) is recognized for 5 minutes.

Ms. CARSON. Mr. Speaker, last month Indiana lost a favorite son of great distinction, a living legend of Indiana history. I rise to acquaint the larger world with Dr. Herman B. Wells of Indiana University who died at the age of 97.

The standard details of his life mark great attainment: Economics professor, then Dean of the Business School, he became President of the University in 1937, and served until 1962. Then, retiring not at all, he continued his service as Chancellor of the University until his death. Were that all there was, he would be worthy of great honor.

But there was more, marking his true greatness: he gave himself to the University and to its many thousands of students, leading learning and leading change in important ways. He protected controversial research; he developed a world-class school of music; he used his personal power to roll back racial discrimination at the campus; he helped the school to integrate its basketball team; and, friend and counselor to generations of students, with his counsel he helped make Indiana and the Nation a better place.

In our loss of Herman Wells, Indiana has lost a towering figure of American higher education.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Washington (Mr. METCALF) is recognized for 5 minutes.

(Mr. METCALF addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Guam (Mr. UNDERWOOD) is recognized for 5 minutes.

(Mr. UNDERWOOD addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

100TH ANNIVERSARY OF UNITED STATES SUBMARINE SERVICE AND VETERANS HEPATITIS C EPIDEMIC

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

Mrs. KELLY. Mr. Speaker, I rise to honor men who bravely served the

United States in our most trying times as a Nation. Today marks the 100th anniversary of the U.S. submarine force. Will Rogers once said, "We can't all be heroes because somebody has to sit on the curb and clap as they go by. Today we applaud the heroes and we honor fellow submariners who remain on eternal patrol. May we never forget them and their brave deeds." Those are the words of Mr. Rogers.

The thoughts of Will Rogers live with us today. During the most serious challenges our Nation has faced, the men of the submarine service did their jobs above and beyond the call of duty. They were essential to creating victory in war and remain essential to keeping America strong in peace. War fought under the sea developed its own physics and harsh realities completely different from the experiences of any soldier who came before them. These men placed complete and total trust in their skippers and their skippers had to have the same faith in their men. During World War II, the price they paid for their successes was heavy. The submarine service carried the highest mortality rate of any U.S. service, more than a 20 percent loss of life. However, one has only to look at the statistics to see how effective our submariners really were. With only 1.6 percent of all Navy personnel, the submarine service sank over 55 percent of all Japanese ships sunk in the war, including one-third of all Japanese Men-of-War.

President Roosevelt when he was secretly told of the success of our submariners said, "I can only echo the words of Winston Churchill: 'Never have so many owed so much to so few.'" Those lost on submarines in the line of duty for their country will never be forgotten. We must not forget those who still serve in the silent service. Happy birthday to the U.S. submarine force.

Mr. Speaker, I also want to speak about something else that is important to all veterans in this Nation. I want to speak about what the Department of Veterans Affairs has described as an epidemic. I am talking about the staggeringly high infection rates of hepatitis C among our country's veterans population.

□ 1915

Hepatitis C is a fatal disease that can incubate for over 30 years before any symptoms occur. Over 70 percent of those Americans infected with Hepatitis-C are unaware that they even carry the virus. Treatment and testing are both available through the Veterans Administration for any veteran who believes that he or she is at risk.

I am told that my area of the country has a 28 percent infection rate among veterans, while the general population experiences a 1.8 percent infection rate. I represent the greater New York area. With a 28 percent infection rate, I call upon our veterans to be aware of this.

In my hand I hold a very simple home test kit for Hepatitis-C, and I am calling on all of our veterans to try to get tested. The veterans can get one of these test kits if they go to a VA hospital or if they contact the American Liver Foundation at 1-800-GO-LIVER for information about these testing programs.

Testing is very easy. It is a four-step process. It is very, very simple. First you pick up the phone and you get a personal ID number, then you take your sample, it is only one drop of blood, and you mail it in a pre-paid envelope. Ten days later you call for a completely confidential result.

It is important that every veteran who has been exposed to any blood-to-blood contact pick up one of these Hepatitis-C check kits and call 1-800-GO-LIVER or go to their VA hospital, because it is important, especially in our greater New York area, that the veterans in that area get tested. Please get tested, especially if you are a veteran, before the symptoms of severe liver disease begin to show themselves. By the time that they do, it is almost too late.

LOWERING THE COST OF PRESCRIPTION DRUGS IN AMERICA

The SPEAKER pro tempore (Mr. SHERWOOD). Under a previous order of the House, the gentleman from Minnesota (Mr. GUTKNECHT) is recognized for 5 minutes.

Mr. GUTKNECHT. Mr. Speaker, I rise tonight to talk about an important issue that more and more Americans are concerned about, and that is the high cost of prescription drugs here in the United States. I want to show a chart that reflects just how severe this problem is.

This chart talks about one of the most commonly prescribed drugs in the United States, called Prilosec. It is a drug that deals with a gastrointestinal problem of too much acid. If you buy that drug, a 30-day supply in Minneapolis, Minnesota, it will sell for about \$99.95. Now, if you happen to be vacationing in Manitoba, in Winnipeg, Manitoba, you take exactly that same prescription into a prescription supply of some kind, a drugstore, you will be able to buy that drug for \$50.88, exactly the same drug, made in exactly the same plant, same dosage, everything. But, interestingly enough, if you take that same prescription into a drugstore in Guadalajara, Mexico, you can buy that drug for \$17.50.

Mr. Speaker, this is the day and age of NAFTA, the North American Free Trade Agreement. Goods and services are supposed to be able to go across our borders freely. That is true of almost every other product, except drugs.

We are not alone in saying that prescription drugs have gone up a lot. Our own estimates by our own government say that over the last 4 years, prescription drugs here in the United States have gone up 56 percent. Last year

alone they went up 16 percent. Talking about these differences, just between Minnesota and Canada, one of the HMOs in Minneapolis estimates if they could simply buy their drugs for their HMO Members, subscribers, in Manitoba, they could save over \$30 million a year for their subscribers. We are talking about real money.

Mr. Speaker, it is clear that we need to do something. The Canadian government itself has done its own study, and this is the latest study comparing drug prices in the United States to drug prices in Canada. Again, this is for exactly the same drugs. They estimate the last year that they had the figures that the differences are over 50 percent, the difference between the drug prices in Canada and Mexico.

There is another group out of Utah, the Life Extension Foundation; and every Member, if they will contact my office, we will send them one of these brochures. They have done a beautiful job of differentiating the price differences between us and Europe, for example.

Let me read some differences in drug prices. A very commonly prescribed drug, Premarin, in the United States two capsules will sell for \$14.98 on average. In Europe, they pay only \$4.25. Synthroid, another commonly prescribed drug, the United States price, \$13.84. In Europe they can buy it for \$2.95 equivalent. Coumadin, this is a drug that my dad takes, a blood thinner, in the United States that drug sells for \$30.25. In the European market it sells for \$2.85. Mr. Speaker, this goes on and on and on.

Now, I believe the drug companies have to be allowed to make a reasonable profit. We understand that they have to have reasonable profits if they are going to plow it back into research. But the unvarnished truth is that American consumers are paying most of the freight for the research being done; and worse than that, we are paying for most of the profit.

There is an answer. I have a bill, H.R. 3240, which would allow importation of drugs that are approved by the FDA.

Mr. Speaker, it is clear that we should do more to make prescription drugs available to seniors who cannot afford them. But we should not be foolish enough to do nothing to make those drugs more affordable for all Americans. We should not allow our own FDA to stand between Americans and lower drug prices.

I hope all Members will join me in supporting and cosponsoring H.R. 3240.

Once again, Mr. Speaker, I remind Members if they would like a copy of this brochure, they simply have to call my office. We will send it out to them. It explains better than I can why it is important that we allow markets and competition to bring drug prices into line here in the United States.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from North Carolina (Mr. JONES) is recognized for 5 minutes.

(Mr. JONES of North Carolina addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

PROJECT EXILE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 1999, the gentleman from Maryland (Mr. EHRLICH) is recognized for 60 minutes as the designee of the majority leader.

Mr. EHRLICH. Mr. Speaker, my good colleague, the gentleman from Colorado (Mr. TANCREDI) will join me in this special order. I welcome my colleague.

Mr. TANCREDI. I thank the gentleman. It is a pleasure to be here.

Mr. EHRLICH. Mr. Speaker, we have a very important topic this evening, Project Exile, a bill that passed on the floor of the House today by an overwhelming majority on the Suspension Calendar, something I know that pleases the gentleman, pleases myself, and should please our respective constituents and the people of the United States of America.

My personal experience with this program, Mr. Speaker, began about a year and a half ago when a member of my staff came in to me and expressed frustration about my frustration concerning the fact that on gun control debates, we always talk by one another. We could not get anything done, and the PACs and interest groups raised money, and that helps politically, but it does not hit the bottom line, which is bad guys with guns.

I heard about Project Exile, and he said, and this was a former Baltimore county detective, and he said I am going to go find out about this program. I said, Go for it. We found out about Project Exile and took a bipartisan group of Maryland State legislators to Richmond, Virginia, and talked to the attorneys down there, and talked to the street cops; and we talked to the Federal prosecutor and the business community and NAACP. We talked to everybody, and, you know what? It works. It works, because it is common sense.

This is an interesting initiative, because rarely do you hear the NRA and handgun control supporting the same gun-related initiative. It is certainly working in Richmond, it works in Virginia, it works in New York, it works in Texas, and now hopefully around the country, given what we passed on this floor today.

I also heard during the course of the debate today some unfortunate mischaracterizations from the minority party. The two that really came to mind was, one, who supports this program. The observation was made that this is an NRA initiative. It is only the NRA. Of course, as I just said, it is also supported by the handgun folks, handgun control. It is the right and left coming together to get something done for a change.

Finally, the representation was made that this money could be wasted on all sorts of frivolous activities, and the fact is the bill specifies how the money can be used with respect to police, prosecutors, courts, probation officers, the juvenile justice system, prison expansion, criminal history, records retention, case management programs, innovation, crime control, the bottom line.

I personally want to congratulate the gentleman from Florida (Mr. MCCOLLUM) who has been a great leader in this effort, who brought this issue to the national limelight, in conjunction with Governor Gilmore and other members of our conference. I truly believe that this is a logical follow-up to Truth in Sentencing, another issue initiative initiated by the gentleman from Florida (Mr. MCCOLLUM) some years ago.

Mr. Speaker, I want to recognize my colleague from Colorado, I know who has some salient observations to make about this common sense approach that targets gun-toting felons, people who should not have guns in the first place, and, when caught, sentences them, exiles them to either Federal time if the State status is not in place, or State time if the State legislatures have really gotten on board with respect to Project Exile.

I recognize my colleague.

Mr. TANCREDI. Mr. Speaker, I thank the gentleman; and I appreciate the opportunity to share a few thoughts about this.

In many ways our experience was the same in terms of how we came to know this issue. I was reading a newspaper article out of Virginia where they had arrested a suspect for possession of narcotics. The amount of narcotics in the possession of this individual was quite significant. It was not just a baggy; it was like a truckload.

In the past, any time that this kind of thing had happened before, any time that an individual with this much narcotics in his possession had been arrested, they had found a weapon with him. So they kept looking, because the police naturally assumed that he had to have one. When they did not find it initially, they kept pressing. Then they kept pressing him as to where it was, essentially why he did not have it. This went on for hours.

Finally, the suspect, frustrated at being pummeled by the police, figuratively speaking, said, "It is 5 years, man. It is 5 years, man." What he was, of course, saying to the policemen was that he had gotten the message, the message of Project Exile. If he had been caught with a firearm in the commission of the crime, in this case transportation of illegal narcotics, he would get a minimum of 5 years tacked on to anything else that he ended up with.

Now, here was a, I cannot say convicted, but a suspect, someone who had been arrested, explaining it essentially to the rest of the world as to why he did not have a firearm in his possession.