

(Docket Number TB-99-07) (RIN0581-AB75), received April 17, 2000; to the Committee on Agriculture, Nutrition, and Forestry.

EC-8647. A communication from the Commodity Futures Trading Commission, transmitting, pursuant to law, the report of a rule entitled "Minimum Financial Requirements for Futures Commission Merchants and Introducing Brokers" (RIN3038-AB51), received April 20, 2000; to the Committee on Agriculture, Nutrition, and Forestry.

EC-8648. A communication from the Farm Credit Administration transmitting, pursuant to law, the report of a rule entitled "Loan Policies and Operations; Participations" (RIN3052-AB87), received April 17, 2000; to the Committee on Agriculture, Nutrition, and Forestry.

## REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Mr. HELMS, from the Committee on Foreign Relations, with an amendment in the nature of a substitute and with a preamble:

S. Res. 272: A resolution expressing the sense of the Senate that the United States should remain actively engaged in southeastern Europe to promote long-term peace, stability, and prosperity; continue to vigorously oppose the brutal regime of Slobodan Milosevic while supporting the efforts of the democratic opposition; and fully implement the Stability Pact.

By Mr. HELMS, from the Committee on Foreign Relations, without amendment and with an amended preamble:

S. Con. Res. 98: A concurrent resolution urging compliance with the Hague Convention on the Civil Aspects of International Child Abduction.

## INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Mr. FEINGOLD (for himself and Mr. LEVIN):

S. 2463. A bill to institute a moratorium on the imposition of the death penalty at the Federal and State level until a National Commission on the Death Penalty studies its use and policies ensuring justice, fairness, and due process are implemented; to the Committee on the Judiciary.

By Mr. GORTON:

S. 2464. A bill to amend the Robinson-Patman Antidiscrimination Act to protect American consumers from foreign drug price discrimination; to the Committee on the Judiciary.

By Mr. WELLSTONE:

S. 2465. A bill to amend the Internal Revenue Code of 1986 to deny tax benefits for research conducted by pharmaceutical companies where United States consumers pay higher prices for the products of that research than consumers in certain other countries; to the Committee on Finance.

By Mr. GORTON:

S. 2466. A bill to require the United States Trade Representative to enter into negotiations to eliminate price controls imposed by certain foreign countries on prescription drugs; to the Committee on Finance.

By Mr. SPECTER:

S. 2467. A bill to suspend for 3 years the duty on triazamate; to the Committee on Finance.

By Mr. SPECTER:

S. 2468. A bill to suspend for 3 years the duty on 2, 6-dichlorotoluene; to the Committee on Finance.

By Mr. SPECTER:

S. 2469. A bill to suspend for 3 years the duty on 3-Amino-3-methyl-1-pentyne; to the Committee on Finance.

By Mr. SPECTER:

S. 2470. A bill to suspend for 3 years the duty on fenbuconazole; to the Committee on Finance.

By Mr. SPECTER:

S. 2471. A bill to suspend for 3 years the duty on methoxyfenozide; to the Committee on Finance.

By Mr. SHELBY:

S. 2472. A bill to amend the Migratory Bird Treaty Act to restore certain penalties under the Act; to the Committee on Environment and Public Works.

By Mr. GRASSLEY:

S. 2473. A bill to strengthen and enhance the role of community antidrug coalitions by providing for the establishment of a National Community Antidrug Coalition Institute; to the Committee on the Judiciary.

By Ms. SNOWE (for herself and Mr. SESSIONS):

S. 2474. A bill to amend title 10, United States Code, to improve the achievement of cost-effectiveness results from the decision-making on selections between public workforces and private workforces for the performance of a Department of Defense function; to the Committee on Armed Services.

## SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. LOTT (for himself and Mr. DASCHLE):

S. Res. 297. A resolution to authorize testimony and legal representation in *Martin A. Lopow v. William J. Henderson*; considered and agreed to.

## STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. FEINGOLD (for himself and Mr. LEVIN):

S. 2463. A bill to institute a moratorium on the imposition of the death penalty at the Federal and State level until a National Commission on the Death Penalty studies its use and policies ensuring justice, fairness, and due process are implemented; to the Committee on the Judiciary.

### NATIONAL DEATH PENALTY MORATORIUM ACT OF 2000

Mr. FEINGOLD. Mr. President, I rise today to introduce the National Death Penalty Moratorium Act of 2000. This bill would place an immediate pause on executions in the United States while a national, blue ribbon commission reviews the administration of the death penalty. Before one more execution is carried out, jurisdictions that impose the death penalty have an obligation to ensure that the sentence of death will be imposed with justice, fairness, and due process. I am pleased that my distinguished colleague from Michigan, Senator LEVIN, has joined me as a cosponsor of this important initiative.

If a particular aircraft crashed one out of every eight flights, Congress would act immediately to ground it. But as New York public defender Kevin

Doyle says in the book, *Actual Innocence*, that is about what is happening now with the death penalty in this country. Since the reinstatement of the modern death penalty, 87 people have been freed from death row because they were later proven innocent. That is a demonstrated error rate of 1 innocent person for every 7 persons executed. When the consequences are life and death, we need to demand the same standard for our system of justice as we would for our airlines.

Both supporters and opponents of the death penalty should be concerned about the flaws in the system by which we impose sentences of death. More than 3,600 inmates sit on State and Federal death rows around the country, while it becomes increasingly clear that innocent people are being put to death.

A 1987 study found that between 1900 and 1985, 350 people convicted of capital crimes in the United States were innocent of the crimes charged. Some escaped execution by minutes. Regrettably, according to researchers Radelet and Bedau, 23 had their lives taken from them in error.

In Illinois, since 1973, 13 innocent people have been freed from death row in the time that 12 were executed. Governor George Ryan, a supporter of the death penalty, has done two things in response: He has effectively imposed a moratorium on executions and established a blue ribbon commission to review the administration of capital punishment in Illinois. Governor Ryan and I are from different political parties, but we both recognize that the system by which we impose the death penalty is broken.

Modern DNA testing of forensic evidence led to the exoneration of 5 of the 13 innocents freed from Illinois' death row and 8 of the 87 men and women who have been freed from death row nationwide since the 1970's. But Illinois and New York are the only states that currently provide some measure of access to DNA testing for death row inmates. My distinguished colleague from Vermont, Senator LEAHY, has introduced a bill, the Innocence Protection Act, of which I am a co-sponsor, that would ensure access to DNA testing for all inmates on death row in the Federal system and the 38 States that impose the death penalty. That bill is an important initiative to help ensure that innocents are not condemned to death. I hope my colleagues will join Senator LEAHY in moving this bill forward.

But, as Governor Ryan and others have recognized, flaws in our system unfortunately go well beyond access to DNA testing. As Barry Scheck, Peter Neufeld and Jim Dwyer note in their book, *"Actual Innocence,"*

Sometimes eyewitnesses make mistakes. Snitches tell lies. Confessions are coerced or fabricated. Racism trumps truth. Lab tests are rigged. Defense lawyers sleep.

Indeed, Scheck and Neufeld note that eyewitness error is the single most important cause of wrongful convictions.

As important as DNA testing is, it is only the first step in addressing the host of problems in the administration of capital punishment.

It is time for the Congress to take the lead and declare once and for all that it is unacceptable to execute an innocent man or woman. It is a central pillar of our criminal justice system that it is better that many guilty people go free than that one innocent should suffer. Sadly, history has demonstrated that time and again, America has brought innocence itself to the bar and condemned it to die. That history now demonstrates that even in America, innocence itself has provided no security from the ultimate punishment.

Most insidiously, the ghosts of institutional racism still haunt our courthouses. They intrude when lawyers select jurors, during the presentation of evidence, when the prosecutor contrasts the race of the victim and defendant, and when juries deliberate. The evidence mounts that the United States applies the death penalty differently to people of different races.

The numbers tell the story: Although African-Americans constitute only 13 percent of the American population, since the Supreme Court reinstated the death penalty in 1976, African-Americans account for 35 percent of those executed, 43 percent of those who wait on death row nationwide, and 67 percent of those who wait on death row in the Federal system. Although only 50 percent of murder victims are white, fully 84 percent of the victims in death penalty cases were white. Since 1976, America has executed 11 whites for killing an African-American, but has executed 144 African-Americans for killing a white.

Governor Ryan and Illinois serve as a model for the Congress and the Nation. The flaws in the Illinois criminal justice system are not unique. Problems like convicting the innocent, racial disparities in the application of the death penalty, and inadequacy of defense counsel have plagued the administration of capital punishment across the Nation. That is why we need a national review of the death penalty and a suspension of executions until we can be sure that death row inmates across the country have been given the full protections of justice, fairness, and due process.

Governor Ryan is not alone in questioning the state of the death penalty. In the last few months, people of all political stripes have been stepping forward to say there is a problem and it is time to do something about it.

Columnist George Will recently wrote that serious defects exist in the criminal justice system by which we impose capital punishment. In a recent column in *The Washington Post*, George Will wrote that accounts of the wrongly convicted compel the conclusion that "many innocent people are in prison, and some innocent people have been executed." He also wrote that

even though he continues to believe that capital punishment may be a deterrent to crime, it can only be an effective deterrent if the criminal justice system operates properly to convict and sentence those who actually committed the offense, not innocent people.

The Reverend Pat Robertson, a founder of the Christian Coalition and a long-time supporter of the death penalty, has also recognized that something is terribly amiss in the administration of the death penalty. At a recent conference at the College of William and Mary, Reverend Robertson noted that the death penalty has been administered in a way that discriminates against minorities and the poor who cannot afford high-priced defense attorneys. Reverend Robertson said, "these are all reasons to at least slow down." He also said, "I think a moratorium would indeed be very appropriate."

Around the country, other State and local legislative bodies have also urged pause and reflection. At least 17 city and county governments have now passed resolutions supporting a moratorium on executions. And resolutions have been offered in the legislatures of several states, including Alabama, Maryland, New Jersey, Oklahoma, Pennsylvania and Washington state. In 1997, the American Bar Association adopted a resolution calling for a nationwide moratorium on executions. Recently, the U.S. Catholic Conference, the Union of American Hebrew Congregations and a number of other religious organizations called on the President to suspend the scheduling of executions and initiate a review of the administration of capital punishment at the Federal level. These local governments and organizations have recognized that a little time and a little reflection are not much to ask when the lives of innocent people may hang in the balance.

Congress, too, should recognize that a little time and reflection are not too much to ask. That is why I ask my colleagues to support the bill I introduce today. This bill simply calls on the Federal Government and all States that impose the death penalty to suspend executions while a national commission reviews the administration of the death penalty. The Commission would study all matters relating to the administration of the death penalty at the Federal and State levels to determine whether it comports with constitutional principles and requirements of fairness, justice, equality and due process. Congress would review the Commission's final report and then enact or reject its recommendations. Those jurisdictions that impose capital punishment could resume executions only after Congress considers the Commission's final report and repeals the suspension of executions provision of the bill.

This means that before executing even one more person, the Federal Gov-

ernment and the States must ensure that not a single innocent person will be executed, eliminate discrimination in capital sentencing on the basis of the race of either the victim or the defendant, and provide for certain basic standards of competency of defense counsel.

Questions about the administration of the death penalty can only be answered with an impartial, independent review.

The blue-ribbon commission called for in my bill would include prosecutors, defense attorneys, judges, law enforcement officials, and other distinguished Americans with experience or expertise in the issue. It would be a balanced commission, not chock full of death penalty foes or death penalty supporters representing different viewpoints on the issue. Other nations, including some of our closest allies, have also established national commissions to review the death penalty.

In the 1950s, Great Britain created the Royal Commission on Capital Punishment, and the Canadian Parliament established a joint committee of their Senate and House to review capital punishment. Now, almost 50 years later, I believe it is time for the United States to undertake a national review. We should be the leader on issues of justice.

It has been almost 25 years since the reinstatement of the death penalty, and we still don't know how innocent people got on death row or how to prevent it from happening again. That is embarrassing, at the least, for the world's greatest democracy. My bill is a step in the right direction. And the time is now. Our Nation has come to the point where the machinery of death is well greased, and the pace of executions has accelerated. Last year, our Nation hit an all-time high for total executions in any 1 year since 1976. We had 98 executions last year in America. This year, we are already on track to meet or exceed that same high rate.

Before our Government takes the life of even one more citizen, it has a solemn responsibility to every American to prove that its actions are consistent with our Nation's fundamental principles of justice, equality, and due process. Before carrying out an irreversible punishment, the Government must carefully consider the tough questions surrounding capital punishment.

Mr. President, let us slow the machinery of death to ensure we are being fair. Let us reflect to ensure that we are being just. Let us pause to be certain we do not kill a single innocent person. This is really not too much to ask for a civilized society. I urge my colleagues to join me and my distinguished colleague, Senator LEVIN, in sponsoring the National Death Penalty Moratorium Act of 2000.

By Mr. GORTON:

S. 2464. A bill to amend the Robinson-Patman Antidiscrimination Act to protect American consumers from foreign

drug price discrimination; to the Committee on the Judiciary.

#### PRESCRIPTION DRUG FAIRNESS ACT

Mr. GORTON. Mr. President, yesterday, a group of 22 Washington State senior citizens boarded a bus in Seattle and drove to British Columbia in Canada to purchase their prescription medicine. Collectively, those 22 individuals saved \$12,000 by taking that bus ride—an average of more than \$550 per individual. It is stories like this that have taken place over the last 2 or 3 years that bring me here today.

Every day, all across our northern and southern borders, Americans leave the U.S. in order to purchase products discovered, developed, manufactured, and sold in the United States, but substances, prescription drugs, that are far less expensive in Canada, Mexico, and for that matter, in the United Kingdom and across Europe than here in the United States.

My own office did an informal survey and found that for the ten most commonly prescribed drugs, prices in British Columbia average 60-percent less than prices for the identical drugs in the identical quantities in the State of Washington. These lower prices don't apply only in Washington State or in our northern border States. For example, Prozac, to treat depression, is 95 cents a pill in Mexico and \$2.21 in the United States. The allergy drug, Claritin, costs almost \$2 a pill in the United States and 41 cents in the United Kingdom. Rilutek, to treat Lou Gehrig's disease, costs \$9,000 in the United States and \$5,000 in France.

Now, it is simply unfair to impose these higher prices on citizens of the United States at the drugstore cash register, when the same drugs are being sold by the same companies at wholesale, at so much lower prices almost everywhere else in the world.

What is the reason for this price differential? It is a simple one. Each of these other countries imposes price controls on the price for which they allow their purchasers to pay. The American company, on the other hand, looks at the situation and says that price is too low to cover my costs of research and development, but I can impose all of the costs of research and development on American citizens. The marginal cost of manufacturing more pills and selling them in France, Mexico, or in Canada is really very small. So I can sell for half the price in Canada that I charge in the United States and still make a profit.

The company makes out just fine. The American citizen pays the price. The American citizen pays the price more than once because the American citizen has already paid roughly 50 percent of the cost of developing that drug through our tax system, either through direct appropriations at the National Institutes of Health or through various research and development tax credits.

Just on Sunday morning, the New York Times had an extensive article on a drug called Xalatan, which is used for

glaucoma, an eye condition, developed by an NIH grant in the original instance at Columbia University, sold to an American drug company which did the rest of the research and development but sold today for one-third of the American price in Hungary, and barely half or a third of the American price in France and Canada and in the rest of the world. That is all due to the fact that these other countries are getting a free ride on the backs of American citizens, American purchasers, for the research, development, marketing, and sale of these drugs.

Now, I have labored for the last 5 months to find an answer to this question, and my favorite answer to this question at this point is included in the bill. The bill is very simple. It builds on an almost 65-year-old precedent, which is the Robinson-Patman Act. In 1936, this Congress passed the Robinson-Patman Act and prohibited price discrimination, with very minor exceptions, in sales to U.S. purchasers from manufacturers and from wholesalers, designed originally to prevent the big chain company from getting such a price break from the manufacturer that it could drive its smaller competitors out of business. It simply prohibited that kind of price discrimination.

My bill amends that 65-year-old Robinson-Patman Act by extending that nondiscriminatory provision from interstate commerce to interstate and foreign commerce with respect to prescription drugs. Remember, this law has applied to our American drug manufacturers for 65 years, as far as their sales within the United States are concerned. Now, if my bill passes, it will apply to their sales overseas, outside of our country. That will spread the cost of research and development fairly across all of the purchasers, not just the American purchasers, and will inevitably result in lower prices for American prescription drug users, which is exactly what we ought to do. We will give the drug manufacturers not only the opportunity, but the requirement that they treat their American purchasers fairly, just as they have been required not to discriminate among American purchasers for more than six decades.

As you know, we are in the midst of a national debate over prescription drugs and, most particularly, over whether or not we should grant a prescription drug benefit to at least certain senior citizens who are the beneficiaries of our Medicare system. Just 2 weeks ago in this body, we voted on a budget resolution that authorizes up to \$40 billion for such a drug benefit over the course of the next 5 years. I supported that budget resolution, and I will support what our proper committees report to us in response to that resolution.

That will benefit one distinct group of senior citizens, those whose income levels are low enough to benefit from this assistance in purchasing their prescription drugs. It will do absolutely

nothing for other seniors. It will do nothing for the 44 million uninsured in the United States. It will do nothing for the costs of health care insurance—for those policies that prescribe prescription drug benefits and, therefore, have that cost reflected in the insurance premiums at all. In other words, as important as it is to certain seniors, it won't go to the heart of the problem—the high and increasing cost of prescription drugs.

Part of those high costs are due to the great success of our drug companies. More and more, a greater share of our health care dollars go to the prescription drug feature every year because they are now successful in treating conditions that previously could not be treated at all or required hospitalization. We should hail that progress. We certainly should support drug companies' research and development of new medicines, but we should not countenance discrimination against American citizens and against American purchasers by allowing those companies to sell precisely the same prescription in almost every other country in the world at prices half or less than half of what they sell them for in the United States.

I have been working on this proposition ever since a November 1999 cover story in Time magazine which first illustrated the stark nature of this problem and its costs. With all of this work and with my consultation over the last month with the drug companies themselves, which do not like my bill one bit, I have sought a goal. I am not wedded to a particular means. I think this bill is a good way to reach that goal, but it is not necessarily the only goal. I want the drug companies themselves to come up with an answer to this question.

Members on both sides of the aisle have introduced so-called "reimportation" bills, which I find relatively attractive though rather bizarre. At the present time, my senior citizens can go up to Canada, as they did yesterday, and buy a 3-month supply of prescriptions for their own personal use and bring them back to the United States. But the pharmacy in Bellingham, WA, can't go up to a wholesaler in Canada and get the lower Canadian price and pass it on to that pharmacy's customers in the State of Washington. That kind of reimportation is barred, even though we are talking about precisely the drug that the Bellingham pharmacy is now required to buy directly from the manufacturer.

Reimportation bills with certain limitations would lift that restriction and would allow the bizarre situation where the drugstore in the United States could purchase an American-manufactured drug in Canada for less than it could buy it for in the United States. I think that solution may very well be the direction in which we ought to go. I am also convinced that there are other ways of doing it. I will say

that the drug companies made a reasonable suggestion to me for a tiny bit of the problem.

By Mr. WELLSTONE:

S. 2465. A bill to amend the Internal Revenue Code of 1986 to deny tax benefits for research conducted by pharmaceutical companies where United States consumers pay higher prices for the products of that research than consumers in certain other countries; to the Committee on Finance.

**PRESCRIPTION PRICE EQUITY ACT OF 2000**

Mr. WELLSTONE. Mr. President, I rise to introduce legislation today, the Prescription Drug Price Equity Act of 2000. My colleague, PETE STARK, a Representative for the State of California in the House of Representatives—I want to give him full credit for having introduced this legislation in the House. I am proud to be a partner with him.

The long and the short of it is this bill amends the Internal Revenue Code of 1986 to deny tax benefits for research conducted by pharmaceutical companies where U.S. consumers pay higher prices for the products of that research than consumers in certain other countries, such as Canada. I could go into this in great detail, but I think the operational definition is of 5 percent more.

I tell you right now, in my State of Minnesota, seniors and others are in a state of outrage by the fact they can go and buy the same drug—produced in this country, FDA approved—for half the price in another country.

If we are going to be giving these tax benefits to these pharmaceutical companies, I think they are going to have to be more concerned about the very public that gives them these benefits. So I introduce this legislation and look forward to support from my colleagues.

Mr. President, like the rest of my colleagues I have just returned from a week in my home State of Minnesota. I met with many constituents, but none with more compelling stories than senior citizens struggling to make ends meet because of the high cost of prescription drugs—life-saving drugs that are not covered under the Medicare program. Ten or 20 years ago these same senior citizens were going to work everyday—in the stores, and factories, and mines in Minnesota—earning an honest paycheck, and paying their taxes without protest. Now they wonder, how can this Government—their Government—stand by, when the medicines they need are out of reach.

The unfairness which Minnesotans feel is exacerbated of course by the high cost of prescription drugs here in the United States—the same drugs that can be purchased for frequently half the price in Canada or Mexico or Europe. These are the exact same drugs, manufactured in the exact same facilities with the exact same safety precautions. A year ago, most Americans did not know that the exact same drugs are for sale at half the price in

Canada. Today, you can bet the pharmaceutical industry wishes no one knew it. But the cat is out of the bag—and it is time for Congress to right the inequities that are rife in the way the United States government interacts with the pharmaceutical industry.

Today, I want to focus on one of those inequities—the subsidies that the United States Government offers to pharmaceutical manufacturers to develop drugs which these same companies proceed to sell to the American people at up to twice the price they charge in other countries. To combat that problem I am introducing today the Prescription Price Equity Act of 2000, a bill to deny research tax credits to pharmaceutical companies that sell their products at significantly higher prices in the U.S. as compared to other industrialized countries.

The need for this bill is clear. The U.S. Government provides lucrative tax credits to the pharmaceutical industry in this country in order to promote research and development of new lifesaving pharmaceutical products. Yet, in return for these government subsidies, the drug companies charge uninsured Americans the highest prices for drugs paid by anyone in the world.

The Congressional Research Service recently completed an analysis of the tax treatment of the pharmaceutical industry. That analysis concluded that tax credits were a major contribution to lowering the average effective tax rate for drug companies by nearly 40 percent relative to other major industries from 1990 to 1996. Specifically, the report found that while similar industries pay a tax rate of 27.3 percent, the pharmaceutical industry is paying a rate of only 16.2 percent. At the same time, after-tax profits for the drug industry averaged 17 percent—three times higher than the 5 percent profit margin of other industries.

It is time for the pharmaceutical industry to earn these tax benefits—by offering their life saving drugs to America's seniors at the same prices they charge in other countries.

Numerous studies have shown that uninsured seniors pay exorbitant prices for pharmaceuticals. Surveys done by the Minnesota Senior Federation on the prices of the most commonly used drugs by Medicare beneficiaries found that in Minnesota, seniors pay on average about twice the price that Canadian seniors just across the border pay for the exact same medication. I know that the House Government Reform Committee compared prices of prescription drugs in the numerous districts around the country with the prices of prescription drugs in Canada. Those comparisons found price differentials in the exact same ballpark that we found in Minnesota. It is no wonder that Minnesota seniors are willing to spend their time and money to go across the border to buy their prescription medications. And the same is happening all over New England, in the Dakotas, in Montana, in Washington state, and elsewhere.

Yet, at the same time that seniors are being asked to pay these outrageous prices, the drug companies are reaping the benefit of generous governmental subsidies. There's something wrong with a system that gives drug companies huge tax breaks while allowing them to price-gouge seniors. The Prescription Price Equity Act of 2000 attempts to correct this glaring inequity in a very even-handed approach. The message to pharmaceutical companies is this: So long as your company gives U.S. consumers a fair deal on drug prices as measured against the same products sold in other OECD countries, you will continue to qualify for all available research tax credits. But if your company is found to be fleecing American taxpayers with prices higher than those charged for the same product sold in other industrialized countries, like Japan, Germany, Switzerland, or Canada, then you become ineligible for those tax credits.

I know that the pharmaceutical industry, through its trade association, PhRMA, will oppose the Prescription Price Equity Act and will claim that the bill means the end of pharmaceutical research and development. That is complete nonsense. As shown by Congressional Research Service, drug industry profits are already three times higher than all other major industries. This legislation doesn't change the current system of research tax credits at all unless drug companies refuse to fairly price their U.S. products. This bill's intent is by no means to reduce the U.S. Government's role in promoting research and development. It is simply to make clear that in return for such significant government contributions to their industry, drug companies must treat American consumers fairly. Is there any reason why U.S. tax dollars should be used to allow drug prices to be reduced in other highly developed countries, but not here at home as well? Of course there is no good reason for that.

That is why this bill simply tells PhRMA that U.S. taxpayers will no longer subsidize low prices in the OECD countries with our tax code. Research and development is important and that is why we give these huge tax breaks, but that research and development does little good for U.S. consumers who can't afford to buy the products of that research.

This bill does not solve the biggest underlying problem that America's senior citizens face. Only a comprehensive, prescription drug benefit, available to and affordable by all Medicare beneficiaries will do that. I have introduced and cosponsored legislation that can make that happen. But this bill, the Prescription Price Equity Act, nonetheless, sends an important message. It makes clear that the priority of the Federal Government in subsidizing research and development is to make sure that the miracles of modern medicine that result are at least equally available to American citizens as

they are to those in the rest of the industrialized world.

By Mr. GORTON:

S. 2466. A bill to require the United States Trade Representative to enter into negotiations to eliminate price controls imposed by certain foreign countries on prescription drugs; to the Committee on Finance.

PRESCRIPTION DRUG PRICE CONTROL  
LEGISLATION

Mr. GORTON. Mr. President, today I am introducing a bill that will direct the U.S. Trade Representative for the next year to negotiate fairer and more equal prices from foreign governmental purchasers, and, in the absence of success of doing so, make specific statutory recommendations to this Congress.

This is a proposal the drug companies themselves suggested to me. I regard it as a constructive proposal, but not as a solution to the problem standing alone. But it is a tangible result of the course I have already charted, and one that came as a result of my communication with drug companies of my concerns and the earlier draft of the bill I am introducing today.

The problem is a very simple one. American citizens are paying too much for prescription drugs because our companies are allowing foreign purchasers to pay too little for exactly the same drugs. At the very least, American citizens who have spent so much of their tax money in financing the research and development of these drugs should not be paying more than purchasers in other countries.

That is the goal of each of the two bills I am introducing today, but what I really want and what the American people really want is a solution and answer to this problem.

By Mr. SPECTER:

S. 2467. A bill to suspend for 3 years the duty on triazamate; to the Committee on Finance.

S. 2468. A bill to suspend for 3 years the duty on 2, 6-dichlorotoluene; to the Committee on Finance.

S. 2469. A bill to suspend for 3 years the duty on 3-Amino-3-methyl-1-pentene; to the Committee on Finance.

S. 2470. A bill to suspend for 3 years the duty on fenbuconazole; to the Committee on Finance.

S. 2471. A bill to suspend for 3 years the duty on methoxyfenozide; to the Committee on Finance.

DUTY SUSPENSION BILLS

• Mr. SPECTER. Mr. President, I have sought recognition today to introduce five bills that will suspend import tariffs for three years on five chemicals used in the manufacturing of crop protection agents, Triazamate, Dichlorotoluene, Aminomethylpentene, Fenbuconazole, and Methoxyfenozide.

These chemicals are imported by Rohm and Haas Company, a multinational manufacturer of specialty chemicals headquartered in Philadelphia, Pennsylvania. Tariffs on these

products are not needed to protect American industry since these chemicals are not manufactured in the United States. Moreover, these chemicals have no other commercial end uses other than in the manufacture of pesticides used in agricultural applications. The revenue which would be forgone as a result of the proposed suspension of duty on these chemicals is minimal and has been estimated at less than \$227,000 per chemical over the entire period of the suspension.

These end products, used on farms around the globe, are considered important tools in the advancement of agriculture. They protect crops such as fruits, nuts, vegetables, grain and cotton, against fungal infections, weeds, agricultural mites, and insects. By providing adequate protection for these crops, farmers are able to market healthy produce and grains, while commanding the best prices for their goods.

Established over 90 years ago, Rohm and Haas Company has grown to become one of the world's largest manufacturers of specialty chemicals. With 21,000 employees worldwide, the Company continues to maintain a significant presence throughout Pennsylvania, with research facilities in Newtown, Reading, and Spring House. Additionally, Rohm and Haas Company provides grants which support many community organizations active in the delivery of health and human services, education, and civic and community improvement.

In consideration of the positive impact Rohm and Haas Company has on the global and local communities, I urge my colleagues to support these bills which will suspend the duties on the import of these chemicals. •

By Mr. GRASSLEY:

S. 2473. A bill to strengthen and enhance the role of community antidrug coalitions by providing for the establishment of a National Community Antidrug Coalition Institute; to the Committee on the Judiciary.

LEGISLATION ESTABLISHING THE NATIONAL  
COMMUNITY COALITION INSTITUTE

Mr. GRASSLEY. Mr. President, today, I am introducing legislation that would give support to community antidrug coalitions nation-wide. The National Community Coalition Institute would strengthen and enhance the role of community coalitions, to reduce and prevent drug use in communities.

More specifically, one of the problems we have found in implementing the Drug Free Communities Program has been the inexperience of a lot of the communities, particularly smaller and rural ones in knowing how to evaluate their efforts; get information on best practices from other, successful coalitions, and on how to fill out grant applications. The National Community Coalition Institute would improve the effectiveness of community coalitions by providing state-of-the-art and wide-

ly available education, training, and technical assistance for coalition leaders and community teams. The National Community Coalition Institute would ensure that communities nationwide are adequately prepared to undertake the important work of building drug free communities.

Ultimately, the fight against drugs cannot be successful if it does not start in our own backyards. I invite all of my colleagues to join me in supporting this effort.

By Ms. SNOWE (for herself and Mr. SESSIONS):

S. 2474. A bill to amend title 10, United States Code, to improve the achievement of cost-effectiveness results from the decisionmaking on selections between public workforces and private workforces for the performance of a Department of Defense function; to the Committee on Armed Services.

THE DOD COST MANAGEMENT AND  
ACCOUNTABILITY ACT OF 2000

Ms. SNOWE. Mr. President, I rise today with my colleague from Alabama, Senator SESSIONS, to introduce legislation that will improve Department of Defense business practices as well as assist the DoD in its ability to estimate cost savings, a process that has significant impact in the DoD's budget process. This legislation will also result in improved readiness by adding a more realistic approach to the DoD's cost estimating process by eliminating the unknowns that the DoD faces in projecting its budget.

Today the Department of Defense is using arbitrary cost saving objectives of up to \$11.2 billion in its budget for Fiscal Years 2001 to 2005. These cost savings are projected efficiencies expected to be realized through processes such as outsourcing and the OMB Circular A-76 process. Unfortunately, both the Government Accounting Office and the Naval Audit Service have published reports stating that these savings are inflated and overly optimistic.

The greatest cause of concern however, is the self-inflicting damage caused by these overestimated savings. Once the individual services within the Department of Defense establish these arbitrary savings goals, they reduce the future operating budget estimates to take into account the estimated savings. But, when these predicted savings are not achieved, it is the readiness accounts and modernization programs that end up paying the price.

None of us would run our personal home finances in such a manner, and no business could proceed using such an accounting method. So that is what Senator SESSIONS, my colleagues on the Armed Services Committee, and I want to address in this legislation. We want to establish better business practices, so that DoD is not setting itself up for failure. DoD needs to take a more realistic approach in the way it estimates projected savings and how it establishes performance standards to measure the impact of workforce

changes. The DoD and the American taxpayer need to understand the potential impact to the readiness of our armed forces.

This legislation has four basic provisions that will provide improved business practices.

First, this legislation requires the Department of Defense to establish a system to track the costs and savings incurred through managed competitions, efficient reorganizations, and the streamlining of other functions currently being performed by the government through the A-76 process or other re-engineering of a federal activity.

The data collected through the establishment of this system will serve two purposes. It will be compiled into a report the Department of Defense is required to submit to Congress each year, so that Congress will have the information necessary to provide oversight of the A-76 process and other cost saving reorganizing process. The data will also be used to establish a metric of current performance and current costs prior to outsourcing, to serve as a standard for future performance and future cost comparisons—so that the leaders within the Department of Defense will be able to validate the actual savings achieved and evaluate the maintenance of performance standards.

Second, this legislation requires that the cost and savings incurred through out-sourcing, strategic sourcing, or reorganizing each position currently staffed by federal personnel, be projected over the Future Years Defense Program. This requirement will improve savings estimates by including both the short and long term costs associated with outsourcing, or contracting out a function.

The third provision of this legislation requires the Secretary of Defense to certify that the function analysis and decision to outsource, strategically source, or to maintain the current federal force was not based on unfair personnel constraints that may prevent the current federal organization from operating efficiently. This will ensure that our federal workers are provided a fair chance in any process and will provide the Department of Defense the most efficient work force for the actual task at hand.

As part of the A-76 process, the Department of Defense is required to conduct an evaluation of the impact on local economies and communities if the decision is made to convert functions currently being performed by government workers to the private sector. The fourth provision of this legislation requires the Department of Defense to submit a statement of the potential economic impact on each affected local community. This notification will provide Congress and our constituents the opportunity to better understand these impacts.

Mr. President, in the short term, this legislation will require significant changes in the way the Department of Defense conducts its processes. But in

the long term this legislation will yield significant benefit. These four provisions are based on the recommendations of experts in the U.S. General Accounting Office and the Naval Audit Service. By enforcing better business practices—which is what this legislation effectively does—the long term effects will benefit the Department of Defense by improving the accuracy of cost and savings estimates, stabilizing the budget, and protecting modernization programs.

Additionally, the benefits will extend to the current federal workforce, who will be guaranteed the opportunity to compete on an equal basis, and the local communities surrounding these agencies will be able to better understand the impact of any decisions that are made.

Mr. President, I firmly believe that this legislation supports the best interests of the Department of Defense and the federal work force. I urge my colleagues to review this legislation—and I am confident that they will see its merits and join me and support this bill.

#### ADDITIONAL COSPONSORS

S. 514

At the request of Mr. COCHRAN, the name of the Senator from Oregon (Mr. WYDEN) was added as a cosponsor of S. 514, a bill to improve the National Writing Project.

S. 866

At the request of Mr. CONRAD, the name of the Senator from Nebraska (Mr. KERREY) was added as a cosponsor of S. 866, a bill to direct the Secretary of Health and Human Services to revise existing regulations concerning the conditions of participation for hospitals and ambulatory surgical centers under the Medicare program relating to certified registered nurse anesthetists' services to make the regulations consistent with State supervision requirements.

S. 890

At the request of Mr. WELLSTONE, the name of the Senator from Hawaii (Mr. AKAKA) was added as a cosponsor of S. 890, a bill to facilitate the naturalization of aliens who served with special guerrilla units or irregular forces in Laos.

S. 934

At the request of Mr. LEAHY, the names of the Senator from New York (Mr. SCHUMER) and the Senator from Illinois (Mr. DURBIN) were added as cosponsors of S. 934, a bill to enhance rights and protections for victims of crime.

S. 1277

At the request of Mr. GRASSLEY, the name of the Senator from Rhode Island (Mr. L. CHAFEE) was added as a cosponsor of S. 1277, a bill to amend title XIX of the Social Security Act to establish a new prospective payment system for Federally-qualified health centers and rural health clinics.

S. 1361

At the request of Mr. STEVENS, the name of the Senator from Mississippi (Mr. COCHRAN) was added as a cosponsor of S. 1361, a bill to amend the Earthquake Hazards Reduction Act of 1977 to provide for an expanded Federal program of hazard mitigation, relief, and insurance against the risk of catastrophic natural disasters, such as hurricanes, earthquakes, and volcanic eruptions, and for other purposes.

S. 1369

At the request of Mr. JEFFORDS, the name of the Senator from Oregon (Mr. WYDEN) was added as a cosponsor of S. 1369, a bill to enhance the benefits of the national electric system by encouraging and supporting State programs for renewable energy sources, universal electric service, affordable electric service, and energy conservation and efficiency, and for other purposes.

S. 1571

At the request of Mr. JEFFORDS, the name of the Senator from Maine (Ms. SNOWE) was added as a cosponsor of S. 1571, a bill to amend title 38, United States Code, to provide for permanent eligibility of former members of the Selected Reserve for veterans housing loans.

S. 1594

At the request of Mr. KERRY, the name of the Senator from Louisiana (Ms. LANDRIEU) was added as a cosponsor of S. 1594, a bill to amend the Small Business Act and Small Business Investment Act of 1958.

S. 1608

At the request of Mr. CRAIG, the name of the Senator from Texas (Mr. GRAMM) was added as a cosponsor of S. 1608, a bill to provide annual payments to the States and counties from National Forest System lands managed by the Forest Service, and the revested Oregon and California Railroad and reconveyed Coos Bay Wagon Road grant lands managed predominately by the Bureau of Land Management, for use by the counties in which the lands are situated for the benefit of the public schools, roads, emergency and other public purposes; to encourage and provide new mechanisms for cooperation between counties and the Forest Service and the Bureau of Land Management to make necessary investments in Federal lands, and reaffirm the positive connection between Federal Lands counties and Federal Lands; and for other purposes.

S. 1646

At the request of Mrs. LINCOLN, the name of the Senator from Maine (Ms. COLLINS) was added as a cosponsor of S. 1646, a bill to amend titles XIX and XXI of the Social Security Act to improve the coverage of needy children under the State Children's Health Insurance Program (SCHIP) and the Medicaid Program.

S. 1846

At the request of Mrs. BOXER, the name of the Senator from California (Mrs. FEINSTEIN) was added as a cosponsor of S. 1846, a bill to redesignate