

that Enron and various other traders gouged over hundreds of millions of dollars from consumers in the western United States. But the second and perhaps equal outrage is that the Federal Government, under the Bush administration, has been wholly ineffectual in getting back the money that has been stolen from consumers in the Western United States. These are two outrages.

Today and the last few days we have now discovered over 2,000 hours of taped conversations between Enron traders and others that clearly show the way that they stole hundreds of millions of dollars from consumers in the Western United States.

Those were discovered because of the great work of a small public utility district, the Snohomish PUD in Snohomish, Washington, that finally let us know, to get a window of the horrendous theft that went on, and I just want to quote a couple of things that the Enron traders talked about as they were stealing from the consumers of the West Coast.

Here is one trader, Tim Beldon, who since pleaded guilty to criminal fraud charges, who said, "Grandmothers were taken at the tune of a million bucks or two a day." Taken. They were taken due to the outright fraud of Enron.

Another quote from an employee who can be heard asking, "Do you know when you started overscheduling and making buckets of money on that?" Well, the buckets of money that they made came right out of the pockets of consumers.

The last quote, we heard traders of Enron saying basically, "Isn't it great that we jammed grandmothers for millions of dollars?"

Well, it is not great that they "jammed" grandmothers on the West Coast of the United States, and that needs to be fixed by the Federal Government.

But the second outrage is that our Federal Government and this administration has acted essentially like the Keystone Cops in doing nothing effective to get back these millions of dollars from our consumers. In Snohomish County, Washington, we have had 50 percent increases in electrical rates as a result of this gouging, and yet the FERC, the Federal Electric Regulatory Commission, and the Bush administration has done nothing to get this money back for the consumers.

Next week, when the energy bill is on the floor of the House, I will be offering an amendment to compel FERC, to compel the Bush administration to get off the dime and get this money back that has been stolen. They have acted with all the energy of Barney Fife on this, and it is time for them to do the job and get this money back for ratepayers.

Now, why has this not happened? Why has the Bush administration sat on their hands while this theft occurred? Well, I have to tell you that we have done everything humanly possible to get the administration, the Presi-

dent and the Vice President, to act on this.

In fact, during this crisis in 2000 and 2001, we asked the Vice President to personally intercede. Do you know what he did? On April 17, 2001, he met with Ken Lay of Enron; and they apparently talked about the energy crisis. And what after that conversation did they do? Two days later, the Vice President came out, Mr. CHENEY came out on April 19 and said, "We think price caps simply don't work." And they did nothing effectual to solve this problem.

In fact, we had a meeting with the Vice President when this was going on, and we told the Vice President of this, at the very time there were brownouts in California, we told the Vice President of the United States that over 30 percent of the generating capacity in America was turned off. Obviously, to anyone who knew anything about energy, people were gaming this system. And we pleaded with the Vice President to help us.

After we laid out all of these facts and circumstances, these are several Members of Congress and myself to the Vice President, he looked at us in our eyes and simply said, "You know what is wrong with you? You just don't understand economics."

Well, we do understand economics. We just do not understand Enronics. We just do not understand a Vice President who wants to talk to Ken Lay but will not lift a finger to help American consumers to get these hundreds of millions of dollars back that were stolen. We do not understand a Vice President who says let those grandmothers be jammed, and we are not going to help.

We are going to have an amendment next week to solve this problem.

PROBLEMS WITH MEDICARE PRESCRIPTION DISCOUNT CARDS

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

Mr. STRICKLAND. Mr. Speaker, today, the seniors of this country are told that they can take advantage of the so-called Medicare discount cards which are available to them. They are being told that these cards will offer them between 10 and 25 percent savings. But there are some things that the seniors need to know as they contemplate the potential use of these cards.

First of all, it is the sponsoring company that offers the discounts or determines the size of the discounts, and that sponsoring company can change the level of discount available to the senior frequently. In fact, they can do that every 7 days, if they so choose.

The senior also needs to know that these cards only cover some drugs and not others. So if a senior takes four or six or eight prescriptions and they choose a card, and they can only

choose one card, they may have one or two of their medicines included and covered by that discount card and other medications may not be covered by that discount card, and the very medicines that are covered can be changed at the whim of the companies. In fact, those medicines can be changed every 7 days.

Seniors also need to know that once they choose a card and choose to enroll with that particular company, they are locked in for one full year. So although the companies can change the level of discount frequently and they can change the drugs that are included in their discounts frequently, the senior is locked in to a particular card for one full year.

Why is that? Why is all of the advantage being given to the sponsoring companies, rather than to the individual senior citizen?

I think it is important for the seniors of this country to know that this discount card offering falls far short of what could or should be done by this government to make drugs affordable to them.

One of the things we could do would be to simply allow the reimportation of cheaper drugs from Canada. There is probably not a senior in this country that is not aware of the fact that Canada sells drugs for just a fraction of what those drugs would cost the American senior citizen, and yet this government, this administration, this President, opposes the reimportation of cheaper drugs from Canada.

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That is one of the things that could be done, and could be done quickly and easily; and it would reduce the cost of medications that our seniors face.

Well, another thing the administration could do but refuses to do is to allow our Secretary of Health and Human Services to negotiate discounts for our senior population. Mr. Speaker, our government negotiates discounts for our veterans; and we believe that as a result, those drugs are discounted somewhere between 40 and 60 percent, and this is something that is currently being done on behalf of our veterans. Why would this President and this administration refuse to support such negotiated discounts being made available to our senior citizens? It just simply does not make sense.

Mr. Speaker, we need help, our seniors need help with the cost of prescription drugs, and what we need is a prescription benefit that is a part of traditional Medicare. Seniors like and trust Medicare. It is a program that works. It is easily understood. It is easily administered. In fact, the cost of administering Medicare is just fractional compared to the cost of administering private plans.

So why do we not just offer a prescription drug benefit that is a part of traditional Medicare? But no, that is not what the President or this administration or the leadership in this Congress wants. In fact, we all know that

in this Chamber in the middle of the night, this leadership pushed through a drug plan wherein they called for the vote at 3 o'clock in the morning; and at the end of the voting period, the 15-minute voting period, the bill had lost and it had lost because it is a bad bill. We kept the vote open, and the press says they got the President out of bed at 4 o'clock in the morning so he could twist arms and make phone calls and, finally, after 3 hours, they got a couple of freshmen and they apparently pressured them to change their minds because they came walking down the aisle and, at about 5 minutes to 6 a.m., this bill passed. We are now living with the results. The senior citizens of this country know they have been taken advantage of.

Mr. Speaker, I look forward to November when the seniors will have their opportunity to respond.

THE FIRST STEP TO A BETTER MEDICARE: DISCOUNT PRESCRIPTION DRUG CARDS FOR OUR SENIORS

The SPEAKER pro tempore (Mr. FEENEY). Under the Speaker's announced policy of January 7, 2003, the gentlewoman from Connecticut (Mrs. JOHNSON) is recognized for 60 minutes as the designee of the majority leader.

Mrs. JOHNSON of Connecticut. Mr. Speaker, I rise with pride and pleasure to recognize this June 1 as the first time in history that the seniors of America have had the opportunity to purchase a Medicare drug discount card as the first step, but only the first step, in reducing the cost of their prescription drugs.

My colleagues have heard a lot here tonight. We have heard some very sharp things from the speaker who just preceded me. But listen to this: this is a widow in my hometown of New Britain who takes Zithromax; and because of this discount card at a local pharmacy in New Britain, instead of paying \$46.50 for her Zithromax, she will now pay \$39.44. She takes Nystatin. Instead of paying \$35 for Nystatin, she will now pay \$15 for Nystatin. And so it goes. One of the other drugs she takes costs \$40 and now will cost \$11.50.

Mr. Speaker, this widow for whom every dollar is precious will save \$730 on her prescription drugs every year, including this year. Now, that may not be a lot to my colleagues, but for someone spending \$2,000 on drugs a year, a little over \$2,000 on drugs a year, that is a lot. That is 29 percent, almost 30 percent, of her drug costs.

So this is a good day for seniors, and I and my colleagues are going to talk about a lot of the things we have been told tonight about this prescription drug program. But we are here to say, you be the judge. We are here to say, do not let nay-sayers, do not let others rob you of the hundreds of dollars of savings on the prescription drugs on which your health and well-being depend. You be the judge. You find out

the facts. You be the judge. It is real simple.

But to start off tonight, let me turn to the gentleman from Pennsylvania (Mr. ENGLISH), a very good friend of mine on the Committee on Ways and Means.

Mr. ENGLISH. Mr. Speaker, I want to thank the gentlewoman. I want to rise today not only to mark this historic day for Medicare beneficiaries because today, for the first time since the program's inception, Medicare, through a discount card, will be providing real relief to seniors who struggle to pay for their prescription medicines.

I want to acknowledge that, but I also want to especially acknowledge the efforts of the gentlewoman as chairman of the Subcommittee on Health for making this legislation possible. I am very proud to have been part of the team that helped put this legislation together and see it through to the end; and I am also glad to be on the floor tonight, having heard some of the extraordinary claims from a number of Members who consistently voted against prescription drug benefits for seniors. They are now trying to run down the program that we put together, we fit into a budget, and we got passed in the House. The record shows that they did not offer a credible alternative, they did not offer a budget that they could fit it into, and they were talking a lot about seniors, but not delivering.

The discount card program that was created under the Medicare reform bill that we passed will also ultimately create a prescription drug program that will be available by 2006 for every Medicare beneficiary. But what we have done, which is so important, is offer an interim program to provide immediate relief for seniors. Because I know, as the gentlewoman found in her district in Connecticut, in my district in Pennsylvania, what seniors wanted was some help that would be available quickly. And when I brought the head of CMS into my district for a town meeting and he said it would take a couple of years to ramp up a prescription drug program, they made it very clear, that group of seniors in Mercer County, Pennsylvania, they wanted to see something quicker, and that is what we have been able to do.

These discount cards are meant to provide a transitional program, especially for the approximately 10 million Medicare beneficiaries who have no drug coverage. Seniors have been enrolling in the numerous discount cards in their area since May 3; and today, many seniors will begin to enjoy savings on their medicines. CMS, the Center For Medicare and Medicaid Services which administers the Medicare program, estimates that seniors will save between \$3.8 billion and \$5.1 billion over the 2-year duration of the program. This is a substantial amount of money.

For an annual enrollment fee of no more than \$30, seniors will enjoy sav-

ings on drugs of up to 30 to 60 percent on generic drugs, 16 to 30 percent or more on usual retail prices, and 11.5 to 17 percent off average retail prices with significantly larger discounts available on mail order drugs. This is in real contrast with the message we have heard from some of the critics. These are real savings.

Even better, beneficiaries can choose the card that gets them the lowest prices; and if they wish, they can also get help finding low or no-fee cards, cards that include specific neighborhood pharmacies and/or cards from specific sponsors. But the important thing is, this drug card, I think appropriately, provides additional assistance to low-income seniors through a direct subsidy. This is a big benefit to seniors in my district.

Today, seniors with limited means are eligible for a \$600 annual credit that goes a long way toward paying for their medication. In my home State of Pennsylvania, we have had a great program for low-income seniors called the PACE program, which provides a prescription drug benefit for low-income seniors who do not otherwise have such a benefit. This has been, I think, the hallmark of Pennsylvania State government for many years and an extraordinary success for those who are eligible.

With this new Medicare legislation, the \$600 credit will go directly to PACE and allow them to automatically enroll about 150,000 low-income seniors, lower PACE's costs, and allow PACE to waive some \$6 co-pays which low-income seniors would otherwise have had to pay to get their medicines.

PACE beneficiaries will continue to use the card PACE issues them to receive the benefits of the new program, and seniors enrolled in a Medicare Advantage plan like Security Blue in my district will receive a drug discount card from that plan.

Other eligible Pennsylvania seniors can choose between 43 drug cards to find the benefit that is best for them. And as I think the gentlewoman is about to point out, they have one number that they can call to get the information that they need.

Mr. Speaker, signing up for the drug discount card and getting information on the plans offered in their area could not be easier. Seniors who want help in selecting a card should call 1-800-MEDICARE or visit the Medicare Web site at www.medicare.gov; and there it is, right there. There are 3,000 customer service representatives available 24 hours a day, 7 days a week to answer these questions. To enroll in a particular card, beneficiaries should contact that card and receive an application. There is a standard enrollment form that will be accepted by all cards.

Mr. Speaker, what is interesting to me is some politicians and special interest groups with their own narrow agendas have run down the prescription drug benefit as ineffective. But I