

and higher prices, but on top of that, they added two additional things.

One, they made criminals of people who would go to Canada or Mexico to get the same drugs for lower prices because, of course, our pharmaceutical companies charge the highest price for drugs right here in the United States.

Secondly, they prohibited the United States Government from doing what all other health plans do: negotiate the price of prescription drugs for the people who are in their health care program.

Well, guess what? Today we will right that. Today we will allow the Secretary of Health and Human Services to negotiate on behalf of Americans.

HEALTH CARE DECISIONS SHOULD BE MADE BY DOCTORS

(Mr. PRICE of Georgia asked and was given permission to address the House for 1 minute.)

Mr. PRICE of Georgia. Mr. Speaker, today we will take up the Medicare prescription drug program, a program where costs were \$13 billion lower than projected in 2006; needed life-saving drugs are available; and 80 percent of the beneficiaries are supportive and satisfied with the program.

So what problems are the Democrats trying to solve? Theirs is really a solution in search of a problem. The Democrats think that Washington can make better decisions than the American people about very personal medical matters. And what happens when the government gets more involved? Things become more bureaucratic and more expensive.

As a physician, I know how difficult it is to take care of patients, oftentimes because so many non-medical people are making medical decisions.

If H.R. 4 is adopted and becomes law, Washington bureaucrats will decide which drugs will be available for patients, not from a scientific or safety standpoint but purely based upon money.

That is not the way we ought to be making health care decisions. Those decisions ought to be made by patients and doctors.

SPECIAL INTEREST OVER PUBLIC INTERESTS

(Mr. WELCH of Vermont asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. WELCH of Vermont. Mr. Speaker, a special interest over the public interest, there is no more vivid example of special interests trumping the public interest than the Medicare Part D legislation that we must reform today.

Extending a drug benefit to our seniors on Medicare is the right thing to do. Even in its current form, it has helped thousands of Vermonters and hundreds of thousands of Americans.

But when this Medicare drug benefit was first passed, a worthy extension of

this good program went terribly wrong because of the wrong-headed prohibition on the Federal Government's ability to do the obvious: negotiate fair prices for the taxpayer. This program fails on its most fundamental level, cost. Failing on cost, it impedes access.

The lobbyists who had such an influence in writing this bill bewildered our seniors and ripped off our taxpayers.

The public interest, the interest of our seniors and taxpayers are who we represent today and who we can help today with the passage of this bill.

FULLY FUND SAFE TEA-LU

(Mrs. CAPITO asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. CAPITO. Mr. Speaker, I rise today to fully support SAFE TEA-LU funding at its authorized level for fiscal year 2007.

If, as expected, the House passes a joint resolution extending funding for government programs through October 1, it is important that we allow the highway funds to increase from the 2006 level to the authorized 2007 level.

Federal highway funding is very important to all States, and my State of West Virginia is no exception. Significant progress is being made on construction of a new four-lane U.S. 35 and on Corridor H, and transportation improvements are needed across everyone's district.

Keeping highway funding steady at the 2006 level would stop a scheduled \$3.4 billion increase that State highway departments, workers and motorists have planned on and expected for this year.

The President's fiscal year 2007 budget, the House-passed transportation appropriation bill and the Senate appropriation bill called for \$39.1 billion for highway construction. Failing to allow an increase would cost West Virginia \$57.7 million, and 2,740 construction jobs.

NEW DIRECTION FOR AMERICA

(Mr. LAMPSON asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. LAMPSON. Mr. Speaker, my mother was an extraordinary woman. There is no doubt that Medicare helped her live the last of her 94 years with dignity and mostly independence. However, despite having one son as a doctor, one as a pharmaceutical executive and one as a Member of Congress, our family still struggled to meet her needs. As a Member of this body, I felt helpless and almost ashamed to know that there are millions more like her forced to decide between food and medicine each month.

I am proud now to be a part of this inspired and honest effort to make a difference in the lives America's elderly and disabled.

Although mother is gone now, I can still make a difference for her sister, my 91-year-old Aunt Mary. She fell into the part D doughnut hole and paid thousands of dollars a month for her medications. It is an outrage that my aunt and millions of Americans are paying record prices while drug companies are reporting record profits.

Giving Medicare the ability to negotiate drug prices is a monumental first step. I hope it is just the beginning of expanding every American's access to quality and affordable health care.

I urge you all to think of your mothers and aunts when you cast your vote for H.R. 4. Do this for every one of your constituents who has to decide between meals and medicine and show America that we are all dedicated to a new direction.

VOTE "NO" ON H.R. 4

(Mrs. DRAKE asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. DRAKE. Mr. Speaker, I rise today in opposition to H.R. 4, the Medicare Prescription Drug Price Negotiation Act.

The Medicare prescription drug insurance program continues to exceed expectations. The current private sector approach has resulted in more choices available to Medicare beneficiaries while simultaneously keeping costs below previous projections.

The majority of seniors are satisfied with the program and are saving on average \$1,200 a year. Seniors are able to choose a prescription drug plan that meets their needs.

The Congressional Budget Office has stated that requiring the Federal Government to negotiate drug prices with the manufacturer will not result in any savings to the Federal Treasury or the taxpayer. When asked, seniors support lower drug prices; but when told that means less choice of available drug or pharmacy, they disagree.

Seniors across America want their doctors, not the Federal Government, to choose the most effective drugs.

SENIORS AT MERCY OF CONFUSING DRUG RULES

(Mr. ELLISON asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ELLISON. Mr. Speaker, for over a year now, senior citizens in my State of Minnesota have been subject to a sink hole that the administration calls Medicare part D, the prescription drug program.

It was really never meant for our seniors. It was written for and by the pharmaceutical companies and the insurance companies at the expense of our senior citizens and paid for by the American taxpayer.

In 2006, companies like Pfizer, Eli Lilly, Merck and Novartis made record

profits. Meanwhile, Minnesota seniors are at the mercy of complex and confusing drug company rules, matched by the rising cost of drugs, costs that make gas prices seem stable.

Prescription drugs have increased at twice the rate of inflation. Medicare folks pay as much as 10 times more than vets do through the Department of Veterans Affairs.

Mr. Speaker, that is no way to treat the greatest generation. We can and must do right by them. We must end the drug company charade and enact real prescription drug reform. It is time to let HHS negotiate just like the VA.

Today, the House will pass the Medicare Prescription Drug Price Negotiation Act. Let us end the scam and give the greatest generation the dignity they so deserve. Vote "yes" on H.R. 4.

CHAVEZ BEGINS THIRD TERM IN VENEZUELA

(Mr. STEARNS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. STEARNS. Mr. Speaker, yesterday the Venezuelan president invoked Fidel Castro as the premier socialist model which, in his theory, is the economic model for not only Venezuela but the entire world.

Mr. Speaker, my observation about his speech is that it represents a defining illustration of the dichotomous philosophies of ownership and freedom that free markets versus state-owned markets present. For example, Chavez demonstrates this with his continued move to nationalize electrical and telecommunications companies.

Here in Congress with the new majority, they are starting to hammer with this heavy hand of the Federal Government down on small businesses, pharmaceutical companies, energy companies, health insurance and telecommunications industries. I hope that we will carefully examine the consequences of these decisions before repeating the mistakes of socialism. State-owned enterprises are never the solution.

ELECTION OF MEMBERS TO CERTAIN STANDING COMMITTEES OF THE HOUSE

Mr. LARSON of Connecticut. Mr. Speaker, by direction of the Democratic Caucus, I offer a privileged resolution (H. Res. 56) and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 56

Resolved, That the following named Members and Delegate be and are hereby elected to the following standing committees of the House of Representatives:

(1) COMMITTEE ON RULES.—Mr. McGovern, Mr. Hastings of Florida, Ms. Matsui, Mr. Cardoza, Mr. Welch of Vermont, Ms. Castor, Ms. Sutton.

(2) COMMITTEE ON FINANCIAL SERVICES.—Mr. Frank, Chairman; Mr. Kanjorski, Ms. Waters, Ms. Maloney of New York, Mr. Gutierrez, Ms. Velazquez, Mr. Watt, Mr. Ackerman, Ms. Carson, Mr. Sherman, Mr. Meeke of New York, Mr. Moore of Kansas, Mr. Capuano, Mr. Hinojosa, Mr. Clay, Ms. McCarthy of New York, Mr. Baca, Mr. Lynch, Mr. Miller of North Carolina, Mr. Scott of Georgia, Mr. Al Green of Texas, Mr. Cleaver, Ms. Bean, Ms. Moore of Wisconsin, Mr. Davis of Tennessee, Mr. Sires, Mr. Hodes, Mr. Ellison, Mr. Klein of Florida, Mr. Mahoney, Mr. Wilson of Ohio, Mr. Perlmutter, Mr. Murphy of Connecticut, Mr. Donnelly, Mr. Marshall of Georgia.

(3) COMMITTEE ON AGRICULTURE.—Mr. Peterson, Chairman; Mr. Holden, Mr. McIntyre, Mr. Etheridge, Mr. Boswell, Mr. Baca, Mr. Cardoza, Mr. Scott of Georgia, Mr. Marshall of Georgia, Ms. Herseth, Mr. Cuellar, Mr. Costa, Mr. Salazar, Mr. Ellsworth, Ms. Boyda, Mr. Space, Mr. Walz, Ms. Gillibrand, Mr. Kagen, Mr. Pomeroy, Mr. Davis of Tennessee, Mr. Barrow, Mr. Lampson, Mr. Donnelly, Mr. Mahoney of Florida.

(4) COMMITTEE ON FOREIGN AFFAIRS.—Mr. Lantos, Chairman; Mr. Berman, Mr. Ackerman, Mr. Faleomavaega, Mr. Payne, Mr. Sherman, Mr. Wexler, Mr. Engel, Mr. Delahunt, Mr. Meeke, Ms. Watson, Mr. Smith of Washington, Mr. Carnahan, Mr. Tanner, Ms. Woolsey, Ms. Jackson Lee, Mr. Hinojosa, Mr. Wu, Mr. Miller of North Carolina, Ms. Linda Sanchez of California, Mr. Scott of Georgia, Mr. Costa, Mr. Sires, Ms. Giffords, Mr. Klein of Florida.

(5) COMMITTEE ON HOMELAND SECURITY.—Mr. Thompson of Mississippi, Chairman; Ms. Loretta Sanchez of California, Mr. Markey, Mr. Dicks of Washington, Ms. Harmon, Mr. DeFazio, Ms. Lowey, Ms. Norton, Ms. Lofgren, Ms. Jackson-Lee, Ms. Christensen, Mr. Etheridge, Mr. Langevin, Mr. Cuellar, Mr. Carney of Pennsylvania, Ms. Clarke, Mr. Al Green of Texas, Mr. Perlmutter.

(6) COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM.—Mr. Waxman, Chairman; Mr. Lantos, Mr. Towns, Mr. Kanjorski, Ms. Maloney of New York, Mr. Cummings, Mr. Kucinich, Mr. Davis of Illinois, Mr. Tierney, Mr. Clay, Ms. Watson, Mr. Lynch, Mr. Higgins, Mr. Yarmuth, Mr. Braley, Ms. Norton, Ms. McCollum, Mr. Cooper of Tennessee, Mr. Van Hollen, Mr. Hodes, Mr. Murphy of Connecticut, Mr. Sarbanes, Mr. Welch of Vermont.

(7) COMMITTEE ON VETERANS' AFFAIRS.—Mr. Filner, Chairman; Ms. Brown of Florida, Mr. Snyder, Mr. Michaud, Ms. Herseth, Mr. Mitchell of Arizona, Mr. Hall of New York, Mr. Hare, Mr. Doyle, Mr. Salazar, Mr. Rodriguez, Mr. Donnelly, Mr. McNerney, Mr. Space.

The resolution was agreed to.

A motion to reconsider was laid on the table.

□ 0930

MEDICARE PRESCRIPTION DRUG PRICE NEGOTIATION ACT OF 2007

Mr. DINGELL. Mr. Speaker, pursuant to section 510 of House Resolution 6 and as the designee of the majority leader, I call up the bill (H.R. 4) to amend part D of title XVIII of the Social Security Act to require the Secretary of Health and Human Services to negotiate lower covered part D drug prices on behalf of Medicare beneficiaries.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Medicare Prescription Drug Price Negotiation Act of 2007".

SEC. 2. NEGOTIATION OF LOWER COVERED PART D DRUG PRICES ON BEHALF OF MEDICARE BENEFICIARIES.

(a) NEGOTIATION BY HHS.—Section 1860D-11 of the Social Security Act (42 U.S.C. 1395w-111) is amended by striking subsection (i) (relating to noninterference) and inserting the following:

"(i) NEGOTIATION OF LOWER DRUG PRICES.—

"(1) IN GENERAL.—Notwithstanding any other provision of law, the Secretary shall negotiate with pharmaceutical manufacturers the prices (including discounts, rebates, and other price concessions) that may be charged to PDP sponsors and MA organizations for covered part D drugs for part D eligible individuals who are enrolled under a prescription drug plan or under an MA-PD plan.

"(2) NO CHANGE IN RULES FOR FORMULARIES.—

"(A) IN GENERAL.—Nothing in paragraph (1) shall be construed to authorize the Secretary to establish or require a particular formulary.

"(B) CONSTRUCTION.—Subparagraph (A) shall not be construed as affecting the Secretary's authority to ensure appropriate and adequate access to covered part D drugs under prescription drug plans and under MA-PD plans, including compliance of such plans with formulary requirements under section 1860D-4(b)(3).

"(3) CONSTRUCTION.—Nothing in this subsection shall be construed as preventing the sponsor of a prescription drug plan, or an organization offering an MA-PD plan, from obtaining a discount or reduction of the price for a covered part D drug below the price negotiated under paragraph (1).

"(4) SEMI-ANNUAL REPORTS TO CONGRESS.—Not later than June 1, 2007, and every six months thereafter, the Secretary shall submit to the Committees on Ways and Means, Energy and Commerce, and Oversight and Government Reform of the House of Representatives and the Committee on Finance of the Senate a report on negotiations conducted by the Secretary to achieve lower prices for Medicare beneficiaries, and the prices and price discounts achieved by the Secretary as a result of such negotiations."

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect on the date of the enactment of this Act and shall first apply to negotiations and prices for plan years beginning on January 1, 2008.

The SPEAKER pro tempore (Mr. MARSHALL). Pursuant to section 510 of House Resolution 6, the gentleman from Michigan (Mr. DINGELL) and the gentleman from Texas (Mr. BURGESS) each will control 90 minutes.

The Chair recognizes the gentleman from Michigan.

GENERAL LEAVE

Mr. DINGELL. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks and include therein extraneous matter.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Michigan?

There was no objection.

Mr. DINGELL. Mr. Speaker, I ask unanimous consent to yield 40 minutes