that we can do the work of the American people. But if that is not possible, then it is well within the constitutional powers of the leader of this body to change the rules so that we can carry out our constitutional responsibilities.

Mr. President, I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. FRIST. Mr. President, I ask unanimous consent the order for the quorum call be rescinded.

THE PRESIDING OFFICER. Without objection, it is so ordered.

## MORNING BUSINESS

Mr. FRIST. Mr. President, I ask unanimous consent that there now be a period of morning business, with Senators permitted to speak for up to 10 minutes each

The PRESIDING OFFICER. Without objection, it is so ordered.

## HEALTH CARE

Mr. SANTORUM. Mr. President, at a time when the importance of the U.S. Food and Drug Administration is highlighted by concerns over the safety of pharmaceuticals, it would be foolish to move forward with importation policies that would circumvent the safety regulations of the FDA. I want to take this opportunity to highlight a recent international Internet pharma-trafficking network that was shut down in Philadelphia, which I strongly believe provides a very accurate, and disturbing, window on what exactly a prescription drug importation scheme would mean for Americans.

On April 20, 2005, the Department of Justice announced the unsealing of an indictment returned by a Federal grand jury on April 6, 2005. The indictment chronicled how the "Bansal Organization" used the Internet to fill orders for pharmaceuticals. In turn, this crime ring facilitated millions of unprescribed pills coming into the United States—of which the bio-efficacy and the safety have yet to be determined to consumers who only needed a credit card. These drugs included potentially dangerous narcotics, such as codine and Valium, drugs that can cause serious harm if not taken under a physician's supervision, and which have been highlighted repeatedly as drugs that pose special concerns as we debate possible importation.

Stretching from America to countries such as India, Antigua, and Singapore, officials estimate that this international conspiracy provided \$20 million worth of un-prescribed drugs to hundreds of thousands of people worldwide—most if not all of whom had no idea where their drugs originated. This drug scam exemplifies how the Internet can be a door to an unregulated world of just about any kind of pharma-

ceutical—including counterfeits and potentially dangerous narcotics. This is particularly concerning given the growing ease at which prescription drugs can be purchased over the Internet.

At the heart of the debate on foreign importation of prescription drugs is the concern over the cost of prescription drugs. Often proponents claim that importation would allow Americans access to other countries' drugs at a cheaper price, despite thorough analysis by the U.S. Health and Human Services Task Force on Prescription Drug Importation. The HHS Task Force reported that any associated cost savings with importation would be negated by the costs associated with constructing and attempting to safely maintain such a system, and ultimately concluded what both past and current Administrations have found: the safety of imported drugs purchased by individuals, via the Internet or other means, cannot be guaranteed. Moreover, generic prescription drugs in America are on average 50 percent less than their foreign counterparts. This holds true in the case of the "Bansal Organization," in which the vast majority of the trafficked drugs were sold at prices higher than what a consumer would have paid at a legitimate pharmacy. The safety of the American drug supply should not be sacrificed for supposed savings. Those that continue to purport that importation would provide cheaper drugs are misleading the American people, and as a result putting their health and lives at risk.

Importation will not equate to cheaper drugs for Americans, but it will lead to an explosion of opportunities for counterfeiters to take advantage of the American people by compromising the safety of our drug supply. Many individuals, both patients and healthcare professionals, who testified during the HHS Task Force's proceedings expressed significant concerns that importation would compromise the integrity of the American drug supply by creating a vehicle through which terrorists could easily introduce harmful agents in the United States. Recall that in 1982, seven Americans died after ingesting Tylenol laced with cyanide. More recently, in July 2003 members of a Florida-based drug-counterfeiting ring who sold and diluted counterfeited drugs were indicted, and 18 million tablets of counterfeit Lipitor were recalled after evidence revealed that this popular anti-cholesterol drug had been manufactured overseas and repackaged in the United States to hide the deception. Importation would provide for any of these acts to be committed on a larger. exponentially more devastating, national scale. To put this in perspective, in 2003, 69 million prescriptions were written for Lipitor in the United States alone.

The "Bansal Organization" bust is but the latest in a series of illicit pharmaceutical trafficking scams, which are extremely lucrative, and which our law enforcement officials are already struggling to combat on a daily basis. Why would we elect to open the door to importation when we know that doing so will create infinite opportunities to compromise the safety of our drug supply?

As we continue to debate the best ways to ensure that Americans have access to the highest quality, affordable prescription drugs, I would caution my colleagues that importation is not the answer. It would be unconscionable to facilitate in any way the dangerous shortcuts utilized in the Philadelphia drug scam—shortcuts that circumvent the essential ongoing patient relationship with physicians other licensed professionals and trained to monitor potential medication interactions and side effects that can lead to serious injury and/or death.

Congress should uphold the strong regulatory standards on drug safety that exist today, and not open our borders to prescription drugs from a world of unknown sources.

## VICARIOUS LIABILITY REFORM

Mr. SANTORUM. Mr. President, being mindful of yesterday's passage of SAFETEA, I rise to speak to an issue that was not addressed in the Senate bill. This is an area of the legal system needing reform that affects interstate commerce in the transportation sector—vicarious liability. These types of laws exist in only a handful of States where nonnegligent owners of rented and leased vehicles are liable for the actions of vehicle operators.

Although a vehicle renting or leasing company may take every precaution to ensure that a vehicle is in optimal operating condition and meets every safety standard, these companies can still be subject to costly lawsuits due to the actions of the vehicle's operator, over which the company has no control. Under these laws, leasing or rental companies can be liable simply because they are the owner of the vehicle.

Though only a few States enforce laws that threaten nonnegligent companies with unlimited vicarious liability, they affect consumers and businesses from all 50 States. Vicarious liability means higher consumer costs in acquiring vehicles and buying insurance and means higher commercial costs for the transportation of goods. Left unreformed, these laws could have a devastating, effect on an increasing number of small businesses that have done nothing wrong.

The House acted in H.R. 3 to address these unfair laws by creating a uniform standard to exclude nonnegligent vehicle renting and leasing companies from liability for the actions of a customer operating a safe vehicle. Under this provision, States would continue to determine the level of compensation available for accident victims by setting minimum insurance coverage requirements for every vehicle. Vicarious liability reform would not protect companies that have been negligent in