

guarantee to bring local channels via satellite into small television markets. Without this loan guarantee, there is little chance that any corporation will make a business decision to launch a satellite that would enable it to beam local television signals into rural communities. Local broadcasters provide people with local news and vital details about storm warnings and school closings. People in rural communities need access to this information. They deserve no less.

It is important to note that this loan guarantee will not cost the taxpayers 1 cent because a credit risk premium would cover any losses from default on the federally backed private loan.

This rural provision should stay in the satellite bill, and we should vote on this bill in the light of day rather than sneaking a whittled-down version into an omnibus package.

I hold in my hand a letter signed by a bipartisan group of 24 Senators urging the majority leader to file cloture on and proceed to the satellite bill. After we delivered the letter, five additional Senators called my office seeking to sign it. I understand that another letter supporting the rural provision may be circulating as I speak.

Mr. President, I urge the majority leader to listen to the will of the people and to the majority of the Members of this body. Let us vote on this today.

Mr. LEAHY. Mr. President, if I could take a moment to comment, I compliment Senator LINCOLN for her comments. I totally agree with her. There was a long and difficult conference. It was the Intellectual Property Communication Omnibus Reform Act—a long and difficult conference. We had a lot of give and take. We had conferees from two Senate committees. It became a Rubik's Cube, where everybody had to give something. We got it through, and it passed. I believe my friend said the vote in the House was 411-8. In my little State, we have 70,000 homes with satellite dishes that will be left dark if we don't get this. There are 12 million nationwide.

I hope we can do this before we go out. The heavy lifting has already been done. It was done in the committee of conference. The distinguished Senator from Arkansas made very clear throughout that whole time the needs of her constituents, as have other Senators. I hope that whether they are sitting in a farmhouse in Vermont, a home in Arkansas, or anywhere else, if on New Year's Eve they want to watch the festivities by satellite, they can do that. I compliment the Senator.

The PRESIDING OFFICER. The Senator from Oregon is recognized.

PRESCRIPTION DRUGS

Mr. WYDEN. Mr. President, I wanted to take a few minutes to talk, as I have on several occasions recently, about the issue of prescription drugs and the Nation's elderly. You certainly can't open up a major publication these days without reading about this issue.

The New York Times, on Sunday last, had an excellent article. Time magazine, which came out in the last couple of days, had a lengthy discussion of prescription drugs and seniors. These are all very captivating discussions, but almost all of them end with the author's judgment that nothing is going to get done in Congress about this critical issue. They go on and on for pages and, finally, the author winds around to the conclusion that this issue has been tied up in partisanship and the kind of bickering that you see so often in Washington, DC. There you have it. Case closed. Lots of arguing but no relief for the Nation's older people. Lots of politics but no results.

So what I have been trying to do, in an effort to break the gridlock on that issue, is to come to the floor of the Senate and talk specifically about a bipartisan piece of legislation, the Snowe-Wyden bill, which has received what amounts to a majority of Senators' support at this point because they have already voted for the funding plan that we envisage, and to talk about how the Senate could come forward with real relief for the Nation's older people and do it in a bipartisan way.

As part of the effort to break the gridlock, as this poster next to me indicates, I hope seniors will send to each of us copies of their prescription drug bills. As a result of seniors and their families being involved in this way, this will help to bring about a bipartisan effort in the Senate and actually win passage of the legislation and bring about relief for older people.

The Snowe-Wyden legislation is called the SPICE bill, the Senior Prescription Insurance Coverage Equity Act. It ought to be a subject Members of Congress know something about because the Snowe-Wyden bill is based on the Federal Employees Health Benefits Plan. It is not some alien, one-size-fits-all Federal price control regime but something that offers a lot of choice and alternatives and uses the forces of the marketplace to deliver good health care to Members of Congress and their families.

Senator SNOWE and I have essentially used that model for the approach that we want to take in delivering prescription drug benefits for the Nation's older people. Fifty-four Members of the Senate, as part of the budget resolution, said they would vote for a specific way to fund the legislation. What I have tried to do is come to the floor on a number of occasions recently and as a result of folks reading this poster and sending copies of their prescription drug bills to us individually in the Senate in Washington, DC, I hope to be able to show the need in our country is enormous and to help catalyze bipartisan action.

Tonight, in addition to reading briefly from some of the bills I have received in recent days, I am going to talk a little bit about how it is not going to be possible to solve this prob-

lem unless the approach the Senate devises, in addition to being bipartisan, addresses the question of affordable insurance. For example, this Time magazine article that came out today—a very interesting and very thoughtful piece and I commend the author for most of what is written—talks about the role of the Internet. It says there are going to be a variety of proposals debated on the floor of the Senate. But with the Internet, people are going to just try to go out and buy prescription drugs and it goes into various details about how seniors can buy prescriptions on line.

I was director of the Gray Panthers at home in Oregon for about 7 years before I was elected to the Congress. Suffice it to say, I can assure you that some of the most frail and vulnerable older people in our country are not going to be able to buy their prescriptions on line the way Time magazine envisages. But perhaps even more important, if an older person is spending more than half of his or her Social Security check on prescription medicine—and I have given example after example in recent days of older people in our country, at home in our States. I am very pleased my friend and colleague, Senator SMITH, is in the chair because he has talked often about the need for bipartisan action on this issue to help seniors.

I think both of us would agree that if you have an older person who is spending more than half of their monthly income on prescription drugs—more than half of their Social Security checks, for example, and a lot of them get nothing but Social Security—those folks are going to need decent insurance coverage. They need to be in a position to get insurance coverage that will pick up a significant hunk of their prescription drug costs.

The Time magazine article tells you all about buying drugs over the Internet. But a lot of those senior citizens with an income of \$11,000 or \$12,000 a year—a modest income—when they are spending more than half of their income on prescription drugs are not going to find an answer on the Internet. They are going to need decent insurance coverage.

The Snowe-Wyden legislation envisages—is a detailed plan, it is a specific plan, a bipartisan plan, S. 1480—and lays out a system that involves marketplace choices and competitive forces in the private sector. Seniors will be in a position to have real clout when it comes to purchasing private insurance.

I think what is so sad about the situation with respect to our older people and prescription drugs is they get hit by a double whammy. Medicare doesn't cover prescription medicine. That is the way the program began back in the middle 1960s.

Second, a lot of the big buyers, health maintenance organizations, or a plan, can go out and negotiate a discount. And the senior who walks into a

pharmacy in our home State in Coos Bay or Beaverton or Pendleton or some part of our home State, ends up, in effect, paying a premium because the big buyers are able to negotiate discounts.

It is critical that seniors be in a position to get more affordable private insurance for their prescription medicine.

Under the Snowe-Wyden legislation for seniors on a modest income, other than a copayment or deductible, the legislation would pick up the entire part of that senior's insurance premium that covers prescription drugs.

That is something that will help that frail older person. It is not going to be the Internet that is going to be a panacea for that older person but legislation that helps that elderly widow or retired gentleman afford private insurance coverage is something that will be of help to them. That is what the Snowe-Wyden legislation is all about.

Tonight, I want to read from a few letters I have received in the last couple of days. And I will continue in the days ahead as the Senate wraps up—we hope it won't be too many more days ahead—to bring these kinds of cases to the floor of the Senate in an effort to try to see the Senate come together in a bipartisan way and provide some relief for older people.

One elderly couple, for example, wrote me about their medical situation, reporting that both had recently had heart surgery and one of them, in addition, had a stroke. They are taking blood-thinner drugs. They are taking important cholesterol-lowering drugs—Lipitor—and drugs for lowering blood pressure. They are breaking that particular medicine in half because they cannot afford their prescriptions, and then they are taking a drug which serves as an antidepressant.

This couple has a combined income of around \$1,500 a month. For the month of October alone, they spent \$888 on just the drugs I mentioned. Over half of their monthly income is going for prescription medicine.

I don't believe there is going to be relief for that elderly couple over the Internet. They are not going to be able to deal with that financial predicament where they spend over half of their monthly income on prescription medicine through some "www" opportunity on the Internet. They are going to need decent insurance coverage.

That is what the bipartisan Snowe-Wyden legislation tries to provide.

The second case I would like to touch on tonight comes from our home State. An elderly woman wrote me to report that in recent days she spent more than \$800 on her prescription medicine. She writes: "I'm on a fixed income. It's just getting harder and harder. Medicare help with prescriptions is a real need."

Finally, a third letter that I think sums up the kind of predicament that a lot of seniors in our State are facing comes from Beaverton where an elderly couple is trying to make ends meet es-

entially with just Social Security and a little bit of help from family.

When they are finished paying for their prescription drugs—this is an elderly couple in Beaverton, OR, in our home State—they have \$107.40 left over to live for the month.

Just think about that. It is not an isolated kind of case. Think about what it has to be like for an older couple to have \$107 left over for living after they have paid for their prescription medicine.

In the last sentence, this particular elderly woman just asked a question: "Can you help?"

I think that really sums it up.

I think the American people want to see if the Senate, instead of the usual tired routine of bickering and arguing and inaction, will produce a bipartisan plan to provide real relief.

What I find so striking, and why I am so proud to have teamed up with the Republican Senator from Maine on this bipartisan issue, is that when I am asked at home—I had a town meeting a couple of days ago on the Oregon coast. And the President often has the same kind of community session. I was asked about whether the Nation can afford to cover prescription medicine.

My answer is, if you are reading these bills, that America cannot afford not to cover prescription medicine because these drugs, as in the case I described initially, are drugs that keep people well. They help people deal with blood pressure. They help people deal with cholesterol. These are drugs to help keep people healthy. If you keep them healthy, they don't land in the hospital where they rack up those huge charges for Part A of Medicare. I cited repeatedly these anticoagulant medicines.

Evidence shows that for perhaps \$1,000 a year, seniors could get a comprehensive program of anticoagulant medicines that can help prevent strokes. We have seen again and again that if you can't get this kind of preventive medical help and you incur a stroke, it costs more than \$100,000 to pick up the cost.

That is really the choice, it seems to me, for the Senate. I think the Presiding Officer of the Senate and I have shown in our home States that it is possible on a whole host of issues, frankly, issues that a lot of people think are more divisive than even prescription medicine, to come together in a bipartisan way. I am hopeful the Senate can show that as well. We have seen one poll after another demonstrating that the American people want Congress to provide real relief.

In the last couple of weeks, I have seen several polls which indicate that helping frail and vulnerable seniors with prescription drug coverage through Medicare is one of the top two or three concerns for this country.

Instead of these articles that we are seeing coming out of Time magazine and New York Times and others saying we probably won't be finished, and

there won't be an effective answer, I would like to see the Senate show we can really follow through and produce for the older people of this country.

In the days left of this session—we all hope there won't be many more—until we get comprehensive bipartisan legislation that provides the elderly real relief, I intend to keep coming to the floor of the Senate to talk about this issue.

I hope folks who are listening tonight will send in copies of their prescription drug bills.

This poster says it all: "Send in your prescription drug bills." Send them to each of us in the Senate in Washington D.C.

I can tell you the bills that are coming into my office—they are really coming in now as a result of our taking the opportunity to discuss this issue on the floor of the Senate—say that this is an urgent need.

There are people who write who are conservative. There are people who write who are liberals, Democrats, Republicans, and independents, and all across the political spectrum who say: Get the job done. We are not interested in the traditional bickering and fighting about who gets credit, whose turf is being invaded, and which particular parochial kind of issue is being placed ahead of the national wellbeing.

This Nation's seniors and this Nation's families want us to come together and deal with this issue.

I intend to come back on the floor of the Senate again and again until the Senate does.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Alabama.

MORNING BUSINESS

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

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

TRIBUTE TO KJAM IN CELEBRATION OF ITS 40TH YEAR OF BROADCASTING

Mr. DASCHLE. Mr. President, I would like to take this opportunity to acknowledge the 40th year of broadcasting for radio station KJAM-FM, serving Madison, South Dakota and area communities. KJAM Radio first aired on December 3rd, 1959, and this December 3rd, the staff and friends of the radio station will be celebrating this remarkable feat in radio broadcasting with a well-deserved anniversary party.

Small town, locally owned radio stations like KJAM are one of rural America's unique cultural contributions to our nation. They mirror the strong values of the small towns they serve. KJAM has served Madison well, and I would like to commend the employees