

on a bipartisan basis. I intend to do all I can to see that this year's final appropriations bill, and future appropriations bills, maintain our commitment to the extraordinary work of the nation's community health centers.

The PRESIDING OFFICER. The Senator from Iowa is recognized.

Mr. HARKIN. Mr. President, this side has no objection to the amendment. In fact, we wholeheartedly support the amendment. I compliment the Senator from Missouri for his leadership, and I also compliment Senator HOLLINGS on this issue.

Community health centers are really the last sort of backstop for so many people in this country who don't have health insurance—44 million people in America don't have health insurance. Mainly, these are the ones who, right now, for their health needs really need the community health centers. We have about seven in our State of Iowa. We are opening another one this summer. About 66,000 people are served per year in the State of Iowa by our community health centers.

The really good thing—and the Senator from Missouri knows it—about community health centers is they are engaged in preventive health care, keeping people healthy in the first place, not just coming in when they are sick. They do a lot of outreach work with low-income people. They help with their diets, lifestyles, and with the medicines they need to keep them healthy. That is one of the great services they provide.

We increased the funding for community health centers over last year by \$100 million. This would add another \$50 million on to it. The need is actually even more than that, but as the Senator from Missouri knows, we have all these things we need to balance in the bill. This is a welcome addition to our community health centers.

Again, I compliment the Senator from Missouri for his leadership. We happily accept the amendment.

The PRESIDING OFFICER. Is there further debate on the amendment?

The question is on agreeing to the amendment.

The amendment (No. 3602) was agreed to.

Mr. BOND. Mr. President, I move to reconsider the vote.

Mr. HARKIN. I move to lay that motion on the table.

The motion to lay on the table was agreed to.

Mr. HARKIN. Mr. President, I will soon suggest the absence of a quorum. I want Senators to know that we are open for business and for taking amendments. Senator SPECTER and I are willing to sit here and take amendments this morning. If Senators have amendments and they are around, please come. As you can see, the floor is wide open. You won't have a waiting line and you can speak for as long as you want. This is the time to come and offer amendments on this bill.

With that, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. L. CHAFEE. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

Mr. L. CHAFEE. Mr. President, I ask unanimous consent to speak as in morning business.

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

THE MEDICARE OUTPATIENT DRUG ACT

Mr. L. CHAFEE. Mr. President, as many of you know, I joined Senators GRAHAM, ROBB, BRYAN, and others in introducing S. 2758, the Medicare Outpatient Drug Act of 2000 this past Tuesday.

While I strongly support S. 2758 and urge my colleagues to support it, I was very troubled by the process in this Chamber last night. We talk a good game about wanting to pass legislation on a bipartisan basis. In fact, at a Centrist Coalition meeting earlier this week, many Senators from both sides of the aisle—led by the minority leader—were talking about how the two parties should be working together to produce a prescription drug bill for our Nation's seniors.

However, the prescription drug amendment that we debated and voted on last night proved otherwise. It suggested that all the talk about bipartisanship is merely a facade. It was clear from the procedural wrangling that led to the vote on the Robb amendment that there is no intention by the Democratic leadership to work together to fashion a bipartisan compromise on a Medicare prescription drug bill.

In fact, it is my understanding that minority leader told others not to let me—one of the author's of this bill—know about this motion ahead of time. That doesn't sound very bipartisan to me.

Sadly, the amendment last night really undermines our ability to work toward a compromise to add a prescription drug benefit to Medicare. If we were really interested in producing a bipartisan bill that could be signed into law, we would be working together on a proposal rather than filing motions such as the one last night, which was destined to go down to partisan defeat.

I had high hopes when I stood with Senators GRAHAM, ROBB, BRYAN, and others on Tuesday and we announced the introduction of our Medicare Outpatient Drug Act. I had hopes that we would be able to work this bill through the legislative process, give this bill an airing at the Finance Committee, and work with Republicans and Democrats alike to fine-tune it into a product that the President could sign into law.

I think most of us here would agree it is time to update the Medicare pro-

gram to include a prescription drug benefit. I hear about this issue back in Rhode Island more than any other issue. The senior population in Rhode Island is the second largest in the Nation—second only to Florida. The seniors in my State constantly approach me about the high cost of their prescription drug bills. I expect most of us hear more about this issue from our constituents than any other.

However, filing procedural motions that are doomed to failure is not the way to achieve this important goal. I am afraid that some on the opposite side of the aisle aren't really interested in passing a Medicare prescription drug bill this year—they would rather that we do nothing and use this issue to try to defeat some of us in the fall.

Let's not hold the 39 million Medicare recipients in this country hostage to partisan politics.

I believe the legislation I introduced with Senators GRAHAM, ROBB, BRYAN, and others is one of the most responsible and comprehensive drug bills in Congress. And, more important, it would help relieve seniors of the growing burden of high prescription drug bills.

However, while I support this legislation and regretfully voted in support of the Robb amendment last night because I am committed to passing a good prescription drug bill to help our Nation's seniors, I do not believe the exercise last night was constructive. Sadly, it was quite the opposite.

I thank the Chair.

Mr. DORGAN. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

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

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

THE DEPARTMENTS OF LABOR, HEALTH, AND HUMAN SERVICES AND RELATED AGENCIES APPROPRIATIONS, 2001—Continued

The PRESIDING OFFICER. The Senator from North Dakota.

Mr. DORGAN. Mr. President, I am going to be offering an amendment to the pending appropriations bill that I want to talk about this morning.

I commend the chairman, Senator SPECTER, and the ranking member, Senator HARKIN, for their work to increase funding for the National Institutes of Health. As all of us know, Congress is on track toward doubling the funding for important health research and investigation through the NIH. That is critically important to this country.

I am one of those who has been supportive of doubling the funding for the National Institutes of Health. The NIH is trying to unlock the mystery of many of the diseases that ravage the