

our environmental technology, our health care industry, our agriculture and food processing industries.

Fifth and finally, in the interest of world peace, it is absolutely a mistake to isolate China, a nation with the world's largest standing army, an estimated 2.6 million member force.

America's democratic allies in Asia support China's entry into the World Trade Organization because they know that a constructive relationship with China and a stable Asia offers the best chance for reducing regional tensions along the Taiwan Strait and for avoiding a new arms race elsewhere in Asia and throughout the world.

As I work to pass PNTR for China, I am fully aware of the controversies surrounding this vote. Indeed, humanitarian and environmental issues remain important to me in our dealings with China, but I refuse to believe that if we walk away from China our national interest would be better served. In fact, I am positive to do so would greatly deter from our ability and our credibility to push reform in China and around the globe.

Mr. Speaker, as General Colin Powell has said, and I quote, from every standpoint, from a strategic standpoint, from the standpoint of our national interest, from the standpoint of our trading interest and our economic interest, it serves all of our purposes to grant China this status.

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

(Ms. KAPTUR addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

INTRODUCTION OF LIVE LONG AND PROSPER ACT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Illinois (Mrs. BIGGERT) is recognized for 5 minutes.

Mrs. BIGGERT. Mr. Speaker, May is Older Americans Month, a time for Americans to celebrate the many contributions our seniors have made to this country. It is also a time to reflect upon the changing look of our society and to advance policies that meet the needs of this and future generations of older Americans. By the year 2030, the number of older Americans is expected to be more than double, to 70 million, representing one-fifth of our total population. As the number of elderly Americans increases, the need for long-term home or institutional care will become even more pressing.

Are we now prepared to meet this future need? The sad fact is that neither the public nor the private sectors have adequately planned to meet this demand. In most cases, they are not aware that Medicaid requires divesting of assets and they do not understand that Medicare provides only minimal

long-term care coverage. As for private insurance, it currently finances only an estimated 7 percent of long-term care expenditures.

Given America's ticking demographic time bomb, it is imperative that Congress address this issue now. That is why I rise today to introduce the Live Long and Prosper Act, which directly addresses what we must do now to help meet the needs of older Americans of the future. This comprehensive legislation builds upon the long-term care financing provisions created by the Health Insurance Portability and Accountability Act of 1996.

To better prepare the public for long-term care expenses, first the bill provides for an above-the-line income tax deduction for the cost of long-term care insurance premiums for the taxpayer, his or her spouse and dependents. It also allows employers to provide long-term care insurance coverage as part of a cafeteria plan. Surprisingly, long-term care insurance currently is not allowed under these types of employer-employee arrangements.

Third, the bill would provide a personal exemption to the more than 7 million Americans who provide long-term custodial care for a relative in their home. Together, these provisions represent a market-based solution to the ever-growing demand for long-term care services and financing. But financial incentives alone will not advance the public's understanding of the need to plan for long-term care nor will they spur public debate on what more must be done.

The Live Long and Prosper Act calls for a biannual national White House summit on long-term care. The summit will bring together experts in the fields of long-term care insurance, retirement savings, care givers and others and will be cohosted by the President and congressional leaders. Its goal is to design and develop recommendations for additional research, reforms in public policy and improvements required in the field of long-term care insurance.

The bill also directs the Department of Labor to create and maintain an outreach program, to include public service announcements, forums, educational materials, and long-term care Internet sites. The Department of Health and Human Services will conduct studies focusing on the future demand for long-term care services and public and private options to finance them.

Finally, the bill contains several other provisions designed to improve awareness of and to strengthen the process for long-term care information delivery.

Mr. Speaker, in closing, the Center for Long-term Care and Financing describes long-term care as the sleeping giant of all U.S. social problems. Demographic changes, quality of care concerns, the rising cost of nursing home care and limited public finances all cry out for action in this area and

call on this body to make long-term care a top policy priority.

I believe that the Live Long and Prosper Act is a comprehensive first step in what should be a bipartisan effort to address this vital issue. I urge my colleagues to cosponsor the bill and join me in this effort.

REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H.R. 4475, DEPARTMENT OF TRANSPORTATION AND RELATED AGENCIES APPROPRIATIONS ACT, 2001

Mr. REYNOLDS, from the Committee on Rules, submitted a privileged report (Rept. No. 106-626) on the resolution (H. Res. 505) providing for consideration of the bill (H.R. 4475) making appropriations for the Department of Transportation and related agencies for the fiscal year ending September 30, 2001, and for other purposes, which was referred to the House Calendar and ordered to be printed.

REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H.R. 4392, INTELLIGENCE AUTHORIZATION ACT FOR FISCAL YEAR 2001

Mr. REYNOLDS, from the Committee on Rules, submitted a privileged report (Rept. No. 106-627) on the resolution (H. Res. 506) providing for consideration of the bill (H.R. 4392) to authorize appropriations for fiscal year 2001 for intelligence and intelligence-related activities of the United States Government, the Community Management Account, and the Central Intelligence Agency Retirement and Disability System, and for other purposes, which was referred to the House Calendar and ordered to be printed.

IN SUPPORT OF TOUGH GUN LEGISLATION AFTER THE MILLION MOMS MARCH

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

Mr. RUSH. Mr. Speaker, I rise today a week after the Million Mom March to remind the Congress that even though the march is over, the cause is not. On the eve of the march, some argued that we were being rabble-rousers and troublemakers. They argued then and they still argue that we are too emotional in pulling for tough gun control legislation, common sense gun control legislation. The National Rifle Association argues that we need, and I quote, gun education and not gun legislation, end of quote.

Well, as we all know, you cannot teach a child not to be a child. We all know that children often lash out in anger, without thinking, and they later wish that the things done and said can be taken back. But once a trigger is

pulled, that bullet cannot be brought back. And those who, approximately 1 year after Columbine, still think that it is not their problem, I am here to tell you that once a bullet leaves the barrel of a gun, it does not care whether the child pulling it is rich, poor, black or white, they do not care where the child firing that gun is from, it does not care what sort of car that child's parents drive. A bullet does not care whether that child lives inside or outside of the Beltway, and a bullet does not care whether that child's mother or father is a bus driver, a lawyer or a Member of Congress.

So to the millions of mothers from all across this country who either attended or supported the Million Mom March, continue to raise your voices in support of tough common sense gun laws.

And to our critics who say that we are too emotional, I say yes, we are emotional over the gun control issue. The emotion we feel is sorrow over the senseless killing of our youth. And the emotion that I feel is frustration that we have not passed common sense gun legislation. The frustration that I feel is that we have not closed the gun show loophole, frustration that we have not required child safety locks for handguns, frustration that we have not banned the importation of large capacity ammunition magazines, and frustration that we have not encouraged the development of smart gun technology.

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In short, Mr. Speaker, I feel frustration and shame that we as a body have not heard the pleas of millions of mothers and fathers who want us to help stop the destruction of America's families.

PRESCRIPTION DRUG COVERAGE FOR SENIORS NEEDED NOW

The SPEAKER pro tempore (Mr. WALDEN of Oregon). Under a previous order of the House, the gentlewoman from Michigan (Ms. STABENOW) is recognized for 5 minutes.

Ms. STABENOW. Mr. Speaker, I rise this evening again to talk about a critical issue facing all families in the United States, and particularly seniors, and that is the high cost of prescription drugs and the lack of coverage by Medicare. This is a critical issue that faces Michigan families. I hear from seniors every day about their struggles, choosing between the cost of food, being able to pay the utility bill, being able to get their medications.

Last summer I set up a hot line in Michigan asking those who had stories to tell to call and share those with me, and also for individuals to write me letters and send me copies of their prescription drug bills. I have received hundreds of those from across the state. I have begun sharing those each week on the floor of this House.

It is critical that we pass prescription drug coverage under Medicare, to modernize Medicare to cover the way health care is provided today, and do it as soon as possible, and I intend to be here and share stories every week until that happens.

We know that there are 12 percent of the population that are seniors, but seniors purchase 33 percent of all prescription drugs. Over one-third of the 39 million Medicare beneficiaries, 15.5 million people, have no prescription drug coverage at all, and millions have insufficient coverage or must pay expensive copays. So you are talking about individuals, many of whom are living on Social Security, with a small pension, who are now finding themselves in a situation where they are needing to use medications, and the costs are going up and up. What do they do? Too many of them decide, do I buy my groceries today, or can I stretch it just a little bit longer and be able to afford my medications?

On top of that, according to the Bureau of Labor Statistics, drug prices rose by 306 percent between 1981 and 1999, while the consumer price index rose 99 percent during the same period, so we are seeing drug prices going up three times as fast as the consumer price index or other kinds of products.

The price for prescription drugs is expected to be 12 to 15 percent higher than in 1999. Not only are costs rising, but the volume of prescription drug use is also increasing. The number of prescriptions is expected to increase from 3 billion today to 4 billion prescriptions by 2004.

So what we are seeing is, as more and more people are using prescription drugs, it is wonderful that we have the new discoveries and the fact we have that available, and the fact that people can live longer and healthier lives is wonderful, but we are seeing a product going up three times as fast as the consumer price index in the pricing structure, and we see too many seniors that do not have any help at all for covering the costs, even though seniors are the ones that use the most prescription drugs. It makes no sense.

We also see that prescription drug coverage now is very much a part of the way health care is provided today. When Medicare was set up in 1965, it was in-patient care, operations and prescription drugs in the hospital. Now we see most of the care being done on an outpatient basis, being done through home care or prescription drugs that allow people to avoid having surgery and to be able to live at home with their family.

This is a good thing, but only if we make sure that Medicare is modernized to cover the new way health care is provided. It is time for that to happen. It is past time for that to happen.

I would like to share now a letter from Louise Jarnac of Cheboygan, Michigan. I am very grateful that she wrote in to me and shared her comments and thoughts.

Dear Congresswoman STABENOW, I am sending three of my prescription drug bills and one of my brother's. I sure hope you can get some help for the elderly. It seems everything is more important than our health. I am 80 years old and my brother is 78 years old. These prescription drug prices take a big chunk out of our Social Security, since that is our full income. I am a widow and live alone, therefore, I have all the expenses all by myself. The last time I got my prescriptions it was \$99.99 for Prevacid, this time it is \$130.49. Most of the time I can't afford it and I go without until I can get it again. I think Social Security should be used for our security and not for other things.

Thank you,

LOUISE JARNAC.

Mr. Speaker, Prevacid, like another commonly known drug—Prilosec, is prescribed to inhibit gastric secretions. It is used to treat heartburn or other symptoms associated with GERD (Gastroesophageal reflux disease), ulcers, or other acid related disorders.

Without treating these symptoms, Mrs. Jarnac's condition could develop into cancer.

Furthermore, these diseases are extremely painful, and Mrs. Jarnac is unable to afford the medication on a regular basis to control the pain.

Mr. Speaker, it is time we do something about this, and make sure our seniors are not put in this position.

COMMEMORATING THE 20TH ANNI- VERSARY OF THE ERUPTION OF MOUNT ST. HELENS

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

Mr. BAIRD. Mr. Speaker, I rise today to commemorate one of the most significant geological events in the history of our country and in my home state, the eruption of Mount St. Helens.

Twenty years ago today, on May 18, 1980, the peaceful northwest sky was rocked by an explosion comparable to that of 500 atomic bombs. The blast transformed more than 200 square miles of Pacific Northwest forest into a gray, lifeless landscape, and it triggered the largest known landslide in history, completely burying Spirit Lake and the Toutle River. Fifty-seven men and women lost their lives, hundreds of homes and cabins were destroyed, and our region incurred more than \$3 billion in damage.

If you ask folks today in the Pacific Northwest for a list of the most memorable events in their lifetime, there is no question that the eruption of Mount St. Helens would rank right at the top of many lists. For that reason, I am deeply honored to come before this body today to pass on this message and to participate in today's events commemorating the 20th anniversary of the eruption of what is now a national treasure.

Mount St. Helens has always played a significant role in our region. Before the eruption, many families spent their summers at the recreation areas surrounding the mountain, where they would camp, hike and fish. In the year