

Mrs. Smith is obviously frustrated that in her golden years she has enormous anxiety because of the high cost of the prescriptions. Under one version of the prescription drug bill, the version that I am a cosponsor of with my colleague from Florida, BOB GRAHAM, Mrs. Smith would only have to pay \$25 a month premium for a Medicare prescription drug benefit. If she chose to have a brand name prescription, she would pay a copay of \$40, but if she wanted a generic prescription, Ultram—that drug that I mentioned she takes at 150 bucks a month—it does have a generic alternative so she would only have to pay \$10 for the prescription for the generic. That coverage for Mrs. Smith would begin upon enrollment, and Mrs. Smith would not be subject to any initial deductible, as is the case in the legislation that passed in the House.

It is another personal example, a real-life example, of why we ought to have a prescription drug benefit enacted to modernize Medicare.

The PRESIDING OFFICER. The Senator's time has expired.

The Senator from Minnesota.

Mr. WELLSTONE. I thank the minority leader for his courtesy. I ask unanimous consent that I be allowed to follow the minority leader.

The PRESIDING OFFICER. Is there objection?

Mr. GREGG. Reserving the right to object, is the Senator going to be debating the drug issue?

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

Mr. GREGG. Yes, but I believe the Senator from Minnesota wishes to proceed after the minority leader.

Mr. WELLSTONE. That is correct.

GREATER ACCESS TO AFFORDABLE PHARMACEUTICALS ACT OF 2001—MOTION TO PROCEED

The PRESIDING OFFICER. Under the previous order, the Senate will now resume consideration of the motion to proceed to S. 812, which the clerk will report.

Mr. WELLSTONE. I say to my colleague, I would like to speak for about 10 minutes.

The PRESIDING OFFICER. If the Senator will withhold.

The assistant legislative clerk read as follows:

A bill (S. 812) to amend the Federal Food, Drug and Cosmetic Act to provide greater access to affordable pharmaceuticals.

Mr. LOTT. Madam President, what is the parliamentary situation at this time?

The PRESIDING OFFICER. The Senate is on the motion to proceed to S. 812.

Mr. LOTT. Madam President, I ask unanimous consent that I be allowed to

speak under my leader time, probably for 8 or 10 minutes, on the issue that is related to this motion, and others may want to add to it.

Mr. WELLSTONE. Madam President, with the indulgence of the Senator from Massachusetts, I wonder if I could have 10 minutes after the minority so I could go back to a markup?

The PRESIDING OFFICER. The Republican leader has the right to speak at this time.

Mr. LOTT. Madam President, I know others are going to want to speak on the pending motion.

Mr. KENNEDY. Will the Senator yield so I can respond?

Mr. LOTT. I yield to Senator KENNEDY if he wants to make some clarification.

Mr. KENNEDY. We were going to get started. We all are under pressure, but I would be glad to have the Senator from Minnesota speak.

Mr. WELLSTONE. I thank my colleague.

Mr. KENNEDY. Then we will move on the regular order with the presentation of the legislation.

The PRESIDING OFFICER. The Republican leader.

Mr. LOTT. Madam President, I understand there was discussion last night, and in the HELP Committee, about how to proceed on the substantive issue, and there was some understanding that some language would be worked out. I do not know the details of it, but I am hoping that whatever was agreed to in committee can be resolved in a satisfactory way.

Without getting into how it was reported out of the committee and how we will proceed once that is clarified, I want to talk about the overall situation that causes me major concern. The Finance Committee has been meeting off and on for probably 5 years trying to decide the best way to proceed on prescription drugs. We have had repeated bipartisan meetings of the full committee, even this year. I have met, I think five times for as much as a couple of hours talking about the substance but it has always been a general discussion with no markup.

Last week, even though we did two minor bills, there was no markup on prescription drugs in the Finance Committee. This week we were scheduled to take up another bill, but the meeting at 10 was cancelled and now the meeting at 2 was cancelled because I assume the chairman realized that the so-called tripartisan bill was going to be offered in the Finance Committee to whatever bill might have been brought up.

This is legislation that has been developed by Senator BREAUX, Senator SNOWE, Senator GRASSLEY, Senator JEFFORDS, and Senator HATCH. It is truly a bipartisan bill and tripartisan because it does have the support of Senator JEFFORDS.

There is a determination not to allow the Finance Committee to act on this

bill. The Finance Committee, for years, has been known as one of the most effective and bipartisan committees, whether it is welfare reform or trade legislation, Medicare, whatever it may be, but in this instance the Finance Committee is basically being told if they cannot get the votes for the so-called Kennedy-Graham-Miller proposal, they cannot act.

I think we are beginning to debate once again in the wrong way on the Senate floor on a very important issue. The majority leader has twice before tried to ignore the Finance Committee and basically come straight to the floor. We saw what has happened, how long it takes for us to work through a bill that has not gone through a committee markup. That is why I continue to urge that the homeland security issue go to a regular markup in the Governmental Affairs Committee, and I am being told that is what is going to happen, because so many of the problems can be resolved at the committee level. If we bring these important issues to the Senate floor without them having been worked through committee, it is a prescription for a real problem, long debate and in this case likely no result.

Last fall the majority leader and the Finance Committee chairman rammed a partisan stimulus bill through the Finance Committee. We told them at that time that process would fail because it set up a situation where we had to get 60 votes and we more than likely could not do that.

Two months ago, the majority leader used a flawed process to bring trade legislation to the Senate floor, and we saw as a result of that it took us, I think, about a month to get it done, even though it was a bill that had bipartisan support on both sides. Four bills were brought together, the trade promotion authority, the Andean trade provisions, the GSP provisions, as well as trade adjustment assistance. It was very difficult to get that work done.

But what we have today worries me even more. We are calling up the drug pricing and patents bill out of the HELP Committee. Then I understand at some point, a prescription drug bill, or bills, will be offered. No matter what is offered, it will have to get 60 votes.

Prescription drugs would have to get 60 votes in the Senate. Why is that? One, we do not have a budget resolution, so we are going under the existing law which says a prescription drug bill cannot be brought up that exceeds, I believe it is \$300 billion. If it does, it takes 60 votes. Also, a bill that is brought to the floor without going to the Finance Committee requires 60 votes.

So we have two things that are happening with no budget resolution: we have a limit with the amount. If a bill exceeds \$300 billion, it takes 60 votes. If it has not come through the Finance Committee, it will have to have 60 votes.

I do not know what the scoring is on the so-called Kennedy-Graham bill. As