

shoulder. This is all current news. Again, there is a sense of urgency for us as a government to act and demonstrate our focus on this issue.

Meanwhile, it is reported that the military regime has raided the offices of Suu Kyi's political party, the National League for Democracy, tearing down party flags and padlocking doors all across the country. Reportedly, military intelligence agents are posted outside the offices, preventing any entry at the offices in Rangoon and Mandalay. The regime has placed numerous democracy movement leaders under house arrest, surrounding their homes and severing telephone lines. I mention this again to explain why we are attempting to bring this legislation directly to the floor.

I commend my colleagues for their efforts on behalf of the Burmese people. As the strongest and most free nation in the world, I do believe we have a profound duty to support that struggle for freedom. Again, I am hopeful that we can address it this morning and over the course of the day.

Mr. REID. Will the majority leader yield for a unanimous consent request?

Mr. FRIST. Yes.

Mr. REID. Mr. President, I ask unanimous consent that I be added as a cosponsor of this resolution on Burma with my friend from Kentucky.

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

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#### MEDICARE

Mr. FRIST. Mr. President, let me take a few minutes to comment on what is taking place today in the release of some initial working documents on Medicare modernization by members of the Finance Committee.

Prefacing that, I will say that we have a lot of work to do over the next 3 weeks in order to address an issue that is important to every single American, and that is giving our seniors and individuals with disabilities health care security.

Today there are about 35 million seniors on Medicare and about 5 million individuals with disabilities. We are also speaking to and acting for those soon-to-be seniors in future generations.

I commend my colleagues who have done yeoman's work—Senator BAUCUS and Senator GRASSLEY—and for their commitment to advancing Medicare modernization, strengthening and moving Medicare down the field so we can deliver that health care security to our seniors. The goal is twofold: to strengthen and improve Medicare and, at the same time, provide meaningful prescription drug benefits to seniors and Americans with disabilities.

I recognize it is a huge challenge to address this very complex program but it is one that I know this body is up to, one we have been working very hard on for years, and it is one that I believe we can accomplish in the next 3 weeks in the Senate.

There were a couple of concerns raised in the last several days that I briefly want to mention. First, where are we and why act now? Why can we not wait and put this off? It is driven very much by the demographics of the aging population, where, over the next 30 years, we will have a doubling in the number of seniors; but in terms of workers actually paying into the program itself, that will be falling off continually over time. Thus, we need to take this opportunity while we are adding this prescription drug benefit to modernize the program so seniors and individuals with disabilities will continue to get good care and hopefully improve that care in this environment where we have to address the issues of solvency and sustainability.

The Finance Committee has held over 30 hearings on Medicare over the past 4 years, at least 7 devoted to prescription drug coverage alone. Last Friday, now 4 days ago, the Finance Committee had another hearing to focus very specifically on the proposal put forth by Chairman GRASSLEY and Senator BAUCUS. That was the third committee hearing this year on Medicare.

On Thursday of this week, the day after tomorrow, the Finance Committee will meet in executive session to amend and vote on the Grassley-Baucus proposal. And then the following week, on that Monday, that bill will be brought to the floor of the Senate and will be debated and likely amended in some shape or form over a 2-week period.

We are approaching this issue in a systematic way, in an orderly way, in a way that is reasonable, and in a way that is thoughtful.

Some concerns people are talking about are that Medicare denies some seniors coverage. Let me be clear, we will make sure this coverage is available to every senior everywhere. We will specifically be working to ensure access in rural areas. We will be creating public-private partnerships that will offer choice—again, it is voluntary—but will be offering choice for all seniors in every corner of America.

Secondly, many seniors want the certainty of knowing nothing is going to be taken away from them. Seniors might ask: Do I have to give up what I have now? Are you forcing me into some new system? The answer is no. This is a voluntary program. All of us will be able to look every senior in their eyes and say: You can keep exactly what you have now if that is what you want, if that is what you desire. We will be able for the first time to say there are options that include choices you may not have today in Medicare, such as preventive care, such as chronic disease management.

The fact is the current program is fragmented. It does not provide adequate coverage. I know as a physician and I strongly believe as a policymaker it does not adequately cover preventive care. It does not cover disease manage-

ment or chronic disease management. As we all know, it does not cover outpatient prescription drugs. I do believe good health depends on giving seniors good options, the opportunity to choose the plan that best meets their needs.

I have also heard about Medicare reform proposals relating to HMOs, forcing people into HMOs. This plan does not do that. Simply, this plan does not force anybody into an HMO. It is a voluntary proposal. Some HMOs have performed very well. But the better comparison, instead of looking at HMOs, is the Federal Employee Health Benefits Program. Seniors will have the option to get a plan similar to what we have as Senators, Members of the House, and other Federal employees have. I should add, this program has a longer history than Medicare. We have learned how to improve it, modify it, and make it a better program over the last 40 years.

I close by saying I believe seniors deserve the options that Federal employees have. We know Federal employees are very satisfied with the quality of care they receive. Seniors deserve this opportunity to choose. They deserve the opportunity to obtain care that is more flexible, that is less bureaucratic, and that has less paperwork.

Seniors deserve care that keeps them healthy by incorporating those preventive measures. Seniors deserve care that protects them from catastrophic out-of-pocket expenses. America's seniors should have the ability to see the doctor they choose, even if that doctor is outside the network. America's seniors deserve a system that focuses on their needs to keep them healthy and not just to respond to acute episodic illness.

Since 1965, Medicare has admirably served a generation of America's seniors. We owe tomorrow's seniors no less. That will take a response in this body to give seniors access to the care they truly deserve. I look forward to working with my colleagues to strengthen and improve Medicare over the next few weeks.

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#### RECOGNITION OF THE ACTING MINORITY LEADER

The PRESIDENT pro tempore. The Senator from Nevada is recognized.

Mr. REID. Mr. President, we have conferred with floor staff. Senator MIKULSKI is in the Chamber, and she has a statement regarding prescription drugs. I ask unanimous consent that she have an opportunity to respond to the statement of the Senator from Tennessee and that she be given 7½ minutes to do that. Following that, it is my understanding the leader is looking to vote around 11 o'clock on the Dorgan amendment and that the time after the statement by Senator MIKULSKI will basically be evenly divided. I am not asking unanimous consent. The time will basically be divided between the Senator from North Dakota and whoever opposes his amendment.