

the commitment we have to our neighbors, our communities, and our Nation. Across the country, we can make the courage and responsibility displayed by the heroes at Ground Zero endure. In this way, we will triumph over evil and devastation, and we can try to make sense out of all that we have suffered.

When I first visited the cratered field in Shanksville, and when I returned to that crash site this week, I was struck by the importance of our continued hope. I was also inspired by the strength of those Flight 93 family members, now carrying the torches of their loved ones who gave their last measure of bravery for our nation. I have resolved to make every day a memorial to September 11th by working to keep the bigger picture in mind and a better world in sight. I hope you will find your own way to keep and exhibit this renewed American spirit in your lives. May God bless you and our great country.

USDA TESTING FOR CHRONIC WASTING DISEASE

Mr. FEINGOLD. Mr. President, I rise today to urge Secretary Veneman to provide more details on the United States Department of Agriculture's recent announcement regarding chronic wasting disease, CWD, testing, and urge her to provide hunters with more testing opportunities for CWD.

On Tuesday of this week, USDA announced an increase of up to 200,000 more Government-approved tests for chronic wasting disease this deer hunting season. Prior to the announcement, USDA officials have said labs certified to test for the disease would only accommodate the needs of the Wisconsin Department of Natural Resources, DNR, and not provide testing opportunities for hunters.

I appreciate USDA's recent decision to allow Government laboratories certified by the U.S. Department of Agriculture, USDA, to offer an additional 200,000 chronic wasting disease or CWD tests to Wisconsin hunters. As I noted in my September 24, 2002, letter to Secretary Veneman, given hunters' concerns in my state, it is appropriate for USDA to offer any excess test processing capacity in the Government system to Wisconsin on a priority basis. This assistance from USDA allows Wisconsin to be able to offer testing to our hunters on request, and gives Wisconsin hunters access to the "gold standard" immunohistochemistry, IHC, test.

While I commend USDA for these efforts, I will be closely monitoring the implementation of the new testing program in the State, and in particular the Department's stated commitment of providing 200,000 more tests to Wisconsin hunters. It is important to note that nine of the Government laboratories that will be processing Wisconsin tests this fall have not previously conducted such tests. Given the time it took to get the Wisconsin State

Veterinary Laboratory in a position to be able to process CWD tests, USDA must be vigilant in ensuring that these Government labs are ready in the next month. In addition, I also urge USDA to assist the State of Wisconsin in ensuring that the labs that will process Wisconsin's CWD tests provide accurate and prompt information regarding the test processing costs.

I commend the USDA for finally taking steps to provide more testing opportunities through Government labs. But the USDA must do more, including continuing efforts to certify private labs, like the Marshfield Clinic, and to approve rapid test kits for this fall's hunt. I want to ensure that USDA meets, and I hope exceeds, its commitment of providing 200,000 additional tests to Wisconsin's hunters for this year's hunt.

To that end, I hope that the administration will endorse my legislation, S. 3090, the Comprehensive Wildlife Disease Testing Acceleration Act of 2002. This legislation would provide hunters with more testing opportunities for chronic wasting disease by requiring USDA to develop appropriate testing protocols and to certify private labs to conduct CWD tests.

My legislation will remove bureaucratic roadblocks by requiring the USDA to expand the number of labs that can provide CWD testing to hunters. Until I am satisfied that USDA has done everything possible to bring this disease under control, I will continue to press this legislation forward.

Our 2001 deer hunt involved more than 400,000 deer. With only 250,000 tests total for Wisconsin, some hunters may still lack the ability to have their deer tested. USDA must continue efforts to provide more testing opportunities for hunters. By certifying private labs like the Marshfield Clinic and approving a rapid test this fall, USDA can ensure that Wisconsin hunters have the information they deserve.

Action on this problem is urgently needed. I am glad that the Secretary has finally begun to take a step in the right direction, and I urge her to undertake all the necessary measures to bring these diseases under control.

PRESCRIPTION DRUGS

Mr. SMITH of Oregon. Mr. President, we have been debating important issues in the Senate these past few weeks, Homeland Security, and the possibility of war in Iraq, and other issues that have resulted from 9/11. While these important debates take place here on the Senate floor and in the kitchens and living rooms across America, there is still another long-standing issue that affects the health and livelihood of our senior citizens, that of prescription drug coverage for our nation's seniors.

As the end of the legislative year looms closer, I am angry to say that we are no closer to having a prescription drug program for our seniors. When the

Senate debated the addition of a prescription drug benefit to the Medicare program in July, there was clear agreement that such a benefit was badly needed and that time was of the essence for delivering such a benefit to America's seniors. Over several weeks of debate on prescription drugs, progress was made toward agreement, but unfortunately, the discussion was cut short by the August recess.

I believe this issue is so important, and so urgent for seniors, that I stand before you today to say that this Congress should stay in session until we are able to pass a prescription drug benefit for our seniors. It is not too late to pass a prescription drug bill this year.

With the help of new treatments and therapies, it is now possible for seniors to live longer and better than at any other time in history. Every day that Medicare excludes prescription drugs from coverage is a day that countless seniors will not have access to medications that could improve their health—or save their lives. In addition, every year that passes without adding a prescription drug benefit to Medicare, the cost of adding such a benefit increases substantially.

In recent weeks, there has been a lot of talk about adjusting Medicare payments to reimburse health care providers fairly for treating seniors. My home state of Oregon ranks 46th in the country for Medicare spending per beneficiary. These incredibly low Medicare reimbursement rates have made it impossible for some health care providers to continue serving Medicare beneficiaries. This means that many seniors in Oregon are now having difficulty even finding a health care provider to see them. Therefore, I am very supportive of the Medicare provider payment components of the package proposed by Senators BAUCUS and GRASSLEY, and I urge passage of this legislation before this Congress adjourns. However, I also believe there must be renewed interest in reaching a consensus on how to add an affordable, universal, voluntary prescription drug benefit to Medicare this year.

I know we have a lot of work to do this year. Urgent work, important work. But I can think of no more important issue than ensuring that our parents, our neighbors, our friends, our Nation's seniors, never have to lose their homes when they lose their health. We can pass a prescription drug bill this year, and we must. I urge my colleagues to stay in Washington until we are able to pass a prescription drug benefit for our Nation's seniors, and have it signed into law.

FDA APPROVAL OF BUPRENORPHINE/NALOXONE

Mr. LEVIN. Mr. President, last week, the fight against heroin addiction took a major leap forward after a decade of struggle. On October 8, 2002, the Food